

## **PRIORITY 2**

### **WE WILL SAFEGUARD AND PROTECT THE MOST VULNERABLE**

**Lead Member / Lead Officer – Cllr Kath Rowson & Karen Smith**

In **Priority 2** we say that we will **safeguard and protect the most vulnerable**. This means that we will have:

- A reduction in safeguarding issues;
- An increase in self directed support;
- Good quality care provision;
- Fewer emergency admissions to hospital; and
- People retaining their independence to a greater age in their own home.

### **Challenges 2014/15**

Our focus this year will be to:

- Promote independence and person-centred care;
- Instigate service redesign and modernisation in light of the Care Act 2014 and the Better Care Fund;
- Further improve safeguarding;
- Raise quality standards across the service offer in partnership with stakeholders; and
- Maximise the use of resources.

### **Current Activity**

#### **Promote independence and person-centred care:**

Personalisation is inherent to the way that social care is provided to service users and carers. Staff strive to ensure that the person is at the centre of service delivery and the decisions that are made, and that service users feel they have choice and control over the services they receive. In order to embed these values even further into everyday practice, two conferences are planned for staff in Adult Services in September and October 2014, with the title of “Piecing Personalisation Together”.

A variety of initiatives and service improvements are ongoing in order to ensure that people can retain their independence and stay in their homes for as long as possible, that they can access their care using a Direct Payment if they wish, and that they are not inappropriately admitted into hospital and are discharged as soon as they are ready.

A key focus this year will be to improve the experience of young people as they transition from Children’s Services to Adult Services so that they are fully supported in understanding the choices open to them in order to access appropriate services.

The department is developing the concept of the Three Pillars of Prevention. This encompasses the establishment of a new referral pathway for the Intake Team, the routing

of people through reablement services where appropriate, and the provision of comprehensive information, advice and follow-up.

### **Instigate service redesign and modernisation in light of the Care Act 2014 and the Better Care Fund:**

The Care Act was enacted in May 2014 and heralds the most significant reform to adult social care for a generation. Certain aspects of the Act will come into effect in April 2015, notably the entitlement for carers to have their needs assessed and services put in place, and the option for people going into residential care to enter into a Deferred Payments Agreement to avoid the need to sell their home to pay for their care. In April 2016, major funding reforms will see the introduction of a cap on the amount anyone will have to contribute towards the cost of their care, with the requirement for local authorities to track an individual's progress towards the cap through the operation of a care account. The Act will see an increase in the number of service users and carers approaching the Council in order for their needs to be assessed and care and support put in place. A significant requirement of the Act will be for local authorities to make available a range of information and advice in order for members of the public to be better equipped to understand the support available to them and their families.

Adult Services are preparing for the introduction of the reforms through the establishment of a project board and associated work streams, and a dedicated project lead is in post to help drive the changes forward. Modelling is being undertaken to understand the potential increase in demand for additional social care and financial assessments to estimate resource requirements.

The Better Care Fund (BCF) was announced by the Government in the June 2013 Spending Round, to support the transformation and integration of health and social care services to ensure local people receive better care. The BCF will pool the budgets of partner organisation so that resources can be shifted from acute hospital services into social care and community services. The work in Blackpool is well underway between the Council and its' health partners to redesign how services are delivered and thereby improve the experience of patients and service users as well as increasing efficiency across the system.

### **Further improvements in safeguarding:**

As a direct result of the Cheshire West Supreme Court ruling, additional burdens are being placed on local authorities to ensure that they meet their legal requirements in terms of assessing those who may be deprived of their liberty. These pressures place an additional workload on those social workers who are Best Interest Assessors (BIAs) and on the teams they work within where the additional day-to-day business is then carried by their colleagues.

To address the increase in the Council's duty, extra qualification and expert refresher training is currently being delivered for BIAs at a cost to the service. The Safeguarding Adult and Professional Leads teams provide a support mechanism for BIAs and additional staffing resources have also been put into place to mitigate the impact on teams. Consequently, there is an impact on budgets.

Preventative work to address potential abuse occurring within residential and nursing care settings has been carried out through the delivery of free training regarding dignity and respect for individuals. 'Pre-alert' threshold documents providing a thinking framework are also in development to assist providers of care who may have concerns about abuse in their own setting.

