HEREFORDSHIRE COUNCIL

ACTION PLAN in response to the Commission for Social Care report *Inspection of services for people with learning disabilities – January/February 2007*

June 2007

Introduction

This plan sets out the Council's positive response to the CSCI report on services for people with learning disabilities, following the inspection in January and February 2007.

This plan has been developed and is being implemented as an integral part of the Council's comprehensive programme of improvement for adult social care and related services, including health.

The plan groups and prioritises the Council's actions to address CSCI's twenty-seven individual recommendations.

Immediate priority is being given to the recommendations in respect of weaknesses in assessment and care management, including safeguarding (Recommendations 10-12).   Action has already been taken to tackle the backlog of reviews and is in hand to ensure that it does not recur. The other matters in this grouping concern person-centred planning, transition from children's to adults' services and the updating of the manual of policies and procedures (Recommendations13-14, 27).

The second grouping (Recommendations 3-6,15,22-23) is to ensure that the Council's and partners' plans and commissioning are comprehensive, integrated, realistic, properly resourced and prioritised, so as to deliver successfully high-performing modernised services that maximise independence, well-being and choice.

The third grouping (Recommendations 1-2,7-9,16-17,21) is about empowering people with learning disabilities and their carers. Central to this is the Council's intention to make self-directed support (direct payments and individualised budgets) the mainstream response to meeting people's needs. Other important components are the re-launching and re-energising of the Valuing People Partnership Board and the development of greatly improved advocacy.

The fourth grouping (Recommendations 18-20,24-25) sets out how we will increase opportunities for people with learning disabilities and tackle inequalities through an accelerated and targeted programme of equality impact assessments, increasing the numbers in meaningful employment and ensuring better health care.

This programme of radical change and improvement requires a fundamental shift in culture and approach to the provision of services. Finally, therefore, underpinning the whole of this action plan, is the action to ensure that the Council and its partners have a workforce with the right understanding, knowledge, skills and behaviours to deliver it successfully (Recommendation 26).

The action plan will help to deliver the following themes of the Herefordshire Community Strategy:

Improving public health, quality of life and promoting independence and well-being for disadvantage groups….

Improving business, learning and employment opportunities….enabling sustainable prosperity for all

And the following Council priorities:

Reshape Adult Social Care, enabling vulnerable adults to live independently

Promote diversity and community harmony and strive for equal opportunities for all the people of Herefordshire, regardless of race, religion, disability, sex, sexual orientation, geographical location, income or age.

Recruit, retain and motivate high quality staff, ensuring that they are trained and developed to maximise their ability and performance.

Following last year's assessment of the future needs of adults with learning disabilities and the modernised services needed to meet them, the Council gave its full support to the action required and ring-fenced the initial investments needed to achieve that. It is determined to see this programme through to success.

Key to the responsible managers identified by their initials in the plan

AHas - Andrew Hasler, Performance Improvement Manager, Adult and Community Services

AHea – Anne Heath, Head of Integrated Services and Inclusion, Children and Young People's Services

AT – Andrew Tanner, Interim Change Manager, Adult Social Care

CN – Catherine Nolan, Learning Disability Service Manager

CT – Carol Trachonitis, Equality and Diversity Manager

DH – Dean Hogan, Strategic Procurement and Efficiency Review Manager

DJ – David Johnson, Head of Human Resources

DP – David Powell, Head of Financial Services

GH – Geoff Hughes, Director of Adult and Community Services

JP – Jan Parfitt, Workforce Developer, Herefordshire Primary Care Trust

JW – Jennifer Watkins, Chair of the Herefordshire Valuing Partnership Board and Herefordshire Partnership Manager

LB – Lydia Bailey, Learning Disability Accommodation and Support Project Manager

LFre – Liz French, Human Resources Manager, Learning and Development

LFer – Laura Ferguson, Day Opportunities Project Manager

LH – Lynne Hodgman, Adult Protection Co-ordinator

MH – Martin Heuter, Senior Community Involvement Officer

MM – Mike Metcalf, Impact Team Partnership Officer, Herefordshire Primary Care Trust

MS – Martin Smith, Contracts and Commissioning Manager

RB – Robert Blower, Head of Communications

RG – Richard Gallagher, User Involvement Assistant

SC – Stephanie Canham, Head of Learning Disability Services

SD – Sue Dale, Prevention Services Manager

SM – Steve Martin, Improvement Leader, Adult Social Care

ST – Sheila Thompson, Human Resources Officer, Recruitment

TG – Tony Geeson, Head of Policy and Performance

TJ – Tracy Jelfs, Joint Service Manager Children with Disabilities and Ill Children

TK – Tanya Kirby, Learning Disability Development Officer

YC – Yvonne Clowsley, Director of Planning and Performance Management, Herefordshire Primary Care Trust

Herefordshire Council's Learning Disability Action Plan

Directorate Priority	Promoting choice and independence; and creating a safer place to live, work and visit	
Ref.	CSCI Recommendation / Objective	Context / Evidence
11	The Council should address the huge backlog of annual reviews to ensure that service users have their needs appropriately met	530 people known to services, the majority of whom had not had annual reviews
12	The Council should strengthen the Assessment and Care Management service with regard to improving management oversight, processes, practice and recording	
Council Response		

- ❖ The Council is committed to reviewing the needs of individuals at least annually to ensure that care and support arrangements are appropriate. There will be more frequent reviews where required, based on assessment of the risks to individuals.

- ❖ Independent social workers commissioned to eliminate the immediate backlog (identifying potential for increased independence).

- ❖ As part of a fundamental review of capacity generally in LD services, priority is being given to ensuring we have the long-term capacity to avoid a backlog in future.

- ❖ Review staff roles

- ❖ Institute regular audit system

- ❖ Develop good practice guide and standard format for risk assessment and contingency planning

Cabinet 21 06 07   APPENDIX 3

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
11&12.1	Appoint independent team to clear review backlog	Work commenced: 44 reviews completed, 12 more underway Backlog to be cleared Monthly progress reports	May 07 October 07 From June 07	Backlog cleared. Opportunities for increased independence identified Programme established for further, more detailed assessments, where necessary. All service users to have had reviews in past 12 months	D40	CN	SC
11&12.2	Review capacity of permanent team, benchmarked against the processes and capacity of excellent authorities.	Review completed and recommendations made for resourcing	Sept 07	Proposals accepted for improved processes and associated re-structuring		CN	SC

11&12.3	Reshape assessment and care management function to deliver the new model of service, centred on self-directed support as the mainstream response to meeting needs.	New structure and staff in post, with new processes functioning (subject to any further development dependent on implementation of *Herefordshire Connects*)	Dec 07	No recurrence of backlog/ quality reviews carried out/improved outcomes for individuals/higher levels of customer satisfaction		CN	SC
	Supported by intensive training of managers and staff (including stakeholders) in the new processes	Training programme carried out	Oct 07 to Oct 08	Managers and staff able to carry out the new processes effectively			
11&12.4	Improved performance enabled by means of high-quality, timely management information through implementation of *Herefordshire Connects.*	TBD	TBD	As above; any additional TBD		AHas	TG

11&12.5	Good practice guide and standard format for risk assessment, contingency planning and user files		Aug 07	Exemplar integrated files, including risk assessment; consistent paperwork		CN	SC
11&12.6	Develop and implement robust file audit arrangements	Review audit processes of excellent authorities	July 07			CN	SC
		Audit tool identified	Aug 07	Audit arrangements that integrate performance management into supervision			
		Put in place best practice model	Sept 07	All managers and staff clear about processes and expectations (quality standards, recording, timescales)			
		Brief managers and staff	Sept 07				
		Undertake audit with the new tool	Dec 07	Audit confirms that robust arrangements are operating			

Cabinet 21 06 07   APPENDIX 3

Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation from the modernisation fund	The development of a comprehensive QA strategy to underpin all aspects of learning disability services (see Recc 15) The general adult social care workstream to re-engineer business processes for access, assessment and care management
Risks	**Mitigation**
1. Difficulty recruiting to the new posts 2. Disconnection from /slippage in the *Herefordshire Connects* Programme 3. Managers and staff have insufficient understanding and confidence in the new processes	1. High quality, targeted recruitment campaign 2. Close working with the *Connects* team to ensure the programmes are aligned and delivered together 3. Conduct intensive training; review impact; further training/coaching as necessary

