

Chief Executive's Office

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**To: All Members of Cabinet:
R.J. Phillips (Leader)
L.O. Barnett
A.J.M. Blackshaw
H. Bramer
J.P. French (Deputy Leader)
JA Hyde
JG Jarvis
DB Wilcox**

13th June, 2007

Dear Councillor,

**MEETING OF CABINET
THURSDAY, 21ST JUNE, 2007 AT 2.00 P.M.
THE COUNCIL CHAMBER, BROCKINGTON, 35 HAFOD ROAD, HEREFORD**

AGENDA (07/07)

**HEREFORDSHIRE COUNCIL - NOTICE UNDER REGULATION 15 OF THE LOCAL
AUTHORITIES (EXECUTIVE ARRANGEMENTS((ACCESS TO INFORMATION) REGULATIONS
2000 (AS AMENDED)**

Notice is hereby given that the following report contains a key decision. When the decision has been made, Members of the relevant Scrutiny Committee will be sent a copy of the decision notice and given the opportunity to call-in the decision.

Item No	Title	Portfolio Responsibility	Scrutiny Committee	Included in the Forward Plan Yes/No
4	Review of School Provision	Children's Services	Children's Services	Yes

1. APOLOGIES FOR ABSENCE

To receive any apologies for absence.

2. DECLARATIONS OF INTEREST



Putting People First Providing for our Communities Preserving our Heritage Promoting the County Protecting our Future

County of Herefordshire District Council, PO Box 239, HEREFORD, HR1 1ZU

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To receive any declarations of interest by members in respect of items on this agenda.

3. PROGRESS ON IMPROVEMENT - CHILDREN AND YOUNG PEOPLE'S SERVICES

To advise Cabinet of the Success Criteria agreed with the Government Office for the West Midlands (GOWM) in the continuing formal engagement with the authority, with a view to ceasing that engagement in the autumn period. *(Pages 1 - 4)*

4. REVIEW OF SCHOOL PROVISION

To inform members of the position on the review of school provision being undertaken in the County. *(Pages 5 - 8)*

5. PAY AND WORKFORCE DEVELOPMENT STRATEGY

That Cabinet approve the Pay and Workforce Development Strategy for 2007-10. *(Pages 9 - 58)*

6. RESPONSE TO THE REVIEW OF THE SUPPORT FOR MUSEUMS AND HERITAGE CENTRES

To respond to the "Review of the Support for Museums and Heritage Centre" outlining acceptance or otherwise of the recommendations made. *(Pages 59 - 128)*

7. COMMISSION FOR SOCIAL CARE INSPECTION REPORT ON SERVICES FOR PEOPLE WITH LEARNING DISABILITIES AND THE COUNCIL'S ACTION PLAN

To notify Cabinet of the Commission for Social Care (CSCI)'s inspection report on services in Herefordshire for people with learning disabilities and seek Cabinet's approval for the Council's action plan to remedy weaknesses identified in the report. *(Pages 129 - 340)*

EXCLUSION OF THE PUBLIC AND PRESS

In the opinion of the Proper Officer, the next item will not be, or is likely not to be, open to the public and press at the time it is considered.

RECOMMENDATION:

That the public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Schedule 12(A) of the Act as indicated below.

8. HEREFORDSHIRE JARVIS SERVICES

To receive an update on the Herefordshire Jarvis Services contract. A confidential report will be tabled at the meeting.

This item discloses information relating to the financial or business affairs of any



particular person (including the authority holding that information).

Yours sincerely,



N.M. PRINGLE
CHIEF EXECUTIVE

Copies to: Chairman of the Council
Chairman of Strategic Monitoring Committee
Vice-Chairman of Strategic Monitoring Committee
Chairmen of Scrutiny Committees
Group Leaders
Directors
Head of Legal and Democratic Services



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COUNTY OF HEREFORDSHIRE DISTRICT COUNCIL

BROCKINGTON, 35 HAFOD ROAD, HEREFORD.

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PROGRESS ON IMPROVEMENT IN CHILDREN AND YOUNG PEOPLE’S SERVICES

PORTFOLIO RESPONSIBILITY: CHILDREN’S SERVICES

CABINET

21ST JUNE, 2007

Wards Affected

County-wide

Purpose

To advise Cabinet of the Success Criteria agreed with the Government Office for the West Midlands (GOWM) in the continuing formal engagement with the authority, with a view to ceasing that engagement in the autumn period.

Key Decision

This is not a Key Decision.

Recommendation

THAT the Success Criteria for Herefordshire Council be noted.

Reasons

To ensure that Cabinet is aware of the criteria on which GOWM will judge if sufficient improvement has been made in Children and Young People’s Services in Herefordshire.

Considerations

1. On April 12th Cabinet were advised of the continuing engagement in the drive for improvement in Children and Young People’s Services. Since then more detailed discussions have been held with GOWM
2. At the end of March GOWM,
 - (i) noted that significant improvement had been made in **performance management** but further evidence of embedding performance management was required. On this, the following Success Criteria have been agreed:

Success criteria	Evidence	Timescales
1.0 Embedded practice in monitoring Performance at	(a) Quarterly Performance Digest (b) Paper trail through Minutes of	Initiate immediately PM on agenda of

all levels of the organisation 1.1 Good management and performance data. 1.2 The interrogation and interpretation of data. 1.3 Appropriate response and action that flows from the understanding of the DMT.	CYPDMT and team meetings (c) Observation at CYPDMT- Rob W. (d) Identification of areas for concern/celebration by CYPDMT and subsequent action taken/plans being informed by this evidence	Monthly management meetings and team meetings
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- (ii) expressed a concern over a **capacity to deliver projects and implement effective change** management. The Local Authority has offered the Review of Schools to demonstrate how change can be managed in Herefordshire. The success of this will be judged against the following criteria:

Success criteria	Evidence	Timescales
2.0 Strategic plan agreed which sets out the way forward and timescales for closures/ amalgamations. 2.1 To develop a growing awareness in Herefordshire of the need for change in school provision and a shared vision.	Paper trail of data/meetings and consultation process of a strategy	Autumn term

- (iii) felt that there was further work to do on the **Children's Workforce Development Strategy**. This will be judged on:

Success criteria	Evidence	Timescales
Strategy document approved Appropriate action taken to develop services according to need identified through strategy	(a) Completed Document (to high quality, relevant to Herefordshire context, evidence based and costed). (b) Paper trail of consultation, formal approval process (c) Issues/areas identified for development to meet need and in our plans	September 2007

3. Progress on these 3 areas will be assessed formally in meetings with the GOWM in June and October. The Children's Services Adviser also has an open invitation to attend Directorate Management Team Meetings to offer support and advise and gain a better understanding how strategic management in Children's Services is provided. Rob Willoughby from GOWM has attended 2 such meetings in the last 6 weeks.

Risk Management

The importance of meeting these Success Criteria cannot be overemphasised and appropriate priority will be accorded to their delivery. Staffing is the most significant risk to this. The Performance Unit will have a permanent lead officer for the first time. Staff resources to support the school review will be strengthened in this period.

Alternative Options

There are no Alternative Options.

Consultees

None.

Appendices

Not applicable.

Background Papers

Letter to GOWM from Director of Children's Services 10.05.07.



REVIEW OF SCHOOL PROVISION

PORTFOLIO RESPONSIBILITY: CHILDREN'S SERVICES

CABINET

21ST JUNE, 2007

Wards Affected

County-wide

Purpose

To inform members of the position on the review of school provision being undertaken in the County.

Key Decision

This is a Key Decision because it is likely to be significant in terms of its effect on communities living or working in Herefordshire in an area comprising one or more wards.

It was included in the Forward Plan.

Recommendations

THAT Cabinet

- (a) **supports the revised programme for the school review**
- (b) **Supports the proposals from the Governors of Wigmore Primary School and Wigmore High School to form a federated school from September 2007.**

Reasons

School provision is a critical feature and decisions are required which will shape provision over the next 20 years. A way forward needs to be found balancing the need to make the right decisions and to reduce current uncertainty.

Considerations

1. In March 2006 Cabinet approved a programme to review the provision of school places in the County in light of falling numbers of children;

Further information on the subject of this report is available from
George Salmon, Head of Commissioning and Improvement – Schools and Services
on (01432) 260802

2. initial consultation has been undertaken in the following areas:

Kington, Weobley & Wigmore
Kingstone & Peterchurch
Bromyard & Leominster
Secondary Provision in the County

A proposals document has been issued for the Kington, Weobley and Wigmore areas;

3. The review has fallen behind the original programme partly due to priority being given the performance management reporting and the delays in recruiting to 2 third tier posts;
4. It is now proposed to complete the review in one exercise, rather than on an area by area basis;
5. This one exercise will be started by the publication of a principles papers which will be issued in September 2007. From this paper firm proposals will be made on provision across the County in a report to Cabinet prior to the end of 2007;
6. Two changes are proposed outside this timetable. Formal notices to close Brilley Primary School were issued at the beginning of May. It is anticipated that a final decision will be needed from Cabinet in August.
7. The Governing Bodies of Wigmore Primary School and Wigmore High School have used powers in the 2006 Education and Inspection Act to propose federation from September 2007. This coincides with the retirement of the headteacher of the primary school. Both schools will be managed through a joint Governing Body and single headteacher. The Governors are consulting parents and other bodies on this. The Local Authority is invited to express its views;
8. There is some evidence from national research that this can lead to more effective education, and certainly there are economies to be made in simple management of these 2 schools on the same campus;
9. The process does not involve the closure of either school, and can be reversed by Governing Bodies issuing a further notice to discontinue such an arrangement;
10. On balance the Director of Children's Services supports the Governors proposals. Assessments will be made if benefits do accrue, and whether the same model could be applied elsewhere.

Risk Management

The major risks to the review programme is one of staff resources. Priority is being given to resolve this.

Alternative Options

The review could proceed on an area by area basis as originally intended but schools are seeking clear leadership and early resolution of this to remove future uncertainty.

Consultees

None.

Background Papers

Review of School Provision;
Kington, Weobley & Wigmore
Kingstone & Peterchurch
Bromyard & Leominster
Secondary Provision in the County



PAY AND WORKFORCE DEVELOPMENT STRATEGY 2007-10

PORTFOLIO RESPONSIBILITY: CORPORATE AND CUSTOMER SERVICES AND HUMAN RESOURCES

CABINET

21ST JUNE, 2007

Wards Affected

None

Purpose

That Cabinet approve the Pay and Workforce Development Strategy for 2007-10.

Key Decision

This is not a Key Decision.

Recommendation

THAT the Strategy be approved

Reasons

Cabinet are asked to approve the Strategy for 2007-10 in order to progress the human resources issues and actions outlined in the Strategy.

Considerations

1. The Council's Pay and Workforce Development Strategy 2005-8 adopted the Employers Organisation's five themes as key areas to address - Pay, Reward and Recognition, Resourcing, Developing Leadership Capacity, Developing the Skills and Capacity of the Workforce, and Organisational Development. During 2006, however, it was recognised that this existing Strategy needed to be fully reviewed and updated to respond to the Council's emerging transformation agenda.
2. The 2005-8 Strategy has achieved a number of key objectives, including:
 - Achievement of sickness absence target, attained top quartile performance at 8.23dys per FTE per year for 2006-7 (target 9dys);
 - Turnover stable and meeting target at no more than 9% per year (6.97% for 2006-7);

Further information on the subject of this report is available from
David Johnson, Head of Human Resources on (01432) 383055

- Modernised recruitment administration and agency worker provision with significant cashable savings in local recruitment media advertising;
 - Establishment of a Skills for Work Centre, and development of a Children's Workforce Development Strategy;
 - Support post-Job Evaluation – 70% reduction in numbers of those in receipt of job evaluation protection;
 - Commitment to achieving the Investors in People Standard, with a 94% completion rate of Staff Review and Development (SRD) in 2006, the SRD process firmly linked to the Council's performance improvement cycle; and improved responses across a range of questions in the Employee Opinion Survey.
3. The Pay and Workforce Strategy 2007-10 was developed by a Board set up as part of the Council's arrangements to ensure the successful delivery of proposals for the Herefordshire Council Transformation Programme. The Board's Terms of Reference were to oversee development and delivery of the Pay and Workforce Development Strategy, and ensure realisation of the planned benefits.
4. The Pay and Workforce Development Strategy is designed to support delivery of the Council's Corporate Plan commitments and organisational priorities, including the Council's diversity agenda, and values. It is the basis for testing the Council's performance in relation to the effective strategic management of human resources.
5. Benchmarking (e.g. national local government quartiles, other 'like' unitary Councils, the local government Pay and Workforce Strategy Survey). has shown that the Council is performing as follows for 2006-7:
- ✗ under-performing in relation to % disabled employees (BVPI 16a), where unitary top quartile performance is at 2.75%, and Council performance is at 0.69% (lowest performing quartile);
 - ✗ under-performing in relation to % employees from black/minority ethnic groups (BVPI 17a), where unitary top quartile performance is at 5.6%. Council performance is 0.64% (lowest performing quartile);
 - ✗ % of the top 5% of wage earners female, and (BVPI 11a), where unitary top quartile performance is at 48.09%, and the Council is at 38.57%.
 - ✗ % of the top 5% of wage earners declaring a disability (BVPI 11c) where unitary top quartile performance is at 3.14%, and the Council is currently at 0.71%.
 - ✗ % top 5% of wage earners from black/minority ethnic background (BVPI11b), where unitary top quartile performance is at 3.68 %, and the Council is at 2.14%.
 - ✓ performance on sickness was 8.23dys per FTE for 2006-7 which puts the Council in the top quartile nationally.
 - ✓ performance on turnover was 6.97% for 2006-7, well below the average for local government. However this overall figure masks variations between Directorates.

- ✓ Performance on Staff Review and Development completion was 94% (against 76% previous year).
6. The Comprehensive Performance Assessment, and Joint Area Review, have identified the need to develop and deliver a workforce strategy for the Children's, and Adults, social care workforce, and address key skills shortages in this area. The delivery of this strategy is a key priority, non-delivery of which has been identified as a key risk.
 7. Achieving the Investors in People (IIP) standard is a key priority for the Council, as it contributes to the employment agenda on a variety of levels as set out in the Pay and Workforce Strategy 2007-10. As such, non-achievement of the Standard has been identified as a key risk.
 8. The Pay and Workforce Development Strategy 2007-10 sets out what the Council will do with its human resources in order to tackle identified priorities. These have arisen as a result of performance to date, to implement national agreements, and respond to wider environmental and legislative changes (e.g. equal pay, employment legislation, central government requirements).
 9. The Strategy also recognises the Council is facing significant human resources challenges in the way it delivers services, such as through improved accommodation, embracing new and emerging technology (Herefordshire Connects), and the creation of a Public Services Trust. These challenges will involve working to create even more flexibility in the types of jobs the Council offers, how, when and where these jobs are done, and how to recruit, train and retain a motivated workforce through times of significant change.
 10. The Strategy identifies six themes (a new sixth theme, Employee Well Being, has been added as a result of work to develop the Strategy), and sets out a series of actions in the context of the Human Resources three-year Service Plan to ensure the Council:
 - Provides for the development of **Effective Leadership** and management;
 - Has in place effective **Learning and Skills Development** for the social care workforce in Herefordshire, to meet national standards, encompassing the Private, Independent and Voluntary sectors, and provides learning and skills development including employee induction, advice and coaching on human resource policies, people skills development for managers;
 - Supports the **Organisation's Development** and diversity, including supporting Investors in People accreditation, the achievement of the Equality Standard, and develops its human resources to meet the challenges of change such as Herefordshire Connects, Public Services Trust, Accommodation (see bullet point 8. above);
 - Has in place effective **Pay, Reward, and Recognition** structures, equal pay review, advice and guidance;
 - Is effectively **Resourced** to meet its service delivery and employment diversity challenges through workforce planning, central recruitment administration;
 - Promotes and supports **Employee Well-Being** through improvements in managing attendance, provision of occupational health and safety (including Counselling), advice and guidance.

11. The Pay and Workforce Development Strategy 2007-10 contains a revised set of actions in Year One (2007-8), in order to address the human resources performance challenges set out above, and build on the successes to date, with stretch performance targets for 2007-10 against relevant performance indicators, across each of the six themes.

Risk Management

Key risks highlighted have been identified as the recruitment and retention of employees where there are national skills shortages.

Alternative Options

There are no Alternative Options.

Consultees

The other Project Boards set up as part of the Transformation Programme have been consulted on the development of the Pay and Workforce Development Strategy to ensure it is properly aligned.

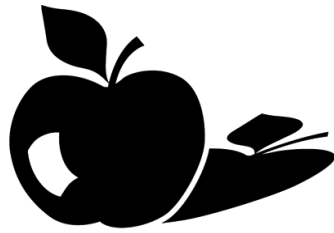
Appendices

None.

Background Papers

Project Initiation Document Pay and Workforce Development Strategy (v 0.2)

Human Resources Service Plan 2007-10 (v 1.4)



HEREFORDSHIRE
COUNCIL

Pay and Workforce Development Strategy

2007-10

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Introduction

This Pay and Workforce Development Strategy (“Strategy”) for 2007-10 has been developed through the work of the Pay and Workforce Development Strategy Board (“Board”). It aims to address the issues facing the Council’s workforce in light of the Community Plan, the Council’s Plan and associated Strategies to achieve service delivery aims and ambitions, for better outcomes for service users. It has been developed in the context of the national Pay and Workforce Strategy for local government.

The Board was established as part of the Council’s framework for managing transformation across the Council, reporting to the main Transformation Board. The work of the Pay and Workforce Development Strategy Board recognises other key organisational strategies that need to be taken account of (e.g. Accommodation, ICT, Financial, Children and Young People’s, Herefordshire Connects). The transformation board structure was set in place to enable an effective flow of communication between these key strategies (inter-dependencies), so that each could inform and support the other.

Development and delivery of the Pay and Workforce Development Strategy is being managed in accordance with project management methodology, under the Transformation Governance arrangements.

1. Vision and Executive summary

The Pay and Workforce Development Strategy aims to ensure a well motivated, well developed, and flexible workforce to deliver effective services to the community – in short to recruit, train, and retain a competent, confident, and flexible workforce.

In setting out the Strategy, it is recognised that operating conditions change, therefore the Strategy will need to be reviewed regularly to ensure it remains flexible and responsive to changing local needs and national demands.

A Pay and Workforce Development Strategy is essential for the successful delivery of the Community, and Council Plan. The Pay and Workforce Board has been instrumental in overseeing the development of the Strategy. The Board will oversee and monitor Strategy deployment and progress. Strategy development consisted of:

- A series of supplier group sessions held in between December 2006 and January 2007, to review the existing Strategy themes, assess the current context together with future envisaged issues, develop performance indicators, targets, consider risks, and propose actions;
- Baseline performance information was gathered;
- A review of performance against the Human Resources Service Plan 2006-7, and development of a new Service Plan for 2007-10;
- A review of Risks;

- An action plan was developed.
- Monthly Board meetings to review progress, agree the themes – a new theme of ‘Employee Well Being’ was identified – actions, performance indicators, and targets.

The Strategy will be approved by the Corporate Management Board, Cabinet, and the Strategic Monitoring Committee. The Board will meet monthly to oversee progress, with twice-yearly updates to Cabinet and Strategic Monitoring Committee.

2. Background

2.1 Key national contextual factors

Through the National Pay and Workforce Development Strategy for local government, the National Employers Organisation is committed to ensuring a flexible, well-motivated, and well trained, workforce, able to meet the demands of modern service delivery. The government’s vision for a world class children’s workforce has been set out in the Children’s Workforce Strategy (DfES, 2006). The key strategic challenges set out in both are:

- recruitment and retention - recognising that there are common national occupational recruitment and retention difficulties;
- strengthening integrated working – recognising the increasing role of partnerships to deliver economies of scale and improved outcomes;
- new ways of working - workforce remodelling, enhancing the use of technology
- improved leadership, management and supervision – recognising that leadership and management are key to ensuring effective organisational transformation.

2.2 Key local contextual factors and current position

- a) Herefordshire has a population of approximately 176,900. The County has one of the lowest population densities in England. Approximately one third live in the Hereford City area, with a fifth in market towns, half in rural areas. Herefordshire is a high performing, but low funded County. The population has a slightly lower proportion of 0-19 year olds (24%) compared with 25% nationally. This local figure is set to fall by 10%, compared with 4% nationally. Population projections indicate a growth in older aged residents. This will present a challenge to the delivery of services, in particular those to older adults. In addition, research has identified that demand for children’s support services is still increasing.
- b) At the end of 2006-7, the Council employed around 5,500 employees, 3,300 FTE in some 7,000 jobs (including those based in schools). The gender split reflects that for local government generally, around 75% female, 25% male. This same proportion is not reflected in the % of the top paid 5% of the workforce, where 38.5% are female, and the Council is underperforming in relation to the top quartile for Unitary Councils (48.09%).
- c) The age profile of the Council shows a workforce skewed toward the upper age ranges, where 5.23% are in the 16-24 age range, compared with around 10% in the local population. There are good opportunities for higher education, employment and training

in Herefordshire (14-19 Inspection 2005). Connexions have a target for achieving a 10% reduction in the percentage of 16-18 year olds not in education, employment, or training (NEET).

- d) The black minority ethnic population of Herefordshire was at 0.8% in 2001, with the overall total ethnic minorities in the County at 3.4%, mainly as a result of the expanded European Union. The Council is currently underperforming in the overall employment of those from black/minority ethnic backgrounds compared to the local population and top quartile Unitary performance (0.64% against 5.6%) and in the employment of disabled people (0.69% against 2.75%).
- e) The Council is underperforming in the % of top 5% of wage earners compared to Unitary top quartile performance for employment of those from black/minority ethnic backgrounds (0.71%, against 3.14%), and employment of disabled people (2.14% against 3.68%). See Human Resources Service Plan 2007-10 for more detail.
- f) The Council is rated as being at Level Two of the Equality Standard, and continues its programme of diversity impact assessments, with a Comprehensive Equality Policy, a reviewed Race Equality Scheme, a Disability Scheme, and a recently introduced Gender Equality Scheme. The Council aims to achieve Level Five of the Equality Standard by 2010.
- g) Unemployment in the County is lower than that for the West Midlands and the country as a whole (1.7%, against 3.5% and 2.6% respectively). Employee turnover within the Council has been consistently lower than the local government average (16.5% - median average for local government), and under local target (9%), at 6.97% for 2006-7.
- h) Absence rates within the Council were at 8.23 dys per FTE (full time equivalent) for 2006-7, with the Council exceeding its 9 dys per FTE target. This places the Council in the top quartile nationally. Absences are a mixture of long term and short term frequent, with top reason for absence overall consistent with that identified nationally - 'flu/cold/viral type infections. Use of early referral to Occupational Health, plus return to work interviews continue to be the most effective means of managing attendance. A revised Health and Safety Management Scheme is being developed.
- i) Council absence rates and employee turnover rates overall masks levels within some Directorates that need to be addressed. Recruitment and retention difficulties, and skills shortage areas reflect those for local government nationally e.g. social work, accountancy, ICT, building control. The Council has seen use made of market forces supplements for some roles, however national shortages in some skill areas mean that the use of market forces alone is not likely to succeed.
- j) The Council has agreed to work to the Investor in People Standard to help support continued performance improvement. The Council's appraisal scheme – Staff Review and Development – is firmly linked to the Council's Performance Management cycle, and completion rate for 2006 was 94% against 76% for 2005. There are issues of quality of completion that now need to be addressed. Three sixty degree appraisal of the Council's key managers was rolled out in early 2007, with coaching sessions, again to help drive performance improvement. A revised manager development programme was developed in 2006-7.

- k) The Council's Corporate Plan has identified the need to respond and transform in a number of areas, and has developed strategies to enable and support change, including
- Accommodation - seeking to improve space utilisation and service delivery through property rationalisation and increased use of flexible working approaches;
 - Information, Communication, and Technology – seeking to harness technology to drive and support service delivery improvement;
 - Herefordshire Connects – seeking to transform service delivery across the Council, through new technology to drive Integrated Customer Services, Integrated Support Services, and Performance Management;
 - Children and Young People's Plan – seeking to ensure the five outcomes for children – Be Healthy, Stay safe, Enjoy and Achieve, Make a Positive Contribution, Achieving Economic Well-Being – are at the centre of the development agenda;
 - Medium Term Financial Strategy – seeking to ensure budgetary planning and management over a longer term planning horizon, including the control and management of costs (including the Council's workforce establishment).

More detail on the current position in terms of the Council's performance against key workforce development areas, is outlined in the Human Resources Services Plan 2007-10.

4. Scope and Priority areas

The Pay and Workforce Development Strategy will support areas of activity in respect of the Council's workforce, to drive improvement in the following six identified areas:

- **Resourcing** – recruitment and retention
- **Leadership and management development** – to equip and enable managers to lead change, and manage people effectively
- **Pay, Recognition and Reward** structures – to enable a well motivated workforce
- **Skills, Learning, and Development** – to have in place a skilled workforce, one that meets national qualification and training standards, and is able to deliver effective services
- **Employee Well Being** – to have a healthy workforce, with the safest possible working environment
- **Developing the Organisation** - to meet the workforce diversity and resourcing challenges of Herefordshire Connects, Accommodation, creation of a Public Services Trust and a Children's Trust.

It is recognised that the Council has a relationship with the employed workforce based in schools, through local management of schools.

The Herefordshire Council and Primary Care Trust (PCT) are currently working on developing a shared proposal to create a Public Services Trust (PST) for Herefordshire which will integrate local government services and public health, planning and commissioning functions. The move is designed to improve the planning and commissioning, and delivery of services to local people, making better use of money and resources. The implications addressed as part of the delivery of this Strategy.

6. Risks

Risks identified are:

- a) Non-delivery of the Children's and Young People's Workforce Strategy 2007-9.
- b) Non-achievement of the Investor in People Standard.

Both the above will be mitigated by project management of delivery, and Board oversight of progress. See Pay and Workforce Development Strategy Board Risk Log, and Human Resources Strategic Risk Register.

7. Review and monitoring arrangements

Progress against the Strategy will be via monthly Board meetings, as part of the Transformation Governance arrangements, and via Corporate Management Board/Cabinet/Strategic Monitoring Committee reports half yearly by the Head of Human Resources.

Appendix A Pay and Workforce Development Strategy 2007-10

Cabinet Lead: Cabinet Member Corporate and Customer Services and Human Resources CMB Lead: Head of Human Resources

Theme and Definition	Performance Indicator(s)	Targets 2007-10		Current Year 2007-8		
		2007-8	2008-9	2009-10	Action	Resources needed
1. Resourcing <i>To ensure the organisation recruits and retains the employees it needs to deliver effective services</i> <input checked="" type="checkbox"/> Cross cutting – Diversity, Thriving Communities, Better Outcomes for Children, Enabling Older People, Sustainability	The percentage of the top-paid* 5% of Local Authority employees who are women (BVPI 11a) * % top paid = % on c£38,000 and above	42% * 42.6% * 43.34% *	1.1. Develop a focused and prioritised action plan, with the Councils preferred senior manager recruitment consultancies, to include improved recruitment and retention strategies (to reflect actions in gender equality scheme, and include internal employee activities and development).	Within existing HR resources Corporate Diversity Team	Action plan in place by end June 2007, delivery from July 2007 End Sept 41% End Dec 41.5% End Mar 08 42%	2006-7 current 38.57% * Targets to be reviewed in light of 2006-7 out-turn

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Theme and Definition	Performance Indicator(s)	Targets 2007-10		Current Year 2007-8				
		2007-8	2008-9	2009-10	Action	Resources needed	In year milestones (targets)	Performance Progress
Resourcing continued.....	The percentage of the top-paid 5% of Local Authority employees from an ethnic minority (BVPI 11b)	1.95% *	2.00% *	2.02% *	1.2 As above, and action plan to reflect actions in Race Equality Scheme.	Within existing HR resources Corporate Diversity team	As above End June 1.89% End Sept 1.92% End Dec 1.95% End Mar 08 1.95%	2006-7 current 2.14% * Targets to be reviewed in light of 2006-7 out-turn
	N/A	N/A	N/A	N/A	1.3 Verify all personal diversity data in respect of top 5% of wage earners.	Within existing HR resources	Ongoing	
	The percentage of the top-paid 5% of staff who have a disability (excluding those in maintained schools) (BVPI 11c)	0.5% *	0.75% *	1.06% *	1.4 As above and action plan to reflect actions in Disability Equality Scheme.	As above	As above End June 0.15% End Sept 0.25% End Dec 0.35% End Mar 08 0.5%	2006-7 current 0.71% * Targets to be reviewed in light of 2006-7 out-turn

Theme and Definition	Performance Indicator(s)	Targets 2007-10		Current Year 2007-8				
		2007-8	2008-9	2009-10	Action	Resources needed	In year milestones (targets)	Performance Progress
Resourcing continued.....	N/A	N/A	N/A	N/A	1.5 Verify all data in respect of top 5% of wage earners.	Within existing HR resources	Ongoing	
	Length of time to recruit (from authority to recruit received to conditional offer)	42 days	40 days	38 days	1.6 Improve the recruitment process for managers (new and existing).	Within existing HR resources	Review current approach by July 2007 Develop revised approach by September 2007 Implement revised approach by March 2008	2006-7 = 45 days
	No specific indicator	Milestones are met			1.7 Integrate the Council's values, non-negotiables and competencies into job descriptions and person specifications.	As above	Ongoing – review of job descriptions and person specifications as they are recruited to	

Theme and Definition	Performance Indicator(s)	Targets 2007-10		Current Year 2007-8				
		2007-8	2008-9	2009-10	Action	Resources needed	In year milestones (targets)	Performance Progress
Resourcing continued.....	Voluntary Leavers as a percentage of employees in post (leavers = those on a permanent contract with the Council who leave voluntarily, or those who leave temporary contract early, voluntarily) (BVPI 13)	Not exceeding 9%	Not exceeding 9%	Not exceeding 9%	1.8 Leaver Survey – revise survey to improve Directorate and strategic management information to identify issues and drive improvement – including leaver interviews to identify particular issues in identified areas – e.g. Youth Work, Social Work, ICT.	Within existing HR resources	Agree improvements to Leavers Survey by end June 2007. Communicate changes by end Sept 2007. Implement leaver interviews by September 2007.	2006-7 6.97%
	As above	As above	As above	As above	1.9 Benchmark turnover with relevant high performing Unitary Councils, for comparison.	Within existing HR resources NUB group	Send query to NUB group by July	
	As above	As above	As above	As above	1.10 Review turnover by occupational groups – in particular hard to fill vacancy areas.	Within existing HR resources	Assess turnover in hard to fill occupational groups by July	

Theme and Definition	Performance Indicator(s)	Targets 2007-10		Current Year 2007-8				
		2007-8	2008-9	2009-10	Action	Resources needed	In year milestones (targets)	Performance Progress
Resourcing continued.....	As above	As above			1.11 Continue targeted action to address shortages in identified areas e.g. Youth, Social Work, ICT.	Within existing HR resources	Resourcing strategies developed by June 2007 Implemented by September 07	
	N/A	Milestones are met			1.12 Review requirement for Normal Retirement Age (NRA), and agree policy on NRA.	Within existing HR resources Employers Organisation Guidance	Review NRA by December 2007 Agree approach to NRA by Jan 08	
	N/A	Milestones are met			1.13 Engage with partners to develop focussed actions to attract younger and mature entrants e.g. sessional work, back to work tasters, how to differentiate the Council's job opportunities for differing groups e.g. school leavers/mature entrants/career or sector shifters and link with workforce development plans.	Within existing HR resources Corporate Diversity team	Identify partners by June 2007 Agree approach by September 2007 Implement January 2008	

Theme and Definition	Performance Indicator(s)	Targets 2007-10		Current Year 2007-8				
		2007-8	2008-9	2009-10	Action	Resources needed	In year milestones (targets)	Performance Progress
Resourcing continued.....	The percentage of Local Authority employees with a disability (BVPI 16a and see below 17a)	0.55% *	1.25% *	1.93% *	1.14 Develop a focused and prioritised action plan to address under-representation by disabled employees.	Within existing HR resources Corporate Diversity team	Action plan developed by June 2007 Implement from July 2007 End June 0.39% End Sept 0.45% End Dec 0.50% End Mar 08 0.55%	2006-7 outturn 0.69% * Targets to be reviewed in light of 2006-7 outturn
	The percentage of Local Authority employees from ethnic minority communities (BVPI 17a)	0.55%	0.65%	0.80%	1.15 Develop a focused and prioritised action plan to address under-representation by black/minority ethnic employees. Also consider setting target for percentage of minority ethnic employees and those for whom English is a second language.	Within existing HR resources Corporate Diversity team	As above	2006-7 outturn 0.64%

Theme and Definition	Performance Indicator(s)	Targets 2007-10		Current Year 2007-8			
		2007-8	2008-9	Action	Resources needed	In year milestones (targets)	Performance Progress
		2009-10					
Resourcing continued.....	Cost of Agency Workers per annum Cost of recruitment per recruit	Milestones are met		1.16 Embed Master Vendor (MV) approach.	Pertemps	Cost of recruitment target to be set by end June 2007 MV in place from April 2007. Implementation plan by June 2007 Agree targets and PIs by June 2007	Cost of recruitment per recruit £3,170
	% of employees aged 16-24	Milestones are met		1.17 Improve links with schools, colleges (HE/FE careers offices, community groups), linking with Apprenticeships and relevant national schemes and other Council plans/strategies, including Looked After Children.	Within existing HR resources	See 12. above Set target for improvement by June 2007	2006-7 current 5.23%

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Resourcing continued.....	% Vacancy rate	Milestones are met	1.18 Embed Guidance arrangements for the Council's establishment.	Within existing HR resources	Set vacancy rate targets by September 2007 Guidance arrangements published June 2007 Establish workforce planning group by July 2007 Action plan re workforce planning in place Sept 07	
	N/A	Milestones are met	1.19 Develop workforce planning capability to predict and plan for the Council's future workforce requirements.	Within existing HR resources Herefordshire Connects	Dependent on Herefordshire Connects roll out	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Resourcing continued.....	N/A	Milestones are met	1.20 Consider and regularly review resourcing elements to support the development of the Public Services Trust (PST).	Change and HR project group Recruitment consultants Within existing HR resources	Interim joint arrangements in place by June 2007 Further joint arrangements re structure and alternative work in place by September 2007	
	N/A	Milestones are met	1.21 Work to support e-recruitment improvements.	Herefordshire Connect Board	Dependent on Connects timelines	
	Portal in place	Portal in place by end March 2008	1.22 Support development of a regional recruitment portal.	Regional Group ICT nominated support	Project plan in place by July 2007, with reviews September/November 2007	Regional Capacity Building funding secured Project manager appointed

