

# Assessment of Performance Report 2009/10

#### ADULT SOCIAL SERVICES ASSESSMENT OF PERFORMANCE 2009/10: Sefton

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The report will produce a summary of the performance of how the council promotes adult social care outcomes for people in the council area.

The overall grade for performance is combined from the grades given for the individual outcomes. There is a brief description below – see Grading for Adult Social Care Outcomes 2009/10 in the Performance Assessment Guide web address below, for more detail.

**Performing Poorly** - not delivering the minimum requirements for people.

Performing Adequately - only delivering the minimum requirements for people.

Performing Well - consistently delivering above the minimum requirements for people.

Performing Excellently - overall delivering well above the minimum requirements for people.

We also make a written assessment about

#### Leadership and

#### Commissioning and use of resources

Information on these additional areas can be found in the outcomes framework

To see the outcomes framework please go to our web site: Outcomes framework

You will also find an explanation of terms used in the report in the glossary on the web site.

# 2009/10 Council APA Performance

Delivering outcomes assessment Overall council is:	Well
Outcome 1:	Well
Improved health and well-being	
Outcome 2: Improved quality of life	Excellent
Outcome 3: Making a positive contribution	Well
Outcome 4: Increased choice and control	Well
Outcome 5: Freedom from discrimination and harassment	Well
Outcome 6: Economic well-being	Well
Outcome 7: Maintaining personal dignity and respect	Well

## Council overall summary of 2009/10 performance

The councils self declaration reported continuing good performance in all outcome areas with the exception in quality of life (outcome 2), where the council has declared improved performance.

The council received an inspection of Older Peoples Services in December 2009, the inspection confirmed the councils declaration in quality of life, increased choice and control and maintaining personal dignity and respect. There are references to the service inspection within this report and the full report is available from <a href="https://www.cqc.org.uk">www.cqc.org.uk</a>

Overall the council continues to perform well in achieving positive outcomes for residents, although the service inspection identified some challenges ahead. The council has responded constructively to the service inspection and produced an action plan which is comprehensive, well-focused and clearly sets out targets for improving outcomes at a number of levels. In particular there are planned actions to enhance joint working and the personalisation and responsiveness of local services. Adult safeguarding processes will be strengthened. Further improvement will be supported by strong risk management and governance arrangements supported by a whole systems approach to embedding its improvement plan. The council has a strong focus on involving and learning from people's experience and using this intelligence to support service design and delivery. Strategies are well supported by local knowledge that reflects a high degree of engagement with communities and stakeholders. This approach will help secure and sustain ongoing service improvement.

# Leadership

"People from all communities are engaged in planning with councillors and senior managers. Councillors and senior managers have a clear vision for social care. They lead people in transforming services to achieve better outcomes for people. They agree priorities with their partners, secure resources, and develop the capabilities of people in the workforce".

#### Conclusion of 2009/10 performance

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The council has a clear vision for the personalisation and improvement of adult social care. A range of plans and initiatives are underway to secure the changes required to meet the requirements of "Putting People First". Local targets in this respect have been met or in some cases exceeded.

People living in the borough are actively encouraged and supported to participate in the design and delivery of services. There is a council wide corporate strategy for consultation and engagement with a clear action plan and, as a result of the range of initiatives, the strategy was effectively implemented in 2009-10.

In response to the consultation activity, the Joint Strategic Needs Analysis (JSNA) is being refreshed, an Older Persons Strategy has been developed, and an expert stakeholder panel has been formed. Intelligence gathered from these fora will be used to inform the ongoing transformation of services. Through consultation with people with a learning disability, their carers and the application of the principles included in the "Valuing People Now" document the council has re-configured the Learning Disability Partnership Board (LDPB) with an elected co-chair from the Getting Involved Group. This approach bodes well for future service provision reflecting the needs, views, preferences and aspirations of people living in the borough. However, some initiatives to engage with some hard to reach groups have been less successful than the council would have wished; consequently the council are reviewing their engagement methods to better capture the views of all minority communities in a comprehensive and meaningful way. Nonetheless, there has been some success as a result of consultation in that specific and specialist services for people in the Gay, Lesbian, Bisexual and Transsexual (LGBT) communities have been established.