Directorate Priority	Creating a safer place to live, work and visit	
Ref.	CSCI Recommendation / Objective	Context / Evidence
10	The Council, with its partner agencies, should ensure that adult protection arrangements are more effectively managed at both strategic and operational levels	❖ Not given high enough priority across the Council ❖ Protection Co-ordinator distracted by other responsibilities, therefore not doing enough on development and quality assurance ❖ Training not mandatory, and should be ❖ Poor management information, reporting and monitoring ❖ Insufficiently shared approach between front-line and contracts staff ❖ Insufficient capacity to do preventative work

Council Response
❖ Review the role, membership and effectiveness of the Adult Protection Committee   ❖ Mandatory training programme for members and all relevant staff.   ❖ Including re-fresher training on the required standards, good practice and monitoring arrangements - and ensure being put into effect successfully..   ❖ Create dedicated contract monitoring post.   ❖ Create capacity by use of administrator to reduce demands on the Co-ordinator, managers and staff.   ❖ Introduce self-audit tool   ❖ Ensure compliance by all managers and staff

Ref	Action	**Milestones**	Timescale **(+ update)**	**Success Criteria**	**PI Ref.**	**Lead**	**Head of Service**
10.1	Review the role, membership and effectiveness of the Adult Protection Committee	Complete the review Implement the recommendations	Sept 07 Oct 07	Review completed and recommendations implemented; thereafter measurable improvements in adult protection		LH	SC
10.2	Develop and implement training programme	Training in adult protection is confirmed as mandatory for all	Done	100% coverage of staff and elected members; more effective		LFre/LH	SC

		social care staff.		effective safeguarding – measured through weekly return to head of service of status of cases and outcomes; plus checking/audit			
		Enhanced training programme continues	Current				
		Training and development officer in post	Oct 07				
		New training programme to meet all the needs in place and operating	Jan 08				

						MS	SC
10.3	Increase capacity for contract monitoring	Additional contract monitoring officer in post	Dec 07	Only commissioning high quality services			
10.4	Relieve operational managers of the administrative burden of adult protection process	AP administrator in post	July 07	More effective safeguarding – measured through weekly return to head of service on status of cases and outcomes		CN	SC
10.5	Ensure compliance of all managers and staff with	Weekly update re. outstanding cases to	Current	Timely completion of the reporting		CN	SC

	procedures and standards	managers and head of service		system for AP			
		Enforcement action by managers	Immediate				
10.6	Increase capacity of Assessment and Care management team to be more pro-active in safeguarding adults	See under Reccs. 11 and 12	Dec 07	More effective safeguarding – measured through weekly return to head of service on status of cases and outcomes		CN	SC

10.7	Engage providers in developing a self-audit tool	Hold event for providers and service users	Sept 07	Providers aware of best practice and adults safeguarded, as indicated by commissioning intelligence and auditing		LH	SC
		Tool in place and being applied	Jan 08				

Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation from the modernisation fund	

Risks	Mitigation
4. Difficulty recruiting to the new posts 2. Elected members engaging in training	4. High quality, targeted recruitment campaign 2. Gain group leaders' commitment , raise awareness at induction training and prioritise in the overall members' training programme.

Directorate Priority	Promoting choice and independence	
Ref.	CSCI Recommendation / Objective	Context / Evidence
13	The Council should ensure a co-ordinated, strategic approach to support the development and delivery of person-centred plans to people with learning disabilities.	❖ No real improvement achieved from person-centred planning ❖ Scope for more strategic approach re. priorities for action ❖ Lack of clarity as to the relationship between person-centred plans and assessment and care management

Council Response

> ❖ Person-centred planning to be an integral part of assessment and care management (already now under common line management)
>
> ❖ Team developed to apply the principles of PCP in all aspects of assessment and care management.
>
> ❖ Making self-directed support the mainstream response to needs will require full integration of person-centred planning with assessment and care management

Ref	Action	**Milestones**	Timescale (+ update)	**Success Criteria**	**PI Ref.**	**Lead**	**Head Of Service**
13.1	Clarify the role and function of PCP as an integral part of assessment and care management	Review and affirm priorities	June 07	Principles of PCP approach fully applied in all aspects of		CN	SC

	and care management , together with the expansion of self-directed support as the mainstream response to meeting need	Staff training and development programme New arrangements operating	Jan – March 2008 April 08	aspects of assessment and care management Greater user satisfaction			

13.2	Develop and implement a performance management framework for monitoring the impact of applying the principles of the PCP approach on people's lives, as part of overall QA strategy (see Recc. 15 and Recc. 7))	Quality Network to be engaged to monitor and provide feedback	Oct 07	Quality network reporting increased user satisfaction		CN	SC

Finance / Budget Allocation	Links to Other Plans
Initially existing budgets, but to be reviewed as future requirements are defined	Access, assessment and care management workstream QA strategy
Risks	**Mitigation**
1. Insufficient staff understanding and ownership	1. The training and development programme

Directorate Priority	Enabling children and young people to lead fulfilling lives	
Ref.	CSCI Recommendation / Objective	Context / Evidence
14	The Council should ensure that young people with learning disabilities reliably and consistently experience a seamless transition between Children's and Adult Services and that all relevant agencies are fully engaged in the process.	❖ No demonstrable link between protection procedures of children's services and those for adults. ❖ Need to improve quality of the transitions process

Council Response
❖ Develop protocol for transfer of child concern cases to adult services ❖ All young people who want one to be offered an individualised budget ❖ Multi–agency care pathway being developed ❖ Business case being developed for the appointment of a lead social worker in adult services to manage transitions in conjunction with colleagues in children's services and other agencies. ❖ Introduction of tracking system for children post – 14 ❖ VPPB to have transitions sub-group, including family carers and young people, to assess the process and keep it under review

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
14.1	Connexions to implement	Training for all	Oct 07	Pathway		AHas	SC/

	multi-agency transitions pathway	adults and CYP staff by Connexions		embedded across all agencies, leading to smooth transition for young people			A Hea
		Pathway in place	Dec 07				
		Feedback mechanism agreed and in place	Dec 07	User and carer satisfaction			
14.2	Single shared data base between CYP, Connexions and adult social care	Single database in place	Jan 08	Tracking system in place to ensure smooth transition for young people; VPPB to consult on evidence		AHas	SC/AHea

14.3	Develop common protocols between child and adult services, including for handover of child concern cases to adult services	Protocol for cases where there are child concern issues/risks	Sept 07	Increase in user and carer satisfaction with transition process, and in measurable outcomes – feedback mechanism through VPPB consultation		TJ	SC/AHea
14.4	Develop and implement associated training plan	Developed	Jan 08	Ditto, plus all staff trained		LFre	DJ
		Implemented	TBD				
14.5	Develop high quality accessible information for young people and families about the process	Information reviewed and improved	Jan 08	Confirmation through consultation		AHas	SC/AHea

14.6	Recruit additional social worker to lead on transitions into LD service	Business case to modernisation fund Additional social worker in post	May 07 Nov 07	All young people have successful transition		CN	SC
14.7	All those in transition who want one to be offered an individualised budget		June 08	Increased number of individualised budgets; measurable better outcomes for their individuals concerned		CN	SC

Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation for modernisation programme	Children and Young's People Partnership Plan

Risks	Mitigation
1. Shared data-base, protocols and training not in place on schedule owing to inadequate capacity	1. Prioritise
2. Difficulty recruiting to transition social worker post	2. High-quality, targeted recruitment campaign

Directorate Priority	Modernising learning disability services; promoting choice and independence; enabling children and young people to lead fulfilling lives	

Ref.	CSCI Recommendation / Objective	Context / Evidence
27	The Council should update the manual of policies and procedures, including the development of written protocols covering interfaces with Children's Services and within Adult Social Care services	❖ Manual of policies and procedures requires updating ❖ No jointly agreed written protocols covering interface and joint working arrangements within adult services and between adult services and children's services.

