

AGENDA MANAGEMENT SHEET

Name of Committee **Adult & Community Overview & Scrutiny Committee**

Date of Committee **12 July 2006**

Report Title **Adult Social Care Performance Report**

Summary This report highlights key messages from the 2006 Delivery and Improvement Statement and provides Members with progress on the 2005/06 Performance Improvement Plan.

For further information please contact:

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Would the recommended decision be contrary to the Budget and Policy Framework? [please identify relevant plan/budget provision] No

Background papers None

CONSULTATION ALREADY UNDERTAKEN:- Details to be specified

- Other Committees
- Local Member(s)
- Other Elected Members Cllr McCarney, Cllr Compton, Cllr Dodd
- Cabinet Member Cllr Colin Hayfield, Adult and Community Services
- Chief Executive
- Legal Alison Hallworth, Adult & Community Team Leader, Corporate Legal Services
- Finance Philip Lumley Holmes, Financial Services Manager

Other Chief Officers

District Councils

Health Authority

Police

Other Bodies/Individuals

FINAL DECISION Yes

SUGGESTED NEXT STEPS:

Details to be specified

Further consideration by
this Committee

To Council

To Cabinet

To an O & S Committee

To an Area Committee

Further Consultation

**Adult & Community Overview & Scrutiny Committee
12 July 2006**

Adult Social Care Performance Report

**Report of the Strategic Director,
Adult, Health & Community Services**

Recommendation

To note and endorse key priorities outlined in the 2005/06 Delivery and Improvement Statement and progress made since the 2004/05 CSCI Judgement

1. Background to the Performance Assessment Process 2005/06

- 1.1 The Delivery and Improvement Statement (DIS) is part of a wider performance assessment process for Adult Social Care that forms a part of the annual Commission for Social Care Inspection's (CSCI) judgement.
- 1.2 With the separation of the children's services annual performance assessment process from the performance assessment of adult services, a revised timetable for the adult's performance assessment is shown below:

31 January 2006	Operating Policy Adult Social Care published Adult Performance Indicators, Bandings and Key Thresholds updated and published
20 February 2006	DIS consultation report published
20 February 2006	DIS Guidance published
31 March 2006	DIS Return disseminated to Councils
31 May 2006	DIS completed and submitted
By end of September 2006	Annual Review Meetings completed
By mid October 2006	Performance ratings notified to councils
Early November 2006	Representation process
30 November 2006	Performance ratings published

2. Structure of Delivery and Improvement Statement 2005/06

- 2.1 As part of the Commission for Social Care Inspection's transition to an outcome based approach to performance assessment, the DIS analysis will be mapped against the outcomes signalled in the White Paper. "Our Health, our care, our say" (DH, January 2006).
- 2.2 Consequently the standards and criteria have been recalibrated so councils can demonstrate:
- Service users and carers are integral to the design, delivery and evaluation of services
 - Data on economy, efficiency and effectiveness including value for money underpins the commissioning and delivery of services

The outputs from the DIS are:

- An individual profile of achievements in the past year (April 2005 to March 2006) and the strategic plan for commissioning and service delivery for the year ahead (April 2006 to March 2007)
 - National and regional level analysis of performance against objectives and targets
 - Analysis tools that will assist councils and CSCI to examine commissioning and service delivery performance
 - A set of priorities that inform the Annual Review Meeting and on going performance dialogue between the Strategic Director and Business Relationship Manager
- 2.4 The Strategic Director is required to report the content of the DIS to an open session of the council members within two months of the return on 31 May 2006 so that:
- The data can be shared with and used by the public or other councils
 - Through the reporting Directors make a public statement about the validity and reliability of the data which is the public domain
- 2.5 Whilst there will be no autumn data set collection in 2006/07, the DH will want to monitor the progress being made in the delivery of the PSA target that it has with the Treasury on older people supported at home as part of the 2004 comprehensive spending review.

