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# SCRUTINY BOARD (ADULT SOCIAL CARE)

# Meeting to be held in Civic Hall, Leeds on Wednesday, 7th October, 2009 at 10.00 am

(A pre-meeting will take place for ALL Members of the Board at 9.30 a.m.)

# **MEMBERSHIP**

# Councillors

-	Weetwood;
-	Hyde Park and Woodhouse;
-	Alwoodley;
-	Adel and Wharfedale;
-	Beeston and Holbeck;
-	Bramley and Stanningley;
-	Armley;
-	Killingbeck and Seacroft;
-	Calverley and Farsley;
-	Gipton and Harehills;
-	Chapel Allerton;
	- - - -

# **CO-OPTEES**

Ms Joy Fisher – Alliance Service Users and Carers Sally Morgan – Equality Issues

Please note: Certain or all items on this agenda may be recorded on tape

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# AGENDA

ltem No	Ward/Equal Opportunities	ltem Not Open		Page No			
1			APPEALS AGAINST REFUSAL OF INSPECTION OF DOCUMENTS				
			To consider any appeals in accordance with Procedure Rule 25* of the Access to Information Procedure Rules (in the event of an Appeal the press and public will be excluded.)				
			(* In accordance with Procedure Rule 25, notice of an appeal must be received in writing by the Chief Democratic Services Officer at least 24 hours before the meeting.)				
2			EXEMPT INFORMATION - POSSIBLE EXCLUSION OF THE PRESS AND PUBLIC				
			1 To highlight reports or appendices which officers have identified as containing exempt information, and where officers consider that the public interest in maintaining the exemption outweighs the public interest in disclosing the information, for the reasons outlined in the report.				
			2 To consider whether or not to accept the officers recommendation in respect of the above information.				
			3 If so, to formally pass the following resolution:-				
			<b>RESOLVED –</b> That the press and public be excluded from the meeting during consideration of the following parts of the agenda designated as containing exempt information on the grounds that it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the press and public were present there would be disclosure to them of exempt information, as follows:-				

ltem No	Ward/Equal Opportunities	ltem Not Open		Page No
3			LATE ITEMS	
			To identify items which have been admitted to the agenda by the Chair for consideration.	
			(The special circumstances shall be specified in the minutes.)	
4			DECLARATIONS OF INTEREST	
			To declare any personal / prejudicial interests for the purpose of Section 81 (3) of the Local Government Act 2000 and paragraphs 8 to 12 of the Members Code of Conduct.	
5			APOLOGIES FOR ABSENCE	
			To receive any apologies for absence.	
6			MINUTES - 9TH SEPTEMBER 2009	1 - 6
			To confirm as a correct record the minutes of the meeting held on 9 <sup>th</sup> September 2009.	
7			DAY CARE SERVICES UPDATE	
			To consider a report form the Director of Adult Social Services which provides the board with an update on the consultation exercise undertaken with regard to Day Care Services in Leeds.	
			(Report to follow)	
8			COMMISSIONING IN ADULT SOCIAL CARE	7 - 14
			To received and consider a report form the Deputy Director, Strategic Commissioning which updates the board on progress made with the review of the Neighbourhood Network Services and the inspection made in 2008 by the Commission for Social Care Inspection (CSCI).	

ltem No	Ward/Equal Opportunities	ltem Not Open		Page No
9			INDEPENDENCE WELLBEING AND CHOICE - ACTION PLAN UPDATE	15 - 32
			To receive and consider a report from the Head of Scrutiny and Member Development which provides an overview of the progress made by Adult Social Services against the Independence Wellbeing and Choice action plan.	
10			PERSONALISATION INQUIRY UPDATE	33 - 56
			To receive and consider a report from the Head of Scrutiny and Member Development which provides an update on the progress and work undertaken so far by the Personalisation Working Group.	50
11			WORK PROGRAMME	57 -
			To receive a report by the Head of Scrutiny and Member Development on the Board's current work programme.	76
12			DATE AND TIME OF NEXT MEETING	
			Wednesday, 11 <sup>th</sup> November 2009 at 10.00 a.m. (Pre-meeting at 9.30 a.m.)	

# Agenda Item 6

# SCRUTINY BOARD (ADULT SOCIAL CARE)

# WEDNESDAY, 9TH SEPTEMBER, 2009

**PRESENT:** Councillor J Chapman in the Chair

Councillors P Ewens, C Fox, T Hanley, V Morgan and E Taylor

**CO-OPTEES:** J Fisher and S Morgan

#### 31 Declarations of Interest

Councillor E Taylor declared a personal interest in Agenda Item 11, Terms of Reference, Inquiry into 'Supporting Working Age Adults with Severe and Enduring Mental Health Problems' due to her employment with the NHS – Minute No. 39 refers.

Councillor J Chapman declared a personal interest in Agenda Item 11, Terms of Reference, Inquiry into 'Supporting Working Age Adults with Severe and Enduring Mental Health Problems' due to having a relative employed in a private sector care home – Minute No. 39 refers.

#### 32 Apologies for Absence

Apologies for absence were submitted on behalf of Councillors Mrs R Feldman, A Gabriel, J McKenna, F Robinson and A Taylor.

#### 33 Minutes - 29th July 2009 and 20th August 2009

# **RESOLVED** –

(1) That the minutes of the meeting held on 29 July 2009, be confirmed as a correct record subject to the following amendment:

Minute No.20 – Leeds Local Involvement Network (LINk) – Annual Report (2008/09) – final bullet point be amended to read 'Clarification that membership of the Steering Group was open to all Patients, Carers and Service Users'

(2) That the minutes of the meeting held on 20 August 2009, be confirmed as a correct record.

#### 34 Matters arising from the Minutes

<u>Minute 20 – Leeds Local Involvement Network (LINk) – Annual Report</u> (2008/09)

It was reported that a financial breakdown would be provided to Members in September.

<u>Minute 21 – Leeds Strategic Plan Performance Report for Quarter 4 2008/09</u> The format currently being trialled would be brought to the Proposals Working Group on 29 September 2009.

<u>Minute 23 – Independence Wellbeing and Choice Inspection Audit</u> The Independence Wellbeing and Choice Action Plan would be brought to the Proposals Working Group on 29 September 2009.

# <u>Minute 29 – Older Peoples Day Services and Day Services for People with</u> <u>Learning Disabilities</u>

Members were made aware of information that had been requested and that would be circulated prior to the October meeting. This focussed on the following:

- Broken down by different sectors/groups, how many people have been refused day care and in which centres and on what grounds?
- How many people have started going to day centres in the past 12 months, by day centre?
- For each day centre a breakdown of where people are travelling from to attend.
- Statistical representations of the 'Average day care attendance'.

In response to concerns regarding the proposed day centre closures and the potential impact on Neighbourhood Networks, it was reported that there was regular consultation with the Neighbourhood Networks and further investment had been made. It was also clarified that there is no direct budgetary link between Day Centres and Neighbourhood Networks. Further information on the commissioning of Neighbourhood Networks would be brought to the Board in October. There was spare capacity across services and all day centre users would be offered alternative placements where necessary.

Further discussion included the reporting of day centre provision to Area Committees and the consultation process. It was reported that all Area Committees had been contacted regarding the consultation and Members would be informed of which Area Committees would be receiving reports. Alternative uses of day centre buildings would be considered as part of the consultation.

# 35 Performance Report Quarter 1 2009-10

The report of the Head of Policy, Performance and Improvement provided key Adult Social Care performance data for quarter 1. Leeds Adult Social Care Quarter 1 performance had shown an overall improvement on last year's out-turn and benchmarking information had shown that in a number of areas that Leeds Adult Social Care was among the best performers nationally.

The following were in attendance for this item:

• Sandie Keene, Director of Adult Social Services

- Stuart Cameron-Strickland, Head of Policy, Performance and Improvement (Adult Social Care)
- Marilyn Summers, Senior Performance Manager

It was reported that the only area of significant concern was with regard to Delayed Transfers of Care and this was an issue with data quality, in general the department is in a good position. Work was ongoing with Health Service partners to address this and the complex national criteria involved. Other areas where performance was poor in comparison to other authorities were brought to members attention and it was reported that robust action plans had been developed to maintain progress. Year on year improvements had been noted across the range of performance indicators.

In response to Members' comments and questions, the following issues were discussed:

- Personalised care for those 14 years and over there were various issues surrounding this and the Board would be considering transition from Children's to Adult Social Care at a future meeting.
- Staff qualifications and re-profiling of the workforce.

**RESOLVED** – That the report and Quarter 1 Performance Information be noted.

# 36 Update Report on Mental Capacity Act 2005 & Deprivation of Liberty Safeguards

The report of the Director of Adult Social Services provided the Board with an update on the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. A copy of the Leeds Independent Mental Capacity Advocacy Service (LIMCAs) Annual Report was appended to the agenda.

Sandie Keene, Director of Adult Social Services and David Shields, Programme Manager were present for this item.

Members attention was brought to the following key points:

- Joint requirements with the PCT to meet requirements of Deprivation of Liberty provisions.
- Available funding.
- The Care Quality Commission (CQC) request for data regarding progress on the implementation of the Act and monitoring the progress.
- Achievements made to date.

In response to Members comments and questions, the following issues were discussed:

- Grant allocation and budget planning in light of NHS funding potentially ceasing after 2009 and Government funding ceasing after 2011 – many government funding streams were due to end in 2011 and a comprehensive spending review would take place. Some of the costs detailed in the report were 'setting up' costs and would not be needed in future years.
- Activity in relation to Deprivation of Liberty referrals and the procedures involved.

# RESOLVED -

- (1) That the report and key features highlighted be noted.
- (2) That the progress made in implementing the Act and its associated requirements along with the highlighted examples of progress highlighted in the Articulate Advocacy report be recognised.
- (3) That the Board receives a further update in 9 months time, when a full year of Deprivation of Liberty activity data will be available for full consideration.

# 37 Adult Social Care Self Assessment 2008/09

The report of the Deputy Director of Adult Social Care – Strategic Commissioning informed the Board of the Adult Social Services Self Assessment Survey (SAS) which was submitted to the Care Quality Commission (CQC) in May 2009 as part of the annual performance assessment.

Sandie Keene, Director of Adult Social Services and Stuart Cameron-Strickland, Head of Policy, Performance and Improvement were in attendance for this item.

Members attention was brought to the 7 main outcomes of the inspection and results of the 2007/08 CSCI inspection were compared to the 2008/09 Self Assessment rating. It was reported that the outcomes were partly judged on capacity to improve and enabling change and leadership - this involved the role of Officers and Elected Members. Other areas concerned included value for money and use of resources. Engagement had been undertaken with service users as part of the assessment and with other partners including the voluntary, community and faith sector. Should the assessment be agreed, it would increase the status of the service.

In response to Members' comments and questions, the following issues were discussed:

- How to improve the overall status— it was reported that excellent ratings would be required in 4 of the outcomes to move up to an overall excellent rating of the service.
- The need to increase personalisation and Direct Payments to improve the rating for Outcome 4 : Increased Choice and Control. It was noted

that by March 2010 100 % of new service users would have to be offered the option of a personal budget.

- Comparisons with other core cities this information would be made available to Members.
- Each Year improvement was measured against higher required standards than in the previous year.
- Funding issues.

**RESOLVED** – That the report and summaries of performance improvement be noted.

# 38 Inquiry Report, Major Adaptations for Disabled Adults - Formal Response

The report of the Head of Scrutiny and Member Development detailed the responses of the Directors of the Adult Services and Environment and Neighbourhoods to the Board's Inquiry into Major Adaptations for Disabled Adults. It was reported that the Executive Board had approved the recommendations to these responses at its meeting on 26 August 2009.

Sandie Keene, Director of Adult Social Services and Andy Beattie, Head of Housing and Pollution Control were in attendance for this item.

Disappointment was expressed at the number of recommendations only partially agreed by the Departments, and particularly in relation to Recommendation 9 regarding planning guidance for Lifetime Homes Standards which had not been agreed. It was reported that the Executive Board had agreed that officers offer a more robust response to recommendation 9, which falls under the responsibility of the Director of Development.

**RESOLVED** – That the report be noted.

# 39 Terms of Reference - Inquiry into 'Supporting Working Age Adults with Severe and Enduring Mental Health Problems'

The report of the Head of Scrutiny and Member Development detailed the scope, timetable and submission of evidence into the planned inquiry into Supporting Working Age Adults with Severe and Enduring Mental Health Problems. The Executive Board Member and Director of Adult Social Services had been consulted regarding the Inquiry and had welcomed the proposals.

# RESOLVED -

- (1) That the report be noted and the terms of reference into the Supporting Working Age Adults with Severe and Enduring Mental Health Problems Inquiry be noted.
- (2) That it be noted that the terms of reference may incorporate additional information during the inquiry should the working group of

Draft minutes to be approved at the meeting to be held on Wednesday, 7th October, 2009

the Scrutiny Board (Adult Social Care) identify any further scope for inquiry within the area of Supporting Working Age Adults with Severe and Enduring Mental Health Problems.

(Councillor Fox left the meeting at 12.05 p.m. following the conclusion of this item).

# 40 Scrutiny Board (Adult Social Care) - Work Programme

The report of the Head of Scrutiny and Member Development submitted a report which detailed the Board's Work Programme. Also attached to the report was a copy of the Council's Forward Plan and recent Executive Board minutes.

Members were given a recap of issues discussed earlier in the meeting which would be followed up and included the following:

- Further information on Performance Indicators.
- Area Committee consultation on Day Centres.
- That the Board receive a further report on the Mental Capacity Act and Deprivation of Liberty in 9 months time.
- With regard to minutes 37 comparative Core Cities data.

# RESOLVED -

- (1) That general progress reported at the meeting be noted.
- (2) That the work programme be amended as appropriate and agreed.

# 41 Date and Time of Next Meeting

Wednesday, 7 October 2009 at 10.00 a.m. (pre-meeting for Members at 9.30 a.m.)





Originator: Tim O'Shea

2474258

Report of the Deputy Director, Strategic Commissioning

# Scrutiny Board, Adult Social Care

# Date: 7 October 2009

# Subject: Adult Social Care Commissioning Services Update

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
Ward Members consulted (referred to in report)	Narrowing the Gap

# Executive Summary

This report provides Members of the Scrutiny Board, Adult Social Care (ASC) with an update on progress made with the review of the Neighbourhood Network Services and the inspection made in 2008 by the Commission for Social Care Inspection of ASC services, with specific reference to older people and safeguarding. This update was requested by the Scrutiny Board at its meeting in March 2009. ASC Commissioning Services has, in partnership with NHS Leeds, Supporting People and the Corporate Procurement Unit, made substantial progress with the review of Neighbourhood Networks, including the development of a funding formula, a set of service outcomes, a new service specification and a well advanced programme of service procurement. Support for these initiatives has been secured from the Neighbourhood Networks themselves, wider stakeholder groups and the Executive Board of the Council. It is anticipated that the new contracts with the Neighbourhood Networks will be in place by July 2010.

The Inspection Action Plan prepared in response to the Commission for Social Care Inspection report of 2008 is now well advanced and good progress has been made against all the actions which relate specifically to Commissioning services, including:

- The procurement of an expert partner to advise on the modernisation of buildingsbased services
- Development of service specifications for in-house services
- Formal joint commissioning arrangements with NHS Leeds
- Development of quality assurance systems for commissioned services
- Joint investment and commissioning with NHS Leeds

All of the above work has drawn positive feedback from the Care Quality Commission (formerly the Commission for Social Care Inspection).

# 1.0 Purpose Of This Report

1.1 To provide Members of the Scrutiny Board (ASC) with a further report of the progress made and future plans for delivering the Neighbourhood Networks review and re-tendering exercise. The report also describes the progress made by ASC Commissioning in response to the Independence, Wellbeing and Choice Inspection of 2008.

# 2.0 Background Information

- 2.1 At the ASC Scrutiny Board meeting in March 2009, the Chief Officer ASC Commissioning presented a report detailing the procurement timetable for the Neighbourhood Networks review process. In addition, the report included information on commissioning intentions in response to the Commission for Social Care Inspection report on ASC services, with specific reference to Older People and Safeguarding, and the resulting Action Plan. The Scrutiny Board requested a further progress report in six months' time, and this report fulfills that request.
- 2.2 The Neighbourhood Networks review commenced in March 2008 as a joint commissioning exercise between ASC, Supporting People, NHS Leeds and the Corporate Procurement Unit. The aim of the review was to evaluate current provision, establish more equitable resource allocation across the city, and introduce service specifications based on desired outcomes for older people. It was originally envisaged that new contracts would be in place by April 2010, but this has now been deferred to October 2010.
- 2.3 The Independence, Wellbeing and Choice Inspection Action Plan was presented to the Executive Board in December 2009 agreed and adopted immediately thereafter. In total, ten of the recommendations related specifically to commissioning. The recommendations require commissioners to procure improved information and advocacy services, move away from the provision of building-based residential and day care services, develop formal contractual relationships with directly provided services, improve quality assurance systems and develop joint commissioning systems and processes with NHS Leeds and Supporting People. This ambitious programme of transformation in Commissioning has a range of commencement and completion targets, beginning in October 2008 and concluding in April 2010.

# 3.0 Neighbourhood Networks Review

3.1 Since March 2009. extensive consultation has been carried out with the Neighbourhood Networks and wider stakeholder groups to seek understanding of, and support for, all aspects of the review process. It has been acknowledged that the Neighbourhood Networks have evidenced their ability to successfully combat the social isolation which many older people experience, and increase their involvement and contribution to the life of their local community. Furthermore, the Neighbourhood Networks are key to the longer-term market development of provider services, supporting the transformation of traditional buildings institutional services into those which sustain independence and promote choice. Thus, the success of the Neighbourhood Networks review is key to our overall strategic plans for the modernisation of older people's services.

- 3.2 A funding formula has now been devised which will ensure the equitable distribution of resources to the Neighbourhood Networks across the city, based on need rather than historical piecemeal allocations. The formula will underpin the process of procurement. An additional sum of £360k investment has been identified by ASC from 1 April 2010 to ensure that the full beneficial effects of the formula are received by all areas of the city.
- 3.3 The formal procurement exercise has been designed as a restricted process under the Council's Corporate Procurement Rules in order to encourage and facilitate the enhancement and development of local services, and preserve what is best about the Neighbourhood Networks.
- 3.4 Henceforth, services will be commissioned to deliver prescribed outcomes for service users and carers. To this end, a set of outcomes has been devised for future Neighbourhood Network services. Through consultation, these have received overall support from the organisations and the wider stakeholder community.
- 3.5 In early August 2009, a Pre-Qualification Questionnaire was sent to all 38 Neighbourhood Network Schemes to determine the appropriateness of current providers to deliver the required outcomes. After their return, a shortlist of organisations will be drawn up and invitations to tender issued. Successful organisations will be given five year contracts with the option to extend for up to three consecutive years, thereby giving organisations much needed, longer-term security of funding. In order to ensure that any TUPE mobilisation is accounted for, it is anticipated that contracts will commence from 1 October 2010.
- 3.6 The following additional resources are being organised to support the Neighbourhood Networks during the procurement period and beyond:
  - A Business Development Officer has been recruited to provide professional advice to the Schemes in order that they can fulfill the requirements of the procurement process
  - Temporary staff are being recruited to assist the Schemes with the monitoring requirements asked of them
  - A series of workshops has been designed to assist the Schemes with developing long-term sustainability of their services.
- 3.7 In July 2009, a report was taken to the Executive Board of the Council outlining all the above proposals and was approved.
- 3.8 Between October 2009 and March 2010 the formal procurement process will be enacted leading to the award of contracts (see Appendix 1 for details).

