REPORT TO: CABINET 19 JANUARY 2009

AGENDA ITEM: 8

SUBJECT: ANNUAL PERFORMANCE ASSESSMENT OF ADULT SOCIAL CARE SERVICES

LEAD OFFICER: EXECUTIVE DIRECTOR
DEPARTMENT OF ADULT SERVICES AND HOUSING

CABINET MEMBER: MARGARET MEAD, CABINET MEMBER FOR HEALTH AND ADULT SOCIAL CARE

WARDS: ALL

CORPORATE PRIORITY/POLICY CONTEXT:
The performance assessment ratings described in the report contribute towards the Councils Comprehensive Performance Assessment (CPA) for 2008 which will be announced by the Audit Commission in February 2009.

LOCAL AREA AGREEMENT (LAA) TARGETS:
The Improvement Plan (appendix B) will contribute to Croydon’s success in the following LAA areas:

- NI 7: Environment for a thriving third sector
- NI 40: Drug users in effective treatment
- NI 125: Achieving independence for older people through rehabilitation / intermediate care.
- NI 124: People with long term conditions supported to be independent

FINANCIAL SUMMARY: There are no additional financial consequences of this report. All costs are contained within the revenue budget.

FORWARD PLAN KEY DECISION REFERENCE NO.: This is not a key decision

For general release

1. RECOMMENDATIONS

1.1 To read the letter and summary report from the Commission for Social Care Inspection (CSCI) which confirms the performance rating for Croydon Council’s Adult Social Services for 2007-08 as 3 stars ‘delivering excellent’
1.2 To agree the improvement plan (circulated separately).

2. EXECUTIVE SUMMARY

2.1 The Council is required to present Cabinet with the CSCI report which summarises the findings of the 2007-2008 Annual Performance Assessment of the Council’s adult social care services and confirms the 2008 performance rating. This report is circulated separately at Appendix A.

2.2 A copy of the improvement plan, addressing the identified areas for improvement, is circulated separately at Appendix B.

3. DETAIL

3.1 In 2008 adult social care services were judged as ‘delivering excellent outcomes’ for people using services with ‘excellent capacity for improvement’ and were awarded the maximum three stars for our performance. This is the fifth consecutive year in which we have achieved the maximum star rating and the first year in which we have been judged excellent in both domains.

3.2 Adult services are assessed against the seven ‘Our Health, Our Care, Our Say’ outcomes. With respect to the Council’s capacity to improve we are assessed by the CSCI against two additional outcome domains; Leadership and Commissioning & Use of Resources.

3.3 We were one of 24 authorities (out of a total of 150 authorities) achieving the judgment of excellent in both areas. This places Croydon’s Adult Services in the top 16% of the country.

3.4 The ‘delivering outcomes’ judgement will contribute to the Audit Commission’s CPA rating for the Council to be announced in February 2009. The judgement that we have received will translate to a score of 4 (on a scale of 1 – 4) for the adult social services block within the CPA.

3.5 The Improvement Plan is regularly monitored by the DASH Departmental Management Team and by CSCI. The improvement areas are taken directly from the recommendations contained within the CSCI summary report. The key actions will be supplemented and refined throughout the year in discussion with the CSCI and, after April 2009, the Care Quality Commission (CQC). They will be contained in directorate and team plans.

4. THE STATUTORY PERFORMANCE ASSESSMENT FRAMEWORK FOR ADULT SOCIAL CARE SERVICES

4.1 In assessing performance for adult social care CSCI reaches judgements about performance against a set of standards and criteria, drawing on evidence from a
number of sources. These include a range of statutory performance indicators and other statistical data for the 2007-08 year, plus data and information from the Self-Assessment Survey, review meetings held with CSCI and the reports of regulatory inspections where applicable.

4.2 A Performance Assessment Notebook (PAN) was produced by the CSCI following an annual review meeting held in August 2008. The Notebook records the evidence considered by the CSCI in coming to a decision about our performance rating.

4.3 In 2008, the judgement for Social Care Services for adults is that the Council is delivering excellent outcomes and has excellent capacity for improvement and our Adult Social Care Star Rating is the maximum three stars. This is the last time we will be assessed in this way. Our performance in 2008-09 will be based on the Comprehensive Area Assessment (CAA) framework and the new National Indicator Set. From April 2009, the CSCI will be replaced by the Care Quality Commission (CQC) which will incorporate CSCI, the Healthcare Commission and the Mental Health Act Commission.

5 FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

5.1 Revenue and Capital consequences of report recommendations
The effect of the decision
There are no direct financial considerations, risks, options, savings or efficiencies arising from this report.

Approved by: Paul Heynes, Director – Resources, Department for Adult Services and Housing

6. COMMENTS OF THE COUNCIL SOLICITOR AND MIONITORING OFFICER

6.1 The Solicitor to the Council comments that there are no specific legal considerations arising from this report.

Approved by: J Harris Baker, Deputy Council Solicitor (Community Services) on behalf of the Council Solicitor and Monitoring Officer

7. HUMAN RESOURCES IMPACT

7.1 There are no Human Resources considerations arising from this report as such, but actions identified in the Improvement Plan will impact on training provisions for staff and potentially changes to working practices, which should be consulted upon with those concerned and their trade union representatives.

