Appendix Two:

**Adult Social Care Peer Challenge
Action Plan 2016/17**
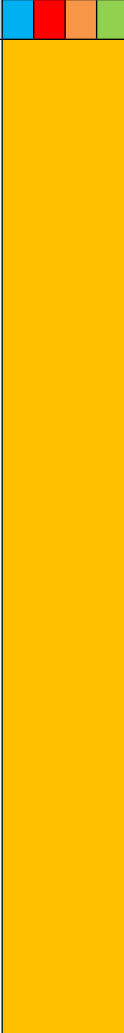
This action plan is aligned to the areas of consideration from the Peer Review

THEME 1 – Having a clear vision and strategy						
Theme Lead: Director of Adult Services						
Objectives to create change	**Actions**	**Lead**	**Timescale**	**Success measures**	**Progress update**	**BRAG**
Clarify role of Adult Social Care in local Health and Social Care economy	1. Develop an agreed Action Plan and vision for Adult Social Care as part of STP, including how this vision will guide the work of Adult Social Care 2. For actions in relation to case management change see theme 2 below	Pete Fahy All Heads of Service	September 2016	Single signed up vision for Health and Social Care. Familiarisation of vision with stakeholders	Senior representation on STP ensuring the social care vision is aligned to on-going work in the wider health and social care community. Each service area are developing a 'plan on a page' to document priorities which will be linked to our vision and values. This will be communicated to all stakeholders.	

THEME 2 – Embedding personalisation in practice						
Theme Lead: Head of Practice Development and Safeguarding						
Objectives to create change	Actions	Lead	Timescale	Success measures	Progress update	BRAG
A workforce development plan with timescales and resources as a foundation for workforce improvement	3. Develop a workforce development plan for Adult Social Care	Andrew Errington	December 2016	Workforce Development Plan produced with resources available and timescales for delivery	Draft workforce strategy in place. Re engagement and re drafting to take place following workforce planning. Interim training needs analysis completed and work underway to identify delivery. Learning and development brochure under development with workforce board to ratify and approve Workforce Board established with a finalised strategy in place by January 2017	
Raise the profile of personalisation –	4. Development of a 'personalisation champions'	Andrew Errington	April 2016	High profile champions group	Group established and reframed to be a	

identify good practice, share and profile this.	group to include all staff groups (operational, provider and commissioning staff) **Links to ASCOF 1C Parts 1a, 1b, 2a, 2b**	Lizzie Edwards Kelly Lucas		with evidence of progress and impact	Practice Development forum meeting bi-monthly. This will be supplemented by a quarterly briefing for staff on regional and national developments and best practice.	
Improved guidance to staff on how to work in a more personalised way within available resources	5. Develop an agreed set of Personalisation guidance notes, communicate to practitioners and use to inform practice through learning sets. **Performance measure ASCOF 1C Parts 1a,1b,2a,2b**	Andrew Errington Gemma Tate Janice White	September 2016 (for first guidance note)	Personalisation guidance notes developed and used as tools to improve practice	A proposal for the development of a suite of thematic learning sets or light bite training has been developed. These will complement core training and provide materials and guidance for staff on a range of subject areas	
Practice improves through a regular forum of learning sets	6. Implement learning sets led by personalisation champions to create a forum for sharing good practice, learning and challenge. Also to problem solve particularly challenging cases.	Lizzie Edwards Kelly Lucas	July 2016 then ongoing	Learning sets in place and evidence of impact shown through case file audits	Learning sets delivered to Team Leaders, and cascading to staff has started. Positive feedback received.	

Ensure that users and carers are involved in co-production of the Coventry approach to personalisation	7. Establish a user and carer reference group to work with ASC in the development of personalised approaches **Performance measure ASCOF 1C Parts 1a,1b,2a,2b**	Michelle McGinty	August 2016	Reference group in place that is constructively influencing developments.	Two meetings have taken place and further meetings are planned throughout the year.
Raise awareness of safeguarding policies and procedures	8. Materials for a learning set on Making Safeguarding Personal and using positive risk tools developed for Team Leaders to deliver to staff members and creation of positive risk tools in Care Director- more personalised support section- gold aspiration **Performance measure ASCOF 4A & 4B**	Jill Ayres Peb Johal	August 2016	Increased use of positive risk tools and appropriate application of safeguarding policies and procedures identified through safeguarding file audits	A making safeguarding personal tool kit has been developed.

