WIRRAL

ADULT SOCIAL SERVICES

DEPARTMENTAL PLAN

2010-2011

V4

CONTENTS

Section

1. DEPARTMENTAL OVERVIEW

1.1 The Government in *Our Health, Our Care, Our Say, Valuing People Now and Putting People First* continues to set out a clear direction for personalised services that are delivered to outcomes, working with whole communities through integrated arrangements.

1.2 An ambitious three year transformation programme was launched in 2008 which will see the service move away from a traditional welfare model into a personalised service with a new focus of earlier intervention and prevention. The Department retains its overall vision *"to support individuals and communities in Wirral to thrive,* and has launched its marketing strategy for the future built around the phrase "*it's your life, it's your choice",* aimed at engaging with people, communities and other stakeholders to challenge health inequalities in Wirral and improve people's lives. The Department will offer universal access and promote self directed support, treating people as individuals and providing them with a positive experience of their contact with the Council. The strategy is to offer, or signpost to, earlier intervention services aimed at promoting people's health and well being, preventing deterioration, and helping them regain independence and enabling them to participate as full members of their communities. The Department will work with localities and communities of need to build capacity in order to enable this participation.

2 DEPARTMENTAL AIMS

2.1 The Department's aims are to deliver the following outcomes (as set out in *"Our Health, our care, our say"*) for people and their communities:-

- improved health and emotional well-being
- improved quality of life
- people enabled to make a positive contribution
- increased choice and control
- freedom from discrimination or harassment
- improved economic well-being
- people enabled to maintain their personal dignity and be respected
- provided leadership
- appropriate services are commissioned and resources are used effectively

3 ORGANISATION STRUCTURE

3.1 The Strategic Leadership Team aspires to work in a matrix model with leadership of key projects extending beyond organisational boundaries. The organisation structure has to be dynamic and responsive to the transformation agenda, and is currently as follows:-
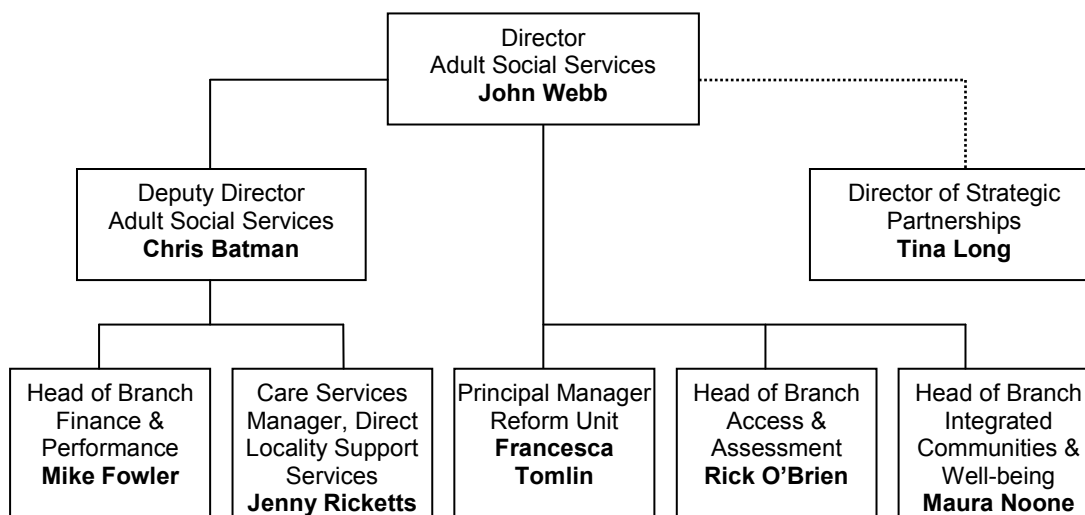
3.2 Wherever possible, the detailed organisational structures within each Branch reflect the 3 Localities to maximise integration opportunities with NHS Wirral and a range of other community services. These are clustered around General Practitioner Practices (Birkenhead, Wallasey, and Bebington & West Wirral).

STRATEGIC LEADERSHIP, PLANNING AND CORPORATE GOVERNANCE
Early intervention, Prevention services, Human Resources, Organisational Development, Business Planning & Performance Management, Contracts, Procurement and Quality Assurance, Financial Planning and Departmental budgetary control.

Birkenhead **Peter Tomlin**	Bebington & West Wirral **Peter Gosling**	Wallasey **Jayne Marshall**
Learning Disabilities[1]	Out-of-hours, Acute services[1]	Mental Health Services[1]

Integrated Commissioning **Russell Grant**	Integrated Commissioning **Jennifer McGovern**	Integrated Commissioning **Heather Rimmer**

Each Locality is responsible for a Council wide service[1], and accountable for the delivery of Integrated Commissioning, Access and assessment for services, Community Development, Primary care, In-house provider services, Personal Finance, Operational performance management, and Budget management.