Theme and Definition	Performance Indicator(s)	Targets	Action	Resources needed	In year milestones (targets)	Performance Progress
		2007-8 2008-9 2009-10				
<p>2. Leadership <i>Develop the skills, knowledge and ability of leaders to achieve Council objectives through their leadership.</i></p> <p>☑ Cross cutting – contributes to all themes re Council's leadership</p>	<p>All modules in place.</p> <p>Investors in People (IiP) accreditation</p>		2.1 Complete provision for core Herefordshire Manager modules to meet the 'non-negotiables':	Managers to deliver appropriate modules	Link with the relevant CMB/SMT workstreams and Policy and Performance team from end April 2007	All modules in place by end March 2008
	Refreshed 'non-negotiables' in place		2.2 Review the 'non-negotiables'.	Within existing HR resources	As above Clarify requirements from the non-negotiables	Refreshed 'non-negotiables' agreed, allowing sufficient lead-in time for modules to be in place by end March 2008

Theme and Definition	Performance Indicator(s)	Targets			Action	Resources needed	In year milestones (targets)	Performance Progress						
		2007-8	2008-9	2009-10										
		Leadership cont.....	Employee Opinion Survey responses to questions relating to change (Other PIs as arising from relevant Boards' work)	2007-8 - 2% improvement on previous year					2008-9 – 2% improvement on previous year	2009-10 – 2% improvement on previous year	2.3 Assess requirements for learning provision for managers in managing change. (ref. OD theme 6.10 – Council-wide projects).	Within existing resources	As above	Milestones met
				Establish managing change as a 'non-negotiable'					Actions to be agreed with relevant Boards	Learning needs identified and plan to meet needs developed, in line with relevant Board requirements				

Theme and Definition	Performance Indicator(s)	Targets			Resources needed	In year milestones (targets)	Performance Progress
		2007-8	2008-9	2009-10			
Leadership cont.....	Completion of modules by % of managers identified			2.4 Establish numbers of managers requiring each core module.	Within existing HR resources	Numbers obtained from each Directorate (based on 'non-negotiables' as at June 2007) by August 2007	Milestone met
	As above			2.5 Develop delivery plan to address no. of managers requiring specific modules.	Information from directorates	By December 2007	As above
	liP Accreditation Responses to relevant Employee Opinion Survey questions			2.6 Work with Directorates to establish plan to address identified need other than that for core, 'Herefordshire Manager' modules.		Analysis of need arising from SRD training planners presented to Directorates Directorate training plans developed by November 2007	Milestones met

Theme and Definition	Performance Indicator(s)	Targets			Action	Resources needed	In year milestones (targets)	Performance Progress
		2007-8	2008-9	2009-10				
Leadership cont.....	Increased level of agreement year on year, for Employee Opinion Survey questions relating to leadership and management, and organisational development and culture. Investors in People (IiP) accreditation	2007-8 - 2% improvement on previous year 2008-9 – 2% improvement on previous year 2009-10 – 2% improvement on previous year	2.7 Complete rollout of competency assessment across all Directorates. Ensure link with Investors in People and performance management system.	Directorate co-ordinators CMB/SMT Performance Management workstream	Establish baseline for 360 competency level of managers by November 2007	As above		
	As above	As above	2.8 Establish timeline for competency re-assessment, frequency of re-assessment and appropriate level of manager for assessment rollout.	Within existing HR resources	Agree on-going approach to competency assessment, by January 2008	As above		

Theme and Definition	Performance Indicator(s)	Targets	Action	Resources needed	In year milestones (targets)	Performance Progress
		2007-8				
Leadership cont.....	Increased level of agreement year on year, for Employee Opinion Survey questions relating to leadership and management, and organisational development and culture. Investors in People (IiP) accreditation	2007-8 - 2% improvement on previous year 2008-9 – 2% improvement on previous year 2009-10 – 2% improvement on previous year	2.9 Develop plan to address development need arising from baseline established for manager competency and in line with the 'non-negotiables'.	Within existing HR resources	Agree target levels for improvement of manager competency by end March 2008 Action plan in place by end March 2008	As above
	95-100% of inductions completed by new managers/supervisors Investors in People (IiP) accreditation	2007-8 – 80% 2008-9 – 90% 2009-10 – 100%	2.10 Develop and consolidate approach to induction for newly appointed managers/supervisors.	As above	Consult with Directorates June 2007	Milestones met

Theme and Definition	Performance Indicator(s)	Targets			Action	Resources needed	In year milestones (targets)	Performance Progress
		2007-8	2008-9	2009-10				
Leadership cont.....	As above	As above			2.11 Rollout approach. (ref. Resourcing theme, 1.6).	Within existing HR resources	Develop action plan by end August 2007	Milestones met
	Increased level of agreement year on year, for relevant Employee Opinion Survey question Investors in People (IIP) accreditation	2007-8 – 2% improvement on previous year 2008-9 – 2% improvement on previous year 2009-10 – 2% improvement on previous year			2.12 Identify those aspiring to first line manager posts and develop programme specifically to encourage under-represented groups, e.g. employees with a disability, Black/ Minority Ethnic (BME) employees, and female employees.	As above	Individuals identified by September 2007	Milestones met
	As above	As above			2.13 Set up development centre for this group.	As above	Development centre in place by end October 2007.	As above

Theme and Definition	Performance Indicator(s)	Targets 2007-8 2008-9 2009-10	Action	Resources needed	In year milestones (targets)	Performance Progress
Leadership cont.....	Increased level of agreement year on year, for relevant Employee Opinion Survey questions	2007-8 - 2% improvement on previous year 2008-9 – 2% improvement on previous year 2009-10 – 2% improvement on previous year	2.14 Integrate the values into management / leadership competencies.	Within existing HR resources	By end July 2007.	Milestones met

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
3. Pay, Reward and Recognition <i>Establish a total rewards package in order to attract, retain and motivate employees and support organisational goals</i> <input checked="" type="checkbox"/> Cross cutting - Sustainability	Voluntary Leavers as a percentage of employees in post (BVPI 13) Employee Opinion Survey	2007-8 Not exceeding 9% 2008-9 Not exceeding 9% 2009-10 Not exceeding 9% 2007-8 – establish baseline 2008-9 – 2% improvement on previous year in relation to relevant EOS question areas 2009-10 as above	3.1 Develop a pay reward and recognition framework that rewards a performance culture ensuring value for money in service delivery and compliance with equality impact.	Consultancy support Exchequer Services Existing HR resources	Initial draft by December 2007 Consult January 2008 Implement April 2008	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Pay, Reward and Recognition <i>continued</i>	Employee Opinion Survey	2007-08 – establish baseline 2008-09 - 2% improvement on previous year in relation to relevant EOS question areas 2009-10 – as above	3.2 Undertake an equal pay audit and take appropriate action.	Link HR consultancy support	Audit completed July 2007 Review Audit outcomes and roll out action plan September 2007 Draft approach identified February 2008	Specialist software installed and training completed April 2007

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Pay, Reward and Recognition <i>continued</i>	Voluntary Leavers as a percentage of employees in post (BVPI 13) Employee Opinion Survey	2007-08 – Not exceeding 9% 2008-09 – Not exceeding 9% 2009-10 – Not exceeding 9% 2007-08 – establish baseline 2008-09 - 2% improvement on previous year in relation to relevant EOS question areas 2009-10 – as above	3.3 Identify critical posts and develop career frameworks, e.g. Planning, Building Control, ICT, Social Care, Youth Service.	Within existing HR resources	Identify critical posts by July 2007 Plan in place by September 2007	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Pay, Reward and Recognition <i>continued</i>	Employee Opinion Survey	2007-8 – establish baseline 2008-9 – 2% improvement on previous year in relation to relevant questions 2009/10 – as above	3.4 Collate and publicise the existing benefits package.	Within existing HR resources Com-munications Dept	By end of August 2007	
	Voluntary Leavers as a percentage of employees in post (BVPI 13)	2007/08 - Not exceeding 9% 2008/09 - Not exceeding 9% 2009/10 - Not exceeding 9%				

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Pay, Reward and Recognition <i>continued</i>	As above	As above	3.5 Identify value of existing benefit package.	Exchequer Services	September 2007	
	As above	As above	3.6 Introduce a range of flexible benefits, which allows personal choice, to include the identification of options and analysis of costs.	Consultancy support	April 2008	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
4 Employee Well Being <i>Maintain optimum health and well being of our employees within a safe working environment.</i>	BVPI 12 Sickness Absence showing schools attendance separately Voluntary Leavers as a percentage of employees in post (BVPI 13)	2007-8 Not greater than 9 days FTE 2008/09 2009/10 2007/08 - Not exceeding 9% 2008/09 - Not exceeding 9% 2009/10 - Not exceeding 9%	4.1 Implement a rolling programme of health promotion and health improvement initiatives based on regional and national priorities and identified employee needs.	External providers including PCT	Conduct employee survey January 2008	
	Average duration of absence per employee	To be identified in conjunction with service providers	4.2 Review the cost/benefit of service providers including counselling, physiotherapy and occupational health support. Implement agreed improvements.	Service providers Consultancy support	By December 2007, to include the setting of performance targets	
	As above	As above	4.3 Implement agreed improvements.		December 2007	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Employee Well Being <i>continued</i>....	No specific Performance Indicator	2007-8 Complete and monitor	4.4 Review and revise the No Smoking Policy to protect employee's health and comply with forthcoming legislation.	Smoking cessation support	Smoking Cessation presentation arranged for June 2007	Policy agreed by CMB – May 2007
	BVPI 12 Sickness Absence	2007/08 - Not greater than 9 days FTE 2008/09 – 2009/10 – not greater than 7 days FTE	4.5 Review council approach to vocational rehabilitation to facilitate appropriate return to work opportunities through early interventions and effective work programmes.		Revised policy September 2007 Consult October 2007	
	Number of accidents and incidents by category, by directorate.	Improvement targets to be set by end July 07	4.6 Implement year one Safety Management System actions.	SMS Core Team Consultancy support	Improvement targets to be set by end July 07 H&S Committee to monitor quarterly	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Employee Well Being <i>continued</i>....	No specific Performance Indicator	In year milestones completed	4.7 Establishment of corporate health and safety policy.		Chief Executive to sign off June 2007	
	As above	As above	4.8 Roll out risk assessment training to managers.		Pilot training conducted June 2007	
	As above	As above	4.9 Identify and deliver health and safety training for directors.		Training completed September 2007	
	Employee Opinion Survey	2007-8 – establish baseline 2008-9 – 2% improvement on previous year in relation to relevant questions 2009-10 – as above	4.10 Implementation of Dignity and Respect Policy to combat bullying and harassment.			Draft to policy working group by April 2007

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Employee Well Being <i>continued...</i>	As above	As above	4.11 Develop action plan to include actions to raise employee awareness and increase managers' skills.		Implement August 2007	
	Employee Opinion Survey	2007-8 - 2% improvement on previous year 2008-9 – 2% improvement on previous year 2009-10 – 2% improvement on previous year	4.12 Provide support to corporate project in the review of flexible working arrangements.	Herefordshire Connects timescales		

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
5. Skills, Learning and Development <i>To ensure that employees have the right skills, competences and qualifications to fulfil the organisation requirements.</i>	% of staff holding recommended professional qualifications	2007-08 –Social Care & Social Work Learning and Development Plan implemented. To be determined from 2007-8 achievements and requirements	5.1 Identify skills gaps from national skills and qualification requirement for the workforce and make recommendations for addressing the gaps.	From existing HR resources	Social Care & Social Work targets identified in Learning and Development Plan at end of April 2007	Plan completed
<input checked="" type="checkbox"/> Cross cutting – Better Outcomes for Children, Enabling Older People, Thriving Communities	As above	To be determined	5.2 Identify the roles within Herefordshire Council that require an accredited qualification.	From existing HR resources	October 2007	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Skills, Learning and Development <i>Continued...</i>	As above	To be determined	5.3 Identify the appropriate qualifications for role (to include ECDL).	From existing HR resources, IT training support	December 2007	
	As above	To be determined	5.4. Analysis of gaps and workforce plans.	From existing HR resources	Conduct Training Needs Analysis January 2008 Implement action plan to achieve outcomes from March 2008 Formal reviews and progress reports July/Oct/Jan/April	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Skills, Learning and Development <i>Continued...</i>	% of new starters attending induction within 3 months of start date	2007-10 100% attendance at Corporate Induction of those able to attend	5.5. To ensure people entering new roles are effectively inducted.	From existing HR resources	To be monitored in the Learning and Development Team meetings	2004-5 Attendance at Corporate Induction 72%
	% of new starters completing CIS on time	2007-10 98% - 100% Completion of Common Induction Standards for relevant groups of those able to attend	5.6 Implementation of Common Core Standards Induction training.	From existing HR resources	To be monitored in the Learning and Development Team meetings	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Skills, Learning and Development <i>Continued...</i>	% of Directorate Inductions completed % of employees successfully completing their probationary period	2007-10 98% – 100% of those able to attend	5.7 Develop and implement a consistent and sustained intranet based approach to Directorate Inductions.	From existing HR resources, IT Support required	August 07	
	98%- Completion of SRD Planners of those eligible	Not applicable	5.8 Collate and identify service requirements to ensure that Herefordshire Council priorities are included in the learning and development annual programme.	As above	Review and revise training plans August 2007	
	£ investment per employee/FTE	To be determined	5.9 Establish baseline for minimum training and development investment - days per employee/£ per FTE.	As above	Oct 2007	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Skills, Learning and Development <i>Continued...</i>	To be determined	To be determined	5.10 Identify trainee placements in key role shortage areas (Env. Health and Trading Standards, Social Care, Youth Service). To develop a holistic approach to traineeships throughout the Council.	Existing HR resources and inter-agency resources through Children's Workforce strategy	Plan to be agreed by September 2007	
	Level 5	2007-8 – Level 3 2008-9 – Level 4 2009-10 – Level 5	5.11 Continue targeted approach to diversity and equality training for members, managers and employees.	Corporate Diversity Team	Action plan in place to achieve milestones by June 2007 Quarterly reports to HRMT	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Skills, Learning and Development <i>Continued...</i>	% of social workers achieved Full PQ % of Care Workers achieved NVQ No of Practice Learning Days	Adults - 5% increase p.a. Children – 5% increase p.a. 50% (07-08) 60% (08-09) 75% (09-10) Maintained to 2010 15.9 – Children (PAF Indicator) 15.35 – Adults (PAF Indicator)	5.12 Develop and Implement annual social care/work training and development plan (Adult's and Children and Young Peoples Directorates).	Within existing HR resources	April 2007	
	As above	To be determined from outcome of workstream activity	5.13 Complete and implement Children's Workforce Strategy.	Existing HC resources, other multi-agency resources, Health, Police, Voluntary and private sector	May 2007	

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Skills, Learning and Development <i>Continued...</i>	Jan 2008	Jan 2008	5.14 Complete and implement plan to achieve Adult's Integrated Workforce Strategy.	As above	January 2008	
	No. of coaches trained for the Regional Pool	2007-8 – 6 2008-9 – 6 2009-10 – NA	5.15 To sustain Herefordshire Council commitment to Regional Coaching pool. Implement action plan.	Existing HR resources	Action plan in place by April 2007 Recruit and train 6 managers as coaches Regularly review impact from coaching interventions	
	No. of hours of coaching provided for Regional Pool					
	No of managers accessing Coaching Pool	2007-8- 22 2008-9-22				

Theme and Definition	Performance Indicator(s)	Targets 2007-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
<p>6. Organisation development</p> <p><i>Support and enable organisational change and development through and with employees, partners and other agencies to deliver effective services</i></p> <p><input checked="" type="checkbox"/> Cross cutting – Diversity and Equality</p>	<p>Staff Review and Development impacting positively on performance</p> <p>Investors in People (IiP) Accreditation</p> <p>% Staff Review and Development carried out</p>	<p>2007-8</p> <p>2008-9</p> <p>2009-10</p> <p>Achieved 2007 retained 2010</p> <p>100% of those eligible to have annual SRD within corporate timeframe</p>	<p>6.1. Develop approach with Heads of Service to identify how SRDs have impacted positively on performance (links to performance assessment) in order to support achievement of Investors in People accreditation 9 see 6.15).</p>	<p>Heads of Service</p> <p>Policy and Performance Team</p>	<p>Discuss with Directors and Heads of Service – by September 2007.</p> <p>Develop approach by October 2007</p> <p>Implement approach by Jan 2008</p>	<p>Milestones met</p>
	<p>As above</p> <p>% SRDs showing direct links to Service Plane</p>	<p>As above</p>	<p>6.2 Develop and implement a system to quality assure SRDs and to demonstrate the links to Service Plans.</p>	<p>Audit</p>	<p>Develop approach by October 2007</p> <p>Implement approach by Jan 2008</p>	<p>2006 - 07</p> <p>SRD completion rate 94%</p>

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Organisation development <i>continued....</i>	Investors in People accreditation		6.3 Ensure SRD training and development provision is clearly linked to organisational improvement (at organisation and service level) and that the value of the investments is continually reviewed in order to support liP accreditation.	Policy and Performance Team	See Learning and Development for milestones	Milestones met
	Equality Standard Level liP Accreditation	2007-8 Level 3 2008-9 Level 4 2009-10 Level 5 Achieved 2007 Retained 2010	6.4. Review employment and training requirements of Level 3 of the Equality Standard by July.	Corporate Diversity Team (CDT)	Ensure evidence for Level 3 is gathered and filed ready for inspection.	2006 Level 2
	As above		6.5 Implement actions to achieve required level.	Within existing HR resources	Action plan to address any gaps in place by September.	Milestones met

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Organisation development <i>continued....</i>	% increase in no. of employees on language register		6.6 Consider and make recommendations for recognition and incentives for those on language register, and to encourage employees to register.	Corporate Diversity team	Recognition incentives considered by end August 2007 recommendations made by September 2007 Consulted with TUs by end December 2007 Implement recommendations February 2008	Milestones met

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Organisation development <i>continued....</i>	Employee Opinion Survey (EOS) results (Diversity questions)	Improve 2% year on year	6.7. Provide training and development interventions to support the Council's Diversity agenda and improve performance against relevant Corporate Health Best Value Performance Indicators (BVPs) and Employee Opinion Survey e.g. Equality Impact Assessment and targeted training.	Corporate Diversity Team	Review current approach and make recommendations for improvement by end September 2007	Employee Opinion Survey questions 2006 Religion – 78% Race – 76% Gender – 75% Sexual Orientation – 71% Disability – 73% Age – 73% Position – 55% Council takes into account diverse views and needs of service users – 53%

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Organisation development continued....	To be determined	To be determined	<p>6.8 Lead and shape the people elements of the following key Council-wide projects:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Flexible working, <input type="checkbox"/> Herefordshire Connects, (includes change issues) <input type="checkbox"/> Public Services Trust (including issues around shared culture and values). 	<p>Accommodation Board</p> <p>Herefordshire Connects Board</p> <p>HR and Change project team</p>	Actions and milestones to be agreed with relevant Boards	Milestones met
	As above	As above	6.9 Embed into recruitment, induction, management and employee development, the behaviours set out in the Customer Services Strategy.	Customer Services Strategy Board	As above	As above
	Employee Opinion Survey	2% improvement year on year	6.10 Develop action plan to help embed the Council's organisational values.	PR and Employee Communications	Develop actions by July 2007, then implement	As above

Theme and Definition	Performance Indicator(s)	Targets 2007-10 2007-8 2008-9 2009-10	Current Year 2007-8			
			Action	Resources needed	In year milestones (targets)	Performance Progress
Organisation development <i>continued....</i>		50% 55% 60%	6.11 Work to improve the EOS response rate, and ensure % completion rate is supplied on a regular basis for management action).	Within existing HR resources	Annual Survey July 2007 Management Reports October 07 onwards	2006 48.4%
	Investors in People (IIP) accreditation	Achieved 2007 Retained 2010	6.12 Establish further actions with DMTs to help achieve accreditation, and address any identified issues.	Consultant West Mids Quality Centre Assessor	CMB/SMT Review May Further review August 2007	As above
	As above		6.13 Make provision for incorporating actions relating to the IIP standard, in the performance improvement framework.	Head of Policy and Performance	Consult with Head of Service Performance Management Group by July 2007 Incorporate in revised Performance Improvement Framework by January 2008	As above

Pay and Workforce Development Strategy 2007-10 - Ends

RESPONSE TO REVIEW OF THE SUPPORT FOR MUSEUMS AND HERITAGE CENTRES

PORTFOLIO RESPONSIBILITY: ECONOMIC DEVELOPMENT AND COMMUNITY SERVICES

CABINET

21ST JUNE, 2007

Wards Affected

County-wide

Purpose

To respond to the "Review of the Support for Museums and Heritage Centre" outlining acceptance or otherwise of the recommendations made.

Key Decision

This is not a key decision.

Recommendations

THAT

- (a) All Museums in the County be encouraged to complete the Museum Associations Accreditation process;
- (b) the Museum Development Officer MDO project should continue through the support of the Hub and the MLA;
- (c) independent museums in the County be reminded that they can apply for Community Grant Funding;
- (d) the possibility of a partnership insurance scheme for the Herefordshire Museums Forum members should be explored. This could be pursued by the Museum Development Officer on the Forum's behalf;
- (e) a small hiring collection be established to loan objects along the lines of the Reading Corporate Loans scheme. (The recommendation to be pursued with an outline scheme presented to the Cabinet Member);
- (f) a formula be developed to measure Heritage's impact on both tourism and to demonstrate its social and economic impact; and
- (g) prevention measures be undertaken to protect Kington Museum from being struck by lorries reversing to a nearby store.

Reasons

During 2006/07 the Community Services Scrutiny Committee undertook a review of the support for Museums and Heritage Centres. The Committee visited several sites in and outside the County, including Kington Museum, Butchers Row Museum in Ledbury, the Painted Room in Ledbury and the Judges Lodgings in Presteigne – the latter as an out of County comparison. The recommendations mainly focus on the operation of local authority run facilities and the care of collections. A copy of the final Scrutiny report is attached at Appendix 1. This report assesses each of the recommendations in turn and considers whether or not they should be accepted.

Considerations

Consideration should be given to reverting to the title ‘Museum Services’ to identify the service currently known as Heritage Services;

1. As a point of clarity the statements made in point 13 that “the public never referred to the service as Heritage but always as the Museum Service” is not based on evidence, but a sense from the museum professionals in their day to day contact with the public.
2. However, as reflected in point 14 of the report “Heritage Services” is used to reflect the diversity of services run by the “heritage team”. The service is not purely running museums, but conducting work in schools, projects in the community and significantly the care and store of collections which are not displayed purely in museums.
3. This recommendation not to be accepted.

As Museums, Libraries and Archives are grouped together nationally, it should be considered that the three services should be grouped in the same Council directorate to enable easier cross discipline partnership;

4. Museums and Libraries are currently grouped together within the Council structure. Archives are within the Corporate and Customers Services Directorate decided as a realignment of directorate functions in 2005 to specifically link Archives Services with the wider information functions and Modern Records. At a delivery and operation level the services continue to work together. This linkage has been evident in joint projects but also through the recent Cultural Inspection and Regional Commentary.
5. This recommendation not to be accepted.

All Museums in the County should be encouraged to complete the Museum Associations Accreditation process;

6. This recommendation to be agreed, but acknowledging that many of the museums are run by volunteers and may not have the capacity to meet the accreditation requirements.

Hereford Museum and Art Gallery should research and consider the possibility of going to single entity trust status;

7. The points made in the report from 138 to 145 do not advocate trust status. The points highlight that trust status does not create financial viability and could create additional expenditure for example appointment of Chief Executive; key advantage is

to have a unique selling point and specialist collections with a national context – that Hereford Museum and Art Gallery does not have; and there could be a potential loss of accountability.

8. Considering these points made above and that as a local authority there has been considerable success in raising external funding for heritage, the Scrutiny Review does not present a strong enough argument to pursue trust status for Hereford Museum and Art Gallery.
9. This recommendation not to be accepted, but further consideration given to the externalisation of services along with other functions.

If Hereford Museum and Art Gallery does transfer to a single entity trust then any funding agreement should be long-term;

10. In relation to recommendation (d) this recommendation not to be accepted.

It is to be hoped that the MDO (Museum Development Officer) project will continue through the support of the Hub and the MLA (Museums, Libraries and Archives);

11. This recommendation to be accepted.

Independent museums in the County to be reminded that they can apply for Community Regeneration Grant Funding;

12. Museums to be reminded that they can apply only for eligible activities that are supported and evidenced as being required by the whole community.
13. This recommendation to be accepted.

It should be made possible for Museums to apply for longer term Community Regeneration Grant Funding than the one year agreements currently available;

14. The Community Regeneration Grant Funding is to ensure voluntary sector organisations deliver the objectives of both Herefordshire Council and the Herefordshire Partnership. This funding can extend more than one year but will not support revenue funding unless the costs are directly associated with the project.
15. The Arts Team operate a SLA process with groups supported for 2 years. This again relates to meeting specific objectives of the Council and the Partnership concerned with project work. These funds are allocated from within the arts service as most of its services are delivered under a “commissioning process”. For Heritage Service to do this, funds would need to be found within their own budget to “contract” services rather than deliver them themselves.
16. This recommendation not to be accepted.

The possibility of a partnership insurance scheme for the Herefordshire Museums Forum members should be explored. This could be pursued by the Museum Development Officer on the Forum’s behalf;

17. The recommendation to be accepted.

A small hiring collection should be established to loan objects along the lines of the Reading Corporate Loans scheme;

18. The recommendation to be pursued with an outline scheme presented to the Cabinet Member.

A formula should be developed to measure Heritage's impact on both tourism and also to demonstrate its social and economic impact.

19. For this recommendation to be accepted along with outcomes measurements linked to the wider Cultural Services outcomes and changes in DCMS (Department of Culture, Media and Sport) new guidance.

Prevention measures should be taken to protect Kington Museum from being struck by reversing lorries to a nearby store.

20. This recommendation to be presented to the Cabinet Member for Resources.
21. An issue, without a recommendation, raised in point 134 is that donations made at museums were contributed to an income target for the whole service and that donations should be allocated to the museums they are made at. However, there are a range of functions that contribute to the front facing museum, including conservation of objects, running of venues and marketing that add to the whole experience. If the income budget was to be reduced, with donations a small part, then expenditure would also need to be reduced to ensure a balanced budget.

Risk Management

Closure of museums without ongoing revenue support.

Alternative Options

Recommendations reviewed.

Consultees

Cultural Services Manager
Regeneration Co-ordinator (Grants and Programmes)

Appendices

Appendix 1 - Review of the Support of Museums and Heritage Centres

Background Papers

None identified.

Review of the Support for Museums and Heritage Centres

**Report by The Museum
Review Group
December 2006**

**As presented to the Community
Services Scrutiny Committee**

20th December 2006

...Putting people first
...Promoting our county
...Providing for our communities
...Protecting our future

Quality life in a quality county

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Appendices

Appendix 1 – Review Group Scoping Statement and Terms of Reference

Appendix 2 – Museum Association Code of Ethics

Appendix 3 – Definitions of Best Value Performance Indicators 170A, B and C

Appendix 4 – Fact Sheet on Accreditation in the West Midlands

**Appendix 5 – Information on Reading Museums Corporate Membership
Scheme**

Chairman's Foreword

The Museum Review Group would like to thank all those who have helped to contribute to this report. The Group are strongly committed to the museum service in Herefordshire and hope that our review can be used as a template for the future of the service.

The Group found many interesting artefacts from across the county displaying its rich history.

We were particularly impressed by the calibre of volunteers and paid staff who run the County's museums.

We have carefully examined the museum service and hope that our recommendations are accepted in the spirit they are intended.

I would like to take the opportunity to put on record the group's thanks for the work undertaken by Lara Latcham & Craig Goodall, without whom we would be unable to present the report.

Councillor Chris Chappell
Chairman of the Museum Review Group

Introduction

1. The Museum Review Group was established by the Community Services Scrutiny Committee at its meeting on 24 March 2006. This was following a suggestion from a Member of the Committee, at its meeting on 13 June 2006, that a review of museums should take place. At its meeting on 24 March 2006 the Committee appointed Councillor A.C.R. Chappell as Chairman of the Review and Councillor H. Bramer and Councillor J.G.S. Guthrie and Mrs E. Newman (Co-opted Members) to the Review Group. The Committee made a recommendation that a further Councillor Member be appointed to the Review Group but it was not possible to appoint the extra Member so the Review Group resolved to continue with a vacancy.
2. The purpose of the Review was for the Review Group to gain an understanding of the role and purpose of museums and heritage centres in the County run independently and by the local authority and to perform an appraisal of their value in terms of local and regional provision. The Review Group were also tasked to review the collections held in the County including how they were stored and accessed by the public. Finally the Review Group were required to perform an assessment of the support received by Museums.
3. For further details of the Review Group's terms of reference and Membership please see Appendix 1.
4. The Review took place between June and November 2006 over a series of ten meetings and this report summarises the key findings of the Review and its recommendations to the Cabinet Member (Community Services).
5. The Review Group would like to express their thanks to all the people and organisations who have presented evidence during the Review.

6. Methodology

7. In order to complete the Review it was decided that a number of meetings and visits would be required to take place.
8. The Review Group learnt that there were 17 known independent museums in the County in addition to the local authority operated museums. Whilst it would have been desirable to be able to visit all the known museums in the County in the interests of time and efficiency it was decided that the Review Group would visit a cross-section of the known museums in the County in terms of size and status.
9. In addition to these visits the Review Group wanted to put their local findings into a regional and national context. To this end a meeting was arranged with a selection of representatives from strategic heritage organisations.

10. The Review Group's report has been split into several themed areas beginning with three short sections to help put later sections into context.

11. Naming Issues

12. The Review Group discussed the nebulous nature of the term "Heritage". It was felt that the word could mean any number of things, including historic buildings, archives, museums and traditional culture. As such it might not best describe the work done by what is essentially a museum service.

13. The Review Group heard from several members of the Heritage Services team that they frequently receive phone calls asking about permission for changes to listed buildings and that 7 out of 10 telephone callers when greeted with "Heritage Services", hesitate and ask if they are speaking to the museum. The public never referred to the service as 'Heritage', but always as the 'Museum Service' and as the associated services offered by the service

14. However, the term Heritage is used to reflect the diversity of the service, as it does not just run Museums but a host of other services including education and outreach work, care and conservations of collections and special projects such as the creation of exhibitions. However, the Review Group felt that these were still services which it would be reasonable to presume could be offered by a Museum Service.

15. Therefore the Review Group considered that it might be less confusing for users if the service was officially called the 'Museum Service'.

16. The Museums Association Code of Ethics

17. The Review Group came to understand through their work the importance of the Museums Association *Code of Ethics*. This 23-page document sets out in great detail the professional, moral and ethical rules to be followed by museums. In order to be an accredited or recognised museum, and therefore able to apply for Heritage Lottery Grants and many other sources of funding, it is necessary to sign up to the *Code of Ethics*. Herefordshire Council signed up to the *Code of Ethics* in July 2004 and must therefore abide by it or face lack of recognition.

18. Lack of recognition would result in reduced funding opportunities, ejection from networks and the withdrawal of support from regional and national bodies.

19. A copy of the *Code of Ethics* can be found at Appendix 2.

20. Accreditation

21. Museums wishing to be recognised as professional bodies with the opportunity to apply for important funding streams must undertake

accreditation. Formerly this scheme, a form of benchmarking museums and ensuring that they reached certain professional and ethical standards, was referred to as registration.

22. Accreditation is a new and higher standard which reflects advances in knowledge, collections care and the development of the *Code of Ethics*. Applications for accreditation are currently being accepted by Museums, Libraries and Archives (MLA) the body that awards accreditation. Accreditation is being rolled out in phases with most Herefordshire sites applying during 2006. A document explaining the details of the accreditation process is attached at Appendix 3 to this report.

23. The Review Group wish to recommend that all Museums in the County, operated by Herefordshire Council or with those independent museums with the capacity to do so undertake the accreditation process. The process is beneficial for all concerned and potentially creates opportunities for new funding and accepting loans from other museums.

24. Role and Purpose of Museums

25. The Review Group wished to understand the role and purpose of museums and heritage centres run independently from the local authority. The Review Group visited several sites and spoke to the people who ran and staffed them. Those visited represented a cross section of ownership, size and function. It was found useful to compare the findings from the independent museums with those of the Local Authority (LA) museums.

26. In general:

- The museums in the county provide visitors to the County with cultural attractions and contribute to the tourism package.
- Some private museums are contributing to learning objectives through education programmes and holiday activities and workshops.
- Many of the independently run museums are the visible products of historical societies and local history groups, which represent clusters of experts and repositories for objects and came into being to exhibit the collections that had been amassed.
- Some of the independently run museums offer other amenities such as shops and cafes.

27. Concerning the role and purpose of the LA museums and heritage centres

28. Heritage Services is the repository for archaeological finds for the county and bears the duty of care to collect and preserve objects reflecting the history of the county and its different sites reflect its different roles.

29. Hereford Museum aims to put Herefordshire in a national context and to offer “edutainment” for residents and visitors alike whilst the art gallery takes touring as well as local exhibitions and aims to attract visitors from all backgrounds.

30. The Old House attracts more tourists because of its position, in the centre of Hereford, and its activity reflects that in the shape of enhanced trading functions.
31. The Heritage Centres at Ross and Ledbury try to strike a balance between catering for the tourist and offering community led exhibitions to attract residents.
32. The Museum Resource and Learning Centre is currently attracting more researchers but will be developed in its latest phase to be a learning and resource centre primarily for students and residents.
33. Heritage Services also meets the community's needs through the Museum on the Move (MoM), a fully accessible mobile museum which visits schools and groups in the community as well as through loans boxes and ad hoc loans.

34. Site Visits

35. As mentioned in the methodology section of this report the Review Group decided to visit a cross-section of Museums throughout the County. The Museums which the Review Group visited were:

- **Kington Museum**
- **Butchers Row House Museum, Ledbury**
- **The Painted Room, Ledbury**
- **The Judges Lodgings, Presteigne**

36. For the avoidance of doubt the Judges Lodgings in Presteigne is under the auspices of Powys County Council. However, it is still a member of Herefordshire Museums Forum. The Review Group felt that it would be appropriate to visit the Judges Lodgings to see how another local authority supported its Museums.
37. The Review Group learnt many things about the Museums which they visited and their principal findings will be covered in the remainder of this section.
38. Kington Museum opened in 1986 and was extended in 1991 and 2005. The 2005 extension was the product of a successful Heritage Lottery Fund bid. Butchers Row museum has been running since the early 1980s and is funded through the Ledbury Historical Society. Admission is free but Butchers row has a small commercial operation on the ground floor. Admission to the Painted Room was also free, but donations were solicited.
39. The Judges Lodgings charges admission of £4.95 for adults, £4.50 for concessions and £3.95 for children. Significant reductions are offered to family groups. It opened as a museum in 1997 and comes under the

auspices of the museum's trust but its manager is seconded from Powys County Council (PCC).