3. Key Priorities Outlined in the 2005/06 Delivery and Improvement Statement

- 3.1 Within the DIS, the Strategic Director summarises the improvement outlook and challenges faced within adult social care for the year ahead, including the main elements of strategy, risks and contingencies.
- 3.2 A strategic direction is being developed and an action plan will set out all development areas. Key areas to be addressed are:
- The development of leadership throughout the organisation
 - Improving the focus on customers
 - Strengthening commissioning
 - Improving performance and developing a performance management culture
 - Injecting enthusiasm, ambition and pace
- 3.3 Support is being sought from the DH for additional capacity to supplement the Council's investment to increase the pace of change as the greatest risk to the Directorate's approach is lack of management capacity.
- 3.4 The Supporting People programme will receive corporate support and key gaps in areas, such as needs and gap analysis, will be closed. Members from County, District and Borough will agree priorities to ensure commissioning activity is focused. An initiative to develop a performance management culture is being undertaken with the Audit Commission.
- 3.5 A new approach to joint commissioning is being developed with the PCT and with corporate support. A joint post will be established at Director/Head of Service level between the PCT and the Council to manage joint commissioning processes for adults across the PCT and County Council. Joint commissioning strategies are being developed with the PCT and new governance arrangements, involving Members, are being put in place.
- 3.6 Management capacity is being enhanced and a new Strategic Management Team is being recruited. A management restructure will be undertaken to ensure the organisation is able to deliver the requirements of the White Paper

In respect of Performance Assessment Framework (PAF) Indicators, Appendix 1 outlines 2005/06 outturn against the plan and provides information about the 2006/07 targets set.

4. Progress Made Since the 2004/05 CSCI Judgement

- 4.1 The 2004/05 CSCI judgement of adult service performance, produced in September 2005 was that Adult Social Care Services were serving some people well but have "uncertain prospects" for improvement and were "coasting". This came on the back of three consecutive years where the judgement had been "serving some people well with promising prospects".

4.2 The reason for the fall from promising to uncertain was that:

There is no firm trajectory for improvement

There is a decline in position relative to other councils

There had been limited progress in PAF indicators and in some, a decline in position

There had been limited progress in modernising services and structures in line with the Green Paper

There is underdeveloped partnership working to deliver an improved range and quality of services and better outcomes

4.3 This drop in performance in absolute and relative terms has major implications in terms level and quality of services and value for money, as well as an impact on the overall rating of social services and the Council as a whole. Consequently various reports have been prepared for Members describing the challenges that must be addressed and a Performance Improvement Plan agreed by the Adult Management Team to bring about the continuous improvement required. The Strategic Director and the Interim Head of Adult Services have taken the implementation of the Performance Improvement Plan forward and a progress report is given in Appendix 2.

GRAEME BETT

Strategic Director Adult, Health and Community Services

Shire Hall
Warwick

June 2006

Adult Services Performance Trends

Appendix 1

Indicator	Desired	2002/03	2003/04	2004/05	2004/05	2005/06	2005/06	2005/06	2006/07	2006/07
	Direction	Outturn	Outturn	Outturn	Banding	Plan	Outturn	Banding	Plan	Planned banding
A60 Participation in drug treatment (interface)	↑			15%	●●	13	15.8	●●	10	●●
B11 Intensive homecare as % of intensive home and residential care	↑	16	24	22	●●●●	25	25	●●●●	28	●●●●
B12 cost of intensive social care for adults and older people	↓		465	517	●●	526	542	Not available	568	Not available
B17 Unit cost of home care for adults and older people	↓	13.8	14	13.6	●●●●	14.50	13.30		13.30	
C26 Admissions of supported residents aged 65+ to residential/nursing care (old definition)	↓	87	76	79	●●●●	79	69	not applicable	N/A	not applicable
C72 Older People aged 65+ admitted on permanent basis in year to residential or nursing care (new definition)	↓				not applicable		73	●●●●	71	●●●●
C27 Admissions of supported residents aged 18-64 to residential/nursing care (old definition)	↓	2.0	0.9	1.2	●●●	1.0	0.8	not applicable	not applicable	not applicable
C73 Admissions of supported residents aged 18 to 64 to residential/nursing care (new definition)	↓				not applicable		1	●●●●	1	●●●●
C28 Intensive home care	↑	5.5	8.4	7.2	●●	8.5	8.1	●●●	9.5	●●●
C29 Adults with physical difficulties helped to live at home	↑	2.7	2.5	2.8	●●	3.0	3.0	●●	3.1	●●
C30 Adults with learning disabilities helped to live at home	↑	2.3	2.3	2.3	●●●	2.34	2.10	●●●	2.34	●●●
C31 Adults with mental health problems helped to live at home	↑	2.9	2.0	5.7	●●●●	5.7	5.65	●●●●	5.7	●●●●
C32 Older people helped to live at home	↑	75	76	60	●●	65	58	●●	74	●●
C51 Direct payments	↑	26	30	45	●●●	64	62	●●●	121	●●●●
C62 Services For Carers	↑			3.6	not banded	4	7.1	●●●	10	●●●●
D37 Availability of single rooms	↑	88	88	88	●●●	88	95	●●●●	98	●●●●
D39 % of people receiving a statement of their needs and how they will be met	↑	92	95	92	●●●	96	96	●●●●	97	●●●●
D40 Clients receiving a review	↑		72	61	●●●	65	79.7	●●●	82	●●●
D41 Delayed transfers of care	↓	68	49	51	●●●					
D54 % of items of equipment and adaptations delivered within 7 working days (D38 in earlier years)	↑		78	83	●●●●	84	85	●●●●	87	●●●●