Learning sets have been developed and have been cascaded to teams during July and August 2016.

To further enhance this work. A risk enablement panel will be established as a forum for practitioners to discuss individual cases. This will be developed using national best practice. |
| Ensure there is a specific training programme in | 9. Training for all assessment staff on process for organising direct payments' | Lizzie Edwards Kelly Lucas | July 2016 | Training for all assessment staff leading to increased | Training completed.

Direct Payments |

relation to direct payments policy and procedures	policy and procedures- streamlining- linked to personalisation policy **Performance measure ASCOF 1C 2a & 2b**			uptake of direct payments	training to form part of the core offer for frontline staff.
Ensure that ability to take a personalised approach is a key skill for practitioners	10. Revise progression guidance and process for social workers (from G6-G7), to ensure that evidencing a personalised approach in terms of safeguarding and also day-to-day practice is a key requirement **Performance measure ASCOF 1C 1a & 1b**	Lizzie Edwards	May 2016	Revised progression guidance and process, to include evidencing a personalised approach	Progression guidance in place
Development of more market options for personalised support	11. Deliver Individual Service Fund (ISF's) pilot, evaluate and roll-out. This piece of work is in relation to short-term services and on-going support, including re-commissioning of carers' support services and review of the current assistive technology contract and processes (links to action 7). **Performance measure ASCOF 1C Parts 1a, 1b, 2a & 2b**	Maxine Shakespeare Richard Limb	July 2017 and on-going (ISF pilot to be concluded September 2016)	Regular workshops with people with carer and support needs, operational teams and providers. Development of an ISF service	Presentations to willing providers to pilot ISFs conducted. A two way agreement is sent to providers. Care Director process for payments agreed. Virtual bank account created. Three people are now taking part in the ISF pilot.

THEME 3 – Improving the experience of the Customer						
Theme Lead: Head of Social Work Service – Prevention and Health						
Objectives to create change	**Actions**	**Lead**	**Timescale**	**Success measures**	**Progress update**	**BRAG**
Establish systematic customer engagement mechanisms so that expectations from Adult Social Care are clear. Create feedback mechanisms that allow quick adaption of new practices that are introduced i.e. self-assessment	12. Review how other Local Authorities effectively engage with people with care and support needs, and their carers, and develop comprehensive mechanism for effective engagement and collation of feedback from service users and families, using mechanisms already in place such as frontline knowledge, complaints, surveys, and forums **Performance measure ASCOF 1A, 1D, 3A, 3B & 3C**	Michelle McGinty Andrew Errington	September 2016	Feedback results in demonstrable change to how Adult Social Care operates	Work to identify pre-existing methods for collating feedback completed. Options paper for implementation of approach has been completed and Action plan developed. User and Carer feedback will be incorporated into a quarterly quality report that is currently in development and will be reported to ASCMT.	

Implement clear standards in respect of waiting times for social work interventions	13. Develop and formalise a mechanism for risk assessment of waiting lists to ensure that allocation is based on an appropriate assessment of risk, to include mechanism to review level of risk whilst on waiting lists	Lizzie Edwards	May 2016	Mechanism for risk assessing waiting list developed, cases allocated based on risk and reviewed where required based on practitioner feedback	Risk Assessment mechanism developed and implemented in April 2016.
Use technology to reduce response times	14. Implement mechanisms for self-assessment and - carers self assessment through use of internet based technology	Marc Greenwood Lizzie Edwards Gemma Tate	August 2016 (Self-assessment tool) January 2017 (carer self assessment)	Through use of self-assessment to enable City Council resource to be targeted where most effective resulting in overall reduction of waiting lists	Self-assessment went live on 2nd September 2016. Work has begun on developing the carers self assessment.

