

Service Improvement Plan *(abridged)*

Children, Education and Social Care

Adults' Services

2008/09 – 2010/11

Service Improvement Plan (*abridged*) – Adults’ Services 2008/09 – 2010/11

Theme: Health and Wellbeing		
Development Priority: Improved Health and Emotional Well-Being		
Key actions	By when	Outcomes and Success Criteria
1. Support delivery of health projects to targeted areas and hard to reach groups, including floating support for alcohol services; books on prescription; new services for domestic violence.	End of March 2009.	<ul style="list-style-type: none"> ▪ Reduce the mortality rate from all circulatory diseases at ages u75 (NI 121 – target to be determined). ▪ Increase the number of people using the Smoking Cessation Service and who are still ‘quitters’ after four weeks (NI 123 – target to be determined). ▪ Increase the number of drug users in effective treatment by 150 (by end of March 2009) from current baseline of 1279. (NI 40). ▪ 14 community matrons to be in place by the end of 2008. ▪ Maintain at ‘0’ the number of delayed transfers of care for which the Council is responsible
2. Improve access to substance misuse support services.	Annual review of commissioning plan.	
3. Implement recommendations of Scrutiny Review of alcohol services.	Review progress in April 2009.	
4. Implement Falls Strategy.	Annual review of action plan.	
5. Develop and implement Long Term Care Strategy and Action Plan, including expansion of Community Matron scheme.	Plan agreed by end of September 2008.	
6. Review FACS bandings (criteria for access to services) to assess impact on well being and prevention.	Complete review by end of May 2008.	

Service Improvement Plan (*abridged*) – Adults’ Services 2008/09 – 2010/11

Theme: Health and Wellbeing		
Development Priority: Improved Quality of Life		
Key actions	By when	Outcomes and Success Criteria
1. Further develop access to assistive technology including telecare and remodelled community alarms.	End of March 2009	<ul style="list-style-type: none"> ▪ Increase the proportion of people (18-64 / 65+) supported to live independently through social services – target of 4,300 people by April 2009 (NI 136). ▪ Increase the number of homes with assistive technology to 300 by April 2009. ▪ Home Improvement Agency to be available from April 2009. ▪ Items of equipment and adaptations delivered within 7 working days: increase to 90% by end of March 2009. ▪ 120 Extra Care places to be available by 2010. ▪ Number of vulnerable people who are supported to maintain independent living - target to sustain at 95%+ (NI 142). ▪ Increase to 100 the number of LD service users receiving short term breaks, by April 2009.
2. Commission a broader range of services to support independent living, and de-commission services, in line with recommendations of the Service Review Group.	In line with timescales for each project, as agreed.	
3. Develop the Supporting People programme in line with post inspection improvement plan and revised SP key lines of enquiry.	Through annual review of Supporting People Plan.	
4. Improve access to supported living for vulnerable groups, including Extra Care provision.	April 2010	
5. Review current arrangements for the community equipment service and agree model for future service delivery	End of March 2009.	
6. Review LD strategy, following national consultation on ‘Valuing People Now’.	End of March 2009.	

Service Improvement Plan (*abridged*) – Adults’ Services 2008/09 – 2010/11

Theme: Health and Wellbeing		
Development Priority: Making a Positive Contribution		
Key actions	By when	Outcomes and Success Criteria
1. Implement and embed the Carers Strategy to increase access to a range of support for carers.	Carers Strategy agreed by June 2008. Action plan implemented by end of March 2011.	<ul style="list-style-type: none"> ▪ Increase the proportion of carers receiving needs assessment or review and a specific carer’s service, or advice and information – target of 15% for 08/09. (NI 135). ▪ Terms of reference for Over 50’s Assembly agreed by July 2008. ▪ Golden Guide reviewed and published by October 2008.
2. Establish the LINK (Local Involvement Network) in line with new statutory programme.	End of September 2008.	
3. Further develop service user consultation mechanisms including the Over 50’s Assembly and Are You Being Served event.	Over 50s Assembly fully operational by July 2008. Are You Being Served to be held annually.	

