## QUARTERLY MONITORING REPORT

DIRECTORATE: Social Care, Housing & Health

SERVICE: Policy & Support

PERIOD: Fourth Quarter to year-end 2005.

## 1.0 INTRODUCTION

This Monitoring Report covers the Policy and Support fourth quarter period up to year-end 31 March 2005. It describes key developments and progress against all objectives and performance indicators for the service.

Given that there are a considerable number of year-end transactions still to take place a Financial Statement for the period has not been included within this report in order to avoid providing information that would be subject to further change and amendment.

The way in which traffic light symbols have been used to reflect progress is explained within Appendix 5.

## 2.0 KEY DEVELOPMENTS

## **Direct Payments**

The number of service users accessing Direct Payments continues to rise. At 31st March 05 the total was 186, an uptake of 21 in the last quarter. Halton are now the best in the North West Region and ranked 8<sup>th</sup> best in the country for the number of people accessing direct payments. The project funded by the Section 64 Direct Payments Development Fund is well underway, and Halton Borough Council are working in partnership with Halton Disability Services to promote the uptake of Direct Payments in Halton. To date, Halton Disability Services has received 40 enquiries in total, 38 referred to them by Halton Borough Council.

The Pilot project for the purchase of equipment via Direct Payments is available, as yet there have been no referrals.

## **Human Resource Development**

- Stakeholder Strategy Stakeholder Involvement Toolkit has been completed and is available for use.
- Race Relations (Amendment) Act All Equality Impact Assessments have been completed.
- Directorate Communications Strategy Is now available for use.
- Workforce Planning Directorate Workforce Plan completed.

- Stress Risk Assessments Majority of risk assessments completed.
   Currently looking at common themes.
- General Social Care Council Approach to ensuring the Directorate is compliant with the codes of practice agreed with Personnel. Plus guidance distributed to social workers regarding re-registration requirements.
- Exit Interviews Analysis completed Jan-Oct'04 and revised Exit interview policy distributed to managers.
- Directorate Recruitment & Selection Policy Currently being reviewed.
- Children Services Recruitment and Retention Strategy 2003 strategy reviewed and updated
- Protection of Vulnerable Adults Scheme Guidance completed and distributed to manages with regards to making referrals.
- Directorate's Personal Safety Policy Work being completed on an associated mobile phone policy.
- Overseas Recruitment Feasibility of overseas recruitment being explored
- Home working Policy Contributions made to the development of a Corporate Home working Policy
- Employment of Agency Workers Policy, Procedure and Practice guidance drafted.
- North West Recruitment and Image Website Contributed to website development; website went live January 2005
- College Visits College visits to speak to Social Work students took place in February 2005

## **Planning and Strategy Issues**

The draft of the Stakeholders Involvement Toolkit, complimenting the SCHH Stakeholder Involvement Strategy, was launched in the last quarter to fit into the business planning process for the coming year.

The strategy and toolkit are to be used to develop a Corporate Community Engagement Strategy and Toolkit, which will be shared and developed with other statutory and voluntary sector partners in the borough. This process was launched at an event held at Halton Stadium on 5<sup>th</sup> April and the process in intended to be completed by Autumn 2005.

The development of a database to record involvement exercises undertaken and planned by all partners is to be explored. It may include key information about the various partners, and their areas of expertise, to help identify opportunities to share in engagement exercises.

## **Information Technology**

Citrix: Of the total 473 staff, all have now been provided with a full Citrix desktop, apart from approx 10 who have been unavailable. Every user identified as needing a terminal has been provided with one, apart from 15, which require installation when internal moves etc have been completed.

E'forms project: The three IT staff have been appointed and the project is progressing in accordance with the Project Definition Document and the Project Plan.

E'government Priority Outcomes: Work has commenced on addressing the six Priority Outcomes identified for SCHH to take the lead. These might be re-routed as a result of the recent Directorate restructuring.

## **Supporting People**

Due to the difficulties appointing a further temporary Service Review Officer, the contract for one of the Review Officers has been extended for a further six months.

The Supporting People 5-Year Strategy has been agreed by Executive Board and the Commissioning Body and was submitted to ODPM at the end of March.

Research into service provision for teenage parents and young people at risk has been completed and the report submitted. This document will inform the commissioning of appropriate services for these client groups.

The tendering process for a new support provider at Belvedere, Runcorn (a scheme for single homeless people) has been completed and a contract awarded. This will ensure continuity of service for this vulnerable group.

