**REPORT TO:** Cabinet Member, Health & Social Care

**DATE**: 23<sup>rd</sup> December 2009

**SUBJECT:** Performance Information Report Quarter 2, 2009/10

WARDS AFFECTED: None

**REPORT OF:** Charlie Barker

Director of Health & Social Care

**CONTACT OFFICER:** Margaret Milne

Principal Manager, Health & Social Care

0151 934 3614

**EXEMPT**/

CONFIDENTIAL: No

#### PURPOSE/SUMMARY:

To update the Cabinet Member for Health & Social Care on performance and activity for the second quarter, in relation to achieving key objectives.

#### **REASON WHY DECISION REQUIRED:**

In line with Corporate Performance Management Framework.

#### **RECOMMENDATION(S):**

That the Cabinet Member for Health & Social Care

- (i) notes the performance on activity for the second quarter 2009/2010 in relation to achieving key objectives referred to in the report, and
- (ii) notes that this information has been referred to Cabinet as part of a consolidated report on performance information across the Council.

KEY DECISION: No

FORWARD PLAN: Not applicable

IMPLEMENTATION DATE: Not applicable

ALTERN	ATIVE OPTIONS:				
None					
IMPLICA	TIONS: None				
Budget/F	Policy Framework: None				
Financia	l:				
	CAPITAL EXPENDITURE	2006/ 2007 £	2007/ 2008 £	2008/ 2009 £	2009/ 2010 £
	Gross Increase in Capital Expenditure				
	Funded by:				
	Sefton Capital Resources				
	Specific Capital Resources				
	REVENUE IMPLICATIONS				
	Gross Increase in Revenue Expenditure				
	Funded by:				
	Sefton funded Resources				
	Funded from External Resources				
	Does the External Funding have an expiry date	? Y/N	When?		
	How will the service be funded post expiry?				
Legal:	None				
Risk Ass	essment: None				
Asset Ma	nnagement: None				
CONSUL	TATION UNDERTAKEN/VIEWS				
LIASION WITH POLICY AND PERFORMANCE TEAM					

#### **CORPORATE OBJECTIVE MONITORING:**

Corporate Objective		Positive Impact	Neutral Impact	Negative Impact
1	Creating a Learning Community		х	
2	Creating Safe Communities		Х	
3	Jobs and Prosperity		Х	
4	Improving Health and Well-Being		Х	
5	Environmental Sustainability		Х	
6	Creating Inclusive Communities		Х	
7	Improving the Quality of Council Services and Strengthening local Democracy		Х	
8	Children and Young People		х	

LIST OF BACKGROUND PAPERS RELIED UPON IN THE PREPARATION OF THIS REPORT
None

#### Background:

- 1. The provision of regular performance information is required as part of the corporate performance management framework and the information is used to work towards continuous improvement.
- Within the Health and Social Care Directorate, performance information is produced on a regular basis and the senior management team regularly review performance information to ensure that progress continues. Performance information will be reported to the Cabinet Member for Health and Social Care throughout the year on a quarterly basis.
- 3 Attached is the Directorate's Service Plan monitoring report as at Quarter 2 2009/10.
- In addition each year, each local authority with responsibility for Social Care Services for Adults is awarded by the Care Quality Commission (CQC) a judgement for their adult social care performance. In contrast with previous years, there is no longer a star rating for adult social care. Instead, performance is assessed in relation to the delivery of the seven outcomes as stated in 'Our Health, Our Care, Our Say Dh' 2006 and performance is subsequently aggregated into an overall graded judgement.

Depending on performance, each outcome is graded as follows:

**Performing excellently**: A service that overall delivers well above minimum requirements for people, is highly cost-effective and fully contributes to the achievement of wider outcomes for the community.

**Performing well**: A service that consistently delivers above minimum requirements for people is cost-effective and makes contributions to wider outcomes for the community.

**Performing adequately**: A service that only delivers only minimum requirements for people, but it not consistently cost-effective nor contributes significantly to wider outcomes for the community.

**Performing poorly**: A service that does not deliver minimum requirements fro people, is not cost-effective and makes little or no contribution to wider outcomes for the community

The overall grade awarded to Sefton Council for delivery of outcomes for 2008/09 is "Performing Well". This will be the subject of a separate report to the Cabinet Member and Overview and Scrutiny, Health and Social Care in January 2010.

# Sefton Council SEFTON METROPOLITAN BOROUGH COUNCIL



Sefton's Performance Reporting and Information NeTwork (SPRINT)

## **Departmental Service Plan Monitoring**

**Health and Social Care** 

**Quarter 2 2009/10** 

Author: Performance and Partnerships

Print Date: 16/10/2009

**Lead Officer** Action **Authorising Officer** Deadline Status

COR-HSC-AP-29 To implement issues arising from the JSNA, based on the views of the public as part of the analysis of engagement and consultation.

