#### NORTH YORKSHIRE COUNTY COUNCIL

#### CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

## 16<sup>th</sup> April 2009

### ANNUAL PERFORMANCE ASSESSMENT FOR ADULT SOCIAL CARE

#### <u>2007-2008</u>

#### Purpose of Report

1. To introduce the Annual Performance Assessment report.

#### **Background**

- 2. Every year the Commission for Social Care inspection (CSCI) advises the County Council of the outcome of the Adult Social Care Services Annual Performance Assessment.
- 3. Their report is initially considered by the Executive and is then discussed at the Care and Independence Scrutiny Committee. It provides important information for the Committee on care provision and performance of services, but on occasions has highlighted areas that might warrant further scrutiny.
- 4. The report for 2008 was considered by the Executive meeting on 2<sup>nd</sup> December and had been intended for this Committee's January meeting. The pressure of other business however, lead to the decision to defer it to April.

#### **Recommendations**

5. That the Committee consider the attached report and decide whether it might have implications for the work programme for the new Committee after the County Council elections in June.

HUGH WILLIAMSON Head of Scrutiny and Corporate Performance

County Hall NORTHALLERTON

3<sup>rd</sup> April 2009

Background documents: None

#### NORTH YORKSHIRE COUNTY COUNCIL

#### EXECUTIVE

#### 2 December 2008

#### Annual Performance Assessment Report for Adult Social Care – 2007/8

#### **Report by the Corporate Director – Adult and Community Services**

#### 1.0 PURPOSE OF REPORT

- 1.1 To report on the positive outcome of the Adult Social Care Services Annual Performance Assessment carried out by the Commission for Social Care Inspection (CSCI) which led to a top level performance rating of three stars.
- 1.2 To advise the Executive on key areas for improvement arising from the CSCI Performance Summary report and recommendations to address them.
- 1.3 To seek the Executive's agreement to the Service Improvement Action Plan developed in response to the CSCI's Performance Summary Report so that performance is sustained in the future.

#### 2.0 BACKGROUND

- 2.1 The CSCI awards an annual star performance rating and judgement for local authorities with adult social care services responsibilities. This is integral to the Comprehensive Performance Assessment (CPA) for local authorities. The performance rating follows an annual review of performance. Regular business meetings are held during the year between the CSCI's Business Relationship Manager and Adult and Community Services to review progress. The Adult Social Care star ratings are published nationally on 27<sup>th</sup> November 2008.
- 2.2 Since 2006/7, the CSCI has applied a new "outcome based" performance assessment methodology. The outcomes based framework has assessed councils' performance in the context of the Government's stated direction of travel as set out in key national policy drivers particularly the Health and Social Care White Paper-"Our Health, Our Care and Our Say" and the Putting People First National Concordat.
- 2.3 The outcome based assessment represents a "harder test" for Councils which have adult social care responsibilities. Central to this "harder test" is an assessment of delivery against seven outcomes. That is i) improved health and well being ii) improved quality of life iii) making a positive contribution iv) increased choice and control v) freedom from discrimination and harassment vi) economic well being and vii) maintaining personal dignity and respect. This harder test represents a shift away from inputs and outputs to outcomes. In effect, the critical emphasis is what positive difference is the Council is making to the lives of people within North Yorkshire.
- 2.4 Star ratings summarise the CSCI's judgement of performance in adult social care and the judgements are given on a scale from zero to a maximum of three stars.

2.5 Performance ratings for adult social services are comprised of two elements. The categories for judging current performance of how well a Council is delivering against outcomes for the community are **poor**, **adequate**, **good and excellent**. The categories for judging a Council's capacity for improvement are **poor**, **uncertain**, **promising and excellent**. This is judgement of the Council's leadership, commissioning and its use of resources. It is important to note that only the score will contribute directly to the Council's CPA (Comprehensive Performance Assessment) score. The Council's overall final CPA rating will be announced in February 2009.

### 3.0 ISSUES

#### 3.1 **The Overall Performance Judgement**

- 3.2 The Commission for Social Care Inspection has awarded the maximum **three star** performance rating for adult social care services for 2007/08. The three star rating is comprised of judgements of "**good**" against delivery of outcomes in the community with an "**excellent**" capacity for improvement. This will equate to a CPA score of three which ranges from one to four.
- 3.3 The increased performance rating for the year 2007/8 represents a major improvement on the previous year's judgement. It continues the trajectory of significant improvement in the Council's Adult Social Care Services over the last few years. A direct comparison of the year on year judgements is attached at Appendix three.
- 3.4 The three star rating judgement also represents the CSCI's absolute confidence in the Council's Adult Social Care services. Members will recall that the assessment for the year 2006/7 was a judgement of "good" against the delivery of outcomes with a "promising" capacity for improvement. At the time, this represented renewed confidence in the Council's Adult Social Care Services because the previous year's judgement (in 2005/6) was serving "most" people well but with "uncertain" prospects for improvement.
- 3.5 The three star rating judgement recognises that Adult Social Care Services has continued to make significant improvements in the range and quality of support provided to North Yorkshire's more vulnerable citizens. It reflects the highest degree of confidence in the Council's Adult Social Care Services. Further, the star rating is an endorsement that the Council is fully in tune with the Government's national policy directives and stated direction of travel as set out in priorities and outcomes within the Health and Social Care White paper "Our Health, Our care, Our Say" and more recently expressed in the National concordat- Putting People First.

#### 3.6 Service Improvement and Modernisation

The judgement is also an endorsement of the approach taken by the Council of one that does not chase performance but instead seeks to develop and embed real and sustainable service improvement. Providing improved services to more people has been a real catalyst and engine for change. This is reflected in particular by the Council's ground breaking approach with our partners to commissioning better services and more joined up services for the people in North Yorkshire. Of particular note, are the Joint Strategic Needs Assessment and the response to the modernisation agenda in "Putting People First in North Yorkshire – Making it Happen" which are also being presented to this meeting of the Executive.

3.7 The approach of the Council to the modernisation agenda has been commended by national figures such as David Behan (Director General for Social Care) and Michael O'Higgins (Chair of the Audit Commission) who have seen for themselves for example, the real difference that extra care housing and telecare can make to enhance the quality of life of vulnerable people within North Yorkshire.

