WIRRAL COUNCIL

AUDIT AND RISK MANAGEMENT COMMITTEE 17 JANUARY 2011

REPORT OF THE INTERIM DIRECTOR OF ADULT SOCIAL SERVICES

ADULT SOCIAL SERVICES - IMPROVEMENT PLAN UPDATE

Executive Summary

This report provides detail of progress towards addressing the service issues raised by the Care Quality Commission's Inspection of Adult Social Services in May 2010.

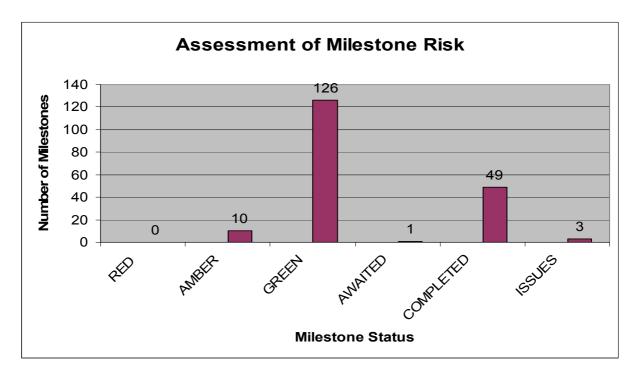
1 Background

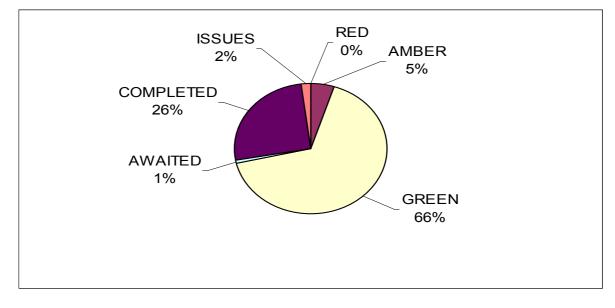
- 1.1 In May 2010 the Care Quality Commission (CQC) inspected Wirral Council's Adult Social Services Safeguarding and Adult Learning Disability Services.
- 1.2 On 2 September their Report was presented to Cabinet. At the same time, the Department submitted an Improvement Plan detailing the manner in which the issues raised in the CQC Report would be addressed.
- 1.3 On 28 September the Audit and Risk Management Committee resolved that an update report be presented to that Committee in January 2011.
- 1.4 Members may be aware that the Care Quality Commission has changed its remit and will not now return to Wirral in March 2011 to assess progress against the Improvement Plan. Instead, the North West Joint Improvement Partnership will provide a monitoring function to determine how well the Council has responded to the findings of the Care Quality Commission Inspection Report of May 2010. At the time of writing, the Joint Improvement Partnership has not advised how it will conduct its assessment.

2 Milestones

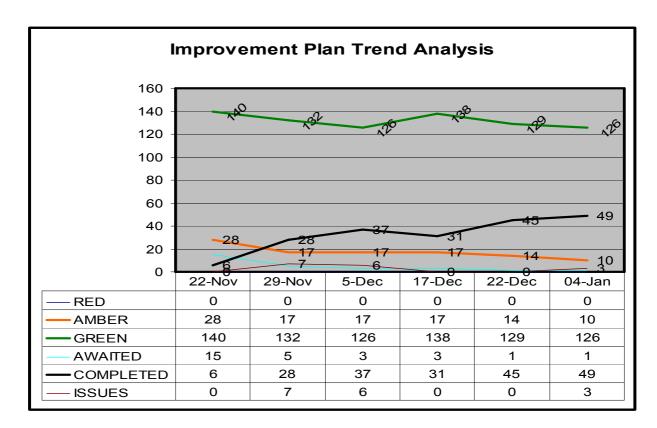
- 2.1 As Members know, Officers responsible for delivering certain aspects of the Improvement Plan have been interviewed and their assessments of the status of their Milestones have been recorded in 'Traffic Light' risk format:
 - RED are considered by Responsible Officers to be in danger of not being achieved.
 - AMBER are considered by Responsible Officers to be in danger of not being completed within the designated timescale.
 - **GREEN** are considered by Responsible Officers to be accomplished within the designated timescale.
 - AWAITED await 'traffic-light' assessment by Responsible Officers.
 - **COMPLETED** recorded with relevant evidence having been provided.

