

Cheshire West & Chester Council

Adult Social Care and Health Directorate



Business Plan 2011-14

Refreshed April 2012

Visit: cheshirewestandchester.gov.uk



Cheshire West
and Chester

Directorate Business Plan 2011-14

Refreshed April 2012

ADULT SOCIAL CARE AND HEALTH

This plan will be refreshed annually; next refresh due April 2013.

Contents:

Section A	Directorate Vision	Page 2
Section B	Looking Back at 2011/12	Page 5
Section C	Directorate Priorities	Page 10
Section D	Performance Plan	Page 12
Section E	Financial Information	Page 36

Version Control:

Created by:	Directorate Management Team – Adult Social Care and Health Cheshire West and Chester Council
Version:	FINAL

Section A – Directorate Vision

This new edition of the Directorate's Business Plan has been prepared within the framework of "Shaping the Future Together", the blueprint for adult social care and health in the Borough until 2014.

The blueprint recognises the rapidly changing world in which adult social care currently operates by setting out the key influences for change and the strategic direction the directorate will take to accommodate them. These key influences are:

- A commitment to providing high quality personalised and community based support from a diverse range of providers.
- The development of an organisation where services are shaped around an individual's need and secure quality and value for money.
- Meeting the needs of an ageing population, and those living with long term conditions
- Challenging the circumstances that cause health inequalities between our communities.
- Empowering individuals and communities to take control and support themselves through local solutions to local needs.
- Integrating more closely with our key partner agencies, identifying and exploiting the opportunities which arise from key government policies expressed in, for example "Liberating the NHS", "Healthy Lives Healthy Choices", "Open Public Services" and the vision for adult social care - "Capable Communities and Active Citizens"
- Operating within, but also getting the best out of, a reduced resource base, to meet increasing demand through re-design, re-investment and innovation.

Our philosophy has been co-produced with our many stakeholders and sets out our belief that:

- all of our citizens have the right to equality of opportunity and a quality of life which is not adversely affected by any debilitating issues an individual may experience.
- every individual has a unique value and that each person is best served by solutions tailored to meet their needs.
- people should be well informed and empowered to make their own decisions; assisted to maximise their full potential; supported to remain independent; and enabled to enjoy a high quality of life.
- there will be greater benefit to residents if we work harmoniously and productively in partnership with a full range of organisations across all sectors.
- the community, families, carers and friends are essential to the work we do with each individual.

Our approach for the future of social care services will therefore be built on:

- empowering citizens to participate and realise their full potential
- delivering personalised care and support designed with people for people

- ensuring that individuals and communities are, and feel, safe
- improving wellbeing to prevent ill health and reduce dependency
- inspiring and encouraging neighbourhoods to deliver services in their locality
- providing information and advice that offers people real choice and control
- securing efficiency in commissioning and managing services
- making our services fair and equitable and challenging inequality and disadvantage; and
- views expressed in our Local Account

These will form the basis of our priorities for the coming year.

Achieving this will be through becoming a commissioning led organisation in health and social care. We will change the balance of our provision from traditional models of social care based on the high cost management of crises in people's lives to one where more attention is given to preventing the onset of dependency through offering early help and support.

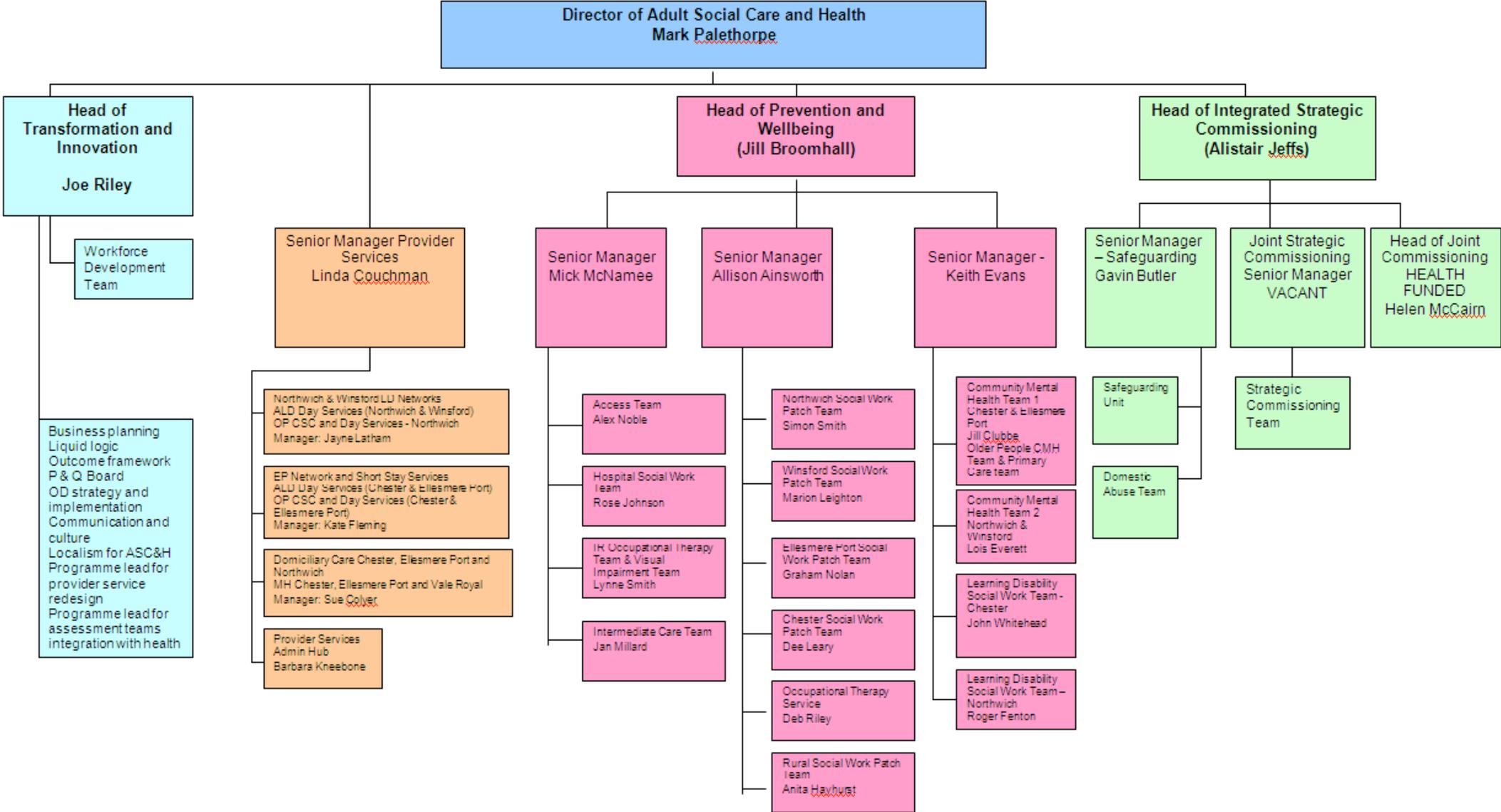
The Directorate's responsibilities have strengthened since the last Business Plan was published, with for example Adult Safeguarding, housing related support to vulnerable people and corporate Equality and Diversity lead being added to its portfolio of responsibilities, the establishment of the Shadow Health and Wellbeing Board and a Joint Commissioning Committee. Along with the integration of Public Health from the Primary Care Trust, scheduled for October 2012, these services will enhance the Directorate's capacity to commission safer, more effective and equitable services.