#### 3.8 **Capacity for Improvement**

- 3.9 It is particularly pleasing to have received a rating of "Excellent" for capacity for improvement as this represents a combined judgement of "Excellent" for Leadership and "Excellent" for Commissioning and Use of Resources. One of the key strengths highlighted in the judgement is the "...determined and competent leadership within adult services supported by strong member commitment." Members will recall that the Executive on the 6 May 2008, approved a relaxation of the Fair Access to Care Services (FACS) eligibility threshold of "substantial" need to that of "moderate" need with the aim of meeting "lower" need where the longer term risk to independence may be significant. Members recognised that operating the Council's eligibility criteria narrowly at "substantial" was unsustainable and that a wider approach was required to promote social inclusion and well being. The recent national review of eligibility by the CSCI ("Cutting the Cake Fairly- CSCI Review of Eligibility Criteria for Social Care") has endorsed North Yorkshire County Council's approach.
- 3.10 Members also approved investment in the Medium Term Financial Strategy toward Safeguarding Adults and towards increasing the numbers of people helped to live independently in their own homes. The approval of tangible initiatives like these has had a positive impact on the lives of vulnerable people within North Yorkshire and, clearly, this has been recognised.

#### 3.11 Key Challenges

- 3.12 For the future, there are however significant challenges to sustaining and building on the substantial improvements gained in the context of a difficult financial climate and the "budget challenges" faced by large rural authorities like North Yorkshire. The effects of the swift, unexpected and likely prolonged recession, compounded by the credit crunch and the housing downturn, will inevitably lead to a "spike" in people seeking help from Adult Social Care Services who otherwise would not have done so. The current economic climate will also negatively impact on the overall health and well being of our local communities and we anticipate that people will turn to the Council for leadership, support and advice in far greater numbers. This is in addition to the already anticipated increase in numbers of older people seeking help in North Yorkshire due to demographic increases.
- 3.13 Vulnerable people rightly expect "quality services" and their expectations are increasing as they want to choose when and how they receive services that best fit around their lives. The Government sees self- directed care as the future shape of how quality services can be assured. Self directed care is expected to provide quality services that are provided to fit around lives and not the other way round. In many cases people will plan how they receive and buy services using Council funding through personalised budgets.
- 3.14 Nationally, improving safeguarding arrangements for vulnerable people is <u>the</u> key priority for the Government. The bar has been raised and only a few councils nationally have been judged in inspections as "good" in keeping people safe from

abuse and harm. This Council will be expected to demonstrate that it has made a "step change" in this area and there will be a formal inspection of North Yorkshire's safeguarding arrangements in the near future.

3.15 Statutory Directors of Adult Social Services have a duty to promote the well being of their communities. They must look to help people beyond those that traditionally have sought help. Their role is to take action to prevent or delay the loss of independence for as long as possible and to improve quality of life by, for example, encouraging people to be active, promoting learning at any age and ensure that people connect with each other and reducing social isolation. In practical terms this means providing extra help for people with daily tasks like gardening, cleaning, and general repairs and shopping but also encouraging them to take exercise and helping them to stay in or return to work. Access to these services remains a significant challenge in North Yorkshire given its geographical size and rural nature. There is now also an increasing risk in the current economic climate of more people falling into rural poverty.

#### 4.0 **PERFORMANCE IMPLICATIONS**

- 4.1 The performance rating letter and summary report are attached at Appendix 1. These highlight key areas of strength and key areas for development which are considered to be priorities for improvement in the forthcoming year.
- 4.2 Over 50 key strengths have been identified by CSCI within Adult Social Care Services and include the following:
  - Achieved improved outcomes in almost all areas within budget;
  - Determined and competent leadership of adult services supported by strong elected member commitment;
  - Ambitious plans to modernise services to more person centred, outcome based approaches;
  - Joint working with health to improve the health and well being of the community at the strategic, operational and local level;
  - Comprehensive strategic commissioning plan;
  - Effective Use of opportunities to promote health and wellbeing;
  - Strong commitment to ensuring that the voice of communities, people using services and their carers are central to all their service planning, delivery and review;
  - Increased investment in low level preventative services.
- 4.3 Whilst recognising the strengths highlighted above, the CSCI identified key areas for development which include the following:
  - Implement plans to move to a single safeguarding board arrangement for North Yorkshire;
  - Increase the level of safeguarding training with the independent sector;
  - Overall the rate of Intermediate Care provision should be kept under review;
  - Work towards implementing remaining local government equality standards;
  - Waiting times for major adaptations needs to be reduced further;
  - More needs to be done to help carers to find or return to work should they wish to.
- 4.4 An Action Plan to address all the key areas for improvement is attached at Appendix 2.

#### 5.0 POLICY IMPLICATIONS

- 5.1. Sustaining the success achieved in adult social care services is dependent upon policies which ensure:
  - increasing the number of people helped to live independently in their own homes for as long as possible;
  - the safety of people within the Council's care;
  - implementing the Putting People First National Concordat;
  - addressing the wider well being and social inclusion agenda.

#### 6.0 FINANCIAL IMPLICATIONS

6.1 The process to agree the Council's budget for 2009/10 is in its final phase following the completion of the financial "Star Chamber" process. Members attention is also drawn to the need to consider the implications for performance of the final decisions made by the Council on the Adult and Community Services budget within the Medium Term Financial Strategy.

#### 7.0 LEGAL IMPLICATIONS

7.1 There are no explicit legal implications arising out of the Performance Assessment. However, the Council is expected to copy the ratings letter and the Performance Summary report to the Council's appointed auditor and to relevant partners.

#### 8.0 HUMAN RESOURCE IMPLICATIONS

8.1 The CSCI cite an improving Human Resource situation set within a context of continuing recruitment and retention problems. Measures taken to address these problems have helped to ease problems mainly associated with the restructure of services.

#### 9.0 EQUALITIES IMPLICATIONS

9.1 The Council was awarded the grade of "good" in respect of the "Freedom from discrimination and harassment" outcome. This includes its work with Black and Minority Ethnic groups. Steps have been taken to improve in this key area further and the Council has committed to achieve the level three equivalent Equality Standard of the new Single Equality Scheme.

#### 10.0 CONSULTATION UNDERTAKEN AND RESPONSES

10.1 Consultation regarding performance improvement is undertaken routinely between the CSCI and the Adult and Community Services senior Management Board. The Annual Performance Review and the Self Assessment Survey also involve partners from Health, the Audit Commission and Executive Members. The Directorate will continue to relay findings of performance to staff and service users through a variety of forums.

#### 11.0 REASONS FOR RECOMMENDATIONS

It is a requirement for the Director of Adult Social Services to present the Performance Summary Report to an open meeting of this Executive by 31 January 2009. There is also a requirement to publish the report in an easy read format so that it is readily accessible to vulnerable and disabled people.

