ADULT SOCIAL WORK & SOCIAL CARE

JOINT BUSINESS MANAGEMENT AND IMPROVEMENT PLAN 2017/18

AND

ANNUAL PERFORMANCE REPORT 2016/17

CONTENTS

INTRODUCTION

Welcome to the Adult Social Work & Social Care Business Management and Improvement Plan (BMIP) 2017/18 and Annual Performance Report 2016/17.

We are now a year into the Integration of Health and Social Care, and we are starting to see the real benefits that more joined-up and personalised services will deliver people in their own locality. Over the last 12 months we have continued to make great progress in building upon existing partnerships with health, the independent and voluntary sectors, and other Council departments to deliver positive outcomes for the people who use our services, in their own communities.

Successes across the service include:

- We introduced Participatory Budgeting (PB) for carers in Perth and Kinross, bringing their expertise into the development of services for carers. Called 'Carers Voice, Carers Choice', carers made decisions on how £20k would be allocated across Perth and Kinross.
- Another PB project, 'Your Community, Your Budget Your Choice' gave local people the choice to fund new support services in their communities. 21 projects were fully funded and 22 were part-funded from a pot of £100,000.
- Our efforts to manage delayed discharge were continued, in partnership with health colleagues. We have implemented a number of actions as part of a wide ranging improvement plan and as a result seen significant improvement in recent months.
- Following an extensive review of social work services we have have restructured our teams to integrate with health services in localities and increase provision to support early intervention and intervention
- The use of technology to support people to live independently in their communities was expanded.
- We worked closely with health colleagues across localities to ensure improved access to healthcare for people with a learning disability.
- A number of our services received very positive inspection reports following visits by the care Inspectorate.
- We updated our Health Inequalities Strategy following a wide-ranging consultation with stakeholders.

Over the next few years and into the foreseeable future we will continue to face challenges. Pressures on services in our communities and in our hospitals, coupled with the rising ageing population in Perth and Kinross, mean we have to ensure our services and staff are organised in the most efficient way. We will also focus on transforming our services to meet these challenges and to support the Health and Social Care Integration agenda.

We will continue to develop integrated locality working over the next 12 months to ensure social work services in local areas can meet the wide range of needs of individuals, carers and families.
By working together across the service, and with our Council colleagues and community partners, I know we can continue to achieve positive results over the next year.

Rob Packham
Health and Social Care Chief Officer

VISION, STRATEGIC OBJECTIVES AND LOCAL OUTCOMES

"Our vision is of a confident and ambitious Perth and Kinross with a strong identity and clear outcomes that everyone works together to achieve. Our area will be vibrant and successful; a safe, secure and healthy environment; and a place where people and communities are nurtured and supported."

STRATEGIC OBJECTIVES

The vision is reflected in the Council's five strategic objectives and these inform decisions about policy direction and budget spending:

1. Giving every child the best start in life
2. Developing educated, responsible and informed citizens
3. Promoting a prosperous, inclusive and sustainable economy
4. Supporting people to lead independent, healthy and active lives
5. Creating a safe and sustainable place for future generations.

The vision and strategic objectives support the delivery of the Community Planning Partnership's Single Outcome Agreement for 2013–2023, focusing on 12 local outcomes that will achieve improvements for the area, our local communities, and our citizens.

Adult Social Work & Social Care (ASW&SC) will support the delivery of the strategic objectives and local outcomes described within the document.

The strategic objectives of particular relevance for this area of the service are:-

- Developing educated, responsible and informed citizens
- Supporting people to lead independent, healthy and active lives

These strategic objectives are also underpinned by the **vision for the Health and Social Care partnership**.

> *"We will work together to support people living in Perth and Kinross to lead healthy and active lives and live as independently as possible with choice and control over the decisions they make about their care and support. Our aim is to improve the wellbeing and outcomes of people living in Perth and Kinross, to intervene early and work with the third and independent sectors and communities, to prevent longer term issues arising."*

This vision can only become reality through actions which reflect the principles that underpin our approach we therefore aim to make sure the services and support we offer people are:-

- Developed locally, in partnership with communities, the third and independent sectors
- Integrated from the point of view of individuals, families and communities and responsive to the particular needs of individuals and families in our different localities
- Commission services that best anticipate people's needs and prevent them arising
- Make the best use of available facilities, people and resources
- Maintain quality and safety standards as the highest priority

Key to the delivery of these priorities is how we work with all our partners to understand the particular needs of individual localities which also address the key themes emerging from the **Fairness Commission**.

- Ensure our resources are allocated according to need with a focus on prevention
- Promote awareness and knowledge of poverty and inequalities
- Review our strategies, policies and procedures
- Create knowledge and pathways of support which are right for individuals and families

NURTURING EDUCATED, RESPONSIBLE AND INFORMED CITIZENS

SERVICE CONTRIBUTION - Net cost: £3,381,400

We will work with all our partners to make sure everyone has the best chance to have a meaningful, worthwhile and productive future by:-

- Supporting the most vulnerable individuals and families to empower and encourage them to have core skills
- Offer people of all ages and abilities opportunities to learn, develop and expand their abilities

Performance Summary for 2016/17

We continue to work with our partners to make sure people have the best chance to have a meaningful, worthwhile and productive future. We want to promote independence and encourage people to have attainable aspirations, supported through lifelong opportunities.

We have undertaken a variety of activities to ensure our young people are ready for life and work. We have:-

- **Listen Up! -** Is a project set up by Perth and Kinross' Hearing Support Service (HSS) to work with secondary pupils to create a DVD which can be used to show teachers, and other support staff, the challenge faced by deaf pupils in our schools. The project was supported by the voluntary organisation Action on Hearing Loss (AoHL) which provides a specialist 'Moving On' transitions service, supporting 16-25 year olds who are deaf or have a hearing loss. The DVD will be released in Spring 2017 and will become a key element of any staff deaf training.

- **Employability -** The Perth and Kinross Gold Star Employer Awards helps to raise the profiles of businesses across the local area through nominations for and from businesses which actively recruit young jobseekers, the long-term unemployed and those with varying disabilities. The Employability Network has supported the Gold Star Employers Awards since August 2016, 11 Employers have been nominated with 4 acknowledged as Gold Star Employers. Other areas we have progressed in this area are:-

    - Paid Employment and Works Skills **-** The Employment Support Team (EST) has worked with 140 clients to find and sustain employment. In addition the EST have worked with a further 24 clients who will successfully exit the service, this for a variety of reasons including positive outcomes where the clients have progressed and no longer needs employment support.

    - Working Roots Project **-** 2016 saw the development of additional Working Roots projects across Perth & Kinross. So far the project has supported 9 individuals with 5 continuing with skills development and 4 progressing to alternative working environments.

- **Autism -** We have maintained strong, positive links with our two autism specific charities, Perth Autism Support (PAS) and Autism Initiatives (No3), working collaboratively on several autism specific projects.

- **Brain in Hand (BiH):** Perth & Kinross council provided funding through the Corporate 'Angel's Share' for the Brain in Hand (BiH) initiative, a smart web-based software that helps users achieve greater independence, manage mood problems and reduce reliance on support.

- **Autism Work Experience:** the project provides appropriate transition from senior school age to adult life and improves the transition from school into employment. The project enables those with an ASD to be an active and valued part of society. 10 young people across PKC are now using the service who would previously not have received opportunities for work experience.