Branch	Primary Purpose	Outcome example
Integrated Communities & Well-being	To ensure information and early intervention and low level preventative support is available in local communities to help reduce the risk of deterioration in people's condition and dependence on health and social care support.	*'A' knows where to access information about his welfare benefits entitlements and reducing his feelings of isolation. He now has all of the benefits to which he is entitles, attends social events run by his local church where he has made new friends and has been supported on a smoking cessation course. He has used his back pay in benefits to buy a computer and is now in regular contact with his relatives in Australia*
Access & Assessment	To assess and review the needs of adults who are in a vulnerable situation in their communities and promote their safety and self directed support.	*'B' was supported to complete his timely assessment, enabling his early and safe discharge from hospital. He received temporary re-ablement support and is happy continuing to live in his own home and participating in his local community.*
Direct Locality Support Services	To provide a range of locality based services for adults living in vulnerable situations, be they in a residential setting or living in their own homes.	*'C' has been supported to obtain employment and no longer attends Moreton Day Centre. He now feels valued and is optimistic about his future. He no longer receives any support from the Department*
Finance &	To provide a range of professional support services to	*'D's mental health state and alcohol dependency means he is incapable*

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Performance	the Department ensuring services are effectively planned, managed and developed in accordance with Council priorities and customer demand.	*of successfully managing his own financial affairs. The Department does this for him. He is able to maintain his private tenancy and live independently and safely.*
Integrated Commissioning	To provide locality based, integrated commissioning of personalised support services across health and social care which reflect the changing needs and aspirations of Wirral's population	*'E's advanced dementia means he cannot live safely in his own home without very intensive 24 hour support. He has recently moved into a new Extra Care facility close to his former home. He is happy there and feels safe and supported.*
Reform Unit	To provide additional capacity to support the transformation agenda. and ensure there is a co-ordinated approach to project and change management adopted by the Department.	*'F' has opted for a Personal Budget. He is using it to access community and leisure services in Wirral. He no longer attends a Day Centre and has recently learned to swim.*

4 THE COUNCIL'S CORPORATE PLAN

4.1 A vision for Wirral and a set of strategic objectives, with aims for 2008-13 and immediate priorities for improvement, was agreed by the Council in April 2008. This is reflected in the Corporate Plan which gives clear rationale for the Council's priorities and sets out current delivery plans. This Plan was refreshed in September 2009 and Cabinet agreed a new set of priorities for improvement for 2010-11 which the Department will contribute to.

4.2 The Council's five strategic objectives are:

- To create more jobs, achieve a prosperous economy and regenerate Wirral
- To create a clean, pleasant, safe and sustainable environment
- To improve health and well being for all, ensuring people who require support are full participants in mainstream society
- To help children and young people achieve their full potential
- Create an excellent Council

4.3 The Department will make a contribution to the delivery of all these objectives, but will mainly impact on the following:-

- **To improve health and well being for all, ensuring people who require support are full participants in mainstream society**
- **Create an excellent Council**

4.4 The Council has also agreed a number of priorities for improvement in 2010-11 *(Cabinet September 2009)* which are detailed in the Corporate Plan 2010 and the Department will lead on:-

- **Promoting independence and choice.**

5 DEVELOPING THE DEPARTMENTAL BUSINESS PLAN

5.1 The Department's Plan for 2010-11 reflects the above strategic objectives of the Council and articulates how it will contribute to them, ensuring there is a 'golden thread' throughout.

Key Issues → Team Plan → Locality Plan → Branch Plan → Corporate Plan → Community Strategy

5.1.1 Corporate Drivers

Community Outcomes are expressed in the Council's Community Strategy. Outcomes for people are expressed in the Corporate Plan, and its priorities for Improvement. The corporate priorities for improvement that the Department will lead on are:-

- Reduce Worklessness of people with disabilities
- Reduce Health inequalities and narrow the mortality gap
- Reduce hospital admissions
- Healthy lifestyles and participation in fulfilling activities
- Improved support for people with mental health problems
- Tackling all forms of alcohol and drug induced harm
- Maintaining a stable budget and providing better value for money

5.1.2 Departmental Drivers

- New demand pressures
- Activities carried forward from the 2009-10 Business Plan
- Areas for improvement - towards *'excellence'*

6   NEW DEMAND PRESSURES

6.1   Whilst aiming to deliver and embed the transformation of Adult Social Services there are sustained pressures relating to demand, supply and cost. These include:-

- The increasing number of older people living in Wirral.
- The high number of carers in Wirral.
- an increasing number of older people suffering with age related conditions *(such as dementia)*. People are living longer with their illness, with greater complexity, and with higher expectations and therefore require more support.
- The numbers of people with long-term mental health conditions who are economically inactive continues to rise.
- A significant growth in the number of adults with learning disabilities and the number of younger adults with complex needs moving through the education system.
- The gap in mortality between the most deprived areas of Wirral and other more prosperous areas.
- The changing shape of communities. Eg an increasingly diverse population, emerging minority groups and workforce mobility.
- The effects of the current economic climate.
- The requirement to reduce spending across the whole public sector.
- The rising expectation of people regarding choice and personalisation.
- Prospect of new legislation (eg NHS Operating Framework, White Paper on the future of Social Care.
- The reputation of the Department may suffer during a period of significant change. People's confidence in it directly impacts on their experience of the Council and on the capacity of staff to lead and manage change.

7   **ACTIVITIES CARRIED FORWARD FROM THE 2009-10 BUSINESS PLAN**

7.1   In 2008 the Department launched an ambitious three year Transformation Programme in line with the Putting People First agenda. The seven key Projects that make up this Programme were included in the 2009-10 Business Plan and need to be carried forward into the 2010-11 Plan.

7.2   The five key priorities for transformation which have been agreed by the Department of Health and the Association of Directors of Adult Social Services, and which underpin Wirral's Transformation programme are:-

- That transformation is developed in partnerships with people using services, carers and other local citizens.

- That those eligible for Council funded support are offered a personal budget via a suitable assessment process.

- That the Council and its partners are investing in cost effective preventative interventions, which reduce the demand for social care and health services

- That citizens have access to information and advice regarding how to identify and access options in their communities to meet their care and support needs.

- That people who use services are experiencing a broadening of choice and improvement in quality of care and support service supply, built upon involvement of key stakeholders (the Council, NHS Wirral, people themselves, providers, 3rd sector organisations etc) that can meet the aspirations of all local people (whether Council or privately funded) wanting to procure social care services.