Charlie Barker

Peter Pattenden

31-Mar-2011

On Target

#### **Progress Summary**

Period **Action Plan Status** % Complete Quarter 2 On Target 50 Quarter 1 On Target 25

#### **Progress**

- 1. The Directorate's 'No Wrong Door' policy will be launched in November 2009. This policy ensures the public that they will be given timely and appropriate advice and receive increased levels of customer care. All staff will be responsible for signposting to appropriate persons/teams and they will ensure that the customer, whether enquiring in person or via the telephone or via other forms of communication. receives the highest level of customer care. Awareness sessions for Managers to take place in November 09, A mystery shopping exercise will take place in December 09 to evaluate the policy's effectiveness and a full review will take place in March 2010. Directorate staff will be encouraged to nominate themselves as a Customer Focus Ambassadors (one per team) to ensure that good practice and customer focus become an essential part of everyone's role.
- 2. The Prevention Strategy will be subject to a formal launch on Oct 20th 2009. A Prevention and Early Intervention Catalogue has been produced with partners from NHS Sefton, Sefton CVS and Sefton-based voluntary agencies. This electronic resource will provide information for service users and their families/carers, advocacy agencies, social work staff and the general public about the various lowlevel prevention services available in the Borough. The Catalogue will be widely available at Council Area Offices, G.P's Surgeries, Libraries, and Health Centres and on the Council Website.

#### Issues affecting current/future progress & corrective actions

**Activities Lead Officer** Comments Deadline Status

In partnership with the 3rd and Independent Sectors, the development of a Sefton-wide Network and Community database/catalogue with details of preventative / early intervention services.

Peter Pattenden 31-Mar-2011

On Target

<u>Activities</u>	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
The development of a 'No Wrong Door' Policy that will ensure all staff take responsibility to direct and signpost callers to the Directorate to appropriate services		Robina Critchley	30-Jun-2009	On Target

Action <u>Authorising Officer</u> <u>Lead Officer</u> <u>Deadline</u> <u>Status</u>

COR-HSC-AP-30 To implement Government guidance in relation to Transforming Social Care, LAC Dh (2008), by planning and implementing a range of personalised services and processes, in partnership with a wide range of local and regional stakeholders.

Charlie Barker Peter Pattenden 31-Mar-2011

On Target

#### **Progress Summary**

PeriodAction Plan Status% CompleteQuarter 2On Target50Quarter 1On Target25

#### **Progress**

Phase Two implementation continues. The launch of the Prevention Strategy (20th October 2009) should go some way to maximise access and information for citizens across the borough. The Department of Health, the ADASS, the Care Quality Commission and the LGA have developed a series of progress measures (milestones) as part of their Putting People First (PPF) Performance Framework. Local Councils must use these milestones to self-assess on their progress, inform business planning and inform investment decisions. These milestones will also enable all stakeholders to judge progress on the local delivery of PPF transformation. The Directorate has created a Milestones Action Plan which includes a progress report to date and a series of actions to October 2010. This plan has been submitted to the North West Joint Improvement Planning Group and shared with other NorthWest Authorities. The Directorate will use the Milestones Plan as a quarterly internal performance management assessment of progress for the Transformation of Social Care.

Action Authorising Officer Lead Officer Deadline Status

COR USC AR 31 Explore closer working errongements with Health to enhance laint.

Charlie Parker. Reb McCannell 31 Mar 2010 On Target.

COR-HSC-AP-31 Explore closer working arrangements with Health to enhance Joint Commissioning.

Charlie Barker Bob McConnell

31-Mar-2010 On Target

**Progress Summary** 

Action Plan Status % Complete

Quarter 2 On Target 50
Quarter 1 On Target 25

**Progress** 

Period

Issues affecting current/future progress & corrective actions

The Health and Social Care Directorate has had input into the Commissioning Strategy in relation to Transforming Community Services. It has been agreed that the opportunity could be taken for the Council to input onto the NHS Sefton Strategic Commissioning Plan when it is refreshed in 2011/12 and that we would work towards a joint NHS Sefton / Adult Social Care Commissioning Intentions Plan in 2011/12.

## Action <u>Authorising Officer</u> <u>Lead Officer</u> <u>Deadline</u> <u>Status</u>

COR-HSC-AP-32 To maintain good performance and review the Supporting People fiveyear Strategy with regard to a needs analysis on a six monthly basis via the North west regional Group and to re-align strategic priorities as necessary. Charlie Barker Bob McConnell 31-N

31-Mar-2010 On Target

#### **Progress Summary**

<u>Period</u>	Action Plan Status	% Complete
Quarter 2	On Target	60
Quarter 1	On Target	40

#### **Progress**

Performance with respect to NI141 and NI142 has been reported via KMIS. A quarter 1 report detailing overall and individual client group performance has been produced for submission to the Supporting People governance group showing that the programme is on course to meet performance targets. Successful submissions have also been made to Communities and Local Government for NI141 and NI142 data.

A quarter 1 outcomes report has also been produced containing outcome achievement rates. This data will also be used to inform any future re-alignment of strategic priorities. The report shows that the overall target of services meeting over 70% of identified needs is being achieved.

The second iteration of the North West Needs Analysis Toolkit has commenced. The revised toolkit was received in September 2009 resulting in the commencement being delayed from August 2009.

