

Report

Cabinet Member for Adult and Community Services

Part 1

Date: 3 August 2015

Item No:

Subject Adult and Community Service Plan 2015/16

Purpose To seek a Cabinet Member decision to approve the Service Plan for 2015/16

Author Head of Adult and Community Services

Ward All

Summary The Local Government Measure 2009 places a duty upon local authorities to: “make arrangements to secure continuous improvement in the exercise of their functions”. In order to discharge this duty, the Authority must be able to demonstrate the improvement made through its performance planning and reporting processes. Consequently, the Authority’s 2015/16 Service Plans are detailed planning documents underpinned by the following key principles:

- Defining outcomes for the service area
- Demonstrating progress (What will we do? What is the impact on service users? How will we evidence we have done it?)
- Aligning financial resources with planned activity
- Considering regulators recommendations

The Service Plan includes details of Service Area Outcomes, the key priorities for the service area and how they will be measured, the action plan details the actions for the year and other supporting information including risks, regulators proposals and equalities and welsh language requirements.

Proposal To approve the Service Plan 2015/16

Action by Head of Service

Timetable Immediate

This report was prepared after consultation with:

- Head of Law and Standards - Monitoring Officer
- Head of Finance - Chief Financial Officer
- Head of People and Transformation

Signed

Background

The Service Plan has been prepared in accordance with the Council's guidance and is appended to this report.

Financial Summary

The service plan provides information about the resources available to the service area, for example, staff, finances, income, investments etc.

Risks

The service plan describes the top risks facing the service area and why they are significant.

Links to Council Policies and Priorities

The service plan includes important threads about how the outcomes of strategies and projects link to the Improvement Objectives in the Improvement Plan

Options Available

Option 1 – to approve the Service Plan

Option 2 – not to approve the Service Plan

Preferred Option and Why

The preferred option is 1. The Service Plan provides important direction to the service area and demonstrates important links with the Council's Improvement Plan and other key Council plans and strategies

Comments of Chief Financial Officer

Service Plans have been constructed based on the approved Medium Term Financial Plan and as a result there are no financial implications arising from them. A major part of Service Planning in 2015/16 is the delivery of efficiency savings in the budget and those activities underpinning the savings form key strands of the Plans.

Comments of Monitoring Officer

There are no legal implications. The Service Plans have been prepared in accordance with the Council's performance management framework and reflect both statutory responsibilities and strategic objectives for the relevant services.

Staffing Implications: Comments of Head of People and Business Change

In terms of performance management implications, the service plan has been developed in accordance with appropriate guidance. The guidance and associated service plan address the Wales Audit Office Proposals for Improvement that relate to performance management and setting clear outcomes and priorities.

Comments of Cabinet Member

I endorse the service plan for 2015/16 and it continues to the delivery of the Vision for adult services where we set a strategy to 2017. The plan contains a number of key actions that are at the core of the delivery of adult social services as we strive to meet individual outcomes.

We are continuing to seek improvement in performance at a time of considerable budget reduction and on the evidence of last year we are meeting that challenge. Whilst this plan outlines further improvement for 2015/16 it is going to be very difficult to deliver continuous improvement if the scale of budget reduction is realised in 2016/17.

The impending Social Services and Wellbeing Act implementation from April 2016 will also lead to significant change for social services and I am pleased that this service plan is based on that changing agenda.

Local issues

None

Scrutiny Committees

This Plan has been raised at Scrutiny for information.

Equalities Impact Assessment

There are no proposals within the Service Plan that have any impact on equalities.

Children and Families (Wales) Measure

There are no proposals within the Service Plan that have any impact on this measure.

Comments from Non Executive Members

None received

Background Papers

Service Plan 2015/16 attached

Dated: 3 August 2015

Adult and Community Service Plan 2015/16

Part 1a: Introduction and Foreword

The demand for our services will increase and will do for the foreseeable future. In addition the Social Services and Wellbeing (Wales) Act will shortly require us to be mindful of the wellbeing of the whole population – not just the 2% with whom we usually work.

We have set out in the Adult Services Commissioning plan 2014 to 2017 how we are planning to meet these challenges by developing a range of adult social care services to help individuals maintain, or regain, their independence. Our intention is to place a greater focus on individual choice and control.

We also want to develop services that prevent crises from happening, and if they do mitigating their impact by intervening at an early stage. We believe we can best do this by promoting the independence and wellbeing of citizens, their families and communities through a range of effective support services

Integrated Adult Services is proposing a new approach to designing, implementing, and reviewing services based on an agreed commissioning pathway to allow for meaningful collaboration with a wide range of different stakeholders.

The service plan sets the priorities for improvement based on the developed strategy for the service area.

The aims of the service

Adult Social Care is a range of interconnected services that includes information, advice and assessment, nursing and residential homes, supported accommodation, day care, short breaks (respite), reablement and telecare. It also includes services that the council has a statutory responsibility to deliver to ensure vulnerable people are as safe as possible.

Newport City Council has a statutory responsibility to provide adult social care services to people who have an eligible level of need, but we also provide a range of preventative services. Many different kinds of people make use of adult social care services including older people, people with learning disabilities, or mental health conditions, and people with physical or sensory impairments.

Newport City Council uses our own staff as well as organisations in the public, private and third sectors to deliver social care. Whatever and wherever care is delivered we want to make sure that it is of a high standard, reflects our values and achieves the right outcomes for the individual and the community as a whole.

The vision for adult services is as follows-

Promoting the independence and wellbeing of citizens, their families and communities through a range of effective support services

The vision will be achieved by delivering-

- Universal wellbeing and support
- Prevention and early intervention
- Managed care

We have identified Strands of Change which are the underpinning cross cutting activity that the service as a whole has to adopt to achieve the vision.

Strategic Priority 1 – To provide access to information and community resources to everyone who needs it.

Strategic Priority 2 - Effective prevention and early intervention for people with a social care need

Strategic Priority 3 - Everyone that has an eligible care need receives outcome focused person centred social care

Setting the vision and commissioning strategy for adult services has been a priority in 2013/14. With many challenges emerging it is essential that we prioritise our actions and ensure we continue to meet the needs of vulnerable adults in our community.

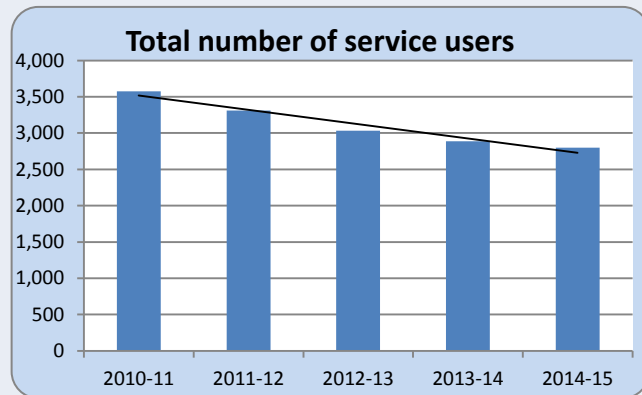
Future customer needs

The population is growing older and people are living longer with life limiting conditions such as dementia. Research by the Alzheimer's Society in 2007 identified that the total number of people with dementia in the UK is forecast to increase to 940,1110 by 2021 and 1,735,087 by 2051, this is an increase of 38% over 15 years and 154% over the next 45 years¹.

Thanks to advances in medical science many more children with complex impairments are also living longer. This is to be welcomed, but local authorities are meeting these changes in the context of reduced budgets.

Part 1b: Background and Overview

See structure at appendix 1 listing the Teams/Functions



(figure 1)

In 2010-11, Adult Services provided and commissioned services to 3,576 adults.

In 2011-12, Adult Services provided and commissioned services to 3,311 adults.

In 2012-13, Adult Services provided and commissioned services to 3,034 adults.

In 2013-14 Adult Services provided and commissioned services to 2887 adults

In 2014-15 Adult Services provided and commissioned services to 2801 adults

There is no dispute that we operate in an environment where there is increasing demographic pressure particularly from an increasing older persons population. We have, as demonstrated above, reduced the volume of people in receipt of adult social services. There are many factors that have contributed to that as follows-

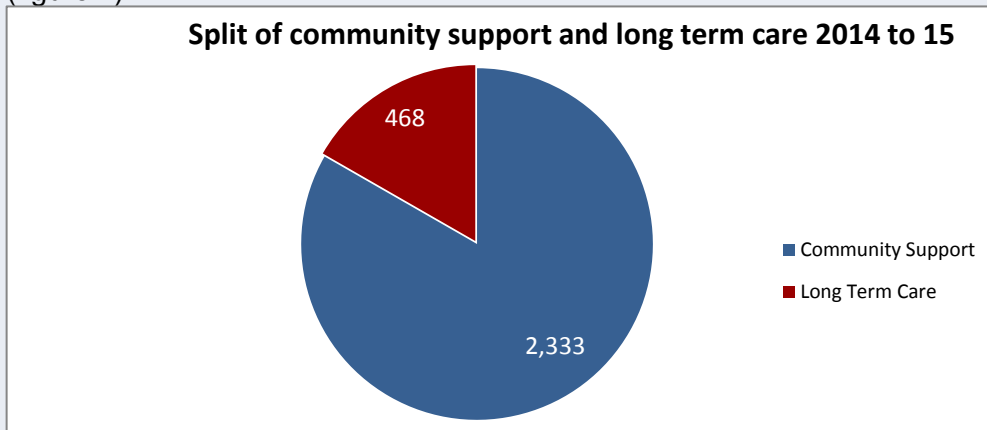
- Increased use of frailty/reablement models (Gwent Frailty Service)

- Increased use of telecare services
- Well planned supporting people services in the community
- Applying eligibility criteria more accurately as defined in Newport (meeting substantial and critical needs)
- Improving process to support people with disabled facilities grants in their homes
- Improving our data management to ensure cases are closed with no further involvement where appropriate.

