



To: **Members of the Cabinet**

Notice of a Meeting of the Cabinet

Tuesday, 24 February 2015 at 2.00 pm

Rooms 1&2 - County Hall, New Road, Oxford OX1 1ND

Joanna Simons

Joanna Simons
Chief Executive

February 2015

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Membership

Councillors

Ian Hudspeth	<i>Leader of the Council</i>
Rodney Rose	<i>Deputy Leader of the Council</i>
Mrs Judith Heathcoat	<i>Cabinet Member for Adult Social Care</i>
Nick Carter	<i>Cabinet Member for Business & Customer Services</i>
Melinda Tilley	<i>Cabinet Member for Children, Education & Families</i>
Lorraine Lindsay-Gale	<i>Cabinet Member for Cultural & Community Services</i>
David Nimmo Smith	<i>Cabinet Member for Environment</i>
Lawrie Stratford	<i>Cabinet Member for Finance</i>
Hilary Hibbert-Biles	<i>Cabinet Member for Public Health & the Voluntary Sector</i>

The Agenda is attached. Decisions taken at the meeting will become effective at the end of the working day on unless called in by that date for review by the appropriate Scrutiny Committee. Copies of this Notice, Agenda and supporting papers are circulated to all Members of the County Council.

Date of next meeting: 17 March 2015

Declarations of Interest

The duty to declare.....

Under the Localism Act 2011 it is a criminal offence to

- (a) fail to register a disclosable pecuniary interest within 28 days of election or co-option (or re-election or re-appointment), or
- (b) provide false or misleading information on registration, or
- (c) participate in discussion or voting in a meeting on a matter in which the member or co-opted member has a disclosable pecuniary interest.

Whose Interests must be included?

The Act provides that the interests which must be notified are those of a member or co-opted member of the authority, or

- those of a spouse or civil partner of the member or co-opted member;
- those of a person with whom the member or co-opted member is living as husband/wife
- those of a person with whom the member or co-opted member is living as if they were civil partners.

(in each case where the member or co-opted member is aware that the other person has the interest).

What if I remember that I have a Disclosable Pecuniary Interest during the Meeting?.

The Code requires that, at a meeting, where a member or co-opted member has a disclosable interest (of which they are aware) in any matter being considered, they disclose that interest to the meeting. The Council will continue to include an appropriate item on agendas for all meetings, to facilitate this.

Although not explicitly required by the legislation or by the code, it is recommended that in the interests of transparency and for the benefit of all in attendance at the meeting (including members of the public) the nature as well as the existence of the interest is disclosed.

A member or co-opted member who has disclosed a pecuniary interest at a meeting must not participate (or participate further) in any discussion of the matter; and must not participate in any vote or further vote taken; and must withdraw from the room.

Members are asked to continue to pay regard to the following provisions in the code that *“You must serve only the public interest and must never improperly confer an advantage or disadvantage on any person including yourself”* or *“You must not place yourself in situations where your honesty and integrity may be questioned.....”*.

Please seek advice from the Monitoring Officer prior to the meeting should you have any doubt about your approach.

List of Disclosable Pecuniary Interests:

Employment (includes *“any employment, office, trade, profession or vocation carried on for profit or gain”*.), **Sponsorship, Contracts, Land, Licences, Corporate Tenancies, Securities.**

For a full list of Disclosable Pecuniary Interests and further Guidance on this matter please see the Guide to the New Code of Conduct and Register of Interests at Members’ conduct guidelines. <http://intranet.oxfordshire.gov.uk/wps/wcm/connect/occ/Insite/Elected+members/> or contact Glenn Watson on (01865) 815270 or glenn.watson@oxfordshire.gov.uk for a hard copy of the document.

If you have any special requirements (such as a large print version of these papers or special access facilities) please contact the officer named on the front page, but please give as much notice as possible before the meeting.

AGENDA

1. Apologies for Absence

2. Declarations of Interest

- guidance note opposite

3. Minutes

To approve the minutes of the meeting held on 27 January 2015 (**CA3** to be circulated separately) and to receive information arising from them.

4. Questions from County Councillors

Any county councillor may, by giving notice to the Proper Officer by 9 am two working days before the meeting, ask a question on any matter in respect of the Cabinet's delegated powers.

The number of questions which may be asked by any councillor at any one meeting is limited to two (or one question with notice and a supplementary question at the meeting) and the time for questions will be limited to 30 minutes in total. As with questions at Council, any questions which remain unanswered at the end of this item will receive a written response.

Questions submitted prior to the agenda being despatched are shown below and will be the subject of a response from the appropriate Cabinet Member or such other councillor or officer as is determined by the Cabinet Member, and shall not be the subject of further debate at this meeting. Questions received after the despatch of the agenda, but before the deadline, will be shown on the Schedule of Addenda circulated at the meeting, together with any written response which is available at that time.

5. Petitions and Public Address

6. 2014/15 Financial Monitoring & Business Strategy Delivery Report - December 2014 (Pages 1 - 44)

Cabinet Member: Finance

Forward Plan Ref: 2014/150

Contact: Kathy Wilcox, Chief Accountant Tel: (01865) 323981

Report by Chief Finance Officer (**CA6**).

This report focuses on the delivery of the Directorate Business Strategies that were

agreed as part of the Service and Resource Planning Process for 2014/15 – 2017/18. Parts 1 and 2 include projections for revenue, reserves and balances as at the end of December 2014. Capital Programme monitoring is included at Part 3 and changes to Fees and Charges are set out in Part 4.

The Cabinet is RECOMMENDED to:

- (a) Note the report and annexes including the Treasury Management lending list at Annex 4 and changes set out in paragraphs 66 - 67;**
- (b) Approve the virements request set out in Annex 2a;**
- (c) Approve the write off of client income totalling £31,638 relating to unpaid client contributions for residential care as set out in paragraph 64 and the write of £50,002 relating to capital works at a school as set out in paragraph 65;**
- (d) Approve the creation of the Oxford Western Conveyance Reserve and the initial contribution of £0.350m as set out in paragraph 76;**
- (e) Approve the fees for hiring the Riverside Centre as set out in paragraph 93 and Annex 7;**
- (f) Approve the release of the revised capital budgets of £4.100m Cuttleslowe roundabout and £4.824m Wolvercote roundabout to proceed to detailed design and procurement as set out in paragraph 89;**
- (g) Approve the entry of the A44 – A40 Loop Farm Link Road into the capital programme and the release of a £0.676m project development budget as set out in paragraph 90;**
- (h) Approve the changes to the Capital Programme set out in Annex 8c.**

7. Adult Social Care Policy Framework (Pages 45 - 136)

Cabinet Member: Adult Social Care

Forward Plan Ref: 2014/157

Contact: Ben Threadgold, Policy & Performance Service Manager Tel: (01865) 328219

Report by Director of Adult Services (**CA7**).

The purpose of this report is to seek agreement on the new Adult Social Care Policy framework, to highlight its impact and to request decisions on some key areas where the framework either proposes change to current practice or confirms practice not previously included in formal policy.

The policy framework has been developed to address changes coming from the Care Act 2014 alongside other relevant legislation, (including the Children and Families Act 2014 where appropriate), government directives and the council's Adult Social Care Business Strategy and commissioning strategies. Much of what is proposed consolidates the approach that is already being taken in Oxfordshire.

The policy framework is composed of five high level policies that define the council's approach to Adult Social Care in Oxfordshire:

- Assessment and Review
- Support Planning
- Contributions (paying for support and care)
- Appeals and Complaints
- Safeguarding.

Cabinet is RECOMMENDE to agree the proposed Adult Social Care policy framework, and in particular the following specific recommendations outlined in this report:

- ***Authorises others to carry out reviews when appropriate while retaining oversight and responsibility***
- ***It is proposed that the council charges a single, flat arrangement fee for Deferred Payment Agreements of £680***
- ***Charges interest in relation to Deferred Payment Agreements at the maximum national rate (2.6% currently) and this is adjusted to reflect any changes in this level every six months***
- ***Passes property valuation costs to the individual in relation to setting up Deferred Payment Agreements and that they have the option to pay up front and in full or to add to the loan, in which case interest will be charged at the level set for the deferred payment agreement***
- ***Charges people who pay the full cost for their support and care other than in a care home a one-off fee for arranging this. There will be two levels to this fee reflecting differing cost to the council incurred of simply negotiating a contract with a provider, or actively helping to manage the relationship between the provider and the individual:***
 - *£150 where the council acts as a broker, negotiating and agreeing care with a provider or providers on behalf of the individual*
 - *£500 where the council acts as a broker as above, and also manages the provision of the care and support on behalf of the individual (including paying the provider, quality and contract monitoring)*
- ***From 1st April 2015, backdates charges for non-residential care as well as for residential care to the point at which the person started to have the support and care, while remaining committed to assessing people as soon as possible once eligible needs have been identified***
- ***Accepts complaints from people paying for their own care and support including through a Direct Payment, accepting that this may involve asking organisations providing care to investigate or sign posting to an appropriate place to investigate (for example the Local Government Ombudsman)***

- ***Does not charge carers a contribution to the cost of their support***
- ***Continues to provide equipment free of charge before full assessment to aid independence and reduce or delay needs for care.***

8. Community Risk Management 2015-16 Action Plan (Pages 137 - 146)

Cabinet Member: Deputy Leader

Forward Plan Ref: 2014/165

Contact: Nathan Travis, Deputy Chief Fire Officer Tel: (01865) 855206

Report by Chief Fire Officer (**CA8**).

The Fire and Rescue Services Act 2004 requires the Secretary of State to prepare a Fire and Rescue National Framework to which Fire Authorities must have regard when discharging their functions. The 2012 Framework requires each Fire and Rescue Authority to produce a publicly available Integrated Risk Management Plan (IRMP). Within Oxfordshire Fire and Rescue Service (OFRS) we have called this our Community Risk Management Plan (CRMP) to make it more meaningful to the public. This report proposes a number of projects to be included within the Fire Authority's CRMP for the fiscal year 2015-16.

The proposals in this report were presented to the Performance Scrutiny Committee on 25 September 2014.

The agreed proposals within this Action Plan 2015-16 have been subjected to full internal and external consultation for a period of 12 weeks. Cabinet is therefore invited to comment on the proposed Action Plan, consultation responses and management responses to the consultation responses.

Our medium term financial plan and supporting business strategy underpin the proposals within our CRMP action plan.

Cabinet is RECOMMENDED to agree that all of the project proposals within this report are accepted and adopted in the final version of the CRMP Action Plan 2015-16.

9. Staffing Report - Quarter 3 - 2014 (Pages 147 - 152)

Cabinet Member: Deputy Leader

Forward Plan Ref: 2014/151

Contact: Sue Corrigan, County HR Manager Tel (01865) 810280

Report by Chief Human Resources Officer (**CA9**).

This report gives an update on staffing numbers and related activity during the period 1 October 2014 to 31 December 2014. It gives details of the agreed staffing numbers and establishment at 31 December 2014 in terms of Full Time Equivalents. These are also shown by directorate in Appendix 1. In addition, the report provides information on

vacancies and the cost of posts being covered by agency staff. Appendix 2 shows a breakdown by service area of agency spend.

The Cabinet is RECOMMENDED to:

(a) note the report; and

(b) confirm that the Staffing Report meets the Cabinet's requirements in reporting and managing staffing numbers.

10. Forward Plan and Future Business (Pages 153 - 156)

Cabinet Member: All

Contact Officer: Sue Whitehead, Committee Services Manager (01865 810262)

The Cabinet Procedure Rules provide that the business of each meeting at the Cabinet is to include "updating of the Forward Plan and proposals for business to be conducted at the following meeting". Items from the Forward Plan for the immediately forthcoming meetings of the Cabinet appear in the Schedule at **CA**. This includes any updated information relating to the business for those meetings that has already been identified for inclusion in the next Forward Plan update.

The Schedule is for noting, but Cabinet Members may also wish to take this opportunity to identify any further changes they would wish to be incorporated in the next Forward Plan update.

The Cabinet is RECOMMENDED to note the items currently identified for forthcoming meetings.

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Agenda Item 6

CABINET – 24 FEBRUARY 2015

2014/15 FINANCIAL MONITORING & BUSINESS STRATEGY DELIVERY REPORT

Report by the Chief Finance Officer

Introduction

1. This report focuses on the delivery of the Directorate Business Strategies that were agreed as part of the Service and Resource Planning Process for 2014/15 – 2017/18. Parts 1 and 2 include projections for revenue, reserves and balances as at the end of December 2014. Capital Programme monitoring is included at Part 3 and changes to Fees and Charges are set out in Part 4.

Summary

2. Based on the position at the end of December, directorates are forecasting to overspend by +£4.243m, or +1.0%, against a net budget of £424.753m. This has reduced by £6.045m compared to the +£10.288m forecast overspend reported to Cabinet in December. The forecast includes the release of £2.751m corporate contingency to Children's Social Care as agreed by Council on 4 November 2014 and the use of reserves to support in-year expenditure where agreed. Overspends are being reduced through an in – year freeze on non-urgent expenditure and recruitment.
3. The table below sets out the latest budget and forecast expenditure for each directorate.

Directorate	Latest Budget 2014/15	Forecast Outturn 2014/15	Forecast Outturn Variance December 2014	Forecast Outturn Variance December 2014	Forecast Outturn Variance October 2014	Forecast Outturn Variance October 2014
	£m	£m	£m	%	£m	%
Children, Education & Families (CE&F)	105.427	108.908	+3.481	+3.3	+6.193	+6.0
Social & Community Services (S&CS)	214.417	215.654	+1.237	+0.6	+4.032	+1.9
Environment & Economy (E&E)	83.698	83.750	+0.052	+0.1	+0.328	+0.4
Chief Executive's Office (CEO)	21.211	20.684	-0.527	-2.5	-0.265	-1.2
Public Health (*)	0.000	0.000	0.000	0.0	0.000	0.0
Total	424.753	428.996	+4.243	+1.0	+10.288	+2.4

Public Health (*)						
Expenditure	26.846	24.714	-2.132	-7.9	-0.897	-3.4
Grant and Other Income & Transfer to/from Reserves	-26.846	-24.714	2.132	+7.9	+0.897	+3.4
Total ¹	0.000	0.000	0.000	0.0	0.000	0.0

¹ In 2014/15 Public Health is funded by a ring-fenced grant of £26.086m from the Department of Health. The forecast underspend of -£2.132m would be placed in reserves at year end for use in 2015/16 so the overall forecast variation is

4. While action is being taken, there is underlying pressure on both Childrens' and Adult Social Care. The on-going impact of the increased demand has been addressed through the Service & Resource Planning Process for 2015/16.
5. The following annexes are attached:

Annex 1	Original and Latest Estimates for 2014/15
Annex 2	2014/15 Virements & Supplementary Estimates
Annex 3	Ring-fenced Government Grants 2014/15
Annex 4	Treasury Management Lending List
Annex 5	Forecast Earmarked Reserves
Annex 6	Forecast General Balances
Annex 7	Fees and Charges
Annex 8	Capital Programme Monitoring
6. Directorate reports setting out the detail behind this report are available from the contact officers named at the end of this report or in the Members' Resource Centre.

Part 1 - Revenue Budget

Children, Education & Families (CE&F)

7. The directorate is forecasting to overspend by +£3.481m. As noted in paragraph 2, the forecast position includes the release of £2.751m contingency to Children's Social Care on a one off basis that was agreed by Council on 4 November 2014 the on-going effect has been addressed as part of the 2015/16 Service and Resource Planning process. The forecast position does not yet reflect the possible use of £2.000m reserves to reduce the overspend in year. The underlying position has decreased slightly from the +£6.389m variation reported to Cabinet in October but continues to reflect sustained pressure on Children's Social Care and Home to School Transport budgets. There is a -£1.686m forecast underspend on services funded by Dedicated Schools Grant (DSG).

CEF1 Education and Early Intervention

8. The Education & Early Intervention service is forecasting to overspend by +£0.422m, compared to +£0.708m reported in December.
9. Home to School Transport is forecast to overspend by +£1.288m. This is little changed since the report to Cabinet in July 2014 and as noted previously reflects increased costs associated with transporting primary school pupils and increased use of taxis, particularly for pupils with Special Educational Needs. The on-going effect of the pressure has been addressed through the Service & Resource Planning process.
10. The overspend on Home to School Transport is offset by forecast underspends on Early Intervention Hubs (-£0.244m), Children's Centres & Childcare (-£0.067m), Management & Central costs (-£0.437m), School Organisation & Planning (-£0.037m) and Schools and Learning (-£0.042m).

CEF2 Children's Social Care

11. Children's Social Care is forecast to overspend by +£2.987m compared to +£5.562m reported to Cabinet in December.
12. The forecast overspend on external placement costs for existing clients is +£1.752m. The forecast includes the use of £2.751m corporately held contingency that Council agreed to release on 4 November 2014. The underlying overspend has increased slightly to +£4.503m from the +£4.229m forecast overspend as at the end of October. The on-going effect of the pressure has been addressed as part of the 2015/16 Service and Resource Planning Process. It is estimated that further + £0.244m expenditure could arise if new placements during the remainder of the year occur at a similar level to the same period of 2013/14.
13. An overall net overspend of +£0.142m is forecast for the Corporate Parenting service area. This has reduced by £0.268m since October. Within the total overspends are forecast on Residence Orders (+£0.078m) and Special Guardianship Orders (+£0.351m) due to increased placement numbers. These are offset by forecast underspends on in – house fostering (-£0.195m) and the cross regional commissioning project (-£0.209m).
14. Forecast pressure of +£0.224m on the Safeguarding budget relates to additional staff being recruited to cover increased workloads and responsibilities.
15. The Asylum budget is forecasting an underspend of -£0.012m a change of -£0.342m since the December report. The change reflects updated grant income projections. The All Rights Exhausted budget is forecasting to overspend by +£0.127m, as a result of delays in the Home Office making decisions on All Rights Exhausted status. The Youth Offending Service is forecasting to underspend by -£0.088m as a result of underspends on staffing and project budgets. This is not committed so can be used to offset overspends elsewhere.
16. As reported throughout the year there is a +£0.940m forecast overspend on Management & Central costs. +£0.583m is associated with the continued work on the Kingfisher project. On-going funding for this team has been addressed as part of the 2015/16 Service and Resource Planning process. A further overspend of +£0.357m is forecast on legal fees.

Dedicated Schools Grant (DSG)

17. Services funded from DSG are forecast to underspend by -£1.686m compared to the 2014/15 DSG funding of £281.533m that was expected at the end of December. This includes a forecast overspend of +£0.200m on Special Educational Needs (SEN). This is offset by an underspend on Early Years Sufficiency & Access which mainly relates to an underspend on the budget for payments to providers for two year olds. There are also underspends on the Early Years Single Funding Formula (-£0.185m) and Capitalised Repair and Maintenance (-£0.200m).

Social & Community Services (S&CS)

18. The directorate is forecasting a variation of +£1.237m compared to +£4.032m in December. This overspend includes the Council's risk based share of the joint Council and Oxfordshire Clinical Commissioning Group (OCCG) variations on the relevant Pooled Budgets. This position also includes £0.538m of funding from the Public Health reserve which is being used to fund preventative services which benefit public health and meet the satisfy the terms of the Public Health grant conditions.

S&CS1 Adult Social Care

19. The majority of the variation for the directorate relates to Adult Social Care which is forecast to overspend by +£2.400m, compared to +£4.630m in October. The forecast includes £1.500m one – off funding from the Older People and Physical Disability Pooled Budget reserves agreed by Council on 4 November 2014 which is being used to offset part of the Council's share of the overspend across the Pools including the Learning Disabilities Pool. The largest element of this is a forecast overspend of +£4.011m on the Learning Disability Pooled budget. Under the risk share agreement there are also overspends of +£0.156m on the Older People and Equipment Pooled Budget and +£0.138m on the Physical Disabilities Pooled budget.

Older People and Equipment Pooled Budgets

20. The Older People and Equipment Pooled Budget has a forecast overspend of +£0.648m on a budget of £182.881m. Within that total social care services are forecast to underspend by -£0.003m and health services are forecast to overspend by +£0.651m. Under the risk share agreement the Oxfordshire County Council share of the overspend is +£0.156m and the Oxfordshire Clinical Commissioning Group share is +£0.492m. This compares to the forecast of +£1.130m reported last time (an overspend of +£0.540m on social care services and an overspend of +£0.590m on health services).
21. Within the overall Council variation of -£0.003m the Care Home Placement budget is forecast to overspend by +£0.443m. This is after the exclusion of £1.298m forecast expenditure relating to placements commissioned by the Council on behalf of self-funders who are charged in full for the cost of their care. The total number of Council funded placements at the end of December 2014 was 1,442 compared to an average of 1,448 from April to December 2014. Locality teams continue to review placements and packages with a view to reducing costs and balancing the budget.
22. Social Care funded Home Support package budgets are forecast to overspend by +£0.814m, a decrease of -£0.649m since the last report. During December 122 clients started new long term packages of care at home. This reflects a seasonal low as capacity in the Home Care market is low over the holiday period. The number of clients is expected to increase during January 2015 and an allowance for this has been built in to the forecast.
23. Prevention and Early Support Services are forecast to underspend by -£0.918m at year end. -£0.300m of the variation relates to the

CA6

Reablement Service and there is also an underspend on Intermediate Care.

24. Client contributions are forecast to overachieve by -£0.462m. This excludes £1.298m which has been collected from self-funders to offset care commissioned on their behalf.
25. The County Council element of Social Care Equipment budget is forecast to overspend by +£0.112m on a the budget of £2.408m.
26. The County Council has applied for £0.806m of Tranche 1 of the Winter Pressures funding from the £4m allocated to the Oxfordshire Clinical Commissioning Group by the Department of Health. The funding will be used to support services within the Older People and Equipment Pool including schemes to increase capacity within the Home Care market and support the timely discharge of patients from hospital. The Oxford University Hospital Trust has been allocated funding by the Clinical Commissioning Group from Tranche 2 Winter Pressures funding for the purchase of 47 nursing beds for 17 weeks over the winter period. The impact of this on the pool is uncertain.
27. On 16 January 2015 the County Council was notified that it would receive a grant of £0.520m from the Department of Health to support initiatives that will have a demonstrable impact on reducing Delayed Transfers of Care. This money must be spent by 31 March 2015. Plans on how this funding will be used were agreed by the Older People Joint Management Group on 3 February 2015.

Physical Disabilities Pooled Budget

28. The Council element of the Physical Disabilities Pooled Budget is forecasting an overspend of +£0.138m. This includes an overspend of +£0.681m on Home Support a reduction of -£0.314m since October 2014. The average cost of packages is decreasing and the average size package size for standard homes support has decreased by 10.5% to 10 hours per week. The overspend is driven by demand for services resulting in growth in client numbers.
29. Activity data shows that there is steady growth in the number of clients supported with social care home support packages either through a managed service or direct payment. Over the twelve months from January 2014 to December 2014 there was a 7.1% increase in the number of clients from 563 to 603. The majority of this growth was in the first six months of the period from January to June 2014 when client numbers grew by 5.5% to 594. The budget is under pressure from the full year effect of these clients' costs from 2013/14 as well as the cost of additional clients in year.
30. The overspend on home support is partially off-set by underspends on Care Home Placements (-£0.315m) and the Prevention and Early Support Service (-£0.160m).

Learning Disabilities Pooled Budget

31. The last report set out that the Learning Disabilities Pool had a forecast year end overspend of +£4.808m. The current forecast is an overspend of +£4.123m. The Council's share of that is +£3.498m.

32. New personal budgets and changes to personal budgets are agreed through a panel process and the primary reason for the change in a client's personal budget is captured at that point. Since 1 October 2014, the panel has been chaired by the Deputy Director for Adult Social Care.
33. Analysis of panel data for April to December shows that allocations have increased due to clients turning 18 and/or leaving education. Another significant reason for the increase is increased need due to either physical or mental health. Other additional allocations were due to changes in the ability of carers to meet the clients' needs.
34. The carry forward of the +£0.513m overspend on the Pool in 2013/14, to be recovered in 2014/15, was agreed by Cabinet on 17 June 2014. Adding that to the forecast in – year variation means the total Council overspend is +£4.011m.

Adult Social Care: Non – Pool Services

35. The forecast underspend for services outside of the Pools is -£0.053m compared to an overspend of +£0.207m in the last report. The change mainly relates to increased underspends by on the Drugs and Alcohol Residential Team budget (-£0.272m) and inflation that is not required in 2014/15 (-£0.257m).
36. There is an overspend of +£0.389m on Mental Health Services a reduction of -£0.129m. The change relates an additional contribution within the Oxfordshire Clinical Commissioning Group's budget to support social care placements and packages and one client with a high cost package not transferring to the service as expected. As noted last time there is pressure on this budget due to clients with complex needs who cannot easily be accommodated within the Supported Independent Living element of the client pathway. The Emergency Duty Team is forecasting a +£0.343m overspend based on current workloads. There is also a +£0.158m forecast overspend for the Adult Protection and Mental Capacity team as there has been a significant increase in the number of requests for Deprivation of Liberty assessments following the Cheshire West Judgement in March 2014.
37. These overspends are offset by an overachievement of client income for Learning Disabilities (-£0.198m) and Physical Disabilities (-£0.154m). Other budgets have minor forecast variations totalling -£0.013m.

SCS2 Community Safety

38. Community Safety is forecast to underspend by -£0.238m. -£0.086m relates to staffing vacancies within the Safer Communities Service, -£0.070m to Gypsy & Traveller services and -£0.072m to Trading Standards.

SCS3 Joint Commissioning

39. Joint Commissioning is forecasting an underspend of -£0.100m. The service is required to deliver £0.500m of savings in 2014/15 of which £0.310m were achieved a year in advance in 2013/14. The remaining £0.190m can be achieved in-year through managing existing vacancies. A pressure of £0.078m on legal fees has been absorbed within this underspend. There is potential for this underspend to increase further as

a result of vacancies being held for longer in response to the recruitment freeze.

SCS4 Fire and Rescue & Emergency Planning

40. The Oxfordshire Fire & Rescue Service is forecasting an underspend of -£0.426m of which -£0.215m relates to items that will be returned to balances at year end. It also includes a £0.186m contribution from the Public Health reserve. There is also an underspend of -£0.027m on Emergency Planning.
41. When the expenditure on retained firefighters and ill-health retirements exceed budget, the overspend is funded from Council balances. The forecast is for an underspend on retained firefighters of -£0.324m due to reduced fire calls and an overspend on ill health of +£0.109m. The net variation of -£0.215m will be returned to Council balances at year end.
42. The remaining underspend is due to a delay in implementing the changes to agreed emergency cover arrangements, unusually high levels of turnover in whole time firefighters and the on-going effect of the recruitment freeze.

Environment & Economy (E&E)

43. The directorate is forecasting to overspend by +£0.052m compared to +£0.328m in December.

EE1 Strategy and Infrastructure

44. Strategy and Infrastructure is forecasting to overspend by +£0.108m, mostly due to temporary staffing costs.

EE2 Commercial Services

45. Commercial Services is forecasting to underspend by -£0.822m compared to an underspend of -£0.202m in the last report.
46. Budgeted parking income anticipated for 2013/14 was not fully realised and the planned drawdown from the reserve to support the revenue budget was reduced by £0.550m so that future contributions from the reserve included in the Medium Term Financial Plan were sustainable. It is now clear that anticipated income for 2014/15 will not be met, so the budgeted contribution from the reserve to the in year revenue budget will be reduced by £0.300m creating a pressure of the equivalent amount the on-going impact has been addressed as part of the 2015/16 Service and Resource Planning process.
47. Waste Management is forecasting an underspend of -£0.758m compared to an underspend of -£0.183m in the last report. Outturn tonnage is forecast at 287 kilo tonnes compared to a budget of 291 kilo tonnes with landfill now estimated to be 18% instead of the budgeted 8% of all waste disposed of. The forecast reflects the discounted gate fee agreed throughout the commissioning phase being applied until February 2015.
48. A -£0.418m forecast underspend across the Management and Highways and Transport Contract and Performance Management cost centres primarily relates to a reduction in the contract management and profit fee for the highways contract.

49. Property and Facilities Management is forecasting to overspend by +£0.049m compared to +£0.265m in the December report. An underspend of -£0.030m on Corporate Facilities Management is offset by an overspend of +£0.43m relating to agency staff costs, asbestos survey work and academy transfers, and other smaller variations totalling £0.136m. A forecast underspend of -£0.100m relating to the recovery of contract management fees to the Capital Programme.
50. There is a forecast underspend of -£0.099m on Network & Asset Management. This mainly reflects street lighting utility costs and staffing underspends in the tree maintenance team. Supported Transport is forecasting a -£0.447m underspend. The increase of -£0.253m reflects more information being available on concessionary fares and bus subsidy grants.
51. The Integrated Transport Unit is forecasting an overspend of +£0.142m as a result of one off costs.

EE3 Oxfordshire Customer Services

52. Oxfordshire Customer Services is forecasting to overspend by +£0.766m an increase of +£0.338m since the December report. Within that the Education Support Service is forecasting an overspend of +£0.170m due to the latest estimate of income from academies being lower than budgeted. ICT are forecasting to overspend by +£0.466m due to a number of challenging savings and one - off costs associated with the move out of Clarendon House. There is also a +£0.196m overspend within the Customer Service Centre mainly due to temporary staffing costs. These overspends are offset by an underspend of -£0.105m on Human Resources due to vacancies.
53. As set out in the 'Externalisation of Back Office Services' report to Cabinet in July 2014, there are one - off costs associated with the transfer of Human Resources and Finance services to Hampshire County Council as part of their Integrated Business Centre. Some of the costs may be incurred in 2014/15 and these will be included in the April report to Cabinet once further work to value and validate these has been completed.

Chief Executive's Office

54. The forecast variation of -£0.527m includes underspends on Policy (-£0.132m), Legal Services (-£0.206m), Chief Executive & Business Support (-£0.166m), Human Resources (-£0.065m) and Governance (-£0.059m). These are partly offset by a +£0.154m overspend on Cultural Services where planned savings are not expected to be realised until April 2015.

Public Health

55. In 2014/15 the majority of Public Health expenditure is funded by a ring-fenced grant of £26.086m from the Department of Health. The service is forecasting a revenue under spend of -£2.132m against the grant. The underspend reflects a forecast underspend of -£0.273m on Children's Public Health Programmes due to contract variations along with a

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-£1.079m underspend forecast for Drug and Alcohol Services due to lower prescribing costs and contract costs. There is also an underspend of -£0.331m on Sexual Health services. This has contributed to the early delivery of savings planned for 2016/17 onwards.

56. If the Public Health grant is not utilised in 2014/15, any underspend will be placed in reserves at the end of the financial year to be used to meet Public Health expenditure in future years.

Virements and Supplementary Estimates

57. Virements larger than £0.250m requiring Cabinet approval are included at Annex 2a. They include virements to create income and expenditure budgets for the Winter Pressures funding and the Delayed Transfer of Care Grants as set out in paragraphs 26 to 27. Also requested are virements to tidy income and expenditure budgets for Adult Learning and School Meals so that they are aligned with current funding and activity levels.
58. Annex 2d shows virements that Cabinet need to note. These are delegated under the Council's virement rules for 2014/15 and are generally smaller than £0.250m.

Ringfenced Grants

59. As set out in Annex 3, ring-fenced grants totalling £327.509m are included in Directorate budgets and will be used for the specified purpose.
60. Since the last report notifications have been received setting out an updated Dedicated Schools Grant allocation of £268.138m. This has reduced from £272.481m as a result of schools converting to academy status. Also included this month is the Delayed Transfer of Care Grant from the Department of Health as set out in paragraph 27.
61. Any ringfenced grants unspent at year end will be held in the Grants & Contributions Reserve for use in 2015/16, or returned to the funding body.

Bad Debt Write Offs

62. There were 88 general write - offs to the end of December 2014 totalling £99,380. £39,247 of the total relates to three invoices relating to clients in a care home that Cabinet agreed to write off in October 2014.
63. In addition Client Finance has written off 83 debts totalling £61,287. Most of these were written off as they would be uneconomical to recover through the courts.
64. A debt of £31,637 relating to unpaid client contributions for residential care is recommended to be written off due to issues arising from the initial financial assessment of the client.
65. In 2012/13 a stage payment of £50,002 relating to capital works at a school was made to a contractor with a very similar name to the one

carrying out the work. As the latter did not appear to have received payment they subsequently raised an invoice for the same amount, which was paid by the Council. Following the transfer to them of the original payment from the contractor with a similar name, the contractor went into liquidation and the Council has been unable to recover the duplicate payment. It is recommended that this amount is written off to the revenue account.

Treasury Management

66. The latest treasury management approved lending list (as at 05 February 2015) is shown in Annex 4. This includes the addition of one new counterparty; Coventry Building Society. Additionally there have been numerous decreases to counterparty duration limits, following an assessment of market conditions by the Treasury Management Strategy Team and advice from treasury advisors Arlingclose.
67. The table below displays average in-house cash balances and average rates of return for November to December 2014. The budgeted return for interest receivable on balances is £2.404m for 2014/15. Interest receivable is currently forecast to be £2.670m, exceeding the budgeted figure by £0.266m. Interest payable is currently forecast to be in line with the budgeted figure of £18.181m.