(Approved by: Robert Laban, head of HR consultancy, on behalf of the director, Human Resources & Organisational Development)

8. CUSTOMER IMPACT
8.1 There are no direct implications contained in this report.

9. **EQUALITIES IMPACT ASSESSMENT (EIA)**

9.1 An EIA will be conducted following agreement of key actions contained in the appended improvement plan.

10. **ENVIRONMENTAL AND DESIGN IMPACT**

10.1 There are no direct implications contained in this report.

11. **CRIME AND DISORDER REDUCTION IMPACT**

11.1 There are no direct implications contained in this report.

12. **HUMAN RIGHTS IMPACT**

12.1 There are no direct implications contained in this report.

13. **FREEDOM OF INFORMATION/DATA PROTECTION CONSIDERATIONS**

13.1 There are no direct implications contained in this report.

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**CONTACT OFFICER:** Alexander Manya, Performance Information and Improvement Manager for Adult Services. Department of Adult Services and Housing. Extension 61395

**BACKGROUND DOCUMENTS:**

None.
Appendix A

Report, published 27th October 2008 by the Commission for Social Care Inspection, summarising the findings of the 2007-08 Annual Performance Assessment of Adult Social Care Services in Croydon.
Dear Mrs Miller

Performance Summary Report of 2007-08
Annual Performance Assessment of Social Care Services for Adults Services
London Borough of Croydon

Introduction
This performance summary report summarises the findings of the 2008 annual performance assessment (APA) process for your council. Thank you for the information you provided to support this process, and for the time made available by yourself and your colleagues to discuss relevant issues.

Attached is the final copy of the performance assessment notebook (PAN), which provides a record of the process of consideration by CSCI and from which this summary report is derived. You will have had a previous opportunity to comment on the factual accuracy of the PAN following the Annual Review Meeting.

The judgments outlined in this report support the performance rating notified in the performance rating letter. The judgments are

- Delivering outcomes using the LSIF rating scale

And

- Capacity for Improvement (a combined judgement from the Leadership and the Commissioning & Use of Resources evidence domains)

The judgment on Delivering Outcomes will contribute to the Audit Commission’s CPA rating for the council.

The council is expected to take this report to a meeting of the council within two months of the publication of the ratings (i.e. by 31st January 2009) and to make available to the public, preferably with an easy read format available.
### Adult Social Care Performance Judgments for 2007/08

<table>
<thead>
<tr>
<th>Areas for Judgment</th>
<th>Grade awarded</th>
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<tbody>
<tr>
<td><strong>Delivering Outcomes</strong></td>
<td></td>
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<tr>
<td>Improved health and emotional well-being</td>
<td>Excellent</td>
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<tr>
<td>Improved quality of life</td>
<td>Excellent</td>
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<tr>
<td>Making a positive contribution</td>
<td>Excellent</td>
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<tr>
<td>Increased choice and control</td>
<td>Excellent</td>
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<tr>
<td>Freedom from discrimination and harassment</td>
<td>Good</td>
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<tr>
<td>Economic well-being</td>
<td>Good</td>
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<tr>
<td>Maintaining personal dignity and respect</td>
<td>Good</td>
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<tr>
<td><strong>Capacity to Improve (Combined judgment)</strong></td>
<td>Excellent</td>
</tr>
<tr>
<td>Leadership</td>
<td>Excellent</td>
</tr>
<tr>
<td>Commissioning and use of resources</td>
<td>Excellent</td>
</tr>
<tr>
<td><strong>Performance Rating</strong></td>
<td>Three Stars</td>
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</tbody>
</table>

