

WIRRAL COUNCIL

HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

19 JANUARY 2012

SUBJECT:	SELF EVALUATION / PEER CHALLENGE
WARD/S AFFECTED:	ALL
REPORT OF:	GRAHAM HODKINSON, DIRECTOR OF ADULT SOCIAL SERVICES
RESPONSIBLE PORTFOLIO HOLDER:	COUNCILLOR ANNE MCARDLE
KEY DECISION?	NO

1.0 EXECUTIVE SUMMARY

- 1.1 This report informs the Committee of the outcome of the Peer Challenge carried out in late November/early December 2011. The Peer Challenger considered a "Self Evaluation" prepared by the Department which was informed by a report considered by Committee in November 2011.
- 1.2 These documents have been used to produce the Department of Adult Social Services Draft "Local Account" which is a way of demonstrating and describing performance in adult social care to local people. Committee's views on the Local Account are sought as part of the consultation process.

2.0 RECOMMENDATION/S

- 2.1 That Committee notes the outcome of the Peer Challenge process.
- 2.2 That Committee comments on the content of the Local Account.

3.0 REASONS FOR RECOMMENDATION/S

- 3.1 This Committee was instrumental in monitoring the CQC Improvement Plan which influenced the recent Department of Adult Social Services Self Evaluation report; it is, therefore, appropriate for the outcome of the Peer Challenge, which reviewed the Self Evaluation document, to be reported to committee.
- 3.2 The production of a Local Account is a new development in line with the initiative of the Association of Directors of Adult Social Services (ADASS) "Promoting Excellence in Councils' Adult Social Care". ADASS wishes to promote the use of 'Local Accounts' as a way of demonstrating and describing performance in adult social care to local people. Committee's comments are sought as part of the consultation process.

4.0 BACKGROUND

- 4.1 At its meeting on 8 November 2011 the Committee received a report regarding the completion by the Department of Adult Social Services (DASS) of the Improvement Plan following the Care Quality Commission (CQC) Inspection in May 2010.
- 4.2 Since its inspection the CQC changed its remit and it did not return, as originally planned, to Wirral in March 2011 to assess progress against the Improvement Plan. Instead, it was agreed that this function would be carried out as part of the "Sector-Led Improvement Programme". This is developing on a number of fronts that are described below.

5. SECTOR LED IMPROVEMENT – NATIONAL CONTEXT

- 5.1 In October 2010, the Local Government Association conducted a consultation with the local government sector on a new approach to self-regulation and improvement following the Coalition Government decision to dismantle the existing framework of assessment and regulation. The consultation was based on the following principles:
- that councils are responsible for their own performance
 - that stronger local accountability drives improvement
 - that councils have a collective responsibility for performance in the sector as a whole.
- 5.2 The proposals within the consultation received wide support from Local Government and further work was undertaken to develop a model of self evaluation to be managed by the sector.
- 5.3 In September 2011 the outcome of the consultation was published by the Local Government Association. Entitled "Taking the Lead", this described the approach to be taken by the sector to self-regulation and improvement including a peer challenge offered to all councils, free of charge, in the three-year period from April 2011

6. SECTOR LED IMPROVEMENT – DASS

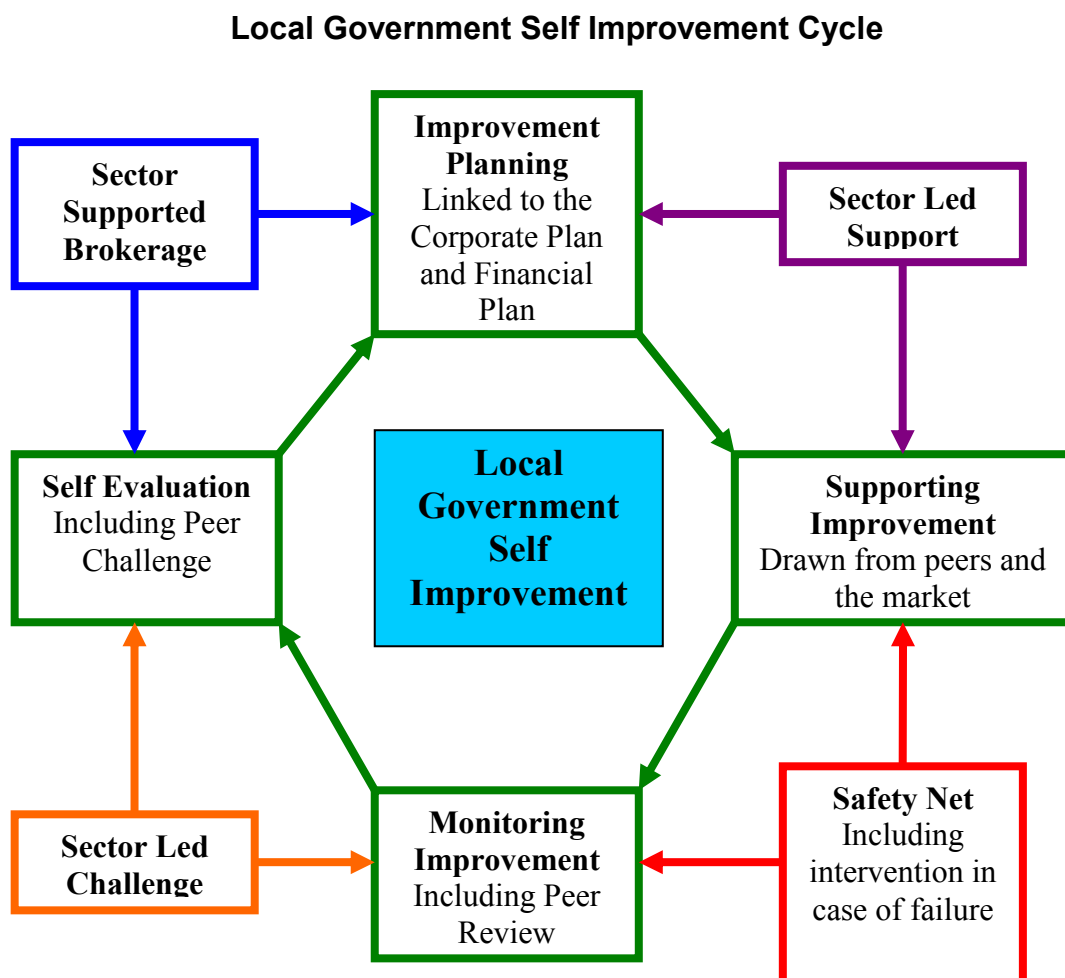
- 6.1 On 16 November 2010 the Government launched its "Vision for Adult Social Care: Capable Communities and Active Citizens" which asserted that new approaches and different ways of working, both nationally and locally, would be necessary to deliver improved services in financially challenging times. Simultaneously, it launched a consultation, "Transparency in outcomes: a framework for adult social care." This consultation was undertaken in the context of the LGA's expressed wish for the sector to take more control over self regulation and assessment.