Month	Average cash balance	Average rate of return
November	£337.298m	0.78%
December	£309.001m	0.80%

Part 2 – Balance Sheet

68. Annex 5 sets out earmarked reserves brought forward from 2013/14 and the forecast position as at 31 March 2015. These reserves are held for specified one – off projects, contractual commitments and to support the Medium Term Financial Plan.
69. As set out in the Provisional Outturn Report to Cabinet on 17 June, revenue reserves were £78.296m at the end of 2013/14. These are forecast to reduce to £46.952m by 31 March 2015 and will decrease further to £44.952m if CE&F utilise a further £2.000m reserves at the end of 2014/15 to fund part of the final directorate overspend.

Grants and Contributions

70. £20.598m ringfenced grants and contributions that were unspent at the end of 2013/14 were available in the reserve at the beginning of 2014/15. This includes £11.895m Dedicated Schools Grant which is estimated to reduce to £4.623m by year end. £0.671m Troubled (or Thriving) Families grant is expected to be spent in 2014/15.
71. The balance of Public Health grant funding is expected to increase from £4.260m to £5.664m by 31 March 2015 which includes the forecast year end underspend of -£2.132m being added to reserves. This position takes account of £0.200m of the £2.000m transfer to Capital agreed by Council on 4 November 2014 to help fund new Children's homes being

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utilised in 2014/15 (the remaining £1.8m will be used in future years) and a contribution of £0.538m to Social and Community Services to fund preventative services which benefit public health. A further £0.156m will be drawn down from the reserve in 2015/16 to fund Domestic violence and support. Options for using this to support relevant expenditure in 2014/15 are being explored.

Children, Education & Families

72. School balances were £25.444m at 1 April 2014. Based on the current schools' monitoring position it is estimated that these will reduce by £10.500m to £14.944m by 31 March 2015. However, this is likely to change as a result of further academy conversions and school's budget monitoring later in the year.
73. Other reserves held by CE&F are forecast to reduce from £5.709m to £2.448m by 31 March 2015. £0.830m will be used to support school improvement, £0.790m for the Thriving Families Project and £0.520m for costs associated with academy conversions. If a further £2.000m is required to be used support the in - year overspend the remaining balance would be £0.448m.

Social & Community Services

74. Social & Community Services reserves are forecast to reduce from £4.709m to £2.700m by 31 March 2015. £1.000m from the Older People's Pooled Budget Reserve and £0.500m from the Physical Disabilities Pooled Budget Reserves has been used to meet in year pressures across the pools, including the Learning Disabilities Pool.

Environment & Economy

75. Reserves held by E&E are forecast to reduce from £10.287m to £7.544m by 31 March 2015. This includes a forecast £0.941m reduction in the balance held in the On Street Car Parking Account from £2.086m to £1.145m. The forecast balance includes £1.114m held in the Catering Investment Fund and £1.276m relating to Joint Use agreements.
76. Cabinet are recommended to agree a new reserve for the Oxford Western Conveyance Project this reserve will be used to hold the Council and Oxford City Council's contributions to the project which crosses financial years. An initial contribution of £0.350m will be made by Environment and Economy to this reserve.

Corporate Reserves

77. £4.253m was held in the Efficiency Reserve on 1 April 2014. Subject to actual expenditure incurred during the year an estimated £3.063m is expected to be used to fund one – off expenditure. £0.685m remains uncommitted and will be used for one – off projects supporting the Medium Term Financial Plan.
78. Underspends held in the carry forward reserve at the end of 2013/14 and brought forward to 2014/15 totalled £1.791m. £1.193m has been transferred to the Budget Reserve to support the Medium Term Financial Plan as agreed by Council on 4 November 2014.

79. As part of the Service & Resource Planning process all earmarked reserves have been reviewed and the Service & Resource Planning Report that will be considered by Council on 17 February 2015 sets out that £5.2m one – off funding is proposed to be used to meet the deficit on the Budget Reserve in 2015/16. This includes the remaining £0.598m held in the carry forward reserve and £0.467m held in the Efficiency Reserve but not now required for the original purpose it was agreed for.

Other Reserves

80. Other Reserves, which include Insurance, Capital and Cash flow reserves, are forecast to total £30.369m at 31 March 2015. This is unchanged since the last report.

Balances

81. Annex 6, which is summarised in the table below, sets out that forecast general balances are £17.517m.
82. The budgeted level of balances is based on an assessment of risk undertaken as part of the Service & Resource Planning process and is part of the Chief Finance Officer's assessment of the adequacy of financial reserves. The current forecast is in line with the risk assessed level of £17.4m for 2015/16. If the position falls below the risk assessed level this will need to be addressed during 2015/16.

	Budget 2014/15 £m	Forecast 2014/15 £m
2013/14 Outturn	17.409	18.455
Planned Contribution	3.000	3.000
Calls on Balances	-2.000	-0.545
Additional Strategic Measures		0.850
Less forecast overspend		-4.243
Forecast Balances	18.409	17.517

Part 3 – Capital Programme

83. An updated capital programme is being considered by Council on 17 February 2015. This reflects forecast expenditure as at the end of December 2014, so effectively also forms the monitoring position for this report.
84. A summary of the changes since the last programme considered by Cabinet on 27 January 2015 as part of the Service & Resource Planning Process is set out in the table on the next page.

Directorate	Last Approved Programme * £m	Last Reported Programme ** £m	Latest Forecast Expenditure *** £m	Variation to Last Reported Programme £m
Children, Education & Families	38.5	37.5	37.1	-0.4
Social & Community Services	13.7	3.1	3.1	0.0
Environment & Economy - Transport	57.0	55.2	49.9	-5.3
Environment & Economy - Other	12.1	10.7	10.7	0.0
Chief Executive's Office	1.4	1.4	0.9	-0.5
Total Directorate Programmes	122.7	107.9	101.7	-6.2
Schools Local Capital	2.5	2.5	2.5	0.0
Earmarked Reserves	1.4	0.9	0.9	0.0
Total Capital Programme	126.6	111.3	105.1	-6.2

* Approved by Cabinet 21 October 2014

** Approved by Cabinet 27 January 2015

*** As per proposals to Council 17 February 2015

85. Significant in-year variations for each directorate are listed in Annex 8b. New schemes and total programme/project budget changes for Cabinet to note are listed in Annex 8c. For completeness this shows the latest forecast position compared to the last capital programme approved by Cabinet on 21 October 2014.
86. Compared to the capital programme considered by Cabinet on 27 January 2015 the most significant change is the re-profiling of major highways improvement projects at the A34 Chilton Junction, A417 Hagbourne Hill, Featherbed Lane and Harwell Link Road to reflect the impact on the delivery programme of protracted land negotiations.

Actual & Committed Expenditure

87. As at the end of December actual capital expenditure for the year to date (excluding schools local spend) was £50.2m. This is 49% of the total forecast expenditure of £101.7m. Actual and committed spend is 91% of the forecast.

Five Year Capital Programme Update

88. The total forecast 5-year capital programme (2014/15 to 2018/19) is now £471.0m. This has increased by £0.8m compared to the programme considered by Cabinet on 27 January 2015. The table below summarises the variations by directorate and the main reasons for these are explained in the following paragraphs.

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Directorate	Last Reported Total Programme (2014/15 to 2018/19) * £m	Latest Updated Total Programme (2014/15 to 2018/19) ** £m	Variation £m
Children, Education & Families	163.4	163.8	+0.4
<i>CE&F reductions to be identified</i>	-5.8	-5.8	0.0
Social & Community Services	37.2	37.2	0.0
Environment & Economy – Transport	181.3	181.5	+0.2
Environment & Economy – Other	34.7	34.8	+0.1
Chief Executive's Office	5.7	5.6	-0.1
Total Directorate Programmes	416.5	417.1	+0.6
Schools Local Capital	7.4	7.4	0.0
Earmarked Reserves	46.3	46.5	+0.2
Total Capital Programme	470.2	471.0	+0.8

* Considered by Cabinet 27 January 2015

** As per proposals to Council 17 February 2015

89. Preliminary design works have been completed for Cuttleslowe and Wolvercote roundabout schemes and the overall budget requirement has reduced by £0.7m due to a statutory utility diversion not being required. The budget surplus has been transferred to earmarked reserves to offset any future cost increased on other elements of the City Deal Programme. Cabinet are recommended to approve the release of the revised budgets of £4.100m for Cuttleslowe and £4.824m for Wolvercote to proceed to detailed design and procurement. Outline business cases for both schemes are available as background papers.
90. Cabinet are recommended to approve the entry of the A44 – A40 (Loop Farm) Link Road scheme into the capital programme and release of a £0.676m project development budget. An initial business case is available as a background paper. The scheme is part of the City Deal programme and will reduce congestion and improve network reliability at Oxford's northern approaches.
91. Additional budget of £0.4m has been transferred from earmarked reserves for Frideswide Square and a project development budget of £0.5m included for Didcot Northern Perimeter Rd 3 as approved by Cabinet on 27 January 2015.
92. The Education Capital Maintenance allocation for 2015/16 was announced on 9 February 2015. The Council will receive £5.161m which is £0.089m less than estimated in the capital programme presented to Council in February 2015. This shortfall will be met from the capital programme contingency.

Part 4 – Fees and Charges

93. As set out in Annex 7, Cabinet are recommended to approve fees to be charged for hire of the premises at the Riverside Centre for Outdoor Learning.

RECOMMENDATIONS

94. The Cabinet is **RECOMMENDED** to:
- (a) Note the report and annexes including the Treasury Management lending list at Annex 4 and changes set out in paragraphs 66 - 67;
 - (b) Approve the virements request set out in Annex 2a;
 - (c) Approve the write off of client income totalling £31,638 relating to unpaid client contributions for residential care as set out in paragraph 64 and the write of £50,002 relating to capital works at a school as set out in paragraph 65;
 - (d) Approve the creation of the Oxford Western Conveyance Reserve and the initial contribution of £0.350m as set out in paragraph 76;
 - (e) Approve the fees for hiring the Riverside Centre as set out in paragraph 93 and Annex 7;
 - (f) Approve the release of the revised capital budgets of £4.100m Cuttleslowe roundabout and £4.824m Wolvercote roundabout to proceed to detailed design and procurement as set out in paragraph 89;
 - (g) Approve the entry of the A44 – A40 Loop Farm Link Road into the capital programme and the release of a £0.676m project development budget as set out in paragraph 90;
 - (h) Approve the changes to the Capital Programme set out in Annex 8c.

LORNA BAXTER

Chief Finance Officer

Background papers: Directorate Financial Monitoring Reports to the end of December 2014
 Business Case for A44-A40 Loop Farm Link Road
 Business Case for Cuttleslowe roundabout, Oxford
 Northern Gateways (City Deal)
[Business Case](#) Wolvercote roundabout, Oxford
 Northern Gateways (City Deal)

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Ref	Directorate	BUDGET 2014/15					Outturn Forecast Year end Spend/Income	Projected Year end Variation to Budget	Projected Year end Variance Traffic Light
		Original Budget	Brought Forward from 2013/14 Surplus + Deficit -	Virements to Date	Supplementary Estimates to Date	Latest Budget			
(1)	(2)	£000 (3)	£000 (4)	£000 (5)	£000 (6)	£000 (7)	£000 (8)	underspend - overspend + £000 (9)	(13)
CEF	Children, Education & Families								
	Gross Expenditure	443,422	-72	-19,193	0	424,157	427,638	3,481	G
	Gross Income	-340,804	0	22,074	0	-318,730	-318,730	0	G
		102,618	-72	2,881	0	105,427	108,908	3,481	A
SCS	Social & Community Services								
	Gross Expenditure	238,482	-513	2,668	110	240,747	244,145	3,398	G
	Gross Income	-23,758	0	-2,572	0	-26,330	-28,491	-2,161	R
		214,724	-513	96	110	214,417	215,654	1,237	G
EE	Environment & Economy								
	Gross Expenditure	158,989	-121	4,693	1,629	165,190	173,765	8,575	R
	Gross Income	-77,457	0	-4,035	0	-81,492	-90,015	-8,523	R
		81,532	-121	658	1,629	83,698	83,750	52	G
CEO	Chief Executive's Office								
	Gross Expenditure	31,302	0	2,870	0	34,172	36,610	2,438	R
	Gross Income	-10,554	0	-2,407	0	-12,961	-15,926	-2,965	R
		20,748	0	463	0	21,211	20,684	-527	A
PH1	Public Health								
	Gross Expenditure	26,846	0	-157	0	26,689	26,689	0	G
	Gross Income	-26,846	0	157	0	-26,689	-26,689	0	G
		0	0	0	0	0	0	0	
	Less recharges to other directorates	-30,743				-30,743	-30,743	0	G
		30,743				30,743	30,743	0	G
	Directorate Expenditure Total	868,298	-706	-9,119	1,739	860,212	878,104	17,892	A
	Directorate Income Total	-448,676	0	13,217	0	-435,459	-449,108	-13,649	A
	Directorate Total Net	419,622	-706	4,098	1,739	424,753	428,996	4,243	G

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Ref	Directorate	BUDGET 2014/15					Outturn Forecast Year end Spend/Income	Projected Year end Variation to Budget	Projected Year end Variance Traffic Light
		Original Budget	Brought Forward from 2013/14 Surplus + Deficit -	Virements to Date	Supplementary Estimates to Date	Latest Budget			
(1)	(2)	£000 (3)	£000 (4)	£000 (5)	£000 (6)	£000 (7)	£000 (8)	underspend - overspend + £000 (9)	(13)

Contributions to (+)/from (-)reserves	-12,519	706	-125	435	-11,503	-11,503	0
Contribution to (+)/from(-) balances	3,000			-2,174	826	-3,417	-4,243
Pensions - Past Service Deficit Funding	830				830	830	0
Contingency	3,476		-3,408		68	68	0
Capital Financing	35,254				35,254	35,254	0
Interest on Balances	-4,548				-4,548	-4,548	0
Additional funding to be allocated					0	0	0
Strategic Measures Budget	25,493	706	-3,533	-1,739	20,927	16,684	-4,243
Unringfenced Government Grants	-14,832		-565		-15,397	-15,397	0
Council Tax Surpluses	-6,929				-6,929	-6,929	0
Revenue Support Grant	-80,623				-80,623	-80,623	0
Business Rates Top-Up	-36,390				-36,390	-36,390	0
Business Rates From District Councils	-28,607				-28,607	-28,607	0
Council Tax Requirement	277,734	0	0	0	277,734	277,734	0

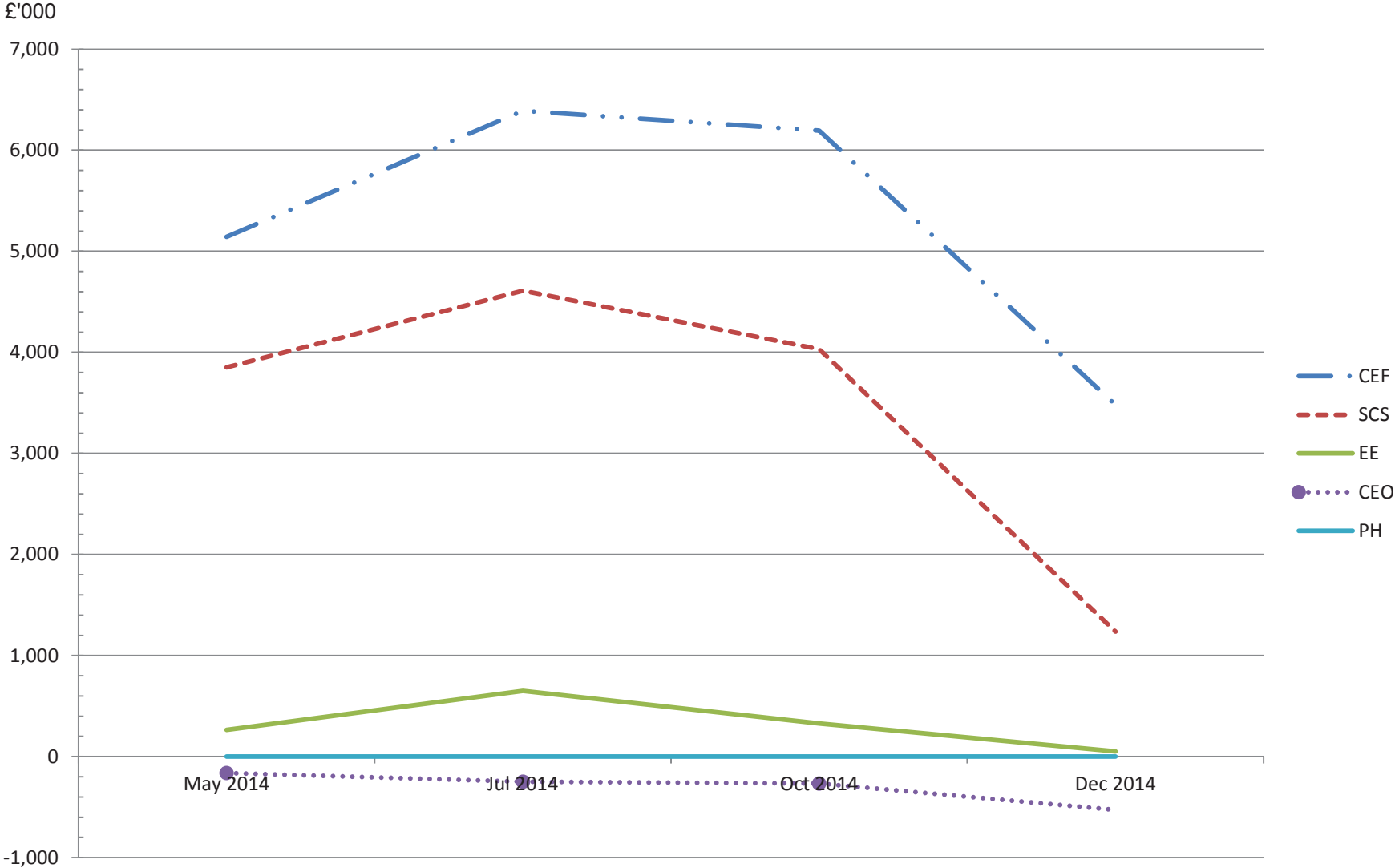
KEY TO TRAFFIC LIGHTS	On track to be within +/- 2% of year end budget	G
	On track to be within +/- 5% of year end budget	A
	Estimated outturn showing variance in excess of +/- 5% of year end budget	R

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Ref	Directorate	Projected Year end Variation				
		May 2014 underspend - overspend + £000	Aug 2014 underspend - overspend + £000	Oct 2014 underspend - overspend + £000	Dec 2014 underspend - overspend + £000	Feb 2015 underspend - overspend + £000
(1)	(2)					
CEF	Children, Education & Families					
	Gross Expenditure	5,143	6,389	23,735	3,481	
	Gross Income	0	0	-17,542	0	
		5,143	6,389	6,193	3,481	
SCS	Social & Community Services					
	Gross Expenditure	3,851	6,608	6,141	3,398	
	Gross Income	1	-1,998	-2,109	-2,161	
		3,852	4,610	4,032	1,237	
EE	Environment & Economy					
	Gross Expenditure	7,469	3,048	328	8,575	
	Gross Income	-7,204	-2,398	0	-8,523	
		265	650	328	52	
CEO	Chief Executive's Office					
	Gross Expenditure	451	2,204	2,187	2,438	
	Gross Income	-612	-2,451	-2,452	-2,965	
		-161	-247	-265	-527	
PH1	Public Health					
	Gross Expenditure	0	0	0	0	
	Gross Income	0	0	0	0	
		0	0	0	0	
	Directorate Expenditure Total	16,914	18,249	32,391	17,892	
	Directorate Income Total	-7,815	-6,847	-22,103	-13,649	
	Directorate Total Net	9,099	11,402	10,288	4,243	
Change compared position reported to the end of May 2014			2,303	1,189	-4,856	

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Ref	Directorate	BUDGET 2014/15					Outturn Forecast Year end Spend/Income	Projected Year end Variation	Projected Year end Variance Traffic Light
		Original Budget	Brought Forward from 2013/14 Surplus + Deficit -	Virements to Date	Supplementary Estimates to Date	Latest Estimate			
(1)	(2)	£000 (3)	£000 (4)	£000 (5)	£000 (6)	£000 (7)	£000 (8)	underspend - overspend + £000 (9)	(13)
CEF1	Education & Early Intervention								
	Gross Expenditure	98,271		-129	0	98,142	98,564	422	G
	Gross Income	-49,806		-116	0	-49,922	-49,922	0	G
		48,465	0	-245	0	48,220	48,642	422	G
CEF2	Children's Social Care								
	Gross Expenditure	52,215		3,280	0	55,495	58,482	2,987	R
	Gross Income	-4,768		-161	0	-4,929	-4,929	0	G
		47,447	0	3,119	0	50,566	53,553	2,987	R
CEF3	Children, Education & Families Central Costs								
	Gross Expenditure	6,172	-72	43	0	6,143	6,249	106	G
	Gross Income	0		-43	0	-43	-43	0	G
		6,172	-72	0	0	6,100	6,206	106	G
CEF4	Schools								
	Gross Expenditure	288,324		-22,387	0	265,937	265,903	-34	G
	Gross Income	-287,790		22,394	0	-265,396	-265,396	0	G
		534	0	7	0	541	507	-34	R
	Less recharges within directorate	-1,560				-1,560	-1,560	0	G
		1,560				1,560	1,560	0	G
	Directorate Expenditure Total	443,422	-72	-19,193	0	424,157	427,638	3,481	G
	Directorate Income Total	-340,804	0	22,074	0	-318,730	-318,730	0	G
	Directorate Total Net	102,618	-72	2,881	0	105,427	108,908	3,481	A

KEY TO TRAFFIC LIGHTS

On track to be within +/- 2% of year end budget

G

On track to be within +/- 5% of year end budget

A

Estimated outturn showing variance in excess of +/- 5% of year end budget

R

Financial Monitoring and Business Strategy Delivery Report
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Ref	Directorate	BUDGET 2014/15					Outturn Forecast Year end Spend/Income	Projected Year end Variation	Projected Year end Variance Traffic Light
		Original Budget	Brought Forward from 2013/14 Surplus + Deficit -	Virements to Date	Supplementary Estimates to Date	Latest Estimate			
(1)	(2)	£000 (3)	£000 (4)	£000 (5)	£000 (6)	£000 (7)	£000 (8)	underspend - overspend + £000 (9)	(13)
SCS1	Adult Social Care								
	Gross Expenditure	206,098	-513	3,177	0	208,762	213,323	4,561	A
	Gross Income	-25,749		-2,660	0	-28,409	-30,570	-2,161	R
		180,349	-513	517	0	180,353	182,753	2,400	G
SCS2	Community Safety								
	Gross Expenditure	4,135		3	0	4,138	3,900	-238	R
	Gross Income	-1,659		-1	0	-1,660	-1,660	0	G
		2,476	0	2	0	2,478	2,240	-238	R
SCS3	Joint Commissioning								
	Gross Expenditure	8,730		-487	110	8,353	8,253	-100	G
	Gross Income	-2,693		89	0	-2,604	-2,604	0	G
		6,037	0	-398	110	5,749	5,649	-100	G
SCS4	Fire & Rescue and Emergency Planning								
	Gross Expenditure	26,329		-25	0	26,304	25,479	-825	A
	Gross Income	-467		0	0	-467	-467	0	G
		25,862	0	-25	0	25,837	25,012	-825	A
	Less recharges within directorate	-6,810				-6,810	-6,810	0	G
		6,810				6,810	6,810	0	G
	Directorate Expenditure Total	238,482	-513	2,668	110	240,747	244,145	3,398	G
	Directorate Income Total	-23,758	0	-2,572	0	-26,330	-28,491	-2,161	R
	Directorate Total Net	214,724	-513	96	110	214,417	215,654	1,237	G

KEY TO TRAFFIC LIGHTS

On track to be within +/- 2% of year end budget

G

On track to be within +/- 5% of year end budget

A

Estimated outturn showing variance in excess of +/- 5% of year end budget

R

Financial Monitoring and Business Strategy Delivery Report
 CABINET - 24 February 2015
 Budget Monitoring
 Pooled Budgets

Original Budget	Latest Budget		Projected Year end Variation December 2014	Projected Year end Variation October 2014	Change in Variance
£m	£m		£m	£m	£m
		<u>Older People's & Equipment Pool</u>			
92.256	92.352	Oxfordshire County Council	+0.156	+0.540	-0.384
90.610	90.610	Oxfordshire Clinical Commissioning Group	+0.492	+0.590	-0.098
182.866	182.962	Total Older People's & Equipment Pool	+0.648	+1.130	-0.482
		<u>Physical Disabilities Pool</u>			
11.902	11.903	Oxfordshire County Council	+0.138	+0.708	-0.570
7.219	7.219	Oxfordshire Clinical Commissioning Group	+0.190	-0.101	+0.291
19.121	19.122	Total Physical Disabilities Pool	+0.328	+0.607	-0.279
		<u>Learning Disabilities Pool</u>			
67.681	67.681	Oxfordshire County Council *	+3.498	+4.075	-0.577
12.153	12.153	Oxfordshire Clinical Commissioning Group	+0.625	+0.733	-0.108
79.834	79.834	Total Learning Disabilities Pool	+4.123	+4.808	-0.685
171.839	171.936	Total Oxfordshire County Council	+3.792	+5.323	-1.531
109.982	109.982	Total Oxfordshire Clinical Commissioning Group	+1.307	+1.222	+0.085
281.821	281.918	Total Pooled Budgets	+5.099	+6.545	-1.446

Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015
Budget Monitoring

Ref	Directorate	BUDGET 2014/15					Outturn Forecast Year end Spend/Income	Projected Year end Variation	Projected Year end Variance Traffic Light
		Original Budget	Brought Forward from 2013/14 Surplus + Deficit -	Virements to Date	Supplementary Estimates to Date	Latest Estimate			
(1)	(2)	£000 (3)	£000 (4)	£000 (5)	£000 (6)	£000 (7)	£000 (8)	underspend - overspend + £000 (9)	(13)
EE1	Strategy and Infrastructure								
	Gross Expenditure	11,659		1,337	0	12,996	14,834	1,838	R
	Gross Income	-2,920		-2,467	0	-5,387	-7,117	-1,730	R
		8,739	0	-1,130	0	7,609	7,717	108	G
EE2	Commercial Services								
	Gross Expenditure	115,560		3,217	1,629	120,406	125,451	5,045	A
	Gross Income	-51,801		-1,101	0	-52,902	-58,769	-5,867	R
		63,759	0	2,116	1,629	67,504	66,682	-822	G
EE3	Oxfordshire Customer Services								
	Gross Expenditure	50,467	-121	139	0	50,485	52,177	1,692	A
	Gross Income	-41,433		-467	0	-41,900	-42,826	-926	A
		9,034	-121	-328	0	8,585	9,351	766	R
	Less recharges within directorate	-18,697				-18,697	-18,697	0	G
		18,697				18,697	18,697	0	G
	Directorate Expenditure Total	158,989	-121	4,693	1,629	165,190	173,765	8,575	R
	Directorate Income Total	-77,457	0	-4,035	0	-81,492	-90,015	-8,523	R
	Directorate Total Net	81,532	-121	658	1,629	83,698	83,750	52	G

KEY TO TRAFFIC LIGHTS

On track to be within +/- 2% of year end budget

On track to be within +/- 5% of year end budget

Estimated outturn showing variance in excess of +/- 5% of year end budget

G

A

R

Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015
Budget Monitoring

BUDGET 2014/15							Outturn Forecast Year end Spend/Income	Projected Year	Projected
Ref	Directorate	Original	Brought Forward from 2013/14 Surplus + Deficit -	Virements to Date	Supplementary Estimates to Date	Latest			
(1)	(2)	£000 (3)	£000 (4)	£000 (5)	£000 (6)	£000 (7)	£000 (8)	underspend - overspend + £000 (9)	(13)
CEO1	Chief Executive & Business Support								
	Gross Expenditure	1,104		258	0	1,362	1,412	50	A
	Gross Income	-567		0	0	-567	-783	-216	R
		537	0	258	0	795	629	-166	R
CEO2	Human Resources								
	Gross Expenditure	2,952		235	0	3,187	3,257	70	A
	Gross Income	-2,809		-29	0	-2,838	-2,973	-135	A
		143	0	206	0	349	284	-65	R
CEO3	Corporate Finance & Internal Audit								
	Gross Expenditure	3,951		68	0	4,019	4,453	434	R
	Gross Income	-3,705		-68	0	-3,773	-4,204	-431	R
		246	0	0	0	246	249	3	G
CEO4	Law & Culture								
	Gross Expenditure	21,802		2,568	0	24,370	26,294	1,924	R
	Gross Income	-5,779		-2,307	0	-8,086	-10,177	-2,091	R
		16,023	0	261	0	16,284	16,117	-167	G
CEO5	Strategy & Communications								
	Gross Expenditure	1,508		-259	0	1,249	1,209	-40	A
	Gross Income	-1,370		-3	0	-1,373	-1,465	-92	R
		138	0	-262	0	-124	-256	-132	R

Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015
Budget Monitoring

BUDGET 2014/15							Outturn Forecast Year end Spend/Income	Projected Year	Projected
Ref	Directorate	Original	Brought Forward from 2013/14 Surplus + Deficit -	Virements to Date	Supplementary Estimates to Date	Latest			
(1)	(2)	£000 (3)	£000 (4)	£000 (5)	£000 (6)	£000 (7)	£000 (8)	underspend - overspend + £000 (9)	(13)
CEO6	Corporate & Democratic Core								
	Gross Expenditure	3,661		0	0	3,661	3,661	0	G
	Gross Income	0		0	0	0	0	0	
		3,661	0	0	0	3,661	3,661	0	G
	Less recharges within directorate	-3,676				-3,676	-3,676	0	G
		3,676				3,676	3,676	0	G
	Directorate Expenditure Total	31,302	0	2,870	0	34,172	36,610	2,438	R
	Directorate Income Total	-10,554	0	-2,407	0	-12,961	-15,926	-2,965	R
	Directorate Total Net	20,748	0	463	0	21,211	20,684	-527	A

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KEY TO TRAFFIC LIGHTS	On track to be within +/- 2% of year end budget	G
	On track to be within +/- 5% of year end budget	A
	Estimated outturn showing variance in excess of +/- 5% of year end budget	R

Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015
Budget Monitoring

Ref	Directorate	BUDGET 2014/15					Outturn Forecast Year end Spend/Income £000 (8)	Projected Year end Variation underspend - overspend + £000 (9)	Projected Year end Variance Traffic Light (13)
		Original Budget £000 (3)	Brought Forward from 2013/14 Surplus + Deficit - £000 (4)	Virements to Date £000 (5)	Supplementary Estimates to Date £000 (6)	Latest Estimate £000 (7)			
(1)	(2)								
PH1	Public Health								
	Gross Expenditure	26,846		-157	0	26,689	24,557	-2,132	R
	Gross Income	-26,846		157	0	-26,689	-26,689	0	G
		0	0	0	0	0	-2,132	-2,132	
	Transfer underspend to Grants & Contributions Reserve at year end	0				0	2,132	2,132	
	Less recharges within directorate	0 0				0 0	0 0	0 0	
	Directorate Expenditure Total	26,846	0	-157	0	26,689	26,689	0	G
	Directorate Income Total	-26,846	0	157	0	-26,689	-26,689	0	G
	Directorate Total Net	0	0	0	0	0	0	0	

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KEY TO TRAFFIC LIGHTS	On track to be within +/- 2% of year end budget	G
	On track to be within +/- 5% of year end budget	A
	Estimated outturn showing variance in excess of +/- 5% of year end budget	R

**Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015**

CABINET IS RECOMMENDED TO APPROVE THE VIREMENTS AS DETAILED BELOW:

Directorate	Month of Cabinet meeting	Narration	Budget book line	Service Area	Permanent / Temporary	Expenditure + increase / - decrease £000	Income - increase / + decrease £000
EE	Feb	Academic year budget tidy	EE3-6	Human Resources (including Adult Learning)	P	-629.1	629.1
		School meals budget 2014/15	EE2-22	Property & Facilities Management	T	5,269.4	-5,269.4
SCS	Feb	Budget realignment required to reflect changes to service	SCS1-4A-J	Services For All Client Groups	P	-397.9	397.9
		Winter pressures 1st & 2nd invoices	SCS1-1	Older People Pooled Budget Contributions and Income	T	291.4	-291.4
		Delayed transfers of care - Department of Health	SCS1-1	Older People Pooled Budget Contributions and Income	T	520.0	-520.0
Grand Total						5,053.7	-5,053.7

**Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015**

Supplementary Estimates

SUPPLEMENTARY ESTIMATES REQUESTED THIS REPORT

Directorate	Month of Cabinet meeting	Narration	Budget book line	Service Area	Permanent / Temporary	Expenditure + increase / - decrease £000	Income - increase / + decrease £000
						0.0	0.0
Grand Total						0.0	0.0

MEMORANDUM

SUPPLEMENTARY ESTIMATES PREVIOUSLY REPORTED BUT NOT ACTIONED DUE TO TIMING OF DECISION AND MONTH END

Directorate	Month of Cabinet meeting	Narration	Budget book line	Service Area	Permanent / Temporary	Expenditure + increase / - decrease £000	Income - increase / + decrease £000
						0.0	0.0
Grand Total						0.0	0.0

**Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015**

Ringfenced Government Grant Details - 2014/15

Directorate	2014/15 Budget Book	In year Adjustments / New Allocations reported in December 2014	In year Adjustments/ New Allocations reported this time	Latest Allocation
	£m	£m	£m	£m
Children, Education & Families				
Ringfenced Grants				
Asylum UASC Fieldwork (reimbursement from Home Office)	656			656
Dedicated Schools Grant (DfE)	292,502	-20021	-4,343	268,138
Intensive Interventions Programme (DfE) 2014/15	180	50		230
Intensive Interventions Programme (DfE) 2013/14		50		50
Education Funding Agency - Sixth Form Funding and Threshold	7,131	-2142		4,989
PE and Sport Grant 2013/14 (paid April 2014)		708		708
PE and Sport Grant 2014/15 (£1.013m payable in 2014/15 with a further instalment of £0.723m in April 2015)		1013		1,013
Music (moved to the Chief Executive's Office)	642	-642		0
Pupil Premium	11,668	-671	30	11,027
Moderation and Phonics Grant		35	-35	0
Remand Framework	144	-50		94
Unpaid Work Grant		11		11
Youth Justice Board	636	100		736
Universal Infant Free Schools Grant	0	4052		4,052
		0		
Total Children, Education & Families	313,559	-17,507	-4,348	291,704
Social & Community Services				
Reducing Delayed Transfers of Care Attributable to Social Care Revenue Grant		0	520	520
Total Social & Community Services	0	0	520	520

**Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015**

Ringfenced Government Grant Details - 2014/15

Directorate	2014/15 Budget Book	In year Adjustments / New Allocations reported in December 2014	In year Adjustments/ New Allocations reported this time	Latest Allocation
	£m	£m	£m	£m
Environment & Economy				
Environment & Economy Directorate Grants				
<u>Strategy & Infrastructure</u>				
Bus Service Operators Grant (BSOG)		795		795
Local Sustainable Transport Fund Grant	535	0		535
<u>Commercial Services</u>		0		
Natural England - National Trails	230	10		240
<u>Oxfordshire Customer Services</u>		0		
Skills Funding Agency - Adult Education	3,899	370	-370	3,899
Education Funding Agency	285	-76		209
		0		
Subtotal Environment & Economy Directorate Grants	4,949	1,099	-370	5,678
Grants held on behalf of Local Enterprise Partnership				
Local Enterprise Partnership Core Funding	500	0		500
Regional Growth Fund - Oxford Innovation Business Support		1,961		1,961
City Deal Skills Grant	0	0	370	370
Subtotal Grants held on behalf of Local Enterprise Partnership	500	1,961	370	2,831
Total Environment & Economy	5,449	3,060	0	8,509

**Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015**

Ringfenced Government Grant Details - 2014/15

Directorate	2014/15 Budget Book	In year Adjustments / New Allocations reported in December 2014	In year Adjustments/ New Allocations reported this time	Latest Allocation
	£m	£m	£m	£m
Public Health				
Public Health Grant	26,086			26,086
Total Public Health	26,086	0	0	26,086
Chief Executive's Office		0		
Arts Council		15		15
Find your Voice		2		2
Music (moved from Children, Education & Families)		642		642
DCLG Counter Fraud Fund			31	31
Total Chief Executive's Office	0	659	31	690
Total	345,094	-13,788	-3,797	327,509

December Financial Monitoring & Business Strategy Delivery Report
CABINET 24 February 2015
Oxfordshire County Council's Treasury Management Lending List
as at 05 February 2015

Counterparty Name	Lending Limits			
	Standard Limit £	Group Limit £	Group	Period Limit
<u>PENSION FUND Call Accounts / Money Market Funds</u>				
Santander UK plc - PF A/c				O/N
Lloyds TSB Bank plc - Callable Deposit A/c (OXFORDCCPEN)				100 days
Ignis Sterling Liquidity Fund - (Pension Fund)				6 mths
Svenska Handelsbanken - Call A/c (Pension Fund)				6 mths
<u>Call Accounts / Money Market Funds</u>				
Santander UK plc - Main A/c	5,000,000	5,000,000	a	O/N
Close Brothers Ltd - 95 day notice A/c	10,000,000	10,000,000	d	100 days
Lloyds TSB Bank plc - Callable Deposit A/c	25,000,000	25,000,000	b	100 days
Svenska Handelsbanken - Call A/c	25,000,000	25,000,000	c	6 mths
Goldman Sachs Sterling Liquid Reserves Fund	25,000,000			6 mths
Deutsche Managed Sterling Fund	25,000,000			6 mths
Federated (Prime Rate)	12,000,000			6 mths
Ignis Sterling Liquidity Fund - (County Council)	25,000,000			6 mths
Morgan Stanley Sterling Liquidity Fund	5,000,000			O/N
Legal and General Investment Management	25,000,000			6 mths
<u>Money Market Deposits</u>				
Santander UK plc Time Deposit Facility	5,000,000	5,000,000	a	O/N
Bank of Montreal	25,000,000			6 mths
Bank of Nova Scotia	25,000,000			6 mths
Barclays Bank Plc	15,000,000			100 days
Canadian Imperial Bank of Commerce	25,000,000			6 mths
Close Brothers Ltd	10,000,000	10,000,000	d	100 days
Commonwealth Bank of Australia	25,000,000			6 mths
Coventry Building Society	15,000,000			100 days
Credit Suisse	15,000,000			100 days
DBS Bank (Development Bank of Singapore)	25,000,000			6 mths
Debt Management Account Deposit Facility	100% Portfolio			6 mths
Goldman Sachs International Bank	15,000,000			100 days
English, Welsh and Scottish Local Authorities (limit applies to individual authorities)	30,000,000			3 years
HSBC Bank plc	25,000,000			6 mths
Lloyds TSB Bank plc	25,000,000	25,000,000	b	100 days
Landesbank Hessen-Thuringen (Helaba)	20,000,000			100 days
National Australia Bank	25,000,000			6 mths
National Bank of Canada	10,000,000			100 days
Nationwide Building Society	15,000,000			100 days
Oversea-Chinese Banking Corp	25,000,000			6 mths
Rabobank Group	25,000,000			6 mths
Royal Bank of Canada	25,000,000			6 mths
Standard Chartered Bank	25,000,000			6 mths
Svenska Handelsbanken	25,000,000	25,000,000	c	6 mths
Toronto-Dominion Bank	25,000,000			6 mths
United Overseas Bank	25,000,000			6 mths

Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015
EARMARKED RESERVES

Earmarked Reserves	2014/15 - forecast balance at 31 October 2014				October 2014 Forecast Balance at 31 March 2015 £000	Change in Closing Balance Forecast £000	Commentary
	Balance at 1 April 2014 £000	Movement		Forecast Balance at 31 March 2015 £000			
		Contributions from Reserve £000	Contributions to Reserve £000				
Revenue Reserves							
Schools' Reserves	25,444	-10,500		14,944	14,944		Updated to reflect forecast balances estimated to be held by LEA maintained schools at the end of 2014/15. Likely to change for academy conversions and schools' budget monitoring later in the year.
Cross Directorate Reserves							
Vehicle and Equipment Reserve	2,399	-1,738	1,002	1,663	1,663		Includes funding for Fire and Rescue Vehicles and Equipment in future years
Grants and Contributions Reserve	20,598	-10,951	3,224	12,871	10,259	2,612	Forecast at end of 2014/15 includes £4.623m Dedicated Schools Grant and £5.664m Public Health Grant
ICT Projects	1,424	-749		675	675		To be used to fund ICT projects that span financial years including Framework-i in CE&F and the replacement for OCN
Total Cross Directorate	24,421	-13,438	4,226	15,209	12,597	2,612	
Directorate Reserves							
CE&F							
CE&F Commercial Services	990	-597	33	426	366	60	To be used to support commercial services within CE&F. Forecast balance includes Oxfordshire Children's Safeguarding Board (£0.148m) and Outdoor Education Centres (£0.278m).
Joint Working with Police	272	-272					To fund a two year project due to anticipated increase in referrals and work. Planned to be spent by October 2014.
School Intervention Fund	1,116	-830		286	286		For school improvement projects in line with Education Strategy. Planned to be spent in 2014/15.
Thriving Families	1,745	-790		955	955		To fund Thriving Families project in 2014/15. Directorate Leadership Team to discuss whether part of the balance will offset other pressures in 2014-15.
Children's Social Care	20	-20					Balance of carry forwards from 2011/12 to be spent in 2014/15. Includes balance of funding for Framework i developments post, volunteer co-ordinator post, work on adoption process and Corporate Parenting review.
Foster Carer Loans	201			201	201		To meet Children's Act loans write off and interest costs in future years.
Academies Conversion Support	619	-520		99	76	23	To manage the costs arising in legal services, human resources, property, finance and other areas as a consequence of school conversions to academies, and to provide the opportunity to investigate and implement alternate trust structures for groups of schools considering conversion to academies.
Staff Training & Development	102	-102			15	-15	Balance of funding agreed by Council in February 2011 for training and staff development towards new ways of working following restructure within CE&F. Balance of apprentice carry forward funding. To be spent by 2014/15.
CE&F Pay Protection Costs	282			282	282		To meet pay protection costs. Amount required being reviewed as Directorate has agreed to cease pay protection. Directorate Leadership Team to discuss whether part of the balance will offset other pressures expected in 2014-15.
Early Intervention Service Reserve	362	-163		199	199		To fund various projects with the Early Intervention Service and the replacement of equipment
Total CE&F	5,709	-3,294	33	2,448	2,380	68	
S&CS							
Older People Pooled Budget Reserve	2,878	-1,178		1,700	1,700		
Physical Disabilities Pooled Budget Reserve	1,044	-500		544	544		
Learning Disabilities Pooled Budget Reserve	95			95	95		
Fire Control	408	-258		150	150		Funding of the proposed joint Thames Valley Fire Control Centre, including a specific revenue grant for this programme. Costs relating to the secondary control room will slip into 2015/16.
Fire & Rescue & Emergency Planning Reserve	129	-73		56	56		To be used for unbudgeted fire hydrant work and renewal of IT equipment
Community Safety Reserve	155			155	120	35	This reserve will be used to for works at the Redbridge Gypsy and Travellers site and to support the cost of complex Trading Standards investigations.
Total S&CS	4,709	-2,009		2,700	2,665	35	

Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015
EARMARKED RESERVES

Earmarked Reserves	2014/15 - forecast balance at 31 October 2014				October 2014 Forecast Balance at 31 March 2015 £000	Change in Closing Balance Forecast £000	Commentary
	Balance at 1 April 2014 £000	Movement		Forecast Balance at 31 March 2015 £000			
		Contributions from Reserve £000	Contributions to Reserve £000				
E&E							
Highways and Transport Reserve	385	-352		33		33	Being used to support bridges investigation work in 2014/15.
Area Stewardship	137	-137					To manage the funding available for the Area Stewardship scheme
On Street Car Parking	2,086	-2,052	1,111	1,145		1,145	This surplus has arisen under the operation of the Road Traffic Regulation Act 1984 (section 55). The purposes for which these monies can be used are defined by statute.
Countryside Ascott Park - Historical Trail	21		1	22		22	
Carbon Reduction	60			60		60	
SALIX Energy Schemes	297	-70		227		227	To be used for future energy saving schemes.
Dix Pit WRC Development	13	-13					
Oxfordshire Waste Partnership Joint Reserve	57	-57					This reserve holds the revenue element of the unutilised element of the performance reward grant secured by the Oxfordshire Waste Partnership (OWP)
Dix Pit Engineering Works & WRC Development	826			826		826	To fund engineering (cell) work at Dix Pit waste management site and any on-going liabilities due to the closure of other landfill sites
Waste Management	528			528		528	To fund financial liabilities due to any contract deficit mechanism payments as part of the Energy from Waste contract
Property Disposal Costs	201	-26		175		175	To meet disposal costs in excess of the 4% eligible to be charged against capital receipts
Developer Funding (Revenue)	410	-64	169	515		515	Administration fees from developers held to meet the costs of monitoring Section 106 agreements
West End Partnership	56	-30		26		26	
Catering Investment Fund (formerly FWT)	1,594	-480		1,114		1,114	To be used to fund catering improvements in schools plus a contingency for unforeseen costs. £0.480m is proposed to be used towards the delivery of the capital scheme for the delivery of universal infant free school meals.
Asset Rationalisation	637	-637					Investment fund for the implementation of the asset rationalisation strategy
Job Clubs	102	-102					Remaining balance to be spent on Job Clubs in 2014/15
Minerals and Waste Project	111	-111					To fund the Minerals and Waste project
Joint Use (moved from CE&F)	1,077		199	1,276		1,276	Will be used to support the joint-use agreements with the district councils in future years.
LABGI Funding to support Local Enterprise Partnership	278	-92		186		186	Residual Local Authority Business Growth Incentive (LABGI) grant funding that will be used to support the Local Enterprise Partnership.
OCS Development Reserves	1,063	-200		863		863	To be used to develop the Customer Service Centre and the Transforming Oxfordshire Customer Services Project
Money Management Reserve	150	-150				60	Contingency in case of an overspend if income received is less than budget
NEW RESERVE - Oxford Western Conveyance			350	350		350	NEW RESERVE - To hold Oxford Western Conveyance flood relief scheme contributions
Oxfordshire - Buckinghamshire partnership	198			198		198	This reserve is to ring-fence funding for the Oxfordshire & Buckinghamshire Partnership graduate teacher training programme
Total E&E	10,287	-4,573	1,830	7,544		7,254	290
Chief Executive's Office							
Bia Society Fund	16	-16					
CIPFA Trainees	58			58		58	2013/14 commitments not paid by year end. Will be used in 2014/15
Change Management & New Ways of Working							
Coroner's Service	133			133		133	Will be used to support various projects within the Coroner's Service.
Council Elections			217	217		217	This will be used to fund future elections. In years where no County Elections take place any underspend on the Council Elections budget will be transferred to this reserve.
Registration Service	675	-76		599		599	To be used for refurbishing the Registration buildings and facilities
Cultural Services Reserve	1,506	-336	142	1,312		1,312	To be used to update software and hardware to maintain an effective library management system.
Total - CEO	2,388	-428	359	2,319		2,319	
Directorate Reserves	23,093	-10,304	2,222	15,011		14,618	393
Corporate							
Carry Forward Reserve	1,085	-1,193	706	598		598	The Carry Forward reserve allows budget managers to carry forward under and over spent budgets between financial years in accordance with the County Council's budget management arrangements, subject to Cabinet approval. The remaining balance of £0.598m will be used to support the 2015/16 budget.
Efficiency Reserve	4,253	-3,063		1,190		1,190	This reserve is being used to support the implementation of the business strategies and the Medium Term Financial Plan. Use of reserve based on estimated forecast use of the reserve on agreed projects in 2014/15. Variation relates to costs of Care Bill Implementation (£0.125m), costs associated with the City Deal (£0.150m) and £0.210m for ICT costs associated with Agile Working. As noted in paragraph 76 £0.685m is not now required for the purpose for which it was originally agreed and will be released to support the 2015/16 budget.
Corporate Total	5,338	-4,256	706	1,788		1,788	
Total Revenue Reserves	78,296	-38,498	7,154	46,952		43,947	3,005

Financial Monitoring and Business Strategy Delivery Report
 CABINET - 24 February 2015
 EARMARKED RESERVES

Earmarked Reserves	2014/15 - forecast balance at 31 October 2014				October 2014 Forecast Balance at 31 March 2015 £000	Change in Closing Balance Forecast £000	Commentary
	Balance at 1 April 2014 £000	Movement		Forecast Balance at 31 March 2015 £000			
		Contributions from Reserve £000	Contributions to Reserve £000				
Other Reserves							
Insurance Reserve	3,482		435	3,917	3,917		
Capital Reserves							
Capital Reserve	19,442			19,442	19,442		This reserve has been established for the purpose of financing capital expenditure in future years
Rolling Fund Reserve	2,050		491	2,541	2,541		This reserve has been established to facilitate, through forward funding, the timely provision of infrastructure that supports planned growth.
Prudential Borrowing Reserve	7,530	-94	950	8,386	8,386		This reserve was created as part of the 2008/09 budget setting process to meet the costs of borrowing for increased funding for the capital programme. Similar contributions are to be made each year with draw downs being required as costs are incurred.
Total Capital Reserves	29,022	-94	1,441	30,369	30,369		
Cash Flow Reserves							
Budget Reserve - 2013/14 to 2016/17	19,393	-13,961	1,193	6,625	6,625		This reserve is being used to manage the cash flow implications of the variations to the Medium Term Financial Plan. Variation reflects the £1.193m contribution to the reserve from the Carry Forward Reserve.
Total Cash Flow Reserves	19,393	-13,961	1,193	6,625	6,625		
Total Other Reserves	51,897	-14,055	3,069	40,911	40,911		
Total Reserves	130,193	-52,553	10,223	87,863	84,858	3,005	

Financial Monitoring and Business Strategy Delivery Report
CABINET - 24 February 2015
General Revenue Balances

Date	Forecast 2014/15		Budget 2014/15 £m
	£m	£m	
General Balances: Outturn 2013/14	18.455		17.409
County Fund Balance		18.455	17.409
Planned Contribution to Balances		3.000	3.000
Planned Contribution from Balances			
Original forecast outturn position 2013/14		21.455	20.409
Additions			
		0.000	0.000
Calls on balances deducted			
Jul-14 Contribution to Insurance Reserve from Strategic Measures	-0.435		
Oct-14 Learning Disabilities: Quality Assurance & Project Management Costs	-0.110		
Total calls on balances		-0.545	-2.000
Net General Balances		20.910	18.409
Total Gross Expenditure Budget		833.314	833.314
General Balances as a % of Gross Expenditure		2.51%	2.21%
Net Balances		20.910	
Calls on / returns to balances agreed but not actioned			
		0.000	
Calls on / returns to balances requested in this report			
Forecast Overspend			
Less forecast directorate overspend (as set out in Annex 1)		-4.243	
Add estimated underspend on Strategic Measures		0.850	
Revised Outturn position		17.517	
Severe Weather Recovery Grant			
Grant received in March 2014		3.039	
less planned use of grant for schemes in 2014/15		-1.629	
Remaining total available to spend in 2015/16		1.410	

Financial Monitoring and Business Strategy Delivery Report
 CABINET - 24 February 2015
 Hire of Premises - Riverside

Ref.	Service Area	Charging Objectives	Type of Charge	2015/16		Reason for Change	Expected income 2015/16
				Effective Date	Proposed Rate		
CEF1-33	Youth Engagement & Opportunities Riverside Centre	Cost Recovery	Hire of premises	01/04/2015	£31 per day	Response to requests from organisations to hire facility to provide canoe/water based courses for Oxfordshire residents.	£186

Cabinet 24th February 2015
CAPITAL PROGRAMME: 2014/15 TO 2018/19

MONTHLY MONITORING REPORT- SUMMARY PAGE

Directorate	Latest Approved Capital Programme (Cabinet 21 October 2014)			Latest Forecast			Variation			Current Year Expenditure Monitoring				Performance Compared to Original Programme (Council February 2014)		
	Current Year	Future Years	Total	Current Year	Future Years	Total	Current Year	Future Years	Total	Actual expenditure to date	Commitments	Expenditure Realisation Rate	Actuals & Commitments	Current Year	Variation	Use of Resources Variation
	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	%	%	£'000s	£'000s	%
Children, Education & Families 1 - OCC	38,486	119,051	157,537	37,101	126,688	163,789	-1,385	7,637	6,252	23,956	11,001	65%	94%	32,654	4,447	14%
CEF Programme Reductions to be identified	0	-18,421	-18,421	0	-5,814	-5,814	0	12,607	12,607	0	0	0%	0%	0	0	0%
Social & Community Services	13,669	19,299	32,968	3,066	34,152	37,218	-10,603	14,853	4,250	707	1,327	23%	66%	14,019	-10,953	-78%
Environment & Economy 1 - Transport	57,051	84,868	141,919	49,937	131,531	181,468	-7,114	46,663	39,549	20,901	21,443	42%	85%	45,797	4,140	9%
Environment & Economy 2 - Other Property Development Programmes	12,134	15,080	27,214	10,666	24,086	34,752	-1,468	9,006	7,538	4,373	5,005	41%	88%	11,781	-1,115	-9%
Chief Executive's Office	1,362	2,487	3,849	874	4,775	5,649	-488	2,288	1,800	216	37	25%	29%	871	3	0%
Total Directorate Programmes	122,702	222,364	345,066	101,644	315,418	417,062	-21,058	93,054	71,996	50,153	38,813	49%	88%	105,122	-3,478	-3%
Schools Local Capital	2,500	4,861	7,361	2,500	4,861	7,361	0	0	0	2,207	62	88%	91%	1,907	593	31%
Earmarked Reserves	1,405	50,708	52,113	915	45,568	46,483	-490	-5,140	-5,630					0	915	0%
OVERALL TOTAL	126,607	277,933	404,540	105,059	365,847	470,906	-21,548	87,914	66,366	52,360	38,875	50%	87%	107,029	-1,970	-2%

Cabinet 24th February 2015

CAPITAL PROGRAMME: 2014/15 TO 2018/19

In-year Expenditure Forecast Variations

Project / Programme Name	Previous 2014/15 Forecast* £'000s	Revised 2014/15 Forecast £'000s	Variation £'000s	Comments
Children, Education & Families Capital Programme				
Wantage, King Alfred's (ED872)	0	450	450	Contribution funded by s106. Approved by Cabinet Oct 14
Existing Demographic Pupil Provision (Basic Needs Programme)	2,260	851	-1,409	Projects being developed. Draw down of budget provision for the projects below.
Oxford, Cutteslowe - (Phase 3) (ED796)	650	680	30	
Oxford, St Gregory - (Phase 2) New 2FE (ED823)	2,800	2,900	100	Reprofile of delivery programme.
Bletchington - Relocate School & Expansion to 0.5FE (ED841)	950	550	-400	Reprofile of delivery programme.
Reducing Out of County Provision for SEN Pupils (ED810)	3,950	4,000	50	Reprofile of delivery programme.
Wantage, Charlton - (Phase 3) Expansion to 2FE (ED842)	0	600	600	Partly grant funded
Oxford, Larkrise - Expansion to 2FE (ED845)	0	501	501	
Banbury, Frank Wise - Post 16 Provision (ED843)	0	600	600	S106 funded
Oxford, Wolvercote - Expansion to 1.5FE (ED829)	0	1,000	1,000	
Wallingford, Fir Tree Junior - Expansion to 2FE (ED821)	0	150	150	
Didcot, Great Western Park - Primary 1 (14 classroom)	2,000	600	-1,400	Reprofile of delivery programme.
Bicester, South West - 14 classroom (ED822)	3,800	3,400	-400	On-site, reprofile of delivery programme.
Schools Energy Reduction Programme	250	0	-250	No identified projects
Early Years Entitlement for Disadvantage 2 year olds	1,100	600	-500	Reprofile of projects within programme
Other small changes	1,932	1,425	-507	
CE&F TOTAL IN-YEAR VARIATION			-1,385	
Social And Community Services Capital Programme				
HOPs Phase 1- New Builds	10,503	0	-10,503	
Other small changes	150	50	-100	
S&CS TOTAL IN-YEAR VARIATION			-10,603	
Environment & Economy - Highways & Transport Capital Programme				
Kennington & Hinksey Roundabouts	4,760	5,951	1,191	£311k additional funding from pot hole grant to carry out additional carriageway maintenance works. £610k budget increase previously approved by Cabinet (Oct 14).
Harwell Link Rd Section 1 B4493 to A417	2,126	695	-1,431	Stalled land negotiations
Harwell Link Rd Section 2 Hagbourne Hill	2,505	2,048	-457	Stalled land negotiations
Featherbed Lane and Steventon Lights	3,482	2,204	-1,278	Stalled land negotiations
Cutteslowe Roundabout	0	696	696	Initial Business cases approved. Cost reduced as utility diversion not required
Wolvercote Roundabout	0	940	940	
Milton Interchange	5,051	3,300	-1,751	Construction now due to commence in January.
A34 Chilton Junction Improvements	3,522	972	-2,550	Stalled land negotiations. Start date now delayed until 2015/16

Project / Programme Name	Previous 2014/15 Forecast*	Revised 2014/15 Forecast	Variation	Comments
	£'000s	£'000s	£'000s	
Enterprise Zone Sustainable Transport Project - Cycleway improvements - Harwell Oxford to Didcot via Winnaway (GPF)	300	45	-255	Construction start now in next financial year
The Plain Cycle Improvements	716	976	260	Increase in overall budget, however start date now postponed to reduce disruption.
Bicester Park and Ride	2,016	750	-1,266	Deferred to next year due to the S106 agreement being delayed and avoidance of winter working
Bicester Market Square	767	0	-767	Scheme on hold and removed from programme (approved Cabinet Oct 14)
Surface Treatments	4,599	5,291	692	Budget for small schemes now increased by £712k to fully allocate Pot hole grant.
Bridges	1,877	1,268	-609	Heath Bridge & Stert Street now reprofiled to 15/16
Thames Towpath Reconstruction	311	5	-306	Deferred to 15/16 due to resource pressures
A420 Shrivenham Bypass	3,540	2,929	-611	Cost reduction due to site working efficiencies
Other small changes	9,414	9,802	388	
TRANSPORT TOTAL IN-YEAR VARIATION			-7,114	
Environment & Economy Capital Programme (excluding Transport)				
Asset Strategy Implementation Programme	1,460	110	-1,350	Reprofiled unallocated budget
Cambridge Terrace moves to Ron Groves House	0	450	450	New project
Abbey House	1,474	1,685	211	Increased cost
Energy Strategy Implementation (Non-Schools)	634	184	-450	Capital Budget Setting Process - programme removed
Other small changes	1,309	980	-329	
E&E TOTAL IN-YEAR VARIATION			-1,468	
Chief Executive's Office Capital Programme				
Bicester Library (CS13)	1,025	500	-525	Stage 2 approved.
Other small changes	178	215	37	
GEO TOTAL IN-YEAR VARIATION			-488	
CAPITAL PROGRAMME TOTAL IN-YEAR VARIATION			-21,058	

*As approved by Cabinet October 2014

Cabinet 24th February 2015

CAPITAL PROGRAMME: 2014/15 TO 2018/19

New Schemes & Budget Changes

Project / Programme Name	Previous Total Budget* £'000s	Revised Total Budget £'000s	Variation £'000s	Comments
Children, Education & Families Capital Programme				
Oxford, SS Mary & John - Single Site (ED873)	0	350	350	New loan provision previously approved by Cabinet (Oct 14)
Wantage, King Alfred's (ED872)	0	532	532	Contribution funded by s106. Approved by Cabinet Oct 14
Existing Demographic Pupil Provision (Basic Needs Programme)	28,403	24,571	-3,832	Inclusion of Demographic Grant towards Bardwell project. Capital Budget Setting Process £2.680m 2018/19 funding
Wantage, Charlton - (Phase 3) Expansion to 2FE (ED842)	72	1,660	1,588	
Banbury, Frank Wise - Post 16 Provision (ED843)	156	2,108	1,952	Stage 2 approved. Cost escalation of £0.308m between Stage 1 and Stage 2. On-site.
Oxford, Wolvercote - Expansion to 1.5FE (ED829)	205	2,899	2,694	Stage 2 approved. Cost escalation of £0.336m between Stage 1 and Stage 2. On-site.
Oxford, Larkrise - Expansion to 2FE (ED845)	112	649	537	Stage 2 approved. On-site.
Wallingford, Fir Tree Junior - Expansion to 2FE (ED821)	52	366	314	Stage 2 approved.
Bicester, South West - 14 classroom (ED822)	6,949	7,335	386	Cost increase met from s106
Schools Access Initiative	1,981	2,381	400	Capital Budget Setting Process - 2018/19 allocations for annual programmes and savings towards Basic Need Funding Gap
Health & Safety - Schools	1,648	1,598	-50	
School Structural Maintenance (inc Health & Safety)	14,863	15,613	750	
Temporary Classrooms - Replacement & Removal	1,479	1,829	350	
Schools Accommodation Intervention & Support Programme	575	375	-200	
Early Years Entitlement for Disadvantage 2 year olds	1,572	2,422	850	Additional funding approved by Cabinet Oct 14
Other small changes	55,090	54,721	-369	Contingencies returned towards Basic Need Funding Gap
Programme reductions to be identified	-18,421	-5,814	12,607	Basic Need Funding Gap 2015/16 to 2017/18
CE&F TOTAL PROGRAMME SIZE VARIATION			18,859	
Social And Community Services Capital Programme				
Adult Social Care Programme	0	4,250	4,250	Capital Budget Setting Process
S&CS TOTAL PROGRAMME SIZE VARIATION			4,250	
Environment & Economy - Highways & Transport Capital Programme				
Kennington & Hinksey Roundabouts	6,667	7,328	661	Budget increase approved Cabinet Oct 14.
Hinskey Hill Northbound Slip Road	0	8,700	8,700	
Harwell, Oxford Entrance	0	2,000	2,000	Initial Business Cases approved. City Deal Schemes
Cuttleslowe Roundabout	0	4,100	4,100	
Wolvercote Roundabout	0	4,824	4,824	
Didcot Northern Perimeter Road 3 (project development)	0	500	500	Initial Business Case approved (Cabinet 27 Jan 15)
Frideswide Square	5,478	5,842	364	Budget increase approved by Cabinet 27th Jan 14
The Plain Cycle Improvements	965	1,346	381	Budget increase previously approved

Project / Programme Name	Previous Total Budget*	Revised Total Budget	Variation	Comments	
	£'000s	£'000s	£'000s		
Oxford Station to City Centre Improvements (project development)	0	60	60	Project Development budget released. Total scheme cost est. £3.5m inc maintenance works. Funding bid through LGF3.	
Bicester Market Square	1,116	0	-1,116	Scheme on hold and removed from programme whilst Public Realm Audit Continues.	
Witney, A40 Downs Road junction (project development)	200	1,250	1,050	Outline Business Case approved Cabinet Dec 14	
East-West Rail (contribution)	2,798	3,535	737	2018/19 contribution added via budget setting process	
Carriageway Schemes (non-principal roads)	14,603	17,723	3,120	£17.6m additional structural maintenance funding for the provisional 2017/18/19 programme as part of the budget setting process. £1.3m further inclusions reflecting full allocation of pothole grant	
Footway Schemes	5,182	6,163	981		
Surface Treatments	16,192	25,275	9,083		
Street Lighting Column Replacement & Traffic Signals	1,970	2,545	575		
Drainage	3,922	4,850	928		
Bridges	4,084	7,988	3,904		
Public Rights of Way Foot Bridges	500	600	100		
Network Rail Electrification Bridge Betterment Programme	2,916	2,266	-650		Reduced requirement
A4130 Bix dual carriageway	4,930	4,719	-211		Cost reduction due to site working efficiencies
A420 Shrivenham Bypass	3,904	3,128	-776		Cost reduction due to site working efficiencies
Other small changes	487	721	234		
TRANSPORT TOTAL PROGRAMME SIZE VARIATION			39,549		
Environment & Economy Capital Programme (excluding Transport)					
Asset Strategy Implementation Programme	2,212	5,945	3,733	Capital Budget Setting Process £4.5m additional funding	
Cambridge Terrace moves to Ron Groves House	0	551	551		
Abbey House	1,505	1,716	211		
Energy Strategy Implementation (Non-Schools)	1,973	323	-1,650	Capital Budget Setting Process - programme removed	
Non-Schools Property Structural Maintenance Programme	573	0	-573	Capital Budget Setting Process - programme removed	
Minor Works Programme	1,537	1,704	167	Capital Budget Setting Process 2018/19 added	
Health & Safety (Non-Schools)	162	212	50	Capital Budget Setting Process 2018/19 added	
Oxford Flood Relief Scheme	0	5,000	5,000	Capital Budget Setting Process - new	
Other small changes	7,124	7,173	49		
E&E TOTAL PROGRAMME SIZE VARIATION			7,538		
Chief Executive's Office Capital Programme					
Westgate Library	0	1,500	1,500	Capital Budget Setting Process	
Oxfordshire Museum	0	300	300	Capital Budget Setting Process	
CEO TOTAL PROGRAMME SIZE VARIATION			1,800		
CAPITAL PROGRAMME TOTAL PROGRAMME SIZE VARIATION			71,996		

*As approved by Cabinet October 2014

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Division(s): All

CABINET – 24 FEBRUARY 2015

Proposed Adult Social Care Policy Framework

Report by Director of Adult Social Services

Purpose of this report

1. The purpose of this report is to agree the new policy framework for Adult Social Care.
2. The proposed policy framework has been developed to address changes relating to the Care Act 2014 alongside other relevant legislation, (including the Children and Families Act 2014 where appropriate), government directives and the council's Adult Social Care Business Strategy and commissioning strategies. The framework is informed by the expertise and the views of front line staff and people who have adult social care, their families, friends and carers.
3. Much of what is proposed consolidates the approach which is already being taken by the council, and as such the policy framework formalises existing good practice in Oxfordshire. It will also be important to ensure the framework is effectively implemented through operational guidance and staff training, reinforcing consistent high quality professional practice across teams.