The sectoral review desktop analysis has been completed for all three groups and this is being used to inform the next stages of the reviews.

Action	Authorising Officer	Lead Officer	<u>Deadline</u>	<u>Status</u>
DSP-HSC-AP-01 Continue to meet targets set by CSCI and Central Government	Charlie Barker	Peter Pattenden	31-Mar-2010	On Target

DSP-HSC-AP-01 Continue to meet targets set by CSCI and Central Government regarding Implementation of Government Policy 'Transforming Social Care' LAC Dh (2008) and Dh LAC (2009) 1

#### **Progress Summary**

PeriodAction Plan Status% CompleteQuarter 2On Target50Quarter 1On Target25

#### **Progress**

- Second Quarter Performance to be reported on 14th October 2009.
- Implementation of Phase 2 actions continues, Transforming Social Care Steering Group and the Expert Stakeholder Panel continue to meet and scrutinise performance.

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
Monitoring and reviewing of progress in relation to Transforming Social Care.	The TSC process is subject to internal and external scrutiny, progress reports are submitted to relevant Council Committees on a regular basis and Work Stream action plans are progress reported on a quarterly basis.	Peter Pattenden	31-Mar-2010	On Target
The implementation of phase two of the Transforming Social Care Project Plan.	Phase Two proposals to be submitted to SMT for agreement in July 2009.	Peter Pattenden	31-Mar-2010	On Target
To meet local and national targets as set by the CQC and Central Government	First Quarter Targets met. CQC business support manager for the Directorate is satisfied with progress	Peter Pattenden	31-Mar-2010	On Target

Action Authorising Officer Lead Officer Deadline Status

DSP-HSC-AP-02 To ensure that Supporting People funding is a contributory factor in Charlie Barker Bob McConnell 31-Mar-2010 Completed

DSP-HSC-AP-02 To ensure that Supporting People funding is a contributory factor in ensuring that vulnerable parents are supported, thereby minimising the risk of harm to children.

**Progress Summary** 

Period Action Plan Status % Complete

Quarter 1 Completed 100

Activities	<u>Comments</u>	Lead Officer	<u>Deadline</u>	<u>Status</u>
To ensure that within the Quality Assurance Framework, that relevant policies and procedures are up-to-date and effective.		Margaret Milne	31-Mar-2010	Completed
To maintain the independence of teenage and young parents by commissioning housing related support services.		Margaret Milne	31-Mar-2010	Completed

Action Authorising Officer Lead Officer Deadline Status

DSP-HSC-AP-03 To ensure that Assistive Technology promotes recovery.

Charlie Barker Bob McConnell 31-Mar-2010 On Target

DSP-HSC-AP-03 To ensure that Assistive Technology promotes recovery, independence, health and wellbeing as well as the development of personalised care services that promote choice and control for people in need of care and to assist in the delivery of effective and efficient services.

#### **Progress Summary**

PeriodAction Plan Status% CompleteQuarter 2On Target60Quarter 1On Target40

#### **Progress**

As of week commencing 07/09/09, 897 service users are being supported to live independently in their own homes, using Assistive Technology.

We have completed 60% of the installation of hearing impairment units, in partnership with Merseyside Fire & Rescue Service, with a completion date of December 2009.

With the implementation of Supporting People pilot's schemes around domestic violence and medication prompts for service users with mental capacity problems, plus the increase in service users from early discharge programme within the hospitals north and south of the borough, we are confident of achieving our target of 1.195 for 2009/10

Action <u>Authorising Officer</u> <u>Lead Officer</u>

DSP-HSC-AP-04 Via the Supporting People Strategy, to create efficiencies by increasing capacity and commissioning increased floating support subsequent to available funding.

Charlie Barker Bob McConnell 31-Mar-2010 On Target

Deadline

**Status** 

#### **Progress Summary**

Period Action Plan Status % Complete

Quarter 2 On Target 65
Quarter 1 On Target 50

### Progress Issues affecting current/future progress & corrective actions

The second iteration of the North West Needs Analysis Toolkit has commenced. The revised toolkit was received in September 2009 resulting in the commencement being delayed from August 2009.

Further efficiencies have been realised through the transferring and reconfiguration of support services. Work conducted as part of the sectoral reviews will also be used to inform future work on efficiencies and commissioning.

Enhanced value for money exercises have also taken place with providers resulting in efficiencies being identified.

Activities Comments Lead Officer Deadline Status

To explore the gaps in service provision that require Margaret Milne 31-Mar-2010 On Target

To explore the gaps in service provision that require increases in capacity.

Action Authorising Officer Lead Officer Deadline Status

DSP-HSC-AP-05 To ensure the financial sustainability for Housing Related Support Charlie Barker Bob McConnell 31-Mar-2010 On Target

Services via the Supporting People Specific Grant.