40. It cost approximately £3,000-3,500 a year to operate Kington Museum. This money is raised through donations and sales. No admission fee was charged, as it was feared that this would substantially reduce visitor numbers. The principal donator was the Town Council which provided £750 a year. The Friends Group provided £50 a year. £200-300 a year was raised through sales and £2,000-3,000 a year was raised by the tearoom. All other monies were raised through the donations box. It was estimated that each year £800 was required for insurance, £1,500 for utilities bills and £200 for fire safety equipment maintenance.
41. The Judges Lodgings cost £80,000 per year to run and a small amount of funding was secured from PCC (£9,500) and less still from the Tourism Department (£6,500), which ran a Tourist Information Centre (TIC) from the site. However this arrangement was unlikely to continue as TICs were being considered for closure in Powys. The shortfall in funding was met through a sizeable shop operation, donations and functions such as weddings and parties as well as the occasional TV or film production company using the site for filming. It was recognised that new ways of generating income always needed to be investigated, but that new activities would require extra staffing generating in turn further cost.
42. The museums in Ledbury and Kington were staffed wholly by volunteers. The Review Group learnt that generally Museums found it difficult to recruit new volunteers. Staff at the Judges Lodgings and the Painted Room were paid, but staffing levels were minimal resulting in little supervision of the exhibits.
43. Visitor figures varied widely: Kington attracts 5,000-6,000 visitors per summer season including visits from schools. Butchers Row Museum attracts 14,000 visitors per summer season. The Painted Room attracts about 4,000 visitors per summer season. The Judges Lodgings, which is also open seasonally, gets about 20,000 visitors a year.
44. Kington Museum's building is owned by Herefordshire Council and leased to the museum on a peppercorn rent. Butchers Row House is owned by the Ledbury Historical Society, the Painted Room is owned by the Town Council, who run it. The Judges Lodgings is on a 25-year lease from PCC to the museum trust.
45. The museum staff at Kington expressed an interest in the creation of an insurance partnership, which could operate across the Museums Forum, but no such partnership in the County exists at present. It is not known if this is possible and the Review Group feel that the feasibility of this should be explored.
46. Kington, Butchers Row and Judges Lodgings are all currently going through the Museums Libraries and Archives (MLA) accreditation process

with the help of the Museum Development Officer (MDO) and for the Herefordshire museums with the assistance of a curatorial advisor from Heritage Services.

47. All sites apart from the Painted Room have received grants of various sizes and with varying impact, but all acknowledge the time required to complete the applications is prohibitive. It was also recognised that most funding required match-funding and this created problems as there was often no other funding available to match that on offer.
48. Both Kington Museum and the Judges Lodgings encourage schools involvement in their museums and Judges Lodgings runs popular education sessions about life below stairs. Butchers Row and the Painted Room allowed school visits but space is prohibitive.
49. There was limited physical access to Butchers Row and the Painted Room.
50. The Kington Museum building had been suffering problems by being struck by reversing lorries making deliveries to a nearby shop. It was estimated that the Museum had been struck on numerous occasions and there were real concerns that serious damage could be caused. The Review Group suggests that the Cabinet Member (Resources) investigates this problem and ensures that preventative measures are taken to prevent serious damage to the building.
51. Kington Museum staff often attended community events like the Kington Show or the Kington Steam Rally and had hosted a stall with displays and artefacts.
52. Some concern was expressed about raising running costs in light of the loss of the voluntary sector grants scheme. The Review Group would like to remind independent Museums that they can now apply for funding from Herefordshire Council as part of Community Grant Aid.
53. Whilst the Review Group were pleased to hear that Community Grant Funding was available to Museums they learnt that all funding awarded this way was for a period of 1 year. Therefore the Review Group would like to recommend that Museums be able to apply for longer term funding agreements to enable greater planning and stability within the sector. Longer term funding agreements would also increase efficiency as Museum staff, who were often volunteers, would be able to spend less time completing time consuming application forms in addition to this Herefordshire Council would have less forms and applications to process and consider as repeat applications would no longer be dealt with on an annual basis.

54. Appraisal of Value

55. The Review Group wished to try to quantify the value of both the LA and independent museums and it was necessary to put Herefordshire in a national context to do this. The Review Group met with representatives from the regional Museums, Libraries and Archives (MLA) and from the West Midlands Hub (Hub), the significance of which will be elaborated on later. This meeting placed activity in Herefordshire within a regional and national perspective.
56. The regional MLA is a branch organisation of the central government MLA, which is based in London. It is a body that monitors trends and formulates policy, fomenting good practice, networking and promoting workforce development. It also has a small grants scheme. The Hub is the product of a Department for Culture, Media and Sport initiative called *Renaissance in the Regions*, which provided central government funding directly to regional museums for the first time. The Renaissance initiative saw each region of the UK establishing a Hub, consisting of a group of four or five museums with collections of national or international importance. These Hubs were given large injections of cash to improve the services they were delivering with the intention of a cascade effect of shared best practice to other museums in their region. Hubs are not funding organisations and their activities are largely inter-Hub, although some partnership projects have been established outside the Hub museums.
57. The Review Group noted that nationally Museums, Libraries and Archives are grouped together and their strategy and policy developed and monitored by the same organisation. The Review Group learned that although Herefordshire Council's Archives was at one time in the same division as Heritage Services, it was now in a separate directorate. Libraries had entered the same directorate as Heritage Services at the time that Archives had been moved. The Review Group felt that it might be helpful to the three services to be united in the same division due to the clear Heritage links between archives and museums.
58. Heritage Services was placed in a regional context by Michael Cooke of Museums Libraries and Archives West Midlands (MLAWM) and the West Midlands Hub represented by Jane Arthur of the lead museum Birmingham Museum and Art Gallery and Carol Bowsher the Chief Executive Officer of the Hub.
59. Although the Hub does not fund other museums directly it part finances the Museum Development Officer (MDO) scheme and offers free training for museum staff which is disseminated through MDOs and the Hub workforce development department.
60. Museum staff in Herefordshire have received (to date) 68 training places for free through the Hub and some of their training has been delivered at Heritage Services sites. Each training place carries a cost implication to the Hub of £200. Training has included: conservation, climate control,

integrated pest management, MAP management training and many other continued professional development programmes.

61. The Hub acknowledges Heritage Services and the Herefordshire Museums Forum as significant organisations within the West Midlands heritage industry and museums network.
62. The MLA also acknowledges Heritage Services and the Herefordshire Museums Forum as being a significantly active participant in the West Midlands museums community. The Forum is also linked to the Herefordshire Cultural Consortium.
63. The Review Group were pleased to hear this and hope that it continues in the future.
64. The MLA reported that Heritage Services had applied for and received 20-25% of all funding available from this body and that this represented more than its fair share of available funds, but that their proactive approach to applying for funding had produced this high level of success. The Review Group were very pleased to hear this and considered that all opportunities for the training of museum staff in the County should be taken up in the future.
65. The Review Group heard evidence about how Hereford ranked against other museums in terms of Best Value Performance Indicators (BVPI), which all LA museums report on. Museums report on BVPIs 170 a, b and c. Definitions of these as well as targets set for a three-year period can be found at Appendix 4. It should be noted that although these BVPIs are expressed as per 1000 of the population, this does not mean that all visitors are local, it is merely the form of the BVPI.
66. The Review Group learnt that BVPI 170a revealed, in terms of usages per 1000 of population, Hereford ranks 78th out of 178 Authorities with 764 usages per 1000 of the population in 2005/06. The raw data for this BVPI was 137,220 in total usages including Website uses and outreach.
67. The Review Group found through BVPI 170b that Hereford ranked 64th out of 178 local authority museums in the number of visits per 1000 of population. The top museums were predictably in cities like London and Brighton. 693 people per 1000 of the population visited Herefordshire Council Museums in 2005-2006. The raw data is 122,224 visitors to Heritage Services sites for that period.
68. BVPI 170c indicated school use of the service which finds Herefordshire ranked 56th out of 178 with 6,673 school uses during the 2005/6 period.
69. Other available information informed the Review Group that the cost per head of visitor in Herefordshire is £4.22, which represents excellent value for money. The comparisons with other authorities in the West Midlands area had been made in confidence but represented a significantly higher

value for money with bigger budgets failing to attract higher numbers of visitors and cost per head ranging from £5.70 to £15.01.

70. The Review Group gathered some evidence from the State of Herefordshire report which collects data from the Best Value General Survey. The 2006 report shows that 19% of people use 'museums and galleries once every six months' which represented a fall from a similar study in 2003.
71. The Review Group discovered that a survey recently produced by Herefordshire Voice shows that more than half (58%) use museums and galleries now as often as they did three years ago, however, around a quarter use them less often. A quarter of respondents felt that improvements to the variety of exhibitions was needed. Almost two thirds (62%) of respondents considered museums and galleries to be fairly or very important compared to just over one third (34%) who consider them of little or no use.
72. The Review Group learnt that satisfaction amongst visitors to Heritage Services sites was found to be high with both displays and staff. The same was found to be true of Educational services delivered by Heritage Services.
73. The Review Group were informed that although at present there is no formula to calculate the impact of museums and heritage or to demonstrate its social and economic impact there were a number of studies currently on going.
74. Firstly the Review Group heard that, Bolton Metropolitan Borough Council who commissioned Jura Consultants to examine the economic value of museums, libraries and archives through a process of contingent valuation.
75. This methodology measures the economic impact of a services through the individual's willingness to pay for it, whether or not they are regular users. The British Library used the same approach in 2003 to asses its value to the UK economy. A summary is given in the Museums Journal for November 2006, but this does not include the data below which was made available at a recent Museums Association Conference.

	Actual cost of operation per month	Value placed by users (per month)	Value placed by non-users (per month)
Museum	£1.16	£2.77	£1.14
Library	£3.33	£3.33	£1.00
Archives	£0.17	£1.83	£0.68
TOTAL	£4.66	£7.93	£2.82

76. The consultants expressed some surprise that the value of museums and archives was set far higher by users than the actual cost of the service but that users seemed to know how much the library service cost to run.
77. In the case of museums, users value them at more than double the actual cost of delivering the service and non users at approximately the cost that the service costs to deliver. The value placed on archives was even higher, but the value placed on libraries by non-users was less than a third of the actual cost of the service.
78. As those people who used the services valued Museums so highly and even non-users were valuing the service at close to its cost price the Review Group felt that this showed how highly regarded the work of Museums was considered by the public.
79. Secondly, Shropshire County Council have commissioned Morris Hargreaves McIntyre Consultants to develop a tool to measure the value of culture (Culture in Shropshire comprises museums, arts, archives, libraries, archaeology and countryside). This tool is able to take input from a wide range and style of evaluation methods aimed at the diverse audiences and styles of service and events and to allocate them via a sophisticated database system.
80. Shropshire are currently refining this tool and will be looking for benchmarking partners to trial the next stage of development. Heritage Services has expressed an interest in undertaking benchmarking on this.
81. The Review Group look forward to hearing that Herefordshire has been chosen as a benchmarking partner to continue this important study.

82. Relationship between independent and LA museums and the Council

83. The Review Group was informed that the County of Herefordshire was served by an independent body called the Herefordshire Museums Forum. It was also told that a Museum Development Officer (MDO) existed with the remit to support and advise museums in the county. As mentioned earlier the post is funded by WMMLA and the Hub and has recently been upgraded to a full time position.
84. The MDO is the intermediary for the Hub workforce development training, Renaissance at Work (RAW) as discussed above. In the financial year 2005/6 Herefordshire received £30,441 from the West Midlands Hub through the MDO post. This money not only pays the MDO's salary but also funds training and finances small grants. Similar levels of funding have been agreed to the end of the financial year 2007/8.
85. The MDO gives 400 hours of time to independent museums per year and in addition coordinates 250+ hours of Heritage Services staff time to support the museums. In the financial year 2005/6 the MDO made 62 site visits.

86. Since the MDO has been administering grants (2004) 7 grants have been awarded totalling £5,329. Grants are available up to £4,000. Independent museums in the county have been slow to take advantage of the grants, but the fund is starting to take off now.

87. The Review Group are pleased to report that feedback from private museums shows a high level of satisfaction with the MDO project and the Review Group wish this work to continue.

88. Herefordshire Museums Forum

89. Private museums in the County are able to join the Herefordshire Museums Forum, an independent body used as a networking and knowledge-sharing organisation. The Forum has 17 members and is supported administratively by the MDO.

90. The Forum is seen by its members as a support group that offers networking opportunities, but that it in no way regulates or represents the museums that join it. The Review Group learnt that it could be difficult to get the Forum to consider policies covering all museums and joint marketing strategies. The Forum members valued their independence and were wary of schemes that they perceived to undermine this independence.

91. The MDO provides professional advice and support and coordinates curatorial advisors from Heritage Services for Museums Forum members as well as administering a small grants scheme.

92. Review of Collections and Assets

93. The Review Group set out to review what the county's museums owned, how they were cared for and how these objects might generate income for the sector.

94. The Review Group learnt that collections throughout the county are rich, varied and invaluable as objects for learning and enjoyment. The Review Group were shown Hoovers, a Purple Heart military medal and many more objects that help to tell the story of peoples' lives in the county.

95. The collections are being cared for well, especially in view of the excellent training being offered for free from the Hub through the MDO. Training from the Hub as well as the need to apply for Accreditation has led to an improvement in standards of care and awareness of the needs of objects.

96. The collections held by Heritage Services are being cared for in exemplary fashion in the state-of-the-art resource centre at Friar Street, which is amongst only a handful of such facilities in the world.

97. The Review Group were presented with copies of the Museums Association *Code of Ethics* and as a result learned that Museum collections should not be considered as assets as they have no financial value in themselves, their value lying in the evidence they give about the past. Museums preserve objects in order to meet with their duty to offer cultural entitlement to their communities. Heritage Services and all registered museums work under certain constraints concerning the loaning of objects and must comply with the Museums Association *Code of Ethics*.

98. As part of meeting the need to offer cultural entitlement to the local community objects can be accessed by the public at predetermined museums and by appointment at the resource centre. Objects also go out into the community through Museum on the Move, loan boxes, reminiscence boxes and ad hoc loans. The Review Group feel that it is important to note that Heritage Services currently generates no significant income from this service.

99. Detailed consideration of loans: current situation and what might be possible considering the activities of other museum services

100. The Review Group met with the Community Heritage Officer and heard about the current situation concerning loan boxes and ad hoc loans. The constraints concerning such loans and the cost of setting them up were all explained.

101. Heritage Services is responsible for a number of activities including: loans, the handling collection, Reminiscence, Discovery and Cultural Roots boxes.

102. Reminiscence boxes were aimed at older people and often used by community groups and organisations, for example residential homes and day care centres, for general activities and talking points or more seriously to aid the treatment of dementia patients. Items in Reminiscence boxes could be handled, as there was no requirement to preserve the objects contained in them for the future. 100 loans of Reminiscence boxes have been made between January 2005 and August 2006. The possibility of loans is advertised through fliers in the museum and on the Website and requests are received by front of house staff in the Museum and are then passed on to the specific team.

103. Discovery boxes were similar to Reminiscence boxes but aimed at post-16 year old people who are not in formal education. The Discovery boxes were sponsored by the Clore Duffield foundation for the sum of £6,000. This was one finite project with a limited time span to create the boxes.

104. A charge of £5 per box was required for each loan although there was no restriction on the length of time an organisation could keep the box for.

105. The Review Group learnt that there was a high cost to Reminiscence, Discovery and Cultural Roots boxes. For example for the Cultural Roots boxes to be produced the following costs were necessary:

£200 for Plastazote foam
£365 for 20 boxes
£400 for a technician to cut foam and pack boxes
£2200 for artefacts
£3165 in total

106. As well as developing the different type of themed boxes Heritage Services does develop other new resources, for example: Stonebow Unit Project. Here a work experience student produced a piece of work which formed a collection of photographs of Herefordshire festivals throughout the year as a resource which could be used to help jog the memory or provoke thought by patients in the Stonebow Unit at Hereford Hospital. This relatively simple project which involved using resources from local collections took a work experience student one week to produce.

107. Heritage Services had made 16 ad hoc loans in the last year. These loans were to individuals, schools, organisations and community groups and were arranged on request. No charge was made for these loans as it is felt that the community owns the collections and should not be charged to use them.

108. In order to action a loan request there are a number of preparation steps which needed to be undertaken which can take up a lot of staff time. For example, a recent proposed display at Hereford Hospital required the following steps to be undertaken and completed satisfactorily before any loan could be made: the environmental conditions at the site were assessed along with the display space, it was necessary to arrange insurance and address ownership issues of the items, and finally the loan would need to be monitored whilst it was on loan to ensure that the necessary conditions were being adhered to. These factors needed to be observed to the highest standards if a loan from the permanent collection was being made. This is because Heritage Services' primary duty to the permanent collection is to protect and preserve the objects forever or for as long as possible.

109. When completing assessments for loans it is necessary for Museums Staff to take into account the 10 agents of deterioration:

1. Fire
2. Flood
3. Theft
4. Biological decay – e.g. insects
5. Chemical decay – e.g. rust
6. Physical damage
7. Incorrect humidity
8. Incorrect temperature

9. Incorrect lighting
10. Curatorial neglect
110. It would be necessary for any organisation to satisfy the above conditions in order for a loan from the permanent collection to be made. This assessment could take a member of staff a few days to complete the checks to the required standards.
111. In order to loan an object from the permanent collection it would be necessary for the following steps to be completed:
1. Visit to loan venue
 2. Environmental check of venue
 3. Insurance – e.g. Judges Coach £350 for 6 weeks
 4. Prepare artefacts for loan: condition report, conservation, re-framing
 5. Pack artefacts ready for transportation
 6. Deliver and mount artefacts
 7. Spot checks throughout duration of loan
 8. Collection of artefacts
 9. Condition check of artefacts
 10. Return artefacts to store
112. The Review Group were informed that many organisations loaned objects on a regular basis, even organisations which were not Museums. For example, the Leicestershire Open Museum was set up entirely as a loans based organisation. Similarly the Scottish Cultural Resource Association Network (SCRAN) licences images of artworks for use by organisations and individuals. SCRAN charges by the image. A similar venture for the West Midlands had been planned by Renaissance West Midlands but did not materialise. Reading Museums Loans Service charged £250 per loans box in addition to all other associated costs.
113. The Review Group learnt that if Herefordshire Council were to create a dedicated loans service then it would be necessary to establish an initial capital investment programme and two new full-time staff members. For example, in order to establish a dedicated loans service it was estimated that the following resources would be required:
- Two full-time members of staff (£42,500)
 - Suitable show cases to loan to venues (£6,140)
 - Graphic Display Panels (£8,000)
 - Plinths, stands and blocks for display purposes (£300)
 - Exhibition preparation facilities and storage.
 - Transportation in order to deliver and collect loans. Lease Van (£3,000 pa)
114. Overall it was estimated that approximately £100,000 would be required to establish the loans service in its first year and then £57,000 pa after that. As a contrast the Review Group learnt that the Museum on the Move exhibitions cost £25,000 pa.

115. The Review Group noted the costs necessary to create and operate a dedicated loans service were unlikely to be recouped by fees in loaning objects.
116. The Review Group investigated what other museums do to generate income from loaning collections. This included finding out whether or not any Museums operated a separate 'hiring collection'.
117. Preliminary research on the websites of numerous Museums worldwide revealed no evidence of any museum operating a separate hiring collection. Some evidence was uncovered with regard to how other museums loan/hire items from their collections.
118. For example, a company in Cheshire, which was not a Museum, specialised in loaning schools resources which were focused on historical areas of the school curriculum, principally the Romans and Aztecs. This same company also made corporate loans. However, loans to private individuals were not available.
119. Reading Museum operated a corporate membership scheme. In return members were able to use the Museum for one corporate event per year and were able to borrow certain specified items. The items were available to loan for one year and came in their own self-contained display cases after conservation assessments at a small charge. It was important to note that only 'durable' items were available to loan. See Appendix 5 for further information on Reading's Corporate Membership scheme.
120. The Review Group learned that the National Maritime Museum have a selection of paintings which have been restored and protected which can be loaned out in self contained environmental frames. A loan costs £3000 per annum and the service is very popular. One of the conditions of the loan is that the painting has to be made available to view by a member of the public on request.
121. The National Army Museum had stopped loaning objects due to unacceptable level of loss and damage. Safety of objects is high in the Museum Code of Ethics.
122. In Shropshire it was known that a Dentist with a shop front borrows items from the County Museum Service to display in the window. This is not charged for as it is considered as part of Shropshire's community outreach programme.
123. Outreach work takes place in Herefordshire. For example, Artic Circle based at Rotherwas borrowed some items originating from the munitions factory, which had been based at Rotherwas during the war and displayed them on their premises.

124. The Review Group considered the evidence and felt that it would be good for Hereford Museum to establish a corporate membership scheme. It was thought worthwhile identifying a few items, which were capable of being loaned which could then be loaned to corporate members in return for a fee. If it was the case that benefits in kind could be provided to the Museum Service then the fee for loan could be waived.
125. A situation which could aid this was that from 29 September 2006 all Heritage Services artefacts can be insured away from Herefordshire Council premises provided the locations meet a range of criteria for security and adequate environment. Previously this had not been the case which meant that a person or organisation loaning an artefact would have had to pick up their own bill for insurance which in the case of smaller organisations could be the difference between being able to afford the loan or not.
126. It was noted that items from the permanent collection could be loaned provided all the necessary checks were taken and the item would be displayed in a public area. (See procedure outlined above).
127. The Review Group felt that Corporate Membership was a good avenue to pursue as it would provide links with local businesses, which could provide mutually beneficial relationships as well as income from the potential loaning of objects. It was noted that Corporate Members could later become Trustees if the Museum service chose to take that path.
128. The Review Group felt that there should be different levels of corporate membership available, similar to what is available at the Courtyard Centre for the Arts, so that no organisation was priced out of becoming a Member.

129. Generating income from donations

130. The Review Group wanted to consider ways in which Museums could generate additional income to support their activities.
131. One avenue which the Review Group investigated was the possibility of museums being able to sell goods which had been donated to them but, for whatever appropriate reason, were not able to keep.
132. The Review Group learnt that generating income from items offered to a museum would be considered as trading in cultural property. Whilst the proposal put forward by the Review Group to generate income from unwanted donations prior to accessioning is so unusual that it is not mentioned specifically in any guidance there are a number of clauses in the *Code of Ethics* which taken together show that this activity would not be viewed as ethical. The following passages are quoted directly from the Museum Association *Code of Ethics*:

2.15 Avoid all activities that could be construed as trading or dealing in cultural property unless authorised in advance by the governing body.

Refuse to deal in any material covered by the museum's acquisition policy.

5.18 Refuse tactfully but firmly to accept a gift or bequest if items offered do not meet criteria set out in the museum's collecting policy. Explain why the museum is unable to accept an offer of a gift or bequest.

5.19 Refuse in writing any unwanted or unsolicited gifts even if the museum has been advised that they need not be returned. Consider informing intending benefactors, or their representatives, about other registered museums, archives or other public institutions that may be interested in the unwanted items.

6.13 Refuse to undertake disposal principally for financial reasons (either to raise income or decrease expenditure)

133. Whilst the Review Group were disappointed that this avenue of creating additional revenue for Museums was unlikely they appreciated the spirit of the *Code of Ethics* as a protection mechanism for heritage around the world.

134. The Review Group were disappointed to discover that any donations made at a Herefordshire Council Museum were counted as part of the services budget as an income generation target. The Review Group felt that this practice was unfair and that donations made at a Museum should no longer be counted as an income generation target. Any donations made at an individual Museum should be retained by the venue at which the donation was made rather as additional income.

135. Finding a sustainable future for Museums

136. The Review Group was concerned about the sustainability of LA museums considering their non-statutory status and their vulnerability in the face of cost-saving exercises. It was felt that considering the important work that Heritage Services is undertaking it would be wise to plan a sustainable future.

137. The Review Group investigated possible strategies for survival and a debate took place about the advisedness of Heritage Services moving to trust status.

138. It was discovered that Adrian Babbidge an independent consultant working for the Museum Association had investigated every museum that had transferred to Trust Status in the UK and concluded that it was not a way to save money. Although it is important to note that there have been some success stories.

139. For example, Scarborough Museum is in the process of transferring to Trust Status and has managed to secure a valuable long term funding deal

from the local Council. Scarborough Museum had recently advertised for a Chief Executive with a salary of £48,000 pa.

140. It was noted that Scarborough Museum had a unique selling point. Its Museums are of specific scientific interest and dinosaur footprints can be viewed in the area. The Museum also has a high-powered Trustee – Lord Darwent, who is thought to have high-level business contacts. Two years of planning had been necessary before the conversion could take place.
141. It was also to be noted that many of the museums seeking trust status had collections of national importance or a unique selling point. Advice from Council Officers highlighted this, pointing out that successful trust museums all held collections of national significance or which were unique to a specialism.
142. In addition to Scarborough it was noted that the Horniman Museum in London had moved to Trust Status and transformed its African Collections into an internationally renowned collection with excellent learning and visitor facilities. The Review Group felt that this Museum had very strong connections with its local population and a highly specialist collection.
143. In Ludlow, an active Friends Organisation had established a fundraising trust, which had raised £250,000 in donations from local contacts. It was noted that this was similar to the corporate membership idea discussed earlier.
144. In contrast there were unconfirmed reports circulating that Stroud's transfer to Trust Status had not provided any benefits. Trust Status had seen budget reductions and the loss of accountability.
145. Additionally, Quarry Bank Mill, Wilmslow, Cheshire had established itself as an independent trust and saw its budget gradually dwindle until the Trust had to hand over its assets to the National Trust.
146. The Review Group thought that Trusts would still have more access to additional funding streams than Local Authorities, even though Heritage Services has an excellent record of raising external funding. The long term funding deal awarded to Scarborough Museum Trust was a good and stable way of funding a Museum which had transferred to Trust Status. Whilst it was appreciated that it could also be an uncertain path to follow it was noted that budget cuts could be just as likely within a Local Authority environment as Museums were a non-statutory service.
147. The Review Group felt that it the Cabinet Member (Community Services) should consider developing Hereford Museum Service as a single-entity. It was felt it would be better to limit the conversion of trust status to this single entity as it would be a more focussed organisation with clearer boundaries that would be easy to manage. Conversion to trust status would also allow the creation of more income generation practices, for example a cafe, to be implemented, even if they were away from the

main museum premises. This would not be possible by a local authority operated museum.

148. It is also felt that Trust status may reduce the vulnerability of the local authority museum to budget cuts. The Review Group feels that the valuable work completed by the Heritage Services team is in danger of being put under financial pressure due its status as a non-statutory service. Therefore a move to trust status with a long term funding agreement similar to that awarded in Scarborough would protect this valuable service for period of time.

149. If this recommendation is accepted then the Review Group felt that the Museum Development Officer should be encourage independent museums to develop links with the new Trust so successful partnership arrangements can be developed.

150. Conclusions

151. The Review Group conclude that Museums in the County looking after a rich variety of objects for people to enjoy.

152. The Accreditation process is raising the standards of the County's Museums and seeing the wide spread implementation of the Museum Association Code of Ethics. Herefordshire Museums Forum is providing a fantastic network for Museum staff to share knowledge and expertise. This is combined with the high number of regional training places which have been received by Museum staff in Herefordshire which is helping to create a highly skilled workforce to deliver Heritage to Herefordshire.

153. Museums in the County are a doing an excellent job providing educational and cultural facilities to the people of Herefordshire as well as providing many varied facilities for tourists to visit which are highly valued.

154. Most Museums are in need of additional funding. To aid income generation Heritage Services should establish a Corporate Membership scheme and donations should no longer be counted as an income generation target. To aid the financing of independent Museums it should be made possible to apply for long term Community Grant Funding.

155. It is suggested that the Local Authority Heritage Services transfer to Trust Status with a long term funding agreement and that independent museums in the County complete Accreditation and apply for Herefordshire Council's Community Grant Funding.

Recommendations

That:

- (a) consideration should be given to reverting to the title 'Museum Services' to identify the service currently known as Heritage Services;**
 - (b) as Museums, Libraries and Archives are grouped together nationally, it should be considered that the three services should be grouped in the same Herefordshire Council division to enable easier cross discipline partnership;**
 - (c) all Herefordshire Council Museums and those independent Museums with the capacity to do so in the County should be encouraged to complete the Museum Associations Accreditation process;**
 - (d) Hereford Heritage Services should research and consider the possibility of converting to single entity trust status;**
 - (e) if Hereford Heritage Services does convert to a single entity trust then any funding agreement with Herefordshire Council should be long-term;**
 - (f) it is to be hoped that the Museum Development Officer project will continue through the support of the West Midlands Hub and Museums, Libraries and Archives;**
 - (g) independent museums in the County should be reminded that they can apply for Community Grant Funding;**
 - (h) it should be made possible for Museums to apply for longer term Community Grant Funding than the one year agreements currently available;**
 - (i) the possibility of a partnership insurance scheme for the Herefordshire Museums Forum members should be explored. This could be pursued by the Museum Development Officer on the Forum's behalf;**
 - (j) a small hiring collection should be established to loan objects along the lines of the Reading Corporate Loans scheme;**
 - (k) a formula should be developed to measure Heritage's impact on both tourism and also to demonstrate its social and economic impact;**
- and;**
- (l) preventative measures should be taken to protect Kington Museum from being struck by reversing lorries to a nearby store.**

Appendix 1

REVIEW:	Support for Independent Museums and Heritage Centres	
Committee:	Community Services Scrutiny Committee	Chair: Councillor Chappell
Lead support officer:	Lara Latcham, Visitor Services Officer	

SCOPING

Terms of Reference

This review covers:

An understanding of the role and purpose of museums and heritage centre run independently from the local authority

An appraisal of their value in terms of local and regional provision

Their context in connection with local authority run heritage centres and the City Museum

Review of collections and assets held by the local authority and independent museums, including how objects are stored and accessed by the public

An assessment of what support independent museums and heritage centres receive and additional support required

Desired outcomes

- To gain an understanding of the role of independent museums and heritage centres, including how they are run, what purpose they service for the wider community and their relation to similarly run local authority facilities
- Recommend what additional, new support should be given to the independent museum and heritage centres and where that support should come from
- Look at increased ways of linking local authority and independent facilities together to best use resources
- Feed findings into the Heritage Strategy being produced for the County

Key questions

- What is the activity and purpose of the independent museums and heritage centres e.g. operating venues, holding collections, run education programmes
- Is there a market for museums and heritage centres, and what are the audience figures and impact on tourism and community development
- How are independent museums and heritage centres run e.g. volunteers, trusts status, part of a wider organisation, are facilities free, how is income raised
- What current support is given, in kind and in cash
- What are the links with Herefordshire Heritage Services and at a regional level Museums, Libraries and Archives
- Are there ways the independent museums and heritage centres could work together to gain more
- What are the areas of need to develop

Corporate Plan Priorities

To sustain vibrant and prosperous communities, by providing more efficient, effective and customer-focused services for communities, including clean streets

Timetable (some of the facilities are only open seasonally and will influence the time table)

<i>Activity</i>	<i>Timescale</i>
Agree approach, programme of consultation/research/provisional witnesses/dates	July 06
Collect current available data	July to August 06
Collect outstanding data	September 06
Analysis of data	October 06
Final confirmation of interviews of witnesses	September 06
Carry out programme of interviews	October 06
Agree programme of site visits	July 06
Undertake site visits as appropriate	August and September 06

Update to Community Services Scrutiny Committee	October 06
Final analysis of data and witness evidence	November 06
Prepare options/recommendations	December 06
Present Final report to Community Services Scrutiny Committee	January 07
Present options/recommendations to Cabinet	February 07
Cabinet response	March 07
Implementation of agreed recommendations	April 07 onwards
Members	Support Officers
Councillor Chappell (Chairman) Councillor Bramer Councillor Guthrie Mrs Newman	Lara Latcham – Visitor Services Officer Craig Goodall – Committee Officer (Scrutiny)

museumsassociation

code of ethics for museums

ethical principles for all who work for
or govern museums in the uk

*Museums enable people to explore collections
for inspiration, learning and enjoyment.*

*They are institutions that collect, safeguard and
make accessible artefacts and specimens,
which they hold in trust for society.*

1

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codeofethicsformuseums

hold collections in trust on behalf of society	9
focus on public service	9
encourage people to explore collections for inspiration, learning and enjoyment	11
consult and involve communities, users and supporters	12
acquire items honestly and responsibly	13
safeguard the long-term public interest in the collections	15
recognise the interests of people who made, used, owned, collected or gave items in the collections	16
support the protection of natural and human environments	18
research, share and interpret information related to collections, reflecting diverse views	18
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Why does the museum sector need a code of ethics? To that question, probably the best answer is: to be helpful. Think of this code as a philosophical map that identifies important landmarks, preferred routes and difficult terrain; everyone who is involved in any aspect of the management and development of museums can use it as a navigational aid.

Ethics is the systematic analysis of questions of 'right' and 'wrong'. Such considerations are inevitably based on values that change over time and vary between cultures. Professional ethics, by definition, should serve the public interest by encouraging behaviour that benefits the communities served by a profession and prohibiting activities that may cause harm to any of those communities. Practitioners who place the public good before their own interest are acting ethically, and are therefore behaving professionally. So, a code of museum ethics represents and articulates a set of consensual values and standards of behaviour that are agreed at a particular time to define a relationship of trust between the museum and the communities it serves. While the interaction of museums and society is necessarily varied, complex, many-layered and dynamic, it must always be based on mutual respect if it is to remain healthy and beneficial.

This code replaces the previously separate Codes for Museum Governing Bodies and People Who Work in Museums. It is, however, much more than a fusion of these codes, and represents an ethical analysis reflecting the evolved social context of museums. It is structured around ten core values that society can expect museums to uphold. These, in turn, grew out of the definition of a museum that the Museums Association adopted in 1998. This identifies 'inspiration, learning and enjoyment' as central to the experience offered by museums to their users, and the special responsibility of museums to 'collect, safeguard and make accessible artefacts and specimens which they hold in trust for society'. Perhaps the ten core values of this code that derive from this definition would not look amiss reiterated near the entrance to any public museum in the UK, prefaced by the museum's own statement of purpose.

No matter how carefully considered and worded, a code is only one aspect of professional ethics. Museum ethics go well beyond the formulaic. Museum ethics are about understanding the many forms of interaction between museums and society, and understanding how that relationship is mediated through actions and attitudes at both individual and institutional levels. These will be apparent through a kind of ethical body language expressed by the museum around issues of openness, stewardship, honesty, humility and inclusivity. There is literally no aspect of the work of the museum that is free from ethical value.