7.3   These priorities are reflected in the seven current Key Projects that make up the Transformation programme:-

- Project (1)   Implementing Personal Budgets
- Project (2)   Early Intervention Strategy
- Project (3)   Shaping the future of Care Services
- Project (4)   Assessment, Re-ablement and Review
- Project (5)   Access to services
- Project (6)   Integrated Commissioning Programme
- Project (7)   Market Management

8   **AREAS FOR IMPROVEMENT - TOWARDS '*EXCELLENCE*'**

8.1   The following areas for improvement have been identified by the Council and endorsed by the Care Quality Commission in their assessment of performance for 2008-09.

- To deliver sustained improvements in Safeguarding arrangements, to improve the safety of people in Wirral who are vulnerable *(improved performance management, case closure rate, and stakeholder training).*

- To deliver sustained improvements in Assessment and Care Management services *(increased use of self-assessments, self directed support, out of hours support and performance relating to reviews).*

- To continue to develop services in line with Valuing People Now.

- To develop monitoring systems to collate qualitative information to evidence outcomes for people who use services and carers.

- To use resources effectively and efficiently to deliver sustained change and improvement.

- To continue to develop support for carers

8.2 Those that require a structured project management approach and have significant corporate impact need to be reflected in the 2010-11 Departmental Plan as the following additional Key Projects

Project (8)   Improving Safeguarding arrangements

Project (9)   Implementing Valuing People Now

Project (10)   Support for Carers

9 HOW PROGRESS WILL BE MEASURED

9.1 Measuring our success will ultimately be through the recognition of outcomes for people and their communities. 46 Performance Indicators will be used to monitor progress of individual projects/actions aimed at achieving these outcomes and the following basket of 8 Key Performance Indicators *(as identified by the Department of Health)* shall be regarded as critical success measures:-

- NI125   Achieving independence through rehabilitation/intermediate care
- NI130   Proportion of eligible service users with a direct payment or personal budget
- NI134   Number of emergency bed days
- NI139   people over 65 who say they receive information, assistance and support to live independently
- NI145   settled accommodation for adults with learning disabilities
- NI146   employment for adults with learning disabilities
- NI149   settled accommodation for adults with mental health problems
- NI150   employment for adults with mental health problems

9.2 In addition to these the Department of Adult Social Services will add 3 Performance Indicators it regards as critical. This total basket of 11 Key Performance Indicators shall be the summary assessment of the Department's overall performance.

- NI135   Carers receiving a service
- NI136   People supported to live independently
- D40   Proportion of support packages receiving a review

9.3 The Department will continue to operate within the Council's corporate Performance Framework and PIMS (Performance Information Management System) shall be the tool used to record and monitor activity, milestones and performance. An enhancement to this will be the adoption of a Balanced Scorecard approach to performance management whereby Teams will be presented with a summary visual assessment of performance against critical success measures relevant to their particular function. This will be presented as follows:-

USE OF RESOURCES	**PEOPLE WE EMPLOY**
5 x Performance Indicators relating to resources *(eg budget variance)*	5 x Performance Indicators relating to staff *(eg sickness levels)*
KEY PERFORMANCE INDICATORS	**CUSTOMERS**
5 x Key Performance Indicators selected from	5 x Performance Indicators relating to

the above, that can be affected by the Team	outcomes for people *(eg supported carers)*

10   KEY MILESTONES - RECOGNITION OF SUCCESS

10.1   The following strategic milestones (recognition events) which are taken from Putting People First, will be used to measure progress against these transformation priorities:-

Transformation Priorities	By April 2010	By October 2010	By April 2011
Effective partnerships with people using services, carers and other local citizens	Effective communication has taken place about the Transformation and its benefits for people.	People understand the changes to Personal Budgets and are contributing to their development.	At least one user-led organisation is directly contributing to the development of Personal Budgets
Self directed support and Personal Budgets	Personal Budgets have been introduced and are being used by new or existing people who use services /carers.	People who use services/carers and those subject to a review are offered a Personal Budget.	At least 30% of people who use services have a Personal Budget.
Prevention and cost effective services	A Plan exists with NHS Wirral on how we will shift investment from reactive to earlier intervention & support, and an agreement is in place to share the risks and benefits to the 'whole system'	A process is in place to monitor across the whole system the impact of this shift in investment. Efficiency gains are captured and factored into joint investment planning with NHS Wirral	Cashable savings of at least 3% can be evidenced as a result of this joint investment planning. Costs and Benefits are apportioned across the whole system as a result of this joint investment planning
Information and advice	A Strategy exists to create universal information and advice services	The Council has arrangements in place for universal access to information and advice	People are informed about where they can go to get the best information & advice about their care and support needs
Local Commissioning	Integrated Commissioning strategies exist that address the future needs of people in Wirral, involving all stakeholders and linked to the priorities identified through the JSNA	Providers and 3rd sector organisations are clear how they can respond to people's needs using Personal Budgets. There is an increase in the range of services on offer.	Stakeholders are clear about the impact that purchasing by individuals will have on the procurement of the Council & NHS Wirral that will ensure the right kind of supply to meet local care & support needs

11   LOCAL AREA AGREEMENT

11.1   The council has signed up to deliver Wirral's Local Area Agreement as a member of the Local Strategic Partnership. In 2010-11, DASS in partnership with NHS Wirral will lead on the delivery of the following LAA improvement priorities and targets:

- Life expectancy
- Smoking cessation
- People receiving Self Directed Support
- Carers support
- People supported to live independently

- Reduce the number of people with dementia admitted to residential and nursing care
- Reduced length of stay in hospital for people over 75 admitted through fractured neck of femur

