

DUDLEY MBC DACHS

CQC ADULT SOCIAL CARE INSPECTION

DRAFT ACTION PLAN

October 2009

CQC made 19 Recommendations to improve outcomes and capacity in Dudley – these are all addressed in the following Action Plan

SAFEGUARDING VULNERABLE ADULTS

1. Assurance that staff and managers in all relevant agencies know how to recognise and manage concerns appropriately.					
No.	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
1.1	A Review is carried out of the organisational arrangements for the management of adult protection work within DACHS	Assistant Director Learning Disabilities and Mental Health - RC	End March 2010	Review to commence October 2009. A decision has already been made to enhance a number of Social Worker posts in Adult Social Care teams as senior practitioners to specialise in adult protection	Organisational arrangements are more secure.
1.2	A Review is carried out by the Board of the effectiveness of cross-agency safeguarding arrangements, together with a whole systems analysis of capacity and where initiatives can be joined up.	DSVAB (Dudley Safeguarding Vulnerable Adults Board)	End March 2010	Review to commence October 2009. PCT lead officer for Adult Safeguarding to be appointed October 2009.	Cross-agency arrangements are more efficient and effective
1.3	A comprehensive check is carried out with all partner agencies that they have key requirements in place.	Head of Service Safeguarding - AH	End October 2009	A letter has gone out to all partner agencies asking them to confirm that they have in place each of the requirements in section 2 of this action plan. Most agencies have replied. Most agencies have most requirements in place. We are chasing those who have not replied and/or do not have requirements in place.	Accountability for Safeguarding Adults work is recognised by each partner organisation's executive body.
1.4	Voluntary and independent community sector organisations understand their role and responsibilities in Safeguarding Adults.	Head of Service Safeguarding - AH	End October 2009	We are extending involvement with voluntary agencies through Board membership, training strategy and raising awareness	Organisations are more aware of their responsibilities

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1.5	Under-reporting of the number of referrals relating to adults under 65 with Mental Health needs is addressed	DWMHT Director WP	March 2010	Mental Health Executive Team are developing an action plan with CMHTs to address low number of referrals. Action plan to include benchmarks against which to assess reporting based on pop data re number of people in the area with MH needs and number known to MH services	Numbers of appropriate referrals from Adult Mental Health Services show an increase.
1.6	Care homes' compliance with minimum standards for protection and staff training is improved	Commissioning Unit	June 2010	Commissioning Team will review all providers where standards fall below an acceptable level including improved contractual requirements. System to be put in place to monitor alerts and especially alerts that are late or incomplete.	More staff in the independent sector are trained. Improved compliance through contractual requirements.
1.7	Safer recruitment is improved for volunteers and people using self-directed support	Head of HR Personnel - SH Head of Safeguarding - AH	March 2010	This being addressed through the Safer Recruitment group and through improved public information for people with direct payments and personal budgets	People using self-directed support are adequately protected
1.8	Further training to be provided for those undertaking specific roles e.g. managing investigations; chairing conferences; risk assessment and protection planning.	Head of HR Learning and Development - AP Head of Residential Services - BN	End March 2010	Refresher training programme will commence in January 2010, following launch of revised procedures in December 2009.	Improved compliance with procedures relating to investigations.

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1.9	The partnership's training strategy includes training that is accessible to and/or specifically tailored for service users and carers, specifically (a) how to make a complaint about abuse or neglect (b) personal budgets	Head of HR Learning and Development - AP Head of Residential Services - BN	End December 2009	Training programme is being extended to include training for these groups. Training to include what people should be able to expect from Safeguarding process, and input on DMBC policy about things like gifts, wills etc.	People using self-directed support are adequately protected
1.10	NHS Trusts to continue training for their own staff and to maintain accurate records of staff who have been trained	DPCT Director of Patient Experience - SD; DGH Director of Nursing - DMcM DWMHT Director of Governance - RM	Commenced and ongoing	System for logging attendances and feeding data through to DSVAB Training Group for collation and monitoring now in place. Targets for completion and some benchmarking of numbers involved to be added in order to understand progress and gaps.	Number of NHS staff who have been trained is known and has increased.
1.11	More structured opportunities are created for sharing and learning across teams	Head of Residential Services - BN Head of Safeguarding - AH	End March 2010	This will be achieved initially via the refresher training programme.	Good practice is shared more effectively.