I am greatly indebted to the many colleagues from every kind of museum, who took the time and trouble to comment on the consultative draft of this code. The new Code of Ethics for Museums could not have been created without the unstinting efforts of Christine Johnstone, Maurice Davies and above all, Ratan Vaswani, who laboured so patiently and skilfully in writing its many iterations. The Ethics Committee also played an indispensable role as a critical sounding-board in the code's development.

This Code of Ethics for Museums is not merely the result of intense activity over the past two-and-a-half years. It stands on the shoulders of twenty-five years of ethical development in the UK and overseas museum sectors. I hope that it will be useful for a time. While some of the landmarks it describes may be durable, this code, like any map, will itself be superseded as the cultural landscape – the social context of museums – changes over time.

Tristram Besterman
Convener,
Museums Association Ethics Committee, 1994-2001.

Production of the Code of Ethics for Museums was overseen by the Museums Association Ethics Committee, convened by Tristram Besterman. His successor is Vanessa Trevelyan, who was appointed convener in October 2001.

For advice on ethical matters or information on ethics training please contact the Museums Association at the address shown on page 2 of this booklet.

How to use this code

You will need to exercise judgement in applying the principles set out in the Code of Ethics for Museums. A number of sometimes competing considerations may need to be balanced. An ethical decision does not usually depend on a choice between 'right' and 'wrong' but between competing 'rights'. There is nothing wrong, for example, with a decision to 'accept financial support from commercial organisations...' (10.6). However, it would be unethical to accept such support if it is offered only on condition that the museum advertise a company's products on exhibit labels. Guidance on interpretation and application of the code can be sought from the Museums Association, which may refer matters to its Ethics Committee for a definitive judgement.

Exercising judgement is required not only in assessing alternative courses of action but also in determining the extent of your responsibility as an individual. All those who work for or govern museums should endeavour, in their particular role, as far as it is within their power to do so, to ensure that the principles of the Code of Ethics for Museums are upheld in their institution or practice. Sometimes responsibilities lie very directly with individuals. It is, for example, the particular responsibility of event organisers to refer to 6.5 and to ensure that they 'Pay due regard to safeguarding collections and the public's right of access whenever museum premises are used for functions.'

However, all who work for museums do so on behalf of the museum's governing body, which has ultimate responsibility for policy and decisions affecting the governance of the museum. Responsibility may not therefore lie solely with an individual, but that individual should take responsibility for encouraging and assisting colleagues and the governing body to act ethically. For example, members of staff whose duties do not include organising functions should discuss with senior staff any concerns they may have over restrictions on public access when functions are held. Senior staff should give due consideration to legitimate concerns and assist the governing body to address them in setting ethically sound policy in this and all other key areas.

Members of governing bodies and policy

Members of governing bodies should be familiar with the code in its entirety. Their attention is drawn in particular to the following sections and points in the code: section 1; section 2.0 to 2.12; section 5.0 and 5.1; section 6.0 to 6.2, 6.9 to 6.14; and section 10.

The code should be referred to when defining the mission of a museum and in any policy development.

Ethical and legal obligations

The Code of Ethics for Museums defines standards that are often higher than those required by law. It is, however, self-evident that the code cannot override the legal obligations and rights of those who work in or for museums, including those arising from any contractual relationship there may be with an employer, or client. The code represents the consensus view of members of the Museums Association, which includes both those who work in museums and the institutions that employ them.

The Museums Association therefore encourages employers to assure adherence to the Code of Ethics for Museums as a contractual requirement. An effective way of achieving this is to include reference to upholding and promoting the Museums Association's Code of Ethics for Museums in job descriptions that form part of an employee's contract of employment.

The Museums Association also recommends that adherence to the code should be used as a standard requirement in contracts between consultants and their clients.

The Code of Ethics for Museums must be subordinate to the legal powers and obligations of governing bodies responsible for museums and the legal powers and obligations of individual members of such bodies. However, the Museums Association believes this Code's provisions to be in the best interests of the public and therefore urges all museum governing bodies (and where appropriate, subsidiary, subcontracted or delegated bodies such as executive committees, contractors or managing bodies), formally to adopt it.

The Code of Ethics for Museums and other voluntary standards

Ethical standards developed by the Museums Association have informed the national Registration scheme for UK museums at an institutional level. Registration is administered by Resource, the Council for Museums, Archives and Libraries.

The Museums Association supports the work of specialist organisations in the UK whose members are involved in museum work and who may produce their own codes of ethics and ethical guidelines. The Museums Association can help in cross-referencing to these codes and guidelines and in referring enquirers to appropriate sources of specialist advice.

The Code of Ethics for Museums is consistent with the Code of Ethics for museums worldwide produced by the International Council of Museums (ICOM). The Museums Association supports ICOM's work.

The Museums Association encourages its members to support international conventions relating to museums whether or not these conventions have been ratified in the United Kingdom, where consistent with this code and the law.

This code and membership of the Museums Association

The Museums Association is registered as a charity. It is a non-governmental, independently financed membership organisation providing services to and reflecting the interests of museums and those who work for, and govern them. The Code of Ethics for Museums outlines ethical principles for all museums in the UK. The code applies to members of staff, paid or unpaid, to consultants and those who work freelance, to members of museum governing bodies, and to those who work for or govern organisations that support, advise or provide services to museums, including the Museums Association.

The Museums Association expects all members to uphold and to promote the Code of Ethics for Museums as a professional obligation. To achieve Associateship of the Museums Association (AMA) members must demonstrate awareness of the code and the ways in which it is used. To achieve Fellowship of the Museums Association (FMA) members must show that they promote the wider application of the code within museums.

The Code of Ethics for Museums applies to individuals and institutions. The code is intended to underpin museum policies and to guide members of museum governing bodies. The Museums Association expects its institutional members to uphold the Code of Ethics for Museums and encourages them formally to adopt it.

The structure of the code and related material

The spirit of the code is as important as the letter. The Code is informed by a belief that ethical behaviour is as much about developing good practice as avoiding malpractice. Therefore, the numbered points in each section, which define and detail ethical activity, are expressed in positive, rather than negative terms. The Museums Association's definition of a museum is printed on the front cover of this booklet. The values in the definition are elaborated in a statement of ten core museum values that preface the code. The values serve as a summary of the key points of the code and as headings for sections within it. The italicised sections under each heading in the code describe different

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Glossary

Museum

Users of the Code of Ethics for Museums should be familiar with the Museums Association's definition of a museum:

*'Museums enable people to explore **collections** for inspiration, learning and enjoyment. They are institutions that collect, **safeguard and make accessible** artefacts and specimens, which they hold in trust for society.'*

In this definition and hence throughout the code, '**museums**' should be taken to include galleries and subsidiary companies of museums.

A **collection** is an organised assemblage of selected material evidence of human activity or the natural environment, accompanied by associated information. As well as objects, scientific specimens or works of art held within a museum building, a collection may include buildings or sites.

Safeguarding includes undertaking conservation, security and collections management.

Making accessible includes undertaking interpretation, education, exhibition, outreach, documentation, research and publication, within or outside the museum's own buildings.

Dealing

Dealing is making a speculative acquisition with the intention of reselling for profit.

Governing body

The governing body of a museum is the principal body of individuals in which rests ultimate responsibility for policy and decisions affecting the governance of the museum. Legal title to the assets of the museum may be vested in this body.

In the case of a museum limited by guarantee the governing body is the board of directors or council of management.

In the case of a local authority museum, it is the full council of the authority. In some local authorities, however, under standing orders,

policy decisions vested in full council are delegated to individual elected members or small groups of elected members. Such delegated powers, where formally agreed, may extend to include decisions on ethically sensitive issues such as disposal.

In the case of a national museum or a museum run by a trust, it is the full board of trustees.

In the case of a museum run by an unincorporated association it is the committee.

In the case of a university museum it is the council (or other-named supreme governing body) of the university.

Public and society

The word 'public' is used in this code in two senses, that inter-connect.

The idea of society having a legitimate interest in museums and their activities is an underpinning value of the code. It is reflected in the use of the word 'public' in terms such as public domain, public service, public trust and public interest.

The word 'public' is also used to characterise those who are **users** of the museum (see below).

(A **registered museum** - see below - must comply with public access criteria prescribed by the Registration scheme).

Registered museum

A registered museum is a museum provisionally or fully registered under the national Registration scheme for UK museums administered by Resource, the Council for Museums, Archives and Libraries.

Users

Users are all those individuals and groups with whom the individual museum is actively engaged, to mutual benefit. That sense of the public served by a museum will be reflected in the individual museum's corporate mission and aims, which should define its target audiences. They may include past, current and potential users of the services provided by the museum.

code of ethics for museums

*Museums enable people to explore collections
for inspiration, learning and enjoyment.*

*They are institutions that collect, safeguard and
make accessible artefacts and specimens,
which they hold in trust for society.*

Society can expect museums to:

- hold collections in trust on behalf of society
- focus on public service
- encourage people to explore collections for inspiration, learning and enjoyment
- consult and involve communities, users and supporters
- acquire items honestly and responsibly
- safeguard the long-term public interest in the collections
- recognise the interests of people who made, used, owned, collected or gave items in the collections
- support the protection of natural and human environments
- research, share and interpret information related to collections, reflecting diverse views
- review performance to innovate and improve.

Society can expect museums to:

HOLD COLLECTIONS IN TRUST ON BEHALF OF SOCIETY

1.0 *Museums behave as ethical guardians as well as owners of collections. They never relinquish the trust invested in them, without public consent.*

All those who work for or govern museums should ensure that they:

- 1.1 Uphold public trust responsibilities. View the museum as the guardian of its collections.
- 1.2 Retain items in the public domain at whichever location provides the best balance of care, context and access.
- 1.3 Avoid behaviour that could be construed as asserting personal ownership or control of collections or any part of them.
- 1.4 Treat collections as non-negotiable assets in financial affairs. Refuse to mortgage collections or offer them as security for a loan. Sustain the financial viability of the museum irrespective of any valuation placed on items in its collections.
- 1.5 Fulfil all the museum's guardianship responsibilities in respect not only of the collections but also of all other resources (for example, premises, land and information), which, in explicit or moral terms, it holds in trust for the benefit of the public.

Society can expect museums to:

FOCUS ON PUBLIC SERVICE

2.0 *Museums belong to everybody. They exist to serve the public. They should enhance the quality of life of everyone, both today and in the future. They are funded because of their positive social, cultural, educational and economic impact.*

All those who work for or govern museums should ensure that they:

- 2.1 Recognise the public purpose of museums. Put the public interest before other interests.
- 2.2 Uphold the highest standards of personal conduct and corporate integrity expected in public service.
- 2.3 Account for actions and decisions, be willing to justify them and take responsibility for the consequences that flow from them.
- 2.4 Uphold, promote and abide by the Museums Association's ethical standards both in the letter and the spirit of this Code of Ethics for Museums. Never require or suggest that anyone should act in conflict with the principles of the Code.
- 2.5 Keep up to date with and work towards achieving other widely accepted standards, such as the Museums Association's Ethical Guidelines, the Registration Scheme for museums in the UK and successor schemes. Respect the ethical codes of others where consistent with this one.

2.6 Avoid any private activity or pursuit of a personal interest that may conflict or be perceived to conflict with the public interest.

2.7 Declare to the governing body and have recorded by it any activity or pursuit of any interest that may conflict or be perceived to conflict with the public interest.

2.8 Understand legal responsibilities as members of staff or governing bodies and make all policy and practice at the museum comply with the law. Understand that personal liabilities may follow from insolvency or wrongful or fraudulent trading and from breaches of company, charity or trust law.

2.9 Adhere to the museum's constitution, which should establish its purpose and legal status and the role and composition of the governing body. Regard the constitution as a public document. Require each individual member of the museum's governing body to assume equal responsibility for adherence to the museum's constitution, approved procedures and codes of practice. Note that absence from a meeting of the governing body does not necessarily absolve an individual member from any liability for a decision taken at that meeting, should there be any question of breach of trust or statutory default.

2.10 Do not allow the chair or any individual member of a governing body to take on autonomous powers for decisions and actions unless formally delegated to do so and then only on the basis that the actions of the individual are fully and promptly reported back to the governing body, as required by the rules of the governing body.

2.11 Consider the effect of activities conducted in private life on the reputation of the museum and of museums generally.

2.12 Observe recognised public service standards regarding gifts or favours. Refuse to solicit from any person or body, and turn down if offered, any personal gift or favour that might subsequently be interpreted as an inducement to promote or trade with that person or body. Declare any offer of a personal gift or favour and consult at an appropriate level of authority in advance of acting. Record the decision whether or not a gift or favour is accepted. Record gifts or favours accepted by individuals in accordance with well-defined, publicly transparent procedures.

2.13 Refuse to draw on status or position at the museum, or the museum's resources, for personal gain or advancement without prior permission. Have in place policy and procedures so that private work undertaken by employees is approved in advance and does not conflict with the museum's interest or wider public interest. Consider the current needs of the museum in deciding the proportion of any fees that may be retained by employees engaged in private work.

2.14 Refuse to identify, authenticate or value items in private ownership for personal payment, gifts or favours.

2.15 Avoid all activities that could be construed as trading or dealing in cultural property unless authorised in advance by the governing body. Refuse to deal in any material covered by the museum's acquisition policy, to engage in private collecting in competition with the museum or to use a connection with the museum to promote private collecting. Refuse to acquire any items from collections that the museum has disposed of.

2.16 Declare to the museum, and have approved by its governing body, any significant private collecting that may be covered by the museum's acquisition policy. Apply, in any private collecting, the same ethical standards as museums adopt generally, refusing, for example, to acquire illicit material. Collect for private purposes on collecting or field trips only with explicit prior agreement from the museum and if the collecting is incidental and the time involved is reasonable. Make clear to all parties whether an item is being collected for a museum or a private collection.

2.17 Avoid being seen as representing the museum if speaking personally or on behalf of outside organisations whose practices and purposes conflict with that of the museum.

2.18 Recognise that it is legitimate for people who work in museums to present evidence based on their knowledge and experience of subjects that are a matter of public concern or controversy. Obtain authorisation before making statements on sensitive issues that affect the museum. Base any public comments as far as possible on sound scholarship and reliable information.

Society can expect museums to:

ENCOURAGE PEOPLE TO EXPLORE COLLECTIONS FOR INSPIRATION, LEARNING AND ENJOYMENT

3.0 *Museums have the generosity of spirit to be approachable at every point of contact, to reach out to audiences and to increase access to their collections. As educational institutions, museums encourage a participative approach to learning. However specialised their subjects or remote their locations, they develop new audiences and deepen relationships with existing users. Museums recognise that individuals have varied backgrounds and varying physical, intellectual and cultural needs and expectations.*

All those who work for or govern museums should ensure that they:

3.1 Improve the quality of experience for all users.

3.2 Recognise the diversity and complexity of society and uphold the principle of equal opportunities for all.

3.3 Develop and promote the museum to appeal to an ever broader and more varied audience. Aim to provide something of interest to every potential user.

3.4 Promote public awareness, understanding and appreciation of the museum. Promote the educational role of the museum in its widest sense and cater for a broad range of interest levels and abilities.

3.5 Take account of individuals' differing educational experiences, learning styles, abilities and ways of understanding. Provide a choice of types and levels of access.

3.6 Respond to the diverse requirements of different cultural groups.

3.7 Respond to the needs and wishes of people with disabilities. Have in place effective systems to ensure that buildings, displays and other services are increasingly accessible to people with physical, sensory or learning disabilities.

3.8 Take account of present and potential users' ability and willingness to visit if admission or other charges are levied.

3.9 Make provision for those who are not currently prepared or able to visit. Use a variety of means to improve access, such as outreach, publishing or websites.

3.10 Make the museum's services available on a regular basis and at times which reflect the needs of users and potential users. Make opening times, events and other services widely known. Make explicit the levels of access available to collections, including items not on display.

3.11 Respond positively to people's expectations of access to museum collections, whether displayed or not. Regularly review the means available to the museum to make collections more accessible, either directly or in electronic or published form.

3.12 Reconcile the museum's role in safeguarding items for the benefit of future users with its obligation to optimise access for present users. Make explicit the criteria used if access needs to be restricted.

3.13 Make provision not just for safeguarding the collections but also for keeping them accessible whenever a building that houses collections needs to be closed or isolated.

3.14 Assist everyone who makes a reasonable request for information. Give public access to all documentation and other information held by a museum, unless the information was imparted in confidence, or it can be shown that the wider public interest demands that access be restricted (for example to protect collections or prevent abuse of sites of historic or scientific importance).

3.15 Consider restricting access to certain specified items where unrestricted access may cause offence or distress to actual or cultural descendants. Provide separate storage facilities where appropriate. (See also section 7, recognise the interests of people who made, used, owned, collected or gave items in the collections.)

3.16 Facilitate public access to the expertise of members of staff. Allow public access to unpublished research carried out on behalf of the museum unless there is a genuine need to protect the research.

3.17 Undertake identifications to the highest scholarly standards and provide as many significant facts about an item as possible. Do not conceal any lack of specialised knowledge and recommend other appropriate sources of advice to enquirers whenever possible.

3.18 Encourage public appreciation of the cultural rather than financial value of items. Refuse to put a financial value on items for the public. (Valuation for a museum's own internal management processes, such as insurance and acquisition is ethical.) (See also section 5, acquire items honestly and responsibly.)

3.19 Balance provision for particular groups or individuals, such as specialist enquirers, with long-term provision for a wider audience.

*For further guidance see also the Museums Association's **Ethical Guidelines on Access**.*

Society can expect museums to:

CONSULT AND INVOLVE COMMUNITIES, USERS AND SUPPORTERS

4.0 *Museums seek the views of communities, users and supporters and value the contributions they make. Museums actively involve them in developing policy, and balance this with the role of museums in leading and promoting debate. Museums engage with changing needs and values.*

All those who work for or govern museums should ensure that they:

4.1 Consult and involve groups from communities they serve and their representatives to promote a sense of shared ownership in the work of the museum.

4.2 Use advisory and support groups but do not exploit them. Make the status and influence of advisory and support groups clear to their members, treat their views with respect and protect their confidences.

4.3 Work in partnership with others. Involve partners in decision-making. Treat partners with respect. Exercise the authority vested in the museum responsibly and guard against the unwitting or deliberate misuse of power. Remain sensitive to the possibility that the museum, however unintentionally, may act in a way that lacks empathy. Clarify the aspirations of the museum and partner organisations and establish common ground. Draw up clear statements of objectives and working methods for joint projects.

4.4 Keep up to date with social and economic change affecting any specific communities served by the museum. Work collaboratively with other organisations to address social disadvantage and exclusion.

Society can expect museums to:

ACQUIRE ITEMS HONESTLY AND RESPONSIBLY

5.0 *Museums develop collections using long-term plans that are socially responsive. They reject items with dubious provenance. Museums regularly review, publish and adhere to acquisition policies agreed by the governing body that are realistic in terms of the resources required to sustain them. These policies address issues of the context and legitimacy of acquisitions, due diligence, long-term care, documentation and relevance to overriding, institutional aims. Items are acquired on the basis that they will be retained in the public domain.*

All those who work for or govern museums should ensure that they:

5.1 Collect according to detailed, published policies that state clearly what, how and why the museum collects. Frame the acquisition policy in the light of the museum's stated mission. Specify criteria for future acquisitions that include topics, time periods and geographical areas. Collect only within acquisition policies, except in exceptional circumstances.

5.2 Acquire an item only after thorough consideration of its long-term value and how it will be used.

5.3 Accept an item only if the museum can provide adequate, continuing long-term care for the item and public access to it, without compromising standards of care and access relating to the existing collections.

5.4 Examine carefully the implications of, and record the reasons for, accepting items that will not be immediately accessioned into the permanent collection. (Acceptable reasons may include loan, demonstration, handling, testing or retention pending a final decision to accession into the permanent collection.)

5.5 Co-operate rather than compete with other UK museums when collecting. Recognise that other institutions collecting in the same or related fields may have a stronger claim to acquisition of a particular item. Resolve disputes with other museums constructively and in the best interest of the public. Take account of the interests not only of other registered museums but also of related public organisations, such as archives.

5.6 Recognise that individuals or communities may have a stronger claim to certain items than the museum. Take account also of scientific arguments for and against leaving items in their original context. (See also section 7, recognise the interests of people who made, used, owned, collected or gave items in the collections and section 9, research, share and interpret information related to collections, reflecting diverse views.)

5.7 Exercise due diligence when considering an acquisition or inward loan. Verify the ownership of any item being considered for acquisition or inward loan and that the current holder is legitimately able to transfer title or to lend. Apply the same strict criteria to gifts, bequests and loans as to purchases.

5.8 Reject any item if there is any suspicion that it was wrongfully taken during a time of conflict, unless allowed by treaties or other agreements.

5.9 Reject any item if there is any suspicion that it has been stolen unless, in exceptional circumstances, this is to bring it into the public domain, in consultation with the rightful owner.

5.10 Reject items that have been illicitly traded. Note that the UNESCO Convention (on the Means of Prohibiting and Preventing the Illicit Import, Export and Transfer of Ownership of Cultural Property) was finalised in 1970. Reject, therefore, any item if there is any suspicion that, since 1970, it may have been stolen, illegally excavated or removed from a monument, site or wreck contrary to local law or otherwise acquired in or exported from its country of origin (including the UK), or any intermediate country, in violation of that country's laws or any national and international treaties, unless the museum is able to obtain permission from authorities with the requisite jurisdiction in the country of origin.

5.11 Reject any item that lacks secure ownership history, unless there is reliable documentation to show that it was exported from its country of origin before 1970, or the museum is acting as an externally approved repository of last resort, or in the best judgement of experts in the field concerned the item is of minor importance and has not been illicitly traded.

5.12 Contact colleagues and appropriate authorities both in the UK and overseas for any information or advice that may be necessary to inform judgement regarding the legitimacy of items considered for acquisition or inward loan.

5.13 Comply not only with treaties which have been ratified by the UK Government, but also uphold the principles of other international treaties intended to curtail the illicit trade, if legally free to do so.

5.14 Report any suspicion of criminal activity to the police. Report any other suspicions of illicit trade to other museums collecting in the same area and to organisations that aim to curtail the illicit trade.

5.15 Avoid appearing to promote or tolerate the sale of any material without adequate ownership history through inappropriate or compromising associations with vendors, dealers or auction houses. Refuse to lend items to any exhibition that is likely to include illicitly traded items.

5.16 Decline to offer expertise on, or otherwise assist the current possessor of any item that may have been illicitly obtained, unless it is to assist law enforcement or to support other organisations in countering illicit activities.

5.17 Exercise caution when accepting conditions attached to acquisitions, particularly those involving gifts and bequests. Discuss expectations and clarify in writing the precise terms on which all parties are accepting transfer of title. Specify unambiguously to donors the museum's intentions regarding such matters as: the long-term retention of items; display; storage and public acknowledgement. (See also section 7, recognise the interests of people who made, used, owned, collected or gave items in the collections and Guidelines for Donors issued by the Museums Association Ethics Committee.)

5.18 Refuse tactfully but firmly to accept an offer of a gift or bequest if items offered do not meet criteria set out in the museum's collecting policy. Explain why the museum is unable to accept an offer of a gift or a bequest.

5.19 Refuse, in writing, any unwanted, unsolicited gifts even if the museum has been advised that they need not be returned. Consider informing intending benefactors, or their representatives, about other registered museums, archives or other public institutions that may be interested in the unwanted items.

5.20 Comply with conditions attached to an acquisition once the acquisition has been made. (See also section 9, recognise the interests of people who made, used, owned, collected or gave items in the collections and the Museums Association's Guidelines for Donors to Museums.)

5.21 Use agreed procedures for taking the final decision to acquire an item. Open procedures for transfer of title to external audit.

5.22 Encourage potential sellers to get an independent valuation when offering items for sale to the museum. Seek the best discount from vendors once they are aware of the likely value on the open market of items they offer to sell to the museum.

5.23 Have in place procedures approved by the governing body for loans from and to the museum, including historic loans.

*For further guidance see also the Museums Association's **Ethical Guidelines on Acquisition; Buying in the Market: A Checklist for Museums; Stealing History: The Illicit Trade in Cultural Material.***

Society can expect museums to:

SAFEGUARD THE LONG-TERM PUBLIC INTEREST IN THE COLLECTIONS

6.0 Collections are a tangible link between the past, present and future. Museums balance the interests of different generations by safeguarding collections, which may include buildings and sites. Museums develop and implement a collections management policy that ensures appropriate standards of care and security for all items entrusted to them, either permanently or on loan. There is a strong presumption against disposal out of the public domain. Disposal should be undertaken only within the strategic framework of a long-term collections management policy, as a means of returning an item to its rightful owner, or improving care, access or context.

All those who work for or govern museums should ensure that they:

6.1 Act as guardians of the long-term public interest in the collections.

6.2 Publish, implement and regularly review a forward-looking collections management policy, approved by the governing body, which specifies standards of care. Define, in the collections management policy, levels of care appropriate for different parts of the collection, acceptable levels of risk and how items will be made accessible.

6.3 Protect all items from loss, damage and physical deterioration, wherever they are. Maintain appropriate standards of protection against hazards such as theft, fire, flood, vandalism and deterioration of the collections resulting from adverse environmental conditions. Specify the action to be taken in the event of disasters threatening the museum's buildings, staff, visitors, records or collections. Make every effort to protect the collections in the event of a disaster but never put people's lives at risk.

6.4 Balance the duty of maintaining and enhancing collections for future generations with that of providing appropriate services to today's public. Reconcile security and conservation requirements with users' rights of access and the desirability of lending outside the museum.

6.5 Pay due regard to safeguarding collections and the public's right of access whenever museum premises are used for functions.

- 6.6 Make provision for safeguarding collections whenever buildings housing them are closed or isolated, whether this is planned or unexpected.
- 6.7 Make arrangements to care properly for the health and wellbeing of any live animals for which the museum is responsible.
- 6.8 Demonstrate clearly how the long-term local and general public interest is served in circumstances in which disposal may be appropriate.
- 6.9 Keep collections as far as possible in the public domain when considering disposal. Maintain public confidence in museums by not selling items from a permanent collection, nor otherwise transferring them, out of the public domain.
- 6.10 Recognise that formal title and guardianship for the collections is vested in the governing body, which must satisfy itself that decisions to dispose are informed by the highest standards of expertise and take into account all legal and other attendant circumstances. (*Please refer to the definition of governing body in the glossary*).
- 6.11 Base decisions to dispose on clear, published criteria as part of the institution's collections management policy, approved by the governing body. Carry out any disposal according to unambiguous, generally accepted procedures. Incorporate criteria and procedures for disposal in the museum's collections management policy.
- 6.12 Give priority to transferring items, preferably by gift, to registered museums. Consider donating items to other public institutions if it is not possible for another museum to accept them. (This paragraph excludes material that is being disposed of because it is damaged beyond use, or dangerous, or is being returned to its place of origin or rightful owner.)
- 6.13 Refuse to undertake disposal principally for financial reasons (either to raise income or decrease expenditure). Apply any money raised as a result of disposal, if this exceptional circumstance arises, solely and directly for the benefit of the museum's collection.
- 6.14 Apply any money received in compensation for the loss, damage or destruction of objects in the collection solely and directly for the benefit of the museum's collection.
- 6.15 Document all disposals and the basis on which decisions to dispose were made.
- 6.16 Dispose of human remains with sensitivity and respect for the beliefs of communities of origin. (Refer to guidelines on human remains issued by the Museum Ethnographers Group and see also section 7, recognise the interests of people who made, used, owned, collected or gave items in the collections.)

*For further guidance see also the Museums Association's **Ethical Guidelines on Disposal**.*

Society can expect museums to:

RECOGNISE THE INTERESTS OF PEOPLE WHO MADE, USED, OWNED, COLLECTED OR GAVE ITEMS IN THE COLLECTIONS

7.0 *Museums try to develop constructive relationships with people who contributed to collections, with representatives of these people, their heirs and cultural descendants, balancing responsibilities to a range of stakeholders. Gifts and bequests of items are usually made in the expectation that items will be preserved. Museums reconcile the wider public interest with that expectation.*

All those who work for or govern museums should ensure that they:

- 7.1 Acknowledge that the museum benefits from all those who have contributed to the making, meaning and presence in the museum of its collections. Establish working relationships based on mutual understanding, wherever practical.
- 7.2 Establish principles that assist people who contributed to collections to develop mutually agreed arrangements with the museum, wherever practical. Specify and record these arrangements clearly and unambiguously.
- 7.3 Articulate clearly intentions and expectations about projects such as commissions, collaborations and workshops. Specify agreements over matters such as funding, copyright, site preparation and maintenance. Make written exhibition policies available to exhibitors. (See also section 4, consult and involve communities, users and supporters.)
- 7.4 Inform originating communities of the presence of items relevant to them in the museum's collections, wherever practical.
- 7.5 Respect the interests of originating communities with regard to elements of their cultural heritage present or represented in the museum. Involve originating communities, wherever practical, in decisions about how the museum stores, researches, presents or otherwise uses collections and information about them.
- 7.6 Consider restricting access to certain specified items, particularly those of ceremonial or religious importance, where unrestricted access may cause offence or distress to actual or cultural descendants. (See also section 3, encourage people to explore collections for inspiration, learning and enjoyment.)
- 7.7 Deal sensitively and promptly with requests for repatriation both within the UK and from abroad of items in the museum's collection, taking into account: the law; current thinking on the subject; the interests of actual and cultural descendants; the strength of claimants' relationship to the items; their scientific, educational, cultural and historical importance; their future treatment. Refer to Guidelines on Restitution and Repatriation issued by Resource, the Council for Museums, Archives and Libraries and guidelines on human remains issued by the Museum Ethnographers Group. Refer to any subsequent guidance issued by the bodies and their successors listed above. (See also section 6, safeguard the long-term public interest in the collections.)
- 7.8 Exercise sensitivity and seek professional advice whenever acquiring items from fieldwork. Consider always the desirability of recording and preserving items where they are. Uphold guidelines issued by relevant bodies.
- 7.9 Exercise sensitivity and seek professional advice whenever reminiscence and oral history work is undertaken. Uphold guidelines issued by relevant bodies.
- 7.10 Follow up accepted gifts or bequests with a written acknowledgement and confirmation of the terms on which the gift or bequest is being accepted. (See also Guidelines for Donors to Museums, issued by the Museums Association Ethics Committee and section 5, acquire items honestly and responsibly.)
- 7.11 Uphold and comply with conditions set by benefactors and accepted by the museum, unless changed circumstances mean that conditions need to be reconsidered in the light of what is generally held to be the public interest.

Society can expect museums to:

SUPPORT THE PROTECTION OF NATURAL AND HUMAN ENVIRONMENTS

8.0 *Collections in museums represent the rich diversity of the world's natural and human environments. Museums promote learning without jeopardising this diversity. They contribute to sustainable economic activity and benefit local and wider communities.*

All those who work for or govern museums should ensure that they:

8.1 Value and protect natural and human environments. Prevent abuse of places of scientific, historic or cultural importance. Exercise due diligence procedures when acquiring or borrowing items. Uphold appropriate national and international conventions and treaties on protection of natural and human environments, whether or not they have been ratified. (See section 5, acquire items honestly and responsibly.)

8.2 Be sensitive to the impact of the museum and its visitors on natural and human environments. Make best use of resources, use energy and materials responsibly and minimise waste.

8.3 Contribute to the sustainable social and material vitality of the museum's surrounding area by, for example, attracting users, sustaining economic activity, offering satisfying and rewarding employment and pursuing local purchasing policies.

8.4 Develop purchasing and resale policies that address environmental and human rights' issues.

8.5 Make all growth sustainable. Evaluate the long-term impact of introducing, operating and maintaining new developments.

Society can expect museums to:

RESEARCH, SHARE AND INTERPRET INFORMATION RELATED TO COLLECTIONS, REFLECTING DIVERSE VIEWS

9.0 *Museums facilitate and carry out research. They share and interpret information consistent with their purpose and ensure that it is accurate, up to date and based on the highest standards of scholarship and research. They organise and manage information to make it accessible. Museums interpret information to engage a wide variety of interests and to reflect diverse views. They invite users to question assumptions and distinguish evidence from speculation.*

All those who work for or govern museums should ensure that they:

9.1 Research and collate information about collections and the subject areas generally within which the museum has expertise. Enable the museum's researchers and others to keep up to date with developments in their field.

9.2 Apply the highest possible standards of objectivity to the research undertaken by the museum, and distinguish clearly between evidence and deduction. Maintain, as far as possible, records and material so that the evidence on which research is based can be re-examined and verified independently.

9.3 Make information publicly accessible. Conduct research with the intention of making it public. Publish research promptly and make it widely available. (See also section 3, encourage people to explore collections for inspiration, learning and enjoyment.)

9.4 Develop mechanisms that encourage people to research collections, develop their own ideas about them and participate in a variety of ways in shaping the interpretations offered by the museum. Make the museum a forum in which ideas can be discussed and tested. (See also section 3, encourage people to explore collections for inspiration, learning and enjoyment.)

9.5 Cultivate a variety of perspectives on the collections to reflect the diversity of the communities served by the museum.

9.6 Represent ideas, personalities, events and communities with sensitivity and respect. Recognise the humanity of all people. Develop procedures that allow people to define, and seek recognition of, their own cultural identity. (See also section 7, recognise the interests of people who made, used, owned, collected or gave items in the collections.)

9.7 Respect the views of others and their right to express those views, unless illegal to do so or inconsistent with the purpose of museums as socially inclusive institutions. Strive to dispel prejudice and indicate clearly the part played by opinion or conjecture in interpretation.

9.8 Reflect differing views striking a balance over time.

9.9 Recognise the assumptions on which interpretation is based and that presentational styles may shape perception in unintended ways. Consider carefully the impact of interpretations that exclude any reference to people associated with the items.

9.10 Strive for editorial integrity and remain alert to the pressure that can be exerted by particular interest groups, including lenders and funders (See also 10.12).

9.11 Keep records and presentations as accurate and as up to date as possible. Record differences of expert opinion. Correct errors in documentation or presentations without delay, when they are brought to light.

Society can expect museums to:

REVIEW PERFORMANCE TO INNOVATE AND IMPROVE

10.0 *Museums develop by initiating and responding to change. They establish, formally adopt, publish and regularly review their aims and objectives. Museums specify targets, monitor, evaluate and report on performance and make changes in operational practices to become more effective and efficient.*

All those who work for or govern museums should ensure that they:

10.1 Adhere to the museum's constitution. Review, periodically, the museum's overarching purpose.

10.2 Keep up to date with developments in the law, museum practice, social policy and public expectations.

10.3 Involve users, staff, members of the governing body and other stakeholders directly in planning. Regularly update and make public the museum's aims, objectives, plans, policies and standards. (See also section 4, consult and involve communities, users and supporters.)