- 6.2 The consultation proposals were built around three themes:
- Creating a focus on the outcomes which services achieve for people, as the hallmark of a truly personalised approach;
 - Developing a strategy for quality in adult social care;
 - Designing more transparency into the system, so the public can hold local organisations to account, citizens can make more informed choices about their care, and people who use services can see how their experiences can drive change and improvement.
- 6.3 In March 2011 the Government published its response to the “Transparency in outcomes: a framework for adult social care” consultation. It restated that its strategy was to drive improvement through a focus on outcomes and greater transparency. This was to be supported through three mechanisms
- a national Adult Social Care Outcomes Framework (ASCOF)
 - the collection of a New National Data Set and
 - the development, at a Local Authority level, of a “Local Account”.
- 6.4 It is proposed that the National Dataset of information from the year ending 31 March 2012 will be used to inform the ASCOF for 2011/12 which will be published in June/July 2012. However, each Local Authority has been advised that it should publish a Local Account by 31 December 2011 using the ASCOF Framework and national dataset currently available.
- 6.5 The Local Account is expected to be a central part of the approach to Sector Led Improvement described above. The approach places at its heart the principle that every council should be responsible for its own improvement, and should identify its own needs through self evaluation. Councils are expected to undertake on going self assessment and assurance with people who use services and citizens, and to publish information on priorities and progress.

7 THE SELF IMPROVEMENT CYCLE

- 7.1 The new approach to self regulation described above will be embodied in a Bill before Parliament in spring, 2012. It is a critical part of the idea that the local government sector collectively should take responsibility for its own regulation and improvement after the removal of duties from the Audit Commission and CQC (though not OFSTED).

7.2 In essence, the improvement cycle is as follows.



7.3 Key elements in the cycle relevant to this report are

7.3.1 “**Self Evaluation**”, implies that each service area has:

- A clear understanding of what it is trying to achieve for Wirral people flowing from the Council’s Corporate Plan;
- A clear understanding of what it is required to achieve by legislation, regulation or external contract;
- These understandings expressed in terms of outcomes for service users, both external and internal clients;
- Wherever possible these outcomes expressed in numeric, measurable terms;
- A mechanism for monitoring and reporting on progress against these measures;
- A knowledge of the performance on these measures of other comparable councils;
- Clear expectations of future performance against these benchmarks;
- A mechanism for gathering the qualitative views of service users, carers and partners;

- A mechanism for gathering the views of practitioners;
- A mechanism for collating and evaluating this evidence;
- A mechanism for translating these judgements into improvement plans;
- A mechanism for relating these plans to investment decisions.

7.3.2 “**Peer Challenge**” is central to the new approach. It implies that each council opens up its self evaluation process honestly to its peers and also that it contributes its own staff time as a civic duty to peer challenge others. The Peer Challenger **does not** carry out a one-person inspection, nor endorse the self evaluation as being true or accurate in every respect.

The **challenge** role of the peer challenger during this self evaluation is,

- To challenge the Director concerning the validity and comprehensive nature of the evidence used
- To challenge the Director on the interpretation of this evidence and the robustness of the evaluation
- To challenge the Director on the appropriateness of the priorities identified by the process

The **validation** role of the Peer Challenger during the process is,

- To provide assurance that the process of self evaluation has been carried out thoroughly and honestly
- To test out the judgement about outcomes against the national data and intelligence that is available
- To test out the judgement about outcomes against any audit or inspection evidence that is available
- To offer a view as to whether the priorities for improvement that have been identified are appropriate or whether there are major omissions
- To alert the Chief Executive and Leader of the Council if there are major, unaddressed concerns having a bearing on the legality or propriety of the council’s actions or the safety of Wirral citizens

7.3.4 “**Peer Review**” role supports the improvement process within a local authority by:

- providing a ‘critical friend’ assessment of a service;
- identifying areas for improvement within the service;
- supporting change and improvement within the service; and
- facilitating the exchange of ideas and good practice.

A peer review is not an inspection or audit of a service - it is a supportive review process designed to help identify areas for improvement and to aid a service’s capacity to change.

