

Adults and Communities Business Plan 2017-2018

Strengths-Based social care
'Your Conversation, Your Life'



S T R E N G T H S - B A S E D

Purpose of this document

This document sets out the Adults and Communities Delivery Unit vision, improvement priorities and activity that is planned for 2017-8. It also details how improvement work will be governed and what each service area is committed to delivering. The plan will be used to communicate to all staff how we will move towards our vision and how their service area fits into this. It will also form the basis for monthly progress reports to the Adults and Communities Leadership Team.

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1. Our Vision for Adults and Communities in Barnet

‘Strengths-Based social care – Your Conversation, Your Life’

We want Barnet to be an even better place to live where wellbeing and independence are promoted. Adults and Communities will help to deliver this by applying a strengths-based approach to social care and in doing so aim to prevent, reduce or delay an adult’s social care and health needs from either developing or escalating.

To deliver this, alongside partners, we will draw on our “competent, confident, creative, and caring” workforce. Supportive and visible leadership will demonstrate a strong commitment to delivering our vision as well as consistent decision making. Tools, processes, and investment in excellent learning and development will enable staff to be efficient and effective. Individuals and teams will be given greater autonomy to apply their professional judgement and develop better ways of working.

Alongside this, there will be clear standards and expectations of all staff and managers with everyone taking responsibility for high quality, effective practice and their own professional development, as well as enabling staff to talk about opportunities and concerns. Our Quality and Learning Framework will be used to measure these standards and to show improvement in outcomes for residents.

To do this, we need to apply **10 principles**, set out below:

1. We will support people to maintain their health, wellbeing and independence by providing easy access to accurate information, good advice, useful tools and preventative services
2. We will share responsibility across departments, with residents, the voluntary sector and providers, to build strong, resilient communities
3. We will ensure that carers are valued and supported in their caring roles
4. Where someone has emerging needs and contacts us, our response will be proportionate: either resolving the issue, facilitating access to early support services or offering a further discussion
5. Where urgent support is required, because someone is in crisis or at risk, we will respond quickly and proportionately to keep them safe whilst putting the individual at the centre
6. In our interactions with people, we will apply a strengths-based approach meaning that practitioners will work with people to identify their outcomes and the resources they have to achieve these outcomes
7. We will be creative in how we meet an individual’s care and support needs through how we commission, support plan and broker services, leading to better outcomes at lower cost
8. We will work towards greater integration with colleagues in Health services
9. We will ensure we use the resources we have in the most effective way possible to make the biggest difference
10. We will have a positive thinking, creative and caring workforce that delivers our vision for local residents by drawing on the unique strengths of individuals in the workforce and working in a strengths-based way.

What this means for our workforce - “competent, confident, creative, caring”

- We will have a positive thinking, creative and caring workforce that delivers our vision for local residents by working in a strengths-based way.
- We will make the most of the unique strengths that each individual within our diverse workforce brings to the delivery unit.
- Everyone will take responsibility for high quality and effective practice and their own professional development
- We will work with and alongside partners to develop solutions and use resources in the most effective way
- Individuals and teams will be given greater autonomy and freedom to apply their professional judgement and develop new, better ways of working.

This will be underpinned by:

- Supportive and visible leadership, with a strong commitment to delivering our vision, as well as consistent decision making
- Setting clear standards and expectations of all staff and managers
- Using our Quality and Learning Framework to measure these standards and improve the outcomes for residents
- Investment in an excellent and varied learning and development offer
- Giving staff opportunities to talk about opportunities and concerns, and providing a framework to address these
- State of the art tools and processes that enable staff to be efficient and effective

