WIRRAL COUNCIL

HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

10 SEPTEMBER 2012

SUBJECT:	*ADULT SOCIAL SERVICES – SAFEGUARDING PEER CHALLENGE AND ADULT SOCIAL CARE PEER REVIEW*
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 members of the Safeguarding Peer Challenge that was undertaken in May 2012 and the Peer Review conducted in June 2012 on wider aspects of Adult Social Care.

1.2 Wirral's Department of Adult Social Services (DASS) requested a Peer Challenge to ascertain progress in safeguarding adults since the Care Quality Commission (CQC) inspection in May 2010 found its performance in relation to safeguarding to be poor with uncertain capacity for improvement. A further Peer Review of adult social care took place in June 2012 which considered the wider work of DASS and its partners.

1.3 The Safeguarding Peer Challenge and wider Peer Review were conducted by the Local Government Association (LGA) with support and involvement from Association of Directors of Adults Social Services (ADASS). This report seeks to inform on key areas highlighted within each of the reports. Both reports will be available on the Council's internet site.

2.0 BACKGROUND AND KEY ISSUES

2.1 The Care Quality Commission announced in 2010 that it would cease the quality ratings system and inspections that it had previously undertaken. As a result of this DASS were left in a position of being classed as "adequate" without a process to move forward. This "limbo" has been addressed by the Local Government Association overseeing a process of Peer Reviews, which, if sufficient evidence is produced, can result in "adequate councils" moving out of that position.

2.2 DASS, therefore, began work on key improvements by seconding a number of senior managers into the leadership team to make the required changes. In November 2011 the Director requested the LGA to conduct an evaluation of progress against safeguarding, choice (personalisation) and quality. This was evaluated in December 2011 by a Peer Challenger who recommended that a separate Safeguarding Peer Review should be conducted to form the basis of a wider Peer Review to be conducted on other aspects of adult social care early in 2012.

2.3   In summary the Peer Challenger stated

'the Council has focused considerable resources into safeguarding since the CQC inspection …..This had 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'.

3.0 MATTERS ARISING FROM THE SAFEGUARDING PEER CHALLENGE

3.1   The Safeguarding Peer Challenge was carried out from 14 May 2012 to 17 May 2012. Terms of reference were agreed and services were measured against Safeguarding Standards developed by LGA and endorsed by ADASS. The themes of these standards are:

- Outcomes for and experiences of people who use services
- Leadership, strategy and commissioning
- Service delivery/effective practice/performance and resource management
- Working together – the Safeguarding Adults Board

3.2   The methodology used for the Safeguarding Peer Challenge involved:
- Reading documents and files and a self assessment
- Three days on site, discussions with 50 people
- Reviewed 10 files
- Observed a social work practice meeting
- Held follow up discussion with a family
- Held a workshop for 20 staff across the Department

3.3   The Findings and Recommendations (appendix 1)

The Executive Summary of the report states:

' it is evident that a lot of work has gone on in the department to improve the situation since the Care Quality Commission's report of 2010 judged services to be poor and with uncertain capacity to improve'.

This included a view that the Safeguarding Adults Board had a good annual report/business plan and had put in place policies and procedures, structure and clear accountabilities. This was used as an example of good practice and has been placed on the IDEA website (Local Government Improvement and Development). It was however, at an early stage of development and recognised what needs to be done in adult safeguarding work and putting plans in place. An Action Plan will be presented to the Safeguarding Adult Partnership Board on 26 September 2010 to consider how the partnership will respond specifically to the issues of action and development. This draft Action Plan is attached in appendix 2; any significant feedback will be verbally report to committee

3.4 In terms of Council wider issues the Peer Challenge considered that the appointment of the new permanent Director and changes in the senior management team have had a positive impact in terms of the ability of the DASS leadership to set a clear agenda for safeguarding adults. Broadening the approach that 'safeguarding is everybody's business', in terms of a more corporate approach, requires attention through more cross-departmental work on areas such as workforce strategy, corporate management competencies and development programme in safeguarding. There was self-awareness, and openness to external challenges. The front door services at Central Advice and Duty Team was brining consistency but there needs to be less hand-offs later in the system when the cases transfer.

3.5 In addition the report considered that a programme was required for Members which sets out the training and development work plan in adult safeguarding work as well as developing the interface between the Health and Wellbeing Board and Community Safety Partnership. The Head of Safeguarding is working with Members services training group to develop the programme for the next 12 months.