We continue to apply all the above approaches in our work in Adult Services. However, to date, our overall client numbers have reduced at a higher level than we would expect in the future. Over the next year we will have reviewed all our clients and applied a reablement focus applied, we will have concluded many day service reassessments and concluded re assessment of respite needs. It is likely that we can then expect the reducing numbers to bottom out at that stage and the on-going demographic pressure will continue to produce demand on adult services. This will inevitably lead to more people receiving services.

As shown in figure 1, adult services' currently provides service to 2801 people. That total of services is split between community based services and longer term care services for 2014/15 is as follows-

(figure 1)



Adult Social Services Budget	Total
Support at Home Services	22,591,422
Long Term Placements	9,662,679
Operations	5,088,636
Safeguarding/QA	788,315
Grand Total	38,131,053

(figure 2)

Figure 2 shows that of the 2801 people who currently receive services, 83% have services provided in the community (e.g. domiciliary care, day care) and 17% receive longer term types of service (e.g. residential/nursing care, supported living).

Since the previous year 1% more people have community support and 1% less have long term care.

The following breakdown details the type of community support services being provided in 2014/15-

	2013/14	2014/15
People in receipt of home care support	968	883
People in receipt of day care services	409	293
People had community based support	182	202
People received respite forms of support	190	146
People have some form of supported equipment provided to them	1009	1201
People have received an adaptation to their home	247	205
People receive a direct payment to fund their care needs	79	115
People have a supported living placement	140	148
People receive an adult placement	32	37
People receive a Telecare package	281	732

The following breakdown details the type of longer term services provided in 2014/15-

	2013/14	2014/15
People receive a residential service via the Council provided care homes	91	90
People receive a residential service via the Independent care home sector	234	232
People receive a nursing service via the Independent nursing home sector	181	169

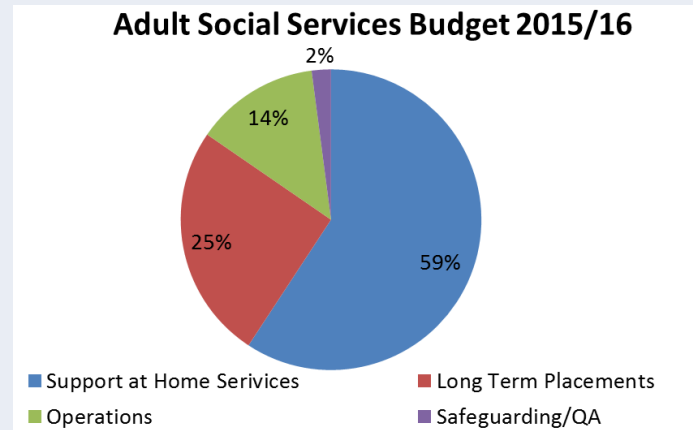
Part 1c: Resources

Staffing Resources

Headcount	Year 2011/12	2012/13	2013/14	2014/15
Adult Services	792	724	650	629
FTE				
Adult Services	524	492	443	439

You can see from the above that staffing numbers in adult services have reduced since 2011/12. Adult services have had a series of change and budget efficiency programmes and this has led to a number of staff from our service leaving the Authority. There are continued programmes for 2015/16 that will see a further reduction in staffing numbers primarily from the Provider Services part of Adult Services.

Budget breakdown



The 2014/15 budget was underspent by £611k. This was achieved in large part with budget efficiency delivered in advance of the 2015/16 position as detailed in Figure 4. The continued delivery of reablement focussed services and re assessment of clients' needs contributes to ongoing budget reductions for adult services. We experience pressures to the budget as a result of an ageing population who require care and support and also from younger people with needs who move from children's and education services at adulthood. Support to people at home is another area that we can expect increases in cost. As we provide for people with more complex needs, our numbers of clients may be decrease but the average cost of packages can increase. For 2015/16 we have calculated pressures and also set budget efficiencies.

Other Resources

Provider services operate services from the following buildings-

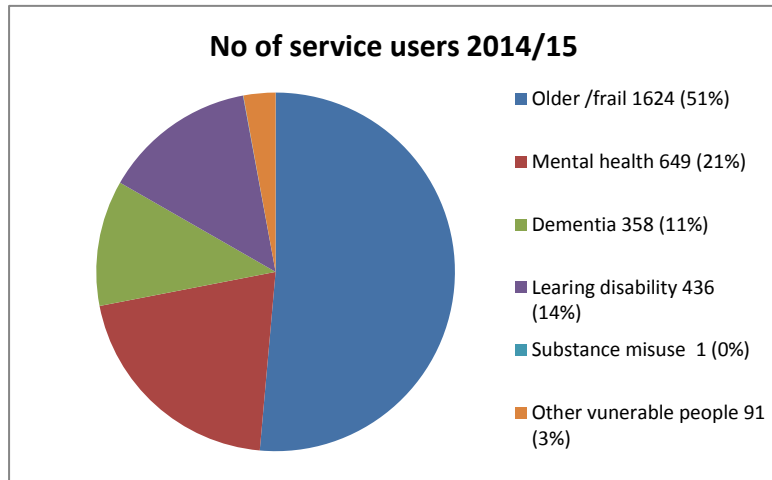
- Brynglas ATC
- New Willows respite
- Spring Gardens Care Home
- Blaen y Pant Care Home
- Parklands Care Home

Kensington Court Day Centre

The above are all Newport City Council assets. Other teams operate at Civic Centre

Part 2a: Understanding our customers' needs / Population demographics and considerations

Based on the current total number of service users in 2014/15 the category of service user that we provide services to is split as follows-



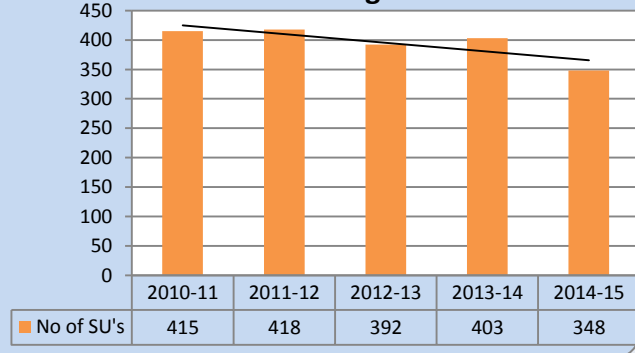
(Figure 3)

Defining our customers	What do we know about their needs	What do we need to know to understand the needs of our customers better												
<p>Older People</p>	<div data-bbox="689 432 1323 903" data-label="Figure"> <table border="1"> <caption>No of service users + 65</caption> <thead> <tr> <th>Year</th> <th>No of service users + 65</th> </tr> </thead> <tbody> <tr> <td>2010-11</td> <td>2,445</td> </tr> <tr> <td>2011-12</td> <td>2,294</td> </tr> <tr> <td>2012-13</td> <td>2,085</td> </tr> <tr> <td>2013-14</td> <td>1,954</td> </tr> <tr> <td>2014-15</td> <td>1,910</td> </tr> </tbody> </table> </div> <p data-bbox="689 1007 1397 1114">Since 2010/11 there are 535 less older people receiving services from Newport Adult Services, this is @ 22% reduction in numbers.</p> <p data-bbox="689 1150 1397 1374">On first inspection of that statistic it could be viewed as a concerning statistic in that Newport provide less support to a vulnerable client group at a time when there is an increasing population of older people who may need support. However, there has been an approach in Newport to maintain as much</p>	Year	No of service users + 65	2010-11	2,445	2011-12	2,294	2012-13	2,085	2013-14	1,954	2014-15	1,910	<p data-bbox="1435 437 2007 635">Throughout the UK increasing demographic pressures are leading to higher demand for both acute and community care services. Simultaneously, budgets within local government are reducing and the NHS is experiencing widely reported funding gaps.</p> <p data-bbox="1435 671 2018 1366">The situation in Newport is no different. The population of those aged over 85 is expected to increase by 74% to an estimated 6,000 people by the year 2030. At the same time, the central government grant received by the local authority has been reduced by 1.2%, requiring the Council to achieve £10 million worth of savings for the financial year 2014/15. Moreover, there is a requirement to achieve further efficiencies within the Health Board in order to balance budgets. The implications of these financial challenges is a need to reduce pressures on social care and acute services, through means such as delivering integrated and outcome focused care within the community, whilst simultaneously managing future demand through early intervention and</p>
Year	No of service users + 65													
2010-11	2,445													
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2012-13	2,085													
2013-14	1,954													
2014-15	1,910													