A consistent approach to recording safeguarding alerts (when raised) and progressing referrals through the enquiry stage has been implemented through the development of 'post-alert' threshold documentation and by amendments to and process changes within the Council's electronic recording system. A member of staff has also been recruited to oversee the correct application of the recording system and to address any recording process issues that may impede the process of recording. Regular reports are provided to the Adult Service's Governance Committee and to the Council's Scrutiny Committee.

One of the implications of the Care Act 2014 is that Adults Safeguarding Boards will be put on a statutory footing from April 2015. In advance of this timescale, Blackpool has already recruited an independent Chair for its Safeguarding Board. The Board is currently implementing the "Making Safeguarding Personal" approach, and as a consequence we have reviewed thresholds, policies and procedures. The focus now is on individual outcomes and service user experience.

Social isolation is widely recognised as a major issue in Blackpool, particularly in respect to older adults, and it is acknowledged that this has a significant impact on demand for care and support. Work in this respect is being steered by the Health and Wellbeing Board, and the Head of Commissioning has been tasked with establishing a multi-agency steering group to look into the issue.

#### **Raise quality standards across the service offer in partnership with stakeholders:**

Adult Services pays close attention to raising quality standards across the service offer through contract monitoring and performance reviews overseen by the Governance Committee. This group scrutinises performance from a number of angles and ensures that action plans are put in place and monitored where opportunities for improvements are identified. Key performance indicators are regularly reviewed, as are the lessons learnt from complaints about services.

In August 2014, an internal peer review based on the Local Government Association model is being undertaken on residential care in Blackpool. This will not only provide the opportunity for a deep dive into the issues in this part of our business, but will also stand us in good stead for a full external peer review into safeguarding planned for January 2015 through the North West ADASS Sector-Led Improvement Network.

All registered social workers are required to maintain their Professional Capability for their professional registration. The work being carried out by the Professional Leads team focusses on the quality of social work practice. This has included the development of both formal documentation and reflective (learning circle) approaches to the supervision and support. The framework is accessible to managers and to established and newly qualified social workers in their Assessed and Supported Year in Employment (ASYE). An independent survey of workers' experiences of the new supervision framework was conducted in January 2014 and produced a 52% response rate with the majority providing very positive or positive feedback.

When individual or collective (team) training needs are identified within supervision or through IPA processes, the Professional Leads Team works alongside the Organisational Workforce Development Team to facilitate appropriate development opportunities. Social workers are also required to present a record of their Continuing Professional Development to enable them to maintain their professional registration. All practitioners have been provided with the opportunity to have their portfolios audited provisionally by the Professional Leads Team.

Assessment of the quality of casework is guided by a newly developed case audit process to be launched in September 2014. The audit process will seek to find evidence of an increase in person-centred assessments. These qualitative audits of social work practice and recording will be carried out by managers and then further - in partnership with the Professional Leads - by referencing a combined management and professional practice approach.

With reference to safeguarding cases, a programme of audits that are specific to this area is now in place. With the focus on Making Safeguarding Personal, the audits will seek to find evidence of the individual being placed at the heart of the process. An independent advocacy agency has recently been appointed to undertake a number of Listening Reviews with those who have been subject to the safeguarding process and/or their representatives. From September 2014, this exercise will ensure that any necessary improvements in the Council's safeguarding that are identified by these individuals are identified to inform future practice.

The Contracts Team has been restructured and a new Health and Social Care Integrated Quality Assurance Manager appointed. This has enabled us to ensure quality and compliance within all contracted services. Blackpool Clinical Commissioning Group and the Contracts Team have worked in partnership to employ a pharmacist within the team. This role provides support to ensure best practice within residential care homes in Blackpool with regards to the safe management of medicines. A new contract for residential care homes has been issued to take into consideration new legislation and best practice.

The development of Quality Assurance Frameworks for Regulated Services and for Housing Related Support Services are well underway in partnership with stakeholders. A policy for managing poor performance has been developed and is now being utilised to help in the monitoring of performance with our contracted providers. All contracts have been risk rated, and a visiting schedule has been established. This year local Councillors have supported officers in these. This has enhanced the qualitative intelligence gathered by the team and also provided the opportunity for service users to have their voice heard.

Commissioners have worked in partnership with Health, CFVS, providers and other stakeholders on a number of work areas including: Winter Pressures to support unnecessary hospital admissions and early discharge; a review of intermediate care services and of the Hospital Discharge Processes.