## 3.0 EMERGING ISSUES

## **Human Resource Development**

- Protection of Children Act (POCA) Guidance to be drafted with regard to referring staff onto the POCA List
- National Minimum Data Set Major implications for the Directorate and its voluntary/independent agencies with regards to the collection of workforce information.
- Workforce Information Discussions taking place with Personnel about the use of the Corporate system i.e. Delphi.
- Staff Supervision Policy To be reviewed
- Directorate Job register To be reviewed and updated
- Workforce Plan Implementation and monitoring of the Workforce Plan

- Home working Policy Once policy agreed, implement via the use of a pilot group
- Children Services Recruitment and Retention Strategy Implement recommendations.

## Information Technology

Information Technology. The requirement to provide an Electronic Social Care Record (ESCR) by October 2005 will now have to be met using existing Anite "Images @ Work" software as the corporate solution will not be available in time. Indications from other authorities are that the majority will be only looking at delivering pilot systems. This is the least that will be achieved within Children's and Young People and Health and Community Directorates.

## **Supporting People**

An uplift of 2.5% for current year 2005/06 has been agreed for all providers whose unit costs are below the national average.

Supporting People is in the process of producing a service specification, in conjunction with Foundations, to develop the in-house Care and Repair Agency.

Steady State Contracts are being developed in partnership with the Contracts Section for issue to all Halton Supporting People Providers.

## **Support Services**

Discussions about which specialist services will be re-tendered is ongoing with Divisional Managers, Commissioning Managers and Operational Teams with new specifications drafted to be subsequently re-tendered.

## 4.0 PROGRESS AGAINST KEY OBJECTIVES / MILESTONES



The majority of 'key' objectives have been achieved and additional details are provided within Appendix 1.

## 4.1 PROGRESS AGAINST OTHER OBJECTIVES / MILESTONES



Again the majority of the remaining objectives for the service have been met and additional details are provided within Appendix 2.

#### 5.0 SERVICE REVIEW

## **Direct Payments**

The Direct Payments scheme is currently being scrutinised by members.

Information leaflets about the Direct Payment Scheme and Halton Disability Services have been sent out to all clients in Halton who are in receipt of a Community Care package.

## **Supporting People**

The Audit Commission Action Plan has been updated to indicate progress made against recommendations. This information will be submitted to the Audit Commission.

## 6.0 PROGRESS AGAINST KEY PERFORMANCE INDICATORS



Details concerning progress against key indicators are provided within Appendix 3.

#### 6.1 PROGRESS AGAINST OTHER PERFORMANCE INDICATORS



Details concerning progress against the remaining indicators for the service are provided within Appendix 4.

#### 7.0 PROGRESS AGAINST LPSA TARGETS

There are no LPSA Targets for the Policy & Support Department.

## 8.0 APPENDICES

Appendix 1 - Progress against Key Objectives/Milestones

Appendix 2 - Progress against other Objectives/Milestones

Appendix 3 - Progress against Key Performance Indicators

Appendix 4 - Progress against other Performance Indicators

Appendix 5 - Explanation of Traffic Lights

## **Progress against Key Objectives within Service Plan**

| Service<br>Plan Ref. | Objective  | Key Milestone  | Progress<br>year-end | Commentary  |
|----------------------|--|--|----------------------|---|
| FS1                  | To assist all of the people who use our services to maximise income, reduce the effects of poverty and ensure that they receive quality services.  | To have monitored and reviewed targets specified within the Fairer Charging Policy  To have reviewed the effects of the Fairer Charging Policy | ○ ○   ★              | The Fairer Charging Policy was reviewed as a result of which The Welfare Rights Service regularly reports statistics on Fairer Charging to the Divisional Manager responsible. The Fairer Charging element of the service has been integrated with the staff from the Department of Work and Pensions in order to reduce the need for duplicate visits and information in the future. Fees and charges for services in 2005/06 were reviewed when Divisional Manager submitted a report to Executive Sub committee outlining the recommendations. |
| FS5                  | In partnership with colleagues in Corporate and Directorate IT, prepare and implement an action to deliver subsequent phases of CareSupport to meet government requirements                                      | Project plan developed and resources identified to deliver plan  | <b>○</b>             | All modules and releases provided by OLM have been installed, tested and are now live.  |
| CSP1                 | To develop & implement partnerships with Health, Probation, Service users, Carers and Providers to develop and implement Halton's 5yr Supporting People Strategy to meet the needs of vulnerable people locally. | Produce draft 5yr strategy by<br>Aug 04<br>Submit agreed strategy to<br>ODPM by November 04  | o                    | Final Strategy submitted to ODPM at end of March 2005.  |
| FS9                  | To extend the Citrix Thin Client project to include SAN (Storage Area Network) and Active Directory developments.  | Implement Active Directory following project plan. Implement SAN following project plan  | <b>∞</b>             | A full Citrix desktop has now been provided to all but approx 10 of the staff from the old SCHH Directorate.  |