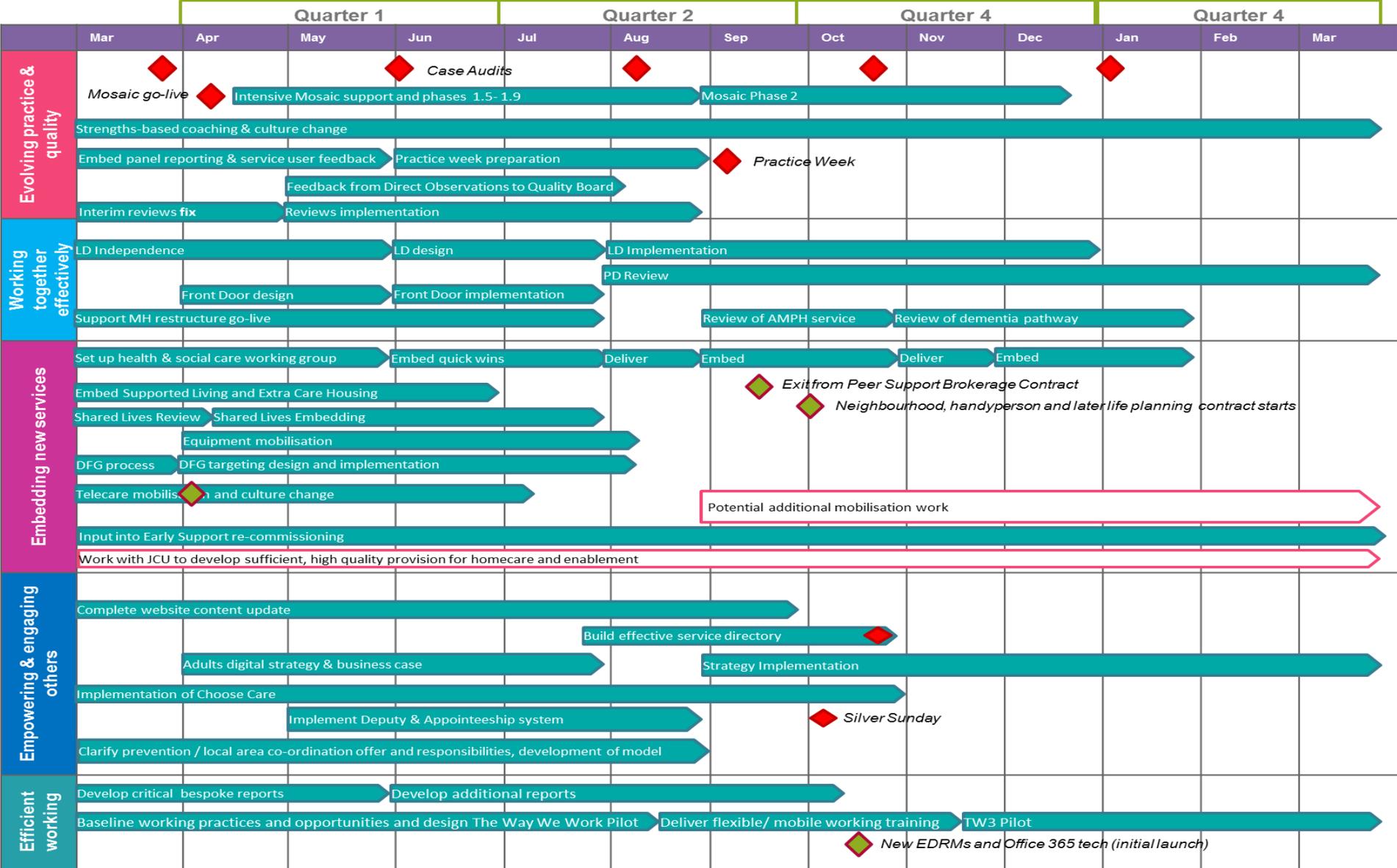
2. Improvement Priorities for 2017-2018

In order to deliver our vision for Adults and Communities, we have identified five key priority themes for change and improvement in 2017/8.