Commissioners have continued to work in partnership with wider stakeholders to develop a programme of work to ensure compliance with the recommendations of the Winterbourne Review.

As recognition of the increasing number of people living with dementia, an innovative initiative was started this year. The team recruited a Dementia Care Homes Officer who has developed and delivered a programme of dementia awareness training for all staff in residential care homes based on 'The Lets Respect Programme'. This role has also supported a number of dementia initiatives across Blackpool, for example Dementia Friendly Communities.

Previous work to embed the personalisation agenda highlighted the need for good quality and timely advice and information. In response to this Commissioning and Contracts and Health recruited a Community Information Officer. In partnership with a range of stakeholders, this Officer has developed an advice and information portal called Blackpool4Me. This provides a universal resource for Blackpool residents to access information and advice on a range of community events and social care and health services.

Advice and Information is one of the identified Care Act work streams which will be led by Commissioning and this role will be key in the delivery of the requirements of the Act.

### **Maximise the use of resources against an increasing older population:**

A key challenge this year is the achievement of allocated savings targets for 2014/15. Detailed work is underway in order to identify options for reducing budgets in the most efficient way and with the least impact on service users. This challenge will continue into 2015/16 and pressures on budgets resulting from demographic growth, particularly with respect to our ageing population, are being quantified in order that they can feed into the Council's medium-term financial planning process.

Improvements in debt management processes have been put in place and this is now being carefully monitored so that interventions can be implemented at an early stage to help service users who might be struggling to manage their own finances and to prevent large social care debts from building up. Separately, developments to the social care case management system will shortly allow payments to providers to be automatically generated through the system, which will make processes more efficient and improve internal controls, thereby reducing the opportunity for payment errors.

The programme of commissioning reviews is continuing so that the Council can most effectively manage and develop the market. A focus of the current year's programme is on housing-related support, and it is anticipated that reviews into both the accommodation based and non-accommodation based services will result in improved outcomes for service users at lower cost to the Council.

### **Challenges 2015/16**

Our focus for next year will be:

- Implementation of the Care Act 2014;
- Service redesign to meet the requirements of the Better Care Fund;
- Further health and social care integration;
- Maximising the use of resources;
- Implementation of the Prevention Framework;
- Reducing inappropriate admissions to hospital; and
- Continuation of the programme of commissioning reviews.

### **Strategic Risks Related to this Priority**

The following risks are being monitored through the Strategic Risk Register to ensure that the necessary controls are put in place to effectively manage each risk.


<b>Strategic Risk</b>	<b>Type</b>	<b>Risk Level</b>
Failure to protect vulnerable children and adults	Local	<b>High</b>
Civil emergency	National	<b>Activity Necessary</b>
Death / injury of employee or service user or member of the public leading to reputational damage, increased regulatory intervention and / or reduced staff morale	Local	<b>Low</b>


**Details of the specific actions being taken to mitigate these risks can be found in the Strategic Risk Register.**














## Priority 2 Key Actions

### Key – Overall Progress:

 On track

 Not on track but being managed by the department to bring back on track

 Not on track and needs support from outside the department to bring back on track

Objective	Key Action	Milestones	Deadline	Dept	Lead Officer	Overall Progress				
Promote independence and person-centred care	Consistent application of Eligibility Criteria	“Piecing Personalisation Together” staff conferences booked for 24th September and 1st October 2014	Oct 2014	AS	Gill Nixon-Smith/ Jayne Gornall/ Lynn Gornall					
		Compliance with new national eligibility criteria	Mar 2015							
	Promote choice and control for individual service users	Roll out Personalisation agenda and improve uptake of Direct Payments	Complete POET survey in liaison with InControl and evaluate results	Nov 2014	AS	Les Marshall / Hilary Shaw / Delyth Curtis				
			Improvement in ASCOF outcomes with focus on permanent admissions to residential care and delayed transfers	Mar 2015						
			Transparent allocation of personal budgets	Apr 2015						
			Coordinate Service User Personalisation event	Commission Healthwatch to carry out “Making It Real” event			Nov 2014	AS	Les Marshall	
			Implement Prevention Framework	Development of Prevention Framework			Establish new referral pathways for Information and Advice, Intake Team, and Reablement in line with the Three Pillars of Prevention	Dec 2014	AS	Karen Smith / Val Raynor / Les Marshall
	Review of Out of Hospital Care Strategy in conjunction with CCG and in parallel with Better Care Fund	Ongoing			AS	Delyth Curtis				
	Reduce inappropriate admissions and readmissions to hospital	Continue development of Blackpool4Me.com	Portal to provide advice and information in consistent way through key stakeholders	Ongoing	AS	Val Raynor / Hilary Shaw				
			Mapping of information and advice points	Ongoing						
			Implement systems to ensure quality and user reviews on Blackpool4Me.com	Sept 2014						
			System development/link with Frameworki and Blackpool4Me.com to allow for the need for outcomes data	Mar 2015						
	Streamline review process to ensure that reviews are carried out in a timely manner	Ensure all annual reviews are up to date	Mar 2015	AS	AS	Les Marshall				
	Review the transitions process from	New Transitions Protocol to be in place for operational staff	Aug 2014	CS / AS	CS / AS	Carl Baker/				