| Service<br>Plan Ref. | Objective  | Key Milestone   | Progress<br>year-end | Commentary   |
|----------------------|--|---|----------------------|--|
| CSP10                | Directly engage service users, carers and other stakeholders in planning local service delivery priorities and policy development            | Strategy completed and implemented  | oo <u>*</u>          | Strategy & toolkit completed and in place  |
| CSP11                | To commission & develop a range of services available to carers in conjunction with operational services                                     | Contracts reviewed with voluntary agencies  Carers centres opened and operational  In-house funding allocation reviewed  Voucher scheme piloted | •<br>•               | Voluntary agencies complete quarterly reports detailing expenditure and use of carers grant.  Both centres fully operational receiving 2194 visitors of whom 962 were carers in 2004/05. Runcorn carers centre has now improved access for people with a disability.  Carers in house internal funding has been reviewed. Carers grant is routinely monitored and reported on the DIS.  The successful pilot with ALD will be continued into 2005/06 and expanded to Older People and PSD services |
| CSP12                | Through the Directorate's HR strategy and action plans ensure staff at all levels within the organisation understand their responsibilities. | A review report made available establishing if staff understand their responsibilities  | •<br><b>★</b>        | Priorities outlined on Directorate Human Resource action plan have been completed  |
| CSP13                | To appoint a joint commissioning manager in Older People and Mental Health Services, supported by a Joint appointments protocol              | Joint Commissioning<br>Managers in post   | oo <b></b> *         | Joint Commissioning Manager for Older People & Mental Health Services now in post.   |
| FS16                 | Framework for a three year financial strategy to match funding to changing service requirements and integrate into                           | Automatic coding of expenditure and income against correct cost centre  | oo <b></b>           | Initial issues with payroll coding now resolved.   |

| Service<br>Plan Ref. | Objective Key Milestone  |  | Progress<br>year-end | Commentary  |
|----------------------|--|--|----------------------|---|
|                      | the mid year base budget review and budget setting process.  | through Aggresso.  Budget constructed around service developments for coming year.                                   |                      | Successfully completed on schedule. Comprehensive analysis of budget pressures and service developments, compiled and priorities and integrated into the mid year base budget review and budget setting process |
| CSP22                | To review and develop a local housing strategy, in partnership with stakeholders, that meets the needs of the Borough and contributes to the delivery of the Council's strategic priorities. | New 3-year strategy agreed.  "Fit for purpose" rating achieved.  | * 00                 | Feedback from GO-NW was that the Strategy was close to reaching the require standard. Final amendments are in the process of being made before re-submission to GO-NW.  |
| CSP25                | Develop agreed approach through negotiation with RSLs to the funding of housing adaptations to provide better service for clients.   | Current policy and practice within various RSLs established. Negotiations commenced to seek agreed funding approach. | <b>*</b> ∘∘          | Following a process mapping exercise, an action plan has been agreed which will be implemented in stages over the next year.  |
| CSP27                | Establish Home Improvement Agency  | Supporting People funding secured.   | *00                  | Supporting People funding has been secured.   |
|                      |  | Establishment agreed and staff recruited.  |                      | The new staffing establishment has been approved but recruitment to new posts is proving difficult.   |
|                      |  | Service level agreements developed with partner agencies   |                      | A contract has been agreed between SCHH and Age Concern for the services provided by their Handy Person Service.  |