# 4.0 ASC Commissioning Response to the Independence, Wellbeing & Choice Inspection Report

4.1 The Inspection recommended the commissioning of improved information and advocacy. As a result, a review is being undertaken of all information and advocacy services currently commissioned, which commenced in August 2009. This will lead to the production of a new service specification and a subsequent procurement exercise to deliver new services in line with the requirements of 'Independence, Wellbeing and Choice'.

- 4.2 An external expert partner has been procured to generate an options appraisal for ASC on the modernisation of its buildings-based residential services, reporting to the Directorate Management Team. Part of this work has entailed a detailed analysis of the overall future need for residential and nursing care within the city based on the anticipated demographic trends and current utilization rates. Once their report has been received, which we anticipate will be in late September, a programme plan will be devised by Commissioners, in partnership with the directly provided services, to take actions forward based on agreed options, subject to the necessary consultation and approval processes. This will be reported to the Council's Executive Board in November 2009.
- 4.3 In order that directly provided services have clear service specifications, service requirements and quality assurance systems in line with Independence, Wellbeing and Choice, commissioners are currently devising and agreeing with providers new service level agreements. This will place directly provided services under broadly the same arrangements as externally commissioned services
- 4.4 Formal joint commissioning arrangements are currently being developed with NHS Leeds which are anticipated to deliver benefits in terms of value for money and more appropriately aligned and integrated services, notable examples include Homecare and Nursing Care provision.
- 4.5 A range of quality assurance systems are in development to ensure an emphasis on prevention and early intervention, producing outcomes which promote independence and the avoidance of the need for higher level support services.
- 4.6 Jointly with NHS Leeds, a more rational and planned approach to investment and market management is being developed which will facilitate the personalisation, choice and control agenda. This will involve a more robust approach to commissioning planning and strategy.
- 4.7 Where joint services exist between Health and Social Care, work will be undertaken to ensure the benefits of such synergies are maximised. For example, an Intermediate Tier commissioning strategy is currently being devised which will span both health and social care inputs to people with such needs..
- 4.8 All of the initiatives outlined above will contribute to the development of excellent commissioning services, integrated with NHS Leeds, leading to the production of high quality, outcome-based services provided in a mixed health and social care economy in Leeds.

# 5.0 Legal And Resource Implications

- 5.1 The programme of activity highlighted in this report presents challenges to all staff engaged within Commissioning, in Adult Social Care, the wider Council and within and among partners. The commissioning plan underway in relation to the Neighbourhood Network scheme provides a good example of how the capacity of those staff can be maximised by working collaboratively on a joint priority.
- 5.2 As we move to increasingly joint commissioning endeavours, we will ensure that good governance principles are maintained in relation to the activity under commission and that any use of pooled funds is managed by the appropriate legal instrument.

5.3 As has already been noted, some additional funding is likely to need to be generated to ensure that all the areas covered by the Neighbourhood Network schemes commence new contractual arrangements without experiencing detriment. Various options are being explored to ensure that the sum required can be built into the 2010/11 budget allocation.

# 6.0 Conclusions

- 6.1 The adequacy, or otherwise, of strategic commissioning of adult social care services now forms a key determinant in the overall assessment of Councils and their partners' efficacy in supporting adults in need. The activity described in this report has provided a positive starting point as public services become subject to new and more integrated external assurance processes.
- 6.2 However, this report also indicates that successfully embedding a strategic commissioning approach to improving a range of outcomes for adults will take time and require the development of new skills and expertise by those engaged in its delivery.

# 7.0 Recommendations

7.1 Members of the Scrutiny Board are asked to consider and note of the information contained in the report and its appendices.

# Background Documents referred to in this report

- 1. Our Health, Our Care, Our Say DoH
- 2. Independence, Wellbeing and Choice Inspection Report
- 3. Independence, Wellbeing and Choice Inspection Action Plan
- 4. Independence, Wellbeing and Choice DoH
- 5. Performance Framework for Care Quality Commission Feb 09
- 6. Putting People First DoH
- 7. Executive Board Report NNS July 2009.

# Appendix 1 **PROCUREMENT TIMETABLE – V14 PROJECT REF: 4092**

# Neighbourhood Networks commissioning

# (Based upon restricted procedure process for Annexe 1B service – Unknown service packaging strategy)

Task no	Activity	Responsibility	Achievement Date			
	Shortlisting stage					
21	Project brief to be Incorporated into the Pre-Qualification Questionnaire (PQQ)	Project Manager	June 2009			
22	Create technical questions for Pre-Qualification Questionnaire (PQQ) and Evaluation Model for PQQ technical questions	Project Team	June 2009			
23	Draft advertisement and agree where to be published	Project Team	July 2009			
24	Finalise PQQ and Advertise project	Project Team	By 31 July 2009			
25	Issue PQQ (Publish docs on SCMS) (Minimum of 6 weeks)	PU	By 31 July 2009			
26	Deadline for PQQ Response		16 Sept 2009			
27	Disseminate PQQ responses and evaluation criteria to evaluation panel	PU	Week Comm 21 Sept 2009			
28	Evaluation and vetting of PQQ submissions	Evaluation team / PU	21 – 30 Sept 2009			
29	Prepare and Agree Shortlist of organisations	Evaluation team / PU	By end of Sept 2009			
30	Put Project on LCC forward plan	Project manager	4 months prior to decision date			
31	Tender stage					
32	Finalise outcome based specification, tender evaluation model and criteria	Project Manager / Evaluation team /	By end of August 2009			
33	Draft Terms & Conditions applicable to Contracts	PU legal team	Early to mid Sept 2009			
34	Report to Project Board to approve tender documentation and shortlisted organisations	Project manager / project board	Week comm 5 Oct 2009			
35	Invite tenders from short listed organisations (Minimum of 6 weeks)	PU	14 October 2009			
36	Period for submission of tenders (7-8 weeks)		14 Oct – 9 Dec 2009			
37	Disseminate Tender evaluation criteria to evaluation panel	PU / Evaluation team	Early Dec 2009			
38	Place on Forward Plan (Reminder)	Project Manager				
39	Tender submission return date		9 Dec 2009			
40	Disseminate tender submissions for evaluation	PU	Week Comm 14 Dec 2009			
41	Evaluation of tender submissions / method statements	Evaluation team	By 24 December 2009			

42	Select organisations for award	Project team / Evaluation team	Early Jan 2010
43	Project Board to ratify decisions for awards	Project Board	Mid Jan 2010
	Contract award and lead in		
44	Delegated decision process for all awards – Key Decision (also to the NHS Leeds Board)	Project Manager	End of Jan to End of Feb 2010
45	Award Contracts (over 3 – 4 weeks)	Adult Social Care contracts team – contracts drafted by PU legal team	March 2010
46	Lead-in period / mobilisation period Including TUPE lead in period if TUPE was to apply		April to End of June 2010
47	Start date for Contract		01 JULY 2010
48	Review of Procurement Process		August 2010??

- Gateway review procedure not deemed necessary – Project Board is suggested to consist of Tim O'Shea (ASC), Tony Bailey (Proc unit), Mick Ward (ASC/NHS Leeds) to sign off recommendations / decisions

# - Timetable accounts for full potential of TUPE transfer of staff to apply to all existing Neighbourhood Networks

#### **Glossary of Terms and Abbreviations**

PQQ – Pre qualification Questionnaire

**PU** – Procurement Unit

**Project Team** – To be a core established from Provisional Project Team and/or other stakeholders/Panel

**SCMS** – Council's tender/contract management website (Supplier Contract Management System) **Evaluation Team** – to be derived from Project Team (Panel) This page is intentionally left blank

# Agenda Item 9



Originator: Sandra Newbould

Tel: 247 4792

Report of the Head of Scrutiny and Member Development

Scrutiny Board Adult Social Care

Date: 7<sup>th</sup> October 2009

Subject: Independence Wellbeing and Choice Inspection Action Plan: August 2009

Electoral Wards Affected:	Specific Implications For:					
	Equality and Diversity					
	Community Cohesion					
Ward Members consulted (referred to in report)	Narrowing the Gap					

# 1.0 BACKGROUND

- 1.1 The purpose of this report is to update the Adult Social Care Scrutiny Board with information relating to the performance of Adult Social Services against the action plan, formulated from the findings of the Independence Wellbeing and Choice review undertaken by CSCI.
- 1.2 On the 3rd of December the Executive Board received the Independence, Wellbeing and Choice report. Associated with the reports is an action plan defining targets for improvement by Adult Social Services in order to resolve the problems raised by the inspector. In response the Executive Board resolved that the report and associated plan be referred to Scrutiny Board (Adult Social Care) for their oversight of performance against the targets set out in the action plan.
- 1.3 This matter was brought to the Adult Social Care Scrutiny Board on the 10<sup>th</sup> of December 2008 for discussion. The board recommending that the Proposals Working Group (ASC) meet on a monthly basis to monitor overall progress of Adult Social Services performance against the objectives set out in the action plan and report directly to the Scrutiny Board. The Independence Wellbeing and Choice summary and progress reports were brought before the Proposals Working Group on the 29<sup>th</sup> September 2009.
- 1.4 One representative from the Health Scrutiny Board was initially invited to sit on the Proposals Working Group. A nominee was not present at the working group meeting.

- 1.5 Draft minutes from the Proposals Working Group 29 September 2009 are to follow as appendix 1.
- 1.6 The Independence Wellbeing and Choice Progress Report August 2009 is attached as appendix 2.

# 2.0 **RECOMMENDATIONS**

- 2.1 The Adult Social Care Scrutiny Board is asked to note the draft minutes from the Proposals Working Group and the summary and progress report for August 2009.
- 2.2 In addition, the Adult Social Care Scrutiny Board is specifically asked to:
  - 2.2.1 Consider the outcome of the August 2009 summary and progress report, commenting on any specific aspects included.
  - 2.2.2 Determine if there are any specific / further areas that require additional scrutiny by the Proposals Working Group.

#### 3.0 BACKGROUND PAPERS

None.

	Ins Period Completed Actions this Reporting Period	a Period	
2.3	Establish regular detailed quality reporting and review to:- DMT Board (monthly), Operational managers, Safeguarding Board via Performance Monitoring & Quality Assurance subgroup, Scrutiny board.	⊦.1 (a)	Create and launch a framework that maps competencies, skills and knowledge for key roles and groups in Adult Social Care in relation to safeguarding.
4.1	Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice.	24.4	A web site will be created as a central resource for all information relating to workforce development.
4.2 (a)	Agree mandatory multi-agency training programme including training sub-group to incorporate workforce leads.		
	This Period		
	Overdue Actions this Reporting Period	Period	
	Next Period Articus due for communitien by the next Demoting Derived	anorting Deriod	
4.2 (b)	Identify staff who require specific competencies and training requirements		Ensure final draft of serious case review procedure is taken through governance structures of statutory partners.
4.2 (c)	Establish training frequency for all roles and partners	2.6	Establish internal and public communication strategy to raise awareness and expectations of self directed care in current and potential service users
4.3 (a)	Monitor training via the Training and Quality Assurance subgroups.	20.3	Undertake an analysis of older peoples commissioning opportunities in consultation with older people & providers across health and social care.
5.1	Establish a risk management protocol and standard for protection of people living in vulnerable situations including partner agencies.		
	Actions commencing in the next Reporting Period	orting Period	
Pa	QA framework to incorporates analysis of risk management (as in arrangements in recommendation 2.2 and 2.3)	18.2	Communication and social marketing strategy - awareness raising and where appropriate training and with key staff including partner agencies.
je			
17	Overview		
All action delay in ( - Perform - Advocá compreh compreh - Informa booklets.	is are progressing well with some actions completed well in advance. It is becoming more and mo completing these actions on target time.Work on some actions have exceeded the original requirer rance and Quality Assurance systems are being developed and baseline agreed to ensure all serv acy review is progressing well and various methods such as service users focus groups, group inte ensive review of all advocacy providers in Leeds. tion of ASC services and other preventative services are being distributed to target service users,	jointly owned by AS ards and vigorous m iews with service user d professionals, these	re apparent that actions which are jointly owned by ASC and NHS Leeds have to go through their own clearance and approval systems which might ments. ices are provided to the set standards and vigorous monitoring systems are strengthened internally and externally with other partners. strviews with staff, individual interviews with service users, meeting with partners and advocacy providers are being utilised to ensure a potential service users, carers and professionals, these are available in variety of medium e.g fully updated Website, Newssheet for carers,
	Risks		
There ar - Partneı - Particip - Whilst v - Staff hɛ	There are some actions which might not be completed in the set target time due to: - Partners such as NHS - Leeds required to seek approval of procedures, system, protocols and joint policies through their own governance system. - Participation of all parties (service users, carers, staff and other partners) to gain comprehensive and meaningful reviews. - Whilst working to progress some actions other issues have come to light which needs to be resolved before work could be completed on some of these actions - Staff have been seconded to Swine Flu duties, this might effective the completion time of some actions.	system. ome of these actions.	
	Amendments to the Action Plan	an	
	No amendments are requested	ted	
	Guidance on RAG Reporting		
	Action completed and success criteria met.		Either the action is not on track for completion and/or there are significant risk to completion time
	Action on track but not completed.	1	Not due to commence Direction of travel

overall the direction of travel is improving. overall the direction of travel is static. overall the direction of travel is deteriorating.

-1-

<b>PROGRESS REPORT</b>
AUGUST

Risk Report		COMPLETED	COMPLETED	Сомргетер	COMPLETED	Сомргетер	Сомргетер	COMPLETED	COMPLETED	Сомрнетер	COMPLETED	COMPLETED
Report of Progress		COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED
Chief Officer: Accountable for achieving the aim		Director of Adult Social Services		Director of Adult Social Services		Director of Adult Social Services	Chief Officer (Access and Indusion) Chief Officer (Learning Disability)		Chief Officer (Access and Indusion) Chief Officer (Learning Disability)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Deputy Director	Commissioning)
Lead: Who will be responsible for delivering the work?		Dennis Holmes, Deputy Director (Strategic Commissioning)		Demis Holmes, Deputy Director (Strategic Commtssioning)		Dennis Holmes, Deputy Director (Strategic Commissioning)	Brian Ratner, Nyoka Fothegi, Jim Traynor, Phil Schofied, Jane Moran, Carabam Hefenaan Steve Bardsky (Service Delivery Managers)		Brian Ratner, Nyoka Echergall, Jum Traynor, Phil Schoffeld, Jane Phil Schoffeld, Jane Phil Schoffeld, Jane Phil Schoffeld, Jane Referman, Steve Bardsloy Hillary Paxton Hilary Paxton (Phead of Adutt Safeguarding).	Graham Sephton (Deputy HR Manager)	Stuart Cameron - Strickland	(Head of Performance)
uccess Criteria: How will you know that the action as achieved its intended aim? Ie, task complete, easures in place.	plemented where necessary	All statutory agencies formally committed via written Memorandum of Understanding (MOU) which is signed by all partners	Safacularding Partnarshin Roard and sub ground	eurogene an ery enterprised and the work of seven provide the government be nature and monitor that all relevant agencies and staff are equipped to steguard vulnerable adults across Leeds. Improvements to be measured by the QA sub-group. Baseline & largets to be established.	Head of Adult Safeguarding is jointly appointed.	All key stages of the Adult Safeguarding plan 2008/88 are completed & plan for 09/10 published and actioned.	All staff are aware of and understand expectations regarding the safegurent procedures and the need for effective outcomes evidenced via audit of enquiries post Sept 08 by independent auditor.	Independent Audit report defines further action required and Chief officer action with fieldwork staff to embed requirements	Casework audit shows that fieldwork staff are being effectively supervised and this is evidenced in case file notes in relation to safeguarding casework	All fieldwork teams have attended a training session on roles & responsbillites in relation to safeguarding by the end of the year.	Audit report shows improved standard of practice compared with inspection findings.	Establishes a baseline of current practice.
Actual Finish	plans devised and imp	Nov-08	Nov-08	Nov-08	Jan-09	60-Inf	Dec-08	Mar-09	Jan-09	Dec-08	Mar-09	Mar-09
Plan Finish	plans devi	Nov-08	Nov-08	Nov-08	Jan-09	Jan-10	Dec-08	Mar-09	Jan-09	Dec-08	Dec-08	Dec-08
Plan Start	orotection	Sep-08	Sep-08	Sep-08	Oct-08	Jan-09	Sep-08 Dec-08		Oct-08	Oct-08	Oct-08	Oct-08
This Month RAG	etings and I											
Last Month RAG	d, strategy me											
Action	Recommendation 1: The Council should urgently ensure that concerns are investigated, strategy meetings and protection	Meeting of Director of Adult Social Services, Chair of Safeguarding Board, Partner Executive Directors and other Officers to secure the commitment to the rapid development of local multi-agency safeguarding		The TOR of the Adult Safeguarding Panneship Board are re-withen and agreed to reflect current national best practice requirements in safeguarding vulnerable adult arrangements across Leeds.		A Head of Safeguarding appointed with partners to drive and support the boards work.	Letter to all Service Delivery Managers and team managers outlining requirements in teation to current safeguarding practice to be cascaded and managed via the line management structure.		Roll out to fieldwork staff a supervision checklist as an aide memoire, including key issues for frontime managers to consider in supervision in relation to safeguarding practice.	Each social work team has undertaken a workshop training session on roles and responsibilities in relation to safeguarding.	Review 20 sampled safeguarding cases by external consultant to ascertain montess in	improvement of standards.
Aim/Outcome	mendation 1: The Council should urg	Multi-Agency arrangements for C Safeguarding meet national standards and protect vulnerable adults.		T Multi-Agency arrangements for Safeguarding meet national standards and protect vulnerable adults.		eadership of Adult Safeguarding Soard is effective and arrangements ensure that vulnerable adults are safeguarded.	at the regarded with the delivery of to be action to safeguard unlerable adults are provided with	immediate advice on minimum b standards of practice	Management action ensures that from the management quality assurance is effective in supporting is good practice	Frontline staff are equipped to safeguard vulnerable adults and have w competencies to do so effectively.	ken & people in	Leeds are being effectively safeguarded
	Recom	1.1		1.2		 Г	age 18		1.5	1.6	17	