11.2   DASS will also make a contribution to the following LAA improvement priorities.

- Reduction in drug related (Class A) offending rate
- Reduced alcohol-harm related hospital admissions
- Reduced all age mortality rates
- Improved overall employment rate
- Reduced per capita CO_2 emissions
- Reduced self-harm of people aged 16-35
- NVQ level 2 skills participation

12.   What are we going to deliver?

12.1   Priorities for Improvement 2010-11 … These will feature in the Council's Corporate Plan 2010-11

Priority for Improvement 2010-11	We will measure our success by: Performance Indicators	We will deliver: Projects / Activity	Funding / Resources	Lead Portfolio	Lead Service Area	Will this activity contribute to narrowing the gap in Wirral? If so, how will this be measured?	Who else is required?
Promoting Independence and choice	NI 130	Implementing Personal Budgets (Project 1) (Delivering Self Directed Support as mainstream activity)	Reform Grant (£1.8 million) Community Care Grant Assessment & care Management Costs, and additional support for people choosing a Personal Budget	Health & Well Being	Reform Unit	Direct positive impact through increased choice and control for vulnerable people who live in the more deprived areas of Wirral	3rd Sector, Information Services, People who use services Independent Providers
Promoting Independence and choice	NI 136 NI 137	Early Intervention Strategy (Project 2) (Strategic shift of investment to preventive and early intervention support)	3rd Sector Grants Project Management within Integrated Communities and Wellbeing base Budget	Health & Well Being	Integrated Communities & Well Being	Direct positive impact through targeted support for vulnerable groups and communities	NHS Wirral 3rd sector Other Council Departments Emergency Services.
Promoting Independence and choice	Cabinet Decision	Shaping the future of Care Services (Project 3) (Implementation of strategic decision regarding the future of in house provided services)	Project Management within Direct Locality Support Services base Budget. Additional capacity maybe required subject to cabinet decision	Health & Well Being	Direct Locality Support Services	Indirect positive impact as the Project supports the transformation towards increased choice and control for vulnerable groups and communities	Other Council Departments People who use services NHS Wirral
Promoting	NI 124, NI 131	Re-ablement,	Community Care Budget	Health &	Access &	Direct positive	NHS Wirral

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Priority for Improvement 2010-11	We will measure our success by: Performance Indicators	We will deliver: Projects / Activity	Funding / Resources	Lead Portfolio	Lead Service Area	Will this activity contribute to narrowing the gap in Wirral? If so, how will this be measured?	Who else is required?
Independence and choice	NI 125, NI 127, NI129, NI 136	Assessment & Review (Project 4) (Implementing transformation of assessment and care management practice to deliver personalised support)	Project Management within Access & Assessment base Budget	Well Being	Assessment	impact through regained independence and choice for vulnerable people living in deprived areas	Wirral NHS Teaching Hospital (WTH) 3rd Sector
Promoting Independence and choice	NI 132 NI 133	Access to Services (Project 5) (Transformation of access to services 24/7)	Project Management within Access & Assessment base Budget Community Care Budget	Health & Well Being	Access & Assessment	Direct positive impact as improved access to services ensures people who are most in need receive our support, and people who do not meet eligibility criteria are signposted to other community support networks	Other Council Departments NHS Wirral 3rd sector Emergency services People who use services
Promoting Independence and choice	NI 125	Integrated Commissioning (Project 6) (Integrated commissioning across health and social care to	Project Management within Integrated Commissioning base Budget	Health & Well Being	NHS Wirral Integrated Commissioning	Indirect positive impact as this activity helps define the shape of the future market for personalised	NHS Wirral Integrated Commissioners 3rd sector Private sector

Priority for Improvement 2010-11	We will measure our success by: Performance Indicators	We will deliver: Projects / Activity	Funding / Resources	Lead Portfolio	Lead Service Area	Will this activity contribute to narrowing the gap in Wirral? If so, how will this be measured?	Who else is required?
		shape the market to meet future need)				support for vulnerable groups and communities	
Promoting Independence and choice	Cabinet decision	Market Management (Project 7) (Developing contracts for personalised support)	Project Management within Finance & Performance Branch base Budget	Health & Well Being	Finance & Performance	Indirect positive impact as this activity delivers the future shape of the market for personalised support for vulnerable groups and communities	NHS Wirral Integrated Commissioners 3rd sector Private sector Other Council Departments
Promoting Independence and choice	New Local indicators: % alerts dealt with within 24 hrs % of referrals closed within 28 days NI 128 NI 140	Improving Safeguarding arrangements (Project 8) (Ensuring people in Wirral who are vulnerable are safe)	Project Management within Reform Unit base Budget	Health & Well Being	Reform Unit	Direct positive impact people who are most at risk are prevented from harm or further deterioration. Promotes personal dignity and respect.	People who use services. NHS Wirral 3rd sector Care Quality commission Emergency services: Police
Promoting Independence and choice	NI 145	Implementing Valuing people Now (Project 9) (Implementing the Valuing People Now strategy)	Project Management within Integrated Communities and Wellbeing base Budget	Health & Well Being	Integrated Communities & Well Being	Direct positive impact through increased independence and choice for vulnerable groups and communities	People who use services, NHS Wirral 3rd sector providers
Promoting	NI 135	Carers	Project Management within	Health &	Integrated	Indirect positive	People who use

Priority for Improvement 2010-11	We will measure our success by: Performance Indicators	We will deliver: Projects / Activity	Funding / Resources	Lead Portfolio	Lead Service Area	Will this activity contribute to narrowing the gap in Wirral? If so, how will this be measured?	Who else is required?
Independence and choice		(Project 10) (Implementing the Carers Commissioning Strategy)	Integrated Communities and Wellbeing base Budget	Well Being	Communities & Well Being	impact through sustaining carers' support of vulnerable people	services NHS Wirral 3rd sector Other Council Departments