Objective	Key Action	Milestones	Deadline	Dept	Lead Officer	Overall Progress
	<b>Children's to Adult Services</b>	Improve information available to families and carers	Aug 2014		Les Marshall	
<b>Instigate service redesign and modernisation in light of the Care Act 2014 and the Better Care Fund</b>	<b>Implementation of the Care Act 2014</b>	Establish Project Board	Jun 2014	AS	Delyth Curtis / Les Marshall / Val Raynor / Hilary Shaw	
		Establish key work streams in 1) Adult Social Care; 2) Advice and Information; 3) Finance and Funding; 4) Systems and Reporting; and 5) Commissioning and Market Development	Aug 2014			
	<b>Implementation of changes required for Better Care Fund</b>	Lead and support various work streams in collaboration with partners in order to deliver the requirements of the programme	Mar 2015	AS	Delyth Curtis / Hilary Shaw	
		Recording of NHS numbers of Frameworkki	Mar 2015			
<b>Further improvements in safeguarding</b>	<b>Ensure service user Mental Health needs are met</b>	Sufficient Approved Mental Health Practitioners appointed	Ongoing	AS	Jayne Gornall / Lynn Gornall	
		Appropriate level of training delivered to maintain competence for all mental health practitioners	Ongoing			
	<b>Building capacity around Deprivation of Liberty (Safeguarding) (DoL(S)) – Best Interest Assessors (BIA)</b>	New BIA Forum to be developed to consider the development of the BIA rota	Jun 2014	AS	Lynn Gornall	
		Training on thresholds commissioned for staff	Sept 2014			
		Current threshold reviewed and implemented	Sept 2014			
	<b>Improve the timeliness of Safeguarding Investigations</b>	Adhere to policy timescales	Dec 2014	AS	Lynn Gornall / Les Marshall	
	<b>Implementation of Safeguarding Board in light of Care Act 2014</b>	Development of a Shadow Board	Apr 2014	AS	Lynn Gornall	
	<b>Explore and address issues relating to social isolation</b>	Undertake Literacy Review	Apr 2014	AS	Carol McNair / Val Raynor	
		Present findings to Health and Wellbeing Board	Jun 2014			
Establish a Multi-Agency Steering Group		Aug 2014				
<b>Raise quality standards across the service offer in partnership with stakeholders</b>	<b>Improve performance across key target areas utilising peer review and inspection type processes</b>	Undertake Residential Care internal peer review	Sept 2014	AS	Val Raynor / Delyth Curtis	
		Undertake Safeguarding external peer review	Mar 2015			
	<b>Reduce number of repeat and preventable thematic complaints</b>	Processes for capturing and sharing lessons learnt to be further improved	Sept 2014	AS	Hilary Shaw	
	<b>Meeting the requirements of the HCPC regulator</b>	Evidence of Professional standards met (HCPC portfolios)	Jul 2014	AS	Lynn Gornall	
	<b>Maintain competence in all service delivery</b>	Conduct a Training Needs Analysis across Adult Services	Oct 2014	AS	Gill Nixon-Smith/ Jayne Gornall/ Lynn Gornall	
Delivery of training appropriate to need as identified through supervision and IPA		Rolling programme from Apr 2015				