# **Progress against other Objectives within Service Plan**

| Service<br>Plan Ref. | Objective  | Key Milestone   | Progress<br>year-end | Commentary   |  |
|----------------------|--|---|----------------------|--|--|
| FS2                  | Ensure that all current debt is monitored and reviewed and that appropriate action is taken as specified within the debt recovery policy.  | To manage all debts as outlined within the Debt Recovery Policy. Monitor and review performance information  Implement Agresso and provide informative invoices to all of the people who use our services.    | **                   | All debt is monitored and managed appropriately. Meetings are held with sundry debtors and Legal Services to monitor ongoing debt issues. The debt recovery system has been the subject of an internal audit and further actions have been identified. Debt with Halton PCT continues to be actively pursued.                                    |  |
| FS3                  | Ensure that the appointee and receivership services operating within the Borough comply with Best value principles and provide an efficient and effective service to those that need them.   | To have reviewed Appointee and receivership services in line with Best Value principles and made recommendations for implementation  Implement recommendations  | Refer<br>comment     | A Best Value review of Appointee & Receivership services was proposed to the Executive Board in March 2004 who rejected the recommendation.  Key Milestone Deleted   |  |
| FS4                  | To work with Health and social care professionals and other voluntary organisations to increase the number of people using Direct payments to purchase services. Ensuring that the appropriate support, advice and information is given to all potential and existing Direct Payment Scheme users. | To have developed a bid in conjunction with a local voluntary organisation to secure additional funding under Section 64 to provide promotion, advocacy and payroll services for Direct Payment Scheme users. | 00♣                  | Halton Disability Services are now providing a Payroll service for the Direct Payment Scheme. Advocay Service and information is also available. Promoting Direct Payments has also been implemented. Halton are now ranked 8 <sup>th</sup> in the country and best in the North West Region for the number of people accessing direct payments. |  |

| Service<br>Plan Ref. | Objective  | Key Milestone  | Progress<br>year-end                        | Commentary  |
|----------------------|--|--|---|---|
| FS6                  | Investigate opportunities to develop system links to partner agencies and providers.   | Complete survey of providers IT capability   | <b>○○</b>                                   | Survey completed by SP Contractor.  Awaiting release of Phase 3 software from OLM, no date.   |
| FS7                  | Conduct system audit to establish CareSupport compatibility with the nationally developed 'Hub' services.  | System audit completed   | *00   | Compatibility cannot be checked until release of Phase 3 software from OLM, no date.  |
| CSP2                 | Develop and produce client specific accommodation strategies.  | Accommodation strategies for Adults with Learning Difficulties, Older People and People with Mental Health Complete. Resources obtained to deliver accommodation strategies for people with a physical sensory disability and people who substance misuse. | **<br>• • • • • • • • • • • • • • • • • • • | Accommodation strategies for Young People with Learning Disabilities complete. Strategic group established to implement the strategy. Completion of accommodation strategy for Mental Health is in the work plan for 05/06, no further progress made from last year. Older People Accommodation strategy draft completed. Funding has been secured by PSD to build three bungalows for clients with Physical or Sensory disabilities. PSD are working alongside the housing trust to identify land areas for the bungalows to be built. |
| CSP3                 | Develop and implement Halton's SP Communications Policy to promote service user and carer participation in all aspects of service delivery and service development | A Communication sub-group of the Supporting People Core Strategy Development Group will be operational.  A directory of SP services in Halton will be developed and produced.  Communication Strategy will be completed or inclusion in the 5yr strategy.  | <b>○○</b>                                   | Communication Sub-Group operational.  Final Directory of Supporting People Services is completed.   |

| Service<br>Plan Ref. | Objective  | Key Milestone   | Progress<br>year-end | Commentary   |
|----------------------|--|---|----------------------|--|
| CSP4                 | To develop an annual financial plan, which can deliver the Supporting People strategic objectives as set out in the 5yr strategy and achieve a balanced budget | Financial plan in place   | oo <b></b>           | Financial Plan submitted to ODPM with 5 Year Strategy at end of March 2005.  |
| CSP5                 | Establish and carry out the Yr 2 SP review programme.  |   | *<br>0<br>0          | Service Review timetable is completed and reviews are underway.  |
| CSP6                 | To develop 'steady state' Supporting People contracts and client specific service specifications which focus on outcomes for service users.                    | A Service Review and Contracting sub-group of the Supporting People Core Strategy Development Board will be operational | <b>*</b><br>○ ○      | Steady State Contract being developed within the Northwest Contract Officers Group.  |
|                      | To develop Generic Integration solutions to enable sharing of information electronically between partners  | Develop an Implementation plan for Generic Integration. Pilot remote working for Social Workers.                        | oo <b>∳</b>          | Solution is being provided by the e'forms project, which is currently on schedule to provide an integration solution, and forms will be available for testing by SW's before July 2005.  |
| FS10                 | To ensure Caldicott principles are implemented and support controlled information sharing.   | Continue to implement the 18 audit points from the Caldicott Implementation Plan  | 00★                  | The requirement to report on implementation of Caldicott guidelines has been removed from the DIS and it is intended to be superseded by Information Governance. The Caldicott Officer has taken a secondment opportunity so it is anticipated that progress will take a dip until a replacement can be appointed and trained. |
| FS11                 | To work on developing IT solutions, which will enable delivery of services, electronically in support of the e-Government agenda.                              | Achieve e-government target by December 2004.   | oo <b></b> *         | E'government target for electronic delivery of services achieved by December 2004.   |

