

CQC Annual Performance Report 2008/09Improvement Plan

| | CQC Comment | Improvement Actions | Lead Officer |
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| Outcome 1 Improved Health and wellbeing | Having recently reviewed data presented to the Department of Health in respect of hospital 'delayed transfers of care' the council is aware the overall numbers of people delayed is accurate. However, whether individuals are delayed for social care or health reasons is less accurate. A higher number of individuals were recorded, in error, as being 'delayed' due to social care reasons and therefore distorts the originally submitted data. The council and Health partners are fully committed to revising their data recording systems to enable future data to be presented accurately. | <p>The Council and NHS partners have reviewed the process for data collection and revised this in the light the issues identified. A revised and robust process has been implemented and all partners are confident in the data quality. There is a new weekly sign-off by the General Manager, Adult Social Care.</p> <p>Nationally arrangements have been made for all local authorities to have access to the reports sent into the national data base (UNIFY 2).</p> | Paul Martin |
| | The percentage of systematic reviews undertaken to measure outcomes achieved for individuals known to the council has reduced. The council must ensure activity does not reduce further considering performance is now below the average of similar councils. | A new Reviewing Team has been established within Adult Social Care and started work with effect from October 2009. Actual and planned activity within this team will deliver the improvement target of 82%. | Karin Divall |

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| | | There is an improvement plan and increased resources in place for Learning Disability Reviews to achieve our target of 82%. We also introduced Outcome focussed reviews in April 2009. | Jugal Sharma |
| Outcome 2 Improved quality of life | No specific improvements required | | |
| Outcome 3 Making a positive contribution | Whilst the council has in place all the mechanisms for consultation and engagement with the voluntary sector, the latter report a shift in power base is required if the voluntary sector is to be fully influential. This perception is acknowledged by the council who are committed to exploration and resolution. | <p>We will explore this issue within the current arrangements for engaging with voluntary sector partners. We will also meet with the sector as a collective group to look in more detail at the personalisation agenda/social capital, as well as using CVSF links. A market development worker is currently being recruited, hosted by the Federation of Disabled, to work with the third sector.</p> <p>We will explore and resolve our engagement with LD voluntary sector partners and self advocacy groups through review of LD</p> | <p>Denise D'Souza</p> <p>Jugal Sharma</p> |

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| | | Partnership Board with new arrangements in place by April 2010. We will also contribute to work to improve voluntary sector partnerships across client groups. | |
| Outcome 4 Choice and Control | No specific improvement required | | |
| Outcome 5 Freedom from Discrimination and Harassment | No specific improvements required | | |
| Outcome 6 Economic well being | No specific improvement required | | |
| Outcome 7 Dignity and Respect | The council should ensure that its safeguarding strategy is fully accessible to people who fund their own social care, considering the developing personalisation agenda. | The Safeguarding Board is now chaired by the DASS and has refreshed terms of reference. An action from the November 2009 Board meeting is that all partners will carry out an audit of communication/information so that the Board can be assured that information is readily available for people regardless of whether they receive services currently from | Karin Divall |

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| | | <p>ASC. The BHCC leaflet has also been revised and has been distributed widely to ensure that people, again regardless of whether they fund services or not, have up to date information about where to go for advice and support. The BHCC single Access point which was established in May 2008 provides information and advice and signposting to people regardless of whether they fund their own services.</p> | |
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