





Appendix 1 Home Care Provision Policy Review Recommendations - Progress to September 2010

Home Care Provision Summary Review Progress				
				Total
0	0	0	11	11
		Due Date	RAG	Commentary
To ensure through the commissioning process that home care providers have the organisational structures in place to deliver the agreed care to service users on an operational level.	Lowes, Sharon	31/08/2010	★	The new contractual arrangements for the home care service in Sunderland are inclusive of a set of organisational quality standards that will ensure that all providers post April 2011 will have a robust organisational structure in place.
To ensure that through the commissioning process home care providers have the organisational capacity and resources in place to meet the service requirements of additional home care packages.	Lowes, Sharon	31/08/2010	★	The new model of home care that has informed the service specification for the new home care contract takes into consideration capacity and resources for meeting the care package demands and needs of the individuals.
To ensure that all home care organisations provide zonal working arrangements for employees through coordinated and realistic work rotas.	Lowes, Sharon	31/08/2010	★	The new model of home care that has informed the service specification for the new home care contract demonstrates a zonal way of working for agencies that will have a positive impact on staffing rotas and staff working arrangements.
To continue to investigate and develop more robust monitoring systems for home care providers across the city, including the use of new technologies and spot checks.	Lowes, Sharon	31/08/2010	★	The new contractual arrangements for the home care service in Sunderland are inclusive of robust monitoring systems. These include an electronic care management tool that has benefits for both the provider and the Council and regular contract management meetings. The Directorate's Social Care Governance Team will continue in their approach to monitoring.
To look at the development of an annual survey for home care staff, service users and managers to provide a more comprehensive picture of service provision from a variety of stakeholder views.	Lowes, Sharon	31/08/2010	★	The Researcher within the Directorate continues to incorporate the annual survey into the programme of surveys that are undertaken by the Directorate. The information gained from the survey is fed back into the current contract management process with providers.
To investigate the potential of a standardised minimum training programme for all home care staff across all local agencies with the intention that all home care workers are encouraged to enrol on NVQ level 2.	Lowes, Sharon	31/08/2010	★	The new contractual arrangements for the home care service in Sunderland are inclusive of a set of organisational quality standards that set the organisational requirements for agencies and the training for their home care staff.
To improve the health and safety of care workers and ultimately service provision to service users by home care providers investing in the use of mobile phones and other technology.	Lowes, Sharon	31/08/2010	★	The new contractual arrangements for the home care service in Sunderland are inclusive of a new electronic care monitoring system that looks to promote the health and safety of care workers and has benefits for both the care agency and the Council who commissions the service.
To investigate home care organisations reimbursing any fees incurred by newly recruited employees from CRB checks once they have completed an agreed term of employment.	Lowes, Sharon	31/08/2010	★	














		Due Date	RAG	Commentary
To ensure that the induction procedures of home care organisations provide new employees with the training, initial and ongoing supervision required to perform the duties of their role.	Lowes, Sharon	31/08/2010	★	The new contractual arrangements for the home care service in Sunderland are inclusive of a set of organisational quality standards that states providers must have a recruitment and induction policy in place and that all new members of staff must follow an induction process.
To evaluate the quality of Home Care Plans and look to ensure that the plans have detailed outcomes for services users and carers and also ensure, where practicable, that the plans are easily accessible or in a pre-determined location for the home care worker.	Lowes, Sharon	31/08/2010	★	The new contractual arrangements for the home care service in Sunderland are inclusive of a set of organisational quality standards that look to ensure the support plans that the provider develops for the service user are of a high quality and are outcome focused. Access to these is also covered by the standards.
To ensure that supervisors and contact staff of home care organisations are also fully trained to deal with emergency situations that may occur.	Lowes, Sharon	31/08/2010	★	The organisational quality standards that will form the basis of the new home care contract cover the requirement for all staff including supervisors and office staff to be trained and skilled in dealing with emergency situations.