The report sets out the high level messages about areas of good performance, areas of improvement over the last year, areas which are priorities for improvement and where appropriate identifies any follow up action CSCI will take.
<table>
<thead>
<tr>
<th>Key strengths</th>
<th>Key areas for improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All people using services</strong></td>
<td><strong>Continue to address issues of recruitment and retention of qualified experienced social workers</strong></td>
</tr>
<tr>
<td>- Clear direction and leadership.</td>
<td>- Plans to increase direct payments and extend self directed services and personalisation need to be fully realised and show positive benefits for people</td>
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<tr>
<td>- Strong Local Strategic Partnership engaging with all sectors</td>
<td>- Continue to develop the commissioning strategy to support self-directed care</td>
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<td>- Quality challenge and peer review days</td>
<td>- Increase up-take of direct payments and implement the self-directed care programme</td>
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<td>- Mature partnerships with health leading to greater integration operationally</td>
<td>- Ensure that major change and development programmes progress to completion within expected timescales</td>
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<td>- Low staff turnover and low rates of sickness absence</td>
<td>- Ensure that the level of reviews is maintained across all user groups</td>
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<td>- High level of practice learning placements and support for a Social Work Degree training scheme</td>
<td>- Build on developments in self-assessment and self-service options, including the on-line facilities</td>
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<tr>
<td>- Good performance management leading to achievement of most targets and stretching plans for improvement</td>
<td>- The procurement of major adaptations</td>
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<td>- Delivery of the first Joint Strategic Needs Assessment will feed into commissioning decisions in Autumn 2008</td>
<td>- Consider ways to give a higher profile for complaints and compliments</td>
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<tr>
<td>- Sound financial management delivered £4 million cashable efficiency savings in 2007-08 through transformation which has enabled new investment in safeguarding</td>
<td>- Continue to ensure that services are accessible to all communities in Croydon</td>
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<tr>
<td>- The council is using the Social Care Reform grant to develop the self-directed care programme</td>
<td>- Increase numbers of people helped to take up work opportunities</td>
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<td>- The council is a low user of block contracts which gives flexibility to adjust services</td>
<td>- Increase the number of people with disabilities in work or training with the council</td>
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<tr>
<td>- Three year joint strategy for improving health in Croydon</td>
<td>- Safeguarding training for people working in the independent sector</td>
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<td>- Good initiatives to promote health and improve access to information, epitomised by the POP Bus</td>
<td>- Continue work to strengthen processes and awareness of safeguarding</td>
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<td>- Good level of reviews of care packages.</td>
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<tr>
<td>- Pro-active action to support services to make improvements in care</td>
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<tr>
<td>- Wide range of means of engaging with people using services and carers in developing and improving services</td>
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</tbody>
</table>
• Involvement of user and carers in provider selection
• Well organised and timely referral and assessment for care and prompt delivery of services after assessment
• Improved performance on reviews, which is now above average
• Complaints used to review and improve aspects of operations
• Wide and ambitious programme of work to develop the infrastructure for self-directed support
• Good progress in reducing numbers of people who go into permanent residential and nursing care through effective re-ablement and a widening range of housing options
• The Vulnerable Adult Support Service supports some vulnerable individuals to avoid the need for a higher level of care
• Employment and Support Service to support people to find and stay in work
• Welfare benefits service effective in generating extra income
• People are more likely to be safeguarded from abuse and neglect
• There is a greater awareness of safeguarding with more referrals, better recording with a high percentage of completed cases
• Working with faith groups to raise awareness of services and safeguarding
• High level of safeguarding training for Croydon staff
• Review and Quality Assurance post created to enable more consistent auditing of safeguarding
• Jointly funded care home support team

**Older people**

• Low level of delayed transfers
• Effective re-ablement and prevention reducing the need for residential care
• Effective early intervention in close partnership with the voluntary sector to support independence
• New development of extra care housing and new resource centre due to open in Summer 2008
• Increasing range of services to support people in the community including crisis response
• Good information and voluntary sector services for people who do not meet the eligibility criteria for assessed services

<table>
<thead>
<tr>
<th>People with learning disabilities</th>
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<tr>
<td>Two more resource bases for users with learning disabilities opened during the last year with further developments in supported housing</td>
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<td>Progress the social care change programme</td>
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<td>Partnership working through the DAAT to develop range of substance misuse services</td>
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<tr>
<td>‘In Control’ pilot for substance misuse and part of ‘In Control’ total transformation programme</td>
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<tr>
<td>Ensure there are sufficient ASWs for the mental health crisis response service</td>
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<tr>
<td>Continue to build on the work of the DAAT for greater engagement with substance misusers</td>
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<th>People with physical and sensory disabilities</th>
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<td>Prompt delivery of equipment and adaptations with the Aztec shop developed to enable direct access to equipment</td>
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<td>Good engagement with carers through a Partnership Group and Open Space events</td>
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<td>Swift action when some carers said communication on assessments and services could be improved</td>
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<tr>
<td>Ensure that the range of carers’ services meet the needs of all sections of the community</td>
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The contribution that the council makes to this outcome is **excellent**.

There is a good range of initiatives, information and means of dissemination used to promote well-being and health. The POP bus which tours the borough has been a notable and effective means of combining a health promotion and wider advisory role on social care access and benefits. The Healthy Croydon Partnership has produced a three year strategy (2008-11) for improving health and well-being in Croydon.

Few people experience delays in their transfer of care from hospital because of well-established joint working arrangements between the council’s social care and health partners. There are innovative approaches to maximising opportunities for people to retain their independence, such as early intervention by the Intermediate Care Team, developing convalescence, virtual wards to prevent admissions. These have been effective in reducing the need and duration for acute care in hospital and residential care. Fewer older people were admitted to residential or nursing care reflecting the council and partners success in offering support services which enable people’s needs to be met in their own homes.

Joint approaches with DAAT partners on commissioning substance misuse services has led to better retention in treatment and stronger approaches to identifying and engaging with hard to reach groups. The council has been accepted as a pilot site for a ‘staying in control’ project which will extend personalisation into substance misuse services.

A higher percentage of people have had their care packages reviewed in the last year.

**Key Strengths**

- Three year joint strategy for improving health in Croydon.
- Good initiatives to promote health and improve access to information, epitomised by the POP Bus.
- Low level of delayed transfers.
- Effective re-ablement and prevention reducing the need for residential care.
- Good level of reviews of care packages.
- Partnership working through the DAAT to develop range of substance misuse services.

