

CSCI INSPECTION: INDEPENDENCE, WELLBEING AND CHOICE

Leeds City Council

ACTION PLAN

November 2008

Introduction

1. Attached is the Action Plan which has been developed in response to the CSCI Inspection on Independence, Wellbeing and Choice. It has been developed by the Departments Management Team and through a workshop with a wider group involving Adult Social Care managers and representatives of partner agencies.
2. The Inspection team has recognised that the services in Leeds are improving and elected members and officers are committed to sound and equitable provision. In turn there is a focussed determination to improve which is shared by members, managers and partners and confidence that front line staff share that determination.
3. The Action Plan responds to all recommendations. In particular it sets out strategies to deal with issues of front line practice in:
 - safeguarding where immediate action has been taken to assure a good multi-agency response where there is concern for the welfare of vulnerable individuals
 - the development of standards of practice in safeguarding, assessment, care management and hospital discharge which reflect a commitment to individual preference and choice
 - the development of a quality assurance framework which routinely shows how far these standards are achieved and feeds any lessons into improving practice
4. There are well established and sound working relationships with users, carers, the third sector and independent providers. It is planned to build on these to ensure that their contribution and that of front line practitioners is fed into proposals for practice and strategic development.
5. Notwithstanding that the Council has yet to finalise its budget for 2009/10, arrangements are in place to recruit 10 senior practitioners to support, coach and monitor quality in safeguarding and social care practice. A joint Head of Safeguarding, 3 independent safeguarding chairs and additional quality assurance staff will also be appointed as part of this process.

6. The Action Plan will be robustly monitored:

- ◇ Where numerical baselines have been established for performance and hard targets set, performance against these targets will be reported by the accountable Chief Officer against 'traffic light' performance reports to the monthly Departmental Management Team performance board.
- ◇ This will be supported by monthly reporting to the Executive Lead Member and inclusion into the quarterly reporting to the Adult Social Care Scrutiny Board where performance will be open to public scrutiny and challenge.
- ◇ In addition, in relation to performance against Adult Safeguarding targets, the Adult Safeguarding website will include dedicated space to report performance by the statutory partners and by the Partnership itself, accessible to the wider public.
- ◇ The performance of the work of the Safeguarding Partnership Board and its sub-groups will be reported to and open to challenge by the governance structures of the Statutory partners. Furthermore its overall annual performance will be formally reported through the Statutory boards of the partners.

7. The action plan contains an implementation timetable describing the urgency associated with specific actions and the timespan over which the issue is proposed to be addressed.

8. There are clear accountabilities set out in the Plan for the achievement of each improvement. A list of responsible officers and their job role is given in the plan.

9. In the end the success of this Action Plan will depend on and be measured by improved outcomes for the people of Leeds.

10. The Plan makes plain these aspirations and how they will be measured.

Sandie Keene
Director of Adult Social Care

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Independence, Wellbeing & Choice Inspection Action Plan

Recommendation 1: The Council should urgently ensure that concerns are investigated, strategy meetings and protection plans devised and implemented where necessary

	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources N/Y,
1.1	Multi-Agency Safeguarding arrangements for meet national standards and protect vulnerable adults.	Meeting of Director of Adult Social Services, Chair of Safeguarding Board, Partner Executive Directors and Chief Officers to secure the commitment to the rapid development of local multi-agency safeguarding	Yr 1 Qtr 3	Sep-08	Nov-08	Nov 08	All statutory agencies formally committed via written Memorandum of Understanding (MOU) which is signed by all partners	Leeds PCT Leeds Hospital Trust Leeds Partnership Trust West Yorkshire Police West Yorkshire Probation Service	Dennis Holmes Chief Officer (Social Care Commissioning)	Director of Adult Social Services	Adult Safeguarding Plan 2008/09	N
1.2	Multi-Agency Safeguarding arrangements for meet national standards and protect vulnerable adults.	The TOR of the Adult Safeguarding Partnership Board are re-written and agreed to reflect current national best practice requirements in safeguarding vulnerable adult arrangements across Leeds.	Yr 1 Qtr 3	Sep-08	Nov-08	Nov 08	Safeguarding Partnership Board and sub group structure is established with new TOR. These provide the governance to ensure and monitor that all relevant agencies and staff are equipped to safeguard vulnerable adults across Leeds Improvements to be measured by the QA sub-group. Baseline & targets	Leeds PCT Leeds Hospital Trust Leeds Partnership Trust West Yorkshire Police West Yorkshire Probation Service	Dennis Holmes Chief Officer (Social Care Commissioning)	Director of Adult Social Services	Adult Safeguarding Plan 2008/09	N

Yr1 = 2008/09, Yr2 = 2009/10

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N = to be met from existing resources
Y = in year or investment budgeted

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1.3	Leadership of Adult Safeguarding Board is effective and arrangements ensure that vulnerable adults are safeguarded.	A Head of Safeguarding appointed with partners to drive and support the boards work.	Yr 1 Qtr 3	Oct-08 Jan 09	Jan-09 Jan 10	Head of Adult Safeguarding is jointly appointed. All key stages of the Adult Safeguarding plan 2008/09 are completed & plan for 09/10 published and actioned.	Safeguarding Partnership Board	Dennis Holmes Chief Officer (Social Care Commissioning)	Director of Adult Social Services	Adult Safeguarding Plan 2008/09	Y In year investment
1.4	Staff engaged with the delivery of protective action to safeguard vulnerable adults are provided with immediate advice on minimum standards of practice	Letter to all Service Delivery Managers and team managers outlining requirements in relation to current safeguarding practice to be cascaded and managed via the line management structure.	Yr 1 Qtr 3	Sep-08 Dec 08	Dec-08 Mar 09	All staff are aware of and understand expectations regarding the safeguarding procedures and the need for effective outcomes evidenced via audit of enquiries post Sept 08 by independent auditor. Report defines any further action required and Chief officer action with fieldwork staff to embed requirements	Service Delivery Managers/ Safeguarding Enquiry Practitioners/ Fieldwork Practitioners.	Brian Rather, Nyoka Fothergill, Jim Taynor, Phil Schofield, Jane Moran, Gill Chapman, Steve Bardsley. (Service Delivery Managers)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Adult Social Care Business Plan 2008/09 / Adult Safeguarding Plan 2008/09	N
1.5	Management action ensures that frontline management quality assurance is effective in supporting good practice	Roll out to fieldwork staff a supervision checklist as an aide memoire, including key issues for frontline managers to consider in supervision in relation to safeguarding practice.	Yr 1 Qtr 3	Oct-08	Jan 09	Casework audit shows that fieldwork staff are being effectively supervised and this is evidenced in case file notes in relation to safeguarding casework	Service Delivery Managers/ Safeguarding Enquiry Practitioners/ Co-ordinators/ Fieldwork Practitioners.	Brian Rather, Nyoka Fothergill, Jim Taynor, Phil Schofield, Jane Moran, Gill Chapman, Steve Bardsley. (Service Delivery Managers)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Adult Social Care Business Plan 2008/09 / Adult Safeguarding Plan 2008/09	N