4.0 MATTERS ARISING FROM ADULT SOCIAL CARE PEER REVIEW

4.1 The basis for this review was the "Adult Social Care Key Questions" which are designed to reflect a range of guidance, tools and other materials produced by national and local government, the NHS, police and justice system in the last two years. The headline themes being:
1. Vision, Strategy and Leadership
2. Commissioning
3. How well are outcomes for people who use services being achieved?
4. Participation
5. Working Together
6. Resource and Workforce Management
7. Service Delivery and Effective Practice
8. Productivity and Innovation

4.2 In addition the peer review team was asked to consider the degree to which the department has an "Outward Focus" in particular around its use of the Adult Social Care Outcomes Framework (ASCOF), influence of Think Local, Act Personal (TLAP) and the use of the Safeguarding Adults Framework on policy, practice and performance management culture. However, as a comprehensive Adult Safeguarding peer challenge was carried out during May 2012, the peer review team's consideration of adult safeguarding was not extensive but took into consideration the findings and progress of that challenge.

4.3 In addition to the desktop exercise of reviewing evidence submitted by the department, the programme for the on-site phase included activities designed to enable members of the team to meet and talk to a range of internal and external stakeholders. These activities included:
• interviews and discussions with councillors, officers and partners
• focus groups with managers, practitioners, frontline staff and people using services / carers
• reading documents provided by the council, including a self-assessment of progress, strengths and areas for improvement against the Adult Social Care Key Questions
• An audit of a small number of client records selected by the DASS

4.4   The Executive Summary of the report states

'The peer review team found clear evidence of improvement and a change of culture within the department to one which is more open and transparent. Challenges remain but on evidence throughout the week the peer team are confident that the DASS has demonstrated significant improvement.

4.5   The Recommendations of the Review are at Appendix 3; it is proposed to address these as part of the overall business and improvement planning processes within the department. These will be monitored regularly through the "Programme Management" approach that is being implemented within the Department and where appropriate further reports will be brought forward.

5.   NEXT STEPS

5.1   The key objectives of engaging with the robust process of peer challenge and peer review was twofold:
    i)   To have the work of the department externally validated
    ii)   To be able to present this external assessment to the Towards Excellence in Adults Social Care Board to show evidence that the Department should no longer be classed as "adequate".

5.2   Throughout the process the Department has been supported by a Peer Challenger nominated by the Local Government Association for the role: was Veronica Jackson, the former Director of Adult Social Services in Oldham. It is proposed that a joint report will be produced by the Director of Adult Social Services and Ms Jackson, to be presented to the Towards Excellence in Adult Social Care Board in the Autumn 2012. It is anticipated that at the stage the Board will agree that the Department should no longer be classed as adequate.

6.0 RELEVANT RISKS

6.1 This report details the findings of a number of external reviews of social care in Wirral. Those reviews have identified a number of recommendations which will, in turn, be reflected in the improvement plans of the department. As these recommendations are developed it will be appropriate to consider, in detail, the potential risks of implementing the actions.

7.0 OTHER OPTIONS CONSIDERED

7.1 The process of peer challenge and peer review are nationally recognised and agreed processes for validating the work of an organisation. The Council has embraced this process and this was the only option considered

8.0 CONSULTATION

8.1 The SAPB considered the Safeguarding Peer Challenge Action Plan on 3 September 2012; any relevant comments will be reported verbally to committee.

8.2 As part of the business and improvement planning process, any actions that stem from the recommendations of the peer challenge and review process will be subject to relevant consultation where appropriate.

9.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

9.1 The Voluntary, Community and Faith sector are represented on the SAPB and will contribute to the development of the attached Action Plan.

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

10.1 Resources had been made available through DASS and SAPB budgets.

11.0 LEGAL IMPLICATIONS

11.1 None arise as a result of this report.

12.0 EQUALITIES IMPLICATIONS

12.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

No because this report is based on work carried out by an external organisation; the implementation of the recommendations from this work will be subject to equality impact assessments.