Dementia Care Policy Review Recommendations - Progress to September 2010

Dementia Care in Sunderland Summary Review Progress				
				Total
0	0	4	18	22
Task	Responsible Officer	Deadline	RAG	Progress
Initiate work with the needs analysis group to clarify incidence of dementia	Lowes, Sharon	31/12/2009	★	The more detailed needs assessment, requested by the OPMH Steering Group has identified the following: There are an estimated 3,114 people aged 65+ years with dementia in Sunderland in 2009. There were 2,211 people with severe or very severe dementia. The group of people with the highest input from health & social care are those aged 80+ years with dementia with an estimated 2,043 such people in Sunderland; There were only 1,280 people with dementia on GP registers in 2009, with the coverage across GP surgeries being relatively patchy that means there are approximately 41% of people living with dementia with no formal diagnosis from their GP, and with corresponding less chance of early intervention; The most common type of disorder is Alzheimer's disease, affecting 62% of those with dementia, with vascular dementia accounting for 17%, and 10% having mixed disorders; The number of people with dementia in the city can be reliably projected into the future, because of its strong correlation with age. An increase of 46% to 4,550 in the number of people aged 65+ years is anticipated.
Work with equivalent groups in relation to information requirements	Lowes, Sharon	31/12/2009	★	National awareness campaigns have had good press coverage but were felt to be low profile by the OPMH Steering Group. To ensure awareness of dementia is increased training sessions are being delivered to develop joint awareness for both professionals and providers. The impact of awareness raising initiatives will be monitored through the OPMH Strategy Group action plan. A NHS staff awareness event on Dementia for community and practice based staff has allocated 10 places to LA professional staff.
Identify monies to fund campaigns	Lowes, Sharon	31/12/2009	★	Finances are constantly being reviewed and sourced, even more so, in the current economic climate.
Work with equivalent groups in relation to information requirements	Lowes, Sharon	31/12/2009	★	NHS contracts with general hospital and specialist mental health provider includes requirements for staff awareness and vocational training. Local authority contracts with all require awareness training to be provided for staff. An innovation fund application is being sourced to provide seamless awareness raising of dementia utilising all sectors.
Identify monies to fund campaigns	Lowes, Sharon	31/12/2009	★	Finances are constantly being reviewed and sourced, even more so, in the current economic climate.
Apply for Dementia Advisor Role demonstrator site	Lowes, Sharon	30/04/2010	●	Further discussions have taken place to determine an alternative way to deliver the dementia advisory service. A business case has been written by the PCT with LA input. The process will be an open tender with the provider being asked to work collaboratively across the whole of the SOTW.
Engage with the PCT	Lowes, Sharon	30/09/2009	★	Awareness of vascular dementia prevention will continue to be mapped in conjunction with health and the OPMH Strategy Group.
Undertake a review of information that is in use across the city	Lowes, Sharon	30/04/2010	★	The review of information has been completed with a focus on staff using national publications to ensure consistent messages are given. In relation to a service directory, work will commence around linking this to the development of the memory service assessment.
Audit against NDS Objectives	Lowes, Sharon	31/12/2009	★	The TPCT has been working with one GP cluster to pilot a memory assessment clinic and have decided to implement the outcomes from the clinicians workshop and learning from other areas and commission the service therefore mainstreaming it.
Develop a joint commissioning plan	Lowes, Sharon	31/12/2009	●	A business process is in progress and adherence to the World Class Commissioning process will take until towards the end of 2010 to see the service come to fruition.
Undertake the review as recommended	Lowes, Sharon	30/10/2009	●	CHS has identified the lead consultant and a senior nurse to lead on pathway development across the hospital. A limited OPMH liaison service is in place. RCP audit ongoing.
Include commissioners in the baseline audit and plan development	Lowes, Sharon	31/12/2009	★	In line with the Joint Commissioning Framework for the National Dementia Strategy, Sunderland continues to ensure inclusiveness is achieved by focussing on the needs of people with dementia, rather than age.