- **Easing the Move:** the project is aimed at young adults 16-25 year olds in line with the Principles of Good Transition guidance and picks up on those unable to move into adult services. The service is at full capacity (10) and has engaged in a wide variety of activities with the young people and young adults including:

    - Accessing the Prince's Trust Fairbridge Access programme
    - Commencing a work experience placement with Community TreeCycle
    - Application for New Opportunities/New Skills courses (previously this would not have been an option)

Our focus for 2017/18 will be:

We will work with all our partners and our communities through a range of approaches and initiatives to deliver the key actions outlined within the Strategic Commissioning Plan 2016-2019.

- Continue to develop and implement falls prevention initiatives including public awareness,staff education, and establishing effective multi-agency falls referral pathways.
- Increase opportunities for Participatory Budgeting so that local communities and special interest groups can take more control over the way resources are spent

KEY PERFORMANCE INDICATORS for 2015/16
(Data covering to year end unless otherwise stated)

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Employability Network							
2.3: The total number of people that the Network work with **Housing and Communities Integrated Joint Board**	1,220	1,402	**1,817**	**1,412**	1,456	1,468	1,482
2.4a: The number of employers working with clients at Stage 1 of the Employability Pathway *(Referral, Engagement and Assessment)* **Housing and Communities Integrated Joint Board**	n/a	26	**26**	**26**	26	26	26
2.4b: The number of employers working with clients at Stage 5 of the Employability Pathway *(In Work Support and Aftercare)* **Housing and Communities Integrated Joint Board**	n/a	12	**12**	**12**	12	12	12
The total number of people that the Employability Network has worked with has increased by 30% (415) in 16/17. The number of employers working with the network have remained stable throughout the period allowing the network to continue to offer opportunities to clients working with the network.							

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SUPPORTING PEOPLE TO LEAD INDEPENDENT, HEALTHY AND ACTIVE LIVES

SERVICE CONTRIBUTION - Net Cost £49,880,710

We will help people sustain and improve their health and wellbeing to help them meet their full potential and to remain in their own homes, or in a homely environment, by:-

- Developing models of community based care to support people to remain safely at home for as long as possible.
- Focusing on work that promotes early intervention and prevention, promoting healthier lifestyles and tackling health inequalities.
- Placing individuals at the core ensuring any care is personal to their needs and results in positive outcomes.
- We worked with communities to create and design responsive services whilst reducing inequalities.
- Reshaping care for older people to prevent unplanned admissions to hospital and supporting discharge to enable people to live independently with appropriate flexible support

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Performance Summary for 2016/17

We have focussed on work that promotes early intervention and prevention, promoting healthier lifestyles and tackling health inequalities through a range of activities as described below. It is anticipated a greater impact will be made in tackling these challenges through the opportunities that present themselves through integrated health and social care provision.

We placed individuals at the core ensuring any care is personal to their needs and resulted in positive outcomes:-

- Self Directed Support (SDS) Week was held nationally between 13- 17June 2016. A number of events were held across Perth and Kinross to raise awareness of SDS and how it can help people to live independent and happy lives, and achieve their own agreed outcomes. We have seen an increase in people chosing to have more control in how their care and support is delivered.

- The Care and Wellbeing Co-operative supported by Growbiz through the SDS Innovation Fund now has 24 members providing care, support and promoting wellbeing throughout Highland Perthshire. The Co=operative is currentlysupporting 16 families in rural areas, many of whom are using SDS Direct Payments to pay for support.

- **Carers** - We introduced Participatory Budgeting (PB) for carers in Perth and Kinross, bringing their expertise into the development of services for carers. Called 'Carers Voice, Carers Choice', carers made decisions on how £20k would be allocated across Perth and Kinross.

- **Delayed Discharge -** Managing delayed discharge continues to be a key focus for the Health and Social Care Partnership. We have prepared a range of actions as part of a wide ranging improvement plan including:

- A long term plan to commission a new framework for care at home partners.
- We implemented a marketing campaign to attract people to take up roles within the care profession. The market will also benefit from the improved rates of pay brought about through the introduction of the Living Wage.
- We have introduced a new procedure whereby the Council will take over the Welfare Guardianship if the family are not making reasonable steps to complete the process quickly.
- We have doubled the size of the hospital discharge team to ensure we have sufficient social work capacity to manage the number of assessments.

- **Friendship Network/Helping to Reduce Social Isolation –** We launched a new 'Friendship Network' in October 2016 helping to connect older people in their communities. The network aims to keep older people active and reduce social isolation. A series of tea dances were held, views were gathered as to how people can get involved and support social activities where they live. Feedback was positive and many people expressed an interest in getting more advice about setting up a social or friendship group in their community.

- **Technology Enabled Care -** We continue to expand the use of technology to support individuals within the community**.**

  - We are currently trialling home-health monitoring with a number of patients from the Tayside Weight Management Service. Following the conclusion of this pilot project, we will look to explore other areas where people can be supported to self-manage their condition. Another example of the use of technology is the mobile app "Brain in Hand" which supports individuals with autism to increase their independence and reduce anxiety levels. Through funding from the Council's Angel's Share Programme this app will be trialled initially with ten young adults who are supported through Perth Autism Support.

  - **Video-Conferencing:** To reduce the need for patients living in rural or remote areas to travel significant distances for sometimes short hospital appointments, we are also exploring how video-conferencing can be utilised across health and social care. This will be first trialled with patients from the Tayside Weight Management Service who will take part in fortnightly video-consultations for a period of 18 weeks. The findings from this pilot project will then inform future projects as we look to increase the use of video-conferencing across Perth and Kinross.

- **Learning Disabilities - Improved Health Care -** We work closely with health colleagues across localities to ensure improved access to healthcare for people with a learning disability.

  Referrals are made for specialist health provision and services accessed by individuals include: Down's Dementia Screening; sexual health and reproduction; anxiety groups; dental services; Keeping Safe workshops; and Falls Clinic. In addition, there is improved support for expectant mothers who have a learning disability.

- **Friends Unlimited Network (FUN)** provides opportunities for people with learning disabilities to meet new people; allowing them the chance to develop friendships. At present FUN has 53 active members who experience regular social events through a calendar of activities such as bowling, discos, pub nights, club nights, craft sessions, workshops and pub quizzes.

- **Care Inspections** – A number of inspections have been undertaken by the Care Inspectorate since April 2016: Care at Home, Parkdale Care Home, Adults with Learning Disabilities Housing Support Service, Dalweem Care Home, Kinnoull Day Opportunities and Lewis Place. Of the 6 services inspected 13 quality themes were assessed for the Quality of Care and Support, Environment, Staffing and Management and Leadership. 23% (3) received Excellent, 77% (10) received Very Good/ Good grade; all of which represent increasingly better levels of performance. Some examples of feedback include:-

- Care at Home (February 2017): During the inspection service users had the opportunity to comment on their experience of using the service. They found a high level of satisfaction with the support provided, service users told us they had good communication with the service and carers were appropriately skilled, respectful and flexible.

- Parkdale Care Home (February 2017): The Inspectorate spoke with service users and relatives and feedback from people who use the service and found that all of these people were very happy with the quality of the service. People spoke very highly about the staff who supported them and other members of the staff team.