Indicator	Desired	2002/03	2003/04	2004/05	2004/05	2005/06	2005/06	2005/06	2006/07	2006/07
	Direction	Outturn	Outturn	Outturn	Banding	Plan	Outturn	Banding	Plan	Planned banding
D55 Acceptable waiting times for assessments (old definition)	↑		83	79	●●●●	not applicable	not applicable	not applicable	not applicable	not applicable
D55 Acceptable waiting times for assessments (new definition)	↑						82.1	●●●●	87	●●●●
D56 Acceptable waiting times for care packages	↑		94	87	●●●●●	89	86	●●●●	88	●●●●
E47 Ethnicity of older people receiving an assessment		1.3	1.79	1.58	●●●	1.6	1.58	●●●	1.6	●●●
E48 Ethnicity of older people receiving services following an assessment				0.98	●●●	1	1.14	●●	1	●●●
E50 Assessment of adults and older people leading to service provision			39	48	Not banded	50	61	Not banded	61	Not available

**ADULT SOCIAL CARE
PERFORMANCE IMPROVEMENT ACTION PLAN
Progress Report March 2006 (Updated 8 May 2006)**

The schedule below sets out the understandings surrounding essential action to be driven forward by the Management Team to secure real performance improvement. Team responsibility and recognition for performance gains and delivery of improved service is integral to delivery in many cases. For each action area, however, there is a designated lead* manager who is responsible and accountable for ensuring delivery of the required action by the delivery date [s]. Performance delivery will be managed by DMT. All modifications are subject to DMT approval.

Action Area	Progress	Lead* Officer	Delivery By
<p>1. Completion of the PAF data validation using Audit Commission Tool.</p>	<p>Part 1, high level risk self assessment, completed. Module A (management arrangements) scored as a medium risk, whilst the data error checks in module B indicated a high risk. This culminated in a combined rating of medium risk. Work has commenced in Part 2 of the audit with more detailed analysis relating to individual statutory returns. Progress meeting with CSCI and Audit Commission held 9 February and arrangements for Audit Commission Inspector support agreed.</p> <p><i>The Adult Commissioning unit is working in partnership with Sarah Adams from the Audit Commission to complete the review of the data testing and management arrangements sections of the Audit. Interviews have taken place with Commissioning, Finance, Information strategy and senior management to obtain the relevant information to triangulate the evidence base</i></p>	<p>Kim Harlock* Jon Reading</p>	<p>31.3.2006</p>
<p>2. Review of all current contracts with voluntary sector organisations to assess extent to which people receiving services and support under these agency arrangements can be included in performance data.</p>	<p>Commissioning panels, for all client groups, have taken place to stock take current position and adopt a more consistent strategic commissioning approach for the future. Detailed action plan drafted for Directorate approval 30 March 2006. Exemptions have been submitted for 2006/07 to legal services for approval. Work on number of strategic reviews commenced and others being scoped.</p> <p><i>The review of the voluntary sector is progressing against a prioritised action plan that has been agreed with SMT. A number of strategic reviews are underway including one focusing on low level intensity services and this work is making strategic connections with the development of the low level intensive service and the Promoting Healthy Independence - Low Level Integrated Support Service Partnerships for Older People's Project Round 2 Bid</i></p>	<p>Kim Harlock*</p>	<p>30.10.2006</p>

