WIRRAL METROPOLITAN BOROUGH COUNCIL

Interim Peer Challenge Report

Dec 2011

Peer Challenger: V A Jackson

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1.General Comments

    1.1. DASS has evaluated its performance, achievements and challenges in the self evaluation of November 2011, the local account of 8/12/11 and SLT extraordinary report of 28/11/11. This is to assess progress made since the CQC inspection report of September 2010 and the 2009/10 CQC assessment of performance report. Howard Cooper, interim DASS describes the improved performance as a 'leap' and he and his staff are to be congratulated for the progress made which is significant. Given the depth of the challenge there are still areas to be improved, to move from adequate to performing well and from poor to at least adequate.

    1.2. I have identified these challenges within the areas of safeguarding, choice, commissioning, resource management and outward focus.

    1.3. I identified the issues to be addressed from the CQC inspection report of Sept 2010 in the attached report. A response was received on 14th Dec 2011.

    1.4. Given the progress made in 2011 I would be confident that by the time of the peer review in June 2012 that performance and achievements will have again significantly improved.

2.Safeguarding

    2.1 Performance management:
    The council has focussed considerable resources into Safeguarding since the CQC inspection report of September 2010. The move to Adult from Children's Services of Howard Cooper and Caroline McKenna is a reflection of the commitment to improve Safeguarding in the Borough. This has led to the improvements as summarised in the Local Account, with which I concur. The department recognises that there are still issues to be addressed in the Account in respect of data quality and analysis but I would add the following:

    2.2 Challenges:
      (i) Staff understanding about performance management and their commitment to improving their performance needs embedding.
      (ii) The consistency about social workers inputting into SWIFT needs to be targeted.
      (iii) Information on protection plans quality about alerts and triggers not available needs to be available.
      (iv) Information on why not meeting 28 day target needs to be available.
      (v) Usage and benchmarking of AVA needs further development and usage.
      (vi) Underperformance in all areas needs to be identified and challenged.
      (vii) To improve usage of available resources for training e.g. using lessons learnt from Serious Case Reviews and the work of ADASS.

    2.3 Members, Staff and Public Engagement and Understanding:
    Members have received training about 'safeguarding' but this was before the last election and therefore there needs to be a further training programme put in place. The level of understanding of 'safeguarding' amongst members is varied as is their knowledge of 'safeguarding practice and outcomes in the borough. The staff in adults services have received training in safeguarding but there is still a need for

confidence building about their skills in this area and there also needs to be further training about safeguarding across the wider council staff groups and its partners.

There was a publicity campaign for the general public but there was no analysis if it resulted in improved awareness by the public of how to raise concerns and what constitutes familial abuse.

2.4 Challenges:
  (i) To put in place a training programme for members in 2012 and evaluate its impact on members' understanding of how to assess current service delivery and what needs to be improved.
  (ii) To use overview and scrutiny as a mechanism for challenging safeguarding performance.
  (iii) To develop the understanding of safeguarding for all staff, partners and citizens in the borough and the processes in place for raising concerns.
  (iv) To build up the confidence of DASS staff about their safeguarding skills and knowledge and the consequent impact on improved outcomes for citizens.
  (v) To demonstrate that citizen's lives are improved through safeguarding, that they feel safe and that their circumstances have improved.

2.5 The Safeguarding Adults Partnership Board:
  The Safeguarding Board has been transformed over the last twelve months and there has been much transferred learning over this period from children's services. The new Chair is also the Chair of the Children's Board and this is a significant step forward for the Board in ensuring consistency and shared learning across children's and adults services. The challenges that have been identified in the Local Account I would concur with. I would add the following:

2.6 Challenges:
  (i) Ensure members are aware of the work of the Board and that it uses Overview and Scrutiny and Cabinet to scrutinise and confirm the Wirral's commitment to the Safeguarding Adults Partnership Board annual report and business plan.
  (ii) To ensure that partners also get commitment to the SAPB annual report and business plan within their own organisations.
  (iii) To regularly report to Overview and Scrutiny and Cabinet and to partner organisations about progress in meeting the targets of the SAPB business plan.
  (iv) To communicate to citizens the responses to the police and criminal justice sectors' response to safeguarding, e.g. Hate crime rate.

3.Choice
  The council has significantly improved its performance in personalisation in the last year as summarised in the Local Account. Again I would concur with the challenges also identified in it. I would add the following:

3.1 Challenges:
  (i) To align the safeguarding policies and procedures with those of personalisation so there is clarity about the balance between the right of the individual to control his or her care package and ensuring adequate protections are in place to safeguard well being.
  (ii) To develop the understanding of personalisation by partners and ensure it is part of the commissioning strategies of the clinical commissioning consortium/PCT.

(iii)To ensure members and all council staff understand personalisation and its impact on the transformation of service delivery and how to utilise it across all council services.

(iv) To develop provision of services by the voluntary, community and faith sector based on the JSNA and gaps in services identified by users and carers.

(v)To challenge gaps in performance - NI 136 has improved but admissions to residential homes has not.

4.Commissioning and Resource Management

The commissioning of services by the Council is rapidly changing because of local, regional and national policy drivers. The major drivers are personalisation the NHS changes and budget reductions. The PCT and the council have worked closely together over the last twelve months to become commissioning rather than provider organisations. DASS has also formed alliances with the CCC's. The challenge to the DASS is to develop its approach to strategic commissioning and use its resources efficiently and effectively to support it.

