People Directorate Improvement Plan
Social Work and Health
Mid-Term Report
30 September 2015

1   Introductory paragraph from Strategic Director

1.1   The mid-term report is a public facing document which demonstrably monitors and records progress against the People Directorate Plan. The Plan includes the key measures by which our improvement priorities will be judged, incorporating the targets set by national government for our statutory areas. The Plan links to the Council's objectives and targets. It represents the People Directorate's high level strategic plan and encapsulates the activity that will contribute to the achievement of our goals.

1.2   In preparation for the Integration of Health and Social Care this report covers the performance and activities which relate to adult care. A separate report will be submitted to the children and learning committee covering services for children and young people.

1.3   We continue to face a significant, transformational agenda and the innovation required to deliver it effectively. We are continuing prepare for the implementation of health and social care integration whilst undertaking significant reviews of service, most notably the help to live at home programme.

1.4   The positive focus on the vision, values and performance to date, enable us to maintain our record of delivering positive outcomes with and for the citizens of Angus.

1.5   The People Directorate supports the delivery of the following partnership priorities and local outcomes:

Partnership Priorities and Local Outcomes *Communities that are Caring and Healthy:*	Council Priorities	People Directorate Priorities
➢ We have improved the health and wellbeing of our people and inequalities are reduced ➢ Individuals are supported in their own communities with good quality services	➢ Implement Self Directed Support ➢ Integration health and social care	➢ Shift the balance of care to enable adults to remain in their own homes where this is appropriate and safe ➢ Fully implement Self Directed Support, ensuring the focus on outcomes and personalisation ➢ Prepare for, and engage fully in, the integration of health and social care
Managing Our Business		➢ Ensure that our ambitions and our resources are fully aligned

1.6   The following pages provide details of each activity with the status and trends identified.

1.7   <u>Key to status and trends</u>

Action status		**PI status**		**Long term trends**	
🛑	Overdue	🛑	Performance is below target	⬆	Improving
▶	In progress	⚠	Performance is slightly below target	➖	No change
✅	Completed	✅	Performance is on target	⬇	Getting worse
🟥	Cancelled	📊	Data only (no target)	❓	Unknown (no target)

2 Priority: Shift the balance of care to enable adults to remain in their own homes or in a homely setting where this is appropriate and safe

2.1 Actions

2.1.1

Action	Status	Due Date
We will strengthen Intensive Care at Home	🟥	30-Apr-2015

Progress as at 30 September 2015
This is now being taken forward through the Help to Live at Home Programme

2.1.2

Action	Status	Due Date
We will implement mental health accommodation strategy	▶	30-Aug-2016

Progress as at 30 September 2015
We are actively working towards implementing the accommodation strategy for MH but this will take several years. There is ongoing strategic planning meetings with colleagues from Communities and with the third and independent sectors to develop a range of suitably supported accommodation across Angus.

2.1.3

Action	Status	Due Date
We will implement the whole family approach in substance misuse	▶	30-Apr-2016

Progress as at 30 September 2015
The Whole Family Approach is being piloted and will conclude in late Nov. This will be evaluated and a stakeholder event will be staged in January 2016 with a view to proposing a new structure in June 2016.

2.1.4

Action	Status	Due Date
We will increase staff capacity and reviewing resources	▶	30-Jun-2015

Progress as at 30 September 2015
This is now complete and a review team in place to help support reviewing and implementation of SDS.

2.2 Performance indicators

2.2.1

Performance Indicator	Status	Target	2014/15 Performance	Long Term Trend
Number of people aged 75+ in residential care	📈	N/A	621	❓

Progress as at 30 September 2015
The aim of the service is to reduce the number of older people requiring care in a care home setting by maintaining people at home where it is safe to do so, for as long as possible. This indicator needs to be seen in the context of the 75 years plus population and other measures relating to care at home.

2.2.2

Performance Indicator	Status	Target	2014/15 Performance	Long Term Trend
Proportion of service recipients aged 75+ in residential care	📈	N/A	91.00%	❓

Progress as at 30 September 2015
The aim of the service is to reduce the number of older people requiring care in a care home setting by maintaining people at home where it is safe to do so, for as long as possible. This indicator needs to be seen in the context of the 75 years plus population and other measures relating to care at home.

2.2.3

Performance Indicator	Status	Target	2014/15 Performance	Long Term Trend
Number of people aged 85+ in residential care	📈	N/A	354	❓

Progress as at 30 September 2015
The aim of the service is to reduce the number of older people requiring care in a care home setting by maintaining people at home where it is safe to do so, for as long as possible. This indicator needs to be seen in the context of the 85 years plus population and other measures relating to care at home.

