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# **London Borough of Croydon Peer Review 20<sup>th</sup> – 22<sup>nd</sup> June 2018**

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# Review team

Name	Title	Review role
Aileen Buckton	DASS, Executive Director for Community Services	Review lead
Bernice Solvey	Head of Support and Safeguarding	Assistant Director
Gillian Sheffield	Strategy and Performance Manager	Performance
Jonathan Lillistone	Assistant Director, Public Service Reform	Commissioning
Rhiannon Cardillo	Principal Social Worker	PSW
Lana Hamilton	Service Financial Advisor, Adult Social Care	Finance
Robert Mellors	Group Finance Manager, Community Services	Finance
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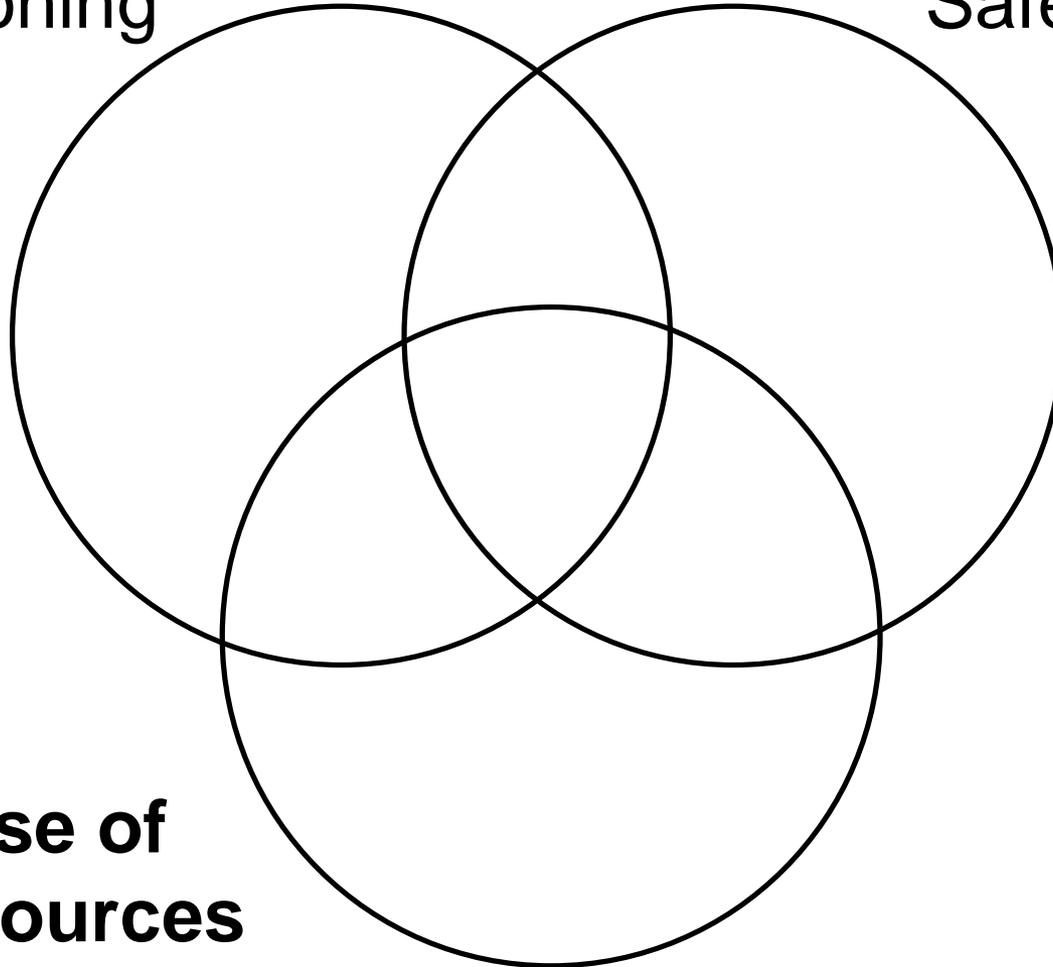
# Peer review options

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Commissioning

Safeguarding

**Use of  
Resources**



# ‘Light touch’ peer review

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With the volume of information supplied and a relatively short time to process it, subtleties of Croydon’s situation will inevitably be missed along the way. For this reason the peer review is light on absolute ‘judgments’ about the quality of services. This report is provided in the spirit of self-directed improvement and identifies good practice as well as areas for reflection which may suggest ways of improving services.

We have only included our themes and thoughts based on triangulated information.

This presentation and discussion form part of the triangulation.