2. Ensure that the safeguarding and protect policy and procedures fully address all areas of vulnerability and are implemented consistently.					
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
2.1	A Review is carried out of the governance and accountability arrangements which were introduced for DSVAB in early 2009	DSVAB (Dudley Safeguarding Vulnerable Adults Board)	End 2010	Review will commence during 2010 as governance arrangements only recently introduced and need time to bed down	Effective governance is in place
2.2	Protection Plans are in place and are regularly reviewed.	Head of Safeguarding - AH	Completed	Protection plans have been updated on all cases conferenced since January 2009. Cases which should have been conferenced but were not will also be reviewed to check whether a protection plan is needed. Protection Plans which have been in place for more than six months are being reviewed. Data will be collected on protection plans by client group and outcomes.	Protection Plans are in place on all cases
2.3	Effective risk assessment and analysis are in place. Care Plans include risk assessments which address safeguarding for each client. (4.14) Care reviews make links to relevant safeguarding actions.	Head of Safeguarding - AH	End December 2009	Risk assessment pro forma has been developed which will be included in amended procedures.	Risk assessments are more effective and comprehensive.
2.4	Strengthen standards which are used by Commissioning in contracts and service specifications	Head of Safeguarding - AH	End April 2010	Review contracts and service specifications to ensure they provide clear indicators / outcomes for safeguarding vulnerable people.	Service users are protected through strengthening standards. DSVAB will receive a report on the proposed changes and on progress/ impact afterwards.

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
2.5	The policy and procedures are accessible to all workers, service users, carers and members of the public, and are clear to understand. There is an 'easy-read' guide to the Safeguard and Protect Policy / Procedures	Head of Safeguarding - AH	Completed	The Safeguard and Protect Policy and Procedures are accessible on the DMBC website. A quick guide and an easy read leaflet are also available on the website.	Policy and procedures are accessible to DACHS and partner agency staff
2.6	A 'root cause' analysis is carried out where several reports are received on the same individuals / establishment	Head of Safeguarding - AH	Completed	A spreadsheet in the Safeguarding Team is used to log concerns about care homes; this is used to identify those establishments on which several reports have been received. The Adult Protection Manager will then convene a Strategy meeting. There is good liaison in DACHS between the Safeguarding Team, the Complaints Team and Commissioning. Information will be reported to meetings of the audit/performance sub group and the issues raised by various types of multiple referrals will be part of the data set reported to the DMT and the Board	Concerns about care homes are being picked up more quickly.
2.7	Serious Untoward Incident Protocols in the three NHS Trusts are reviewed to ensure they are consistent with the Safeguard and Protect Procedures and that	DPCT Director of Patient Experience - SD; DGH Director of Nursing	December 2009	Review is in progress	Safeguarding referrals are made in appropriate cases following SUIs.

	SUIs where there are safeguarding concerns are referred to DACHS	- DMcM DWMHT Director of Governance - RM			
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
2.8	<p>Safeguard and Protect policy and procedures have been re-written to include the following improvements identified by the Inspection:</p> <p>AS34 Initial contacts / referrals relating to BME clients Case recording standards / recording of key actions and decisions Use of body charts Involvement / support to carer, especially those under stress Informing Perpetrators Advocacy Victim support (including PLD who are victims of racial abuse) Self-funders / Predictive risk analysis Timescales for Strategy Meetings / Conferences Investigations (e.g. home carer) involving more than one client Policy / procedures specifically relating to abuse by home care workers Tracking Police investigations Communication with other Councils</p>	Head of Safeguarding - AH	December 2009	First draft has been completed. Draft procedures will go out for consultation in October and will be approved by DSVAB in November.	Improved Policy and Procedures afford better protection for vulnerable clients.