	<p>independence for people in the community with alternative approaches such as-</p> <ul style="list-style-type: none"> • Increased use of frailty/reablement models (Gwent Frailty Service) • Increased use of telecare services • Well planned supporting people services in the community • Applying eligibility criteria more accurately as defined in Newport (meeting substantial and critical needs) • Improving process to support people with disabled facilities grants in their homes • Changing information and advice approach, employing community connectors as part of integrated care fund grant (ICF) • Emergence of 'step up/step down' type beds to support reablement and avoid hospital stays 	<p>prevention techniques.</p> <p>During 2014/15 we initiated our integrated pathway for older people pilot project.</p> <p>The core objectives of this project include:</p> <ul style="list-style-type: none"> • Keeping people living safely and independently in their own homes • Avoiding unnecessary admission into institutionalised care • Developing effective anticipatory care planning with care wrapped around the individual • The development of a continuum of multi-agency provision, deploying the right resources at the right time in a holistic manner • Developing capacity for effective early prevention • Delivering outcome focused service provision within a community setting as an alternative to primary care
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People with dementia

Total no. of older people with dementia receiving services

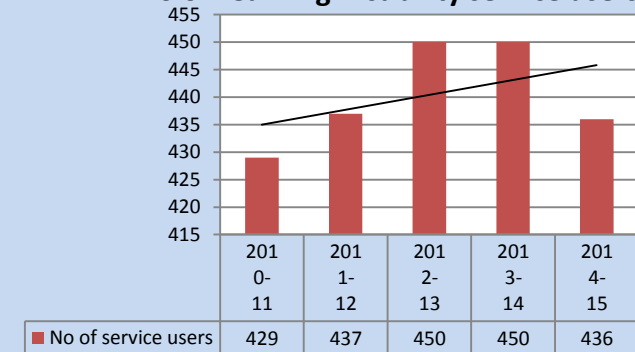


In 2014/15, 348 people with dementia were supported by Social Services.

By 2020, it is estimated that 2,011 of Newport's population aged 65+ will have dementia so demand will continue to grow for social services and for other community based support services.

Adults with a learning disability

No of Learning Disability service users



The number of people estimated to have a learning disability (aged 18+) in 2012 was 2568. This figure is predicted to slightly rise over the next 5 years by around 3%

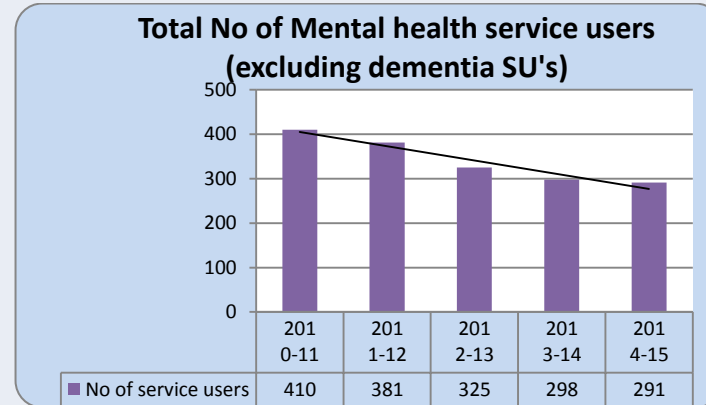
For the age group 18-24, it is predicted that people with a learning disability will reduce from 382 in 2012 to 338 in 2020 (11%)

It is predicted that there will be an increase in the numbers of people with learning difficulties aged 25-44 and those over 55.

You will note the trend line for numbers of adults with a learning disability receiving services has risen since 2010. The numbers in 2014/15 have started to fall. There has been a full reassessment of the people receiving services throughout 2014/15 and some people have been assessed as not eligible for services from the Local Authority, this may account for the reduction this year.

The Promoting Independence and Choice project aims to develop sustainable services for the future. Services are being modernised so that people with a Learning Disability and their carer's are undergoing many changes. A communication and consultation strategy was developed to ensure that everyone was aware and had input into the developments. People were supported to understand and be part of the changes. There are still those who find the process unsettling.

Adults with mental health



The numbers of people supported by statutory services has reduced to 291, this represents a 29% reduction (119 people) since 2010.

The mental health teams operate a single access point

The number of people (aged 16+) estimated to have any mental health problem in 2013 was 19,125. This figure is expected to increase by 4% over the next 5 years.

It is estimated that there are 35 people with early onset dementia aged 30-64. This figure is expected to increase by over 11% over the next 5 years.

It is estimated that that 12,994 people aged 16-59 currently misuse drugs. This figure is expected to increase by 5% over the next 5 years.

It is estimated that 31,225 people aged 16+ currently binge drink. This figure is expected

	for referrals, base assessments and intervention on a recovery model and therefore not a reliance on longer term forms of care or support. This is reducing numbers of people receiving traditional forms of support as identified above.	to increase by just over 3% over the next 5 years
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Part 2b: Links to Other Plans and Strategies

Newport City Council is required to observe, and comply, with a wide range of legislation, regulations, frameworks, plans and guidance, some of which is statutory and some of which is advisory, and all of which may be subject to change, as legislation is consolidated, updated, repealed or replaced.

Social Services and Wellbeing (Wales) Act 2014

The Social Services and Wellbeing (Wales) Act, consolidates current social care legislation but will also require Local Authorities to be mindful of the wellbeing of the entire population, beyond attempting to address the needs of those who meet the 'eligibility criteria' as is the present case. The Bill will require us to develop a model of Self-Directed Support, and places a statutory duty on us to assess Carers and provide them with appropriate support. Additionally, it creates a statutory duty to provide information, advice and assistance, and reinforces the importance of safeguarding all citizens by creating new duties to protect vulnerable adults.

Alongside the Social Services and Wellbeing (Wales) Bill, there are many other documents, some with the force of law, (these are known as Statutory Guidance under s7 of the Local Authority Social Services Act 1970), placing various duties on the Authority, including the expectation that we work collaboratively or in partnership with others such as Health or the Third Sector.

The main legislative and policy documents are noted below, with a brief summary of some the more significant elements.

Access to Care and Wellbeing in Wales Report *Social Services Improvement Agency* (March 2013)

Aneurin Bevan Health Board Five Year Plan (2010-2015) *Aneurin Bevan Health Board* (2010):

The challenges of improving health outcomes, systems performance and achieving financial sustainability are leading to a demand for services to be delivered as close to patients' homes as it is safe and effective to do so, the development of greater

specialisation of services, and the need to achieve increasing standards of efficiency and productivity across the health care system. This in turn is requiring fundamental reconsideration about the ways in which services are or could be delivered.

A Sustainable Wales: Better Choices for a Better Future – (White Paper consultation proposals for a Sustainable Development Bill)
Welsh Government (2012)

A Strategy for Adults with a Learning Disability 2012-17 (aka Gwent Learning Disabilities Strategy) *Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen (2012):*

This hinges on person centred care, promoting independence and social inclusion. It seeks to improve access to advocacy and information, and covers aspects of everyday living such as employment, housing, education, leisure, day activities and life skills, as well as provision to support Carers.

The Autistic Spectrum Disorder (ASD) Strategic Action Plan for Wales (2009) *Welsh Government*

Carers Strategies (Wales) Measure 2010 - and associated Regulations (2011) *Welsh Government.*

This carries the requirement to develop a Strategy that sets out how the local authority will provide information and advice to Carers, in reaching the decision about the care service they or their cared-for will receive, as individuals, to consult with Carers, and to consult with Carers before making decisions of a general nature regarding the provision of services to Carers or those for whom they care.

Children in Need Commissioning Strategy 2012-15 *Newport City Council (2012)*

The Community Strategy - *Feeling good about Newport* *Newport Local Service Board.*

The Community Strategy feeds into the One Newport Local Service Board's vision (Newport Single Integrated Plan – SIP – see below), for improving Newport. The priorities are:

- to have a prosperous and thriving city
- to have a better quality of life
- to have vibrant and safe communities
- to deliver better public services

Corporate Assessment Report: Newport City Council *Wales Audit Office (2013)*

Corporate Plan and Annual Improvement Plan: Standing up for Newport: Corporate Plan 2012-2017 *Newport City Council (2012):*

Newport City Council's Corporate Plan describes the council's intentions over the next three years as Newport becoming:

- A caring city
- A fairer city
- A learning and working city
- A greener and healthier city
- A safer city

Delivering a Better Newport – Improvement Plan 2012-13 *Newport City Council (2012)*

Delivering Local Health Care – Accelerating the Pace of Change *Welsh Government (2013):*

A framework for Health Boards, local government and third sector partners to provide high quality, safe and sustainable services to meet the needs of people in Wales, with emphases on prevention and early intervention, improved support for older people and people with long-term conditions, strengthening locally-led service planning and delivery, and that the care be co-ordinated, focused and designed around people

Designed to Add Value – a third dimension *Welsh Assembly Government (2008):*

Recognises the contribution of voluntary organisations, and advocates:

- Stronger partnership working
- Improved service planning
- Supporting self-care and independence
- Promoting and improving health and wellbeing
- Volunteering for health and social care
- Developing social enterprises in health and social care
- Integrated services and workforce planning
- Fewer hospital admissions and improved discharge rates
- Research and development

Developing a Market Position Statement: A Commissioner’s Toolkit *Social Services Improvement Agency (November 2013)*

Dublin Declaration (signed by NCC in November 2013) Affirmation of NCC’s pledge to make Newport an age-friendly city by 2020, commitment to adopt best practice, and to promote opportunities for older people.