Y11 = 2008/09, Y12 = 2009/10

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1.6	Frontline staff are equipped to safeguard vulnerable adults and have competencies to do so effectively.	Each social work team has undertaken a workshop training session on roles and responsibilities in relation to safeguarding.	Yr 1 Qtr 3	Oct-08	Dec-08	All fieldwork teams have attended a training session on roles & responsibilities in relation to safeguarding by the end of the year.	Service Delivery Managers/ Safeguarding Enquiry Coordinators/ Practitioners/ Fieldwork Practitioners.	Graham Sephton (Deputy HR Manager)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Adult Social Care Business Plan 2008/09 / Adult Safeguarding Plan 2008/09	N
1.7	Independent audit undertaken & establishes that vulnerable people in Leeds are being effectively safeguarded	Review 20 sampled safeguarding cases by external consultant to ascertain progress in improvement of standards.	Yr 1 Qtr 3	Oct-08	Dec-08	Audit report shows improved standard of practice compared with inspection findings. Establishes a baseline of current practice.	Service Delivery Managers/ Safeguarding Enquiry Coordinators/ Practitioners/ Fieldwork Practitioners/ Safeguarding Partnership Board.	Margaret Flynn (External Expert)	Chief Officer (Social Care Commissioning)	Adult Social Care Business Plan 2008/09 / Adult Safeguarding Plan 2008/09	Y In year budget
1.8	Fieldwork Structures are reinforced to coach, support and monitor quality of practice	Establish 10 Senior Practitioner posts with associated administrative support to coach, support, audit and assure quality of practice concentrating initially on safeguarding work in front line adult social care teams.	Yr 1 Qtr 3	Oct-08 Jan-09	Jan-09 June 09	Additional specialist resources are in place to support existing fieldwork in ensuring that vulnerable adults are safeguarded. Future monitoring demonstrates improved outcomes for people. Baseline measures to be established	Service Delivery Managers/ Safeguarding Enquiry Coordinators/ Practitioners/ Administrators	John Lennon Chief Officer (Access and Inclusion)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Adult Safeguarding Plan 2008/09	Y In year budget

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1.9	<p>Independent Quality Assurance Processes are implemented and ensure timely and effective safeguarding.</p>	<p>Establish 3 independent specialist chairs in the city to independently manage all case conferences and strategy meetings. Establish appropriate administrative support to these posts.</p>	Yr 1 Qtr 3	Oct-08	Jan-09		<p>Additional specialist resources are in place to support existing fieldwork in ensuring that vulnerable adults are safeguarded. Future monitoring demonstrates improved outcomes for people. Baseline measures to be established</p>	<p>The three posts are linked to the Adult Safeguarding Unit and support the work of the Co-ordinator in relation to assuring the quality of front-line interagency safeguarding work</p>	<p>Emma Mortimer (Safeguarding Coordinator)</p>	<p>Chief Officer (Social Care Commissioning)</p>	<p>Adult Safeguarding Board Action Plan 2008/09</p>	<p>Y In year budget</p>
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Recommendation 2: The Council should strengthen frontline quality assurance arrangements to ensure that minimum standards of practice and recording are implemented routinely in responding to adult safeguarding alerts.

Recommendation 6: The Adult Safeguarding Board should prioritise the development of the Quality Assurance sub-group.

	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? ie, task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
2.1	<p>Expectations about the quality of practice reflect those of service users and stakeholders.</p> <p>Services can be evidenced as meeting these expectations and services are committed to meeting the expectations</p>	<p>Establish practice standards, and competencies in relation to:</p> <ul style="list-style-type: none"> - adult safeguarding practice. - interagency work, - communications, recording, and information sharing with partner agencies. - Case management - referral, assessment, care planning and review. - appraisal and supervision, - hospital discharge processes and associated services to support, - advocacy, information and support to service users and carers, -direct payments and self directed care. <p>Communicate to all staff.</p>	Yr 1 Qtr 4	Oct-08	Jun-09		<p>A clear basis for measuring and managing performance is established which will demonstrate best practice and outcomes for service users and carers.</p>	<p>Commissioning/ Adult Safeguarding Partnership/ Performance and Quality Assurance.</p>	<p>Stuart Cameron-Strickland (Head Of Performance)</p>	<p>Chief Officer (Social Care Commissioning)</p>	<p>Adult Safeguarding Plan 2008/09</p>	N
2.2	<p>Independent Quality Assurance Processes are developed and effective in</p>	<p>Specialist consultant audits practice standards to inform and establish an ASC independent quality assurance</p>	Yr 1 Qtr 4	Oct-08	Mar 09		<p>A systematic approach to assuring safeguarding practice is</p>	<p>Commissioning/ Adult Safeguarding Partnership/ Performance and</p>	<p>Stuart Cameron-Strickland (Head Of Performance)</p>	<p>Chief Officer (Social Care Commissioning)</p>	<p>Adult Safeguarding Plan 2008/09</p>	Y In year budget

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2.3	improving performance	systems (See 1.7)	Yr 1 Qtr 4	Feb-09	Apr-09		<p>established by independent expertise in safeguarding practice.</p> <p>Compliance with practice standards evidenced. A baseline needs to be established.</p> <p>A monthly schedule for quality reports and action plans established and monitoring of progress ongoing.</p> <p>Baselines are established from which to measure practice improvement.</p> <p>Improvements in practice and outcomes for people are evidenced by the reports.</p>	<p>Quality Assurance/ Quality Assurance Sub group Access and Inclusion Service</p> <p>AP Board and Subgroup/ Elected Members/ Non-executive Directors from Health/ Scrutiny/ Executive Lead Member.</p>	<p>Stuart Cameron-Strickland (Head Of Performance)</p>	<p>Chief Officer (Social Care Commissioning)</p>	<p>Adult Safeguarding Plan 2008/09</p>	<p>N</p>
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2.4	Frontline quality assurance ensures improvements in compliance with safeguarding standards and delivery of safeguarding outcomes for vulnerable adults.	Develop processes of peer file audits against an agreed checklist by frontline practitioners and managers:	Yr 1 Qtr 3	Oct-08	Dec-09		Frontline managers undertake audits and provide quarterly report to DMT performance board. (see 2.3) Baselines for performance established and reports show improved performance.	Adult Safeguarding professional practice subgroup	Brian Ratner, Nyoka Fothergill, Jim Taynor, Phil Schofield, Jane Moran, Gill Chapman, Steve Bardsley. (Service Delivery Managers) & Emma Mortimer (Safeguarding Coordinator)	Chief Officer (Access and Inclusion) Chief Officer (People with Learning Disability)	Adult Safeguarding Plan 2008/09 Access and Inclusion Service Improvement Plan	N
2.5	Managers can evidence that care packages are creative, personalised, informed and contribute to safeguarding awareness and prevention.	Establish quality circle for managers - sharing learning-	Yr 1 Qtr 4	Jan 09	Mar 09		Managers are able to operate to minimum standards and are developing more creative, personalised ways of interagency working. This is evidenced in QA of case work. Baseline measures to be established (see 1.7)	Adult Safeguarding professional practice subgroup	Brian Ratner, Nyoka Fothergill, Jim Taynor, Phil Schofield, Jane Moran, Gill Chapman, Steve Bardsley. (Service Delivery Managers) & Emma Mortimer (Safeguarding Coordinator)	Chief Officer (Access and Inclusion) Chief Officer (People with Learning Disability)	Adult Safeguarding Plan 2008/09 Access and Inclusion Service Improvement Plan	N

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2.6	Improvements in safeguarding work and outcomes can be shown to flow from management action and governance arrangements put in place by the safeguarding partnership.	The partnership board to establish a Performance, Audit and Quality Assurance (PAQA) sub group with representation from key agencies.	Yr 1 Qtr 3	Jul-08	Dec-08		A core group with TOR defining governance and reporting arrangements is approved by the Safeguarding Partnership board.	Statutory Partners, Elected Members, Non-executives from health, Service user and carer reps,	Emma Mortimer Adult (Safeguarding Coordinator)	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/09	N
2.7	Improvements in safeguarding work and outcomes can be shown to flow from management action and governance arrangements put in place by the safeguarding partnership.	An audit of existing arrangements is undertaken by PAQA. Recommendations for improvements are made. A report of this is submitted to the board for agreement.	Yr 1 Qtr 3	Oct-08	Mar-09		Audit report completed and recommendations approved by Safeguarding Partnership board.	Statutory Partners, Elected Members, Non-executives from health, Service user and carer reps, Performance leads	Emma Mortimer Adult (Safeguarding Coordinator)	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/09	N

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Recommendation 3: The Council and its partners should agree and implement improved procedures, ensuring that these:
 - Set out specific and monitorable expectation on staff from all agencies.
 - Implements a system of compliance monitoring processes that ensure consistent practice.