12.2 Aims for 2010-13

Aims 2009-2013	We will measure our success by: Related Performance Indicators	We will deliver: Projects and/or Activities	Funding / Resources	Lead Portfolio	Lead Service Area	Will this activity contribute to narrowing the gap in Wirral? If so, how will this be measured?	Who else is required?
Strategic Objective 1 (To create more jobs, achieve a prosperous economy and regenerate Wirral)							
Reduce worklessness (of people with disabilities) through targeted activity	NI 146 NI 150 Local PI Number of people who gain employment following support from DASS	Supported Employment Strategy (Project 11)	Project Management within Integrated Communities and Wellbeing base Budget	Health & Well Being	Integrated Communities & Well Being	Increased choice and control, and economic wellbeing	Other Council Departments Independent Providers NHS Wirral
Strategic Objective 3 (To improve health & wellbeing for all, ensuring people who require support are full participants in society)							
Reduce health inequalities in Wirral and narrow the mortality gap	NI 137 NI 119 NI 120 NI 121 NI 122 8857	Invest to Save (Assistive Technology) (Project 12)	Invest to Save Bid Project Management within Integrated Commissioning base Budget	Health & Wellbeing	Integrated Commissioning	Yes	Public Health Integrated Commissioners NHS Wirral

Aims 2009-2013	We will measure our success by: Related Performance Indicators	We will deliver: Projects and/or Activities	Funding / Resources	Lead Portfolio	Lead Service Area	Will this activity contribute to narrowing the gap in Wirral? If so, how will this be measured?	Who else is required?
Reduce hospital admissions	NI 124 NI 131 NI 134 8856, 8228, 8857	Reduce Hospital admissions Project (Project 13)	Project Management within Integrated Commissioning base Budget	Health & Wellbeing	Integrated Commissioning	Raise aspirations Managing long term conditions	NHS Wirral Acute Hospital 3rd sector providers
Encourage healthy lifestyles and participation in fulfilling activities	NI 123 NI 126 NI 138 NI 139	Community Development Project (Project 14)	Project Management within Integrated Communities and Wellbeing base Budget	Health & Wellbeing Health & Wellbeing	Integrated Communities & Well Being	Yes through improved quality of life.	Localities Public Health Integrated Commissioners NHS Wirral
Improve support to those with mental health problems	NI 149 NI 150 8432 8436	MH Commissioning Strategy (project 15)	Project Management within Integrated Commissioning base Budget	Health & Wellbeing	Integrated Commissioning	Yes through increased quality of life.	NHS Wirral People who use services Carers
Tackle all forms of alcohol and drug induced harm	NI 38 NI 39 NI 40	Implement Alcohol Strategy (Project 16)	Project Management within Drugs & Alcohol Action Team (DAAT) base Budget	Health & Wellbeing	DAAT	Yes through increased life expectancy and healthier lifestyles.	
Strategic Objective 5 (Create an Excellent Council							
Maintain a stable budget for DASS providing better value for money	Stabilised Budget	Medium term DASS Financial Strategy (Project 17)	Project Management within Finance & Performance Branch base Budget	Health & Wellbeing	Finance & Performance Branch		NHS Wirral Other Council Departments

13   What are the financial and other implications of our plans?

13.1   The service plan is based on resources allocated to the department for the 2010/11 financial year. The budget has been developed to reflect revenue and capital allocations made through the budget setting process.

Base Budget for the department in 2010/11: £85.897m

The most significant influences on the department's budget over the next year are detailed in the tables below:

SERVICE CHANGES AND GROWTH

Details	£
Personal Care at Home From 1st October 2010 the transfer of Personal Care at Home responsibilities to the Council.	2,600,000

POLICY OPTIONS

Details	£
Investment in Assistive Technology To support an increasing the number of people who can be supported in their own homes through a substantial investment in Assistive Technology. This is being funded from the Efficiency Investment budget.	1,000,000

SAVINGS

Details	£
Assistive Technology Eight months savings from the investment in Assistive Technology of which two months are bridged for one year at the cost of £400,000 from balances.	1,200,000
Restructuring of management and administrative staff within the department.	240,000
Travel/Transport Integration Savings from the creation of an Integrated Passenger Transport Unit combining the current functions within the Department of Adult Social Services and the Children and Young Peoples Department.	600,000
Transport Services Review	180,000
In- House Supported living review	347,000

VOLATILE BUDGET AREAS

Area	Details
Community Care Expenditure	This area reflects changes in the demand for services.
Nursing and Non-Residential Care Charges	The income from these areas reflects placements and support offered to clients. It can vary in line with the demand for services.

CAPITAL PROGRAMME

The Capital programme is a 3 year rolled forward programme. The money will be used to implement a mental health, social care and information management schemes.

Approved Capital Programme

	2010/11 £000	2011/12 £000	2012/13 £000
Expenditure	471	141	0

13.2 Value for Money

The Department is committed to providing value for money services. During the coming year we will undertake and implement reviews such as the Strategic Asset Review that will improve value for money. The following area has been identified as being of relative high spend compared to others.

- Adults with physical and sensory disabilities.
- Adults with Mental Health Needs.

14. HR / Workforce Plans

14.1 **Current Workforce Issues**

A summary of the key 5 workforce issues are detailed below:

Themes	Workforce Issue	Planned Actions	Financial Implications
Profile	Ensure diversity of workforce reflects community and ensure sustainability. Issues include current age profile of the workforce as just under 50% are aged 40 years plus	• Wirral wide recruitment events. School / college career events • Apprenticeships • Graduate schemes • Skills for life • Work opportunities for children / students • Employment opportunities for disadvantaged groups • Mindful employer • Build capacity in the social care sector	Identification and implementation of joint initiatives will promote efficiencies.