8 SELF EVALUATION – WIRRAL

- 8.1 Originally it was anticipated that a Peer Review of Wirral DASS would be undertaken in November 2011 in place of a further inspection by the CQC. During the period of preparing for this Review, however, the Council received a report of an Independent Review by Anna Klonowski Associates (AKA) into Corporate Governance. On 22 September 2011 Cabinet accepted the recommendations of the report and agreed to a wholesale programme of review of the Council's governance arrangements. It has been agreed, therefore, that there will be simultaneous and linked peer reviews of DASS and Corporate Governance in 2012.
- 8.2 It was not thought appropriate, however, to delay until the Peer Review any evaluation of the improvement work undertaken by DASS since the CQC inspection in May 2010. A decision was taken, therefore to break into the Self Improvement Cycle at the **Self Evaluation including Peer Challenge** stage by undertaking a "Self Evaluation" validated by a supportive and challenging former director.
- 8.3 The Self Evaluation document aimed to:
- provide an honest evaluation of the Department's performance, achievements and challenges at November 2011 and to assess progress made since the CQC Inspection Report September 2010
 - benchmark the Department's performance against that of other Local Authorities
 - describe, from a service users' and carers' perspective, their experiences of DASS
 - provide the new Director of Adult Social Services with a tool to support further planning and development
 - provide the Council with evidence to support a future Council wide Peer Review planned for 2012
- 8.4 The document is structure around the elements of the departmental plan:
- i) Safeguarding
 - ii) Choice
 - iii) Quality
 - iv) Early Intervention
 - v) Commissioning and Resource Management
- 8.5 In the absence of a nationally agreed approach to DASS evaluation two external self evaluation documents were used to construct Key Lines of Enquiry (KLOE's) for each of the programmes identified above
- LGIA Peer Review Self Assessment 2011 (SA)
 - ADASS Safeguarding Self Assessment 2008 (ADSS)
- 8.6 The KLOEs were applied, primarily to the programme and projects identified within the Departmental Plan and CQC Improvement Plan. The process, however, also provided the opportunity to look across programmes, not just down into them.

- 8.7 Evidence was collected in relation to achievements, to outcomes, or outputs, and remaining challenges.
- 8.8 A benchmarking exercise has also been undertaken to measure the performance of Wirral DASS against that of other Local Authorities using National Indicator Set 2010-11 (NASCI001) and Advancing Quality Alliance (AQA)/ Directors of Adult Social Care (ADASS) data.
- 8.9 A “Golden Threads” section has been developed to include some service user perspectives of the Department and the way its services have developed.
- 8.10 The full detailed Self Evaluation document can be found on the Web Library.

9. Comments from the Peer Challenge

- 9.1 As noted above the Self Evaluation process includes the assessment of the evidence provided by the Department by a “Peer”. The Peer Challenger nominated by the Local Government Association for the role, was Veronica Jackson, the former Director of Adult Social Services in Oldham.
- 9.2 In addition to the Self Evaluation document Ms Jackson had access to a wide range of information including data about performance. She interviewed a range of staff, partners and carers. Ms Jackson’s report is attached at Appendix 1 and her views can be summarised:
- She feels that the self evaluation has been thorough and clear; she believes that “we know ourselves” and have identified the right priorities for the next steps.
 - She believes that enormous progress has been made during the year and that staff are to be congratulated.
 - She says that significant challenges remain and that these are largely around embedding and broadening the changes we have made.
 - Specifically in respect of safeguarding, she believes that tremendous progress has been made. There is a need for more work on data consistency, the use of Swift, the quality of protection plans and the 28-day target. She also identifies a need to build the confidence of staff and partners in using the new approaches.
 - On personalisation and choice, she thinks that our performance has really significantly improved. She identifies more work to be done to make sure that all partners understand the principles and operations of personalisation.
 - Ms Jackson thinks that, like other Local Authorities, Wirral have more work to do on commissioning. She particularly thinks that joint commissioning with the NHS needs attention.

- She recognised that the focus has needed to be inward looking - dealing with Wirral issues that needed change. She believes that the Department should now be more outward looking, engaging with national and regional developments.
- Overall, Ms Jackson thinks that performance is well away from the level needing intervention. She thinks that continued development will mean that the Peer Review in June will have a positive result. She says that given progress to date by June performance and achievements will have again significantly improved.

10. THE LOCAL ACCOUNT

- 10.1 With the abolition of the Annual Performance Assessment, the publication of a single data set for local government and the development of outcomes frameworks for adult social care and separately for the NHS and public health, ADASS believes that it is important that councils find a meaningful way of reporting back to citizens and consumers about performance. It is suggested that the publication of an annual local account is one means of achieving this.
- 10.2 Local accounts are a potentially very useful means of councils with adult social care responsibilities reporting back to citizens and consumers on performance in adult social care. Local accounts can be used to engage with citizens and consumers around priorities and outcomes. They could become a key accountability mechanism to the public and a useful way of informing self-improvement activity locally. They also are a practical expression of sector self-regulation and improvement.
- 10.3 In line with recommended best practice the Self Evaluation document has been used as a template for the Local Account which is attached at Appendix 2. In addition this document is available on the internet as part of the consultation process. Committee's views are also sought in particular regarding the four identified key priorities i.e.
- to develop commissioning
 - to involve users and carers more in commissioning
 - to develop better information so that DASS can say how well it is performing
 - to make sure that all service changes are "bedded in"

11.0 RELEVANT RISKS

11.1 No specific risks have been identified in producing this report.

12.0 OTHER OPTIONS CONSIDERED

12.1 No other options were considered in producing this report, it is briefing for committee regarding a process that has been completed

13.0 CONSULTATION

13.1 The Local Account is currently posted on the Council's internet for comments and consultation. Comments are also being sought from specific interest groups and partners

14.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

14.1 Much of the work of the Department of Adult Social Services is undertaken in partnership with the Voluntary, Community and Faith Sector. Issues that develop as a result of self evaluation process will be reflected in these partnership arrangements.

