

East Sussex Social Services Draft Joint Review Action Plan: June 2002

1. Introduction

This draft Joint Review Action Plan is presented for initial Member agreement. It is a summary of a range of important activities and is, in itself, 'work in progress'. More detailed project plans for the individual activities will need further development. This will be done in consultation with our partners, the Joint Review Team and the Social Services Inspectorate over the summer. The Action Plan will then be presented to Cabinet for final ratification on 22nd October 2002.

Work in many areas was already in progress at the time of the Joint Review and will continue during the intervening period.

The Action Plan will consist of 5 components

1. Introduction
2. The Action Plan – detailing actions, milestones, timescales and lead responsibilities
3. The Consultation Programme – a timetable of activity
4. Resource Implications – summary of key implications
5. Monitoring the Action Plan – detailed description of monitoring intentions (not present in draft)

The recommendations in the Joint Review are extensive and prioritisation is required. East Sussex will, in the first instance, focus on the key themes for immediate action, which can be summarised as tangible improvements on the indicators outlined below. Milestones for other activities, particularly over the next 2 - 5 years, will be developed in consultation with our partners. We believe that by addressing the Joint Review Priorities for Action in this way East Sussex can move forward more rapidly, addressing all the recommendations effectively.

This action plan links closely with other planning documents already adopted by the Authority as part of the regular business planning cycle, in particular the Council Plan and the Social Services Strategic Plan 2002/03. Those reports will stand and action identified will continue to be worked on and monitored in conjunction with this Action Plan to ensure there is consistency and a coherent drive towards improvement.

Work is being undertaken to identify appropriate performance indicators, both from the National Performance Framework and others developed locally, to ensure close monitoring of progress in implementing this plan. This exercise, including the development of a monitoring tool, will be completed for final ratification in October 2002.

The Vision

We have a clear vision for tackling these issues, which is set out below.

Overall Objective To transform the user experience and place users and carers at the centre of our decision-making processes, ensuring user friendly, rapid access to both assessment and, where appropriate, services which are flexible, tailored to meet individual need, empowering, and promote independence.

- a) To support older people wherever possible in their own homes by retaining the current low level of admissions to residential and nursing home care, and steadily increasing both the numbers supported in their own homes, and those receiving "intensive" home care packages.
- b) To transform assessment and care management, training and developing the workforce, devolving budgets, integrating the process with health professionals, and significantly developing reviewing and the close care management of people prior to hospital admissions, and after hospital discharge.
- c) To reduce delayed discharge, while recognising the need to invest heavily in support at home, and resisting the temptation to increase residential and nursing home care admission rates, which would be the easiest solution, but strategically wrong.
- d) To become increasingly a commissioning organisation, and to build greater strategic commissioning capacity; to commission care using Best Value principles, reducing current levels of direct provision where comparable quality care is available at lower cost in the independent sector.
- e) To make major progress in integrating health and social care, through integrated strategic commissioning, pooled budgets, and single assessment and care management.
- f) To develop, jointly with Health, a broader and more extensive range of intermediate care schemes, through both short-term measures in 2002/03, and based on a joint analysis of need, in the longer term.
- g) To dramatically improve performance management, building a strong framework where the Departmental Strategic Plan, founded upon clear targets, often based upon PAF PIs, is the crystal clear foundation for Divisional and Team Plans, and individual managers' targets.
- h) To increase steadily the levels of spend on older people, in order to narrow the gap between current levels of spend, and the SSA for Older People.

The improvements users will notice by November 2002

- a) There will be at least 440 new or increased independent sector home care packages provided between 1.4.02 and 30.9.02, compared to 250 for the same period in 2001.
- b) The number of older people helped to live at home (PAF C32) will increase from 6,500 in June 2001 to at least 7,000 by 30 September 2002.
- c) There will be at least 150 new or increased intensive home care packages provided between 1.4.02 and 30.9.02, compared to 60 for the same period in 2001.

- d) The levels of acute delayed discharges awaiting Social Services care will fall from 101 on 1.6.02 to 85 by 30.9.02 (further joint work in hand to reduce this further).
- e) All Managers and Senior Practitioners will have received two days training and a comprehensive programme for all staff will have begun, in line with an agreed Project Plan that includes implementation of the Single Assessment Process.
- f) Six additional Social Worker posts and three Occupational Therapy Assessment posts will have been created, focusing on preventing hospital admission and facilitating discharge, resulting in hospital social work teams extending their operating hours to 8am-8pm (Monday to Friday), and 8am to 12pm (Saturday).
- g) The 'Living at Home Programme' will be extended by an additional 16 beds, to allow an additional 40 older people to receive a service during 2002/03.
- h) Two directly provided homes have now been closed and decisions on the future of a further three have been made.
- i) A joint health and social care project team will have been established, to develop strategic commissioning, single assessment and care management, and improve the quality of the user experience.
- j) We will no longer have anyone waiting on a service pending list by 31 July 2002.
- k) 12 block home care contracts will be out to tender by 31 October 2002.
- l) Two extra-care housing schemes will be out to tender by 31 October 2002.