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
2.8	<p>Safeguard and Protect policy and procedures have been re-written to include the following improvements identified by the Inspection contd..:</p> <p>Feedback to victims / other agencies re outcome of safeguarding investigation Tracking of cases / supervision Closure of cases</p>	Head of Safeguarding - AH	December 2009	First draft has been completed. Draft procedures will go out for consultation in October and will be approved by DSVAB in November.	Improved Policy and Procedures afford better protection for vulnerable clients.
3. Ensure victims of abuse and safeguarding referral are appropriately involved and given feedback in a timely manner.					
3.1	Service users are involved in the work of the Board	Head of Safeguarding - AH	Commenced and ongoing	<p>Keeping Safe sub-groups have been set up for LD and MH reporting to LD and MH Boards as well as DSVAB.</p> <p>Other arrangements have been put in place for OP and PD Boards to facilitate service user involvement.</p> <p>LINks to be invited to assist in supporting service users to make representations.</p> <p>Impact of service uses and carer involvement will form part of the annual report (and six-monthly update)</p>	<p>Service users are able to influence the development on safeguarding policy.</p> <p>User involvement and opportunities to make suggestions are flagged up on website and in publications.</p>
3.2	Equality Impact Assessment involving stakeholders on revised Safeguard and Protect Procedures and	Head of Safeguarding - AH	March 2010	To commence when the new Safeguard and Protect Policy and Procedures are in place	Impact of Policy and Procedures on different client groups can be assessed.

	safeguarding arrangements has been carried out.				
4. Increase the Community Safety Partnership focus on safeguarding and hate crime within a preventative strategy that addresses the impact of abuse and hate crime on victims.					
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
4.1	Plans and targets for Safeguarding Adults are included in other plans / strategies e.g. older people; learning disability; mental health	Assistant Director Learning Disabilities and Mental Health - RC Head of Safeguarding - AH	End September 2009	Revised Learning Disability Strategy includes a section on Safeguarding. Revised draft MH Strategy includes a section on Safeguarding OP and PD strategies have been amended to include safeguarding.	All service strategies reflect safeguarding requirements
4.2	There is a clear reporting line to the LSP via the Safe and Sound Partnership	Assistant Director Learning Disabilities and Mental Health - RC	Completed	Reporting framework agreed by Board March 2009.	LSP and Safe and Sound are fully briefed on adult safeguarding
4.3	Board has effective links with other partnerships e.g. Regeneration; Community Cohesion; Equality and Diversity	Assistant Director Learning Disabilities and Mental Health - RC	Completed	Reporting framework agreed by Board March 2009	Other partnerships are fully briefed on adult safeguarding
4.4	Links are in place with the Children's Safeguarding Board.	Assistant Director Learning Disabilities and Mental Health - RC Head of Safeguarding - AH Children's Safeguarding Development	Commenced and ongoing	Assistant Director or Head of Service attend LCSB. Baby P audit has been completed for DACHS, and recommendations are being implemented. Joint campaign on Safeguarding planned with Community Safety for anti-bullying week November 2009. Joint training on forced marriages	Children's and Adult Safeguarding work is effectively co-ordinated.

		Manager - JJ		has been arranged Safer recruitment briefings are being delivered jointly	
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4.5	Safeguarding Adults is a key theme within the Community Safety strategy	Assistant Director Learning Disabilities and Mental Health - RC Head of Community Safety - DH	End March 2010	Victims and Vulnerable People has been included as a key theme in the Community Safety Strategic Assessment for 2009-2010. This will form the basis for a joint prevention strategy. Safeguarding is referenced in the latest version of the Community Safety Plan. ASC Inspection has been reported to Safe and Sound Board Deputy Head of Community Safety has been appointed to DSVAB Data for safeguarding and community safety will be married up.	Community Strategy will reflect a set of priorities/objectives for safeguarding.
4.6	'Safeguarding Adults' messages are actively promoted to the public. The Partnership has an information and publicity strategy.	Head of Safeguarding - AH	November 2009	Draft Comms strategy presented to DSVAB in May. Priorities for next six months have been agreed and many already in progress. Amended final version of Comms Strategy will be approved at November Board meeting Board work is already publicised on the internet – membership; terms of reference; business plan; agenda; minutes; annual report.	The general public in Dudley are more aware of how to refer concerns re vulnerable adults.