13.0 CARBON REDUCTION IMPLICATIONS

13.1 None identified.

14.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

14.1 None identified.

15.0 RECOMMENDATION/S

15.1 That Members;
   i) note the progress made in safeguarding and the outcome of the peer review of adult social care
   ii) agree the actions proposed for Member service training programme
   iii) agree to receive a further report regarding the outcome of the presentation to the Towards Excellence in Adult Social Care Board

16.0 REASON/S FOR RECOMMENDATION/S

16.1 Significant work has been undertaken within the Council with regards improvements in Adult Social Care services following the report of the CQC in May 2010 when the Council was judged Adequate. In seeking to demonstrate that improvements have been made the peer challenge and review process of external validation have been extensively applied. It is appropriate to keep members informed of this process, the resulting actions and next steps

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APPENDICES

1. Recommendations of the Adults Safeguarding Peer Challenge - Wirral Borough Council. May 2012.
2. Action Plan for Safeguarding Peer Challenge – September 2012
3. Recommendations of the Adult Social Care Peer Review - Wirral Metropolitan Borough Council June 2012

REFERENCE MATERIAL

N/A

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Cabinet – Adult Social Services – Peer Challenge Process	19 July 2012
Cabinet - Department of Adult Social Services Self Evaluation Document	24 November 2011
Health and Wellbeing Overview and Scrutiny Committee - Self Evaluation / Peer Challenge	19 January 2012

Recommendations of the Safeguarding Peer Challenge, May 2012

1. Outcomes and People's experience of safeguarding
1.1 Develop the mechanisms to build in an outcomes focus and to measure the outcomes that are achieved through safeguarding.
1.2 Build in the mechanisms to ensure that people who are being safeguarded (or their advocates, representatives or best interest assessors if they lack capacity) are involved at every stage of and can influence the process.
1.3 Develop a range of person centred responses and plans to help people towards justice, resolution, restitution or protection.
1.4 Develop more sophisticated models of working that have middle ground and flexibility between "professionals making people safe" or assessments that "there's nothing we can do because someone has capacity to make unwise decisions".

2. Leadership, Strategy and Commissioning
2.1 Take a corporate approach to safeguarding adults as a council, including cross departmental work and community capacity building to safeguard citizens.
2.2 Develop further the interfaces between Boards and Partnerships (the Safeguarding Adults Partnership Board, Health and Wellbeing Board, Community Safety Partnership Board and the Safeguarding Children Board).
2.3 Develop a distinct adult's focus to safeguarding, building on the 'discipline' that has been introduced through the interfaces with children's safeguarding.
2.4 Align safeguarding and personalisation at all levels.
2.5 Challenge each other more to improve: analyse the data you have to understand what is going on and how to improve.
2.6 Improve commissioning for quality and safety at the right price.
2.7 Apply a wider range of preventative practices and approaches to safeguarding to effect a move away from reactive safeguarding.
2.8 Develop a corporate communication strategy to manage press interest and a better message to residents.

3. Service Delivery and effective practice
3.1 Refine the CADT (Assessment and Duty Team) front-end process in a number of areas including clearer processes to weigh up the risks and benefits of different options with people who are in contact with the council
3.2 Consider future models of social care pathways to ensure you make the best use of professional skills and reduce handovers for people. CADT is bringing consistency at the front end, but the cost of this is handoffs between teams, which are not personal and have their own risks.
3.3 Ensure consistent feedback to referrers.
3.4 Ensure that any movement of people to a place of safety is based on consent or relevant legal process.

3.5 Improve clarity on safeguarding roles and responsibilities and how they interface with DASS for key health partners such as the hospital and mental health trust.
3.6 Utilise better the resources and approaches within community safety, particularly for domestic abuse, to support social workers when dealing with complex safeguarding cases.
3.7 Develop the wider care management process to support the prevention of safeguarding concerns, in particular the reviewing system.
3.8 Consider how the recording framework for safeguarding can be revised to allow social workers to analyse and record assessment of risk and decision making with people.
3.9 Develop the social work role in safeguarding beyond responding to immediate safety concerns, including in the following areas: • Use person centred protection planning to define the support available from the beginning of an intervention, and regularly review and update it over the longer term. • Develop practice so that social workers feel confident in considering and using a range of social work responses to deal with safeguarding concerns. • Develop the understanding and use of legal options so that social workers can use a range of appropriate and proportionate responses. • Continue the work on implementing the Mental Capacity Act, and develop practice that includes understanding of the impact of coercion and undue influence for people with capacity. • Develop the understanding of risk management and risk enablement to support decision making.

4. Performance and resource management
4.1 Put in place an outcomes framework to evaluate effectiveness
4.2 Develop a comprehensive workforce development strategy to plan for the future.
4.3 Improve the timeliness of HR responses.
4.4 Improve the analysis and use of management information, including feedback from people using services and carers, to inform improvements in care pathways and the safeguarding process.