15.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

15.1 No specific resource implications have been identified in this report.

16.0 LEGAL IMPLICATIONS

16.1 None identified

17.0 EQUALITIES IMPLICATIONS

17.1 There are no identified discrimination issues; including social inclusion or human rights implications

17.2 Equality Impact Assessment (EIA)

(a) Is an EIA required? No

18.0 CARBON REDUCTION IMPLICATIONS

18.1 No implications

19.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

19.1 *Planning permission is not required*

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APPENDICES

Appendix 1	Interim Peer Challenge Report	December 2011
Appendix 2	Department of Adult Social Services Draft Local Account	December 2011

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Health and Wellbeing Overview and Scrutiny Committee - CQC Improvement Plan	8 November 2011
Cabinet - Department of Adult Social Services Self Evaluation Document	24 November 2011
Cabinet - Department of Adult Social Services Self Evaluation – Local Account	8 December 2011

Appendix 2

Department of Adult Social Services

Draft Local Account

December 2011

1 What is a Local Account?

In March 2011 the coalition government published its strategy to improve adult social care through a focus on outcomes and greater transparency. As part of this the Care Quality Commission (CQC) have withdrawn their system of annual inspection of adult social care departments. Instead, Local Authorities are expected to be responsible for their own improvement, and to identify their own needs through self evaluation.

This is to be supported by three mechanisms:

- A national Adult Social Care Outcomes Framework (ASCOF)
- The collection of a new National Data Set and
- The development, at a Local Authority level, of a Local Account.

The Local Account is intended to let residents know how well adult social care has performed, and is an opportunity for Councils to make more information available to their residents on their achievements, challenges and priorities.

The Department of Adult Social Services has recently undertaken a self evaluation of its services. This forms the basis of the draft Local Account which will be used to consult with residents, people who use services and Partners about whether the priorities identified in it are the right ones. Publishing the Local Account in draft form will provide DASS with an opportunity to learn lessons and get feedback on how it can improve this report in the future.

The Department of Health have introduced the Adult Social Care Outcomes Framework (ASCOF) to measure the performance of Adults Social Care departments, and this document is structured under the four main headings from that framework;

1. Enhancing quality of life for people with care and support needs
2. Promoting independence, delaying and reducing the need for care and support
3. Ensuring that people have a positive experience of care and support
4. Safeguarding adults who circumstances make them vulnerable and protecting them from avoidable harm

A series of bullet points under each heading outlines some of DASS key achievements from 2011 and sets out the priorities for 2012-13.

NHS Changes

The Council is working closely with the NHS to ensure that the changes taking place nationally are implemented smoothly in Wirral. It is also working with its partners on closer integration of health and social care.

The Council is an early implementer of Shadow Health and Wellbeing Board which will have an important role in bringing together the whole system, driving opportunities for the health and wellbeing of the population and promoting joint commissioning and integration in health, social care and public health.

The Health and Wellbeing Board is responsible for developing a Health and Wellbeing Strategy and it is hoped that as this Local Account develops, it will become an important component of this Strategy for the residents of Wirral.

Knowing the local area

It is important that the Council understands the local community in order to provide services tailored to the needs of residents. There are a number of ways in which this is done:

Equality & Diversity

The Council has an equality and diversity policy, which is published on the Council's website

<http://www.wirral.gov.uk/my-services/community-and-living/equality-diversity-cohesionhttp>

The policy sets out the Council's corporate commitment to promote equality and prevent discrimination.

JSNA (Joint Strategic Needs Assessment)

The Council and the Primary Care Trust are required to complete an assessment of needs through the Joint Strategic Needs Assessment (JSNA). The aim of this document is to identify where there are needs in the community so services can be designed accordingly. The full report is available online

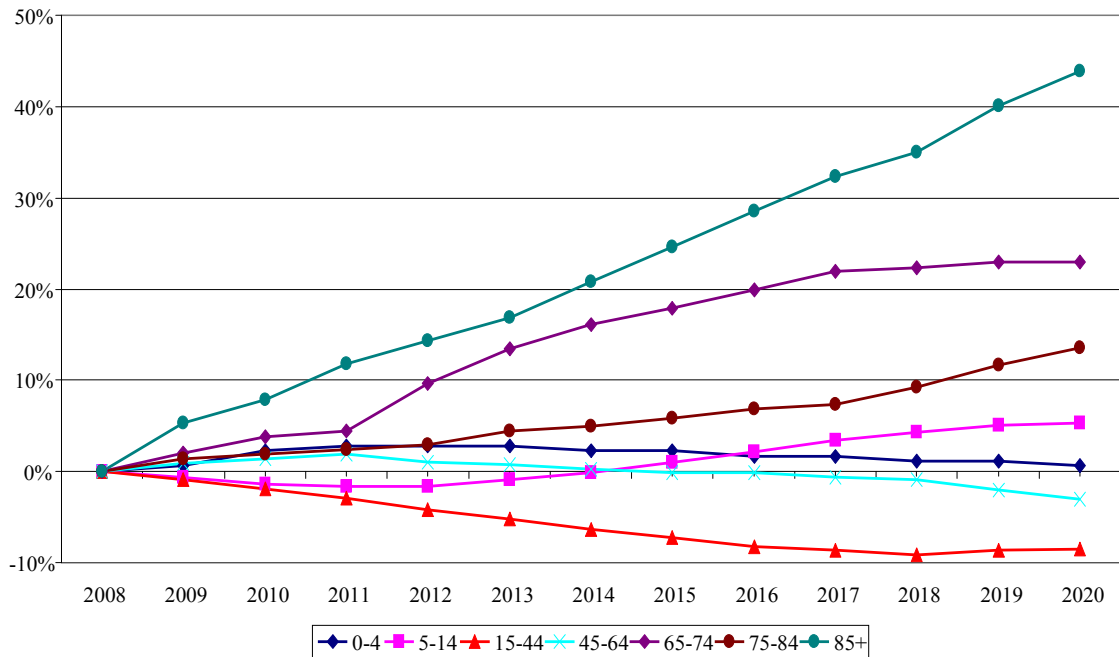
<http://www.wirral.gov.uk/my-services/council-and-democracy/local-strategic-partnership/joint-strategic-needs-assessment>

and explores a wide range of health and social care needs for both children and adults.