2. Draft Joint Review Action Plan

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
1. Strategic Vision					
1.1	Develop a clear strategic vision, driven by better outcomes for users and carers and move towards the desired 'whole systems' approach for managing social and health care.	<p>The overall vision is outlined in key documents agreed with partners in multi-agency fora at member executive and officer level (see appendix for list of key documents). The main tenets of this are included in the introduction to this action plan. We will consult on these with stakeholders during the summer in tandem with the consultation for this plan.</p> <p>The options for the delivery of a 'whole system' Social Care model for East Sussex to realise the vision will be developed with our partners.</p> <p>1) Options available for MH services for immediate consideration. 2) Apply information to test models in older people's services.</p> <p>This activity will inform more detailed work set out in the rest of this plan.</p>	Complete consultation by November 2002.		Director & DMT
1.2	Share the Strategic Vision with staff and partners	<p>Use existing communication mechanisms to provide opportunities for staff to contribute to the development of and be familiar with the strategic vision.</p> <p>Use formal and informal channels to consult with partners.</p>	<p>Departmental Joint Consultative Committee, Divisional conferences, Brief Encounter DMT Roadshow</p> <p>Agenda items on formal meetings with partners.</p>		DMT

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
1.3	Develop a workforce strategy that supports our strategic goals, in partnership with others	Components of a workforce strategy based on operational service strategic objectives already in place. Participation underway in a strategic HR forum with health partners. This will be used to agree a Joint Workforce Strategy following individual discussions between HR function.	Workforce Strategy agreed by December 2002		Head of PADS
1.4	Manage the budget but avoid being driven by it.	Medium term (3 year) financial strategy in place which realigns the budgets to more closely match service objectives. See also Reconciling Policy & Resources document.	3 year financial strategy agreed by November 2002		AD FABS
2. Improving the User and Carer Experience					
2.1	Access Provide rapid and seamless access arrangements, in partnership with other agencies, in accordance with the government's expectations in "Fair Access to Care",	Improve access by jointly developing contact teams into locally focused contact services with common practices to ensure equity of access for all appropriate services.	Two Contact Centres with call centre technology in place by April 2003		AD FABS
2.2	Assessment Strengthen multidisciplinary working and assessment procedures	Implement the single assessment process jointly with health Agree a joint process for determining access to continuing care services	Local standards and performance indicators for independent living teams established and monitored monthly Agree criteria by April 2003 Agree criteria by April 2003	Implement by April 2004 Implement by April 2004	Local operational managers Integration Manager Integration Manager
2.3	Care Planning Make good quality assessments the basis for service provision by improving care management ensuring that it:	Complete the review of care management & implement recommended new system.	Care management review completed by June 2002 Proposals agreed with partners by Oct 2002 All managers will receive 2		Head of P&PRU AD Adults & Head of Commissioning

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
	<ul style="list-style-type: none"> • is explicit and understood by all participants. • focuses on outcomes for users and meets statutory obligations for assessments and funding. • matches resources to demand 	<p>Ensure all users receive copies of relevant information leaflets.</p> <p>Local managers to monitor care plans to ensure they reflect needs and not available services and state clear outcomes for users.</p>	<p>days training and a comprehensive programme for all staff will have begun by Nov 2002</p> <p>Fully implemented by April 2003.</p> <p>Regular reporting of monitoring.</p>	<p>Review</p>	<p>Operations Managers</p>
2.4	<p>Achieve planned reductions in waiting times for an assessment.</p> <p>Eliminate the service pending list and ensure that all people assessed as needing a service receive one.</p>	<p>Waiting times monitored against standards monthly by local managers</p> <p>Evaluate impact of "waiting times" and propose solutions.</p> <p>Allocate £1.75 million of additional resources to community care services in 2002/3 to eliminate the service pending list.</p>	<p>Quarterly trend analysis.</p> <p>Initial findings by Oct 2002.</p> <p>Continued monitoring to ensure no one waits for a service beyond agreed service delivery timescales after September 2002.</p>	<p>No return to anyone waiting for services in following years.</p>	<p>P&PRU and local managers</p> <p>Head of Commissioning & Head of Special Services</p>
2.5	<p>Involving Users and Carers</p> <p>Actively involve and empower users and carers on a continuous basis in tailoring individual packages of care and planning services.</p>	<p>Monitor standards set in the 'Involving Users and Carers' policy.</p> <p>Collate data from service-based customer satisfaction surveys.</p> <p>Continue to support advocacy</p> <p>Collate user feedback from contract monitoring to demonstrate impact on contracts and purchasing strategy .</p> <p>Ensure Users and Carers</p>	<p>Annual Report on progress in Autumn 2002.</p> <p>Reporting established by January 2003.</p> <p>Consultations monitored via</p>		<p>Head of P&PRU and 'Involving Users and Carers' Group</p> <p>Head of Commissioning</p> <p>Head of Contracts & Purchasing</p>