The council benefits from a well-established and stable Senior Management Team. The Senior Management Team leads the performance management of the transformation work and there are good links to corporate leadership and elected members. As a result, there have been improvements in key service areas and senior managers and elected members have taken leadership roles in relation to championing the needs of especially vulnerable adults and in the Dignity in Care Campaign.

Elected members have frequent and regular access to management and performance information. However, the Service Inspection in December 2009 found that the understanding of elected members in terms of safeguarding practice and transformation of services required improvement. The council have responded promptly and positively to the inspection findings and work to address this issue is well underway. (See Outcome 7)

The council has a well established business planning process in place. A sound template for planning is used however the Service Inspection found performance relating to planning was mixed. As part of the Improvement Plan submitted following the inspection, the council has implemented improved performance and monitoring standards for service development relating to a range of

strategic priorities. These measures have been developed in consultation with a variety of stakeholders including the Local Involvement Network (LINk) and Sefton Partnership for Older Citizens. This activity has set the strategic direction for the council and improved clarity in relation to performance expectations and monitoring arrangements. The performance framework produces monthly reports and data sets regarding national performance indicators and Local Area Agreement (LAA) priorities. Processes for monitoring both the quality of frontline assessment and care management are sound. Performance management arrangements for contracted services have been enhanced. The new processes are enabling targeted activity for providers who are under reporting or underperforming. This approach has resulted in an improvement in performance against a group of Key National Performance Indicators and improved service satisfaction. The Service Inspection concluded that, overall, the council has good performance management arrangements.

Quality assurance of provided services is undertaken through a number of quarterly customer satisfaction surveys. The quality of regulated services is generally good and the council makes effective use of the local regulatory information in maintaining standards. However, the council is aware that some quality assurance methods (that involve people using services) would benefit from further improvement, work in this regard has already begun and services are becoming more responsive as a result.

Since the Service Inspection in December 2009, the council has improved its Local Workforce Strategy. Action planning has been refreshed and is congruent with the Integrated Local Area Workforce Strategy (InLAWS). The new (refreshed) approach also includes clearer qualitative targets and performance information as well as improved planning arrangements for Joint Health and Social Care Training. Performance will be regularly monitored and reviewed to support the transformation agenda.

The council remains active in developing the knowledge, competence and skills of the wider social care workforce. A range of training opportunities is available including Safeguarding Adults, Person Centred Planning and Dignity in Care. The workforce development grant has been used effectively and the council's relationship with providers in the independent sector is productive and positive. Providers respond well to training opportunities and the courses offered are well evaluated.

The council has reviewed its absence management policy and has reduced both short and long term absence through sickness. In addition, the reductions in the workforce to meet required efficiencies have been effectively managed. Staff turnover remains low. Staff development is becoming a feature of the transformation processes. Supervision arrangements are well developed and regularly monitored. The council remains supportive to staff that have a disability or caring responsibilities and offers flexible working arrangements

As a result, the council is well placed to make sustained, measurable progress in recruiting and retaining a strong and stable work force that is confident and competent to meet the challenges ahead.

## **Key strengths**

- A sound strategic vision for a range of safe and secure personalised forms of support
- Strong leadership from a stable Senior Management Team
- Sound planning for the transformation of services
- Well established performance management arrangements

## **Areas for improvement**

- · To ensure that workforce development is effectively and regularly monitored
- Continue to clarify and share strategic planning priorities with partners and key stakeholders
- Continue to strengthen the implementation of the Equalities Strategy

# Commissioning and use of resources

"People who use services and their carers are able to commission the support they need. Commissioners engage with people who use services, carers, partners and service providers, and shape the market to improve outcomes and good value".

## Conclusion of 2009/10 performance

The Service Inspection (December 2009) found that the council's traditional commissioning arrangements were well established and generally of a high standard. Progress in developing new processes to support commissioning of personalised packages of care is steady. The council has prioritised the involvement of people who use services and their carers in shaping new arrangements and providing a growing range of support options.