	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
3.1	Arrangements for safeguarding vulnerable adults are effective across agencies and disciplines.	Stage 1: Revise multi-agency safeguarding procedures. Stage 2: Ratify procedures through all agencies governance processes	Yr 1 Qtr 3	Oct 07 Dec 08	Dec-08 Dec 09		Procedures agreed by partners and agencies. Procedures ratified by all partners and agencies.	Safeguarding Partnership/ Service users and carers	Emma Mortimer Adult (Safeguarding Coordinator) Head of Safeguarding	Chief Officer (Social Care Commissioning)	Leeds Strategic Plan 2008/11 Adult Safeguarding Plan 2008/09	N
3.2	Arrangements for safeguarding vulnerable adults are coordinated across agencies and disciplines	Agree protocols for Joint Working with Adult Social Care across partner agencies, and with particular regard to identified vulnerability, ie, homeless unit, community safety, domestic violence leads, etc.	Yr 1 Qtr 3	Oct-08 Jan 09	Jan-09 June 09		Protocols are in place and agreed QA of case files evidence effective use of protocols baseline and targets to be developed and agreed.	Safeguarding Partnership/ Service users and carers	Emma Mortimer Adult (Safeguarding Coordinator)	Chief Officer (Social Care Commissioning)	Leeds Strategic Plan 2008/11 Adult Safeguarding Plan 2008/09	N
3.3	Increase awareness and understanding of issues and	Specify and implement a comprehensive communications and social marketing strategy	Yr 1 Qtr 3/4 Yr 2 Qtr 1	Oct-08 Jun	Jun-09 Jan 10		Marketing strategy is implemented Surveys and quality	Safeguarding Partnership/ Service users and carers/ The public	Mike Sells (Communications Manager)	Chief Officer (Resources)	Adult Social Care Comms Strategy	N

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	arrangements regarding safeguarding vulnerable adults.	in relation to adult safeguarding,				assurance establish baseline and targets relating to outcome measures.					
3.4	Develop a Safeguarding Adults Charter for Leeds	Partners, agencies, service users, carers and public have information that is accurate, accessible & appropriate in terms of safeguarding standards & are able to take action to shape policy and hold the partnership to account	Yr2 Qtr 2/3	Jun 09	Jan 10	Charter is developed by Adult Safeguarding Partnership board sub-group and ratified by board by Jan 2010 for adoption by partners	Safeguarding Partnership/ Service users and carers/ The public	TBC (see Rec 1.3) (Head of Adult Safeguarding)	Chief Officer (Social Care Commissioning)	Leeds Strategic Plan 2008/11 Adult Safeguarding Plan 2009/10	N

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Recommendation 4: The Council and partners should progress the emerging multi-agency training strategy and link this development with the agreed set of minimum competencies from specific roles within the adult safeguarding process												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: <i>How will you know that the action has achieved its intended aim? ie, task complete, measures in place.</i>	Key Stakeholders: <i>Who needs to be involved in the work or consulted?</i>	Lead: <i>Who will be responsible for delivering the work?</i>	Chief Officer: <i>Accountable for achieving the aim</i>	Related Plans: <i>Strategic, Council, Business, etc.</i>	Additional Resources
4.1	Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice	Scope out at a high level training requirements and secure resources across agencies. See 1.6, 1.7 and 1.8 above	Yr 1 Qtr 3/4	Oct-08	April 09		Establish and fund a plan which demonstrates a multi-agency commitment and reflects cross agency training requirements resulting in the effective safeguarding of adults across Leeds	Adult Safeguarding Partnership / HR / Practitioners / Service Users and Carers	Emma Mortimer (Safeguarding Coordinator) Graham Sephton (Deputy Head of HR)	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/09	N
4.2	Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice	Agree mandatory multi-agency training programme including: Training subgroup to incorporate workforce leads. - Identify staff who require specific competencies and training requirements - Establish training frequency for all roles and partners	Yr 1 Qtr 4 Yr 2 Qtr 3/4	Jan-09 Apr 09	Apr-09 Sep 09		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.	Safeguarding Partnership / HR / Practitioners / Service Users and Carers	TBC (see Rec 1.3) (Head of Adult Safeguarding) Graham Sephton (Deputy Head of HR)	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/09	Y Incorporate into budget for 09/10

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4.3	Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice	Monitor training via the Training and Quality Assurance subgroups	Yr 2 Qtr 1 & 2	Apr-09	Sep-09	Establish baseline and agree targets for training key staff across agencies based upon 4.1 which evidences that all frontline internal and external staff are aware of how to identify vulnerable adults and respond appropriately to concerns. User experience surveys evidence improved safeguarding experience. Yr 1: 90% of respondents feel safe. Yr 2: 95% of respondents feel safe.	Safeguarding Partnership QA sub-group/ HR - Training/ Practitioners/ Service Users and Carers.	Stuart Cameron Strickland (Head of Performance)	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/10	Y Incorporate into budget for 09/10
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Recommendation 5: The Council should ensure that staff are alert to potential risk factors where people live in situations of ongoing vulnerability and that appropriate contingency plans are put in place.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: <i>How will you know that the action has achieved its intended aim? ie, task complete, measures in place.</i>	Key Stakeholders: <i>Who needs to be involved in the work or consulted?</i>	Lead: <i>Who will be responsible for delivering the work?</i>	Chief Officer: <i>Accountable for achieving the aim</i>	Related Plans: <i>Strategic, Council, Business, etc.</i>	Additional Resources
5.1	Risk factors are managed consistently in accordance with policies and staff respond effectively to mitigate risks relation to safeguarding concerns	Establish a risk management protocol and standard for protection of people living in vulnerable situations including partner agencies - A) Differentiate risk, monitor and manage this. B) Establish an information protocol around risk and vulnerability. C) Establish agreed process and standard for contingency planning.	Yr 1 Qtr 4 & Yr 2 Qtr 2	Dec-08	Sep-09		All vulnerable people subject to a safeguarding enquiry are consistently assessed for risk	Safeguarding Partnership Board/ Practitioners/ Service Users and Carers	TBC (see Rec 1.3) (Head of safeguarding)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Adult Safeguarding Plan 2008/09	N
5.2	Risk factors are managed consistently in accordance with policies and staff respond effectively to mitigate risks relation to safeguarding concerns	QA framework (as in recommendation 2.2 and 2.3) to incorporate analysis of risk management	Yr 2 Qtr 2	Sep 09	Jan 10		Baseline activity on risk assessment and use of contingency plans to be established from Sept 09	Safeguarding Partnership Board/ Practitioners/ Service Users and Carers	Stuart Cameron – Strickland (Head of Performance)	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/09	Y In year budget

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Recommendation 7: The Adult Safeguarding Board should agree an adult safeguarding serious case review process and mechanisms for sharing performance issues and learning with partner agencies.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: <i>How will you know that the action has achieved its intended aim? i.e., task complete, measures in place.</i>	Key Stakeholders: <i>Who needs to be involved in the work or consulted?</i>	Lead: <i>Who will be responsible for delivering the work?</i>	Chief Officer: <i>Accountable for achieving the aim</i>	Related Plans: <i>Strategic, Council, Business, etc.</i>	Additional Resources
7.1	The serious care review process is effective & the partnership evidence learning and dissemination of good practice	<p>Ensure final draft of serious case review procedure is agreed by the board</p> <p>Ensure final draft of serious case review procedure is taken through governance structures of statutory partners.</p>	Yr 1 Qtr 3	<p>Jul-08</p> <p>Sep 08</p>	<p>Dec-08</p> <p>Sep 09</p>	<p>Agreed Sept 08</p>	<p>1/ The procedure is formally agreed by the board</p> <p>2/ The procedure is formally adopted within all partner agencies.</p> <p>Future arrangements for the review of potentially serious cases & criteria are managed within the policy & practice sub-group of the Adult Safeguarding Partnership Board (see Rec 1.2)</p>	Adult Safeguarding Board Partners	Chief Officer (Social Care Commissioning)	Director of Adult Social Services	Adult Safeguarding Plan 2008/09	Y In year budget