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
		representation and consultation mechanisms are in place for all key plans.	corporate system		
2.6	Customer focus Develop further focus on customer care, and monitor performance in this area.	Continue to promote customer care standards. Include the standards in the induction checklist/programme Introduce monitoring at team level	Monitoring report July 2002.		Head of Commissioning and Training & Organisational Development Manager
2.7	Continue to develop carers assessments and ensure that staff recognise cares as partners in the provision of care for service users.	Initial focus will be on ensuring current activity is properly recorded. Targets for Independent Living Teams set and performance monitored quarterly.	Increase the number of informal carers receiving an assessment to 20% (PAF D42)	Further increase PAF D42 by 10% per year.	Head of Commissioning
3. Improving and Reshaping Services for Older People & Other Adults					
3.1	Ensure that strategic commissioning decisions are consistently based on an analysis of user needs and the resources available.	Draw together: <ul style="list-style-type: none"> Needs analysis information Information on resources available Joint planning priorities Review the availability of respite care against assessed needs. Phase 1 – carry out an analysis of the need for services of older people with mental health needs. Phase 2 - analysis of needs of Older People 	Initial findings by October 2002 Project Brief complete June 2002 Consultants engaged to complete by September 2002		AD Adults Project Manager AD Adults
3.2	Improve Joint Investment Plans, and use them to determine service strategies and resource allocation.	Integrate JIP plans into revised multi-agency planning forums	Integrated by August 2002 Revised JIPs by Dec 2002		Head of P&PRU
3.3	Develop a 3 year service plan to fundamentally re-shape older people's services and implement the joint "whole systems" strategy for Older People. This will build on existing successful	Establish the joint Disability and Older People's Strategy Group to oversee & co-ordinate changes to older people's services	June 2002	Continued reduction In	AD Adults AD Adults

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
	schemes and make them available across the county to more people, sustained by long term funding.	Sub-group of Disability and older people's strategy Group to identify services needed and plan future developments: <ul style="list-style-type: none"> • First tranche of expanded services • Develop stepped increases in services according to planned release of funds from financial strategy. Establish Older People's Change Team to develop & implement specific changes to older people's services.	In place by April 2003. November 2002	delayed discharge from hospital In place by April 2004 & April 2005	AD FABS Head of PADS & Head of P&PRU Partnership Manager (adults)
3.4	Prioritise community care services for older people, including intensive home care.	An additional £550K has been allocated to the home care budget in 2002/3, targeted at intensive home care services. Increase levels of spending on services to older people over the next 3 years	The number of older people helped to live at home will increase to at least 7,000 by 30.9.02 There will be at least 150 new or increased intensive home care packages provided between 1.4.02 and 30.9.02 Increase PAF C28 from 4.1 to 5.5 and PAF C32 from 58 to 65 by 31/3/03 3 year budget proposals finalised by November 2002	Targets for future years set by November 2002	Head of Commissioning
3.5	Continue to develop preventative services and build on the early positive experience of joint working with Health in developing the Living at Home Programme and Community Collaborative Rehabilitation Team	Identify short term, non-recurrent schemes to address delayed transfer from Hospital to cover winter 2002/03 focussing investment on preventative services such as: <ul style="list-style-type: none"> • intensive home care • intermediate care • respite care 	Proposals agreed by July 2002 Services in place by Oct. 2002 Reduction in delayed discharges to meet target of: 78 beds	Longer term service development via 3.3 above.	AD Adults & Head of Commissioning

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
		<ul style="list-style-type: none"> • increased assessment staff in hospitals • more step-up, step-down beds • extend LAHP etc. 	48 beds 40 beds Extend by 16 beds		
3.6	Review in-house residential homes against identified need for residential care	Close Haldane & Parker House residential homes. Complete review of next two homes Complete reviews on a further five homes. Begin the reviews of the final four homes	Completed by July 2002 Completed by July 2002 Decisions by February 2003 March 2003	Complete review by July 2003	Head of Older People's services Project Manager
3.7	Work closely with District Councils and Health in building and accessing key community resources including supported housing, putting Supporting People at the centre of the community care strategy	Establish a senior level Health Housing Social Services Department and Commissioning Body for Supporting People. Develop a Supporting People 'shadow strategy' identifying priorities for development: <ul style="list-style-type: none"> • Agree County Strategy • Establish Local Implementation Groups • Initial projects funded Develop a system to gather and utilise robust supported housing needs data to inform future commissioning. Develop and agree an extra care housing strategy for older people Develop 5 pilot extra care housing schemes: <ul style="list-style-type: none"> • Marlborough House, Hastings • Gwent Court, Eastbourne • Other 3 schemes currently being 	April 2002 By October 2002, By December 2002 By April 2003. To start June 2002 and then ongoing. Jan 2003 By May 2003 By Dec 2002		Head of P&PRU & Head of Commissioning