10.4 Make prudent use of resources and maximise the benefit that the public derives from all activities. Account fully and openly to the public about how money is raised and spent.

10.5 Maintain the financial viability of the museum. Meet legal, constitutional and contractual requirements for financial control of the museum (and any subsidiary commercial companies). Avoid unjustifiable financial risk. (See also section 1 hold collections in trust on behalf of society.)

10.6 Accept financial support from commercial organisations and other outside sources provided that it does not compromise the integrity of the museum. Clearly define and agree the relationship between the museum and its partners to avoid undue influence on museum activities.

10.7 Establish principles to inform trading and commercial activities so that they are consistent with the aims of the museum and, where possible, enhance the quality of the service. Do not allow trading and commercial activities to bring the museum into disrepute, reduce public access, subject the collections to unacceptable risk or jeopardise finances.

*For further guidance see also the Museums Association's **Ethical Guidelines on Trading and Commercial Activities**.*

10.8 Make the museum's premises as suitable as possible for public services, collections management and access for all, in addition to fulfilling legal responsibilities for the health and safety of staff and visitors.

10.9 Recruit, train and develop individuals so that the skills and knowledge of members of museum staff, the governing body and support groups are appropriate to the needs of the individual and the museum. Facilitate the career-long professional and personal development of all staff and members of the governing body.

10.10 Recognise that all who work for the museum in any capacity have a contribution to make to its successful operation. Recruit and treat all staff fairly. Acknowledge the contributions of colleagues at all levels.

10.11 Undertake and delegate only such duties as are commensurate with individual knowledge and skills. Co-operate fully with any appropriate scrutiny, appraisal or evaluation. Seek and act on advice, whenever necessary, from colleagues in other museums, museum support bodies and consultants. Obtain, when necessary, specialist expertise through contracts or consultancies. (See also section 4, consult and involve communities, users and supporters.)

10.12 Assist the governing body in making informed decisions and obtaining direct access to the advice it needs to fulfil its role.

10.13 Strive to increase the diversity of staff and members of the governing body so that they adequately represent the museum's present and potential audience.

10.14 Conduct disputes with others with courtesy and tolerance, even when differences of opinion are robustly expressed. Avoid giving needless personal offence. Seek independent arbitration, mediation or other means of resolution when disputes cannot otherwise be resolved.

10.5 Maintain the financial viability of the museum. Meet legal, constitutional and contractual requirements for financial control of the museum (and any subsidiary commercial companies). Avoid unjustifiable financial risk. (See also section 1 hold collections in trust on behalf of society.)

10.6 Accept financial support from commercial organisations and other outside sources provided that it does not compromise the integrity of the museum. Clearly define and agree the relationship between the museum and its partners to avoid undue influence on museum activities.

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10.14 Conduct disputes with others with courtesy and tolerance, even when differences of opinion are robustly expressed. Avoid giving needless personal offence. Seek independent arbitration, mediation or other means of resolution when disputes cannot otherwise be resolved.

How to use this index

The first number in a reference is to a section, the second to a point within it. 1.2 refers, therefore, to section 1, point 2: Retain items in the public domain at whichever location provides the best balance of care, context and access.

If, for example, you are developing an access policy, or dealing with an ethical dilemma around an access issue, then section 3, encourage people to explore collections for inspiration, learning and enjoyment, is clearly the most important section. Access issues are also referred to in other sections, reference to which can be found by looking up the word 'access' in the index.

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THE SEVEN PRINCIPLES OF PUBLIC LIFE

The Museums Association endorses the seven principles of public life, as set out in Standards in Public Life: the First Report of the Committee on Standards in Public Life (1995), chaired by Lord Nolan. The principles apply to all who work in or for museums and to all who serve on museum governing bodies.

Selflessness

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their families or their friends.

Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards or benefits, holders of public office should make choices on merit.

Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

Leadership

Holders of public office should promote and support these principles by leadership and example.

Information on how to use the principles outlined above to inform the work of governing bodies is available from the Trustee and Governance Team at the National Council For Voluntary Organisations (NCVO), Regents Wharf, 8 All Saints Street, London N1 9RL. www.ncvo-vol.org.uk Help desk tel: 0800 2798 798

Society can expect museums to:

1. HOLD COLLECTIONS IN TRUST ON BEHALF OF SOCIETY

Museums behave as ethical guardians as well as owners of collections. They never relinquish the trust invested in them, without public consent.

2. FOCUS ON PUBLIC SERVICE

Museums belong to everybody. They exist to serve the public. They should enhance the quality of life of everyone, both today and in the future. They are funded because of their positive social, cultural, educational and economic impact.

3. ENCOURAGE PEOPLE TO EXPLORE COLLECTIONS FOR INSPIRATION, LEARNING AND ENJOYMENT

Museums have the generosity of spirit to be approachable at every point of contact, to reach out to audiences and to increase access to their collections. As educational institutions, museums encourage a participative approach to learning. However specialised their subjects or remote their locations, they develop new audiences and deepen relationships with existing users. Museums recognise that individuals have varied backgrounds and varying physical, intellectual and cultural needs and expectations.

4. CONSULT AND INVOLVE COMMUNITIES, USERS AND SUPPORTERS

Museums seek the views of communities, users and supporters and value the contributions they make. Museums actively involve them in developing policy, and balance this with the role of museums in leading and promoting debate. Museums engage with changing needs and values.

5. ACQUIRE ITEMS HONESTLY AND RESPONSIBLY

Museums develop collections using long-term plans that are socially responsive. They reject items with dubious provenance. Museums regularly review, publish and adhere to acquisition policies agreed by the governing body that are realistic in terms of the resources required to sustain them. These policies address issues of the context and legitimacy of acquisitions, due diligence, long-term care, documentation and relevance to overriding, institutional aims. Items are acquired on the basis that they will be retained in the public domain.

6. SAFEGUARD THE LONG-TERM PUBLIC INTEREST IN THE COLLECTIONS

Collections are a tangible link between the past, present and future. Museums balance the interests of different generations by safeguarding collections, which may include buildings and sites. Museums develop and implement a collections management policy that ensures appropriate standards of care and security for all items entrusted to them, either permanently or on loan. There is a strong presumption against disposal out of the public domain. Disposal should be undertaken only within the strategic framework of a long-term collections management policy, as a means of returning an item to its rightful owner, or improving care, access or context.

7. RECOGNISE THE INTERESTS OF PEOPLE WHO MADE, USED, OWNED, COLLECTED OR GAVE ITEMS IN THE COLLECTIONS

Museums try to develop constructive relationships with people who contributed to collections, with representatives of these people, their heirs and cultural descendants, balancing responsibilities to a range of stakeholders. Gifts and bequests of items are usually made in the expectation that items will be preserved. Museums reconcile the wider public interest with that expectation.

8. SUPPORT THE PROTECTION OF NATURAL AND HUMAN ENVIRONMENTS

Collections in museums represent the rich diversity of the world's natural and human environments. Museums promote learning without jeopardising this diversity. They contribute to sustainable economic activity and benefit local and wider communities.

9. RESEARCH, SHARE AND INTERPRET INFORMATION RELATED TO COLLECTIONS, REFLECTING DIVERSE VIEWS

Museums facilitate and carry out research. They share and interpret information consistent with their purpose and ensure that it is accurate, up to date and based on the highest standards of scholarship and research. They organise and manage information to make it accessible. Museums interpret information to engage a wide variety of interests and to reflect diverse views. They invite users to question assumptions and distinguish evidence from speculation.

10. REVIEW PERFORMANCE TO INNOVATE AND IMPROVE

Museums develop by initiating and responding to change. They establish, formally adopt, publish and regularly review their aims and objectives. Museums specify targets, monitor, evaluate and report on performance and make changes in operational practices to become more effective and efficient.

museumsassociation

P.I. Number	BV 170a
PI TITLE	Visits To and Use Of Museums <i>and Galleries</i> : all visits
DEFINITION	<p>'Visits/uses' means:</p> <p>Visits by a member of the public;</p> <p>Enquiries by email, post or telephone for research purposes (not including enquiries about opening hours, tickets, how to get there, or media enquiries, briefings and interviews);</p> <p>Website hits for research. All website visits are considered 'research' ones for the purposes of the indicator. If a website user goes to a site and opens several pages or makes several inquiries in the same visit, that should still be counted as one visit;</p> <p>Presentations by museum staff to specific audiences (do not count general events and audiences such as exhibition stands or county shows).</p> <p>Exclude 'opportunistic' audiences, i.e. ones where there is no specific gathering for the purpose of viewing museum or gallery exhibits or for presentations by museum staff.</p> <p>'Museums' includes only museums that met the Museum Association definition (1998) and where the museum is run by the Authority or the Authority contributes at least 20% of the running costs net of charges or provides the building.</p> <p>'Galleries' in this context are venues that are used predominantly for the permanent exhibition of historic arts collections, rather than for contemporary arts performances and exhibitions.</p> <p>Where an authority provides the building for the museum free, or at nominal cost, or contributes 20% or more to a museum's running costs, then 100% of visitor numbers should be included here.</p> <p>An Authority may contribute a collection free of charge to another body's museum. That contribution will not count towards the 20% contribution floor for inclusion in this BVPI, unless it involves the donating Authority in associated revenue expenditure in the year equivalent to the 20% minimum</p> <p>Visits/uses per 1,000 population: use the latest ONS mid-year estimates to calculate the local population.</p>
NEWSLETTER UPDATES	
COUNCIL	

METHODOLOGY	
DESCRIPTION OF PROCESS	<p>Collection of Visitor/Usage Data at Heritage Services Sites.</p> <p>Heritage Services run and oversee six sites, which are open to the public on various schedules. Namely:</p> <ul style="list-style-type: none"> • Broad Street Museum & Art Gallery, Hereford • Old House Museum, Hereford • Market House Heritage Centre, Ross-on-Wye • Museum Resource and Learning Centre, Friar Street, Hereford • Ledbury Heritage Centre • Museum on the Move <p>We also count 20% of visitors to Kington Museum and Weobley as they pay only a peppercorn rent to the Council for their premises.</p> <p>The way of collecting data varies between sites as described below:</p> <ul style="list-style-type: none"> • Broad Street Museum and Art Gallery • Old House • Market House Heritage Centre, Ross-on-Wye • Museum on the Move • And the Museum Resource and Learning Centre <p>All these sites have members of staff working at them who are employed by the Heritage Services.</p> <p>Visitors are counted by the Museum Assistant on duty and recorded either by means of a “clicker” or five-bar-gates. This information is transferred on a daily basis onto a weekly summary sheet. The sheets are totalled at the end of each week. At the end of the month the weekly sheets are totalled and the figures are transferred on to a monthly Performance Data sheet and returned to me. The weekly sheets are kept at the individual sites.</p> <p>Enquiries are recorded by members of staff by means of a form which records the name and contact details of the enquirer, the nature of the enquiry, the method received and the time taken to deal with it. These forms are returned to me on a monthly basis and I cross check them for duplications. Only enquiries by phone, e-mail or correspondence are counted.</p> <p>Ledbury Heritage Centre</p> <p>Heritage Services have no members of staff working at this site. The Visitor Services Officer visits regularly and</p>

	<p>collates information from volunteer records. The TIC has a shop sale point at the centre and processes some of the visitor data for Heritage Services in return.</p> <p>Ledbury is manned entirely by volunteers.</p> <p>Ledbury doesn't make records of enquiries as we do not direct phone calls or mail to the site and it is not networked.</p> <p>Heritage Services Website</p> <p>Numbers of Web-site hits are provided to me via stats sheets from the Council's IT section, these sheets are held by me. A visitor to the site has to have visited a number of pages to be counted as a user.</p> <p>Pupil Numbers</p> <p>According to the regulations concerning pupils visiting the sites in organised groups, the school must have called to book their visit before their arrival. A member of staff may record a school party visiting the site, but if the group has not prearranged their visit it cannot be used for performance data. The schools visits diary of bookings is maintained by the learning team and the final figures for this category are passed to me by the team at the end of each month.</p>
CALCULATION	<p>Calculation of BV170a</p> <p>This figure is calculated as follows:</p> <p>Number of visits in person + (all sites)</p> <p>Number of Enquiries by telephone, letter and e-mail + (5 manned sites)</p> <p>Hits on the Heritage Services Website +</p> <p>Number of students serviced by our Outreach service + (the majority of our schools work is done in the schools as a visit by an educator to the school and these bookings are handled and recorded by the learning team)</p> <p><u>Number of professional outreach uses + (This is when a member of Heritage Services staff offers their expertise and professional knowledge to another museum or speaks to a group or organisation in a formal situation about a professional topic or the work of the service)</u></p> <p>= Total number of usages</p> <p>Divided by 1,000 population of 176.471 (awaiting confirmation of this figure for 2006/7)</p>
SOURCE DATA	<p>Monthly performance sheets, enquiries forms and website hits.</p>
DOCUMENTATION TO BE KEPT	
COMMENTS	<p>Bromyard Heritage Centre has closed. Ledbury Heritage</p>

	<p>Centre's visitor figures make a huge difference to our performance. Ledbury is run entirely by volunteers and we are facing something of a crisis with them as they are aging and we have no new recruits. Opening hours will be compromised next year. If Ledbury opening is compromised next year by volunteer availability we will be expecting the figure given in brackets (Ledbury is open for 7 months and receives over 30,000 in that time.) Last year's figures dropped over 8,000 due to erratic opening. As we have not met our targets for the last two years I do not expect us to meet the targets for this year. The shortfall between this year's target and last year's result is 22. The targets are particularly high as they expect the equivalent of 80% of the population to use our services. This is a high proportion as only 60% of the population of the UK are regular museum users.</p>
RESULT	

TARGETS		
2006/2007	2007/2008	2008/2009
800	810	815

	NAME	SIGNATURE	DATE
MANAGEMENT OWNER	Natalia Silver		
PERFORMANCE COORDINATOR	Andrew Hasler		
ADMINISTRATOR	Lara Latcham		
DATE METHODOLOGY AGREED WITH DISTRICT AUDIT (IF REQUIRED)			

P.I. Number	BV 170b
PI TITLE	Visits to and Use of Museums <i>and Galleries</i> : visits in person
DEFINITION	<p>'Visits in person' includes children in school parties (who are counted individually), but excludes media briefings and interviews.</p> <p>'Museums' includes only those museums that met the Museum Association definition (1998) and where the museum is run by the Authority or the Authority contributes at least 20% of the running costs net of charges or provides the building.</p> <p>'Galleries' in this context are venues that are used predominantly for the permanent exhibition of historic arts collections, rather than for contemporary arts performances and exhibitions.</p> <p>Where an authority provides the building for the museum free, or at nominal cost, or contributes 20% or more to a museum's running costs, then 100% of visitor numbers should be included here.</p> <p>An Authority may contribute a collection free of charge to another body's museum. That contribution will not count towards the 20% contribution floor for inclusion in this BVPI, unless it involves the donating Authority in associated revenue expenditure in the year equivalent to the 20% minimum</p> <p>Visits/uses per 1,000 population: use the latest ONS mid-year estimates to calculate the local population.</p>
NEWSLETTER UPDATES	
COUNCIL METHODOLOGY	
DESCRIPTION OF PROCESS	<p>Collection of Visitor/Usage Data at Heritage Services Sites.</p> <p>Heritage Services run and oversee six sites, which are open to the public on various schedules. Namely:</p> <ul style="list-style-type: none"> • Broad Street Museum & Art Gallery, Hereford • Old House Museum, Hereford • Market House Heritage Centre, Ross-on-Wye • Museum Resource and Learning Centre, Friar Street, Hereford • Ledbury Heritage Centre

- Museum on the Move

We also count 20% of visitors to Kington Museum and Weobley as they pay only a peppercorn rent to the Council for their premises.

The way of collecting data varies between sites as described below:

- Broad Street Museum and Art Gallery
- Old House
- Market House Heritage Centre, Ross-on-Wye
- Bromyard Heritage Centre
- Museum on the Move
- And the Museum Resource and Learning Centre

All these sites have members of staff working at them who are employed by the Heritage Services.

Visitors are counted by the Museum Assistant on duty and recorded either by means of a “clicker” or five-bar-gates. This information is transferred on a daily basis onto a weekly summary sheet. The sheets are totalled at the end of each week. At the end of the month the weekly sheets are totalled and the figures are transferred on to a monthly Performance Data sheet and returned to me. The weekly sheets are kept at the individual sites.

Enquiries are recorded by members of staff by means of a form which records the name and contact details of the enquirer, the nature of the enquiry, the method received and the time taken to deal with it. These forms are returned to me on a monthly basis and I cross check them for duplications. Only enquiries by phone, e-mail or correspondence are counted.

Ledbury Heritage Centre

Heritage Services have no members of staff working at this site. The Visitor Services Officer visits regularly and collates information from volunteer records. The TIC has a shop sale point at the centre and processes some of the visitor data for Heritage Services in return.

Ledbury is manned entirely by volunteers.

Neither site makes records of enquiries as we do not direct phone calls or mail to the sites and they are not networked.

Pupil Numbers

According to the regulations concerning pupils visiting the

	sites in organised groups, the school must have called to book their visit before their arrival. A member of staff may record a school party visiting the site, but if the group has not prearranged their visit it cannot be used for performance data. The schools visits diary of bookings is maintained by the education team and the final figures for this category are passed to me by the team at the end of each month.
CALCULATION	<p>Calculation of BV170b</p> <p>This figure is calculated as follows:</p> <p><u>Number of visits in person (all sites)</u> Divided by 1,000 population figure (as above)</p>
SOURCE DATA	
DOCUMENTATION TO BE KEPT	Monthly performance sheets.
COMMENTS	<p>Bromyard Heritage Centre has closed. Ledbury Heritage Centre's visitor figures make a huge difference to our performance. Ledbury is run entirely by volunteers and we are facing something of a crisis with them as they are aging and we have no new recruits. Opening hours will be compromised next year. If Ledbury opening is compromised next year by volunteer availability we will be expecting the figure given in brackets (Ledbury is open for 7 months and receives over 30,000 in that time.) Last year's figures dropped over 8,000 due to erratic opening.</p> <p>As we have not met our targets for the last two years I do not expect us to meet the targets for this year. The shortfall between this year's target and last year's result is 67. The targets are particularly high as they expect the equivalent of 80% of the population to visit our sites. This is a high proportion as only 60% of the population of the UK are regular museum visitors.</p>
RESULT	

TARGETS		
2006/2007	2007/2008	2008/2009
760	770	780

	NAME	SIGNATURE	DATE
MANAGEMENT OWNER	Natalia Silver		
PERFORMANCE COORDINATOR	Andrew Hasler		
ADMINISTRATOR	Lara Latcham		

P.I. Number	BV 170c
PI TITLE	Visits to and Use of Museums <i>and Galleries</i> : school groups
DEFINITION	<p>'Pupils in organised school groups' includes those by secondary school sixth form classes and nursery school classes but not those by sixth form colleges or adult education institutions or play groups.</p> <p>Visits to schools to make a specific presentation to a school group can be included. However, loaning or delivering an exhibit to a school is excluded.</p> <p>'Museums' includes only those museums that met the Museum Association definition (1998) and where the museum is run by the Authority or the Authority contributes at least 20% of the running costs net of charges or provides the building.</p> <p>'Galleries' in this context are venues that are used predominantly for the permanent exhibition of historic arts collections, rather than for contemporary arts performances and exhibitions.</p> <p>Where an authority provides the building for the museum free, or at nominal cost, or contributes 20% or more to a museum's running costs, then 100% of visitor numbers should be included here.</p> <p>An Authority may contribute a collection free of charge to another body's museum. That contribution will not count towards the 20% contribution floor for inclusion in this BVPI, unless it involves the donating Authority in associated revenue expenditure in the year equivalent to the 20% minimum.</p>
NEWSLETTER UPDATES	
COUNCIL METHODOLOGY	
DESCRIPTION OF PROCESS	<p>Pupil Numbers</p> <p>According to the regulations concerning pupils visiting the sites in organised groups, the school must have called to book their visit before their arrival. A member of staff may record a school party visiting the site, but if the group has not prearranged their visit it cannot be used for performance data. The schools visits diary of bookings is maintained by the education team and the final figures for this category are passed to me by the team at the end of each month.</p>

CALCULATION	Calculation of BV170c The figure is supplied by the education team from bookings made at the sites offering educational/school visits. These are Broad Street Museum, MOM, Old House and Market House Heritage Centre, Ross-on-Wye and Bromyard Heritage Centre. All bookings go through the education team at Broad Street and are reported by the team's administrator.
SOURCE DATA	
DOCUMENTATION TO BE KEPT	Monthly performance sheets.
COMMENTS	The definition of this BPVI seems to have changed and the reporting on this for the first 4 months of this year is therefore incorrect. This figure did not previously include our educators going into schools. If it is therefore permissible to count this we should be able to meet the target. However, setting the target over 7,000 for subsequent years is difficult, as this will then exceed the number of primary aged students in the county and will require repeat visits in any given 12 month period.
RESULT	

TARGETS		
2006/2007	2007/2008	2008/2009
6,250	7,000	7,100

	NAME	SIGNATURE	DATE
MANAGEMENT OWNER	Natalia Silver		
PERFORMANCE COORDINATOR	Andrew Hasler		
ADMINISTRATOR	Lara Latcham		
DATE METHODOLOGY AGREED WITH DISTRICT AUDIT (IF REQUIRED)			



Accreditation in the West Midlands

All you need to know about the Scheme

The Museums Accreditation Scheme is upon us. In our effort to keep you up to date with all the relevant information we have produced this fact sheet to introduce the new Scheme and present the plan for the West Midlands. The information in this paper has been kept brief so for more information you must refer to the Accreditation Guidelines.

What is the Accreditation Scheme?

Introduced in 1988 in the United Kingdom, as the Registration Scheme for Museums and Galleries, Accreditation is a **minimum standards scheme** that measures museum performance against **minimum** accepted professional standards. It provides an assurance of quality and public accountability, because it addresses a number of fundamental questions which the public and funding authorities are increasingly asking museums. Embraced by the whole sector because of its inclusive character, it has helped more than 1860 museums in the country to improve their standards in collection management and visitor care, reduce their documentation backlogs and attract funding.

Accreditation is a voluntary scheme, grown from an internal demand by museums, and has been developed after a major consultation process with the whole heritage sector. The importance of the scheme lies in the fact that it is a **minimum standards scheme equally applicable to all museums** irrespective of size or status. Accreditation is not concerned with the scale of operations but whether the systems and services in place are appropriate to each individual museum.

Accreditation provides a **recognized national minimum standard** for museums enabling them to demonstrate whatever their size or nature a shared ethical basis and a common framework of operation. In the West Midlands there are more than 140 Registered museums, ranging from National and large Local Authority museum services to small independent museums run entirely by volunteers.

To reflect the progress in the museum sector and ensure that the standard remains relevant to the expectations of the public the Scheme was reviewed and revised. In 2004 the Accreditation Standard was launched. The scheme was renamed to Accreditation to better reflect the purpose and the value of the Standard, and the achievement of the museums that become Accredited.

Why should our museum apply for Accreditation?

The standard has been developed by the whole museum community and has been endorsed by a wide range of organisations involved in the preservation of cultural heritage such as the Department of Culture, Media and Sports (DCMS), the Heritage Lottery Fund (HLF), Local Authorities etc.

Accreditation has been used as a powerful political tool for museums to argue for their funding when they are faced with financial cut backs. It provides more funding opportunities as many Funding Bodies consider only applications from Accredited Museums. Some of those are the: MLA West Midlands Museum Development Fund, MLA Prism Fund, MLA/V&A Purchase Grant Fund, Gulbenkian Prize. Also, HLF considers Accreditation as a factor in its assessment of applications from museums.

Accreditation has helped museums raise their standards of work and profile within the museum community; because accredited museums are able to demonstrate to their stakeholders, potential donors or project partners that they are committed in achieving and maintaining recognised professional standards in all aspects of their operations. It has enabled museums to benchmark their performance and plan for further development of their service.

These are the top ten benefits of the Museums Accreditation Scheme identified by museums in a survey conducted by MLA in 2002:

- Demonstrates the museum's commitment to achieving and maintaining a professional standard;
- Encourages museums to maintain a basic standard and work towards a higher standard;
- Identifies aspects of the museum's organisation and activities requiring further attention;
- Provides a useful framework when creating policies and undertaking planning;
- Provides an ethical basis for the museum's activities in relation to acquisition and disposal;
- Demonstrates both within the museum sector and to external organizations that the museum meets recognized UK-wide standards;
- Demonstrates the museum's standard to national and local government;
- Provides eligibility for grant aid, and attracts other external grants;
- Demonstrates that the museum is a fit recipient for potential sponsorship and donations;
- Gives access to advice from museum organizations and from curatorial advisors.

What does Accreditation cover?

Accreditation sets out foundation level standards for museums across four key areas: Governance and Museum Management, User Services, Visitor Facilities and Collection Management.

New and developed requirements have been included in the new Standard. This is a brief summary of those:

Governance and Museum Management

- submit a copy of their **forward plan**. It must include the museum's mission statement, key aims, specific objectives and a spending plan. The forward plan should be appropriate to the size and services of each museum and can include anything from producing a leaflet, re-displaying one case to building extra storage facilities.
- have an **emergency plan**, which is available to show to the assessing organisation on request. The plan should be reviewed at least every five years.
- have formal procedures for staff managements and development -(the term 'staff' refers both to paid and voluntary members).

User Services

- have **published information** about their location, opening arrangements and services.

- have services and facilities that are **accessible by a wide range of users**.
- **consult** with users on a regular basis
- **interpret collections** in more than one method for the users' benefit

Visitor Facilities

- provide a range of **accessible public facilities**, or have information about their nearest location
- have **internal and external signage and orientation**, when possible
- have proper arrangements for **customer care**
- have in place arrangements for **maintaining areas used by visitors**

Collections management

- have a written **documentation procedural manual** to guide staff how collections are documented.
- have a **documentation plan** to address backlogs in documentation.
- get expert advice on security arrangements and implement the recommendations.

For more in depth information please refer to the Accreditation Guidelines.

How can our museum apply for accreditation?

Timetable for invitations

The Scheme will roll out over the next five years (2005-9) until all museums already Registered under Phase II have re-applied for Accreditation. Museums will be invited to re-apply according to a county by county timetable which has been approved by MLA. Museums will be formally informed by letter. The first museums to be invited are the Hub partners and museums with Designated collections. All museums will have a six month period to prepare and submit their application from receipt of their invitation letter.

Museums wishing to apply for the first time should first contact MLA West Midlands to discuss in further detail how to make an application.

The application process

Applicant museums are required to complete an application form which will be received by MLA West Midlands, the assessing organisation, demonstrating to what extent the museum meets the requirements for the Accreditation Standard. In addition, museums are asked to submit additional documents to support their application. To guide you as to which documents are required, we have produced a fact-sheet which lists the documents of supporting evidence.

For the first time applicant museums have the ability to submit an electronic form. An exclusive password to each museum will be issued by MLA which will provide access to the on-line form. This method is designed to be in line with government's expectations of an e-society, and also to meet the changing expectations and needs of applicants and assessing organisations. The online application form is very easy to complete and has many user friendly features. Some of those are:

- you are able to save it and work on it whenever you have time,
- the form is saved online and not on your computer system so you can access it from any computer terminal (such as work, library, home),
- because it is store on an online server even if your system crashes down you will not loose your hard work, you are able to make as many alterations you want before you submit it,
- it does not allow you to submit it unless all the mandatory field are filled thus you will not forget to include important information,
- it prompts you to attach documents.

Full training on the online application form will be given. If you are concerned how this will affect your organisations ability to apply for Accreditation please contact us

Assessing the applications

MLA is responsible for administering the scheme on behalf of the museum community. MLA West Midlands is the assessing organisation for museums in the West Midlands. All applications will be returned to MLA West Midlands where they will be assessed according to the information supplied. If clarification is needed then museums may be contacted directly. Also, MLA West Midlands is required to visit all new applicants in the scheme and at least 10% of museums applying within each period.

Based upon the information provided in the application form and any assessment visits, MLA West Midlands makes a recommendation on the status to be awarded by MLA and the Accreditation Committee. The recommendation is presented at a panel meeting (comprised of members of the Accreditation Committee). The Accreditation panel, depending on the evidence that has been submitted has the final decision as to whether a museum attains:

- Full Accreditation –the museum satisfies all the criteria
- Provisional Accreditation – the museum is unable to meet all the criteria immediately but has demonstrated willingness to work towards achieving what is required within one year.

Museums are formally advised of their awarded status by MLA West Midlands.

Retaining Accredited Status

After a museum has been awarded Accredited status it needs to show evidence that it continues to meet the standard. [.....]

Until 2004 Registered museums had to submit an Annual Return form, but from 2005 a bi-annual Information Return will be operated for all museums. Thus, phase II Registered museums will need to submit their first bi-annual Information Return in 2006 and museums that will apply for Accreditation in 2005/2006 will need to complete an Information Return in 2007/2008.

What sources of information, support and advice are available?

[.....]

If you require pre-application support and advice please contact,

Katerina Kremmida, Accreditation Advisor at:

katerina.kremmida@mlawestmidlands.org.uk

Tel: 0121 631 5804 or 0121 303 3969

If you are a new museum and would like to apply for Accreditation or you wish to discuss the assessment process please contact,

Paula Brikci, Standards & Stewardship Officer at

paula.brikci@mlawestmidlands.org.uk

Tel: 0121 631 5814

The Accreditation Standard is available from:

<http://www.mla.gov.uk/action/accreditation/00accreditation.asp>

READING MUSEUM SERVICE

CORPORATE MEMBERSHIP SCHEME

MEMBERSHIP & BENEFITS

The two main aims of the scheme are to integrate the Museum Service, its galleries and collections, into the commercial life of Reading and to subsidise the running of the schools loans service. All the income we receive from our Members helps to support this service which takes real objects from the collection out to classrooms throughout Berkshire and beyond. The Loans Service is an important community resource which is recognised nationally for its excellence. It provides unique learning resources for children throughout the region.

Membership is £1,000 p.a. from the date of joining. The benefits to Members are as follows:-

- A Flying Object or a Flying Painting delivered to your premises. The objects are currently changed after 6 months, the paintings after 12 months. An extra display unit/painting can be hired at the additional cost of £250 p.a. each.
- One free hire p.a. of the John Madejski Art Gallery.
- A 20% discount on the hire of any other gallery in the Museum, once p.a.
- Invitations to the members' networking lunches in the John Madejski Art Gallery
- Invitations for you and your staff to Museum and Arts & Theatres events, plus concessionary rates for children's holiday activities
- One free talk about the Museum and its work given to your staff
- Acknowledgement of Corporate Members in our publicity for one exhibition p.a. and special members' rates for sponsoring any other exhibition
- "Adopt a Box". Members can select (free of charge) two boxes to be repackaged as part of the School Loans development project. These will carry the member's branding and the Museum will provide updates on their use in schools around the region
- The names of the Corporate Members are displayed on the Museum's website

For further details please see the Corporate Members' section of the Museum website – www.readingmuseum.org.uk

COMMISSION FOR SOCIAL CARE INSPECTION REPORT ON SERVICES FOR PEOPLE WITH LEARNING DISABILITIES AND THE COUNCIL'S ACTION PLAN

PORTFOLIO RESPONSIBILITY: SOCIAL CARE ADULTS AND HEALTH

CABINET

21ST JUNE 2007

Wards Affected

County-wide.

Purpose

To notify Cabinet of the Commission for Social Care (CSCI)'s inspection report on services in Herefordshire for people with learning disabilities and seek Cabinet's approval for the Council's action plan to remedy weaknesses identified in the report.

Key Decision

This is not a Key Decision.

Recommendation

THAT Cabinet welcomes the report as an important contribution to the improvement of services for people with learning disabilities in the County, accepts the inspectors' judgement and their twenty-seven recommendations, and approves the Council's action plan to address them.

Reasons

This is a statutory inspection of services in Herefordshire to which the Council is obliged to respond with a detailed, robust action plan.

Considerations

1. CSCI carried out the inspection in January and February 2007. The report of the inspection is at Appendix 1. CSCI's easy-read version of the report is at Appendix 2.
2. While acknowledging that the Council has taken important steps towards creating modernised, better services that would provide better value for money following the detailed needs assessment and scrutiny review in 2006 and Cabinet's approval of the modernisation programme and associated investment in December 2006, the report identifies significant weaknesses in current services. The overall judgement of the inspectors is that the Council was not serving people with learning disabilities well and that there were uncertain prospects for future improvement.
3. The inspectors stress that the weaknesses need to be addressed not just by Adult Social Care but across the whole Council and its partners, including the PCT and the

Further information on the subject of this report is available from
Steve Martin, Adult Social Care Improvement Leader on (01432) 261877

voluntary, community and private sectors.

4. The most important weaknesses needing urgent attention are those concerning safeguarding, assessment and care management. In particular, although the Council had been successful in raising awareness of adult protection and generated a large increase in the number of safeguarding referrals in respect of adults with learning disabilities, the majority of the 530 people known to services had not had the expected minimum of a annual review of their needs and some had waited much longer.
5. Action has been taken already to address this backlog of reviews, through the engagement of an independent team of social workers. They have completed more than 50 reviews and a programme is in place to clear the backlog entirely by October 2007. Permanent additional staff are being recruited to ensure there is no recurrence of the backlog. The adult protection arrangements for all groups, including learning disabilities, are to be reviewed and re-launched.
6. The main other identified weaknesses and recommendations concern:
 - ensuring that the Council's and partners' plans and commissioning of services are comprehensive, integrated, realistic, properly resourced and prioritised to deliver successfully high-performing modernised services that maximise independence, well-being and choice;
 - better empowering people with learning disabilities and their carers, particularly by means of self-directed support (direct payments and individualised budgets), advocacy for individuals and strengthening the role of the Valuing People People's Partnership Board, which brings together all key stakeholders and should ensure that service users and carers are influential in the planning, development and delivery of services;
 - tackling inequalities and providing greater opportunities for people with learning disabilities, including through meaningful employment and better health care;
 - ensuring that the capacity is in place to deliver the radical improvements the Council and partners want to achieve, in terms of the staff and their skills, the medium-term commitment of the financial resources, and the ICT and other systems to support effective and efficient services.
7. The proposed action plan to address the recommendations is at Appendix 3. The lead inspector and the CSCI relationship manager indicated at the presentation of the report that they believe the plan to be an appropriate and robust response. In particular, they agree with the identified priorities, not least in according top priority to safeguarding, assessment and care management.
8. Cabinet has already approved – prior to the inspection – ring-fenced investment of £601K in 2007-08 to begin the modernisation of services, the release of the first phase of which has begun in response to a detailed business case. Decisions about the medium-term investment programme to complete the modernisation and provide much better services and value for money will need to be considered as part of this year's performance improvement cycle.
9. Substantial additional capacity has already been put in place to deliver the necessary improvements. There is now a dedicated head of service for learning disability services; an interim Improvement Leader for the whole programme of adult social

care improvement, whose role is likely to be subsumed in due course by a Change Manager, interviews for which are about to take place; as well as the strengthening of adult protection and assessment and care management staffing. In addition, two former directors of social care, each with a highly successful track record, not least in respect of learning disability services, have been commissioned to help the Council deliver the plan.