Service Improvement Plan (*abridged*) – Adults’ Services 2008/09 – 2010/11

Theme: Health and Wellbeing		
Development Priority: Increased Choice and Control		
Key actions	By when	Outcomes and Success Criteria
1. Improve processes for managing care pathways in line with outcomes of CSED project, and linked to development of Integrated Service Areas.	End of March 2009.	<ul style="list-style-type: none"> ▪ Assessments completed within 4 weeks – target of 85% for 08/09. (NI 132). ▪ Care packages provided within 4 weeks from completion of assessment – target of 87% for 08/09. (NI 133).
2. Embed personalisation of care across all user groups via direct payments and an ‘In Control’ strategy	End of March 2011.	<ul style="list-style-type: none"> ▪ Service users receiving a review: improve to 85%+ and sustain. ▪ People receiving a statement of needs and how they will be met: target of 98%+ by 2010.
3. Develop business case for respiratory beds in conjunction with health partners at Rosedale, to provide alternatives to hospital admission.	End of March 2009.	<ul style="list-style-type: none"> ▪ Increase the proportion of older people achieving independence through rehabilitation / intermediate care (NI 125 - target to be determined).
4. Commission a broader range of information and advice services, particularly for learning disabilities and mental health needs; and for independent living and preventative services.	End of March 2010.	<ul style="list-style-type: none"> ▪ In Control Strategy to be developed by April 2009 ▪ Increase the proportion of social care clients receiving self-directed support (direct payments and individual budgets) – target of 200 clients per 100,000 by April 2009. (NI 130).
5. Develop a Transitions Strategy, to support improvements in arrangements for transition of young people with complex needs to Adult services.	End of March 2009.	<ul style="list-style-type: none"> ▪ Learning Disabled service users with Person Centred Plans: increase to 50% by April 2009. ▪ Transition plans will be in place for all those with complex needs transferring to adult services by the end of 2008/09. ▪ Independent Living website to be in place from January 2009.

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Theme: Health and Wellbeing		
Development Priority: Freedom from Discrimination and Harassment		
Key actions	By when	Outcomes and Success Criteria
1. Develop and implement programme of Equality Impact Assessments.	Programme agreed by April 08 and reviewed annually.	<ul style="list-style-type: none"> ▪ Equality Impact Assessment action plan monitored and reviewed annually. ▪ Council to achieve Level 3 of Equality Standard by April 2009.
2. Review and update website information to support access to services, linked to roll-out of Integrated Services project.	End of December 2008.	
3. Review Diversity Profile data relating to age, race and disability, to clarify proportionality of assessments and services for BME groups.	End of July 2008.	

Service Improvement Plan (*abridged*) – Adults’ Services 2008/09 – 2010/11

Theme: Health and Wellbeing		
Development Priority: Economic Well Being		
Key actions	By when	Outcomes and Success Criteria
1. Further develop training and employment opportunities for vulnerable groups.	Annual review of action plan.	<ul style="list-style-type: none"> ▪ Increase to 60 the number of adults with learning disability in paid employment, by April 2009 (NI 146). ▪ Targets in the Adult Education Service Development Plan, for disabled learner participation, are achieved. ▪ Increase the number of older people accessing benefit advice and support – target to be determined.
2. Expand the ‘Brighter Futures’ community LD service.	August 2008.	
3. Increase the participation and achievement of disabled learners in adult education courses.	Annual review of Adult Education Service Plan.	
4. Further develop Independent Living Fund initiative and Welfare Rights campaigns.	End of March 2009.	
5. Develop WNF bids for projects to support access to employment and training.	End of March 2009.	

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Theme: Health and Wellbeing		
Development Priority: Maintaining Personal Dignity and Respect		
Key actions	By when	Outcomes and Success Criteria
1. Implement ‘Dignity in Care’ principles across all services.	End of March 2009.	Maintain the proportion of POVA referrals at (target to be determined).
2. Further develop joint work between Contracts Team, POVA lead, and service providers to ensure appropriate safeguarding arrangements and training provision are in place.	End of March 2009.	

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Theme: Health and Wellbeing		
Development Priority: Leadership		
Key actions	By when	Outcomes and Success Criteria
1. Review and update the Adults Vision to reflect the personalisation agenda.	September 2008.	<ul style="list-style-type: none"> ▪ Adults Vision revised and agreed by September 2008.
2. Implement the Integrated Services strategy.	In line with agreed project timetable.	<ul style="list-style-type: none"> ▪ Full implementation of IS strategy by April 2009.
3. Develop phase 2 of ISA (Integrated Service Area) Profiles project to support the Integrated Services strategy.	End of March 2009.	<ul style="list-style-type: none"> ▪ ISA profiles linked with stats@stockton by April 2009.
4. Complete scoping of new IT care management system.	September 2008.	<ul style="list-style-type: none"> ▪ IT system scoped by September 2008.
5. Implement revised governance and performance management framework for the Health & Well Being Partnership.	End of July 2008.	<ul style="list-style-type: none"> ▪ New Health & Wellbeing Strategy agreed by September 2008.
6. Implement the Older People’s Strategy Action Plan.	End of March 2011.	<ul style="list-style-type: none"> ▪ Older People’s Strategy is delivered in line with the agreed action plan.
7. Complete CSED (Care Services Efficiency Delivery) project and implement action plan to achieve improved efficiencies in care management processes.	End of March 2009.	<ul style="list-style-type: none"> ▪ Project complete by March 2009.