Themes	Workforce Issue	Planned Actions	Financial Implications
Cost	Achieve a balanced budget in the context of the efficiency agenda.	• Actions in all areas will support this agenda to be realised.	Identification and implementation of joint initiatives will promote efficiencies and reduce duplication
Capacity	The need for integrated working / partnership approach to reduce duplication, improve performance and realise efficiencies	• Service model review • Performance management framework to support agile working. • Review and update working practices and systems between department and corporate e.g. HR / Payroll system • Locations / reporting arrangements • Produce joint HR / workforce strategy with NHS Wirral with a view to becoming Council wide rather than DASS / NHS. • Produce career pathways • Joint training opportunities e.g. OU practitioner • Joint mediation / wellbeing • Support with change management • Build capacity with contractors and partners via partnership groups inc training and funding offer	Duplication will be reduced assisting to realise efficiencies in order to support effective budget management Duplication will be reduced assisting to realise efficiencies in order to support effective budget management
	Integration, localisation and personalisation agenda leading to the need to redesign staff roles.	• Service delivery model review • Identification of current skills makeup through development centres / skills audit tool. • Identification of new types of worker skill set. • Gap analysis against new types of worker skill set. • Development programme as an outcome. • Change management training • Succession Planning • Integrated working with NHS	Restructure will support the efficiency agenda to achieve a balanced budget. Identification and implementation of joint initiatives will promote efficiencies.
Performance	Robust approach to Performance Management required	• Performance Management enhanced through skills audit, KIE • Performance management framework & strategy	Robust health and wellbeing initiatives will support the efficiency drive through promotion

Themes	Workforce Issue	Planned Actions	Financial Implications
	Although improving sickness absence remains an area of concern for the department.	• Enhance level of current information including skills & qualifications, establishment post information • Joint competency frameworks • Attendance management training, monitoring and assessment of activity	of health initiatives and good levels of attendance. Identification and implementation of joint initiatives will promote efficiencies.
Change	Options for change for direct locality services & Self directed support	• Modification of roles and responsibilities, working practices, skill sets. • Employer may alter as range of options being considered e.g. outsourcing, creation of a new company • Consultation with staff, people who use services and trade unions • Redeployment / TUPE of staff as applicable • Identify development needs through skills audit • L&D opportunities to meet individual needs identified • Produce portfolio of L&D opportunities to support carers / PAs.	New approach will support the efficiency agenda to achieve a balanced budget Development centres and training requirements identified will be funded via the workforce development element of the area based grant.

15 Asset Management

15.1 Agile working, the Locality model and the Care Service Strategy – Shaping the future of Care Services may impact on the assets of the Department, and may affect the number of buildings the Department is currently located in.

16 Impact Assessments

16.1 **Equality Impact Assessment list of functions and policies 2009 / 2010**

	List of Functions/Policies	Initial EIA deadline	Lead Officer
1.	Personal Budgets & Self Directed Care		Francesca Tomlin
2.	Provisions of Access to Services 24 Hours a day, 7 days a week		Rick O'Brien
3.	Provisions of Locality Reablement Services		Rick O'Brien
4.	Provision of Specialist Services		Rick O'Brien
5.	Improving Safeguarding Processes		Francesca Tomlin
6.	Development of Strategic Integrated Commissioning (Across Health & Social Care)		Heather Rimmer
7.	Implement into Locality Commissioning Process Systems Dynamics Modelling		Tina Long
8.	Development & Implementation of an		Tom Ryan

	List of Functions/Policies	Initial EIA deadline	Lead Officer
	Integrated Human Resources Strategy		
9.	Market Management		Mike Fowler
10.	Facilities Management		Mike Fowler
11.	Development & Implementation of an Early Intervention Strategy		Maura Noone
12.	Implement a Communication Strategy		Maura Noone
13.	Implement the Carers Commissioning Strategy (full)	Sept 2009	Maura Noonel
14.	Care Service Strategy - Future of Care Services		Jenny Ricketts
15.	Implement Improvement Plan of existing Care Services		Jenny Ricketts

17   Departmental Risk Register

17.1   Guidance on completing risk register template as below – you should also refer to your existing risk register, which should currently be updated on a quarterly basis.

Project / Activity Identification Code	See page 4 above – this will link items in the risk register to the departmental outcomes framework
Description of the Risk	The source of the potential threat
Officer Responsible	The individual responsible for managing the risk
Consequences	The effect(s) if the risk were realised
Category	The standard risk category which most accurately reflects the risk described. For table of risk categories, go to the risk section of the intranet http://10.107.1.50/Gendoc/Documents/RiskDocs/Strategy%202008%20%28second%20draft%29.doc
Existing Control Measures	Brief descriptions of each major process, standard, procedure, activity etc. presently in place which acts to lessen the impact, likelihood or both
Net (Residual) Likelihood Score	How probable it would be that the risk would be realised taking into account the Existing Control Measures (on a scale of 1 to 5). For scoring table, go to risk section of the intranet.
Net (Residual) Impact Score	How serious the outcome of the risk would be taking into account the Existing Control Measures (on a scale of 1 to 5).
Net (Residual) Risk Score (L x I)	How much of a threat the risk poses overall taking into account the Existing Control Measures (represented not only by a numerical score of 1 -25, but also by a colour – red, amber or green)
Risk Review Frequency	How frequently will the risk be reassessed in light of control measures and other factors
Additional Control Measures Planned	Brief descriptions of each major process, standard, procedure, activity etc. planned to be taken which would act to further lessen the impact, likelihood or both
Target Date	The date by which it is expected that each Additional Control Measure will be introduced.