Task	Responsible Officer	Deadline	RAG	Progress
Engage the Tyne & Wear Care Alliance	Lowes, Sharon	30/10/2009	★	Organisational standards will form part of the new Home Care Contracts (not dementia specific) which will be in place by April 2011. All Contractors must be able to demonstrate they can meet the standards. Vocational courses are in the process of being updated and as a consequence the OPMH Steering Group are still exploring the most appropriate and effective form of staff education and training. The OPMH Steering Group will be working closely with Workforce Development staff to identify the prioritisation of dementia training of staff.
Develop a communication plan	Lowes, Sharon	31/12/2009	★	In reach services are in place and include open single point referral to Challenge and Behaviour function for Care Home managers. Specialised qualified clinicians prevent unnecessary hospital.
Raise team profile and referral routes	Lowes, Sharon	not set	●	
Establish a Task Group to progress the recommendation	Lowes, Sharon	30/10/2009	★	NHS South of Tyne are modelling the local incidence and prevalence of dementia, death rates, with current LA and PCT spend. We are testing our big prevention and care ideas and investments.
Commission a Task Group	Lowes, Sharon	30/04/2010	★	Sunderland LA have contributed to the collation of evidence based mapping to support the review of dementia service provision and the identification of good practice. Collaborative working with Action on Dementia, Sunderland Carers Centre and the PCT has ensured consultation with carers of people with dementia in Sunderland will be taking place in November 2010 and the comments received will be fed into the comprehensive evidence based mapping process. The consultancy process is expected to be complete by the end of November 2010.
Review Third Sector engagement	Lowes, Sharon	31/12/2009	★	There continues to be recognition of the role the third sector plays in supporting people with dementia. The organisations have received grant assistance funding from both PCT and LA to support work with people with dementia and their carers. There are local grant and PCT funded peer support networks in place in the city. Action on Dementia and Sunderland Carers Centre are both represented at the OPMH Steering Group.
Role of the Third Sector acknowledged and built into the commissioning plan	Lowes, Sharon	31/12/2009	★	Third sector recognition will be built upon as the joint commissioning plan is further developed.
Commission a task group to undertake the review and report findings	Lowes, Sharon	26/02/2010	★	There are local grant and PCT funded peer support networks in place in the city.
Present a report to the Adult Social Care partnership Board	Lowes, Sharon	29/01/2010	★	Discussions have taken place with regard to dementia being everyone's business. The Partnership Board are reviewing it's membership to ensure the needs of people with dementia are championed by the appropriate representative.
Report to committee on a quarterly basis	Lowes, Sharon	30/10/2009	★	Regular updates are provided on the key areas via information sharing through this monitoring and the local implementation plan, which includes the review recommendations.

Health Inequalities Policy Review Recommendations - Progress to September 2010

Health Inequalities Summary Review Progress				
				Total
0	0	11	0	11
Recommendation	Due date	RAG	Progress	
Establish an Elected Member champion and an Executive Management Team lead for health inequalities, who will direct a work programme including widespread officer engagement in inequalities needs assessment, equity audit and health impact assessment overseen by the Office of the Chief Executive	31/03/2011		<ul style="list-style-type: none"> a 'baseline analysis' of what is currently being done to address the Social Determinants of Health (SDH) and Health Equity is currently being undertaken as part of the Health Inequalities Service Assessment workstream of the SWOW work. The HI Service assessment will formulate a number of recommendations, which will be implemented throughout the Council through the SWOW principles 	
Elected Members to be provided with appropriate specific levels of briefings around health inequalities in Sunderland and the strategic and operational actions required to reduce them in a sustainable way	30/03/2011		<ul style="list-style-type: none"> A project has been drawn up by partners working on the Child Poverty Strategy to pilot a neighbourhood management model of working for partners within Southerwick. This will give the Council an opportunity to work with partners on a social determinant model (encompassing determinants that effect both health and poverty) at a localised level and share findings/models with other areas of the city. The web based information that is currently available through both .gov and the Healthy City website www.hcsunderland.org.uk have been updated 	
Appropriate briefings be undertaken with all Heads of Service and relevant officers across all directorates in relation to health inequalities, and using health needs assessment, health equity audit and health impact assessment appropriately in strategic planning and operational delivery	31/03/2011		<ul style="list-style-type: none"> A Toolkit is currently with corporate communications for development. The web based information that is currently available through both .gov and the Healthy City website www.hcsunderland.org.uk have been updated. Linkages have been made through the Healthy City network with Liverpool in relation to Health Literacy and Social marketing, for which they are the lead city in the network, to gain evidence or best practice and research 	
Adopt a health inequalities toolkit for Sunderland, which caters for the various stakeholders across the city (including Elected Members, Council Officers, partner organisations and members of the public) to ensure that new policies and service designs consider the potential health impacts of implementation	31/08/2011		<ul style="list-style-type: none"> Work has started with Phil Spooner to build Health Inequalities and Social Determinant model within the Community Leadership Programme and the Joint Leadership programme. This will be built upon at an area level and built into the refresh of the Local Area Plans, which will commence shortly. 	
The existing joint strategic needs assessment at a City wide, ward and 'natural neighbourhood' level to be enhanced through the development of Area Committees' role in highlighting and identifying local needs and in particular their commissioning role in supporting the delivery of local area plans in delivering services and support that meets the needs of an area	31/03/2011		<ul style="list-style-type: none"> This will is currently being undertaken by the Commissioning Workstream of the SWOW work 	
Develop mechanisms to ensure that the impact on reducing health inequalities are considered by all scrutiny committees and area committees as part of the work planning process	31/03/2011		<ul style="list-style-type: none"> An Influencing Health Toolkit is currently with corporate communications for development 	
Ensure that Sunderland City Council and Area Committees continue to provide support to develop a co-ordinated approach for Voluntary and Community Sector organisations across Sunderland in delivering their services within local communities and neighbourhood settings, using the Compact as the agreed framework for partnership working with the Voluntary and Community Sector be continued	31/03/2011		<ul style="list-style-type: none"> The Social Determinant Model has been applied to the grants process within HHAS for next year 11/12. This recommendation will be given to the Councils Corporate grants group to determine action 	
City Council to become an exemplar in ensuring employees benefit through 'Health at Work' Schemes and should engage with the regional workplace health programme	31/03/2011		<ul style="list-style-type: none"> Best practice examples are being identified and researched to determine whether they would work within Sunderland 	
Through the Sunderland Partnership the Council should engage with large and medium employers of routine and manual workers across the city and assist them in implementing workplace health programmes for local workforces	31/03/2011		<ul style="list-style-type: none"> Dr Mike Grady from the Marmot Review team delivered a presentation to the DIB which followed sharing of research around a Social Determinant Model of Health. 	