The key process for identifying needs across the borough has been the JSNA; this was first published in 2008 and a second analysis will be ready for publication later in 2010. The intelligence gathered and the views, needs and preferences of local

residents will be used to inform the commissioning cycles for 2011-12 onwards. The service inspection found that the council used its intelligence and resources well to address strategic priorities. In addition, budgets and financial resources were well aligned to meet priorities and support improvements. As a result, people living in the borough are benefiting from a shift in traditional bed based services towards community based support options that maintain and support longer term independence.

Commissioning activity is, in the main, based on detailed local knowledge and a robust understanding of people needs and preferences. The council remains active in seeking and including the views of minority communities. (See Leadership)

Although the council works well with its work partners and the Service Inspection found that there were some good examples of joint commissioning initiatives, the council is aware that joint commissioning arrangements require further development, however, work with partners to strengthen joint commissioning activity has begun.

The council acknowledges the need to formalise health and social care partnership processes and share transparent investment plans. The council accept that the pace of delivery for new forms of commissioning needs to be strengthened and maintained to meet locally determined targets in relation to personalised and bespoke care package delivery. Consequently, partners have now developed plans to use commissioning initiatives to improve the pace of development for a growing range of community based, flexible support services and accommodation options, such as, improved day care services and specialist extra care housing.

In addition, the council and its partners have agreed plans to co-locate staff and develop a joint approach to workforce development. The council also has developed plans to review and challenge established services to ascertain their impact in achieving positive outcomes and to make certain that they are providing value for money. This reviewed and refreshed approach to the commissioning of services indicates that further positive developments in joint commissioning activity are likely. This strengthened approach will also help partners to increase their capacity to personalise service delivery.

Customer satisfaction information has become integral to the review process and as a result the council is able to review provision from the service user's perspective. Intelligence gathered is used to inform service design and delivery. Performance and customer satisfaction rates demonstrate the council's commitment to continuous improvement in the quality, efficiency and effectiveness of services, good examples being the Occupational Therapy and Sensory Services. The council continues to drive improvements with an emphasis on choice, empowerment and personalised care packages that are tailored to meet individual needs.

Financial management and budget monitoring remains robust. The council has implemented a strategic budget review to address the financial pressures for 2010-11 and beyond. The review is linked to the Medium Term Financial Plan (MTFP). Adult social care has contributed to required efficiencies through savings in management and support costs. Financial performance in 2009-10 is in accordance with the agreed position forecast and the council has a good track record in managing its budget.

There is continued support for adult social care with the council providing funds for £8million pounds growth over a 3 year period. This investment will assist in meeting the anticipated increase in demand for adult social care services.

The council remains active in working productively with providers to improve service quality. The council's relationship with the independent sector is good, with regular meetings and discussions to support developments. Contract monitoring is regularly undertaken and assertive action is taken to raise standards in the quality of care where shortfalls are identified. Additionally, as part of the transformation of services the council launched a Market Facilitation Strategy in February 2010. The strategy supported by an agreed action plan will provide clarity about future service requirements and enable providers to develop services that better meet people's needs, preferences and expectations. Key intelligence regarding commissioning data trends and requirements will be routinely shared with providers. As a result, providers will be better equipped to meet the changing needs of people requiring services and remain responsive to market changes.

# Key strengths

- Sound commissioning processes
- · Good understanding of local needs
- Effective budget management
- Effective inclusion of local people in the design and delivery of services

# Areas for improvement

- Continue to develop a joint approach to the development and commissioning of services
- To continue to use commissioning incentives to develop a wider range of community based support and accommodation options
- Continue to use a value for money approach to challenge traditional service provision

# Outcome 1: Improving health and emotional well-being

"People in the council area have good physical and mental health. Healthier and safer lifestyles help them lower their risk of illness, accidents, and long-term conditions. Fewer people need care or treatment in hospitals and care homes. People who have long-term needs and their carers are supported to live as independently as they choose, and have well timed, well-coordinated treatment and support".

## Conclusion of 2009/10 performance

The Care Quality Commission has agreed to carry forward the judgement awarded for this outcome from 2008-09 year into the 2009-10 assessment. The council has confirmed, through self declaration that it is continuing to 'perform well' in 2009-10 for this outcome. CQC will continue to monitor indicators of change to this performance.