#### **Progress Summary**

<u>Period</u> <u>Action Plan Status</u> <u>% Complete</u>

Quarter 2 On Target 40
Quarter 1 On Target 10

#### <u>Progress</u> <u>Issues affecting current/future progress & corrective actions</u>

Performance on NI141, NI142 and outcomes have been reported for quarter 1. A benefits realisation toolkit is also in the process of being analysed which will be used to calculate the financial benefits of the Supporting People programme on a client group basis.

Activities <u>Lead Officer</u> <u>Deadline</u> <u>Status</u>

To evidence the performance and impact housing related support has on the community.

Margaret Milne 31-Oct-2009

On Target

<u>Action</u>			<b>Authorising Officer</b>	<b>Lead Officer</b>	<u>Deadline</u>	<u>Status</u>
DSP-HSC-AP-06 To increase the number of people receiving self-directed support.		Charlie Barker	Robina Critchley	31-Mar-2010	On Target	
Progress Sum	nmary					
<u>Period</u>	Action Plan Status	% Complete				
Quarter 2	On Target	60				
Quarter 1	On Target	40				

#### **Progress**

1.All 78 users in the pilot day centre have been supported to complete a Person Centred Plan [PCP] and a Personal Budget Questionnaire [PBQ]. This information has been analysed and the information from the PCP was found to be more useful. In the first instance it would appear that approximately 58 of the individuals would wish to use their Individual Budget to purchase a service at the day centre. A proposal on the amount of this Individual Budget for this group based on a 3 tiered banding system relating to their levels of need will be complete by October 2009. However a further group of 15 individuals would appear to desire alternative services based on the use of a Direct Payment and the intention is to offer this group Individual Budgets based on a Support Planning model. 2 individuals have already left the day centre and are using the Direct Payment method to secure personalization of their services. The intention is now to offer the same process to the service users in the other 2 large day centres by April 2010 using the learning from the first pilot including dispensing with the PBQ.

2.In August 2009 the Transformation of Social Care Steering Group approved a proposal to park the work done on a points based Resource Allocation System [RAS] based on analysis of this method and bench marking activity with other local authorities. However personalisation has been rolled out across all client groups using the Direct Payment methodology for a total of 592 individuals to have choice and control of their social care services. Analysis is taking place via the Care Management and Support Planning Personalisation Workstream.

- 3. A recent evaluation of the Carers Direct payment scheme found that the recipients benefited from a direct payment, with 88% of carers reporting improved health. 93% reported improved emotional well being. 85% reported it sustained their ability to care. 34% reported it helped them to sustain their social activities.
- 4. Incremental progress continues to be made, as stated in the Performance Report submitted to Elected Members on 14th October 2009. A review of Direct Payment Brokerage Services has taken place, full analysis report to be submitted to the Senior Management Team on 28th October 2009.
- 5. The pilot was successfully reviewed by the University of Chester with positive results.

Because of current financial restrictions on the NHS and individual budgets a local voluntary organisation, Imagine, was used as broker. The target group of the pilot was users of the Early Intervention in Psychosis team, a service jointly

#### Progress

#### Issues affecting current/future progress & corrective actions

resourced by health and social care.

Thirty one Sefton service users of the Mersey Care Early Intervention in Psychosis utilised the service and 30 went on to receive an individual budget at an average cost of £545,50 per person.

The following service user testimony is typical of the many accounts quoted in the review, "I would like to thank you for coming to see me and giving me the opportunity to tell my story and to thank the people from Imagine and the Early Intervention team for the recovery budget ........ without them I wouldn't be where I in my life".

Activities Direct Payments for Carers Pilot to be concluded in	Comments  Carers Panel continues. Financial resources agreed and	<u>Lead Officer</u> Robina Critchley	<u>Deadline</u> 30-Apr-2009	Status On Target
March 09 with full evaluation that will explore a full rollout 2009/10.	allocated.	Robina Ontonicy	00-Αρι-2000	On Target
Individual Budget pilots (approx. 35) to be rolled out across all client groups with regular analysis of arrangements.		Derek Jones	30-Jun-2009	On Target
To implement a review of the Mental Health Recovery Budget Pilot.		Barry Robinson	31-Dec-2009	On Target
To increase the number of recipients of Direct Payments by 10% in 09/10.	Incremental progress throughout the year with regular review by SMT.	Robina Critchley	31-Mar-2010	On Target
Users of one LD day centre to be offered Individual Budgets as an alternative to the service they currently receive.		Derek Jones	31-May-2009	On Target

## Action <u>Authorising Officer</u> <u>Lead Officer</u>

DSP-HSC-AP-07 To monitor and evaluate the work of the newly created 'Joint Executive Group' (NHS Sefton /Health and Social Care / Children's Services / Public Health).

Charlie Barker Bob McConnell

cConnell 31-Mar-2010

Deadline

Status
On Target

#### **Progress Summary**

<u>Period</u> <u>Action Plan Status</u> <u>% Complete</u>

Quarter 2 On Target 50
Quarter 1 On Target 25

#### **Progress**

Sefton's Transforming Social Care agenda's success is dependent on a number of external factors. World recession continues to have an adverse impact on business and the forthcoming Government Green Paper on Adult Social Funding is expected to announce considerable challenges for local authorities. Sefton Council's Strategic Budget Review will also review the form and function of a future Council and, as such, might have an influence upon the TSC agenda.