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7.2	The serious care review process is effective & the partnership evidence learning and dissemination of good practice	Safeguarding Partnership Board conducts serious case reviews using new procedures and revise procedures in line with learning. (see recommendations 4 & 6)	Yr 1 Qtr 3 & 4	Nov-08 Mar 09	Feb-09 Apr 09	A pilot of two serious case reviews will have been conducted Findings and action reported in report to the board	Adult Safeguarding Board Partners	Emma Mortimer (Safeguarding Coordinator)	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/09	Y In year budget
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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.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: <i>How will you know that the action has achieved its intended aim? i.e., task complete, measures in place.</i>	Key Stakeholders: <i>Who needs to be involved in the work or consulted?</i>	Lead: <i>Who will be responsible for delivering the work?</i>	Chief Officer: <i>Accountable for achieving the aim</i>	Related Plans: <i>Strategic, Council, Business, etc.</i>	Additional Resources
8.1	Leadership of Adult Safeguarding Board is effective in ensuring delivery of appropriate safeguarding activity & outcomes for people	Accountability arrangements for Adult Safeguarding are established through a distinct formal delegation arrangement between the Director of Adult Social Services and The Chair of the Safeguarding Board	Yr 1 Qtr 3	Sept 08	Oct 08	Oct 08	Accountability for safeguarding vulnerable adults in Leeds is clear, transparent and unambiguous to partners and other stakeholders	Safeguarding Partnership Board/ NED's / Elected Members	Director of Adult Social Services	Director of Adult Social Services	Adult Safeguarding Plan 2008/09	N
8.2	Leadership of Adult Safeguarding Board is effective in ensuring delivery of appropriate safeguarding activity & outcomes for people.	Safeguarding Board approves revised terms of reference and membership	Yr 1 Qtr 3	Jun-08	Nov-08	Nov 08	Revised terms of reference adopted and ratified by statutory partners	Safeguarding Partnership Board/ NED's / Elected Members	Chief Executives/ Officers of safeguarding partners	Chief Officer (Social Care Commissioning)	Adult Safeguarding Plan 2008/09	Y In year budget

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8.3	<p>Performance of the board and its subgroups meets the requirements of the Good Governance Standard in Public Services adopted by the partnership</p>	<p>The work of the Board is reported through the governance structures of the respective partners. Elected members will receive reports through the Adult Social Care Scrutiny Board</p> <p>The reports to include progress against the plan, the business plan and work programme for the following year.</p>	Yr 1 Qtr 3 & 4	Sep-08	May-09	<p>Annual audits & good governance review, all sub groups have work plans and deliver them.</p> <p>Annual Report is produced in May accompanied by a business plan for the following year.</p> <p>1/4ly Performance reports are available for examination by agency and Local Government overview and scrutiny arrangements. (see Rec 2.3)</p> <p>The work of the board is open to challenge by established group of service users and their carers.</p>	<p>Safeguarding Partnership Board/ NED's / Elected Members/ Service users and carers</p>	<p>Chief Executives/ Officers of safeguarding partners</p>	<p>Chief Officer (Social Care Commissioning)</p>	<p>Adult Safeguarding Plan 2008/09</p>	<p>Y</p> <p>Incorporate into budget for 09/10</p>
8.4	<p>Performance of the board and its subgroups meets the requirements of the Good Governance Standard in Public Services adopted by the partnership</p>	<p>The annual report is ratified by the governance structures of safeguarding partners including the Executive Board of the Council and its Overview and Scrutiny Board(s).</p>	Yr 1 Qtr 4	Dec-08	May-09	<p>Annual Report contains details of volume of activity and quality of outcomes from all partners.</p> <p>Performance improvement and learning points are incorporated into future action plans.</p>	<p>Safeguarding Partnership Board/ NED's / Elected Members</p>	<p>Adult Safeguarding Board</p>	<p>Chief Officer (Social Care Commissioning)</p>	<p>Adult Safeguarding Plan 2008/09</p>	<p>Y</p> <p>Incorporated into budget for 09/10</p>

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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 seized

	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: <i>How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.</i>	Key Stakeholders: <i>Who needs to be involved in the work or consulted?</i>	Lead: Who will be responsible for delivering the work?	Chief Officer: <i>Accountable for achieving the aim</i>	Related Plans: <i>Strategic, Council, Business, etc.</i>	Additional Resources
9.1	Personalised services deliver greater choice and control as evidenced in delivery and feedback	Progressing action plans for whole systems transformation through Self Directed Care Programme. Progress reviewed by DMT (SU involvement at Board, Team & workshop level).	Yr 1 Qtr to Yr 3 Qtr 4	Apr-08	Mar-11		35% of services are delivered through individual budgets. Satisfaction and outcomes surveys show increased levels of choice and control including increased opportunities for self-assessment.	In Control/ Providers/ Service User and carers.	Jemima Sparks (Business Change Project Manager)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Self Directed Care Programme	Y Incorporate into budget for 09/10 and 10/11
9.2	Personalised services deliver greater choice and control as evidenced in delivery and feedback	Continuing process of workshops communicating to practitioners the vision of personalisation and setting challenges for individuals around IB & DP and developing awareness.	Yr 1 Qtr 3 & 4	Oct-08	Mar-09		Frontline staff understand and apply to practice the principles of personalisation as evidenced by measures of 1/ Delivery 2/ Feedback Delivery targets: 759 recipients 08/09 yr. 2,417 recipients 09/10 yr. Feedback baseline: 43% survey respondents report	Providers/ Fieldwork Practitioners/ Service Users and Carers	Jemima Sparks (Business Change Project Manager)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Workforce Development/ Self Directed Care Programme	N

Y11 = 2008/09, Y12 = 2009/10

Draft Version TW5

N = to be met from existing resources
Y = in year or investment budgeted

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9.3	Personalised services deliver greater choice and control as evidenced in delivery and feedback	Join 'In Control' Programme.	Yr 1 Qtr 3	Oct-08	Mar 09	Oct 08	being offered DP. Targets to be agreed.	Providers/ Fieldwork Practitioners/ Service Users and Carers/ In Control	Jemima Sparks (Business Change Project Manager)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Self Directed Care Programme	Y In year budget
9.4	Almost all service users report that they have accurate accessible information and that care processes are undertaken with respect to the person, in a timely manner, the range of services met preferences and they consider they are more in control	Agree measurable standards for outcome focused assessments and care planning and communicate to staff, These include 1/ Timeliness 2/ Choice and control 3/ Respect for the person 4/ Including those that fund their own care & support.	Yr 1 Qtr 4	Dec-08	Aug-09		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 being used as evidenced by measures including Targets 08/09: Older people assessed in 4 weeks: 85% Survey respondents happy with the assessment process: 90% Survey respondents report that assessing sw is courteous and helpful: 90% Further baselines and targets to be established in relation to quality factors and self funders	Service Users, regulators and partners, Performance leads	Brian Ratner, Nyoka Fothergill, Jim Taynor, Phil Schofield, Jane Moran, Gill Chapman, Steve Bardsley. (Service Delivery Managers)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disability)	Leeds Strategic Plan 2008/11 Access and Inclusion Service Plan 2008/09	N