Action Area	Progress	Lead* Officer	Delivery By
<p>3. Revise, consult on, finalise and implement updated and fully compliant Fairer Charging policy and practice.</p>	<p>Project plan being developed with aim to implement by 1/10/06 Michael to complete further details and amend delivery timescale column accordingly</p> <p><i>Project Plan drafted. Aim to implement by 1 October 2006. Consultation papers being drafted (May – July). Systems checks being made Response back to Scrutiny (Sept) – prior to Cabinet</i></p>	<p>Michael Hake</p> <p><i>Chris Renshaw Les Hamp</i></p>	<p>Implement 1.6.06 Consultation Aim to undertake by 31.3.06.</p> <p><i>Implement Oct 2006</i></p>
<p>4. Revise, consult on, finalise and implement Fair Access criteria to create low intensity support threshold for social care and allied support services for inclusion in the 2006/07 Long Term Care Charter. [Note: there are links to Telecare, Supporting People & Modernisation Action]</p>	<p>Cabinet approved proposal 23 Feb 2006 to change FACs criteria to develop a co-ordinated low intensity support service (A Bit of Help). £500K allocated in 2006/07 budget Project team to be established March 2006 to drive development, to be monitored by O&S.</p> <p><i>Project team established June 2006 to drive development. Monitored by O&S – report 17 May 2006. Project Plan is being developed</i></p>	<p>Michael Hake* Kim Harlock Rosie James</p> <p><i>Michael Hake Elizabeth Ross Kate Woolley</i></p>	<p>Proposal Feb. 2006 Implement from 1.4.06. LTC 1.6.06</p> <p><i>Implem. – 20.06.06 LTC 2006/07</i></p>
<p>5. Improve PAF indicators and sustain good performance, where in place, and deliver specific improvement targets.</p>	<p>Significant work has been undertaken within the Adult Commissioning Unit, in partnership with operational colleagues to ensure optimum performance reporting, in line with DH definitions. Good progress has been made in relation to several indicators (see below) and further work is scheduled to impact prior to end of year returns are completed. Helen Bailey is leading on the appointment of a temporary data quality officer to improve recording and strategic links are being strengthened between Information Strategy and the Data Quality Audit.</p> <p><i>Three part time secondments have been put in place to undertake the Data Quality Officer role, which has enabled significant clean up of data to be made across all client groups. The Adult Commissioning Unit, in partnership with operational teams have been proactively working to ensure that end of year performance outturn is optimised. Meetings have been convened between Adult Commissioning Unit and operational teams to review the first performance monitoring of 2006/07; ensuring sustainability of robust management information</i></p>	<p>Kim Harlock*</p>	<p>See below-evidence of improve. available by 31.3.06.</p>

Action Area	Progress	Lead* Officer	Delivery By
<p>C28 - Intensive Home Care [BVPI/KT]</p>	<p>An outturn of 8.1 has been achieved for 2005/06, moving us from band 2 to band 3. <i>(Hence, 1st target achieved)</i></p> <p>Further work is underway to review service users who receive between 8.5 and 10 hours per week home care to check whether needs have increased since the last assessment review and/or whether the amount of time allocated is sufficient to meet the allocated needs. This will include scrutiny of care packages with 15-minute calls.</p> <p>The process has commenced in the north of the county as there is less of a problem in sourcing home care in that part of the county at the moment but the new home care tenders should provide continuity of service provision across the county. The initial work in the north of the county is to be completed by end of March 06, with reviews taking place straight afterwards. The process will then move to the south of the county.</p> <p>As service users need to transfer providers as a result of the home care tendering process and the Department's decision to stop 15 minute calls, this will also have the effect of increasing some service users weekly home care. ACU and ART are working together to prioritise reviews of these cases.</p> <p><i>Case files for older people receiving between 8.5 & 10 hours 20% in the north were examined & 20% identified for a review – these are underway & further report to be made when these are completed.</i></p> <p><i>Process has not moved to the south of the county as care supply is still to increase in the south. The home care tendering exercise has resulted in no more 15 minute calls with the external sector. Monitoring information required to show impact at appropriate stages of implementation programme.</i></p> <p><i>(JP)</i></p> <p><i>2005/06 outturn is 8.1 as previously reported given that this PAF indicator reflects a snap shot in September 2006. However since then, intensive home care has risen to 8.4 and further work continues to be undertaken to further maximise activity. Discussions at the Carefirst reference group have secured a methodology for more accurate recording of "home care packages, "flexible" packages, especially in disabilities. Analysis of most current activity begins to demonstrate the impact of the policy decision to discontinue 15 minute home care calls and replace them with a minimum of 30 minutes.</i></p>	<p>Donna Rutter Jackie Price</p>	<p>+40 Cases by 31 March 2006 +60 cases by 30 June 2006</p>