**Key areas for improvement**

- Continue to build on the work of the DAAT for greater engagement with substance misusers.
- Ensure that the level of reviews is maintained across all user groups.
**Improved Quality of Life**

The contribution that the council makes to this outcome is **excellent**.

The council has a focus on early intervention to support people to maintain their independence and works effectively with the voluntary sector partners to promote this. In 2007, the council received a Beacon Council award for ‘Increasing Voluntary and Community Sector Service Delivery and information indicates that the council works well with the voluntary sector to improve the quality of life for people in Croydon.

A range of assistive technology, in addition to Careline is being provided which provides a greater feeling of safety and confidence for people to remain in their own homes, and the council actively seeks feedback and evaluation of the service.

People in Croydon get equipment to support their independence more quickly. Assessment times have reduced and some self-assessments can be carried out online. The Aztec Centre enables people to directly access advice and equipment. There are also comparatively low numbers of people waiting for adaptations to their homes and only the most complex where there is delay, and no people waiting for minor adaptations.

A new development of extra care housing under the Homes for the Future PFI will be handed over to the council this summer, slightly behind plan and a new resource centre shortly afterwards which will increase the service options and reflects an integrated approach to health and social care.

The council has been pro-active in addressing issues of poor quality in commissioned services and developed a jointly funded care home support team with health partners to ensure services are supported to make improvements in care.

Carers in Croydon receive a comparatively high level of breaks and there is good access to these for members of black and minority ethnic communities. The council engages well with carers through a Partnership Group and Open Space events. Some carers when asked in a survey felt that communication on assessments and services could be improved and the council has swiftly taken action to address this with the help of voluntary sector partners.

**Key Strengths**

- Effective early intervention in close partnership with the voluntary sector to support independence.
- Prompt delivery of equipment and adaptations with the Aztec shop developed to enable direct access to equipment.
- Pro-active action to support services to make improvements in care.
- New development of extra care housing and new resource centre due to open in Summer 2008.
- Carers have a comparatively high level of breaks with good access for people from black and minority ethnic communities.
• Good engagement with carers through a Partnership Group and Open Space events.
• Swift action when some carers said communication on assessments and services could be improved.

**Key areas for improvement**

• Consider whether more people with physical disabilities of sensory impairments should be receiving services to help them live at home.
• Build on developments in self-assessment and self-service options, including the on-line facilities.
• Ensure that the range of carers’ services meet the needs of all sections of the community.
• The procurement of major adaptations.
Making a Positive Contribution

The outcomes in this area are **excellent**.

The council has established a user and carer engagement reference group in 2007/08 with the aim that this facilitates input into planning and quality assurance of services in Croydon.

The council uses a wide variety of means to engage users and carers in developing and improving services. Notable examples include the Open Space events in 2007/8 to develop direction of travel statements and priorities for services for older people and for carers, the engagement of user and carers in the selection of providers for re-provision of some learning disability services and the development of a peer-led user group for aftercare and housing for people recovering from drug and alcohol misuse.

The consultation with and involvement of users on the re-configuration of mental health day services reflects the council’s and health partner’s participatory approach to modernisation of services and how they are delivered.

The council has been piloting self-assessment for people with a disability as part of streamlining assessment and access to equipment, before the introduction of wider community care self-assessment.

**Key Strengths**

- Wide range of means of engaging with people using services and carers in developing and improving services.
- Consultation and involvement with people using services on re-configuration of mental health day services.
- Involvement of user and carers in provider selection.

**Key areas for improvement**

- Continue to develop self – assessment following on from pilot for people with a disability.
Increased Choice and Control

The outcomes in this area are **excellent**.

Referral and assessment for individual care is well organised and timely in Croydon, with an effective contact centre that takes detailed information at first point of contact. Services are delivered promptly after assessment although there was a slight fall in performance on last year. Reviews of care packages, which had fallen last year and was an area for improvement has increased to 78% and slightly better than average. The Single Assessment process has been implemented.

There is a low level of complaints received and the council illustrates in its annual report how it has used complaints to review and improve aspects of its operations. A review of stage two complaints has led to quicker conclusion of investigations. The council should consider ways to give a higher profile for a complaints (and compliments) service which may encourage more such feedback for service improvement and confirmation of good outcomes.

There was an ambitious plan to extend the range and scope of Direct Payments in 2007/08 as reported in last year’s summary report, but there has only been a modest increase in take-up. There is now a wider and similarly ambitious programme of work to develop the infrastructure for self-directed support. However, the expectations for people being able to access Direct Payments in 2008/09 remain modest and it is clear that this foundation needs to be firmly and quickly established so that the people in Croydon are not denied opportunities for greater choice and control that are available elsewhere. On the positive side, the council has been accepted onto the ‘In Control’ total transformation programme and to be an ‘In Control’ pilot to develop self-managed care for people who misuse substances.

People can access help in a crisis outside of normal office hours. Mental health crisis response services are provided through the Integrated Adult Mental Health Service (IAMHS) in partnership with South London and Maudsley Trust, although shortages of Approved Social Workers (ASWs) had to be covered by volunteers working additional hours. Careline operates a Rapid Response team 24/7.