Future Generations (Wales) Bill: Better Choices for a Better Future (formerly known as the **Sustainable Development Bill**) *Welsh Government (Forthcoming):* Will help tackle the generational challenges Wales faces in a more joined up and integrated way - ensuring Welsh public services make key decisions with the long term wellbeing of Wales in mind, by placing a duty on local authorities to incorporate *sustainable development* as an organising principle of the work undertaken.

Framework for Action for Independent Living *Welsh Government (2012):*

Requires those commissioning services to be mindful of the need for:

- Information, advice, advocacy, peer support
- Accessible and supported housing
- Personalised care and support
- Person-centred technology
- Barrier-free transport system
- Accessible and inclusive places
- Employment (including self-employment)

Framework of Services for Older People *Welsh Government (2012)*

From Vision to Action (Pearson Report) *Independent Commission on Social Services (2012)*

Fulfilled Lives, Supportive Communities - Commissioning Framework: Guidance and Good Practice *Welsh Government (August 2010):* This publication, issued under Section 7 of the *Local Authority Social Services Act 1970*, provides statutory guidance on commissioning social services. It applies to commissioning by local authority social services, and to commissioning by wider partnerships, where social services are engaged. The Guidance strongly encourages partnership working.

Market Position Statement (2015): *Newport City Council*

Mental Health (Wales) Measure 2010 *Welsh Government*

More than just words - Strategic Framework for Welsh Language Services in Health, Social Services and Social Care (2013) – Social Services in Wales Action Plan - *Welsh Government (2012)* This is the Welsh Government's strategic framework for Welsh language services in Health, Social Services and Social Care. As it regards being able to access Services in Welsh, without having to ask, as a crucial part of respect for the Service User, it places a requirement on Health and Social Care Services to be able to provide services in Welsh.

National Dementia Vision for Wales (2011) *Alzheimer's Society/Welsh Government:* (1) to increase awareness and understanding about dementia and its effects on those with dementia and those who care for them; (2) to develop more closely integrated services for those afflicted and affected by dementia, and (3) to create 'Dementia Supportive Communities'

Newport Autistic Spectrum Disorder Action Plan 2013-2014 *Newport ASD Steering Group (April 2013)*

Newport Single Integrated Plan - Feeling Good about Newport (*SIP Newport Local Service Board (2013)*)

A SIP is the defining statement of strategic planning intent for a local authority area. It contains the Local Service Board's (LSB) vision for improving the area over the next three years. As no single organisation can meet the total needs of a community, there is a requirement to plan and deliver services in collaboration with other public and private sector organisations. Newport's SIP identifies the following key priorities:

- People in Newport achieve their full potential
- Newport has a prosperous and thriving economy
- People in Newport are thriving and healthy
- People in Newport live in a safe and cohesive community
- Newport as a distinctive and vibrant community.

Newport Strategic Equality Plan

The Equality Objectives and Equality Action Plan cover both Equality Objectives and actions required to meet the legal requirements of the *Equality Act 2010* as outlined in the Strategic Equality Plan 2012-2016. The objectives concern:

- Engagement
- Accessible services
- Community cohesion and tackling hate crime
- Domestic abuse
- Worklessness

Newport's Unified Needs Assessment 2013 *One Newport Casnewydd yn Un (2013)*

http://onewportlsb.newport.gov.uk/stellent/groups/public/documents/plans_and_strategies/cont716439.pdf

Our Healthy Futures (2010-2020) *Welsh Government (2010)*: The strategic framework for Public Health, in Wales with aspirations to make the systems fairer by reducing inequalities. By 2020, it is hoped that:

- We will take care of our own and others' health and wellbeing
- Organisations and individuals work together to improve and protect the health of the people of Wales
- There will be a reduction in the gap between communities with poor health and communities with better health
- Public policy will support and enable people to lead healthier lives

Shared Purpose, Shared Delivery – Guidance on integrating Partnerships and Plans *One Newport Casnewydd yn Un (2012)*

South Wales Programme (as part of **Together for Health: A Five Year Vision (2011-2015)** *Aneurin Bevan University Health* (updated 4 November 2013): *'Together for Health' – South Wales Programme* <http://www.wales.nhs.uk/sitesplus/866/page/65180>

Health Boards across South Wales have come together to look at a small number of specialist, but important services. Working with more than 300 clinicians, the Programme has identified some specialist services where change in provision and delivery may be indicated:

- some specialist maternity services (obstetrics)
- accident and emergency and trauma services.

Shared Purpose, Shared Delivery *Welsh Government* (2012):

Sets out the roles of local government and their Local Service Board partners to plan and deliver high level outcomes by focussing efforts on prevention and early intervention, and expects that a single integrated plan should be used to meet the statutory duties in relation to the development of plans and strategies required under the following (and other) legislation:

Local Government (Wales) Measure 2009 (Part 2: Ss 37-46) – Community Strategies;

National Health Service (Wales) Act 2006 (Part 3: S40) – Health, Social Care And Well-being Strategies; and **Crime and Disorder Act 1998 (Part 1: S6)** – Strategies for the reduction of crime and disorder, strategies for combating the misuse of drugs, alcohol and other substances, and strategies for the reduction of re-offending.

Strategic Equality Plan and Equality Objectives *Newport City Council* (2012):

Stronger Partnership for Better Outcomes Circular no 35/2006 - *National Assembly for Wales* (2006)

Sustainable Social Services for Wales: A Framework for Action *Welsh Government* (2011):

Provides a framework for meeting the challenges facing social services in the next decade and beyond, and sets out priorities for action. It aims to reshape and refocus social services in order to ensure that they remain strong, and can continue to meet citizens' needs and aspirations. <http://wales.gov.uk/topics/health/publications/socialcare/guidance1/services/?lang=en>

The Third Dimension – A Strategic Action Plan for the Voluntary Sector Scheme *Welsh Assembly Government* (2008)

Together for Health (includes **South Wales Programme**): **A Five-Year Vision (2011-15)** Advocates a more integrated health and social care system by:

- Helping people to live healthily and independently

- Detecting health problems quickly
- Delivering fast, effective, integrated care and support
- Involving people in decisions about their local services and care
- Enabling health and social care staff to plan and deliver care together

Together for Mental Health: A five-year vision for the NHS in Wales *Welsh Government (2012)*: This is a strategy rooted in the *Mental Health (Service User) Measure 2010*; it seeks to:

- Promote mental wellbeing and prevent mental health problems arising
- Improve information about mental health
- Increase Service User and Carer involvement in care-decisions
- Change attitudes to mental health by tackling stigma and discrimination
- Deliver a well-designed, fully integrated network of care based on recovery and entitlement.

Transitional and longer-term implications of the Social Services and Well-being (Wales) Bill 2013 *Welsh Local Government Association and NHS Confederation (September 2013)*

Welsh Language (Wales) Measure *Welsh Government (2011)*

Written Statement concerning Social Services and Well-Being (Wales) Bill: Assessment and Eligibility Framework *Welsh Government: 19 July 2013*

Written Statement concerning Social Services and Well-Being (Wales) Bill: Prevention and Early Intervention *Welsh Government: 21 November 2013*

Section 3a: Service Area Outcomes

The strategic outcomes for adult services are outlined in the Commissioning Strategy 2014-2017

The vision for adult services is-

Promoting the independence and wellbeing of citizens, their families and communities through a range of effective support services

An action plan has been developed following extensive consultation to deliver the commissioning strategy. To achieve the action plan we have initiated a number of projects and will be making a number of significant changes to the service.

Projects:

Active living in old age - a project to promote independence for older people. This project is responsible for developing the information, advice, and assistance services that are required to keep people independent and the early intervention services that enable people to regain independence.

Older person's prevention pathway - a joint project with health to deliver integrated preventative services

Promoting Independence and choice - a project to modernise services for learning disabled people so that the care they receive is outcome focused. A specific component of this project is developing services that promote independence in early adulthood.

Modernisation of day opportunities and short breaks (respite) – we will develop a cross cutting project to modernise day opportunities and short breaks

Carers – we will ensure all projects and operational activity provide the right services for carers. This will be documented in a carers plan. The action plan is divided into the three strategic commissioning priorities

- **Strategic Priority No 1:** To provide access to information and community resources for everyone who needs it
- **Strategic Priority No 2:** Effective prevention and early intervention for people with a social care need
- **Strategic Priority No 3:** Everyone that has an eligible care need receives outcome focused person centred social care

Service Area Outcome	What does success look like?	What difference will it make?
To provide access to information and community resources for everyone who needs it	Available information that maximises independence and choice Provide high quality information Work with community groups/organisations to develop new services Supporting carers to access information	Everyone in Newport having access to the information and advice they need to enable them to maximise their wellbeing and live fulfilling independent lives within the community.