Page 2

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Final Fund         Actual Success Crient, Front Min and Min Process and Process of Restructured and Pro- Lanced         Description Process and Process and P	Risk Report	COMPLETED		COMPLETED	COMPLETED			COMPLETED	COMPLETED	COMPLETED	COMPLETED					
Phin         Actual Finan         Actual Buscress Criteria: Finan         Actual Buscress Criteria: Finan         Actual Buscress Finance F	Report of Progress	COMPLETED	Baseline agreed by the DMT Performance Board on 30.07.09. X-ref 2.12.3 and 2.4 Audit process is being decipeed by Head of Safeguarding, Senior Practitioners and Performance Manager. Monitoring process has been established on a monthly bases.	COMPLETED	COMPLETED		Initial work done to develop Adult Social Care implementation of multi-agency Safeguarding procedure. Second Audit planned under quarterly audit scheduled Te nefort IoMT in O.C. Te nefor closing date 15.0903, with appointment in O.C. The work is being developed beyond the action initial target. Quality Assurance Framework and practice standards to incorporate Audit tool are being developed.	COMPLETED	COMPLETED	COMPLETED	COMPLETED	Audit Report presented to DMT in July. OA Manager met with Storks to discuss the finding and casacide the information to Team Managers. It use the finding to enhance their practices. This report is also being discussed with Senior Practitioners and Independent Reviewing Officers to make them aware of the safeguarding issues. Audit Report will be presented and discussed at the Safeguarding Board in October '09.	X-ref 2.1	X-ref 2.1		
Finan         Jun-09         Feb-09         Actual           Jun-09         Jun-09         A         Actual           Jun-09         Jun-09         A         Actual           Apr-09         Apr-09         A         A           Apr-09         Apr-09         A         A           Bec-09         A         A         A           Apr-09         A         A         A           Apr-09         A         A         A           Apr-09         A         A         A           Apr-09         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A	<b>Chief Officer:</b> Accountable for achieving the aim	Chief Officer (Access and	Inclusion) Chief Officer (Learning Disability)		Deputy Director (Strategic Commissioning)	lerts.	Deputy Director (Strategic Commissioning)	Deputy Director (Strategic	Commissioning)			Deputy Director Carategic Commissioning)	Chief Officer (Access and	Inclusion) Chief Officer (Learning Disability)		
Finan         Jun-09         Feb-09         Actual           Jun-09         Jun-09         A         Actual           Jun-09         Jun-09         A         Actual           Apr-09         Apr-09         A         A           Apr-09         Apr-09         A         A           Bec-09         A         A         A           Apr-09         A         A         A           Apr-09         A         A         A           Apr-09         A         A         A           Apr-09         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A         A         A           A         A	Lead: Who will be responsible for delivering the work?	John Lennon, Chief Officer (Access and Inclusion) Michele Tynan Chief Officer (Learning Disability)	Hilary Paxton (Head of Adult Safeguarding)	Hilary Paxton (Head of Adult Safeguarding)	Andrew Watson (Head of Support Services)	ng to adult safeguarding a	Stuart Cameron-Strickland (Head of Performance) Richtard Graham (Quality Assurance Manager)	Stuart Cameron-Strickland (Head of Performance) Richard Graham	(Quality Assurance Manager)		Stuart Cameron-Strickland	(riead or henomance) Richard Graham (Quality Assurance Manager)	Richard Graham (Quality Assurance Manager) Brian Ratner, Nyoka Fothergill, Jim Traynor,	Phil Schofield, Jane Moran, Graham Heffernan, Steve Bardsley(Service Delivery Managers/Hilary Paxton (Head of Service- Adult Safeguarding).		
Plan         Actual           Jan-09         Feb-09           Jan-09         Feb-09           Jan-09         Feb-08           Jun-09         Jun-09           Apr-09         Mar-09           Apr-09         Apr-09           Apr-09         Apr-09           Dec-09         Aug-09           Dec-09         Aug-09	uccess Criteria: How will you know that the action as achieved its intended aim? le, task complete, neasures in place.	Additional specialist resources are in place to support existing fieldwork in ensuring that vulnerable roluts are safeguarded.	-uture monitoring demonstrates improved outcomes or people. Baseline measures to be established.	Adritional specialist resources are in place to support existing fieldwork in ensuring that vulnerable noutis are safeguarded.	-uure monitoring demonstrates improved outcomes or people. Baseline measures to be established	recording are implemented routinely in respond	A clear basis for measuring and managing enformance is established which will demonstrate est practice and outcomes for service users and carers.	<ul> <li>systematic approach to assuring safeguarding practice is established informed by independent syperities in safeguarding practice.</li> </ul>	Compliance with practice standards evidenced. A aseline needs to be established.	A monthly schedule for quality reports and action blans established and monitoring of progress ongoing.	aselines are established from which to measure practice improvement.	mprovements in practice and outcomes for people tre evidenced by the reports.	Fontline managers undertake audits and provide uarterly report to DMT performance board. (see 2.3)	aselines for performance established and reports thou improved performance.		
Amelonican         Action         Let Monit         Part Monit         Part         Part           1         Amoluciona         Action         Let Monit         Part         Part         Part           1         Provide Structures are informed to introphytic processo         Examin () since Part Monit         Part         Part         Part           1         Bernon Action and Part Part         Examin () since Part Part         Examin () since Part Part Part         Part         Part         Part           1         Bernon Action and Part Part         Examin () since Part Part Part Part Part Part Part Part						actice and										
International         Action         Bar         Internation           AmOLICIONIA         AmOLICIONIA         Action         Bar	Plan Finish	Jan-09	60-unf	Jan-09	60-unr	dards of pr	60-unr	Mar 09	Mar-09	Apr-09	Apr-09		Dec-09	Dec-09		
Interaction         Action         Month           Amountee are enriceded to access structures are enriceded to process and and accidence and and accidence and access and access and access and process and access and access and access access are requered and access and access and access and access access are requered and access access are requered and access access and access and access access are requered and access access are requered and access access and access and access access are requered and access access and access and access access and access and access access and access and access and access and access are requered and access and access and access are access and access and access and access are access are access are access and access are access are access and access are access are access are access are access are access are access are access are access are accest access are access are acconding actes are accest	Plan Start				Jan-09	mum stan ub-group.		Oct-08	Oct-08				Oct-08			
Lones explored         Action           AinDutionen         Action           Janobuson         Action           Laboración         Action           Laboración         Action           Laboración         Action           Laboración         Action           Laboración         Action           Laboración         Establish 10 Senice Precisioner posts with production           Laboración         Establish 10 Senice Precisioner posts with production           Laboración         Establish 10 Senice Precisioner processes an implementation           Laboración         Establish 10 Senice Precisioner processes an implementation           Laboración         Establish 10 Senice Precisione and strategy meetings.           Laboración         Establish 10 Senice Precisione and strategy meetings.           Laboración         Establish 10 Senice Faboración Senice Action antegeneration and strategy meetings.           Laboración         Establish proches antiones and strategy meetings.           Laboración and indictation and strategy meetings.         Establish proches antiones and strategy meetings.           Laboración and strategy meetings.         Establish proches antiones and strategy meetings.           Laboración and strategy meetings.         Establish proches antiones and strategy meetings.           Laboración and strategy meetings.	This Month RAG							ure that mini Assurance si							4	, )
AlmOlutions         Action           AlmOlutions         Annolutions         Action           Almolutions         Establish 10 Solid Praditions foots with practice         Action           Belowck Shuctures are reinforced to cards, support and monitor quality of practice         Establish 10 Solid Praditions foots with practice         Action           Belowck Shuctures are reinforced to cards, support and monitor quality of practice         Establish 10 Solid Practitions roots with thront lime audit social care teams.         Action           Belowck Shuctures are indications         Establish appropriate administrative support on the out lime audit social care teams.         Establish appropriate administrative support to these poiss.         Establish practice and the out the audit social care teams.           Becommendation Z. The Aduit Safeguarding Science and afraetagy meetings.         Establish practice and the out the audit social care teams.           Recommendation Z. The Aduit Safeguarding Beart should strangly meetings.         Establish practice and the out the audit social care teams.           Recommendation Z. The Aduit Safeguarding Beart should strangly meetings.         Establish practice and transport aduit solid solid solid solid solid solid solid solid solid transport aduit solid solid transport aduit solid	Last Month RAG					ments to ensi f the Quality /						Ţ	4			
AimOutcome       AimOutcome       1.8       Fieldwork Structures are reinforced to practice       1.9       Processes are implemented and practice       1.9       Expectations about the quality of practice       2.1       Expectations about the quality of practice       2.2       Processes are directive safeguarding these commendation f. The Council should str practice       2.3       Processes are developed and ensure timely assurance       2.4       Frontline quality Assurance competitions and stateholders. Services can be expectations. Services can be expectations.       2.4       Frontline quality Assurance operating standards and stateholders. Services can be expectations.       2.4       Frontline quality Assurance operations.       Processes are developed and stateuration and stateuration and stateuration and stateuration and burnerable adults.		Establish 10 Senior Practitioner posts with associated administrative support to creach	support, audit and assure quality of practice concentrating initially on safeguarding work in front line adult social care teams.	Establish 3 independent specialist chairs in the city to independently manage all case conferences and strategy meetings.	Establish appropriate administrative support to these posts.	engthen frontline quality assurance arrange i Board should prioritise the development o	Establish practice standards and competencies in relation to: - adult saleguarding practice. - interagency work - communications, recording and information sharing with partner genecies. case management: referral, assessment, care planning and review.	Specialist consultant audits practice standards to inform and establish an ASC	independent quality assurance systems (see 1.7)		Establish regular detailed quality reporting and review to: - DMT Bead (monthly) - Operational managers	Saleguarding Board via Performance Montorring & Quality Assumance subgroup - Scrutiny band - Scrutiny band - Satting out the effectiveness of intervention and achievement of standards.		Develop processes or hear me audis against an agreed checklist by frontline practitioners and managers:		
	Aim/Outcome					nendation 2: The Council should stre nendation 6: The Adult Safeguarding	Expectations about the quality of rations reflect those as reavice users and stakeholders. Services can be ind stakeholders. Services can be expectations and services are committed to meeting the committed to committed to co									
						Recomr Recomn		ige 1	Ĵ.							

International and and the particular and and and and and and and and and and	icial Ca													
Fund         Actual Fund         Decretes Cretent: iforw will you how fund the action feature and are determed at microard at microard at microard at microard at microard presents of the microard at microard at microard at microard and are determed at microard at microard at a determed at a determed at a determed at a determed at a determed at a determed	Adult Social Ca	Risk Report		COMPLETED				COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED		
Plan         Actual Final         Success Criteria: How will you know that the addin Bascarbieved its interaded aim? P, kiask complete.         Leed: Who will be reasonastic to the developing provessible for data strateging. Jun Transnor, interaction of the second aim of the second of the second provessible for data strateging. Jun Transnor, and are orthogones are able to operate to minimum standard and second of a second provessible for data scheduler and are orthogones.         Easternes: Hyolosi provessible for data strateging. Jun Transnor, interaction of the second of the second provessible for data strateging. Jun Transnor, and are orthogones are able to operate to minimum standard and second of a second provessible for data strateginated (a data scheduler).         Extend Scheduler (second bin Scheduler).         Extend for able of data scheduler (second bin Scheduler).           Jun-09		Report of Progress	Series of meetings are being held with approximately 14 team managers attending each session. This will provide an opportunity for the managers to evidence atta care packages are creative, personalised, informed and contributes to sateguarding awareness and prevention. These sessions are adopting a Action learning approach where good practice is shared, discussed and forward actions are agreed.	COMPLETED	Audit Report will be presented and discussed at the Safeguarding Board in October09			COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	Work continuing to establish baselines and targets.	Service User Reference Group, Carer Reference Group, and Third Sector Reference Group have met in Group, and Third Sector Reference Group have met in durati secone the work and commence work on draft Terms of Reference (TOR), Progress Report will be presented to Safeguarding Board in Oct 09.
Pans         Actual Featural Freids         Success Criteria: <i>How will you know that the action besonsible for addiventing</i> <i>Pansaria: The place.</i> Lends           Jun-Ols         Jun-Ols         Success Criteria: <i>How will you know that the action pressors in place.</i> Exaits Returned in the additional for addiventing and a centering in the interpret and a centering in the interpret and a centering in the interpret add a centering in the interpret conting arrangements is approved by the safeguarding Partnership board.         Exaits Returned Mansgesi Man		<b>Chief Officer:</b> Accountable for achieving the aim		Deputy Director (Strategic Commissioning)	Deputy Director (Strategic Commissioning)			Deputy Director (Strategic	Commissioning)		Deputy Director (Strategic Commissioning)		Chief Officer (Resources)	Deputy Director (Strategic Commissioning)
Finan         Actual         Success Criteria: How will you know that the action has achieved 1s interded aim? Ie, task complete, has achieved 1s interded aim? Ie, task complete, has achieved 1s interded aim? Ie, task complete, has achieved the operate to minimum standard over or cimerasonery volving. This is evidenced in over or cimerasoner or cimerasoners to be established (see 1.7).           DecOB         Mar-OB         A core group with TOR defining governance and over or cimerasoners to be established (see 1.7).           Jun-OB         Jun-OB         Procedures and agencies.           Jun-OB         DecOB         Procedures and agencies.           Jun-OB         DecOB         Procodures and agencies.           Jun-OB         Jun-OB         Procodures and agencies.           Jun-OB         Jun-OB         Procodures ratified by all partners and agencies.           Jun-OB         Jun-OB         Procodures ratified by all partners and agencies.           Jun-OB         Jun-OB         Procodures ratified by all partners and agencies.           Jun-OB         Jun-OB         Protocools are in place and agreed			Brian Ratner, Nyoka Fothergill, Jim Traynor, Pall Schofield, Jane Moran, Graham Heffeman, Steve Bardsley (Service Delivery Manager) Hilary Paxton (Head of Adult Safeguarding). Ratard Graham (Ruality Assurance Manager)	Hilary Paxton (Head of Adult Safeguarding) Stuart Cameron Strickland (Head of Performance)	Hilary Paxton (Head of Service-Adult Safeguarding)			Hilary Paxton (Haad of Adult	Safeguarding)		Hilary Paxton (Head of Adult Safeguarding)	Salas Colles	(Communications Manager)	Hilary Paxton (Head of Service Adult Safeguarding)
Flish         Actual           Flish         Flish           Jun-09         Jun-09           Jun-09         Jun-09           Jun-09         Jun-09           Jun-09         Jun-09           Jun-09         Jun-09           Jun-09         Jun-09			alanagers are able to operate to minimum standards and are developing more creative, personalised vays of intergency working. This is evidenced in 2A of crase work. Baseline measures to be stablished (see 1.7)		udit report completed and recommendations pproved by Safeguarding Partnership board.			Procedures agreed by partners and agencies.	procedures ratified by all partners and agencies.	Protocols are in place and agreed	QA of case files evidence effective use of protocols baseline and largets to be developed and agreed.	Marketing strategy is implemented	burveys and quality assurance establish baseline and targets relating to outcome measures.	Charter is developed by Adult Safeguarding Partnership board sub-group and ratified by board by Jan 2010 for adoption by partners
											Mar-09			
		Plan Finish	60-unr	Dec-08	Jun-09			Dec-08	Dec 09	Jan-09	June 09	60-unf	Jan 10	Jan 10
Lots City Council         AntroDuterome         AntroDuterone         AntroDuterome         Antr		Plan Start	Jan 09	Jul-08	Oct-08	at these:		Oct 07	Dec 08	Oct-08		Oct-08	90 unf	Jun 09
Induction of an order of that came and and contribution of an order of that came behaviored and contribution of an order of that came behaviored and contribution of an order of that came and and contribution of an order of that came behaviored and contribution of an order of that came behaviored and contribution of an order of that came and and contribution of an order of that came behaviored and contribution of an order of that came behaviored and contribution of an order of that came and and contribution of an order of that came behaviored and contribution of an order of that came of the perimeters in self-guarding order of the setablish a form management and on and order of an order of that came of the self-guarding order of the perimeters in the perimeters in the self-guarding order of the perimeters in the perimeters in the perimeters in the perimeters in the perimeters in the perimeters in the perimeters in the managements for the perimeters in the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the managements for a self-guarding order of the perimeters in the perimeters in the management of the perimete		This Month RAG				s, ensuring th							Û	↓
Amounterone         Action           Amounterone         Amounterone         Action           Amounterone         Amounterone         Action           Amounterone         Announterone         Action           Amounterone         Announterone         Action           Amounterone         Betablish quality circle for managers - stepsenation         Action           Steparation         Betablish quality circle for managers - stepsenation         Betablish quality circle for managers - stepsenation           Steparation         Betablish quality circle for managers - stepsenation         Betablish quality circle for managers - stepsenation           Steparation         Betablish quality circle for managers - stepsenation         Betablish quality circle for managers - stepsenation           Steparation         Betablish quality circle for managers - stepsenation         Betablish quality circle for managers - stepsenation           Steparation         Betablish and outcomers and betablish and outcomers and be atom and a grant decommentation on the provenance arrangements bit is stepuarding partnership.         Betablish and outcomers and betablish and outcomers and be atom and a grant outcomers and be atom a		Last Month RAG				/ed procedure	ractice.						Ţ	
Leeds City Council       AimDutcome       Aimoutcome       Aimoutcome       Aimoutcome       Aimoutcome       Aimoutcome       Aimoutcome       Aimoutcome       Aimoutcome		Action	Establish quality circle for managers - sharing learning -			rtners should agree and implement impro ion on staff from all agencies.	toring processes that ensure consistent p	Stage 1: Revise multi-agency safeguarding procedures.	Stage 2: Ratify procedures through all agencies governance processes	Acrea protocols for Inint Working with Adult	Social Care across partner agencies, and with particular regard to identified with particular regard to identified witherability, i.e., homekess unit, community safety, domestic violence leads, etc.			Partners, agencies, service users, carers an public have information that is accurate, accessible & appropriate in terms of safeguarding standards & are able to take action to shape polity and hold the partnership to account.
	Leeds City Council	Aim/Outcome			ce	nendation 3: The Council and its par t specific and monitorable expectati	nents a system of compliance monit							arding Adults
						Recomn - Set out	- Implen	Pấg	<del>≝ 20</del>			<u> </u>		