Recommendation	Due date	RAG	Progress
Further explore innovative practice from across the country in relation to addressing health inequalities, in particular the example of the London Borough of Newham, to ensure that advice and guidance on benefits and re-entering employment targets the main issues facing the long-term unemployed	31/03/2011	●	<ul style="list-style-type: none"> Through both Eurocities and the WHO Healthy Cities Network, best practice examples are being identified and researched to determine whether they would work within Sunderland
Sunderland Partnership and its delivery partnership submit a formal response to the Marmot Review to the Health and Wellbeing Scrutiny Committee, demonstrating how partners are supporting delivery for the local population around active travel plans, availability of good quality green spaces, healthy local food environments, energy efficiency in housing, reduction of fuel poverty, integration of planning and removal of barriers to community participation	31/03/2011	●	<ul style="list-style-type: none"> Work is ongoing with the partnerships Delivery and Improvement Board to collate information and formulate a response, this will include an action plan for the Partnership

Report Key

These columns show the level of performance for the latest reporting period and the same period in the previous year. A question mark means that information is not available

The target is what we want to achieve

	2008/09 Outturn	2009/10 Outturn	Are we improving?	Target	Have we achieved the target?	Commentary
The % of older people discharged from hospital and benefiting from intermediate care / rehabilitation still living at home 3 months after discharge (NI125).	70.50 %	72.90 %	✓	78.30 %	▲	
The % of adults, older people and carers who are social care clients receiving self-directed support. (NI130)	5.83 %	7.42 %	✓	8.50 %	▲	<ul style="list-style-type: none"> New and existing clients will be offered self directed support from 1st August 2010 to help achieve the 30% target set for 2010/11
The % of carers whose needs were assessed or reviewed by the council. (NI135)	54.10 %	56.50 %	✓	56.40 %	★	<ul style="list-style-type: none"> A new initiative in late 2009/10 was implemented to ensure all carers engaging with HHAS are offered a separate carer assessments.