				<p>Information re the Safeguarding Board has been widely circulated in DACHS and other agencies.</p> <p>Performance measures will be built in to assess the impact of public information on different groups especially those who are hard-to-reach.</p>	
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
4.7	<p>Public information is available in the form of leaflets and on the Council's website in a range of accessible formats catering for the general public; service user groups and specific communities. A variety of media is used to disseminate this information on a regular basis so that vulnerable people are aware how they can protect themselves and seek help.</p>	<p>Head of Safeguarding - AH</p>	<p>March 2010</p>	<p>Public information comprises a basic information leaflet and an easy-read leaflet, which is aimed mainly at people with a learning disability. A leaflet has recently been produced for people using direct payments.</p> <p>DSVAB communications strategy to address how leaflets should be circulated and promoted</p>	<p>The general public and agencies in Dudley are more aware of how to refer concerns re vulnerable adults.</p>
4.8	<p>Information from the revised JSNA has been used to inform preventative strategy and analysis of vulnerable groups</p>	<p>Head of Safeguarding - AH</p> <p>Head of Policy & Performance - SA-P</p>	<p>March 2010</p>	<p>Work has commenced on updating JSNA.</p>	<p>Improved analysis of vulnerable groups to enable better targeting of safeguarding messages.</p>

4.9	An effective strategy to combat hate crime is in place	Crime Reduction Officer with Portfolio for Hate Crime - NB DAAT Manager - SH	March 2010	Hate Crime Co-ordinator has been appointed to Learning Disability Partnership Board. Work has started to improve public awareness, reporting and monitoring of hate crime incidents. Housing, Adult Social Care and Community Safety working together on hate crime prevention strategy. Progress on hate crime strategy will be reported to Safe and Sound Board and DSVAB	Incidence of hate crime is reduced; people know how to report hate crime.
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4.10	Specific vulnerable groups have been identified for promotion/prevention activity, to ensure all vulnerable groups have been reached e.g. people with learning disability are protected from sexual harassment	Head of Safeguarding - AH	March 2010	This analysis will be drawn from the improved dataset, which has been introduced. The next step will be to demonstrate how services are offering improved safeguards to these groups.	Improved analysis of vulnerable groups to enable better targeting of safeguarding messages.
4.11	Review arrangements for vulnerable adults who are perpetrators of abuse	Head of Safeguarding - AH	March 2010	This has been addressed through changes to the Safeguard and Protect Policy	Perpetrators receive support in appropriate cases.
5. Identify and strategically address poor practice in delivery of health and social care services, championing person centred approaches in all areas.					
5.1	Robust performance management and quality assurance arrangements are in place, including evidence on outcomes delivered and performance indicators.	Head of Safeguarding - AH	First audit November 2009	Audit programme has been agreed. 20 cases will be audited each quarter. Audit will be carried out by Safeguarding Unit, Internal Audit and Team Managers (peer review) working together. The audit will be reported quarterly to Adults DMG and Safeguarding Board and in Annual Report.	The Council and DSVAB can be assured that risks are effectively managed and procedures consistently applied.

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
5.2	Minimum standards are in place for the investigation of concerns and implementation of protection plans	Head of Safeguarding - AH	March 2010	Minimum standards are included in revised Safeguard and Protect Policy and Procedures.	Investigations are carried out in accordance with the Safeguard and Protect Policy
5.3	Collection of accurate data on numbers/ quality of referrals / investigations / protection plans and outcomes with interpretation of trends is taking place in line with the national data collection on adult protection.	Management Information Team Manager - MA	January 2010	Some improvement in data already achieved as reflected in 2009 Annual Report. Comprehensive dataset for adult protection now in place, and will be reported to DMT via Quarterly Performance report, and to DSVAB. Dataset will include qualitative as well as quantitative data.	Data quality is improved.
5.4	Information is obtained from service users and carers on a regular basis about care management, assessment and reviews	Head of Safeguarding - AH	December 2009	Planning of Ripfa Project has commenced. Proposals to be developed for embedding this involvement and consultation on an ongoing basis.	Service user experiences will contribute to learning from practice and further development of safeguarding work.
5.5	Standard invitation list for adult protection conferences and strategy meetings to be introduced.	Head of Safeguarding - AH	September 2009	Issued and in use.	In each case, all agencies with a contribution to make are invited to adult protection meetings.
5.6	Six monthly audit of attendance at conferences and strategy meetings to be carried out	Head of Safeguarding - AH	December 2009 and June 2010	First audit will be December 2009. Outcomes will be reported to the Board and action taken where attendance is not regular.	Will the DSVAB can be satisfied that agencies are attending adult protection meetings when invited.
5.8	The Safeguarding module of AIS is implemented	Head of Business Technology - GP Head of Safeguarding AH	October 2010	AIS has been purchased and installed. The module will be in use next month.	Recording in adult protection cases is improved.