Risk Register Template

Project / Activity	Description of Risk	Officer Responsible	Consequences	Category	Existing Control Measures	Net Likelihood Score	Net Impact Score	Net Total risk score	Risk Review Frequency	Additional Control Measures Planned	Target Date
Implementing Personal Budgets (1)	Resources Allocation System (RAS) may not be correct and cause over / underpayment in funds	Francesca Tomlin	Impact on financial expenditure and income	Financial	Pilot through the WISP project so that amendments can be made as and when necessary.	2	5	15	Quarterly		
Implementing Personal Budgets (1)	Failure to achieve performance targets against NI 130.	Francesca Tomlin	If target not met performance levels of all LAA indicators will be reduced across the averages.	Strategic	Work stream Leads to monitor performance. Core project in corporate plan.	4	5	20	Quarterly		
Access to Services (5)	Agree which self assessment document is to be used	Francesca Tomlin	Changes required to ACAF /RAS may be affected by inability to reach agreement on the format with NHS WIRRAL colleagues	Operational	Pilot proposed form via the WISP pilot and test out. Make the necessary amendments as and when necessary.	2	4	8	Quarterly		
Access to Services (5)	Increased demand for services.	Rick O'Brien	Increased financial expenditure.	Financial	Careful allocation of service to meet FACS criteria only	2	4	8	Quarterly		
Reablement and Assessment (4)	Informal (staff generated) resistance to Project change agenda.	Rick O'Brien		People	1. Change agenda is clear and well communicated. 2. Integrated services job descriptions and person specifications are clear and properly constructed.	2	3	6	Quarterly		
Integrated Commissioning (6)	Governance and pooled budget arrangements	Tina Long		Strategic	Governance and pooled budget arrangements	4	2	8	Quarterly		

Project / Activity	Description of Risk	Officer Responsible	Consequences	Category	Existing Control Measures	Net Likelihood Score	Net Impact Score	Net Total risk score	Risk Review Frequency	Additional Control Measures Planned	Target Date
	unclear, not agreed or not adhered to				prioritised, properly negotiated and monitored.						
Integrated Commissioning (6)	Integration with Health Services slows down developments	Tina Long		Strategic	Clarity regarding governance arrangements, priorities, culture and eligibility	2	4	8	Quarterly		
Safeguarding (8)	Increased number of referrals	Rick O'Brien	Cases not processed and investigated within set timescales	People	Set process in place with all partners engaged in the process. Staff trained to deal with cases.	3	5	15	Quarterly		
Market Management (7)	Existing providers do not keep pace with expectations of people using services	Mike Fowler	Poor standards of services. Fewer options of service available.	Reputation	All providers to be included in development of changing nature of services	2	3	6	Quarterly		
Market Management (7)	Reduction in business for existing services and organisations	Mike Fowler	Under provision of services and increased demand.	Strategic	Development of new ways of work; de-commission some existing services.	3	3	9	Quarterly		
Market Management (7)	Economic climate may impact on DASS and Wirral Budgets.	Mike Fowler	Reduced fees may result in providers ceasing to trade.	Financial	% for inflation need to be examined within Contracts.	4	3	12	Quarterly		
Market Management (7)	Economic climate may impact on DASS and Wirral Budgets.	Mike Fowler	Potential increase in levels of debt for non residential charges and impact on deferred charges on properties.	Financial	Undertake assessments in a timely manner	4	5	20	Quarterly		
Carers (10)	Economic climate may impact on implementation of	Maura Noone	Potential impact on family carers and demands on	Strategic		3	4	12	Quarterly		

Project / Activity	Description of Risk	Officer Responsible	Consequences	Category	Existing Control Measures	Net Likelihood Score	Net Impact Score	Net Total risk score	Risk Review Frequency	Additional Control Measures Planned	Target Date
	Carers Strategy.		Mental Health support services. Increased risk of family/social tensions.								

Appendix one: Department's Equality Action Plan

	Task Description	Duration	Owner	Start Date for task	End Date for task	Progress
	Level 3 Action Plan					
1	Full Equality Impact Assessments x2 Carers Strategy	1 month	**CG**	**CG**	**Nov**	
a	Older Peoples Mental Health Strategy	1 month	**CG**	**CG**		
b	Completion of a full and systematic consultation process with designated community, staff and stakeholder groups		**CG**			
e	**1. Workforce.** A representative and diverse workforce 1. All staff members to carry out Elumos training. 2. All team managers and above to attend Equality Impact Assessment training. 3. All staff members to attend in house E&D training. 4. Positive Action Scheme x2 trainees.	1 month 3 months Ongoing 1 month	**MN**			
f	**2. Governance.** Ensure implementation of EIAs of the 6 key Projects and the 9 routine projects contained in the Departmental Business Plan Agree and implement process for the management and co-ordination of EIAs for 2009/10	6 months 1 month	**CB**			
g	**3**. **Access.** To strengthen involvement and engagement with all equality strands Consultations for Carers Strategy and OPMH Strategy to include BRM groups.	 1 month	**FT**			
h	**4. Corporate Governance** To review and refresh Equality and Diversity Action Plan. Monitor and review quality and implementation of all EIAs	1 month	**TE**			