# Methodological approach

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## Key areas:

- Overall budget
- Benchmarking data
- Commissioning and the market
- Managing demand
- Controls and processes
- Partnerships
- Governance and planning

# Introduction

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- Croydon has shown transparency and flexibility throughout the review
- Areas for consideration resonate with the review team in their day jobs
- The level of commitment to the review and information provided has been excellent
- This is a borough with ambition, vision and enthusiasm and know-how to make things better

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# Our findings and reflections

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# Overall budget

KEY QUESTION	SUPPLEMENTARY QUESTIONS	SOURCES OF EVIDENCE
<p><b>How well aligned is the ASC spend to budget and to the council's MTFS?</b></p>	<ul style="list-style-type: none"> <li>• In recent years including this year how has spend related to budget?</li> <li>• What has been the real term increase or decrease?</li> <li>• What is the track record of delivery of savings?</li> <li>• What are the prospects looking ahead?</li> </ul>	<ul style="list-style-type: none"> <li>• Budget out turns and six month forecasts</li> <li>• Savings and record of how much delivered</li> <li>• Council MTFS</li> <li>• Discussions with DASS, Director of Finance, social care finance lead</li> </ul>

# What is working well? *(Overall Budget)*

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- The service's strategic and budgetary approach is understood by the Council and supported by it (eg prevention, early intervention)
- Similarly the in-year budget position is well understood. Financial projections are owned by the service
- Over the last two years the Council has allocated net growth to ASC, funding known pressures and allocating funding for transformation. The service has set realistic savings targets and worked hard to deliver them. In earlier years, savings proposals were less robust, achievement was lower, with some overspends in these areas - There has been evidence of a 'sea change' within the last two years
- Finance believe established social care staff are very cost-conscious
- There are robust processes for planning and modelling changes in the Alliance

# Areas for consideration *(Overall budget)*

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- Low provider rates and the fragile market present a significant financial and operational risk. The work underway to identify the true cost of care will be the start to address this. The outcome of this work will need to be factored into the future budget preparation
- Maintaining the focus on the risk-sharing arrangements within the Alliance will be crucial for the council's financial position
- The challenge for service managers to continue transforming whilst retaining what is already being delivered and having sufficient capacity to do both
- Budgets held at Senior level – appetite for more responsibility at Team manager level. Continuing the recent cultural change could allow for more budgetary devolution – Could this be extended across all partners? Finance staff are aware of the opportunities to both support and challenge more if they develop their skills (eg modelling)
- Applying the same focus to under 65 services than has been given to over 65s would be beneficial (eg linkage of financial and activity)
- Service users are seeking reassurance on the future of the budget

# Benchmarking data

KEY QUESTION	SUPPLEMENTARY QUESTIONS	SOURCES OF EVIDENCE
<p>Based on comparisons with similar councils, are there any areas of opportunity and of risk to be aware of?</p>	<ul style="list-style-type: none"> <li>• What is comparative overall spend per head of population? And by care group?</li> <li>• What are the comparative activity levels?</li> <li>• What are the comparative unit costs?</li> <li>• What are comparative income levels from fees and charges?</li> </ul>	<ul style="list-style-type: none"> <li>• Finance Returns and SALT returns</li> <li>• Any more bespoke comparisons e.g. CIPFA benchmarking club or London regional data</li> <li>• Discussions with social care performance lead, social care finance lead</li> </ul>

# What is working well? *(Benchmarking data)*

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- Methods and ways of performance management (One Croydon Alliance Contract & Performance model and monthly performance dashboard). This could be replicated across other service user groups
- Monthly strategic and team level performance dashboards enabling the Council to track and manage performance
- Use of risk stratification tool in 'huddles' for preventative work
- Good use of benchmarking to understand position against CIPFA'S 'nearest neighbours' and use of intelligence and learning from other organisations. This has identified opportunities to focus on strategically eg. less use of nursing and residential care, increase levels of Direct Payments
- Acknowledgement of the opportunities to make better use of data including population management such as ACORN and joining up of various datasets such as those from the Council and NHS

# Areas for consideration *(Benchmarking data)*

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- Performance data – Outside of the Alliance, there is an opportunity to improve the triangulation of finance data with performance data. This should impact on practice and commissioning intentions
- The new client management system provides the opportunity to resolve the current ‘work arounds’ which have impacted on data quality outside of the Alliance, and to consider a solid strength-based practice model (evidence – case audits)
- Further detail and analysis of data on the diversity of service users in receipt of direct payments could inform market development including personal assistants
- Opportunity to develop shared insights from data analysis and intelligence to inform practice delivery

# Commissioning and the market

KEY QUESTION	SUPPLEMENTARY QUESTIONS	SOURCES OF EVIDENCE
<p><b>Is commissioning ensuring that there is a sustainable and affordable market?</b></p>	<ul style="list-style-type: none"> <li>• Are there any plans especially in the key areas of home care, direct payments and care homes?</li> <li>• Is there a local methodology to work out a fair price for care? Has this been shared with providers?</li> <li>• Is there a shared plan with providers to increase productivity?</li> <li>• Are there any areas where access to the market is problematic? Is there a plan to address this?</li> <li>• What are relationships like with local providers?</li> <li>• Are there major concerns over quality?</li> </ul>	<ul style="list-style-type: none"> <li>• Market Position Statement</li> <li>• Any commissioning plans</li> <li>• Any calculations of local care costs</li> <li>• Any data on quality including CQC data</li> <li>• Discussions with commissioners (including brokerage team if there is one) and providers,</li> </ul>