<p>Effective prevention and early intervention for people with a social care need</p>	<p>Reduction in individuals requiring long term managed care as a result of prevention and early intervention. We aim for a fully integrated pathway for older people across social care, health, 3rd sector and the community.</p>	<p>Everyone that requires it receiving effective prevention and early intervention services. These services will enable this group of people to maximise their wellbeing and regain their independence without having to rely on complicated assessments or care packages</p>
<p>Everyone that has an eligible care need receives outcome focused person centred social care</p>	<p>An increase in the number of people whose care plan changes as a result in a positive outcome of a care service.</p>	<p>Everyone that has an eligible care need receives efficient high-quality outcome-focused managed social care</p>
<p>Supporting Older People Leaving Hospital (Improvement objective 1)</p>	<p>By developing systems with less duplication then people will have clarity on how their discharge is being supported and planned and the health staff are also assured that referrals are being consistently managed.</p> <p>This approach will ensure people are not staying within hospital environments for any longer than medically necessary.</p> <p>This will also establish rehabilitation needs within the home environment and not based on hospital ward conditions.</p>	<p>Less people waiting on hospital wards is widely seen by people as a positive thing. It is also widely accepted that people's recovery is enhanced in their own surroundings.</p>
<p>Improving care and support services for adults (Improvement objective 2)</p>	<p>It is part of adult services statutory duty to review packages of care and support for individual service users. We are also required to continue to develop an all Wales integrated assessment process for older people.</p> <p>By developing more integrated approaches to the management of care and support packages then we aim for more multi</p>	<p>Reviewing care packages in a timely and professional way ensures that peoples assessed needs are being met and that they are in receipt of the appropriate support and care services.</p> <p>Reviews ensure that the needs of carers are being maintained.</p> <p>Reviews ensure any risk to vulnerable adults</p>

	<p>professional involvement in reviewing care plans. This we would expect should also contribute to improving the care plan reviewing.</p>	<p>is monitored by professionals.</p> <p>Reviews ensure the quality of services being provided are monitored by professionals.</p> <p>Reviews ensure that the views and opinions of individuals are at the centre of our relationship with service users.</p>
<p>Accreditation for Dementia care within the Internally provided care homes.</p>	<p>Accreditation for the 'Butterfly Project' at Spring Gardens initially.</p>	<p>Improve the person centred approach to care for people with dementia in long term care environments.</p> <p>External validation of good practice in dementia care.</p>
<p>Ensure Community OT service meets the equipment and adaptation needs of people in need.</p>	<p>People receive an OT assessment within 14 weeks of referral</p> <p>People with supported equipment are reviewed annually to ensure that the equipment provided continues to safely meet their needs.</p> <p>People can access an online self-assessment tool</p> <p>OTs in the Newport Integrated OT Service use MOTOM (Morrison Occupational Therapy Outcome Measure)</p>	<p>No one will wait more than 14 weeks for an OT assessment</p> <p>Reduction in the numbers of residents waiting for a non-complex assessment by an OT.</p> <p>85% of OT cases will be reviewed annually</p> <p>There will be data available that evidences the positive impact on residents' lives following OT input.</p>
<p>To develop alternative opportunities for people with a Learning Disability to meet the statutory duty for social care and</p>	<p>Completion of the Re assessment and review project with 5 objectives to modernise Learning Disability services.</p>	<p>Service users who have eligible needs will have access to a range of opportunities to help maintain what is important to them.</p>

wellbeing.

To build on the reassessments of service users to ensure that eligibility is applied equitably.

There will be a greater range of community based opportunities for people with Learning Disabilities.

Transitions, Earlier engagement with people in transition, to inform service development and manage expectations.

A broader range of services will be available, on a local basis, to young adults with a Learning Disability.

There will be greater opportunities to support carers in their caring role.

Local economy stimulated to provide more sustainable and appropriate opportunities.

Opportunities can be more appropriate and proportionate.

Independence will be nurtured in their own community rather than in out of area services.

Part 3b: Action Plan

Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
Understand and agree with partners what information is required to maximise independence and choice for everyone in Newport that has a social care need.	Change programme Adults commissioning strategy	Agreed information plan. Staff that come in contact with people with a social care need are able to promote independence.	Embedded in change programme project deliverables
Ensure everyone who has a social care need receives high quality information	Change programme Adults commissioning strategy	Create an knowledge hub for service users on how to access information. Work with partners to create a single city wide resource to promote wellbeing and good health as well as effective signposting Develop approaches to reach-out to everyone who has a social care need including those from seldom listened to / hard to reach groups	Embedded in change programme project deliverables
Identify and engage with people and groups who use our services, or may use our services in the future, including those with whom we do have an active relationship with.	Change programme Adults commissioning strategy	Work with community organisations to ensure all groups can participate in developing new services	Embedded in change programme project deliverables
Support carers to access information to help them continue to provide care	Change programme Adults commissioning strategy	Carers strategy and plan	Head of Service

Outcome 2 Effective prevention and early intervention for people with a social care need

Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
Develop a wide range of prevention and early intervention service	Change programme Adults commissioning strategy MTRP	A published framework for prevention and early intervention.	Embedded in change programme project deliverables
Ensure all prevention and early intervention for people with a social care need is outcome focused.	Change programme Adults commissioning strategy MTRP	Deliver and commission services where all front line staff are be trained to use goal setting /and motivational interviewing so they can support all individuals achieve the positive care outcomes	Embedded in change programme project deliverables
Develop and sustain community resilience	Change programme Adults commissioning strategy MTRP	Shift investment towards development of low-cost no-cost care options for people with low levels of care. Develop a system where organisations that provide paid for care or informal care can self-identify to service users their services.	Embedded in change programme project deliverables

Outcome 3 Everyone that has an eligible care need receives outcome focused person centred social care

Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
Ensure everyone with a eligible care need accesses good quality services	Corporate plan Change programme Adults commissioning strategy	Ensure the care that is delivered is outcome focused Contract compliance has good quality measures built around individual outcomes	Service manager QA Commissioning team manager
Prioritise the development of appropriate services that are in Newport or within 10 miles of the council	Change programme Adults commissioning strategy MTRP	Amend contract specifications to reflect this strategic prioritisation within procurement guidelines	Embedded in change programme project deliverables Service Manager QA Commissioning team manager
Start a new generation of outcome focused care	Change programme Adults commissioning strategy	Plan and commission a new generation of outcome focused social care A range of outcome focused services commissioned covering older people, people with learning disabilities, disabled people and people with mental health conditions	Embedded in change programme project deliverables Service Manager QA Commissioning team manager
Shape a mixed market of Providers	Change programme Adults	Supporting market development by assisting communities to encourage social enterprises and other	Embedded in change programme project deliverables

Outcome 3 Everyone that has an eligible care need receives outcome focused person centred social care			
Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
	commissioning strategy MTRP	community based initiatives to develop a range of preventative and supportive services.	Service Manager QA Commissioning team manager
Improve our assessment and care planning process to ensure they are outcome focused	Change programme Adults commissioning strategy	Outcome focused approaches are demonstrated in all care plans. This will be evaluated through QA process	Embedded in change programme project deliverables Quality assurance officer

Outcome 4 Supporting Older People Leaving Hospital (Improvement objective 1)			
Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
See section 6 below			

Outcome 5 Improving care and support services for adults (Improvement objective 2)			
Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
See section 6 below			

Outcome 6 Accreditation for Dementia care within the Internally provided care homes.

Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
Accreditation for the 'Butterfly Project' at Spring Gardens initially. Delivered to criteria required.	CSSIW regulation process Provider quality assurance reporting	Improve the person centred approach to care for people with dementia in long term care environments. External validation of good practice in dementia care. Measured via annual quality assurance report	Registered Manager Service Manager

Outcome 7 Ensure Community OT service meets the equipment and adaptation needs of people in need.

Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
People receive an OT assessment within 14 weeks of referral Monitor and review waiting lists held by NCC and ABUHB for accuracy Appoint to staffing vacancies Review capacity across the integrated OT Service/demand.	Performance management	Waiting lists and timings reduced to 14 weeks and under	Integrated OT Service Manager COT Team Manager Performance Management Officer
Annual review of moving and handling	Change	85% compliance target	Integrated OT

Outcome 7 Ensure Community OT service meets the equipment and adaptation needs of people in need.

Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
<p>equipment</p> <p>Bi annual telephone review of bath lifts</p>	<p>programme</p>		<p>Service Manager</p> <p>COT Team Manager</p> <p>OT staff across integrated service</p>
<p>COT Team Manager to work with project team and IT to put in place an online self-assessment</p>	<p>Change Programme</p>	<p>Reduction in the numbers of residents waiting for a non-complex assessment by an OT.</p>	<p>COT Team Manager</p>
<p>Education & Practice Development Lead OT and Senior Prac OT to develop database to record use of MOTOM (Morrison Occupational Therapy Outcome Measure)</p> <p>Roll out use of MOTOM to CRT OTs and Long Term Conditions OTs</p> <p>Roll out use of MOTOM to Community Hospital OTs</p> <p>Roll out use of MOTOM to Acute Hospital based OTs</p>		<p>There will be data available that evidences the positive impact on residents' lives following OT input.</p>	<p>Integrated OT Service Manager</p> <p>COT Team Manager</p> <p>Senior Prac OT, Advanced Prac OT, Education & Practice Development Lead OT</p>

Outcome 8 To develop alternative opportunities in the community for people with a Learning Disability			
Key Actions/Plans/Projects	Links to	Success Criteria	Responsible Officer
Review of residential and supported living service provision to ensure consistency and equitability of the eligibility criteria	MTRP Change programme Supreme Court Judgement (Cheshire West).	Appropriate care packages that improve outcomes and are value for money. Where appropriate, applications to the Court of Protection in line with the Supreme Court Judgement (Cheshire West).	Service Manager Team Manager
To continue to reorganise the transition process and develop models of learning opportunities.		Young people with learning disabilities developing their skills and interests to their maximum potential.	Service Manager
Development of community opportunities for people with Learning Disabilities and their carer's. Promotion of formal and informal community networks to complement alternative service delivery models and to incorporate wider community inclusion.	MTRP Change programme Adult Services Commissioning Strategy	Broader and more flexible range of community opportunities for people with learning disabilities and their carer's. The provider market working closer together to stimulate and innovate	Project Manager Team Manager Service Manager

Part 4: Managing and monitoring risk

Risk	Mitigation activity	Risk rating (high, medium or low)
Not reaching consensus on a model to deliver integrated working pathway for older people with health as key partner	Project jointly sponsored with health partners, remind all parties of aims and objectives of the co-production approach	low
Staff shortages to deliver reviews with reablement	Early intervention with sickness and absence management	medium
Financial risk – budget based on current levels of service users, high discharge levels based on community health issues can increase demand for services in the community	Ensure optimum reablement activity for all individuals discharged from hospital to ensure overall demand for services is managed. Building step up/step down beds (intermediate care) are supplied and built into a joint budget arrangement with Health.	Low risk currently, budget managed to overall underspend in 2014/15.
Social care hub is not key arrangement for hospital discharge to community – inefficient discharge planning is the risk	Continue to work with ABHB to develop a joint discharge arrangement across health secondary care (acute) and social services	low
Time delay by further changing team responsibilities to long term reviews	Project support to ensure communication and process change maintained	low

Part 5: How success will be measured

Measure (include reference)	Views reference number e.g. SCA/001 (if existing measure)	Type	Baseline	Year 1: Target 15/16
Delayed Transfers of care	SCA/001	NSI	5.37 per 1000	3.96 per 1000
Support for older People in the Community	SCA/002a)	NSI	61.81 per 1000	64 per 1000
Support for Older people in Care Homes	SCA/002b)	NSI	14.36 per 1000	16.2 per 1000
Adult Protection risk Managed	SCA/019	NSI, PAM	98.58%	96%
Care Plan Reviews	SCA/007	PAM	77.90%	85%
% Carers offered assessment or review	SCA018a)	PAM	94%	90%
Number hospital discharge assessments	CCAS/L/017	IP	1297	800
LA Residents Experiencing DTOC #	SCA/001 (N)	IP	62	46
% people needs met following planned discharge	CCAS/L/019	IP	92%	95%
Number of people fully re-abled	CCAS/L/020	IP	371	270
OT Assessments & Reviews	CCAS/L/026	IP	NEW	85%

Common Measures

Measure (include reference)	Reference	Type	Baseline	Target 15/16
CCC Jobs within SLA		Common	98.03%	90% (TBA)
Employee Sickness		Common	20.73 days	15.83 days
Employee Sickness Long Term		Common	17.61 days	12.87 days
Employee Sickness Short Term		Common	3.12 days	2.96 days
My Review Completed	NHR/001	Common	64.1%	80%
Return to work in 7 calendar days	NHR/010	Common	67.82%	71.89%
Overtime	NHR/012	Common	£106,184.12	£96,264.00
Agency	NHR/013	Common	£341,113.00	£310,613.00
Budget management BMS cost centres	FIN/L/015	Common	57%	65% (TBA)

Part 6 Improvement Objectives from the Improvement Plan

Theme 1. Supporting Older People Leaving Hospital

What are we going to do this year?	What difference will it make?
1.1 Reduce DTOC levels for social care reasons to 4/1000 of the population	Less people waiting on hospital wards is widely seen by people as a positive thing. It is also widely accepted that people's recovery is enhanced in their own surroundings.
1.2 Fully implement a single referral for discharge at RGH site which links therapist, social work and frailty team.	By developing systems with less duplication then people will have clarity on how their discharge is being supported and planned and the health staff are also assured that referrals are being consistently managed.
1.3 Working in partnership to adopt a 'discharge to assess' approach, where patients are discharged from hospital once they are medically fit and have their support needs assessed within an agreed timescale on arrival at home.	<p>This approach will ensure people are not staying within hospital environments for any longer than medically necessary.</p> <p>This will also establish rehabilitation needs within the home environment and not based on hospital ward conditions.</p>

Theme 2. Improving Care and Support Services for Adults

What are we going to do this year?	What difference will it make?
2.1 To continue to improve the volumes of reviews of care plans completed up to 85% by the 2015/16 year end	Completion of reviews in timely way will ensure that we are more proactive and not reactive in our approach. This will ensure that we can identify issues for clients where their care needs can fluctuate and provide reablement at the right times maintaining independence and avoiding use of other services e.g. Unplanned hospital admissions.
2.2 Agree review team structure in line with client pathway so we ensure consistent review practice	Improving team structure will improve contact arrangements for people should their needs change, i.e. knowing which team clearly holds responsibility for their case work.
2.3 Develop and implement a revised process as part of integrated assessment to include the needs of carers and ensure that all cases are reviewed appropriately.	This will improve our approach in line with the Social Services Act (2014) for implementation in 2016

Part 7a: Regulators proposals for Improvement (WAO, ESTYN, CSSIW)

Proposal for improvement	Action planned	Expected close down date	Responsible officer
CSSIW Inspection recommendations following review of 'meeting the needs of older people with complex needs'.	Action plan- see appendix 2	As per action plan	As per action plan

Part 7b: Fairness and Equalities Impact Assessments

Reviews required in 2015/16 for MTRP projects

Part 7c: Welsh Language

Mwy Na Geiriau / More Than Just Words is a Welsh Government Strategy initiative relating to health and social care which seeks to ensure that Service Users can access the care they need in Welsh, if that is their choice. Welsh Government regards it as an integral part of their care that Service Users should not be disadvantaged by having to ask for care in Welsh and places the onus on the provider to make the 'active offer' at first point of contact - that is, ask all potential Service Users if they want to have their care delivered in Welsh. The onus would then be on the provider to provide Welsh-medium care if that was the Service User's choice.

The first Action Plan cycle commenced in mid-2013 and will last for two years, with a twice a year reporting cycle. There are six Strategic Objectives, and Newport's first report (December 2013), using the 'traffic lights' reporting system showed up as all 'red'.