# Key strengths

# **Areas for improvement**

# Outcome 2: Improved quality of life

"People who use services and their carers enjoy the best possible quality of life. Support is given at an early stage, and helps people to stay independent. Families are supported so that children do not have to take on inappropriate caring roles. Carers are able to balance caring with a life of their own. People feel safe when they are supported at home, in care homes, and in the neighborhood. They are able to have a social life and to use leisure, learning and other local services."

## Conclusion of 2009/10 performance

The council and its partners continue to work collaboratively to provide a growing range of services that support, encourage and maintain independent living.

Information and advice regarding services that support and improve quality of life is readily available. The service inspection in December 2009 found access to services was good and improving. The council (and its partners) is working effectively to ensure that people are able to access services easily. A particular example is the realignment of local bus routes so that people are able to take advantage of services offered at NHS Walk in Centres. Special cards have been produced to help people with a visual impairment use public transport and access a range of services and leisure opportunities.

Partner agencies have included quality of life issues within their assessment processes and have facilitated access to council services appropriately and effectively. Services offered by the council were increasingly available to all of the boroughs residents. Several thousand older people are involved in active lifestyle projects and physical activity is offered through a range of initiatives, offering people good opportunities to access leisure services and meaningful social activities at little or no cost. The council's self assessment demonstrated improved outcomes for people as a result of these initiatives.

Services to include marginalised groups have been developed in association with voluntary organisations. These services are highly valued by the people using them and offer opportunities for increased community presence and social inclusion.

A preventative strategy has been produced using the Department of Health Framework, "Making a Strategic Shift Towards Prevention and Early Intervention." The strategy focuses on key themes of citizenship, neighbourhood and community, as well as lifestyle support, early intervention, enablement and community based support for long term conditions. The strategy is publically available and assists in effective signposting to non-care managed support. The council's Customer Access Team has signposted over 8000 people to support services in third sector. The Teams "No Wrong Door" customer focus policy is instrumental in providing people with good quality information with a sense of welcome and support.

The council offers a growing range of preventative services to promote and encourage a good quality of life with a minimum loss to people's independence. Assistive technology is effectively used to support and maintain safety and independence within the community. The council's care line currently supports over 6000 people using a variety of services including Telecare, Telehealth, community support, community alarms and carers cards. The council and its partners are developing a range of support options and iniatives to support and maintain people with long term conditions in the community and reduce the need for acute hospital admissions.

In addition, the council has continued to improve its performance by reducing waiting times for adaptations and equipment. Equipment supply services have been extended to provide an out of hours service for people at the end of life, this service enables people to return to their preferred place of care without having to wait for vital equipment to be delivered. The service inspection found that the council's equipment service was highly valued and provided people with a speedy response however waiting times in relation to major adaptations during 2009-10 remains higher than comparator councils.

Support for carers is highly developed and very effective. There is a well established Carers Register and a guide for new carers has been produced. The guide had been distributed through General Practitioner (GP) surgeries and has resulted in an increase in registrations and support services provided. For example, following a period of consultation with carers, a direct payment scheme has been developed. The scheme is enabling carers to personalise their own support so they can maintain their own quality of life and manage their caring responsibilities.

The council's approach to prevention and support services to maximise independence is increasing the number of people who are helped to live at home and reducing the number of people admitted to long term care. The number of older people helped to live at home is better than comparators however the number of people supported in long term care is higher than comparators. In addition, the council works well with health agencies to provide intermediate care and rehabilitation services to support people's timely discharge from hospital and ongoing independence in the community.

Information from The Better Health, Better health consultation reported that people are positive about the services received and feel the council is responsive to their preferences of remaining independent in the community.

Support for people with complex needs continues to expand and improve. The "expert patient" scheme and similar fora are involving people with complex needs in designing services that they value. People with profound and multiple learning difficulties are a priority group for a Person Centred Planning (PCP) approach to care management. A champion for this group has been appointed by the Learning Disability Partnership Board. This approach means there is a focus on listening and learning about the persons needs, preferences and aspirations and personalising care as a result. Consequently, people are able to determine their

own support requirements.