The Care Act 2014

4. Adult social care includes supporting people with dressing, eating, getting in and out of bed and going to the toilet. It can involve psychological support and help with getting around. People may need this support because they are frail, have disabilities or are ill. The majority of older people will need personal care at some time in their life (67% men and 85% women).
5. The Care Act 2014 Act creates one main legal framework by replacing most of the existing Adult Social Care legislation and incorporating good practice into a single statute focused on individuals, families, their wellbeing and what they wish to achieve in their lives. The Act also gives local authorities more universal duties to their residents that build on existing practice, including making information and advice about social care widely available and partnership working with others such as the NHS.
6. From 1st April 2015 the Care Act requires implementation of the reforms in providing care and support. From 1st April 2016 the council will be required to implement financial reform and changes in relation to Complaints and

Appeals. A consultation on these elements has just been launched by the Department of Health and the council will be responding by the deadline on 31st March 2015.

7. The overall direction and values in the new legislation are a continuation of the way we have been developing adult social care in Oxfordshire for the past decade. The council has worked consistently towards making sure that people themselves can make decisions about their own support and care, and supporting them to be as independent and active as possible, as well as increasing the support available to people who care for their families, partners, friends and neighbours.
8. Each year there is a national survey of adults who have support and care through local authorities. Last year Oxfordshire's results showed that we had the ninth highest proportion of people in the country who agreed with the statement 'I have control over my own life'.
9. One of the most significant changes is that the Care Act puts carers, people who care for others and provide help in meeting their support and care needs, on the same legal footing as those they care for. This is important in recognising the vital role carers play for both the person they care for, and the value they bring to the local economy as a result.

The Policy Framework - Key Changes, Impacts and Decisions

10. The policy framework is composed of five high level policies which define the council's approach to Adult Social Care in Oxfordshire. These are:
 - Assessment and Review Policy (working out needs)
 - Support Planning Policy (planning to meet needs)
 - Contributions Policy (paying for support and care)
 - Complaints, Appeals and Compliments Policy
 - Safeguarding Policy
11. This section highlights where the policies propose changes in how Adult Social Care is provided in Oxfordshire. Most of these changes result from the Care Act so the council must enact them to be compliant with the legislation.
12. In some areas the Care Act allows discretion and the council can therefore decide the approach we can take. Proposed responses to these decisions are also highlighted here.

Policies

Assessment and Review Policy

13. This describes what will happen when a person first comes to the council for help. Overall it does not introduce significant changes from current good practice in Oxfordshire.

14. The Care Act gives the council a duty to offer a needs assessment to anyone who comes forward looking for support and care, regardless of their financial circumstances and what we think their needs might be, including people who care for others. Everyone must be treated equally regardless of their ability to pay.
15. Once a person's needs have been identified, the council then works out which of those needs are eligible for support arranged by us. This is not related to working out how much people will need to pay towards their care as this is worked out separately through a financial assessment.
16. The Care Act includes new national eligibility criteria based on whether or not a person can achieve the things they want to - for example washing, eating and sustaining relationships. Using the new criteria has been tested by adult social care teams and compared to using the current criteria. These tests suggest that the new criteria will lead to a similar proportion of people being assessed as eligible for services as currently.
17. The Care Act requires that people who have a support plan have this reviewed at least every 12 months, which reflects current practice. The council can authorise others (for example care home staff, other professionals or the person's own carer) to carry out reviews with people who have a support plan. This is not usual practice in Oxfordshire currently, although some reviews are delegated to appropriate professionals such as hospital or reablement staff while social workers retain responsibility if there are changes to the support plan.
18. It is, however, a practical way of making sure people have control of making sure they have the right support and care in place, alongside those closest to their care. It will also help the council to meet the pressures of additional demand for assessments and reviews anticipated as a result of increasing numbers of older people and people with a disability, and other changes in the Care Act.
19. The council would still be vigilant as regards safeguarding vulnerable people and would retain overall responsibility and formal sign off of all reviews.
20. **It is proposed that the council will authorise others to carry out reviews on its behalf when appropriate, whilst maintaining overall responsibility and oversight.**

Support Planning Policy

21. This policy describes how plans will be put in place to meet a person's eligible needs. As with Assessment and Review, the policy does not introduce significant change to current good practice in Oxfordshire.
22. The Care Act requires that people are closely involved in planning their support and that they have their plan expressed as a calculation of the cost of

meeting their needs - known as a Personal Budget. This is the way that support planning is already carried out in Oxfordshire: we are in the top 15% of local authorities in the country for numbers of people who have Personal Budgets.

23. The Act says that people should be able to receive this as a payment for them to spend as they choose to meet their needs, called a Direct Payment. Oxfordshire already has the fifth highest percentage of any English Local Authority of people receiving their care through Direct Payments.
24. Everyone with eligible needs will have a support plan which will be regularly reviewed.

There is no significant change in existing policy for support planning except in relation to overarching issues - carers' entitlements, independent advocacy and information and advice (outlined later in this report)

Contributions Policy

25. Most people who have social care through the council pay something towards the costs. The contributions policy sets out how this is worked out fairly, starting with a financial assessment to see what a person can afford. The Care Act introduces changes in this area, as well as a number of other areas where the council has discretion as to what approach to take. These are highlighted below.
26. Some changes in relation to charging do not become law until April 2016. These concern a cap on how much people will have to pay for their care and support over their lifetime. This is not included in the policy at this time, but the council will be responding to the current Department of Health consultation on this area that closes on 31st March 2015.

Deferred Payment Agreements

27. The Care Act makes Deferred Payment Agreements universally available. A Deferred Payment Agreement is a way of releasing financial resources held within a person's home to pay for care. The money is repaid either when the person sells their home or dies, and is a way to help people pay for care without having to sell their home. The council has offered people Deferred Payment Agreements for several years so there will be no change to current practice as a result of the Act.
28. As a result of the Care Act, the council now has the option to charge an arrangement fee to cover the costs to the council of setting up these agreements. These costs include legal and ongoing administrative costs.
29. **It is proposed that the council charges a single, flat arrangement fee for Deferred Payment Agreements of £680 and that people have the option to pay this up front and in full, or to add it to the loan in which case**

interest will also be charged at the level set for the deferred payment agreement.

30. This fee is based on the costs typically incurred to date by Legal Services in operating the council's existing, discretionary deferred payment agreement scheme, and benchmarking suggests this is at the lower end of the charges proposed by some other authorities.
31. This fee will cover:
 - (a) Costs of all typical legal disbursements including Land Registry copies, Land Charges search (bankruptcy search against the resident), Land Registry search (done before registration) and Registry lodgement fee.
 - (b) Costs of staff engaged in providing advice, legal services, financial assessment, contracting with the care provider and monitoring the accruing deferred debt.
 - (c) Costs of setting up documentation, maintenance invoicing and related documentation.
32. The Care Act also allows the council to charge interest in relation to Deferred Payment Agreements. The council has discretion to charge interest at a local rate or at the maximum level suggested by the Department of Health. This national rate will be reviewed and adjusted every six months.
33. **It is proposed that interest is charged at the maximum level set nationally (2.6% currently), and adjusted to reflect any changes in this level every six months.**
34. As part of arranging a deferred payment agreement, it is necessary to value the property. Current practice is to use a combination of internet based information and local knowledge supported by market pricing by the individuals' own agents in the majority of cases. This means the council incurs negligible costs.
35. In cases involving unusual properties or title holding or restricted equity available to support a deferred payment agreement, the council will itself commission formal valuations using its retained valuers, Carillion. Under the Care Act, the council is now able to pass on the full cost of this valuation to the individual.
36. **It is proposed that valuation costs are passed on to the person, and that they have the option to pay this up front and in full, or to add it to the loan in which case interest will also be charged at the level set for the deferred payment agreement.**

Arranging care for 'self-funders'

37. People who pay the full cost of their support and care will be able to come to the council to ask for help arranging and purchasing services if they have been assessed as having eligible needs. The council already provides this

help in some circumstances, such as when supporting someone to leave hospital in a timely way.

38. The Care Act means that there are likely to be more people who come forward to be assessed for the first time, and then for help in planning their support. If someone pays for their own care and support and has not previously had involvement from the council they are sometimes referred to as a 'self-funder'. It has been calculated that there are between 3000 and 3500 people who currently pay for their own support and care at home and have not been in contact with the council's adult social care services.
39. The council can now charge people for help in arranging and purchasing the care they need to remain at home or living independently in the community (domiciliary / home care), but only at a level to cover costs incurred by the council in doing so. This charge would cover assistance with purchasing and arranging care. The council cannot charge for carrying out assessments, preparing support plans and reviews of support.
40. The council cannot charge people for arranging care in a care home. It is proposed by the Department of Health that this will be introduced in April 2016, linked to funding reform. If the final regulations and guidance (currently expected in October 2016) allows this a decision will be brought forward at that time about introducing a charge.
41. **It is proposed that the council charges people who pay the full cost for their support and care other than in a care home a one-off fee for arranging this.** There will be two levels to this fee reflecting differing cost to the council incurred of simply negotiating a contract with a provider, or actively helping to manage the relationship between the provider and the individual:
 - (a) £150 where the council acts as a broker, negotiating and agreeing care with a provider or providers on behalf of the individual
 - (b) £500 where the council acts as a broker as above, and also manages the provision of the care and support on behalf of the individual (including paying the provider, quality and contract monitoring).

Backdating charges

42. At present, the council can **backdate charges** for people moving into a care home to the point they move in, even if a financial assessment had not taken place at that date. For people who have support and care at home, charges can only be backdated to the point at which people are made aware of the outcome of their financial assessment.
43. Under the Care Act, the council now has discretion to backdate charges for support and care at home as well as residential care to the point at which the person started receiving services, rather than the point at which they were informed of the outcome of their financial assessment.

44. The council is committed to carrying out financial assessments as soon as possible so that people know what they can expect to pay and there are no surprises or large bills at a later date. Work will continue to make sure processes allow for financial assessments to take place early and that people are informed of the outcome in a timely way.
45. **It is proposed that the council backdates charges to the point when services start even if a financial assessment had not yet taken place as from 1st April 2015, while remaining committed to assessing people as soon as possible once eligible needs have been identified.**

Higher rate Disability Living Allowance and Attendance Allowance

46. The Care Act now stipulates these benefits must be taken into account fully in financial assessments, whereas previously they had to be disregarded. This will slightly increase the contributions of some people, but as a legislative change the Council has to implement this.
47. For people going into residential care, it is likely to cost an additional £320 in total. This is because the Department of Work and Pensions should cease payment of the benefit no later than four weeks after that placement begins or sooner if the person has been in hospital previously. This will require two financial assessments to be undertaken however, to reflect contributions in the first four weeks and contributions thereafter.
48. For people receiving care and support at home, lower and mid-rate is already taken into account. Including higher rate is likely to increase people's contributions by around £20 a week.
49. The council is contacting all existing service users this will affect prior to April 2015.

Personal Injury Awards

50. The Care Act is explicit that local authorities cannot take personal injury awards that have been settled or are held in trust into account in financial assessments. This change in policy is likely to lead to a reduction in income for the council as previously it was possible to take this into account.
51. However, if the Council is involved in proceedings prior to settlement it may still be possible to build additional money into the settlement to cover the cost of care without reducing the amount of compensation paid directly to the individual. Although this will apply to a small number of cases, the council will continue to endeavour to be involved in proceedings as early as possible.
52. There will also be a small number of personal injury awards that are not held in trust. The Council cannot include them in a financial assessment for the first 52 weeks from when they are awarded, but can then take them into account.

Appeals, Complaints and Compliments Policy

53. The Department of Health is currently consulting on how the Care Act will implement change to the way that appeals and complaints about adult social care are managed from 1st April 2016 onwards. In the meantime complaints about adult social care must follow the statutory guidance (The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009). This, along with current practice in handling appeals and complaints is incorporated in the Appeals, Complaints and Compliments policy.
54. The council can decide whether to accept complaints from people paying for their own care, including through Direct Payments, whether or not they have been assessed as having eligible needs.
55. The first step in managing a complaint will always be to direct the person to the organisation providing care who will have their own complaints process. Where the council has a contract with the organisation to provide care then we will set up an investigation through our quality monitoring teams. Where the council has no contract with the organisation or care is being provided by a personal assistant the council will refer the complaint to the appropriate body to take action (for example the police, the Care Quality Commission or the Local Government Ombudsman).
56. However complaints are managed it is vitally important that the council hears from people when something goes wrong with their support and care, wherever they are receiving it. Hearing these messages means that the council has an overview of the whole picture for people who have support and care, where organisations are not working so well, and where systems and processes need to change or improve. Learning from both complaints and compliments is vital for letting the council know where things are good and where they need to improve.
57. **It is proposed that the council will accept complaints from people paying for their own care, including through Direct Payments, and will signpost to the appropriate body to investigate. This may be the organisation providing care and support, the Local Government Ombudsman, Care Quality Commission or others.**

Safeguarding Policy

58. The Care Act states that the council is responsible for making sure that enquiries are made when safeguarding concerns are raised, whether or not the person has eligible support needs and whether or not they are receiving care and support services arranged through the council.
59. The Act also makes it statutory that a partnership Board is established to help ensure that all relevant organisations are involved in overseeing safeguarding adults.

60. In Oxfordshire there is already an Adults Safeguarding Board, and safeguarding alerts are considered regardless of whether a person has eligible needs being met through the council. The Care Act guidance helps with definitions of what constitutes safeguarding and this is engendered in the policy.

There is no significant change in existing policy around safeguarding.

Universal Duties

61. The Care Act introduces duties which apply across all areas of policy and these are included within the framework.

Carers

62. Oxfordshire has made a strong commitment to supporting people who care for others in recognition of their essential and vital role both in caring and in keeping people as well and as independent of services as possible. This is estimated as saving local authorities £119 billion nationally, translating to an estimated £1.19 billion in Oxfordshire.
63. The Care Act puts carers (people providing necessary support and care for someone else other than as a worker either paid or unpaid) on the same legal footing as people who need support and care, whether or not the person they care for has needs which are eligible.
64. Carers will now be entitled to an assessment of their own need for support and their own eligibility will be assessed taking into account their caring role, their wellbeing and the outcomes they want to achieve. If a carer is eligible they will be entitled to a support plan and a calculation of the amount of money it would take to meet their needs (a Personal Budget). This can be transferred to them as a Direct Payment to spend as they wish to meet their needs.
65. It is anticipated that more carers will come forward for an assessment as a result of these changes. The Council is currently aware 16,095 carers, and modelling suggests this could increase by up to 5,000 in the first year and an additional 600 per year thereafter.
66. Currently carers' services are provided free of charge, supporting people in continuing to care. The council could choose to charge carers if they have eligible needs for care and support and are financially assessed as being able to contribute to the cost of this. This would generate some potential income for the council, although this would be at least partly offset by additional costs associated with means testing through a financial assessment. Such a policy change would also require full consultation.
67. Carers often find it difficult to come forward for help, and may not even define themselves as a carers but as 'a mother' 'a husband' or 'a friend'. Putting further barriers in the way (such as financial assessment) could lead to a

significant number of people not getting the support they need and therefore finding their caring role unsustainable. In the longer term this could significantly increase costs to the public purse across health and social care.

68. **It is proposed that the council continues to provide support for carers free of charge.**

Information, Advice and Guidance

69. The council must make sure that information, advice and guidance are available to people, whether or not they have needs for support and care. People should be able to find out how to arrange support and care themselves, where to get help with delaying or reducing any need for support, and where to find a range of independent financial advice to help make decisions about paying for care.
70. Work is underway to review our current provision of information and advice to make sure that it is comprehensive and that people know how to access it. By 1st April there will be an improved range of on-line information available on the council's website along with an updated version of a hard copy booklet about where to find support and care. These will include where to find independent financial advice. During the next year there will be a review of commissioning arrangements for information, advice and guidance.

This does not involve a change in policy.

Providing equipment and early help

71. The Care Act states that the council must make sure that people can access services such as equipment and assistive technology (for example emergency call out alarms, movement sensors or talking food labels) to help them remain independent for as long as possible. This is current practice in Oxfordshire where the council provides these as part of support plans as well as without full assessment. If equipment is provided to someone who has not been assessed as having eligible needs, then the person cannot be asked to contribute to the costs. It is estimated that 11,387 people will have received equipment this financial year, based on figures to date, at a cost of £4.07million.
72. It is anticipated that once the Care Act is implemented in April more people will come to the council to have their needs assessed and to ask for help arranging their care and support. Where these people are provided with simple equipment the cost is estimated at £150/person.
73. Timely early intervention, however, is expected to save the council money in the longer term by reducing or delaying people's need for more expensive services. There is a full review planned of the circumstances in which equipment is provided which will include examining and improving the processes for people to access their own equipment directly.

74. **It is proposed that the council continues to provide equipment and short term support at home free of charge and that a full review of providing equipment is carried out by the autumn. The outcome of the review may result in reviewing the policy framework.**

Independent Advocacy

75. An independent advocate is someone who supports a person in having their voice heard. They do not advise or put forward their own views but work with people to find out what their wishes are and then to decide how best to get them across to others.
76. The Care Act requires that unless the person has someone appropriate to help them, (which could, for example, be a family member, friend or neighbour), the council must arrange independent advocacy for anyone who has 'substantial difficulty' in taking part in their assessment, support planning or reviews, in understanding information and advice, or in taking part in a safeguarding investigation. This is whether or not they have been assessed as having mental capacity under the Mental Capacity Act 2005.
77. Currently the council does not involve independent advocates except in specific circumstances (for example in relation to the Mental Capacity Act or when someone is making a complaint). There is likely to be an increased demand for independent advocacy which is being addressed through commissioning of these services.
78. This involves a change from current practice. The council does not usually involve independent advocates except in specific circumstances (for example in relation to Mental Capacity). From 1st April 2015, when a person approaches the council for help with support and care we must consider independent advocacy during assessment, support planning, reviews and when offering information and advice.

Financial and Staff Implications

79. The policy framework has been developed working closely with operational teams in adult social care to ensure that staff implications have been taken into account. A programme of training and communications relating to the Care Act and changes in policy for staff both at the council and partners is underway. Operational guidance is being developed with front line staff and will be used for training as well as being available on the intranet. This will also form the basis of information for the public about what they can expect from the council.
80. There are some financial implications which will not be fully understood until after April 2015. However, the impact of more people coming to the council for care and support is being modelled, and guidance in policy implementation is being developed to ensure that as far as possible there are no unexpected increases in cost.

81. There is some national government funding available to support changes related to the Care Act (for example carers' eligibility). This will not all be allocated from 1st April to allow close monitoring of any increased or changed demand over the coming months, and allocation of funds to the areas where it is needed.

Unsecured debt

82. The Health and Social Services and Social Security Adjudications Act 1983 – Section 17 will be repealed with effect from April 2015. This could lead to an increase in unsecured debt as the Council will no longer be able to negotiate interim funding until a deferred payment agreement is put in place. This will be mitigated by changes in process to ensure financial assessments are completed as soon as possible.
83. There are some specific financial issues highlighted above in relation to **Personal Injury Awards** and **Higher rate Disability Living Allowance and Attendance Allowance** (paragraphs 46-52 above).

Equalities Implications

84. There has been a Service and Community Impact Assessment carried out for the implementation of the proposed framework. This is available on the public website as a background document to this report.
85. This assessment has identified that the majority of people will not be adversely affected by any changes. There are some positive impacts on groups who share protected characteristics under the Equality Act 2010, specifically those with disabilities and older people through further embedding the council's person-centred approach and focus on well-being and independence.
86. The assessment highlights impact on staff capacity (and therefore potentially service) especially in the Customer Service Centre, front line operational teams. This is being addressed through modelling any potential increase in workload and numbers of people coming forward, continued work to make processes as straightforward as possible, and will continue to be closely monitored after 1st April.
87. There is likely to be a positive impact on fair access to support for carers through assessing individual needs based on national eligibility criteria. There will be increased transparency about the way that social care is accessed for everyone.

RECOMMENDATION

88. Cabinet is RECOMMENDED to agree the proposed Adult Social Care policy framework, and in particular the specific recommendations outlined in this report:

- **Authorises others to carry out reviews when appropriate while retaining oversight and responsibility**
- **It is proposed that the council charges a single, flat arrangement fee for Deferred Payment Agreements of £680**
- **Charges interest in relation to Deferred Payment Agreements at the maximum national rate (2.6% currently) and this is adjusted to reflect any changes in this level every six months**
- **Passes property valuation costs to the individual in relation to setting up Deferred Payment Agreements and that they have the option to pay up front and in full or to add to the loan, in which case interest will be charged at the level set for the deferred payment agreement**
- **Charges people who pay the full cost for their support and care other than in a care home a one-off fee for arranging this.** There will be two levels to this fee reflecting differing cost to the council incurred of simply negotiating a contract with a provider, or actively helping to manage the relationship between the provider and the individual:
 - £150 where the council acts as a broker, negotiating and agreeing care with a provider or providers on behalf of the individual
 - £500 where the council acts as a broker as above, and also manages the provision of the care and support on behalf of the individual (including paying the provider, quality and contract monitoring)
- **From 1st April 2015, backdates charges for non-residential care as well as for residential care to the point at which the person started to have the support and care, while remaining committed to assessing people as soon as possible once eligible needs have been identified**
- **Accepts complaints from people paying for their own care and support including through a Direct Payment, accepting that this may involve asking organisations providing care to investigate or sign posting to an appropriate place to investigate (for example the Local Government Ombudsman)**

- **Does not charge carers a contribution to the cost of their support**
- **Continues to provide equipment free of charge before full assessment to aid independence and reduce or delay needs for care**

JOHN JACKSON
Director of Adult Social Services

Annexes:

- Assessment and Review Policy (working out needs)
- Support Planning Policy (planning to meet needs)
- Contributions Policy (paying for support and care)
- Complaints, Appeals and Compliments Policy
- Safeguarding Policy

Background document;

Service and Community Impact Assessment – available on the web site and in the Members Resource Room

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February 2015

Oxfordshire County Council Policy for Assessment and Reviews in Adult Social Care

Purpose

1. This policy outlines what the council will do to ensure that people who may have care and support needs are able to access an assessment of their needs and review of their support plan (if they have one) in Oxfordshire.
2. This policy applies to adults and carers regardless of the level of their need and financial resources.
3. This policy applies to young carers, young people who may have social care needs when they become an adult and young people's carers who are likely to have needs for support after the young person becomes 18 regardless of the level of their need and financial resources.
4. This policy is based on relevant Government legislation and guidance including:
 - the Care Act 2014, associated regulations and statutory guidance (which have replaced most of the previous legislation on assessment and eligibility including National Health Service and Community Care Act 1990 and Fair Access to Care Services: Guidance on eligibility criteria for adult social care);
 - the Mental Capacity Act 2005;
 - the Mental Health Acts 1983 and 2007;
 - the Children and Families Act 2014.
5. This policy should be read in conjunction with other county council policies and associated guidance. This includes other adult social care policies and children's social care policies where applicable **(insert link when available)**.
6. It should also be read in conjunction with partners' policies where applicable. Examples include health commissioning and provider partners' policies and guidance, including on NHS Continuing Healthcare and mental health services.

Context

7. Oxfordshire County Council aims to support and promote strong communities so that people live their lives as successfully, independently and safely as possible. The council aims to provide independence and choice, be fair and equitable and give individuals more power and control over their lives.
8. Assessment is an opportunity that can help people to understand their situation and the needs they have, their strengths and capabilities, what is available in the community to support them, how to reduce or delay needs from escalating and how to access support if they require.

9. The assessment will include an assessment of the needs for care and support the person may have, the outcomes that they want to achieve in day-to-day life and how the provision of care and support could contribute to the achievement of those outcomes and promote their wellbeing.
10. The council will ensure that the person's wellbeing is considered throughout the assessment and review processes. Wellbeing relates to any of the following
 - a. personal dignity (including treatment of the person with respect);
 - b. physical and mental health and emotional well-being;
 - c. protection from abuse and neglect;
 - d. control by the person over day-to-day life (including over care and support provided and the way it is provided);
 - e. participation in work, education, training or recreation;
 - f. social and economic well-being;
 - g. domestic, family and personal relationships;
 - h. suitability of living accommodation;
 - i. the person's contribution to society.
11. The council's guiding principle is that people themselves, regardless of age or ability, are best placed to determine what help they need.

Policy Principles

12. Where the council exercises its duty to assess, the following principles will be applied:
 - **The council will ensure that people, regardless of the level of their needs and their financial situation, have access to an assessment.**
 - **Assessment is a person-centred process that will provide a picture of the person's needs, strengths, preferences and outcomes that they wish to achieve to maintain or improve their wellbeing.**
 - **Assessment process starts with the first contact with the council and will be appropriate and proportional to the person's circumstances and needs.**
 - **The council will identify all needs presented before considering eligibility for the council's support and services that can help to meet those needs.**
 - **The council will decide whether the person's needs meet the eligibility criteria on the basis of the assessment.**
 - **The council will signpost people to organisations and opportunities to find support where appropriate.**

- **The council will share with the person the options available including those that they can follow through themselves.**
- **The council will provide people with information and advice suitable to their needs as a part of the assessment process.**
- **The council will consider providing or arranging interventions such as equipment, minor adaptations to their home and assistive technology as a part of the assessment process.**
- **The council will keep support plans under review.**

Transparency

13. The way in which the council carries out assessments and reviews, and determines what support people are eligible to receive from the council will be as simple and transparent as possible.
14. The council will make clear the appeals process for when agreement cannot be reached on the final assessment and the council's eligibility decision in its Appeals, Complaints and Compliments Policy.
15. The council will make clear the complaints process, where the person, their families, friends and others can raise concerns about the assessment and review processes or any other aspect of receiving care and support from the council. This is covered by the Appeals, Complaints and Compliments Policy and associated guidance.

Information and Advice

16. The council will ensure clear, comprehensive and wide-ranging information and advice on care and support is available in a range of formats to empower people to make informed choices.
17. The council will ensure people have access to independent financial information and advice relating to care and support to help them plan, prepare and pay for their care costs.

Fairness and Equity

18. A single policy for assessment and reviews ensures people are treated fairly and equitably. This policy applies to all adults, carers, young people in transition and their carers as well as young carers in transition regardless of their circumstances.
19. This policy applies irrespective of a person's ability to pay. Whether a person needs to make financial contribution towards meeting their needs will be

determined via a financial assessment in accordance with the council's Contributions Policy.

20. People whose financial resources are above the financial threshold that determines that they will pay for all their care and support will not be excluded from the assessment process if the council becomes aware of this information.
21. Carers are entitled to request an assessment regardless of whether the person they care for has eligible needs, their circumstances, and the level of their needs or financial resources.
22. Eligibility for the council's support will be determined by the National Eligibility Criteria set out through the Care Act 2014 and detailed in the council's Guidance.
23. Where people require support to be involved in the assessment and review processes and they are not able to arrange appropriate support themselves through family, friends or others involved, the council will arrange an independent advocate.

Choice and Control

24. The vision for adult social care in Oxfordshire is to enhance people's choice and control over their lives, as the council believes that people themselves are best placed to determine the care and support they need.
25. The council will provide people with information about the assessment process and the National Eligibility Criteria to help them decide whether they want an assessment from the council.
26. The council will ensure people are at the centre of assessment and reviews, and are supported to take as much control as they are able and willing to do.
27. A number of different assessment options will be available for people, including supported self-assessment, telephone assessments and face-to-face assessments according to the person's needs, preferences and circumstances.

Partnership

28. The council will work closely with its partners and providers who also have responsibilities for assessing needs (such as people with mental health conditions). The council will aim to reduce duplication and to prevent the person having to undergo a number of assessments at different times. This may include sharing personal information where the person consents.
29. Where a person has both health and care and support needs, the council and the health partners will work together to deliver a coordinated approach taking into account all aspects of a person's life.

30. The council will ensure that adult's and children's services work together to deliver an effective transition process that will prevent young people and families from attending multiple assessments, and maximise positive outcomes.

Promoting prevention, early intervention and independence

31. The council will ensure there is a wide range of services available to everyone irrespective of their eligibility for the council's support to encourage and enable independence and prevent needs from escalating.
32. The council will consider intermediate care services, such as reablement, as a part of the assessment process with the aim of preventing or deferring the need for more intensive social care services.
33. As part of the assessment process, the council will also consider and discuss with people early intervention options, such as providing equipment, minor adaptations to their home and assistive technology, which can delay needs from progressing and promote independence
34. The assessment process and the determination of eligibility for on-going care and support will continue following intermediate care and early interventions to determine whether the person gains independence or requires more intensive options.
35. People's care and support will be kept under review to ensure their plans continue to meet their assessed needs, enable them to work towards their outcomes, maximise independence and promote wellbeing.

Policy Inclusions

36. This policy applies to adults, carers, young people and young carers likely to have needs for care and support after becoming 18 and young person's carers who are likely to have needs for care and support after the young person becomes 18.
37. This policy applies regardless of the level of people's need and financial resources. It also applies to all settings, including prisons.
38. The council will not exclude people from assessment or review on the basis of ordinary residency. A person is usually 'ordinarily resident' where they live; more detail is available in the associated guidance.
39. The council will offer a new carer's assessment in accordance with this policy to those who present themselves to the council.
40. Eligibility to receive services from adult social care is determined following the assessment which is then followed by an eligibility decision using national eligibility criteria and the council's eligibility guidance.

41. Reviews of care and support will be carried out in accordance with the 'Review of Support Plans' section of this policy.

Policy Exclusions

42. Where a person has received an assessment under the previous legislation the council will not undertake a new assessment unless the council becomes aware that the person's needs have changed or the person requests a new assessment.
43. This policy does not apply to people who decide not to take part in the Council's assessment and review processes (see decision not to take part in assessment and review section).

Decision not to take part in assessment or a review

44. The council considers that people themselves are best placed to make decisions about their care and support, including whether or not to accept help from the council in assessing or reviewing their needs.
45. Where a mental capacity assessment concludes that the person lacks capacity to make the decision not to take part and there is no substitute decision maker, a best interests process will be carried out in accordance with the Mental Capacity Act (see associated guidance). This process ensures that the best interests of the person are taken into consideration, including their views on whether or not to accept help from the council in assessing their needs. If the outcome of the best interests process is that it is in the person's best interests for the council to carry out an assessment, this policy will apply.
46. If the person does have capacity but they appear to have care and support needs which if not met will leave them or others exposed to high levels of risk, a multi-agency risk assessment will be carried out to determine the level of risk and to decide what action (if any) should be taken to reduce this. This is covered in the associated guidance.

Mental Capacity

47. In line with the principles set out in the Mental Capacity Act, the council will assume that people have mental capacity and can make decisions for themselves unless it is established otherwise.
48. The council will facilitate the person's involvement and supported decision making throughout the assessment and review processes as much as possible. This will be the case whether they have mental capacity or not, in line with the principles set out in the Mental Capacity Act.
49. If the council reasonably believes a person may lack capacity to make a decision in the assessment or review process, it will carry out a capacity

assessment in relation to the specific decision to be made. This and the following steps are covered in the associated mental capacity guidance.

50. If a person has been assessed as lacking capacity to make a decision in relation to an assessment or a review, the council will determine if there is an appropriate substitute decision maker. This will usually be someone who holds Lasting Power of Attorney for Health and Welfare.
51. If a person has been assessed as lacking capacity to make a decision and there is not an appropriate substitute decision maker, the council will follow the best interests process set out in the Mental Capacity Act to reach the decision. This will include consulting interested family and friends to obtain their views.

Independent Advocacy

52. For people who have mental capacity to make decisions but experience substantial difficulty in understanding the information provided; retaining the information; using or weighing up the information as part of the process of being involved; or communicating the person's views, wishes or feelings, the council will consider whether a friend, family member or others can facilitate the person's involvement and who would be the best person to do so.
53. Where there is no such person to represent and support the person, or there is a reason for not involving them in the assessment and review processes (such as safeguarding or a family dispute), the council will arrange an independent advocate to support their involvement.
54. People themselves, carers or family members can request support from an independent advocate.

Safeguarding

55. In cases where the person (including carers) chooses not to have an assessment but the council identifies that the person is experiencing, or is at risk of experiencing, abuse or neglect, the council will carry out an assessment.
56. When carrying out an assessment, if the council suspects that the person is at risk of abuse or neglect then, a safeguarding enquiry will be carried out (see Safeguarding Policy and accompanying procedures for details).
57. Where appropriate, the assessment process will run parallel to the safeguarding enquiry and the safeguarding enquiry will not disrupt the assessment process.

Assessment Policy

58. The council will offer a needs assessment for any person who appears to have any level of needs for care and support, regardless of the council's view of the

level of the person's needs for care and support, or the level of their financial resources.

59. People who currently (or are likely) to fund their own care and/or those whose needs are likely to fall below the national eligibility criteria for receiving care and support from the council are still entitled to an assessment of their needs.
60. The assessment will identify
 - a. the care and support needs of the person,
 - b. the impact of the person's needs for care and support on their wellbeing,
 - c. the outcomes that they wish to achieve in their day-to-day life,
 - d. whether those needs are eligible for care and support from the council,
 - e. whether, and if so to what extent, the provision of care and support could contribute to the achievement of those outcomes.
61. Wherever people express a need, or any challenges and difficulties they face because of their condition(s), the council will establish the impact of this on their desired outcomes and wider wellbeing.
62. The assessment will provide a picture of the person's needs before considering
 - a. any support being provided by a carer;
 - b. the person's eligibility for care and support; and
 - c. types of care and support, services or other options available at the time of assessment that can help to meet those needs.
63. While undertaking the assessments, the council will also consider
 - a. whether, and if so to what extent, matters other than the provision of care and support (such as employment) could contribute to the achievement of the outcomes that the person wishes to achieve in day-to-day life;
 - b. whether the person would benefit from the provision of services that will prevent needs from escalating, such as information and advice, or services available in the community;
 - c. the person's own strengths, capabilities and interests.
64. In carrying out an assessment, the council will involve
 - a. the person,
 - b. any carer(s) that the person has, as defined in paragraph 66 as agreed by the person,
 - c. the young person's carers (including parents) in carrying out a transition assessment, and
 - d. any other person whom the person requests (such as family members, friends, health professionals such as their GP), or
 - e. where the person lacks capacity to request, any person who appears to the council to have an interest in the person's welfare (such as family members, friends, health professionals such as their GP).
65. People will receive an assessment that is appropriate and proportionate to their needs.