This is a comparison of the latest outturn against the same period the previous year. The symbols mean

performance has improved
 performance is stable
 performance has declined
 Information is not available



This traffic light is a comparison of performance against the target set for the year















The target has been achieved
 Performance is within 10% of the target
 The target has not been achieved
 Not applicable due to no target being set











Adult Social Care




	Sept 2009 Position	Latest Position Sept 2010	Are we improving?	Target	Have we achieved the target?	Commentary
The % of older people discharged from hospital and benefiting from intermediate care / rehabilitation still living at home 3 months after discharge (NI125).	70.50 %	81.80 %	👍	83.30 %	🟡	
The % of adults, older people and carers who are social care clients receiving self-directed support. (NI130)	7.04 %	8.64 %	👍	30.00 %	🔴	• New and existing clients will be offered self directed support from 25 October 2010 to help achieve the 30% target set for 2010-11 - clients will be able to take the individualised budgets as a direct payment.
The % of carers whose needs were assessed or reviewed by the council. (NI135)	57.88 %	53.15 %	🔴	59.30 %	🔴	• A new initiative in late 2009/10 was implemented to ensure all carers engaging with HHAS are offered a separate carer assessments.
The rate of adults per 100,000 population that are assisted directly through social services funded support to live independently. (NI136)	2,876....	3,039....	👍	3,507....	🔴	• This is being addressed in the revised Care Management & Assessment Model which went live 25 October 2010 to provide a more pro-active approach to identify and support individuals who need some help.
The % of vulnerable people (i.e. people who are receiving a Supporting People Service) who have moved on from supported accommodation in a planned way. (NI141)	77.73 %	83.01 %	👍	87.00 %	🟡	• Service to arrange contract review meetings with providers that are not consistently meeting targets. Actions to help improve on performance will be discussed.
The % of vulnerable people (i.e. people who are receiving a Supporting People Service) who have established or are maintaining independent living. (NI142)	98.75 %	99.09 %	👍	100.0...	🟡	• Service to arrange contract review meetings with providers that are not consistently meeting targets. Actions to help improve on performance will be discussed.
The percentage of adults with learning disabilities in settled accommodation at the time of their assessment or latest review. (NI145)	84.78 %	92.85 %	👍	84.00 %	★	
The percentage of adults with learning disabilities in paid employment at the time of their assessment or latest review. (NI146)	2.61 %	4.67 %	👍	7.50 %	🔴	• The Division is considering what mechanisms could accelerate improvements against this indicator, including effectiveness of WNF scheme in not just making people "job-ready", but ultimately support/maintain them in employment.
The % of new clients where the time from first contact to completion of assessment is less than or equal to four weeks. (NI132)	87.74 %	86.61 %	🔴	94.10 %	🔴	• This is being addressed in the revised Care Management & Assessment Model which went live 25 October 2010 to provide a more pro-active approach to identify and assess individuals who need some help through an initial advice & assessment team.
The % of new clients for whom the time from completion of assessment to provision of services in the care package is less than or equal to 4 weeks. (NI133)	93.31 %	95.01 %	👍	93.20 %	★	
The number of admissions of supported residents aged 65 or over to residential/nursing care per 10,000 population (LPI035)	47.03	33.24	👍	80.00	★	
Percentage of items of equipment delivered within 7 working days (BV056).	91.20 %	91.33 %	👍	94.00 %	🟡	• This is being addressed in the revised Care Management & Assessment Model which went live 25 October 2010 to provide a more pro-active approach to identify and assess individuals who need some help through an initial advice & assessment team.

Health Inequalities (please refer to main body of the report for commentary)







	Sept 2009 Position	Latest Position Sept 2010	Source Date	Are we improving	Target	Have we achieved the target?	Commentary
The rate of alcohol related hospital admissions per 100,000 population (NI039).	2,636....	2,773....	30/06/2010		2,248....		
The % of residents who report that they are in good health (NI119)	68.90	68.90	31/03/2010		69.20		
The mortality rate per 100,000 population, from all causes at all ages - females (NI120f).	579.82	578.70	31/03/2010		530.00		
The mortality rate per 100,000 population, from all causes at all ages - males (NI120m).	878.22	851.00	31/03/2010		720.00		
Mortality rates from all circulatory diseases per 100,000 population aged under 75 (NI121).	98.00	88.90	31/03/2010		75.49		
Mortality rates from all cancers per 100,000 population aged under 75 (NI122)	137.00	141.14	31/03/2010		117.03		
The rate of self-reported 4-week smoking quitters per 100,000 population aged 16 or over (NI123).	554.00	549.84	30/09/2010		1,490....		