The Joint Executive Group have met on two occasions and plans are to meet once per month.

The Council, through the Health and Social Care Directorate has had input into the Commissioning Strategy in relation to Transforming Community Services (Health initiative). Also agreed at the meetings that the opportunity will be taken to explore the potential for the Council to input into the NHS Sefton Strategic Commissioning Plan when it is refreshed in 2011/12 and that we would work towards a joint NHS Sefton / Sefton Adult Social Care 2011.12 Commissioning Intentions Plan.

NHS Sefton are now accommodated in Merton House and this is already facilitating closer working relationships which will support shared initiatives.

Activities	Comments	<b>Lead Officer</b>	<u>Deadline</u>	<u>Status</u>
To further plan the operational delivery for integration and joint commissioning.		Bob McConnell	31-Mar-2010	On Target
To perform a systematic review of current joint arrangements.		Bob McConnell	31-Mar-2010	On Target

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
To strengthen partnership working between the Council and NHS Sefton		Bob McConnell	31-Mar-2010	On Target

## Action Authorising Officer Lead Officer Deadline Status DSP-HSC-AP-08 To ensure that Safeguarding Adults is embedded across all Charlie Barker Robina Critchley 30-Sep-2009 On Target

DSP-HSC-AP-08 To ensure that Safeguarding Adults is embedded across all appropriate organisations, Directorates within the Council and commissioned services.

#### **Progress Summary**

PeriodAction Plan Status% CompleteQuarter 2On Target60Quarter 1On Target25

#### **Progress**

- The second quarter briefing has been presented to the cabinet member on 14th October 2009; this will contain training and referral activity. The Cabinet Member will also receive an update on the Dignity in Care action plan.
- •A revised Safeguarding policy and procedure was presented to the senior management team in Health and Social Care and agreed by the Safeguarding Executive board in August 2009.

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
The Chair of the Safeguarding Executive Board to brief all Elected Members on Safeguarding issues	First quarter briefing to be presented to the Cabinet Member on 22nd July which will contain training activity, alerter and investigator details.	Robina Critchley	30-Apr-2009	On Target
To ensure that safeguarding requirements for commissioned services are reviewed.	The Contracts and Commissioning Team to review commissioned services as prescribed by the Care Quality Commission.	Robina Critchley	30-Sep-2009	On Target
To refresh the safeguarding training strategy.	Annual plan in place which will be reviewed in November 2009.	Robina Critchley	30-Apr-2009	On Target
To strengthen the membership of the Safeguarding Executive Board	The Domiciliary and Nursing home sector and CPS have now joined the Board.	Robina Critchley	30-Apr-2009	On Target

Action Authorising Officer Lead Officer Deadline Status

DSP-HSC-AP-09 To develop and implement a 'No Wrong Door' policy with regard to Charlie Barker Robina Critchley 30-Jun-2009 On Target

#### **Progress Summary**

access to services.

PeriodAction Plan Status% CompleteQuarter 2On Target70Quarter 1On Target25

#### **Progress**

The Directorate's 'No Wrong Door' policy will be launched in October 2009. This policy will ensure that the public are given timely and appropriate advice and receive increased levels of customer care. All staff will be responsible for signposting to appropriate persons/teams and they will ensure that the customer, whether enquiring in person or via the telephone or via other forms of communication, receives the highest level of customer care.

The Policy will be visible on both the Council's Internet and Intranet websites. Awareness sessions for team managers will take place in November 2009 and information regarding staff responsibilities to be cascaded to all Directorate staff. A 'mystery shopping' exercise will take place in December 2009, with a full review of the policy taking place in March 2010.

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
To ensure that all staff comply with procedures regarding access and information and to work with partners in developing accessible and clear access systems.	The Policy will be launched across the Directorate and information will be widely available on the Intranet and the Internet.	Robina Critchley	30-Jun-2009	On Target
To review and update web-based information services to ensure equality of access.	The 'No Wrong Door' policy is due for implementation in August 2009. Staff have been engaged and consulted via workshops and have been involved in the design of the policy.	Robina Critchley	30-Jun-2009	On Target
To review current information and access issues to ensure that the public and hard to reach groups have accessible information and equitable access to Directorate services.	Development of 'Find my Nearest' on-going. NHS Sefton continue to populate health-based information. The Prevention Strategy will add further information regarding early intervention services in the borough.	Robina Critchley	30-Jun-2009	On Target

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>

Action Authorising Officer Lead Officer Deadline Status

DSP-HSC-AP-10 To reduce the Sickness Absence figure towards the Corporate Target Charlie Barker Bob McConnell 31-Mar-2010 On Target

#### **Progress Summary**

PeriodAction Plan Status% CompleteQuarter 2On Target50Quarter 1On Target40

#### **Progress**

of 4%.

Issues affecting current/future progress & corrective actions

Sickness absence rate in Q1 was 5.1% reduction of 1.8% from the corresponding quarter 2008/09.