66. The council will ensure people are able to be involved and take an active part as far as possible in the assessment process to be able to reflect their preferences, and the overall extent and fluctuation of their needs.
67. In order to facilitate people's involvement as much as possible, information about the assessment process will be provided in an accessible format (online, offline, easy-read, etc). This will be prior to the assessment wherever practicable.
68. During the assessment the council will take a coordinated approach taking into account all aspects of a person's life and identify how the person's needs impact on family members. The council will offer a child's, young carer's, carer's or adult's needs assessment if required. The council will also consider whether or not the provision of any information and advice would be beneficial to those people they have identified.
69. People will be given a written record of their assessment. A copy can be provided to anybody else that the person requests. Where an independent advocate, independent mental capacity advocate or independent mental health advocate is involved in supporting the person, the council will keep the advocate informed so that they can support the person to understand the outcome of the assessment and its implications.
70. After the assessment, the council will evaluate the person's needs to decide whether these meet the National Eligibility Criteria for local authority support.
71. Financial assessment will normally be conducted after the needs assessment. In cases where financial assessment runs parallel to or before the needs assessment, it will not influence the assessment of needs.
72. Using a whole family approach to assessment, the council will identify children and young people involved in providing care (while carrying out an assessment, informed through family members or a school, or otherwise). The council will then offer a needs assessment for the adult requiring care and support. It will also offer a young carer's needs assessment or a child and family assessment as required by the Children and Families Act 2014.

Carer's Assessment

73. A "carer" is somebody who provides necessary support or who looks after a family member, partner, friend or a neighbour who needs help because of their age, physical or mental illness, or disability and not as paid or voluntary work.
74. A "young carer" is a person under 18 who provides or intends to provide care for an adult or a child and not as paid or voluntary work.
75. Where the council becomes aware that a young person or a child is involved in care, it will offer an assessment for the adult requiring care and support using a whole family approach.

76. The council will decide whether the child or young person should be referred for a young carer's needs assessment or a child's needs assessment under the Children and Families Act 2014 to identify the impact of caring on the child's health, emotional and physical wellbeing, welfare, education and development. The assessment will also examine whether any of the caring responsibilities are inappropriate (such as personal care, lifting, administering medication, maintaining the family budget, emotional support to the adult).
77. Where it appears to the council that a carer may have needs for support (whether currently or in the future), the council will carry out a carer's assessment to understand
 - a. whether the carer has needs for support (or is likely to have in the future), and
 - b. if the carer does, what those needs are (or are likely to be in the future).
78. The council will ensure carers access to a carer's assessment regardless of the level of their needs and financial resources.
79. The carer's assessment will establish the carer's needs for support and the sustainability of the caring role, which relates to a consideration of whether the carer is able and willing, and likely to continue to be, to provide care. (Where necessary, sustainability may be discussed in a separate conversation with the carer).
80. A carer's assessment will include an assessment of
 - a. whether the carer is able, and is likely to continue to be able, to provide care for the adult needing care,
 - b. whether the carer is willing, and is likely to continue to be willing, to do so,
 - c. the impact of the carer's needs for support on their wellbeing,
 - d. the outcomes that the carer wishes to achieve in day-to-day life, and
 - e. whether, and if so to what extent, the provision of support could contribute to the achievement of those outcomes.
81. The carer's assessment will consider the carer's activities beyond their caring responsibilities and the impact of caring upon those activities. In particular, the council will consider whether the carer works, participates in education, training or recreation, or wishes to do so.
82. In carrying out a carer's assessment, the council will involve the carer and any person whom the carer asks the council to involve.
83. The council will also consider
 - a. whether, and if so to what extent, matters other than the provision of support could contribute to the achievement of the outcomes that the carer wishes to achieve in day-to-day life, and
 - b. whether the carer would benefit from the provision of preventative services, information and advice or any opportunities which might be available in the community.

84. The council will consider whether any relative or other person who is involved in caring for the person would benefit from the provision of information and advice and signpost them to services available in the community.

Transition Assessments

85. The council will ensure that transition arrangements are in place to support a young person who may have social care needs when they become an adult and their family to plan for adulthood.
86. The council will ensure that transition assessments are based around the young people's needs, strengths, preferences and the outcomes that they wish to achieve to maintain or improve their wellbeing.
87. The assessment will consider steps which will enable young people to take part in adult life, such as: further education, paid employment, independent living, and leading an active life within the community. This applies to both young people with care and support needs and to young carers.
88. The council will carry out transition assessments for
- a. young people who may have social care needs when they become an adult,
 - b. young carers who are likely to have care and support needs when they become an adult, and
 - c. adult carers (including parents) of young people in approaching to adulthood.
89. Transition assessments apply to these people irrespective of whether they are already receiving children's services from the council.
90. The transition assessment will take place when there is a significant benefit to the person in doing so, and if they are likely to have needs for care and support after the young person turns 18 (or 25 if they are in education).
91. For young people with special educational needs who have an Education, Health and Care plan, the council will include provision to assist in preparing for adulthood in the Education, Health and Care plan review from Year 9.
92. For young people without Education, Health and Care Plans, conversation about preparation for adulthood will start at the right time for them depending on their circumstances and will be complete in time for any support plan to be in place by age 17.5.
93. For children and young people who are looked after by the council and are leaving care, transition assessment will be carried out as a part of the Pathway Planning process.
94. All transition assessments will include

- a. current needs for care and support and their impact on the person's wellbeing,
 - b. whether the young person is likely to have social care needs after becoming 18,
 - c. whether the carer (including parents) of the young person in transition is likely to have needs for care and support after the young person becomes 18,
 - d. If so, what these needs are likely to be and which of them are likely to be eligible for the council's support,
 - e. the outcomes that the person wants to achieve in day-to-day life,
 - f. whether, and if so to what extent, the provision of care and support could contribute to the achievement of those outcomes.
95. A transition assessment for adult carers (including parents) of a young person in transition to adulthood will also specifically consider whether the carer
- a. is able to provide care for the young person and is likely to continue to be able to do so after the young person becomes 18,
 - b. is willing to provide care for the young person and is likely to continue to be willing to do so after the young person becomes 18,
 - c. works or wants to work after the young person becomes 18,
 - d. participates or wants to participate in education, training or recreation after the young person becomes 18.
96. Transition assessments for young carers will specifically consider whether the young carer
- a. is able to provide care and is likely to be able to do so after becoming 18,
 - b. is willing to provide care and is likely to be willing to do so after becoming 18,
 - c. works or wants to work after becoming 18,
 - d. participates in education, training or recreation, or wants to participate after becoming 18.
97. Having carried out a transition assessment, the council will give the person
- a. an indication as to whether any of the needs for care and support which the young person is likely to have after becoming 18 are likely to meet the eligibility criteria and, if so, which ones,
 - b. advice and information about what can be done to meet, reduce, prevent or delay the needs which the young person is likely to have after becoming 18.

First Contact with the Council

98. The first contact with the council where the council becomes aware that the person may have social care needs triggers the duty to assess.
99. The first contact with the council can be in many ways including
- a. Contacting the council (by phone, e-mail, fax, post etc)
 - b. Referral by a third party (a friend, relative, neighbour etc)

- c. Referral by a social worker or health professional (a doctor or a nurse)
 - d. A hospital discharge
 - e. Discharge from reablement or rehabilitation
 - f. The council becoming aware that the person may have care and support needs in some other way
100. At the first contact, the council will provide people with the option of self-assessment and encourage those who are willing and able to do so to assess their needs themselves using the council's online or offline self-assessment tools.
101. Where a person with urgent needs approaches or is referred to the council, the council will seek to provide an immediate response to meet the person's care and support needs in accordance with the support planning policy without having completed a needs assessment. Where necessary, assessment and eligibility determination will follow this initial response.
102. The council will ensure that the staff involved in the first contact are appropriately trained and have access to qualified professionals.
103. At the first contact, the council will consider whether the person experiences substantial difficulty in any of these four areas: understanding the information provided; retaining the information; using or weighing up the information as part of the process of being involved; and communicating their views, wishes or feelings.
104. Where a person has substantial difficulty in any of these four areas, the council will ask a family member, a friend or somebody who knows the person to support the person in the assessment process.
105. Where there is no one thought to be appropriate for this role – either because there is no family member or friend willing and available, or if the person does not want them to be a part of the assessment – the council will arrange an independent advocate.
106. Where appropriate, the council will provide information and advice, refer the person to intermediate care services and signpost where to access preventative services such as equipment, adaptations or use of assistive technology appropriate to the person's circumstances.

Combining assessments

107. The council may combine assessments with a carer and the person they care for where both agree and the consent condition¹ is met in relation to a child to capture interrelated needs.

¹ The consent condition is met if the child has capacity or is competent to agree, and if the council is satisfied that combining assessments would be in the child's best interests.

108. If either of the people concerned do not agree to a combined assessment, or if there is a safeguarding concern effecting assessment being done jointly, then the assessments will be carried out separately.
109. Where assessments are combined, the council will consider all of the adult's needs regardless of any support being provided by the carer and care provided by the carer will not influence the eligibility determination.

Fluctuating needs

110. In cases where a person's needs fluctuate, the council will consider the circumstances over a period of time appropriate to the person's circumstances. The council may consult the carer and other professionals to establish an accurate indication of the level of needs. The period will be decided on an individual basis and in consultation with the person, any carer and others as appropriate.

Training, expertise and consultation

111. The council will ensure that any person carrying out an assessment or a review has the skills, knowledge and competence to carry out the assessment in question and has received suitable, up-to-date training in the carrying out of assessments.
112. Assessors will have the skills and knowledge to carry out an assessment when the person has specific conditions (such as autism, learning disabilities, mental health problems or dementia). Where they do not have this knowledge, they will consult someone who has expertise (through training or experience) or experience of the condition.
113. Training and expertise requirements do not apply to someone who is carrying out a self-assessment. The council may offer training and support for self-assessment.

NHS Continuing Healthcare

114. Where it appears that a person may be eligible for NHS Continuing Healthcare, the council will notify the relevant Clinical Commissioning Group for the area that the person lives in.
115. The council will work jointly with NHS staff throughout the NHS Continuing Healthcare eligibility process wherever practicable and be informed of the outcome of NHS Continuing Healthcare eligibility.
116. If the person is not eligible for NHS Continuing Healthcare, the council will undertake or continue to undertake a new needs assessment. However, the council will not arrange services that are the responsibility of the NHS except those agreed in the shared care protocols.

117. The council may provide or arrange healthcare services where they are simply incidental or ancillary to doing something else to meet needs for care and support.
118. People may require care and support provided by the council and/or services arranged by Clinical Commissioning Groups. The council and Clinical Commissioning Groups will ensure that the assessment of eligibility for care and support and continuing healthcare respectively take place in a timely and consistent manner.
119. Where it appears that a young person after becoming 18 may be eligible for NHS Continuing Healthcare, the council will refer the young person to the relevant body accordingly.
120. For further information about NHS Continuing Healthcare, please refer to guidance.

Assessment for people who are deafblind

121. A person is regarded as deafblind if they have combined sight and hearing impairment which cause difficulties with communication, access to information, or mobility. This includes people with progressive sight and hearing loss.
122. The council will ensure that assessment of people who are deafblind will be carried out by a person who has specific training and expertise.

Eligibility

123. Eligibility to receive services from adult social care is determined through an assessment process in accordance with this policy which is then followed by an eligibility decision using the national eligibility criteria.
124. The council will comply with the national eligibility criteria as set out in the Care Act 2014 and the Eligibility Regulations 2014 that sets a minimum threshold for adults and carers (see Eligibility Guidance).
125. Carers can be eligible for support whether or not the adult who they care for has eligible needs.

Eligibility Decision

126. The eligibility determination will be made on the basis of an assessment and will not take place until the assessment has been completed, except in cases where the council is meeting urgent needs.

127. Once an eligibility determination has been made on the basis of an assessment, the council will determine whether it will meet the person's non-eligible needs.
128. If the person has eligible needs, the council will establish whether the person is ordinarily resident in Oxfordshire, agree with the person whether the person wants to have those needs met by the council and start considering options to meet the needs.
129. The council is only required to meet the eligible needs of an adult who is ordinarily resident in Oxfordshire, and of a carer if the person they care for is ordinarily resident in Oxfordshire.
130. The council will provide the person with a written record of the eligibility determination and the reasons for it.
131. Where the council determines that the person does not have any eligible needs it will provide information and advice about what is available in the community and what can be done to meet or reduce the needs or to prevent or delay the development of needs. The council will also advise that they can contact the council if their situation changes.
132. Having carried out a transition assessment for a young person under 18, the council will give the person an indication as to whether any of the needs the young person is likely to have after becoming 18 (themselves or their carer) are likely to meet the eligibility criteria and if so, which ones.
133. The eligibility decision will be shared with the young person's or young carer's parents if the young person or the young carer agrees. If the young person does not have capacity or competency to agree, the information will be shared in their best interests in accordance with the Mental Capacity Act.

Review of Support Plans

134. Anyone whose needs are being met through the council will have a support plan that sets out how these needs will be met (see Support Planning Policy).
135. The council will keep support plans under review generally to ensure that they are up to date, relevant to the person's needs, outcomes and the impact of their needs on their wellbeing.
136. The review process will be person-centred and outcomes focused, as well as accessible and proportionate to the needs to be met.
137. The review can be done in a number of ways including self-review, peer led review, reviews conducted over the phone, or face-to-face reviews with a social worker or other relevant professional.

138. The review will involve the person to whom the plan relates, their carer(s) and any person whom the person asks the council to involve or, where the person lacks capacity, any person who appears to the council to be interested in the person's welfare.
139. The council may authorise others to conduct a review. This could include the person themselves, their carer, a third party (such as a provider) or another professional. The council will retain responsibility; have oversight and final sign off.
140. Where the review identifies that the person's needs have changed and the existing support plan does not meet the needs, a reassessment will take place. Reassessment will be carried out in accordance with the principles and processes set out in this policy and will pick up from what is already known about the person. The support plan and the personal budget will be revised accordingly.
141. Where a change to a support plan is required but there has been no change in the levels of need, the council will respond in a proportionate and reasonable way and modify the plan and the budget.
142. Support plans can only be revised following a review.

Timeline for reviewing support plans

143. Support plans will usually first be reviewed 4-6 weeks after the start of services, or after direct payment arrangements have been put in place (where relevant).
144. The council (or others defined in paragraph 139) will review support plans at least every 12 months. The date of the review will depend on the circumstances and the risks identified and will be agreed with the person and recorded in the plan during the support planning process.
145. The council will review ongoing direct payments within the first six months of making the first payment and at least every 12 months.
146. The council will combine the annual review of a direct payment with the planned review of the support plan where appropriate.
147. In addition to the initial and regular reviews, the council will conduct a review where
 - a. there is any information or evidence that suggests that circumstances have changed in a way that may affect the efficacy, appropriateness or content of the plan; or
 - b. the person receiving the care or others supporting them or interested in their wellbeing request a review.

148. The review will not be used as a mechanism to reduce the level of a person's personal budget, unless it is required following a reassessment of needs.
149. The review section should be read in conjunction with the council's support planning policy for adult social care.

Monitoring and Review

150. The council will have procedures in place for monitoring assessment and review processes, to ensure they are consistent with this policy and associated guidance.
151. The policy will be reviewed annually. This will take into account learning from complaints, compliments and concerns, including from people who use the council's services.

DRAFT

Oxfordshire County Council Policy for Support Planning in Adult Social Care

Purpose

1. This policy outlines what people with eligible care and support needs can expect from the council, to enable them to access the right care and support to live their lives as independently, safely and successfully as possible.
2. This policy also outlines what carers with eligible support needs can expect from the council, to enable them to access the right support to promote their wellbeing and continue in their caring role if they are willing and able to do so.
3. It therefore applies to both people with eligible care and support needs and carers with eligible support needs, as determined by the National Eligibility Criteria introduced by the Care Act 2014. Eligibility is covered by the council's Assessment and Review Policy and associated guidance.
4. It is based on relevant Government legislation and Government guidance, including:
 - the Care Act 2014;
 - the Mental Capacity Act 2005;
 - the Mental Health Acts 1983 and 2007;
 - the Children and Families Act 2014;
 - the Housing and Regeneration Act 2008.
5. It should be read in conjunction with other Oxfordshire County Council policies and associated guidance. This includes other Adult Social Care policies, and Children's Social Care policies where applicable ([insert link when available](#)).
6. It should also be read in conjunction with partners' policies where applicable. Examples include health commissioning and provider partners' policies and guidance, including on NHS Continuing Healthcare and mental health services.

Context

7. Oxfordshire County Council aims to support and promote strong communities so that people live their lives as successfully, independently and safely as possible. The council aims to promote independence and choice, be fair and equitable and give service users more power and control over their lives.
8. The Care Act 2014 sets out that people whose eligible needs for care and support are being met by the council will have a Support Plan, and where applicable a Personal Budget. The Support Plan details the needs to be met and how, linking back to the agreed outcomes the person wishes to achieve in day-to-day life as identified in the assessment process. The Personal Budget sets out the cost of the person's care and support, and the amount the council will make

available. The process of developing the Support Plan, which where applicable includes agreeing the Personal Budget, enables the person to make decisions about how their needs will be met.

Policy Principles

9. Where a person has eligible needs for care and support, or in the case of a carer for support, the following principles will be applied:
 - **Provide the person with clear information about the support they are eligible to receive from the council and how this has been determined**
 - **Ensure people have access to the information, advice and support they need to plan their care and support according to their own preferences**
 - **Make clear that everyone with eligible needs is entitled to support from the council, whilst encouraging and supporting people to take as much control as they are able and willing to**
 - **Enable people to develop coordinated support plans which best address their needs and promote their wellbeing**
 - **Ensure the care and support planned meets eligible needs and as far as possible, maintains independence and prevents further needs from developing**
 - **Support people to stay safe from harm whilst living an active life, through taking a balanced and collaborative approach to managing risk**

Transparency

10. The council will make it clear to the person (and others involved) how the support planning process works, what their options are at each stage, and what they can expect to happen next.
11. The way in which the council determines what support the person is eligible to receive from the council will be as simple and transparent as possible.
12. The council will enable the person (and others involved) to develop a Support Plan for how their needs will be met. It will provide appropriate support throughout this process, in accordance with the person's needs and circumstances.
13. The council will make clear how Personal Budget amounts will be agreed, through a support planning process centred on the person's agreed outcomes and taking into account available resources.
14. The council will make clear whether a person needs to make a financial contribution towards meeting their needs, via a financial assessment. This is covered in the Contributions Policy and associated guidance.
15. The council will make clear the appeals process, for when agreement cannot be reached on how to meet needs. This is covered by the Appeals, Complaints and Compliments Policy and associated guidance.

16. The council will make clear the complaints process, where the person, their families, friends and others can raise concerns with the process and/or with the care and support they are receiving. This is covered by the Appeals, Complaints and Compliments Policy and associated guidance.

Information and Advice

17. The council will ensure clear, comprehensive and wide-ranging information and advice is available about support and care choices and opportunities which promote wellbeing, prevention and recovery. The information will be in a range of formats and will include information from independent sources. The council will make sure people are informed of organisations and networks which can offer independent financial advice and/or support planning assistance.

Fairness and Equity

18. A single policy for support planning for those with eligible needs ensures people are treated fairly and equitably. This policy covers people who have been assessed as having eligible care and support needs, regardless of their circumstances.
19. It covers carers who have been assessed as having eligible support needs, regardless of their circumstances including whether or not the person they care for has eligible needs.
20. This policy applies irrespective of a person's ability to pay. For example those whose financial resources mean that they will pay for their own care are nonetheless entitled to request other types of support from the council.
21. Where people require support to be involved in the support planning process and have no other means of accessing appropriate support through relatives, friends or others involved, the council will arrange an independent advocate. Where applicable, this will be an advocate who meets the requirements of the Mental Capacity Act.
22. Whilst there may be restrictions on support planning options available to some – for example there will be more limited options available to those in prison, approved premises or bail accommodation – the same principles of maximising the person's choice and control will apply.

Choice and Control

23. The vision for adult social care in Oxfordshire is to enhance people's control over the decisions that will impact their lives, as the council believes that people themselves are best placed to determine the care and support they need.
24. The council will enable people to access what they need as directly, simply and quickly as possible, including high quality information and advice
25. Together with its partners, the council will promote the availability of a wide range of high-quality care and support options in Oxfordshire.

26. People can choose how to meet their agreed outcomes, so long as the plan they put together meets their eligible needs and takes into account available resources.
27. People can pay a 'top up', where the cost of their preferred option exceeds what it would cost the council to arrange support which would meet their eligible needs in accordance with their agreed outcomes. This is covered in the Contributions Policy and associated guidance.

A coordinated approach taking into account all aspects of a person's life

28. The council will support people to consider their needs and the outcomes they wish to achieve, taking into account all aspects of a person's life. It will enable them to develop coordinated plans, where this most effectively meets their needs and promotes their wellbeing. For example a person's Support Plan could be combined with another plan being developed to meet other needs, or with that of another person.
29. The council will work closely with its various partners who also have responsibilities for ensuring that people are able to access the right care and support to meet their needs and promote their wellbeing. It will aim to reduce duplication, for example through streamlined processes and sharing information where the person consents to this. Examples include health commissioning and provider partners.
30. The council will enable families, friends and others to develop coordinated approaches to meeting their needs, where appropriate. Examples include supporting people with care and support needs and their carers to develop a combined Support Plan, and enabling groups of friends to pool their Personal Budgets.

Promoting prevention, early intervention and independence

31. The council seeks to enable people to stay in their own homes and communities wherever possible, to promote their wellbeing and independence.
32. The council will ensure there is a wide-range of universal, preventative services available in Oxfordshire which are accessible to all.
33. This includes a range of options for carers, which are open to all irrespective of eligibility for support from the council.
34. A person's needs for care and support can be met in various ways. The council will encourage people to think creatively about what resources they have already or can develop which they can draw upon, as well as which options will best promote their independence.
35. The council commissions and provides a range of services that prevent or defer the need for more intensive health and social care services, with the aim of promoting independence. Access to these services is covered in the Assessment and Review Policy and associated guidance.

36. Where people are eligible for longer-term support, the same principles of encouraging and enabling independence will apply. People's care and support will be kept under review to ensure it is meeting their assessed needs and enabling them to work towards their outcomes, which are likely to include maximising their independence.
37. Similarly, carers' support will be kept under review to ensure it is enabling them to maintain their wellbeing and sustain their caring role if they are able and willing to do so.

Staying safe from harm whilst living an active life

38. The council will enable, encourage and support people to make their own decisions about their lives. It will take a positive approach to managing risk, supporting people to balance living an active life with protecting themselves from harm.
39. The council will seek to stop abuse and neglect wherever possible, whilst safeguarding people in a way that supports them in making choices and having control about how they want to live. This is covered in the Safeguarding Policy and associated guidance.

Policy Inclusions

People with eligible needs

40. This policy applies to both people with eligible care and support needs and to carers with eligible support needs, as determined by the National Eligibility Criteria. Eligibility is determined following a needs assessment, covered in the Assessment and Review Policy and associated guidance.

Ordinarily resident in Oxfordshire

41. This policy applies to people with eligible care and support needs who are considered to be 'ordinarily resident' in Oxfordshire. A person is usually 'ordinarily resident' where they live; more detail is available in the associated guidance.
42. It also applies to carers with eligible support needs caring for someone considered to be ordinarily resident in Oxfordshire, regardless of where they live or whether the person they care for has eligible needs for care and support.

Adults, young people approaching adulthood, and their carers

43. This policy applies to adults with eligible needs for care and support, and to adult carers with eligible needs for support owing to care and/or support they provide to another adult.
44. It also applies to young people who are likely to have eligible needs for care and support after turning 18, and to adult carers who are likely to have eligible needs

for support after the person they care for turns 18, as determined following a transitions assessment (see Assessment and Review Policy).

45. It also applies to young carers who are likely to have eligible needs for support after they turn 18, as determined following a transitions assessment.

People who choose to access support from the council

46. This policy applies to people with eligible needs who choose to access support from the council, irrespective of their financial resources. Whether or not and the extent to which they will pay towards meeting these needs is covered in the Contributions Policy.

47. This applies to both people with eligible needs for care and support and carers with eligible needs for support.

People who lack capacity to decide whether to access support

48. If following a mental capacity assessment it is determined that a person does not have capacity to decide whether to access care and support from the Council, a best interests process will follow. If it is decided that it is in the person's best interests for the council to arrange to meet their needs, this policy will apply.

49. This applies to both people with eligible needs for care and support and carers with eligible needs for support.

Policy Exclusions

People who do not have eligible needs

50. This policy does not apply to people who do not have eligible needs as determined by the National Eligibility Criteria. Eligibility is determined following a needs assessment, covered in the Assessment and Review Policy and associated guidance.

Not ordinarily resident in Oxfordshire

51. This policy does not apply to people with eligible care and support needs who are considered not to be ordinarily resident in Oxfordshire, except where they are becoming ordinarily resident in Oxfordshire or they require urgent care and support.

52. This policy does not apply to carers with eligible support needs who care for someone who is considered not to be ordinarily resident in Oxfordshire. They will be eligible for support from the local authority in the area where the person they care for is considered to be ordinarily resident.

Children and their carers, except where approaching adulthood

53. This policy does not apply to: young carers, children with needs for care and support, and their carers, except where they have been assessed as likely to

have eligible needs for care and support after turning 18 or for support after the person they care for turns 18. Support planning for these groups is addressed by policies and guidance covering children's services.

People who choose not to access support from the Council

54. This policy does not apply to people with eligible needs who have chosen to arrange and pay for their care and support themselves, without further involvement from the council.
55. This policy does not apply to people who decide not to take part in the council's assessment and support planning process, except where following a mental capacity assessment and best interests process it is determined that: the individual lacks capacity to make a decision about their care needs, and it is in their best interests for the council to meet their needs.

Exceptions

56. Some provisions detailed in this policy do not apply to all groups. The next sections will make clear where these exceptions apply.

Support planning

57. Following a needs assessment and a determination that a person has eligible needs for care and support, the council will consider how the needs will be met.
58. Where the council is meeting a person's needs, it will enable the person to be actively involved in planning how to meet them. This support planning process will be proportionate and flexible, guided by the individual's needs, preferences and circumstances.
59. The intention of this process is to enable people to access the right care and support to live their lives as independently, successfully and safely as possible. It will also enable carers to access the right support to promote their wellbeing and continue in their caring role if they are willing and able to do so.

Independent Advocacy

60. If a person has substantial difficulty in engaging in the support planning process and has no other means of accessing appropriate support through relatives, friends or others involved, the council will arrange an independent advocate to facilitate their involvement. Where applicable, this will be an advocate who meets the requirements of the Mental Capacity Act.

Safeguarding

61. If at any stage the council suspects that a person is experiencing or is at risk of abuse or neglect, a safeguarding enquiry will be carried out. This will establish

whether any action needs to be taken to prevent or stop abuse and neglect, and will involve the person in deciding next steps. This is covered in the Safeguarding Policy and associated guidance.

Mental capacity

62. In line with the principles set out in the Mental Capacity Act, the council will assume that people have mental capacity and can make decisions for themselves unless it is established otherwise.
63. If the council thinks a person may lack capacity to make a support planning decision, it will carry out a capacity assessment in relation to the specific decision to be made. This and the following steps are covered in the associated mental capacity guidance.
64. If a person has been assessed as lacking capacity to make a support planning decision, the council will determine if there is an appropriate substitute decision maker. This will usually be someone who holds Lasting Power of Attorney for Health and Welfare, though could be others dependent on the nature of the support planning decision.
65. If a person has been assessed as lacking capacity to make a support planning decision and there is not an appropriate substitute decision maker, the council will follow the best interests process set out in the Mental Capacity Act to reach the decision. This will include consulting interested family and friends to obtain their views.
66. The same approach will apply of involving the person throughout, enabling them to make decisions as far as possible. The person can be supported to be involved by family, friends or others involved where appropriate. If a person has no one who is able to facilitate their involvement, the council will arrange an independent advocate who meets the requirements of the Mental Capacity Act.
67. Where a plan for a person lacking capacity will unavoidably result in a deprivation of liberty because there is no lesser restrictive way to meet their care needs, the council will ensure it is authorised in the appropriate way. This will either be an authorisation under the Deprivation of Liberty Safeguards if the person is residing in a care home or hospital, or by an Order of the Court of Protection if the person is in a domestic setting.

If a person decides not to take part

68. The council considers that people themselves are best placed to make decisions about their care and support needs, including whether or not to accept help from the council in planning to meet their needs.
69. Where a capacity assessment concludes that the person lacks capacity to make the decision not to take part and there is no substitute decision maker, a best interests process will be carried out in accordance with the Mental Capacity Act (see associated guidance). This process ensures that the views of the person are taken into consideration, including their views on whether or not to accept help from the council in planning to meet their needs. If the outcome of the best

interests process is that it is in the person's best interests for the council to arrange to meet their needs, this policy will apply.

70. If the person does have capacity but they appear to have care and support needs which if not met will leave them or others exposed to high levels of risk, a multi-agency risk assessment will be carried out to determine the level of risk and to decide what action (if any) should be taken to reduce this. This is covered in the associated guidance.

Meeting urgent needs

71. Where a person has urgent needs for care and support, the council will work with them and anyone else involved to put in place interim arrangements quickly. The same support planning aims and approach will apply, for example considering options which will maximise the person's independence.
72. The person's situation will be kept under review. Once it becomes appropriate to do so, the council will support the person to consider next steps. This will be done on a case by case basis, in consultation with the person and others involved such as family, friends and other professionals.

Continuity of care

73. When a person chooses to move to Oxfordshire or from Oxfordshire to another area, the council will work closely with the other local authority to ensure there is no interruption to the person's care and support. This will include ensuring there is no interruption to support provided to the person's carer(s), where applicable.
74. When a person chooses to move to Oxfordshire, wherever possible the council will carry out a needs assessment and begin the support planning process prior to the day of the move.
75. In cases where this is not possible, the council will continue to meet the person's needs in accordance with their support plan from their previous local authority until the assessment and support planning process can be carried out.
76. Where a person chooses to move from Oxfordshire to another area and the council has been made aware of this, it will notify the other local authority and provide the relevant information to allow for care and support to continue without interruption.

Transition into adulthood

77. The council will ensure that children's and adult's services work together to enable young carers, young people with care and support needs, and those who support them to prepare for adulthood.
78. This will involve supporting the young person to identify the outcomes they wish to achieve, as they take steps towards greater independence. This will include

preparing for the opportunities of adult life, such as: further education, paid employment, independent living, and leading an active life within the community (see Assessment and Review Policy). This applies to both young people with care and support needs and to young carers.

79. It will also involve supporting carers to identify the outcomes they wish to achieve to promote their wellbeing. This applies to adult carers preparing for the person they care for turning 18, and to young carers as they prepare for turning 18 themselves.
80. Where following a transitions assessment it has been determined that a person is likely to have eligible needs for care and support once they turn 18 or for support once the person they care for turns 18 or they themselves turn 18, the council will consider with the person (and others involved) when to begin planning to meet these needs. Planning will usually start around age 14, and be complete by age 17.5.
81. As far as possible, the council will ensure this support planning process is complete before the young person turns 18. Once the young person turns 18 or in the case of an adult carer the person they care for turns 18, they will transition from any existing children's plan to the new plan, with their needs being met through Adult Social Care.
82. In cases where this has not been possible, the person will continue to receive care and support in accordance with any plan from children's services until a needs assessment has been carried out and where applicable, the support planning process is complete.
83. In exceptional cases, the council may decide it will continue meeting a young adult's needs through Children's Social Care after they turn 18.
84. For young adults aged 18 to 25 with an Education, Health and Care Plan, the 'Care' element – which will be met by adult social care – will be developed in accordance with this policy.

Mental health

85. Where applicable, the support planning process will also follow the Care Programme Approach. This is covered by the associated guidance.

Developing the Support Plan

86. People whose eligible needs for care and support are being met by the council will have a Support Plan. This will detail the needs to be met and how, linking back to the agreed outcomes the person wishes to achieve in day-to-day life as identified in the assessment process. It will be developed through a collaborative support planning process, in which the person will be encouraged to take as much control as they are willing and able to.