Challenges for the future

The 2010 JSNA highlighted one key local issues for DASS.

1. The number of older people is set to increase considerably over the next two decades. By 2031 it is estimated that 26% of the Wirral population will be aged 65 or above. This will have a considerable impact on health and social care services, as the number of older people presenting with health related problems increases. This could also have a considerable impact on the number of family carers in Wirral. Within this ageing population, there is expected to be a 123% increase in the population over 85 by 2033.



Wirral Resident Population Projections by Age Group (Persons) Mid-2008 to Mid-2033

Age Group	Population (thousands)						% Change 2008-33
	2008	2013	2018	2023	2028	2033	
0-4	18.2	18.4	18	17.7	17	16.5	-9.3
5-9	17.4	18.6	18.8	18.4	18.2	17.5	0.6
10-14	19.3	17.4	18.6	18.9	18.5	18.3	-5.2
15-19	20.6	18	16.1	17.3	17.6	17.3	-16
20-24	18.3	17	14.9	13.5	14.5	14.9	-18.6
25-29	15.6	19.2	18.3	16.3	14.9	16	2.6
30-34	14.9	15.8	19.3	18.7	16.7	15.3	2.7
35-39	20.1	15	16.2	19.6	19.2	17.2	-14.4
40-44	22.6	20.1	15.1	16.3	19.8	19.4	-14.2
45-49	22.4	22.3	19.8	14.9	16.2	19.6	-12.5
50-54	20.4	22	21.9	19.4	14.6	16	-21.6
55-59	20.5	19.6	21.3	21.2	18.9	14.2	-30.7
60-64	20	19.4	18.7	20.4	20.4	18.1	-9.5
65-69	15.6	18.7	18.2	17.7	19.3	19.4	24.4
70-74	13.7	14.2	17.2	16.9	16.5	18.2	32.8
75-79	12	11.9	12.6	15.4	15.2	15	25
80-84	8.9	9.4	9.8	10.6	13.1	13.1	47.2
85+	7.9	8.9	10.4	12	14.1	17.6	122.8
All Ages	308.4	305.9	305.2	305.2	304.7	303.6	-1.6

Source: Office for National Statistics, 2011

How much does DASS spend?

Adult social care accounts for 26% of the Council's total budget for 2011-12. The table below shows how this is shared between people with different needs.

	Gross £	Income £	Net £
Older people	58,627,800	(22,919,200)	35,708,600
People with mental health needs	10,236,700	(3,467,500)	6,769,200
People with a physical disability	13,491,000	(4,587,700)	8,903,300
People with a learning disability	31,608,200	(14,126,600)	17,481,600
Drugs & alcohol	229,900	(29,500)	200,400
Management, support, training & development	10,714,200	(10,714,200)	-
Total	124,907,800	(55,844,700)	69,063,100

The Council is required to publish full audited accounts each year, the 2010-11 accounts can be found at <http://www.wirral.gov.uk/my-services/council-and-democracy/budgets-and-spending/annual-accounts>

The Council budget for 2011-12, along with other information on the Council's budget and spending is also available at <http://www.wirral.gov.uk/my-services/council-and-democracy/budgets-and-spending/budgeting>

Who is it spent on?

Over 10,000 people, with a variety of needs, are receiving adult social care services or have received services in 2011-12. This includes services based in the community, as well as residential and nursing care.

Total number of people who received services during 2010-11 by type of service, gender and age group

	18-64		65 and over	
	Female	Male	Female	Male
Community-based services	1,392	1,411	3,566	1,722
Residential care	111	201	678	245
Nursing care	30	36	485	192
Total people	1,533	1,648	4,729	2,159

Total number of people who received services during 2010-11 by need, gender and age group

	18-64		65 and over	
	Female	Male	Female	Male
Physical Disability	577	415	3,932	1,787
Mental Health	542	628	469	235
Learning Disability	352	531	62	44
Substance Misuse	2	9	2	3
Other Vulnerable People	60	65	264	90
Total people	1,533	1,648	4,729	2,159

2 Wirral Council Local Account

2.1 Enhancing the quality of life of the people of Wirral who have care and support needs

How DASS supports people to...

- Live their own lives to the full and achieve the outcomes that matter to them by accessing and receiving self directed assessment and a personal budget
- Support each other within their own communities by building community capacity
- Receive high quality provision by improving its own and externally provided services
- Be at the centre of everything DASS does by developing a person centred culture

Performance Highlights in 2011

Achievements	Outputs/Outcomes
<ul style="list-style-type: none"> • Following approval by elected members in October 2010 the introduction of personalisation and personal budgets was brought in through a revised system of Self Directed Assessment (SDA), a generic points based Resource Allocation System (RAS), support planning and outcomes based reviews, this is now the universal offer for adults with disabilities and older people with social care needs in Wirral. This represents a major shift to a personalised outcomes based social care service underpinned by the values of choice and control. All those who are Fair Access to Care Services eligible receive the offer of a personal budget to purchase either a commissioned service or a direct payment • Developing the capacity of the community to help DASS deliver services. 	<ul style="list-style-type: none"> • The Department met the national target for NI130 (Offer of a personal budget) in March 2011. As at 21 October 2011 90% of eligible service users are undertaking self directed assessments (SDA), 59% of whom were choosing self directed support. Performance in this latter area shows slow but steady improvement and remains on trend to meet the target of 80% by March 2012. • The percentage of people receiving assessments within 24 hours has risen from 78% in April 2011 to 81% as of 21 October 2011. • The percentage of people receiving support packages within 28 days has risen from 88% in April 2011 to 93% as of 21 October 2011 <p>These include:</p> <ul style="list-style-type: none"> • Developing social enterprises in Learning Disability • Supporting the Older Peoples Parliament • Citizenship sub group of Learning Disability Partnership Board • The mental health user group