- Adults with Learning Disabilities Housing Support (October 2016): During the inspection the Inspectorate met some service users who told us about their lives and how they were supported. They said that they liked their staff and described some of the support they received from them, such as helping them to do their shopping and access community facilities.

- Dalweem Care Home (June 2016): The Inspectorate spoke with both residents and relatives during their visit and also observed a mealtime experience. The Inspectorate were overall satisfied that the staff at Dalweem were attentive to residents, knew their main needs, responded to health changes and provided a relaxed and caring atmosphere. Residents said they were very happy living at Dalweem and staff were happy to work at the home. The environment was welcoming and homely.

- Kinnoull Day Opportunities (April 2016): During the inspection the Inspectorate spoke with service users while visiting four community groups. All service users they spoke with were very happy with the service they received. They made comments such as *"I can speak to my key worker about anything", " I enjoy trying baking, (the staff member) keeps me right" and "I would speak to the staff if I wasn't happy about something".*

- Lewis Place Resource Centre (April 2016): During inspection the views of service users and carers are taken into account. It was observed that the manager and care staff spoke very respectfully about the people supported.   This included both the person living with dementia and their family carers. They demonstrated an ethos of respect towards service users. They worked with people to ensure that they were meeting their needs and wishes.

- **Mental Health and Wellbeing Strategy -** An evaluation of our Mental Health and Wellbeing Strategy (2012-2016) was carried out between May and October 2016, and findings were published in December 2016. The report highlighted key areas of success along with areas for improvement and thesewill be taken forward by the Mental Health and Wellbeing Strategy Group and the Locality Management Teams.   Linking with the outcomes from the strategy in the past year we have supported the following events:

  o **Wellbeing Fair -** Co-ordinated by The Recovery Project, the Wellbeing Fair 2016 built on the successes of previous year's, the project has grown and developed to become a unique flagship series of partnership events to promote mental wellbeing, self-management and sustainability, and to help tackle stigma.

  o **Suicide Prevention Week -** A Community Event was held in Perth on 7 September 2016 involving a range of partners which aimed to raise awareness of their services and other initiatives which can contribute towards preventing suicides. One of the key suicide prevention projects in Perth and Kinross has been the 'Bereaved by Suicide' initiative.   This is the first project of its kind in Scotland and the processes have been shared with 6 other local authorities (Dundee, Angus, Dumfries and Galloway, Fife, Highland, Midlothian).

- **Drugs and Alcohol - Self Evaluation of the Quality Principles -** In 2016 Perth and Kinross Council received the first ever Alcohol and Drug Partnership Validated Self- Evaluation of the Quality Principles. This was carried out by the Care Inspectorate and Healthcare Improvement Scotland.   Feedback from the assessment identified a number of particular strengths which were making a positive difference for individuals and families as well as areas for improvement.

- **Heath Inequalities Strategy/Plan -** Reducing inequalities is a key priority of the Perth and Kinross Health and Social Care Partnership's Strategic Commissioning Plan. The Health Inequalities Plan sets out our ambition to reduce health inequalities across Perth and Kinross and will be one element which contributes to the Integration Joint Board's equality outcomes. The draft plan was put out for wider consultation with stakeholders who gave a range of feedback. All comments and amendments have been included in the updated Health Inequalities Strategy.

  Agencies such as PKAVS and Live Active Leisure as well as NHS Tayside partners have identified the value of a health inequalities plan which can be used as both a local resource and as a tool for setting actions for locality partnerships.

  The Perth and Kinross Health Inequalities Plan gives continued focus to addressing avoidable and unfair health inequalities which exist in our local area. The Plan exists as a resource for locality planning both for Health and Social Care and Community Planning more widely. It will also influence production of the Locality Outcomes Improvement Plan (LOIP) for Perth and Kinross during 2017.

Our focus for 2017/18 will be:

We will work with all our partners and our communities through a range of approaches and initiatives to deliver the key actions outlined within the Strategic Commissioning Plan 2016-2019.

- **Strategic Commissioning Plan -** progress thematic areas outlined in the plan.

- **Delivery of the Transformation Programme**:-
    - Communities First Review
    - Review of Residential Care
    - Review of Day Care Services
    - Review of Community Care Packages for Adults
    - Review of Care at Home

- **Technology Enabled Care -** maximise opportunities offered by the new digital server and take forward actions identified within the Strategic Commissioning Plan.

- **Drug and Alcohol Partnership –** a major redesign of service taking into account the recommendations from the national review of ADPs and the changing financial postion of the ADP.

- **Fairness Commission – Fairer Futures –** Develop actions to take forward recommendations.

KEY PERFORMANCE INDICATORS for 2016/17
(Data covering to year end unless otherwise stated)

Indicator	Performance			Targets			
(Source)	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Achieving Outcomes							
Average Number of days to complete Non-Financial Assessments (From Contact to Assessment End - 91 days + excluded) **Housing and Communities Integrated Joint Board**	17.7	19.1	**18.7**	**New Indicator**	21	21	21
Percentage of clients achieving goals set out in their Outcome Focussed Assessment **Housing and Health Integrated Joint Board**	87%	84%	**100%**	**87%**	88%	88%	89%
Percentage of adults satisfied with social care services **Housing and Communities Integrated Joint Board**	86%	90.1%	**86.7%**	**90%**	90%	91%	92%

The new indicator relating to the number of days to complete an assessment has been introduced to measure adherence to Service Standards and to ensure that early intervention remains a priority. It also allows us to benchmark performance following the introduction of the new Service Structure and Health & Social Care Integration.

There are various reasons that can impact on the fluctuation in relation to the percentage of people achieving their outcomes. For example health deterioration or a change in the person's needs.

The most recent value for those achieving goals is part of an ongoing trend that has seen a rise in the number of people achieving their goals, however as this variable does fluctuate an achievable target has been set. Locality teams will ensure they continue to review each individual to ensure outcomes remain personalised and reflect each individual's personal journey.

Although there has been a 3% shift in the overall level of satisfaction, this should be considered in the overall context of service provision which has being going through a period of transition together with ever increasing demands. There has been some very positive comments such as "I am most impressed by the loyal dedication of PKC Services when in need of support".

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Delayed Discharge							
No. of bed days lost to delayed discharge (excluding complex cases) **Housing and Communities Integrated Joint Board**	14,098	17,029	**15,429**	**11,000**	11,000	11,000	11,000
No. of people delayed in hospital for more than 14 days **Housing and Communities Integrated Joint Board**	87	191	**198**	**130**	100	50	0

Managing delayed discharge continues to be a key focus for the Health and Social Care Partnership. Delayed Discharge is a complex area to address and work is underway across health and social care, acute and primary care services (including GPs), as well as care at home providers, to respond effectively to increasing demand. The Council and NHS partners have invested in a number of initiatives to provide alternative to hospital admission e.g. Rapid Response Team, Immediate Discharge Team and the Enhanced Care Support Service, as well as a marketing campaign to encourage more people into the care sector.

There has been an increase in unplanned admissions for those aged 85+ in particular and this group is more likely to be delayed in hospital. Emergency admissions create pressures across the health and social care system, affecting delayed discharge, social work assessments and care at home. The average age of people entering care is 82 years demonstrating an increasingly frailer older population.