10. The implementation of the action plan will be rigorously managed as part of the overall programme for adult social care improvement, and therefore as part of the Council's comprehensive business transformation programme. Exceptions will therefore be reported to Cabinet as part of that programme. However, in view of the importance of this issue and its serious implications for the Council's reputation and rating by external inspectors, it is proposed that, in addition to monthly reports to the lead Cabinet member, there should be regular reports on progress to the Adult Social Care and Strategic Housing Scrutiny Committee and a report to Cabinet in October. This is against the background of CSCI intending to review progress formally in six months' time (although CSCI has not programmed a further inspection, this could happen were the Council's progress in implementing the plan be deemed unsatisfactory).
11. The Plan will be further developed and maintained as a live document in the light of progress and experience. As a result of the CSCI embargo of the report until 11 June, it has not been possible to conduct consultation with all stakeholders, including users and carers. This will now be done and the plan further improved, where necessary, in the light of that.

Risk Management

The main risk to the implementing the action plan is that we will not have all the necessary resources (human, financial and systems). These risks are being addressed by the measures described above and the details set out in respect of each of the recommendations in the action plan.

Alternative Options

There are no alternative options.

Consultees

In view of the embargo applied by CSCI to the report, consultation to date has necessarily been limited to managers in the Council, the PCT and the Chair of the Valuing People Partnership Board. There will now be further consultation and engagement with other stakeholders, including users and carers, principally through the Board, as the plan is further developed and rolled out.

Appendices

Appendix 1 – Commission for Social Care report *Inspection of services for people with learning disabilities Herefordshire Council – January/February 2007*

Appendix 2 – Easy-read version of the report

Appendix 3 – The Council's proposed action plan in response to the report

Background Papers

None identified.



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 (Recommendations 13-14, 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			
	<ul style="list-style-type: none"> ❖ 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 		

Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
11&12.1	Appoint independent team to clear review backlog	<p>Work commenced: 44 reviews completed, 12 more underway</p> <p>Backlog to be cleared</p> <p>Monthly progress reports</p>	<p>May 07</p> <p>October 07</p> <p>From June 07</p>	<p>Backlog cleared.</p> <p>Opportunities for increased independence identified</p> <p>Programme established for further, more detailed assessments, where necessary.</p> <p>All service users to have had reviews in past 12 months</p>	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	<p>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.</p> <p>Supported by intensive training of managers and staff (including stakeholders) in the new processes</p>	<p>New structure and staff in post, with new processes functioning (subject to any further development dependent on implementation of <i>Herefordshire Connects</i>)</p> <p>Training programme carried out</p>	<p>Dec 07</p> <p>Oct 07 to Oct 08</p>	<p>No recurrence of backlog/ quality reviews carried out/improved outcomes for individuals/higher levels of customer satisfaction</p> <p>Managers and staff able to carry out the new processes effectively</p>		CN	SC
11&12.4	<p>Improved performance enabled by means of high-quality, timely management information through implementation of <i>Herefordshire Connects</i>.</p>	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	<p>Review audit processes of excellent authorities</p> <p>Audit tool identified</p> <p>Put in place best practice model</p> <p>Brief managers and staff</p> <p>Undertake audit with the new tool</p>	<p>July 07</p> <p>Aug 07</p> <p>Sept 07</p> <p>Sept 07</p> <p>Dec 07</p>	<p>Audit arrangements that integrate performance management into supervision</p> <p>All managers and staff clear about processes and expectations (quality standards, recording, timescales)</p> <p>Audit confirms that robust arrangements are operating</p>		CN	SC

Finance / Budget Allocation		Links to Other Plans	
Ring-fenced allocation from the modernisation fund		<p>The development of a comprehensive QA strategy to underpin all aspects of learning disability services (see Recc 15)</p> <p>The general adult social care workstream to re-engineer business processes for access, assessment and care management</p>	
Risks		Mitigation	
<ol style="list-style-type: none"> 1. Difficulty recruiting to the new posts 2. Disconnection from /slippage in the <i>Herefordshire Connects</i> Programme 3. Managers and staff have insufficient understanding and confidence in the new processes 		<ol style="list-style-type: none"> 1. High quality, targeted recruitment campaign 2. Close working with the <i>Connects</i> team to ensure the programmes are aligned and delivered together 3. Conduct intensive training; review impact; further training/coaching as necessary 	

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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	<ul style="list-style-type: none"> ❖ 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							
<i>Ref</i>	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head of Service
	<ul style="list-style-type: none"> ❖ 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 						
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

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		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				

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10.3	Increase capacity for contract monitoring	Additional contract monitoring officer in post	Dec 07	Only commissioning high quality services		MS	SC
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

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	procedures and standards	managers and head of service Enforcement action by managers	Immediate	system for AP			
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

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10.7	Engage providers in developing a self-audit tool	Hold event for providers and service users Tool in place and being applied	Sept 07 Jan 08	Providers aware of best practice and adults safeguarded, as indicated by commissioning intelligence and auditing		LH	SC
Finance / Budget Allocation				Links to Other Plans			
Ring-fenced allocation from the modernisation fund							
Risks				Mitigation			
<ul style="list-style-type: none"> 4. Difficulty recruiting to the new posts 2. Elected members engaging in training 				<ul style="list-style-type: none"> 4. High quality, targeted recruitment campaign 2. Gain group leaders' commitment , raise awareness at induction training and prioritise in the overall members' training programme. 			

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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.	<ul style="list-style-type: none"> ❖ 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							
	<ul style="list-style-type: none"> ❖ 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

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	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			
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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			

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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.	<ul style="list-style-type: none"> ❖ No demonstrable link between protection procedures of children's services and those for adults. ❖ Need to improve quality of the transitions process 					
Council Response							
	<ul style="list-style-type: none"> ❖ 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/

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	multi-agency transitions pathway	adults and CYP staff by Connexions Pathway in place Feedback mechanism agreed and in place	Dec 07 Dec 07	embedded across all agencies, leading to smooth transition for young people User and carer satisfaction			A Hea
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

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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

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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

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Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation for modernisation programme	Children and Young's People Partnership Plan
Risks	Mitigation
<ol style="list-style-type: none"> 1. Shared data-base, protocols and training not in place on schedule owing to inadequate capacity 2. Difficulty recruiting to transition social worker post 	<ol style="list-style-type: none"> 1. Prioritise 2. High-quality, targeted recruitment campaign

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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	<ul style="list-style-type: none"> ❖ 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							
<ul style="list-style-type: none"> ❖ 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	<p>To identify procedural (standards) needs / gaps and create priority list.</p> <p>To establish methodology (document) for</p>	<p>August 2007</p> <p>August</p>	<p>Comprehensive list of procedures defined.</p> <p>Clear and consistent approach to</p>		AHas	TG/SC/ AHea

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

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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

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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	<ul style="list-style-type: none"> ❖ 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							
<ul style="list-style-type: none"> ❖ 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

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

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		beds from 189 to 151 Increase in number of people in own home and accessing community services from 79 to 126	2011				
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 Increase in the daily attendances in community settings from 69 to 167 <i>Intermediate targets TBD</i> Review of processes, structures and job descriptions	2011 2011 Sept 07 Dec 07				

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

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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			
<ol style="list-style-type: none"> 1. Chosen partner not able to offer sufficient choice of supported accommodation 2. Users and families resistant to moving to supported Accommodation 3. <i>Herefordshire Connects</i> doesn't deliver the necessary ICT systems on time 4. Resources team don't have the capacity to support new costing arrangements 				<ol style="list-style-type: none"> 1. Close monitoring of performance; work with partner and Strategic Housing and Homepoint to identify opportunities 2. Full engagement with users and families from the outset 3. Work closely with the <i>Connects</i> team to align programmes 4. Work closely with Resources from the outset 			

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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	<ul style="list-style-type: none"> ❖ Market management underdeveloped ❖ Contract monitoring not strong, with over-reliance on care management 					
Council Response							
<ul style="list-style-type: none"> ❖ 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) 							
<i>Ref</i>	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

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

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	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				

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		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 <i>For further details see Recc. 3</i>	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			

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

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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.	<ul style="list-style-type: none"> ❖ 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							
<ul style="list-style-type: none"> ❖ 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

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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

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		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

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			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

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Finance / Budget Allocation	Links to Other Plans
Ring-fenced allocation from modernisation fund	As above
Risks	Mitigation
<ol style="list-style-type: none"> 1. Inability to recruit to posts. 2. Users/families resistant to change. 3. Employers reluctant to offer opportunities. 4. Resistance to changed travel arrangements due to perceived Increased risk 	<ol style="list-style-type: none"> 1. High-quality, targeted recruitment programme. If necessary, consider market supplements. 2. Full consultation/engagement with them from the outset. 3. Pro-active work with employers, and support for individuals in the recruitment process 4. Risk assessment and management with users and families

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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.	<ul style="list-style-type: none"> ❖ 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							
<ul style="list-style-type: none"> ❖ 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

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	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

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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

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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

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		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

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		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

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

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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							
	<ul style="list-style-type: none"> ❖ 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

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		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 Overall programme team in place and operating Fully developed prioritised programme	Done Done, but gaps to be filled July 07	All areas for inclusion identified, together with gaps, leadership and capacity issues Robust , detailed plans for each project, including clear, accountable leadership, appropriate capacity, funding , risks and their mitigation, and interdependencies between projects		SM	GH

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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			
<ol style="list-style-type: none"> 1. Insufficient capacity to deliver the whole programme 2. Insufficient integration with <i>Herefordshire Connects</i> 				<ol style="list-style-type: none"> 1. Identify capacity requirements as an integral part of developing the overall programme and individual work-streams; streamline/rationalise/prioritise the programme and work-streams, integrating with other sources of capacity, notably <i>Herefordshire Connects</i> 2. Integrated planning and implementation from the outset 			

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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.	<ul style="list-style-type: none"> ❖ 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							
	<ul style="list-style-type: none"> ❖ 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

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	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. Draft modernisation plan 2008-11 produced	July 07 Sept 07	Robust plan approved, including the resources and other capacity to implement it fully		MM	SC

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		Plan approved, including the resources and other capacity to implement it fully	Nov 07				
23.3	Performance manage the implementation of the plans	Quarterly reports to the Service Design Group	Commence August 07	Plans implemented successfully		MM	SC
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

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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			
<ol style="list-style-type: none"> 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 				<ol style="list-style-type: none"> 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.	<ul style="list-style-type: none"> ❖ 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							
	<ul style="list-style-type: none"> ❖ 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

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	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

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

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Finance / Budget Allocation	Links to Other Plans
LDDF and HC funding for the support officer	LD single service plan
Risks	Mitigation
<ol style="list-style-type: none"> 1. Failure to recruit VPPB officer 2. Reviewed timescale may lengthen to enable wider input into the the process from Service Users in particular. 	<ol style="list-style-type: none"> 1. High-quality, targeted recruitment ; if essential, consider market supplement 2. Engage all partners and networks at the beginning and agree timescale to enable input at regular meetings.

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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.	<ul style="list-style-type: none"> ❖ No carers' strategy ❖ Users and carers not fully involved in strategic planning, development and evaluation of services 					
Council Response							
	<ul style="list-style-type: none"> ❖ 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

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		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			

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		begin to implement new specification Brief Council and partners' managers and staff to ensure understanding of roles and responsibilities	May 08	and provider 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 Develop strategy with carers and get VPPB approval	June 07 April 08	Carers support the strategy; thereafter strategy implemented (measures to be included in the strategy)	C62	JW	SC
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			

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		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			

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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							
<ul style="list-style-type: none"> ❖ 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

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	Communications Strategy			Service Design Group Strategy includes clear feedback mechanisms for family carers and people with LD, including audits, questionnaires and locality forums			
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

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7.4	Review service specifications to ensure routine feedback on services from people with learning disabilities and their carers	<p>Carry out a desk top review of all contracts</p> <p>In discussion with providers, amend specifications where required</p> <p>Ensure all new contracts clearly define processes for gathering and acting on feedback</p>	<p>Sept 07</p> <p>Dec 07</p> <p>March 08</p>	<p>All contracts explicitly make this a requirement</p> <p>Improved services and higher levels of customer satisfaction</p>		MS	SC
Finance / Budget Allocation				Links to Other Plans			
Combination of existing, mainstream budgets and ring-fenced allocation from the modernisation fund				<p>Access, assessment and care management workstream</p> <p>Market management workstream</p>			

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Risks	Mitigation
<ol style="list-style-type: none"> 1. Inability to recruit the Partnership Officer 2. Insufficient capacity within the commissioning unit for the desk top review 	<ol style="list-style-type: none"> 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

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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

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	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 <i>Herefordshire Connects</i>			
8.3	Business process engineering, review of capacity and structure of community team, and supporting new ICT systems – in conjunction with <i>Herefordshire Connects</i>	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

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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.	<p>Interim development contract with providers (HCIL) for brokerage advice and information services to support continuing IB work</p> <p>Care brokerage model developed within community team</p> <p>Scoping and feasibility options for independent brokerage and information services</p>	<p>Sept 07</p> <p>Sept 07</p> <p>Sept/Oct 07</p>	More people in receipt of individual budget (target to be set)		MS	SC

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		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

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Finance / Budget Allocation	Links to Other Plans
Mainstream budget in place; future provision TBD in performance improvement cycle	<p>Access, assessment and care management workstream</p> <p style="text-align: center;">Market management workstream</p>
Risks	Mitigation
<ol style="list-style-type: none"> 1. VPPB won't support the change plan 2. Insufficient capacity to develop and implement the change plan 3. FACS and ILF charging a disincentive 4. Insufficient integration with <i>Connects</i> 	<ol style="list-style-type: none"> 1. Full engagement with VPPB from the outset 2. Business case for additional capacity; integration with <i>Herefordshire Connects</i>; weaknesses in procedures and standards addressed by March 2008 3. Agree procedures/approach to charging across FACS, ILF and IB 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.	<ul style="list-style-type: none"> ❖ 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		
<ul style="list-style-type: none"> ❖ 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 		

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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

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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	Reviews of carers contingency and long term plans	Dec 07	Carers are confident about the long- term plans for their cared-for person		CN	SC
	Identification of all BME carers	Review of support Incorporate findings	Dec 07				

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		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 them.	<ul style="list-style-type: none"> ❖ Comprehensive information/directory not available ❖ Need for information in range of formats ❖ Range of printed leaflets limited 					
Council Response							
	<ul style="list-style-type: none"> ❖ 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

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		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
		Identify and agree resources.	Aug 07	Clear understanding of cost and agreed budget in place.		CN	SC
		Communication strategy produced	Aug 07	Stakeholders aware of communication channels		RG	SC
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

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		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.			

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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

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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	<ul style="list-style-type: none"> ❖ Functional IQ definition not an appropriate basis for meeting needs ❖ Some users and carers not clear about eligibility criteria 					
Council Response							
	<ul style="list-style-type: none"> ❖ 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

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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			

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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							
<ul style="list-style-type: none"> ❖ 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

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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							

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Risks	Mitigation
<ol style="list-style-type: none"> 1. Insufficient managerial capacity to develop 2. Inability to commission the service 3. Commissioned service fails to attract sufficient advocates 	<ol style="list-style-type: none"> 1. Engage temporary officer 2. Managed process to attract widest possible expressions of interest 3. Use of <i>Herefordshire Matters</i>/local media; invite Council and PCT staff to become advocates

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Directorate Priority		Developing more inclusive communities; promoting choice and independence
Ref.	CSCI Recommendation / Objective	Context / Evidence
18	The Council should ensure that equality and diversity issues are embedded at both strategic and individual levels in learning disability services	<ul style="list-style-type: none"> ❖ <i>Valuing People</i> agenda must be addressed corporately and across the <i>Herefordshire Partnership</i>, 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
19	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.	
24	The Council should ensure that all its departments are responsive to the needs of people with learning disabilities and promote their inclusion	

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		❖ 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							
	<ul style="list-style-type: none"> ❖ 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. <p style="text-align: center; margin-top: 20px;">See also the response and actions for Recc 25 in respect of employment opportunities</p>						
Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
18.1	Propose to Corporate				LA		

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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

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				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

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		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)			
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Finance / Budget Allocation	Links to Other Plans
<p style="text-align: center;">Corporate diversity budget</p> <p>Mainstream budgets in adult social care and across the Council</p>	<p>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</p>
Risks	Mitigation
<ol style="list-style-type: none"> 1. Lack of sustained commitment within the Council and by partners/contractors. 2. Capacity of LD services to cope with the consultation work 	<ol style="list-style-type: none"> 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

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		<p>allocated by all GP practices to their patients with LD.</p> <p>PCT will ensure that LD service users with a specific read-code are cross-referenced with the screening databases.</p> <p>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.</p> <p>PCT to verify if people with learning disabilities who</p>	<p>October 07</p> <p>October 07</p> <p>October 07</p>	<p>screening and 80% or higher for cervical screening. [Outcome measure]</p> <p>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]</p> <p>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-</p>			
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		<p>have heart disease or diabetes are reviewed by GPs annually.</p> <p>PCT to verify which practices offer a diabetes programme including diabetic retinopathy.</p> <p>PCT to establish a Local Enhanced Scheme for learning disabilities with GP practices using additional allocations from the Local Delivery Plan.</p>	<p>December 07</p>	<p>centred plans and approaches. <i>[Outcome measure in terms of improved health]</i></p> <p>Retinal screening for early detection of diabetic retinopathy is offered to people with a learning disability as part of a structured diabetes programme.<i>[Outcome measure, e.g reduction in rate of diabetic retinopathy]</i></p>			
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Finance / Budget Allocation	Links to Other Plans
<p>PCT has allocated the following development monies in the LDP for 07/08:</p> <p>£43,000 for the Local Enhanced Scheme.</p> <p>Band 6 Community Nurse post – continuation of post from 06/07</p> <p>½ WTE psychology post (8b) – continuation of post from 06/07</p>	<p>Learning Disabilities Commissioning Plan 2007</p> <p>Performance targets set by the former West Midlands South Strategic Health Authority for learning disabilities.</p>
Risks	Mitigation
<p>1. Over-reliance on the CDLT to deliver health equalities</p>	<p>1. Partnership Board to secure appointment of PCT lead for its Health sub-group (achieved).</p>

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.	<ul style="list-style-type: none"> ❖ 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			
<ul style="list-style-type: none"> ❖ 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 			

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Ref	Action	Milestones	Timescale (+ update)	Success Criteria	PI Ref.	Lead	Head Of Service
25.1	Whole Council commitment secured and cascaded	<p>Explicit commitment by Cabinet as part of its approval of this plan</p> <p>Cascaded to managers and staff throughout the Council</p>	<p>June 07</p> <p>July 07</p>	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.	<p>Accessible application forms and adverts</p> <p>Best routes to reach the target audience identified</p> <p>Protocol for developing job opportunities/creation from existing posts</p> <p>Training for managers, including</p>	<p>Dec 07</p> <p>Dec 07</p> <p>Dec 07</p> <p>Dec 07</p>	<p>Clear protocols for managers to operate against</p> <p>Three people with learning disabilities</p>		<p>ST</p> <p>ST</p>	<p>DJ</p> <p>DJ</p>

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		incorporation of protocols into recruitment training Accessible and supportive approach to interviews	January – March 08	employed by the Council		ST	DJ
25.3	Review all Council Department contracts with organisations to identify potential employment opportunities.	Audit of all Council contracts across all Departments Procedure established for potential employment opportunities to be flagged with the Central Recruitment Team	January 08 March 08	All council strategic partners/contractors explicitly identify employment opportunities for people with learning disabilities Five People with learning disabilities employed by Council's partners		DH DH / MS ST/DH	DP SC/DP 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

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				advice to partners All relevant contracts include targets for the employment of people with learning disabilities		DH	All heads of service
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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			
		Longer-term targets	Sept 08	New social enterprises and opportunities			

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

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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	<ul style="list-style-type: none"> ❖ 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

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26.2	<p>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)</p>	<p>Determine and agree governance arrangements</p> <p>Identify key stakeholders and establish links</p> <p>Establish workforce development group</p> <p>Multi-agency development workshop to determine themes and priorities</p> <p>Develop detailed project plan and agree measurable targets</p> <p>Baseline LD workforce profile and first draft workforce development plan</p>	<p>July 07</p> <p>July 07</p> <p>July 07</p> <p>Sept 07</p> <p>End Sept 07</p> <p>Jan 08</p>			JP	DJ/SC
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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
<ol style="list-style-type: none"> 1. Lack of collective ownership and partner engagement 2. Inadequate dedicated finance to implement the workforce development plan 	<ol style="list-style-type: none"> 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



Making Social Care
Better for People

INSPECTION OF SERVICES FOR PEOPLE WITH LEARNING DISABILITIES

Herefordshire Council

January/February 2007

COMMISSION FOR SOCIAL CARE INSPECTION

Launched in April 2004, the Commission for Social Care Inspection (CSCI) is the single inspectorate for social care in England.

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- Inspect all social care for adults in the public, private and voluntary sectors
- Publish annual reports to Parliament on the performance of social care and on the state of the social care market
- Inspect and assess 'Value for Money' of council social services
- Hold performance statistics on social care
- Publish the 'star ratings' for council social services
- Register and inspect services against national standards

INSPECTION OF SERVICES FOR PEOPLE WITH LEARNING DISABILITIES

Herefordshire Council

January/February 2007

Commission for Social Care Inspection

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Project Title: Inspection of Services for People with Learning Disabilities
Work Year: April 2006 to March 2007
Inspection Programme: Further information about inspections of similar services in other councils is available from: <http://www.csci.org.uk>
National Lead Inspector: Silu Pascoe
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Further copies: This report and an easy-read summary of the report are available from our CSCI website: <http://www.csci.org.uk>

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INTRODUCTION AND SUMMARY

Background

The purpose of the inspection was to evaluate social services' implementation of the national and local objectives relating to the social care needs of people with learning disabilities, and the quality of outcomes for service users and carers. The inspection team was particularly concerned to see how the council was responding to the *Valuing People* policy agenda. The fieldwork for this inspection took place between 22nd January and 2nd February 2007.

Herefordshire is a county with a population of approximately 177,800 and has one of the lowest population densities in England. Approximately one third of the population lives in Hereford City, just under a fifth in its five market towns, and the remainder in villages and hamlets dispersed across the rural areas. There was increasing diversity in the population with the largest single minority being Romany Travellers.

There were 531 adults with learning disabilities known to the council. In 2006, council research found that the national prevalence rate suggested that the council could expect there to be a further 91 adults with learning disabilities resident in the county who were currently not in contact with services.

SUMMARY

Overall we judged that people were not being served well.

There had been insufficient focus on services for people with learning disabilities in Herefordshire until the year before this inspection. We found that the majority of service users had not had their needs reviewed for some time and as a consequence the council could not be assured that these service users' needs were being appropriately met.

The council had been slow to fully implement the *Valuing People Strategy* at a local level and some key national requirements had not yet been shaped into effective strategies or programmes to support service delivery.

However, the council identified in early 2006, the need to develop a clear strategic direction for learning disability services. The subsequent production of the Learning Disability Needs Analysis Report and the council's Scrutiny Committee Review of learning disability services were key levers in raising the profile of this service user group. In December 2006, the council Executive agreed a programme of strategic change and additional investment for the service.

There was no coherent overarching strategy document for learning disability services but strategic priorities were set out in the Joint Commissioning Plan developed within the past year. The council was now engaged in a major change agenda to modernise services for people with learning disabilities.

Although there was an integrated model of service, there was a lack of local performance targets which demonstrated improved outcomes for service users and carers. There were no separate annual service or team plans for learning disability services and the Adult Social Care Plan for 2006/07 lacked much detail about this service area.

There had been inadequate work across all departments of the council to increase the social inclusion of people with learning disabilities. Service users and carers were not fully involved in strategic service planning, development and evaluation except on a very limited basis.

The Valuing People Partnership Board was not operating as an effective decision-making body and strategic driver of service improvement. Partnership working between the council and Primary Care Trust [PCT] and with the voluntary sector was well established but effective strategic relationships with the independent sector were under-developed.

Some building blocks to support improved commissioning had been put in place but not all the key elements of effective commissioning were yet developed. Commissioning and contracting capacity was limited and there was a need to clarify roles and responsibilities in relation to the cycle of planning, commissioning and procurement of learning disability services.

The council and its partners were only just starting to move away from a traditional pattern of service provision. Financial investment was heavily weighted towards funding residential care and day centre placements and consequently the current pattern of expenditure did not reflect either national priorities or more recent local strategic intentions.

Some work had been completed to both understand and improve Value For Money regarding learning disability services. However, insufficient attention had been given to maximising external funding streams for this service area.

Insufficient opportunities were available to promote the independence of people with learning disabilities. The range of services lacked both breadth and depth and much more work was required to enable people to have choice and availability of services, especially for those with profound and multiple learning disabilities and people whose behaviour challenged services. There was also an under-development of service provision to meet the needs of those people with learning disabilities in transition, both into adulthood and into old age.

There was evidence of some effective service delivery in relation to housing with support, and increasing the range of housing options was one of the key strategic objectives. Modernisation of day services had been slow but there were some new day and work opportunities established within the past year. Employment and work-based training opportunities were significantly underdeveloped. The council had not taken proactive steps to lead this work and had a poor track record of employing people with learning disabilities.

The council was committed to developing self-directed support and the number of Direct Payments had increased but from a low base and the building blocks had been put in place for the *In Control* Project.

The council did not provide a sufficient range of services to support carers in their caring role.

There was much work to do to improve organisational capacity, at both strategic and operational levels, to effectively address the needs of people with learning disabilities who were at risk of harm.

Implementation of person-centred planning had been uncoordinated and the development of person-centred plans was extremely slow. People with learning disabilities were not receiving a timely and responsive Assessment and Care Management Service. In particular, there was an unacceptably large backlog of reviews to be completed. There were few individually-tailored packages of care focused on outcomes for service users.

The council and its partners had recognised the need to improve the transitions process for young people with learning disabilities and this work was starting to be addressed at both strategic and operational levels.

Access to and the range of user-friendly information about services for people with learning disabilities were inadequate. Information for both existing and potential service users and carers about how people with learning disabilities qualify for what types of services was not clear.

There was neither a set of quality standards nor a systematic quality assurance framework for learning disability services. The outdated Information Communications Technology system for adult social care services was hindering efforts to improve data quality and management information.

The council was working to address equality and diversity issues but this was not well embedded in learning disability services. Equality impact assessments were underdeveloped and there were no specific equality and diversity targets integrated into the Adult Social Plan 2006/07.

The council and its PCT partner were making inadequate progress in addressing the healthcare needs of people with learning disabilities and tackling health inequalities although both organisations were working to improve access to primary care services.

The council and its partners had appropriately used the Learning Disability Development fund to invest in independent advocacy services. There was evidence of the effective use of skilled advocacy and facilitation on a group basis but access to individual advocacy was severely limited.

Overall we judged that capacity for improvement was uncertain

Until very recently there had been a lack of leadership in the council for learning disability services and overall there was little evidence of a track record of implementing and sustaining improved performance. In late 2006, the council had taken major decisions about the vision and strategic direction for this service area and subsequently additional capacity and resources had been committed to modernising the service.

Communication about the council's vision and strategic intentions was now underway with key stakeholders. There was a need to ensure that the main stakeholders who would be affected by the huge change agenda were fully involved at an early stage and kept engaged throughout in order to achieve positive outcomes for people with learning disabilities and their carers.

There were significant plans to modernise the service but it was too early to judge their effectiveness in terms of outcomes for people with learning disabilities and carers. The Joint Commissioning Plan for learning disability services was not yet supported by detailed plans for action for all three of the identified strategic objectives. Business planning needed further development to ensure that all relevant plans were consistently specific, measurable, achievable, realistic and time-limited and had identified resources where required.

There was considerable business change for the council. The current Adult Social Care Improvement Plan was focused on improving performance management, workforce development and planning, market management, fair access to care and charging policy. Four Implementation Action Plans had yet to be finalised at the time of the inspection. All of the five work-streams were of direct relevance to improving learning disability services and further progress in this specific service area depended on the effective implementation of the Improvement Plan. The council required an effective exit strategy to secure sustained service improvements once the external support currently in place was withdrawn.

Learning disability services lacked an integrated performance management and quality assurance framework and this was a key area for improvement to enable the council to achieve its strategic objectives.

Workforce planning and workforce development needed to be more strategic to support the modernisation of learning disability services. The council was taking steps to improve access, assessment and care management but the Community Learning Disability Team had not yet had opportunities to formally shape the planning and priorities of this work.

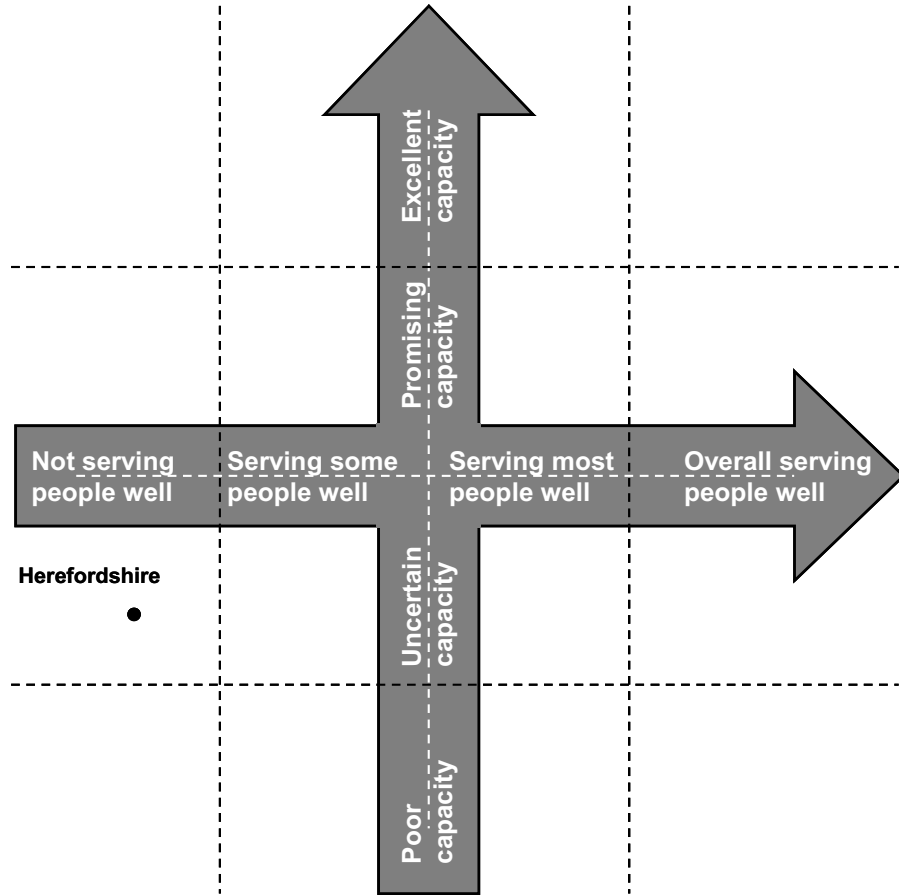
Strategic partnership working was not robust enough to ensure an appropriate supply of local service providers who could both manage and deliver the services required by the council in line with its newly agreed strategic objectives for the service. In particular, there was a need to develop and deliver preventative and universal services to promote the social inclusion of people with learning disabilities.

Many necessary improvements were still at the 'intent' stage and there was very considerable work to undertake before the new vision and strategic objectives for the service could have real impact on the lives of people with learning disabilities and carers. The council faced the additional challenge of a bigger strategic change as it progressed plans to create full integration of council and PCT functions in the form of a Public Service Trust. This change would have implications for the current partnership agreement between the council and PCT for learning disabilities services.

The huge programme of change and improvement was within a context of mounting budgetary pressures and the need to make efficiency savings. The capacity of management and staff to continue to arrange and deliver services, while implementing the improvement priorities and respond to the modernisation agenda needed to be closely risk managed.

These judgements are summarised on the matrix overleaf.

JUDGEMENT MATRIX



RECOMMENDATIONS

National Priorities and Strategic Objectives

1. The council and its partners should ensure that the Valuing People Partnership Board and its sub-groups operate more effectively and inclusively to support the delivery of key outcomes for service users and carers.
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.

Cost and Efficiency

3. The council with its PCT partner should continue to improve the economy, efficiency and effectiveness of learning disability services.
4. The council should ensure that commissioning and contracting processes are used to improve the quality of services commissioned.
5. The council with its partners should develop a strategy to access resources from outside the adult social care budget.

Effectiveness of Service Delivery and Outcomes for Service Users

6. The council should ensure that people with learning disabilities maximise their independence and choice through a broader range of services.
7. The council should routinely seek feedback from people with learning disabilities and their carers about the quality of services and act on this information.
8. The council should continue to promote self-directed support by increasing the take-up of Direct Payments and individualised budgets.

9. The council should work with carers to develop a better range of and access to services to support them in their caring role.
10. The council, with its partner agencies, should ensure that adult protection arrangements are more effectively managed at both strategic and operational levels.

Quality of Services for Users and Carers

11. The council should address the huge backlog of annual reviews to ensure that service users have their needs appropriately met.
12. The council should strengthen the Assessment and Care Management Service with regard to improving management oversight, processes, practice and recording.
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.
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.
15. The council should develop a comprehensive quality assurance strategy to underpin all aspects of learning disability services.
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 them.

Fair Access

17. The council should ensure that the Fair Access to Care Services eligibility criteria are clear to people with learning disabilities and their carers.

18. The council should ensure that equality and diversity issues are embedded at both strategic and individual levels in learning disability services.
19. The council should develop a programme of equality impact assessments for learning disability services and implement the changes necessary to address any adverse impact identified.
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.
21. The council should ensure that independent advocacy services are accessible on an individual basis.

Capacity for Improvement

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.
23. The council with its PCT partner should implement robust business planning arrangements for learning disability services.
24. The council should ensure that all its departments are responsive to the needs of people with learning disabilities and promote their social inclusion.
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 in the wider community.
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.
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.