<ul style="list-style-type: none"> • A fully established co located Children's and Adults' transition team in place in learning disability services. Supporting a revised protocol developed with parent carer representatives which is now in the final stage of completion • The Department, in partnership with Wirral Methodist Homes has developed Fellowship House, a supported living scheme for seven young adults with learning disabilities • A restructure has been agreed to strengthen the Department's ability to deliver its improvement strategy including additional staff to assure quality in contracts. 	<ul style="list-style-type: none"> • The carers association • A revised transitions protocol which systematically tracks children with complex needs to ensure early support planning of adult social care support • Residents were fully involved in the design and implementation of the project, pooling their personal budgets to collectively purchase care and support • This included allocating an additional £900,000 and re-allocating £669,000 of existing resources
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Areas for Improvement in 2012

It can be seen from the above that a great deal of activity has taken place to develop Personalisation. The Department is offering real control to an increasing number of people, has significantly improved the quality of a number of its services and is developing a more systematic approach to involving service users and carers.

The major challenge over the next 12 months will be to 'embed' all of the improvements highlighted above so that they become systematic and become a natural way in which the Department works. The Department recognises that one way to achieve this is to develop its approach to strategic commissioning and to ensure that service users and carers are involved in this process from an early stage.

Key Indicators	2011 Performance	2012/13 Targets
1 a) Increase in the proportion of people with health and social care needs and carers who report an enhanced quality of life	88% of people responding to the Adult Social Care Survey reported satisfaction with their services.	90% of people responding to the 2012/13 Adult Social Care Survey report satisfaction with their services.
1 b) Increase in the proportion of people who say they have control over their daily life	75% of people responding to the Adult Social Care Survey say they feel in control.	77% of people responding to the 2012/13 Adult Social Care Survey report feeling in control.
1 c) Increase in the proportion of people receiving self directed support.	80% of all those who approach the Department for support are now self-directing their support.	90% of all those who approach the Department for support in 2012/13 are self-directing their support.

1 d) Carer reported quality of life.	82.3% of Carers responding to the Carers Survey reported 'alright' or 'better' quality of life as a result of services.	84% of Carers responding to the 2012/13 Carers Survey reported 'alright' or 'better' quality of life as a result of services.
1 e) Increase in the proportion of adults with learning disabilities in paid employment.	3.75% of those people with a learning disability known to the department are in paid employment.	7% of those people with a learning disability known to the department in 2012/13 are intended to be in paid employment.
1 f) The proportion of adults in contact with mental health services in paid employment	9% of those people with mental health issues known to the department are in paid employment.	10% of those people with mental health issues known to the department in 2012/13 are intended to be in paid employment.
1 g) Increase in the proportion of adults with learning disabilities who live in their own home or with their family	55.72% of those people with a learning disability known to the department are in settled accommodation.	65% of those people with a learning disability known to the department in 2012/13 are intended to be in settled accommodation.
1 h) Increase in the proportion of adults in contact with secondary mental health services living independently, with or without support	66% of those people with mental health issues known to the department are in settled accommodation	80% of those people with mental health issues known to the department in 2012/13 are intended to be in settled accommodation.

2.2 Delaying and reducing the need for care and support

How DASS supports people to...

- Have access to good quality information and advice
- Have the opportunity to have the best health and wellbeing throughout their life by working with partners to ensure that universal services i.e. available to all, target the needs of disadvantaged groups
- Receive early diagnosis, intervention and reablement services so that they and their carers are less dependent on intensive services
- Receive the support they need in the most appropriate setting, to enable them to regain their independence
- Receive the support they need in the most appropriate way so that their care needs are met and their personal dignity maintained

Performance Highlights in 2011

Achievements	Outputs/Outcomes
<ul style="list-style-type: none"> • The sourcing of an Information Hub. This has been developed in conjunction with 	<ul style="list-style-type: none"> • An additional £73,060 will be invested by DASS to support development of the

<p>Voluntary and Community Action Wirral.</p> <ul style="list-style-type: none"> • The Healthy Homes Initiative focuses on reducing identified hazards and supporting residents to access a wide range of services to gain the support they may need. This includes, amongst others, supporting people to improve their incomes, stop smoking, reduce risk of house fires and improve the energy efficiency and affordable warmth of their homes. Early intervention by agencies reduces the impact on other public services and improves outcomes for individuals • The POPIN service provides support to older people who do not meet FACS eligibility criteria • The Department has been a partner in the development of two new purpose built Extra Care facilities Willowbank and Mendell Court, providing a model of long term care and support allowing for independent living. Support contracts are in place to deliver personalised support including an innovative joint health and social care contract in one of these facilities which allows for the delivery of health and social tasks through one independent sector support provider 	<p>Wirral Well Website (Subject to Cabinet approval) which is an online hub for wellbeing, health and social care services</p> <ul style="list-style-type: none"> • Since 2010 the Healthy Homes initiative has completed over 500 referral forms, of which 478 referrals have resulted in interventions by partner agencies • The total number of Extra Care places now available in Wirral is 203 units across five establishments; one scheme (Cherry Tree) specifically supports 10 older people with dementia
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Areas for Improvement in 2012

It can be seen from the above that the Department is committed to an approach based on early intervention. There is some evidence that interventions at other levels, particularly around reablement are having a positive impact on service delivery and cost.