II IMPROVED QUALITY OF LIFE FOR OLDER PEOPLE

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
6. Assure itself that that all first contact and signposting promotes effective and equal access.					
6.1	Review arrangements for older people's services with a view to a single point of contact	Assistant Director – Older People & adults with Physical Disabilities	April 2010	Initial scoping discussion underway.	Effective and equal access promoted
6.2	Systems are in place to record & recognise repeat referrals.	Head of Service Assessment and Care Management - TP Head of Policy & Performance – SA-P	November 2009	Referrals are monitored and reviewed to inform further activity to ensure signposting is effective and reported to DMT/DMG/OP Board (to involve service users.). Systems record access to contact centre and self-referrals . Half yearly audits planned. SWIFT IT profile notes developed to produce reports.	People are directed to appropriate services at first contact
6.3	Quality assurance systems are in place to track people who did not meet FACs criterion or funded their own care.	Head of Service Assessment and Care Management - TP Head of Policy & Performance – SA-P	November 2009	A sample of "contact only" referrals are contacted after 2 weeks from time of contact. A report is available to collate information monthly on contact only referrals. A letter is sent to those people who made contact only referrals to ask if the signposting information provided was personally effective People referring as 'Contact only' are currently screened for benefit check. People who refer for 'contact only' for blue badges are referred for a benefit check.	People only have to tell their story once to access a range of statutory and universal services.

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
6.4	Contact Centre staff identify and ensure that requests for social care are directed to the appropriate specialist advice.	Head of Service Assessment and Care Management - TP Head of Policy & Performance – SA-P	January 2010	The corporate call centre, Dudley Council Plus, have a staff training programme in place to ensure contacts needs are appropriately screened in order for the relevant service to be signposted. Systems record access to contact centre and self referrals . Half yearly audits planned. To be reported under Performance Management framework. SWIFT IT profile notes developed to produce reports.	People are directed to appropriate services at first contact
6.5	Information on access to services, meeting Plain Language criterion, is distributed widely and in differing media and language, when required, across the health & social care community	Head of Service Commissioning - AD	November 2009	Information is now prominently displayed in all social care access points, health centres, libraries, and community groups. This is provided in appropriate community languages and formats.	People are well informed and understand how they can access services.
7. Promote carers rights across partnerships, identify their needs and support them in their caring roles					
7.1	The Carers strategy is refreshed to ensure Carers receive a seamless service and their rights are promoted across partnerships.	Head of Service Commissioning - AD	March 2010	The Carers Strategy is under revision and on target for completion.	Carers receive an equitable and appropriate service across both health and social care services.
7.2	Carers receive a stand alone assessment under the Carers Recognition Act and their needs specifically referenced in the Single Assessment Process	Head of Service Assessment and Care Management - TP	Completed	All carers are offered an individual assessment, which is recorded within case records on specific carers assessment format. Within joint social care assessments, carers position and outcomes to be fully completed.	Carers needs are identified separately from those they care for and appropriate support services are put in place where required.

				<p>Briefings of Assessment & Care management staff underway</p> <p>Team Managers and Assistant Team Managers to ensure carers rights are recognised.</p> <p>Initial audit planned for Jan 2010</p> <p>Further audits will planned under performance management structure and internal audit systems.</p> <p>All Carers to receive assessments in their own right by April 2010.</p>	
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
7.3	The outcomes for carers resulting from the recently PCT funded Carers support Worker post are monitored.	Head of Service Commissioning - AD	March 2010	<p>Systems are in place to capture the initial assessment and outcomes at review.</p> <p>Carers emergency card issued.</p> <p>PCT funded carer's coordinator in post.</p> <p>DACHS funded Senior Social Worker post</p> <p>Outcome monitoring will be fed back to Carers Group and Partnership boards on a half yearly basis</p>	<p>Some performance impact information should be reported regularly to the PB's and carer's group so that they can influence service development.</p> <p>Carers have improved access to information on their rights and services in health care settings.</p>
8. Address emotional, leisure social and cultural opportunities for older people and carers in assessment, support planning and personalised service options.					
8.1	Assessment, support planning and personalised service options prompt and identify the range of universal services available to promote emotional, leisure, social and cultural	Head of Assessment & Care Management. - TP	March 2010	Nominated staff co-ordinate the collection and updating of the directory of universal services Market Mapping exercise planned early 2010 in conjunction with SDS team to identify areas for future	People have access to a wide range of services in the community to support needs and prevent referral to formal statutory services.