In doing this we will ensure that we provide high quality, easily accessible advice and information to all people and carers who may need support; work with our Council colleagues and partners to harness the capacity of their services to give added value to our own; and further develop our re-ablement services to enable individuals to regain or maintain the skills and confidence they need to live independently.

Where long term care is needed we will ensure that services are personalised and quality assured to achieve the best outcomes for the individual. This will increasingly mean moving our resources to new services and providers and changing how they are delivered.

The 'Altogether Better' programme presents opportunities for the Directorate to work both in partnership with other services and agencies and identify potential capacity within neighbourhoods and communities to develop local services which meet local needs. In implementing this business plan the Directorate will explore how far its priorities can be delivered through working the programme.

Cheshire West and Chester Council – Adult Social Care Directorate Management Structure



Section B – Looking Back at 2011/12

Key Directorate Achievements:

Directorate Priority	Achievement
To empower citizens to participate and realise their full potential	Stakeholder meetings held on time and successful annual conference with comments and feedback informing future commissioning. Stakeholder network continues to enlarge and develop.
To deliver personalised care and support over which people have choice and control	Key service contracts have been reviewed and where appropriate new services provided. Personal budgets continue to be a primary offer with continued rise in numbers of users receiving a Personal Budget or Direct Payment. The number of agencies becoming partners to the Information Consortium continued to increase.
To work to ensure that individuals and communities are, and feel, safe	An adult safeguarding unit was established. Training for staff and counsellors undertaken and specialised training in particular areas including domestic abuse.
To work to prevent ill-health and reduce dependency	A shadow health and wellbeing board was established in October and a platform set for production of health and wellbeing strategy. Closer working arrangements with Public Health team have been established with a view to full integration. Reached agreement with NHS on integrated reablement offer.
To inspire and encourage neighbourhoods to deliver services locally	Produced new vision for Adult Social Care 'Shaping the Future' as a blueprint for developing services for the next three years. In light of a framework will be devised for the commissioning, design and delivery of new service options and providers.
To design and monitor services around the person	Culture and style events have been held with staff at all levels within the directorate. Information systems have been improved including 'My life, My choice'. The Liquid Logic system has now been fully implemented. Partnerships continue to work productively with the independent and private sectors to ensure customer sensitive services.
To be efficient in the development, commissioning and management of services	Service reviews have been undertaken yielding savings and redesigned services offering better value and improved services. This for example has seen the introduction of a new domiciliary care package.

Equality and Diversity Objectives:

Objective	RAG Status	Progress to date
Make sure contracts with external providers include equality and diversity clauses that are acted upon	GREEN	Will be measured from 2012 but not currently regularly monitored. Resource anticipated in due course following merger with Supporting People
Increase confidence in bullying/harassment and adult safeguarding reporting system	AMBER	Referrals are taken for Stalking/Harassment and measured against risk assessment DASHRIC. Cases are managed accordingly (MARAC conferences where appropriate). Action ongoing
Ensure personalisation service is appropriate to the needs of all communities and is available to those who are traditionally under-represented	GREEN	New checklist issued Jan 2012 to coincide with embedding of Liquid Logic sample of provider case studies Jan 2012. Internal and statutory Inspection processes in place to monitor internal provision. External providers audited to ensure the diverse needs of customers, including challenging behaviour, are met.
Devise and deliver targeted actions on health inequalities in specific areas and communities	GREEN	Independent evaluation report by LGID complete. Full evaluation to be completed by February 2012. Training packages developed and now being promoted out to Community Groups. Training available on request.
Workforce, both internal and contracted, are competent in equality and diversity and representative of the communities they serve	GREEN	In conjunction with HR commenced an analysis of workforce for National Minimum Data Set.
Implement a fit for purpose commissioning process which meets the needs and priorities of the local communities	AMBER	Regular review and improvement of data and analysis will be part of the new commissioning structure. Consultation to commence in February 2012. Needs further improvement as part of overall commissioning plan. Information and feedback from

		the following stakeholder groups is included in JSNA: CWaC stakeholder network C&W NHS Partnership Trust Western Cheshire PCT Specialist forums
Improve diversity of stakeholder engagement structures across all the diversity strands	GREEN	Stakeholder network widened considerably, especially with the inclusion of carers.