# What is working well? *(Commissioning and the market)*

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- Good higher level of understanding of the wider provider market issues including system for tracking quality of regulated services
- New draft Market Position Statement gives some clear strategic messages to the market consistent with the overall vision for the council and ASC
- Commissioners understand and indicate savings proposals appear grounded in real and deliverable projects and are confident they know how to and can deliver these
- A robust and comprehensive approach to contract and performance management has been established for the Alliance – evidence Service Operating Manual (SOM) – that gives all partners a clear view on the performance and delivery of component parts as well as a system overview.
- Strong and collaborative relationships with providers have been established through the Alliance work and providers feel involved and equal partners which allows them to feed into the ongoing operational and strategic development of the Alliance model

# Areas for consideration *(Commissioning and the market)*

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- The MPS could be developed further by incorporating more granular analysis supported by performance and activity data so the need for different types of services is clearly quantified – eg how many people are coming through transition over the next 2-5 years, and scoping housing and support needs
- The good practice, success and rigour around strategic commissioning and planning processes within the Alliance work could be applied more widely across all areas of commissioning to refine and develop commissioning priorities and plans to accelerate delivery in under 65 groups particularly MH and LD
- The approach to the Alliance has resulted in a clear understanding of the roles and skill mix needed to deliver – This learning could be applied more broadly to wider commissioning arrangements
- There is an opportunity to further develop the understanding of the provider market issues through the planned work around the real cost of care. It will be important that this delivers the granularity needed to align the management of the the care market with the MTFS strategy
- Further development of Croydon’s market to increase the proportion of services users with direct payments and full personalisation

# Managing demand

KEY QUESTION	SUPPLEMENTARY QUESTIONS	SOURCES OF EVIDENCE
<p><b>How is demand being understood and managed?</b></p>	<ul style="list-style-type: none"> <li>• Is there clarity over how demand trends are happening with projections ahead?</li> <li>• Are there measures in place to stop or delay demand turning into statutory assessments and support plans?</li> <li>• Is there a generally understood approach to promoting independence/asset based practice?</li> </ul>	<ul style="list-style-type: none"> <li>• Performance reports and plans about activity levels</li> <li>• Plans for prevention and managing first contact</li> <li>• Outcomes from re-ablement and reviews in terms of reducing support packages where no longer needed</li> <li>• Transitions plans and practice</li> <li>• Discussions with performance lead, operational service, ? voluntary sector</li> </ul>

# What is working well? *(Managing demand)*

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- Placements reducing in residential/ nursing care (mainly dementia care)
- Good joint working on hospital avoidance – evidence: fall in readmissions
- Relationships eg through ‘huddles’ and multi-disciplinary working well
- Rapid responses – 2 hour response time-positive for residents
- Introducing complex care support services to support care homes and ensure everyone has a care plan and additional support
- Understanding and implementation of proportionate assessments.

# Areas for consideration *(Managing demand)*

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- Managing the market an issue, particularly in dementia care where concerns raised regarding staffing ratios in nursing homes
- A large number of care homes but high percentage of imported people and self funders (impact on budget due?)
- Getting in touch – impact of digital transformation and online information: ensuring accessibility for all residents
- An increased emphasis on asset-based interventions for people with Learning Disabilities in Transitions from Children's to Adults Services

# Controls and processes

KEY QUESTION	SUPPLEMENTARY QUESTIONS	SOURCES OF EVIDENCE
<p><b>Are there effective controls measures in place and are processes as efficient as they could be?</b></p>	<ul style="list-style-type: none"> <li>• What are the operational processes in place to manage expenditure?</li> <li>• Is there confidence in the data quality?</li> <li>• What are the processes to ensure income from fees and charges is collected?</li> <li>• Are there any opportunities for process efficiency and productivity?</li> </ul>	<ul style="list-style-type: none"> <li>• Routine finance and performance reports</li> <li>• Discussions with operational service, finance and performance leads</li> <li>• Evidence from external and internal audit reports</li> </ul>

# What is working well? *(Controls and processes)*

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- Good processes to manage expenditure and challenge managers eg ADAPT
- Budget monitoring done on a monthly basis on high risk areas
- Budget is devolved to Heads of Service, and there is ownership of budgets
- Forecast of expenditure done by the Head of Service with assistance from accountants to assist with forecasting.