4.1 Challenges:

(i) To update the JSNA and use it to effectively predict what services need to be commissioned for the next 5 to 10 years.

(ii) To align commissioning and budget strategies so that partners have confidence in the financial planning of the council.

(iii) To agree with the CCC's/PCT a joint commissioning and financial strategy.

(iv)To build safeguarding and personalisation into commissioning strategies.

(v) To reflect in the strategies the views of citizens as to what and how services are delivered and to publicise this, e.g. "you said, we did".

(vi)To evaluate the impact on services on outcomes for users and carers.

(vii)To deliver the £5m gap in the budget by 31/3/12.

5. Outward Focus

5.1 It is understandable given the need to improve service delivery that the council has had an internal focus. However, this has meant that opportunities are missed to improve practice and services through the work of other organisations.

5.2 Challenge:

To utilise the resources available to improve practice and services through networking and using the resources available from external organisations, e.g. NW Performance leads, ADASS and LGA.

CQC Inspection Report
Wirral Metropolitan Borough Council
Report Sept 2010

Issues from the 2010 Inspection Report that need further information and evidence in the Self Evaluation Document.

Page Ref	Issue raised by CQC	Gap
Pg 9	The Audit Commission rated the council as performing adequately overall in 2009. It awarded a 'red flag' for its performance in safeguarding adults. Concerns were raised about poor performance in the completion of investigations, levels of staff and member training and data quality	Data quality and confidence data does not appear to be sufficiently addressed in the Plan.
pg 10	The council and its partners had limited awareness of the extent to which people with a learning disability experienced hate crime. There was some protection work with adults with a learning disability including travel training and dealing with bullying. This required expansion to ensure incidences of poor treatment were routinely reported, with improved levels of support provided to people. There was a need to improve understanding of the level of discrimination and harassment experienced by older people. The council had strengthened links between safeguarding adults, domestic abuse and HATE crime. There was work in progress to widen multi-agency working to include all aspects of hate crime. Targets to reduce level of domestic abuse were being met. There was a clear focus on increasing reporting levels. Local area forums needed to improve their focus on identifying and reporting safeguarding issues	No specific reference found
Pg 10	The council had been assessed as 'achieving' against the new local government equality standard. This work was led by the Director of Adult Social Services. Staff received training in recognising equality and diversity issues in their work. The council's equality and cohesion team regularly received telephone calls from people with a disability, mental health issue or who had been a victim of homophobic or race hate crime. The council needed to ensure such incidents proactively informed its work to protect people in their local communities.	Council's approach to equality needs further reference to disability.
Pg 11	Accountabilities between key agencies were unclear in a number of cases.	

Page Ref	Issue raised by CQC	Gap
Pg 12	A high proportion (79 per cent) of all safeguarding referrals had been assessed as requiring no further action. There was a need to get a better understanding of the reasons for this and of the effectiveness of the initial response.	Data quality and analysis of data needs to be reviewed in this area. Under performance needs to be challenged.
Pg 13	We found some examples of poor practice in identifying and managing risk as people moved between different settings including their own homes, hospital and care homes.	No explicit action found in plan
Pg 13	There was work required to roll this out to other relevant partners and ensure use of personal and confidential information was secured by clear information-sharing protocols.	Evidence of data sharing arrangements required
Pg 13	Some people reported a lack of flexibility in their access to domiciliary, day care	Examples of market management events to increase choice and flexibilities
Pg 14	The council and its partners needed to undertake a comprehensive analysis of areas of risk and ensure such incidences were effectively addressed and reduced. A new post of safeguarding (contracts) had been established. This was helping to improve understanding of trends and of the quality and performance of specific providers.	Evidence of sharing information and analysis between teams and partners. What had this post achieved?
Pg 15	not easy for some people to participate in community-based activities.	Evidence required of Council influencing wider community activities to ensure greater participation.
Pg 16	The development of social enterprises and user-led organisations was encouraged.	Evidence required of approach to localism, "Big society" and reducing demand on the Council
Pg 17	O*ptions for Change',* on the future of its directly provided services.	How have the new arrangements for adult social care and the improvement plan been fed back to service users and carers. How have people been empowered to manage their own care?
Pg 18	The team did not keep data about the people it had signposted onto external agencies.	Do the team record or have any idea of the effect of signposting?
Pg 19	However, some people told us of ongoing difficulties in getting in touch with their social worker, changes of social workers and lack of effective relationships.	HR data on sickness, turn over, use of agency etc. What is the picture now?

Page Ref	Issue raised by CQC	Gap
Pg 20	The lack of robust practice in these areas required urgent review. Some staff did not have the required levels of knowledge or training for their roles. We found examples of low expectations by caseworkers. This included views that assistive technology was not appropriate due to lack of rehabilitation potential, or college courses being too difficult for the person to understand. There was a lack of creativity in addressing barriers to access. Some case workers did not adequately involve people, their families and independent advocates in these important decisions.	Under performance management. Induction
Pg 22	The quality and outcomes of reviews was an area for urgent attention. There were a relatively high number of unscheduled reviews.	Data on reviews is still showing poor performance. Are they being done, but a recording issue, why is this still a concern.
Pg 23	Councillors and senior managers	Member engagement, involvement of overview and scrutiny, further evidence. Wider Council commitment to the adult social care agenda, more evidence.
Pg 27	Local market management	Examples of where local providers have be informed about the personalisation agenda and being encourage to tailor their services differently