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9.5	Assessments and care plan are inclusive, individual, ambitious and outcome focused.	<p>Ensure SAP/ introduction of CAF in line with an enablement approach and personalisation is embedded in all policies, procedures, tools and methodology relating to assessments.</p> <p>Involve all relevant agencies to ensure an integrated assessment. (see Recommendation 19.2)</p>	Yr 1 Qtr 4	Dec-08	Mar-10	<p>All agencies ultimately use and contribute to SAP/CAF to result in effective outcome based assessment and care planning.</p> <p>Evidenced by file audit process.</p>	<p>Integrated assessment group to include Health Partners, Housing, Contact Centre, Community Safety, in Control, Modernisation Team, Safeguarding Team,</p>	Wendy Emerson (ESCR Programme Manager)	Deputy Director (Partnerships & Organisational Effectiveness)	Leeds Strategic Plan 2008/11 Access and Inclusion Service Plan 2008/09	Y In year budget
9.6	Service users and carers have appropriate access to information and advocacy.	<p>The infrastructure is established to support service users and carers with partners, including access to accessible and timely information and advocacy services. (See recommendation 13).</p>	Yr 2 Qtr 1	Mar-09	Jun-09	<p>Evidence shows effective support for service users and carers in the provision of accurate, accessible and appropriate information and advocacy services</p> <p>Targets 08/09: Older people assessed in 4 weeks: 85% Survey respondents happy with the assessment process: 90% Survey respondents report that information is adequate: 90% Targets for advocacy services to be established.</p>	<p>Integrated assessment group to include Health Partners, Housing, Contact Centre, Community Safety, in Control, Modernisation Team, Safeguarding Team,</p>	Mike Sells (Communication Manager)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disabilities) Chief Officer (Social Care Commissioning) Chief Officer (Resources)	Leeds Strategic Plan 2008/11 Access and Inclusion Service Plan 2008/09	Y In year budget

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9.7	Almost all service users report that they have accurate information, advice and advocacy supported when needed to make choices and exercise control.	Establish internal and public communication strategy to raise awareness and expectations of self directed care in current and potential service users	Yr 2 Qtr 1 & 2	Apr-09	Sep-09	Survey respondents are aware of IB/DP as evidenced by measures of 1/ Delivery 2/ Feedback Delivery targets: 759 recipients 08/09 yr. 2,417 recipients 09/10 yr. Feedback baseline: 43% survey respondents report being offered DP. Targets to be agreed. QA assurance process to monitor that personalised services are delivered and vulnerable adults empowered to choose as evidenced by measures of 1/ Delivery 2/ Feedback	Providers/ Fieldwork Practitioners/ Service Users and Carers	Mike Sells (Communications Manager) Brian Ratner, Nyoka Fothergill, Jim Taylor, Phil Schofield, Jane Moran, Gill Chapman, Steve Bardsley. (Service Delivery Managers)	Chief Officer (Resources)	Self Directed Care Programme	N
9.8	QA processes effectively support improved service delivery	Arrangements for QA outlined under recommendation 2 are operational.	Yr 2 Qtr 1	Mar-09	Jun-09	Integrated assessment group to include Health Partners, Housing, Contact Centre, Community Safety, In Control, Modernisation Team, Safeguarding Team, Delivery targets: 759 recipients 08/09 yr. 2,417 recipients 09/10 yr. Feedback baseline: 43% survey respondents report being offered DP. Targets to be agreed	Integrated assessment group to include Health Partners, Housing, Contact Centre, Community Safety, In Control, Modernisation Team, Safeguarding Team,	Stuart Cameron-Strickland (Head of Performance)	Chief Officer (Social Care Commissioning)	Leeds Strategic Plan 2008/11 Access and Inclusion Service Plan 2008/09	Y In year budget

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Recommendation 11: The Council should ensure that departmental standards in relation to the timeliness and the quality of regular reviews are met.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? (e.g. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
11.1	Standards & expectations in relation to the timeliness and the quality of regular reviews are met	Review current systems, determine resources required and align these to ensure that reviews are undertaken in a timely manner in line with FAC's guidance.	Yr 1 Qtr 4	Dec-08	Mar-09		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.	Performance leads/ Practitioners/ Reviewing Team/ Service Users and Carers	Brian Rather, Nyoka Fothergill, Jim Taynor, Phil Schofield, Jane Moran, Gill Chapman, Steve Bardsley.	Chief Officer (Access and Inclusion) Chief Officer (Learning Disabilities)	Access and Inclusion & LD Service Plans 2008/09	N
11.2	Standards & expectations in relation to the timeliness and the quality of regular reviews are met	Agree quality outcome focused standards for reviews to incorporate personalisation and risk factors	Yr 1/2 Qtr 4/1 Yr 2 Qtr 2/3	Dec-08 Jun 09	Jun-09 Jan 10		Quality standards established with operational staff. 75% of all reviews meet core quality standards as evidenced in file audit process.	Performance leads/ Practitioners/ Reviewing Team/ Service Users and Carers	(Service Delivery Managers)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disabilities)	Access and Inclusion & LD Service Plans 2008/09	N

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Recommendation 13: The Council should build on the wide availability of advocacy services by specifying and focusing the circumstances in which it should be used to empower people.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
13.1	Almost all service users report that they have accurate information, advice and advocacy supported when needed to make choices and exercise control.	Determine requirements in Leeds for advocacy	Yr 1 Qtr 4	Jan-09	Aug-09		The following range of advocacy requirements are incorporated: - Crisis - Task or issue - Representational - Short-term or Long-term - Independent Mental - Capacity Advocacy - (IMCA)	Providers/Commissioners/Service users and carers	Mick Ward (Head of Strategic Partnerships and Development)	Chief Officer (Social Care Commissioning)	Adult Social Care Business Plan 2009/10 Commissioning Prospectus 2008/09 Commissioning Service Plan 2008/09	N
13.2	Almost all service users report that they have accurate information, advice and advocacy supported when needed to make choices and exercise control.	The authority has implemented a user led advocacy service which - Empowers individuals, - Promotes independence & safeguarding. - Meets the full range of cultural & service user needs.	Year 2 Qtrs 1-4	Aug 09	Mar 10		In coordination with partners, procurement and contracting arrangements are implemented to meet the agreed Leeds model	Providers/Commissioners/Service users and carers	Tim O'Shea (Head of Adult Social care Commissioning)	Chief Officer (Social Care Commissioning)	Adult Social Care Business Plan 2009/10 Commissioning Prospectus 2008/09 Commissioning Service Plan 2008/09	Y In Year budget

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13.3	Audit and assurance activity evidences delivery of effective advocacy services.	Provide training and communications to all relevant staff about appropriate pathways for service users to access advocacy.	Year 3 Qtr 1-4	April 10	Mar 11	People are enabled to live the life they chose and the impact of disability is minimised. Vulnerable people are appropriately referred to advocacy services as measured by independent quality assurance/ file auditing system (See recommendation 2) Baseline and targets to be established.	Contact Leeds Partners/ users and Carers	Mike Sells (Communication Manager) Graham Sephton (Deputy HR Manager)	Chief Officer (Resources)	Adult Social Care Business Plan 2009/10/ Workforce Development Plan (2009 /11)	Y Incorporate into budget for 09/10
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Recommendation 14: The Council should extend the range and choice of services by reconfiguring and modernising traditional, buildings-based services												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: <i>How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.</i>	Key Stakeholders: <i>Who needs to be involved in the work or consulted?</i>	Lead: <i>Who will be responsible for delivering the work?</i>	Chief Officer: <i>Accountable for achieving the aim</i>	Related Plans: <i>Strategic, Council, Business, etc.</i>	Additional Resources
14.1	<p>1/Services are commissioned and delivered to clear standards, offer good care value and are linked to Our Health, Our Care, Our Say, outcomes.</p> <p>2/Almost all people who use services & their carers are involved in development work, review & are integral to the commissioning process</p>	<p>Procure external expert advice to generate an options appraisal regarding steps to shift the emphasis of social care interventions away from building based services.</p> <p>Options generated will include:</p> <p>1/ LA cease to be a direct provider of buildings based services.</p> <p>2/ Minimal & specifically targeted role for LA in providing services.</p>	Years 2- Qtr 1-2	April 09	Oct 09		<p>The Local Authority has identified the nature of its business in relation to buildings based services</p> <p>Senior managers and elected members agree options regarding the future of buildings based services which provide the basis of a work programme.</p>	<p>Service Users and Carers</p> <p>Directly provided and commissioned services.</p> <p>HR</p> <p>Elected Members</p>	<p>Tim O'Shea (Head of Adult Commissioning)</p> <p>Paul Hardy (Head of Adult Resources)</p>	<p>Chief Officer (Social Care Commissioning)</p> <p>Chief Officer (Support & Enablement)</p>	<p>Adult Social Care Business Plan 2009/10</p> <p>Service Improvement Plans</p>	<p>Y</p> <p>To be incorporated into 09/10 budget requirements</p>