87. Where applicable, the Support Plan will also include the person's Personal Budget. This is a statement which clearly sets out the cost of meeting the person's eligible needs, breaking it down into the amount the council will pay and where applicable, the amount the person is required to contribute. This is covered by the contributions policy and associated guidance.
88. There will be a range of resources available to ensure people are actively involved and influential throughout the process of developing their plan, and are empowered to take as much control as they are able to. This will range from high-quality information and advice in various formats through to comprehensive support from an independent advocate, depending on the person's needs, preferences and circumstances.
89. Where a carer has eligible needs and is caring for someone who does not have eligible needs, the council will ensure the person being cared for is nonetheless involved in the decision-making process.
90. The council will enable people to jointly develop or align their plans, to ensure their care and support is best coordinated to meet their needs and achieve their agreed outcomes.
91. The council will work with relevant partners to enable people to develop a single or coordinated plan, for example covering their health and social care needs. This may involve one organisation carrying out support planning on behalf of both organisations. Where this route is taken, it will be clear to the person which organisation has responsibility for monitoring the plan, although both organisations will retain overall responsibility for specific aspects.
92. The council will enable families, friends and others to align their plans, and will offer the option to develop combined Support Plans where this is appropriate.
93. Where a carer has eligible needs for support and is caring for someone who is also eligible for care and support, the council will support them to develop a combined Support Plan whenever this is appropriate and both people agree.
94. Combined plans will clearly show the needs and agreed outcomes of each person involved, and how they will be met through the joint approach as well as any other elements specific to the person.

Options for meeting needs for care and support

95. Support to meet a person's needs can be provided by the council in various ways, including: information and advice about options available within their communities; universal services; a range of preventative services; referrals to other organisations which can meet the person's needs; equipment and assistive technology; and providing a Personal Budget for various care and support options.
96. Where a person's eligible needs for care and support are being met by a carer, this will be recorded in their Support Plan. A decision about eligibility will have

been taken before considering whether the eligible needs are met by their carer (see Assessment and Review Policy). The carer will be involved throughout the process, and will be offered an assessment of their own needs. This is set out in the Assessment and Review Policy and associated guidance.

97. The council may meet a carer's eligible needs in a number of ways, which could include through meeting the needs of the person they care for. Where a carer with eligible needs for support cares for an a person with eligible needs for care and support, the council may consider whether the carer's needs can be best met through the provision of care and support to the person needing care.
98. Where needs are identified which are not eligible for support from the council, the person will be supported to consider alternative ways of meeting these needs and how to prevent them from developing further. This will be included in the person's Support Plan. The council may signpost or refer the person to these sources, however it will not be responsible for meeting these needs.
99. In principle people can choose how to meet their agreed outcomes for care and support, so long as the plan they put together meets their eligible needs and takes into account available resources. The council will encourage people to think creatively about what resources they have already or can develop which they can draw upon, as well as which options will best promote their independence.
100. There may be restrictions, for example there will be more limited options available to those in prison, approved premises or bail accommodation. However the same principles of maximising choice and control will nonetheless apply.
101. Throughout the process of planning how to meet their needs for care and support, people will be supported to consider the risks involved. Where a person decides to meet their needs in a way which involves significant risks, the council will work with the person and others involved to develop a proportionate approach to managing them.
102. The council will make clear whether people needs to make a financial contribution towards meeting their needs, via a financial assessment. This is covered in the Contributions Policy.
103. Where it is agreed that a person needs care of a particular type, they can opt for a more expensive version of it than is necessary to meet their eligible needs by paying a top-up. They can pay this themselves or family, friends or others can pay on their behalf. This is covered in the Contributions Policy.

Meeting needs with a Personal Budget

104. As detailed in the previous section, a person's needs can be met in various ways. The council will encourage people to think creatively about the resources they already have, which options will maximise their independence, and how their needs can be met as directly, simply and quickly as possible. Where it has been

determined that a person is likely to require a budget to access care and support options to meet their eligible needs, the following will apply.

105. This process will start with an estimated budget. This is the amount the council anticipates it will cost to meet the person's eligible needs, which the person (and others involved) can use to begin planning their care and support. It is an approximate figure which may be increased or decreased throughout the support planning process, in discussion with the person (and others involved).
106. This estimated budget (also known as the 'Indicative Budget') is calculated using a Resource Allocation System, a formula based on need embedded in the thorough assessment of the person's needs.
107. The final budget amount will be determined at the end of this collaborative support planning process, once it has been agreed how the needs for care and support will be met.
108. The council will ensure the final amount is sufficient to meet the person's eligible needs, taking into account the type of care and support the person chooses and the options available.
109. The council will work with its partners to enable people to combine their budgets where applicable. For example, where people are eligible for both a Personal Health Budget from the NHS and a budget from adult social care.
110. People can also opt to pool their budgets where appropriate, for example in the case of friends or others choosing to share elements of their care and support. Where budgets are pooled, it will be made clear how each person's needs are being met by the care and support planned.
111. People can decide how to manage their budget, with options including receiving it as Direct Payment, having it managed by either the council or a third party, or a mixture of the three.

Direct Payments

112. People wishing to have maximum control over their budgets can opt to receive Direct Payments, so they can directly purchase care and support to meet their needs and agreed outcomes. In line with its aim of enabling people to have more power and control over their lives, the council will encourage people to consider this option. As part of this, it aims to make the process of accessing and using Direct Payments as straightforward as possible.
113. The council will ensure there is comprehensive information and advice available in a range of formats, about the process of accessing a Direct Payment, the responsibilities involved and the support available.
114. People with care and support needs can request a Direct Payment. In cases where the person in need of care and support has been assessed as lacking

capacity to request a direct payment, an authorised person can request the direct payment on the person's behalf.

115. If the council decides that a Direct Payment is not appropriate, it will provide an accessible explanation and offer support to explore alternative options. It will also inform the person (and others involved) how to appeal the decision.
116. Direct Payments cannot be used to pay a close family member living in the same household to provide care and support, except in exceptional circumstances.
117. A close family member living in the same household can be paid to manage and/or administer the Direct Payment on behalf of the person with care and support needs, where the council determines this to be necessary.
118. Direct Payments cannot be used to pay for long-term residential care.
119. The council will ensure that people who choose to use their Direct Payment to directly employ Personal Assistants are able to access appropriate support. This will include information and advice on their duties as employers, and support to put a plan in place in the event of the Personal Assistant(s) being absent.
120. The council will check to ensure the Direct Payments are being used to meet eligible care and support needs and responsibilities are being upheld, whilst keeping monitoring requirements to a minimum.
121. In some circumstances, the council may decide to suspend payments and/or to recover unspent funds. This is covered in the Contributions Policy and associated guidance.
122. This section does not apply to the following groups, as they do not have the option of receiving some or all of their Personal Budget as Direct Payments: people with care and support needs in prison, approved premises and bail accommodation, except where they have yet to be convicted; and people subject to a court order for a drug or alcohol treatment programme or similar schemes.

Agreeing the Support Plan

123. The council will ensure the plan sufficiently meets needs, is appropriate and represents the best balance between value for money and maximisation of outcomes for the person.
124. The final plan will be agreed once the person, any third party involved and the council agree on the factors within the plan, including the final Personal Budget amount where applicable.
125. Where the council reasonably believes a person may lack capacity to agree a plan, it will carry out a capacity assessment to determine if this is the case. If the person is assessed as lacking capacity to agree the plan and there is no substitute decision maker, the council will follow a best interests process to

determine if the plan should be agreed. This is covered in the associated mental capacity guidance.

126. Where a plan cannot be agreed the council will make clear what the next steps are. If an agreement still cannot be reached, the council will direct the person to the appeals process. If the person is unsatisfied with the outcome, the council will direct them to the complaints procedure. Further information is available in the Appeals, Complaints and Compliments Policy and associated guidance.

Next steps

127. The council will provide a copy of the final plan in a format accessible to the person, as well as to any other person they request receives one, and to their independent advocate where applicable.
128. With the person's permission, key points might also be shared with other professionals and people involved in the person's care and support.
129. Where a person does not have capacity to decide whether to share their plan, the council may share it following a capacity assessment and best interests decision to do so.
130. The Plan will be kept under review, as set out within the Assessment and Review Policy and associated guidance.
131. The person (and any others involved) can provide feedback to the council on the support planning process and/or the care and support they are receiving, through the Complaints and Compliments process. This is set out within the Appeals, Complaints and Compliments Policy and associated guidance.

Monitoring and review

132. The council will have procedures in place for monitoring support planning processes, to ensure they are consistent with this policy and associated guidance.
133. The policy will be reviewed annually. This will take into account learning from complaints, compliments and concerns, including from people who use the council's services.

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Oxfordshire County Council Policy for Contributions in Adult Social Care

Purpose

1. This policy outlines how the council ensures a fair approach to contributions from individuals towards the social care services they receive. It covers residential and non-residential care services following an assessment, and direct access services such as day care.
2. This policy is based on appropriate legislation and Government guidance, including:
 - The Care Act 2014, associated regulations and statutory guidance
 - The Mental Capacity Act 2005
 - Mental Health Act 1983 section 117 – the duty on health and social care services to provide free aftercare to patients previously detained under certain sections of the act
3. It should be read in conjunction with the council's adult social care policies on Assessment and Review, Support Planning, Safeguarding and Complaints, Appeals and Compliments, and associated operational procedures and guidance [\(insert link when available\)](#).

Context

4. Oxfordshire County Council aims to support and promote strong communities so that people live their lives as successfully, independently and safely as possible. The council aims to promote independence and choice, be fair and equitable and give service users more power and control over their lives.
5. Social care is not a free service and national funding arrangements make it clear councils need to collect income locally to contribute to the cost of services.
6. Legislation permits an Authority to recover a reasonable charge for social care from service users who satisfy the Authority that they have insufficient means for them to pay for the service.
7. Income from charging for services where it is appropriate to do so and in keeping with legislation is therefore an essential part of Oxfordshire County Council's financial strategy.
8. In setting its contributions policy and determining the contribution to be paid by an individual the council cannot be less generous in the treatment of capital than the provisions set out in the Care Act 2014.
9. As set out in the Care Act 2014, councils should take account of no more than the full cost of providing the service. The council calculates this based on the

average cost of providing this service across the county, and this is reviewed on an annual basis.

10. For non-residential care services, the government considers that it is inconsistent with promoting independent living to assume, without further consideration, that all of a person's income above basic levels of Income Support or the Guarantee Credit element of Pension Credit, plus 25% is available to be taken in charges. In addition, service users will be asked to contribute only after any disability related expenditure is taken into account.
11. A list of the services that the council currently charges for is attached as Appendix A.

Policy Principles

12. Where the council requires contributions towards services for adult social care, the following principles will be applied:
- Ensure people have access to the information, advice and support they need to plan their care and support according to their own preferences
 - Encourage people to think creatively about meeting their care and support needs, including drawing on resources they already have or can develop to promote their independence
 - Encourage people to purchase services which best address their needs, promote their wellbeing and prevent further needs from developing

Provide people with timely, clear and concise information about the costs of their care

13. The way in which the council sets the contributions people are expected to make towards their own care, and the process by which these contributions are made, will be as simple and straightforward as possible.
14. The council will publish its contributions policy and accompanying guidance on the council website (www.oxfordshire.gov.uk) and provide clear information to service users, carers and the general public in a variety of formats.
15. The council also helps to signpost service users, carers and the general public to wider information about the cost of care, including support available through a range of information and advice services and centres provided and commissioned by the council.

Personal Budgets

16. Anyone eligible for care and support from the council will have a Personal Budget. A Personal Budget is the amount of money allocated to an individual to provide the support they require, based on an assessment of needs.
17. Service users will make a single contribution towards the cost of their care based on an assessment of their financial circumstances. They will then pay whichever

is the lesser amount of either the full cost of the care they require to meet their needs, or the maximum they are financially assessed as able to contribute. If their assessed contribution is less than the full cost of the care required to meet their needs, the council will fund the difference. Service users may also purchase additional or more expensive care at their own expense, for example if they choose a more expensive care home placement than the council considers necessary to meet their care needs.

Choice and Control

18. This policy supports the council's wider aims to offer individuals greater choice and control over services that meet their eligible social care needs. An individual is able to decide where and from whom they purchase the services that meet their needs, using either their Personal Budget or their own financial means.

Fairness and Equity

19. A single policy for all services for which the council is permitted to charge ensures people are treated fairly and equitably, and that people are not charged different amounts for the same services. This policy therefore covers residential and non-residential services, and universal or open access services.
20. Contributions to a Personal Budget for social care are determined by financial assessment of an individual's means.

Protecting people on low incomes

21. The financial assessment will ensure that people on low incomes are not put in financial hardship as a result of paying towards their care costs. Advice and support to claim welfare benefit entitlements will be made available to service users and carers.

Promoting prevention and early intervention

22. The council commissions and provides a range of intermediate care services that prevent or defer the need for more intensive health and social care services, such as reablement, intermediate care beds and crisis services. These services are provided free of charge for up to 6 weeks, following an assessment of need, to encourage and enable independence.
23. The council provides certain services free of charge to support people living at home and their carers who require services. These are identified in Appendix B.

Policy Inclusions

24. This policy covers charges and contributions for all residential and for all non-residential adult social care services provided in people's homes for which the council has powers to charge. It also applies equally to people in prison with social care needs. The policy covers charges and contributions for direct access and universal services, such as day opportunities.
25. This policy covers payments and contributions made by:
- People paying for their own care and support (self-funders), who may choose to pay to access council-funded services

- Individuals paying for care and support through Self Directed Support and Personal Budgets
 - The council arranging and paying for care and support on behalf of an individual
26. Eligibility to receive services from Adult Social Care is determined through a care needs assessment. The level of funding an individual is required to pay towards their care and support needs will be determined following a financial assessment in line with the principles outlined in this policy.
27. This policy applies to all service users who are considered to be Ordinarily Resident in Oxfordshire (as defined in the Care Act 2014) and meet the nationally set eligibility criteria.
28. Service users receiving non-residential care and support have the choice to manage their own services through a Direct Payment, or to ask the council to do this for them. This policy applies equally to all service users who ask the council to manage services on their behalf, use a Direct Payment or use a combination of these. This does not affect their entitlement to an assessment of needs, or access to advice and information provided by the council.
29. Where the council makes a Direct Payment as an alternative to making arrangements for direct provision of a service, service users will be required to contribute on the basis of the same financial assessment and calculations as when the council commissions a service.
30. The same principles of fairness apply to those who hold Personal Budgets as those who do not.
31. The council will take into account in the financial assessment capital and income unless it is required to be disregarded under legislation or statutory guidance.

Policy Exclusions

32. This policy does not cover:
- Services for which the council may not charge under legislation and/or statutory guidance. This includes:
 - aftercare services under section 117 of the Mental Health Act 1983,
 - services provided to people suffering from any form of Creutzfeldt-Jakob Disease,
 - intermediate care services such as reablement, crisis and intermediate care beds, which are free of charge for an initial period of up to 6 weeks,
 - community equipment and minor adaptations up to £1,000,
 - providing advice about the availability of services or for assessment, including assessment of community care needs,
 - services provided under specific health and housing legislation by other organisations, such as the NHS.
 - Housing-related support services which are subject to separate arrangements. Account will be taken of the impact in individual cases where a

person receives a housing-related support service as well as other care provision from the council.

- People receiving funding from the Independent Living Fund which is subject to separate arrangements until 30 June 2015. After this date, people in receipt of ILF will become subject to the terms of this policy.

33. Service users who are considered to be Ordinarily Resident in another council area and supported by that council will be subject to the contributions policy of that authority. Oxfordshire County Council will recover the full cost from other organisations for services it provides or arranges on behalf of their service users.

Mental Capacity

34. In line with the Care Act 2014 and the principles set out in the Mental Capacity Act 2005, the council will assume that people have mental capacity and can make decisions for themselves unless it is established otherwise

35. If a person has substantial difficulty in engaging in the financial assessment process and has no other means of accessing appropriate support through relatives, friends or others involved, the council will ensure access to an independent advocate to facilitate their involvement. Where applicable, this will be an advocate who meets the requirements of the Mental Capacity Act.

36. If the council thinks a person may lack capacity to take part in a financial assessment or to make financial decisions for themselves, it will carry out a capacity assessment in relation to the assessment or the specific decision to be made.

37. If a person has been assessed as lacking capacity, the council will determine if there is an appropriate person who has the authority to be involved in their affairs and make relevant decisions on their behalf. This will usually be someone who holds:

- a. Enduring Power of Attorney
- b. Lasting Power of Attorney for Property and Affairs
- c. Lasting Power of Attorney for Health and Welfare
- d. Property and Affairs Deputyship under the Court of Protection; or
- e. Any other person dealing with that person's affairs (eg someone who has been given appointee-ship by the Department for Work and Pensions for the purpose of benefits payments)

38. Where there is not an appropriate person (as listed above), the council will follow the best interests process set out in the Mental Capacity Act. This will include consulting relevant family and friends to obtain their views, and may lead to the appointment of an appropriate person to act on their behalf.

Safeguarding

39. If at any stage the council suspects that a person is experiencing or is at risk of abuse or neglect, a safeguarding enquiry will be carried out. This will establish if any action needs to be taken to prevent or stop abuse or neglect and will involve

the person in deciding next steps. This is covered in the safeguarding policy and associated guidance.

Charges for Residential Services

40. The Care Act 2014 covers charges for registered residential homes, including:
- All residential services.
 - Temporary residential services under 8 weeks.
41. The Care Act 2014 allows councils to take into account the value of people's property, and Oxfordshire County Council will take other capital and income into account in the financial assessment of individuals, unless it is required to be disregarded under legislation or statutory guidance.
42. The council may also use its discretion in appropriate cases to disregard from financial assessments the value of the property in which a third party lives. For example, this may be where it is the sole residence of someone who has given up their own home to care for the resident, or someone who is an elderly companion of the resident (particularly if they have given up their own home).
43. In setting its contributions policy and determining the contribution to be paid by an individual the council cannot be less generous in the treatment of capital than the provisions set out in the Care Act 2014.
44. More detail about charges for residential care is available at: [\(insert link when available\)](#)

Respite Care

45. The Care Act 2014 allows the council discretion about how to charge for respite care, including temporary stays less than 8 weeks.
46. The council will undertake a financial assessment as if the individual is living in their own home (i.e. as for non-residential services) to determine how much an individual will contribute towards the costs of respite and temporary residential respite care. This supports our aims of helping people to live independently at home, personalisation and offering individuals greater choice and control through a Personal Budget.

Charges for Non-residential Services

47. Under the Care Act 2014, Oxfordshire County Council is entitled to charge a contribution for non-residential services provided to adults. This policy reflects the requirements in the latest guidance to support the Act. Also under this Act, individuals can request a review of their assessed contribution at any stage.

48. The Care Act 2014 covers all home care and other non-residential services. The Act states that service users should make a single contribution towards the cost of their care based on an assessment of their financial circumstances. They will then pay whichever is the lesser amount of either the full cost of the care they require to meet their needs, or their maximum assessed contribution. If the assessed contribution is less than the full cost of the care they require to meet their needs, the council will fund the difference.
49. This Personal Budget is used to purchase services to meet the individual's eligible needs. Service users may take this money in the form of a Direct Payment, or ask the council to arrange services on their behalf, or use a combination of both.
50. Services will either be:-
- a. provided exclusively to people with Personal Budgets, and paid for from those Personal Budgets.
- Or
- b. be provided as a "free universal offering" regardless of whether the person has a Personal Budget or not. In such circumstances receiving the service would have no impact on the individual's Personal Budget as the service will be free at the point of use, including for self-funders.
- Or
- c. provided as a "subsidised universal offering". In these cases providers of services will be responsible for setting, notifying and collecting contributions or charges from services users, and these contributions will be the same for all users regardless of whether they have a Personal Budget or not (including self-funders).

In some circumstances it may be appropriate for people to use their Personal Budgets to pay their contributions towards "subsidised universal" services. In these circumstances, there may be cases where the council is managing a Personal Budget on behalf of a client and is willing to make payments directly to providers on their behalf if they wish to use their Personal Budget to pay these charges. However the preferred mechanism will be for individuals to pay the charge themselves, either from their own funds or from a direct payment.

51. There is a presumption that any new services not referred to in this policy will be chargeable unless:
- a. They are universal or preventative services
 - b. The cost of recovering charges will exceed the income raised;
 - c. There are statutory or legislative reasons for not charging at all or not charging the full amount to some users of the service
 - d. Charging full costs would result in no uptake of a service
 - e. Charging for a service would act as a deterrent to taking up an essential service.

52. Calculations of the cost of home support will be based on a single, flat rate per hour and will be calculated by the minute. This will then be used to calculate a Personal Budget.
53. Personal Budgets for people who require double-handed care will be calculated to reflect the cost of having two carers. They will then pay whichever is the lesser amount of either the full cost of the care they require to meet their needs, or their maximum assessed contribution.
54. All charges for services, including the flat rate per hour for home support, will be reviewed and set on an annual basis by the County Council Cabinet.
55. A list of current services for which contributions could be charged out of a Personal Budget is included at Appendix B.

Financial Assessment of Service User Contributions

56. All individuals will be offered the opportunity to have a full financial assessment to calculate their contribution. It is the individual's responsibility to provide information to complete this and failure to satisfy the council will result in the maximum contribution being applied.

When Contributions Will Start

57. Service users in residential accommodation and receiving non-residential services may be asked to contribute from the date when they begin receiving a service or move in to a care premises, whichever is appropriate. If the financial assessment has not already taken place, the service user may be asked to contribute towards the cost of their care backdated from the date of the assessment to the point the service user started receiving the service or moved into the premises.
58. Oxfordshire County Council believes that people who need care should know how much that service will cost as soon as possible after their care needs have been assessed. The council therefore endeavours to complete financial assessments as soon as possible for all services and expects service users to cooperate in that process.
59. After they have been financially assessed, clients will be obliged to make their assessed contribution, either to their Personal Budget if it is in place by then, or towards the cost of any temporary services they are receiving prior to their support plan being agreed and implemented.
60. The exception to this obligation is intermediate care services (including reablement), which will be provided free of charge for clients for up to six weeks. For these service users, the council will endeavour to complete the financial assessment process during this period so that clients can understand how much they will need to contribute if they still have care needs when the intermediate care ends.

Income, Capital and Investments

61. In carrying out a financial assessment, the council will take into account all relevant income and capital that is not required to be disregarded. Examples of disregarded income include Winter Fuel Allowance, Cold Weather Payments and the mobility component of Disability Living Allowance or Personal Independence Payment.
62. The value and treatment of income will be based on the definitions within the Care Act 2014.
63. The council sets an amount:
- a. below which capital will not be taken into account when assessing the service user's contribution.
 - b. Above which the service user will be expected to pay the full cost of their Personal Budget.
64. Normally, the individual will be required to pay the full cost of those services only if their total relevant capital exceeds £23,250, their income level is such that they are assessed as being able to contribute the full amount, or they choose not to disclose their financial circumstances.
65. Until further notice the following thresholds apply to assessments made under the Care Act 2014 for both residential and non-residential care:
- Up to £14,250 – we will not take account of an individual's savings.
 - Between £14,250 and £23,250 –we will assume that for every £250 in excess of £14,250 an individual is able to contribute £1.00 per week from capital
 - Above £23,250 – we will ask the individual to pay the full charge.
66. The above amounts cannot be less generous to the service user than are set out in the Care Act as amended from time to time.
67. There is no maximum weekly contribution rate, although individuals will only pay the lesser amount of the full cost of their care or their assessed contribution.
68. Individuals assessed with no available income for contributions will not have to contribute towards the costs of their care and support, although anyone living in a care home who is receiving the state retirement pension will be required to pay a contribution. For those assessed as needing to make a contribution, the minimum weekly contribution level will be £2.00 per week.

Living Expenses

69. The Care Act states that contributions to non-residential care costs should not reduce a services users' net income below levels of income equal to basic levels of Income Support or the Guarantee Credit element of Pension Credit plus 25%. The council will not set an individual's contribution at a level that reduces their net income below this level.

70. For people living in residential care, the council will make allowance for reasonable personal expenses in the financial assessment to ensure the service users net income is sufficient to live on.
71. The council will usually disregard at least the normal amount of weekly Personal Expense Allowance (as prescribed by the Department of Health) from a service user's income. The council will also consider allowing additional expenses from the income of service users who are permanent residents in a care home and have continuing commitments for dependants not resident in a care home. However this is unusual and will only apply in exceptional cases.
72. The council will offer advice on benefits entitlement and assistance with claiming benefits, including referring on to the most appropriate agency to support completion of benefits checks.

Disability Related Expenses

73. Disability Related Expenditure is considered to be a reasonable additional expense that an individual receiving non-residential care incurs due to a disability or condition, and may vary from individual to individual. The aim is to allow for reasonable expenditure needed for independent living by the service user. The council will not include items that could be considered as normal living costs for which an allowance has already been made.
74. The council will take into consideration the relevant expenses of each individual service user. The list of possible items is extensive and examples are given in further information provided to the service user.

Personal Budgets

75. Anyone eligible for care and support from the council will have a Personal Budget. A Personal Budget is the amount of money allocated to an individual to provide the support they require, based on an assessment of needs. For more information about Personal Budgets please see the Support Planning Policy [\(Insert link when available\)](#).
76. Service users will make a single contribution towards the cost of their care based on an assessment of their financial circumstances. They will then pay whichever is the lesser amount of either the full cost of the care they require to meet their needs, or their maximum assessed contribution. If the assessed contribution is less than the full cost of the care they require to meet their needs, the council will fund the difference. Service Users may choose to purchase additional care at their own expense.
77. The assessed contribution will be calculated, and the person notified before their Personal Budget is agreed and put in place. This may mean in some circumstances, that two assessments will need to be made (for example where either residential/nursing care or care and support at home is a possibility an assessment taking into account the value of a person's property, as well as an assessment that disregards it may be required).

78. People with Personal Budgets will be charged one month in arrears, based on the actual hours of care they receive. Home support will be charged at a single, flat rate per hour set annually by the County Council Cabinet and will be calculated by the minute.

Direct Payments

79. The contribution to be made when the service user receives a Direct Payment instead of services is calculated on the same basis as when a service user receives a service commissioned by the council.

80. Direct Payments will be paid gross to the client 4-weekly in advance, and the council will then invoice the client for their contribution based on their assessed contribution.

81. Reconciliation of expenditure against contributions will normally happen at least six-monthly, based on returns from the service user.

Deferred Interest Loans

82. In some circumstances, the council may offer deferred interest loans to support clients making adaptations costing in excess of £30k to allow them to continue to live at home. Eligibility for these loans will be assessed to establish that the client is unable to fund the work themselves and the council would be a lender of last resort.

83. Service users in receipt of a Deferred Interest Loan will have a review at least annually to ensure that the adaptation is still appropriate and in use.

84. Where the service user(s) no longer live permanently at the property the interest on the loan becomes payable.

85. The capital of the loan becomes repayable when the service user(s) dies, or on the sale of the property or transfer of the property to another person. This may be deferred only in exceptional circumstances e.g. where there is a spouse still living in the property until they also are deceased or the house is sold.

Couples

86. Financial assessments will normally be undertaken as a single person. However, clients living with a partner in their own homes will also be offered a joint assessment. This will require details of all savings, income and expenses held individually or jointly. We will then financially assess at whichever rate is better for them.

87. Couples assessments do not apply to couples living together or separately in care homes. For these people, each will be separately financially assessed as appropriate

Joint/shared costs

88. When calculating the financial assessment, costs related to housing (eg utility bills) may be shared between the individual and anyone else living in the same home who shares responsibility for those costs with the individual.

Prisoners

89. Care for a person in prison will be viewed as falling under non-residential charging rules, so property will therefore not be taken into account in any assessment.
90. Prisoners will be allocated a Personal Budget but will not be eligible for a direct payment.

Deprivation of capital

91. If someone has deprived themselves of capital or an asset to reduce their contribution, this may be treated as deprivation of funds to pay for care and the contribution will be calculated as if the individual still had the capital or asset.

Personal Injury Awards

92. In existing proceedings where claims are made against defendants in legal proceedings alleging wrongdoing or negligence (such as insurance companies or the NHS), the council will give consideration to intervening in those proceedings where appropriate.
93. The council will also take into account any personal injury awards that are not held in Trust once a 52 week disregard period from the time they are awarded has expired.

Trust Funds

94. The council will consider whether to recover the cost of care from a trust fund, where reasonable to do so, having regard for the terms of the trust.

Refusal to be assessed

95. Service users will be required to pay the full cost of the service if they refuse to disclose their financial means. The council cannot withdraw services because a person refuses to pay their contribution to their care costs or the full cost of care where appropriate, but in such cases the council will pursue any debt accrued.

Admission to hospital

96. Where people who have Personal Budgets are admitted to hospital for a short period of time, their Personal Budget and their assessed contribution to it will remain in place unchanged. However if their stay exceeds four weeks, this may be subject to review.
97. In some situations the event that caused the person to be admitted to hospital is likely to result in an increase in their level of need. In these circumstances a new care needs assessment will be required leading to a revised Personal Budget.

Carers

98. The Care Act requires councils to assess carers' needs to support their wellbeing and the caring relationship where they are providing care. Carers benefit from services provided as carers services as well as certain services provided to the cared for person. The council gives consideration to meeting the needs of carers through provision:

- (i) **used directly by the carer** – these are defined as 'carers services' and are free under this policy. Such services are identified through the carers assessment of needs and are arranged by the carer using a Direct Payment provided by the council. The range of possible services is very wide and some examples are given in the Appendix B
- (ii) **used by the cared for person** – these are included in the service user's Support Plan and will generally be services liable to a service user's contribution.

99. Legislation requires personal care to be excluded from services determined as Carers Services as it is intimate in nature and directly provided to the service user. (There are exceptions to this, where the service user requests help or is in a situation that would cause harm).

'Top Up' Payments and Purchasing Additional Services

100. Service users and their families can 'top up' their Personal Budget to buy additional support or services above their financial contribution if they choose to, for example to buy their care from a provider of their choice.

101. Service users may also arrange for contributing third parties to make additional payments to cover the cost of a care home that is more expensive than the council would usually expect to pay. However such service users may choose to pay the top-up themselves only in restricted circumstances such as Twelve Week Property Disregard or Deferred Payment Agreement funding.

102. The council will at all times ensure that Personal Budgets are sufficient to meet individuals' eligible care needs. Any 'top ups' must be the individual's choice, and can only be made once they are aware of their right to have all their eligible care needs met without the requirement for a 'top up'.

103. However, if this additional funding ceases the council is under no obligation to increase its contribution to cover the difference, if the persons assessed needs can be met within their assessed contribution without continuing the additional service or by another provider whilst still ensuring quality of service and offering the service user reasonable freedom of choice. This may result, for example, in the service user having to move to other accommodation and being given a number of alternative options to choose from, unless, after an assessment of need, it is shown that their assessed needs can only be met in the current accommodation.

12 Week Property Disregard

104. Where a social care client is selling a property and moving home, the council may disregard the value of the property they are vacating for a period of up to 12 weeks before undertaking a new financial assessment.
105. If the service user is moving into a registered care home the council may disregard the value of the property they are vacating for up to 12 weeks. If the property has not been sold within 12 weeks, the council may then provide deferred payments secured by a legal charge over the property. The amount secured by the legal charge will be repayable to the council immediately on sale of the property and will be subject to an additional interest charge as set out in the Deferred Payment Agreement.
106. If the client is moving elsewhere (for example into Extra Care Housing or to move in with relatives) and the property has not been sold within 12 weeks, the council will exercise its discretion and may offer to provide deferred payments secured by a legal charge over the property.
107. Clients moving into accommodation other than a registered care home and who do not agree to the council securing a charge over their property will not be offered an initial 12 week property disregard option, and will be financially reassessed with the value of their property taken into account.

Deferred Payment Agreements

108. The council will offer Deferred Payment Agreements to allow a person to defer or delay paying the costs of their care and support until a later date. This will normally be until the person sells their home, or until death.
109. Deferred payments will normally be secured by a legal charge against the person's property, and in most cases the council will expect this to be the first charge against the property.
110. The council will charge a single, flat rate for arranging and administering a deferred payment agreement. This will be non-refundable and the amount will be set annually by the County Council Cabinet. Individuals can choose to pay this fee up front or add it to the loan, in which case it will be subject to the same interest charges as the rest of the loan.
111. In some cases a full valuation may be needed in setting up a deferred payment agreement. Where this is required, the cost will be the responsibility of the individual whether they arrange the valuation themselves or ask the council to do it for them, This cost will be non-refundable and the amount will be set annually by the County Council Cabinet. Individuals can choose to pay this fee up front or add it to the loan, in which case it will be subject to the same interest charges as the rest of the loan.
112. The council will apply interest to any amount deferred, which will be calculated on a compound basis. This will be charged at the maximum level of interest set nationally, which is reviewed on a six-monthly basis.

113. Non-payment of a deferred charge, or otherwise not following the terms of a deferred payment agreement, will result in debt recovery processes being instigated.

Second and Additional Properties

114. A client receiving residential services who owns a second or additional property that is not their main residence will be assessed to pay the full cost of their care. This is because the property(ies) is considered an asset that at some point could be sold to pay for their care home fees, or will be generating income (from renting out for example) that can be used to contribute to the cost of the care home.
115. A client receiving non-residential services who owns a second or additional property that is not their main residence will also be assessed to pay the full cost of the care they require to meet their needs. Although the value of the property the client lives in will be disregarded, the value of the second or additional property will be included in the financial assessment.

Requesting support to meet eligible needs

116. People with eligible needs and financial assets above the upper capital threshold of £23,250 may ask the council to meet these needs (see Support Planning Policy).
117. Where the council agrees to do this for someone receiving non-residential care and support, the person will be required to pay the council the cost of arranging the care and support to meet these eligible needs.