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
		negotiated			
3.8	<p>Hospital Discharge Together with Health colleagues invest in service infrastructure to reduce delayed discharge from hospital</p> <p>Develop an improved hospital discharge agreement</p>	<p>Commission a consultant to develop an East Sussex Delivery Plan to identify action needed to reduce delayed transfers</p> <p>Promote active case management to divert people from Hospital admission and Hospital discharge into community based resources rather than residential care via additional social workers placed in A & E departments & within hospitals</p> <p>Continuing development in partnership with health, of intermediate care services and further development of County (see 3.5 above)</p> <p>Develop a new agreement</p> <p>Continued joint monitoring of the weekly position on delayed discharges.</p> <p>Agree joint arrangements for monitoring and continuous improvement</p>	<p>Plan produced by 31/8/02</p> <p>Reduce delayed discharges to meet target of 85 by 30.9.02</p> <p>Agreed jointly by July 2002</p>		<p>AD Adults</p> <p>AD Adults & Head of Commissioning</p> <p>Head of P&PRU</p> <p>AD Adults & Head of Commissioning</p>
3.9	<p>Work with all Health partners to agree and resource a model for older people's community mental health teams (CMHTs)</p>	<p>District Audit to examine the investment of resources within CMHTs for older people with Mental Health problems:</p> <ul style="list-style-type: none"> • Report to H & SC Integration meeting to agree proposals, • Action plan produced 	<p>By September 2002</p> <p>By Dec. 2002.</p>		<p>AD Adults & Head of Specialist Services</p>

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
3.10	Work with the Learning Disability Partnership Board to modernise services for people with learning disabilities.	<p>Develop a framework for person centred planning for users with Learning Disability as outlined in the White Paper – ‘Valuing People Framework: Toward Person Centred Approaches’.</p> <p>Implement training programmes for staff, which will increase understanding of the principles and process of Person Centred Planning</p>	<p>15% of service users will have a person centred plan by March 2003.</p> <p>By December 2002.</p>		<p>AD Adults & Learning Disability Management Team</p> <p>AD Adults, AD C&F, Training and Development Officers</p>
3.11	Improve transition from children’s to adult’s services	<p>Create ‘seamless services’ that respond effectively to the transitional needs of children moving to adult services.</p> <p>Review the outcomes of the Transition Panel</p>	By October 2002		AD Adults & AD C&F
4. Building Better Partnerships with Health					
4.1	Prioritise the links with the emerging Primary Care Trusts, by ensuring a strategic role for assistant directors, supported by Heads of Service, Partnership and Joint Commissioning managers.	Links at board & executive levels with new PCTs confirmed and in place.	Achieved April 2002		DMT & Partnership Managers
4.2	Develop role as the county-wide strategic planner and commissioner,	<p>Joint Planning Framework developed with:</p> <ul style="list-style-type: none"> • new strategic forum for older people in place. • Health & Social Care Forum established; Terms of reference to be produced • Health & Social Care Partnership Board to focus on adult services • Children’s & Young People’s Strategic Partnership • Strategic Housing Forum, & Supporting People Commissioning Body. 	<p>April 2002</p> <p>July 2002</p> <p>Established September 2002</p> <p>Board to be established June 2002</p> <p>Established April 2002</p>		Director & DMT

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
4.3	Ensure that joint planning arrangements are clear, effective and efficient and lead to service changes and improvements.	Establish working group to: <ul style="list-style-type: none"> • review joint planning arrangements and structures • improve process for producing service plans (Joint Investment Plans, NSF implementation plans and local HIMPs) • develop link to & impact on resource allocation. 	Proposals by October 2002		Head of P&PRU
4.4	Define how users and carers could benefit from joint commissioning and service delivery.	Working with key partners, users and carers to establish clear commissioning strategies across all services to ensure the most effective use of resources. Ensure Commissioning strategies align with budgetary position as each strategy is developed.	Agree dates for completion of commissioning strategy for each service		AD Adults, AD C&F & Partnership Managers
4.5	Review the Authority's internal service boundaries and, where possible, align them with the emerging PCT boundaries	The budget alignment with locality operational managers (see 6.2) will enable greater clarity of resources available at PCT level and also facilitate realignment of services at that level.	Budgets and boundaries coterminous with Health by 1 October 2002.		AD FABS & AD Adults
4.6	Achieve efficiencies and improved service integration through the use of "pooled" budgets and the flexibility's available under the Health Act 2000.	Pooled budgets for Mental Health & pooled budget for Learning Disability services established. AD FABS meeting with the Directors of Finance from Health Trusts to pursue further development.	1 October 2002 July 2002		Head of Specialist Services AD FABS
4.7	Produced details for integrating services for older people	<ul style="list-style-type: none"> • Health & Social Care Integration meeting, special workshop planned for 1 October 2002. • Develop proposals for pooled budgets. 	1 October 2002 December 2002		Director & DMT
5. Shifting the emphasis from providing to commissioning good services					
5.1	Over the next three years we will reduce reliance on in-house services	<ul style="list-style-type: none"> • Continue the review of in-house residential care for older people 	(See 3.6)		Project Director AD FABS & AD