Council Response

❖ Manual to be updated

❖ Develop written protocols

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
27.1	To review and develop operational procedures and minimum practice standards, incorporating self-directed care support procedures	To identify procedural (standards) needs / gaps and create priority list. To establish methodology (document) for	August 2007 August	Comprehensive list of procedures defined. Clear and consistent approach to		AHas	TG/SC/ AHea

		(document) for production, sign-off, format and version control.	2007	document creation and control.			
		To develop the programme of work to deliver the priority procedures and associated standards.	September 2007	Work programme in place with clear prioritised milestones and activity. Best practice procedures and minimum standards in place.			
		Draft documents.	November 2007				
27.2	To implement the procedures and standards across services.	Train managers and staff, and deliver regular update briefings to teams.	September 2007 and continuing	Awareness and consistent understanding across the services. Service delivery of the highest possible standard in line with agreed procedures and standards.		AHas	TG/SC/AHea

Finance / Budget Allocation	Links to Other Plans
Mainstream, existing budgets	Performance and Records Management Plan
Risks	**Mitigation**
1. Insufficient capacity and joint working across adult and child services	1. Identify and secure capacity and prioritisation through the directors of each service

Directorate Priority	Better commissioning and use of resources	
Ref.	**CSCI Recommendation / Objective**	**Context / Evidence**
3	The Council, with its PCT partner, should continue to improve the economy, efficiency and effectiveness of learning disability services	❖ Significant finance tied up in traditional residential and day care services. ❖ Need to expand 'In Control' (self-directed support) ❖ Need for ICT modernisation ❖ Fuller and better joint approach to reducing risks re. pooled budgets ❖ Maximising external funding and income from users

Council Response

❖ Full modernisation programme project plan to be put in place and implemented (based on findings of the needs assessment)

❖ Self-directed support to become the mainstream response to meeting needs, as part of the overall modernisation programme.

❖ Establishment of Public Service Trust, uniting the commissioning arm of the PCT with the Council's executive.

❖ Appointment of dedicated post to maximise external funding (operating across all adult social care)
❖ Fair charging review

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
3.1	Based on the findings of the pilot, mainstream In Control	Cabinet approval sought (for further	TBD	More people with self-directed	C 51	CN	SC

	and individual budgets.	details see Recc. 8)		support (targetsTBD)			
3.2	Reduction in registered care and redeployment of resources to support people in ordinary homes	Establish partnership with an experienced independent sector provider to develop and manage housing and support . Existing staff transfer to the new organisation At least 20 people move out of registered care into their own home Reduction in registered care	August 07 ***December 07 and April 08*** Dec 08 2011	Contract reflects specification TUPE agreements in place The individuals flourish and are satisfied in their own homes	C30	LB	SC

		beds from 189 to 151	2011				
		Increase in number of people in own home and accessing community services from 79 to 126					
3.3	Reduction in buildings-based day opportunities and increase in community-based day opportunities	Reduction in average daily attendances in traditional services from 133 to 42	2011				
		Increase in the daily attendances in community settings from 69 to 167	2011				
		Intermediate targets TBD					
		Review of processes, structures and job descriptions	Sept 07				
			Dec 07				

		Proposed new structure agreed					
3.4	Develop systems to manage capacity of LA day opportunities and provide sound basis for budget planning and management	Process map systems	June 07	Gaps/improvements identified		LFer	SC
		Audit information/data cleansing	July 07	Accurate and reliable information			
		Develop universal assessment day opps. process that links to other assessment tools	Aug 07	Assessments taking place under new process and producing better outcomes for individuals			
		Information management system (including for management accounts) operating	TBD (dependent on the *Herefordshire Connects* programme)	Better info. about costs and ability to link LA services to In Control model			
				Better value for money			

3.6	Sound basis for future budgets	Review of Section 31 budgets, as part of establishment of the Public Service Trust	January 2008	Agreed budgets and associated arrangements in place and operating successfully		SC	SC

Finance / Budget Allocation	Links to Other Plans
Ring-fenced modernisation fund	Fair charging review workstream

Risks	Mitigation
1. Chosen partner not able to offer sufficient choice of supported accommodation	1. Close monitoring of performance; work with partner and Strategic Housing and Homepoint to identify opportunities
2. Users and families resistant to moving to supported Accommodation	2. Full engagement with users and families from the outset
3. *Herefordshire Connects* doesn't deliver the necessary ICT systems on time	3. Work closely with the *Connects* team to align programmes
4. Resources team don't have the capacity to support new costing arrangements	4. Work closely with Resources from the outset

Directorate Priority	Better commissioning and use of resources; modernising learning disability services						

Ref.	CSCI Recommendation / Objective		Context / Evidence				
4	The Council should ensure that commissioning and contracting processes are used to improve the quality of services commissioned		❖ Market management underdeveloped ❖ Contract monitoring not strong, with over-reliance on care management				

Council Response							
	❖ Market management work-stream action plan to be completed and implemented ❖ Appointment of contract monitoring staff to improve information about the quality of commissioned services, in order that timely remedial action can be taken (see also Recc. 10)						

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
4.1	Market management action plan developed and implemented	Executive group established with appropriate representation from private LD service providers Work Plan for Executive Group	TBD	Comprehensive objectives and targets established and achieved Care service market responding effectively to changed		MS	SC

		agreed		commissioning requirements			
		Effective communication arrangements established to include all providers	TBD	Improved Quality of relationship with full range of LD service providers			
		Barriers to effective market responses to service requirement identified and options appraisal completed	TBD	Service Providers effectively contributing to development and realisation of commissioning plans			
		Market issues and resultant recommendations incorporated into commissioning cycle	Oct 07				
4.2	Contract monitoring capacity enhanced	Contract Monitoring Officer posts incorporated into Contracts and Commissioning Team establishment	Done	Better info. about the quality of commissioned services; Quality of services improved		MS	SC
		Contract monitoring	September				

		officers in post to current establishment level	2007	All services routinely monitored			
		Establishment of Contract Review Steering Group	Done	Monitoring outcomes feed effectively into Service Reviews and the Commissioning Cycle overall			
		Risk analysis of all care service contracts to determine relative priorities	Aug 07				
		Overall monitoring framework established to maximise efficiency of related business processes (e.g. service and individual reviews)	Sept 07	Monitoring outcomes inform development of specific Service quality standards incorporated into future contracts			
		LD services contract monitoring capacity allocated in proportion to overall business/service risk	Sept 07				
		Benchmarking and review of contract	Oct 08 and continuing				

		monitoring capacity/effectiveness						
4.3	Reduction in registered care and redeployment of resources to support people in ordinary homes	Establish partnership with an experienced independent sector provider to develop and manage housing and support ***For further details see Recc. 3***	Aug 07					

Finance / Budget Allocation	Links to Other Plans
Existing, mainstream budgets and ring-fenced allocation from the modernisation fund	Market Management Work-stream Access, assessment and care management workstream, including mainstreaming of self-directed support

Risks	Mitigation
1. Lack of funding to carry out any additional development work that may be needed to overcome barriers to effective market responses 2. Availability of suitably skilled applicants for monitoring officer posts	1. Review of spending priorities; if necessary, apply to Director for additional funds 2. High-quality, targeted recruitment campaign; if necessary, consider market supplements

Directorate Priority	Modernisation of learning disability services	

Ref.	CSCI Recommendation / Objective	Context / Evidence
5	The Council, with its partners, should develop a strategy to access resources from outside the adult social care budget.	❖ Additional resources invested by the Council have largely secured existing (non-modernised) services ❖ Need to increase income from users, in line with comparable authorities.

Council Response
❖ Full modernisation programme project plan to be put in place and implemented (based on the findings of the needs assessment) – in particular, resources will be released as people access benefits in supported accommodation instead of being in residential homes. ❖ Access more from the Independent Living Fund (funding secured to appoint dedicated worker) ❖ Implementation of reviewed charging and transport policy. ❖ Develop employment opportunities via self-employment and social firms.