#### 12.0 RECOMMENDATIONS

- 12.1 The Executive is invited to:
  - a) Note and comment on the content of the CSCI Performance Summary Report and the outcome of a three star rating which is an extremely positive achievement for the Council;
  - b) Acknowledge the tremendous contribution of all adult and community services staff and managers in respect of achieving the star rating and the service and performance improvements. In particular, the difficult "face to face" decisions that front line staff have had to make to ensure that the Council's key objective of affordable quality care is met;
  - c) Note the considerable challenges to maintaining performance and service improvement levels achieved which are set out in section 3.11 and
  - d) Endorse the Action Plan in relation to the Key Service Improvement areas.

DEREK LAW - CORPORATE DIRECTOR Adult and Community Services

County Hall

Northallerton

2 December 2008

Author of report: Sukhdev Dosanjh, Assistant Director – Performance & Change Management . Tel: 01609 533274

Background Documents:

- Appendix 1 Official Letter and Performance Summary Report
- Appendix 2 Action Plan
- Appendix 3 Comparison between 2006/07 and 2007/08 Adult Social Care Performance Judgement

Making Social Care Better for People



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Mr Derek Law Corporate Director Adult and Community Services County Hall **Northallerton** North Yorkshire DL7 8DD 27<sup>th</sup> October 2008

Ref: DC

Dear Mr Law

# PERFORMANCE SUMMARY REPORT of 2007-08 ANNUAL PERFORMANCE ASSESSMENT OF SOCIAL CARE SERVICES FOR ADULTS SERVICES IN NORTH YORKHSIRE

# 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 31<sup>st</sup> January 2009) and to make available to the public, preferably with an easy read format available.

# ADULT SOCIAL CARE PERFORMANCE JUDGMENTS FOR 2007/08

Areas for judgment	Grade awarded
Delivering Outcomes	Good
Improved health and emotional well-being	Excellent
Improved quality of life	Good
Making a positive contribution	Excellent
Increased choice and control	Excellent
Freedom from discrimination and harassment	Good
Economic well-being	Good
Maintaining personal dignity and respect	Good
Capacity to Improve (Combined judgment)	Excellent
Leadership	Excellent
Commissioning and use of resources	Excellent
Performance Rating	3 Stars

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.

# KEY STRENGTHS AND AREAS FOR DEVELOPMENT BY PEOPLE USING SERVICES

Key strengths	Key areas for development
<ul> <li>Key strengths</li> <li>All people using services</li> <li>determined and competent leadership within adult services supported by strong elected member commitment</li> <li>significantly improving trajectory of most key performance indicators</li> <li>ambitious plans to modernise services to more person centred, outcome based approaches</li> <li>shared protocol on 'Putting People First' that engages the voluntary sector, the independent care sector and the PCT</li> <li>positive engagement with the PCT to deliver services and to plan to meet emerging needs</li> <li>positive commitment to staff training and development which is closely linked to both national standards and competencies and the council's changing service delivery approach</li> <li>performance management arrangements very effective</li> <li>comprehensive strategic commissioning plan</li> <li>expenditure linked to Putting People First objectives</li> <li>achieved improved outcomes in almost all areas within budget</li> <li>developed a Putting People First</li> </ul>	<ul> <li>Key areas for development</li> <li>rate of reviews has improved but should continue to improve further</li> <li>overall rate of Intermediate Care provision should be kept under review</li> <li>work towards implementing remaining local government equality standards</li> <li>continue to increase referrals to adult safeguarding by raising awareness</li> <li>increase level of safeguarding training with the independent sector</li> <li>implement plans to move to single safeguarding board arrangements for North Yorkshire</li> </ul>
<ul> <li>developed a Putting People First concordat with others in the market</li> <li>setting up of a formal Market</li> </ul>	
<ul> <li>Development Board</li> <li>effective use of opportunities to promote health and wellbeing</li> <li>innovative use of links with libraries</li> <li>joint working with health to improve the health and well</li> </ul>	

being of the community at the strategic, operational and local level

- Putting People First objectives are embedded in the Adult Strategic Partnership targets
- non-residential services to facilitate discharge from hospital and rehabilitation
- increased investment in low level preventative services
- strong commitment to ensuring that the voice of communities, people using services and their carers are central to all their service planning, delivery and review
- comprehensive Community Engagement Strategy
- focussed efforts to engage hard to reach communities
- responsiveness to the views of communities, people who use services and their carers
- significant commitment to the promotion of volunteering
- marked and commendable improvement in care management processes
- ongoing commitment to personalised solutions for people
- people are well informed about what services are available
- action plan to improve the experience of using services for people from black and minority ethnic groups
- the social care complaints process is robust
- increasingly well developed arrangements for person centred planning
- effective advocacy services in place and increasing development of self advocacy
- the council is well ahead on the personalization agenda
- impressive increase in the number of people accessing support through direct payments

<ul> <li>lowering eligibility criteria</li> <li>equitable access to assessments and services</li> <li>support for self funders</li> <li>effective continuing care protocols</li> <li>increased investment in adult safeguarding services</li> <li>local safeguarding arrangements strengthened</li> <li>training for council staff on safeguarding</li> <li>good links with independent sector and focus on safeguarding in contracting arrangements</li> </ul>	
Older people	
<ul> <li>more older people</li> <li>more older people helped to live at home</li> <li>increased use of intensive home care with high proportion purchased through Direct Payments</li> <li>investment in Extra Care housing</li> <li>admission rates into long term care remain low</li> </ul>	<ul> <li>continue to work on reducing falls related admissions to hospital for older people</li> </ul>
People with learning disabilities	
<ul> <li>more people with learning disabilities helped to live at home</li> <li>admission rates into long term care remain low</li> <li>increasing numbers of people with learning disabilities helped into employment or voluntary opportunities</li> </ul>	
People with mental health probler	ns
<ul> <li>more people with mental health problems helped to live at home</li> <li>increasing numbers of people with mental health problems helped into employment or voluntary opportunities</li> </ul>	
People with physical and sensory	disabilities
<ul> <li>more people with physical disabilities helped to live at</li> </ul>	<ul> <li>waiting times for major adaptations need to reduce</li> </ul>

<ul> <li>home</li> <li>prompt delivery of equipment and minor adaptations</li> </ul>	<ul> <li>further</li> <li>more needs to be done to help people with physical disabilities into employment or voluntary opportunities</li> </ul>
Carers	
<ul> <li>improved services for carers</li> <li>engagement with carers, including older carers is based on enabling choice and control</li> </ul>	<ul> <li>the council should ensure that number of reviews of carers needs continues to improve</li> <li>more needs to be done to help carers to find or return to work should they wish to</li> </ul>

# KEY STRENGTHS AND AREAS FOR DEVELOPMENT BY OUTCOME

# Improved health and emotional well-being

# The contribution that the council makes to this outcome is Excellent.

The council makes effective use of opportunities to promote health and wellbeing across the county. There is innovative use of links with libraries to provide access and promote opportunities for local communities. There is a good range of information on healthy lifestyles in varied formats, the council have engaged well with local communities and communities of interest to ensure information is relevant and accessible. There are opportunities to participate in activities that promote health and wellbeing and the council can evidence that people are acting on the information and using the opportunities available

The council demonstrates commitment to joint working with health partners to improve the health and well being of the community at the strategic, operational and local level. There is a joint commitment to national objectives and local aspirations, which is reflected in Local Area Agreement (LAA) targets. Putting People First objectives are embedded in the Adult Strategic Partnership targets.