Joint arrangements with Children's Services

118. Social care legislation in relation to the provision of services to meet the needs of adult and children is complex and the council is committed to ensuring Adult and Children's Services work collaboratively to achieve the best possible outcomes for individuals and family groups. In the context of paying for services, those arranged by Children's Services are free under legislation. Services arranged by Adult Services are subject to this policy. The following clarification is provided:

Parents who are carers of disabled children

119. People with parental responsibility for a disabled child are entitled to a carer's assessment, and to having their eligible needs met. Adult and Children's Services work with parent carers to ensure that the assessment is carried out by the most appropriate person. As set out above, adult social care services directly to the carer are free.

Young Carers

120. Young people under the age of 18 who have caring responsibilities are entitled to an assessment of their needs by Children's Services. The cared for person is entitled to an adult social care assessment; and to have their needs met where they meet the council's eligibility criteria for adult social care. They will be required to make a contribution to their Personal Budget for adult social care services, based upon a financial assessment.

Waivers

121. Waivers apply only to non-residential care services and related financial assessments and will only be issued in exceptional circumstances where to incur the full assessed contribution would have a detrimental impact on the individual. Whilst each case will be considered on its merits, the contribution may be waived or reduced where it can be shown that paying the full assessed contribution would cause severe financial hardship or the individual's health would be put at serious risk.

122. Waivers will be considered and approved by operational adult social care staff up to their approval limit for expenditure as set out in the council's Scheme of Delegation. All waivers will be documented and reviewed at an agreed frequency.

Non-payment of contribution

123. Where an individual fails to make payment of invoices for care services provided by the council or contribute in accordance with the terms of a Personal Budget, Direct Payment Agreement, Deferred Interest Loan, Deferred Payment Agreement or other financial agreement with the council, action will be taken in accordance with the council's Debt Recovery Policy. This may result in legal action being taken and extra cost to the individual.

Changes in an individual's financial circumstances

124. Individuals must notify changes to their financial circumstances as these can affect their financial assessment. A change in a contribution may be triggered either by a change in type or level of service or the financial circumstances of the individual. In addition an individual may request a review of a financial assessment due to revised information or an error at any time. Changes to contributions may be backdated to the actual date of change.

125. The council reserves the right to review all financial assessments at any point relating to current or historical services provided. This may require individuals to provide new or additional information and evidence where necessary.

126. Where individuals fail to provide information following written requests, contributions will be recalculated to the maximum level from the date of the first written request.

127. Where appropriate we may automatically reassess client contributions based on changes that we become aware of through policy changes, Department of

Works and Pensions or regulation changes. These may include annual increases to standard benefit payments such as the State Retirement Pension, occupational or other private pensions (except fixed rate annuities) or service cost increases.

Advice on benefits

128. As part of the financial assessment process and where applicable, advice will be provided to individuals regarding benefit entitlement. This may include assistance to complete applications or signposting to relevant agencies and services.

Disagreements or complaints

129. Where these situations occur we will attempt to work with individuals in line with the Complaints and Appeals Policy to resolve them and this may involve either:

- a. a review of the financial assessment and/or service;
- b. a complaint or representation against policy; and
- c. an application for a waiver of the contribution.

If an individual remains dissatisfied with the outcome of the assessment process they can ask for the decision to be reconsidered under the council's complaints procedures.

Monitoring and review

130. The council will have procedures in place for monitoring contributions processes, to ensure they are consistent with this policy and associated guidance.

131. The policy will be reviewed annually. This will take into account learning from complaints, compliments and concerns, including from people who use the council's services.

Appendix A

List of services which could be charged out of a Personal Budget

The following list sets out the services that will be provided free of charge, and those for which a contribution will be made by the individual.

Social care funding cannot be used to cover 'board and lodgings', so Personal Budgets cannot be used to pay for housing costs or the purchase of meals. However, individuals may choose to pay these costs themselves from their own money or other means.

This does not apply to people living in care homes, where social care funding can be spent on board and lodgings.

Service Type	Definition of Service	Contribution Policy
Alert Service	Telecare service for older people in their own homes. Provision of alarm and falls sensor. Assessment for provision of emergency response and planned visit.	Free to service users with less than £23,250 in assets who are also in receipt of housing benefit and either Income Support or (Guaranteed) or Pension Credit or Incapacity Benefit or Employment Support Allowance Anyone else can pay privately to receive the service, or be financially assessed by the council and charged by the provider – this could come from an individual's Personal Budget or other means available to them
Arranging non-residential care	Arranging non-residential care and support for people with eligible needs	Free People with eligible needs that can only be met through a residential care placement and financial assets above the upper capital limit may ask the council to arrange their care, in which case they will be charged any costs incurred by the council in making these arrangements (eg cost of managing / negotiating contract with a provider, administration costs)

Service Type	Definition of Service	Contribution Policy
Arranging Residential Care	Arranging residential care placements for people with eligible needs	Free People with eligible needs that can only be met through a residential care placement and financial assets above the upper capital limit may ask the council to arrange their care
Brokerage	This service helps service users produce a Support Plan to buy or arrange services, thus enabling them to have a greater choice and control over the support they require to go about their daily life	Free
Care Home placements	A premises registered with the Care Quality Commission to provide care 24 hours per day for people who can no longer live at home. Care homes 'with nursing' employ nurses as well as carers to provide the care.	Financially assessed and charged by the council
Carers Services	Various services to support unpaid carers of adults caring for adults. Services include: peer support groups, confidence training, information giving, free time whilst cared for is looked after, carers independent voice	Free
Community Meals Service	A weekly or fortnightly frozen meal delivery service	Provider will charge – this could come from an individual's Personal Budget or other means available to them
Community Support to people with Acquired Brain Injury	To provide a community based service to support people under the age of 65 who have an acquired brain injury - services provided are a day centre, support in the community in particular aiding discharge from hospital and supporting carers.	Subsidised by the council. Provider charges fee for attendance, meals, activities, transport. this could come from an individual's Personal Budget or other means available to them
Community Support for People under 65 with Dementia	To provide a community based service to enable people under 65 with dementia to have access to person centred one to one support by a specialist trained support team. Carers are also supported.	Subsidised by the council. Provider charges fee for activities including refreshments, transport. This could come from an individual's Personal Budget or other means available to them

Service Type	Definition of Service	Contribution Policy
Deferred Payment Agreements	Setting up a formal deferred payment agreement so that costs of care will be recouped once a property is sold or the person dies	The council will charge a flat rate to cover all costs, including legal costs, valuations fees etc The council will also charge interest on the outstanding loan at the rate set nationally by the Department of Health.
Dementia Prevention Services	Various services to support people with a diagnosis of dementia. Services include: dementia advisors, one to one support, information giving, day centres	Free
Direct Payments advice and managed accounts	The provision of a Payroll and Managed Accounts Service to all Service Users and Carers referred by the council or Oxford Health Foundation Trust about all aspects of receiving and managing a Direct Payment/Personal Budget / Personal Health Budget. A Managed Account is where all of an individual's Direct Payment is paid to the Supported Managed Account Service Provider who manages the money behalf on an individual according to the individual's Support Plan	Free
Equipment and minor adaptations	Provision of equipment into individual's own home to aid mobility (grab rails, stair lifts, hoists etc)	Free
Extra Care Housing	Specialist one or two bedroom flats for older people (55 plus) to rent or purchase. Provides planned day-time care and emergency 24/7 care response.	Financially assessed by the council and charged by the provider – this could come from an individual's Personal Budget or other means available to them
Falls Service	The service is provided by specialist nurses who offer a detailed assessment and make recommendations about medication, physiotherapy and home adaptations.	Free
Flexible care	A befriending service which supports older people with	Free, although service users are expected to pay for own activity

Service Type	Definition of Service	Contribution Policy
	dementia and/or significant mental health needs that will enable the person to engage with services and work with them in a variety of activities to increase their confidence and improve their quality of life in order to remain in the community. The service provider also supports their carers.	or refreshments if they are taken out.
Foot care	The aim of this service is to use volunteers to provide a foot care service to older people who, through reasons of frailty and disability, are unable to reach or see to cut their own nails safely.	Subsidised by the council, provider charges – this could come from an individual's Personal Budget or other means available to them
Home from hospital	The service will provide low level support to enable service users who have recently been discharged from hospital to regain confidence by providing assistance with practical tasks	Free
Home support	Delivery of a range of personal care and support services to maintain people in their own homes for as long as possible	Financially assessed by the council and charged by the provider – this could come from an individual's Personal Budget or other means available to them
Information and advice	Provision of the right information about Adult Social Care, welfare benefits, welfare rights and other related issues which help us to support and promote strong communities so that people live their lives as successfully, independently and safely as possible	Free
Intermediate Care Beds	Provide rehabilitation to enable people to regain or maintain skills and independence and return to their own home. The beds are in a registered care home. Carers and nurses from the care home support intermediate care residents, with specialist assessment and care provided by occupational and physiotherapists.	Free for up to the first 6 weeks and then financially assessed by the council and charged by the provider – this could come from an individual's Personal Budget or other means available to them

Service Type	Definition of Service	Contribution Policy
Laundry Service	A weekly laundry service collected and delivered to the door	Provider will charge – this could come from an individual's Personal Budget or other means available to them The council provides subsidy for people with incontinence
Learning Disability Day Services	Day Centre provision aimed at supporting adults with a learning disability	Financially assessed by the council and charged by the provider – this could come from an individual's Personal Budget or other means available to them
Reablement	Care and support in people's own homes to support people to maintain and regain independence.	Free for up to the first 6 weeks. Ongoing care needs after this time are financially assessed and charged by the provider – this could come from an individual's Personal Budget or other means available to them.
Respite	A short stay in a care home or a care home 'with nursing'. The stay may last from a few nights to a few weeks.	Financially assessed by the council. This could come from an individual's Personal Budget or other means available to them
Shared Lives	A scheme for vulnerable adults that provides the opportunity to live or stay temporarily in a Shared Lives carer's home, or sometimes to be supported in their own home.	Financially assessed by the council and charged by the provider – this could come from an individual's Personal Budget or other means available to them
Shopping Service	A weekly shopping collection and delivery service, if required will put the shopping away with a care check by the driver at the time of delivery	The council will charge for delivery – this could come from an individual's Personal Budget or other means available to them The cost of the shopping is payable by the individual to the provider.
Supported Living	A range of housing and support services designed to help vulnerable adults including those with a disability retain their independence in their community.	Financially assessed by the council and charged by the provider – this could come from an individual's Personal Budget or other means available to them
Tier 2 Day Services	The aim of this Service is to provide support to older people that helps prevent the need for	Subsidised by the council. Provider charges a fee for

Service Type	Definition of Service	Contribution Policy
	<p>higher level services. The Service enables older people to live in the community for as long as possible.</p> <p>There are two elements to this service:</p> <ol style="list-style-type: none"> 1. A day centre provided on a regular basis in a building based location 2. Community Networks supporting a wider range of service users who may not want or be able to attend a day centre 	<p>attendance, meals, and activities.</p> <p>There is a charge for return transport provided by the council to Tier 2 Day Services. This could come from an individual's Personal Budget or other means available to them</p>
Tier 3 Day Services	<p>Day Centre provision aimed at supporting adults, particularly older people of higher level needs that those of tier 2 services people to live in the community for as long as possible. Many of these will be FACS eligible.</p>	<p>Subsidised by the council.</p> <p>Provider charges fee for attendance, meals, and activities - this could come from an individual's Personal Budget or other means available to them</p> <p>There is a charge for return transport provided by the council to Tier 3 Day Services. This could come from an individual's Personal Budget or other means available to them</p>
Transport	<p>Transport provided by the council to access services</p>	<p>Subsidised by the council.</p> <p>Provider will charge – this could come from an individual's Personal Budget or other means available to them</p>

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Oxfordshire County Council Policy for Adult Social Care Appeals, Complaints and Compliments

Please note, any reference to the council's appeals process is based on interim policy and practice and may be subject to change following the release of the Care Act 2014 guidance on handling appeals.

Purpose

1. This policy outlines what the council will do to ensure that adult social care appeals and statutory complaints are handled in line with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.
2. This policy is aligned with the Care Act 2014, associated regulations and statutory guidance, which has replaced most of the previous adult social care legislation and guidance, including National Health Service and Community Care Act 1990 and Fair Access to Care Services: Guidance on eligibility criteria for adult social care.
3. It should be read in conjunction with other Oxfordshire County Council policies and associated guidance. This includes other adult social care policies, and children's social care policies where applicable [\(insert link when available\)](#).
4. It should also be read in conjunction with partners' policies where applicable. Examples include health commissioning and provider partners' policies and guidance, including on NHS Continuing Healthcare and mental health services.

Context

5. Oxfordshire County Council aims to support and promote strong communities so that people live their lives as successfully, independently and safely as possible. The council aims to provide independence and choice, be fair and equitable and give individuals more power and control over their lives.
6. Oxfordshire County Council is committed to delivering quality services, so it is essential that the people who access adult social care services feel able to give feedback, whether this is positive or negative.
7. By taking comments and complaints seriously, the council can ensure that it continuously reviews and improves its services to promote people's wellbeing. This policy will support people's wellbeing by ensuring that the council responds and listens to the wishes and feelings of the people who are using its services.
8. Wellbeing relates to any of the following:

- a. personal dignity (including treatment of the individual with respect);
- b. physical and mental health and emotional well-being;
- c. protection from abuse and neglect;
- d. control by the individual over day-to-day life (including over care and support provided and the way it is provided);
- e. participation in work, education, training or recreation;
- f. social and economic well-being;
- g. domestic, family and personal relationships;
- h. suitability of living accommodation;
- i. the individual's contribution to society.

Policy Principles

9. The council is committed to adhering to the six principles of good complaints handling, as set out by Local Government Ombudsman:
 - **getting it right;**
 - **being customer focused;**
 - **being open and accountable;**
 - **acting fairly and proportionately;**
 - **putting things right;**
 - **seeking continuous improvement.**

Transparency

10. The process for making an appeal or complaint about adult social care services will be as simple and transparent as possible.
11. All formal responses to people making appeals and complaints will include honest, evidence-based explanations, giving reasons for decisions.

Information and Advice

12. The council will ensure that clear and comprehensive information and advice about the appeals and complaints process and advocacy services is made available, where appropriate.
13. All information will be made available in a range of formats and presented in plain English.
14. The Comments and Complaints Service will be responsible for ensuring that people know how to contact the Local Government Ombudsman.
15. This policy will be explained and referred to in the induction training for all adult social care staff. Further training on this policy and the associated guidance will be made available to all relevant staff.

Fairness and Equity

16. The council will ensure that all statutory complaints are investigated thoroughly, fairly and without prejudice towards staff involved or the person making the complaint.
17. Decisions made in the process of handling an appeal or complaint will be proportionate and appropriate.

Choice and Control

18. The vision for adult social care in Oxfordshire is to enhance people's control over the decisions that will impact their lives, as the council believes that people themselves are best placed to determine the care and support they need. This includes giving people the opportunity to appeal against a decision relating to their care and support, or raise concerns with the process and/or the service they are receiving or have received.
19. Focusing on best outcomes for the council and the person making the appeal or complaint, the council will ensure that its staff are equipped and empowered to act decisively to resolve appeals and complaints.

Partnership

20. The council will work closely with other social care and health organisations to resolve appeals and complaints that concern more than one organisation as promptly and effectively as possible.

Promoting prevention, early intervention and independence

21. The council will use all feedback and lessons learnt from complaints to improve service design and delivery, with an aim to intervene promptly where issues arise and prevent further complaints.
22. The council will have appropriate systems in place for recording, analysing and reporting on complaints and compliments, so that lessons can be learnt and service improvements made.

Policy Inclusions

23. An appeal is a request for the review of a decision(s) taken by adult social care staff related to:
 - eligibility to receive funded social care support;
 - the professional assessment of needs;

- support planning; including
- Personal Budgets – the amount of money allocated to a person to meet outcomes of their Support Plan.

24. Any statutory adult social care service or function may be complained about. This may include, but is not limited to:

- the referral process/getting access to services;
- the assessment and care planning process;
- delays or waiting times;
- the behaviour of staff;
- issues related to funding or financial assessment.

25. If a complaint is to be made, it should be within 12 months of the incident occurring. However the council has discretion to consider a complaint outside this period if it is satisfied the person making the complaint had good reasons for not making the complaint within the time limit and it is still possible to investigate the complaint effectively and fairly.

26. A person is able to make a complaint or appeal against a decision if he/she is:

- a person (or their representative) who receives or has received adult social care services arranged by Oxfordshire County Council;
- a person (or their representative) who is affected or likely to be affected by the action, omission or decision of Oxfordshire County Council's adult social care services.

27. A representative is someone who is acting on behalf of a person who:

- has died;
- is unable to make the complaint themselves because of physical incapacity or lack of capacity (within the meaning of the Mental Capacity Act 2005); or
- has requested the representative to act on their behalf.

Policy Exclusions

28. Certain types of appeal or complaint are not intended to be dealt with by this policy and are more appropriately dealt with through alternative mechanisms or forums. These include, but are not limited to:

- complaints or appeals where the person does not meet the requirements of paragraph 25 in this policy;
- complaints that are made verbally and can be resolved within one working day;
- where the same complaint has already been dealt with by the council or the local commissioner;

- (iv) complaints or appeals that do not relate to actions or decisions of Adult Social Care or to anybody acting on its behalf;
- (v) any matter where the person making the complaint could have recourse to the courts – for example, where there is alleged negligence;
- (vi) any matter that is already subject to legal proceedings against the council;
- (vii) personnel complaints from staff employed by the council;
- (viii) complaints arising out of an alleged failure to comply with a request for information under the Freedom of Information Act 2000; and
- (ix) complaints that should be dealt with under the council's Corporate Complaints procedure.

Independent Advocacy

- 29. Independent advocacy will be offered to everyone who makes an appeal or a complaint. Details of the advocacy service will be included in the information sent to people making an appeal or a complaint, when first lodging their case.
- 30. Where complaints cross adult social care and health boundaries consideration will be given on a case by case basis as to whether independent NHS advocacy services are required.

Mental Capacity

- 31. In line with the principles set out in the Mental Capacity Act, the council will assume that people have mental capacity and can make decisions for themselves unless it is established otherwise.
- 32. The council will facilitate the person's involvement and supported decision making throughout the processes as much as possible. This will be the case whether they have mental capacity or not, in line with the principles set out in the Mental Capacity Act.
- 33. If the council reasonably believes a person may lack capacity to make a decision in the appeal and complaint process, it will carry out a capacity assessment in relation to the specific decision to be made. This and the following steps are covered in the associated mental capacity guidance.
- 34. If a person has been assessed as lacking capacity to make a decision in relation to an appeal or a complaint, the council will determine if there is an appropriate substitute decision maker. This will usually be someone who holds Lasting Power of Attorney for Health and Welfare.
- 35. If a person has been assessed as lacking capacity to make a decision and there is not an appropriate substitute decision maker, the council will follow the best interests process set out in the Mental Capacity Act to reach the decision. This will include consulting interested family and friends to obtain their views.

Safeguarding

36. Where issues of abuse or neglect are raised in the course of handling an appeal or complaint, the council's safeguarding policy will be referred to and the issue should be discussed with the adult safeguarding lead, as well as the Safeguarding Manager if appropriate.
37. If the safeguarding issue concerns a person over the age of eighteen who is continuing to receive children's services, children's safeguarding teams and other partner organisations/persons involved in the case will be consulted in handling the appeal or complaint. This also applies to people moving from another local authority to Oxfordshire who are in the process of transitioning from children's to adult social care and support.
38. A decision about how to proceed with the appeal or complaint will be based on the wishes of the person at the centre of the safeguarding issue. If the council thinks a person may lack capacity to decide how they want to proceed, it will carry out a mental capacity assessment of this (see Mental Capacity section).

Handling and Consideration of Appeals

39. On receipt of an appeal the council will have procedures in place to:
- (i) acknowledge the appeal and offer to discuss the matter with the person making the appeal;
 - (ii) review the person's reasons for appealing against a decision in a timely manner;
 - (iii) treat people making an appeal with respect and courtesy;
 - (iv) provide assistance to people making an appeal to enable them to understand the procedure in relation to appeals, or to provide advice on where they may obtain such assistance (so far as is reasonably practicable);
 - (v) keep the person making the appeal informed, as far as is reasonably practicable, as to the progress of their appeal;
 - (vi) inform the person making the appeal of the outcome of their appeal;
 - (vii) take action if necessary in light of the outcome of an appeal;
 - (viii) escalate the appeal if the person making the appeal is not satisfied with the outcome of the initial review.

Handling and Consideration of Complaints

40. On receipt of a statutory complaint the council will have procedures in place to:
- (i) acknowledge the complaint within the statutory timeframe and offer to discuss the matter with the person making the complaint;
 - (ii) deal efficiently with complaints and investigate them properly, appropriately and in a timely manner;

- (iii) treat people making complaints with respect and courtesy;
- (iv) provide assistance to people making a complaint to enable them to understand the procedure in relation to complaints, or to provide advice on where they may obtain such assistance (so far as is reasonably practicable);
- (v) resolve the complaint within statutory timeframes;
- (vi) keep the person making the complaint informed, as far as is reasonably practicable, as to the progress of the investigation;
- (vii) inform the person making the complaint of the outcome of their complaint ;
- (viii) take action if necessary in light of the outcome of a complaint.

41. If the complaint relates to a service provider and the person making the complaint agrees, it will initially be passed to the provider to investigate and provide a response which will be coordinated through the Comments and Complaints Service. If the complaint cannot be resolved in this way, or the person making the complaint does not give their consent, the principles of this policy will be applied. In order to manage these complaints the Comments and Complaints Service will work in partnership with the Contracts Monitoring Team.

42. Where a complaint relates to the council and other social care and health organisations, the council is duty bound to work with all organisation(s) involved to co-ordinate communication with the person making the complaint and a response to their complaint. This duty to co-operate, contained within the 2009 Regulations, ensures that all organisations concerned will attend or be represented at any meeting related to the complaint and relevant information is shared. Protocol between the council and its healthcare partners exists to ensure compliance with this duty.

43. Complaints relating to more than one organisation will be dealt with by each body according to their own complaints policies and procedures, and the relevant governing legislation, but a lead organisation for responding to the complaint will be identified as appropriate.

Responsibilities

44. The Chief Executive of the council has overall responsibility for ensuring compliance with the complaints arrangements and for agreeing all responses to complaints.

45. The Director of Adult Social Services has delegated authority to ensure compliance with the appeals and complaints arrangements within Adult Social Care. The Deputy Director, or in most cases the relevant Service Manager, has delegated authority to agree responses to statutory complaints and appeals. This will depend on how serious the complaint is considered to be.

46. The Complaints Manager, as defined in The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, is

responsible for managing the complaints procedure. The Complaints Manager will be responsible for undertaking training on procedures, supporting staff in dealing with complaints and for publicising the Comments and Complaints Service. The 'Complaints Manager' is a function, and will be fulfilled by staff in the Comments and Complaints Service as appropriate.

Unacceptable Behaviour and Unreasonably Persistent Complaints

47. The council does not expect its employees to tolerate unacceptable behaviour from people making an appeal or complaint. This includes, but is not limited to, abusive, offensive or threatening behaviour.
48. Similarly, the council recognises that complaints are often made as a last resort. As part of our service, we will not normally limit the contact people making an appeal or complaint have with our offices. However, in the interests of effective use of resources for people making an appeal or complaint and the wider public, we may restrict access on occasions where contact by a person making a complaint becomes so frequent that it hinders consideration of their, or others' complaints or the provision of council services. When dealing with these issues the principles set out in the Corporate Complaints Procedure will be adhered to.

Monitoring and Review

49. The council will have procedures in place for the purposes of monitoring appeals and complaints dealt with under this policy. Reporting will take place on a quarterly and annual basis to the Adult Social Care Leadership Team, and copies of the annual report will be available on the intranet and internet. Reports will also be provided for inspection purposes when required.
50. This policy will be reviewed annually by the Comments and Complaints Service. This will take into account learning from complaints, compliments and concerns, including from people who use the council's services.

Oxfordshire County Council Policy for Safeguarding Adults

Purpose

1. This policy outlines the council's policy for the safeguarding of vulnerable adults. It provides a framework to support professionals and others to take appropriate and timely safeguarding action while not prescribing how organisations undertake their safeguarding duties. It includes definitions of scope and a statement of principles for use by agencies to develop and assess the effectiveness of their local safeguarding arrangements. It also describes, in broad terms, the outcomes for adult safeguarding, for both individuals and agencies.
2. There can be no tolerance of abuse. It is the right of all residents to be treated as an individual with dignity and respect, to live their lives free from abuse and fear of abuse and to have care and support in accordance with their needs. This right is underpinned by the duty on public agencies under the Human Rights Act 1998 to intervene proportionately to protect the rights of citizens.
3. The policy is aligned with the Care Act 2014, associated regulations and statutory guidance, which has replaced the Department of Health 'No Secrets' statutory guidance on safeguarding adults.
4. This policy should be read in conjunction with other Oxfordshire County Council policies and associated guidance. This includes other adult social care policies, and children's social care policies where applicable (insert link when available).
5. It should also be read in conjunction with partners' policies and guidance where applicable, such as those of health commissioning and provider partners.
6. Procedures and guidance to support the implementation of this policy can be found on the Oxfordshire Safeguarding Adults Board website, 'Safe from Harm' www.safefromharm.org.uk

Context

7. Oxfordshire County Council aims to support and promote strong communities so that people live their lives as successfully, independently and safely as possible. The council aims to promote independence and choice, be fair and equitable and give service users more power and control over their lives.

8. Keeping people safe depends upon strong multi-agency and multi-disciplinary partnerships. As a member of the Oxfordshire Safeguarding Adults Board, the council is committed to adopting a multi-agency approach to safeguarding vulnerable adults from abuse and neglect, and improving their wellbeing.
9. Wellbeing relates to any of the following:
 - a. personal dignity (including treatment of the individual with respect);
 - b. physical and mental health and emotional wellbeing;
 - c. protection from abuse and neglect;
 - d. control by the individual over day-to-day life (including over care and support provided and the way it is provided);
 - e. participation in work, education, training or recreation;
 - f. social and economic wellbeing;
 - g. domestic, family and personal relationships;
 - h. suitability of living accommodation;
 - i. the individual's contribution to society.
10. The Oxfordshire Safeguarding Adults Board brings together local agencies to work in partnership to help and protect adults whose circumstances make them vulnerable. It does this by creating a framework within which all responsible agencies ensure the development and implementation of coherent process and approach for the protection of vulnerable adults at risk of abuse and neglect. It also enables a consistent and effective response to any circumstance giving grounds for concern or formal complaint, or expressions of anxiety.
11. This policy and its associated guidance can be used by all council staff, including managers, professionals, volunteers and staff working in public, voluntary and private sector organisations, to understand their safeguarding duties and responsibilities.

Policy Principles

12. The council is committed to ensuring that all incidents of suspected harm, abuse or neglect are reported and responded to proportionately to:
 - **Enable people to maintain the maximum possible level of independence, choice and control.**
 - **Promote the wellbeing, security and safety of vulnerable people consistent with his or her rights, capacity and personal responsibility and to prevent abuse occurring wherever possible.**
 - **Ensure that people feel able to complain without fear of retribution.**

- **Ensure that all professionals who have responsibilities relating to safeguarding adults have the skills and knowledge to carry out this function.**
 - **Ensure that safeguarding adults is integral to the development and delivery of services in Oxfordshire.**
13. To achieve these aims, everything the council does must be underpinned by the following key principles:
- **Empowerment:** Providing people with support, assistance and information, enabling them to make choices and give informed consent.
 - **Protection:** Support and representation for those in greatest need.
 - **Prevention:** It is better to take action before harm occurs.
 - **Proportionality:** Proportionate and least intrusive response, appropriate to the risk presented.
 - **Partnership:** Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
 - **Accountability:** Accountability and transparency in delivering safeguarding.
14. These principles will be used by the council to benchmark existing adult safeguarding arrangements and to measure future improvements.

Policy Inclusions

15. 'Safeguarding adults' relates to all work that enables vulnerable adults to live a life that is free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, having regard to their views, wishes, feelings and beliefs in deciding on any action.
16. The council's safeguarding duties apply to an adult who:
- a. has needs for care and support (whether or not the local authority is meeting any of those needs);
 - b. is experiencing, or at risk of, abuse or neglect; and
 - c. as a result of those care and support needs, is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

17. If a safeguarding issue concerns a person over the age of eighteen who is continuing to receive children's services, the adult safeguarding team may involve children's safeguarding colleagues and other partner organisations/persons relevant to the case. This also applies to people moving from another local authority to Oxfordshire who are in the process of transitioning from children's to adult social care.

What are abuse and neglect?

18. Abuse or neglect can take many forms and the individual circumstances of each case will always be considered; although the criteria in paragraph 16 will need to be met before the issue is considered a safeguarding concern. Exploitation, in particular, is a common theme within the sphere of abuse and neglect.

19. The most common types of abuse and neglect are:

Physical abuse – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

Domestic violence – including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.

Sexual abuse – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

Psychological abuse – including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

Financial or material abuse – including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Modern slavery – encompasses slavery, human trafficking, forced labour, and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Discriminatory abuse – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.

Organisational abuse – including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Neglect and acts of omission – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Self-neglect – this covers a wide range of behaviour including the neglect of one's personal hygiene, health or surroundings and behaviours such as hoarding.

20. Incidents of abuse may be one-off or multiple, and affect one person or more. It is important to note that abuse is not always intentional.

Policy Exclusions

21. The council's adult safeguarding duty does not apply to adults in prison and approved premises where prison governors and National Offender Management Service respectively have responsibility. However, senior representatives of those services may sit on the council's Safeguarding Adults Board and play an important role in the strategic development of adult safeguarding locally.

Decision not to take part in a safeguarding intervention

22. The council recognises that a person can refuse intervention to support them with a safeguarding concern, or request that information about them is not shared with other safeguarding partners. The individual's wishes will be respected. However, there are a number of circumstances where this request can reasonably overridden, including:
- the person lacks the mental capacity to make that decision – this must be properly explored and recorded in line with the Mental Capacity Act;
 - other people are, or may be, at risk, including children;
 - sharing the information could prevent a crime;
 - This list is not meant to be exhaustive.

Independent Advocacy

23. The council has a responsibility to identify support for people who are subject to a safeguarding enquiry or review. This will involve informing the adult about their right to an independent advocate and providing information on how to access appropriate services, such as independent legal advice.

Mental Capacity

24. What happens as a result of a safeguarding enquiry will reflect the wishes of the individual wherever possible. Where a person is unable to make informed choices about their own safety because they lack capacity to do so, and there is no one authorised to make decisions on their behalf (e.g. Power of Attorney or Court appointed deputy), the council will act in their best interests and ensure that all decisions are proportionate to the level of concern. This best interests process includes taking into account the past and present views, wishes and feelings, and beliefs and values of the person concerned, as well as consulting with relevant family and friends.
25. In line with the Mental Capacity Act 2005, the council will consider if an Independent Mental Capacity Advocate should be instructed for the person being abused or neglected, or the alleged perpetrator of the abuse or neglect. This should be considered if protective measures are proposed or have already been taken.
26. Where a person does have capacity but they appear to have care and support needs which if not met will leave them or others exposed to high levels of risk, a multi-agency risk assessment will be carried out to determine the level of risk and to decide what action (if any) should be taken to reduce this. This is covered in the associated guidance.

Roles and Responsibilities

27. In line with the Care Act 2014 the council will:
- a. make enquiries, or cause others to do so, if it believes an adult is experiencing, or is at risk of, abuse or neglect. An enquiry should establish whether any action needs to be taken to prevent or stop abuse or neglect, and if so, by whom;
 - b. co-operate with each of its relevant partners in order to protect the adult. Each partner must also co-operate with the council;
 - c. arrange, where appropriate, for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or

- Safeguarding Adult Review (SAR) where the adult has 'substantial difficulty' in being involved in the process and where there is no other suitable person to represent and support them;
- d. establish an Oxfordshire Safeguarding Adults Board.

Oxfordshire Safeguarding Adults Board

28. All providers and commissioners of care services have a responsibility for the quality and safety of these services. In commissioning services, the council will ensure that the following are included in the commissioning requirements:
- Oxfordshire Safeguarding Adults procedures, including allegations against staff, are followed.
 - Oxfordshire Information Sharing protocols are followed.
 - Staff receive appropriate safeguarding training.
 - Safer Recruitment policies are adhered to.
 - Agencies contribute as necessary to serious case reviews.
29. The Oxfordshire Safeguarding Adults Board will work in collaboration with other Boards and Partnerships that have a role in keeping people safe.
30. The Oxfordshire Health and Wellbeing Board and the Oxfordshire Safeguarding Adults Board have an on-going and direct relationship, communicating regularly through identified lead individuals. A [protocol on the working arrangements between the Oxfordshire Safeguarding Adults Board and the Oxfordshire Health and Wellbeing Board](#) is in place to support both partnerships to operate effectively.
31. The Oxfordshire Safeguarding Adults Board and the Oxfordshire Safeguarding Childrens Board will work together to ensure that the needs of the whole family are considered, making sure that it is understood that where there is concern about a vulnerable adult and there are children in the same household, they too could be at risk.
32. The council will work with the police in their responsibility to investigate and reduce crime and keep communities safe.
33. In line with the government's Prevent strategy the council will have due regard to its duty to prevent people from being drawn into terrorism as part of its responsibility to protect vulnerable adults from the risk and experience of abuse and neglect.
34. The council recognises that citizens and communities have an important role to play in preventing, detecting and reporting abuse.