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
5.1	Single service plan in place and implemented	Integrated service plan produced and presented to LD Programme Board for signing off	Aug 07– for further details see Recc. 23	A single service plan for LD agreed by the Council and PCT	C30	MM	SC

5.2	If cannot be covered by existing post in the third sector, recruit a fund-raising specialist	In post	TBD	Targets and timescales for increased income established and achieved		AT	SC
5.3	Secure fullest possible integration with, and funding from, the Supporting People Programme		Sept 07	Increased funding		CN	SC
5.4	Recruit ILF (Independent Living Fund) worker, operating in the context of self-directed support being the mainstream response to	In post	Sept 07	Operating against a clear work programme with identified priorities, signed off by		CN	SC

	meeting need			Service Design Group (reconfigured Commissioning Group)			
				Increase in the number of people with LD receiving ILF income			
5.5	Recruit Transport Review Officer and Travel Trainer	In post	Jan 08	Operating against a clear work programme, with identified priorities, signed off by the Service Design Group		SD	SD
				Increase in the number of people using public transport			
			TBD	Reduction in the number of people reliant on Social Care Transport			
		Travel Trainer					

		provides training to sufficient individuals to effect cash savings equivalent to five times his/her salary	March 09	Cash savings (sum to be determined)				
5.6		Recruit Social Firms Development Manager.	In post	Sept 07	Clearly developed work programme in place, identifying priorities for year 1, signed off by the Service Design Team

Increase in the | | CN | SC |

			Sept 08 March 2011	number of social enterprises developed as alternatives to LA day opportunities. Five more people doing paid work, Reduction from 330 to X in the number of people attending day centres (target TBD)			
5.7	Commission micro-enterprise organisation	Work programme developed and signed off by Service Design Group Longer-term targets to be set	Sept 07 Sept 08 Sept 08	 Support to 10 individuals to develop their own micro- enterprise Longer-term targets met		LFer	SC

Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation from modernisation fund	As above

Risks	**Mitigation**
1. Inability to recruit to posts.	1. High-quality, targeted recruitment programme. If necessary, consider market supplements.
2. Users/families resistant to change.	2. Full consultation/engagement with them from the outset.
3. Employers reluctant to offer opportunities.	3. Pro-active work with employers, and support for individuals in the recruitment process
4. Resistance to changed travel arrangements due to perceived Increased risk	4. Risk assessment and management with users and families

Directorate Priority	Modernising learning disability services	

Ref.	CSCI Recommendation / Objective	Context / Evidence
6	The Council should ensure that people with learning disabilities maximise their independence and choice through a broader range of services.	❖ Insufficient opportunities to promote independence because of current pattern of services ❖ Legacy of reactive response in assessment and care management ❖ Potential of 'In Control' (self-directed support) needs to be fully realised

Council Response
❖ Full modernisation programme project plan to be put in place and implemented (based on findings of the needs assessment) ❖ Self-directed support to become the mainstream response to meeting needs, as part of the modernisation programme. ❖ Comprehensive workforce strategy to align staff skills and behaviours with the promotion of independence and inclusion.

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
6.1	Single service plan in place and implemented, with supported accommodation and day opportunities in community settings the core	Integrated service plan produced and presented to LD Programme Board for signing off	Aug 07– for further details see Recc. 23	A single service plan for LD agreed by the Council and PCT	C30	MM	SC

	model						
6.2	Based on the findings of the In Control pilot, mainstream self-directed support	See Recc.8				CN	SC
6.3	Development of a multi-agency learning disability workforce development plan	See Recc. 26				JP	SC/DJ

Finance / Budget Allocation	Links to Other Plans
As for the related Reccs. above	As above, plus: Herefordshire Council Pay and Workforce Strategy Children and Young People Multi-agency Workforce Strategy
Risks	**Mitigation**
As for the related Reccs. above	As for the related Reccs. above

Directorate Priority	Better commissioning and use of resources; modernising learning disability services						
Ref.	**CSCI Recommendation / Objective**			**Context / Evidence**			
15	The Council should develop a comprehensive quality assurance strategy to underpin all aspects of learning disability services.			❖ No QA Framework developed for LD services			
Council Response							
	Develop QA Framework						

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
15.1	Develop a model of operational QA for use in LD services.	Define policy statement on operational quality.	Aug 07	QA policy produced and signed-off by DMT.		AHas	TG
		Establish practice standards and service expectations	Nov 07	Quality standards defined and approved by head of service, and aligned to practice procedures.		CN	SC
						AHas	TG/SC

		Agree methodology for quality auditing (self, peer, service users, external).	Nov 07	Control versions of model and methodology documented and approved by DMT.		AHas	TG/SC
		Identify options for reporting / sharing findings.	Nov 07	All staff know and understand what will be reported, when and who to in relation to QA activity.		AHas	SC
15.2	Implement model across LD services.	Raise awareness across all staff teams.	Nov 07	Staff clear about rationale and expectation of QA function.		AHas	TG
		Train managers (plus other 'auditors') in relevant QA skills.	From Dec 07	All relevant personnel are skilled in undertaking respective QA functions.		AHas	TG
		Agree timetable for QA activity,	Dec 07	Clear programme for QA in LD services in place.		AHas / CN	TG / SC

		reporting and audit.					
		Carry out QA audit function.	From Jan 08	QA reporting available against practice standards.		AHas	TG
		Develop MAPs.	From Jan 08	Action plans are developed and monitored through line-management.		CN	SC
15.3	Review impact of QA on service outcomes.	Identify expectations of improved service delivery; and establish baseline of current practice	Sept 07	Clarity about areas of improvement that will result from QA.		CN	SC
		Revisit areas considered in inspection to demonstrate changes / improvement in practice.	March 08	Clear evidence of change from baseline practice.		AHas	SC
		Review QA audit findings.	June 08	Rich picture of evidence about the quality of practice in LD services.		AHas	TG / SC
		Obtain feedback	June 08	Evidence of		AHas	TG / SC

		from service users.		changes in perception of the quality of service delivery.		AHas	TG
		Produce report for Director / HoS and CSCI as to impact of QA model.	June 08	Evidence that service quality has improved and continues to improve.			

Finance / Budget Allocation	Links to Other Plans
TBD	All

Risks	Mitigation
1 Resources identified and allocated to this work.	1. To be resolved with the Director by mid-June 07

Directorate Priority	Leadership and transformation; modernisation of learning disability services

Ref.	CSCI Recommendation / Objective	Context / Evidence
22	The Council should ensure the management capacity to implement, in a timely manner, the actions required in the five work-streams of the Improvement Plan for Adult Social Care Services, in order to improve service delivery.	❖ The Council has to implement the five work-streams successfully

Council Response		
	❖ Completion of a single overall adult social care improvement programme, within which all individual work-streams have detailed actions, milestones, targets and the capacity to achieve them. ❖ Implementation of the overall programme, project -managed to a consistent and rigorous standard.	

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
22.1	Create professional and programme leadership capacity	Appoint Improvement Leader, Interim Head of Adult Social Care, Change Manager, external expert advice and support for LD improvement, and other areas in	Improvement Leader and external expert advice in place Change Manager interviews on	People of right calibre in post		SM	GH

		respect of which DoH asked for support In post/commissioned	14 June Request made to DoH for financial support				
22.2	Single overall programme for adult social care improvement developed, incorporating the five work-streams	First draft plan	Done	All areas for inclusion identified, together with gaps, leadership and capacity issues		SM	GH
		Overall programme team in place and operating	Done, but gaps to be filled				
		Fully developed prioritised programme	July 07	Robust , detailed plans for each project, including clear, accountable leadership, appropriate capacity, funding , risks and their mitigation, and interdepencies between projects			

22.3	Implementation of the programme	As set out in the agreed programme	As in the agreed programme	As in the agreed programme		SM	GH

Finance / Budget Allocation	Links to Other Plans
Combination of mainstream existing funding, corporate resources devoted at no additional cost to adult social care, ring-fenced allocation from the modernisation fund and DoH funding	All
Risks	**Mitigation**
1. Insufficient capacity to deliver the whole programme 2. Insufficient integration with *Herefordshire Connects*	1. Identify capacity requirements as an integral part of developing the overall programme and individual work-streams; streamline/rationalise/prioritise the programme and work-steams, integrating with other sources of capacity, notably *Herefordshire Connects* 2. Integrated planning and implementation from the outset

Directorate Priority	Leadership and transformation; modernisation of learning disability services; promoting choice and independence; better commissioning and use of resources

Ref.	CSCI Recommendation / Objective	Context / Evidence
23	The Council, with its PCT partner, should implement robust business planning arrangements for learning disability services.	❖ Not yet a coherent approach to strategic action planning for LD services. ❖ More explicit links required between the various plans in this service area.

Council Response
❖ Creation of a single service plan for learning disabilities, underpinned by detailed project planning for the full service modernisation programme, linking service development actions, milestones and targets with the necessary financial, human and other capacity ❖ Implementation of the overall programme for adult social care improvement, project -managed to a consistent and rigorous standard (see Recc 22).