Improve data/information sharing across organisations to ensure it is timely, specific and effective	15. Increase the use of the Integrated Neighbourhood Team (INT) Black Pear solution to aide multi-disciplinary working, and then review and appraise options for information sharing going forward 16. When considering succession plan for Care Director (currently case management system) to do so with a view to achieving shared records across health and social care **Performance Measure ASCOF 2B (Source data)**	Marc Greenwood	December 2016	Shared records of patients/service users that enable creative support planning to take place in multi-disciplinary teams	Development of the Local Digital Roadmap (LDR) completed. It includes interoperability approaches, such as Black Pear, that will enable the sharing of information across health and social care. The LDR sets out the 5 year digital vision for health and social care, including our approach to achieving shared records. Plans to be developed to commence improvements. As part of the LDR vision discussions are underway across Coventry and Warwickshire about developing a single Electronic Citizen Record (ECR). This is a long term vision that will contribute towards achieving our objectives In the interim

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| Reduction in number of people requiring social care support and effective use of short-term services | 17. Trial of 'why not home, why not today' model and review of effectiveness

Performance measure ASCOF 2B, 2C & 2D | Rae Bottrill | August 2016 | Reduced numbers of people requiring social care support on discharge from hospital and reduced joint / LA DTOC | Steering group and operational group established. Some improvement in DTOC apparent at this early stage.

Some significant changes implemented to improve patient flow, e.g. Integrated Discharge Team are now ward based and all UHCW Therapy staff assess and case manage discharge via short term services.

This action has been superseded with the frailty pathway work as part of the STP. Project group meetings are fortnightly. | |

Ensure that services are appropriately targeted to where they can have greatest impact.	18. Develop criteria for access to short-term services, to apply across all referring partner organisations **Performance measure ASCOF 2B & 2D**	Rae Bottrill Neil Byrne Ian Bowering	May 2016	Development and communication of access criteria leading to reduction in avoidable referrals	Criteria developed and implemented in April 2016. Team Leaders at the hospital approve all requests for short term services.	
Support people to achieve their outcomes on first contact with the City Council	19. Deploy "Intake" staff within Customer Services Centre to provide greater expertise at initial assessment stage	Ian Bowering Lizzie Edwards	June 2016	Reduction in number of referrals through the Adult Social Care front door, reduction in waiting times and reduction in percentage of people going on to further assessment. Improved customer satisfaction through being given the most appropriate advice at first contact.	Staff members deployed on 6th June 2016.	

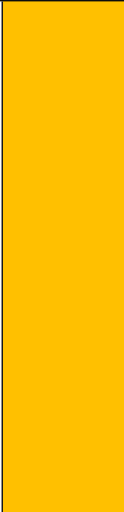|						
An effective Transitions process is in place	20. Complete a stock-take exercise and make recommendations for how the transitions process can be improved encompassing quick wins and longer term actions **Performance measure ASCOF 2A Part 1**	Sally Caren	August 2016	Better transition planning and feedback from people with care and support needs and their families	The All Age Disability Review has been completed and formal report received. Programme Board to deliver required improvements in place.	(blue)
Ensure appropriate range of support available for people using direct payment	21. Review of direct payment support services and proposal developed to increase choice to be implemented in next round of direct payment support commissioning **Performance measure ASCOF 1B & 1C Parts 2a & 2b**	Maxine Shakespeare Lizzie Edwards Kelly Lucas Paul McConnell Martin Rumble	September 2016	Improved range of support available for people in identifying their outcomes and making active choices about how these outcomes are met	Scoping meeting held and benchmarking exercise undertaken. Recommendations now being considered by Commissioning and Procurement.	(yellow)

THEME 4 – Embedding personalisation in process						
Theme Lead: Head of Commissioning and Provision						
Objectives to create change	**Actions**	**Lead**	**Timescale**	**Success measures**	**Progress update**	**BRAG**
Ensure Direct Payments policy reflects broader principles of Care Act and is a tool to further personalised support	22. Review of Direct Payments Policy, with Health and Education, in order to reflect Care Act changes and allow increased flexibility and creativity, then communicate with Adult Social Care teams **Performance measure ASCOF 1C Parts 2a & 2b**	Maxine Shakespeare Lizzie Edwards Kelly Lucas Gemma Tate Janice White	December 2016	Updated Direct Payments' Policy	Changes made in draft form, to be further refined to ensure sufficiently robust. Awaiting further instruction from legal. Staff guidance and public information to be reviewed and as required created in support of the policy implementation	
Quality assurance mechanism in place in respect of social work practice	23. Case file audit tool to be reviewed and reduced, then circulated and expectations set for completion of regular case file audits by Team Leaders, then work towards practitioners completing case file audits of their own cases to support reflective practice and self-learning	Andrew Errington Kelly Lucas	July 2016 then ongoing	Quality assurance and learning in place. Staff to complete own audit of their work. Team Leaders to complete one case file audit per month and to feedback recommendations to staff members. Examples of good practice to be shared through wider personalisation	Existing Quality Assurance tool reviewed and refined, Principal Social Worker has established a Working group to develop a comprehensive quality practice assurance framework with a focus both on individual	