In partnership with the Stroke Association, the council have established two additional support workers to provide varying degrees of support for people who have had a stroke. The service also provides support to families and carers. The council are also working with partners to develop a local stroke network. The aim of the network will be to refresh and inform commissioning initiatives especially in Public Health regarding Social Marketing initiatives for stroke and cardio vascular disease.

The council is aware that although services for people with complex needs are, in the main, of a good standard, work is required to ensure that all partner agencies are aware of the range of support for people with complex needs. Consequently, the council and its partners are agreeing arrangements to examine complex cases to ensure that needs are met and positive outcomes secured.

The Service Inspection found that the councils overall performance in this outcome area was of a very high standard.

# Key strengths

- Effective partnership working to improve the provision of a wider range of preventative services
- The involvement of carers in service design and delivery
- Well developed and comprehensive support for carers
- Improved access to all services
- · Effective intermediate care and rehabilitation services

## Areas for improvement

- To continue to improve the availability of individualised and independence-promoting support in the community including Day Opportunities and Extra Care accommodation.
- To continue with the planned production of a carers' strategy. Ensure that there is an implementation plan that clearly sets out the levels and types of support available.
- To finalise interagency agreements for people with complex needs

## Outcome 3: Making a positive contribution

"People who use services and carers are supported to take part in community life. They contribute their views on services and this helps to shape improvements. Voluntary organisations are thriving and accessible. Organisations for people who use services and carers are well supported".

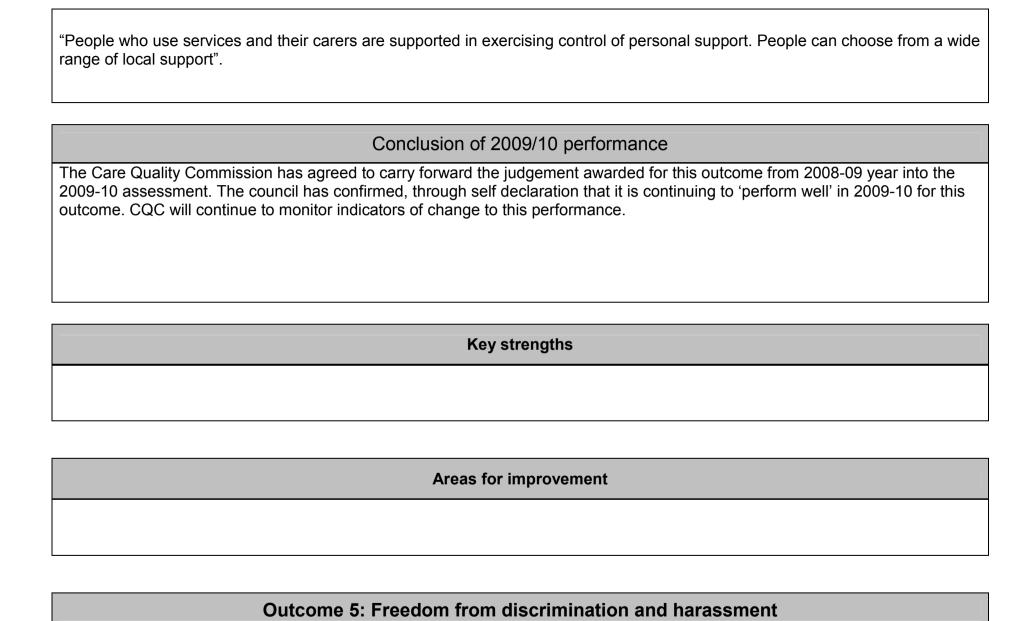
## Conclusion of 2009/10 performance

The Care Quality Commission has agreed to carry forward the judgement awarded for this outcome from 2008-09 year into the 2009-10 assessment. The council has confirmed, through self declaration that it is continuing to 'perform well' in 2009-10 for this outcome. CQC will continue to monitor indicators of change to this performance.