2.2.4

Performance Indicator	Status	Target	2014/15 Performance	Long Term Trend
% of clients who have been enabled.	📈	N/A	28.00%	❓

Progress as at 30 September 2015
The figure stated gives the number of current service users (16 years and over) who have received a period of enablement delivered by the specific enablement teams and therefore does not capture all enablement activity delivered across community care. Further work is being done to refine this measure.

2.2.5

Performance Indicator	Status	Target	2014/15 Performance	Long Term Trend
Proportion of 85+ population supported in care homes (SOA 13/16) (KPI)	✅	25.00%	22.30%	⬆️

Progress as at 30 September 2015
The percentage of 85+ population supported in care homes has reduced to 21%, surpassing the target of 25%. Supporting people to continue to live at home remains a high priority. This has been achieved despite the increase in the 85+ population.
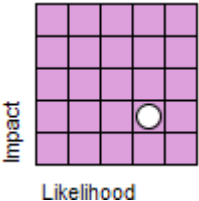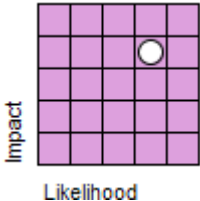
2.2.6

Performance Indicator	Status	Target	2014/15 Performance	Long Term Trend
% of people requiring no care services following enablement (SOA 13/16) (KPI)	✅	50.00%	58.20%	⬇

Progress as at 30 September 2015
The percentage of people requiring no care services following enablement has seen a drop. This continues, however, to exceed the target. The reduction is due to a number of factors related to increased complexity of need at referral and previous contact with enablement and services. A greater number of referrals to enablement already have services in place at referral. The key aim is then to ensure that any temporary additional need is addressed to return to support levels prior to referral.

2.3 **Risk**

2.3.1 No available funding to meet increasing need for learning disability accommodation.
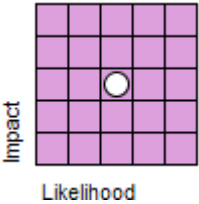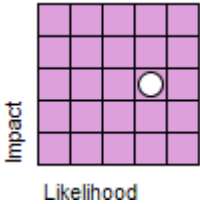
Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
Impact / Likelihood (matrix with point)	8	Impact / Likelihood (matrix with point)	16	24-Jun-2015

Commentary

Risk has been reduced because community placements and funding have been secured for several of the remaining hospital patients although 3 are outstanding. A local housing strategy group has now been established as part of the Health and Social Care Strategic Planning Network Group. This group now provides between the Angus Housing Partnerships and the Health and Social Care Strategic Planning Network and will consider how particular needs of care groups will be met.

Mitigating Actions	Status	Commentary
Further work to be undertaken to LD accommodation database detailing a breakdown of those requiring core supported housing to PMLD, Autism and Forensic requirements detailing communal facility needs or not.	✅	This will establish numbers for client specific core supported housing requirements in locality areas.
Keys to Life implementation group to complete engagement with stakeholders to establish local priorities regarding the national strategy and produce work plan.	✅	Comprehensive engagement completed with all stakeholders indicating clear priorities across all locality areas in Angus.
New accommodation plan devised for both accommodation and care and support identifying the costs of current and future accommodation needs and obtaining official approval	🟥	Funding was linked to Learning Disabilities Accommodation Strategy which was removed from Committee in Green Paper status. Housing Plan for People with Learning Disabilities in Angus is now being progressed through the national strategy Keys to Life.
Fund stream identified for accommodation and core support needs	✅	Funding was linked to Learning Disabilities Accommodation Strategy which was removed from Committee in Green Paper status. Housing Plan for People with Learning Disabilities in Angus is now being progressed through the national strategy Keys to Life.

2.3.2   Learning Disability hospital patients

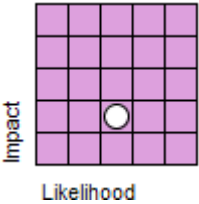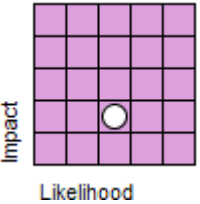| Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
	9		12	08-Oct-2015

Commentary

This relates to historical cases requiring resettlement from Strathmartine Hospital of which only 3 remain. Placement identified for 1 person and progressing. Suitable placements for 2 still to be identified.