- **ISSUES** are milestones which require structural change due to unforeseen circumstances.
- 2.2 There are 189 Milestones in the Improvement Plan. As of 6 January 2010, they were assessed as follows;
 - RED 0 Milestones
 - AMBER 10 Milestones (5%)
 - GREEN 126 Milestones (66
 - AWAITED 1 Milestones (1%)
 - COMPLETED 49 Milestones (26%)
 - **ISSUES 3 Milestones (2%)** (All relate to a review of the Total Commissioning Framework currently being undertaken).





2.3 A Trend Analysis of the direction of travel in addressing the issues raised by the Care Quality Commission in their Inspection shows a positive picture. Confidence is high that all Milestones will be achieved within the timescale.



2.4 Looking ahead, all Officers responsible for the delivery of Milestones in January have expressed confidence that Milestones will be met in time.

3 Governance

- 3.1 The Monitoring Group, comprising customer and carer representatives, Chief Officers, partner agency representatives and the regional chair of the Government's 'Valuing People Now' strategy is meeting regularly, and receives update reports on a two-weekly basis.
- 3.2 Improvement Plan Update Reports continue to be presented to Cabinet. The next Report will be taken on 13 January 2011.
- 3.3 Improvement Plan Update Reports are submitted every two weeks to the Interim Executive Board. The Board comprises the Council Leader, Deputy Council Leader, interim Chief Executive, Cabinet Lead for Social Care and Inclusion and the interim Director of Adult Social Services.
- 3.4 Improvement Plan Update Reports are submitted to the DASS Improvement Plan Scrutiny sub-group for reporting into the Health and Well Being Overview and Scrutiny Committee.
- 3.5 Improvement Plan Update Reports are submitted to the Audit and Risk Management Committee.

4 Risk Assessment

4.1 Following consultation with the Council's Risk and Insurance Officer, a Risk Assessment specific to the needs of the Improvement Plan has been developed and circulated to Officers responsible for its delivery. This is available under appendix 3 within the Second Improvement Plan, which is available in the Web-Library.

5 Quality Assurance

- 5.1 Members of the Monitoring Group are being provided with key documents related to the Improvement Plan to provide a practical element of Quality Assurance. Such documents will relate to the core functions monitored by the Improvement Plan. These are predominantly:-
 - The work of the Safeguarding Adult Partnership Board;
 - The Staff Competency Framework;
 - The Case Recording Process;
 - The work of the Learning Disability Partnership Board;
 - Personal Budgets;
 - Supervision Policies and Procedures;
 - · Personal Contracts; and
 - The Communications hub.
- 5.2 Any comments made by Board Members are recorded and conveyed to the relevant Lead Responsible Officer for their consideration.

6 Financial Implications

6.1 There are no financial implications directly arising out of this report.

7 Staffing Implications

7.1 A range of issues have been addressed within the Improvement Plan to ensure that Wirral provides competent staff, who have appropriate support and training.

8 Equal Opportunities Implications/Health Impact Assessment

8.1 An equality impact assessment was undertaken on the safeguarding improvement plan which was implemented and delivered between June 2009 and June 2010.

9 Community Safety Implications

9.1 None arising from this report.

10 Local Agenda 21 Implications

10.1 None arising from this report.

11 Planning Implications

11.1 None arising from this report.

12 Anti Poverty Implications

12.1 None arising from this report.

13 Social Inclusion Implications

13.1 None arising from this report.

14 Local Member Support Implications

14.1 None arising from this report.

15 Background Papers

- 15.1 Care Quality Commission Service Inspection Report of Wirral Council (2 September 2010).
- 15.2 Adult Social Services First Improvement Plan
- 15.3 Adult Social Services Second Improvement Plan

16 Recommendations

That the Audit and Risk Management Committee notes this report on progress in the Improvement Plan for Safeguarding and Services to Adults with a Learning Disability.

HOWARD COOPER
Interim Director of Adult Social Services