There is an increasing range of services to support people in the community and the council has made good progress in reducing the extent to which people are placed by the council into residential or nursing home care.

The council and health partners have been reviewing day services for adults with mental health problems and have developed plans to broaden the range of services that support people recovering from mental illness and makes full use of mainstream community options.

Two more resource bases for people with learning disabilities were opened during the last year and there were further developments in supported housing.

The council commission specific advocacy services, particularly to support users through service changes; an IMCA service is commissioned with neighbouring boroughs.
Key Strengths

- Well organised and timely referral and assessment for care and prompt delivery of services after assessment.
- Improved performance on reviews, which is now above average.
- Complaints used to review and improve aspects of operations.
- Wide and ambitious programme of work to develop the infrastructure for self-directed support.
- ‘In Control’ pilot for substance misuse and part of ‘In Control’ total transformation programme.
- Increasing range of services to support people in the community including crisis response.
- Good progress in reducing numbers of people who go into permanent residential and nursing care through effective reablement and a widening range of housing options.
- Two more resource bases for users with learning disabilities opened during the last year with further developments in supported housing.

Key areas for improvement

- Consider ways to give a higher profile for complaints and compliments.
- Increase up-take of direct payments and implement the self-directed care programme.
- Ensure there are sufficient ASWs for the mental health crisis response service.
Freedom from Discrimination and Harassment

The outcomes in this area are **good**.

Information available indicates that assessment and services are accessible to the diverse communities within Croydon. Some services, such as breaks for carers, are notably well used by black and ethnic minority communities.

Eligibility criteria remain at substantial and are underpinned by a good information provision and services from the voluntary sector providing services for people who do not meet eligibility criteria. A Vulnerable Adult Support Service provides support to those who fall outside the eligibility criteria but for whom some support for instance with housing will avoid the need for a higher level of care. This is part of a Social Inclusion and Adults in Need Service which reaches out to vulnerable people including asylum seekers. There are a large range of communities represented in Croydon, some newer than others, and the council has a particular challenge to ensure that needs assessment and service planning adapts to the changing population profile. It has been pro-active in working through faith groups to reach potential users in minority communities; and specifically in raising awareness of safeguarding among black and minority ethnic (BME) communities. A high percentage of users of Direct Payments users are from BME communities, which the council should investigate further to see what this might indicate about the responsiveness to diversity of mainstream services.

Adult Social Care is at level five of the Equalities Standard for Local Government.

**Key Strengths**

- Breaks for carers well used by people from black and minority ethnic communities.
- Good information and voluntary sector services for people who do not meet the eligibility criteria for assessed services.
- The Vulnerable Adult Support Service supports some vulnerable individuals to avoid the need for a higher level of care.
- Working with faith groups to raise awareness of services and safeguarding.

**Key areas for improvement**

- Continue to ensure that services are accessible to all communities in Croydon.
Economic Well-being

The outcomes in this area are **good**.

The council has an Employment and Support Service which is working with a number of individuals to support them in finding and staying in work. There are a number of initiatives for people with mental health problems, or with substance misuse or disabilities to gain paid and voluntary work as a means to promote social inclusion. Comparative figures suggest that the council currently assists fewer people than other councils to take up work opportunities, but are expecting improvement following the recent re-location of the service to a more central location in Croydon. The council has a plan and stretch targets to increase the opportunities for people with disabilities for work within the council.

A welfare benefits service works with the Pension service to maximise take up and for older people and those with disabilities and has proved effective in generating extra income.

**Key Strengths**

- Employment and Support Service to support people to find and stay in work.
- Welfare benefits service effective in generating extra income.

**Key areas for improvement**

- Increase numbers of people helped to take up work opportunities.
- Increase the number of people with disabilities in work or training with the council.
Maintaining Personal Dignity and Respect

The outcomes in this area are **good**.

There has been a growth in safeguarding alerts in 2007/08 indicating greater awareness and better recording. The percentage of cases completed remains high. Nearly all staff in Croydon had received training on safeguarding. The council’s estimate of the percentage of people working in social care in the independent sector who had safeguarding training was lower than average and should examine ways to increase take-up in 2008/09. An e-learning facility is provided. The council has invested some of the efficiency savings in creating stronger safeguarding and prevention services. A Safeguarding ‘Tsar’ post was created and a joint Care Home Support Team created with health partners to offer expertise, skills and support to care homes, to reduce risks of poor care and promote improvement in the quality of life of residents.

A systematic audit of files included safeguarding practice and use of personal information; this has identified priorities for improved recording, action planning and follow up. A Review and Quality Assurance post has been created to enable more consistent auditing.

The Local Safeguarding Board works effectively with good representation from partners. It has taken a robust approach to serious concerns review where there has been a pattern of concerns from care providers in Croydon. This has also provided a focus for the work of the jointly funded care home support team.

**Key Strengths**

- People are more likely to be safeguarded from abuse and neglect.
- There is a greater awareness of safeguarding with more referrals, better recording with a high percentage of completed cases.
- High level of safeguarding training for Croydon staff.
- Jointly funded care home support team.
- Review and Quality Assurance post created to enable more consistent auditing of safeguarding.