	opportunities for individuals and their carers.	Head of Service Commissioning - AD		development or obstacles to accessing non statutory services	I
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
8.2	Community information systems in libraries are enhanced to support older people and carers in communities.	Head of Service Transforming Social Care - SJ and Head of Service Commissioning - AD	March 2010	Library systems developed to update signposting information, available to professionals and the public.	People can access information on services and facilities within their communities
8.3	Libraries and Health Centres provide information and resources to support carers.	Head of Service Commissioning - AD	March 2010	Dudley MBC – 13 libraries designated as Carers Information Centres – Launch 4 th December 2009. Training in Carers Awareness & assessments programmed.	Carers can share their experiences and seek support informally in their own communities.

9. Support older peoples choice to live at home through more equal access to a balanced range of support services.

9.1	Quality assurance systems, including statutory reviews and contract monitoring, ensure people have support to access a balanced range of support services	Assistant Director Policy & Performance – BC Assistant Director for Older Persons and Physical Disability - MV	March 2010	Quality assurance and monitoring systems are being aligned to OHOCOS outcomes. A strategy for market management is being developed within the overarching SDS strategy. The Market management strategy will be delivered by an independent user organisation and it is planned to invite interest in providing this facility spring 2010	People have access to services which are person centred and quality assured on a regular basis.
9.2	Intensive home care options are more widely available.	Assistant Director for Older Persons and Physical	December 2009	People receive assessment against FACS eligibility and receive intensive services to support them	People can remain at home whilst receiving more intensive support.

		Disability - MV		at home. Reviewing officers to monitor outcomes for persons receiving 10 hours or more domiciliary care per week and report through QPR.	
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
9.3	Telecare options form the basis of all intermediate and re-ablement care planning.	Assistant Director for Older Persons and Physical Disability - MV	March 2010	Telecare champion nominated in all adult social work teams. Ensuring telecare is considered for early preventive intervention. The SDS strategy will inform the development of telecare options across the borough. All staff will receive induction in telecare & telehealth via a Telecare Fair planned for Feb 2010. demonstration units planned to familiarise all staff and demonstration units planned for acute settings and intermediate care to familiarise service user with equipment before returning home.	A comprehensive range of telecare options provides assurance to users of services and their carers and enables people to live in their own homes.
9.4	People are offered a wide range of telecare options to support them living in their own homes.	Assistant Director for Older Persons and Physical Disability - MV	December 2009	A comprehensive range of telecare options are available.	A comprehensive range of telecare options provides assurance to users of services and their carers enabling people to live in their own homes.
9.5	Quality Assurance systems ensure Telecare is embedded	Assistant Director for Older Persons and Physical Disability - MV	December 2009	Feedback from service users and file audits being undertaken to ensure Telecare is identified as a care option on first assessment and developed in support plans.	A comprehensive range of telecare options provides assurance to users of services and their carers enabling people to live in their own homes.

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
10. Improve support for people with dual or complex needs through improved local arrangements for care pathways and multi disciplinary engagement in single assessment and review processes across the range of agencies involved with the individual					
10.1	SAP, CPA and Common Assessment Framework protocols are refreshed to ensure multi-disciplinary engagement in developing a person centred care pathway for older people with poor mental health.	Head of Service, Assessment & Care Management - TP	March 2010	The dementia care pathway and strategy for older people with poor mental health is to be incorporated within the overarching Older Peoples Strategy and joint commissioning strategy.	Older People with functional or organic disorders receive a comprehensive service, provided seamlessly by health and social care partners.
10.2	All staff are trained in outcome focussed support planning	Head of Service Transforming Social Care – SJ Head of Service Learning and Development – AP	In progress	Within the development of SDS, Staff are trained in the principles of service users being experts and empowering them to directly influence their own support plans.	People are actively involved and included in making choices that affect their lives.