Objective	Key Action	Milestones	Deadline	Dept	Lead Officer	Overall Progress
	<b>Ensure professional support for relevant Adult Social Care staff</b>	Undertake an Independent ASC Support Survey	Mar 2014	AS	Lynn Gornall / Delyth Curtis / Les Marshall	
		Deliver professional lead support to staff and managers	Apr 2014			
		Roll out system of reflective supervision for all social work qualified staff	Apr 2014			
		Reduction in absence levels	Mar 2015			
		Application of rigorous recruitment processes to attract the best staff	Ongoing			
	<b>Ensure the delivery of a professional service by high quality staff</b>	Active recognition of good practice through the Supervision Framework	Apr 2014	AS	Les Marshall / Lynn Gornall	
		Active support for Assessed and Supported Year in Employment (AYSE) staff and their supervisors	May 2014			
		Manage, maintain and retain social care capacity	Mar 2015			
	<b>Raise quality standards across the service offer in partnership with stakeholders</b>	Develop a Quality Assurance Scheme for Regulated Services in partnership with stakeholders	Dec 2014	AS	Val Raynor	
		Develop a Quality Assurance Scheme for Housing Related Support Services in partnership with stakeholders	Dec 2014			
	<b>Monitor and maintain contract compliance</b>	Establish Policy for Managing Poor Performance	Jun 2014	AS	Val Raynor	
		All contracts to be risk rated	Jul 2014			
		Visiting Schedule to be established	Jul 2014			
	<b>Develop the Quality Assurance Approach for Adult Social Care</b>	Establish a consistent mechanism for case audits	Dec 2014	AS	Gill Nixon-Smith / Jayne Gornall / Lynn Gornall / Les Marshall	
		Evidence of an increased quality of person-centred assessments and services through case audits	Dec 2014			
Increase in levels of service user and carer engagement as evidenced in case records		Apr 2015				
<b>Maximise the use of resources</b>	<b>Develop and implement the Housing Related Support Work Plan</b>	Complete scheduled commissioning reviews	Mar 2014	AS	Val Raynor	
		Award Non-Accommodation Based tender	Jun 2014			
		Award Accommodation Based tender	Sept 2014			
	<b>Develop plans for contributing to corporate savings targets for 2014/15 and 2015/16</b>	Assess impact of 2013/14 savings plans and determine full-year effect for 2014/15	Apr 2014	AS	Delyth Curtis	
		Evaluate opportunities for further savings in 2014/15 and 2015/16 and address overspend	Oct 2014			
	<b>Improve debt management</b>	Financial Policy Group to have monitoring in place	Aug 2014	AS	Hilary Shaw	
		Training for Care Management staff via learning circles	Dec 2014			
	<b>Implement Phase 2 of Frameworki project</b>	Residential and nursing payments to start being generated by Frameworki	Aug 2014	AS	Hilary Shaw	



Objective	Key Action	Milestones	Deadline	Dept	Lead Officer	Overall Progress
		Invoice payments for non-residential care to starting being generated by Frameworki	Apr 2015			
		Implementation of Fairer Charging financial assessments through Frameworki	Apr 2015			
	<b>Estimate demand pressures on social care services</b>	Feed into corporate medium-term financial plan	Sept 2014	AS	Hilary Shaw	
	<b>Manage and develop the market</b>	Develop a Market Position Statement for Residential Services	May 2014	AS	Val Raynor	
		Develop a Market Position Statement for Non-Residential Services	May 2014			

## Priority 2 Performance Indicators

### Key – Performance Trend:

- ✓ Performance is improving compared to last year
- ✗ Performance is getting worse compared to last year
- Performance is staying the same compared to last year
- Data not due to be reported this quarter

Indicator	Q1	Q2	Q3	Q4	Outturn 2014/15	Target 2014/15	Outturn 2013/14	Trend	Comments
Social care related quality of life						20	19	✗	The maximum possible score for this question in the annual Adult Social Care Survey is 24. There was a slight dip since a high score in 2012/13, although the reduction is not statistically significant and our figures are in keeping with regional comparators. Follow-up work has been undertaken on individuals who express dissatisfaction with their quality of life.
Proportion of people using Adult Social Care who receive Direct Payments	Awaiting data					9.5%	8.5%	-	While the number of clients receiving a direct payment has increased modestly, it is acknowledged that Blackpool's numbers are comparatively low, and a number of actions have been taken to ensure that those service users who would benefit from using a direct