The council together with health and voluntary sector partners has continued to engage in the development of preventative service provision and intermediate care services. There are a number of joint ventures in which the council and partners are endeavouring to improve quality of life and promote independence including projects that involve mental health services and work with people with drug and/or alcohol dependence problems. Joint staff appointments have assisted in this. The numbers of problem drug misusers accessing treatment and retained in treatment for 12 or more weeks continues to improve.

The Single Assessment Process (SAP) is implemented and the council has enabled staff and domiciliary care workers to be more efficient with the introduction of digital pens. The council has improved its performance significantly on the rate of reviews conducted for people supported by the council to ensure that services provided continue to meet needs. This brings them in line with similar councils but should continue to improve further.

The council is not responsible for any older people remaining in hospital longer than is medically necessary. The overall rate of Intermediate Care provision remains low compared to similar councils, however within that there have been significant increases in non-residential services to facilitate discharge from hospital and rehabilitation. The council reports that it has been able to prevent the admission of 714 people to hospital. This is good practice. The council and the PCT are reviewing admission prevention and discharge care pathways to further enhance this service. The PCT has agreed further investment in rehabilitation services and is working with the council to develop a model of future provision building on the Partnerships for Older People's generic worker pilot. This service is to be consolidated via long term partnership funding integrated into an agreed joint model of care and rolled out across the county. The council and the PCT have dedicated management support and capacity to deliver on this process

# Key strengths

- effective use of opportunities to promote health and wellbeing
- innovative use of links with libraries
- joint working with health to improve the health and well being of the community at the strategic, operational and local level
- Putting People First objectives are embedded in the Adult Strategic Partnership targets
- non-residential services to facilitate discharge from hospital and rehabilitation

#### Key Areas for development

- rate of reviews has improved but should continue to improve further
- overall rate of Intermediate Care provision should be kept under review

# Improved quality of life

# The contribution that the council makes to this outcome is Good.

The council has well focused strategies to promote independence across all service groups. The proportion of people helped to live at home has increased significantly for older people and for people with physical disabilities and remains very good for other service groups.

More older people are helped to live at home and the use of intensive packages to support people has increased, as has the proportion of these purchased through Direct Payments. The council has extended its provision of telecare services and have demonstrated that these developments are having positive impact. However, targets relating to the reduction of falls related admissions to hospital for older people have not yet been achieved. Work continues with health partners via the LAA to address this.

Extra Care Housing is a major policy and strategic plank for the council and is providing housing that enables people to live in relatively independent settings with the support they need. The council has further extended its provision of extra care housing during 2007/08. The provision of both telecare and extra care services have exceeded Local Area Agreement stretch targets. Admission rates to long term care remain low, which evidences the positive impact of the council's preventative and extra care activities for older people.

The proportion of people with learning disabilities and mental health problems helped to live at home continues to be very good and people are well supported by the use of short term breaks.

The rate of people with physical disabilities helped to live at home has improved and people are well supported by the prompt provision of equipment and minor adaptations. The timeliness of the completion of major adaptations has improved on last year but the average waiting time of 30 weeks remains an area for improvement.

Services for carers have improved significantly from last year. There has been considerable activity with carers and the council reports that it has engaged with over 1200 newly identified carers. Furthermore, the council has provided an impressive 62,981 carer breaks throughout the year.

Almost all of the council's 34 regulated services are rated as good or excellent by the Commission for Social Care Inspection. The council has continued to address the 'dignity in care' agenda through the allocation of additional money to each establishment to improve the fabric and environment of the facilities for people.

The council has increased investment in low level prevention schemes across the county. There appears to be good use of grant funded services and good use of local press to publicise these for general access. There has been innovative use of the Direct Carers Support grant to meet needs in an individualised way. Grant funded services are provided under contract and are subject to annual reporting mechanisms by the agencies. The council demonstrates that they closely monitor the use of low level services and collect evidence of impact and outcomes. The Partnerships for Older People programme is clearly evidencing reduced need for higher level support for older people including reduced admissions to residential care and lower unplanned hospital admissions. The growth of lower level community services is also supporting the modernisation of day services for people with learning disabilities and there is positive use of local voluntary services to assist people with mental health difficulties to access wider social and leisure activities.

The council provides specialist support to people with high level needs on an individual, person-centred basis. This is linked to continued development of supported living opportunities. The council work with key partners to increase

the inclusiveness of and access to community resources, which are positively used to provide meaningful day opportunities on an individual basis.

The council has worked well with other agencies, through focussed training for their own staff and by increased provision of telecare services to promote older people's safety and security at home. Regular surveys of those using services indicate that almost all feel safer at home as a result of these interventions.

# Key strengths

- More older people helped to live at home
- Increased use of intensive home care with high proportion purchased through Direct Payments
- Investment in Extra Care housing
- More people with learning disabilities helped to live at home
- More people with mental health problems helped to live at home
- More people with physical disabilities helped to live at home
- Prompt delivery of equipment and minor adaptations
- Improved services for carers
- Increased investment in low level preventative services

# Key Areas for development

- Continue to work on reducing falls related admissions to hospital for older people
- Waiting times for major adaptations need to reduce further

# Making a positive contribution

# The contribution that the council makes to this outcome is Excellent.

The council has a strong commitment to ensuring that the voice of communities, people using services and their carers are central to all their service planning, delivery and review. They have processes and practical arrangements in place to facilitate this at strategic, operational and local levels.

There is an emphasis on helping people feel confident and creating environments, such as the use of libraries, where more people can be involved and feel comfortable. Advocacy and self advocacy are increasingly available to support this approach. This work is well developed and staff are encouraged to engage positively and view every contact as an opportunity to seek views and find personalized solutions to each individuals needs.