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
23.1	Creation of the single service plan and completion of detailed underpinning project planning for the full modernisation programme,	Single service plan	Aug 07	Clear, coherent, SMART and resourced basis for the modernisation and improvement of		MM	SC

	linking service development actions, milestones and targets with the necessary financial, human and other capacity	Detailed underpinning project planning completed	Aug 07	improvement of services, developed with managers and staff, taking full account of the views of users and carers, and providing a sound basis for effective performance management			
23.2	Produce a single, integrated project plan for service modernisation, to support 23.1	Set up a Service Design Group to replace the current Commissioning Group and have a broader membership with partner agencies and users and carers and the non-social care parts of the Council.	July 07	Robust plan approved, including the resources and other capacity to implement it fully		MM	SC
		Draft moderrnisation plan 2008-11 produced	Sept 07				

		Plan approved, including the resources and other capacity to implement it fully	Nov 07				
23.3						MM	SC
	Performance manage the implementation of the plans	Quarterly reports to the Service Design Group	Commence August 07	Plans implemented successfully			
23.4	Closely manage the relationship between the Council's overall improvement programme and the LD modernisation programme	The LD programme is developed and implemented as an integral part of the adult social care improvement programme	June 07 and continuing	Overall and LD programmes implemented successfully		SM	GH

23.5	Write service specifications for new services or reconfigured services to implement the modernisation project plan.	Service Design Group to agree the parameters for the service specifications. Commissioners (only) to write the specifications	October 07	Service specifications that accurately describe desired services and provide a robust basis for commissioning		MM	SC

Finance / Budget Allocation	Links to Other Plans
c.£600K dedicated to the modernisation programme. Confirmed longer-term funding to complete the programme to be agreed as part of the approved single plan and detailed project planning	All relevant plans included above

Risks	**Mitigation**
1. Insufficient integration of service and resource planning and performance management 2. Failure to agree a pooled budget and risk-sharing arrangements for 07/08 and subsequent years	1 & 2 . Close working with resources departments in the Council and PCT as part of the performance improvement cycle, including the development of three-year costed proposals

Directorate Priority	Developing more inclusive communities; modernising learning disability services; promoting choice and independence

Ref.	CSCI Recommendation / Objective	Context / Evidence
1.	The Council and its partners should ensure that the Valuing People Partnership Board and its sub – groups operate effectively and inclusively to support the delivery of key outcomes for service users and carers.	❖ VPPB not an effective decision-making body and strategic driver ❖ No overall strategy document to respond to national priorities ❖ Performance management role of VPPB weak

Council Response

❖ Fundamental review of the VPPB, leading to clear definition of its role and its re-launch together with the overarching strategy document.

❖ VPPB officer to be appointed

❖ Annual programme for VPPB and its sub-groups agreed with stakeholders, including users and carers

❖ Action plan for the VPPB, with targets.

❖ High-level progress report to each meeting of the VPPB

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
1.1	Fundamental review of VPPB	Consultation with VPPB in July	Review to be finalised	All partners signed up and		JW	SC

	carried out		by Oct 07	implementation begins immediately			
1.2	Appoint and provide support for a VPPB Officer	Roles and JD/PS to be agreed; funding to be confirmed Officer in post	June 07 Sept 07	Beyond appointment, to be defined on basis of objectives and targets, e.g. no. of conferences held; user satisfaction		JW	SC
1.3	Annual programme for VPPB, to be developed through the review process	Sign off by VPPB	Oct 07	Annual Programme is in place and actions taking place and being reported to the VPPB. All actions taken successfully on schedule		JW	SC

1.4	Develop and implement action plan	Action Plan sub-group established and meeting	June 07onwards	Action plan agreed by VPPB. Actions taking place and being reported to VPPB. All actions taken successfully on schedule		JW	SC
		Action plan to be signed off by VPPB	Oct 07				
1.5	Refocus of the VPPB through a fundamental review to identify and expect to receive and know how to deal with high level progress reports	VPPB agrees nature of information to be reported	Aug07	Agendas amended to include progress reports on the modernisation programme and other significant developments.		JW	SC
		Review in light of the outcomes of the review of the VPPB	Oct 07				
1.6	Engagement of users with the VPPB	Discussion and agreement with People's Union	May 07	User satisfaction with the arrangements; and subsequently with how they operate		JW	SC
		Approval of arrangements by VPPB	Aug 07				

Finance / Budget Allocation	Links to Other Plans
LDDF and HC funding for the support officer	LD single service plan

Risks	**Mitigation**
1. Failure to recruit VPPB officer	1. High-quality, targeted recruitment ; if essential, consider market supplement
2. Reviewed timescale may lengthen to enable wider input into the the process from Service Users in particular.	2. Engage all partners and networks at the beginning and agree timescale to enable input at regular meetings.

Directorate Priority	Modernising learning disability services; promoting choice and independence	
Ref.	CSCI Recommendation / Objective	Context / Evidence
2	The Council should ensure that service users and carers are fully involved in strategic service planning, development and evaluation to promote their active involvement in the modernisation agenda.	❖ No carers' strategy ❖ Users and carers not fully involved in strategic planning, development and evaluation of services

Council Response

❖ Work with the VPPB to include ensuring appropriate representation/involvement of users and carers

❖ Ensure full engagement with users and carers in the modernisation programme

❖ All of this rooted in the eight principles for involving users and carers produced by CSCI et al.

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
2.1	Reshape the advocacy contract to provide for effective inclusion and participation of people with learning disabilities in key planning and implementation groups	Draft service specification Consult current provider and user groups	July 07 Aug 07			CN	SC

			Take to VPPB and sign-off new specification	Oct 07	New specification agreed with VPPB and provider			
			Produce user participation policy	Nov 07				
			Brief Council and partners' managers and staff to ensure understanding of roles and responsibilities	Nov 07	Concrete evidence that operating successfully, e.g. users participating and influential in planning and development			
2.2	Commission additional support to enable the effective inclusion and participation of family carers in key planning and implementation groups		Draft new service specification	July 07			MS	SC
			Consult with current provider	Aug 07				
			Consult with carers' network	Oct 07				
			Take to VPPB and	April 08	New specification agreed with VPPB and provider			

		begin to implement new specification		and provider			
		Brief Council and partners' managers and staff to ensure understanding of roles and responsibilities	May 08	Concrete evidence that operating successfully, e.g. users participating and influential in planning and development			
2.3	Develop and implement LD-specific strategy for carers, including how will extend involvement to a wider range	VPPB to consider and agree how and by whom this will be developed	June 07	Carers support the strategy; thereafter strategy implemented (measures to be included in the strategy)	C62	JW	SC
		Develop strategy with carers and get VPPB approval	April 08				
2.4	Work with People's Union on how users can engage effectively with the VPPB	To be discussed with Peoples Union and agreed by end of May. To include with discussion on structures and finalise with VPPB on 2 August	To be finalised by 2 August	Users are involved on the VPPB and sub-groups, attend meetings, input to the meetings and find the meetings			

		with VPPB on 2 August			useful			
2.5	Service user and carer reference groups already established as part of the accommodation and support tender to remain throughout the process	Stakeholder day with new provider Plan for future engagement agreed with the groups	Sept 07 Dec 07		Group members satisfied that their views have been properly considered		LB	SC
2.6	All relevant Council policies and plans are in accessible formats		TBD		Test of user comprehension and satisfaction			SC/RB

Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation from modernisation fund	Disability Equality Scheme Corporate Consultation Strategy
Risks	**Mitigation**
1. Funding may be required to develop a carers' strategy 2. Further support (or a change in the support) for People's Union may be required to engage users	1. Identify funding 2. Review with People's Union

Directorate Priority	Promoting choice and independence; modernising learning disability services

Ref.	CSCI Recommendation / Objective	Context / Evidence
7	The Council should routinely seek feedback from people with learning disability and their carers about the quality of services, and act on this information.	❖ Not routinely sought at present, but over past year some efforts to get feedback in report of current day services and accommodation and support services.

Council Response
❖ Strategy and action plan to be developed, in consultation with users and carers. ❖ Create a quality audit mechanism across in-house and commissioned services. ❖ Create a robust routine system to seek feedback from stakeholders.