**Key areas for improvement**

- Safeguarding training for people working in the independent sector.
- Continue work to strengthen processes and awareness of safeguarding.
The council’s capacity to improve services further is excellent.

Elected members and an experienced and stable senior management team give clear direction and leadership. The council has a strong Local Strategic Partnership with good engagement of the voluntary and community sector recognised by the award of Beacon Council status in 2008.

There are mature partnerships with health colleagues in the PCT and other trusts which enable the delivery of co-ordinated services to the benefit of the people of Croydon. The creation of a new adult social care and housing department offers opportunities for more joined up front line services. There are some major longer-term change and development projects which will give people a better service, such as the Homes for the Future programme and the Social Care Change Programme for re-commissioning of NHS services for people with a learning disability.

The council’s social care department had increased staff turnover in 2007/08 but is still below the London average. The Director leads a strategic group to address recruitment and retain qualified social workers where some difficulties in recruitment have been experienced. Vacancy rates and days lost to sickness are much better than average for London councils. The council provides a high level of practice learning placements and supports a Social Work Degree trainee scheme.

The council makes good use of information to manage performance and achieved most targets in 2007/08, with the main exception being little growth in Direct Payments, for which clear plans are in place. Good use is made of a Quality Management framework and other methods of quality assurance such as file audits. Staff are engaged in improving services through quality challenge and peer review days.

The council is working on the delivery of the first Joint Strategic Needs Assessment with health partners for this to feed into commissioning decisions in the autumn.

The council has sound financial management and has delivered £4million cashable efficiency savings in 2007/08 through the transformation programme which has enabled investment in stronger safeguarding arrangements.

The Social Care Reform grant is being used to develop the self-directed care programme. To create the favourable conditions for developing self-directed care, the council is reviewing its commissioning strategy with the voluntary sector. The council is a low user of block contracts which gives greater flexibility to adjust services to assessed needs and efficiency.

**Key Strengths**

- **Leadership**
  - Clear direction and leadership.
  - Strong Local Strategic Partnership engaging with all sectors.
  - Quality challenge and peer review days.
  - Mature partnerships with health leading to greater integration operationally.
  - Low staff turnover and low rates of sickness absence.
- High level of practice learning placements and support for a Social Work Degree training scheme.
- Good performance management leading to achievement of most targets and stretching plans for improvement.

- **Commissioning and use of resources**
  - Delivery of the first Joint Strategic Needs Assessment will feed into commissioning decisions in Autumn 2008.
  - Sound financial management delivered £4 million cashable efficiency savings in 2007-08 through transformation which has enabled new investment in safeguarding.
  - The council is using the Social Care Reform grant to develop the self-directed care programme.
  - The council is a low user of block contracts which gives flexibility to adjust services.

**Key areas for improvement**

- **Leadership**
  - Continue to address issues of recruitment and retention of qualified experienced social workers.
  - Plans to increase direct payments and extend self-directed services and personalisation need to be fully realised and show positive benefits for people

- **Commissioning and use of resources**
  - Continue to develop the commissioning strategy to support self-directed care.
  - Ensure that major change and development programmes progress to completion within expected timescales.