Mitigating Actions	Status	Commentary
Legal advice obtained clarifying health legislative responsibilities and Local Authority legislative responsibilities and duties.	▶	To include risks to Council relating to judicial review and advice on risks of not meeting this need.
Multi agency meetings arranged for each individual with (local authority, health, offender management, police and government ministers), to agree accommodation model, staffing model, environmental factors and risk management plans.	✓	Multi agency meetings held and risk management plans in place.
Joint funding agreed between health and social work for care and support.	✓	Via resource transfer or decision support tool dependant on individual
Funding streams identified for care and support costs	✓	Funding splits have been agreed for any LD cases identified.
Funding streams identified for accommodation costs	✓	Funding was linked to Learning Disabilities Accommodation Strategy which was removed from Committee in Green Paper status. Housing Plan for People with Learning Disabilities in Angus is now being progressed through the national strategy Keys to Life.
Placements identified or accommodation build proposed.	▶	This relates to 3 historical cases requiring resettlement from Strathmartine Hospital. Placement identified for 1 person and progressing. Suitable placements for 2 still to be identified.
Agreement obtained from relevant ministers re placement proposals.	🟥	This relates to 1 historical case to be resettled from Strathmartine Hospital who requires approval from a government minister. Awaiting response from Legal Counsel. Suitable placements still to be identified. Government minister has been involved in Mental Health Tribunal.

2.3.3 Reduced MHO capacity with increased demand – Underserviced for the size of the Council.
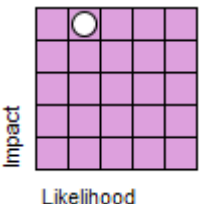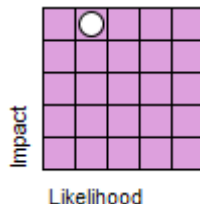
Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
Impact / Likelihood	6	Impact / Likelihood	6	09-Jul-2015

Commentary

Due to all actions being undertaken and fulfilled this risk has now moved from a score of 16 to the appetite score of 6.

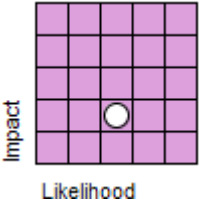| Mitigating Actions	Status	Commentary
Report to be presented to SMT on the nature of the problem and solutions.	✓	Report presented to SMT prior to 31 March.
Capacity has been increased.	✓	Report presented to SMT prior to 31 March.
Actively seeking recruits from a broader section of the Council.	✓	Report presented to SMT prior to 31 March.

2.3.4 Protecting vulnerable people in the community
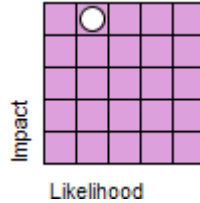
Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
Impact / Likelihood	10	Impact / Likelihood	10	30-Sep-2014

Commentary

Adult Services - Review completed. Changes did impact adversely on performance but now staffing situation resolved and remedial work concluded.

Mitigating Actions	Status	Commentary
Formally review impact of staff changes on meeting local and national AP standards.	✓	Review completed. Changes did impact adversely on performance but now staffing situation resolved and remedial work concluded.

2.3.5 Delivery of enablement agenda

Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
Impact / Likelihood matrix	6	Impact / Likelihood matrix	10	30-Sep-2014

Commentary

There is difficulty in moving service users on from the enablement teams to providers who will continue to deliver the personal care required. The lack of availability of providers means that enablement teams are delivering a high number of mainstream hours and enablement teams are not operating as effectively as they could .

Mitigating Actions	Status	Commentary
Actions to be identified	🔴	Actions to be identified

3   Priority: Fully implement Self Directed Support, ensuring the focus on outcomes and personalisation.

3.1   **Actions**

3.1.1

Action	Status	Due Date
We will complete the phased implementation of Self-Directed Support		30-Sep-2014

Progress as at 30 September 2015

We have completed, tested and implemented the adult supported self-assessment, the carer's assessment, the resource allocation system, the support plan and the service request form. All of these are contained within the CareFirst system recorded under the client record. We have implemented all of the new processes in Brechin/Montrose initially with a view to rolling this out across the Council. We are continuing to develop and expand our blended learning in response to experience to date. Work is on-going in relation to children's services.

3.1.2

Action	Status	Due Date
We will work with service users, partners and care providers to ensure that personalisation and choice is available		31-Mar-2016

Progress as at 30 September 2015

The majority of service users are choosing Option 3 where they wish the local authority arrange their support. The provider framework has been in place since February 2015 . Providers are selected on the basis that they can meet the individual's outcomes and provide best value.