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
7.1	Commission the BILD Quality Network to develop the strategy and action plan	Scope the work involved; identify quality team Identify the experts by experience, estimate time involved and	July 07 August 07	Budget identified to commission work Experts by Experience identified, associated costs		TK	SC

		calculate costs		calculated.			
		Arrange first network quality meeting	September 07	Evaluation team brought together and trained			
		Develop evaluation programme	Oct 07	Annual evaluation process arranged and signed off			
		Undertake first service evaluation	Nov 07	First completed evaluation – findings fed in to Service Design Group			
		Service Design Group puts in place mechanisms to show the impact of evaluations on the quality of services	Dec 07	Implementation of programme of evaluations Quality of services improved		CN	SC
7.2	Appoint Partnership Officer with lead responsibility for the development of Learning Disability Modernisation	Communication Strategy drafted with stakeholder groups	Oct 07	Communications Strategy signed off by VPPB and		JW	SC/RB

				Service Design Group Strategy includes clear feedback mechanisms for family carers and people with LD, including audits, questionnaires and locality forums			
	Communications Strategy						
7.3	All services to have in place a customer satisfaction process for securing feedback from carers and users about their experience of assessment and care planning	Develop questionnaires Develop process for dissemination and analysis on return Implementation	Sept 07 Sept 07 Oct 07	Clear pathway for feedback and for it to inform individual and team practice Improved practice and higher levels of user satisfaction		CN	SC

							MS	SC
7.4	Review service specifications to ensure routine feedback on services from people with learning disabilities and their carers	Carry out a desk top review of all contracts In discussion with providers, amend specifications where required Ensure all new contracts clearly define processes for gathering and acting on feedback	Sept 07 Dec 07 March 08	All contracts explicitly make this a requirement Improved services and higher levels of customer satisfaction			MS	SC

Finance / Budget Allocation	Links to Other Plans
Combination of existing, mainstream budgets and ring-fenced allocation from the modernisation fund	Access, assessment and care management workstream Market management workstream

Risks	Mitigation
1. Inability to recruit the Partnership Officer 2. Insufficient capacity within the commissioning unit for the desk top review	1. High-quality recruitment campaign; explore whether any current staff have the appropriate skills. 2. Recruitment of additional Contracts Monitor (business case already submitted); temporary reconfiguration of existing commissioning staff

Directorate Priority	Promoting choice and independence	

Ref.	CSCI Recommendation / Objective	Context / Evidence
8	The Council should continue to promote self-directed support by increasing the take-up of Direct Payments and individualised budgets	❖ Foundations laid by being part of the 'In Control' pilot, with five people having secured individualised budgets.

Council Response		
	❖ Self-directed support to become the mainstream response to meeting needs, as part of the modernisation programme	

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
8.1	Evaluation of the LD In Control pilot		June 07	Clear findings that provide a sound basis for subsequent action to make self-directed support the mainstream response to need	C51	TK	SC
8.2	Proposal to VPPB to endorse In control as mainstream response to service requests	VPPB debate and consult	July/Aug 07	Consultation completed – strategy in place; more people in receipt of self-directed support		CN	SC

	Self-directed support programme board formed to oversee development and roll-out	Scoping/feasibility study re. extended roll-out across LD services, with input from national In Control Cabinet approval	Sept/Oct 07 Nov 07	Confirmed basis for mainstream roll-out, including project brief and targets, integrated with *Herefordshire Connects*			
8.3	Business process engineering, review of capacity and structure of community team, and supporting new ICT systems – in conjunction with *Herefordshire Connects*	Identify work to be done and process for doing it Implementation milestones to be developed New systems, structure and processes in place and operating	TBD Apr 08	Business process re-engineered and supporting systems in place Team capacity structure and processes appropriate to respond to new model of service delivery		CN	SC

8.4	Review capacity, structure and processes of finance section to allow growth of individual budgets		Dec 07	Finance team able to respond to new model of service		MS/TK	DP
8.5	Develop external partners to allow the growth of individual budgets.	Interim development contract with providers (HCIL) for brokerage advice and information services to support continuing IB work	Sept 07	More people in receipt of individual budget (target to be set)		MS	SC
		Care brokerage model developed within community team	Sept 07				
		Scoping and feasibility options for independent brokerage and information services	Sept/Oct 07				

		Commission "Families leading planning" to increase brokerage	Oct 07				
8.6	Agree a shared vision, understanding and approach to self-directed support with CYPD and Connexions	Development of joint vision across all public sector for children with disabilities	Jan 08	Commitment to shared approach and integrated transition from CYP to adults		CN	SC/AHea

Finance / Budget Allocation	Links to Other Plans
Mainstream budget in place; future provision TBD in performance improvement cycle	Access, assessment and care management workstream Market management workstream
Risks	**Mitigation**
1. VPPB won't support the change plan	1. Full engagement with VPPB from the outset
2. Insufficient capacity to develop and implement the change plan	2. Business case for additional capacity; integration with *Herefordshire Connects*; weaknesses in procedures and standards addressed by March 2008
3. FACS and ILF charging a disincentive	3. Agree procedures/approach to charging across FACS, ILF and IB
4. Insufficient integration with *Connects*	4. Integrated planning and implementation from the outset

Directorate Priority	Promoting choice and independence	
Ref.	CSCI Recommendation / Objective	Context / Evidence
9	The Council should work with carers to develop a better range of, and access to, services to support them in their caring role.	❖ Insufficient range of services ❖ Insufficient access to relevant, timely information, advice and support ❖ Insufficient support, in particular, for carers of those with complex needs ❖ Carers assessments not having demonstrable impact on their lives. ❖ Need to accelerate planning to meet needs of those with older carers. ❖ Said to be no specific support for BME carers.
Council Response		
❖ Carers' strategy and action plan to be produced, in consultation with carers ❖ Resulting in appropriate range of services, which are developed and adapted to meet changing needs ❖ Appointment of dedicated member of staff to carry out carers' assessments, including contingency planning ❖ Identify and make contact with all older carers so as to make the necessary plans ❖ Continue to provide tailored support for BME carers ❖ Further development of flexible short breaks to support family carers		

Ref	Action	**Milestones**	Timescale **(+ update)**	**Success Criteria**	**PI Ref.**	**Lead**	**Head Of Service**
9.1	Increase the numbers of carers participating in planning	Develop existing Carers Network; increase funding for facilitation	Oct 07	More carers facilitated to participate in planning services		CN	SC
9.2	Carers supported to lead the development of a carers' strategy	Carers supported to be involved in national training "Partners in Policy Making" Carers strategy agreed by VPPB	TBC Jan 08	Needs of carers met more appropriately as measured by VPPB consultation		CN	SC
9.3	Production of Information Handbook of current services for carers	Carers network to develop facilitated by Carers Support	Aug 08	Carers express understanding of service available – VPPB consultation		CN	SC

9.4	Increase the range of flexible, non-building-based short break services to support family carers	Increase from 30 to 45 those receiving flexile service	Dec 08	Increase achieved. User/carer satisfaction	C62	LB	SC
9.5	Extend Direct Payments to carers	Review current arrangements. Increased flexibility in use of Carers Grant – Carers Network to inform	June 08	Increase in numbers of carers receiving DP (target to be agreed)		CN	SC
9.6	Identification of all older carers Identification of all BME carers	Reviews of carers contingency and long term plans Review of support Incorporate findings	Dec 07 Dec 07	Carers are confident about the long- term plans for their cared-for person		CN	SC

		in Carers' Strategy	March 08				

Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation from the modernisation fund	Carers' Commissioning Strategy
Risks	**Mitigation**
1. Capacity of carers' network	1. Council support

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Directorate Priority	Promoting choice and independence	

Ref.	CSCI Recommendation / Objective	Context / Evidence
16.	The Council should ensure that comprehensive, accessible information is available to people with learning disabilities about the nature, range and types of services provided and how to access then.	❖ Comprehensive information/directory not available ❖ Need for information in range of formats ❖ Range of printed leaflets limited

Council Response	
	❖ Review of range of information, in consultation with users and carers ❖ Implement findings of the review, taking into account making self-directed support the mainstream response to needs

Ref	Action	**Milestones**	Timescale **(+ update)**	**Success Criteria**	**PI Ref.**	**Lead**	**Head Of Service**
16.1	Working with people with learning disabilities, review the information available to them about services.	Identify range of formats required for LD	June 07	Agreed list of formats as standard.		CN	SC
		Identify appropriate distribution channels.	June 07	Appropriate distribution channels known		AHas	TG
		Develop and	July 07	Agreed approach in place and		AHas	TG

		document approach to developing public information for people with LD.		endorsed by LD groups			TG
		Identify current range of information and gaps and compile comprehensive list in line with user needs and wishes.	Aug 07	Gaps identified .		AHas	TG
			Aug 07	Clear understanding of cost and agreed budget in place.		CN	SC
		Identify and agree resources.	Aug 07	Stakeholders aware of communication channels		RG	SC
		Communication strategy produced					
16.2	Develop public information to meet the needs of S/U with LD.	Establish reader group of people with LD.	Sept 07	Group identified and briefed on 'editorial' role.		CN	SC
		Produce directory of information in agreed formats.	Sept 07	Comprehensive listing of public information for LD groups available in multiple formats.		AHas	TG

		Develop a programme to deliver all required information	Sept 07	Public information begins to be delivered in line with programme.		AHas	TG
16.2		Develop and document a review cycle for all public information	Sept 07	Public information database has clear review dates for all items.		AHas	TG
16.3	Obtain user feedback as to content and approach.	Agree methodology to obtain feedback.	Nov 07			AHas	TG
		Implement	April 08	Feedback available to inform continuous improvement in public information about ASC.			
		Report	Aug 08	Comprehensive public information available and accessible /increased user satisfaction.			