5. Working together – Safeguarding Adults Board
5.1 Support the independent chair to lead the Board to become more challenging with more discussion and conclusions.
5.2 Support the Board to develop so that it knows what difference it is making on aggregated outcomes and how it is working pro-actively and reactively in safeguarding.
5.3 Review the engagement of the police and criminal justice system in the board, and the outcomes for people in terms of access to justice.
5.4 Continue to seek multi-agency funding commitment to the work of the Board.
5.5 The Board should find a means of regularly sharing learning from here and elsewhere – serious case reviews, legal judgements and so on.

5.6 Some partners need support and to be held accountable for their contribution.
5.7 Some plans appear to have been rushed and need more ownership
5.8 Take the opportunity for some critical bi or tri lateral developments (e.g. joint processes between DASS and domestic violence, between DASS, Community Safety and the Housing Partnership)
5.9 Develop mechanisms to bring together data and intelligence on quality from safeguarding, contracts management, care management reviews, LINks, (and Health Watch in the future) the regulator, whistleblowing, complaints, feedback from people using services and others to as far as possible ensure that services have basic standards in place that safeguard people's rights and dignity. The Board should consider also doing this for NHS services and police responses, and perhaps at a later date in relation to police custody and prisons.

Safeguarding Adults Partnership Board - Draft Improvement Plan

Area 1	What was found		Recommendations	Action	Lead
1) Outcomes for and people's experiences of safeguarding	**STRENGTHS:** • There is some sense that a more personalised approach is starting • There were a couple of examples of good outcomes in individual cases • There are some general forums for engagement with citizens that have been used to highlight safeguarding (such as the Older People's Parliament, carers etc)	**AREAS FOR CONSIDERATION:** • Need to ensure outcomes for people are improved • people's experiences of safeguarding it's not built in to process and systems. • CADT is bringing consistency at the front end but the cost of this is handoffs which are not personal and have their own risks • develop a range of person centred responses and plans to help people towards justice, resolution, restitution or protection	Develop mechanisms and ways of measuring outcomes at all levels of safeguarding Ensure that the mechanisms include the views and wishes of service users that demonstrate their involvement and influence. Develop a range of person centred responses to help people towards justice, resolution, restitution and protection	SAPB sub-committee reviewing models for development As above Advanced Practitioner and Team Manager Group (DASS)	

		• opportunity to develop more sophisticated models of working	Develop the social work practice beyond immediate protection	Review practice training for social workers and include diverse models of practice in safeguarding	

Area 2	What was found		Recommendations	Action	Lead
2) Leadership, strategy and commissioning	**STRENGTHS – leading to better outcomes and services:** • setting clear agenda by Management Team • Links with most health partners strong • Self awareness and self assessment • More robust role taken by Local Authority • Developing a robust approach to monitoring of services and contracts • Monitoring and quality assurance becoming preventative and proactive	**AREAS FOR CONSIDERATION:** • Council needs to take a corporate approach to safeguarding adults including cross departmental work and community capacity building to safeguard citizens • The interfaces between Boards and Partnerships SAPB, HWB, CSPB, LSCB etc need to be developed further • The children's 'discipline' has been helpful but now can develop a unique adults' focus • Need to align safeguarding and personalisation at all levels	Develop a corporate strategy for safeguarding and have in place a written policy across CSP, LA , SAPB/LSCB and Health and Well-Being Board DCS/DASS and Heads of Safeguarding with respective chairs of partnerships to develop a communication strategy for connecting the work of safeguarding across the authority Review current Personalisation processes with safeguarding which includes a review of practice and procedure.	Chief Officers and ensure that there is a written strategy in place with robust Governance arrangements through to the Health and Well-Being Board DASS/DCS to set up meeting with relevant senior officers to develop a work-plan. Head of Service in DASS for Personalisation to lead a review of service provision	

			• Challenge each other more to improve, analyse to understand what you have and how to improve	Ensure that Chairs of Partnerships can demonstrate challenge across and the effect on outcomes	Each Partnership and Board to review method of challenge and whether it is sufficient
			• Improve commissioning for quality and safety at the right price	Head of Care Governance-DASS to review the current commissioning and contracts	
			• Communication strategy to manage hostile press and manage a better message to residents – corporate role in this	Develop a corporate communication strategy for safeguarding adults at risk	SAPB to complete a media management protocol with Press and Public Relations