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
		<p>following the agreed closure of 2 homes.</p> <ul style="list-style-type: none"> Continue to implement Home Care BV Review recommendations with an emphasis on transferring in-house home care 	<p>Externalise 35% of in house home care by April 2003</p>	<p>Explore potential for externalising more</p>	<p>Adults AD Adults, AD FABS & Head of P&PRU</p>
5.2	<p>Increasingly commission appropriate services from the independent sector</p>	<p>Joint Commissioning plans, based on clear analysis of need, in place for each service (see 3.1 and 4.3)</p> <p>Reduce reliance on independent sector residential care by applying revised criteria and increasing access to domiciliary care.</p> <p>Develop plans for piloting Living at Home Programme in the independent sector.</p> <p>Develop commissioning skills and systems through training and recruitment</p>	<p>There will be at least 440 new or increased independent sector home care packages provided between 1.4.02 and 30.9.02</p> <ul style="list-style-type: none"> Plan developed by September 2002 Service operational by December 2002 <p>Programme in training plan 2002/03</p>		<p>AD Adults, Head of Commissioning & AD FABS</p> <p>Training and Organisational Development Manager</p>
5.3	<p>Develop other forms of contracts, to achieve better value for money and simpler and cheaper transactions;</p> <p>Manage the market better, and build a more constructive relationship with independent providers, allowing them to business plan with more confidence.</p>	<p>Implement block contractual arrangements with residential, nursing care and home care service providers.</p> <p>Meet with key independent sector partners in home care and promote planned growth in market</p>	<p>At least 75% of Home Care Services to be out to block contract tender by November 2002</p>		<p>AD FABS Head of Contracts & Purchasing</p>

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
	Improve purchasing arrangements and unit cost data	Develop existing contract monitoring process, which includes feedback from service users, to other forms of contracts. <ul style="list-style-type: none"> • establishment of purchasing unit; • tighten monitoring and improved accuracy in activity data • improve greater accuracy of unit costs. 	Develop user QA feedback mechanism for all block contracts Purchasing Unit in place by April 2002 Produce accurate unit cost on CIPFA stats returns for 2002/03 financial cycle		Head of Financial Services
6. Integrating service and financial planning and devolving budgetary control					
6.1	Develop a clear strategic vision, driven by better outcomes for users and carers Manage the budget, but avoid being driven by it;	Medium term (3 year) financial strategy to return the Department to financial stability in place. Create 3-year strategic plan to recycle resources and deliver the vision	Consult by Oct 2002. Strategic vision in place by Nov. 2002; share it Jan/Feb to inform the development of service plans.		AD FABS
6.2	Align service plans with the budget making process, and produce them at the beginning of the financial year; Set targets for both activity levels and financial commitments, and monitor them in tandem	Produce and action a financial commissioning strategy for adult services to match policy objectives. Where required savings are delivered, enable investment in more appropriate services eg. shifting investment from institutional care to community based provision, which is focused on promoting independence and rehabilitation.	Effective monitoring of all budgets including savings achieved and investments made and quarterly reporting mechanism established. Costed strategy for 3 year shift to preventative services for Older People by November		AD Adults & AD FABS
6.3	Set needs-based budgets for user groups and allocate them to managers;	Devolve the community care budget to at least locality operational managers.	Separated and devolved budgets for Learning Disabilities and Mental Health. Devolved home care budgets to locality managers working through home care purchasing units by April 2002. Devolved Older People's		AD Adults & AD FABS

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
			residential and nursing care budget to localities by 1.09.2002		
6.4	Make managers and staff accountable for budgets, and support them better with training and information systems	Financial training for locality operation managers.			AD FABS
6.5	Ensure that information is reliable and that management information is kept up to date and accurate	<p>Identify areas of incorrect recording and report to DMT & Heads of Services on accuracy levels quarterly.</p> <p>Develop consistent practices of recording by creating and implementing a 'Carefirst' competency programme for staff and managers to improve understanding of the system and the accuracy of data input.</p> <p>Train managers to access reports for monitoring & planning purposes to enhance ownership of information.</p>	<p>SR1, RAP, HH1 returns to be analytically reviewed by AD FABS for inaccuracies.</p> <p>Improved and simplified version of Carefirst with faster platform in place by... Improved access lines to all Carefirst site by Nov</p>		<p>Head of e-business, Head of P&PRU, Head of Commissioning & Head of Specialist Services</p> <p>Head of e-business, AD ICT CRD</p>
6.6	Set targets for both activity levels and financial commitments, and monitor them in tandem	Regular monitoring of performance (Section 7) will facilitate meaningful integration of service and financial plans.	Improved business plans for 2003/04		Head of P&PRU
6.7	Review Policy and practice on 'self funders'	Measure the number and trends of previous "self funders" requiring support from Social Services and profile budgets and practices to meet statutory requirements.	Identify numbers of self-funders by July 2002 Project demand for 2002/03 + 2003/04. Allocate budget accordingly	Integrate 'self-funders' into Community care funding process	AD FABS
7. Improving the management of performance					
7.1	Ensure that management information is kept up to date and is accurate	<p>Review, improve definitions & develop consistency checks on data used for management information by</p> <ul style="list-style-type: none"> - benchmarking indicators with other authorities - ensuring all relevant services are included in East Sussex 	<p>Improved data collation for 2001/02 PAF returns</p> <p>Best Value indicators audited by District Auditor</p>	Annual internal audit of data	Head of Commissioning, Head of Specialist Services & AD FABS