III LEADERSHIP

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
11. Ensure that people that use services and carers are respected as expert partners in the design, delivery and evaluation of services.					
11.1	The 'Engagement' Strategy' is reviewed and refreshed and an implementation plan in place.	Head of Service Commissioning - AD Head of Policy & Performance – SA-P	December 2009	The Engagement Strategy to revised and completed. An action plan has been devised for each service area to ensure views and experiences of people who have used services are effectively captured. The feedback will be utilised to develop an overarching strategy linking together all service user areas which will be delivered in partnership with users of services and their carers and reported through the QPR.	People have positive experiences in being consulted about services that will affect their lives.
11.2	Equality Impact Assessments to have a greater involvement of partners and stakeholders.	Assistant Director – HSPSH Head of Policy & Performance – SA-P	Dec 2009	EIA programme being reviewed in line with Equalities Framework to include impact measures and reporting through QPR and Partnerships.	Users of services and their carers will receive services which better suited to reflect diverse needs and expectations.
11.3	A User Led Organisation is in place and influences the design and delivery of services.	Assistant Director OP/PD	March 2010	The positive activity in engaging service users over the past years to inform strategy will be built on to develop a 'User Led' Organisation. by June 2010.	Users of services and their carers directly and positively influence the design, delivery and evaluation of services.
11.4	Quality Assurance systems are in place to capture feedback from users of services and their carers, which informs commissioning	Head of Service Commissioning - AD	In progress	The LAMA influences contract monitoring. Quality Assurance information is used to inform commissioning. Commissioners involved in	People find it easy to feed back about their experiences of social care and know that he information they provide will be used to improve

	and contract monitoring.			conferences and forums. The updated SWIFT IT system provides a report for individual profile notes to be reported into an easy read document.	services.
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
12. Ensure that outcomes for people are improved through SMART planning, improved performance management arrangements, quality assurance of practice and the analysis of data					
12.1	The Older Persons strategy is refreshed and re-focussed on outcomes and is reviewed and updated.	Head of Service Commissioning - AD	March 2010	The Older Person's conference in October 2009 to inform strategy.	People experience a service that is person centred and improves the quality of their lives.
12.2	Performance Management and Performance Reporting systems are outcome focussed. Information provides knowledge, which will enable better service planning.	Assistant Director Policy & Performance – BC Head of Policy & Performance – SA-P	January 2010	Next QPR Q2 is refocused on outcomes.	The experience of individuals and their carers in receipt of social care is captured and acted upon. Service gaps and risks are easily identifiable enabling improvements to be put in place at an early stage.
12.3	Outcome based Quality Assurance and Audit systems are in place.	Head of Service, Commissioning - AD	March 2010	Outcome based Quality Monitoring framework under development.	The experience of individuals and their carers in receipt of social care is captured and acted upon.
13. Accelerate work on the transformation agenda by setting clear timeframes for the delivery of key supporting commitments					
13.1	The TSC Project plan identifies clear timeframes for the delivery of key supporting commitments.	Head of Service, Transforming Social Care - SJ	November 2009	New project structure agreed and work in progress to enhance project planning.	People have the choice of a wide range of care options, which have the flexibility to meet the individuals changing needs.
13.2	The capacity of providers to	Head of Service,	March 2010	NAAPS has been commissioned to	People have the choice of a

	deliver SDS is promoted via a market management strategy delivering enhanced business models.	Transforming Social Care - SJ		work with providers and small business to prompt and promote variety and flexibility in the care market. The contract with NAAPS will be reviewed by the Commissioning Unit & TSC Operating Group at regular intervals.	wide range of care options, which have the flexibility to meet the individuals changing needs.
No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
13.3	The communication strategy for Transformation SDS is in place and its efficacy regularly monitored.	Head of Service, Transforming Social Care - SJ	November 2009	Communication Strategy has been in place since 2008 to be reviewed by TSC Board in October 2009. Feedback will be sought from people who use services and carers re the effectiveness of the strategy	People are aware of what is available to meet their assessed needs and how they can access and control the care provided for them.
13.4	The strategy for RAS, de-commissioning and re-provision of services is being developed in line with DH timeframes.	Head of Service, Transforming Social Care - SJ	March 2010	RAS was approved by TSC Board September 2009 and will be rolled out during 2010. Work continuing on plans for decommissioning and re-provision of services in line with budget review process; these commissioning plans will be in place by March 2010.	The council is confident that self directed support will be delivered in line with government targets
14. Accelerate completion of strategic workforce plan to address capacity and skills development of the local social care workforce for the community's increasing demands and the adult social care transformation agenda					
14.1	A joint Health and Social Care strategic workforce plan addresses capacity and skills development of the local social care workforce for the community's increasing demands and the adult social care transformation agenda.	Head of Service Learning and Development - AP	January 2010	First draft on the agenda for HIMMT, October 2009.	People receive the care they need from appropriately trained and skilled staff.