3.1.3

Action	Status	Due Date
We will adapt our method of commissioning services in light of the Self-Directed Support options chosen		30-May-2016

Progress as at 30 September 2015

Providers are selected on the basis that they can meet the individual's outcomes and provide best value. This represents a move from block contracts to spot purchase of service. Providers who are not on the framework may be chosen under Option 2 and work is underway to adopt a proactive approach to evaluating such providers in advance of selection by service users. The need to stimulate the market to encourage greater availability of provision will be a strand of the Help to Live at Home project.
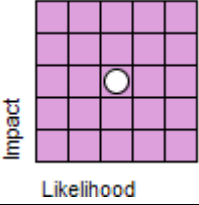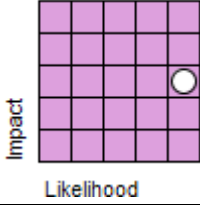
3.1.4

Action	Status	Due Date
We will complete a service review to identify and assess alternative service delivery models for in-house residential and community care services		30-Apr-2015

Progress as at 30 September 2015

Taken through Help to Live at Home Project

3.2 **Risk**
3.2.1 Self-directed support - Failure to create fluid budget.

Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
	9		15	30-Sep-2014

Commentary
Block contracts are being moved to a spot purchase agreement in order to create fluidity in the budget.

Mitigating Actions	Status	Commentary
Actions to be identified		Actions to be identified

4   Priority: Move to embed integrated teams to deliver seamless pathways of care

4.1   Actions

4.1.1

Action	Status	Due Date
We will integrate Health and Social Care Services and establish a locality model in Angus	▶	31-Mar-2016

Progress as at 30 September 2015
Integration scheme submitted for approval March 2015. Locality model developed and awaiting implementation of Strategic Plan in Autumn 2015.
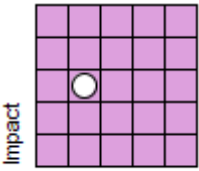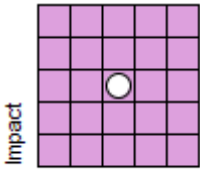
4.1.2

Action	Status	Due Date
We will revisit the business case model for the logistics hub in relation to the integration of Health and Social Care and Self-Directed Support and best value	▶	31-Jan-2016

Progress as at 30 September 2015
An options appraisal was presented to committee in Autumn which two choices were asked to be further investigated. These are currently been looked into and will be reported back to committee in Winter 2015.

4.2   Risks

4.2.1   Health and Social Care Integration - Slippage on implementation plans

Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
Impact / Likelihood	6	Impact / Likelihood	9	30-Sep-2014

Commentary

Mitigating Actions	Status	Commentary
Regular briefings with elected members on the Shadow Board	✔	Admin members have been kept abreast of developments. There has also been two inputs to elected members. A briefing is in place to sign off the Integration Scheme and identify members of the new Board: Integrated Shadow Board
Regular meetings with the Interim Chief Officer	✔	
Improve quality of challenge at Project Board	✔	

5 Priority: Restructure Criminal Justice Services in line with national policy

5.1.1

Action	Status	Due Date
We will establish a transition planning group to manage the transition from TCJA to Community Planning/ Council services	✅	30-Apr-2015

Progress as at 30 September 2015
Scope and remit of review has been agreed and will now be progressed

5.1.2

Action	Status	Due Date
We will revisit the need for premises in Forfar for CJS near to the Sheriff Court	✅	30-Apr-2015

Progress as at 30 September 2015
None to report

5.1.3

Action	Status	Due Date
We will review the current ratio of qualified to unqualified staff in the service	▶	30-Apr-2016

Progress as at 30 September 2015
Scope and remit of review has been agreed and will now be progressed

5.1.4

Action	Status	Due Date
We will revise management arrangements for unpaid work	▶	30-Apr-2016

Progress as at 30 September 2015
Currently ongoing

5.1.5

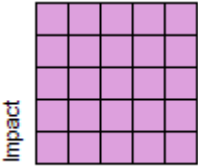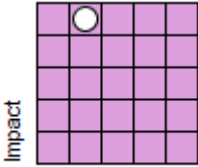| Action	Status	Due Date
We will review the need for the continuation of the Glen Isla Project for women offenders	✅	30-Apr-2015

Progress as at 30 September 2015
A formal request for a standalone Angus AST has been lodged with Children's Hearings Scotland. A response is currently awaited

5.2 Risk

5.2.1 Managing potentially dangerous service users in the community

Risk Appetite	Appetite Score	Current Risk Matrix	Current Risk Score	Date Risk Reviewed
Impact / Likelihood		Impact / Likelihood	10	30-Sep-2014

Commentary

Well established systems and processes in place to monitor know offenders.

Mitigating Actions	Status	Commentary
None		