Seeking the views of people and involving them in the development of services is captured within a strategic framework, which uses other service outlets that are not usually associated with social care. The council has a comprehensive Community Engagement Strategy covering all service area groups and the respective partnership boards. This has involved users, carers and partner agencies. It has also been presented to the community in 23 events throughout

the County. The arrangements are much more mature than they were last year and the council have made focussed efforts to engage hard to reach communities. The council has also initiated a strategy and process to enable people to self assess their needs.

There is clear evidence of the council's responsiveness to the views of communities, people who use services and their carers. The regulatory analysis of the council's own services support the view that the people accommodated are able to have a say in how the service is run and can control what is happening for them on a daily basis.

The council has a significant commitment to the promotion of volunteering. It has 12 volunteer centres throughout the County that act as exchanges for both organisations and prospective volunteers. The council make positive use of groups using volunteers in the commissioning and development of low level preventative services, which are contributing effectively to local communities.

The council has used many and varied means of obtaining feedback from users and citizens about their services and support. This seems to be in the context of making social care or rather 'well-being' a central part of the council's wider services. They have used various media opportunities throughout the county, and their own local facilities, especially libraries, to maximize opportunities for people to participate. This strategy is well integrated. There is clear evidence that the council have acted on the feedback received and of the positive impact this has had on the quality of services.

# Key strengths

- strong commitment to ensuring that the voice of communities, people using services and their carers are central to all their service planning, delivery and review
- comprehensive Community Engagement Strategy
- focussed efforts to engage hard to reach communities
- responsiveness to the views of communities, people who use services and their carers
- significant commitment to the promotion of volunteering

#### Key areas for development

None

# Increased choice and control

#### The contribution that the council makes to this outcome is Excellent.

There has overall been marked and commendable improvement in care management processes as reflected in the national indicators. Assessments are now completed more promptly. The council also demonstrates ongoing commitment to personalised solutions for people and ensuring they are afforded opportunities to plan their own care.

Engagement with carers, including older carers is based on enabling choice and control while pursuing a personal planning approach including individual assessment in all cases. However, the council should ensure that rate of reviews of carers needs continues to improve.

The council ensures that people are well informed about what services are available. There is improved access to information and it is clear to people how they can complain or comment on service provision. The council has also issued a standards document that is available in varied formats that explains what service users can expect. The council have implemented an action plan to improve the experience of using services for people from black and minority ethnic groups. This action plan is being dovetailed into corporate initiatives and developments for these groups in the community.

The social care complaints process is robust and the council have taken steps to merge the health and social care complaints processes. The council is able to show that on a number of fronts it has made changes as a result of complaints received. It appears to be a responsive council in this regard.

Out of hours services are configured to meet local need according to local arrangements with partner organisations such as the PCT and District Councils. There are improved access arrangements for service users for support after hours and a number of initiatives in place to enhance this; these include the emergency carers system, the home care system at night, call out systems from telecare provision and management support for resource workers who work in home care, supported living and/or extra care housing. This appears comprehensive. Demands on services and any comments or complaints made are kept under review and services adapted accordingly.

The council has increasingly well developed arrangements for person centred planning. The single assessment process is in place and there has been improvement in ensuring that people have a statement of their needs and how they are going to be addressed by the council. There appear to be sound processes in place for care planning, people have access to their records and there are increasing opportunities for person held records.

There has been improvement with respect to advocacy support for service users, particularly for those people who have learning disabilities. There are effective advocacy services in place and increasing development of self advocacy.

The arrangements for accessing social care services have broadened, and carers also can also access support more easily. The council is well ahead on the personalization agenda and increasingly able to offer personalized solutions to meet care needs. Preventative services and services to promote independence are increasingly available and people are encouraged and supported to make their choices known. In learning disability services, there

are different mechanisms in place to support people to participate in planning boards, access advocacy support, there is improved access to health services and information to help them plan and develop the range of services they prefer. There has been a primary focus on the development of self advocacy to give increasingly more people the opportunity to have their own voice heard directly. There are self advocacy groups in each area of the county with links to the Valuing People Partnership Boards. People with learning disabilities are actively involved with these boards, many on a paid basis, which means the arrangements are increasingly user led. People are supported in using this experience as a springboard to participation in wider community issues.

The admission rates into long term care remain low and compare well with similar councils. People are routinely made aware of the availability of self directed services and work has been done with staff to ensure that they encourage take up. The council has reported an impressive increase in the number of people accessing support through direct payments. After being amongst the lowest performing authorities in the country they now rank amongst the best. The significant increase in take up across a range of service groups and funding levels provides evidence that this approach is well embedded. The council evidence that people using self directed care are reporting positive outcomes and that they feel more in control. Plans to further develop the use of Individual Budgets are progressing well.

# Key strengths

- marked and commendable improvement in care management processes
- ongoing commitment to personalised solutions for people
- Engagement with carers, including older carers is based on enabling choice and control
- people are well informed about what services are available
- action plan to improve the experience of using services for people from Black and Minority Ethnic groups
- the social care complaints process is robust
- increasingly well developed arrangements for person centred planning
- effective advocacy services in place and increasing development of self advocacy
- admission rates into long term care remain low
- the council is well ahead on the personalization agenda
- impressive increase in the number of people accessing support through direct payments

# Key areas for development

• the council should ensure that number of reviews of carers needs continues to improve

# Freedom from discrimination and harassment

#### The contribution that the council makes to this outcome is Good.

The council has recovered from a position some two years ago when due to financial pressures it was operating with eligibility criteria set at 'critical'. This

has progressively changed so that they are now operating at a lower level and the council are serving more people as a result. This has meant that increasingly people are being provided with lower level services and with increasing provision of telecare and home care support. Lower level services have had the dual effect of providing the assistance requested and avoiding the cost and impact of more intensive services such as residential care. A survey of service users has confirmed that the majority of people felt that without this assistance their situation would have worsened. The council has been effective in engaging the independent sector and raising the awareness of the public about the changes being made by adult social care services.

Assessments are prompt and the council has made considerable effort to ensure that up to date information is available to all enquirers in a variety of formats. The council has also made efforts to ensure that its contact centre, which has extended the hours it is open for business, is kept abreast of current services and entitlements. In response to the CSCI State of Social Care Report the council has appointed an officer to assess the current situation for selffunders and to propose a way forward for ensuring that self-funders have information that will help them access appropriate supports.

There is equitable access to assessments and services for people from black and minority ethnic groups. This is an improvement on last year when indicators suggested that access was not equitable. However, the council has only achieved Level 2 of the Local Government Equality Standards. There are plans in place to implement the remaining levels and these need to be progressed.