Directorate Performance Table:

Indicator Description	11/12 target	As at 31.12.11	Forecast to 31.03.12	Target Attainment	Direction of Travel	Overall Performance Assessment
Increase the Stakeholder Network (currently 150).	160	210	210	G	G	G
Revision of strategy in the light of stakeholder feedback.	Annual conference	Complete	Complete	G	G	G
Proportion of people using social care who receive self-directed support in the year	75%	48%	TBC	A	A	A
Number of Adult Social Care customer reviews in year.	9075	6001	9258	A	G	G
The proportion of people who use services who have control over their daily life	Baseline year	Awaiting Survey	Awaiting Survey	G	G	G
The number of agencies signed up to the information consortium	20% Increase in year	29%	29%	G	G	G
The proportion of people who use services and carers who find it easy to find information about services	Baseline year	Awaiting Survey	Awaiting Survey	N/A	N/A	N/A
The proportion of people who use services who feel safe, and	Baseline year	Awaiting Survey	Awaiting Survey	N/A	N/A	N/A
Those who use services who say that those services have made them feel safe and secure	Baseline year	Awaiting Survey	Awaiting Survey	N/A	N/A	N/A
Proportion of adults with learning	75%	85%	85%	G	G	G

Indicator Description	11/12 target	As at 31.12.11	Forecast to 31.03.12	Target Attainment	Direction of Travel	Overall Performance Assessment
disabilities who live in their own home or with their family						
Proportion of adults with learning disabilities who are in paid employment.	8.00%	10%	10%	G	G	G
The proportion of referrals to Adult Safeguarding Services that are repeat referrals	20%	Accurate data will not be available to April 12	Accurate data will not be available to April 12	A	A	A
Safeguarding Training delivered to wider sector:- A staff B wider sector	400	A 314 B 934	A 473 B 1245	G	G	G
Permanent admissions to residential and nursing care homes for people aged 65+, per 10,000 population	70 (admissions per 10,000 population)	63	67	A	A	A
Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	88%	86%	82%	A	A	A
Delayed transfers of care from hospital (expressed as number of delays per 100,000 population)	Maximum delays per month: 6.0 (all)	5.2	5.0	G	G	G
Delayed transfers of care from hospital which are attributable to adult social care (expressed as number of delays per 100,000 population).	Maximum delays per month: 0.6 (ASC only)	0.48	.50	G	G	G
Social care-related quality of life, and Carer-reported quality of life	Baseline year	Awaiting Survey	Awaiting Survey	N/A	N/A	N/A
Overall satisfaction of people who use services with their care and support	Annual (survey)	Awaiting Survey	Awaiting Survey	N/A	N/A	N/A
Overall satisfaction of carers with social services	Annual (survey)	Awaiting Survey	Awaiting Survey	N/A	N/A	N/A

Indicator Description	11/12 target	As at 31.12.11	Forecast to 31.03.12	Target Attainment	Direction of Travel	Overall Performance Assessment
The proportion of carers who report that they have been included or consulted in discussion about the person they care for	Baseline year	Awaiting Survey	Awaiting Survey	N/A	N/A	N/A
Proportion of Council spend on residential and nursing care	Achieve budget target	36.11%	36.18%	A	A	A
Increase assistive technology users	120 people	104 (as at 31/09/11)	224	G	G	G

Overall Performance Assessment definitions:

R	Underperforming
A	Performing satisfactorily
G	Performing well

Section C – Directorate Priorities

Priority 1	To empower citizens to participate and achieve their full potential
Priority 2	To deliver personalised care and support designed with people and for people
Priority 3	To ensure that individuals and communities are, and feel, safe
Priority 4	To improve wellbeing in order to prevent ill-health and dependency
Priority 5	To inspire and encourage neighbourhoods to deliver services in their locality
Priority 6	To provide advice and information which offer people real choice and control
Priority 7	To deliver efficiency in commissioning and managing services
Priority 8	To ensure that all of our services are fair and equitable and challenge inequality and disadvantage

Other directorate responsibilities include:

Service Area	Key Responsibilities
Joint Strategic Commissioning	Service commissioning based on community needs assessment, performance management outcomes, current and projected activity and trends. External contract development and management, quality assurance and compliance. From 2011: Adult safeguarding; and. supporting people and housing related support for vulnerable adults. From April 2012 corporate lead for Equality and Diversity.
Prevention and Wellbeing	Assessment and care management services across all social care groups
Provider Services	Organisation and management of all in-house services for older people, disabled adults, adults with a learning disability and people with mental health needs.
Transformation and Innovation	Organisational culture, development and improvement. Health sector integration. Equality and diversity lead.
Public Health	Commitment to integration by October 2012. Lead for joint strategic needs assessment and local and Borough wide health and wellbeing improvement projects and programmes.

Budget proposals for 2012/13

Option 1	Review and re-design arrangements for commissioning care in the home (domiciliary care) services leading to a re-tendering of services and selection of service providers.
Option 2	Streamline the technology and practices which enable the directorate to support the way it operates (agile working), including a more efficient approach to undertaking assessments.
Option 3	Carry out a review of social work teams to ensure stronger integration with health partners to generate more efficient joint working, commissioning opportunities and a more robust approach to safeguarding.
Option 4	Develop new ways of delivering services, including a rationalisation of internal management resources and options for the future delivery of the Directorate's traditional Provider Services.
Option 5	Review the housing related support services for vulnerable people in the light of reductions in central government funding, the need to identify efficiencies and to ensure effective support, including prevention and early help.
Option 6	Investment in supporting services for people subject to domestic abuse pending a wider service review
Option 7	Making provision for meeting the estimated costs of the care of young people with learning disabilities moving from children's services
Option 8	Ensuring that long stay, and certain types of short stay, residential placements are used only when no other cost effective alternative is available or where independence can no longer be maintained by community support.
Option 9	Extension of the community meals service to provide an evening service replacing more expensive home care calls.
Option 10	Completion of the phased review of customer contributions, including the full implementation of the fairer charging policy; review of disability related expenditure; and review of specific charge rates.
Option 11	Continuation of the review of care packages in accordance with the Fair Access to care Eligibility Criteria to ensure that the care provided is appropriate, personalised and cost effective.
Option 12	Review and re-design of internally provided learning disability services replacing traditional services with more modern provision.
Option 13	Review of services arranged with third sector organisations to ensure that they meet current commissioning objectives and demonstrate value for money.
Option 14	Re-shape housing related support for vulnerable people to ensure that services are focused on effective support, prevention and early help.