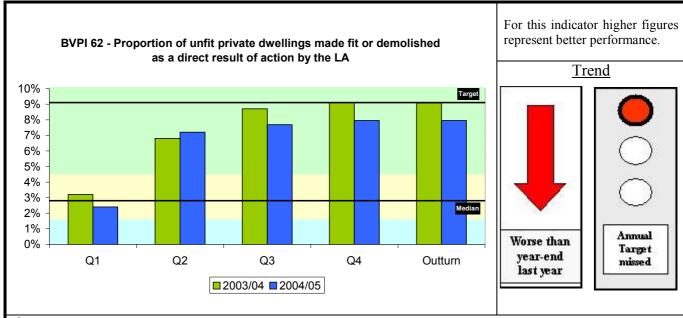
| Service<br>Plan Ref. | Objective   | Key Milestone  | Progress<br>year-end | Commentary   |
|----------------------|---|--|----------------------|--|
| FS12                 | Implementation of Phase II of Supporting People.  | Go live with Phase II in line with Project Plan timescales.                    | 00                   | Phase II fully implemented.  |
| FS13                 | To implement IT Solutions to support the Corporate Parenting Strategy.  | Implement IT solutions to ensure grant funding is spent within financial year. | oo <del>*</del>      | IT equipment purchased and delivery planned in accordance with grant requirements.   |
| FS14                 | To continue to develop the Performance Management Services delivery of quality information.   | Corporate Performance and Budget reports into IMIS.                            | oo<br><del>*</del>   | IMIS is delivered at Performance surgeries as a single package of information.   |
| FS15                 | Ensure continued effective and efficient response to Statutory requirements.  | Submit all Government Returns within agreed timeframes.                        | 00₩                  | Government returns continue to be delivered to agreed timeframes.  |
| CSP7                 | Develop a clear programme of work for service development and redesign and human resources ensuring competing operational priorities are addressed  | Programme of work completed  | <b>*</b><br>○ ○      | Programme of work agreed – work prioritised for action in 2005/06 due to delay in appointment – reduced capacity to deliver in 2004/05.  |
| CSP8                 | Develop service planning and human resources arrangements in PCT/LA to support commissioning/NSF targets and service redesign & quality improvement | Application developed for service integration                                  | * 00                 | Joint working with Health continues to progress e.g. number of joint appointments is increasing – Older People and Mental Health, Intermediate Care Manager. Joint Commissioning Board established, new Local Implementation Team for Physical and Sensory Disabilities. However, service integration will be influenced by pending government announcements on the future modernisation of Adult Social Care. |
| CSP9                 | Ensure directorate business plan, joint review action plan, older peoples action plan etc are regularly updated to reflect strategic priorities     | Updates completed  | oo.<br>★             | Delivery of Joint Review Action Plan agreed as complete and signed off. Review of Older Peoples action plan complete. Business Plan developed and approved.  |

