DUDLEY METROPOLITAN BOROUGH COUNCIL

GOOD HEALTH SELECT COMMITTEE - 6th July 2005

REPORT OF THE DIRECTOR OF SOCIAL SERVICES

Social Services Performance

1.0 PURPOSE

1.1 For the Good Health Select Committee (GHSC) to scrutinise the performance of the Social Services Directorate.

2.0 BACKGROUND

- 2.1 Scrutinizing the performance of the local health and social care community is an important activity of the GHSC and the Council's Social Services Directorate (SSD) is a key contributor within the local community.
- 2.2 The contents of this Report present two over-arching up-dates on SSD performance:
 - Directorate Improvement Plan (DIMP) 2003-2007
 - Commission for Social Care Inspection Performance Assessment Framework (PAF.)

GHSC may also wish to note that they have other opportunities throughout the year to scrutinize Social Services performance in general e.g. following the submission of the Directorate Delivery and Improvement Statement (DIS) and Children's Annual Performance Assessment as well as any specific policy developments.

- 2.3 <u>Directorate Improvement Plan (DIMP) 2003-2007</u>
- 2.3.1 The DIMP was developed in response to the report of the Joint Review of the Social Services Authority agreed and endorsed by the Executive in February 2003 when implementation began. It has 52 objectives and 226 actions across all the Directorate's activity.
- 2.3.2 The implementation of the DIMP is monitored by the Directorate Management Team (DMT) through the Directorate Quarterly Performance Report. The GHSC also received and commented on an up-date of the DIMP implementation in November 2004 (see Appendix 1). Since then, the Directorate has continued to make good progress on the implementation of the DIMP:
 - 24 (36%) actions were completed out of the outstanding 67 actions

- 6 (24%) out of the outstanding 25 objectives were completed
- 2.3.3 The DIMP is a four-year plan and to date the Directorate has made steady progress and has already completed 30 (58%) of its objectives and 177 (78%) of the actions as shown in Appendix 1. Some achievements within each of the five DIMP Objectives include:

Resources and Resource Management:

Objective 1.8: Funding has been secured for a range of schemes e.g.

- BC4 Dudley MBC is the Contracting Body in an extended partnership of Black Country care providers and Social Services Directorates to improve the skill levels of home carers in commissioned services working with older people commenced in April 2004. Funding has now been agreed for the employment training programme, 'Train To Gain' (follow-up to BC4 project)
- Caring for Kids Dudley MBC is the Contracting Body in an extended partnership of Black Country care providers and Social Services Directorates to improve the skill levels of carers in commissioned services working with children and their families commenced in April 2004. The ESF is now co-financing funding for 'Caring for Kids 2'
- Learning Disabilities Day Opportunities a small partnership involving the Black Country Museum providing training and work opportunities for adults with a Learning Disability as part of a European Social Fund (Regional Puissance) scheme commenced in June o4. Funding of this has now been extended to October 2006.
- Learning to Care. Dudley MBC SSD is a 'junior partner' in this scheme (led by Sandwell MBC.) The scheme aims to extend a scheme which creates employment opportunities in the social and health care sector by 'hard-to-reach' groups across the Regeneration Zone. Dudley's partners include DELL (who now lead the scheme), Dudley College and Dudley South PCT.
- Extra Care Learning Disabilities. Funding has been agreed to provide four units of Extra-Care Housing in partnership with the Housing Directorate.
- Dudley SSD was the Contracting Body for Round 1 on behalf of the Black Country Partnership for Care (BCPC) to begin support development of Induction, RMA's, NVQ Assessor and Mentor qualification. Further TOPPS funding has been agreed.
- Keep Children Safe Barnardo's. Funding has been agreed for the 'Stop it Now' scheme.

Service Delivery:

- We have achieved 75% of the reduction of in-house Domiciliary Care target (Objective 2.10). The Care Home strategy is being reviewed to incorporate market capacity issues, which have impacted on the objective.
- The range of day opportunities has increased 25% of the Service is now provided outside of Day Centres. (Objective 2.4.1)
- The use of MPV vehicles is being investigated to provide improved access and flexibility for community based services. (Objective 2.4.1)
- The number of tenancies of flats available via the Housing Directorate has increased (to up to 10). The type of accommodation that can be provided has widened, which means that the differing needs of care leavers can be taken into account.
- There is now an agreement with Supporting People to use a Housing support worker as floating support (not tied down to a particular accommodation), which gives much more flexibility to use support where it is needed. The Leaving Care Forum is becoming a more pro-active and influential group. (Objective 2.9)

User and Carer Engagement:

- A Carers Forum has been established to improve feedback. (Objective 5.4)
- The council has adopted the HEAR by Right Standards. A Corporate Consultation Database is now in operation. (Objective 3.2.1)
- The Consultation & Participation Strategy is being reviewed and the actions implemented through the Quality Improvement Group. (Objective 3.2.1)

Business Management:

- A Capital Strategy is in place together with an Asset Management Plan and Office Accommodation Strategy. Processes and structures are in place to support the effective management of the property portfolio in partnership with Dudley Property Consultancy. (Objective 1.9)
- Business Planning processes are in line with Corporate requirements. The
 Directorate has played a lead role in progressing this area of work within
 the Council. (Objective 4.4)

• Regular programmes of equality and diversity training are provided for staff and managers. Attendance figures are reported to the Equality and Diversity Steering Group. (Objective 3.6.)