Yours sincerely,

**Colin Hough, Regional Director**

**Commission for Social Care Inspection**
Appendix B

IMPROVEMENT PLAN
2008-2009

November 2008
This is a draft Improvement Plan based on the Commission for Social Care Inspection's (CSCI) Performance Summary Report of 2007-08
Improvement areas, user Groups and outcome categorisations are taken directly from the CSCI report.
Please direct any queries to Alex Manya – 02084071395; alex.manya@croydon.gov.uk
<table>
<thead>
<tr>
<th>Improvement Area</th>
<th>Key Actions</th>
<th>Lead</th>
<th>User Group</th>
<th>LAA</th>
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<tbody>
<tr>
<td><strong>Improved Health and Emotional Well–Being (Rated ‘Excellent’ in 2007-08)</strong></td>
<td></td>
<td>AO</td>
<td>People with mental health problems</td>
<td>NI 40</td>
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</table>
| 1 | • Continue to build on the work of the DAAT for greater engagement with substance misusers. | • We will proactively encourage the involvement of more service users as key stakeholders in the implementation of the Staying in Control programme.  
• Service users will actively contribute to the recommissioning of treatment services.  
• The Drug and Alcohol Action Team Partnership will modernise its drug and alcohol treatment system so that it has “personalisation” at its centre, in keeping with the new Drug Strategy and Health and Social Care initiatives. It will consult with commissioners, providers and service users and carers to ensure all are involved to shape its future delivery  
• The new drug and alcohol treatment system will move to a less “Specialist” one which offers good quality, value for money and positive outcomes within the projected reducing budgets | | | |
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| 2                | • Ensure that the level of reviews is maintained across all user groups. | • We will continue our robust performance management arrangements including regular monitoring and reporting  
• We will promote the use of automated exception reporting to enable service managers to plan ahead and take swift remedial action where necessary. | BS PF | All people using services | NI 124 |
| Improved Quality of Life (Rated ‘Excellent’ in 2007-08) | | | | |
| 3                | • Consider whether more people with physical disabilities or sensory impairments should be receiving services to help them live at home. | • We will take forward the priorities from the November 2008 Open space event with people with Physical Disabilities.  
• Continued commitment to an “Ordinary Life” may mean that people will make use of support outside of those considered usually by CSCI | TM PF | People with physical and sensory disabilities | NI 124 |
| 4                | • Build on developments in self-assessment and self-service options, including the on-line facilities. | • We will agree a self assessment process for Self Directed Support, making extensive use of the CSIP personalisation toolkit to learn from the experiences of the individual budget pilot sites | NM TM | All people using services | NI 7 |
| 5                | • Ensure that the range of carers’ services meet the needs of all sections of the community | • We will commission and improve access across all community groups to quality breaks services which are flexible, responsive and culturally sensitive in their design  
• We will commission young carers packs to distribute in schools and other appropriate venues  
• We will map our services and use profiling tools like Mosaic to analyse carers’ data, in order to ensure the fit between our range of services and the community. | HG | Carers |
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| 6                | The procurement of major adaptations | • We plan to investigate using more cost effective pre-fabrication units instead of carrying out major building works.  
• We will consult on the leasing of adaptations e.g. stair lifts instead of buying them so that they are only kept for as long as they are needed.  
• We will investigate and implement if feasible re-cycle stair lifts, through floor lifts and ceiling track hoists.  
• We will appoint specialist housing occupational therapists (OTs) to link with council housing allocations department to ensure existing adapted homes are allocated to people with disability needs  
• We will develop links through specialist housing OT with the Planning Department so that OTs can advise on existing adaptations for people with disabilities to satisfy the 10% quota on new builds.  
• Once approved, we will adopt a schedule of rates to be used instead of the existing tendering process. | DH TM CM LR | All people using services | NI 124 NI 125 |

**Making a Positive Contribution (Rated ‘Excellent’ in 2007-08)**

| 7                | Consider ways to give a higher profile for complaints and compliments. | • We will develop the ‘Tagish’ management system for capturing complaints, enquiries, compliments and dissatisfaction and will use these data to inform service improvement.  
• We will use the case review and audit group to ensure complaints regarding our safeguarding processes are used to inform changes to process and practices.  
• We will deliver training, in partnership with the Local Government Ombudsman, to our Service and Team Managers to develop the quality of the stage 1 responses. | DS | All people using services | All areas |
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| 8 | Increase up-take of direct payments and implement the self-directed care programme. | • We plan to continue our regular Direct Payments Working Group meetings with the specific aim of improving local processes to increase the uptake of Direct Payments.  
  • We will monitor arrangements in place at local and departmental levels  
  • We plan to allocate additional resources to the direct payment support service to support users with financial returns  
  • We will negotiate with providers to re-shape the local market.  
  • We will expand the menu of choices.  
  • We are recruiting a SDS operational manager to oversee the implementation of the SDS model and to take a strategic role for direct payments (to focus on increasing take up and aligning DP developments with personal budgets.)  
  • We have robust governance arrangements for SDS with regular monitoring of the programme plan. Testing of the model will commence in 2009/10. | SH BS PF | All people using services | NI 7 |
| 9 | Ensure there are sufficient ASWs for the mental health crisis response service. | • We will continue to build on the recent successful recruitment of AMHPs in this service area  
  • We expect the revised remunerations package to improved Croydon’s ability to recruit and retain staff in this area and will monitor this accordingly | SH | People with mental health problems |
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<tr>
<td>Freedom from Discrimination and Harassment (Rated ‘good’ in 2007-08)</td>
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<td>10</td>
<td>- Continue to ensure that services are accessible to all communities in Croydon.</td>
<td>We will continue to engage with service users through outreach activities and road shows.</td>
<td>LB</td>
<td>All people using services</td>
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<td>- We will continue to use the Service User Engagement Reference Group to improve service provision to vulnerable service users and inaccessible groups.</td>
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<td>- Continue to work proactively with groups such as the Muslim Families Reference Group to improve take-up of services.</td>
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<td>Economic Well-being (Rated ‘good’ in 2007-08)</td>
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<td>11</td>
<td>- Increase numbers of people helped to take up work opportunities.</td>
<td>The Councils Croydon and Employment Support Service (CESS) have established an Advisory Group, whose membership includes representatives from local Disability Groups, People with Disabilities and Council staff.</td>
<td>KV-B</td>
<td>All people using services</td>
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<td></td>
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<td>- The CESS Advisory Group will oversee the mapping of all the existing Employment and Support Services operating in Croydon.</td>
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<td>- It is intended that CESS will bring all local Employment and Support Services together and coordinate service delivery, to ensure that services are coordinated and focused to ensure that duplication of provision is eliminated and Service Users receive a seamless service.</td>
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<td>- In addition, CESS is currently exploring ways of increasing the numbers of people on the caseload at no extra cost</td>
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<td>12</td>
<td>• Increase the number of people with disabilities in work or training with the council. • The CESS advisory group will oversee the implementation of the Delivering and Ordinary Working Life (DOWL) Project. • The aim of DOWL is to increase the numbers of People with Disabilities accessing Employment opportunities within the Council.</td>
<td>KV-B</td>
<td>All people using services</td>
<td>NI 124</td>
</tr>
<tr>
<td>Maintaining Personal Dignity and Respect (Rated ‘good’ in 2007-08)</td>
<td>• Safeguarding training for people working in the independent sector</td>
<td>BB LB</td>
<td>All people using services</td>
<td>•</td>
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<tr>
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<td>Key Actions</td>
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| 14               | - Continue work to strengthen processes and awareness of safeguarding.  
                   - We will maintain our consistent and robust approach to all investigations in accordance with the protocol developed nationally by the Association of Directors of Adult Social Services (ADASS.)  
                   - We will benchmark with the London-wide and South Network to ensure consistency of practice.  
                   - We will improve community awareness of safeguarding through conferences and specific awareness raising events.  
                   - We will work with Pan-London Managers’ groups to improve consistency and strengthen practice.  
                   - We will continue to work closely with all key partners, especially the Police Service, to strengthen procedures. | BB | All people using services |   |