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14.2	Services are commissioned and delivered to clear standards, offer good care value and are linked to Our Health, Our Care, Our Say, outcomes.	A programme plan and resources to support is put in place to take forward agreed options	Yr 2- Qtr 3-4	Oct 09	April 10	A programme of work which has been developed with the involvement of service users and their carers is agreed by senior managers and elected members. Resources and support to operationalise the programme is in place (see Rec 24 in relation to Workforce Strategy development)	Service Users and Carers Directly provided and commissioned services. HR Elected Members	Tim O'Shea (Head of Adult Commissioning) Paul Hardy (Head of Adult Resources)	Chief Officer (Social Care Commissioning) Chief Officer (Support & Enablement)	Adult Social Care Business Plan 2009/10 Service Improvement Plans	Y To be incorporated into 09/10 budget requirements
14.3	Service user, regulatory and other feedback confirm responsiveness, relevance, capacity to mitigate risk & promote independence, well being and quality outcomes for those who use them.	The programme of work is undertaken to deliver the new model in relation to: 1/ Residential Care 2/ Daycare 3/ Homecare	Yr 3 & 4	April 10	April 12	The new model is put in place and contributes to a wider range of personalised service options which promote independence health and wellbeing and enables people to live the life they chose whilst minimising the impact of any disability. Baseline and targets to be agreed. To include; - No's DP/IB recipients (35% of services delivered through DP/IB by March 2011) - No's helped to live at home.	Service Users and Carers Directly provided and commissioned services. HR Elected Members	Tim O'Shea (Head of Adult Commissioning) Paul Hardy (Head of Adult Resources)	Chief Officer (Social Care Commissioning) Chief Officer (Support & Enablement)	Adult Social Care Business Plan 2009/10 Service Improvement Plans	Y To be incorporated into 09/10 budget requirements

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14.4	Directly provided services have clear contractual arrangements including performance and QA measures which are monitored and reported.	Extend current contract and monitoring arrangements to cover directly provided services	Yr 1 Qtr 4 Yr 2 Qtr 1/4	Nov-08 Apr 09	Apr-09 Mar 10	Service level agreements are in place for; 08/09: Homecare. 09/10: Residential and daycare	ASC, LTHT, PCT Commissioners Service users and carers. Frontline staff including fieldwork practitioners	Tim O'Shea (Head of Adult Commissioning)	Chief Officer (Social Care Commissioning)	Commissioning prospectus 2008/09	N
14.5	Develop formal joint commissioning frameworks with health to extend the range of options for delivering personalised services	Establishment of agreements and Service Specifications jointly with the PCT for - residential (including specialist and general) care, - home care, - day care	Yr 1 Qtr 4	Jan-09	Apr-09	Formal agreements with LPCT regarding joint commissioning frameworks Service specifications in place for homecare and other key services	ASC, LTHT, PCT Commissioners Service users and carers. Frontline staff including fieldwork practitioners	Tim O'Shea (Head of Adult Commissioning) Mark Phillott (Commissioning Manager)	Chief Officer (Social Care Commissioning)	Commissioning prospectus 2008/09 Adult Services Business Plan 2008/09	N

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Recommendation 15: The Council and partners should strengthen hospital discharge procedures by focusing on the quality of peoples experiences

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.

Recommendation 17: The Council and partners should strengthen hospital discharge procedures by agreeing a process for resolving and learning from concerns about the quality of multi-disciplinary work.

	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? I.e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
15.1	People access a range of care services that promote their independence.	The remit of the existing Planned and Urgent Care Group is extended to undertake the following: Revising current protocol, procedures and practice to ensure that: 1/ the roles of different professionals are clear. 2/ the hospital discharge process is timely, safe and ensures a consideration of dignity and respect for the individual. 3/ a process for resolving disputes is in place	Yr 1 Qtr 3 & 4	Oct 08	Nov 08	Nov 08	Actions taken prevent unnecessary hospital admission and enable timely & safe hospital discharge which maintains dignity and respect Regular reports are provided to the Leeds Joint Commissioning Board for Adults	JCMT, Intermediate care, Hospital SW, LTH, LPFT, NHS Leeds, Vol sector, Patient Involvement Group, Older Peoples reference group, Hospital Transport (YAS), Commissioning, Multi-agency Operational Discharge Group	Philip Schofield (Service Delivery Manager)	Chief Officer (Access and Inclusion) Chief Officer (Learning Disabilities) Director of Commissioning (Leeds NHS)	Leeds Hospital Discharge Procedure Leeds Continuing Care Protocol	N

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15.2	<p>People access a range of care services to promote their independence. These prevent unnecessary hospital admission and enable timely & safe hospital discharge which maintains dignity and respect</p>	<p>New protocol and procedure published and adopted by local hospitals including, terms written into the contract between LTH, NHS Leeds and ASC. New protocol and procedures agreed with significant out of Leeds neighbouring hospitals</p>	<p>Yr 1&2 Qtr 4/1-3</p>	<p>Nov 08 Mar 09</p>	<p>Mar 09 Nov 09</p>		<p>There is a signed protocol between ASC and health partners covering hospital discharge procedures, continuing care and disputes resolution. Protocol and procedure agreed by health partners and ASC and included in contractual arrangements. Protocol and procedure agreed by neighbouring hospitals and ASC, ie, Harrogate, Bradford, Wakefield.</p>	<p>JCMT, Intermediate care, Hospital SW, LTH, LPFT, NHS Leeds, Vol sector, Patient Involvement Group, Older Peoples reference group, Hospital Transport (YAS), Commissioning, Multi-agency Operational Discharge Group</p>	<p>Philip Schofield (Service Delivery Manager)</p>	<p>Director of Commissioning (Leeds NHS) Chief Officer (Access and Inclusion) Chief Officer (Learning Disabilities)</p>	<p>Leeds Hospital Discharge Procedure Leeds Continuing Care Protocol</p>	<p>N</p>
15.3	<p>The monitoring of hospital discharge arrangements is effective and lessons are learned from concerns.</p>	<p>Regular monitoring and reports are prepared by the Planned and Urgent Care Group and submitted to the Joint Strategic Commissioning Board (JSCB)</p>	<p>Yr 1 Qtr 4</p>	<p>Jan-09</p>	<p>Apr-09</p>		<p>Baseline for delayed discharges of 27. Establish and initiate a baseline and targets . To include data and info from: Reviews of service users. Complaints User experience surveys</p>	<p>Joint Strategic Commissioning Board,</p>	<p>Philip Schofield (Service Delivery Manager)</p>	<p>Chief Officer (Access and Inclusion) Chief Officer (Learning Disabilities)</p>	<p>N</p>	

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Recommendation 18: The council should improve the availability of information about the range of carer's services.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? ie, task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
18.1	Establish communication and information requirements enabling a proactive approach to ensuring information is available when required.	Undertake a gap analysis, in consultation with carers & service users, of current information needs. Identify and appraise options to inform a communications strategy which ensures that people have the information they require when they require it.	Yr 2 Qtr 1	Apr-09	Jul-09		Adult Social Care Information, Communications & Marketing Strategy is set out as part of the 2009/10 Business Plan. Service users and carers are actively involved in development work, planning and review.	Corporate Communications Unit, Partner agencies frontline staff and communication staff, ie, PCT, LTHT, LMHT, VCFS, Carers Leads, Contact centre	Mike Sells (Communication Manager)	Chief Officer (Resources)	Adult Social Care Business Plan	Y Incorporate into 09/10 budget and 10/11 budget setting.
18.2	Information, Communication and a Marketing strategy ensures that carers have access to timely information	Communication and social marketing strategy - awareness raising and where appropriate training and with key staff including partner agencies.	Year 2 Qtrs 3-4	Sep-09	Apr-10		Adult Social Care Information, Communications & Marketing Strategy is implemented.	Corporate Communications Unit, Partner agencies frontline staff and communication staff, ie, PCT, LTHT, LMHT, VCFS, Carers Leads, contact centre	Mike Sells (Communication Manager)	Chief Officer (Resources)	Adult Social Care Business Plan	Y Incorporate into 09/10 budget and 10/11 budget setting.