Adult Social Ca															
	Risk Report		COMPLETED	COMPLETED									COMPLEIEU	COMPLETED	COMPLETED
	Report of Progress		COMPLETED	COMPLETED	Report outlining progress was shared with Safeguarding Board in August, Agreement in principle by parthers regarding mandatory training framework. Parthers maching ker roles, and arreed that undate	report will be taken to Safeguarding Board in mid October to outline way forward.	File audit tool and initial report base upon audit work underfaste adming the development of the tool had gone to bMT on S0th July09. The File Audit Tool has been approved. This will provide the start of ongoing monitoming and fed back into training plan and requirement.	Figures for Car 1 of 09/10 show that D5% of respondents feel safe in their own homes during the day. 92.5% of respondents feel safe in their own home at night.	Figures for Orr 1 of 09/10 show that 95% of respondents feel safe in their own homes during the day. 92.5% of respondents feel safe in their own home at night.		Work progressing on risk assessment policy, procedures and bols by the risk enablement group. Draft version of the risk assessment policy has been produced.		COMPLETED	COMPLETED	COMPLETED
	<b>Chief Officer:</b> Accountable for achieving the aim	feguarding proces	Deputy Director (Strategic Commissioning)		Deputy Director (Strategic Commissioning)			Deputy Director (Strategic Commissioning)			Chief Officer (Access and Indusion) Chief officer (Learning Disability)			Discotor of Adult	Social Services
	Lead: Who will be responsible for delivering the work?	c roles within the adult sat	Hilary Paxton (Head of Adult Safeguarding) Graham Sephton (Deputy Head of HR)		Hilary Paxton (Head of Adult Safeguarding) Graham Sephton (Deputy Head of HR)		Hilary Paxton (Head of Adult Safeguarding)	Stuart Carneron Strickland (Head of Performance) Richard Graham (Quality Assurance Manager)	Stuart Cameron Strickland (Head of Performance) Richard Graham (Quality Assurance Manager)	in place.	Hilary Paxton Hilary Paxton (Head of Adult Safeguarding) Safeguarding) (Access & Inclusion) Chief Officer Chief Officer (Learning Disability),	gencies.		Donth, Director	(Strategic Commissionling)
	Success Criteria: How will you know that the action has achieved its intended aim? le, task complete, measures in place.	agreed set of minimum competencies from specific roles within the adult safeguarding process	Establish and fund a plan which demonstrates a multi-agency comminent and the facts cross agency training requirements resulting in the effective safeguarding of adults across Leeds		Interagency strategy for safeguarding training established. A rolling programme is implemented and targets for numbers to be trained across agencies are met. Targets to be defined and agreed. X-ref 4.1		Establish baseline and agree targets for training key staff across agencies based upont 41, which vedences that all from the internal and a karnal staff are aware of how to identify vulnerable adults and respond appropriately to concerns. User experience.	Yr 1: 90% of respondents feel safe.	Yr 2: 95% of respondents feel safe.	ty and that appropriate contingency plans are put	All witherable people subject to a safeguarding enquiry are consistently assessed for risk	ng performance issues and learning with partner agencies.	<ol> <li>Ine procedure is formally agreed by the board</li> </ol>	2/ The procedure is formally adopted within all partner agencies.	Future arrangements for the review of potentially serious cases & criteria are managed within the erious review sub-group of the Adult Safeguarding Partneship Board (see Rec T/2)
	Actual Finish	nt with the a	Aug-09	Aug-09						vulnerabili		<mark>is for sharii</mark> Agreed	Sept 08		Sep-08
	Plan Finish	levelopmer	May-09	May-09	Sep 09	Sep 09	Sep-09	Sep-09	Mar 10	of ongoing	00 6b-00 8	mechanisms	Dec-U8		Sep 09
	Plan Start	l link this c	Oct-08	Jan-09	Apr 09	Apr 09	Apr-09	Apr-09	Apr-09	situations	Dec-08		80-INC		Sep 08
	This Month RAG	trategy and			¢	$\ominus$		Ţ		ple live in		review pro			
	Last Month RAG	ency training s	Ĵ	Ĵ	ŧ	Ţ	Ţ	Į	<b>—</b>	ors where peo	-	safeguarding serious case review process and			
	Action	Recommendation 4: The Council and partners should progress the emerging multi-agency training strategy and link this development with the a	Scope out at a high level training requirements and secure resources across agencies. See 1.6, 1.7 and 1.8 above	Agree mandatory multi-agency training programme including training sub-group to incorporate workforce leads.	Identity staff who require specific competencies and training requirements	Establish training frequency for all roles and partners		Monitor training via the Training and Quality Assurance subgroups.		sure that staff are alert to potential risk factors where people live in situations of ongoing	Establish a risk management protocol and stardard for protection of people living in vulnerable situations including partner agencies - A) Differentiate risk, monitor and manage his. B) Establish an information protocol around risk and vulnerability C) Establish agreed process and standard for contingency planning.	Board should agree an adult	Ensure final draft of serious case review	procedure is agreed by the board	Ensure final draft of serious case review procedure is taken through governance structures of statutory partners.
Leeds City Council	Aim/Outcome	mendation 4: The Council and partne	Everyone involved in safeguarding tunderstands the partersthip's value and has the knowledge and skills to add has the forowledge and skills to deliver effective safeguarding practice		Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice	, <u></u>		Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice		mendation 5: The Council should ens	inaged consistently policies and staff to mitigate raks n to safeguarding	Recommendation 7: The Adult Safeguarding	E		learning and dissemination of good practice
		Recom	4.1		4.2			4.3	Fage 2	Recom	ي م	Recom			7.1

Adult Social Care

Risk Report				COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED
Report of Progress	One serious case review has been reported, to the pinetory of Auth Scoils che and will be formally reported to the Safeguarding Board in August. The second serious case review is due to be completed by Oct09. Delay in getting information from other agencies has now being resolved.	Learning from the serious case review report will be fed into the procedural review as planned. This review is underway, and report will be presented in Oct09.	rding arrangements.	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED	COMPLETED
Chief Officer: Accountable for achieving the aim	Deputy Director	commissioning)	ce of adult safegua	Director of Adult Social Services	Deputy Director (Strategic Commissioning)		Denutry Director	(Strategic Commissioning)		Deputy Director (Strategic Commissioning)
Lead: Who will be responsible for delivering the work?	Hilary Paxton (Head of Adult	saleguarding)	tanding of the performanc	Director of Adult Social Services	Chilef Executives/ Officers of safeguarding partners			Chief Executives/ Officers of safeguarding partners		Adult Safeguarding Board
Success Criteria: How will you know that the action that action that active of its intended aim? le, task complete, it measures in place.	A pilot of two serious case reviews will have been conducted	Findings and action reported in report to the board	Recommendation 8: The safeguarding board should strengthen its leadership role and processes for informing and reporting practice issues to elected members. Recommendation 25: The Council and its partners should strengthen governance arrangements so that elected members and relevant Chief Officers in partner organisations have a clear understanding of the performance of adult safeguarding arrangements.	Accountability for safeguarding vulnerable adults in Leeds is clear, transparent and unambiguous to partners and other stakeholders	Revised terms of reference adopted and ratified by statutory partners	Annual audits & good governance review, all sub groups have work plans and deliver them.	Annual Report is produced in May accompanied by a business plan for the following year.	Xily Performance reports are available for examination by agency and Local Government overview and scrutiny arrangements. (see Rec 2.3).	The work of the board is open to challenge by established group of service users and their carers.	Annual Report contains details of volume of activity and quality of outcomes from all partners. Performance improvement and learning points are incorporated into future action plans.
Actual S Finish <i>n</i>	SC A		e issues to it Chief Offi	Oct 08	Nov 08	4 0	40	May-09 ee	_ <b>⊢ o</b>	Jun-09
Plan Finish	May-09	May-09	ng practice	Oct 08	Nov-08			May-09		May-09
Plan Start	Nov-08	Mar 09	and report members	Sept 08	Jun-08			Sep-08		Dec-08
This Month RAG	Ĵ	Ĵ	informing hat elected							
Last Month RAG	Ĵ	ļ	processes for gements so t							
Action	Safeguarding Partnership Board conducts sendus case reviews using new procedures and revise procedures in line with learning. (See recommendations 4 & 6).		Recommendation 8: The safeguarding board should strengthen its leadership role and processes for informing and reporting practice issues to el Recommendation 25: The Council and its partners should strengthen governance arrangements so that elected members and relevant Chief Office	Accountability arrangements for Adult Safeguarding are established through a distinct format delegation and elegations than between the Director of Adult Social Services and The Chair of the Safeguarding Board	Safeguarding Board approves revised terms of reference and membership		The work of the Board is reported through the governance structures of the respective partners. Fletded members will receive	reports through the Address and Social Care Scrutiny Board. The reports to include progress against the plan, the business plan and work programme for the following year.		The annual report is ratified by the governance structures of safeguarding partness including the Executive Board of the Council and its Overview and Scrutiny Board(s).
Aim/Outcome	The serious care review process is the elements of the serious care review process is the effective of the participation of the option of the serion set of the option of		ommendation 8: The safeguarding boar mmendation 25: The Council and its pa	Leadership of Adult Safeguarding Board is effective in ensuring delivery of appropriate safeguarding activity & outcomes for people.	Leadership of Adult Safeguarding Board is effective in ensuring delivery 1 of appropriate safeguarding activity & o outcomes for people.		s nts of			Performance of the board and its Bubgroups meets the requirements of it subgroups meets the requirements of the Good Governance Standard in 10 Public Services adopted by the partnership.

Adult Social Care

Leeds City Council

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Adult Social Ca	Risk Report				COMPLETED	COMPLETED		
	Report of Progress			<ol> <li>.52 customers have FAS allocations, 32 completed support bians. 21 agreed and 11 customers are now in receipt of their personal budget.</li> <li>.5. Shar there have been no referrals for a personal budget as an outcome of the current reviews in day services.</li> <li>2. Peer support website to be completed and live by the end of Sopermer.</li> <li>3. Peer support website to be presented to DMT and Orgen remm initial and onger remm options to budget lor assessment in initial and onger vide integrated assessment group.</li> <li>Paters on care management implications considered by DMT and training delivery plan agreed.</li> </ol>	COMPLETED	COMPLETED	Measurable standards for outcome focused assessment and care planning which include respect for the person and timeliness have been communicated to all staff and are pareng used aveloned by measures including targets 08/09; 9.95% Gurvey respondents report that the assessing assessment proceas 2.97% Survey respondents report that the assessing SW is courteous and langels to be established in relation to quality factors and self funders.	<ol> <li>DMT agreed proposed assessment processes for SDS, sharing time account legal obligations, impegation with SAP and carer's assessments. This will include a 2 phase approach with a brybrid' of the SDAQ and Essycare obcumentation being used for the initial rol out of SDS and longer term work to be undertaken through the integrated assessment to iterarity a mal process, consistent with SAP, which all partners sign process, consistent with SAP, which all partners sign to DT. The decisions arking will be presented to the socurity working group on 18.0.0.0 accurity working group on 18.0.0.0 accurity working group on 18.0.00 accurity working a streamined process insolated process to constact including providing direct access to prior to contact, including providing direct access to prior to contact, including providing direct access to prior to contact. Including providing direct access to an the process has commenced to appoint 3 TMs to lead on this work with Customer Services and the project team.</li> </ol>
	Chief Officer: Accountable for achieving the aim			Chief Officer (Access and utusion) Chief Officer (Learning Disability)	Chief Officer (Access and Indusion) Chief Officer (Learning Disability)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Chief Officer (Access and (Access and (Indusion) Chief Officer (Learning Disability)	Deputy Director (Partnerships & Organisational Effectivenes)
	Lead: Who will be responsible for delivering the work?			Jernime Sparks (Business Change Project Manager)	Jenima Sparks (Business Change Project Manager)	Jemima Sparks (Business Change Project Manager)	Jane Moran, Jane Moran, Edhan Ratner, Nyoka Fothergili, Jim Traynor, Phil Schoeled, Graham Heffenan, Steve Bardisey (Service Bardisey Managers)	Jemina Sparks. Programme Manager
	<b>Success Criteria:</b> How will you know that the action has achieved its intended aim? le, task complete, measures in place.		ized	30% of services are delivered through individual budges. Satisfactor and outcomes surveys show proceased levels of choice and control including increased opportunities for self-assessment.	Frontline staff understand and apply to practice the principles of personalisation as evidenced by measures of 1. Delivery 1. Delivery 2. / Feedback Delivery 1. D	Leeds has joined the 'in Control, Programme	Measurable standards for outcome focused assessment and care planning which include respect for the person and timeliness have been communicated to all staff and a use being used as videmced by measures incluing targets 08,059. - 65% offort people assessed in 4 weeks - 90% Survey respondents happy with the assessment proces - 90% Survey respondents report that the assessing XI is courteous and hapful - Further baselines and largets to be established in relation to quality factors and self funders.	All agencies and professionals using or contributing to SAP focus on outcome based assessment and care planning. Evidenced by the file audit process.
	Actual Finish		always se		Mar-09	Oct 08		
	Plan Finish		ments are	Mar-11	Mar-09	Mar 09	Aug-09	Mar-10
	Plan Start		direct pay	Apr-08	Oct-08	Oct-08	Dec-08	Dec-08
	This Month RAG		ans utilising	-			<b>_</b>	
	Last Month RAG	sed assessments. ocused care planning.	ualised care pl	$\leftarrow$				
	Action	Recommendation 9: The Council should ensure more inclusive and individualised assessments. Recommendation 10: The Council should promote more ambitious, outcome focused care planning.	Recommendation 12: The Council should ensure that opportunities to promote individualised care plans utilising direct payments are always sei	Progressing action plans for whole systems transformation through Self Directed Care Programe. Progress reviewed by DMT (SU involvement at Board, Team & workshop involvement at Board, Team & workshop	Continuing process of workshops communicating to practitioners the vision of personalisation and setting challenges for individuals around IB & DP and developing awareness.	Join 'In Control' Programme.	Agree measurable standards for outcome focused assessments and care planning and communicate to starf. These indude: 11 Timeliness 2 Choice and Control 3 Respect for the person including who fund their own care and support. N 13 0% 66 social care clients receiving self directed support. The target for 2009/10 is 15%.	Ensure Shgle Assessment Approach (SAP) is in tine with an enablement approach and personalisation is embedded in all policies. procedures, icols and methoology relating to assessments.
Leeds City Council	Aim/Outcome	nmendation 9: The Council should ensure more inclusive and individual nmendation 10: The Council should promote more ambitious, outcome f	mendation 12: The Council should e	Personalised services deliver greater droice and control as evidenced in delivery and feedback	Personalised services deliver greater choice and control as evidenced in delivery and feedback.	Dersonalsed services deliver greater Dersonalsed services deliver greater S.3Drhoice and control as evidenced in Contentivery and feedback	Amost all service users report that they have accurate accessible information and that care processes are undertaken with respect to the person, in a timply memor, the range of services matpreferences and they consider they are more in control	Assessments and care plan are inclusive, individual, ambitious and outcome focused.
		Recon Recon	Recon	5.	9.2	1 gyc 1	¢.	in o

Adult Social C					
Adult	Risk Report				
	Report of Progress	20,000 Carers booklets and 24,000 A-Zs were widely distributed across all possible sites in Leads during 08/00. There is a new Personal Budget Helpline number, the trial of this has been laurched on 01.06.09. Additional questions about information being added to regular survey. 78% survey respondents report that information was adequate.	Currently mapping the existing advocacy services across the city. X-ref to 13.1	Service user questionnaires being further developed to address the information meds. Addinat blucing developed and distributed about Set Directed Support. 41% survey respondents reported that they were offered DP.	A number of risk assessment bols have been identified and current being evaluated. Group meeings on 15,09,09 and 11,009 to finalise the good practice guidelines and complete this action. X-ref 9,7
	<b>Chief Officer:</b> Accountable for achieving the aim	Chief Officer (Access and Indusion) Chief Officer Claming	Useduity) Chief Officer (Social Care commissioning)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability) Deputy Director (Strategic Commissioning) Chief Officer (Resources)	Deputy Director (Strategic Commissioning)
	ivering	Mike Sells (Communications Manager)	Mick Ward (Head of Strategic Partnerships and Development)	Mike Selfs (Communications Manager) Brian Rather, Nyoka Echergiti, Jim Taynor, Phil Schöfeld, Jane Moran, Graham Heffernan, Steve Bardsley (Service Beilvery (Service Beilvery	Richard Graham (Quality Assurance Manager) Suart Cameron-Strickland (Haad of Performance)
	Success Criteria: How will you know that the action Lead: Who will be that achieved its intended aim? le, task complete, tresponsible for del measures in place.	Evidence shows effective support for service users and appropriate information and advocacy services. Targets 08/09,Older people assessed in 4 weeks: Scinary respondents happ, with the assessment process: Survey respondents report that information is addeutate. Targets for advocacy services to be established.	Evidence shows effective support for service users and carers in the provision of accurate, accessible advocary services.	Burvey respondents are aware of IB/DP as evidenced by measures of: Diterry 2/Feedback Delivery targets: 80.09 - 2417 Encipents, 19/10 - 2417 recipents. Feedback baseline 42% survey respondents report being offered DP.Targets to be agreed.	A assurance process to montor that personalised empowered and vulnerable adults empowered to choose as evidenced by measures of 1 Delivery 2 Exeduation 3 Delivery Targets: 3 Delivery Targets: 3 Delivery Targets: 9 01 - 2.417 ecipients 9 01 - 2.417 ecipients 9 01 - 2.417 ecipients 9 01 - 2.417 ecipients eedback baseline. 43% of survey respondents report being offered DP. Targets to be agreed.
	Actual Finish	Jun-09			0.00000000
	Plan Finish	60-unr		Sep-09	60-un (
	Plan Start	Mar-09		Apr-09	Mar-09
	This Month RAG				
	Last Month RAG	ł			-
	Action	The infrastructure is established to support service users and carers with partners, including access to accessible and timely information. (See recommendation 13).	The infrastructure is established to support service users and carers with partners, indufing access to accessible and timely advocacy services. (Se recommendation 13).	Establish internal and public communication strategy to raise awareness and expectations of self directed care in current and potential service users	Arangements for QA outlined under recommendation 2 are operational.
Leeds City Council	Aim/Outcome	Service users and carers have appropriate access to information.	Service users and carers have appropriate access to advocacy.	Amost all service users report that they have accurate accessible information, advice and advocacy supported when hee and advocacy choices and exercise control.	A processes effectively support Aproved service delivery
		9.6 6		6.7	"Page 24