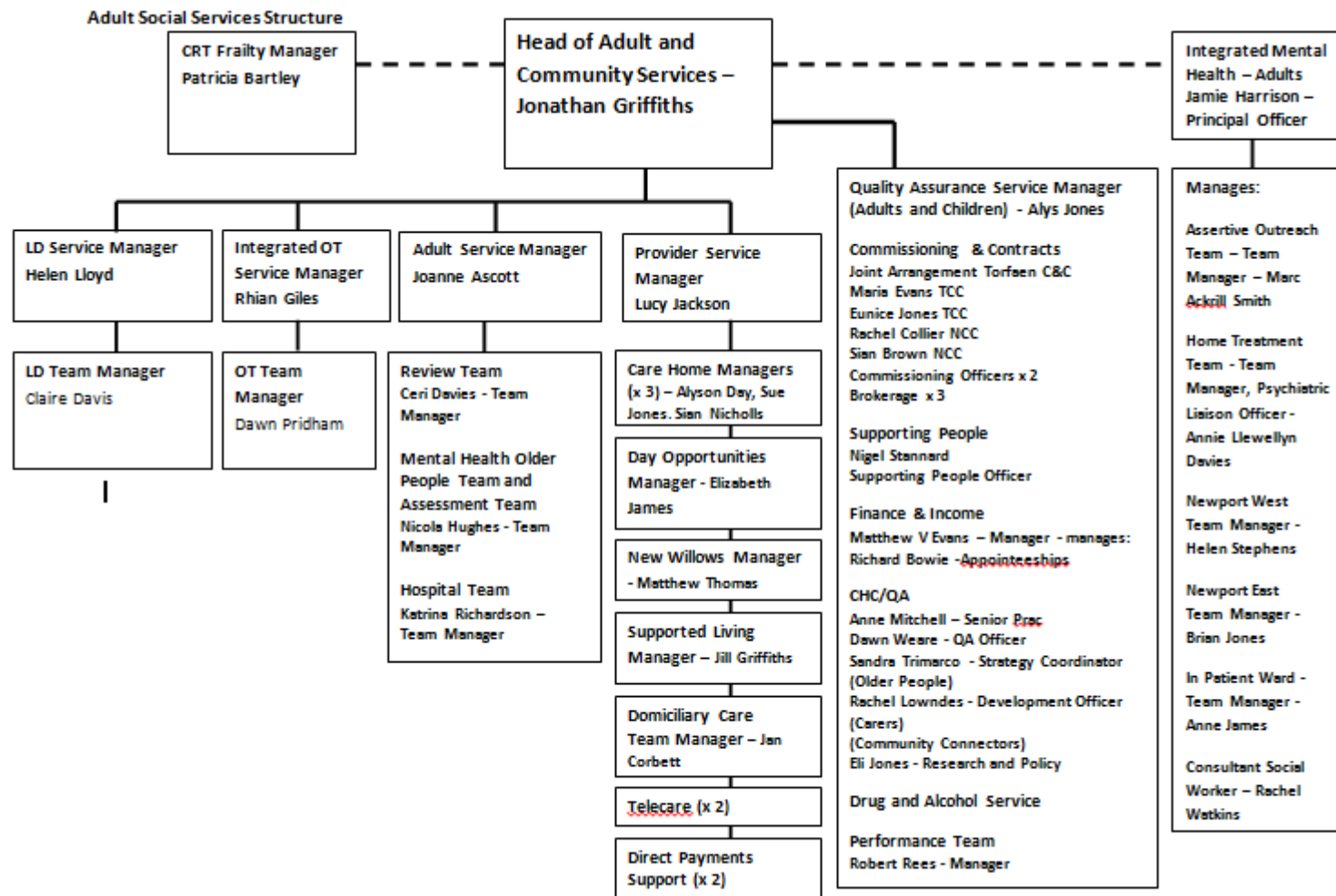
A work-plan has been assembled. This include *inter alia* the setting up of a Departmental Welsh Language Development Group, a staff skills audit to help identify gaps in provision, (particularly in customer facing services), meeting with providers to both explain the legislative requirements and establish what resources are currently available, and the incorporation of the 'active offer' in all relevant documents such as potential policies and procedures (e.g. **Disabled Parking Bays**), strategies (e.g. **Commissioning Strategy for Adult Services**), and guidance.

This is a statutory requirement where the ultimate aim is to normalise Welsh-language provision and incorporate it as mainstream. It has had a delayed start but in order to deliver on it, staff will require a supportive ethos and a clear lead from both senior officers and elected members.

Part 7d: Partnerships

Title of Meeting/Forum/Working group etc.	Other Agencies Involved and Partnerships	Governance Arrangements
Gwent Frailty programme	Health Gwent LA's Third Sector	Gwent Frailty Programme Board (Part of Greater Gwent Partnership arrangements for health and social services))
GWICES (integrated equipment services)	Health Gwent LA's Third Sector	GWICES Management Advisory Board
Newport Integrated Partnership Board	Health (including GP NCN area leads) Gwent LA's Third Sector	Board chaired by Director of Social Services and GP Clinical Director
South East Wales Adult Placement Scheme	SEWIC LA's Registered Provider	SEWAPS Board
Gwent Adult Safeguarding Board	Health Third sector Gwent LAs Police	Gwent Adult Safeguarding Board

Appendix 1



Adult Services Action Plan in response to CSSIW Inspection 2015-2016

Recommendations	Action / Outcomes Required	Lead officer	Delivery date	Evidence/Outcomes to date	Link to Document / Policies	RAG status
<p>Recommendation 1</p> <p>A pathway for older people should be defined and articulated which includes the team structures, supporting systems, tools and processes. This should include defining what each member of staff and team are required to contribute at each step and ensuring that they have the necessary skills to deliver their particular responsibilities including where there are integrated and/or colocated arrangements with partners.</p>	<p>Draft client pathway and associated public guidance note.</p> <p>Consultation on client pathway and associated guidance notes with staff, key stakeholders and partners and agree final papers</p> <p>Draft Team structures – including definition of team member roles</p>	<p>Service Manager Quality Assurance (AJ)</p> <p>AJ</p> <p>JG- supported by service management team</p>	<p>31/3/15 completed</p> <p>March – June 2015</p> <p>31/3/15 Completed</p>	<p>Draft pathway completed (<i>copy provided to CSSIW</i>)</p> <p>Pathway consulted with joint health strategic group 8/4/15</p> <p>Workshop to define draft pathway and structure solution – February 2015</p> <p>Draft structure defined (<i>copy provided to CSSIW</i>)</p>	<p>Integrated pathway for older people pilot</p> <p>Adult Services commissioning Strategy</p>	A

	Staff engagement on team structures	JA /AJ/HL- supported by JG	20&21/4/15 Completed	Dates programmed and venue arranged		
	Formal consultation with staff affected by structure proposals including Trade Union involvement	JA & AJ- supported by HR business partners and JG	May – June 2015	Trade Union and staff formal consultation timescales agreed 01.07.15 - Following HR guidance, the staff restructuring process to incorporate Service Manager configuration. Consultation process for Service Manager role commenced June 2015.		
	Implementation of structural changes	JA & AJ- supported by HR business partners	June-August 2015 (likely to slip in line with timescale required for service management first step)	Formal consultation arrangements from 4/8/15 for service managers, trade union notification involved.		
	Supporting	AJ- supported by	June 2015 agreed procedures and guidance notes			

	<p>systems and skills development – including training and access to information, resources, policies and procedures</p> <p>Promotion and publication of agreed pathway and linkage to key strategic priorities – listing to website external and internal- published to key stakeholders</p>	<p>JA, quality assurance and new ways of working project resource</p> <p>JG- supported by public relations/marketing office</p>	<p>on-going training programme for staff.</p> <p>June 2015</p>			
<p>Recommendation 2.</p> <p>The point of contact and access arrangements for older people must be clarified and agreed as a priority. Action should be taken to provide assurance that people will be responded to in a timely way and that the staff they are talking to have the</p>	<p>Clarify point of contact and timely access arrangements for Adult Social Service</p>	<p>AJ</p>	<p>23/2/15 completed</p>	<p>Information station duty hub arrangements with adult services in place (<i>copy provided to CSSIW</i>). Adult social care and information station staff in specified team within the process, dedicated telephone extension number provided for adult service client contact</p>	<p>Adults Services commissioning strategy Strategic priorities 1&2</p> <p>MTRP 2015/16- <i>Active living</i></p>	<p>G</p>

<p>appropriate skills and to respond to their needs and concerns. The Council should also consider how other pilots such as the Neighbourhood Care Networks and the “integrated pathway for older people”, would interface with the Gwent Frailty single point of contact, the Council’s customer portal and the duty system currently operated by Adult Social Services team.</p>	<p>Review changes to point of contact- data examination and client views on experience of contact</p> <p>Strategic planning arrangements to be changed/formalised, the Newport Integrated Partnership to ensure improved planning for-</p> <ul style="list-style-type: none"> • Joint single point of contact for health and social services linked to Frailty and joint NCN based operational teams (linked to actions for recommendatio 	<p>AJ- supported by project management resource</p> <p>MN and JG with lead Health colleagues <i>‘Integrated Partnership Board’</i></p>	<p>July 2015</p> <p>April 2015 Meetings to be programmed to determine actions and manage progress</p> <p>Initial meeting of integrated partnership board 13/5/15</p>	<p>ensuring more consistent and timely response. <u>01.07.15</u> Further social work workshop on the 19.6.15 to develop role of social work within the duty hub function.</p> <p>Staff workshops with Duty hub workers on 30.07.15 & 01.7.15 regarding eligibility and signposting training.</p> <p>Process guidance being developed to guide and support duty hub staff i.e. Telecare, OT process and Extra Care.</p> <p>Meetings held with Health colleagues April 2015 to agree</p>	<p><i>for older people</i></p> <p>Integrated pathway for older people pilot</p> <p>Single Integrated Plan-<i>integration work-stream</i></p> <p>Greater Gwent Health and Social Care Partnership arrangements</p>	
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	<p>n 1 above)</p> <ul style="list-style-type: none"> • Developing integrated processes • Developing specific pathways eg 'end of life care' • Joint approach to estates management to support joint working • Linking pilot project eg integrated pathway for older people to improve targeted intervention and early intervention <p>Partnership will include Newport GP NCN leads to agree joint action planning</p>			<p>Partnership arrangements- agreed by partners, dates to be programmed.</p> <p>Integrated pathway pilot board in place- minuted</p> <p><i>(Outline of planning arrangements copied to CSSIW)</i></p>		
<p>Recommendation 3</p> <p>Senior Managers must establish where the care</p>	<p>Devise a process to ensure that</p>	<p>JA & AJ- supported by HR business</p>	<p>June – August</p>	<p>See recommendation 1 above</p>		<p>A</p>