The challenges to the Department over the next twelve months are:

- a) to develop Success Criteria that show savings which result from investment in Universal Services
- b) to develop its approach to strategic commissioning.

Key Indicators	2011 Performance	2012/13 Targets
2 a) Decrease in permanent admissions to residential and nursing home care, per 1000 population	As a proportion, 2.13 of every 1,000 people are admitted into residential and nursing homes.	The proportion of people who are admitted into residential and nursing homes in 2012/13 is intended to be 1.5 per 1,000 people
2 b) Increase in the proportion of people (65) and over who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	91.77% of people discharged from hospital into reablement/rehabilitation are still at home after 91 days.	92% of people discharged from hospital into reablement/rehabilitation services in 2012/13 are still at home after 91 days.
2 c) Decrease in the number of delayed transfers of care from hospital	As a proportion, 2.9 of every 100,000 people are recorded as 'delayed discharges' from hospital.	The proportion of people who are admitted into residential and nursing homes in 2012/13 is intended to be 1.9 per 100,000 people in 2012/13.
2 d) Increase in the proportion of people who can access support and information to manage their care needs	48% of people responding to the Adult Social Care Survey reported finding it 'fairly' or 'very' easy to find information about services.	55% of people responding to the 2012/13 Adult Social Care Survey report finding it 'fairly' or 'very' easy to find information about services.
2 e) Increase in the proportion of carers who can access support and information to manage their care needs	38% of Carers responding to the Carers Survey reported finding it 'fairly' or 'very' easy to find information about services.	40% of Carers responding to the 2012/13 Carers Survey report finding it 'fairly' or 'very' easy to find information about services.

2.3 Ensuring that the people of Wirral who use services have a positive experience of care and support

How DASS supports people to...

- gain maximum satisfaction with their experience of care and support service
- have a broad range of choice in the local care and support market
- have real control over the resources used to secure care and support
- be actively involved in the design, development, delivery and review of care and support arrangements

Performance Highlights in 2011

Achievements	Outputs/Outcomes
• Family carers were directly involved in	• Budget saving: £1,610,650

agreeing the new service providers in the re-provision of supported living services for eighty service users.

- Furthermore, each individual has developed a personalised and bespoke support plan which explicitly shows what outcomes need to be achieved for each person and are clearly measurable. In addition to this there has been a group plan developed in order to ensure that all collaborative and shared services and resources were considered. From the outcomes of the individual plans, service specifications have been drawn up that clearly identify what care and support was required for each establishment; these have been developed by the individuals themselves to ensure that they are able to give very clear instructions to providers and establish clear service level agreements which will enable them to meet their outcomes, identified within the support plans
- Piloting a new approach to daytime provision for people with disabilities that will improve and transform outcomes and access to training, education and employment. This will support the development of a social enterprise hub and explore the possibility of future business models in relation to further developing a social enterprise, a community interest company or a mutual
- In the past year the Learning Disability Partnership Board (LDPB) has been transformed with new governance arrangements and business planning structure. Service users and their carers have been an integral part of this transformation, ensuring that the new structures are fit for purpose
- The “Dignity in Care” campaign with Wirral Link undertook two surveys, one relating to individuals experiences of using Health and Social Care Services, the other eliciting feedback on specific services

- Supported Living - people now living where they want with a provider of their choice.

- A business planning day with over 30 delegates from across the Council, NHS Wirral, other partners such as Methodist Housing and services users and carers took place on 10 October 2011

- 79% people thought they had been treated with Dignity and respect on the individual survey. Overwhelmingly positive response to service specific survey

<ul style="list-style-type: none"> • A feedback mechanism has been introduced to enable parents and carers to inform staff at Girtrell Court and Sylvandale of their experiences of the service. • Office of National Statistics data shows that there are approximately 30,000 carers in Wirral, of whom 2,500 are known to the Department 	<ul style="list-style-type: none"> • The feedback form has enabled the Department to make changes to various systems, processes and working practices to improve the customer experience. • 66.9% of those who completed the Carers Survey and received services thought that this had made things easier for them. Also, 61.9% of those who received a service were fairly, very or extremely satisfied with their service.
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Areas for Improvement in 2012

It can be seen from the above that a great deal of activity has taken place to ensure that people have a positive experience of care and support. The Department has significantly improved the quality of a number of its services and is developing a more systematic approach to involving service users and carers.

The challenges over the next twelve months are:

a) to further develop practice in relation to co-production to ensure that users and carers are systematically involved in the strategic commissioning of services.

b) to develop a more systematic approach to gathering service user and carer feedback with regard to a number of issues, including satisfaction measures.

c) to develop the ability to use this information to inform commissioning decisions

d) further develop the advice and information available to people who use services and their carers

Key Indicators	2011 Performance	2012/13 Targets
3 a) Increase in the number of people who use social care and their carers who are satisfied with their experience of care and support services	91% of people responding to the Adult Social Care Survey reported being 'quite', 'extremely' or 'very' satisfied with their services.	93% of people responding to the 2012/13 Adult Social Care Survey report being 'quite', 'extremely' or 'very' satisfied with their services.
3 b) Increase in the overall number of carers satisfied with	56% of carers responding to the Carers Survey reported being	58% % of carers responding to the 2012/13 Carers Survey