Adult Social Car														
Adult S	Risk Report		COMPLETED					Slippage on review of advocacy due to project lead being partially seconded to Swine Flu Duties.				COMPLETED		
	Report of Progress		COMPLETED	Options to explore other methods of reviewing, such as teleptone reviews with might be more appropriates the first review are being considered. Using CRA reviews to populate ESCR and achieving targets as prescribed. Action plan sigmed off by Childens (Access & Inclusion) & (Learning Disabilities).	Revised review form distributed and implemented from September 1st 2009. Staff briefing being undertaken by	SLMs: vork underway to ensure an evolute red evolvation and also meet required standards for personalisation and the reflection of an outcome focus to reviews.		Consultation with service Users and with Advocacy providers has been completed, initial plans for communicating final export agreed within stering group. Second fact report is currently being prepared with timeline for completion to be Nov09.	X-ref 13.1		Cordis Bright have started gathering information for an options appraisel. This is due for completion by the end of August with findings reported to Executive Board in October 09.	COMPLETED	Work to extend contracts to daycare and residential care is on track to complete within timescales.	Partners are looking at options for joint commissioning arrangements across Leeds. A decision is expected by September 09
	Chief Officer: Accountable for achieving the aim			(Access and Indusion) Chief Officer (Learning Disability)	Chief Officer (Access and Inclusion)	Chief Officer (Learning Disability)		Deputy Director (Strategic Commissioning)	Deputy Director (Strategic Commissioning)		Deputy Director (Strategic Commissioning) Cuef Officer (Support & Enablement)	Deputy Director	(Strategic Commissioning)	Deputy Director (Strategic Commissioning)
·	Lead: Who will be responsible for delivering the work?		<b>Brian Ratner</b> , Nyoka Fothergill. Jim Trav nor.	Phil Schoffeld, Jane Moran, Graham Heiferman, Steve Bardsley (Service Delivery Managers)	Brian Rather, Nyoka Fothergill, Jim Tray nor, Phil Schofield, Jane Moran, Graham Heffenan, Steve	bardsley (Service Delivery Managers) Richard Graham (Quality Assurance Manager)		Mick Ward (Head of Strategic Partnerships and Development)	Tim O'Shea (Head of Adut Social care Commissioning)		Tim O'Shea (Hea of Adult Commissioning) Lynda Bowen (Chief Offreer Support and (Chief Affreer Support and	Tim O'Shea	Commissioning	Tim O'Shea (Head of Adult Commissioning), Mark Phillott (Commissioning Manager)
	Success Criteria: How will you know that the action has achieved its intended aim? le, task complete, measures in place.	met.	From an 07/08 baseline of 63% In Year 1: 76% of service users to receive a timely review.	In Year 2: 80% of service users to receive a timely review.	Quality standards established with operational staff.	75% of all reviews meet core quality standards as evidenced in file audit process.	rich it should be used to empower people.	The following range of advocacy requirements are incorported: - Crisis - Task or Issue - Representational Short Term or Long Term - Independent Mental Capacity Advocacy (MCA)	coordination with partners, procurement and ontracting arrangements are implemented to meet le agreed Leeds model	i services	The Local Authority has identified the nature of its business in relation to buildings absol services. Banior managers and elected members agree options regarding the future of buildings based services which provide the basis of a work programme.	Service level agreements are in place for: 08/09 Homecare,	09/10 Residential Care and Daycare	Formal agreements with LPCT regarding joint commissioning frameworks, Service specifications in place for homecare and other key services
	Actual Finish	eviews are	Har-09				ances in wl			dings-based		Jan-09	0	4
	Plan Finish	of regular n	Mar-09	60-unſ	Jun-10	Jan 10	ne circumst	60-90A	Mar 10	and modernising traditional, buildings-based	Oct 09	Apr-09	Mar 10	Oct-09
	Plan Start	he quality	Dec-08	Mar-09	Dec-08	60 unf	focusing th	Jan-09	Aug 09	ising tradi	April 09	Nov-08	Apr 09	Jan-09
	This Month RAG	iness and		$\leftarrow$	$\leftarrow$	<	cifying and		<b>—</b>	and moder	<b>—</b>		$\leftarrow$	
	Last Month RAG	ion to the time		Į	1	ł	ervices by spec	ļ		reconfiguring	ļ		Ĵ	t
	Action	Recommendation 11: The Council should ensure that departmental standards in relation to the timeliness and the quality of regular reviews are met.		Heview acturant systems, a determine resources required and align these to ensure that reviews are undertaken in a timely manner inline with FAC's guidance.	standards & expectations in relation td Agree quality outcome focused sandards for	reviews to incorporate personalisation and risk factors	Recommendation 13: The Council should build on the wide availability of advocacy services by specifying and focusing the circumstances in whi	Determine requirements in Leeds for advocacy	The authority has implemented a user led advocacy set individuals. - Empowers individuals. - Promotes independence & Safeguarding. - Meets the full range of cultural &service user needs.	Recommendation 14: The Council should extend the range and choice of services by reconfiguring	Procure external expert advice to generate an options apprisal regarding steps to shift the emphasis of social care interventions away from building based services. Options generated will include: 1/LA cases to be a direct provider of buildings based services. 2 Minimal & specifically targeted role for LA in providing services	Extend current contract and monitoring		Establishment of agreements and Service Specifications jointly with the PCT for - residential (including specialist and general) care.
Leeds City Council	Aim/Outcome	mmendation 11: The Council should en		Re Standards & expectations in relation to the timeliness and the quality of the regular reviews are met		rre umemess and tre quarty of regular reviews are met	mmendation 13: The Council should bu	Almost all service users report that they have accurate accessible information, avive and advocacy supported when needed to make droices and exercise control.	The service users report that the service users report that the service users report that the service and advoced to the supported when needed to make choices and exercise control.	mmendation 14: The Council should ex	<ol> <li>Services are commissioned and delivered to clear standards, offer good care value and re inived to Our Health, Our Care, Our Say, outcomes.</li> <li>Almost all people who use services &amp; there cares are involved in evelopment work, review &amp; are integral to the commissioning process.</li> </ol>	Directly provided services have clear	performance and QA measures which are monitored and reported.	Develop formal joint commissioning framworks with health to extend the range of options for delivering personalised services
		Reco		1.1		7	Reco	1.51 L ay	e 20 <sup>55</sup>	Reco	14.1		14.4	14.5

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Risk Report				COMPLETED	COMPLETED					COMPLETED	
Report of Progress				COMPLETED	COMPLETED	New Delay Transfer Protocol completed with neighbouring hospitals. Currently going through partner agencies ratification process.	Report has been presented to planned and urgent carre group and agreed plan of actions has been prescribed in that report. The update on the progress mede against the action plan will be reported to joint commissioning board in Nov09.		Website pages further improved.	COMPLETED	
Chief Officer: Accountable for achieving the aim				Chief Officer (Access and Indusion) Chief Officer (Learning Disability) Director of Commissioning (Leeds NHS)	Chief Officer (Access and	Indusion) Chief Officer (Learning Disability) Director of Commissioning (Leeds NHS)	Chief Officer (Access and Inclusion) Chief Officer (Leef Officer Disability)		Chief Officer (Resources)		Chief Officer (Resources)
Lead: Who will be responsible for delivering the work?		e with those standards.	plinary work.	Philip Schofield (Service Delivery Manager)		Philip Schofeld (Service Delivery Manager)	Philip Schoffeld (Service Delivery Manager)		(Communication Manager)		Mike Sells (Communication Manager)
Success Criteria: How will you know that the action has achieved its interded aim? Ie, task complete, measures in place.	nces	Recommendation 16: The Council and partners should strengthen hospital discharge procedures by setting out clear reciprocal responsibilities with procedures in place for ensuring compliance with those standards	ing from concerns about the quality of multi-disciplinary work.	Actions taken prevent unnecessary hospital Actions taken prevent unnecessary hospital discharge which maintains dignity and respect. Regular reprovide to the Leeds Joint Commissioning Board for Adults.	There is a signed protocol between ASC and health	continuing care and dispute resolution. Protocol and procedure agreed by health partners Protocol and procedure agreed by health partners Protocol and procedure agreed by neighbouring hospitals and ASC, i.e., Harrogate, Bradford, Wakefield.	Baseline for delayed discharges of 27. Baseline and infloate a baseline and targets to include data and info from: - Reviews of service users. - Complains. - Uson JSCB		Adult Social Care Information, Communications & Marketing Strategy is set out as part of the 2009/10 Business Plan. Service users and carera are actively involved in development work, planning and review.	Carers and people who use services are helped to understand how to maintain welbeing through a range of accessible information provided in	78% of survey respondents report that information 78% of survey respondents report that information provided is adequate as an initial baseline. Adult 8. Adult 2. Ad
Actual Finish	les experiel	ponsibilities	ig and learn	Nov 08	Mar-09		90-nuL			Mar-09	
Plan Finish	ity of peop	procal res	or resolvin	Nov 08	Mar 09	Nov 09	Apr-09		60-InC	Mar 09	Sep-10
Plan Start	n the qua	t clear reci	process 1	Oct 08	Nov 08	Mar 09	Jan-09	ces.	Apr-09	Dec 08	Apr- 10
This Month RAG	focusing o	setting ou	agreeing a			<b>—</b>		arer's serv	Ĵ		
Last Month RAG	procedures by	procedures by	procedures by			Į		the range of c	Į		
Action	Recommendation 15: The Council and partners should strengthen hospital discharge procedures by focusing on the quality of peoples experiences	ners should strengthen hospital discharge	Recommendation 17: The Council and partners should strengthen hospital discharge procedures by agreeing a process for resolving and learning	The remit of the existing Planmed and Urgent Care Concup is extended to undentake revising current protocol, procedures and the note of different professionals are clear. The note of different professionals are clear. 2 <sup>1</sup> the notes diadrange process is finely, safe and ensures a consideration of dignty and respect for the individual. 3 <sup>2</sup> a process for resolving disputes is in place.	New protocol and procedure published and	adopted by local hospitals including, terms writen into the contract between LTHT, NHS Leeds and ASC. New protocol and procedures agreed with significant out of Leeds neighbouring hospitals.	Regular monitoring and reports are prepared by the Planued and Urgen submitted to the Joint Strategic Commissioning Board (JSCB)	Recommendation 18: The council should improve the availability of information about the range of carer's services.	Undertake a gap analysis, in consultation with careas & service users, of current information needs. I defuit and appealse options to inform a communications strategy which ensures that people have the information they require when they require it.	to transcence is a local to advect and	ru an any service up to date , accurate and regular and assure up to date , accurate and regular supply of information and effective communications with carers.
Aim/Outcome	nendation 15: The Council and partn	nendation 16: The Council and partn	nendation 17: The Council and partn	People access a range of care services that promote their independence.	People access a range of care	spital safe ains	e monitoring of hospital discharge angements is effective and lessons i learned from concerns.	hendation 18: The council should im	Establish communication and Establish communication and Mith carers & service users, or curre information reactive argueriements enabling options to inform a communication proactive approach to ensuring options to inform a communication information is available when required, which ensures information they require when they	Carers confirm that they are well	of
	Recom	Recom	Recom	2 - -		22 25 20 20 20 20 20 20 20 20 20 20 20 20 20	<b>f</b> päge	Reco	18.1 18.1		98 93 93

social (											
Adult Social Ca	Risk Report		COMPLETED		COMPLETED			COMPLETED			
	Report of Progress		COMPLETED	An increasing number of organisations are using the contact form as a referant form and this adopted by NHS Leeds community Heathcare. The risks remain around the lack of a referonic solution to data sharing and current information agreements.	COMPLETED	lendation 14)		COMPLETED	Work has started on developing an infrastructure for joint working. An officer is currently agreeing work with existing and new joint working groups around pronties agreed by key partners. A report on progrees with be made to the JSCB in September 09. Some models of integrated working are in place, i.e. The Integrated Commissioning Board for MH.	Some Joint commissioning priorities are included in the Commissioning Prospectus and presented to CLT on the 7th Jury. Strategic partnets are currently looking at broader options for joint commissioning. A decision is expected in Sept 09	The Commissioning Prospectus has gone to CLT on the Th Juy. Work is being undertaken to establish future commissioning priorities. Initially this includes work to forecast the need for extra care housing and residential care. Older Better Action Plan 2009/10 published and care. Distributed ASC draft Commissioning prospectus includes partnership elements.
	Chief Officer: Accountable for achieving the aim		Deputy Director (Strategic Commissioning)	Deputy Director (Partnerships & Organisational Effectiveness)	Deputy Director (Strategic Commissioning)	reference recomn		Deputy Director (Partnerships & Organisational Effectiveness)	Deputy Director (Strategic Commissioning)		Deputy Director (Strategic Commissioning)
	Lead: Who will be responsible for delivering the work?	the community.	Mike Sels (Communication Manager), Mick Ward Mick Ward Chead of Strategic (Head of Strategic Partnerships and Development).	Jemima Sparks. Programme Manager	Tim O'Shea (Head of Adult Commissioning) Stuar Connerin-Strickland (Head of Performance), (Reland of Performance), (Quality Acsurance Manager)	nt funding commitments (		John England, Deputy Director (Partnerships and Organisational Effectiveness)	Tim O'Shea (Head of Adult Commissioning), Mick Ward (Head of Strategic Parthestinjos & Development),	Carol Cochrane (Director of Commissioning & Priority Groups NHS Leeds)	Tim O'Shea (Head of Adult Commissioning), Mick Ward (Head of Strategic Partnerships & Development)
	Success Criteria: How will you know that the action has achieved its intended aim? le, task complete, measures in place.	Recommendation 19 : The Council and partners should improve the use by staff of the wide range of preventative services in preventative support packages for particularly vulnerable people in the community.	Relevant workers have information regarding the range of options currently available and monitoring of preventative services reflect this as measured in 19.3.	Staff in preventative services use and are involved in outcome focused assessment and care planning as measured in 19.3.	Establish a baseline and targets for measuring use of preventative services to show a focus upon early preventative X reduced need for higher level support. 1 segropositing and information given 21 review information 21	sociated joint management arrangements and joint funding commitments (reference recommendation 14)	nents for existing services (where appropriate).	All commissioners have a detailed analysis of the health and wellbein eeds of whole population so that strategic commissioning can link investment to activity over time.	Systems and infrastructure to support joint working in place. 1/ Virtual teams established for commissioning in relation to priority groups.	2/ Commissioning intentions published.	Strategy and plans include an understanding of the local market, cost considerations, quality factors and link to financial plans. The Publish pint commissioning prospectus. 21 Revise and republish Older Better. Strategic commissioning developed to link joint investment to activity over time.
	Actual Finish	ative supp	60-unr		Jul-09	ans with as	g arrangen	Feb-09			
	Plan Finish	in prevent	60-unr	Mar-10	Jul-09	opment pl	missionin	Feb-09	60-Inf		Sep-09
	Plan Start	e services	Apr-09	Aug-09	Jan-09	rvice deve	ing re-com	Dec 07	Oct 08		Nov 08
	This Month RAG	preventativ				ut clear se	ces, includ			$\leftarrow$	
	Last Month RAG	wide range of				orities and set o	- People's Servi		ļ	<b>—</b>	-
	Action	tners should improve the use by staff of the	Ensure learns are aware of locality options, including all relevant staff in ASC and partner agencies to receive a social isolation bolkt which stepdy the range of preventative services.	Ensure that a standard contact assessment and care plan tool is rolled out to all wouldnary sector / preventative services so that effective data sharing and masurable outcomes can be achieved. To include development of the CAF framework with health service partners. (Also see recommendation 9.5)	t Ensure that the commissioning approach to preventative services is effective via CA systems outlined in recommendation 2	endation 20: The Council and partners should agree a set of joint funding priorities and set out clear service development plans with as	whendation 21: The Council should set out a clear commissioning plan for Older People's Services, including re-commissioning arrangeme	Agree arrangements for future governance of JSNA process. Publish conclusions from initial work programme and data analysis.	t Establish Joint Commissioning priorities including shared funding arrangements.		Undertake an analysis of older peoples commissioning opportunities in consultation with older people & providens across health and social care.
Leeds City Council	Aim/Outcome	imendation 19 : The Council and par	Staff are aware of local preventative services , service users can access and influence appropriate care planning information.	Referral pathways to preventative services are carried and all whereable people receiving a preventative service receive a common assessment and carre planning framework. (CAF)	Quality Assurance systems show that there is a successful focus upon early prevention and reduced need for higher level support services.	mendation 20: The Council and part	Mendation 21: The Council should s	The health and wellbeing needs of The people of Leeds are evidenced 20. A time the JSNA & shape Ammissioning priorites linked to Our Health, Our Care, Our Say, outcomes	Partnership arrangements deliver joint & single commission with needs and available resources.		Determine priorities for older peoples commissioning with partners which promote choice, control, health and wellbeing
		Recom	19.1	19.2	19.3		Recom	ige-27-	20.2		20.3

Adult Social Care

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cial Care							
Adult Social Care	Risk Report	COMPLETED					
	Report of Progress	COMPLETED			Transfer of Care (TOC) Protocol in final draft and with respective partners for comments/approval. Options appraisal of CIC beds is completed. ASC and NHS Leeds stateholders have commenced a ASC and NHS Leeds stateholders have commenced beds.	The Commissioning Prospectus was presented to CLT on the 7th July. A project plan is being written to procure domiciliary services post 2010 undre a spot currate. Transwork, Adult Social Care will be the lead organisation and procue on behalf of NHS Leeds, July Protocols to develop the spot contract framework are therein procue on behalf of NHS Leeds, July The Protocols to developed. Maggie will send you the evidence which will be the limetables of meetings and minutes of Discussions regarding broader Joint Commissioning with NHS Leeds are orgong. A decision is expected by September 2009.	
	Chief Officer: Accountable for achieving the aim			Social Services		Chief Officer (Access & Indusion) Deputy Director (Stretegic Commissioning)	
	Lead: Who will be responsible for delivering the work?		Dennis Holmes (Deputy Director, Strategic Commissioning)	Steve Hume Chief Officer (Resources)	John Lennon Chief Officer (Access & Inclusion) (Mead of Strategic Partnerships and Development).	Tim O'Shea (Head o' Adult Commissioning)	
	<b>Success Criteria:</b> How will you know that the action <b>Lead:</b> Who will be has achieved its intended aim? le, task complete. The sponsible for dele measures in place.	1/ Undertake diagnostic phase	2/ Operational phase	Effective joint working as commissioners and/or integrated providers, results in the delivery of outcomes which meet the needs and expectations of service users and their carers and deliver value.		Systems and infrastructure to support joint working the procean and enabling staff to delarge stage dignified transfers of care. Baseline and measures to be developed, to include data from, complaints, the stage stage stage stage stage stage developed transfers. Reports on progress are submitted on a quarterly basis to the Leeds Joint Commissioning Board.	
	Actual Finish	May-09				·····	
	Plan Finish	Oct 09		Apr 10	90-InL	Oct 09	
	Plan Start	Apr 09		Oct 09	Jan 09	Apr 09	
	This Month RAG						
	Last Month RAG						
	Action		Engage with the University of Birmingham to identify opportunities for greater joint	commissioning activity and for further integration.	Review intermediate ther, JCMT, Mental Health Teams, Hospital Discharge	Review and develop joint commissioning/ market management of homecare. (cross ref to 20.3)	
Leeds City Council	Aim/Outcome		Achieve a shared agreed framework for integrated leadership in the			Options which will maximise effective joint working to best meet the needs of people and deliver outcomes are identified.	Pane 28
				20.4		20.5	Page 28