Notes: *The definition of complex cases"Where adults lack capacity or where no specialist facility is available and where an interim move would not be appropriate". The number of complex cases in March 2017 was 10 which equated to 405 bed days.*

The source for bed days lost to delayed discharges has been changed from a locally sourced figure to that published by NHS ISD in line with the number of people delayed for more than 14 days.

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Living at Home							
Percentage 65+ who live at home (Percentage of people aged 65+ who live in housing, rather than a care home or a hospital setting) **Housing and Communities Integrated Joint Board**	97%	97.1 %	**97%**	**98%**	98%	98%	98%
Percentage 65+ with intensive care needs receiving care at home (SOLACE Benchmarking PI) **Housing and Communities Integrated Joint Board**	26%	25%	**20%**	**27%**	29%	30%	31%
The average age of people entering care is 85 years and they have complex care needs. As such an increasing number of people are having their needs met within a care home environment. The latest figures from SOLACE report the 15/16 PKC figure for Percentage 65+ with intensive care needs receiving care at home as 32.97% (an increase of 9.6% over 14/15) with the 15/16 Scottish Average as 34.78%. (16/17 figures availbale from SOLACE in November 2017)							

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Reablement							
Percentage 65+ requiring no further service following Reablement **Housing and Communities Integrated Joint Board**	37%	38%	**34%**	**50%**	42%	45%	48%
Number of people receiving Reablement (including IDS) – 65+ **Housing and Communities Integrated Joint Board**	960	893	**882**	**New Indicator**	Improve	Improve	Improve

This particular measure can fluctuate and is dependent on the needs of the people referred. As such, people referred often have more complex care needs and whilst Reablement can reduce the level of care required, this has had an impact on the number of people who leave with no further service.

The targets of this indicator have been revised downwards to reflect the current situation and a better understanding of the factors that influence this outcome.

A further indicator for the numbers of 65+ being referred to Reablement has been introduced to provide further context to this indicator.

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
SDS							
Numbers of People using SDS Option 1 and 2 as a Percentage of all People accessing Services via SDS **Housing and Communities Integrated Joint Board**	9.3%	11.7%	**14.4%**	**New Indicator**	Improve	Improve	Improve

This is a new indicator that replaces the suite of 4 SDS indicators as SDS has been embedded in mainstream practice. This demonstrates and incremental and positive shift towards people receiving either a direct payment or to have their care packages managed for them to enable them to realise their desired outcomes.

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Living at Home (New Indicators)							
Percentage supported at home - 65+ (of all receiving Services) **Housing and Communities Integrated Joint Board**	65.5%	65.0%	**63.8%**	**New Indicator**	65%	66%	67%
Total people 65+ receiving care at home (Inc. Rapid Response, IDS, Reablement & Care at Home Day/Evening) **Housing and Communities Integrated Joint Board**	2,468	2,443	**2,400**	**New Indicator**	Improve	Improve	Improve
Average Weekly hours 65+ receiving care at home (Inc. Rapid Response, IDS, Reablement & Care at Home Day/Evening) **Housing and Communities Integrated Joint Board**	10,923	11,900	**13,283**	**New Indicator**	Improve	Improve	Improve

There are slightly less people receiving care at home in 16/17 compared to 15/16 however the number of hours delivered has increased which highlights more people are frailer and have more complex needs.

These are new indicators are being introduced to replace Care at Home indicators that relied only on SDS Option 3 Services in the measurement. These indicators are based on Services provided by all SDS Options and are based on need at time of assessment.

These indicators provide us with a set of baseline figures to work from with the introduction of Health & Social Care Integration and the role out of locality working.

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Technology Enabled Care							
Number of service users with Technology Enabled Care (excluding community alarms) **Housing and Communities** **Integrated Joint Board**	1,108	1,296	**1,464**	**1,000**	1,500	1,600	1,700

We continue to perform well in this area and have seen a 13% increase in people using Technology Enabled Care (TEC) during the year, developments in this area continue to be a key focus.

This indicator has been amended to include all age groups as this is more reflective of our approach of TEC for all.

Note: TEC definition – where the outcomes for individuals in their home or community setting are improved through the application of technology (e.g. telecare, telehealth, video conferencing (VC) and mobile health and wellbeing (mHealth).

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Residential & Nursing							
Percentage supported in care homes - 65+ (of all receiving Services) **Housing and Communities Integrated Joint Board**	34.5%	35.5%	**36.2%**	**New Indicator**	35%	34%	33%
Number of admissions 65+ to care homes in year – permanent **Housing and Communities Integrated Joint Board**	562	583	**652**	**New Indicator**	Reduce	Reduce	Reduce
Mean Age on Permanent Admission (65+ only) **Housing and Communities Integrated Joint Board**	84.8	85.3	**85.0**	**New Indicator**	Increase	Increase	Increase
Total people 65+ supported in care homes (Permanent placements only) **Housing and Communities Integrated Joint Board**	1,300	1,317	**1,364**	**New Indicator**	Reduce	Reduce	Reduce
These new indicators have been introduced to provide performance information for Residential and Nursing placement activity. These new indicators provide us with a set of baseline figures to work from with the introduction of Health & Social Care Integration and the development of locality based working.							

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Adult Support & Protection							
Percentage Cases of adult protection screened within 24 hours of notification **Housing and Communities Integrated Joint Board**	77%	94%	**95%**	**95%**	95%	95%	95%
Percentage ASP case conferences held within agreed timescale after investigation **Housing and Communities Integrated Joint Board**	100%	50%	**60%**	**100%**	100%	100%	100%
Percentage ASP on-going case conferences reviewed within three months **Housing and Communities Integrated Joint Board**	100%	66%	**100%**	**100%**	100%	100%	100%
Screening – The target we set ourselves for 16/17 was met. It is not always possible to meet the 24 hour standard as additional information can be necessary to enable robust screening. **Case Conferences –** The numbers of case conferences are low thus impacting on percentages. Where desired timescales have not been met people are in a safe care setting and therefore not at risk. The performance is due to individual circumstances, not systemic failings.							

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Drug & Alcohol							
The Percentage of clients receiving their first intervention who wait no longer than 3 weeks from the point of referral (Social Work Drug and Alcohol team) **Housing and Communities** **Integrated Joint Board**	92%	89%	**99%**	**90%**	97%	97%	97%

We have exceeded our target for this indicator following its introduction in 15/16. All referrals are triaged by representatives from Health, Social Work and the Third Sector to ensure appropriate supports are put in place timeously.

Indicator (Source)	Performance			Targets			
	14/15	15/16	16/17	16/17	17/18	18/19	22/23
Mental Health							
The Percentage of Social Circumstance reports completed within 28 days following Emergency or Short Term detentions **Housing and Communities** **Integrated Joint Board**	n/a	76%	**84%**	**80%**	87%	90%	95%

Social Circumstance reports are a statutory function for Mental Health Officers to complete after a significant event occurs. Due to an increase in Guardianship reports and Mental Health Act reports in 15/16 we changed to team roles to concentrate on the statutory duty.

The performance shown by this indicator shows an improvement in this area of activity and is ensuring that those at risk are assessed within timescale.