Section D – Performance Plan

Please note Appendix (i) concerning the directorates performance measures

Directorate Priority 1: To empower citizens to participate and achieve their full potential

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH1/1	Provide self-assessment tools to enable people and communities to start thinking about their specific needs and to develop innovative ways to meet those needs	Aug 12	Jun 13	Approach to self assessment agreed by DMT	Aug 12	Transformation and Innovation / Prevention and Wellbeing	Head of Innovation and Transformation Head of Prevention and Wellbeing
				Solution procured (if required)	Dec 12		
				Solution successfully implemented	Jun 13		
ASCH1/2	Develop brokerage and support for people in receipt of personal budgets to increase the extent to which individuals can have choice and control over their care by involving third sector organisations in arranging their care and support.	April 12	Jun 13	Approach to brokerage and brokerage support reviewed and agreed	Aug 12	Strategic Commissioning	Head of Strategic Commissioning
				Establish new ways of working	Dec 12		
				New ways of working rolled out	Jun 13		

ASCH1/3	Ensure that full consultation takes place for all individuals, carers and communities who are affected by service changes or developments	April 12	Dec 12	Engagement and consultation plan initiated	April 12	Transformation & Innovation	Head of Innovation and Transformation
				Engagement and consultation plan for Provider Services developed	April 12		
				Engagement and consultation plan for Prevention and Wellbeing developed	Oct 12		
ASCH1/4	Encourage and support the stakeholder network to be more actively involved in shaping services and policy	April 12	Jun 12	Map all stakeholders, create engagement plan, determine message, medium and success factors, establish listening opportunities for the council and develop new providers	Jun 12	Transformation and Innovation	Head of Innovation and Transformation

Key Performance Indicators:

Performance Measure	Monitoring Frequency	APB Priority (if applicable)	11/12 Forecasted Outturn	2012/13 Target	Explanation of target/outturn variance	Service Area
Percentage of people in self directed support	Monthly	N/A	TBC	TBC		
Percentage of people in receipt of a personal budget/direct payment	Monthly	N/A	11%	TBC		

Risk Management:						
Risk	Current Score	Action(s)	Start	End	Target Score	Responsible Officer
Increased complexity of need, personalised budgets, demographic changes, Dilnot report and wider health and social care reforms leading to changes in service delivery for Adult Social Care resulting in significant financial and staffing implications for the council. (Corporate Risk2)	22	Implementation of the Blueprint and service reviews to ensure services are meeting commissioned intention and customer need	Mar 12	Mar 13	16	DMT
		Links with Health & Wellbeing Strategy and 'Altogether Better'.	Mar 12	Mar 13		

Directorate Priority 2: To deliver personalised care and support designed with people and for people

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH2/1	Develop a broader range of personalised quality assured support options to facilitate people in taking a direct payment and enable more choice and control of that support.	April 12	Dec 12	Develop three year market development strategy	Dec 12	Strategic Commissioning	Head of Strategic Commissioning
ASCH2/2	Through the Carers Strategy, support carers to continue in their caring role enabling them to have a family and community life in tandem with providing personalised support for the person they care for.	July 12	Sep 12	Revise three year carer strategy	July 12	Strategic Commissioning	Head of Strategic Commissioning
				Develop Implementation plan	Sept 12		
ASCH2/3	Work more closely with children's services to ensure that the transition to adult care is better planned and managed and enables young people to increase control over their lives.	April 12	Dec 12	Protocols for 'transitions' agreed with Adults and Children's services.	Aug 12	Prevention and Wellbeing	Head of Prevention and Wellbeing
				New protocols rolled out.	Dec 12		
				Understand the numbers and needs of all children aged 14+ who are likely to transition to adults social care	Dec 12		
ASCH2/4	Evaluate the demand for further extra care housing and its broader role in providing support to the wider community both in specialist provision such as dementia and day opportunities	April 12	March 13	Determine the needs of our community	Oct 12	Strategic Commissioning	Head of Strategic Commissioning
				Forecast the long term future needs and demands	Dec 12		

	to enable people to remain in their own homes.			Develop a comprehensive Housing	Jan 13		
				Accommodation, Day Services and Respite strategy	Mar 13		
				Develop implementation plans	Mar 13		

Key Performance Indicators:

Performance Measure	Monitoring Frequency	APB Priority (if applicable)	11/12 Forecasted Outturn	2012/13 Target	Explanation of target/outturn variance	Service Area
The proportion of people who use services, who have control over their daily life	Annual	N/A	TBC	TBC following baseline		Prevention and Wellbeing

Risk Management:

Risk	Current Score	Action(s)	Start	End	Target Score	Responsible Officer
Workforce not equipped to move to new business model. Management and business failure to ensure quality of service provision and adequate	27	Investment in workforce strategy, including external workforce,	Mar 12	Mar 13	12	Head of Innovation and Transformation
		To maintain current skill levels and compliance. Ensure that workforce is flexible and engaged.	Mar 12	Mar 13		