Area 3	What was found		Recommendation	Action	Lead
3) Service Delivery effective practice	**STRENGTHS:** • The CADT front end process has produced clarity and understanding on thresholds • There is good legal advice and support available, and understanding of the Mental Capacity Act • The multi agency response to safeguarding concerns has improved. • There is increased confidence among the social work teams how to respond to a presenting safeguarding concern	**AREAS FOR CONSIDERATION 1:** • The CADT front end process could be refined • Improved clarity on safeguarding roles and responsibilities and how they interface with DASS for key health partners such as the hospital and mental health trust • The resources within community safety, particularly for domestic abuse, could be better utilised to support social workers	Refine the CADT process to ensure options on outcomes are developed for service users. Feedback to referrers needs to be systematic Review of CPA process with regard to safeguarding framework Current review of Adults MARAC	Principal Manager for CADT to ensure good effective processes apply Review of CPA and safeguarding framework DASS has begun a review of MARAC/Hate Crime with FSU and agreed work-plan	

	• There is a police family crime investigation unit and services available to people experiencing domestic abuse and hate crime through the MARACs, IDVA service and BME support	• The wider care management process should be developed to support the prevention of safeguarding concerns, in particular the reviewing system	Ensure the Reviewing systems is developed and effective	A review of the current systems for Reviewing protection planning has already begun which includes dedicated training for chairs.	
		• Consideration could be given to the recording framework for safeguarding **AREAS FOR CONSIDERATION 2:** There is scope to develop the social work role in safeguarding beyond responding to immediate safety concerns. These include:	Consider recording framework for safeguarding and necessary revisions	DASS has begun a review of SWIFT and ESCR which has included market testing with practitioners –finance made available for further enhancement of current system.	
		• Person centred protection planning Practice should be developed so that social workers feel confident in considering a range of social work responses to deal with safeguarding concerns	Use person centred planning to define intervention and review plans Develop social work practice	Continue to develop the training on risk enablement and further develop this across the SAPB agencies and agree practice guidance on this through the SAPB	

| | | • Understanding and use of legal options should be developed | Continue to develop the legal options available Continue to work on implementing the Mental Capacity Act | | |
| | | • Understanding of risk management and risk enablement should be developed to support decision making | Develop understanding of risk enablement and support decision making | | |

Area 4	What was found		Recommendations	Action	Lead
4) Performance and resource management	**STRENGTHS:** • Significant investment already made in safeguarding/Contracts • Promising foundations in place to drive improvements in practice and quality assurance • Shift in management and organisational culture has delivered an improved focus on performance management • Developing a learning culture and good recognition and desire to develop skills and competencies	**AREAS FOR CONSIDERATION:** • Put in place an outcomes framework to evaluate effectiveness • Develop a comprehensive workforce development strategy to plan for the future • Some HR responses (getting people into post, workforce development plans etc) have been slow • Develop mechanisms to bring together data and intelligence on quality from safeguarding, contracts management, care management reviews, LINks, the regulator and others • Consider future models of social care pathways	Put in place an outcomes framework to evaluate effectiveness Develop a comprehensive workforce strategy plan Improve the timeliness of HR responses Improve use of management information within Safeguarding Adults/Contracts including service user views	AVA national consultation is being considered locally and agreement being reached with SAPB on key requirements Organisation Development Team in DASS to develop plan Corporate improvement plan includes detail of this work Supervision and appraisal audit to take place Contracts/Safeguarding Principal and Service Managers to develop a database for service improvement	

Area 5	What was found		Recommendations	Action	Lead
5) Working together:	**STRENGTHS:** • The Board is established and has put in place policies and procedures, structure and clear accountabilities. The annual report and business plan are good and have clear priorities • Imposing the discipline of the children's framework and experience was wise. You can now develop more sophistication in safeguarding adults • There are some positive partnerships including carers and providers on the Board, and co-terminosity helps • You have done a case review using the SCIE methodology	**AREAS FOR CONSIDERATION:** • The Board is at a stage of development and has a new chair. Needs to demonstrate challenge. It needs to know what difference it is making on aggregated outcomes. • Some partners need support and to be held accountable for their contribution • Some plans appear to have been rushed and need more ownership	Support independent chair to lead the Board in becoming more challenging. Support the Board to develop outcomes Review engagement of police re: criminal justice options Continue to seek multi-agency funding for the SAPB The Board to find ways to share learning. Partners to become more challenging and held to account. Plans need more ownership	Development day to agreed to further continued development for Board members in terms of challenge, duties to safeguard through self-assessment. Board to develop a Memorandum of understanding Develop links and dialogue between SAPB and LSCB and Health and Wellbeing Board Serious Case Reviews/ Critical Incident Reviews to be published through SAPB	