DELETED INDICATORS

Indicator (Source)	Performance			Comments on performance during 2016/17	Reasons for Change / Deletion
	14/15	15/16	16/17		
No. of people who access Self Directed Support (SDS) as % of all service users **Housing and Health**	Option 1 1.43% Option 2 0.89% Option 3 93.14% Option 4 4.56%	Option 1 1.90% Option 2 1.84% Option 3 89.33% Option 4 6.6%	Option 1 2.4% Option 2 4.77% Option 3 84% Option 4 8%	All indicators achieved their targets this year which is reflective of the changes in services delivery via the 3 SDS Options	The detail provided in this set of 4 indicators provides detail no longer required as SDS has become mainstream. These indicators will continue to be monitored at a Service and Locality level
% of home care service users receiving care overnight **Housing and Health**	56%	53%	53%	This measure has not achieved its target, however this was based on only SDS Option 3 Services, thereby excluding 15% of Service Users	This measure only uses SDS Option 3 Services in the calculation. A new set of Home Care measures have been developed that include all SDS Options
Number of service users exiting Drug and Alcohol Team re-referred within 6 months (Corporate Plan) **Housing and Health**	53	42	n/a	This indicator was not used in the reporting period as a more relevant indicators has been developed	A new indicator for the response to referrals for D&A was developed to replace this indicator.
Proportion of people who have been determined as safer as a result of our adult protection intervention **Community Safety**	100%	100%	100%	We have once again met the target for this indicator	As this is subjective and has been met in 3 consecutive years it is felt there is only limited value in continuing to measure this.

Information not available

- Percentage of carers' satisfaction with support services received - Available June 2017.

- Older persons (65+) Home Care Costs per Hour Older persons (65+) - Available November/December 2017 (SOLACE LGBF) - £17.99 reported for 15/16, Scottish Average was £21.22.

- SDS Option 1 (Direct Payments) spend on adults 18+ as a Percentage of total social work spend on adults 18+ - Available November/December 2017 (SOLACE LGBF) - 5.02% reported for 15/16, Scottish Average was 6.61%.

- Residential costs per week per resident for people aged 65 or over - Available November/December 2017 (SOLACE LGBF) - £326.17 reported for 15/16, Scottish Average was £354.99.

Please note that SOLACE LGBF Figures for 16/17 will be made availbale in November/December 2017.

ORGANISED TO DELIVER

GOVERNANCE AND MANAGEMENT STRUCTURE OF ADULT SOCIAL WORK and SOCIAL CARE

Adult Social Work & Social Care is one of the Council's key Service areas. We provide a range of services for:

- Social work services for adults with physical disability and older people
- Services and support for adults with learning disabilities
- Mental health services
- Drug and Alcohol services
- Adult protection and domestic abuse services
- Carers support services
- Health improvement services

- Aids and adaptations and technology enabled care
- Residential care homes/nursing care home placements
- Care at Home
- Reablement Services
- Respite and Day care

The Integrated Joint Board and the Housing & Communities Committee oversee the work of the Service within the Council. Our services are also subject to a range of inspections carried out by external organisations. These inspections check that our service delivery meets national standards, provides value for money, and satisfies service user requirements.

The main regulatory body for Social Work Services is the Care Commission.
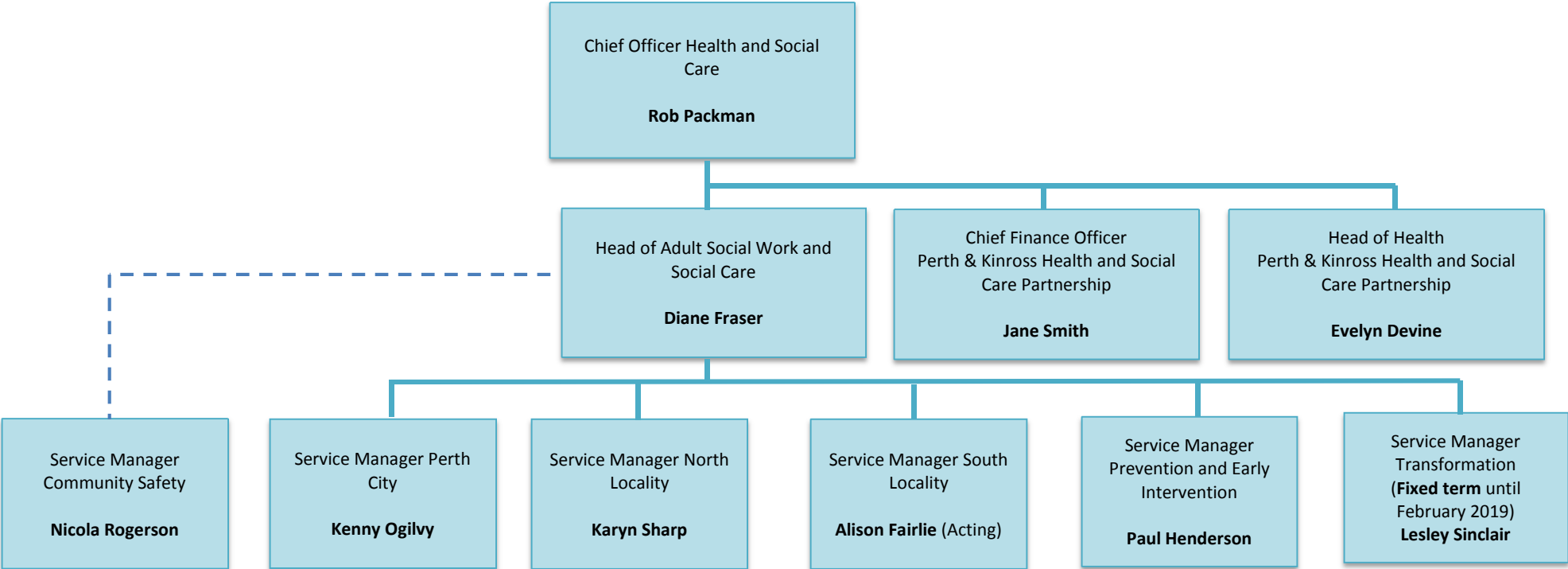
Our service performance is also benchmarked on a national basis with a number of statistical returns submitted to the Scottish Government.

- Social Care Survey
- Learning Disability Scotland Statistics
- Quartlerly Return – Eliginility & Waiting times
- Carers Census

The letter from Scottish Government detailing these returns can be found at:

http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/SCLetter2017

Integrated Health and Social Care – Adult Social Work & Social Care Structure

Chief Officer Health and Social Care

Rob Packman

Head of Adult Social Work and Social Care

Diane Fraser

Chief Finance Officer Perth & Kinross Health and Social Care Partnership

Jane Smith

Head of Health Perth & Kinross Health and Social Care Partnership

Evelyn Devine

Service Manager Community Safety

Nicola Rogerson

Service Manager Perth City

Kenny Ogilvy

Service Manager North Locality

Karyn Sharp

Service Manager South Locality

Alison Fairlie (Acting)

Service Manager Prevention and Early Intervention

Paul Henderson

Service Manager Transformation (**Fixed term** until February 2019) **Lesley Sinclair**

OUR PRIORITIES INCLUDE

Supporting families and individuals by:

- Placing people who use our services at the centre of what we do
- Promoting person centred health, care and support
- Reducing inequalities and unequal health outcomes and promoting healthy living
- Focussing on prevention and early intervention
- Working together with communities
- Making best use of available facilities, people and other resources