<p>management and review responsibilities lie and which teams have the responsibility/ownership for individual cases.</p>	<p>responsibility and ownership is recognised and evidenced for individual cases.</p> <p>See actions under recommendation 1 above</p>	<p>partners</p>	<p>2015</p>	<p>Draft structure defined (copy provided to CSSIW)</p> <p><u>01.07.15</u></p> <p>Arrangements commenced to relocate MHOP team social workers into the Civic Centre, and reconfigure Assessment and MHOP teams into one team. Completion end of July 2015.</p> <p>Data analysis and NCC demography information gathering commenced to determine nature, size and caseload of NCN teams and specific review function team. Meeting 07.07.15 to review current position and agree team structure staff and caseload numbers for progress towards NCN foot prints.</p>		
<p>Recommendation 4</p> <p>An outcome focussed approach to the assessment of older people should be further developed, which supports the consideration of a range of options and</p>	<p>Agreed Gwent action plan to develop integrated assessment consistent in region and in line</p>	<p>AJ & JA</p>	<p>March- Sept 2015</p>	<p>Agreed to work jointly with Caerphilly CBC so development linked to swift database arrangements</p> <p>Task and finish group in place and meetings now in progress</p>	<p>Adult Service commissioning strategy, strategic priority 3</p>	<p>A</p>


<p>opportunities for the individual and their Carers.</p>	<p>with Guidance. Staff training programme to be agreed to explore and culturally shift to outcome focussed approach. Link to SSIA pilot to develop All Wales Outcomes Framework- work closely with B Gwent LA as an agreed pilot site.</p>	<p>AJ- supported by training unit and quality assurance</p>	<p>July 2015– on-going training programme for staff.</p>	<p>to deliver action plan milestones New rationalised Care Plan implemented across Adult Services June 2015.</p>		
<p>Recommendation 5 A robust approach to risk assessment and positive risk taking is required, underpinned by a policy, tools and training which is aimed at improving the skills of assessment and care staff.</p>	<p>A robust approach to risk assessment and positive risk. Examination of risk assessment arrangements applied by Health colleagues and examination of good practice from LA. Agree model to implement. Supporting systems and skills development – including training</p>	<p>AJ Integrated assessment task and finish group See recommendation 1 & 4, consistent training programme</p>	<p>June 2015 July 2015– on-going training programme for staff.</p>	<p>Risk assessment planning part of integrated assessment task and finish group. <u>01.07.15:</u> WARRN currently being applied across AMH and LD services, and arrangements to proceed to MHOP and all other adult teams. Commenced discussions with ABUHB re : use of WARRN to progress this for all complex risk assessments in adult services. On-going development of Integrated Assessment Framework on-going and has</p>		<p>A</p>

	and access to information, resources, policies and procedures			identified need to integrate WARRN process into generic Integrated Assessment documentation effectively.		
Recommendation 6.						
The approach to Carers' assessments should be improved, including the assessment offer and embedded across all teams.	Devise and implement new quality assurance processes following appointment of QA Manager	AJ	July 2015	QA service manager appointed April 2015	Carers Action Plan	A
	Embed the new processes and procedures across all teams	AJ, HL, JA	July 2015-on-going	Carers development officer supporting development of information station duty process		
	Carers connectors posts to be integral to pathway arrangements, first point of contact and existing carers, increase carers assessment and review	AJ	Feb - July 2015	Carers Connectors appointed February 2015		

	<p>performance</p> <p>Carers offered assessment or review to achieve set targets for 2014/15</p>	AJ, JA, HL	January 2015 Completed	Target achieved – all Carers Assessment requests now completed and appropriate follow up support provided		
<p>Recommendation 7.</p> <p>A workforce strategy to support the development of this pathway should be developed which includes skills development (including risk assessment), capacity and succession planning.</p>	<p>Devise and implement a workforce strategy paying particular attention to the consultation phase of this piece of work and skills development, risk assessments, capacity and succession planning</p> <p>Workforce strategy development group initiated with agreed terms of reference</p> <p>3 year strategy to</p>	AJ	April 2015	<p>Terms of reference (draft) in place</p> <p>Strategy group first meeting 22/4/15</p> <p><u>01.07.15</u></p> <p>Adult Workforce Strategy Group now operational. ToR in place and sub-groups with lead chairs in place and tasks agreed: Recruitment Process</p>		A
		AJ- supported by	June 2015-	Web page development		

	be agreed and implemented	development group	ongoing Finalised strategy estimated for December 2015	Training Opportunities Development Succession Planning		
Recommendation 8						
<p>The arrangements for commissioning of Adult Social Services post April 2015 must be put in place as a priority and progress made on securing the range of services required to meet the future demands, in particular for older people. The links between the Commissioning Plan and the Medium Term Financial Plan should also be strengthened</p>	<p>Complete formal consultation for Market Position Statement (MPS)</p>	AJ	May 2015	Needs assessment document	Adults Services commissioning strategy Strategic priorities 1&2	A
	<p>Report outcome of consultation with finalised MPS to Corporate Management Team and Cabinet member.</p>	AJ & JG	May – June 2015	<p>Draft Market Position Statement</p> <p>Third sector reviewing mechanism</p> <p><u>01.07.15</u></p>	<p>MTRP 2015/16</p> <p>Corporate Plan</p>	
	<p>Promotion and publication of agreed MPS – listing to website external and internal-published to key stakeholders</p>	JG- supported by public relations/marketing office	June 2015	<p>Commissioning and Contracts Team Manager appointed and commencement date 03.08.15. However, agreement from current employer that some days spent within NCC progressing specific key areas.</p> <p>Commissioning Strategy in place.</p>	<p>Market Position Statement and Needs Analysis currently under review.</p>	
	<p>Develop Procurement/Purchasing plan informed by strategic priorities</p>	AJ – Supported by commissioning manager and procurement category manager	July 2015			

	<p>and the MPS.</p> <p>Third sector contracts review linked to MTRP objectives and outline the strategic priorities and shift to preventative services</p> <p>Redefine model of domiciliary care services required for Newport over the next 3-5 years linked to MPS and Purchasing Plan and commence tender process (identified in MTRP 2015/16)</p> <p>Define overarching delivery plan linking all key strategic plans for adult services (including MTRP), NCC corporate</p>	<p>Commissioning Manager- ME</p> <p>Commissioning Manager- ME</p> <p>JG</p>	<p>May 2015</p> <p>December 2015</p> <p>May-June 2015</p>	<p>Due to slippage in time scales, current contracts with domiciliary care providers have been extended until March 2016 to minimise risk within the Tender process. Actions for redefinition of domiciliary care in place:</p> <ol style="list-style-type: none"> 1. Options Paper- July 2015 2. Provider Forum planned for 1st week in September. 3. Case management review process to identify good practice issues. 4. Tender process out to public domain early October 2015 5. Service user feedback to be undertaken October 2015. 6. Equality and impact assessment 		
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	planning, and Greater Gwent partnership planning arrangements					
Recommendation 9						
The scrutiny of performance relating to Adult Social Services should be improved through the provision of supporting information and the development of Members' ability to explore the underlying issues and drive forward the necessary and agreed service improvements	<p>To complete the Gwent Scrutiny Challenge project and use the resulting toolkit to undertake a self-assessment of Overview and Scrutiny in Newport, critically evaluating scrutiny performance and establishing priorities for improvement.</p> <p>To include the priorities for improvement in the Scrutiny Annual Report 2014/15, and ensure progress is monitored through the</p>	<p>Scrutiny Team / Scrutiny Improvement Group.</p> <p>Scrutiny Team / Scrutiny Improvement Group.</p> <p>Scrutiny Team / Scrutiny Improvement Group.</p>	<p>July 2015</p> <p>July 2015</p> <p>Planning meeting by end of April 2015</p>	<p>Agreed with scrutiny committee quarterly reporting to detail quality assurance</p> <p><u>01.07.15</u></p> <p> FW CSSIW Newport Scrutiny.msg</p>		A

	<p>year. Performance against this year's priorities will be evaluated in the Annual Report for 2015/16.</p> <p>To develop the links between Scrutiny and Auditors, Inspectors and Regulators, responding to the research being undertaken at the national level as well as the findings of the Gwent Scrutiny Challenge. In particular, to set up direct contact with local representatives of CSSIW and other regulators to discuss how we can work more closely together, and to agree priorities for improvement and any necessary</p>	<p>Scrutiny Team / Scrutiny Improvement Group.</p> <p>Scrutiny Team / Scrutiny Improvement Group.</p>	<p>October 2015</p> <p>Performance Board / Scrutiny work to be completed by December 2015</p>			
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	<p>support.</p> <p>To review the work programmes to ensure scrutiny work is focused on key risks and priorities, and can make a positive impact on service improvement and policy development.</p> <p>To continue to develop the relationship between the Executive and Scrutiny, to include clarification of roles and responsibilities and the links between the scrutiny function and Performance Board. On-going action through year.</p>					
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Lead Officers-

Alys Jones (AJ), Service Manager, Quality Assurance

Joanne Ascott (JA), Service Manager, End to End Services

Jonathan Griffiths (JG), Head of Adult Services

Angela Turner (AT), Projects Programme Manager

Helen Lloyd (HL), Service Manager, Adult learning disability

Maria Evans (ME), Commissioning Manager (joint arrangement with Torfaen CBC)