	• Safeguarding is on the CCG agenda, key posts have been agreed, there is an opportunity for named and designated roles and bringing together safeguarding teams virtually across organisations	• Opportunity for some critical bi or tri lateral developments between DASS/DV, CS and Housing Partnership • developments (e.g. joint processes between DASS and DV, between DASS, Community Safety and the Housing Partnership)	Develop joint processes between DASS/FSU/Community Safety and Housing Partnership	Additional Safeguarding Posts give SAPB capacity to undertake more Board functions Housing rep. appointed to SAPB and monthly meetings with FSU following review of Hate Crime and MARAC adult process. Joint chairing for Hate crime agreed and additional capacity from DASS Safeguarding team agreed for MARAC attendance. New protocol agreed July 2012.	
		• Develop mechanisms to bring together data intelligence on quality of safeguarding, contracts, care management, LINK, CQC etc	Data and intelligence on quality from safeguarding, contracts, care management reviews, CQC, complaints and Healthwatch and the Board should consider doing this for NHS and Police responses at a later date.	Contracts Principal Managers to lead and develop database to bring together all intelligence on providers.	

Recommendations of the Adult Social Care Peer Review June 2012

1. Vision, Strategy and Leadership
a) Ensure key stakeholders and partners understand the priorities of the department of adult social care and the context in which it is operating including budgetary constraints
b) Develop a departmental media relations strategy within the wider council communications strategy
c) Develop a co-ordinated programme for personalisation that speeds up the pace of personalisation and embraces the wider health and well being agenda
d) Distinguish between short, medium and long term priorities and actions in the Departmental Plan
e) Increase the visibility of senior managers and members on adult social care issues.
f) Improve the rigour and breadth of Scrutiny on adult social care.
2. Commissioning
g) Ensure earlier and wider consultation with service users, carers, partners and staff on the commissioning strategy and plans
h) Ensure that the commissioning plan's priorities are service user outcome focussed
i) Develop the provider market in a way that focuses on services that will promote independence and preventative approaches for service users.
3. Outcomes
j) Provide more support for service users and carers to use personal budgets and provide a wider range of community based services
k) Create opportunities for personal budgets to be used more creatively
l) Provide resources to ensure reviews are carried out in a more timely fashion
m) Ensure that risk is routinely considered and is consistently identified.

4. **Service Delivery and Effective Practice**	
n) Identify and reflect outcomes at the start of the care planning stage	
o) Develop a single risk assessment that covers all assessments.	
5. **Participation**	
p) Involve service users, carers, communities and partners in the design, delivery, and review of services at an earlier stage and in a more systematic way	
q) Strengthen and co-ordinate links and relationships with the voluntary sector	
r) Improve the monitoring and review of all contracts with a focus on user outcomes. Contracts need to be more transparent about the performance measures that will be used to assess a provider's performance	
6. **Working Together**	
s) Develop a strategic forum outside of the Health and Wellbeing Board (H&WBB) that can agree and promote the priorities of DASS such as personalisation	
t) Ensure that adult social care services are maintained during periods of substantial organisational change for the Council and its key partners	
u) Develop joint systems, protocols and policies to improve information sharing with partners safely and appropriately.	
7. **Resource and Workforce Management**	
v) Ensure that the right people are in the right places doing the right things. This is particularly important in the area of adult safeguarding and the mental capacity or where there is limited capacity or specialist isolated services.	
w) Address the Council's recruitment processes to reduce delays in getting staff into post. This will also reduce the need to rely on agency staff.	

8.	**Outward Focus**
	x) Create opportunities to further develop an outward focus by working with high performing authorities, participating more in regional and national forums and by organising events in the Wirral to showcase good practices in adult social care.
8.	**Improvement and Innovation**
	y) Use opportunities to test or pilot new ways of working in different localities which can then be rolled out to all localities
	z) Set joint priorities with key partners to achieve shared outcomes. Establish some joint performance measures with Health Service partners so that partners can jointly learn from the information
	aa) Simplify care pathways with less bureaucracy and leaner systems.