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18.3	Carers confirm that they are well informed about services. They have information, which is accurate, accessible and appropriate in terms of their culture, sexuality, age, gender and religion.	Put arrangements in place to review, monitor and assure supply chain and effective communications with carers.	Year 3 Qtr 1-2	Dec 08 Apr-10	Mar 09 Sep-10	Carers and people who use services are helped to understand how to maintain wellbeing through a range of accessible information provided in partnership. 90% of survey respondents report that information provided is adequate as an initial baseline. Adult Social Care Information, Communications & Marketing Strategy is reviewed to establish further baseline and targets.	Corporate Communications Unit, Partner agencies frontline staff and communication staff, ie, PCT, LTH, LMHT, VCFS, Carers Leads, contact centre	Mike Sells (Communication Manager)	Chief Officer (Resources)	Adult Social Care Business Plan	Y Incorporate into 09/10 budget and 10/11 budget setting.
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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.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
19.1	Staff are aware of local preventative services, service users can access and influence appropriate care planning information.	Ensure teams are aware of locality options, including all relevant staff in ASC and partner agencies to receive a social isolation toolkit which specify the range of preventative services.	Year 2 Qtr 1	Apr-09	Jun-09		Relevant workers have information regarding the range of options currently available and monitoring of preventative services reflect this as measured in 19.3.	Adult Social Care fieldwork/ Service Providers/ Communications	Mike Sells (Communication Manager) Mick Ward (Head of Strategic Partnerships and Development).	Chief Officer (Social Care Commissioning)	Adult Social Care Business Plan Commissioning Prospectus 2008/09 Commissioning Service Plan	Y Incorporate into 2009/10 budget setting
19.2	Multiple Services are accessible through a single route	Ensure that SAP/CAF is rolled out to all voluntary sector services so that assessments are more inclusive and include a range of preventative services. (See recommendation 9.5)	Year 2 Qtrs 2-3	Aug-09	Nov-09		Staff in preventative services use and are involved in outcome focused assessment and care planning as measured in 19.3.	Adult Social Care fieldwork/ Service Providers/ Communications	Wendy Emerson (ESCR Programme Manager)	Deputy Director (Partnerships & Organisational Effectiveness)	Leeds Strategic Plan 2008/11 Access and Inclusion Service Plan 2008/09	Y Incorporate into 2009/10 budget setting

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19.3	Quality Assurance systems show that there is a successful focus upon early prevention and reduced need for higher level support services.	Ensure that the commissioning approach to preventative services is effective via QA systems outlined in recommendation 2	Yr 1 Qtr 4	Jan-09	Apr-09	Establish a baseline and targets for measuring use of preventative services to show a focus upon early prevention & reduced need for higher level support. To include data relating to 1/signposting and information given 2/review information, 3/surveys, 4/evidence from case file audits. 5/ Hospital admissions & numbers entering long term residential care.	Adult Social Care fieldwork/ Service Providers/ Service Users and Carers/ Commissioners	Stuart Cameron- Strickland (Head of Performance) Mark Phillott (Commissioning Manager)	Adult Social Care Business Plan 2008/09 Access and Inclusion Service Plan Commissioning Service Plan 2008/09	Y In year budget
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Recommendation 20: The Council and partners should agree a set of joint funding priorities and set out clear service development plans with associated joint management arrangements and joint funding commitments (reference recommendation 14)												
Recommendation 21: The Council should set out a clear commissioning plan for Older People's Services, including re-commissioning arrangements for existing services (where appropriate).												
	Aim/Outcome	Action	Urgency	Planned Start	Planned Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
20.1	The health and wellbeing needs of the people of Leeds are evidenced within the JSNA & shape commissioning priorities linked to Our Health, Our Care, Our Say, outcomes	Agree arrangements for future governance of JSNA process. Publish conclusions from initial work programme and data analysis.	Yr 1 Qtr 3 & 4	Dec 07	Feb-09		All commissioners have a detailed analysis of the health and wellbeing needs of whole population so that strategic commissioning can link investment to activity over time.	NHS Leeds Healthy Leeds Partners, All council directorates.	John England (Deputy Director Partnerships and Organisational Development)	Deputy Director (Partnerships and Organisational Development)	Adult Social Care Business Plan, Leeds Strategic Plan Commissioning Prospectus 2008/09	N
20.2	Partnership arrangements deliver joint & single commissioning consistent with needs and available resources.	Establish Joint Commissioning priorities including shared funding arrangements.	Yr 1 Qtr 3 & 4	Oct 08	Apr-09		Systems and infrastructure to support joint working in place 1/ Virtual teams established for commissioning in relation to priority groups. 2/ Commissioning intentions published. 3/ Impact on individuals measured against.	Health and ASC Commissioners/ Service User and Carer reps/	Tim O'Shea (Head of Adult Commissioning) Mick Ward (Head of Strategic Partnerships & Development) Carol Cochrane (Director of Commissioning & Priority Groups NHS Leeds)	Chief Officer (Social Care Commissioning)	Leeds Strategic Plan 2008/11 Adult Social Care Business Plan Commissioning Prospectus 2008/09.	Y In year budget

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20.3	Determine priorities for older peoples commissioning with partners which promote choice, control, health and wellbeing	Undertake an analysis of older peoples commissioning opportunities in consultation with older people & providers across health and social care.	Yr 1 Qtr 3 & 4	Nov 08	Sep-09		<p>Strategy and plans include an understanding of the local market, cost considerations, quality factors and link to financial plans.</p> <p>1/ Publish joint commissioning prospectus.</p> <p>2/ Revise and republish Older Better.</p> <p>Strategic commissioning developed to link joint investment to activity over time.</p>	<p>Health and ASC Commissioners/ Health and Social Care Service Providers/ Service User and Carer reps/ Older Peoples Modernisation Team.</p>	<p>Tim O'Shea (Head of Adult Commissioning)</p> <p>Mick Ward (Head of Strategic Partnerships & Development)</p>	<p>Chief Officer (Social Care Commissioning)</p>	<p>Leads Strategic Plan 2008/11</p> <p>Adult Social Care Business Plan</p> <p>Commissioning Prospectus 2008/09.</p>	N
20.4	Achieve a shared agreed framework for integrated leadership in the delivery of joint responses to meet health and social care needs in Leeds	Engage with the University of Birmingham to identify opportunities for greater joint commissioning activity and for further integration.	Yr 1 Qtr 3	Apr 09	Oct 09 Apr 10		<p>1/ Undertake diagnostic phase</p> <p>2/ Operational phase</p> <p>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.</p>	<p>ASC</p> <p>Leeds PCT</p> <p>Birmingham University</p>	<p>Dennis Holmes (Chief Officer Social Care Commissioning)</p> <p>Steve Hume (Chief officer Resources)</p>	<p>Director of Adult Social Services</p> <p>Chief Executive NHS Leeds</p>	<p>Adult Social Care Business Plan 2008/09</p> <p>Adult Social Care Commissioning Prospectus</p>	Y Incorporate into 09/10 budget