Finance / Budget Allocation	Links to Other Plans
Existing, mainstream budgets	Access, assessment and care management workstream Market management workstream
Risks	**Mitigation**
1. Insufficient engagement with users leads to poor outcomes	1. User involvement built in throughout

Directorate Priority	Promoting choice and independence	

Ref.	CSCI Recommendation / Objective	Context / Evidence
17	The Council should ensure that the Fair Access to Care Services eligibility criteria are clear to people with learning disabilities and their carers	❖ Functional IQ definition not an appropriate basis for meeting needs ❖ Some users and carers not clear about eligibility criteria

Council Response

❖ Review of information in consultation with users and carers

❖ Review the eligibility criteria in the context of making self-directed support the mainstream response to need

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
17.1	Review the current information	Current information reviewed with People's Union and recommendations made to ensure greater clarity	July 07	People's Union confirm information on eligibility is clear		AHas	SC

17.2	Review the eligibility criteria	Review done and conclusions approved	Nov 07	Criteria applied fairly and consistently		CN	SC
Finance / Budget Allocation				**Links to Other Plans**			
Mainstream budget provision				Access, assessment and care management workstream			
Risks				**Mitigation**			
1. People's Union has insufficient capacity				1. One-off consultation procured from another organisation			

Directorate Priority	Promoting choice and independence	
Ref.	CSCI Recommendation / Objective	Context / Evidence
21	The Council should ensure the independent advocacy services are accessible on an individual basis	❖ Some individuals reporting limited access to independent advocacy

Council Response

❖ Develop and implement advocacy protocol and service standards.

❖ Advocacy is crucial in order to promote full engagement in accommodation and support remodelling.

❖ Advocacy is crucial in supporting people through the transition from traditional services to community based supports and to promote independence and ordinary lifestyles.

Ref	PI Ref.	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
21.1	Evaluate the level, quality and range of independent advocacy currently available to people with learning disabilities.	Identified limited capacity to offer individual advocacy Identify capacity required	Done June 07	Identification of gaps Best practice models reviewed Clarity about areas for development		CN	SC

21.2	Develop a service specification for Peer, Individual and Citizen Advocacy.	Draw up service specification	Dec 07	Good user and carer involvement		CN	SC
21.3	Commission service.	Service commissioned	Feb 08	Contract awarded Better services delivered (measures to be added in due course)		CN	SC

Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation from modernisation fund	

Risks	Mitigation
1. Insufficient managerial capacity to develop	1. Engage temporary officer
2. Inability to commission the service	2. Managed process to attract widest possible expressions of interest
3. Commissioned service fails to attract sufficient advocates	3. Use of *Herefordshire Matters*/local media; invite Council and PCT staff to become advocates

Directorate Priority	Developing more inclusive communities; promoting choice and independence	
Ref.	CSCI Recommendation / Objective	Context / Evidence
18 19 24	The Council should ensure that equality and diversity issues are embedded at both strategic and individual levels in learning disability services The Council should develop a programme of equality impact assessment for learning disability services and implement the changes necessary to address any adverse impact identified. The Council should ensure that all its departments are responsive to the needs of people with learning disabilities and promote their inclusion	❖ *Valuing People* agenda must be addressed corporately and across the *Herefordshire Partnership*, not just in social care. ❖ The Council has been working to establish a coherent and co-ordinated approach to equality and diversity issues within the formation of a Corporate Diversity Team. ❖ Equality impact assessments underdeveloped for learning disability services with regard to both policies and service delivery. ❖ Equality and diversity issues not addressed systematically throughout the A and C Directorate ❖ Little evidence of specific equality and diversity activity or targets integrated into adult social care service plans or specific service strategies ❖ Therefore services cannot evidence whether existing and new policies and services are having an adverse impact, and Council can't claim that all people with learning disabilities have consistently fair and equitable access to services. ❖ Insufficient attention paid to addressing users spiritual and religious needs

		❖ Transport a major area for development in order to increase the social inclusion of people with LD and promote their independence: council transport services not user-centred					
Council Response							
	❖ Review of EIA programme of 2007 – 09 to prioritise most important areas for AWLD, including corporate guidance addressing specifically issues in respect of learning disability. ❖ Develop consultation programme with AWLD and carers to inform future service delivery ❖ Identify specific service areas that have not had an EIA and programme them ❖ Develop and implement action plans on basis of the EIAs, incorporating them in service plans. ❖ Training and development programme for heads of service, service managers and teams, and with partners/contractors, raising awareness of the corporate commitment and policy, statutory duties and best practice, including in respect of religion/beliefs/life-styles. ❖ Review needs assessment questionnaire to ensure addresses religion/belief/life-styles ❖ Review and improve data collection, analysis and monitoring for ethnic and other equality categories. See also the response and actions for Recc 25 in respect of employment opportunities						
Ref	Action	**Milestones**	Timescale **(+ update)**	**Success Criteria**	**PI Ref.**	**Lead**	**Head Of Service**
18.1	Propose to Corporate				LA		

19.1 24.1	Management Board (CMB) early priority for LD EIAs	CMB approves	May 07 (Done)	Agree to prioritise LD - related EIAs	Equality Standard	CT	TG
18.2 19.2 24.2	Include LD as designated cross-cutting objective in the performance improvement cycle/Corporate Plan	CMB approves	June 07	Agreement to designation	Ditto	CT	TG
18.3 19.3 24.3	Review with heads of service and agree with DMTs areas to have EIA	Meeting with heads of service Awareness sessions for DMTs, heads of service and service managers	May 07 (Done) June 07	Agreed priority list of timetabled EIAs All directors, heads of service and service managers committed to carry out the programme	Ditto	CT	TG
18.4 19.4 24.4	Undertake consultation with people within learning disabilities and family carers	Workshops and interviews conducted	Sept – Dec 07	Data collection and user feedback to inform EIA action plans/service delivery.	Ditto	TK/MH	SC
18.5 19.5 24.5	EIAs carried out and resulting action plans incorporated into service plans	Completion of all relevant EIAs Incorporation of action plans into service plans.	Dec 07 Feb 08	Issues for improvement clearly identified SMART action plans in place. Measurable improvements	Ditto	CT	TG/ all relevant heads of service

				achieved.			
18.6 19.6 24.6	Effective internal and external communications to promote positive attitudes to people with learning disabilities and support the achievement of the EIA action plan objectives	Communications plan and initial internal communications e.g. "News & Views". Subsequent milestones to be added from the agreed communications plan.	June 07 June 07	Evidence of positive PR (Measures to defined in the communications plan)	Ditto	CT	RB
18.7 19.7 24.7	Recruit Transport Review Officer and Travel Trainer	In post	Jan 08 Thereafter, TBD	Operating against a clear work programme, with identified priorities, signed off by the Service Design Group Increase in the number of people using public transport Reduction in the number of people reliant on Social Care Transport		SD	SD

		Travel Trainer provides training to sufficient individuals to effect cash savings equivalent to five times his/her salary	March 09	Cash savings (target sum TBD)			

Cabinet 21 06 07
Appendix 3

Finance / Budget Allocation	Links to Other Plans
Corporate diversity budget Mainstream budgets in adult social care and across the Council	Herefordshire Community Strategy Council's Corporate Plan and Annual Operating Plan Comprehensive Equality Policy Disability Equality Scheme Race Quality Scheme Gender Equality Scheme Action in response to the Equality Act [Sexual Orientation] Regs 2007
Risks	**Mitigation**
1. Lack of sustained commitment within the Council and by partners/contractors. 2. Capacity of LD services to cope with the consultation work	1. Awareness raising/communications as above, plans rigorous performance management of the EIA process and the implementation of the SMART action plans. 2. Involving People team to carry out the consultation

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Directorate Priority	Developing more inclusive communities; promoting independence and choice	

Ref.	CSCI Recommendation / Objective	Context / Evidence
20	The Council, with its PCT partner, should tackle the health inequalities experienced by people with learning disabilities and ensure that their health care needs are met.	❖ Council and PCT performing poorly in addressing health care needs of people with LD and tackling health inequalities

Council Response	
	❖ There are already specific performance targets to reduce health inequalities, set by the former Strategic Health Authority. These are monitored quarterly by the Learning Disabilities Programme Board. We intend to make substantial headway to meet these targets.