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Theme: Health and Wellbeing		
Development Priority: Commissioning and Use of Resources		
Key actions	By when	Outcomes and Success Criteria
1. Further develop capacity and expertise for the effective commissioning of services.	End of March 2010.	<ul style="list-style-type: none"> ▪ Implementation of the Adults Vision and Strategy is underpinned by the effective use of resources, in line with Gershon efficiencies. ▪ Revised mental health commissioning arrangements agreed and in place from April 2009. ▪ Improved local access to care packages for service users with complex needs is available by 2010. ▪ Improved information on value for money of placements supports more effective commissioning.
2. Continue the Service Reviews programme, to shape future service provision, inform commissioning plans, and identify opportunities for savings to be re-invested in targeted support services.	Annual programme of reviews leading to individual projects with agreed timescales.	
3. Complete the revision of the SLA with TEWV, and review the approach to commissioning of mental health provision.	End of March 2009.	
4. Develop role of the Local Services Group, to work with local providers for people with a learning disability as an alternative to high cost placements out of area.	April 2010.	
5. Implement new systems / tools for assessing the effectiveness of care services.	September 2008.	

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Theme: Corporate Health – Organisational Development – All Themes

Development Priority: Organisational Development

Outcomes and success criteria

All services are subjected to a number of Organisational Development objectives. These demonstrate how the service contributes to the achievement of the organisation’s ‘corporate health’.

SICKNESS ABSENCE

Sickness absence remains high across the Council compared to other local authorities and therefore it is imperative that sickness is targeted for reduction. Sickness absence is measured via ex-BVPI12 and all services need to contribute to the corporate target of a reduction of at least 0.5 days lost per FTE due to sickness.

ON CONTRACT SPEND

All services contribute to making savings via better procurement. Value for money contracts have been arranged for areas of corporate spend such as mobile phones and stationery. In order to maximise savings, services have been set a target of 97% for ‘on contract’ spend for these contracts.

PAYMENT OF INVOICES

The Council is measured for the time taken to pay invoices. Prompt payment is important to our supply base and helps improve their cash flow, which in turn keeps them profitable and helps economic development of the locality. Payment of invoices is measured by ex-BVPI8 and all services contribute to the corporate target of at least 85% of invoices paid within 30 days, by Q4.

APPRAISALS

Highly trained and motivated employees are necessary for the delivery of modern, effective and efficient services. Consequently the employee appraisal scheme has been revised and improved to ensure staff have the relevant skills and development opportunities. All services have been set a target of undertaking appraisals for at least 90% of employees.

GERSHON EFFICIENCY SAVINGS

The Council is subject to an annual 3% cashable efficiency target and many services contribute in one way or another. Services will set their targets via the forward looking Annual Efficiency Statement (April) which includes both the financial targets and any associated quality cross checks.

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VALUE FOR MONEY REVIEWS

Council services are subject to the requirement to demonstrate value for money in order to show the public that money is spent effectively. The process also feeds into the Use of Resources service block in CPA. Services subject to reviews are those with apparent high costs compared to other local authorities and the initial focus of reviews is to determine why this is the case.

PARTNERSHIP HEALTHCHECKS

New government policies and legislation frequently involve partnership working. The major policy initiatives for local government all depend for their success on effective joint working. There is a growing policy focus on area governance and service delivery at regional, sub-regional and the neighborhood level; this may involve local authorities and a variety of partners at each level. Consequently, well-developed and effective partnerships are becoming an essential feature for Stockton Borough Council’s success.

DATA QUALITY

The Council is assessed against its corporate management arrangements for Data Quality. Good quality data is essential in supporting effective decision making at all levels across the organisation. All services are working towards improving data quality further by responding to the recommendations made following the Data Quality Audit 2007 and implementing the actions highlighted within the Data Quality Strategy.

CUSTOMER FIRST

Customer First Stage II launched in June 2007 aims to encourage services to strive for excellence in customer service. The programme requires every service to adopt the latest service standards and compare how it measures up against five key components. All services should aim reach the Stage II standard by March 2009.

DIVERSITY

Equality Impact Assessment

- Ensure all appropriate reports submitted to Cabinet have been subject to Equality Impact Assessment.
- Carry out Equality Impact Assessments of existing services. 50% in 2008/09 and 50% in 2009/10, including Impact Assessments of contracted services where appropriate.
- Include actions developed as a result of Equality Impact Assessment in SIP or BUP as appropriate.

Training

- Ensure all employees attend corporate diversity training in line with Council Plan targets.

Single Equality Scheme

- Achieve all relevant targets within the race, gender and disability equality action plans

Procurement

- Utilise new procurement procedures to ensure equality is embedded in procurement activities.