The council provide appropriate and inclusive services and have taken action to engage more positively with some under represented groups. Advocacy and interpreting services are available. The council have a Disability Equality Scheme in place, which is monitored by the Corporate Equalities Champions Group. This scheme is to be incorporated into a council wide single equality scheme. The council evidence that there is systematic implementation and monitoring of the Disability Discrimination Act and demonstrate that they are meeting their responsibilities.

# Key strengths

- lowering eligibility criteria
- equitable access to assessments and services
- support for self funders

# Key areas for development

work towards implementing remaining local government equality standards

Economic well being

The contribution that the council makes to this outcome is Good.

The council has established effective protocols with health partners to ensure that people who are entitled to full NHS continuing care are receiving this support. There are agreed decision making tools and regular meetings across the county. The council report that they have taken a pragmatic approach to ensuring that the needs of an individual are met and continue to be so until clarity on eligibility is reached.

The council is committed to providing and facilitating opportunities for people who have disabilities to be independent and involved in either paid employment or voluntary work. Increasing numbers of people with learning disabilities and mental health issues are being helped into paid employment or voluntary opportunities but more needs to be done to assist those with physical and sensory disabilities. The council as an employer need to further develop opportunities for employment of people with disabilities.

The council has provided opportunities for training, one-to-one support and the development of leisure opportunities for carers through its Changing Lives Project. There is support via short breaks and increasing flexibility in service provision to help carers in maintaining employment, but less evidence of the degree to which they are being helped to find or return to work should they wish to.

The council provides support to people to maximize their income and avoid financial difficulties via the Citizens Advice Bureau. The council also contributes to the running of a Credit Union. The council can evidence increases in benefit take up and service users and carers have expressed satisfaction with the service provided.

# **Key strengths**

- effective continuing care protocols
- increasing numbers of people with learning disabilities helped into employment or voluntary opportunities
- increasing numbers of people with mental health problems helped into employment or voluntary opportunities

# Key areas for development

- more needs to be done to help people with physical disabilities into employment or voluntary opportunities
- more needs to be done to help carers to find or return to work should they wish to

# Maintaining personal dignity and respect

The contribution that the council makes to this outcome is Good.

The council has identified the need to increase awareness about safeguarding vulnerable people and through this to increase referrals of concerns. Action taken has increased referrals in 07/08 but these still remain significantly below the levels in other similar councils. Referrals made do indicate effective working relationships with partners and that people who fund their own care have good access to safeguarding arrangements.

People receiving services directly from the council are safeguarded and much has been done to promote the Dignity in Care agenda within these services.

Director-led awareness training for members has led to an increased community profile for and additional investment in strategic and operational safeguarding arrangements. The council has appointed Service Improvement Outcome Managers and is introducing Advanced Practitioners within areas to promote good practice in safeguarding work. Local safeguarding arrangements have been strengthened through this additional investment and focussed training opportunities for council staff.

While the council has made good progress in providing training to almost all of its staff, this is not the case with the independent sector staff. The council has improved its level of engagement around training with the independent sector, but it still falls short of similar councils. The council is embarking on a new training strategy and hopefully this will deliver more confidence in the arrangements to safeguard people in independent care settings. The council does, however, have good links with the independent sector and requires through its contracts that services have sound safeguarding arrangements in place. Information from CSCI inspection activity in independent sector establishments within the council's area supports the need for such training to increase awareness but also indicates that arrangements to safeguard people are in place and effective. The council ensures that almost all people in residential or nursing care have single room accommodation. They also monitor the situations where people share accommodation to ensure that is their choice.

The Adult Safeguarding Board is multi-agency and works for the combined areas of York and North Yorkshire. There are also local board arrangements that endeavour to engage the agencies involved at that level. It appears that the Board does have the support of the member agencies. However, the extent to which it is adequately supported in terms of staffing and its capacity to deliver training and respond to enquiries is not clear. The mechanisms and resources do not seem to be in place to review how abuse or exploitative circumstances could have been avoided. The council have plans in place to improve their infrastructure including a move to a single Safeguarding Board for North Yorkshire. They have support from key partners and the sound local safeguarding arrangements should enable them to safely manage this transition.

# Key strengths

- increased investment in adult safeguarding services
- local safeguarding arrangements strengthened
- training for council staff on safeguarding
- good links with independent sector and focus on safeguarding in contracting arrangements

# Key areas for development

- continue to increase referrals to adult safeguarding by raising awareness
- increase level of safeguarding training with the independent sector
- implement plans to move to single safeguarding board arrangements for North Yorkshire

# Capacity to improve

# The council's capacity to improve services further is Excellent.

There is determined and competent leadership within adult services supported by strong elected member commitment, including additional investment, to achieve better outcomes for people. The impact of the lead taken by the Council is evident in the significantly improving trajectory of most key performance indicators, which demonstrate that people are being helped to live at home and be as independent as possible. The reducing numbers of people being admitted to long term care evidences that the low level services provided are effective in helping people to be independent and there is a continued shift to lower levels of eligibility for services so that more people can be assisted by the council. There has been continued investment in extra care housing that has enabled people to live in a community setting that minimises risk and at the same time accentuates independence. The importance of achieving good health and well being for people is clearly addressed within corporate plans.

The council has ambitious plans to modernise its services to a more person centred, outcome based approach in line with national initiatives such as Putting People First and the priorities of local communities and communities of interest and they have taken positive steps to secure this. The development of services and support is firmly based on finding personalised solutions for people. The council has developed a shared protocol on 'Putting People First' that engages the voluntary sector, the independent care sector and the PCT in order to explore how these organisations can best work together to deliver personalised services for people.

There has been positive engagement with the PCT to deliver services and to plan to meet emerging needs. The council is setting clear and realistic targets with partners and these are being achieved, and in some cases exceeded. Coordinated working arrangements across departments and with partners, including the newly constituted PCT, are supporting improvements. Examples include shared strategic vision round mental health, good joint service development and good use of extra care as a starting block for integration. Infrastructure such as Partnership Boards and Strategic Planning arrangements have been strengthened and there is clear joint commitment to the Local Area Agreement targets

The council has experienced continuing problems with recruitment and retention of staff and there have been comparatively high turnover and vacancy rates, some of which are associated with the council's reconfiguration of services. However, the arrangements put in place to manage this appear effective in reducing the negative impact that was evident last year. There is positive commitment to staff training and development, which is closely linked, to both national standards and competencies and the council's changing service delivery approach. There is an integrated Workforce Development Group, which is developing a multi-agency action plan to address common workforce development issues with health partners.