<p>safeguarding of customers.</p> <p>Risk of industrial action as we go through provider review and change in services.</p>		IAS Protocol (Liquid Logic and Controcc), Electronic Social Care Records, shows direct cost impact of decisions and allows financial modelling.	Mar 12	Mar 13		
<p>Risk that providers are unable to meet the new framework with a risk to financial viability, with a negative impact to Directorate financial and physical resources if the risk materialises.</p>	16	Market stimulation, development and monitoring	Mar 12	Mar 13	14	Head of Innovation and Transformation
		Regular meetings with providers	Mar 12	Mar 13		
		Efficient payment systems	Mar 12	Mar 13		
<p>Failure to achieve the savings targets stated in the 2012-13 Policy Options. Savings required from Reviews at greatest risk of not being achieved.</p>	24	An active programme of cultural and behavioural change.	Mar 12	Mar 13	16	DMT
		Monitoring of the directorate's performance.	Mar 12	Mar 13		
<p>Increased complexity of need, personalised budgets, demographic changes, Dilnot report and wider health and social care reforms leading to changes in service delivery for Adult Social Care resulting in significant financial and staffing implications for the council.</p> <p>(Corporate Risk2)</p>	22	Implementation of the Blueprint and service reviews to ensure services are meeting commissioned intention and customer need	Mar 12	Mar 13	16	DMT
		Links with Health & Wellbeing Strategy and 'Altogether Better'.	Mar 12	Mar 13		

Directorate Priority 3: To ensure that individuals and communities are, and feel, safe

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH3/1	Develop the Safeguarding Unit to ensure that it is embedded within the Directorate and partners. Build stronger coordination between safeguarding, domestic abuse, antisocial behaviour and environmental factors that make citizens feel safe. Explore opportunities for the Multi Agency Safeguarding Hub (MASH)	April 12	Dec 12	Clear protocols are developed and signed off by partners	June 12	Strategic Commissioning	Head of Strategic Commissioning
				Protocols communicated and rolled out	July 12		
				Develop triangulation of data	Sept 12		
				Ensure information is shared across agencies, commissioners and partners	Dec 12		
				Identification of MASH opportunities with colleagues in police and other partners.	Dec 12		
ASCH3/2	Develop a robust quality assurance and contract management approach, and team, which proactively manages the quality and safety of commissioned services	April 12	Jun 12	Quality framework signed off and structure agreed	Jun 12	Strategic Commissioning	Head of Strategic Commissioning with Head of Corporate Procurement
				Quality Assurance framework rolled out	Jun 12		

ASCH3/3	Take lead responsibility for the launch of the 'Lets do Dignity' campaign to ensure we secure dignity in care for older people in hospital and care homes.	Apr 12	Sept 12	Develop training strategy and deliver training for current dignity champions to become dignity agents.	Jun 12	Prevention and Wellbeing	Head of Prevention and Wellbeing
				Ensure all providers and partners adopt	Jul 12		
				'Lets Do Dignity' approach	Jun 12		
				Establish Dignity agents across voluntary and third sector	Sept 12		
				Develop local plans with LINK / Healthwatch to deliver 'dignity' in care standards and approach	Sept 12'		
ASCH3/4	Develop an approach which sets out clearly the type and nature of care that needs to be in place to offer Older People comprehensive alternatives to hospital admission or following hospital discharge. This care category framework will specify alternatives to acute services and will then be used to map the current demand and capacity within the system. This tool will be used to assist the 'Altogether Better' integration of services.	April 12	Nov 12	Develop project scope with 'Altogether Better' team to incorporate improved 'step up, step down' care pathways	April 12	Prevention and Wellbeing	Head of Prevention and Wellbeing
				Projects begin	April 12		
				Design new ways of working	Aug 12		
				Implement new ways of working	Nov 12		

Key Performance Indicators:							
Performance Measure	Monitoring Frequency	APB Priority (if applicable)	11/12 Forecasted Outturn	2012/13 Target	Explanation of target/outturn variance	Service Area	
The proportion of people who use services who feel safe.	Annual (survey)	N/A	TBC	TBC following baseline		Head of Joint Strategic Commissioning	
Numbers of safeguarding referrals related to dignity; nutrition, abuse etc.	Annual	N/A	TBC	TBC following baseline		Head of Joint Strategic Commissioning	
The proportion of people who use services who say that those services have made them feel safe and secure.	Annual (survey)	N/A	TBC	TBC following baseline		Head of Joint Strategic Commissioning	
Risk Management:							
Risk	Current Score	Action(s)		Start	End	Target Score	Responsible Officer
Increased complexity of need, personalised budgets, demographic changes, Dilnot report and wider health and social care reforms leading to changes in service delivery for Adult Social Care resulting in significant financial and staffing implications for the council. (Corporate Risk2)	22	Implementation of the Blueprint and service reviews to ensure services are meeting commissioned intention and customer need		Mar 12	Mar 13	16	DMT
		Links with Health & Wellbeing Strategy and 'Altogether Better'.		Mar 12	Mar 13		
Failure to minimise risk which leads to incidents of domestic abuse resulting in serious injury and damage to reputation of Council and	18	Domestic Abuse service review and redesign underway		Mar 12	Oct 12	6	Head of Strategic Commissioning
		Domestic abuse strategy		Mar 12	Oct 12		

partners. (Corporate Risk4)		Safeguarding unit	Mar 12	Oct 12		
---------------------------------------	--	-------------------	--------	--------	--	--

Directorate Priority 4: To improve wellbeing in order to prevent ill-health and dependency

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH4/1	Develop an authority wide approach to prevention and early help which harnesses the capacity of other council services as contributors to maintaining independence and health	April 12	Oct12	Develop in conjunction with partners, a strategic shift towards interventions with citizens that tackle the wider determinants of health and support wellbeing.	Sept 12	Strategic Commissioning and Public Health	Director of Public Health/Head of Strategic Commissioning
				Establish with Public Health actions determined from a renewed JSNA that informs the Local Health and Wellbeing Strategy to reduce health inequalities	Oct 12		
ASCH4/4	Further develop integrated re-ablement and rehabilitation services with the NHS to support personal independence and use resources more effectively.	April 12	Nov 12	Disaggregate Homecare and Reablement	July 12	Provider Services	Head of Provider services
				Integrate with Prevention and Wellbeing	Nov 12		
				Develop integrated ways of working with Health Partners through 'Altogether Better' programme	Nov 12		
ASCH4/5	Work closely with Public Health to renew the Joint Strategic Needs Assessment and identify health inequalities in communities	April 12	Mar 13	Comprehensive demographic analysis and integrated Joint Strategic Needs Assessment complete	Mar 13	Strategic Commissioning / Public Health	Head of Strategic Commissioning and Director of Public Health