Commissioning:

- The SLAs the in Voluntary and Community Sector have been revised and are nearing the completion of the final draft. (Objective 5.4)
- The Procurement Manual is in place and meeting all the requirements of Internal Audit. The Manual was launched at a meeting, dedicated to the subject of Procurement, of all senior Managers in the Directorate. (Objective 5.5)
- 2.3.4 As might be expected with such a wide-ranging plan, there have been factors which have affected the ability of the Directorate to deliver on some of the objectives as quickly as it might have hoped e.g.
 - CHADD and the PCT have agreed the sale in principle of Kings Road, but the sale and the work with residents on the transfer to supported housing, cannot proceed until the building work has been completed and agreed by CHADD's surveyor. The PCT has agreed to fund this and work has now commenced. (Objective 1.6)
 - There has been some slowing down of progression recently in extending the range of day opportunities due to severe staffing difficulties. (Objective 2.4.1)
 - External market has not yet got enough capacity to take on additional inhouse domiciliary care. Therefore the Directorate has only achieved 6% reduction rather then the target of 8% but this is being progressed.
 (Objective 2.10)

2.4 Department of Health Performance Assessment Framework (PAF)

- 2.4.1 The PAF is a national framework of 50 Performance Indicators (PI's) for social care of adults and children determined by the Department of Health (DH) and the Department for Education and Skills (DfES.) The outcome of the Framework is an important contributor to the overall assessment of the Authority's Social Services function through which the Directorate has maintained its "Two-Star" rating over the last two years. Each of the PI's is scored on a scale of one-to-five "blobs." One "blob" usually indicates poorer performance and five "blobs" generally indicating better performance.
- 2.4.2 Appendix 2 gives more detail in two separate parts, one for children's services and one for adults on all the PI's but examples of good performance by the Directorate include:

- PAF C20 Reviews of Child Protection cases moved from three "blobs" 2003-04 to five in 2003-04;
- PAF A3 Re-registrations on the child protection register from 4 "blobs" 2003-04 to five in 2003-04;
- The Adults Services PAF indicators performance overall has been consistently good to excellent, no indicators under 3 "Blob " banding;
- Consistently achieved good performance in Best Value indicators 2004-05 (83% 3 "blobs" or above;)
- Achieved all the Key Threshold Indicator thresholds;
- The average PAF indicator "blob" rating has improved on last year, of the total indicators banded for this year 88% are three "blob" rated or above.
- 2.4.3 There are areas in which the Directorate and the Authority are working to improve to performance e.g.
 - PAF C 24 Children Looked After Absent from school is currently a 2 "blob" rating compared to a one "blob" rating in 2003-04 which is a slight improvement. Although this is an improvement there is still work to be done to improve performance.
 - PAF D35 Long term stability of children looked after 2003-04 is a 2 "blob" rating and has remained the same for this year. There are improvement plans in place and include improvements to the fee-paid fostering scheme and parity for caring relatives as well as identifying additional resources to increase numbers of long-term carers.
 - PAF C23 Adoptions of Children Looked after The 2 "blob" rating for 2003-04 rating has remained the same for 2004-05. Action plans include continuing to develop the "Adoption in the Black Country" recruitment project and the adoption support services with the intention of improving our ability to recruit prospective adopters.
 - PAF A4 Employment, education and training for care leavers has improved slightly from 1 "blob" in 2003/04 to two "blobs." Improvement plans include ensuring young people in Year 10/11 receive the advice and guidance around realistic training/employment options; ensuring that all young Looked After young people leave Year 11 with a plan for Year 12. In addition, suggestions for the development of training schemes using external funding are being assessed.

3.0 PROPOSALS

3.1 That the GHSC comment on the performance of the Social Services

Directorate as a major contributor the local health and social care community.

4.0 FINANCE

4.1 This Report gives the GHSC opportunity to reflect on how the Social Services Directorate and the wider Authority are using their resources to help local people who may need social services.

5.0 LAW

5.1 The Council may do anything incidental to, conducive to or which facilitates the discharge of its functions under section 111 of the Local Government act 1972 which would include the preparation of a strategic plan being incidental to its welfare function.

6.0 EQUAL OPPORTUNITIES

6.1 This is an 'overall' report of the performance of the Social Services Directorate and Authority. This performance should reflect in all its services the values and policies of the Council including equal opportunities.

7.0 RECOMMENDATIONS

7.1 That the GHSC comment as proposed in para. 3.0.

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Appendix 1

<u>Directorate Improvement and Modernisation Plan Progress Report</u>

	Acti Obje	No. of ons/ctives	Progress March to October 2004							Progress April 2005						
			Objectives			Actions				Objectives			Actions			
Division	Objectives	Actions	Complete	Removed	Outstanding	Complete	Removed	Additional	Outstanding	Complete	Removed	Outstanding	Complete	Removed	Additional	Outstanding
Business Services	17	82	10 (59%)	0	7	59 (72%)	4	2	21	3 (43%)	0	4	9 (43%)	0	0	12
Older People/ Physical Disabilities	12	54	4 (33%)	0	8	38 (70%)	0	0	16	1 (13%)	0	7	8 (50%)	0	0	8
Learning Disabilities/ Mental Health	6	25	1 (17%)	2	3	14 (56%)	9	7	9	0	0	3	1 (11%)	2	0	6
Children & Families	17	65	9 (53 %)	1	7	42 (65%)	2	0	21	1 (14%)	0	6	2 (10%)	3	0	16
Overall Total	52	226	24 (46%)	3	25 (48%)	153 (67%)	15	9	67 (30%)	6 (24%)	0	20 (38%)	20 (30%)	5	0	42 (63%)