# Key strengths

# Areas for improvement

## Outcome 4: Increased choice and control



"People who use services and their carers have fair access to services. Their entitlements to health and care services are upheld. They are free from discrimination or harassment in their living environments and neighborhoods".

#### Conclusion of 2009/10 performance

The Care Quality Commission has agreed to carry forward the judgement awarded for this outcome from 2008-09 year into the 2009-10 assessment. The council has confirmed, through self declaration that it is continuing to 'perform well' in 2009-10 for this outcome. CQC will continue to monitor indicators of change to this performance.

## Key strengths

## Areas for improvement

## **Outcome 6: Economic well-being**

"People who use services and their carers have income to meet living and support costs. They are supported in finding or maintaining employment". Conclusion of 2009/10 performance The Care Quality Commission has agreed to carry forward the judgement awarded for this outcome from 2008-09 year into the 2009-10 assessment. The council has confirmed, through self declaration that it is continuing to 'perform well' in 2009-10 for this outcome. CQC will continue to monitor indicators of change to this performance. **Key strengths Areas for improvement** 

**Outcome 7: Maintaining personal dignity and respect** 

"People who use services and their carers are safeguarded from all forms of abuse. Personal care maintains their human rights, preserving dignity and respect, helps them to be comfortable in their environment, and supports family and social life".

## Conclusion of 2009/10 performance

Adult Safeguarding was subject to inspection in December 2009. The inspection found that that most people living in the borough were effectively safeguarded from abuse, neglect and poor treatment.

An Adult Safeguarding Interagency Framework offers staff advice regarding multi-disciplinary practice. The Service Inspection found that the framework was valued by staff, however, there was some confusion as to whether the framework constituted procedural guidance or was simply "best practice" advice. Further confusion had been brought about by the addition of "stretch" targets aimed at improving the responsiveness of the service. The council made a positive and comprehensive response to the inspection findings and has implemented a series of robust actions to promote clarity of role, responsibility, procedures and policy. The council reports that staff are now more confident in applying the framework and are clearer about expectations in relation to safeguarding activity.

The Service Inspection also found that safeguarding referrals received a timely response and initial investigations were frequently satisfactory or good. People were protected and risks faced by people funding their own care had been addressed. Similarly, people who lived in out of borough placements were protected and staff in Supporting People Teams had referred situations appropriately. Specialist legal advice was readily available to investigating officers and preventative services were used well in some protection plans. However, some longer term risks were less well addressed, some protection plans lacked clarity and monitoring, reviews were not always timely. In addition, the response and contributions from other agencies was variable, where this worked well, good outcomes have been secured. The Inspection found good examples of a wide range of agencies providing high quality care. However, performance in this regard was inconsistent.

The council has made a prompt response to the Inspection findings and has established 5 local performance indicators to monitor performance across key agencies. Targets have been shared across agencies and progress is being systematically monitored and reviewed. Strong progress is being made in; referrals being determined in 24 hours, strategy meetings within 5 days of referral, timely review of protection plans and case conclusion.

The Inspection also identified the need for further development in relation to: the consistency of risk threshold identification; multi-

disciplinary working; and performance management arrangements. Again, the council has made a prompt and assertive response. A Safeguarding performance and Quality Assurance Subgroup has been established. The group has responsibility for the performance management and quality assessment of activity across the safeguarding partnership. The group reports monthly to the Senior Management Team and quarterly to the Safeguarding Adults Board (SAB). Reports include qualitative and quantitative performance information relating to internal key indicators and multi agency activity relating to safeguarding cases.

The council has had a SAB in place for quite some time, however the Service Inspection found that the board had a number of weaknesses, most noticeably in its leadership and performance management functions. In order to address these issues the council has developed safeguarding practice standards and a competencies framework for safeguarding board members. There is an agreed framework of responsibilities, behaviours and competencies in place and a review of governance arrangements and cross agency agreements is underway. Training and Induction plans for board members are in development and should be finalised by September 2010. In addition, the council is actively seeking a wider membership that includes providers in both the voluntary and private sectors. This activity coupled with agreed terms of reference (all agencies), clarification of roles and responsibilities for setting priorities and targets should equip the board with the capacity, knowledge and skills it requires to provide effective leadership and scrutiny functions in this key area of work.