Key Performance Indicators:							
Performance Measure	Monitoring Frequency	APB Priority (if applicable)	11/12 Forecasted Outturn	2012/13 Target	Explanation of target/outturn variance	Service Area	
The proportion of older people (65 and over) who were offered rehabilitation following discharge from hospital	Monthly	N/A	N/A	TBC following baseline			
Smoking prevalence 18 over (adult) –(Public Health Outcome 2 indicator)	TBC	N/A	N/A	TBC following baseline			
Excess weight in adults – (Public Health Outcome 2 indicator)	TBC	N/A	N/A	TBC following baseline			
Take up of the NHS health check programme – (Public Health Outcome 2 indicator)	TBC	N/A	N/A	TBC following baseline			
Risk Management:							
Risk	Current Score			Start	End	Target Score	Responsible Officer
Failure to demonstrate improvement in health inequalities. The impact would be increased health inequalities for our customers, Council management held to account by external scrutiny and adverse publicity	18	Extend early interventions on health checks for 2012/13		Mar 12	Mar 13	15	Head of Strategic Commissioning / Public Health
		Inform the creation of the Health and Wellbeing strategy		Mar 12	Mar 13		

Directorate Priority 5: To inspire and encourage neighbourhoods to deliver services in their locality

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH5/1	Involve our communities, the third sector and faith organisations in building capacity and confidence to provide services at local level	April 12	Sep 12	Develop elements of broader engagement strategy that supports involvement of faith and other community groups who identify as such living within the Borough	Sept 12	Innovation and Transformation	Head of Innovation & Transformation
ASCH5/2	Develop an approach to integrated health and care teams within local neighbourhoods to more effectively use our resources and improve the user experience.	April 12	Dec 12	Develop project scope with 'Altogether Better' team to incorporate neighbourhood based multi agency teams based around patient population.	April 12	Prevention and Wellbeing	Head of Prevention and Wellbeing
				Projects begin	April 12		
				Design new ways of working	Aug 12		
				Implement new ways of working	Dec 12		
Risk Management:							
Risk	Current Score	Action(s)		Start	End	Target Score	Responsible Officer
Increased complexity of need, personalised budgets, demographic changes, Dilnot report and wider	22	Implementation of the Blueprint and service reviews to ensure services are meeting commissioned intention and customer need		Mar 12	Mar 13	16	DMT

health and social care reforms leading to changes in service delivery for Adult Social Care resulting in significant financial and staffing implications for the council.		Links with Health & Wellbeing Strategy and 'Altogether Better'.	Mar 12	Mar 13		
---	--	---	--------	--------	--	--

Directorate Priority 6: To provide advice and information which offer people real choice and control

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH6/2	Commission a HealthWatch organisation as the consumer champion in health and social care, including arrangements for Dignity	April 12	Mar 13	Establish a Transition Project Group	Apr 12	Head of Innovation and Transformation	Head of Innovation and Transformation
				Undertake community consultation	Aug 12		
				Determine the needs of the community	Sept 12		
				Recommend to the Executive the format and construction of a local Healthwatch	Oct 12		
				Procure/appoint as required	Oct 12		
				Ensure set up arrangements are completed	Mar 13		
ASCH6/4	Ensure that information is available locally and in forms appropriate to needs through a widening consortium of information providers	April 12	Mar 13	Protocol for keeping data accurate	Aug 12	Strategic Commissioning	Head of Joint Strategic Commissioning
				Regular monitoring of content	Dec 12		
				Active recruitment for more agents to join the information consortium	Dec 12		

Key Performance Indicators:							
Performance Measure	Monitoring Frequency	APB Priority (if applicable)	11/12 Forecasted Outturn	2012/13 Target	Explanation of target/outturn variance	Service Area	
The proportion of people who use services and carers who find it easy to find information about services	Annual (survey)	N/A	TBC	TBC following baseline		Head of Strategic Commissioning	
Risk Management:							
Risk	Current Score	Action(s)		Start	End	Target Score	Responsible Officer
Increased complexity of need, personalised budgets, demographic changes, Dilnot report and wider health and social care reforms leading to changes in service delivery for Adult Social Care resulting in significant financial and staffing implications for the council.	22	Implementation of the Blueprint and service reviews to ensure services are meeting commissioned intention and customer need		Mar 12	Mar 13	16	DMT
		Links with Health & Wellbeing Strategy and 'Altogether Better'.		Mar 12	Mar 13		

Directorate Priority 7: To deliver efficiency in commissioning and managing services