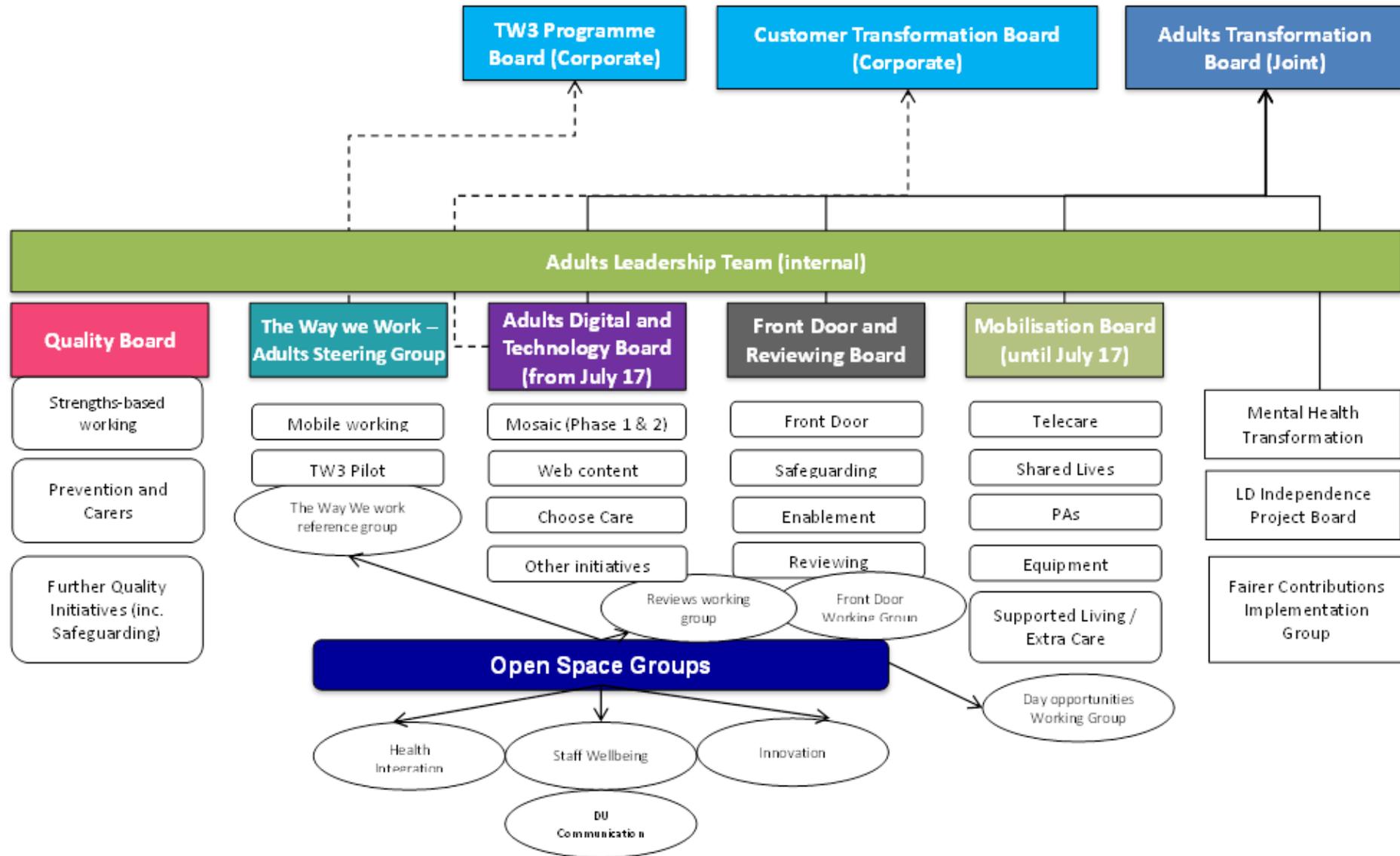
Key change priority – the five ‘e’s	What principles from the vision will these help deliver?
1. Evolving our practice	<ul style="list-style-type: none"> • We will support people to maintain their health, wellbeing and independence by providing easy access to accurate information, good advice, useful tools and preventative services. • In our interactions with people, we will apply a strengths-based approach meaning that practitioners will work with people to identify their outcomes and the resources they have to achieve these outcomes
2. Embedding and improving services	<ul style="list-style-type: none"> • We will be creative in how we meet an individual’s care and support needs through how we commission, support plan and broker, leading to better outcomes at lower costs • We will ensure we use our finite resources in the most effective way possible to make the biggest difference • Ensuring that Carers are valued and supported in their caring roles.
3. Effectively working together	<ul style="list-style-type: none"> • Where someone has emerging needs and gets in touch with us, our response will be proportionate, either resolving the issue, facilitating access to early support services, or offering a further discussion • Where urgent support is required, because someone is in crisis or at risk, we will respond quickly and proportionately to keep them safe whilst putting the individual at the centre
4. Empowering and engaging with others	<ul style="list-style-type: none"> • We will share responsibility across the council, with residents, the voluntary community sector and providers to build strong and resilient communities.
5. Efficient working practices	<ul style="list-style-type: none"> • We will work towards greater integration with colleagues in Health Services