Suggested amendments are with the Occupational Health Manager for consideration. An outcome of the group was to examine and make recommendations as to the recording of reasons for absence in order to improve the quality of management information.

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
A new group consisting of Principal Managers and reps from Occupational Health and H.R to seek to address sickness absence in the Directorate.	Group has been formed and have made suggestions to amend the sickness absence policy. Meeting to held with Health & Safety advisor to progress.	Martin Murphy	31-Mar-2010	On Target
Identify teams and individuals consistently above Directorate target.	Teams identified, briefing made to SMT.	Martin Murphy	30-Sep-2009	On Target
To audit levels of short-term sickness.	Sickness levels have been audited managers contacted where appropriate to check if back to work meetings have taken place, and also review meetings have been held when trigger points have been reached.	Martin Murphy	30-Apr-2009	On Target

<u>Action</u>	<b>Authorising Officer</b>	Lead Officer	<u>Deadline</u>	<u>Status</u>	
DSP-HSC-AP-11 To support the Council in the achievement of Level 5 of the Equality	Charlie Barker	Bob McConnell	31-Mar-2010	On Target	

#### **Progress Summary**

PeriodAction Plan Status% CompleteQuarter 2On Target80Quarter 1On Target70

#### **Progress**

Standard.

Training is now mandatory for all Council, contracted provider staff and staff in the third sector. The Directorate has attained 95% of the Level 4 of the Local Government Equality Standard and the Directorate is now assisting the Council to work towards Level 3 of the new Equality Standard.

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
Complete Equality Impact Assessments in relation to Supporting People, Learning & Development and the Learning Disability Partnership Board.		Martin Murphy	31-Mar-2010	On Target
The development of action plans for the Welfare Rights Team, The Homelessness Team & Care emanating from the recent Service Monitoring Exercise based on the six pillars of Equality.		Martin Murphy	31-Aug-2009	On Target
To seek to increase the number of disabled staff working for the Directorate.		Martin Murphy	31-Mar-2010	On Target

Action DSP-HSC-AP	P-12 The Implementation	on of the National Pay and Grading Review.	Authorising Officer Charlie Barker	<u>Lead Officer</u> Bob McConnell	<u>Deadline</u> 31-Mar-2010	Status On Target
Progress Sum	ımar <u>y</u>					
<u>Period</u>	Action Plan Status	% Complete				
Quarter 2	On Target	50				
Quarter 1	On Target	25				
Progress  Negotiations are proceeding with Trades Unions regarding Pay Model and			Issues affecting current/future This timescale is likely to slip to	<del>-</del>	ve actions	
Implementation	Date.					
<u>Activities</u>		<u>Comments</u>		Lead Officer	<u>Deadline</u>	<u>Status</u>
To support the grading review.	Corporate implementation	on of the pay and		Martin Murphy	31-Mar-2010	On Target

Action Authorising Officer Lead Officer Deadline Status

DSP-HSC-AP-13 To support the implementation of the Independent Safeguarding Charlie Barker Bob McConnell 31-Oct-2009 On Target

#### **Progress Summary**

Period Action Plan Status % Complete

Quarter 2 On Target 50

Quarter 1 On Target 25

#### **Progress**

Safeguarding.

Authority.

The first phase of the Vetting and Barring Scheme was introduced on 12th October 2009, placing a duty on local authorities to refer to ISA information about individuals working with vulnerable adults where they consider them to have caused harm or pose a risk of harm.

New employees or those changing jobs in regulated activities do not need to start applying for ISA registration until July 2010 and does not become a mandatory requirement prior to November 2010. All other staff will be phased into the scheme from 2011.

The Directorate will continue to ensure that all key personnel remain appraised of the stages of introduction and the process of information sharing in tandem with production of a relevant disciplinary protocol.

#### Issues affecting current/future progress & corrective actions

ActivitiesCommentsLead OfficerDeadlineStatusTo publicise and fully implement actions related toMartin Murphy31-Oct-2009On Target

<u>Action</u>	<b>Authorising Officer</b>	Lead Officer	<u>Deadline</u>	<u>Status</u>
DSP-HSC-AP-14 To produce a Health and Social Care Workforce Strategy in line with	Charlie Barker	Bob McConnell	31-Mar-2010	On Target
the National Strategy.				

#### **Progress Summary**

<u>Period</u>	Action Plan Status	% Complet
Quarter 2	On Target	80
Quarter 1	On Target	50
Quarter 1	On Target	50

#### <u>Progress</u>

Workforce Strategy updated in line with National Strategy. We will be working with Finance and Commissioning colleagues to produce In LAWS strategy (Integrated Local Area Workforce Strategy) in conjunction with Skills for Care in early 2010.

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
To develop shared workforce planning arrangement with NHS Sefton.		Martin Murphy	31-Mar-2010	On Target
To prepare for and implement Investors in People accreditation.		Martin Murphy	31-Oct-2009	On Target
To produce a local workforce strategy, once a national strategy is available.		Martin Murphy	30-Jun-2009	On Target

DSP-HSC-AP-15 To increase the number of people with Learning Disabilities who are in paid work.

