

Adult Social Care Improvement Plan

1. This plan is a response to the key areas for development identified by CSCI in their Annual Performance Assessment delivered on November 2008 (covering the year 2007/08).
2. A dedicated plan has been produced here to monitor delivery, where the development area is already covered by an existing improvement plan this is referred to in the action column.
3. The improvements have all been included in the Directorate business planning process

4. Improvement Plan

Development Area	Lead officer	Actions	Target	Progress
1. There were a high number of delayed transfers from care attributable to the interface with Health partners, and an increase on last year's return. The rate is more than double the average of similar Councils and much higher than the England average. Delays attributable to social services are substantially higher than similar Councils and the national average for 2007-08, although they have reduced from 2006-07.	Denise D'Souza	Dedicated Action Plan in place	Target 2009/10 to be agreed via LHE group	
2. People were waiting longer for minor and major adaptations than those in	Martin Reid Karin Divall	External review of adaptations	Minor adaptations	

similar Councils.		service being commissioned. Direct prescription introduced at access point linked to more responsive delivery and installation service. Contractual specifications in public sector adaptations with external contractors regarding response times	delivered within 4 weeks. Major Adaptations 27.5 weeks	
3. The number of people in receipt of direct payments needs to increase to the level of similar Councils and the national average.	Brigid Day	This is a LAA target with a dedicated delivery plan	300 people 2008/09. 600 people 2009/10	December 2008 on target
4. The Council do not have 100% availability of single rooms at this stage.	Denise D'Souza	Commissioning and contracting work underway with partners across city to	95% 2008/09 98% 2009/10	Improved to 96% at quarter 2

		increase capacity		
5. The Council is failing to gather ethnicity data related to its workforce and should be urgently addressing this shortfall.	Philip Letchfield	Review processes with HR and implement improvements. Introduce quarterly reporting. Strengthen link between HR and operational teams.	5% in 2008/09	Achieved. SSD001 return indicates performance of 4.1% in ASC
6. Costs of intensive social care have increased and are significantly higher than comparator Councils.	Denise D'Souza Jugal Sharma	See 7 below.		
7. Unit costs are higher than similar Councils and the national average.	Jugal Sharma Denise D'Souza Brigid Day	Note positive comments in APA re value for money , service quality and commissioning. Fairer Contracting arrangements to be introduced. The Learning	Year on year reductions in unit cost of 3% in LD. Efficiency savings set for ASC VFM reviews.	Fairer Contracting approved by CMM and JCB. VFM implementation plans in ASC on target and efficiencies delivered.

		<p>Disability Commissioning Strategy 2009-12 sets out plans to address this. This include strategies to support move on to greater independence, to roll out self directed support, to increase resources in preventative services, to reduce high cost out of area placements and to remodel services to improve value for money.</p> <p>Tendering on out of area placements has commenced and reduction in unit costs being negotiated.</p> <p>VFM reviews</p>		
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		completed and being implemented in Adult Social care re day care and home care. Further round of VFM reviews agreed.		
8. The number of places funded by the Council in non-residential intermediate care schemes is significantly below the level of similar Councils and England average.	No further action proposed.	The Council provided CSCI with a detailed response at the Annual Review Meeting. This confirmed that the numbers of places maybe lower but that the actual number of people receiving places was equivalent. This we believe indicated a good performance by the Council and excellent		

		throughput.		
9. More people with a learning disability need to be helped into employment.	Jugal Sharma	Data being collected for NI 146 since 1 st October 2008.	Data to be available for first quarter of 2009, then annual increases against that benchmark.	Data collection started.
10. More people with a learning disability need to be helped to live at home.	Jugal Sharma	Scrutinise cases at Eligibility Panel-Direct Payments and SDS where possible. Data cleanse Adult Placements and in-house supported living placements on Carefirst. co-opt joint-funded packages with mental health to LD P.I Move remaining 2 people from CMG res care to CMG supported living	To increase performance from 416 to 421 by end of financial year.	Expecting to reach target.
11. The numbers of carers caring for	Jugal Sharma	Current target	Workplan in	New assessor

learning disabled people aged 18-64 who have received an assessment or review has increased in 2006-07 but this is behind the number provided by similar Councils and national average.		being reviewed to be in line with national averages. New carer assessor to work to revised targets	place that will achieve the national standard.	in post
12. The number of carers caring for people with a learning disability aged 65 or over who have received an assessment or review during the year is significantly below the level achieved by similar Councils and national average.	Jugal Sharma	Current target being reviewed to be in line with national averages. New carer assessor to work to revised targets	Data matching and cleansing exercise.	New assessor in post
13. Services for carers are good in Brighton and Hove, but the service is slightly behind levels achieved by similar Councils and the national average.	Tamsin Peart	This is a LAA target and a dedicated improvement plan is in place.	16% 2008/09	November 2008 on target to exceed 16%
14. The level of grant-funded services for older people was significantly less than comparator Councils in 2006-07.	Philip Letchfield	This was a new survey in 2007 and 2008 will be the first year of the new statutory survey. We have reviewed the methodology and undertaking a more rigorous	Pending benchmarking and clarification of indicator definition.	Survey will be completed in January 2009. Benchmarking underway.

		survey to ensure we capture all the activity.		
15. The Council has reached level 2 of the equality standards for local government and report that the remaining three will be implemented in 2008-09. This is significantly behind the progress made by many other Councils.	Andy Staniford Jess Harper	Dedicated action plan in place and the Council plans to achieve level 3 by March 2009.	Level 3 achieved by March 2009.	Positive internal audit completed November 2008 across the Directorate.
16. The percentage of staff in the independent sector who had safeguarding training was lower than similar Councils or the national average.	Brigid Day Denise D'Souza	The Council is not including the 'cascade' effect of training. This will be collected and included in future reporting.	To be in line with performance of comparable councils.	Collection plans being developed.
17. Despite being an area for improvement last year, the Council have yet to implement fully the Electronic Social Care Record and reports this development to be in alignment with the three-year programme of personalisation within social care.	Philip Letchfield	This will be aligned to the 3 year programme of personalisation. It the highest priority in the Position Statement that is informing the strategy for how information systems and technology	ESCR in place as one element supporting personalisation programme .	Next key milestone is the roll out of CF6 across all of ASC by April 2009.

		can support the personalisation programme.		
18. Sickness absence is greater than last year, having almost doubled. Brighton and Hove have plans in place to address this.	Jugal Sharma Denise D'Souza	Adult Social Care are piloting a new approach to sickness management across the Council. A dedicated plan is in place.	To bring sickness absence into line with comparable councils.	Good progress made re short term sickness.