<p>social services</p> <p>3 c) Increase in the proportion of carers who report they have been included or consulted in discussions about the person they care for</p> <p>3 d) Increase in the proportion of people who use services who find it easy to find information about support</p> <p>3 e) All young adults who have a FACS eligible need will have a transitional plan in place 3 months before moving into Adult Social Care Services.</p> <p>3 f) Determine the proportion of people who report they have been appropriately included and consulted in arranging their care.</p>	<p>'fairly', 'very' or 'extremely' satisfied with social services.</p> <p>51.5% of carers responding to the Carers Survey reported being included or consulted in discussions.</p> <p>37.9% of people responding to the Adult Social Care Survey say they find it easy to find information.</p> <p>No existing target/benchmarking is available.</p> <p>No existing target/benchmarking is available.</p>	<p>report being 'fairly', 'very' or 'extremely' satisfied with social services</p> <p>55% of carers responding to the 2012/13 Carers Survey report being included or consulted in discussions</p> <p>50% of people responding to the 2012/13 Adult Social Care Survey find it very or fairly easy to find information</p> <p>100% of transition plans are in place during 2012/13.</p> <p>55% of people responding to the 2012/13 Adult Social Care Survey report being included in arranging their care.</p>
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2.4 Safeguarding people in Wirral whose circumstances make them vulnerable and protecting them from avoidable harm

How DASS supports people to...

- Enjoy physical safety and feel secure
- Be free from physical and emotional abuse, harassment, neglect and harm,
- Be protected as far as possible from avoidable harm, disease and risk
- Be supported to plan ahead and have the freedom to manage risks in the way they wish

Performance Highlights in 2011

Achievements	Outputs/Outcomes
<p>A systematic review has taken place of policy, procedure and practice within DASS and across the Safeguarding Adults Partnership Board (SAPB) to ensure it is able to meet its statutory and lead responsibilities. Within this the following achievements have been made:</p> <ul style="list-style-type: none"> • Reviewed, revised and launched the 	<ul style="list-style-type: none"> • New interagency procedures launched

<p>inter-agency safeguarding procedures – ratified by the SAPB</p> <ul style="list-style-type: none"> • Reviewed the membership and seniority of membership of the SAPB and capacity of sub-committees with refreshed Terms of Reference • Developed and agreed an annual report and business plan for the SAPB detailing key priorities for the year • Board members have agreed a self-assessment framework against national standards-final report due for completion January 2012 • Developed performance reports which track trends and will be available from November 2011 • An independent chair for the SAPB was appointed and new arrangements have been made for the Local Safeguarding Children’s Board (LSCB) chair to also chair the SAPB • The strengthening of safeguarding management within the Department • DASS have a dedicated lead Head of Branch (HoB) for safeguarding within the strategic leadership team to focus on this priority area • Creation of a post of service manager, safeguarding, 3 new safeguarding officers, safeguarding contracts officer, a team support officer and Advanced Practitioners, Safeguarding • Improving practice by locating a safeguarding social worker in the Central Advice and Duty Team (CADT) 	<p>August 2011</p> <ul style="list-style-type: none"> • Revised and improved safeguarding procedures embedded within DASS from May 2010 and revised further in July 2011 • Attendance now consistent and at the right level. Monitored by the SAPB Executive • Annual Report and Business Plan • Self Assessment Framework (consultation stage) • Weekly, operational and Board reports. • Activity Data from 12 September (inception) to 7 October shows that approximately 50% of safeguarding contacts were dealt with by the social worker in CADT and did not need further safeguarding input.
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- Refreshed the multi-agency training plan and enhanced training for front line managers who chair Safeguarding Conferences

Areas for Improvement in 2012

It can be seen from the above evaluation that a great deal of activity has taken place to develop the SAPB, invest in additional staffing resource and put in place effective policies and procedures, underpinned with training and staff development.

The major challenge over the next 12 months will be to establish the Performance Management Framework that will enable the partnership and the Department to know whether all these changes have been effective and whether the outcomes, which the Partnership has identified as “Success Criteria”, are being achieved.

In addition work is necessary to ensure greater clarity within the Partnership of respective roles and responsibilities, particularly in the context of NHS changes. DASS will also need to address this within the context of the new Departmental structure.

Training will need to be evaluated to ensure that it consistently delivers quality across agencies and embeds the culture of safeguarding in practice.

Key Indicators	2011 Performance	2012/13 Targets
4 a) Increase in the proportion of people who use services who feel safe.	No existing target/benchmarking is available.	75% of people responding to the 2012/13 Adult Social Care Survey report they feel safe.
4 b) Increase in the proportion of people who use services who say that those services have made them feel safe and secure.	91% of people responding to the 2012/13 Adult Social Care Survey say their services make them feel safe and secure.	93% of people responding to the 2012/13 Adult Social Care Survey report their services make them feel safe and secure.
4 c) Increase in the number of safeguarding alerts dealt with in 24 hours	80% of all safeguarding alerts are dealt with in 24 hours.	100% of Safeguarding Alerts reported in 2012/13 are completed within 24 Hours.
4 d) Increase in the number of safeguarding referrals dealt with in 28 days	66.31% of all safeguarding referrals are dealt with in 28 days or fewer.	80% of Safeguarding Referrals in 2012/13 are completed within 28 Days.

3. Local Account Survey

1. This Local Account contains four outcomes which Wirral Department of Adult Social Services (DASS) wishes to achieve for people.

a) Are these the right outcomes?

YES/NO

b) Are there any other outcomes DASS should consider?

2. This Local Account contains the following priorities:

- i. to develop commissioning**
- ii. to involve users and carers more in commissioning**
- iii. to develop better information so that DASS can say how well it is performing**
- iv. to make sure that all service changes are “bedded in”**

a) Are these the right priorities?

YES/NO

b) Are there any others DASS should consider?

3. This Local Account contains a number of performance measures to provide clarity about whether DASS is making progress towards achieving its outcomes.

a) Are they the right measures?

YES/NO

b) Are there any others DASS should consider?

4. Is there anything else you would like to tell us about this Local Account?