					practitioner and organisational level Quality Assurance activity. Draft Framework under development with agreed consultation, approval and ratification process. Quality report under development to enable formal reporting to Adult Social Care Management Team (ASCMT)	
				champions group		
Better understanding of the range of low level equipment available and how people can access	24. Development and delivery of low level equipment training sessions, including new technology for all assessment staff **Performance measure ASCOF 2D**	Sheila Stirling	August 2016	Delivery of sessions and increased direct ordering of equipment so that the number of internal referrals decreases and customer journey improved	All sessions complete.	
Raise awareness of Care Act eligibility criteria	25. Materials for two learning sets to be developed for on Care Act eligibility criteria for users and carers, linked to specific case examples. Although primary target group will	Lizzie Edwards Kelly Lucas Suzanne Lawlor	July 2016	Development of materials and delivery of four sessions underway. (two for staff and one for voluntary sector and one for providers)	Learning sets delivered to Team Leaders, and cascading to staff has started. Positive feedback received.	

	be social workers this can also be delivered to providers and the voluntary sector			Improved understanding of eligibility criteria evidenced through case file audits and linked to CWPT processes	
Adopt an approach to market development that is based on the experience of the end user as opposed to tasks.	26. Contracts specified in terms of outcomes for the end user and less task and time-based contracting. Contract management processes to focus on the experience of the end user, involving people with care and support needs, carers, operational teams, and providers. **Performance Measure ASCOF 1A, 1B,1D, 3A & 3B**	Jason Bejai Craig Dutton Paul McConnell	March 2017 and on-going	Specifications and re-commissioning of short and long-term services to focus on outcome based support	Short term support specification developed which focusses on wellbeing and prevention elements of the Care Act. Increased emphasis on how people are supported to have greater control over the support they receive. Service currently out to tender. Long term support service specification has been drafted along the same principles with increased emphasis on Individual Service Funds (ISFs).

					Carers, service users and providers are part of the tender design and evaluation process for long term support. Residents/families/ Healthwatch engaged for comment on care home specification Long term home support discussed and approved at Cabinet in November 2016.	
An effective Resource Allocation system is in place	27. Review and streamline the process for Resource Allocation (FACE RAS and Care Fund Calculator) for people with care and support needs and carers, including suitability for allowing a personalised approach – reduce length of paperwork and ensure that RAS is recalibrated to reflect new support	Marc Greenwood Lizzie Edwards Melissa Cano Adam Davis	September 2016	Reduced level of bureaucracy for social workers and greater opportunity for users and carers to evidence more personalised approach	FACE recalibration is being undertaken in line with revised unit costs. Unit costs have been affected by changes in commissioned rates resulting from the introduction of the National Living Wage. Negotiations	

	rates				with providers have now concluded in the main and therefore average unit costs for services have been identified. These will be built into the recalibration. Needs and Wellbeing form has been reduced following consultation with frontline staff. This is currently out for testing, Principal Social Worker will then be reviewing the remaining suite of forms. FACE recalibration has been slightly delayed and is expected to be completed by end of November	

THEME 5 – Robust financial planning and programme management						
Theme Lead: Head of Business Systems and Continuous Improvement						
Objectives to create change	Actions	Lead	Timescale	Success measures	Progress Update	BRAG
Programme management	28. Ensure that each programme element to deliver savings is supported by a robust plan, is realistic in expectations and is monitored	Michelle McGinty	July 2016	Each element of savings programme has a plan to support with oversight and the scope for remedial action if progress slips	Delivery plans now in place for key projects and aligned to budget savings.

Delivery plans will be developed when new programmes of work are identified

Frequent progress and monitoring mechanisms in place. | |
| Market Sustainability | 29. Ensure that provider and market management activity enables understanding of impact of market costs and that this is used to inform commissioning activity | Jon Reading | September 2016 | Reliable market based information obtained to support commissioning activity in 2016 | A wider cross provider event took place on 25th October 2016 to inform revised MPS/commissioning activity.

Regional Commissioning Group intelligence on care home market obtained. Care home fee rate | |

					intelligence was shared with Adults Joint Commissioning Board in September 2016.	