Key Activity TBC DU-led Milestone / event

3. 2017-2018 Improvement Activity High-level Plan



4. Governance



Governing Board	Reports / escalates to	Members (Chair) (Project Lead)
Quality Board	Adults Leadership Team, with links to DASS Quality Assurance	<u>Jon Dickinson</u> , Heads of Service, Dipal Patel, Carol Baxter, Sarah Perrin, Performance representative, Business Improvement representative
The Way we Work Steering Group	Adults Leadership Team, with links to TW3 Programme Board	<u>James Mass</u> , Jess Baines-Holmes, Emily Bowler, Elissa Rospigliosi, <u>Will Hammond</u> , TW3 Programme Rep (TBC)
Adults Digital and Technology Board	Adults Leadership Team, with links to Customer Transformation Programme and Adults Transformation Programme	<u>James Mass</u> , Elissa Rospigliosi, Will Hammond, Emily Bowler, Deborah Robinson, Pete Brown, (other Mosaic Members)
Front Door and Reviews Board	Adults Leadership Team and Adults Transformation Programme	<u>James Mass</u> , <i>Andrea Breen</i> , <i>Julie Hughes</i> , Neil Shaw (Consultant), Business Improvement Representative, Performance Representative, Sarah Perrin, Liam Furlong
Mobilisation Board	Adults Leadership Team and Adults Transformation Programme	<u>Jess Baines-Holmes</u> , Sam Raffell, James Mass, Project Managers (Various)
Other Project Boards	Adults Leadership Team and Adults Transformation Programme	Various

Principles

1. Project Leads will be responsible for completing a monthly update report for Leadership Team, facilitated by a member of the Business Improvement Team.
2. Open Space working groups will either link directly into a governing board or produce a separate progress report to Leadership Team.
3. Where other reports are required (e.g. Transformation Board Highlight Report), this will be aligned with progress reports for Leadership Team.
4. Leadership Team will focus on specific projects according to the agreed forward plan. The forward plan will need to be flexible and response to circumstance, by agreement from the Director of Adults and Communities (Mathew Kendall).
5. Governance arrangements will be reviewed after six months.

5. Core Commitments – by service area

	Purpose	Core commitments	Improvement priorities	Key performance indicators
Assessment and prevention	The service area comprises key 'Front door' activities in Adult Social Care (ASC). It delivers a safe, effective and strengths based approach to initial assessments (including Care Space), support planning, urgent planning and responding to safeguarding concerns. The service area undertakes reablement assessment and provisions, specialist sensory assessment and interventions, and specialist early intervention dementia service; while leading on prevention and carer's service development and working with the Voluntary and community sector.	<ol style="list-style-type: none"> 1. Undertake good quality, people centred safeguarding practice in line with legislation, and develop interim Safeguarding plans. 2. Implement a targeted reablement offer which is promoted well across partners and with residents. 3. Identify telecare, aids, equipment, adaptations, DFG's to delay escalation of need. 4. Identify carers' needs and support services as early as possible and have a good understanding of local carers' support services. 5. Have effective operational and strategic relationships with key partners including Capita (social care direct), police, community and tertiary health, community and voluntary sector and across LBB (housing, family services etc.). 6. Embed a quality assurance cycle so that all staff are compliant with and able to evidence good safe practice, with relevant monitoring and reporting framework. 7. Deliver good quality specialist assessments, information and advice and use of local prevention services – sensory team and the specialist carers and dementia team. 8. Deliver the prevention plan with continued engagement of local community and voluntary sector partners and working with Care Quality and commissioners to help inform and evaluate local prevention and carers' services. 9. Support staff to engage in service and wider improvements, attend practice forums and 	<ol style="list-style-type: none"> 1. Deliver the Front Door programme of work – a coordinated redesign of how we manage demand into ASC. 2. Evidence good quality strengths based practice, increase number and quality of carers' assessments and promote prevention and carers' support services. 3. Enhance staff wellbeing by promoting a culture where staff are encouraged to lead change and service development, and share good practice in innovative ways and have opportunities for learning and development. 4. Work with commissioning group to shape early intervention and local area coordination; incorporating lessons learned from Care Space. 5. Promote a joined up Occupational therapy approach across the Delivery Unit to better use skills and resources. 6. Be proactive in seeking and acting on feedback from adults/carers who use the service to inform individual and service improvements. 7. Have engagement plans to improve relationships, joint and 	<ol style="list-style-type: none"> 1. Adhere to multiagency safeguarding procedures (various measures). 2. Effective Mosaic workflow management including submission of timely panel applications. 3. Increased number of mental capacity assessments. 4. Increased number of carers assessments. 5. Monthly supervision and case audits undertaken. 6. Initial assessments completed within timescales. 7. Various measures for reablement including delaying the need for ongoing care. 8. Increased /sustained attendance and engagement at voluntary sector provider forums including Silver Sunday. 9. Qualitative evidence of good experience when adults/carers are in touch with the service e.g. compliments; voice