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
		<p>performance indicators.</p> <ul style="list-style-type: none"> - Providing PAF indicator information at team level to increase local ownership and understanding. 	Team level data reported by August 2002		
7.2	<p>Develop local performance indicators to enable better understanding of trends in national indicators and to help make links to individual and team performance;</p> <p>Link individual staff appraisal more clearly to service plans and performance</p>	<p>All service plans/team plans to contain SMART targets which contribute to national performance measures and include local measures</p> <p>Further develop service plans to improve poor performance on national & local indicators.</p> <p>Key elements of team plans will become individual targets within the Personal Development System for all members of staff</p>	<p>Service plans in place by April 2002.</p> <p>Improved performance on identified KPIs & CPIs,</p> <p>Monitor number of completed PDS within year.</p>	Ongoing monitoring and review	<p>AD Adults, AD FABS & Head of P&PRU</p> <p>Heads of Service</p>
7.3	Produce agreed datasets with improved layout and distribution, to allow trend analysis and comparisons;	'Traffic Light' monitoring of corporate Council Plan to be replicated at departmental level for the SS Plan. This will enable feedback from performance to be linked into the strategic and corporate planning cycles for the following year.	Quarterly monitoring of targets		Head of P&PRU
7.4	Improve monitoring of performance against targets	Regular monitoring of SMART targets at all levels. The frequency, level of monitoring and distribution of reports is dependent upon the type of target. See 'Managing Performance Handbook' for details.	'Managing Performance Handbook' in place by July.	Indicator list updated quarterly	AD Adult Services, AD Children & Families & Head of P&PRU
7.5	Develop an accessible set of relevant high level performance indicators for councillors	Corporate Key Performance Indicators (KPIs) and Social Services Core Performance Indicators (CPIs) to be reported quarterly to DMT and Lead Member for Social Services & Scrutiny Committee.	Indicators & data sources identified. Pilot monitoring & present, first ¼ report August 2002.	Continual improvement of system,	Head of P&PRU

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
7.6	Develop local performance indicators to enable better understanding of trends in national indicators and to help make links to individual and team performance;	Review presentation of monitoring reports, in consultation with end users data to include trend analysis and comparison, internally with other teams & externally with comparator and best performing authorities. Reports to include feedback form to continuously improve presentation & performance.	List of reports & distribution in Handbook		AD FABS & Head of P&PRU
7.7	Use benchmarking as a tool to improve performance and encourage comparison with the best	Promote regular contact with local and comparator authorities to provide benchmarks to improve performance	Maintain contact with SEARIG, SSRG, ADSS etc		AD FABS & Head of P&PRU
7.8	Use Best Value to drive the service development and change agenda. Prioritise the forthcoming whole systems review of older people's services.	Implement recommendations of Best Value review and renegotiate schedule of reviews in line with departmental priorities.	Joint Best Value Review of Services to Older People completed by September 2002		Director & Scrutiny Committee
7.9	Use complaints better to inform improvements to services and focus on quality	Develop a system to disseminate information to managers and staff about outcomes from service users comments and complaints based on best practice elsewhere.	System in place by Dec 2002 Summarised data within publicly available Annual Report, Autumn 2002		Head of PADS and Complaints Manager

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
8. Improving Children's Services					
8.1	Develop a clear strategic vision, driven by better outcomes for users and carers, and share it with staff and partners;	Continue to develop Children's and Young Peoples Strategic Partnership	Set up CYPSP Board – June 2002; stakeholders conference July 2002;	Integrated services in place by 2004 – disabled children; CAMHS; family support; assessment teams. CYPSP is effective body for strategic planning.	AD Children & Families, AD Health AD Education (Pupil & Family Services)
8.1.1	Engage meaningfully with local partners within a clear strategic framework;	Develop broad vision for children's services;			
8.1.2	Get the balance right between county and locality priorities;	Enhance partnership arrangements with District and Borough LSPs	needs analysis completed by October 2002;		Policy Officer, Social Services
8.1.3	Consult and empower users and carers on a continuous basis	Improved analysis of key data for each of the Borough and District LSP areas; Develop integrated working; Strengthen consultation with young people.	proposals for integrated services in place by October 2002; process for regular consultation in place by September 2002.		Policy & Performance Unit Manager, Education
8.2	Manage the budget, but avoid being driven by it; Make managers and staff accountable for budgets, and support them better with training and information systems; Match budgets to establishments	Effective budget management and monitoring to ensure that services are provided within the available resources; primary objective will be a gradual reduction in the use of agency placements with a high unit cost.	Children's budget is on line in 2002/03. Monthly monitoring by CFDMT and DMT. 33% reduction in agency placements by March 2003	50% reduction in agency placements by March 2004	AD Children & Families, Heads of Service & Operations Managers