	This acknowledges the JSNA and other relevant demographic intelligence.				
14.2	The outcome of the market management strategy is aligned with the strategic workforce plan.	Head of Service Commissioning - AD Head of Transforming Social Care - SJ	March 2010	Complete Market Management Strategy cf. 9.1	Staff are available and trained to provide a wide range of services to meet individual need.

IV COMMISSIONING AND USE OF RESOURCES

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
15. Develop transparent commissioning strategies for older people and carers including needs and gap analysis and alignment of resources to plans.					
15.1	See 12.1				
16. Ensure citizens benefit from maximised capacity and value for money in the balance of commissioned and provided services.					
16.1	Commissioning plans identify capacity for de-commissioning and re providing services in line with the transformation agenda.	Head of Service, Transforming Social Care - SJ Head of Service Commissioning - AD	March 2010	The market management strategy assures value for money and, incorporates a planned shift from directly provided services to those provided by the independent sector where relevant. The Market Management Strategy (cf. 9.1) will be delivered by an independent user organisation and it is planned to invite interest in providing this facility spring 2010. An options report will be provided by autumn 2010 to influence further development of SDS.	People experience choice of a range of services that are modern and effective in meeting need.
16.2	The strategy for RAS, de-commissioning and re-provision of services is being developed in line with DH timeframes.	Head of Service, Transforming Social Care - SJ	June 2010	Pilot of 600 cases scheduled for October 2009 start. Progress report scheduled for Cabinet in October 2009.	People experience choice of a range of services that are modern and effective in meeting need.

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
17. Accelerate planning with health partners and carers to ensure that carers fully benefit from joint funding for improved services and breaks.					
17.1	See 7.1	Head of Service – Commissioning - AD	March 2010	Up-dated Carers Strategy by March 2010 agreed with partners and impact monitored through reporting arrangements.	Carers receive an equitable and appropriate service across both health and social care services.
18. Include performance about contract monitoring including third sector outcomes in its regular performance reports.					
18.1	A quality improvement plan is in place, supported by CQC and statutory partners to improve outcomes for users of services and their carers who receive services from the independent sector	Head of Service Commissioning - AD	March 2010	Refresh agenda for formal information sharing meetings with CQC.	People who receive services from registered providers experience quality services and are safeguarded from harm.
18.2	An outcome focussed quality assurance system for registered services is in place, which is operated jointly with health partners.	Head of Service Commissioning - AD	March 2010	Links being developed with health partners to deliver an outcome focussed joint audit process for independent sector providers. The outcome focussed audit system will adhere to KLORA guidelines and be undertaken in partnership with PCT monitoring staff and nutritionists delivering a joint statement of a providers quality and competence.	People who receive services from registered providers experience quality services and are safeguarded from harm.
18.3	CQC ‘LAMA’, ‘CRILL’ and Regulatory Inspection information is analysed to inform quality assurance process and performance monitoring.	Head of Service Commissioning - AD	In place	Quality Monitoring Framework incorporates CRILL and other regulatory information.	People who receive services from registered providers experience quality services and are safeguarded from harm.

No	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
18.4	Contract monitoring included in routine quarterly council performance reporting system.	Head of Service Commissioning - AD Head of Policy & Performance – SA-P	In place	Performance information from Quality Monitoring of the independent sector is integrated with the Directorate QPR system	The council is confident that they understand activity in the independent sector and can take action if required to drive up the quality of services or terminate contracts with poor providers.
19. Work with providers to improve the capacity to deliver personalisation through alignment of self-directed care with local business models.					
19.1	Refer to 13.1				
19.2	Refer to 13.1				

END OF DRAFT ACTION PLAN