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
20.	20.1 Ensure all adults with learning disabilities are registered with a GP, are identified within practice lists by the agreed Read Code and receive appropriate health checks/screening programmes.	PCT to nominate a lead officer for developing the learning disabilities health agenda. Community LD Team will complete the verification of the Read Codes	June 07 July 07	All adults with a learning disability are registered with a GP and identified within GP practices. All women with learning disabilities are offered screening tests for breast and cervical cancers. Take up is at 70% for breast	C30	MM	YC

allocated by all GP practices to their patients with LD.	October 07	screening and 80% or higher for cervical screening. *[Outcome measure]*			
PCT will ensure that LD service users with a specific read-code are cross-referenced with the screening databases.	October 07	General Practices have systems for reviewing patients who have a learning disability and established heart disease/diabetes every twelve months. The take up rate is at least 70%. *[Outcome measure]*			
PCT to establish which practices offer an annual health check for adults with learning disabilities on their lists, and whether service providers are responding to the offers.	October 07	Health Action Plans (HAPs) are completed for every person with a learning disability, linked to PCP. Responsibility for ensuring completion of HAPs will rest with the health facilitator in partnership with the GP and primary care nurses. The HAP will be linked to person-			
PCT to verify if people with learning disabilities who					

		have heart disease or diabetes are reviewed by GPs annually. PCT to verify which practices offer a diabetes programme including diabetic retinopathy. PCT to establish a Local Enhanced Scheme for learning disabilities with GP practices using additional allocations from the Local Delivery Plan.	December 07	centred plans and approaches. *[Outcome measure in terms of improved health]* Retinal screening for early detection of diabetic retinopathy is offered to people with a learning disability as part of a structured diabetes programme.*[Outcome measure, e.g reduction in rate of diabetic retinopathy]*			

Finance / Budget Allocation	Links to Other Plans
PCT has allocated the following development monies in the LDP for 07/08: £43,000 for the Local Enhanced Scheme. Band 6 Community Nurse post – continuation of post from 06/07 ½ WTE psychology post (8b) – continuation of post from 06/07	Learning Disabilities Commissioning Plan 2007 Performance targets set by the former West Midlands South Strategic Health Authority for learning disabilities.
Risks	**Mitigation**
1. Over-reliance on the CDLT to deliver health equalities	1. Partnership Board to secure appointment of PCT lead for its Health sub-group (achieved).

Directorate Priority	Developing more inclusive communities; promoting choice and independence	
Ref.	**CSCI Recommendation / Objective**	**Context / Evidence**
25	The Council should lead by example by actively promoting the recruitment and retention of people with learning disabilities in both its own workforce and the wider community.	❖ People with LD not currently represented in the Council's workforce ❖ LDPB employment sub-group not effective: low number of people with learning disabilities with jobs, paid or unpaid ❖ Council should exercise more leverage in procuring services ❖ Most Council services secured from external providers; Council employment mainly in respect of planning, commissioning, procurement and assessment – limiting opportunities for the direct employment of AWLD
Council Response		
❖ Whole Council commitment to promoting and securing employment opportunities ❖ Development of more accessible Council recruitment protocols and practices ❖ Examination of how to secure increased job opportunities for AWLD through commissioning and procurement ❖ Consideration of Social Firms project officer/employment specialist/micro-enterprise creation ❖ Provide information to AWLD/family carers about potential routes into a range of providers and associated support		

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
25.1	Whole Council commitment secured and cascaded	Explicit commitment by Cabinet as part of its approval of this plan Cascaded to managers and staff throughout the Council	June 07 July 07	All managers and staff aware of the commitment and the part they are expected to play in fulfilling it		SC	SC
25.2	Joint action plan with Central Recruitment Team to achieve a more inclusive approach to recruitment practices.	Accessible application forms and adverts Best routes to reach the target audience identified Protocol for developing job opportunities/creation from existing posts Training for managers, including	Dec 07 Dec 07 Dec 07 Dec 07	Clear protocols for managers to operate against Three people with learning disabilities		ST ST	DJ DJ

		incorporation of protocols into recruitment training		employed by the Council		ST	DJ
		Accessible and supportive approach to interviews	January – March 08				
25.3		Review all Council Department contracts with organisations to identify potential employment opportunities.	Audit of all Council contracts across all Departments	January 08	All council strategic partners/contractors explicity identify employment opportunities for people with learning disabilities		DH	DP
			Procedure established for potential employment opportunities to be flagged with the Central Recruitment Team	March 08	Five People with learning disabilities employed by Council's partners		DH / MS	SC/DP
							ST/DH	All heads of Service
			Review of procurement processes to build employment targets into contracts.	January 08	Central Recruitment Team and Learning Disability Management Team (in ASC) to act as a source of help and advice to partners		DH	DP

			advice to partners			
			All relevant contracts include targets for the employment of people with learning disabilities		DH	All heads of service

25.5	Create further employment opportunities through the development of social enterprises and micro-enterprise	Funding for social enterprise post and micro-enterprise organisation approved	June 07			LFer	SC
		Specifications produced	June 07				
		Post filled/organisation established	Sept 07				
		Work programme developed and signed off by Service Design Group	Oct 07	Target number of enterprises established			
		Support to individuals to develop their own micro-enterprise	Sept 08	Six people with learning disabilities in self-employment			
			Sept 08	New social enterprises and opportunities			
		Longer-term targets					

		to be set		beyond the social care initiative begin to be developed, attracting new start-up funds and moving towards long-term sustainability			

25.6	'The Big Employment Event.' to promote and showcase employment opportunities to young people with learning disabilities	Bring employers and public sector organisations together to organise the event Publicise event /invite participants	May 07	Done		LFer	SC

Finance / Budget Allocation	Links to Other Plans
35k per annum micro enterprise 18k per annum social business dev manager	Disability Equality Scheme Council Pay and Workforce Strategy Single LD service plan (specifically, the project plan for modernising day services)
Risks	**Mitigation**
1. Lack of understanding of, and support for, the new approach to mainstream employment opportunities	1. Intensive two-way communication and engagement with staff, users, family carers and employers

Directorate Priority	Leadership and transformation; modernising learning disability services; promoting choice and independence; better commissioning and use of resources

Ref.	CSCI Recommendation / Objective	Context / Evidence
26	The Council, with the PCT, should ensure that it has a workforce that is of sufficient size, skill-mix, and competency in learning disability services	❖ No comprehensive development and learning plan for the workforce. ❖ No QA framework to ensure staff meeting standard and expectations regarding competencies to undertake their roles and responsibilities in learning disability services

Council Response

❖ Comprehensive workforce development plan to align staff skills and behaviours with promotion of independence and inclusion

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
26.1	Learning and Development Plan for Social Work and Social Care staff in Herefordshire Council, including targeted plan for each team manager to achieve learning and qualifications targets	In place and being implemented Quarterly monitoring reports	Done July 07; October 07; January 08; April 08	In place and being implemented, meeting national standards	C30	LFre LFre	DJ DJ

26.2	Development of multi-agency learning disability workforce development plan, including SMART targets . (This dovetails with one of 13 work streams of the Herefordshire Valuing People Partnership Board The workforce development plan will address the workforce training and planning problems and challenges identified in Valuing People White paper – DH, 2001)	Determine and agree governance arrangements	July 07			JP	DJ/SC
		Identify key stakeholders and establish links	July 07				
		Establish workforce development group	July 07				
		Multi-agency development workshop to determine themes and priorities	Sept 07				
		Develop detailed project plan and agree measurable targets	End Sept 07				
		Baseline LD workforce profile and first draft workforce development plan	Jan 08				

Finance / Budget Allocation	Links to Other Plans
Initially, mainstream budgets. To be reviewed as the strategy is developed.	Herefordshire Council Pay and Workforce Strategy Development of the adult health and social care workforce strategy
Risks	**Mitigation**
1. Lack of collective ownership and partner engagement 2. Inadequate dedicated finance to implement the workforce development plan	1. High-level, multi-agency agreement and representation in establishing and operating the governance arrangements 2. Financial planning an integral part of the strategy's development, buttressed by the governance arrangements to provide direct links to the partners' business and resource planning cycles