Action Area	Progress	Lead* Officer	Delivery By
<p>C32 - Older People helped to live at home [BVPI] – see also item 4 above.</p>	<p>Directorate have agreed the policy should be amended to include both assigned and allocated cases, but only those that can legitimately count towards the indicator. This data cleansing is currently taking place and may temporarily depress the outturn until the low intensity service is implemented. Information on direct access meals recipients has been obtained from WRVS. ACU and ART are in the process of ensuring that at least some of these cases can count towards this indicator.</p> <p>A second exercise involves comparing lists of meals recipients recorded on Carefirst with those available to WRVS, but it is too early to determine the outcome of this initiative. <i>(e.g. a number returned show that other services are now in place and case being counted for PAF purposes. JP)</i></p> <p>Work is in hand to ensure that all equipment with ongoing maintenance commitment is included in the indicator. We have discovered a small number of service users who only receive residential respite who will also count towards the 05/06 outturn.</p> <p>Following work undertaken in disability service in relation to internal day care provision, it is hoped that we can shortly roll this learning out to older people's services, which may have a positive effect on outturn.</p> <p>Stratford OPCCs are currently updating client records where there is a monitoring cost for the provision of alarms. Further work will be undertaken with other teams to ensure that all alarm-monitoring costs are included on Carefirst.</p> <p>Directorate have taken the decision to defer inclusion of low intensity services (excluding meals) until 2006/07</p> <p><i>Following the data clean up exercise, undertaken as a result of the outcome of the Audit Commission Data Quality tool, the outturn for this indicator has fallen from 60 to 57. However, this now provides a more accurate baseline to build on and plans for the introduction of the low level intensity services aim to help an additional 1500 people in 2006/07.</i></p>	<p>Michael Hake* Kim Harlock Donna Rutter Jackie Price</p>	<p>New approach 31 March 2006 + 600 cases October 2006 +2000 – March 2007</p> <p>1500 March 2007 2000+ by end of 2007</p>

Action Area	Progress	Lead* Officer	Delivery By
C51 - Direct Payments [BVPI/KT]	<p>Guidance provided to promote more challenging targets being set by teams. Managers continue to emphasise the importance of offering direct payments and staff continue to encourage users to take up the service.</p> <p>There has been an increase of 13 direct payments since November 2005 and work is continuing to minimise delay in authorisation of new direct payments. ACU are checking whether any one off payments should, more appropriately, be considered to be ongoing direct payments and therefore eligible to be included in the PAF figures, which may increase projected outturn.</p> <p><i>We are likely to hit the original DIS target of 261 cases by March 2006 and to either achieve, or be close to achieving, the Performance Improvement Plan target of +60 (= 268) by the same date.</i></p> <p><i>We are expecting some further increase, primarily amongst older people, as a result of a recent policy change to offer a higher rate of Direct Payments to those affected by the home care transfer to allow them to retain their existing provider if they wish.</i></p> <p><i>However, at this time, the target of +190 cases by June 2006 appears to be not achievable.</i></p> <p><i>We are increasing the use of direct payments by using them in more innovative ways: In addition to “ongoing” payments, we make one off direct payments, for example to enable greater choice in equipment and minor adaptations, to give carers a break, and to promote social inclusion in non traditional ways. Examples include making payments for a bicycle, a computer, season tickets, membership or a social club. Commencing in 2006/07, we have recently introduced a higher “agency rate” to help users who prefer to retain their existing home care agency after a recent tender exercise and hope to make this rate available to others later. As a result the outturn has increased to 62.83, this represents 260 people receiving direct payments, which is just 1 short of the stretch target set. Further work will be undertaken to ensure all direct payments</i></p>	Richard Killingbeck* Helen Bailey	<p>+ 60 cases by 31 March +190 Cases by 30 June 2006</p> <p>+ 120 Cases by 30 June 2006 on base line</p> <p>+ 180 by 31 March 2007 on base line</p>