The council has remained active in raising safeguarding awareness. There have been a number of promotional events for a range of audiences. Advice and contact cards, leaflets and posters have been widely distributed. The council provides free safeguarding alerter/awareness training across the wider health and social care workforce. As a result, safeguarding referral rates have risen along with the number of completed cases during 2009-10 and there has been a 25% increase in the numbers of staff employed in the independent sector that have received training (2009-10). In addition, the council has strengthened its strategic approach to inter-agency training. Three key improvement areas have been identified to address service inspection recommendations. The proposed actions aim to secure clear and binding agreements with partners in respect of declared standards of practice. Envisaged outcomes are improved consistency in safeguarding practice and performance management arrangements.

In the wider promotion of community safety and the protection of vulnerable groups, the Sefton Safer and Stronger Community Partnership Board is well established and provides strong leadership within the council and partner agencies. The wide range of services to help keep people safer in their own homes includes well developed sexual and domestic violence services, a dedicated hate crime unit and a specialist vulnerable victim's advocacy service. There is widespread information available about homophobic crime for all residents, people who use services and carers.

Interagency Preventative Work has been strengthened through the use of the Multi Agency Risk Assessment Conference (MARAC) system for sharing information and risk assessment.

Specific support has been provided for newly identified vulnerable groups such as international workers. Two specialist workers have

been appointed to meet the needs of people from minority communities, a corporate group provided a range of initiatives for travelling communities and there is free legal advice for people seeking asylum. Overall rates of crime and specific incidents of race, culture, domestic violence and antisocial behaviour have fallen.

The council has a range of measures in place to support people's dignity and privacy. A dignity in care project is established. Dignity champions and policies are in place both within the council and partner agencies. The interagency safeguarding framework sets out how private information should be handled and public information is available about people's rights to confidentially.

Contracts with providers include safeguarding and dignity clauses and although contract monitoring is generally strong, the Service Inspection found that specific information about compliance with the dignity clause was not routinely collected. The Service Inspection also found that the dignity in care plan needed to be more precise and ambitions in specifying outcomes and that further work was required to secure dignity for older people. In response, the council updated its dignity action plan in 2010 and has a pilot scheme in place with domiciliary care providers to set up a Dignity Standards Awards Scheme. A web page has also been created to provide information regarding dignity in care, the page also signposts people to related websites and support. All Adult Social Care information leaflets have been enhanced and now carry a dignity commitment statement. As part of the council's wider review of its commissioning and contractual arrangements, the council will collate dignity clause information systematically and use the intelligence to inform purchasing activity. The council also has plans to produce a dignity charter for implementation in all service areas and pursue the Dignity in Care Campaign based on a best practice model as an outcome of its participation in the North West Dignity Leads Group.

The Deprivation of Liberty Safeguards is well managed. The council has a good number of Best Interest Assessors and appropriate professional support. There is an effective scheme of delegation in place.

The council makes effective use of regulatory information to support the commissioning and purchasing of services. The council is active in monitoring the quality of provision and takes timely action to address contractual shortfalls. Contract monitoring and supervision are used to good effect.

The council continues to support and value the role of carers and families in meeting the needs of people that use services. Carers support is well developed and of a high standard. Carers' rights and entitlements are effectively promoted. There is strong evidence of the council responding positively to carers' needs and preferences. Their contributions are evident in service design and delivery. Carers are valued as an important part of the wider Social Care Workforce. (See outcome 2)

## **Key strengths**

- Most people are protected from abuse and neglect
- The provision of a revised interagency framework for intervention
- Continued efforts to raise awareness of adult abuse
- The provision of a range of training opportunities
- The implementation of initiatives to identify and meet the needs of minority groups

#### **Areas for improvement**

- To continue to strengthen practice in identifying risks and improving protection planning
- To continue to strengthen the Safeguarding Adults Board and inter agency working
- To continue to clarify interagency commitments and implement performance management arrangements across agencies
- To continue to provide a range of training opportunities across the health and social care workforce