	Purpose	Core commitments	Improvement priorities	Key performance indicators
		<p>network events.</p> <p>10. Deliver effective emergency, business continuity and risk planning.</p>	<p>integrated working across all teams within the Delivery Unit, across the council and with external partners (especially health) and members where appropriate.</p> <p>8. Use standard and bespoke reporting tools to monitor activity and target improvements.</p> <p>9. Developing a practice for embedding strengths-based approach with our voluntary and community sector.</p>	<p>of the adult.</p> <p>10. Successfully develop and implement a new LAC model for ASC into Barnet.</p>
Older people & Physical Disabilities (Localities)	<p>The integrated Locality teams work in partnership with customers and carers promoting wellbeing, independence and to ensure that those with care and support needs are enabled to maximise their potential in the community</p>	<ol style="list-style-type: none"> OP/PD will provide a service to approximately 5000 people in 2017/18, of which approximately 2500 will receive community-based services. To increase the support provided to informal carers through the number of carers' assessments, emergency plans and carers support plans recorded. Self-Directed Support – to continue to aim for just under 100% (to reflect the fact that there is a small proportion of service users for which this is not appropriate). Direct Payments – to aim for 40% minimum of people accessing this means to purchase services effectively. Prevent, reduce or delay the need for care and support through effective provision of information, signposting, equipment, enablement, assessment and support planning working in a strengths-based way. Reducing the numbers of admissions into residential care through effective provision of equipment, enablement, assessment and support planning. To continue to work in partnership with health and 3rd sector using an integrated approach and strengths based approach. 	<ol style="list-style-type: none"> Respond to safeguarding concerns in a timely manner and carry out safeguarding enquiries effectively (timescales, quality standards in line with Pan London). Risk assessments carried out and recorded to enable adults to manage their risks and for interventions to be proportionate. Recording standards monitored through internal audit and case file audit. Supervision practice to embody strengths based values and deliver effective support to all staff. At least 3 audits of supervision will be held during the year. Strength based working – empowering people to take control of their own lives and access support from their communities - 80% to evidence strength based working. 	<ol style="list-style-type: none"> Quarterly cost savings/avoidance as a result of increased referrals for DFG. Safeguarding concerns should be responded within 2 days of referral Completing risk assessments for all safeguarding enquiries. Demonstrate increased compliance of the service to the supervision policy. Weekly data capture from panel to measure strength based working and mental capacity assessments. Time from first contact to completion of assessment should be within 28 calendar days. Service should be provided within 28 calendar days from first contact. Where appropriate, Mental Capacity Assessments and