Action Area	Progress	Lead* Officer	Delivery By
D37 - Availability of single rooms	<p>As a result of work undertaken by ACU and operational teams, outturn has increased from 88% to 93%, constituting a movement from 3 blobs to 4 blobs. Work continues to be undertaken to validate cases recorded as room type unknown.</p> <p>ACU staff have circulated validation lists via OPCCS performance groups of people recorded as being placed in a shared room to eliminate recording errors. Disabilities services have already completed this exercise. Further validation using Abacus data, where single room rate is being paid, where Carefirst indicates a shared room.</p> <p>Carefirst reference group are considering coding issues identified in respect of block contracts.</p> <p><i>Latest analysis following consultation with providers evidences that we now have 95% of our residents accommodated in single rooms. his is a significant improvement over the 88% recorded in 2004/05.</i></p>	Richard Killingbeck* Helen Bailey	98% in single rooms by 31 March 2006
D39 - Statements of Need [BVPI]	<p>The data cleaning exercise in relation to helped to live at home will have a positive effect on this indicator. Teams have identified cases that have not had a statement of need and reissuing statements where necessary.</p> <p><i>Significant improvement has taken place in this indicator, with 96% of all service users now receiving a statement of need, compared with last year's outturn of 92%. All teams are continuing to surpass the target.</i></p>	All Managers* Helen Bailey	+1 % by 31 March 2006

Action Area	Progress	Lead* Officer	Delivery By
D40 - Reviews	<p>Agreed standards and processes for reviewing in place, including light touch reviews as appropriate. ART have been working on workload and process analysis to increase throughput and efficiencies. New technology is also being piloted.</p> <p>Disability services have some clients with ongoing involvement over a long period of time and are therefore under constant review. Where this is the case, workers are making judgements as to when sufficient review activity has been undertaken to mark the client's record to show a review has taken place. In respect of day, some provider reviews are to be counted where there is care management overview.</p> <p><i>The number of reviews undertaken has increased from 61% in 2004/05, past the 05/06 target of 655 to 82%. This is due to the combination of reinforcing of procedures around first reviews, as well as the ongoing work of the reviewing team.</i></p>	Jackie Price* Helen Bailey	To 66% reviews by 31 March 2006 To 68% reviews by 30 June 2006
D54 - Delivery of equipment	<p>Validation of NRS data continues to be priority as there are concerns that this source of information may not be as accurate as historical Carefirst data. The pooled budget manager is investigating NRS' performance and how to improve it.</p> <p><i>The work with NRS to improve their performance and management information is going well, and we are much more confident in the reports we now receive from them. Correcting the discrepancies between CareFirst and their data has been a productive exercise and the performance figure has been increased from 84% to 85.1%. Although this falls short of the target of 86%, it does elevate us to 5 'blobs'. The exercise undertaken by the adult commissioning unit to eliminate the discrepancies has not been fully completed because of other demands on their time, but if it had been, we would expect a further slight increase in the percentage.</i></p> <p><i>We are now introducing new performance reports which will enable us to monitor delivery times more effectively. These will be used to ensure that the data on CareFirst is accurate in the future.</i></p> <p><i>The percentage of equipment delivered within 7 days of the decision to supply is 85%</i></p>	Steve Smith* Helen Bailey	2% by 31 March 2006 and thereafter

Action Area	Progress	Lead* Officer	Delivery By
D59 - Practice Learning	Linda Holland to complete progress report <i>Two appointments had already been made to contribute to the development of our Practice Placement capacity. The impact has already started and our more recent performance has grown to 11.55 days. Further capacity and growth is to be developed and supported through the organisation of a Practice Placement Conference.</i>	Linda Holland* All Managers	4- 7More placement days by October 2006
B12 - Costs of intensive social care [BVPI]	Michael Hake to report progress <i>Completed – awaiting results (2 weeks)</i>	Michael Hake John Bakker <i>Philip Lumley-Holmes</i>	Improve relative performance
B13 - Unit costs	Michael Hake to report progress <i>Completed</i>	Michael Hake John Bakker	Minor reduction 31 March 2006
NMS – NVQs 2 delivery of 50% requirement	Linda Holland to report progress <i>The new Workforce Development Database has enabled us to be more focused on the staff who have or require NVQ2 and to track progress of those who are currently working towards it.</i>	Linda Holland* John Hawthorne	All existing by 31.03.06. 50% by October 2006.
6. Production of needs based Accommodation Strategies for extra care housing and care homes for older people and adults with special needs.	Outline framework for co-ordinated strategy, including housing proposed. Framework to be circulated but agreed in principle by all parties. Written and verbal feedback confirmed this in Feb 06. Benefits: coordinated inclusive needs based strategy that considers current position and desired outcomes in line with White Paper. All stakeholders to be equal contributors. <i>Liaising and contributions with the District & Borough Councils to the Accommodation Strategy is being progressed.</i>	Kate Woolley Rosie James Jon Whiting	1.10.06- includes completion of consultation 30.10.06