Sport and Leisure

	Sept 2009 Position	Latest Position Sept 2010	Are we improving?	Target	Have we achieved the target?	Commentary
The % of the population (aged 16 plus) who participate in sport for at least 30 minutes on 3 or more times a week (NI008)	19.60 %	19.53 %		24.03 %		<ul style="list-style-type: none"> The Active People Survey (that contributes to NI8) outturn for the rolling 24 months April 2008-April 2010 is 19.5%, compared to 19.6% in 2007-2008. As the difference is 0.1% and the confidence level for this data is +/- 3.5%, this represents no change in performance. The annual target was set from a local baseline of 20.03% in 2006. In 2006, Government set a target to increase participation by 1% year on year until 2020. In Sunderland, achieving a 1% year on year increase is challenging, given the health and economic challenges we face locally
% of population volunteering in sport and active recreation for at least one hour per week (LPI018).	4.94 %	4.94 %		5.00 %		<ul style="list-style-type: none"> Partnership working through the Active Sunderland Board and the development of a sport and Wellness volunteering network has had a positive impact on this indicator.
Total number of visits to leisure centres (LPI021)	2,265,877.00	1,123,166.00		1,140,622.00		<ul style="list-style-type: none"> Whilst it is pleasing to see 'Other Visits' ahead of Year End Forecasts, overall Swimming attendances are projected to be below target at the end of March 2011 by 125,421. The projected decline is due to a withdrawal in the Free Swimming Programme for those 16 and under, and those 60 and over. Currently 33,040 behind target as a result of the withdrawal of the free swim funding government initiative which ended 30th June 2010.
Total number of swims within leisure centres (LPI022)	657,016.00	335,368.00		379,907.50		<ul style="list-style-type: none"> Currently projecting 125,421 behind target as a result of the withdrawal of the free swim funding government initiative which ended 30th June 2010. In order to address the decline, particularly when swim charging was reintroduced from 1 August 2010, has necessitated the need to implement a plan firstly, to retain existing customers and secondly to attract new ones. <p>Detailed below is a summary of the work scheduled in order to keep customers visiting our excellent facilities.</p> <ol style="list-style-type: none"> 1. Continue to highlight the benefit of the city's 'Lifecard' which was introduced in 2008. 2. Promote our swimming pools, including new facilities at the Aquatic Centre, Silksworth and Hetton as clean, modern facilities that offer a great day out for the family. 3. Continue to drive swimming sales through the monthly Wellness membership packages 4. Promote the Learn to Swim products 5. Continue to develop links with local schools to increase our school swimming programme, targeting all schools in the city 6. Work in conjunction with the City of Sunderland Amateur Swimming Club and the Amateur Swimming Association (ASA) to develop and expand the current Aquatics Club at the Aquatic Centre into our other city pools. 7. Continue to attract high profile aquatics events to the Aquatics Centre, such as the ASA Nationals, UK School Games).

	Sept 2009 Position	Latest Position Sept 2010	Are we improving?	Target	Have we achieved the target?	Commentary
Total number of other visits to leisure centres (LPI023)	1,608,861.00	787,798.00		760,714.50		<ul style="list-style-type: none"> Currently projecting 92,381 ahead of target. The new indoor & outdoor play area at Silksworth has attracted attendances higher than originally anticipated.
% of Children & Young People with access to high quality play 1km (CYPP1) (LPI066)	49.00	70.00		65.00		<ul style="list-style-type: none"> The successful completion of the Play Pathfinder programme has seen a 21% increase in access to high quality play provision from the doorstep.

Environmental Health

	Sept 2009 Position	Latest Position Sept 2010	Are we improving?	Target	Have we achieved the target?	Commentary
The percentage of satisfied customers with regulatory services. (trading standards, environmental health and licensing) (NI182)	77.20 %	75.20 %		79.00 %		
The number of significant issues that the Trading Standards Service is called upon to deal with less the number that it is actually able to deal with (NI183).	4.25	3.21		3.50		
The percentage of food establishments within the local authority area which are broadly compliant with food law (NI184).	89.20	83.82		89.00		Statistics for premises being 'broadly compliant' have altered following new guidance produced by the Food Standards Agency. This guidance aims to improve consistency in the rating of food premises prior to the introduction of a 'National Food Hygiene Ratings Scheme' later this year. In Sunderland the management of food safety in local businesses was identified as an area of where assistance was required prior to the introduction of our own 'Scores on the Doors' rating scheme. This was addressed by the organising of three seminars across the city and the subsequent implementation of training courses to help food businesses. This will ensure that the number of premises becoming 'broadly compliant' will increase and conditions in all establishments are expected to improve.