Performance management, quality assurance and scrutiny arrangements are in place and are very effective. Performance is well monitored and timely and appropriate management action is taken to mitigate against risk and achieve positive outcomes. There are good processes in place to ensure that the voice of communities, people who use services and carers are heard in these arrangements.

The council and PCT are well advanced in developing a detailed joint strategic needs assessment and this will further inform the strategic commissioning plan, which comprehensively addresses both key areas in the national agenda and local priorities. It sets out a clear understanding with the PCT to address needs in different localities and is linked to the Local Area Agreement and the Partnership for Older People Project. It forms the basis of a clear approach to outcome based commissioning with providers in the medium and long term.

The council has been on a determined path to encourage more people to access support and to thereby help people to avoid the need for higher level services. Investment, including additional investment, is linked to supporting this changing approach. Expenditure reflects national and local priorities and is linked to Putting People First. The council has continued to invest in social care services and have achieved improved outcomes in almost all areas within budget. Budget monitoring processes have improved with consequent improvement in budget management at key decision making points in the organisation. The introduction of finance clinics and traffic light monitoring information has assisted this.

The council has been successful in engaging the independent sector, the voluntary sector, and the PCT in developing and implementing its commissioning approach. There is evidence of real partnership working based on a shared commitment to achieving good outcomes for people. The contracting section has been strengthened to assist in quality development work and the monitoring of issues, which affect standards of care in the independent sector. Procedures are in place to deal with concerns, which arise. The council have developed a Putting People First concordat with others in the market based on the national model. There is a good understanding of the

complex impact of the development of personalised services on the care market and the council are working with local independent providers, including the setting up of a formal Market Development Board, to take this forward.

# Key strengths

# Leadership

- determined and competent leadership within adult services supported by strong elected member commitment
- significantly improving trajectory of most key performance indicators
- ambitious plans to modernise services to more person centred, outcome based approaches
- shared protocol on 'Putting People First' that engages the voluntary sector, the independent care sector and the PCT
- positive engagement with the PCT to deliver services and to plan to meet emerging needs
- positive commitment to staff training and development which is closely linked to both national standards and competencies and the council's changing service delivery approach
- performance management arrangements very effective

# Commissioning and use of resources

- comprehensive strategic commissioning plan
- expenditure linked to Putting People First objectives
- achieved improved outcomes in almost all areas within budget
- developed a Putting People First concordat with others in the market
- setting up of a formal Market Development Board

#### Key areas for development Leadership

None

### **Commissioning and use of resources** None

Yours sincerely

# **REGIONAL DIRECTOR**

Commission for Social Care Inspection

#### NORTH YORKSHIRE COUNTY COUNCIL ADULT AND COMMUNITY SERVICES DIRECTORATE COMMISSION FOR SOCIAL CARE INSPECTION – AREAS FOR IMPROVEMENT ACTION PLAN As at November 2008

Outcome	Area for Improvement	Action Required	Responsible Officer	Timescale	Progress to Date
Outcome 1 – Improved health and emotional well-being	The rate of reviews has improved but should continue to improve further	<ul> <li>Upgrade adult social care database - SWIFT.</li> <li>Data cleansing</li> <li>Review of restructure to highlight further areas for improvement</li> <li>Continue to monitor through existing performance frameworks</li> </ul>	Sukhdev Dosanjh – Assistant Director – Performance and Change Management	March 2009	<ul> <li>Upgrade adult social care database – SWIFT – in progress including incorporating Brown Paper recommendations where appropriate</li> <li>Restructure review ongoing</li> <li>Reviews currently running at 79% compared with 07/08 and a target of 80% for 08/09</li> </ul>
Outcome 1 – Improved health and emotional well-being	The overall rate of Intermediate Care provision should be kept under review	<ul> <li>Expand on the work completed with Health partners to maximise provision.</li> <li>Continue to monitor through existing performance frameworks</li> <li>Highlight in individual Area Improvement plans</li> </ul>	Mike Faulds – Assistant Director – Adult Social Care Operations	March 2009	<ul> <li>Work completed to understand the requirements of new indicator NI 125 (Achieving Independence for older people through rehabilitation/ intermediate care)</li> <li>Developing Action Plan to strengthen intermediate arrangement and draft work plan produced. To be agreed with Health partners.</li> </ul>
Outcome 2 – Improved quality of life	Continue to work on reducing falls related admissions to hospital for older people	<ul> <li>Expand on the work completed with Health partners to maximise provision, and ensure timely and accurate data capture.</li> <li>Continue to monitor through existing performance frameworks</li> <li>Highlight in individual Area Improvement plans</li> </ul>	Mike Faulds – Assistant Director – Adult Social Care Operations	Dec 2008	<ul> <li>NHSNY&amp;Y – undergoing review of falls with a report due to be submitted to the Adult and Health strategic Partnerships.</li> <li>Falls prevention to feature in overarching prevention and intermediate care.</li> </ul>

Outcome	Area for Improvement	Action Required	Responsible Officer	Timescale	Progress to Date
Outcome 2 – Improved quality of life	Waiting times for major adaptations need to reduce further	<ul> <li>Work involving all 7 District Councils, Registered Social Landlords, and Home Improvement Agencies to improve service provision across the County</li> <li>Comparator authorities to be consulted to identify quick wins and longer term actions</li> <li>Prioritisation system is to be trialed in Scarborough, with a view to cross- county roll-out.</li> <li>Process re-engineering to be completed and implemented, with associated performance targets for key milestones in the process</li> <li>Introduce 'Trusted Assessors' for minor adaptations.</li> </ul>	Sukhdev Dosanjh – Assistant Director – Performance and Change Management	March 2009	<ul> <li>Work involving all 7 District Councils, Registered Social Landlords, and Home Improvement Agencies continues</li> <li>Review of other authorities shows an average 29.9 weeks, and 25.9 within Shire authorities</li> <li>A workshop has been held with representation from the District Councils, Home Improvement Agencies, Registered Social Landlords and Occupational Therapists to get their input into identifying process bottlenecks and solutions</li> <li>Comparator authorities are being consulted to identify adaptations that could be included in the count, which are of lower cost and quicker to implement</li> </ul>
Outcome 4 – Increased choice and control	The council should ensure that the number of reviews of carers needs continues to improve	<ul> <li>The Carers Project officer to continue to work with carers groups to improve services</li> <li>Improved care management process to include routine carers assessments and reviews</li> <li>Continue to monitor through existing performance frameworks</li> <li>Highlight performance requirements in individual Area Improvement plans</li> </ul>	Sukhdev Dosanjh – Assistant Director – Performance and Change Management Mike Faulds – Assistant Director – Adult Social Care Operations	March 2009	<ul> <li>Carers Project officer recruited.</li> <li>Upgrade adult social care database - SWIFT in progress including incorporating Brown Paper recommendations where appropriate</li> <li>Carers monitored and reviewed at performance board.</li> </ul>