# Areas for consideration *(Controls and processes)*

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- Challenges of ICT and different systems – What gets recorded? Solutions? Have not fully resolved ICT system integration and sharing/recording of info
- Review of recording mechanisms that aid/prompt a strength-based way of assessment/ review
- There is scope to improve the system for monitoring care spend – domiciliary and residential care
- Outcome-based assessment? Not really clear how outcomes are being set at assessment and then reviewed. Robust evaluation of outcomes i.e savings/budget and improved outcomes for service users, of Alliance and integration?
- Better understanding of revised CHC guidelines by some Adult Social Care staff will ensure appropriate share of risks. The mandatory training programme will begin to address this.

# Partnerships

KEY QUESTION	SUPPLEMENTARY QUESTIONS	SOURCES OF EVIDENCE
<p><b>What impact are local partnerships (especially with the NHS) having on the financial position?</b></p>	<ul style="list-style-type: none"> <li>• How is the Better Care Fund working?</li> <li>• Are there any other pooled budgets and what financial impact are they having?</li> <li>• How is Continuing Health Care working?</li> <li>• Does the STP clearly articulate the potential impact on the Council of NHS proposals?</li> <li>• What is the financial impact of hospital discharge on the wider system and in particular the council?</li> <li>• What financial impact do other partnerships (e.g. the voluntary sector) have?</li> </ul>	<ul style="list-style-type: none"> <li>• Current BCF plan and reports</li> <li>• Any S75 agreements especially finance annexes</li> <li>• Data on CHC including how CCG benchmarks</li> <li>• Any analysis of impact of hospital discharge (including DTOCs but potentially wider than that)</li> <li>• Discussions with CCG Chief Officer (plus anyone else from CCG), any joint commissioning leads.</li> <li>• Discussions with any key relevant NHS providers including mental health and community</li> <li>• STP documentation</li> </ul>

# What is working well? *(Partnerships)*

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- Focus on the Alliance way of working has enabled Croydon to build on existing partnership working making it more consistent
- Alliance partnerships are extremely strong and there is evidence of learning from one another
- Enthusiasm – commitment to “Alliance” reflected in message from wider Senior staff group
- Close relationship with CCG
- It’s an ambitious partnering – Eg. now exploring key area of risk
- Service users: positive about LIFE service – fills gap between hospital and home, better discharge
- Full time geriatrician as part of Alliance
- Relationship with key voluntary sector partners strong

# Areas for consideration *(Partnerships)*

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- Ensuring that staff changes in partnerships do not dismantle the delivery. Provide reassurance to service users
- Savings within the Alliance need to be distributed more quickly to where needed
- Further develop end of life planning
- Continue the focus on communications across partners
- How to maintain the shared ways of working

# Governance and planning

KEY QUESTION	SUPPLEMENTARY QUESTIONS	SOURCES OF EVIDENCE
<p><b>Are there systems in place to ensure a planned and systematic approach to use of resources?</b></p>	<ul style="list-style-type: none"> <li>• Is there a plan for savings, and over how many years?</li> <li>• Is there a system in place to discuss what budget ASC is going to need, looking ahead?</li> <li>• Are demographic and market pressures understood and modelled within the MTFS?</li> <li>• Does this include both expenditure and income? How does the wider council understand this area of its budget?</li> <li>• How does ASC systematically manage the budget operationally and how does it plan ahead?</li> </ul>	<ul style="list-style-type: none"> <li>• Routine reports within ASC and to wider council</li> <li>• Savings plans (may be part of wider change programmes)</li> <li>• Minutes of any relevant governance structures</li> <li>• Discussions with senior managers, Director of Finance</li> </ul>

# What is working well? *(Governance and planning)*

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- There is strong political leadership and ownership
- Good governance structure and processes across all levels - Routine reports to Executive /Senior Management Team and escalated to Cabinet
- Investment in leadership and culture change is evident in the system-wide commitment to shared priorities. ADAPT Transformation Board is a good example of partnership working and oversight
- Clear vision for Adult Social Care within council/ partners and a real sense the council is determined to change and move forward
- Independent Chair of Alliance
- Service users expressed that they are fully consulted and engaged in the Alliance Board

# Areas for consideration *(Governance and planning)*

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- Servicing the Alliance model potentially time-consuming eg GP 'huddles' therefore needs to be continually reviewed
- Opportunity as the Alliance model continues to mature to review and streamline the number of Boards
- Incorporate the information on availability of services into the locality model

# Suggested next steps

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- Review to be shared widely in Croydon, particularly among those who contributed to the review
- Action plan to be co-produced and owned across the system
- Overall, continue what you're doing because it's clearly working!

# Thank you

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Thank you to all staff we met during our visit who were open and extremely welcoming. Thanks also for your hospitality and support during our stay with a special thanks to Croydon who ensured we were well looked after and in the right place and at the right time.