CUSTOMER FOCUS AND COMMUNITY ENGAGEMENT

As part of our continuing engagement with individuals and communities through Join the Conservation we working to develop their ideas and aspirations to increase access to health and wellbeing activities. The Health and Social Care Partnership has continued to fund four Community Engagaement Workers who have been supporting the work of Adult Social Work and Social Care. In addition, we have introduced 'Your Community PK' which provides a social media platform. Excellent examples of this can be seen across Perth and Kinross but a few are :

- Tullochnet , who have been develop a range of activities to reduce social isolation for local people, including Drop-Ins at the Hub , Lunch Clubs, Craft Session and as well as providing a much needed venue for outreach services.
- The Letham Community Hub Project, has seen the transformation of a former housing office in Letham to develop a vibrant Community Hub , from which a number of services for local people are now delivered. This includes Parent to Parent groups, The Homework Club, Health Checks and the Perth and Kinross Credit Union. The Council has secured £2.8 million pounds to refurbished the attached Recreation Centre and expand health and well being services in the area.
- Health and Wellbeing Groups have met in all three sub localities to look at how communities and services are working together collaboratively to provide local support. The Carse of Gowrie group are developing a local What's On Guide and delivering Carse Well Being sessions.
- We have held Participatory Budget events across all localities and as result 19 community based projects were successful in attracting funding to deliver a range of health and well being projects for local people.

We have received excellent feedback from our customers in our annual satisfaction survey, with 87% of those responding agreeing they experienced a high quality service from Adult Social Work and Community Care staff. 89% of them agreed they were treated with dignity and respect and 80% say they were supported to live as independently as possible. People also took the opportunity to feedback on their own personal experiences of our services:

- *"I received IDS Reablement service following discharge from hospital. this was arranged for me without having to contact SW services. The service was ended in early January at my request since I felt it was no longer required. Overall, very satisfied with the service".*

- *"My mother greatly appreciates the help she receives. The carers who visit are very kind, positive and helpful. The support they give is invaluable to my mother and family. Care and support from local GPs, the warfarin and district nurses and Social work team is impressive".*

- *"Very grateful for house white trolley, zimmer for garden walks, and collapsible walking three wheeler for outside visits (bought by me) staff when required, especially maintenance of alarms etc".*

- *"I am a carer for my husband who has deteriorated over the past 10 year increasingly difficult but I must say I have had super support from Lewis Place and one day at gateway. Thank you for making it possible for him to remain at home during the last 10 years".*

Complaints are dealt with confidentially and are investigated and responded to in line with our complaints procedures. Where possible, the service develops improvement actions and shares wider opportunities for learning from the issues raised in complaints. Where themes are emerging and there is a requirement to address issues such as redesigning our processes, improving communication and/or training these are progressed through the relevant management teams.

PREPARING OUR PEOPLE FOR THE FUTURE
We recognise that our people are our most valuable asset, and it is through their commitment and expertise that the Council will effectively support the achievement of better outcomes for all, at every stage in life.

A wide range of practices are in place to provide leadership and direction; ensure services are organised to deliver; keep colleagues informed and contribute to Council business; support learning and skills development; sustain effective employment relationships; extend collaborative working and promote health and wellbeing.

Building on existing approaches, we will continue to evolve the cultural conditions to support modern ways of thinking and working which promote continuous improvement and innovation. Within the Service we support the Learn Innovate Grow ethos and encourage staff to seek opportunities to learn about new things and to share these skills, knowledge and expertise to support and improve the outcomes for both our customers and the professional development of our staff.

The annual employee survey was carried out in September 2016. Results from the survey showed that the majority of the workforce across Adult Social Work and Social Care services agreed that their roles are clearly defined (91%) and that there was a good fit between the job they do and skills/abilities (86%). The staff survey also highlighted that staff know how their job contributes to the Councils objectives (82%), their team is passionate about delivering excellent customer service (89%) and staff feel that the people they work with are committed to doing their best (87%).

PARTNERSHIP WORKING
We understand that real improvement in our local services and delivery of our strategic objectives and local outcomes will come from our commitment to more integrated arrangements for joint working with all our partners.

The Service engages appropriately with partner agencies such as Community Planning Partners, the private and voluntary sector and with other public service bodies across Tayside such as Health, Councils, Police and Fire services in seeking to improve services and further strengthen strategic planning.

Underpinning our approach to deliver our key objectives means planning and designing future services and supporting opportunities by working in partnership with the people who use services and with providers in the third and independent sectors. This also includes engaging with minority and marginalised communities and/or their representatives to make sure services are inclusive.

Health & Social Care Integration
Adult social work and social care services are now provided by Perth and Kinross Health and Social Care Partnership as part of the national health and social integration programme. In September 2015 Robert Packham took up the new post of Chief Officer for the Perth and Kinross Health and Social Care Partnership. The Chief Officer and the Integration Joint Board is overseeing the delivery of integrated of adult health and social care services provided by NHS Tayside and Perth & Kinross Council, including those delivered in partnership with local third sector organisations.

The Integration Joint Board is made up of local elected members, non executive members of NHS Tayside Board, Third Sector representatives and officials from NHS Tayside and Perth & Kinross Council. Unpaid carers and people who use the services that are being integrated will also have an important role to play in the work of the Board.

A key part of the Perth and Kinross Health and Social Care Strategic Commissioning Plan (2016-2019) is to plan and deliver local services in 3 areas across Perth and Kinross: North Perthshire, South Perthshire and Kinross and Perth City. Our partnership services will integrate with GP practices, community pharmacy, third sector providers, statutory health and social care services and communities.

FINANCIAL/RESOURCE MANAGEMENT

Adult Social Work & Social Care will continue to face challenges due to the continuing fiscal situation and increasing demand for services. The increase in the number of older people, and the impact of UK Government welfare reform will, in particular, lead to increased challenges to service provision. We are anticipating increased demand for the services we provide and commission. Reduced public sector budgets in real terms will continue, and there is an increased likelihood that there will not be a return to higher settlements for some time.

The following table provides a breakdown of our financial and people resource:-

	Net Revenue Budget 2017/18 - £m	FTE
Adult Social Work & Social Care	49.4	566.7

In addition we manage a capital budget allocation of £625,000.

We have has a strong track record in facing up to the future, no matter how challenging that future looks. The Council is recognised as a high performing organisation; it has strong financial management, good governance, and a committed workforce.

The Council have now moved to the next phase of its transformation agenda and on 1 July 2015 the Transformation Strategy 2015-2020 was approved. The strategy takes a proactive approach to public sector reform and will help us sustain the high quality services we provide.

The transformation projects for Adult Social Work & Social Care include; Communities First; Review of Community Care Packages for Adults, Review of Community Care Day Services; Review of the Council's Older People's Residential Care. This transformation programme will be a key focus for the Service in the coming year.

PERFORMANCE, SELF EVALUATION AND RISK MANAGEMENT

This plan is monitored regularly by the Senior Management Team/Integrated Management Team. We also compare our performance against other local authorities through the returns which are submitted to the Scottish Government. There is a comprehensive census of the use of Adult Social Work & Social Care Services from all local authorities, as well as collections relating to eligibility criteria and waiting times and Learning Disability which is published on the Scottish Government website. The Scottish Community Care Benchmarking Network also collates and presents national information for comparison

We carry out an annual self-evaluation of the Service using the 'How Good is Our Council?' toolkit. Staff and teams are experienced in using these tools to identify strengths and areas for improvement. We are also regularly inspected by external agencies, including the Care Inspectorate.