Charlie Barker

Robina Critchley

31-Mar-2010

On Target

#### **Progress Summary**

PeriodAction Plan Status% CompleteQuarter 2On Target60Quarter 1On Target50

#### **Progress**

The Government Strategy Valuing Employment now has been published and we have checked that our work is compliant to the policy. Dialogue is ongoing with the Council Personnel Services in respect of a Council, Directorate and Contracted provider policy that ensures people with Learning Disabilities are employed within the organisations. Meetings are continuing with Planning and Economic Regeneration through Sefton@Work where efforts are being made to utilise external funds to develop employment opportunities for people with Learning Disabilities. Recording systems are now in place to ensure accurate employment information in respect of people with learning disabilities whose care provision have been assessed or reviewed during the year.

'Achieving People,' the commissioned service in the third sector for people who want to try voluntary or paid work, now has 17 people registered who want to work and a further 8 who are waiting to be registered.

Activities	<u>Comments</u>	Lead Officer	<u>Deadline</u>	<u>Status</u>
To commission a service that supports people with learning disabilities into work with an emphasis on paid work of 16 hours or more, including intense 1to1 support.		Derek Jones	31-Mar-2010	On Target
To commission a service to provide support to people with learning disabilities who wish to try paid or voluntary work including people with complex needs.		Derek Jones	31-Mar-2010	On Target

Activities	<u>Comments</u>	<u>Lead Officer</u>	<u>Deadline</u>	<u>Status</u>
To develop a Directorate and Council strategy regarding employing people with a learning disability within its own workforce and those the Council commissions.		Derek Jones	31-Mar-2010	On Target

<u>Action</u>				<b>Authorising Officer</b>	<b>Lead Officer</b>	<u>Deadline</u>	<u>Status</u>
become a pilo			Γ) has been successful in a bid to ogramme', which will test out new	Charlie Barker	Robina Critchley	31-Mar-2010	On Target
Progress Sum	<u>mary</u>						
<u>Period</u>	Action Plan Status	% Complete					
Quarter 2	On Target	50					
Quarter 1	On Target	25					

#### **Progress**

Latest data shows us that Sefton has not achieved its monthly milestone for numbers in Effective Treatment. This has been attributed to a number of factors. Engagement rates (12 week retention or planned discharge prior to 12 weeks) for this period are excellent and are above target at 87%. This suggests the problem lies in the number of individuals accessing treatment in the first instance. The main factor affecting access that relates to this period is the rise in recreational Cocaine users who are identified by Criminal Justice services (CJS) who are not referred into treatment and the decrease in the number of Opiate users being identified by CJS who then enter traditional drug treatment services. Another factor to consider is trend analysis showing numbers entering treatment in Sefton over the previous 4 years is historically lower in the first half of the year and then tends to climb throughout the year.

Planned exits in Sefton for All Drug Users were excellent in Q1; Sefton had the highest planned discharge rate in the NorthWest and the lay 6th in the National League table of planned discharges. Full Quarter 2 data for planned exits will not be available until early November, however latest data up and to including August demonstrates that planned exits for all adults has increased from 60% to 63%.

At present our Community Drugs Teams are 'front of house'. In future drug users wishing to enter treatment services will do so via our Single Point of Assessment (SPA). Staffed by the Health and Social Care Directorate of Sefton Council the SPA will undertake an independent comprehensive assessment of all entrants to services that will take into account not just their treatment needs but also housing, job and parental status, children's needs etc. Our primary goal is to raise the aspirations of everybody involved with the treatment system, commissioners, workers and service users alike.

The SPA will also assist in the improvement of NDTMS and TOPS compliance.

We recognise that some individuals will walk into the CDT's straight off the street. These individuals will receive an immediate triage assessment and an appointment will be made to attend the SPA within 24 hours.

<u>Activities</u>	Comments	<b>Lead Officer</b>	<u>Deadline</u>	<u>Status</u>
To improve commissioning arrangements.		John Hill	31-Mar-2010	On Target

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
To improve operational and performance management processes.		John Hill	31-Mar-2010	On Target
To improve outcomes for service users.	All of our efforts to achieve improved outcomes for service users & their families are focused upon the design & implementation of Sefton's drug system change pilot. Through the pilot we seek to deliver improved outcomes for drug users in relation to the four key domains of, reduction in dependent use, risky behaviour, criminality and improved health & social functioning.  Sefton's Drug System Change Pilot Project Plan has been submitted in draft form to the National Pilot Management Board. Feed back is awaited. The plan consists of 18 different work streams which taken together will result in radical & significant change in the way drug treatment & support services are delivered in Sefton. Key themes include; Personalisation, workforce development, better end to end management of service users, increased opportunities for abstinence, & recovery, additional support to promote social re-integration via education, training and employment.	John Hill	31-Mar-2010	On Target

<u>Action</u>			<b>Authorising Officer</b>	Lead Officer	<u>Deadline</u>	<u>Status</u>
DSP-HSC-AP-17 To reconfigure the Sensory and Community Occupational Therapy services to enable a more efficient and effective service.			Charlie Barker	Bob McConnell	31-Mar-2010	On Target
Progress Sur	mmary					
<u>Period</u>	Action Plan Status	% Complete				
Quarter 2	On Target	70				
Quarter 1	On Target	50				

#### **Progress**

Sefton Council Business Transformation team have spent three months reviewing the reconfiguration of the service and have concluded that the service is now working to maximum efficiency.