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Risk Report		COMPLETED	COMPLETED					
Report of Progress		COMPLETED	COMPLETED	All supervision policy and supporting documentation will be upbaded onto new training websile during September.	System for monitoring and reporting supervision progress currently being leated in Resources area. Once system is robust, will be shared with rest of learns.		Recent work includes peer to peer and individual support, as well as challenge verints to enable laams to develop maaningful plans. There has been some sippage on this task but this has been necessary to suppage on this task but this has been necessary to suppage on this task been developed. Currently developing Appraisal policy which is due to be completed by end of Oct09.	<ol> <li>Key measures in all service and team plans.</li> <li>Louarterly quality and performance reports including exception reports on performance to DMT.</li> <li>P.DA officies linking dosayly to each Child Officer around their priorities for improvement.</li> </ol>
<b>Chief Officer:</b> Accountable for achieving the aim		Chief Officer (Access and Indusion) Chief Officer (Learning Disabilities)	Chief Officer (Resources)		Chief Officer (Resources)		Chief Officer (Resources)	Deputy Director (Strategic Commissioning)
Lead: Who will be responsible for delivering the work?		John Lernon (Chief Officer Access and Inclusion) Richard Graham (Quality Assurance Manager)	Graham Sephton (Deputy HR Manager)		Graham Sephton (Deputy HR Manager)	on and team plans.	Steve Hume Chief Officer (Rasources)	Stuart Cameron-Strickland (Head of Performance) Richard Graham (Quality Assurance Manager)
<b>Success Criteria:</b> How will you know that the action has achieved its intended aim? le, task complete, measures in place.		Ensure implement policy in relation to supervision across 100% of assessment and care management staff.	Revised supervision policy published.		Revised supervision policy rolid out ball feldwork Revise and argets in relation to compliance and effectiveness to be stabilished. To include: 1/File audi process. 3/ Investors in People reviews.	Recommendation 23: The council should make the established business planning process more effective by cascading general intentions in strategic vision documents into more effective action and team plans.	Staff are supported in the planning process: road shows arevie contentores; team angagement. Each action with Adult Social Care plan will have populated detailed team plans against withich their progress can be monitored. Teams hows and reflect the business phorties in their team plans. Plans monitored through supervision and team meetings.	Performance management framework demonstrates team improvements overall as part of the overall business planning process via quarterly reports to DMT performance board.
Actual Finish		Mar-09	Mar-09 F			ntions in str		
Plan Finish	sion policy.	Mar 09	Mar-09		Mar 10	<mark>eneral inter</mark>	60-unf	Mar 10
Plan Start	e supervis	Oct 08	Oct 08		Mar 09	scading g	Feb-09	60 un C
This Month RAG	ations of th			-	_	ctive by ca	Î	<b></b>
Last Month RAG	vith the expect			V		icess more effe	Ĵ	
Action	Recommendation 22: The Council should implement a system to ensure compliance with the expectations of the supervision policy.	QA of compliance with the current supervision policy will form part of the file audit process outlined under recommendation 2.2 & 2.3.		Review the existing supervision policy to incudes: 11,04,09,10,00,00,00,00 to saforurarition on encondustrion	2/ A separate codicil of professional requirements for fieldwork staff. 3/ Align with corporate work in this area.	ike the established business planning pro	Arangements are put in place for the financial year 2009/10 to ensure that teams are engaged in setting out how they will contribute individually to achieve service improvement.	The business planning process establishes which are the key business priorities at a strategic level and communicates these to the rest of the organisation.
Aim/Outcome	nendation 22: The Council should im	Explicit expectations on supervision are met. They enable compliance with standards and focus on consistency, learning and better outcomes for people who use services.		ء	and and and four and four and on consistency. An index and four and the fire outcomes for optile who use services.	nendation 23: The council should ma	Business priorities are cascaded and included in effective team plans.	Business priorities are cascaded and v included in effective team plans.
	Recom	22.1			222	Pa <mark>ģ</mark> e	29 <sup>1</sup> .	23.2 E

Adult Social Care								
Adult S	Risk Report		COMPLETED					
	Report of Progress	vices.	COMPLETED	SDS training plan has been approved by DMT. Roll out of training between Sept 2003 and March 2010. Culture change programme for Care Management begins in September 2009.	12 month plan that supports the new People Development Strategy describes how we will develop people the coming year to deliver service transformation to underprined by a wide range of skills and competencies frameworks.	Communication materials currently being developed. Leaunch event with ASN dependent sector planned for 28th Sept. Roll out with ASC workforce to begin in parallel with this.		
	Chief Officer: Accountable for achieving the aim	l to reconfigure ser		Chief Officer (Resources)			Chief Officer (Resources)	
	Lead: Who will be responsible for delivering the work?	o deliver the skills needed	Framework launched. (Deputy HR Manager)			Graham Sephton (Deputy HR Manager)		
	Success Criteria: How will you know that the action Lead: Who will be has achieved its intended aim? le, task complete. Itesponsible for delimeasures in place.	Recommendation 24: The council should publish a workforce development plan which reflects the reshaped services and sets out how retraining and job redesign processes are to be utilised to deliver the skills needed to reconfigure services.				Staff are equipped with the skills and knowledge required to deliver the personalisation agenda. Tages are identified and addreset. These include requirements linked to safeguarding and the role of the independent sector within the delivery of personalised service delivery.		
	Actual Finish	ow retrainin	Aug-09					
	Plan Finish	Nov-08 June-09			Dec-08 May-09	Dec 09		
					Dec-08	Oct 09		
	This Month RAG	reshaped se		╞	ł	Ĵ		
	Last Month RAG	h reflects the		Ĵ	Ĵ	Ĵ		
	Action	ublish a workforce development plan whic	Create and launch a framework that maps competencies, skills and knowledge for key roles and groups in Adult Social Care in relation to safeguarding, (see Rec. 14).	There are sufficient appropriately skilled stills and hunch a framework that maps competencies, stills and horwedge for key skilled staft ounderaker he full range relation to personalisation (see Rec. 14). relation to sefequarding and personalisation	Create and launch a framework that maps competencies, skills and knowledge for key nees and groups in Adult Social Care in relation to the requirements of business change (see Rec. 14).	Publish our 3 year workforce strategy which reflect commissioning intentions and plarned business change (2009 to 2012)	Review in Oct 2009 in relation to plans in Recon 14	
Leeds City Council	Aim/Outcome	mmendation 24: The council should p				Annere are sufficient appropriately Annere are sufficient appropriately Cyclied staff to undertake social care Orictions		
		Reco						

Adult Social Care

cia				
Adult Socia	Risk Report		COMPLETED	
	Report of Progress	Progress apainst strategy being regularly reported to ASC Workforce Board. All of the following systems in place and being regularly monitored: service and business plans, investors in people deceback, employee survey data, organisational health information, balanced scorecard ratings for senior leaders, the tustneme rededack. Claraterly training activity reports will be available in October (outliming the end of Sept position). The Leeds City Council Evaluation framework for faning and development is being used to identify impact.	COMPLETED	
	Chief Officer: Accountable for achieving the aim	Chief Officer (Resources)	Chief Officer (Resources)	
	Lead: Who will be responsible for delivering the work?	Graham Sephton (Deputy HR Manager)	Graham Sephton (Deputy HR Manager)	
	Success Criteria: How will you know that the action <b>Lead:</b> Who will be <b>Chief Orficer:</b> has achieved its intended aim? le, task complete, responsible for delivering Accountable for measures in place.	An agreed set of performance measures for workforce development will exist and managers can evidence that staff and can opmetein for their role and an identify and respond to arreas where staff competency issues exist. Measures to be developed which include data from: 1 (Staff survey 2/ Investors in People reviews. 3/ Occupational health data	Web site available by end of June 2009; service users are in receipt of services from appropriately skilled staff whose competency in assured by vervicance competency measures and quality of delivered is confirmed through quality assurance systems	
	Actual		60-6nV	
	Plan Finish	Apr-09	Jun-09	
	Plan Start	Oct-08	Nov-08	
	This Month RAG	╞		
	Last Month This Month RAG RAG		Į	
	Action	A new process for identifying investment and measuing the quality and impact of workforce development will be introduced in the 2009/10 planning cycle. New reporting process will be introduced.	All web site will be created as a central resource for all information relating to All will be aware of local skills workforce development. A dear description workforce development. A dear description workforce development. I on the training and development is on offer meet these standards and the support available to be communicated. Expected behaviours around the most important workforce development.	
Leeds City Council	Aim/Outcome	<ul> <li>A new process for identifying investr</li> <li>Services are consistently provided by measuring the quality and impact of an appropriately skilled and workforce development will be introduced.</li> <li>24.3 an appropriately skilled and the 2009/10 planning cycle. New rep throwind geable workforce</li> </ul>	All will be aware of local skills and the support available to meet these standards	
		24.3	24.4	

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## Agenda Item 10



Originator: Sandra Newbould

Tel: 247 4792

Report of the Head of Scrutiny and Member Development

Scrutiny Board (Adult Social Care)

Date: 7<sup>th</sup> October 2009

### Subject: Scrutiny Inquiry: Personalisation Working Group – Update Report

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
Ward Members consulted (referred to in report)	Narrowing the Gap

### 1.0 Introduction

- 1.1 At its meeting on 8 October 2008, the Executive Board received an update on the work undertaken in Leeds to prepare for the personalisation agenda, since the publication of the concordat "Putting People First" in December 2007. One of the outcomes from that meeting was that the Scrutiny Board (Adult Social Care) be requested to monitor progress of the personalisation agenda.
- 1.2 To assist the Scrutiny Board in monitoring progress of the personalisation agenda, in line with the Executive Board request, the Scrutiny Board requested a scoping paper be presented for discussion. As such, an initial scoping discussion was held with the Proposals Working Group at its meeting on 12 December 2008.
- 1.3 The Board also established a working group to undertake aspects of the inquiry. The first meeting of the working group took place on the 16 March 2009. Since that date four subsequent meetings have taken place.

### 2.0 Scope of the Inquiry

2.1 The agreed terms of reference which fully define the scope of the inquiry are attached at Appendix 1.

### 3.0 **Progress to date**

3.1 Minutes of the meetings up to and including August 2008 are attached at Appendix 2 which defines progress with the inquiry to date.

### 4.0 Updated Areas within the scope scheduled for investigation.

The timetable for submission of evidence has been updated since agreement at the July Adult Social Care Scrutiny Board to accommodate the availability of officers from Adult Social Services in October. The submission of evidence overall is not affected by the timetabled change which is now as follows:

October 2009

- Financial Budgets and Value for Money.
- Early Implementer evaluation update and experiences of care managers and support officers.

#### November 2009

- Commissioned Services and Social Enterprise The requirement to adapt and change.
- Performance management and reporting mechanisms and meeting the challenge of Government Self Directed Support targets.
- Workforce Transformation and Development update

#### 5.0 Recommendations

- 6.1 The Scrutiny Board is requested to :
  - 6.1.1 Consider the contents of this report, terms of reference and agreed minutes of the personalisation working group.
  - 6.1.2 Comment on any specific aspects of the examinations undertaken by the Personalisation Working Group and on the progress to date.
  - 6.1.3 Determine if there are any specific / further areas that require additional scrutiny, including the nature and frequency of any future reports

### 6.0 Background Papers

7.1 Personalisation – Update to Terms of Reference and Appointment of co-opted member to the Personalisation Working Group - Appendix 1.



Originator: Sandra Newbould Tel: 247 4792 APPENDIX 1

DRAFT Report of the Head of Scrutiny and Member Development

Adult Social Care Scrutiny Board

Date: 29<sup>th</sup> July 2009

Subject: Personalisation – Update to Terms of Reference and Appointment of coopted member to the Personalisation Working Group

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
	Narrowing the Gap

### 1.0 INTRODUCTION

- 1.1 At its meeting on 8 October 2008, the Executive Board received an update on the work undertaken in Leeds to prepare for the personalisation agenda, since the publication of the concordat "Putting People First" in December 2007. At that meeting, the Executive Board resolved:
  - (a) That progress made in Leeds towards the development of a more personalised system of social care through the Self Directed Support project and other initiatives be noted.
  - (b) That, acknowledging the scale and scope of the transformation agenda and the challenge it presents, the approach taken in Leeds to deliver successful change be endorsed.
  - (c) That the direct engagement of elected members in these developments be continued by the submission of further reports to this Board, involvement in workshops, seminars, conferences and in the recently established members' forum.
  - (d) That the Board notes the impact Self Directed Support will have on existing service provision including directly provided services and commissioned services in Leeds and the need to accelerate the transformation of these services to meet the challenges and impact of personalisation and customer choice.
  - (e) That it be noted that progress and the pace of change regarding the delivery of Personalisation in Leeds will be the subject of some detailed feedback from the recent inspection of Older People's Services.

- (f) That the Scrutiny Board (Health and Adult Social Care) be requested to monitor progress of the personalisation agenda.
- 1.2 The report presented to the Executive Board on 8 October 2008 is appended to this report for information.
- 1.3 To assist the Board in monitoring progress of the personalisation agenda, in line with the Executive Board request, the Board requested a scoping paper be presented for discussion. As such, an initial scoping discussion was held with the Proposals Working Group at its meeting on 12 December 2008.

### 2.0 THE PERSONALISATION AGENDA

- 2.1 As a result, subject to the agreement of the full Scrutiny Board, the working group agreed to focus on the following areas:
  - The common assessment framework;
  - Resource allocation system (linked to the Council's stock of directly provided care);
  - > Progress of the early implementer project.
- 2.3 At the Adult Social Care Scrutiny Board meeting in June 2009, it was recommended that further areas of inquiry were added to the scope of the inquiry as part of the work programme discussions. These have been incorporated under section 3. Included in section 3 are additional elements of inquiry identified by the Personalisation Working Group.

### 3.0 SUBMISSION OF EVIDENCE

3.1 The following formal evidence gathering sessions have been undertaken:

### Session one – 16<sup>th</sup> March 2009

During the first session of the inquiry the working group examined:

- A presentation of information relating to Personalisation in order to promote understanding
- The work of the Self Directed Support Members Forum and progress made to date.

### Session two – 22<sup>nd</sup> April 2009

During the second session of the inquiry the working group examined:

- A Personalisation Update Report
- The Resource Allocation System.

Towards the end of both sessions, consideration was given to further and/or specific information required as part of the inquiry.

3.2 The following formal evidence gathering sessions are scheduled:

### Session three – 30<sup>th</sup> July 2009.

During the third session of the inquiry the working group will examine:

- Self Assessment Questionnaire
- The Process of assessment and review.
- Early Implementer Trial progress update

Individuals receiving SDS will be asked to attend the working group to provide an account of their experiences of managing an individual budget.

### Session four - August 2009.

During the fourth session of the inquiry the working group will examine:

- Customer and stakeholder engagement and involvement.
- Peer Group Support
- Consultation
- Changing Perceptions and Promotion of Individual Budgets plans and progress to encourage customers and providers to think differently about care provision. Publicity and the provision of information and advice.

Customers involved in the development of SDS will be asked to attend the working group to provide details of the projects they are involved with.

### Session five – September 2009

During the fifth session of the inquiry the working group will examine:

- The Single Assessment Process so people 'only need to tell their story once'.
- Brokerage Services and the pathways to establishing and managing support.
- Partnership Working

### Session six – October 2009

During the six session of the inquiry the working group will examine:

- Commissioned Services and Social Enterprise The requirement to adapt and change.
- Financial Budgets and Value for Money.
- Early Implementer evaluation update

### Session seven – Nov 2009

During the seventh session of the inquiry the working group will examine:

- Performance management and reporting mechanisms.
- How the challenge of meeting Government SDS targets will be met.
- Workforce Transformation and Development update and experiences of Care managers and support officers.

### Session eight – December 2009

During the eighth session of the inquiry the working group will examine:

• Risk Enablement Framework and Safeguarding.

Towards the end of each session, consideration will be given to any further and/or specific information required as part of the inquiry and if any further sessions are to be scheduled into the work programme.

- 3.3 To ensure that a full and detailed inquiry is undertaken input from service users, representatives, carers, and service providers will be sought.
- 4.0 Personalisation Working Group

The Personalisation Task Group was established in September 2008 as a mechanism for elected members to:

receive information

• be consulted on the discharge of relevant delegated authority relating to the modernisation of Adult Social care and Self Directed Support services

• be advised and consulted on local implementation of legislation, regulation, national guidance or Best practice

• disseminate and cascade information from the Director of Adult Social Services to their respective political groups and provide feedback.

The group has now been disbanded following the establishment of the Scrutiny Board inquiry and the Personalisation Working Group. Cllr Valerie Kendall has requested that she be co-opted onto the Personalisation Working Group as a former member of the Task Group adding value to the inquiry due to the accumulated knowledge gained since September 2008.

### 5.0 RECOMMENDATIONS

5.1 The Adult Social Care Scrutiny Board is recommended to

• note updated information relating to the submission of evidence contained within this report.

• note the terms of reference may incorporate additional information should the working group or the Adult Social Care Scrutiny Board identify any further scope for inquiry within the area of Personalisation.

• Agree Cllr Valerie Kendall be co-opted to the Personalisation Working Group until such time as the inquiry is concluded.

### 6.0 BACKGROUND PAPERS

None

### 7.0 FURTHER RECOMMENDED READING

- Executive Board report Putting People First Vision and Commitment to the Transformation of Adult Social Care (23 January 2008).
- Executive Board report Putting People First Vision and Commitment to the Transformation of Adult Social Care (08 October 2008).
- Putting People First Working to Make it Happen (23 June 2008)

### Scrutiny Board (Adult Social Care) Working Group

Meeting held on 16th March 2009 at 2pm in the Civic Hall

#### Present

Councillor Judith Chapman (Chair) Councillor Stuart Andrew Councillor Penny Ewens Sally Morgan (Co-opted member)

#### **Others in Attendance**

John Lennon, Chief Officer Access & Inclusion Richard Mills, Democratic Services

#### 1.0 Apologies

1.1 An apology was reported from Joy Fisher, co-opted member who was attending a Links seminar in the Town Hall.

#### 2.0 Introductions

2.1 The Chair welcomed everyone to the meeting and expressed regret that a number of Members of the working group was not present to hear more about the Personalisation agenda.