The Service has identified a number of risks which are managed through the Service and Corporate risk profile, as well as in a range of business cases identified through the Transformation Programme. We

report on performance and budgets monthly both to the IJB, Executive Officer Team, Senior Managers. The key risks managed by Adult Social Work & Social Care are:

Strategic Objective	Risk	Residual Risk	
		Impact	Probability
Strategic Objective 4	Protect adults at risk	5	1
Strategic Objective 5	Policy and legislative reform agenda (Corporate Risk 10)	5	1
	Deliver the Housing Standard Delivery Plan	4	1
	Support the most vulnerable in our society during welfare reform (Corporate Risk 3)	4	2
	Provide adequate and affordable social housing	5	1
	Effectively manage changing financial circumstances (Corporate Risk 4)	4	3
	Maintain security of information and prevent public sector fraud and corruption (Corporate Risk 6)	4	3
	Effective corporate governance (Corporate Risk 8)	5	1
KEY **Impact** 1 – Significant 2 – Minor 3 – Moderate 4 – Major 5 – Critical **Probability** 1 – Rare 2 – Unlikely 3 – Possible 4 – Likely 5 – Almost Certain			

In addition to these risk the Health & Social Partnership has developed their own risk profile which is monitored through management teams as well as our Audit and Performance Committee.

HEALTH AND SAFETY
Adult Social Work & Social Care follows the Council's corporate governance arrangements for Health, Safety & Wellbeing and staff across the Service are familiar with the Corporate Occupational Health & Safety Policy.

ASW&SC consults with all staff through the Housing & Community Safety Health & Safety Consultative Committee. Membership of the Committee includes senior managers across the Service as well as safety representatives from all the trade unions. Through the Committee, strategic and operational issues are discussed. The Committee also considers quarterly reports on Health & Safety training and incident reports. The management representatives' report on issues raised at this Committee through their own management teams. The Committee are also informed of any new Health & Safety legislation or policies and take appropriate action as required. Health & Safety performance indicators are reported quarterly to the Senior Management Team/Integrated Management Team.

SERVICE IMPROVEMENT PLAN UPDATE for 2016/17

Focus and Major Change for 2016/17	Key Action (Lead Responsibility)	Delivery Timescales	Comments on Progress
1. Strategic Commissioning Plan Head of Community Care/Head of Housing & Strategic Commissioning	Progress thematic areas outline in the plan	Key timescales outlined for 2016/17 priorities	**In Progress** All key timescales were reported to the Integrated Joint Board in February 2017.
2. Communities First Review options around reshaping current commissioning arrangements, co-production opportunities with communities, developing a wider marketing provision, which will support people to live as independently as they can, with greater choice and control, and accessing Council services when they needed them Head of Adult Social Work & Social Care	Implement Localities model within Community Care ▪ Phase 1 - Implementation of Community Care management restructure to support Integrated Locality working ▪ Phase 2 – Integrated Development Workers into communities ▪ Building more resilient communities which offers alternative local support solutions to traditional services.	05/12/2016 31/03/2018 31/03/2018	**Complete** Phase 1 of Restructure to locality model implemented, team leaders and teams now in situ and working in early intervention and long term/complex teams within localities. **In Progress** Development worker proposal reviewed due to locality need. **In Progress** Participatory Budgeting events held across localities, £100k of funding allocated over 2 years to community projects to enhance community provision within localities.
3. Communities First – Develop Technology to support efficiencies in service delivery Implement improved electronic ways of working, streamlining and taking advantage of new technologies for staff and customers. Head of Corporate Information Technology and Revenues	▪ Scanning – Electronic Social Care Records ▪ Implementation of new Adult Integrated System (AIS) and Swift Technology ▪ Implementation of Integrated Care Module	April 2016 July 2016 October 2016	**Completed** **Phase 1 Completed.** Phase 2 - AIS for Assessing Workers went live in January 2017.

Focus and Major Change for 2016/17	Key Action (Lead Responsibility)	Delivery Timescales	Comments on Progress
4. Review of Residential Care Services Review residential care provision to ensure that people are supported to live in the community for longer and that available care home provision across PKC is fully utilised Head of Adult Social Work & Social Care	▪ Review current assessed needs of existing Local Authority care home residents to inform future shape of residential care ▪ Undertake a period of engagement and consultation with current local authority care home residents ▪ Undertake a period of engagement and consultation with current external care home providers to review use and options	30/04/2017 31/05/2017 31/05/2017	**In Progress** Assessment of current LA needs continues. **In Progress** Consultation and Engagement Plan in place. Engagement with stakeholders to take place in May 2017. **In Progress** Consultation and Engagement Plan in place. Engagement with stakeholders to take place in May 2017.
5. Review of Day Care Services Review and Redesign existing day care services Head of Adult Social Work & Social Care	▪ Review current day provision ▪ Develop and implement consultation and engagement plan ▪ Agree revised model of day care ▪ Commence Implementation of new model	30/04/2016 30/06/2017 31/07/2017 31/03/2018	**Complete** Current provision of LA Day Service mapped out **Complete** Consultation and engagement plan developed **In Progress** Staff engagement at team and individual level carried out. Client, Carer locality engagement programme due to commence May 17 led by LD, OPS & MH teams and engagement workers
6. Review of Adult Care Packages Work with community care clients, their families and carers, to provide financially sustainable care packages Head of Adult Social Work & Social Care	▪ Consultation and engagement with client and families ▪ Engagement and communication with providers ▪ Commence individual review of care packages	30/06/2016 30/06/2016 31/08/2016	**Complete** Initial consultation undertaken. Focus Groups developed and in place. **In Progress** Ongoing engagement and consultation with service users and their families and reviews of care packages are being undertaken.

Focus and Major Change for 2016/17	Key Action (Lead Responsibility)	Delivery Timescales	Comments on Progress
7. Technology Enabled Care The installation of a new digital server will be a central component of PKC's new Telecare Strategy. A key aim of the strategy is to see an increase in the number of people being supported to remain living in their own home. Head of Adult Social Work & Social Care	• Maximise opportunities offered by the new digital server	31/03/2018	**In Progress** Expression of interest submitted to Scottish Government for participation in pilot exploring digital opportunities.
	• Test technology enabled care for the bariatric cohort and evaluate outcomes	31/07/2017	**Complete** Cohort identified, protocols agreed with Tayside Health board. Scales and supporting TEC purchased. Florence (a texting system) has been tested and ready for wider rollout within the service.
	• Take forward actions identified within the Strategic Commissioning Plan	31/03/2018	**In Progress** TEC strategy submitted to IJB for approval on 24/03/17. A number of actions progressing/ completed, further actions have been identified and started.
8. Learning Disabilities The new Learning Disabilities strategy aims to build on the achievements of the previous strategy: • Improve access to healthcare for people with a learning disability • Improve support for older people with a learning disability • Support for expectant mothers with a learning disability Head of Adult Social Work & Social Care	• Implement recommendations and actions within the Learning Disabilities Strategy	August 2016	**Complete** The Learning Disability strategy group are working through the action plan from the strategy to ensure progress continues to be made to improve the lives with people with learning disabilities. A consultation is currently underway with clients and carers to try and develop a sustainable model which allocates community care resources in a consistent and equitable manner. These will be taken forward through the Locality Management Teams.
9. Care Inspectorate and Healthcare Improvement Scotland Programme of validated self-evaluations to determine extent to which Alcohol and Drug Partnerships are embedding the Quality Principles: Standard Expectations of Care	• Care Inspectorate and Healthcare Scotland will produce report on findings in December 2016	December 2016	**Complete** Feedback from the assessment identified a number of particular strengths which were making a positive difference for individuals and families as well as areas for improvement. Adult Drug Partnership Redesign process is ongoing. A report will be submitted to the Integration Joint Board (IJB) in June 2017 to