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20.5	Options which will maximise effective joint working to best meet the needs of people and deliver outcomes are identified.	Review intermediate tier, JCMT, Mental Health Teams, Hospital Discharge Review and develop joint commissioning/ market management of homecare. (X ref to 20.3)	Yr 1 Qtr 4	Jan 09 Apr 09	Apr-09 Oct 09		Systems and infrastructure to support joint working in place and enabling staff to delivery safe dignified transfers of care. Baseline and measures to be developed, to include data from, complaints, reviews, delayed transfers. Reports on progress are submitted on a quarterly basis to the Leeds Joint Commissioning Board	JCMT/ Intermediate Care/ Homecare providers/ Health and ASC Commissioners/ Service Users and Carers reps	Mick Ward (Head of Strategic Partnerships and Development) Tim O'Shea (Head of Adult Commissioning)	Chief Officer (Social Care Commissioning)	Leeds Strategic Plan/ Adult Social Care Business Plan/ Commissioning Prospectus 2008/09.	Y Incorporate into 09/10 budget
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Recommendation 22: The Council should implement a system to ensure compliance with the expectations of the supervision policy.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? i.e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
22.1	Explicit expectations on supervision are met. They enable compliance with standards and focus on consistency, learning and better outcomes for people who use services.	QA of compliance with the current supervision policy will form part of the file audit process outlined under recommendation 2.2 & 2.3.	Yr 1 Qtr 3 & 4	Oct 08	Mar 09		Ensure implement policy in relation to supervision across 100% of assessment and care management staff.	Adult Social Care Senior Management Team/ Adult Social Care Managers	John Lennon (Chief Officer Access and Inclusion)	Chief Officer (Learning Disabilities) Chief Officer (Access and Inclusion)	Adult Social Care Business Plan and Service Plans 2008/09/ Adult Safeguarding Plan 2008/09	N
22.2	Explicit expectations on supervision are met. They enable compliance with standards and focus on consistency, learning and better outcomes for people who use services.	Review the existing supervision policy to include: 1/ Align with requirements in relation to safeguarding and personalisation, 2/ A separate codicil of professional requirements for fieldwork staff. 3/ Align with corporate work in this area.	Yr 1 Qtr 4 Yr 2	Oct 08 Mar 09	Mar-09 Mar 10		Revised supervision policy published. Revised supervision policy rolled out to all fieldwork staff. Baseline and targets in relation to compliance and effectiveness to be established. To include 1/File audit process. 2/Employee survey. 13/ Investors in People reviews.	Adult Social Care Senior Management Team/ Adult Social Care Managers/ Human Resources	Graham Sephton (Deputy HR Manager)	Chief Officer (Resources)	Adult Social Care Business Plan and Service Plans 2008/09/ Adult Safeguarding Plan 2008/09	N

Y11 = 2008/09, Y12 = 2009/10

Draft Version TW5

N = to be met from existing resources
Y = in year or investment budgeted

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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.												
	Aim/Outcome	Action	Urgency	Plan Start	Plan Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? I.e, task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
23.1	Business priorities are cascaded and included in effective team plans.	Arrangements 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.	Yr 1 Qtr 4 to Yr2 Qtr 1	Feb-09	Jun-09		Staff are supported in the planning process: road shows; service conferences; team engagement Each action within Adult Social Care plan will have populated detailed team plans against which their progress can be monitored. Teams know and reflect the business priorities in their team plans. Plans monitored through supervision and team meetings.	Adult Social Care Chief Officers/ Adult Social Care Teams	Tracy Cartmell (Head of Transformation)	Chief Officer (Resources)	Adult Social Care Business Plan and Service Plans 2008/09/ Adult Safeguarding Plan 2008/09	N
23.2	Business priorities are cascaded and included in effective team plans.	The business planning process establishes which are the key business priorities at a strategic level and communicates these to the rest of the organisation.	Yr 1 Qtr 4 to Yr2 Qtr 1	Jun 09	Mar 10		Performance management framework demonstrates team improvements overall as part of the overall business planning process via quarterly reports to DMT performance board.	Adult Social Care Chief Officers/ Adult Social Care Teams	Stuart Cameron-Strickland (Head of Performance)	Chief Officer (Adult Social Care Commissioning)	Adult Social Care Business Plan and Service Plans 2008/09/ Adult Safeguarding Plan 2008/09	N

Y11 = 2008/09, Y12 = 2009/10

Draft Version TW5

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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.												
	Aim/Outcome	Action	Urgency	Planned Start	Planned Finish	Actual Finish	Success Criteria: How will you know that the action has achieved its intended aim? (e. task complete, measures in place.	Key Stakeholders: Who needs to be involved in the work or consulted?	Lead: Who will be responsible for delivering the work?	Chief Officer: Accountable for achieving the aim	Related Plans: Strategic, Council, Business, etc.	Additional Resources
24.1	There are sufficient appropriately skilled staff to undertake the full range of social care functions, particularly in relation to safeguarding and personalisation	Create and launch a framework that maps competencies, skills and knowledge for key roles and groups in Adult Social Care in relation to safeguarding, personalisation & the requirements of business change (see Rec 14).	Yr 1 Qtr 4 Yr 2 Qtr 1	Nov-08	June-09		Framework launched.	Communications team; Chief Officers; Specialist functions - HR, Finance, IT, Asset management	Graham Sephton (Deputy HR Manager)	Chief Officer (Resources)	Service Business Plans Workforce Development Service Plan	Y In year budget
24.2	There are sufficient appropriately skilled staff to undertake social care functions	Publish our 3 year workforce strategy which reflect commissioning intentions and planned business change (2009 to 2012) Review in Oct 2009 in relation to plans in Recom 14	Yr 1 Qtr 4 Yr 2 Qtr 3	Dec-08 Oct 09	May-09 Dec 09		Staff are equipped with the skills and knowledge required to deliver the personalisation agenda Gaps are identified and addressed. These include requirements linked to safeguarding and the role of the independent sector within the delivery of personalised service delivery.	Communications team; Chief Officers; Specialist functions - HR, Finance, IT, Asset management	Graham Sephton (Deputy HR Manager)	Chief Officer (Resources)	Adult Social Care Business Plan and Service Plans 2008/09 Adult Safeguarding Plan 2008/09	Y In year budget
24.3	Services are consistently provided by an appropriately skilled and knowledgeable workforce	A new process for identifying investment and measuring the quality and impact of workforce development will be	Yr 1 Qtr 4	Oct-08	Mar-09		An agreed set of performance measures for workforce development will exist and managers can evidence that staff are competent for their role	LCC Corporate HR team; Service teams	Graham Sephton (Deputy HR Manager)	Chief Officer (Resources)	Workforce Development Service Plan	Y In year budget

Yr1 = 2008/09, Yr2 = 2009/10

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24.4	All will be aware of local skills standards and the support available to meet these standards	introduced in the 2009/10 planning cycle. New reporting process will be introduced.	Yr 1 Qtr 4	Nov-08	Jun-09		and can identify and respond to areas 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	Chief Officers; LCC Corporate IT team, Service Commissioning team	Graham Sephton (Deputy HR Manager)	Chief Officer (Resources)	Adult Social Care Comms Strategy	Y In Year budget
	A web site will be created as a central resource for all information relating to workforce development. A clear description of what training and development is on offer to be communicated. Expected behaviours around the most important workforce development processes will also be shared, following the review of policy and process in each area.	Web site available by end of June 2009; service users are in receipt of skilled staff whose competency is measured by workforce competency measures and quality of delivered is confirmed through quality assurance systems										