Outcome	Area for Improvement	Action Required	Responsible Officer	Timescale	Progress to Date
Outcome 5 – Freedom from discrimination and harassment	Work towards implementing remaining local government equality standards	<ul> <li>Corporate action required to implement the Single Equality Scheme, including;</li> <li>Risk assessment of equality legislative compliance regarding equality schemes and arising essential action</li> <li>Corporate assessment of:</li> <li>current position against revised Equality Standard and legislative compliance</li> <li>gap analysis</li> <li>action plan for compliance and attainment of Emerging and Achieving levels</li> <li>Complete self-assessment and external validation/peer review</li> <li>Schedule Single Equality Scheme engagement activities</li> <li>Implementation of action plan for Emerging and Achieving level</li> </ul>	Neil Irving- Head of Policy and Partnerships Sukhdev Dosanjh – Assistant Director – Performance and Change Management	March 2009	<ul> <li>Proposal for a Single Equality Scheme agreed by Management Board.</li> <li>Project plan agreed by Management Board with milestones at;</li> <li>April 2009 – current position identified</li> <li>Nov 2009 – production of the single equality scheme</li> <li>Sept 2010 – implementation of the scheme.</li> </ul>
Outcome 6 – Economic Wellbeing	More needs to be done to help people with physical disabilities into employment or voluntary opportunities	<ul> <li>Completion of project to investigate the area of ' extending supported permitted work'.</li> <li>Expand on the work completed with partner organisations to maximise provision.</li> <li>Continue to monitor through existing performance frameworks</li> <li>Highlight in individual Area Improvement plans</li> </ul>	Sukhdev Dosanjh – Assistant Director – Performance and Change Management Mike Faulds – Assistant Director – Adult Social Care Operations	March 2009	<ul> <li>Summary of Project plan to Supported Employment Services (SES) Operational Leads; General Managers &amp; CSM's</li> <li>Advise PSI Partnership Board about development</li> <li>Development of monitoring tool to capture information about take-up and issues</li> <li>Information about extension of this service to locality staff.</li> <li>Review arrangements in place with county-wide SES staff.</li> <li>Review any training needs with county-wide SES staff.</li> </ul>

Outcome Outcome 6 – Economic Wellbeing	Area for Improvement More needs to be done to help	Action Required	Responsible Officer	Timescale	Progress to Date
Outcome 6 – Economic Wellbeing	carers to find or return to work should they wish to	<ul> <li>Project officer to continue to work with carers groups to improve services</li> <li>Improved care management process to include routine carers assessments and reviews</li> <li>Continue to monitor through existing performance frameworks</li> <li>Highlight performance requirements in individual Area Improvement plans</li> </ul>	Sukhdev Dosanjh – Assistant Director – Performance and Change Management Mike Faulds – Assistant Director – Adult Social Care Operations	March 2009	<ul> <li>Replacement Project officer recruited</li> <li>Upgrade adult social care database - SWIFT in progress including incorporating Brown Paper recommendations where appropriate</li> <li>Carers monitored reviewed at performance board.</li> </ul>
Outcome 7 – Maintaining personal dignity and respect	Safeguarding; • Continue to increase referrals to adult safeguarding by raising awareness	<ul> <li>Awareness raising within operational teams and the Customer Service Centre</li> <li>Investment in the Safeguarding agenda including recruitment of a Safeguarding Adults coordinator, and 4x Safeguarding Officers</li> </ul>		March 2009	<ul> <li>Training profile and pack has been updated</li> <li>Recruitment of the Safeguarding coordinator is underway</li> <li>Local Safeguarding officers appointed and "in situ"</li> </ul>
Outcome 7 – Maintaining personal dignity and respect	Increase levels of safeguarding training with the independent sector	<ul> <li>Sub group of the Safeguarding board to be established to focus on training</li> <li>Safeguarding training strategy reviewed and re-written</li> <li>Continue to monitor through existing performance frameworks</li> </ul>	Mike Faulds – Assistant Director – Adult Social Care Operations Anne-Marie Lubanski	March 2009	<ul> <li>Training group re-vamped. First meeting Dec 09</li> <li>Safeguarding board is now established and subject to ongoing review</li> <li>LAA targets met</li> </ul>
Outcome 7 – Maintaining personal dignity and respect	<ul> <li>Implement plans to move to single safeguarding board arrangements for North Yorkshire</li> </ul>	<ul> <li>First meeting of the NYCC Safeguarding Board met November 2008.</li> <li>Action plan for group to be produced</li> <li>NYCC policy and procedure to be reviewed</li> <li>Specialist consultant engaged to complete a diagnostic assessment of the current position</li> </ul>	<ul> <li>Head of Self</li> <li>Directed Care and</li> <li>Transformation</li> </ul>	March 2009	<ul> <li>Safeguarding board is now established and subject to ongoing review</li> <li>Business plan being developed with a view to release by Feb 09</li> <li>Ongoing meetings scheduled and action plan agreed for the board</li> </ul>

### COMPARISON BETWEEN 2006/07 AND 2007/08 ADULT SOCIAL CARE PERFORMANCE JUDGEMENT

#### CATEGORIES FOR AREAS OF JUDGEMENT

Delivery of Outcomes:	Excellent
	Good
	Adequate
	Poor

Capacity to Improve:

Excellent Promising Uncertain Poor

Areas for Judgement	Grade Awarded 2006/07	Grade Awarded 2007/08	Improvement
Delivering Outcomes	Good	Good	<b>←→</b>
<ol> <li>Improved health and emotional well-being</li> </ol>	Good	Excellent	1
2. Improved quality of life	Good	Good	<b>←→</b>
3. Making a positive contribution	Adequate	Excellent	<u>ተተ</u>
4. Increased choice and control	Good	Excellent	<b>↑</b>
5. Freedom from discrimination and harassment	Adequate	Good	<b>^</b>
6. Economic well-being	Adequate	Good	<b>^</b>
<ol> <li>Maintaining personal dignity and respect</li> </ol>	Good	Good	<b>↔</b>
Capacity to Improve (Combined Judgement)	Promising	Excellent	<b>^</b>
Leadership	Promising	Excellent	<b>^</b>
Commissioning and use of resources	Excellent	Excellent	<b>+</b> >
Performance Rating	2 Stars	3 Stars	<b>^</b>