As of 08.10.09 referrals for the OT and sensory service are being directed straight to OT admin from Sefton Plus reducing the previous historical process of going through SCAT then to OT. This aims to ensure a no wrong door approach and more timely and responsive service by the OT and sensory team who now evidence the largest in-tray for the HSC directorate.

As part of the OT review undertaken with NHS Sefton last year, the OT and Sensory department continue to deliver on the implementation plan for a more integrated service with NHS Sefton. Quarterly joint forums are now delivered and as a result of this work a shared Equality Impact Assessment for OT and sensory services is being delivered and joint competencies / workforce planning to ensure consistency and avoid duplication in future service provision. NHS Sefton is on target to implement the Single Assessment Process across Sefton CHS in November this will enable more effective service provision, reduce gaps and duplication within the system.

Referrals for re-enablement OT service have been absorbed into the main OT team whereas historically this was delivered in isolation in the North and commissioned from the acute service in the South. This has resulted in a more streamlined service delivery whilst maximising the skills within the base team.

The OT and Sensory team are all now located within one central base. This has resulted in increased communication, productivity and efficiency.

Specialist contracts commissioned to support the sensory team are now being reviewed and a robust contract monitoring process in now in place to ensure outcomes are delivered and efficiencies realised.

October 09 saw the introduction and implementation of the physically disabled and Sensory Impaired Database (PDSI). This is currently being delivered through the OT and Sensory team and will inform future service provision across Sefton.

#### Issues affecting current/future progress & corrective actions

<u>Activities</u> <u>Comments</u> <u>Lead Officer</u> <u>Deadline</u> <u>Status</u>

Activities	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
To explore, with NHS Sefton, the use of a self-assessment tool.	A business case has been presented to the Joint Management Board for CES, NHS commissioners and HSC transformation team detailing the rationale for developing this service. Currently small aids/aids for daily living are provided either through the community equipment service or the small aid retail service provided by Anchor Staying Put. Within Sefton there currently is no opportunity for clients / patients to self assess their own needs in relation to community equipment.  With the implementation of ADL Smartassist we would provide our client / patients with a self-assessment tool that would provide an effective way of significantly improving our service meeting the needs of both funded and self funding clients. The software enables clients / patients to undertake a self assessment via the database for a simple assessment normally undertaken by a practitioner therefore giving the practitioner more time and capacity to deal with complex cases.  Benefits through implementation would include;  Highly cost efficient way of completing assessments for low-level equipment – small aids.  Overall productivity gains for practitioner services.  Overall speed of assessment improved.  Provides fully documented audit trails and secure client data.  Potential for daily living service based upon the client purchasing equipment as opposed to the existing donation/loan system.  Whilst internally this has been researched and recommended through formal channels, further progress cannot be made at service delivery level without the support investment from NHS Sefton / Sefton HSC.	Margaret Milne	31-Mar-2010	On Target

<u>Activities</u>	Comments	Lead Officer	<u>Deadline</u>	<u>Status</u>
o improve access to services by further developing of a nobile clinic and 'drop-in' clinic.	The mobile clinic is now viewed as integrated and fundamental part of service delivery providing an efficient, responsive, person-centered OT service. The service continues to deliver up to 80 assessments per week and has a dedicated team of staff to support the service delivery. SMT are now in receipt of a briefing paper recommending this service is implemented on a permanent basis.	Margaret Milne	31-Mar-2010	Completed
	The drop in clinic is now available every Monday and is delivered within the CES. Twenty-six assessments have been completed for service users from April 09 (no clinics were delivered on the 4 bank holidays during this period). We continue to promote / market this new innovative service; in June 2009 this was short listed for the national NAEP conference and his stimulated national interest in our service delivery approach.			
	Customer satisfaction is now integral to the review process and this demonstrates that clients are extremely satisfied with service delivery, this is also utilised to inform service review / changes. Customer satisfaction now also evidences our commitment to improve quality and client experience throughout the OT and sensory service. Within the mobile clinic service, emphasis is continually on client choice and personalised services.			
	This needs led service has transformed service delivery enabling identification of the most appropriate solution to overcome any functional disability, enabling clients to live safely and independently within their home environment. This service continues to realise effective time management – releasing capacity within the area OT team to focus on complex cases and utilise their expert skills effectively supported by a dedicated administration team for the whole OT service. The implementation of a dedicated admin team has enabled the service to deliver assessments on an appointment basis ensuring that supply and demand are maximised to full potential whilst ensuring SMARTER working and realising cost efficiencies within the department.			