STANDARD 1: NATIONAL PRIORITIES AND STRATEGIC OBJECTIVES

Strategy for Responding to National Priorities

- 1.1 The council and its partners had developed a new *Herefordshire Community Strategy 2006-2020* which was in line with the key national priorities of supporting people to live independently and having better access to local community services. The Strategy had four priorities for better outcomes, which were of direct relevance to promoting the social inclusion of people with learning disabilities, in particular the priority regarding "*improving public health, quality of life and promoting independence and well being for disadvantaged groups and older people*". The council's Corporate Plan included a specific performance indicator related to increasing the number of people with learning disabilities helped to live at home.
- 1.2 The council and its partners had not yet fully implemented the requirements of the *Valuing People Strategy* guidance. The Valuing People Partnership Board [VPPB] was supported by the council but it was not operating as an effective decision-making body and strategic driver of service improvement. The modernisation of learning disability services had only recently begun having become a council priority within the past 12 to 18 months.
- 1.3 There was no coherent overall strategy document for responding to national priorities regarding learning disability services. A number of strategic statements were contained in the Joint Commissioning Plan produced in November 2006. Three local strategic priorities had been identified as Accommodation and Support, Day Opportunities and Assessment and Care Management. However, these priority areas had yet to be all shaped into SMART project plans.
- 1.4 There was no carers' strategy and the recently developed Joint Commissioning Plan for Carers was not

supported by an effective action plan nor resourced. The council did not have a Carers' Lead with responsibilities for taking forward the implementation of the Carers (Equal Opportunities) Act 2004.

- 1.5 People with learning disabilities were one of the priority groups for using the national Preventative Technology Grant [Telecare] as part of the development of Integrated Community Equipment Services [ICES]. Approximately 12 per cent of people with learning disabilities known to the council currently have equipment on loan from ICES.

Local Strategic Objectives, Priorities and Targets

- 1.6 Until the past year, the council and its partners had developed few local strategic objectives and targets for learning disability services. The VPPB had set its own annual local objectives but it was not clear how these systematically linked to the strategic objectives of the Learning Disability Programme Board.
- 1.7 There was not a strong enduring infrastructure of sub-groups to support the Partnership Board work programme and not all of its targets had been met. The sub-groups had only recently been fully constituted to take forward action plans. The performance management role of the VPPB was weak.
- 1.8 The Adult and Community Services Directorate [A&CS] had an Adult Social Care Plan for 2006/07 and a few targets for learning disability services were included in this service plan. The priorities set out in the Adult Social Care Plan were expected to inform the development of an individual action plan for the five service areas. There was no individual service plan or team plan for learning disability services.
- 1.9 The A&CS Directorate faced significant challenges in relation to the quality of existing data. Confidence in the performance data being produced had been relatively low which impacted on the council's ability to set realistic and meaningful targets.

Continuous Improvement

- 1.10 The council's Scrutiny Committee had completed a review of learning disability services during 2006. This review together with a Needs Analysis Report had helped inform the future strategic direction of the service.
- 1.11 There was a lack of an integrated performance management and quality assurance system in place for the service and management information systems needed improving in order for the council to be able to effectively demonstrate continuous improvement.
- 1.12 A Travel Strategic Review had recently been completed but its impact on people with learning disabilities was not yet evident. As transport plays a vital part in supporting social inclusion, it is important that the needs of people with learning disabilities are considered in any action plan being developed as a result of this review.

Involvement of Service Users and Carers

- 1.13 The council had not fully involved service users and carers in strategic planning, development and evaluation of learning disability services. Service user and carer representation on the VPPB was small although until very recently, a service user had been co-chair. Some members felt that their voices were not heard and despite some efforts, Partnership Board business processes were viewed as complex and not very user-sensitive.
- 1.14 There was no involvement of people from black and minority ethnic groups nor people with profound and multiple learning disabilities at strategic levels of decision-making.
- 1.15 The council's engagement with service users tended to be on the basis of information giving and consultation rather than involving them at an early stage to actively inform proposals affecting their lives. Within the past

year there had been a number of consultation events to inform the modernisation programmes relating to housing and support and day opportunities. Their potential to influence service developments, however, had not yet been maximised.

- 1.16 Carer involvement at a strategic level was not well developed. There were two carers on the VPPB but not all the sub-groups had carer representation.
- 1.17 The People's Union, a countywide self-advocacy group, was working effectively to connect with and promote the views of service users through its network of locality- based groups.

Joint Working Arrangements

- 1.18 There was close partnership working between Adult Social Care and the Primary Care Trust [PCT] expressed in the form of an integrated service model for learning disability services through a Health Act Flexibilities Section 31 agreement set up in 2002. The council had a lead commissioning role, and there was joint provision and a pooled budget. There were also well established joint working relationships at an operational level in the integrated Community Learning Disability Team [CLDT].
- 1.19 Partnership working with the voluntary sector was well developed through the Alliance of third sector providers. Effective partnership relationships with the Independent sector were, however, underdeveloped and this limited their contribution to the strategic agenda for learning disability services. The council was addressing this through its Market Management Improvement work-stream which was part of the Improvement Plan for Adult Social Care. The council needed to ensure that both current and potential service providers became fully engaged in strategic planning at an early stage in order to develop appropriate local services as part of its modernisation programme.

- 1.20 There had not been either awareness or high engagement across all departments of the council in the *Valuing People* agenda. There were individual examples of positive corporate partnership working such as Strategic Housing and more recently the Corporate Diversity Team. The manager of the Herefordshire Partnership had also recently taken over the role of VPPB chairperson in order to enhance strategic links with the council's wider corporate agenda. It was evident that more of the council's departments needed to know about people with learning disabilities so that all corporate plans took account of their needs.
- 1.21 Planning and strategic links between Children's Services and A&CS had not been robust. This had resulted in inadequate strategic transitions planning and a lack of a strategic framework for supporting parents with learning disabilities in their parenting role. There was no representation from Children's Services on the VPPB and no transitions sub-group. The implementation of recommendations from the Joint Area Review, however, had led to the establishment of a strategic Transitions Steering group comprised of senior staff of both Directorates during 2006.

RECOMMENDATIONS

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.
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.

STANDARD 2: COST AND EFFICIENCY

Costs for Services

- 2.1 Significant finances were tied up in a legacy of traditional residential and day services where lack of quality assurance processes meant that Value For Money [VFM] had not been systematically ensured.
- 2.2 Work had been completed in 2006 to examine and analyse costs of existing accommodation and support services. A tendering exercise was currently underway for a number of residential services to be managed and developed by an independent organisation. The intention of the tendering exercise was to secure services that are both VFM and produce improved outcomes for service users.
- 2.3 The council had started to manage and develop the market on a sub-regional basis for particular specialist services to ensure more consistency in cost and quality.

Expenditure on National Priorities

- 2.4 The current pattern of expenditure did not reflect national priorities or more recent local strategic intentions. The Needs Analysis Report had identified that Herefordshire placed higher numbers of people with learning disabilities in residential care, and supported fewer people to live in their own homes with limited support for family carers than high performing comparator authorities.
- 2.5 The council was committed to implementing individualised budgets and had become one of the national pilots for *In Control* in 2006. Over the last year there had also been a small increase in the uptake of Direct Payments but from a low base.

- 2.6 The Medium Term Financial Strategy was being reviewed to take account of the projected funding requirements for the modernisation programme.

Improved Efficiency

- 2.7 Some work had been completed in terms of gaining an understanding and improving VFM with regard to learning disability services. The Needs Analysis recommendations emphasised the need for VFM by changing the model of service. The recent review of the Care Management process for adult services was designed to inform the *Herefordshire Connects* process with the intention of driving out inefficiencies. However, the CLDT had not yet had opportunities to formally shape the planning and priorities of this work. It is critical that the council addresses this issue given the high number of cases which were not care managed in learning disability services.
- 2.8 There was no set of quality standards for this service and no quality assurance systems in place for monitoring all learning disability services to ensure VFM. At the time of inspection, we were informed that a quality assurance officer had been recently appointed to co-ordinate the development of such systems for adult social care services.
- 2.9 The Information and Communications Technology systems [ICT] were recognised as needing modernisation. The outdated ICT system for adult social care was hindering efforts to improve data quality and management information. The electronic social care record was a stated priority for early implementation and new systems were currently being procured with the intention of being in place in 2008.

Joint Financial Arrangements

- 2.10 There was a pooled budget in operation for learning disability services between the council and PCT although this budget was under great pressure. The risk sharing agreement was rescinded in September

2006 and further work was required to adopt a joint approach to reduce the ongoing risk of overspend. The interpretation and application of the Continuing Healthcare Criteria to people with learning disabilities had not been fully agreed between the council and the PCT.

- 2.11 The Learning Disability Development Fund revenue [LDDF] was managed by the council and PCT and allocations against the government's priorities were guided by the Valuing People Partnership Board [VPPB]. Concerns were expressed by some members of the VPPB that although the LDDF was fully allocated to the pooled budget it had been reduced in real terms in 2006/07 and not fully allocated to government priorities.
- 2.12 Insufficient attention had been given to maximising external funding streams for learning disability services. The council had no strategy for systematically accessing resources from outside the adult social care budget. More recently the Cabinet had confirmed funding for a dedicated time-limited post for Adult Social Care in order to generate additional income for capital and non-recurrent developments for both older people and adults with learning disabilities.

Budget Management

- 2.13 The council had worked to build managers' understanding and competence in managing budgets through the introduction of monthly budget clinics and the development of financial management training courses.
- 2.14 Mechanisms were in place to both manage and monitor the budget. A Learning Disability Funding Panel had been established in February 2006, with support from finance, to ensure resource allocation was more aligned to service priorities and tighter control was exercised on expenditure and commissioning activity.
- 2.15 There had been additional resources invested in learning disability services during 2006-07 but the

increased investment had largely secured existing commitments in response to increasing costs and demands.

- 2.16 The council had recognised that it did not maximise income sufficiently in relation to people with learning disabilities. The Improvement Work-stream on Fairer Charging planned to produce a new charging policy in 2007/08 to include increasing income from service users, in line with comparable authorities.

Commissioning

- 2.17 Market management was underdeveloped in learning disability services. Some independent sector providers reported that they did not have a sufficiently clear view of the council's commissioning intentions which limited them from being able to plan ahead in response to potential and changing needs of people with learning disabilities funded by Herefordshire council. The Market Management Implementation Plan sought to develop more active partnership working with independent sector providers.
- 2.18 A service level agreement between the council, PCT and the Alliance had been agreed on a COMPACT Code of Good Practice on funding and procurement. This agreement was to be implemented from April 2007 with the aim of increasing the range and quality of third sector provision in the county as there had been a limited choice of such providers in learning disability services in the past.
- 2.19 Contract monitoring was not strong and there was an over reliance on care management to oversee the effectiveness and quality of placements. Poor performance on completing annual reviews meant that VFM of many residential placements could not be secured.
- 2.20 The Corporate Asset Management Plan 2005 in terms of helping to deliver social care improvement priorities provided no direction to the modernisation programme for learning disability services.

RECOMMENDATIONS

1. The council with its PCT partner should continue to improve the economy, efficiency and effectiveness of learning disability services.
2. The council should ensure that commissioning and contracting processes are used to improve the quality of services commissioned.
3. The council with its partners should develop a strategy to access resources from outside the adult social care budget.

STANDARD 3: EFFECTIVENESS OF SERVICE DELIVERY AND OUTCOMES FOR SERVICE USERS

Promoting Independence

- 3.1 Insufficient opportunities were available to promote the independence of service users in the current pattern of service provision. There was also a legacy of weaknesses and gaps in the Assessment and Care Management Service which had resulted in a limited and reactive response to people in need.
- 3.2 The Person-Centred Planning Service was developing but had not yet had a real impact on people's lives. The development of Person-Centred Plans was a key objective of *Valuing People* but in Herefordshire the priority groups who should have benefited from person-centred planning had not done so.
- 3.3 The inspection team saw a number of people who had the potential to become more independent. This potential was being limited partly by a matter of resources but also related to some services needing to become more service user-centred and flexible. A person-centred approach was evident through the case-tracking and file reading with regard to a few services users but in most of the cases, however, the response was more service-led than needs-led and reactive in approach.
- 3.4 Employment and work-based training opportunities were significantly under-developed. The council had not taken proactive steps to lead this work and they themselves did not have a good track record of employing people with learning disabilities. Few people with learning disabilities were in paid employment in Herefordshire. Building blocks were being put in place to provide additional opportunities for both voluntary and paid work.

- 3.5 There had been a number of changes in college courses in consultation with partner organisations to ensure better targeting of Further Education capacity. There were further educational opportunities available but on a limited scale for people with complex needs. Increased strategic links between day services and colleges to agree expectations for the future would ensure service users have a more seamless transfer between services.
- 3.6 There was scope for promoting greater social inclusion of service users in their local communities. Formal links between the council and a major leisure provider had only just begun in relation to increasing the participation of people with learning disabilities in leisure and sports activities.
- 3.7 There were few placements made outside the council area and 14 people with learning disabilities currently lived outside Herefordshire in order to receive an appropriate service to meet their needs. All had been reviewed during 2006.
- 3.8 The council was committed to implementing more self-directed approaches to promote people's independence and choice. At the time of the inspection, 13 people with learning disabilities were in receipt of Direct Payments, many of whom were supported by a Direct Payments Support Service. Only one carer of a person with learning disabilities was in receipt of a Direct Payment.
- 3.9 The Direct Payments policy, guidance and leaflet were all being updated. People with learning disabilities had not been involved in the Direct Payments Scheme design, implementation and ongoing practice but there were plans to seek service user representation on the Direct Payments Reference Group.
- 3.10 The take-up of Direct Payments by parents/carers of disabled children had been actively encouraged by the Children with Disabilities Team. This would have financial implications for the A&CS Directorate when those young people made the transition into adult

services but this forecast was not reflected in the Joint Commissioning Plan.

- 3.11 The council was part of the national *In Control Project* and within the past year had laid the foundations for establishing the pilot project. Five people had secured some form of individualised budget and one person had a fully working individual budget. An independent brokerage service was being piloted alongside the *In Control Project*. Finance had also been secured to employ a worker to promote the use of the Independent Living Fund.
- 3.12 There was evidence of the effective use of skilled advocacy and facilitation on a group basis. The People's Union, Herefordshire People's Advocacy Network and ECHO were leading some important developments to maximise the range of opportunities for people with learning disabilities.
- 3.13 Support to people with learning disabilities with their parenting role was limited and lacked a strategic framework. There was neither a protocol nor an infrastructure for joint working between the two Directorates. At operational level, however, there was joint work on an individual case basis.

Range of Services

- 3.14 The range of services was not sufficiently broad and varied so there was limited choice and flexibility for service users and their carers. There was an acknowledged over reliance on residential care placements both on a long term and short-term basis. The modernisation of day services was an identified strategic priority with substantial LDDF funding allocated to progress the work. Some day services were making progress in developing more responsive and community-based services. The Pavilion Café was a good example of the development of a local social enterprise which provided both employment and work-based training.

- 3.15 A short-term breaks service was provided, much of which was a traditional building based model. Just under half of all service users living with family carers received some type of short-term break service. Capacity problems on occasions had led to people in crisis being admitted to short-term residential provision and staying longer than planned due to lack of alternative services. These situations had resulted in reduced opportunities and increased pressure on other service users and their family carers who were unable to access their planned stays.
- 3.16 The council's own provision was undergoing change with one building due to close when alternative provision was found and the other two residential respite services subject to externalisation to an independent organisation.
- 3.17 The Adult Placement Scheme [APS] was person-centred and well valued by both service users and carers. There were waiting lists in terms of both matching people to Adult Placement Carers and for completing the assessment and approval of carers in a timely manner. This was due to some APS staff having to cover for gaps in the Assessment and Care Management Service thus limiting their capacity to further develop this service. There were plans to create two new posts to address both the capacity and service development issues in this service.
- 3.18 Increasing the range of housing options was recognised by the council as a strategic area for development in order to focus more explicitly on the promotion of independence. Some people with learning disabilities had benefited from the *Supporting People* Programme. Twelve people had benefited from a shared-ownership scheme.
- 3.19 There were few outreach services available to promote the independence of service users living with family carers. Staff in the CLDT needed to be more imaginative and flexible in helping people participate in their local communities.

- 3.20 Small voluntary sector organisations such as ECHO provided some people with learning disabilities with community-based activities but were constantly fundraising to secure ongoing viability.
- 3.21 Access to health professional therapies such as speech and language therapy and physiotherapy was extremely limited. This meant work to meet the communication needs of service users was small-scale. There had been a small increase in capacity in the psychology service during 2006 but there was currently a small waiting list for some psychology services. Community nurses in the CLDT team had difficulties in balancing their care management role with providing the ongoing health input that some people required.
- 3.22 The CLDT identified service capacity issues too, especially the lack of appropriate day opportunities for service users with complex needs and those with profound and multiple learning disabilities. The team also identified limited residential provision for those with behaviour which challenged.
- 3.23 Progress on developing Health Action Plans was slow with community nursing input not secure on a regular basis.

Support for Carers

- 3.24 The council did not provide a sufficient range of services to support carers in their caring role. Whilst some carers were positive about the services and support which they received, many carers were critical of services for them in terms of availability and reliability. Carers reported that they did not have access to relevant, timely information, advice and support. The various comments which many carers made were summed up in one carer's response, "*The staff at the centres are very good but otherwise, no social workers, not heard from link workers in 3 years, no help, no information, and any information we might get written in language no-one understands.*"

- 3.25 Carers of people with learning disabilities were allocated the smallest proportion of the Carers' Grant. Carers reported that there was limited flexibility as most of the grant was tied up in funding respite, day and home-care with very little surplus that carers could apply for.
- 3.26 The Carers' Network was still relatively underdeveloped and was currently reaching a very small number of carers. Carers appreciated short-term breaks services. Carers of people with complex needs felt that there was insufficient service provision to support them and this shortfall included both residential respite and home-based services. There was insufficient support given to carers to assist them into and to maintain employment. This was of particular concern to parents whose children were in transition as some were single carers and needed to work.
- 3.27 Carer Assessments were not having a demonstrable impact on carers' lives. The council had recently appointed a member of staff in the CLDT to undertake carer assessments but the number of completed assessments was low. Some carers reported that even though they had had an assessment it had not resulted in the provision of specific support or a change to their current situations. They were particularly concerned about the lack of contingency planning.
- 3.28 Planning to meet the needs of those living with older carers was at an early stage of development. There was no specific support for carers from black and minority ethnic communities.

Safeguarding Against Abuse

- 3.29 Adult Protection was not given a high enough priority within the wider council. Adult Protection training was largely dependent on the goodwill and capacity of the Adult Protection Coordinator and was not perceived as a corporate responsibility. This training was not seen as mandatory in Adult Social Care and councillors had not attended training. Access to training resources to

support awareness raising and specialist training had been insufficient.

- 3.30 There was a dedicated full time Adult Protection Coordinator. A great deal of the Coordinator's time, however, had been concentrated on supporting operational management shortfalls with insufficient attention being able to be given to strategic and wider partnership issues.
- 3.31 The work of the Multi-Agency Adult Protection Committee had an insufficient profile. The Committee was too focused on operational issues to the detriment of both its developmental and quality assurance roles. Further work was needed to ensure the active engagement of all stakeholders. Some key stakeholders such as further education were not represented on the Committee. The views of service users and carers had not yet been sufficiently integrated into safeguarding vulnerable adults' service developments.
- 3.32 There was much to do to improve organisational capacity to effectively address the needs of people with learning disabilities who were at risk of harm. Frontline capacity gaps in the CLDT had led to poor management information and reporting. The recording and monitoring of incidents was not always timely, consistent or efficient. The volume of Adult Protection work was also taking care managers away from other work when they were already under pressure coping with existing caseloads.
- 3.33 There was not a consistent shared approach to safeguarding people with learning disabilities by frontline assessment and care management staff and contracts staff. Adult Protection processes were sometimes used to address shortfalls in other parts of the organisation, especially with regard to contract monitoring.
- 3.34 Some improvements had been recently made to strengthen the response to managing incidences of adult protection but not all key players were yet

involved and there was more to do to raise awareness across all partners. There was insufficient capacity to undertake preventative work regarding adult protection.

- 3.35 There was not a robust quality assurance framework in place to monitor adult protection referrals and outcomes. This meant vital management information was lost and little critical incident learning was taking place.
- 3.36 There was no demonstrable link between the current protection procedures of Children's Services and those of Adult Services. The Adult Protection Coordinator, however, had recently contributed to the draft update of the Safeguarding Children's Procedures and had made the appropriate links with Adult Protection procedures.
- 3.37 The People's Union were doing some positive preventative work with self-advocates in terms of promoting safeguarding practice. This organisation was also planning courses to address bullying as service users had identified this experience as a major concern to them.

Using Feedback from Service Users and Carers

- 3.38 The council did not routinely seek feedback from service users and carers about the quality of the services which they received. Within the past year, however, some efforts had been made to seek formal feedback about current day services and accommodation and support services.

RECOMMENDATIONS

1. The council should ensure that people with learning disabilities maximise their independence and choice through a broader range of services.
2. The council should routinely seek feedback from people with learning disabilities and their carers about the quality of services and act on this information.
3. The council should continue to promote self-directed support by increasing the take-up of Direct Payments and individualised budgets.
4. The council should work with carers to develop a better range of and access to services to support them in their caring role.
5. The council, with its partner agencies, should ensure that adult protection arrangements are more effectively managed at both strategic and operational levels.

STANDARD 4: QUALITY OF SERVICES FOR USERS AND CARERS

Referral, Assessment, Care Planning and Review

- 4.1 All initial referrals went through a daytime duty system. Duty staff then forwarded details to the CLDT if it appeared that a service was required from the team. An immediate allocation was made in emergency situations.
- 4.2 There had been significant delays in both allocation and ongoing contact for a large number of people with learning disabilities and their carers. This was mainly due to staff recruitment difficulties within the CLDT.
- 4.3 The council funded a PCP Coordinator and two part-time facilitators and a number of cross-sector facilitators had been trained. Given the post-holder's span of responsibilities there was scope to develop a more strategic approach in order to focus on what the priorities for action should be and to embed person-centred planning in the organisation. There was a lack of clarity as to the relationship between Person-Centred Plans [PCPs] and the Assessment and Care Management Service.
- 4.4 There were also difficulties in accessing specialist assessments on occasions. The OT and OT assistant post were both vacant, the former post for 18 months. In our case file recording analysis, we found very limited evidence of multi-disciplinary assessments. Although the CLDT was an integrated team health and social care case files were held separately.
- 4.5 There were no written protocols in place to address transitions/joint working arrangements between user group specialisms. Joint working arrangements between learning disability services and mental health services were in need of particular attention.

- 4.6 In the case files examined, case file recording was generally of a poor standard. Most assessments, care plans and reviews if they existed, were either out of date, incomplete, not holistic or lacked an outcomes focused approach. The views and wishes of service users were not well recorded and it was not always clear from the case files that assessments, care plans and reviews were routinely copied to service users and where appropriate to carers. These documents were not in accessible formats.
- 4.7 A draft Support Needs Assessment form had been recently developed in conjunction with service users. This documentation was being piloted and had not yet been evaluated so it was difficult to assess its impact.
- 4.8 We saw a number of case files where risks and vulnerabilities were evident but there was no detailed risk assessments completed with appropriate action plans to safeguard service users. A person-centred risk assessment pro-forma had been designed and was to be introduced in 2007. There was also a marked absence of contingency planning details on case files.
- 4.9 There was no Exclusions Policy in place as required by the *Valuing People* implementation guidance. The council reported that no one had been excluded from services so did not consider the development of such a policy as a priority.
- 4.10 Annual reviews had not taken place for the large majority of service users known to the CLDT. Lack of a systematic review service meant that the CLDT could not be sure whether care plans had been fully implemented and were meeting people's needs or if service user needs had changed. Inspectors were informed that an action plan to address this major deficiency was in place but it was unclear what impact this plan would have as some people had been waiting many years to have their needs re-assessed.
- 4.11 Some in-house and external providers held their own service reviews but too often these reviews concentrated on existing service provision rather than

a holistic re-assessment of a service user's needs and an exploration of other options.

Quality Assurance

- 4.12 An inter-agency Quality Assurance Framework had not been developed for learning disability services.
- 4.13 Commissioning and contracting processes were not consistently monitoring that the independence of all service users was being actively promoted and that services were effective, of good quality and responsive to need.
- 4.14 Although staff receive regular supervision of their work, there was no evidence of management oversight recorded in case files examined. We also found no evidence of a systematic audit of case files by operational line managers in the case files examined during the inspection.
- 4.15 An accreditation scheme [ACQUA] was being introduced from April 2007 which had been jointly developed between the council and the Alliance of third sector providers.
- 4.16 There was a lack of alignment of Supporting People and social care commissioning in some schemes and work was needed to ensure a shared approach to quality assurance and VFM. Service reviews and casework identified some care tasks being funded by Supporting People which should have been addressed as social care issues.
- 4.17 There was recognition of the need to improve the quality of the transitions process for young people with learning disabilities and this work was starting to be addressed. Two new Transitions worker posts had been jointly funded to improve support pathways for disabled young people in transition into adult services.
- 4.18 Some service users reported that they found it difficult to access their social workers if they had one. Their feelings were reflected in the comment of one service

user who said, "*They don't have time for us.*" Carers reported in the survey that they were generally treated with respect and courtesy.

Privacy and Confidentiality

- 4.19 All contracts held between the council and adult social care providers included an expectation that privacy and confidentiality would be maintained for service users.
- 4.20 The current Section 31 agreement contained an information sharing protocol between the council and the PCT.
- 4.21 There was no accessible information for service users about privacy and confidentiality. Many service users and carers did not know about the access to records policy.

Information about Services

- 4.22 The council with its partners had not produced and distributed comprehensive and accessible information to people with learning disabilities and their carers. There was no comprehensive accessible directory of what services were available. Some service users reported that they would like information in other formats such as video, tapes and CDs to enable more people with learning disabilities to access information.
- 4.23 The range of printed leaflets was limited although new and more accessible printed information was in draft. The 'News and Views' Team was working effectively to produce and deliver good quality accessible information, including the VPPB website which was available through the council's website.
- 4.24 ECHO was strongly rated by service users and carers for the information and advice that it provided.

- 4.25 The newly created Public Contact Team was working to ensure that information was available in formats that met the needs of the local population.

RECOMMENDATIONS

1. The council should address the huge backlog of annual reviews to ensure that service users have their needs appropriately met.
2. The council should strengthen the Assessment and Care Management Service with regard to improving management oversight, processes, practice and recording.
3. The council should ensure a co-ordinated strategic approach to support the development and delivery of person-centred plans to people with learning disabilities.
4. The council should ensure that young people with learning disabilities reliably and consistently experience a seamless transition between Children's and Adult Services.
5. The council should develop a comprehensive quality assurance strategy to underpin all aspects of learning disability services.
6. 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 them.

STANDARD 5: FAIR ACCESS

Eligibility Criteria

- 5.1 The council had published eligibility criteria based on Fair Access to Care Services [FACS] but the information was not available in an accessible format for people with learning disabilities.
- 5.2 Herefordshire had set its eligibility criteria at the 'critical' and 'substantial' categories of FACS. The CLDT operated eligibility criteria which while based on FACS, also included a functional IQ definition of learning disabilities which did not reflect a more holistic approach. Some service users and carers said that they were not clear about the eligibility criteria for services.
- 5.3 There was no evident linkage between the eligibility criteria of Children's Services and A&CS for young people with learning disabilities in transition. Some examples were given where young people with learning disabilities who received services from Children's Services were accessed as ineligible for services from A&CS. This decision-making may have been appropriate but parents did not understand the reasons for the change.
- 5.4 The Directors of Adult and Children's Services and senior staff responsible for transitions were due to meet in March 2007 to undertake joint appraisals of local arrangements. As part of the overall social care Improvement Plan, an external review of the county's FACS criteria would inform future policy. The council needed to give clearer direction to how people with learning disabilities who did not meet the eligibility criteria would have their needs met.

Demonstrating Fair Access

- 5.5 Some monitoring of the social care needs of people with learning disabilities and the take up of services

had been undertaken which had informed the development of the Joint Commissioning Plan and in particular the Accommodation and Support Commissioning Plan.

- 5.6 Ethnic monitoring was undertaken and although numbers were small, the council perceived that black and minority ethnic service users were slightly under-represented in the service in proportion to the local black and minority ethnic population in the council area. There may also have been an under reporting as Romany Travellers, until 2006, had not been systematically monitored as a specific minority group.
- 5.7 Rurality issues were creating service access and uptake difficulties in some parts of the council area. Those with similar needs could not be assured of similar access and outcomes regardless of where they lived. The council had recognised the need to address issues of equity in service provision and the modernisation of day services plan aimed to create a locality focus.
- 5.8 The council acknowledged that they could not currently claim that all people with learning disabilities had consistently fair and equitable access to generic services. There was commitment to promoting people's rights to access universal services which was reflected in the corporate Comprehensive Equality Policy and the Partnership Board's work programme.
- 5.9 Transport was a major area for development in order to increase the social inclusion of people with learning disabilities and promote their independence. Issues to be addressed included:
- The council transport service was not user-centred. Some service users were spending long periods travelling to and from services.
 - Current transport arrangements were not providing sufficient opportunities for promoting independence.
 - Financial arrangements for transport limited the creation of flexible, individualised transport options.

- 5.10 Access to public transport was limited in some of the rural areas, especially for wheelchair users, and this restricted use of local community facilities.
- 5.11 The Community Learning Disability Team and the Supporting People team were developing a travel training programme to promote service user independence.
- 5.12 Some people with multiple and/or complex needs were not receiving a consistent multi-disciplinary response. This included people with mental health needs, those with additional sensory loss and those with autistic spectrum disorder.
- 5.13 The council and PCT were performing poorly in addressing the healthcare needs of people with learning disabilities and tackling health inequalities although both organisations were working to improve access to primary care services. Targets had been set in the Local Delivery Plan for 2007/08 to improve performance.

24-Hour Access

- 5.14 Fieldwork services could be accessed through the CLDT during office hours. Some service users and carers reported difficulties in accessing social workers during office hours.
- 5.15 The council contracted a neighbouring authority to provide an out of hours service. At the time of inspection fieldwork, the current CLDT team leaflet did not include contact details for the out of hours emergency service. As part of the review of assessment and care management activity, there is a need to ensure that people with learning disabilities and their carers have clear information about the out of hours service.
- 5.16 Day centres operated on a five days per week basis. The residential respite service had designated beds for use in emergencies.

Valuing Diversity and Social Inclusion

- 5.17 The Corporate Race Equality Scheme had been reviewed and an annual action plan produced.
- 5.18 The Corporate Disability Equality Scheme and Action Plan had been produced within the required timescale and people with learning disabilities had been consulted on it. There were specific objectives in the action plan to increase the role of the council in employing people with disabilities and providing more work experience opportunities.
- 5.19 The council had assessed itself as being at Level 1 of the Equality Standard for Local Government but was aiming to successfully declare itself as having reached Level 2 by March 2007.
- 5.20 The council had been working to establish a coherent and co-ordinated approach to equality and diversity issues with the formation of a Corporate Diversity Team. There was an infrastructure of equality and diversity groups which focused on policy, service delivery and employment. Each Directorate had a diversity lead although there had been changes of personnel in the A&CS diversity lead.
- 5.21 Equality and diversity issues were not yet addressed on a systematic basis throughout the A&CS Directorate. There was little evidence of specific equality and diversity activity or targets integrated into either adult social care service plans or service specific strategies.
- 5.22 Equality impact assessments were underdeveloped for learning disability services with regard to policies and service delivery. Therefore, the service could not evidence whether existing and new policies and service delivery were having an adverse impact or not.
- 5.23 The learning disability service had developed a framework to support service users who had issues about personal relationships and/or sexuality.

Culturally Appropriate Access

- 5.24 People with learning disabilities and their carers had access to an independent advocacy service. The LDDF funded independent advocacy on a group basis which was available across the council area. People with learning disabilities and their carers, however, reported that they had limited access to independent advocacy on an individual basis.
- 5.25 As part of Transition planning from 2007 and beyond, the council was specifically identifying people from black and minority ethnic communities to ensure that their cultural needs were being addressed.
- 5.26 The council had a network of interpreters for the most commonly requested languages. Signer support was available when required by Aspire, a local provider service.
- 5.27 Insufficient attention was paid to addressing service users spiritual and religious needs in assessments and care plans. A number of service users said that they would like support to meet these needs.

Charging Policy

- 5.28 The council was reviewing its charging policy and allied procedures as part of the overall Improvement Plan for A&CS.
- 5.29 Information about the council's charging policy was not readily available nor in accessible formats to potential and actual service users and carers. Just over half of carers surveyed responded that they did not know how charges were worked out.
- 5.30 The council's Fairer Charging team had very recently integrated with local Department of Work and Pensions personnel which should ensure a more coherent approach to this aspect of the council's work.

Complaints

- 5.31 The Complaints policy and procedure had been updated and was signed off in February 2007.
- 5.32 Complaints recorded for learning disability services were few. There was no evidence on case files examined, except one, that service users were provided with information about the Complaints Service or Access to Records policy.
- 5.33 Half the carers surveyed said that they knew how to make a complaint. Some service users had an awareness of the formal complaints procedure but there was a lack of confidence in using it. There was little independent advocacy to support people with learning disabilities to make a complaint. There is scope for improving the profile of the complaints process, particularly for service users who had been receiving services for a long time.
- 5.34 An updated draft leaflet, for the public, explaining the Complaints Service had just been developed and approved for publishing. This draft leaflet stated that it would be available in other languages and formats.
- 5.35 The link between the outcomes of complaints and continuous service improvement was not strong and there was a need for more systematic tracking and analysis of all stages of the complaints procedure.
- 5.36 There was no written protocol for addressing complaints received by the integrated learning disability service provided by social care and health.

RECOMMENDATIONS

1. The council should ensure that the Fair Access to Care Services eligibility criteria are clear to people with learning disabilities and their carers.
2. The council should ensure that equality and diversity issues are more embedded at both strategic and individual levels in learning disability services.
3. The council should develop a programme of equality impact assessments for learning disability services and implement the changes necessary to address any adverse impact identified.
4. 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.
5. The council should ensure that independent advocacy services are more accessible on an individual basis.

STANDARD 6: CAPACITY FOR IMPROVEMENT

Vision and Strategic Direction

- 6.1 There was cross party political consensus on decisions made in December 2006 when the future vision and strategic direction of learning disability services was formally agreed.
- 6.2 Work was in progress to communicate the vision and strategic priorities amongst staff and other key stakeholders. Risk and contingency planning needed a stronger focus regarding the capacity and resources available to support the significant organisational restructuring proposals. Learning Disability Services faced significant challenges in the next few years as the council sought to increase the pace of change on a number of fronts. The modernisation programme would mean substantial changes for in-house residential and day-centre staff and their current service users
- 6.3 A corporate Leadership Development Programme had been put in place to assist managers to develop the skills and competencies required to support the modernisation agenda.