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
8.3	Go for strategic solutions and avoid short-term and false economies	Continue to make improvement of the foster care service a top priority	Continuous improvement in service standards and increase number of foster carers by 30 March 2003. Rigorous implementation of Fostering Service Regulations.	Fostering service receives positive NCSC inspection; further increase in foster carers of 40 by March 2004	Head of LAC Services, Operations Manager (Fostering) and Training & Organisational Development Manager
8.4	Integrate recruitment and retention strategy and training strategy into comprehensive workforce strategy.	Develop Assistant SW role and in-house NVQ based programme to enhance skill base of staff in key settings. Produce proposals for appropriate skill mix in different service areas.	Strategy in place	NVQ programme in place.	Head of Locality Services; AD Education (Pupil & Family Services); AD Health
8.5	Prioritise improvements to assessments and services for children with disabilities	Develop joint strategic framework for disabled children with Education and Health, to include common eligibility criteria and joint assessment process, moving towards an integrated service.	Strategic framework developed by October 2002; proposals for integrated service pilot in Hastings in place by October 2002.	Integrated service in place by 2004	Head of Specialist Services ; Head of SEN Branch; Policy & Planning Manager (Disabled Children); Performance Manager, Eastbourne Downs PCT

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
8.6	Prioritise improvements to assessments and services for children with disabilities	Improve referral and assessment process for disabled children by ensuring work carried out by specialist social workers	Proposals for improved service developed by September 2002.	Specialist joint assessment process from April 2003.	Head of Specialist Services, Policy & Planning Manager (Disabled Children) and Operations Manager (Disabled Children)
8.7	<p>Prioritise improvements to assessments and services for children with disabilities;</p> <p>Tailor services around users, rather than slotting users into services</p>	Expand Link Scheme and Outreach service	Increase from 55 to 80 the number of Link families; expand Outreach service from 320 hours per week to 420 hours per week - by March 2003	Continued service reconfiguration /expansion, in light of strategic framework	Head of Specialist Services; Operations Manager
8.8	Improve transition from children's to adult's services	Improve transitions planning to enable disabled young people to experience a smooth transition to Adult Services	Analyse needs of all disabled young people aged 14+ to improve strategic planning; review working of transitions service, panel and protocol; link transition service firmly to Learning Disability Partnership Board & Connexions		Head of Specialist Services, Policy & Planning Manager (Disabled Children); Head of SEN Branch; AD Health; Operations Manager Learning Disability
8.9	Use Best Value review to develop a Family Support Strategy in partnership with other agencies	Develop SSD Family Support Policy for children need and inter-agency Family Support Strategy for vulnerable children	Draft SSD Policy in place July 2002; finalised by October 2002; draft Family Support Strategy developed after stakeholder conference in July 2002; final strategy in place January 2003		Head of Locality Services with CYPSP team

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
8.10	Make good quality assessments the basis for service provision by improving care management, focusing on outcomes for users and meeting statutory obligations for assessments and funding	<p>Improve assessment and care planning for all children receiving a service.</p> <ul style="list-style-type: none"> - all children in need, including disabled children, will have care plans - they will be updated at regular reviews - there will be a stronger focus on needs and outcomes, especially for LAC - all visits to children on CPR will be recorded - core assessment timescales will be monitored closely - Carers' assessments will be implemented fully. 	All in place from April 2002; monitoring by CP Unit and LAC Chairs; 3 monthly reports to CFDMT		Head of Locality Services & Operations Managers; Head of Child Protection Services (monitoring)
8.11	Ensure that strategic commissioning decisions are consistently based on an analysis of user' needs and the resources available	Complete detailed analysis of all children in need, including LAC, from minority ethnic groups, in order to inform service planning, especially foster care, to meet their identified needs.	Complete analysis by June 2002; address in Family Support Strategy, in development of fostering service and in Department's Equalities Action Plan	Appropriate services developed 2003/04.	Operations Manager, Quality Protects (analysis) Head of Locality Services & Head of LAC Services (to develop services)
8.12	<p>Address the variations in caseloads within children's social work services;</p> <p>Introduce consistent quality assurance and case load management systems and focus on performance at the team and individual level</p>	Implement and monitor workload management system in order to ensure that work is distributed equitably across locality teams; continue to review staffing establishment and adjust as necessary in order to ensure that there is consistency and equity across the County.	System implemented from 01.04.02; restructuring of Lewes teams in July 2002 and Wealden teams in September 2002.	Review in March 2003; adjust as necessary	Head of Locality Services