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH7/1	Review all contracts based on their outcomes to ensure that provision is high quality, cost effective and achieves high user satisfaction.	April 12	Aug 12	Contracts register available which is accessible by agreed stakeholders (Finance, Adult Social Care and Health, Directorate Management Team, Strategic Commissioning	Jun 12	Corporate Procurement and Strategic Commissioning	Head of Procurement / Head of Strategic Commissioning
				Quality framework signed off and structure implemented	Sept 12		
				Quality Assurance framework rolled out as contracts are renewed	Mar 14		
ASCH7/2	Complete the review of Provider Services to determine future opportunities for service delivery	April 12	Mar 13	Complete Review	April 12	Provider Services	Head of Provider Services
				Consult on proposals	July 12		
				Report to Executive with outcomes from the consultation and review. Report to request a decision on which model they would like to progress.	Oct 12		
				Conduct Due Diligence	April –		

				analysis	Oct 12		
				Implement the option which Executive decide to progress	Oct 12		
ASCH7/3	Conduct an end to end Business Process Redesign (BPR) the Prevention and Wellbeing Service	Dec 11	Mar 13	ACT and Community Based Assessment BPR complete	May 12	Prevention and Wellbeing	Head of Prevention and Wellbeing
				New ways of working implemented	Oct 12		
				Hospital Discharge BPR complete (as part of 'Altogether Better' programme)	Nov 12		
ASCH7/4	Develop and Implement a Resource Allocation System (RAS)	Mar 12	Sep 12	Project approach agreed and brief signed off by DMT	Mar 12	Prevention and Wellbeing	Head of Prevention and Wellbeing
				RAS business and financial model agreed	May 12		
				System development and Testing	Sep 12		
				Training and roll out	Oct 12		
ASCH7/5	Support the Health and Wellbeing Board in developing the Joint Health	April 12	Oct 12	Review commissioning strategy with health	Oct 12	Strategic Commissioning	Head of Strategic

	and Wellbeing Strategy.			partners.			Commissioning
Key Performance Indicators:							
Performance Measure	Monitoring Frequency	APB Priority (if applicable)	11/12 Forecasted Outturn	2012/13 Target	Explanation of target/outturn variance		Service Area
Overall satisfaction of people who use services, with their care and support	Annual (survey)	N/A	TBC	TBC following baseline			Head of Strategic Commissioning
Risk Management:							
Risk	Actions			Start	End	Target Score	Responsible Officer
Challenge of integration of Public Health into the Council's infrastructure leading to financial implications for Council - reduction in services and budget overspend.	22	Develop Health and Wellbeing Strategy		Mar 12	Apr 13	11	Head of Innovation and Transformation
		Implement and monitor the transition plan in accordance with the DoH requirements and managed through ASC&H DMT. Maintain focus on resolving the financial shortfall predicted and understand inherited contractual liability		Mar 12	Apr 13		
Impact of the outcome of the Support for vulnerable people/housing related support which has a £2 million saving target. The impact would be a reduction in the diversity of services for customers, an increase in the number of customers requiring publicly funded care and poor outcomes for personalisation.	18	Refocus how Supporting People is operating to support Adult Social Care and Health		Mar 12	Apr 13	10	Head of Procurement / Head of Strategic Commissioning
The financial gap in future years caused by nonrecurring funding, including Section 256 income of £3.7 million in 2012-13.	10	Risk for 2012-13 regarding formula and change. The Agreement is a priority for the Council, Western Cheshire PCT and the Clinical Commissioning		Mar 12	Apr 13	10	Head of Strategic Commissioning

As this directly funds care there would be a negative impact on care standards and the council could incur increased costs. The Nursing care element would have to be delivered by PCT.		Group.				
Negative consequences may arise through inadequacy of compliance and quality assurance systems in commissioned services. The impact would be an increased demand on budget, customers' needs not being matched by service quality levels, service failure and customers only receiving service of the last resort.	22	Establishment of new arrangements for ensuring quality and compliance. Regular reviews with other agencies safeguards adults and reduce risk.	Mar 12	Mar 13	4	Head of Strategic Commissioning
Workforce not equipped to move to new business model. Management and business failure to ensure quality of service provision and adequate safeguarding of customers. Risk of industrial action as we go through provider review and change in services.	27	Investment in workforce strategy, including external workforce,	Mar 12	Mar 13	12	Head of Innovation and Transformation
		To maintain current skill levels and compliance. Ensure that workforce is flexible and engaged.	Mar 12	Mar 13		
		IAS Protocol (Liquid Logic and Controcc), the Electronic Social Care Record, shows direct cost impact of decisions and allows financial modelling.	Mar 12	Mar 13		
Risk that providers are unable to meet the new framework with a risk to financial viability, with a negative impact to Directorate financial and physical resources if the risk materialises.	16	Market stimulation, development and monitoring	Mar 12	Mar 13	14	Head of Innovation and Transformation
		Regular meetings with providers	Mar 12	Mar 13		
		Efficient payment systems	Mar 12	Mar 13		
Failure to achieve the savings targets stated in the 2012-13 Policy Options. Savings required	24	An active programme of cultural and behavioural change.	Mar 12	Mar 13	16	DMT

from Reviews at greatest risk of not being achieved, resulting in budget overspend.		Monitoring of the directorate's performance.	Mar 12	Mar 13		
Increased complexity of need, personalised budgets, demographic changes, Dilnot report and wider health and social care reforms leading to changes in service delivery for Adult Social Care resulting in significant financial and staffing implications for the council.	22	Implementation of the Blueprint and service reviews to ensure services are meeting commissioned intention and customer need	Mar 12	Mar 13	16	DMT
		Links with Health & Wellbeing Strategy	Mar 12	Mar 13		
Resolution of outstanding items with Central & Eastern Cheshire Primary Care Trust (CEC PCT) (Potential reduction of £2m funding). As this directly funds care there would be a negative impact on care standards and the council could incur increased costs. The Nursing care element would have to be delivered by PCT.	24	Meeting between Council Responsible Officers, Central and Eastern Cheshire PCT and the Clinical Commissioning Group.	Mar 12	Oct 12	6	Head of Strategic Commissioning

Directorate Priority 8: To ensure that all of our services are fair and equitable and challenge inequality and disadvantage

Business Plan Ref	Action	Action Start	Action End	Milestone	Date of Milestone	Service Area	Responsible Officer(s)
ASCH8/1	Ensure all key strategies, policies and service changes undergo Equality Impact Assessments (EIA) also referred to as equalities analysis	Ongoing	N/A	Produced an annual plan of equalities analysis that need to be undertaken which is reviewed regularly.	May 2012	Strategic Commissioning	Head of Strategic Commissioning
ASCH8/2	To progress through the Equality Framework for Local Government, embedding Equality and Diversity across all council services	Ongoing	N/A	Achieved Level 3 of the Equality Framework for Local Government	Summer 2013	Strategic Commissioning	Head of Strategic Commissioning
Key Performance Indicators:							
Performance Measure		Monitoring Frequency	11/12 Forecasted Outturn	2012/13 Target	Service Area		
Corporate: Percentage of Equality Impact Assessments (EIA) undertaken/ completed against a programme of prioritised IAs.		Quarterly	90%	100%	Strategic Commissioning		

Demonstrate an evidence based commitment to the delivery of the corporate equality and diversity priorities 2012 – 2015 through Directorate management teams and equality and diversity groups.