Sustained Recent Progress

- 6.4 In response to the recognised problem of achieving sustained progress, the council had taken steps to develop and deliver a comprehensive Improvement Plan for Adult Social Care Services. The Adult Services Transformation Board was overseeing three major areas for improvement which were of direct relevance to learning disability services:
- an Improvement Plan with five work-streams – performance management and data, market management, workforce development, Fair Access to Care Review and Charging Policy Review.

- Business processes re-engineering for access, assessment and care management.
 - Implementation of the recommendations of the recent report on the future care needs of older people and adults with learning disabilities.
- 6.5 Each of the work-streams had a plan which was being translated into action plans with timescales, responsibilities, objectives and targets. The Market Management Improvement Plan was agreed in January 2007. The real challenge facing the council was to ensure successful implementation of the Improvement Plan and to have an effective exit strategy to secure sustainability once external support was withdrawn.
- 6.6 There was not yet a coherent approach to strategic action planning for learning disability services. In order to avoid the danger of a silo approach to service planning, more explicit links were required between the various plans in this service area. Plans also needed to become consistently SMART and to have identified resources where required.
- 6.7 Some key stakeholders felt that the council did not have a track record of successfully implementing its plans and that management of change had not always been handled well in learning disability services. Examples given were the removal of day centre places for those living in voluntary or independent sector residential care, and the mixed messages given about the future of the council's residential respite services and day service provision. Improvements were required in developing greater stakeholder involvement in the modernisation plans if the legacy of some mistrust and lack of effective communications were to be overcome.
- 6.8 The consultation events regarding modernising day services and accommodation and support were welcomed by service users but they were not yet assured that their contributions had made a difference. Frontline staff reported that communication with them was slowly improving, but they felt that they needed

more opportunities to actively inform and influence the wider work of the A&CS Directorate and the council.

- 6.9 The Improvement Plan had a risk log that outlined some of the risks that the council might face in managing change. This needed review to more specifically incorporate joint working issues, to strengthen the focus on services users and to put in place contingency planning arrangements.
- 6.10 The council had recognised that the manual of policies and procedures required updating. There were no jointly agreed written protocols covering the interfaces and joint working arrangements within adult social care services. A Transitions protocol between Children's Services and A&CS was being drafted.

Performance Management

- 6.11 Work was underway through the Performance Management and Data work-stream to improve the quality and use of social care performance data and to embed performance and quality assurance management within A&CS. Performance and quality management information was not routinely disaggregated for learning disability services which made it difficult to inform and guide decisions relating to operational practice and to manage performance in this service area. Learning disability services lacked both a performance management framework and an overarching quality assurance system. The performance management role of the VPPB was weak and not aligned to wider corporate performance management activity.
- 6.12 Councillors had become more actively involved in improving learning disability services since those members with lead responsibility for social care and scrutiny had commissioned and completed a review of the service in 2006.

Organisational Structure

- 6.13 A new management structure for learning disability services had been put in place within the last year with increased capacity to project manage the three strategic priorities. The current span of control of the Head of Adult Social Care provided insufficient capacity to implement the modernisation agenda for this service. The council had recognised this issue and from April 2007, dedicated senior management capacity had been agreed for learning disability services.
- 6.14 There had been some recent work undertaken to review the CLDT. This had resulted in the appointment of a senior practitioner post to provide additional social care capacity. Further work was needed with regard to team roles and responsibilities and workload management.
- 6.15 Over the previous 18 months there had been vacancies in key management and operational posts in the CLDT which had severely impacted on the effectiveness of its service delivery. Further additional capacity had been recently funded for the CLDT in the form of a care management post. At the time of the inspection all but two of the vacancies had been filled which was resulting in improved staff morale and an opportunity to realign workloads.
- 6.16 Further organisational re-structuring was planned to create full integration of council and PCT functions in the form of a Public Service Trust. This would have implications for the current Section 31 agreement for learning disabilities services.

Workforce Development and Workforce Planning

- 6.17 Workforce development and workforce planning for learning disability services lacked sufficient strategic attention. There was no joint workforce development strategy and no workforce planning strategy with health. There had been no Learning and Development

Plan produced for A&CS for 2006/07 but the Workforce Development Manager and Service Manager for learning disability services were currently working on the staff development and training needs for next year's plan.

- 6.18 The council had not met the *Valuing People* target that 50% of front-line staff had achieved at least NVQ Level 2.
- 6.19 Service users were to be involved in the delivery of learning disability awareness workshops for Learning Disability Awards Framework and Common Induction training in 2007.
- 6.20 The council and other provider organisations were not consistently involving service users with learning disabilities in the recruitment of staff.
- 6.21 Third sector providers and private providers had access to some training opportunities arranged by the council's Learning and Development Division and they valued this.
- 6.22 Annual staff review and development processes had become mandatory within the past year. All staff in learning disability services had had their annual staff review and development. Staff supervision was regular.
- 6.23 Analysis of fieldwork questionnaires revealed that staff had not received much training within the past three years in relation to new ways of working such as PCPs, Direct Payments and in the requirements of equality and diversity legislation. Staff spoke of training as being on a 'self select' or voluntary basis. There seemed some confusion as to what training was mandatory.
- 6.24 There appeared to be no quality assurance framework in place to ensure staff were meeting the A&CS Directorate's standards and expectations regarding competencies to undertake the role and responsibilities of their posts in learning disability services.

- 6.25 Work was in progress to develop an integrated workforce strategy with health across all Adult Services as part of the Improvement Plan. This work should assist the identification of workforce levels and staff skill mix and competency requirements across social care and its partners in learning disability services.
- 6.26 The council also had work to do reform organisational recruitment and staff support systems. Sickness absence had been a particular problem in three of the council's directly provided learning disability services.
- 6.27 The workforce in learning disability services would benefit from a comprehensive learning and development plan in order to achieve changes in attitudes, approaches and support required for the modernisation of the service and the social inclusion of people with learning disabilities.
- 6.28 People with learning disabilities were not currently represented in the council's workforce. The council was developing a positive action programme to promote the employment of disabled people, as they were under-represented in the workforce.

Work with External and Corporate Partners

- 6.29 Stronger partnership working with external organisations would be needed to ensure the development of a broader range of services required by the council to meet its strategic objectives for people with learning disabilities.
- 6.30 Adult Services and Community Services had recently been reconfigured to be in the same council directorate. This structural change was starting to realise the potential to add value to service developments for people with learning disabilities. Strategic discussions between A&CS and Economic and Community Services had recently started.
- 6.31 Some positive housing with support developments were in place with plans to increase provision. Strategic housing had given a commitment to support

learning disability services to acquire tenancies in new developments funded by the Housing Corporation.

- 6.32 The council needed to act upon its corporate responsibilities to develop a 'whole council' approach to its learning disabled citizens and more actively promote their social inclusion.

Strategic Commissioning

- 6.33 A Joint Commissioning Plan had been produced in 2006 following a needs analysis undertaken by the council's Policy and Research Team with relevant staff in Health and Adult Social Care. Procurement plans were being developed to implement commissioning intentions and were most advanced in the Accommodation and Support Commissioning Plan. Strategic plans needed to become consistently SMART and to be linked to resource management. The planning process would have been strengthened by a clearer focus on outcomes for service users and carers.
- 6.34 Preventative services need to be commissioned and resourced to support people with learning disabilities who do not meet council thresholds of either existing or future eligibility criteria for care services.
- 6.35 Commissioning and contracting capacity were limited. The existing processes and structures did not lend themselves to making the cycle of planning, commissioning, and procurement of learning disability services work effectively. There was a need to clarify roles and responsibilities in relation to this cycle.

Managing Social Care Budgets

- 6.36 The council's audit letter for 2006 indicated sound corporate financial management. The Audit Commission did, however, report some issues relating to the pooled budget for learning disability services as a matter of governance interest. The council and PCT were addressing these issues as part of the pooled budget review.

- 6.37 Adult Social Care and learning disability services in particular, had a track record of overspending on budget. Budgetary overspending was a major factor in commissioning the Needs Analysis Survey for learning disability services in 2006.
- 6.38 Additional corporate financial resources had been committed to learning disability services to progress the modernisation agenda from 2007/08. The Adult Social Care budget and that of learning disability services needed re-configuration to match future commissioning intentions and activity levels to available resources and to support the integration of more complex funding streams.
- 6.39 Future budget management of learning disability services would be demanding as large-scale change processes were worked through. This reinforced the need for rigorous focus on the identification and delivery of milestones in the commissioning strategies, effective monitoring of budget performance and active management of risks.

RECOMMENDATIONS

1. 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.
2. The council with its PCT partner should implement robust business planning arrangements for learning disability services.
3. The council should ensure that all its departments are responsive to the needs of people with learning disabilities and promote their social inclusion.
4. The council should lead by example by actively promoting the recruitment and retention of people with learning disabilities in both its own workforce and in the wider community.
5. 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.
6. 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.

APPENDIX A: STANDARDS AND CRITERIA¹

STANDARD 1: National Priorities and Strategic Objectives

The council is working corporately and with partners to deliver national priorities and objectives for adult social care, relevant National Service Frameworks and local strategic objectives to serve the needs of diverse local communities.

1. The council has implemented a coherent overall strategy for responding to national priorities for social care generally and for services to people with learning disabilities in particular.
2. The council has developed local strategic objectives, priorities and targets for learning disability services which complement the national ones and serve the whole community.
3. The council is consistent in implementing a strategy for improving cost and quality of its services and can demonstrate Best Value principles in learning disability services.
4. All learning disability services actively involve services users and carers in development and improvement work. This includes all groups within the community, fully reflecting local diversity.
5. The council has well-developed joint working with relevant partner agencies that operate effectively in all service areas.

STANDARD 2: Cost and Efficiency

Adult social care commission and deliver services to clear standards of both quality and cost, by the most effective, economic and efficient means available.

1. The council secures services for people with learning disabilities at a justifiable cost, having identified the range of options available and made explicit comparisons in terms of quality and cost.
2. Expenditure on social care services for people with learning disabilities reflects national and local priorities and is fairly allocated to meet the needs of diverse communities.

¹ A full set of descriptors for these standards and criteria was given to the council and is available from CSCI

3. The council demonstrates improved efficiency across all aspects of social services operations and consistently monitors the efficiency of services involving people who use services.
4. The council makes optimum use of the potential for joint commissioning and partnership working to improve the economy, efficiency and effectiveness of local services.
5. The council has sound financial management systems, which provide the foundation for good planning and commissioning in social care.
6. The council uses effective procurement processes that are designed to further the strategic aims of the council, and reflect local social care market conditions.

STANDARD 3: Effectiveness of Service Delivery and Outcomes for Service Users

Services promote independence, protect from harm and support people to make the most of their capacity and potential and achieve the best possible outcomes.

1. The independence of service users and carers is promoted actively and consistently to minimise the impact of any disabilities, and to avoid family stress and breakdown.
2. The range of services available is broad and varied to meet the needs, offer choices to many and take account of individual preferences. This includes sensitivity to the needs and preferences of diverse communities.
3. The council provides a good range of services to support and encourage all carers in their caring role.
4. Service users are effectively safeguarded against abuse, neglect or poor treatment when using services. Incidents of this kind are rare.
5. The council actively seeks feedback from service users and carers; acts on this feedback, and can demonstrate that they value services.

STANDARD 4: Quality of Services for Users and Carers

Service users, their families and other supporters, benefit from convenient and good quality services, which are responsive to individual needs and preferences.

1. All referral, assessment, care planning; and review processes are convenient, timely and tailored to individual needs and preferences including diverse groups.
2. The service has effective quality assurance systems in place and service quality is consistent across all sectors, services and communities.
3. Privacy and confidentiality are assured in all contacts supported by appropriate policies and procedures.
4. Good quality information about services and standards is readily accessible to all, including diverse groups in the community.

STANDARD 5: Fair Access

Adult social care services act fairly and consistently in allocating services and applying charges.

1. Clear eligibility criteria for learning disability services are published, easy to understand and fair to all.
2. Social Services are effective in monitoring the social care needs of the local population and the take-up of services. Fair access can be demonstrated in all areas and action is taken to increase the take-up of services from under-represented groups.
3. There are clear routes to access all key social services 24 hours a day, 7 days a week, as needed.
4. The range of services available reflects the needs of the community, promotes equality to comply with all relevant legislation and demonstrates that diversity and social inclusion are valued.
5. Access to services is culturally appropriate, and inclusive. Advocacy and Interpreting services are promoted and used appropriately.
6. A fair and transparent charging policy has been agreed with stakeholders, and income is collected efficiently.

7. Complaints are handled promptly and courteously. The complaints/comments procedure is well-publicised and service user friendly and effective in improving services.

STANDARD 6: Capacity for Improvement

The council has corporate arrangements and capacity to achieve consistent, sustainable and effective improvement in Adult Social Services.

1. The council's leaders have a clear vision and strategic direction for adult social services, communicate this effectively, and organise the necessary resources required to deliver it.
2. The council's improvement strategy for adult social care has resulted in sustained recent progress. Relevant policies, plans, objectives, targets and risk assessments are in place to support ongoing improvement.
3. Performance management, quality assurance and scrutiny arrangements are in place and effective: performance improvement can be demonstrably linked to management action.
4. The council's organisational structure and management arrangements promote improvements for adult social services and promote the wider modernisation agenda for social care.
5. The social care workforce is well trained and reflects local diversity. Local partnerships across all sectors have produced a human resources strategy that effectively trains, recruits and retains staff.
6. The council works effectively with external and corporate partners to improve the range, quality and coordination of adult social care services.
7. The council has effective commissioning processes, encompassing robust needs analysis, market analysis, and clear improvement targets. These are designed to improve economy, efficiency and effectiveness of services over time.
8. The council has a track record of competently managing its social care budgets, in the context of sound corporate performance in this area.

APPENDIX B – INSPECTION BACKGROUND AND METHOD

The White Paper *Valuing People: A New Strategy for Learning Disability for the 21st Century* sets out the Government's commitment to improve life chances for people with learning disabilities. It has a particular focus on partnership working, with an emphasis on people with a learning disability and their families. It is concerned with the ambition to provide new opportunities for those with a learning disability to lead full and active lives.

The objective of the inspection was to evaluate the implementation of national and local objectives relating to the social care needs of people with a learning disability and the quality of outcomes for themselves and their family carers.

The overall performance assessment standards and criteria were used to evaluate services within the context of CSCI's performance assessment of the council.

The inspection team consisted of two inspectors, and for part of the time an Expert by Experience and supporter. We visited a range of projects and interviewed people who use services and their carers. We also met with advocacy groups. The team interviewed managers at different levels both within the council and with representatives from the council's partner organisations. We also met with Councillors and the Chief Executive of the council.

In addition we attended a Partnership Board meeting and had access to a range of case files, background papers and information provided by the council. We also conducted two surveys. We sent questionnaires to a sample of carers. A different questionnaire was completed by a sample of fieldworkers involved in assessment and care planning for people using these services.

APPENDIX C – CARERS’ QUESTIONNAIRES

One hundred questionnaires were sent out, and 42 were completed and returned. Not all carers answered every question.

Making contact

21 carers said social services staff were always or usually easy to contact

24 carers said social services were always or usually easy for their relative to talk to

Involving you

30 carers said social services staff always or usually listened to them

16 carers said social services always or usually give them choices about what happened

12 carers said social services always or usually asked them what they thought of services

22 carers said they were always or usually invited to meetings

10 carers said they were always or usually involved in discussions

Informing you

11 carers said social services always or usually gave them written information

9 carers said they were always or usually told what was happening

21 carers said they knew how to make a complaint

4 carers said they had been told that they could see their records

13 carers had been told they could have an interpreter/translator

23 carers had been told they could have a friend/advisor/advocate

12 carers said they know how charges were worked out

15 carers said they thought the charges were fair

Services to meet your own needs

26 carers said they had been told of their right to assessment of needs

23 carers said they had had an assessment of their needs in the past 12 months

7 carers said they had their own written care plan

16 carers said they always or usually received services that supported them

15 carers said the reasons for the decisions were always or usually explained

How satisfied are you?

25 carers said they were always or usually treated with courtesy/respect

19 carers said their cultural needs were always or usually met

24 carers said social services staff were always or usually well informed

17 carers said they were always or usually satisfied with the quality of services

What’s changed?

20 carers said they had always or usually received the services they had wanted

14 carers said they always or usually waited for services

20 carers said they had always or usually been helped by services

13 carers said their situation had become better

About you

2 carers were aged under 18

26 carers were aged between 18 and 64

13 carers were aged between 65 and 84

10 carers were aged over 85

3 carers were male

39 carers were female

42 carers were white

0 carers were from a minority ethnic group

38 carers lived with the people who use services



Making Social Care
Better for People

Commission for Social Care Inspection



Inspection of services for people with learning disabilities

Herefordshire Council



Easy-Read Version

January/February 2007

Commission for Social Care Inspection



The Commission for Social Care Inspection (CSCI) is the organisation that checks all social care for adults given to people in England.



CSCI's jobs are to:

- support social care to get better



- check all social care for adults



- write a report each year for Parliament about how well adult social care is working



- check council adult social services and the way they spend their money



- hold information on how well social care is working



- give councils star-ratings



- register and inspect services against the rules about the least you can expect from a service.



Inspection of services for people with learning disabilities

Herefordshire Council

January/February 2007

Service Inspection Team



Lead Inspector: Silu Pascoe
Team Inspector: Sue Talbot

Expert by Experience:
Jeff Osborne supported by Gemma
Brown, from Bristol and South
Gloucestershire. People First

Project Assistants: Christine Page
and Vanessa Honeyghan

What the team did



The team went to inspect services for people with learning disabilities at Herefordshire Council.



We wanted to see what things were like for people with learning disabilities and their carers.

We also wanted to see how well the council was doing with 'Valuing People'- the national plan for learning disability services.



There were 2 inspectors on the team, and for part of the time an Expert by Experience, a person with learning disabilities who has experience of services, and his supporter.



We asked people who used services and carers what they thought about services for people with learning disabilities in Herefordshire.

We also spoke to managers and staff from the council and organisations it works with.



We visited different projects and went to a Partnership Board meeting. We also met with advocacy groups, Councillors and the Chief Executive of the Council.



We looked at case files and papers from the council. We also sent a survey to carers. Another survey was filled in by staff who looked at the support that people needed and planned their care.



We would like to thank all the staff, people who use services, carers and everyone else who took part in the inspection.



Overall, the inspection team thought that Herefordshire Council was not serving people with learning disabilities well and that it was not certain the council had enough things in place to be able to make sure that learning disability services got better in the future.



There is more information below about what the inspection team found the council was doing well and what it could do better.

Getting through to services

What the inspection team found

Information



The council had not written and given out much information about services to people with learning disabilities and their carers.



People could get information in different languages and formats if they asked the council for it. The new Public Contact Team was working to make information more accessible for all local people.



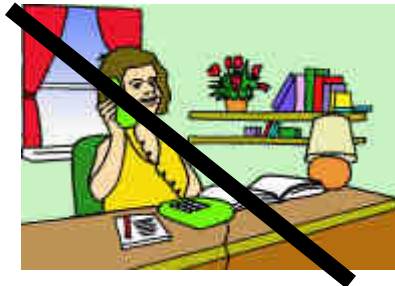
The 'News and Views' Team gave out good information and ran the Partnership Board website.



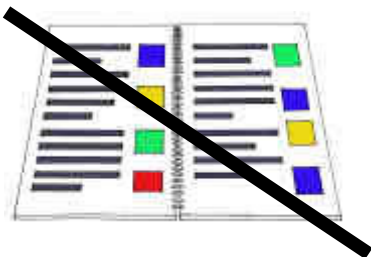
People who use services and carers said that ECHO, a local voluntary organisation, was good at giving out information and advice.



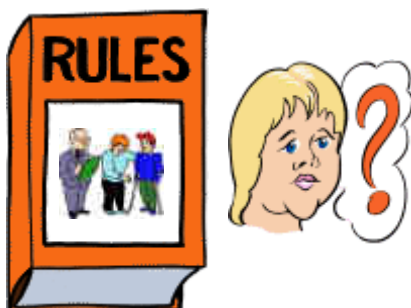
Some people who used services said that they wanted information in different formats like videos and CDs.



People did not have information about how to get support out of office hours. Some people said that they found it difficult to get in touch with social workers even during office hours.

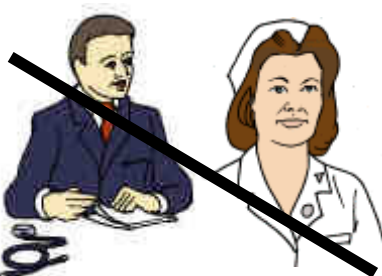


There was no accessible information for people about keeping things private or about how to ask to see information kept about them.



Access to services

People with learning disabilities and their carers did not find the rules about how they could get services easy to understand.



People with learning disabilities were finding it hard to get through to the health care services which they needed. The council and Primary Care Trust were doing some work on this to make things better.



What needs to be done



The council should make sure that people with learning disabilities get good accessible information. It should tell them about different services and how to get them.



The council should make sure that the rules about who can get a service are clear for people with learning disabilities and their carers.



The council should work with the Primary Care Trust to make sure that people with learning disabilities get the health care that they need.

Assessment, care planning and review

What the inspection team found



People with learning disabilities and carers were often kept waiting to have their needs looked at.



Many of the care plans which the inspectors read only listed what services there were and not what the person needed.



A very large number of people had not had a review of their needs done for some time. Some people had been waiting many years to have their needs looked at again.



It was not clear that people were always given copies of their assessments, care plans and reviews. These plans were not written in ways that were easy for people who use services to understand.



The council was trying out a new form which had been written to help people have their say about their support needs.



Some people said that they wanted support with their religious needs, which were not being looked at.



Few people had either Person-Centred Plans or Health Action Plans.



Young people with learning disabilities were not being well supported to move from Children's Services to Adult Services. 2 new workers had just been taken on to help with making this move better.



14 people who lived outside Herefordshire for their services had had their needs reviewed in the past year.



Not many carers had had their needs looked at. The council had just taken on a Carers' Support Worker to make things better for carers.



The council had started to plan how to meet the needs of people living with older carers.



What needs to be done



The council should make sure that it catches up with all the reviews that have not been done to make sure that people's needs are being met.



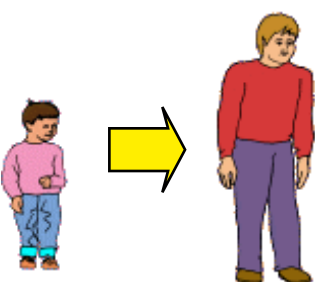
The council should make sure that the Assessment and Care Management Service works better to meet the needs of people with learning disabilities.



The council should make sure that more people have Person-Centred Plans.



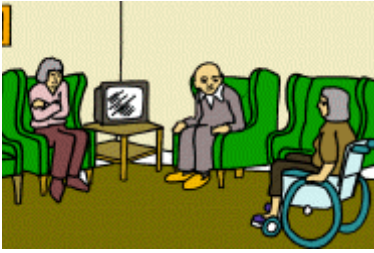
The council should work with the Primary Care Trust to make sure more people have Health Action Plans.



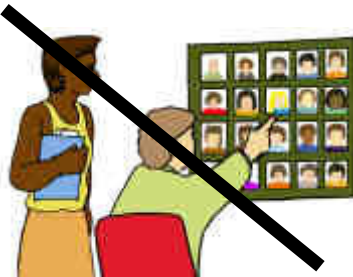
The council and the organisations it works with should make sure that young people with learning disabilities have the support they need when moving from Children's Services to Adult Services.

Services

What the inspection team found



The council had been slow to develop up to date services for people with learning disabilities. Many people were living in care homes and many people who lived with their family carers went to day centres.



There were not enough different services and types of support to give people choice and control in their lives.



Not all parts of the council knew the needs of people with learning disabilities and supported them to be included in their local communities.



People who lived in country areas could not always get the services they needed close by to where they lived.

The council and organisations it worked with were planning to make day services more local to where people lived.

Jobs and learning



Not enough work had been done to help people with learning disabilities get work-based training or jobs, including paid jobs.



No-one with a learning disability was working for the council.



The Pavilion Café was a new organisation which gave both jobs and work-based training to a small number of people. People liked working there.

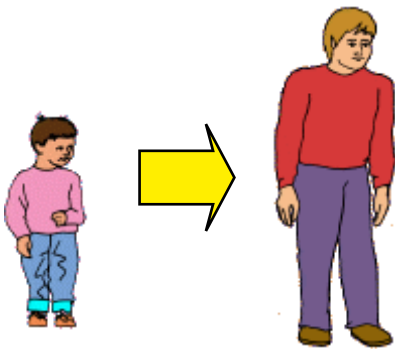


There were chances for people to go to college but more needed to be done for people with high support needs to have such chances.

Direct Payments and Individual Budgets



Only 1 family carer and 13 people with learning disabilities were getting Direct Payments.



Children's Services had helped more parents of disabled children and young people to get Direct Payments.

Plans needed to be made about what would happen in the future when young people moved to Adult Services.



There was a Direct Payments Support Scheme to help people with their Direct Payments.



The council was also working to develop Individual Budgets as part of the national 'In Control' project. 5 people had some kind of individual budget and 1 person had a fully working individual budget.

Advocacy



There was good group advocacy but some people needed an advocate to speak up just for them when, for example, they wanted to make a complaint.

Day services



Many people were going to day centres. The council had started to make some day services more modern by supporting people to use their local communities.



ECHO and other small voluntary organisations were supporting people to do things in their local community but were always having to look for money to carry on.



The Community Learning Disability team said that there were not enough things for people with complex needs and high support needs to do during the day.

The team also said that there were not enough places in care homes for people with behaviour which was difficult to manage.

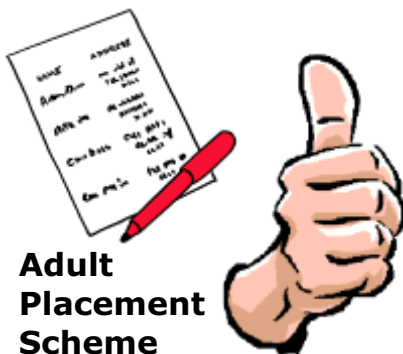


Other services

Some people had short break stays in residential centres run by the council. The council's residential short break service had places which people could use in emergencies.



There were not many examples of people getting services at home.



People who used the Adult Placement Scheme said that it was a good service. There was a waiting list for this service.



Some people with learning disabilities had got help from the Supporting People team to get houses to live in.

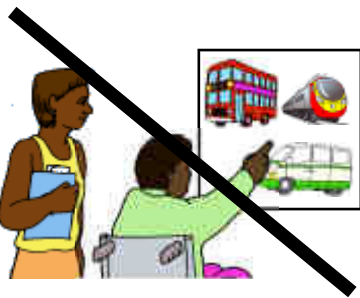
12 people had been supported to get a home of their own by joining a shared-ownership housing scheme.



People told the inspection team that they liked having a place of their own to live in, as they had more control in their lives.



It was very hard for people to get some health services they needed, like speech and language therapy and physiotherapy.



Transport was not set up in a way that gave people choice and control. Some people had to spend a long time travelling to a service.



Public transport was not good in some of the country areas.



Training was being set up to help some people living in Supporting People Housing to use public transport.

Carers



Many carers said that they were not getting the information, advice or support services that they needed. Carers were worried about what would happen in an emergency.



What needs to be done



The council should make sure that people have more choice and control by offering more services of different types which meet their needs.



The council should be an example to other organisations by taking on people with learning disabilities to work in the council.



The council should help more people onto Direct Payments or Individual Budgets.



All parts of the council need to know about the needs of people with learning disabilities and support them to be included in their local communities.



The council should make sure that people can get an advocate when they need one, who is not linked to the service they use.



The council should work with carers to make sure they get the support services they need.

Planning and Buying Services to Meet Needs

What the inspection team found



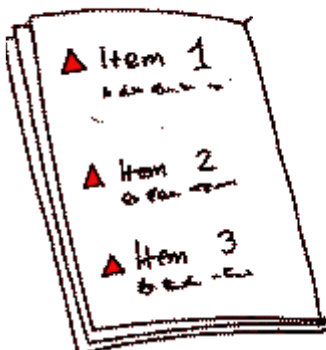
The council and the Primary Care Trust worked together to plan services and both put money into the same pot to buy services.



In November 2006, the council and the Primary Care Trust had written a plan about what they were planning.



The plan said what services they were going to buy to meet the needs of people with learning disabilities in the future.



The plan said that there were 3 important services which needed to be developed more in future – Day Services, Housing with Support Services and the Assessment and Care Management Service.



The council had started work with other councils nearby to plan and buy services for people with high support needs.



The council was good at planning and working with voluntary organisations.



The council, Primary Care Trust and voluntary services had agreed on some rules for choosing and paying for services in the future.

They did this so people could have a bigger choice of services.



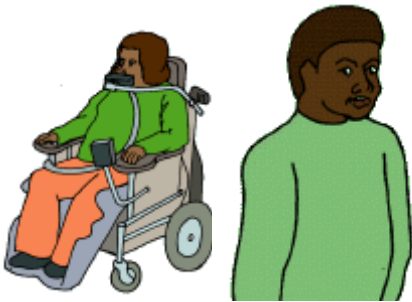
The council was not so good at planning and working with other outside organisations like the Independent Sector. These organisations said that they were not clear what the council wanted from their services.



Adult Services and Children's Services were starting to work together more closely to make better plans for young people with learning disabilities and for parents with learning disabilities.



The council had not involved people who use services and carers enough in planning, running and checking services from the start.



Nobody with high support needs or from a black and minority ethnic group was involved in planning services.



The Valuing People Partnership Board was not working well to plan and check how well services were meeting people's needs.

Not all of its sub-groups were working on the issues which they had been set up to look at.



Not enough people who use services or carers were on the Partnership Board and its sub-groups.



Some people who were on the Partnership Board felt that they were not always being listened to and that meetings were difficult to follow.



The Learning Disability Development Fund money that the council and Primary Care Trust had been given by the government had been used to buy services.

Some people on the Partnership Board were worried that not enough of this money was used to buy new services.



What needs to be done



The council needs to make sure when buying services that it is clear what is expected so that services can get better at meeting people's needs.



The council needs to make sure that people who use services and carers are involved in planning, running and checking services so that services meet people's needs.



The council needs to make sure that the Valuing People Partnership Board and its sub-groups work better and involve people well.

Checking how well services are doing

What the inspection team found



The council did not often ask people with learning disabilities and their carers what they thought about the services they were getting.



In the last year they had started to ask people about housing and support services and day services.



A self-advocacy group called the People's Union was good at finding out what people who use services thought about the services they got.



Some people said they knew how to complain if they were not happy about services. The council was just updating its leaflet which told the public how to complain when things went wrong.



It was not always clear how people's views and complaints had been used to make services better.



The council did not have a plan for checking how well all learning disability services were doing to meet people's needs.



Some of the recording in the files which inspectors read was not very good. Managers were not always checking the work that was being done by their staff.



The council could not show how their plans and services were making things more equal for different groups of people with learning disabilities.



What needs to be done



The council should ask people with learning disabilities and carers what they think about the services they get and use this information to make services better.



The council should write a plan about how it will check all learning disability services to make sure that they are doing what they say they are doing to meet people's needs.



The council needs to look at all learning disability plans and services to see how they affect different groups of people, so they can make sure that people are being treated fairly and equally.

Keeping safe

What the inspection team found



There was a worker called an Adult Protection Coordinator who worked very hard with lots of organisations to keep people safe.



Training to keep people safe from harm was mainly done or arranged by the Adult Protection Coordinator and not by the council's training department.

There were not enough resources given to support different types of training needed to keep people safe.



The Adult Protection Coordinator was spending so much time supporting staff to deal with individual cases where people were at risk that she did not always have enough time to work on all of the other parts of her job.



Not many people knew about the special committee working to keep people safe.

Some important organisations, like colleges, were not members of this committee.



People who use services and carers were not always asked their views about how to develop better ways of working to keep people safe.



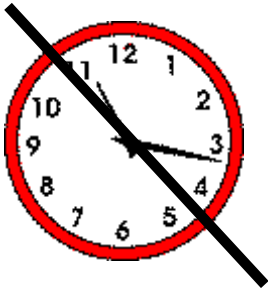
When bad things happened to people in the past, the information had not always been written down well and reported in good time to be looked into.



Work to protect people from harm had got better in recent months but there were still a lot to do so that things got even better.



There were rules to follow to protect people from harm. However, there were not enough checks in place to make sure that the council and organisations it worked with were always following them.



Staff did not have enough time to work on preventing people from being at risk in the first place.



The council did not produce any accessible information for people with learning disabilities to support themselves to keep safe.



The People's Union had started to do some work with self-advocates about keeping safe.



They were also planning to do some training to help people deal with bullying. People who use services had said that they were very worried about the bullying which was going on.

Keep People Safe



What needs to be done



The council and organisations it works with should make sure that their ways of working to keep people safe are managed better throughout all levels of their organisations.

Resources – Money and staff

What the inspection team found

Money



For some years learning disability services had spent more money than they had been given to spend by the council.



A lot of money was used for people to live in care homes. Not many people lived in a home of their own.



The council and Primary Care Trust had done some work to find out how they could spend the money for learning disability services in a better way.



The council agreed new plans for learning disability services in December 2006 and to give some extra money from 2007 to 2008.



This extra money was to help with some of the changes planned to bring learning disability services up to date.



Not enough work had been done to find money for learning disability services from outside Adult Social Care. The council was going to take on a worker to look into this.



Staff

The council said that it had had some problems finding new staff to work in learning disability services.



The Community Learning Disability Team had found it very hard to get all their work done.



In the past year things had got better as new managers and staff had been taken on.



People with learning disabilities were not always involved in taking on new staff.



The council and Primary Care Trust did not have a plan to make sure that the right staff with the right skills were working in learning disability services.



There was no plan to make sure that staff were getting the right training to do their work.



People with learning disabilities were going to take part in training staff in 2007.



What needs to be done



The council and the Primary Care Trust should make sure money is spent in the best way it can be to make learning disability services better.



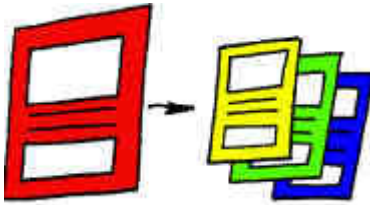
The council and the organisations it works with should find ways to bring in money from outside Adult Social Care.



The council and the Primary Care Trust need to make sure that there are enough managers and staff in learning disability services.



Managers and staff must also have the right skills and the right training to work in learning disability services.



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