| Service<br>Plan Ref. | Objective   | Key Milestone   | Progress<br>year-end | Commentary   |
|----------------------|---|---|----------------------|--|
| CSP14                | To develop joint commissioning strategies in mental health and physical disabilities services           | Joint Commissioning<br>Strategies – Approved by<br>Local Implementation Teams | <b>*</b><br>○○       | Mental Health Commissioning strategy being developed at present, first draft to be ready by July 2005. PSD have held an away day to discuss issues regarding the commissioning strategy, first draft of strategy to be ready by early May 2005 |
| CSP15                | To develop a commissioning framework within each service area   | Commissioning Frameworks produced and approved by Joint Commissioning Board   | oo <del>*</del>      | Commissioning framework agreed at Joint Commissioning Board and all LITs. CM to roll out across all service areas.   |
| CSP16                | To explore and develop other relevant commissioning models with the Primary Care Trust.                 | Mapping exercise to Joint Commissioning Board of models                       | 00 <del>*</del>      | Initial work undertaken by CM. Findings to be reported to JCM by April 05.   |
| CSP17                | To develop a self assessment framework for Local Implementation Teams and Partnership Boards            | Self assessment framework produced and approved by Joint Commissioning Board  | o o <b>*</b>         | Work on going to support the delivery of all plans/strategies proposed through Commissioning and service planning processes. All on target to deliver.   |
| CSP18                | To support the production of relevant strategies and plan which inform service redesign and development | Plan and strategies meet deadlines in accordance with NSF's and White paper   | o o <b>*</b>         | Work on going to support the delivery of all plans/strategies proposed through Commissioning and service planning processes. All on target to deliver.   |
| CSP19                | Support the development of extra care housing and remodelling of sheltered housing                      | Project plan for implementation re extra care and modelling options in place  | 00 <del> </del>      | Submission of new bid under second Department of Health funding round was unsuccessful. A bid for a Housing Corporation funded scheme will be supported in the Autumn bidding round.   |
| CSP20                | To secure funding to develop extra care housing - following successful bid to DOH                       | Steering group established –<br>Project plan in place                         | 00                   | A project has been established and a project plan agreed. Project now in the construction phase.   |

| Service<br>Plan Ref. | Objective  | Key Milestone   | Progress<br>year-end | Commentary   |
|----------------------|--|---|----------------------|--|
| CSP21                | To work with Finance within the Borough Council and the Primary Care Trust to carry out full financial mapping within each service area.   | Financial mapping for all service areas produced  | *00                  | Financial Mapping for all external sector contracts completed for Halton BC and the ALD Pooled budget. Details supplied to Halton PCT for jointly funded contracts. Halton PCT still to confirm their financial plans in certain areas, delayed due to staff changes/absences. |
| FS17                 | Provide regular and up to date financial information to teams and management to improve planning   | Aggresso successfully implemented and being used fully. Devolved budget management training completed.        | 00.★                 | Finance Team trained in the use of Aggresso and Accelerator report writing tool. Budget holder training well received in August/September. Follow up sessions to be organised in 2005/06   |
| FS18                 | Review Health funding which impacts on Social Services, including Free Nursing Care and Continuing Care  | Systems in place to monitor Partnership / Pooled budgets Definition of Continuing Care agreed by all parties. | <b>*</b><br>○ ○      | Pooled Budget reviewed and pressures regularly reported. Continuing Care ALD service users identified. Joint Funding protocol for ALD to be agreed with Halton PCT and taken forward in 2005/06.   |
| FS19                 | Review charges in relation to services and with operational staff, identify any potential funding sources/partnership arrangements to ensure resources are maximised.                | Review of unit costs in areas agreed with operational services completed                                      | 00*                  | Review of charges completed and approved by Executive Sub Committee in March 2005.   |
| FS20                 | Review financial/service plan framework to ensure that linking correctly and the service plans are supported by the financial framework both within the Directorate and Corporately. |   | <b>○○</b> *          | Comprehensive Analysis of service development compiled. Service redesign supported by assistance from Finance Team in a number of key areas – Oakmeadow, Bredon, Croftwood transfer  |