### 3.0 Background Information

3.1 Members received background papers considered by the Executive Board in January 2008 and a copy of the Scrutiny Board (Adult Social Services) minutes of 7th January 2009 with specific reference to minute No 64 Personalisation.

#### 4.0 Updated Terms of Reference

4.1 Members noted

(i) an updated copy of the Board's terms of reference for this Inquiry on Personalisation which now incorporated a timetable for the submission of evidence to this inquiry which projects into the new municipal year.

(ii) that the terms of reference may need to be updated further if this working group or the Scrutiny Board identify further scope for scrutiny of this issue.

### 5.0 Presentation - Personalisation in Leeds

- 5.1 The working group received a powerpoint presentation on the vision to transform the whole of Adult Social Care into a system of self-directed support which will enable eligible people needing social support and associated services to design, choose and control that support.
- 5.2 Members had been provided with a black and white version of the slide presentation in advance of the meeting and colour copies were tabled at the meeting together with a definition of terms headed "What do we Mean".

### 5.3 Members agreed

(i) That the presentation was excellent and the slides were very clear and concise and sets out the future direction of services in Adult Social Care.

(ii) That the presentation and the definition of terms be circulated to all Members of the working group.

(iii) That the Head of Scrutiny and Member Development be asked to arrange a Members seminar on Personalisation for all Members of Council using today's presentation.

(iv) That the report on Personalisation due to be considered by the Executive Board be circulated to members of the working group as soon as it is available

### 6.0 Issues Arising

- 6.1 A number of issues were discussed including the:
  - Inequality of services within Councils
  - Government's desire for fair access to services and driving out the post code lottery but because of financial constraints had resulted in Council's tightening their eligibility criteria
  - Expectation that by 2050 we will have our first 120 year old and an increasing aging population
  - Higher expectations of citizens
  - Mental Capacity Act
  - Principles of self-directed support
  - Whole system change for self-directed support
  - New service arrangements
  - Future model of support and the work of the Early Implementation Team who are currently operating a pilot with 70 -80 volunteers to determine if delivery is practical and affordable
  - Project this year to put Social Services in to Customer Services and to provide 24/7 quality service
  - Commissioning
  - Brokering
  - Target set by Government is for the Council to have 30% of clients on self -directed support by 2011 which equates to 5,600 people. The Council currently has 932 direct payments
  - 37 Day Centres and 20 Elderly Person homes and brand loyalty
  - Need for Members to be appointed champions in each group to support and promote this service change
  - Concerns that the service may become less professional
  - IT and what is required to meet these changing needs

# 7.0 Personalisation Task Group (previously known as the Self Direct members Forum)

7.1 Members noted the report of the Director of Adult Social Services updating this Group on the work of the Personalisation Task Group (previously named the Self Direct Members Forum) including its terms of reference.

### 8.0 Next Meeting

- 8.1 Members noted that at its next session the working group on 22nd April 2009 will consider:
  - The update report on Personalisation.
  - The Resource Allocation System (RAS)

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## Scrutiny Board (Adult Social Care)

### **Scrutiny Board Inquiry: Personalisation**

Working Group Meeting: 20th April 2009

#### Present Members

Cllr Stuart Andrew - Chair Cllr Suzi Armitage Cllr Penny Ewens Cllr Alan Taylor Joy Fisher (co-opted member) **Officers** John Lennon – Chief Officer, Access and Inclusion Jemima Sparks – Service Delivery Manager West, Adult Social Care Robert Russell – Principal Financial Manager Sarfraz Khan – Financial Manager Sandra Newbould – Principal Scrutiny Advisor

### Apologies Cllr Judith Chapman Sally Morgan (co-opted member)

No.	Item	Action
1	Attendance	
	The attendance and apologies as above were noted.	
	The Chair welcomed everyone to the meeting.	
2	Notes of Previous Meeting – 16 <sup>th</sup> March 2009	
	The draft notes of the meeting were presented and agreed.	
3	Personalisation Update Report	
	A general report was presented to members of the group to update them on the implementation of self directed support (SDS). It highlighted the changes and the impact that will occur.	
	Early Implementer – An update is due to be presented to the ASC Scrutiny Board on the 6 <sup>th</sup> of May. All those taking part in the pilot are doing so voluntarily and are aware that some of the systems in place are being trialled. No one taking part is being disadvantaged financially.	
	Support Planning – The first version of the Single Assessment Questionnaire is now being trailed. So far 30 customers have completed it.	
	Care Management and Workforce Development – There will be requirement for the workforce to adapt and learn new skills to deliver the transformed service.	
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have a great impact on commission being done to support service pro	ocial enterprise. They were advised on for outcomes. Members	SN/JL
•••	urrent systems do not have complete case management or	
Other initiatives such as on line re Shop 4 Support ( <u>www.shop4supp</u>	esources being investigated such as ort.com).	JS
	eing distributed in various formats, VD. Members requested a copy of ed to SN	
	ed assistance will be of no benefit for rified however that this was not the ust one of the options being	
Consultation – It was highlighted to consultation with Elected Member		
members of the SDS reference gr		SN/JL SN/JL
Peer Support – It was stated that requirement to get systems up an interested to know at a future mee arrangements are in place.	d running and the group would be	SN/JL
stated that they would like to know	dult Social Care – the Group also w more about the arrangements to nsition of young adults into the ASC	

4	The Resource Allocation System (RAS)	
	Robert Russell introduced a report to the working group which explained the Resource Allocation System as a financial model for calculating the allocation of money to service users so that they can have greater levels of choice and control over the services they receive.	
	The resource allocation system uses a points system which determines how much money is allocated based on a persons completed questionnaire. (SAQ)	
	The group was advised that as individuals move to SDS, the historical anomalies of the current system should be removed, so that people with similar needs should receive similar amounts or funding.	
	Currently local authorities are developing their own RAS' however there may be a move to develop a national RAS which should create some consistency, and where a person moves to another authority enable resources to be allocated based on the assessment of the previous authority. With ASC budgets being in local authority control the group noted that a postcode lottery could still exist depending on which local authority area someone lives in.	
	The group was advised that there will be financial winners and losers with the RAS and that the system is still being trialled in order to iron out anomalies. A contingency is currently in place to minimise detrimental impact.	
	The group noted that there is currently no appeals system in place and stated that there should be a formally documented process established for dealing swiftly with cases where the client wishes to dispute the level of budget provided. Those going down the SDS route should have access to information which advises them of the process should to be followed in the event of a disagreement.	
	The group was also concerned that there may be disparity in amounts allocated due to age as reported by Age Concern and Help the Aged. The group was advised that Leeds operates only one RAS which means that those with similar support needs will be allocated similar amounts, regardless of age. Other authorities have operated more than one RAS where the type of RAS used was determined by age and other factors. This process has not been adopted by Leeds.	
5	Further Action	
	<ul> <li>Items to be incorporated into the groups work programme:</li> <li>Peer support.</li> <li>Changing Perceptions how to get service users to think differently about their own care.</li> <li>Transition of children to Adult Social Care</li> </ul>	SN/JL

	<ul> <li>Commissioning and Social Enterprise.</li> <li>Individuals included in the pilot to speak to the working group about their experiences.</li> </ul>	
	Newsletter and Survey to circulate to members of the group.	SN/JS
	Session 3 - June/July 2009 During the third session of the inquiry the working group scheduled to examine:	
	<ul> <li>The Common Assessment Framework, Single Assessment Questionnaire, and associated areas,</li> <li>The Process of assessment and review</li> <li>Partnership working - so people 'only need to tell their story once'.</li> </ul>	
	<ul> <li>Provision of urgent social care support, particularly outside normal working hours.</li> <li>Advocacy Services</li> </ul>	
	The Common Assessment Framework may be deferred to a later session.	SN/JL
6	Future Meeting Dates	
	To be arranged at the first Adult Social Care Scrutiny Board	SN

## Scrutiny Board (Adult Social Care)

### Scrutiny Board Inquiry: Personalisation

Working Group Meeting: 30<sup>th</sup> July 2009

Present	Members Cllr Judith Chapman – Chair (JC) Cllr Penny Ewens (PE) Cllr Valerie Kendall (VK) Cllr James McKenna (JK) Cllr Veronica Morgan (VM) Cllr Alan Taylor (AT) Officers John Lennon – Chief Officer, Access and Inclusion (JL) Emma Lewis – Business Change Manager (EL) Sandra Newbould – Principal Scrutiny Advisor (SN) Experts by Experience Tizzy Taylor
Apologies	Julie Rose Joanne Smith ( P.A to Julie Rose) Joy Fisher (co-opted member) Sally Morgan (co-opted member)

No.	Item	Action
1	Attendance	
	The attendance and apologies as above were noted.	
	The Chair welcomed everyone to the meeting, particularly Tizzy, Julie and Joanne.	
2	Notes of Previous Meeting –	
	The draft notes of the meeting were presented and agreed.	
3	Personalisation Presentation	
	Members of the working group were advised of the policy and performance context of personalisation, and the impact it will have on services in a context wider than adult social care.	
	The working group was also advised of the expected outcomes and a summary of the project currently being undertaken.	
4	The Self Directed Support – The process of assessment and review.	
	EL gave a brief summary of the report brought before the working group. With regard to the format of the self assessment questionnaire the group were advised that it was based on forms produced by other authorities, and taking advice from 'In Control' and users. The form presented was version 2, the first version being updated after users advised that it was 'too busy'.	
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It is still accepted that part B is difficult to qualify, and it has come to light that users don't feel that they should have to provide evidence for every statement that they make. Some information should be accepted on trust.

Review – Each case is reviewed after 3 months and annually thereafter. Care managers may recommend that the review is undertaken at more regular intervals where necessary, particularly if there is a concern about an individuals ability to manage their own budget.

It was confirmed that four individuals are now in receipt of their personal budget.

The following concerns were expressed by the working group:

- That it is not unusual for individuals to understate their care needs when making an application.
- That it is very difficult to express a situation or a way of life on paper.
- There seem to be inconsistencies regarding the freedoms for an individual to spend their budget on what they deem appropriate and the authority view on what is appropriate.
- Transitional arrangements for Children and the continuity of care

In response the working group were advised that although the form is called a Self Assessment Questionnaire services users are not left to their own devices when completing the form. Care worker support is provided over two visits.

With regard to what a person may choose to spend their money on, an individual has the right to choose. Some activities may seem initially to have little apparent social care benefit, the example given was the purchase of a season ticket for the football. However on reflection activities such as this can be therapeutic, provide social interaction for the individual and provide some respite for main carers. The activity or purpose must be legal.

Children tend to be placed in traditional homes but as they move into adulthood they may be better with a personal budget. This factor is being considered as children are transitioned into ASC.

The working group asked the Experts from experience the following questions:

 What change, if any has a personal budget made to your life, better or worse, and why? Tizzy – Can't wait to have a PA. to help her to look after her grandson which will give her husband some respite and also visit places such as art galleries or attend poetry readings. Julie – Is looking forward to going to being able to go to the quiz night at the pub, which was something she previously enjoyed doing. She likes to go out and about.

# • Have you had to seek any help or support from outside the Council to help plan and manage your support?

Julie – Seeks help and assistance from her parents who are elderly. But does not like to ask and feels like she needs to be less dependent on them. They do provide a certain level of care, and are required to assist her when she goes to bed in an evening. Tizzy has the full time support of her husband who is also her carer.

# • Is there anything that you feel the Council should be doing that it isn't?

Not at the moment however it is essential that there is input from a Care manager and carer when filling out the questionnaire to ensure that all aspects of care are covered realistically and that forms are filled in correctly.

JC expressed concern that this service would be particularly resource intensive and especially when the number of users who require a personal budget increases to 2000+ users. JL advised that setting up the system is time consuming but once this is done it should not be as resource intensive.

# • Do you have any views on the process of filling in the Self Assessment Questionnaire.

Julie – Would not have been able to fill the form in on her own and had to seek assistance from her elderly parents, but did not like to ask. Trevor (Care Manager) has been very helpful. Tizzy – It would have been impossible for her to fill her form in on her own and sought assistance from her husband who is her main carer. They found it very difficult to quantify time elements in part B. She added that both her and her husband are articulate and literate people and it took them two hours to complete the form. The care manager still found inconsistencies with the form, which highlights that it is not easy to complete.

Tizzy also suggested that given 5 potential options to answer a question is has been proven that people usually opt for the middle answer and recommended that there is an even number of options to choose from.

•	Do you think there are any sector of the population who
	may struggle with an Individual Budget?

Tizzy – Other cultures may struggle due to language barriers. In some cultures it may be difficult for women to define their own needs.

JL added that the department is aware of the cultural and language issues that may cause difficulties. The questionnaire is produced in different languages but it is acknowledged that there is a challenge.

### • Is there any specific changes you would like to see?

Tizzy – Does not think that people in general realise that they can have help assistance and support and seek assistance from friends and family. But they will eventually and the Council needs to be prepared for this.

## • Do you feel confident in employing staff or is there any further support you feel is necessary?

Julie – Would like to employ someone to get her into bed on a night. She thinks it would be difficult to employ someone for 30 minutes per day. She is also considering employing two carers to ensure that there is cover when one is on holiday.

Tizzy - The help from 'ASIST' is a valuable service, and added that the Council could be more pro-active in providing a pool of PA's.

JL added that the 'Slivers of Time' scheme could be expanded to assist with this provision.

# • Do you feel that you have more control over your life and the right degree of flexibility?

Tizzy – I will have when I get a PA.

Julie – There will be some people who will not want to change. JL agreed with this statement and added that those who prefer a 'traditional' service may still use this option.

• Have you had to find cover or extra support at short notice (maybe due to illness), if so how easy was it. Do you have any concerns about this. Would you know where to go if you needed assistance or support?

Both experts were not aware that they could contact ASS to help them find short term support. Julie advised the group that Jo is soon to go on holiday so she will have to depend on her parents during that time. She was not aware that Social Services would be

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in place however we may need to r which is there is a growing e attractive as a career path and the shaping the market.	
s update	
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and was advised that evaluation will be presented to Executive Board. he work will continue.	
e been refused a personal budget. ave completed questionnaires, 13 nd 4 are receiving their budget. lid not go to plan due to further health dy was requested to provide the ase.	JL
t the RAS is working in 80 – 90% of omplex needs an alternative method	
r of forms returned from the BME be provided and circulated to the	JL
	ere was a problem long term with uid trigger a care review. It could be used to pay for respite can be funded a number of ways. It e or users can buy services direct or sing confusion with the wider public. Is used to pay for a holiday but cannot ses such as hydro therapy. JL stated how difficult it is to sometimes define in individual budget cannot be used well? In place however we may need to r which is there is a growing e attractive as a career path and the shaping the market. Is update d receipt of the report as evidence of huch had already been covered in e and was advised that evaluation will be presented to Executive Board. Net will continue. It been refused a personal budget. Id not go to plan due to further health dy was requested to provide the ase. It the RAS is working in 80 – 90% of complex needs an alternative method r of forms returned from the BME

5	Further Action	
	Session 4 -14 <sup>th</sup> August 2009	
	During the session of the inquiry the working group scheduled to examine:	
	<ul><li>Customer and stakeholder engagement and involvement.</li><li>Peer Group Support</li></ul>	
	<ul> <li>Consultation</li> <li>Changing Perceptions and Promotion of Individual Budgets –</li> </ul>	
	plans and progress to encourage customers and providers to think differently about care provision. Publicity and the provision of information and advice.	
6	Future Meeting Dates	SN
	<ul> <li>14<sup>th</sup> August - 10am – 12</li> <li>18<sup>th</sup> September 2pm – 4pm</li> </ul>	

## Scrutiny Board (Adult Social Care)

### **Scrutiny Board Inquiry: Personalisation**

Working Group Meeting: 14<sup>th</sup> August 2009

### Present Members

Cllr Judith Chapman – Chair (JC) Cllr Penny Ewens (PE) Cllr Vonnie Morgan (VM) Joy Fisher (co-opted member) (JF) Sally Morgan (co-opted member) (SM) **Officers** John Lennon – Chief Officer, Access and Inclusion (JL) Emma Lewis – Business Change Manager (EL) Leonie Gregson – Communications Officer (LG) Sandra Newbould – Principal Scrutiny Advisor (SN) **Experts by Experience** Rob Moriarty and PA (Dave) Sandra O'Donovan and PA

Apologies Cllr James McKenna

No.	Item	Action
1	Attendance	
	The attendance and apologies as above were noted.	
	The Chair welcomed everyone to the meeting, particularly Rob, Sandra and their P.A's.	
2	Notes of Previous Meeting –	
	The draft notes of the meeting were presented and agreed.	
3	Customer and stakeholder engagement, involvement and consultation.	
	LG introduced the paper presented to the working group. Explaining that she has been assigned full time to communicate information and generate publicity around personal budgets.	
	<ul> <li>The main stakeholders were identified as:</li> <li>existing and potential social care customers</li> <li>carers and relatives</li> <li>the general public</li> <li>the media</li> <li>Leeds City Councillors</li> <li>internal and external adult social care providers</li> <li>adult social care staff (including front-line staff as a separate group)</li> <li>other council staff (especially those in related areas such as housing, benefits, transport, learning and leisure)</li> <li>partner organisations and other agencies.</li> </ul>	

Published flyers, booklets and the most recent newsletter were shown to the working group. It was explained that in addition advertisements had been placed in local magazines and journals. Information is available on the LCC website, on the www.olderpeopleleeds.info website and on partner websites such as the NHS.

Future communication material will include:

- A guide to becoming an employer
- The completed peer group support website
- DVD will be available in September
- Consultation events at Day Centres and with Community Groups.
- Workshops with carers, users and staff
- Further media and publicity including billboard advertising.
- Surveys to market test that the message is reaching the right people.

### Concerns raised:

Are there enough sufficiently trained P.A's in the market place? Professionally trained P.A's are not always what users want, they may value someone who is friendly, trustworthy and dependable. It is the responsibility of Social Services as commissioners however to influence the market and make the role attractive.

### Will all employees be CRB checked?

We strongly recommend this and most people take up the offer of this being done for them by ASIST however it is up to the individual to decide if this is necessary. There are circumstances, for example where the potential employee may be a long and trusted friend of relative and the PB user does not wish them to undergo a CRB check.

## Will there be assistance provided in helping the individual employ the right person?

Yes ASIST has been a valuable asset in helping in this area. A guide will also soon be published.

## Will information be on display in public areas and staff adequately trained to provide advice?

Staff and the wider systems knowledge of the development of Personal Budgets remains one of our key tasks Training in the new operating systems and t he Communication ,Consultation and Engagment plan is one of a number of strategies we will employ to ensure the advice our staff and others provide is appropriate, timely and accurate . Adequate display of information can be an issue which needs to be monitored.