It is the responsibility of the Directorate Equality and Diversity Groups, supported by Directorate Performance Managers, to provide a quarterly self assessment for inclusion in the Comprehensive Performance Review. The self assessment should provide evidence of the following corporate equality and diversity objectives:

1. To understand the needs of minority groups
2. To provide easy access to service and information
3. To improve participation of under-represented groups in community life and in the democratic process
4. To work more closely with third sector groups
5. To be committed to equality and diversity when commissioning and/or purchasing goods and services
6. To enhance older people’s independence and raise awareness of their needs and aspirations
7. To support rural communities to access key services such as healthcare, transport, jobs and training
8. To reduce the impact of poverty and deprivation in the community and improve health inequalities
9. To increase communities’ confidence to report hate incidents, domestic abuse and anti-social behaviour
10. To increase the diversity of the Council workforce and gain the reputation of an equal opportunities employee

Key Performance Indicators:						
Performance Measure	Monitoring Frequency	APB Priority (if applicable)	11/12 Forecasted Outturn	2012/13 Target	Explanation of target/outturn variance	Service Area
To be agreed by ASC Directorate Equality and Diversity group.						

Risk Management:						
Risk	Current Score	Action(s)	Start	End	Target Score	Responsible Officer
Failure to demonstrate improvement in health inequalities	18	Extend early interventions on health checks for 2012/13	Mar 12	Mar 13	15	Head of Strategic Commissioning / Public Health
		Inform the creation of the Health and Wellbeing strategy	Mar 12	Mar 13		
Negative consequences may arise though inadequacy of compliance and quality assurance systems in commissioned services.	22	Contracts changed	Mar 12	Dec 12	4	Head of Strategic Commissioning
		Implement new supplier management team and approach	Mar 12	Dec 12		
Increased complexity of need, personalised budgets, demographic changes and the Dilnot report leading to changes in service delivery for Adult Social Care resulting in significant financial and staffing implications for the council	22	Implementation of the Blueprint and service reviews to ensure services are meeting commissioned intention and customer need	Mar 12	Mar 13	16	DMT
		Links with Health & Wellbeing Strategy	Mar 12	Mar 13		

Section E – Financial Information

Adult Social Care & Health Revenue Budget 2012-13

Service Provided:

	Expenditure £000	Income £000	Net Budget £000
Social Care Provision			
Building Based Provision	12,579	1,762	10,817
Domiciliary Care	4,093	55	4,038
Administration/Management	1,785		1,785
	<u>18,457</u>	<u>1,817</u>	<u>16,640</u>

Strategic Commissioning, Transformation & Innovation

Adaptations & Equipment	827	0	827
Strategic Commissioning	4,670	138	4,532
Adult Safeguarding	517	58	459
Supporting People	10,043	0	10,043
	<u>16,057</u>	<u>196</u>	<u>15,861</u>

Prevention & Wellbeing

Social Work Teams	7,929	68	7,861
Community Based Care	27,467	5,766	21,701
Residential / Nursing Care	36,194	12,386	23,807
	<u>71,590</u>	<u>18,221</u>	<u>53,369</u>

Directorate Total

Building Based Provision	12,579	1,762	10,817
Domiciliary Care	4,093	55	4,038
Administration/Management	1,785	0	1,785
Adaptations & Equipment	827	0	827
Strategic Commissioning	4,670	138	4,532
Adult Safeguarding	517	58	459
Supporting People	10,043	0	10,043
Social Work Teams	7,929	68	7,861
Community Based Care	27,467	5,766	21,701
Residential / Nursing Care	36,194	12,386	23,807
	<u>106,104</u>	<u>20,234</u>	<u>85,870</u>

Appendix (i)

Adult Social Care and Health Business Plan (2012-13) - Performance measures

The directorate has taken the decision to measure its performance against the agreed business plan actions primarily by measures that specifically relate to customer experience. To ensure accountability the complete set of directorate outcome framework measures will continue to be tracked and reported monthly to Directorate Management Team (DMT), quarterly to Corporate Management Team (CMT), through Comprehensive Performance Review (CPR), and to our customers and stakeholders through the Local Account.

The measures selected for the Business Plan will focus on both the quality of the customer experience of adult social care services and where we work in partnership with our public health and NHS partners. Unfortunately the first release of the outcome measures, which are dependent upon survey results, have not been published by the Department of Health; the directorate performance team have been advised the current proposed publication date is Summer 2012. Colleagues from the Primary Care Trust (PCT) have advised that Health Outcome measures will not be published before the end of April 2012.

The Business Plan will be updated upon receipt and the measures reported via Mid-Year CPR.

Accessing Cheshire West and Chester Council information and services

Council information is also available in Audio, Braille, Large Print or other formats. If you would like a copy in a different format, in another language or require a BSL interpreter, please email us at **equalities@cheshirewestandchester.gov.uk**

Tel: 0300 123 8 123 **Textphone:** 18001 01606 867 670

email: equalities@cheshirewestandchester.gov.uk

web: www.cheshirewestandchester.gov.uk

Cheshire West and Chester Council

HQ, Nicholas Street, Chester, CH1 2NP **Tel:** 0300 123 8 123

Visit: cheshirewestandchester.gov.uk