Action Area	Progress	Lead* Officer	Delivery By
7. Review of Supporting People self assessment to identify areas where an improved assessment is achievable and can be evidenced in time for the inspection in March 2006; including, scope for remedial action for remaining "below fair" areas	<p>Pre inspection work completed, including review and revision made to self-assessment document.</p> <p><i>Inspection completed and draft report received. Report to Partners between 8 – 24 May. The report will be challenged.</i></p> <p><i>Round table meeting with Audit Commission on 24 May.</i></p>	Rosie James Kate Woolley	<p>1 March 2006.</p> <p>19 May 2006</p>
8. Use commissioning processes and revised fee levels in 2006/07 to secure better care value and seek to incentivise investment in NMS on care qualifications set for 2005 and currently not met by all the local social care economy: including, the Council (links to care quality).	<p>Provisional fee level set for approval by Cabinet. Warwickshire Quality partnership to administer proposed £4 per resident per week supplement for NVQ2 quota. Residential finance to make payments</p> <p><i>A scheme of enhanced residential fees to PVI providers, where 50% of staff hold NVQ2, has been implemented. WQP has agreed to work with providers to enable them to meet the target.</i></p> <p><i>WCC is scoping NVQ2 need and looking to establish an SLA to provide increased capacity for NVQ assessment.</i></p>	John Bakker* Kim Harlock	By 31 March 2006 if supported, includes provider consultation
9. Review of current operational commissioning practice and guidance to ensure full compliance with relevant Council financial regulations and standing orders; including contracts register	<p>Commissioning Panels held and action plan drafted for Directorate approval 31 March 2006. Work continuing on statement of practice. New Head of Strategic Commissioning and Performance post to be joint appointment with health.</p> <p><i>In addition to developing new commissioning and contracting protocols, proactive work is being undertaken between the Adult Commissioning Unit and Legal Services to ensure that procurement plans adapt a more innovative and developmental approach to partnership working to deliver future strategic commissioning intentions. SOLACE will be working with the Department and the PCTs to begin to develop joint commissioning strategies.</i></p>	Kim Harlock Michael Hake	Convert guidance to a statement of required practice and brief managers 1 June 2006.

Action Area	Progress	Lead* Officer	Delivery By
<p>10. Confirm and sign off all S.31 agreements with existing PCTs and identify all S.28a agreements prior to end of financial year and in preparation for creation of single PCT.</p>	<p>Michael to report progress</p> <p><i>All S31 Agreements – signed</i> <i>S.28 Agreements – work in progress in conjunction with Finance</i></p>	<p>Michael Hake</p> <p><i>Philip Lumley-Holmes</i></p>	<p>Agreements finalised and signed by 31 March 2006.</p>
<p>11. Demonstrate more clearly how what we do is responsive to the needs, hopes and concerns of service users and carers; especially around consistency and reliability of service quality.</p>	<p><i>Meetings held with Service Managers to update audit, on evidence that service user and family carer involvement has made a difference. Action being taken with the outcomes of 3rd Customer First Conference, being finalised to report back at this year's conference. Overview report being prepared for Scrutiny Committee/Cabinet with key messages included.</i></p>	<p>Kim Bolton*</p> <p>Linda Holland</p>	<p>2006/07 plan by 1 March</p>
<p>12. Improve management of attendance, general approaches to establishment control, appraisal, workforce development and monitoring.</p>	<p>Linda Holland to report</p> <p><i>Sickness Absence Procedure implemented from 1st March. Continuing focus from managers and HR staff in relation to managing absence.</i></p> <p><i>Work underway to:</i></p> <p><i>Ensure the most useful possible information can be obtained from HRMS relating to sickness absence.</i></p> <p><i>Establish a regular information-reporting framework to facilitate monitoring of absence management. An initial, indicative breakdown of absence figures by service management area and team, and long /short-term absence has been provided to Adult Services Team as part of this process.</i></p> <p><i>Monitoring data will be included in the report to be provided during May for the first quarter of the year.</i></p>	<p>Linda Holland*</p> <p>All Managers</p>	<p>First quarter monitoring report May 2006</p>
<p>13. Assess position against CSCI standards [6] and criteria and agree shifts necessary to achieve “Most” and “Promising”, if possible for 2006 or 2007 at latest and in time to secure a level 3 score for adult social care by CPA reassessment in 2008</p>	<p>Self-assessment stock take of new standards being undertaken for 30 March 2006 to enable Directorate decision on where action should be prioritised. Priorities to be included in 2006/07 Service Pan.</p> <p><i>Achieved – targets set</i></p>	<p>Michael Hake*</p>	<p>6 February 2006</p> <p>Use to shape performance improvement in 2006/07</p> <p>31 March 2006</p>