**Capacity to Improve (Leadership) (Rated ‘Excellent’ in 2007-08)**

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</table>
| 15               | - Continue to address issues of recruitment and retention of qualified experienced social workers.  
                   - We will review the current progression scheme with the aim of improving sustainable recruitment and retention  
                   - We will use the enhanced remuneration packages to continue the improved recruitment to long-term vacancies of ASWs and AMHPs | BS PF | All people using services | NI 124 |
| 16               | - Plans to increase direct payments and extend self directed services and personalisation need to be fully realised and show positive benefits for people  
                   - We will implement a framework to allocate ‘early personal budgets’ in individual circumstances ahead of formal testing.  
                   - We will be launching an SDS inclusive stakeholder forum in the Spring to bring together all key stakeholders to contribute to SDS developments. | SH AC | All people using services | NI 124 |
<table>
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<tr>
<td><strong>17</strong></td>
<td>Continue to develop the commissioning strategy to support self-directed care.</td>
<td>JD</td>
<td>All people using services</td>
<td>NI 7</td>
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<td></td>
<td>• We have commissioned a piece of work to explore the capacity across the Voluntary and Community Sector to provide support brokerage functions to people self-directing their support. The outcome will feed into future commissioning arrangements</td>
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<tr>
<td><strong>18</strong></td>
<td>Ensure that major change and development programmes progress to completion within expected timescales.</td>
<td>PF BS JD</td>
<td>All people using services</td>
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<td></td>
<td>• We are strengthening our strategic project management capacity through the corporate restructure by the creation of an additional senior post holder.</td>
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<td>• DASH has an established Programme Board which monitors the performance of all major departmental programmes</td>
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<td></td>
<td>• The Homes for the Future (New4Old) project has a governance structure that involves partner organisations (including the independent sector) in order to assist delivery of the programme both in terms of timescales and quality.</td>
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<td><strong>19</strong></td>
<td>Progress the social care change programme</td>
<td>BS</td>
<td>People with learning disabilities</td>
<td>•</td>
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<td></td>
<td>• All actions will continue to be addressed as part of the programme board, at which Adults Social Services is fully represented along with partners from Croydon Primary Care Trust.</td>
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**Key to Lead Officer Initials**

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<thead>
<tr>
<th>AC</th>
<th>Alan Colhoun</th>
<th>JS</th>
<th>Jan Saines</th>
<th>MM</th>
<th>Martin Mulvey</th>
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<tr>
<td>AJM</td>
<td>Alex Manya</td>
<td>JW</td>
<td>Joanna Weightman</td>
<td>NM</td>
<td>Noel Mulvihill</td>
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<td>AM</td>
<td>Andrew Maskell</td>
<td>DH</td>
<td>Dee Hetherington</td>
<td>PF</td>
<td>Pauline French</td>
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<tr>
<td>AO</td>
<td>Andy Opie</td>
<td>DS</td>
<td>Darren Shuster</td>
<td>PH</td>
<td>Paul Heynes</td>
</tr>
<tr>
<td>BB</td>
<td>Betty Bartlett</td>
<td>HG</td>
<td>Harsha Ganatra</td>
<td>PHo</td>
<td>Peter Houghton</td>
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<tr>
<td>BS</td>
<td>Brenda Scanlan</td>
<td>KC</td>
<td>Kalpana Chauhan</td>
<td>SH</td>
<td>Steve Hill</td>
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<tr>
<td>CM</td>
<td>Corrine Masters</td>
<td>KG</td>
<td>Kathy Grafham</td>
<td>SW</td>
<td>Simon Wadsworth</td>
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<tr>
<td>HM</td>
<td>Hannah Miller</td>
<td>KV-B</td>
<td>Karl Von-Buen</td>
<td>TM</td>
<td>Trevor Mosses</td>
</tr>
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<td>JB</td>
<td>Jan Bannister</td>
<td>LB</td>
<td>Lola Brown</td>
<td>LR</td>
<td>Lesley Roman</td>
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<td>JD</td>
<td>Jane Doyle</td>
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