Focus and Major Change for 2016/17	Key Action (Lead Responsibility)	Delivery Timescales	Comments on Progress
and Support in Drug and Alcohol Services. Head of Adult Social Work & Social Care			seek permission to proceed with 24 month implementation plan.
10. Mental Health Strategy Develop new Mental Health Strategy Head of Adult Social Work & Social Care	▪ Carry out extensive consultation with key stakeholders	October 2016	**Complete** The Mental Health and Wellbeing Strategy Evaluation 2012 – 2016 gathered feedback from 178 individuals, and was published in December 2016. It also identified areas of improvement. These priorities have formed the basis of a series of actions which will be taken forward by the Mental Health and Wellbeing Strategy Group members and the Locality Management Teams.

SERVICE IMPROVEMENT PLAN for 2017/18

Focus and Major Change for 2017/18	Key Action (Lead Responsibility)	Delivery Timescales	Comments on Progress
1. **Strategic Commissioning Plan 2016-2019** Head of Adult Social Work & Social Care /Head of Housing & Strategic Commissioning	Progress thematic areas outline in the plan	Key timescales outlined for 2017/18 priorities	Annual report is being produced and will be published in July 2017.
2. **Communities First** Review options around reshaping current commissioning arrangements, co-production opportunities with communities, developing a wider marketing provision, which will support people to live as independently as they can, with greater choice and control, and accessing Council services when they needed them Head of Adult Social Work & Social Care	Implement Localities model within Community Care ▪ Phase 2 – Integrated Development Workers into communities ▪ Building more resilient communities which offers alternative local support solutions to traditional services.	 31/03/2018 31/03/2018	 Development worker proposal reviewed due to locality need. Participatory Budgeting events held across localities, £100k of funding allocated over 2 years to community projects to enhance community provision within localities.
3. **Communities First – Develop Technology to support efficiencies in service delivery** Implement improved electronic ways of working, streamlining and taking advantage of new technologies for staff and customers. Head of Corporate Information Technology and Revenues	▪ Scanning of files and electronic documents ▪ Implementation of AIS – Assessing Workers ▪ Roll out of AIS across Social Work Services ▪ Implement Mobile Working ▪ Implement Integrated Care Module	Complete Complete 31/03/2018 31/08/2018 30/09/2017	 Links with Corporate IT Transformation Projects Test environment built

Focus and Major Change for 2017/18	Key Action (Lead Responsibility)	Delivery Timescales	Comments on Progress
4. Review of Residential Care Services Review residential care provision to ensure that people are supported to live in the community for longer and that available care home provision across PKC is fully utilised Head of Adult Social Work & Social Care	▪ Undertake a period of engagement and consultation with current local authority care home residents ▪ Undertake a period of engagement and consultation with current external care home providers to review use and options	31/05/2017 31/05/2017	Consultation and Engagement Plan in place. Engagement with stakeholders to take place in May 2017.
5. Review of Day Care Services Review and Redesign existing day care services Head of Adult Social Work & Social Care	▪ Develop and implement consultation and engagement plan ▪ Agree revised model of day care ▪ Commence implementation of new model	30/06/2017 31/07/2017 31/03/2018	Consultation and Engagement plan developed Staff engagement at team and individual level carried out. Client, Carer locality engagement programme due to commence May 2017.
6. Review of Adult Care Packages Work with community care clients, their families and carers, to provide financially sustainable care packages Head of Adult Social Work & Social Care	Continue with reviews and liaise with clients and carers discuss the most appropriate and cost effective way of meeting their requirements	31/03/2019	Ongoing engagement and consultation with service users and their families and reviews of care packages are being undertaken.
7. Technology Enabled Care The installation of a new digital server will be a central component of PKC's new Telecare Strategy. A key aim of the strategy is to see an increase in the number	▪ Maximise opportunities offered by the new digital server	31/03/2018	Expression of interest submitted to Scottish Government for participation in pilot exploring digital opportunities. Progress has been held up by delays in BT completing cabling works, should be resolved by 31/3/2017.

Focus and Major Change for 2017/18	Key Action (Lead Responsibility)	Delivery Timescales	Comments on Progress
of people being supported to remain living in their own home. Head of Adult Social Work & Social Care	▪ Test technology enabled care for the bariatric cohort and evaluate outcomes ▪ Take forward actions identified within the Strategic Commissioning Plan	31/07/2017 31/03/2018	Cohort identified, protocols agreed with Tayside Health board. Scales and supporting TEC purchased. Florence (a texting system) has been tested and ready for wider rollout within the service. TEC strategy submitted to IJB for approval on 24/03/17. A number of actions progressing/ completed, further actions/projects have been identified and started.
8. **Care Inspectorate and Healthcare Improvement Scotland** are undertaking a programme of validated self-evaluations to determine extent to which Alcohol and Drug Partnerships are embedding the Quality Principles: Standard Expectations of Care and Support in Drug and Alcohol Services. Head of Adult Social Work & Social Care	▪ Adult Drug Partnership Redesign process is ongoing including recommendations from the Care Inspectorate evaluation. – Integration Joint Board (IJB) June 2017 to receive report and seek permission to proceed with 24 month implementation plan post authorisation.	July 2019 June 2017	All stakeholders and service providers are involved in the process. Recommendations from Care Inspectorate Report and Stakeholder consultation informing redesigned model.
9. **Fairness Commission – Fairer Futures** Head of Adult Social Work & Social Care	▪ Take forward the recommendations within the strategy.	2017 - 2020	New Action
10. **Locality community planning partnerships**	▪ Identify and respond to opportunities to work with locality planning partnerships to deliver positive outcomes. (Service Management Team)	March 2018	New Action

Acronyms Explained

AoHL	Action on Hearing Loss	LSCMI	Levels of Service Case Management Inventory
ASW&SC	Adult Social Work & Social Care	LD	Learning Disabilities
ASC	Autistic Spectrum Condition	MH	Mental Health
AIS	Adult Integrated System	NHS	National Health Service
ASP	Adult Support and Protection	PAS	Perth Autism Support
CCIG	Complex Care Integration Group	PB	Participatory Budgeting
ECS	Education and Children's Services	PKAVS	Perth & Kinross Association of Voluntary Services
EST	Employment Support Team	POA	Psychiatry of Old Age
FUN	Friendly Unlimited Network	SDS	Self-Directed Support
H&SCI	Health & Social Care Integration	SOLACE	Society of Local Authority Chief Executives
HSS	Hearing Support Service	TBC	To be Confirmed
HWAS	Housing with Additional Support	TEC	Technology Enabled Care
ICA	Integrated Care Approaches	TISS	Tayside Intensive Support Service
ISD	Information Services Division (NHS)	VC	Video Conferencing
LGBF	Local Government Benchmarking Framework		
LOIP	Locality Outcomes Improvement Plan		