## Communication will be required to a huge expanse of stakeholders how will this be managed?

Communication is general at the moment in order to reach the wider audience but will become specific and focus on particular groups.

What about people who want to plan for later life r Putting People First strategy describes how all Counce future be reshaping information the available so that their own preventative measures into place This in part of the universal offer to all residents who provide the public with access to high quality informat allow them to make informed decisions regarding thei and wellbeing and help maintain their independence .	cil' s will in the people can put se aim is to ion that will r own health
Will people be disadvantaged because they do not to IT equipment? Our aim is to provide the same quality of information i online .It can be bespoke to suit the users needs, i.e. Braille. The peer website will also be adaptable to suit needs.	n hard copy or large print,
The working group asked for a full copy of the Commu consultation and engagement strategy. To be sent to	
<ul> <li>Peer Group Support</li> <li>Sandra O'Donovan expert-by- experience explained to group the purpose of the peer support group, which course of 7 individuals who are current direct payment/person holders.</li> <li>The group provides peer support to other people who own social care services. They acknowledged that the at how this can be provided effectively across Leeds a initially setting up a phone line would be the best way went live on the 1<sup>st</sup> of June. To date most callers have older community, 50% have been aged 70+. A websi being designed a demo of which was presented to the by Rob Moriarty.</li> </ul>	o the working urrently consists anal budget o manage their ey need to look and decided that forward which e been from the te is currently
Concerns raised: <b>Has the peer support group come across anyone of happy in the early implementer project?</b> Sandra advised the working group that the RAS is not as she needs 24/7 support. She stated that her case hereview panel and it still has not been resolved. There are both people who are happy and unhappy, be generally happy. The support group aims to give advise confidence to people who need to challenge decisions believe they are wrong.	t working for her has been to out in the main ce and give
Do individuals have to wait unnecessarily for their budget and how long can disputes go on for?	r personal

	<ul> <li>Disputes can continue for months. An example was given to the group of a case where potentially the service user could loose a college place if the matter remains unresolved. The group was also advised that sometimes there is a difference in what an individual expects to receive and what they are actually entitled to.</li> <li><b>Is peer support in place for P.A's?</b></li> <li>It was explained that currently a career as a P.A. does not seem to be long terms with much of the workforce move onto other things after a 6 – 12 month period and therefore in the past it has been difficult to establish an ongoing support network.</li> <li>There was further discussion relating to problems with accessing direct payment which is not a matter for this inquiry.</li> </ul>	
5	Further Action	
	Session 5 -18 <sup>th</sup> September 2009	
	During the session of the inquiry the working group scheduled to examine:	
	<ul> <li>The Single Assessment Process - so people 'only need to tell their story once'.</li> </ul>	
	<ul> <li>Brokerage Services and the pathways to establishing and managing support.</li> </ul>	
	Partnership Working	
6	Future Meeting Dates	SN
	<ul> <li>18<sup>th</sup> September 2pm – 4pm</li> <li>Oct, Nov and Dec dates to be confirmed</li> </ul>	

Agenda Item 11



Originator: Sandra Newbould

Tel: 247 4792

Report of the Head of Scrutiny and Member Development

Scrutiny Board (Adult Social Care)

Date: 7<sup>th</sup> October 2009

Subject: Scrutiny Board (Adult Social Care) – Work Programme

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
	Narrowing the Gap

### 1.0 INTRODUCTION

- 1.1 Attached at Appendix 1 is the current work programme for the Scrutiny Board (Adult Social Care) for the remainder of the current municipal year.
- 1.2 Also attached for Members consideration is an extract from the Forward Plan of Key Decisions for the period 1 October 2009 to 31 January 2010 as Appendix 2.
- 2.0 The Executive Board meeting held on the 17<sup>th</sup> September 2009 dealt specifically with Development and Regeneration issued pertaining to the Leeds United Thorp Arch Academy and therefore does not come under the remit of the Adult Social Care Scrutiny Board

### 3.0 WORK PROGRAMME MATTERS

- 3.1 The current work programme (Appendix 1) provides an indicative schedule of items/ issues to be considered at future meetings of the Board. The work programme should be considered as a live document that will evolve over time to reflect any changing and/or emerging issues that the Board wishes to consider.
- 3.2 The work programme also provides an outline of other activity being undertaken on behalf of the Board outside of the formal meetings cycle.

### 4.0 RECOMMENDATIONS

- 4.1 From the content of this report, its associated appendices and discussion at the meeting, Members are asked to:
  - 4.1.1 Note the general progress reported at the meeting;

4.1.2 Receive and make any changes to the attached work programme; and, Page 57 4.1.3 Agree an updated work programme.

### 5.0 BACKGROUND PAPERS

None.

Item	Description	Notes	Type of item	
Meeting date – 17 <sup>th</sup> June 20	Meeting date – 17 <sup>th</sup> June 2009			
Legislation and Constitutional Changes	To receive and consider a report of the Head of Scrutiny and Member Development on proposed changes to the Council's Constitution in relation to Scrutiny.		В	
Co-opted Members	To receive and consider a report of the Head of Scrutiny and Member Development on Co-opted Members.		В	
KPMG Audit Report	To receive and consider a report of the Head of Scrutiny and Member Development on a scrutiny review by KPMG as at May 2009.		PM/B	
2009/10 Work Programme	Input to the Boards Work Programme 2009/10 - Sources of Work and Establishing the Boards Priorities and Determining the Work Programme 2009/10		в	
Draft Adaptation Inquiry Report	Scrutiny Board (Adult Social Care) has now completed its inquiry on Major Adaptations for Disabled Adults . The draft report is brought before the board for consideration and where the content is agreed, its approval.		PM/D	

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
VCFS Report	Executive Board resolved that the Scrutiny Board (City and Regional Partnerships) inquiry report into the role of the voluntary, community and faith sectors in Council led community engagement be referred to Scrutiny Board (Children's Services) and Scrutiny Board (Adult Social Care) for consideration.	Lead Officer – Sue Wynne	RFS
Meeting date – 29 <sup>th</sup> July 200	9		
Performance Management	Quarter 4 information for 2008/09 (Jan- March)	All Scrutiny Boards receive performance information on a quarterly basis	PM
Independence, Well-being and Choice – action plan update	To consider progress against the action plan arising from the inspection report	Outcome of the ASC Proposals Working Group meeting (20 July 2009) to feed into this item.	RFS/PM
Personalisation Working Group updated Terms of Reference.	To consider the revised terms of reference for he 2009/10 municipal year for the Personalisation Working Group.		PM/DP

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
LINk Annual Report	To consider the content of the LINk Annual Report and the potential impact on the 2009/10 Scrutiny Work Programme	Copies of LINk annual reports must be made available to the public and sent to the Secretary of State and the Care Quality Commission. Copies must also be sent to relevant Local Authorities, Primary Care Trusts, Strategic Health Authorities and Overview and Scrutiny Committees.	РМ
Safeguarding Board – Annual Report	The board is requested to consider the Annual report and make recommendation as necessary.	The report is scheduled to be presented at the July's Executive Board.	РМ
Meeting date – 20 <sup>th</sup> August	2009 – Special Meeting		
Day Services	The board has requested a specific meeting to look at the future plans for Day services across the city.	Lead officer - Dennis Holmes	RP
Meeting date – 9 <sup>th</sup> Septemb	er 2009		
Performance Management	Quarter 1 information for 2009/10 (April- June)	All Scrutiny Boards receive performance information on a quarterly basis	РМ
The Mental Capacity Act Update since implementation	To consider a further report on progress made implementing the requirements of the MCA.	Further update from May 2009 Lead Officer – Dennis Holmes.	В

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Inquiry into Adaptations – Response from Director and Executive Board	To receive and update on the formal response to the inquiry by the Director(s) identified in the recommendations and the views of the Executive Board	This report is due to go to Executive Board in August 2009	РМ
Terms of Reference - Inquiry into 'Supporting Working Age Adults with Severe and Enduring Mental Health Problems.	To receive and approve the draft terms of reference.	The Adult Social Care Scrutiny Board expressed interest in holding a major inquiry in relation to Mental Health Services for working aged adults at its meeting on the 17 <sup>th</sup> of June 2009.	PM
Care Quality Commission – self assessment report	To receive an update on the self assessment report due to be submitted to the Care Quality Commission which will determine the annual rating for the service.	Lead Officer – Sandie Keene	PM
Meeting date – 7 <sup>th</sup> October	2009		
Independence, Well-being and Choice – action plan update	To consider progress against the action plan arising from the inspection report	Outcome of the ASC Proposals Working Group meeting September 2009 to feed into this item.	RFS/PM
Personalisation Working Group Update	To consider the progress of the working group.	Outcome of the ASC Personalisation Working Group meetings up to August 2009 to feed into this item	PM/DP

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Commissioning in Adult Social Care	To consider an update report on commissioning within Adult Social Services.	6-monthly report. – Previous March 09 Additional focus on IWC Action Plan. Procurement timetable to be included in this report. Lead Officer – Dennis Holmes/ Tim O'Shea	РМ
Day Services	The board has requested an update following the meeting in August 2009 to further consider at the future plans for Day services across the city and the actions taken since the meeting.	Lead officer - Sandie Keene	RP
Meeting date – 11 <sup>th</sup> Novem	per 2009		
Income Review – Impact of price increases on Service users.	To receive an update on the impact of price increases on services users.	Report requested from April 2009 Scrutiny Board Meeting	RP
Dignity in Care - delivery	To receive an update on the current work and developments across the City highlighting how dignity is being delivered, what improvements are being made and the challenges ahead.		в

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Homecare provision	Performance report on homecare provision across the City, including independent sector providers.	Further update from May 2009 Lead Officer – Dennis Holmes	РМ
Meeting date – 16 <sup>th</sup> Decem	ber 2009		
Adult Social Services- Annual Review Report (2008/09)	To consider the outcome of the annual rating review undertaken by the Care Quality Commission (formerly the Commission for Social Care Inspection (CSCI)) for 2008/09	Report will be scheduled for Executive Board meeting on 9 <sup>th</sup> December 2009.	РМ
Inquiry into Adaptations – Performance Updates and Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board 17 <sup>th</sup> June 09	Considered by Executive Board August 2009.	PM MSR
Performance Management	Quarter 2 information for 2009/10 (July - Sept)	All Scrutiny Boards receive performance information on a quarterly basis	РМ

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
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Item	Description	Notes	Type of item
Meeting date – 13 <sup>th</sup> Januar	y 2010		-
Personalisation Working Group Update	To consider the progress of the working group.	Outcome of the ASC Personalisation Working Group meetings September - December to feed into this item	PM/DP
Transitional arrangements for Children (up to 25 years of age) with learning disabilities into Adult	Following the establishment of the transitions team the board are to consider the policies, procedures and practices in place or in development to ensure a smooth transition from Child Social Care to	Representative from Childrens Scrutiny Board to be requested to join the board for this item.	RP/DP
Social Care Services.	Adult Social Care	Lead Officer – Michelle Tynan	
Meeting date – 10 <sup>th</sup> Februar	ry 2010		
Safeguarding Update	To consider an update report since the implementation of performance measures to improve Adult Safeguarding.	Quarterly update since the last Independence Wellbeing and Choice update on the 7 <sup>th</sup> of October. Lead Officer – Dennis Holmes	
Personalisation Statement	Board to agree a statement/report on progress so far.	Response to Executive Board	

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
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Item	Description	Notes	Type of item
Meeting date – 17 <sup>th</sup> March	2010		
Commissioning in Adult Social Care	To consider an update report on commissioning within Adult Social Services.	6-monthly report. – Previous September 09. Lead Officer – Dennis Holmes/ Tim O'Shea	РМ
Performance Management	Quarter 3 information for 2009/10 (April - June)	All Scrutiny Boards receive performance information on a quarterly basis	РМ

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Meeting date – 14 <sup>th</sup> April 20	010		
Personalisation Working Group Update	To consider the progress of the working group.	Outcome of the ASC Personalisation Working Group meeting to feed into this item	PM/DP
Annual Report	To agree the Board's contribution to the annual scrutiny report		

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
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		Wo	orking Groups	
Working g	Jroup	Membership	Progress update	Dates
Personalisation N Group	Norking	Cllr. Judith Chapman Cllr Alan Taylor Cllr James McKenna Cllr Veronica Morgan Joy Fisher (co-optee) Sally Morgan (co-optee)	Terms of reference agreed. All meetings scheduled.	Confirmed dates         1) $30^{th}$ July         9:30am – 12:00         Committee Room 3         2) $14^{th}$ Aug         10.00am – 12:00         Committee Room 1         3) $18^{th}$ Sept         2:00pm – 4:00 pm         Committee Room 3         4) $15^{th}$ Oct         10:00am – 12:00         Committee Room 2         5) $11^{th}$ Nov         2:00pm – 4:00pm         Committee Room 3         6) $10^{th}$ Dec         10:00am – 12:00         Committee Room 3
Key:	T =			
RFS	Request fo		MSR Monitoring scrutiny recomme	
	V		B Briefings (Including potential	areas for scrutiny)
PM RP		existing policy	SC Statutory consultation	

Working Groups					
Proposals working group	Cllr. Judith Chapman Cllr. Penny Ewens Cllr. Clive Fox Joy Fisher (co-optee) Sally Morgan (co-optee)	Meetings scheduled.	Confirmed Dates 1) 20 <sup>th</sup> July 3pm – 5pm Committee Room 5 2) 29 <sup>th</sup> Sept 10am – 12 Committee Room 3		
Supporting Working Age Adults with Severe and Enduring Mental Health Problems	Cllr Judith Chapman Cllr Clive Fox Cllr James McKenna Cllr Eileen Taylor Joy Fisher ( co-optee) Sally Morgan + Health Board member(s)	Draft Terms of Reference presented to Scrutiny 9 <sup>th</sup> September 2009.	<i>Meetings to be Scheduled October 2009 – January 2010</i>		

Key:			
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Unscheduled / Potential Items from 2009/10					
Item	Description	Notes			
Annual complaints report	To consider the annual report and any emerging issues.	Report published on 20 August 2008			
Continuing Care Implementation	To consider the local impact and future activity associated with implementing the national framework for continuing NHS care.	Lead Officer – Dennis Holmes. Report presented to the Executive Board in October 2007.			
Valuing People Now	To consider progress against the implications outlined in the report presented to the Executive Board in February 2008, alongside any future proposed actions.	Lead Officer - Paul Broughton replacement Executive Board scheduled to receive an update in February 2009. Suggest that Day care provision is scheduled at some point into the annual programme for 2009/10 due to staff reduction and potential reduction in provision.			
No Secrets Review	To consider the outcome and implications of the No Secrets Review the outcome of which will be announced by the Government.	Lead Officer – Dennis Holmes			

Key:			
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### LEEDS CITY COUNCIL

### FORWARD PLAN OF KEY DECISIONS

For the period 1 October 2009 to 31 January 2010

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Key Decisions	Decision Maker	Expected Date of Decision	Proposed Consultation	Documents to be Considered by Decision Maker	Lead Officer (To whom representations should be made and email address to send representations to)
Temporary Staff Contract Adults and Children's Social Care To extend the current Temporary Staff contracts for Adults and Children's Social Care for 5 months until the 31 <sup>st</sup> March 2010 to allow the integration of the contract into the new corporate temporary staff contract.	Director of Adult Social Services	1/10/09	Children's and Adults Commissioning Board.	None.	Director of Adult Social Services mark.phillott@leeds.go v.uk
St Anne's alcohol residential rehabilitation To extend the existing contract from 1 April 2010 for up to 12 months to allow for a full tender exercise to be undertaken	Director of Adult Social Services	1/10/09	Pre tender consultation with service users and stakeholders	Report to the Director, contract monitoring information	Director of Adult Social Services sinead.cregan@leeds. gov.uk

Key Decisions	Decision Maker	Expected Date of Decision	Proposed Consultation	Documents to be Considered by Decision Maker	Lead Officer (To whom representations should be made and email address to send representations to)
Leeds Skyline HIV/AIDS Social Care and Prevention Service To extend the existing contract from 1 April 2010 for two years	Director of Adult Social Services	1/10/09	Needs Assessment is currently being undertaken	Report to the Director, Contract monitering information	Director of Adult Social Services sinead.cregan@leeds. gov.uk
Holt Park Wellbeing Centre Approval sought to affordability of proposals and to submit Outline Business Case to The Department of Health.	e Executive Board (Portfolio:Adult Health and Social Care)	14/10/09	Consultation will be carried out with the following groups in the preparation of the Outline Business Case: Wellbeing Project Board, Client Department representatives, local community, planning.	The report to be issued to the decision maker with the agenda for the meeting	Director of Development ed.mylan@leeds.gov.u k

Key Decisions	Decision Maker	Expected Date of Decision	Proposed Consultation	Documents to be Considered by Decision Maker	Lead Officer (To whom representations should be made and email address to send representations to)
Adult Social Care Home Care Contracts To extend the Adult Social Care cost/volume contracts and the independent living contracts to 31 <sup>st</sup> August 2010 to allow the directorate to procure a new type of domiciliary care contract from this date.	Director of Adult Social Services	29/10/09	Children's and Adults Commissioning Board.	None.	Director of Adult Social Services mark.phillott@leeds.go v.uk
Residential Care Strategy for Older People in Leeds Approval to consult on options for future provision of long term residential care services.	Executive Board (Portfolio:Adult Health and Social Care)	4/11/09	All stakeholders.	The report to be issued to the decision maker with the agenda for the meeting	Director of Adult Social Services dennis.holmes@leeds. gov.uk
Annual Performance Assessment for Adult Social Services To note the outcome of the Annual Performance Assessment for Adult Social Services	Executive Board (Portfolio: Adult Health and social Care)	9/12/09		The report to be issued to the decision maker with the agenda for the meeting	Director of Adult Social Services dennis.holmes@leeds. gov.uk

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### <u>NOTES</u>

Key decisions are those executive decisions:

- which result in the authority incurring expenditure or making savings over £250,000 per annum, or
- are likely to have a significant effect on communities living or working in an area comprising two or more wards

Executive Board Portfolios	Executive Member
Central and Corporate	Councillor Richard Brett
Development and Regeneration	Councillor Andrew Carter
Environmental Services	Councillor James Monaghan
Neighbourhoods and Housing	Councillor John Leslie Carter
Leisure	Councillor John Procter
Children's Services	Councillor Stewart Golton
Learning	Councillor Richard Harker
Adult Health and Social Care	Councillor Peter Harrand
Leader of the Labour Group	Councillor Keith Wakefield
Leader of the Morley Borough Independent Group	Councillor Robert Finnigan
Advisory Member	Councillor Richard Lewis

In cases where Key Decisions to be taken by the Executive Board are not included in the Plan, 5 days notice of the intention to take such decisions will be given by way of the agenda for the Executive Board meeting.

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