	Task Description	Duration	Owner	Start Date for task	End Date for task	Progress
l	**5. Communication** To develop a communication strategy for DASS		**DB**			
2.	**Policy Implementation**					
	Develop independent feedback mechanisms (VD 4.1)		DB			
	Produce procedures to tackle discrimination (VD 4.2)		TR/TE			
a	Develop & maintain a robust assessment process which responds to needs of equality target groups (VD 4.3)		FT			
b	Ensure partners in community and independent sector adopt good practice in terms of equality and diversity (VD 4.7)		CG			
c	Produce regular information, newsletter, briefings on legislative changes and best practice (VD 4.6)		FT/AQ/TE			
d	**Policy Implementation**		NC			
e	Develop independent feedback mechanisms (VD 4.1)		SB			
f	Produce procedures to tackle discrimination (VD 4.2)		TR			
g	Develop & maintain a robust assessment process which responds to needs of equality target groups (VD 4.3)		TR			
	All designated harassment officers must be competent & update training every 12 months (VD 4.12)		TR			
	All staff will be required to take advantage of training relevant their job (VD 4.14)		TR			
	Write a redundancy procedure to ensure unbaised redundancy or redeployment decisions (VD 4.15) (HR 4.15)		TR			
	Establish procedures that set out how we will work with people who lack mental capacity (VD 4.19)		MN			
	Establish a profile of people that use our services to ensure that this reflects the local community (VD 4.20)					

	Task Description	Duration	Owner	Start Date for task	End Date for task	Progress
	Develop information gathering processes which respond to and meet the cultural needs of all sections of the community (VD 4.21) (MI&K 4.2)					
	Develop an Involving People toolkit which ensures barriers to involvement are removed (VD 4.22) (IP 4.2)		NC			
	Develop & maintain a Resource Management Policy which ensure that services reflect the diversity of Wirral citizens (VD 4.23) (MR 4.10)		MF			
	Develop & maintain a Resource Management Policy which ensures a fair and consistent approach to charging across all adult user which does not discriminate (VD 4.24) (MR 4.12)		MF			
	Develop & maintain a Resource Management Policy which seeks to extend its duty to promote equality to all contractors (VD 4.25) (HR 4.13)		MF			
	Develop a Managing, Health Safety & Risk Policy which integrates the principles of valuing diversity (VD 4.27) (MHS&R 4.9)		TR			
	Develop & maintain a workforce plan that takes into account strategic aims, business objectives, equality and diversity (MHR 4.1)		TR			
	Develop & maintain recruitment, selection and promotion procedures which are fair, consistent & effective (MHR 4.3)		TR			
	Establish a process which develops a clear link between key Issues, supervision and performance targets(ensuring equality & diversity is addressed)		TR			
	Put in place & maintain a range of feedback mechanisms for staff, volunteers and contractors including a formal confidential reporting procedure (4.5VD) (H.13HR)		TR			
	Establish regular review of disciplinary, grievance and conflict resolution procedures (HR4.14)		TR			

	Task Description	Duration	Owner	Start Date for task	End Date for task	Progress
	Put in place a monitoring system to ensure all decisions relating to the retirement scheme are compliant with age regulations (VD4.16)		TR			
	Put in place a monitoring system to ensure all decisions relating to the retirement scheme are compliant with age regulations (VD4.16)		TR			
	Establish an Information system that complies with legislation, policy and standards (MIK4.1)		TR			
	Establish an Information system that complies with legislation, policy and standards (MIK4.1)		DB			
	Establish a secure system for keeping records & ensuring that they are only shared with people who are entitled to receive them (MIK4.4)		DB			
	Develop & maintain a comprehensive system for Human Resources records ensuring compliance legal requirements		TR			
	Develop & maintain a comprehensive system for Human Resources records ensuring compliance legal requirements		TR			
	Establish the legality of specifying experience as in recruitment & selection to be investigated		TR			
	Monitoring information needs to be checked for compliance with legal requirements & update to include all equality groups		TR			
	Review EIA tool to ensure that there is a clear link between EIA & the duty to promote equality		NB/TE			
	Review the Valuing Diversity Policy to ensure that it is actively promoting equality in all target areas		NB/TE			
	Ensure commissioning strategies detail how they will promote equality		MN			
	Ensure that the Local Area Agreement is linked to the corporate race, disability & gender equality schemes					
	Adopt a fair & consistent approach to charging which promotes equality		MF			
	Charging procedures need to be written regularly updated & consulted upon		MF			

		Task Description	Duration	Owner	Start Date for task	End Date for task	Progress
		Ensure that provision is made for invoices & statements to be produced in various formats such as large print, Braille, on audio cassette & a range of languages		CG			
		Monitor contracts to ensure that they delivered in a non-discriminatory way and promote equality of opportunity for staff, the general public and businesses		MF			
		Contactors will be encouraged to establish a workforce which reflects the composition of the local population		MF			
		All Departmental publicity must be easily accessible in various formats		CG			
		Identify the range of equality information which should be communicated to people to make our work transparent		CG			
		Produce procedures to deal with significant events which respond to the needs of equality target groups		TR			
		Establish Inter-agency protocols		DB			
		Identify relevant information necessary for monitoring in relation to significant events		DB			
3.		**DASS Priorities 2009/10**		CG			
a.		Contribute to Council wide review of community engagement and cohesion (Outcome 3)		CG			
b.		Targeted local campaigns to ensure wide range of information available to "hard to reach" Groups (4)		CG			
c.		Further development of mental capacity and best interest assessments training for Social Workers		CG			
d.		40 people to complete level 2/3 of Social care – mandatory unit linked to values and beliefs		CG			
e.		Review of the application of FACS procedures (5)		CG			

	Task Description	Duration	Owner	Start Date for task	End Date for task	Progress
f.	Consolidate and improve joint systems to facilitate full entitlement to health, social care and benefits (5)		CG			
g.	Roll out training to social care staff linked to mental capacity Act(5)		CG			
h.	Implementation of Departments equality and Diversity Action Plan (5)		MN			
i.	Implement Positive Action Scheme. (5)		MN			
4.	Communities & Early Interventions Team Plan		MN			