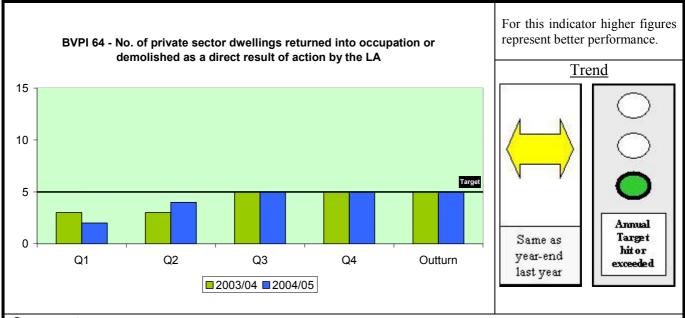
| Service<br>Plan Ref. | Objective   | Key Milestone   | Progress<br>year-end | Commentary   |
|----------------------|---|---|----------------------|--|
| CSP23                | Develop in partnership with Registered Social Landlord's (RSLs) a suite of indicators using Graphical Information System mapping to monitor housing market conditions to identify dysfunctional sections of the housing market. | IT system and data recording methodology agreed.  System successfully trialled.   | 00 <del>*</del>      | The IT system and software has been proven in testing and is being rolled out to all partners.   |
| CSP24                | Ensure new housing functions transferring to Policy and Support if/when stock transfer occurs are properly planned and resourced  | Transferring functions agreed. Budgetary provision secured for 2005/06  | <b>∞</b>             | Transferring functions have been agreed in principle, and a revenue growth bid has been approved for 2005/06.  |
| CSP26                | Develop 2 capital projects to offer shared appreciation loans to private occupiers to reduce the number of non-decent homes.  | Loan product developed in partnership with RSLs and other LAs, and policy/procedures agreed.  | 00*                  | Both projects are to be launched in March/April 05.  |
| FS22                 | Front line social work staff are freed from care arrangements/ administration duties and existing processes streamlined.  | To process map current and proposed future arrangements for the placing of domiciliary care. A Care Arranger appointed and system in place to efficiently utilise capacity within the external domiciliary care market. | oo. <b>∳</b>         | Completed.  Two Care Arrangers appointed and proposals for streamlining existing processes due to be completed April 2005.   |
| FS23                 | Quality & Service standards are proactively monitored in conjunction with Operations for all existing contracts.  | Contract compliance monitoring framework developed.   | 00*                  | Contract compliance monitoring framework completed.  |
| FS24                 | Consult with Supporting People team to ensure no duplication in monitoring arrangements   | Links established with<br>Supporting People team with<br>identified roles and<br>relationships to support<br>contract monitoring.   | 00.                  | Links established with Supporting People Team's Reviewing Officers and guidance provided by contracts team where requested. Divisonal Manager Finance and Support Services or Divisional Manager Service Planning & Commissioning to jointly review outcomes of reports. |

| Service<br>Plan Ref. | Objective  | Key Milestone   | Progress<br>year-end | Commentary   |
|----------------------|--|---|----------------------|--|
| FS25                 | Establish links with Complaints Procedures to inform contract compliance process.  | Linkages demonstrated in compliance/monitoring framework.   | • • <del>•</del>     | Achieved.  Complaints/Compliments section to act as a central reporting point for all complaints.  |
| FS26                 | Review partnership agreements with NHS and other statutory bodies and contracts with the independent sector to ensure compliance.                                  | Revised partnership agreements and contracts in place.  Establish Contracts and Service Level Agreement Register for all signed agreements. Re-tender Adults voluntary sector services. | ○○ <b>∲</b>          | Partnership agreements with the PCT for the ALD Pooled Budget now approved. Discussions still ongoing with the PCT over the status of the Joint Equipment Service Pooled Budget.  Achieved. Consultation across the Directorate lead to a request to waiver standing orders in 2004/05 for Adult Voluntary Sector contracts approved by SMT and the Executive Sub Committee. |
| CSP28<br>FS27        | Working in collaboration with Finance within the Directorate and the PCT, carry out a financial mapping exercise to support local implementation teams and boards. | Financial mapping exercise complete which relates to contracts held within the Local Authority Identify funding source and risk.  | •<br><b>*</b>        | Financial mapping for all external sector contracts completed for Halton BC  |
| FS28                 | Review SRB projects in collaboration with Operations and jointly addressing exit strategies.   | Annual monitoring reports produced.   | oo <b></b>           | All SRB projects reviewed and exit strategies considered and requests for NRF funding or alternative funding sources identified for 2005/06. Halton PCT still to identify there respective contribution for the Joint Equipment Service.   |



## Commentary

In order to achieve the 9.1% target, 74 unfit dwellings needed to be made fit through renovation grants (there being no planned demolitions). Previous quarterly updates have highlighted the reasons why this was unlikely to be achievable during 2004/05, due to staffing shortages and a reduction in grant applications. In the event 37 properties were made fit, reducing the 4-year cumulative PI average to 7.95%.



## Commentary

The target for 2004/05 was met. However it is likely that in future year's activity in this area will decline significantly as the revised private sector renewal policy does not allow grants to landlords to renovate empty property, which has been the primary means of achieving outputs.