Action Area	Progress	Lead* Officer	Delivery By
<p>14. Prepare a “Performance Plan” and revise arrangements for consideration of performance information and monitoring of this plan by DMT consistent with a performance culture at all levels.</p>	<p>Corporate service planning requirements considered by directorate and draft process proposed, incorporating 2 day planning workshop in April.</p> <p><i>Work is being undertaken in partnership with colleagues across the new Directorate to develop cross cutting themes for the 2006/07 Directorate Service Plan. New arrangements are being developed to enhance both service planning and performance management throughout the Directorate and ensure a consistent approach to support continuous improvement.</i></p>	DMT	31 March 2006 Corporate timescale May 2006
<p>15. Consider team variations in performance against individual indicators, scope for peer and management review and secure improved assessment on compliance issues and promote service consistency across teams.</p>	<p>Team delivery profiles prepared by ACU. Terms of reference for ongoing peer review to be agreed.</p> <p><i>The following already takes place in OPCCS</i></p> <ul style="list-style-type: none"> • <i>Performance & target attainment & sharing practice improvements at county & local OPCCS meetings</i> • <i>Through supervision of managers</i> • <i>Through meetings sharing outcomes & improvements following work with business improvement manager</i> • <i>Regular meetings of managers with Performance & Improvement Manager</i> • <i>At workshops for managers feeding back on attainments in team plans</i> • <i>Introduced Team Peer Reviews on performance</i> <p><i>The Adult Commissioning Unit have held 3 very successful Making It Real workshops so far with operational teams, with further workshops planned. Making it Real is a regional initiative to facilitate improvements in the performance agenda with operational staff and can be utilised as a form of peer review, as well as promoting the sharing of good practice between teams. The outcome of the workshops has been to gain ownership of a number of improvement actions that will be included in team and unit plans to improve performance.</i></p>	Michael Hake* DMT All Managers	31 March 2006
<p>16. Review and update current social care strategic risk register to ensure identification of gross and net risks and DMT quarterly review [will include new directorate elements within corporate strategic risk register]</p>	<p>Peter to report progress.</p> <p><i>Risks identified relating to Adult Social Care for 2005/06 to be rolled forward for review in 2006/07, including an additional risk relating to flue pandemic. These risks, together with those from other divisions in Adult, Health & Community Services to be reviewed further in context of new Corporate Strategic Risk Register, to identify key strategic risks and actions to manage them.</i></p>	Peter Atkinson	31 March 2006 30 June 2006

Action Area	Progress	Lead* Officer	Delivery By
<p>17. Review all current modernisation work streams to ensure best use of manager time, focus on key improvement priorities and ensure working to a coherent project management framework for the future.</p>	<p>Peter A to report progress. Baseline mapping completed by Modernisation Programme Team (information being held by Kate Woolley to feed into 2006/07 service plan).</p> <p><i>Base line mapping completed by Modernisation Project Team (now disbanded), and Adult Care Services Project Register being updated for new projects.</i></p> <p><i>This information to be cross references to the emerging Adult, Health & Community Services Directorate's Service Plan to ensure project resources support the key improvements identified in the Service Plan.</i></p>	<p>Peter Atkinson* DMT</p> <p><i>Peter Atkinson Kim Harlock</i></p>	<p>31 January 2006</p> <p><i>End July 2006</i></p>