Ref.	Objectives (what we want to do)	Action (how we will do it)	Milestones 2002/03	Milestones 2-5 years	Officer Responsible
8.13	<p>Align service plans with the budget making process, and produce them at the beginning of the financial year;</p> <p>Set targets for both activity levels and financial commitments, and monitor them in tandem;</p> <p>Link individual staff appraisal more clearly to service plans and performance</p>	<p>Implement divisional and team plans, which include targets for activity levels, and monitor at 3 monthly intervals.</p>	<p>Divisional Plan and reconfigured budget in place at beginning of April 2002.</p>		<p>AD Children & Families & CFDMT</p>
8.14	<p>Introduce consistent quality assurance and case load management systems and focus on performance at the team and individual level;</p> <p>Use complaints better to inform improvements to services and focus on quality</p> <p>Link individual staff appraisal more clearly to service plans and performance.</p>	<p>Improve performance management by expanding the quality assurance system to include;</p> <ul style="list-style-type: none"> - regular file audits - ongoing monitoring by CP advisers & LAC Chairs - Regular monitoring of PAF indicators - Learning lessons from complaints - By implementing PDS for all staff. 	<p>Team plans in place by 30.04.02; all managers' PDS targets set by 30.06.02; all staff included in rolling programme of PDS. 3 monthly audit reports to CFDMT; 6 monthly reports on complaints to CFDMT</p>		<p>Head of Child Protection Services</p>
8.15	<p>Produce agreed data sets with improved layout and distribution, to allow trend analysis and comparisons.</p>	<p>Improve management information and formalise minimum data set to drive performance.</p>	<p>Operations Managers take responsibility for ensuring that data is accurate and up to date. Minimum data set agreed in April 2002.</p>	<p>Direct Practitioner input fully implemented by 2004.</p>	<p>Heads of Service, Operations Managers and Senior Information Officer</p>

3. The Consultation Programme

This will involve active engagement with all our partners* and include discussion at established key forums, special meetings and negotiation with key individuals who will play a part in the action plan. Consultation will take place during July, August and September 2002.

Key Formal Forums include:

Health & Social Care Integration Meeting	16 July / 17 Sept
Health & Social Care Partnership Board	5 Sept
Strategic Forum for Housing, Health & Social Services	19 July / 25 Sept
PCT Board Meetings: Eastbourne Downs	14 Aug / 11 Sept
Bexhill/Rother	11 July / 12 Sept
Hastings / St. Leonard's	15 Aug / 12 Sept
Sussex Downs	
PCT Executives Meeting	11 Sept
Community Trust	
Hospital Trust	
Voluntary Organisations/DMT	9 Sept
Independent Care Group Meeting	5 Sept
ACPC	10 Sept
Children & Young People's Strategic Partnership Team	16 July
Scrutiny Committee	
Corporate Parenting Panel	30 July
Staff Area Conferences	June / July
DJCC	19 Sept

*Our partners include:

Other East Sussex County Council Departments, particularly Education
Health colleagues - PCTs, NHS Trusts, Strategic Health etc.
Boroughs and Districts, particularly Housing
Police, Probation, ACPC, YOT etc.
The Voluntary Sector
Independent providers of services.

4. Resource Implications

1. Financial Implications

Where specific actions require new financial investment these have been clearly identified within this plan.

The Joint Review Team's view of East Sussex's financial position is that the Authority receive adequate funds, but has continued to invest in traditional and expensive directly provided services. The challenge is to invest in services that more effectively and efficiently meet the needs of the residents of East Sussex. This reflects the direction that the Authority has already started on. There is a need however to invest more in services to Older People, at the expense of other areas. This has begun in 2002/03, and current work to finalise a three year budget strategy is based upon this priority. In addition, all savings made as a result of directly provided services being reviewed, and increasing use of the independent sector, will be fully re-invested in services to Older People.

Early areas of re-investment are £300,000 for the Older People's Change Team (3.4) which may attract some external funding. A further £500k being re-invested during 2002/03 for short term measures to reduce delayed discharge (3.5).

2. Staff Resources

The key implication for staff in implementing the action plan is to ensure that they are

- able to contribute to the development of the plan and detail of the actions to be undertaken,
- well informed of relevant action agreed within the final agreed action plan,
- receive adequate training to achieve identified actions, specifically in the areas of
 - improving the user experience, that is, issues relating to access and the development of care management;
 - improving and reshaping adult services;
 - commissioning good services;
 - aligning service and financial planning;
 - improving the management of performance.

Appendix

Key Additional Documents

1. The Council Plan 2002/03
2. Social Services Strategic Plan 2002/03
3. 'Whole Systems' Strategic Plan for Older People 2001-2004
4. 'Involving Users and Carers' Policy Annual Report
5. Hospital Discharge PIP