Indicator	Q1	Q2	Q3	Q4	Outturn 2014/15	Target 2014/15	Outturn 2013/14	Trend	Comments
									payment are able to do so. The next stage of development is to translate these improvements into an increase in the number of service users taking up a direct payment. It should be recognised, however, that direct payments do not suit everyone, particularly those who lack the understanding or the support of family / friends to manage the practicalities of becoming an employer.
Proportion of adults with learning disabilities in paid employment	Awaiting data					4%	3.6%	✓	A contract is in place with Mencap with clear targets for improving this indicator. Project Search will also support 12 young people with a learning disability into employment, which will have an impact on these figures in the future. It is important to note that this indicator concerns small numbers of people and therefore small changes can have a significant impact on the outturn.
Permanent admissions of people (18-64) to residential and nursing care homes per 100,000 population	Awaiting data					19.8 per 100,000 pop.	22.1 per 100,000 pop.	✗	The number of permanent admissions increased by 4 last year to a total of 19 compared to 15 in each of the previous two years. This is in the context of an increase of 2,225 in the population in this age group. The low numbers mean that this indicator is very sensitive to small changes.
Permanent admissions of older people (65+) to residential and nursing care homes per 100,000 population	Awaiting data					900 per 100,000 pop.	1,009 per 100,000 pop.	✗	While Blackpool's rate is higher than the regional average, close scrutiny of the data has provided confidence that people whose needs could be met in the community are not being admitted into residential care.
Proportion of older people who were still at home 91 days after discharge from hospital into reablement / rehabilitation services						90%	84.6%	✗	While there has been a very slight decrease in this indicator, there has been a sustained 50% increase over the previous year's figures in the number of people who have been supported through intermediate care on discharge from hospital. This is part of a significant push to use reablement in a preventative way to

Indicator	Q1	Q2	Q3	Q4	Outturn 2014/15	Target 2014/15	Outturn 2013/14	Trend	Comments
									support the avoidance of preventable hospital admissions
Proportion of older people offered reablement services following a discharge from hospital	Awaiting data					-	Not measured in 2013/14	N/A	There is strong evidence that reablement services lead to improved outcomes and value for money across the health and social care sectors. This measure compliments the previous one by capturing the volume of reablement offered as well as the success of the service offered.
Delayed transfers of care from hospital which are attributable to Adult Social Care	Awaiting data					4.5	4.9	✓	The reporting mechanisms for weekly delayed transfer of care figures have been reviewed and now include sign off by the Director of Adult Services. This has offered a degree of refinement to the accounting process, and improved confidence in the figures in terms of responsibility for the delay.
Overall satisfaction of people who use services with their care and support						70%	65.9%	✗	While there was a slight dip since a high score in 2012/13, the figure for 2013/14 is still higher than in the preceding two surveys and above the North West average.
Overall satisfaction of carers with social services						50%	Not measured in 2013/14	N/A	The Carers Survey is biennial and was therefore not conducted in 2013/14.
Proportion of people who use services who feel safe						75%	69.6%	✗	While there was a slight dip since a high score in 2012/13, Blackpool still ranks 5th in the North West for this measure. Of the 389 respondents to this survey question, only 6 said that they didn't feel safe at all. Details of these 6 individuals have been passed to the Safeguarding Team for further investigation and the outcome of this work is being monitored by the Governance Committee.
Number of carers receiving a carer specific service per 100,000 population						41 per 100,000 pop.	32.2 per 100,000 pop.	✗	The Council has a contract with Blackpool Carers Centre to provide specific services for carers. Many carers are signposted straight to the Carers Centre for support, and are not captured in this figure. A wide range of further

Indicator	Q1	Q2	Q3	Q4	Outturn 2014/15	Target 2014/15	Outturn 2013/14	Trend	Comments
									support to carers is also available from a number of third sector partners who work in close liaison with the Council. This measure will be further impacted by the Care Act 2014, which entitles carers to an assessment and to services to meet their needs.
Proportion of services users with a completed review in the year						70%	58.7%	✓	We have undertaken analysis of our scheduled reviews and have a strategic plan to ensure that all outstanding reviews are completed by Mar 2015. A dedicated worker has been deployed to undertake overdue reviews, and reviews due within the existing year are being allocated within normal workloads.