# <u>Progress against other Performance Indicators within Service Plan</u>

| Ref     | Indicator  | Actual<br>03 / 04 | Target 04 / 05 | Quarter<br>year-end | Progress<br>year-end | Commentary  |
|---------|--|-------------------|----------------|---------------------|----------------------|---|
| PAF C51 | Adults and older people receiving Direct Payments.                   | 74                | 102            | 145                 | 00♣                  | In Total there are 177 Adults on Direct Payments.  20 are Carers and have had an assessment in their own right 12 are Service Users who have had carers breaks. These are not counted in the above statistics as they are from the Carers Grant Budget. |
| PS/LP1  | Percentage of SSD directly employed staff that left during the year. | 14.5%             | 14%            | 14.14%              | oo <b></b>           | The numbers of directly employed staff that left during the year was 14.14% which is very close to the target figure of 14%. Continued efforts will be made to ensure that directly employed social care staff continue to be retained in 2005/06.      |

| Ref    | Indicator   | Actual 03 / 04 | Target<br>04 / 05 | Quarter<br>year-end | Progress<br>year-end | Commentary   |
|--------|---|----------------|-------------------|---------------------|----------------------|--|
| PS/LP2 | Percentage of Social Services working days/shifts lost to sickness absence during the financial year. | 8.5%           | 8%                | 8.92%               | <b>*</b> ○○          | The % of hours lost due to sickness during the year was 8.92% compared to a target figure of 8%. Considerable progress has been made within the Directorate to proactively manage and reduce the number of hours lost due to sickness and this will continue in the coming year with the aim of reducing the number of hours lost even further.                |
| PS/LP3 | Percentage of Fairer Charges assessments completed within 10 days of referral.                        | 65%            | 85%               | 59%                 | <b>*</b> ○○          | Staffing shortages and delays in referrals to the fairer charging officers caused some difficulties in meeting the 85% target. Following a meeting referral processes where redefined and a full staffing complement is now available to deal with theses requests. As a result the overall performance of completing fairer charging assessments has improved |
| PS/LP4 | Percentage of invoices (creditors) paid within 30 days of receipt.                                    | 90%            | 95%               | 87%                 | <b>*</b><br>○ ○      | Since February 2005 we have experienced severe staffing problems. Agency staff were recruited to assist when both invoice processing staff were successfully promoted. From April 2005 permanent members of staff are now in post  |

| Ref    | Indicator  | Actual 03 / 04 | Target<br>04 / 05 | Quarter<br>year-end | Progress<br>year-end | Commentary  |
|--------|--|----------------|-------------------|---------------------|----------------------|---|
| PS/LP5 | Number of stage 1 contract compliance complaints dealt with within 30 days   | 50.7%          | 65%               | 56%                 | *00                  | The number of complaints completed within 30 days falls a little short of the set 65% target. Difficulties in achieving the target have been experienced when asking providers to reply within the timescale of 30 days as required. All complaints about providers are forwarded to them within the required timescale and all complainants are notified within 30 days about the progress of their complaint. Further reminders have and will again be issued to providers about the need to respond quickly so that we can meet the required 30-day timescale. |
| PS/LP6 | Percentage of carers on the carer's database as a percentage of the number of carers identified in the 2001 census in Halton | -              | 19.75%            | 19.5%               | 00★                  | There are 2,638 carers on the CareFirst database at 31 <sup>st</sup> March 2005. Census 2001 identified 13,528 carers in Halton. To date 19.5% of these carers are on CareFirst. When the data collected at the Carers Centres is added to the total the target of 19.75% of all known carers being on the database will be met.  |

| Ref    | Indicator   | Actual 03 / 04 | Target<br>04 / 05 | Quarter<br>year-end | Progress<br>year-end | Commentary   |
|--------|---|----------------|-------------------|---------------------|----------------------|--|
| PS/LP7 | People achieving NVQs in Care and Administration and management awards. | 31             | 65                | 18                  | *00                  | <ul> <li>The numbers of achievements for NVQ's is still very low for this year, due to:</li> <li>Candidates and assessors being on sick leave</li> <li>External Assessor contract finishing in May 04</li> <li>Lack of time for NVQ activity in the workplace and release onto training sessions</li> <li>Two Lead Internal Verifier and Assessor posts not being appointed</li> <li>63 new candidates registered since Sept 2004 who won't complete until 2005/06</li> <li>Perceived lack of commitment for certain candidates</li> </ul> |

# **Explanation of Traffic Lights**

Within this year-end report traffic light symbols have been used to describe progress in the following manner.

|       | <u>Objective</u>  | Performance Indicator   |  |  |  |
|-------|---|---|--|--|--|
| Green | Indicates that the <u>objective</u> has been achieved within the appropriate timeframe.   |   |  |  |  |
| Red   | Indicates that that the objective has not been achieved within the appropriate timeframe. | Indicates that the annual 04/05 target has not been achieved. |  |  |  |