35. When staff in provider services are concerned that a vulnerable person may be at risk of harm as a result of abuse, the manager of the service (through the relevant staff) is responsible and accountable for identifying and implementing immediate safeguards for the person. This will be reflected in the local policies of the provider services.

Membership of the Oxfordshire Safeguarding Adults Board

36. As a member of the Oxfordshire Safeguarding Adults Board the council will have a Designated Adult Safeguarding Manager responsible for the management and oversight of individual complex cases and coordination where allegations are made or concerns raised about a person, whether an employee, volunteer or student, paid or unpaid. The Designated Adult Safeguarding Manager will keep in regular contact with their counterparts in partner organisations. They should also have a role in highlighting the extent to which their own organisation prevents abuse and neglect taking place.
37. The council will identify a senior manager to take a lead role in the organisational and in inter-agency arrangements, including the Oxfordshire Safeguarding Adults Board, in order for the Board to be an effective decision-making body, providing leadership and accountability. The council's Safeguarding Adults Board member will be sufficiently senior and have the authority to commit resources and make strategic decisions. To achieve effective working relationships, based on trust and transparency, the council will make efforts to understand the contexts and restraints within which their Safeguarding Adults Board counterparts work.
38. The council will ensure that relevant training is provided for staff and volunteers on this policy, guidance and professional practices. This will include:
- basic mandatory induction training with respect to awareness that abuse can take place and the duty to report it;
 - more detailed awareness training, including training on the recognition of abuse and their own role and responsibilities;
 - specialist training for those who will be undertaking enquiries, and managers; and, training for elected members and others e.g. Healthwatch members; and
 - post qualifying or advanced training for those who work with more complex enquiries and responses, or who act as the council's expert in a particular field, e.g. in relation to legal or social work, those who provide medical or nursing advice to the council or the Oxfordshire Safeguarding Adults Board.

Information Sharing

39. The council will willingly share information requested by the Oxfordshire Safeguarding Adults Board in support of reviews or other safeguarding functions where it is appropriate to do so and in line with the Board's Information Sharing Agreement.
40. Any sharing of information between agencies for the purposes of safeguarding adults at risk of harm as a result of abuse or neglect will comply with the requirements of the Data Protection Act 1998.
41. The council will disseminate information about when and how to share information in cases where abuse of adults in vulnerable situations is suspected or encountered.
42. Any decision to share information must be proportionate to the individual circumstances. This does not preclude information being shared within the council usually with their line manager or safeguarding lead.

Monitoring and Review

1. This policy will be reviewed annually by the Deputy Director of Adult Social Care or by an appropriate delegated senior officer. The Oxfordshire Safeguarding Adults Board will be asked to report on the implementation of this policy.
2. This policy and accompanying guidance will be monitored and reviewed through learning from complaints, compliments and concerns.

Appendix 1 - Outcomes in Adult Safeguarding

This section sets out some suggestions for translating the council's safeguarding principles into outcomes (the difference that is made) for agencies involved in safeguarding adults and from the perspective of the vulnerable adult.

Vulnerable Adult

Empowerment	I am consulted about the outcomes I want from the safeguarding process and these directly inform what happens.
Protection	I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want and to which I am able.
Prevention	I am provided with easily understood information about what abuse is, how to recognise the signs and what I can do to seek help.
Proportionality	I am confident that the responses to risk will take into account my preferred outcomes or best interests.
Partnership	I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. I am confident that agencies will work together to find the most effective responses for my own situation.
Accountability	I am clear about the roles and responsibilities of all those involved in the solution to the problem.

Local agencies

Empowerment	We give individuals relevant information about recognising abuse and the choices available to them to ensure their safety. We give them clear information about how to report abuse and crime and any necessary support in doing so. We consult them before we take any action. Where someone lacks capacity to make a decision, we always act in his or her best interests.
Protection	Our local complaints, reporting arrangements for abuse and suspected criminal offences and risk assessments work effectively. Our governance arrangements are open and transparent and communicated to our citizens.
Prevention	We can effectively identify and appropriately respond to signs of abuse and suspected criminal offences. We make staff aware, through provision of appropriate training and guidance, of how to recognise signs and take any appropriate action to prevent abuse occurring. In all our work, we consider how to make communities safer.
Proportionality	We discuss with the individual and where appropriate with partner agencies the proportionality of possible responses to the risk of significant harm before we take a decision. Our arrangements support the use of professional judgement and the

	management of risk.
Partnership	We have effective local information-sharing and multi-agency partnership arrangements in place and staff understand these. We foster a “one” team approach that places the welfare of individuals above organisational boundaries.
Accountability	The roles of all agencies are clear, together with the lines of accountability. Staff understand what is expected of them and others. Agencies recognise their responsibilities to each other, act upon them and accept collective responsibility for safeguarding arrangements.

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Division(s):

CABINET - 24 FEBRUARY 2015

Oxfordshire County Council Fire and Rescue Service Community Risk Management Plan (CRMP) Draft Action Plan 2015-16

Report by Chief Fire Officer

Introduction

1. The Fire and Rescue Services Act 2004 requires the Secretary of State to prepare a Fire and Rescue National Framework to which Fire Authorities must have regard when discharging their functions. The 2012 Framework requires each Fire and Rescue Authority to produce a publicly available Integrated Risk Management Plan (IRMP). Within Oxfordshire Fire and Rescue Service (OFRS) we have called this our Community Risk Management Plan (CRMP) to make it more meaningful to the public. This report proposes a number of projects to be included within the Fire Authority's CRMP for the fiscal year 2015-16.
2. The proposals in this report were presented to the Performance Scrutiny Committee on 25 September 2014.
3. The agreed proposals within this Action Plan 2015-16 have been subjected to full internal and external consultation for a period of 12 weeks. Cabinet is therefore invited to comment on the proposed Action Plan, consultation responses and management responses to the consultation responses.
4. Our medium term financial plan and supporting business strategy underpin the proposals within our CRMP action plan.
5. The Secretary of State published the latest Fire and Rescue National Framework in July 2012. The purpose of the Framework was to provide strategic direction from central government whilst ensuring that authorities continue to make local decisions. The Framework sets out the Government's objectives for the Fire and Rescue Service and what fire and rescue authorities should do to achieve these objectives.
6. Each Fire and Rescue Authority should ensure that the IRMP:
 - Is regularly reviewed and revised and reflects up-to-date risk information and evaluation of service delivery outcomes
 - Has regard to the risk analyses completed by Local and Regional Resilience Forums including those reported in external Community Risk Registers (CRRs) and internal risk registers, to ensure that civil and terrorist contingencies are captured in their IRMP
 - Reflects effective consultation during its development and at all review stages with representatives of all sections of the community and stakeholders

- Demonstrates how prevention, protection and response activities will be best used to mitigate the impact of risk on communities in a cost effective way
 - Provides details of how Fire and Rescue Authorities deliver their objectives and meet the needs of communities through working with partners
 - Has undergone an effective equality impact assessment process.
7. The framework also states that Fire and Rescue Authorities should review the effectiveness of 'cross-border' integration arrangements with neighbouring authorities and set these out appropriately in their IRMPs.
8. Oxfordshire Fire and Rescue Authority published its strategic CRMP in April 2013 providing the strategic direction for the next five years. This document is subjected to annual review and updated and amended as required. The current strategic IRMP requires no amendment for the fiscal year 2015-16.
9. Oxfordshire Fire and Rescue Service senior management have responded to the comments made during the consultation period and the response summaries are available to Cabinet within this report.

Consultation

10. Consultation on the draft Community Risk Management Action Plan 2015 – 2016 commenced on 10 October 2014 and concluded on 2 January 2015. In order to try and obtain the widest spectrum of responses, several different means of capturing opinions and ideas were used in this year's consultation process:

Oxfordshire County Council E Consult – Internet based software to survey a database of interested parties.

Letters were sent to all Oxfordshire County Councillors, District, and Town & Parish Councils.

Letters were sent to representative bodies.

Letters were sent to all surrounding Fire & Rescue Services.

Focus groups were held with operational firefighters both Wholetime & On-Call.

An invite to participate in the consultation was promulgated in Oxfordshire Fire & Rescue Service weekly newsletter (Routine Orders).

All Fire & Rescue staff were emailed with an invite to participate in the consultation.

The consultation document was published on both the Intranet & Internet.

11. A total of 73 responses were received and are broken down as follows:

11 anonymous responses via E Consult

1 response via E Consult from Warwickshire Fire & Rescue Service

2 external emails

1 Middle Manger focus groups (involving 12 Group and Station Managers)

3 Whole time station focus groups (involving 15 personnel)

- 3 On-call station focus groups (involving 30 personnel)
- 1 internal email from operational Watch Manager
- 1 internal email from an operational Firefighter

12. The following section summarises the projects for inclusion in the CRMP Action Plan for the fiscal year 2015-16. These include a consultation response summary & OFRS senior management response summary. A full consultation response report will be available & published in March 2015.
13. **Project 1:** Implement Emergency Medical Support Services in collaboration with South Central Ambulance Service (SCAS).

Responsible Manager: Area Manager - Operations and Resilience

Objective:

14. South Central Ambulance Service (SCAS) and Oxfordshire Fire and Rescue Service (OFRS) have entered into a partnership agreement to offer an initial emergency response to agreed categories of medical emergency at the request of SCAS using First Person on Scene (FPOS) qualified Fire and Rescue Personnel
15. OFRS's vision is to make life safer in Oxfordshire. Carrying out first responder duties is one way in which we achieve this aim. SCAS works to provide excellent patient service, saving more lives and improving health. The 'First responder' initiative is an efficient and effective way of both parties jointly achieving this aim.
16. The implementation of professional first aid and trauma care training to our firefighters is essential to ensure they can provide medical assistance to both local communities and their colleagues at a wide range of emergency incidents.
17. FPOS provision forms part of the wider framework OFRS provides to ensure we meet our legal, moral and financial obligations. Following initial trials with the fire station in Thame, OFRS would like to extend this capability to other stations throughout the county.

Consultation Summary:

18. The majority of responses were very positive and fully supported the opportunity to save lives by attending first responder incidents and bringing benefits to the community. Responses from our staff indicated that first responder incidents will increase the number of calls to on-call stations thus raising morale and improving recruitment and retention rates. Concerns were raised that on-call primary employers may challenge their staff if they attend an increased number of non-fire related calls. Suggestions included one person attending first responder incidents in a separate vehicle to reduce the impact of sending fire appliances with entire crews. It was also suggested that FPOS trained staff should accompany ambulance crews as observers to increase their experience.

19. The following bullet points indicate a cross section of consultation responses:
- This is a good idea but training of good quality and with regular updates must be maintained and all competent crews should be trained in order to spread the burden of extra calls.
 - Yes, good idea it works in other countries including the USA, Germany and other European countries. It makes a difference to fire fighters and the public, we can save more lives.
 - This will improve the moral of the On Call sections as it will increase their calls and their feelings of helping the public.
 - This is a good opportunity for collaborative/partnership working.
 - How will we ensure that we are turned out to attend the 'right' medical shouts?
 - Will On Call primary employers challenge their people if they are being taken away more frequently and to incidents that are not within the usual remit of the Fire & Rescue Service?
 - Have OFRS considered using different vehicles and different crewing models for this to reduce costs and the danger to the public?

Management Response:

20. South Central Ambulance Service experienced very high levels of demand during the Christmas/New Year 2015 period. OFRS offered to assist by making our FPOS trained staff available to attend first responder incidents (on a voluntary, trial basis). The offer was accepted and between 20 December 2014 and 7 January 2015 we attended 282 first responder calls throughout Oxfordshire. It is appreciated that the initiative happened at short notice however the response from control and responding crews was exceptional with much positive feedback received from patients and SCAS crews.
21. This trial emphasised the benefits of offering this service to the community and the impact the fire and rescue service can have in assisting the Ambulance service in saving lives and improving casualty care during periods of exceptional demand. These measures were only implemented on an interim basis as part of a trial, subject to longer term approval of this project.
22. First responder calls are attended by our FPOS trained staff who have completed an extensive four- day BTEC training course, delivered by SCAS, to enable us to work under their clinical governance.
23. The model of using a fire engine and crew to respond was developed to enable the fire engine to remain available for fire service calls, whilst still attending first responder incidents. An FPOS working group has been established, which will assist the development of this project. The service will engage with local employers of on- call staff if any concerns are raised regarding their increased number of calls due to first responding incidents. FPOS trained staff have ridden with SCAS, and their staff with us, to build relationships with our partners and gain experience.
24. **Project 2:** Review adverse weather resilience arrangements with the emergency planning team and other partners.

Responsible Manager: Area Manager - Strategic Risk and Planning

Objective:

25. During the last decade Oxfordshire has suffered several instances of extreme weather including two substantial floods and a period of unprecedented snow fall. The emergency services have worked hard to save lives, protect property and facilitate a return to normality. Due to the increasing likelihood that this type of event will occur in both greater magnitude and frequency OFRS would like to work more closely with partner agencies in order to ensure a better coordinated response to all such incidents - seeking improvements wherever possible.

Consultation Summary:

26. There was a positive response praising the work OFRS performed during previous flooding incidents and the majority of responses supported the project to review our adverse weather resilience arrangements. It was suggested that crews should have more training in relation to the role of other agencies during adverse weather conditions and familiarisation with their equipment. Many responses suggested the project should explore the use of trained community volunteers. Other suggestions included providing additional; dry suits carried on fire appliances, boats and 4 x 4 capacity. The responses highlighted the role of the Emergency Operations Centre, led by the Emergency Planning unit, during adverse weather incidents and suggested this should form part of the review.
27. The following bullet points indicate a cross section of consultation responses:
- By all accounts, their response was very, very good: both innovative and effective.
 - There is a lack of knowledge about what other services have and a good training package would benefit fire crews to understand how they fit into the bigger picture with crews from other services.
 - These are quite rare occurrences so should we expend greater costs when this money could be better spent elsewhere?
 - I think the emergency services could coordinate groups of local volunteers who are training and mobilised to aid their communities, thus providing ample capacity for the emergency services to prioritise those at most risk in any given incident.
 - You are the professionals and I fully support your actions.
 - It should be realised that any response by OFRS to flood events, especially those that recur, indicates a failure of flood risk management be it by poor maintenance or absence of defences or as a result of construction on areas of high risk. We should not be in a situation that the OFRS response becomes the default in such events to compensate for the failures of other agencies in properly managing flood risks. Response by OFRS should be preserved for truly unpredictable or unprecedented situations.
 - Why is it that Oxfordshire only has one boat in the county

Management Response:

28. OFRS recognise that due to the changing weather patterns bringing storms, flooding and snow a review of our resilience arrangements is required. We are currently working towards a closer integration with Emergency Planning, the Local Resilience Forum, OCC Adult Social Care and other partners to improve our planning, preparation and response through a multi-agency approach to severe weather related incidents. All the factors raised during this consultation will be used to inform this project.

29. **Project 3:** Trial emergency cover review recommendations in the Carterton area.

Responsible Manager: Area Manager - Operations and Resilience

Objective:

30. The Service has undertaken detailed risk modelling of the county including the developing risk profile of areas over the next 10-15 years which indicates accelerated growth in the Carterton area. In the first instance, any changes to emergency response cover would have to be supported by using full-time firefighters, as it could take 3-5 years for a competent on-call crew to be established. The call rates in the area would not warrant permanent use of a full-time fire crew, compared with other similar areas of the county.

31. Introduction of additional emergency cover in Carterton has the potential to improve the overall response time standards for the area.

32. The proposal looks to redistribute existing resources to more effectively and efficiently cover the growing risks in the West Oxfordshire District area by using a staffing model that is already well established and performing in areas with similar risk profiles in the county.

33. In addition, it has the potential to improve the operational support for larger incidents in the West Oxfordshire area, as more resources will be available across the District.

34. In addition to these extra emergency response resources, on-going targeted prevention and protection activities will continue to be used to drive down emergency incidents, particularly within vulnerable groups, and will continue to help mitigate and reduce any increased risks that result from community development and population demographics.

Consultation Summary:

35. The consultation provided a healthy mixture of responses. Whilst most responses were in favour of trialling emergency cover review recommendations in the Carterton area, other responses questioned the need for a new fire station at Carterton. Suggestions were made regarding collaboration with RAF Brize Norton for resources, buildings and personnel.

36. Several responses suggested making sector competent day duties staff, currently based at HQ, more flexible by enabling them to work from on-call stations to improve on-call availability.
37. The following bullet points indicate a cross section of consultation responses:
- Growth in Carterton and Brize Norton means it is sensible to increase the capacity in Carterton, however, this could be achieved by moving resources from either Bampton or Burford.
 - Yes, but done in conjunction with rationalising cover at adjoining stations and providing flexibility
 - The expanding area of West Oxfordshire will of course need more resources. But this must not be provided at the expense of other areas by reducing the existing fire cover in those areas.
 - Does Carterton really need a fire station?
 - Could we look to relocate personnel from HQ to Carterton to crew as part of their daytime commitment?
 - Have we looked at collaboration with the RAF base, maybe using their resources, buildings, personnel etc?
 - Other planned housing developments, particularly in Banbury, Bicester, Witney, and Didcot are also important.
 - Is this about numbers of houses and population rather than actually looking at the risk, these houses will all be modern builds with hard wired smoke alarms etc, the risk and call level won't be there.

Management Response:

38. OFRS recognises that Oxfordshire is changing in terms of population, demographics, housing developments, industry and increased traffic which has to be reflected in future planning for the service. The option to build a new station was taken following detailed analysis of the current and future development of the town and the increased risks to the community. Fire stations and vehicles must be located in the most appropriate locations and staffed by the right people, with the most efficient crewing models in order to effectively respond to areas of greatest risk whilst also maintaining our front line service provision. This project aims to demonstrate that additional emergency cover in Carterton has the potential to improve the overall response time standards for the area. We have explored the possibility of delivering a service using resources and assets with RAF Brize Norton but this was not achievable. Nevertheless, we believe that this project will improve the operational support for larger incidents in the West Oxfordshire area, as more resources will be available across the District. It is intended that the new Carterton fire station will be a multi-agency hub incorporating partners from Age UK Oxfordshire, Thames Valley Police, South Central Ambulance Service and OCC Adult Social Care. The issues raised in the consultation responses will be addressed by the project to assist us in ensuring that the future risks to the community are addressed.

39. **Project 4:** Identify opportunities to work with partners to improve health, safety & wellbeing in local communities.

Responsible Manager: Area Manager - Community Risk

Objective:

40. This project aims to identify opportunities to formalise work with partners and, in particular, Public Health to improve health, safety and wellbeing in local communities. OFRS have been very successful for many years in fire prevention, safeguarding and educating the public about the dangers of fire, and more recently this has expanded to include road safety education, training and publicity. Nationally and locally, fire and rescue staff are held in high regard by the public, being seen as strong role models.
41. The 2014/15 Community Risk Management plan includes exploring opportunities to further integrate our work into the public health arena to support other teams within Oxfordshire County Council and make our communities safer and healthier.

Consultation Summary:

42. Many responses stated that they considered firefighters to be good role models, well placed to deliver messages to improve safety and wellbeing in the community. Other responses included suggestions that the project should look at; dealing with bariatric patients and engineered safety solutions to fast roads. Several responses supported opening up stations as 'community' fire stations with rooms bookable for community meetings in order to reach community groups with safety messages and improve on-call recruitment. Warwickshire FRS are also considering including this project in their future CRMP.
43. The following bullet points indicate a cross section of consultation responses:
- I believe Firefighters are good role models of fit disciplined citizens within a caring community.
 - Consider more funds available for local visits and CFS, increasing our image and participation with the local community
 - It is not clear why OFRS would wish to expand its remit to encompass areas of health improvement, safety and wellbeing that are already addressed by other agencies and organisations. Before any decision is made a need analysis should be carried out and consulted upon with the public and particularly other key stakeholders and those already working in these areas.
 - Bariatric – A project concerning how we deal with these incidents, what equipment we have, what our role should be and procedures around this. Also an analysis of what other agencies are doing to support these vulnerable people.
 - Fast Roads Safety – We should look at the engineered safety solutions that are available and encourage their use in Oxfordshire

- Are we taking on the role of a commissioning service? Will we receive funding because of it?
- This could be achieved alongside opening up stations more to the public. We could expand this to team working, social responsibility, life skills and contribution to society.

Management Response:

44. In the past 10 years OFRS has traditionally focussed on prevention activities for those who are most vulnerable and at risk of being injured in a fire or from road traffic collisions. Further integration with other teams within OCC Adult Social Care and Public Health will provide an opportunity for our fire-fighters and staff to actively engage with our communities on wider risks and hazards which aims to not only make our communities safer but also healthier in the long term. OFRS will expand its existing prevention activities to include more practical educational advice and support in the home, in schools and on the roads. OFRS will also actively explore the practical opportunities to open up and share its fire stations in order to support the county council's wider health and wellbeing agenda. All of the factors raised during this consultation will be used to inform this project.

Financial and Staff Implications

45. Each project will fully recognise the prevailing economic constraints, delivering efficiencies or allowing existing/additional services to be delivered more effectively. If any budgetary pressures result from the implementation of these projects, they will be managed within existing budgets or highlighted to Cabinet through the annual Service Resource and Planning process.

Equalities Implications

46. None

RECOMMENDATION

47. Cabinet is RECOMMENDED to agree that all of the project proposals within this report are accepted and adopted in the final version of the CRMP Action Plan 2015-16.

DAVID ETHERIDGE
Chief Fire Officer

Background papers:

National Framework document for the Fire and Rescue Service
Oxfordshire Fire Authority Integrated Risk Management Plan 2013-18
The Fire and Rescue Service National Framework 2012
Community Risk Management Plan 2014-15 (Consultation Results)

Contact Officer: Nathan Travis 01865 855206

February 2015

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Division(s): NA

CABINET – 24 FEBRUARY 2015

STAFFING REPORT – QUARTER3 2014/15

Report by Chief HR Officer

Introduction

1. This report provides an update on staffing numbers and related activity during the period 1 October 2014 to 31 December 2014. Progress is also tracked on staffing numbers since 31 March 2014 as we continue to implement our Business Strategy.

Current numbers

2. The establishment and staffing numbers (FTE) as at 31 December 2014 are 4199.06 establishment; 3890.90 employed in post. These figures exclude the school bloc.
3. We continue to monitor the balance between full time and part time workers to ensure that the best interests of the Council and the taxpayer are served. For information, the numbers as at 31 December 2014 were as follows - Full time 2784 and Part time 2307. This equates to the total of 3890.90 FTE employed in post.
4. The changes in both establishment and staffing numbers since 31 March 2014 are shown in the table below. A breakdown of movements by directorate for this financial year is provided at Appendix 1.

	FTE Employed	Establishment FTE
Reported Figures at 31 March 2014 – Non-Schools	3966.53	4361.10
Changes	-75.63	-162.04
Reported Figures at 31 December 2014 – Non-Schools	3890.90	4199.06

Quarter 3 Update

5. We remain committed to redeploying displaced staff wherever possible via our Career Transitions Service. This is getting more difficult as staffing numbers reduce across the Council. There was one redeployment this quarter.
6. Following the implementation of the vacancy freeze in October 2014, a more rigorous procedure was introduced during December as a step to help with the budget position. This includes a review of all vacancies, as well as casual, agency and interim appointments. Only essential frontline social care posts will be exempted. In addition, managers are being asked to consider alternatives to recruitment and make the best use of the resources they already have where the work has to continue.
7. We recognise that operational services are critical and cannot be left without any cover. Prudent use of agency staff is therefore deployed to ensure continuity of service. In common with all employers, the council deploys agency staff as cover for instances of maternity leave, illness and short-term gaps in recruitment when a permanent member of staff has left the council and their permanent replacement is not due to arrive until sometime after. The cost of agency staff this quarter was £1,659,345. A breakdown of spend on agency staff by service area is attached at Appendix 2.
8. We will continue to track progress from 31 March 14 during the year ahead. As at 31 December 2014 the position is as below:
 - **Establishment FTE** down from 4361 to 4199 – 3.71% reduction
 - **Staff employed FTE** down from 3966 to 3891 – 1.89% reduction

Accountability

9. Staffing numbers continue to be monitored rigorously. All new posts are reviewed by the Chief HR Officer on a weekly basis and Deputy Directors are required to check and confirm staffing data for their services on a quarterly basis with appropriate challenge provided by the relevant HR Business Partner.

Recommendation

10. The Cabinet is **RECOMMENDED** to:
 - (a) note the report; and
 - (b) confirm that the Staffing Report meets the requirements in reporting and managing staffing numbers.

STEVE MUNN
Chief HR Officer

Contact Officer: Sue James, HR Officer, 01865 815465.
13 January 2015

DIRECTORATE	Total Established Posts at 31 December 2014	Changes to Establishment since 31 March 2014	FTE Employed at 31 December 2014	Changes in FTE Employed since 31 March 2014	Vacancies at 31 December 2014	Cost of Agency Staff * £
CHILDREN, EDUCATION & FAMILIES	1335.96	-80.81	1232.41	-59.51	81.42	499,653
PUBLIC HEALTH	24.49	-1.39	22.51	-0.40	0.61	7,817
SOCIAL & COMMUNITY SERVICES	806.50	-5.88	737.36	3.85	44.89	171,225
COMMUNITY SAFETY	393.42	-2.52	387.87	0.28	8.68	33,153
ENVIRONMENT & ECONOMY	508.86	-8.09	471.84	-6.61	29.57	622,866
OXFORDSHIRE CUSTOMER SERVICES	622.60	-107.51	557.01	-53.76	36.43	223,761
CHIEF EXECUTIVE'S OFFICE	274.57	51.32	256.23	44.58	11.82	100,247
CULTURAL SERVICES	232.66	-7.16	225.67	-4.06	5.82	623
TOTAL	4199.06	-162.04	3890.90	-75.63	219.24	1,659,345

Please note: The vacancies plus the FTE employed will not always be equivalent to the Establishment. Where employees are absent eg on maternity leave or long term sick and have been temporarily replaced, both the absent employee and the temporary employee will have been counted.

* This figure does not necessarily bear a direct relationship with vacant posts.

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Agency Staff Q3 2014-15

Directorate	Service	Spend £	Change from previous quarter £	Types of Posts Covered
Children, Education & Families	Education & Early Intervention	204,994	85,171	Academies Project Support Off; Foundation Years Mgr; Social Work
Children, Education & Families	Childrens Social Care	285,280	4,529	Admin; Assessments; Social Work; Independent Chair/IRO
Children, Education & Families	Children, Education & Families Central Costs	9,379	-648	PA
Total Children Education & Families		499,653	89,052	
Public health	LA Commissioning Responsibilities	7,817	-5109	Campaigns and events
Total Public Health		7,817	-5109	
Social & Community Services	Adult Social Care	161,045	57,911	Social Work; Day Care support
Social & Community Services	Joint Commissioning	10,179	-2,730	Admin and support
Total Social & Community Services		171,225	55,181	
Community Safety	Community Safety	22,572	-9,380	Safer Communities
Community Safety	Fire and Rescue & Emergency Planning	10,581	2,509	Registry Asst; PA
Total Community Safety		33,153	-6,871	
Environment & Economy	Strategy & Infrastructure	238,919	-63,627	Admin; Transport Plg; Mapping, Planning; Projects; Engineering
Environment & Economy	Commercial	383,947	196,247	ITU Drivers/Passenger Attendants, Technicians, Highways Inspector, Contracts
Total Environment & Economy		622,866	132,620	
Oxfordshire Customer Services	Management Team	15,090	12,932	PA, Project Management
Oxfordshire Customer Services	Education Support Services	6,734	-2,401	Schools Auditor
Oxfordshire Customer Services	ICT	Nil	-2,175	
Oxfordshire Customer Services	Business Development	65,603	12,170	Admin; Projects
Oxfordshire Customer Services	Customer Service Centre	106,324	-9,798	Customer Services
Oxfordshire Customer Services	HR	2,624	-804	HR Advisor
Oxfordshire Customer Services	Operational Finance	20,821	3,128	Financial Assessments, Administration
Oxfordshire Customer Services	Pension, Procure to Pay	6,566	2,947	Business Support, Pensions Administration
Total Oxfordshire Customer Services		223,761	15,999	
Chief Executive's Office	Human Resources	44,875	35,404	Media & Comms
Chief Executive's Office	Corporate Finance & Internal Audit	30,312	29,291	Accountants
Chief Executive's Office	Legal Services	15,814	5,920	Solicitors
Chief Executive's Office	Governance	-761	-2,633	Miscodings
Chief Executive's Office	Policy	10,006	3,164	Administrative/Support
Total Chief Executive's Office		100,247	71,146	
Cultural Services	Library Service	623	208	Drivers
Total Cultural Services		623	208	
Grand Total All Directorates		1,659,345	352,226	

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Division(s): N/A

CABINET – 24 FEBRUARY 2015

FORWARD PLAN AND FUTURE BUSINESS

Items identified from the Forward Plan for Forthcoming Decision

Topic/Decision	Portfolio/Ref
Cabinet, 17 March 2015	
<ul style="list-style-type: none"> ▪ The Big Plan - Learning Disability Strategy - 2015-2018 To seek approval for the Learning Disability Strategy for 2015-2018. 	Cabinet, Adult Social Care 2014/156
<ul style="list-style-type: none"> ▪ Care Home Fees 2015 To seek agreement of the outcome of the review of Care Home Fees effective from April 2015. 	Cabinet, Adult Social Care 2014/202
<ul style="list-style-type: none"> ▪ Section 75 Agreement To seek approval for amendments to the agreement that governs the pooled budget arrangements between health and social care. 	Cabinet, Adult Social Care 2015/004
<ul style="list-style-type: none"> ▪ North West Bicester Exemplar Primary School To seek endorsement on progress to date and to delegate authority to approve the Stage 2 full Business Case and award of the construction contract to the Director for Environment & Economy together with the Chief Finance Officer. 	Cabinet, Environment 2015/011
Deputy Leader, 23 March 2015	
<ul style="list-style-type: none"> ▪ Prosecution Policy for Breaches of Weight Restrictions in Oxfordshire To seek approval of the prosecution policy relating to the breaches of weight restrictions in Oxfordshire. 	Deputy Leader, 2013/156
Cabinet Member for Children, Education & Families, 9 March 2015	
<ul style="list-style-type: none"> ▪ Recommended Sponsor for New Primary School in Banbury at Longford Park Whether to approve the recommended sponsor to run a new primary school in Banbury. 	Cabinet Member for Children, Education & Families, 2014/109

- **Proposal to Close West Kidlington Nursery School and Extend the Age Range of West Kidlington Primary School to Effect a "Merger"** Cabinet Member for Children, Education & Families, 2014/183

Whether to approve the closure of West Kidlington Nursery School in order for it to "merge" with West Kidlington Primary School.
- **Home to School Transport for RAF Benson** Cabinet Member for Children, Education & Families, 2015/010

To seek approval of the revised arrangements.

Cabinet Member for Environment, 19 March 2015

- **Bus Service Subsidies Review** Cabinet Member for Environment, 2014/164

To seek decisions on the future provision of subsidised bus services for which subsidy contracts are due to terminate in May 2015 mainly covering routes in the Vale of White Horse and South Oxfordshire areas, but with one or two others elsewhere.
- **Proposed Parking Restrictions - Sandhills Area, Oxford** Cabinet Member for Environment, 2014/199

To seek approval of the proposals.
- **Proposed Derestriction - A423 Oxford Bypass, Kennington** Cabinet Member for Environment, 2014/197

To seek approval of the proposals.
- **Proposed Parking Restrictions - Various Laybys on A40/A418** Cabinet Member for Environment, 2014/086

To seek approval of the proposals.
- **Proposed Amendments to Parking Restrictions - Marston Road, Oxford** Cabinet Member for Environment, 2014/088

To seek approval of the proposals.
- **Proposed Amendments to Parking Restrictions - Park Road, Faringdon** Cabinet Member for Environment, 2014/087

To seek approval of the proposals.
- **Proposed Puffin Crossing - Cumnor Hill** Cabinet Member for Environment, 2014/115

To seek approval of the proposals.
- **Cuttleslowe & Wolvercote Junction Improvements** Cabinet Member for Environment, 2014/160

To seek approval of the proposals.

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| <ul style="list-style-type: none">▪ Proposed Parking Restrictions - Radley
To seek approval to the proposals. | Cabinet Member
for Environment,
2014/033 |
| <ul style="list-style-type: none">▪ Witney Road, Eynsham - Proposed Zebra Crossing
To seek approval of the proposals. | Cabinet Member
for Environment,
2014/194 |
| <ul style="list-style-type: none">▪ Proposed Variation of Charges for Residents Permits
and On-Street Pay & Display Spaces
To seek approval of the proposals. | Cabinet Member
for Environment,
2014/200 |
| <ul style="list-style-type: none">▪ Proposed One-Way Street - Nelson Street, Thame
To seek approval of the proposals. | Cabinet Member
for Environment,
2015/007 |
| <ul style="list-style-type: none">▪ Proposed 20mph Speed Limit - High Street,
Shrivenham
To seek approval of the proposals. | Cabinet Member
for Environment,
2015/008 |

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