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		<ul style="list-style-type: none"> 8. Increase customer satisfaction through annual survey. 9. Increased access to Disabled Facilities Grants (DFG) and evidence of cost avoidance or savings resulting from the adaptations. 10. To maintain a person centred approach to safeguarding to ensure that the adult is kept at the heart of the process and all decisions regarding their safety and wellbeing. 		<ul style="list-style-type: none"> Best Interest Decisions should be recorded in 100% cases. 9. Rating from audit should improve.
Safeguarding and DoLS	<p>The Safeguarding Adults Team provides strategic support, advice, learning and development, quality assurance and performance monitoring of safeguarding adults work across the workforce.</p> <p>We provide safeguarding policy and practice expertise to the statutory Safeguarding Adults Board</p> <p>We also deliver the Deprivation of Liberty Safeguards Service, and advice and expertise in the application of the Mental Capacity Act.</p>	<ul style="list-style-type: none"> 1. Provide advice and expertise on all safeguarding practice issues, MCA implementation, and Deprivation of Liberty Safeguards to all staff within the department, multi-agency partners, and the 3rd sector. 2. Learning & Development - Have oversight of the Safeguarding and MCA Learning and Development Programme, and plan and deliver specialist training courses, surgeries, practice forums and mentoring to ensure our workforce have both learning reflective learning opportunities in implementing a high standard of practice, and lead on any multi-agency training as commissioned by the SAB 3. Safeguarding Practice Developments & Working in Partnership - Ensure staff and managers are made aware of new practice developments, and that there are plans in place to implement any practice changes. We will work with our statutory partners on the Safeguarding Adults Board to ensure multi-agency practice is developed and implemented. 4. We will lead on specific Safeguarding Adults Board Business Plan priorities. I.e. Statutory Safeguarding Adult Reviews, Domestic Abuse, Personalisation, MASH, Safeguarding Adults Service User Forum and Learning and Development Group. 5. Managing Risk - Act as lead in the department for managing multi-agency risk management forums such as MARAC, MAPPA, Prevent, Provider Concerns Information Sharing, Risk and Self Neglect Panel, and high risk safeguarding cases that require escalation within the department. 6. Quality Assurance - We will lead on the quality assurance of Safeguarding and MCA Practice 	<ul style="list-style-type: none"> 1. We will review and update all Safeguarding information, (including web based information) for staff and members of the public 2. We will develop a safeguarding & MCA DoLS Learning and Development Strategy, and monitor its effectiveness. 3. We will support staff practice development through the delivery of safeguarding training and practice forums. 4. We will support staff to improve their risk management approach in working with adults who self-neglect and hoard. 5. Use findings from case file audits to inform individual and team development. 6. Use findings from safeguarding experience interviews to inform practice improvements. 7. Lessons are learnt from statutory Safeguarding Adult Reviews. 8. Adults are safeguarded through improved multi-agency working with the Police. 9. Ensure Making Safeguarding Personal principles are widely adopted across the department. 10. Ensure DoLS process review recommendations are implemented 	<ul style="list-style-type: none"> 1. Intranet and Internet are updated and accessible, with information for members of the public developed in consultation with Safeguarding Adults Service User Forum. 2. Plan and deliver quarterly Practice Forums, in safeguarding, MCA and BIA. 3. Self-Neglect Policy is approved by the SAB, and hold monthly Risk Panel 4. Co-ordinate 2 x internal & 2 x external file audits, and report on the findings and subsequent action plans for improvement. 5. Lead on co-ordinate and carry out five safeguarding experience interviews 6. Safeguarding Adult Reviews are conducted and the learning from these is implemented

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		<p>within the department, through co-ordinating case file audits, IMR's, SAR's, Service User Experience Questionnaires. We will use the information learnt from these processes to inform our learning and development strategy and support individual staff in developing their practice.</p> <p>7. Adults subject to a deprivation of liberty are assessed that this this is in their Best Interest.</p>		
Customer Financial Affairs	To maximise income for the Council and ensure services are sustainable through; the assessment of affordable client contributions; the monitoring and payment of direct payments; processing and payments of invoices to care providers; management of client finances; protection of client property and funerals.	<ol style="list-style-type: none"> 1. To financially assess affordable client contributions towards care 2. Review and assess client contributions each year 3. Process payments and monitor Direct Payments expenditure 4. Provide advice and support about Direct Payments to the delivery unit and clients 5. Process invoice payments to care providers and client billing 6. Safeguard and manage client finances 7. Ensure that clients properties are protected in accordance with statutory responsibilities 8. Ensure that the Council discharges its statutory responsibilities to arrange funerals 	<ol style="list-style-type: none"> 1. CASPAR – electronic case management system for Deputyship/Appointeeship 2. Implement revised Fairer Contributions Policy 3. Implement and embed MOSAIC finance module 	<ol style="list-style-type: none"> 1. % of financial assessments cleared within service PI's 2. % of invoices paid within service PI's
Learning Disabilities	An integrated multi-disciplinary specialist health and social care service that supports adults with a learning disability with the most complex needs; supporting them to be as independent as possible, increasing individual choice and control, improving health outcomes and supporting people to access mainstream services and working with mainstream services to enable this	<ol style="list-style-type: none"> 1. Ensure that people are kept safe and that any safeguarding concerns are dealt with in a person centred way and that the pan-London process is followed and on time. 2. Identify all individuals known to the whole team and provide advice to Primary care on those who require annual health checks 3. Promote and provide advice on developing health action plans for people using the service 4. Provide a limited and defined direct specialist health service to people with learning disabilities who cannot access mainstream service even after support and advice to those services is given 5. To ensure all clients have annual reviews within a specified timescales. 6. Eligibility assessments to be completed once a referral document has been agreed approximately within 60 days. 	<ol style="list-style-type: none"> 1. Introduce and embed the two new team structures across the social care element of the integrated service creating a Review Team and a Case Management Team 2. Working with Capita -the delivery of a co-produced sustainable strategy to continue to develop and strengthen quality, cost effective and efficient specialist learning disabilities services 3. With the 0-25 service agree and implement appropriate transition pathways 4. Introduce use of appropriate hub based annual reviews, carers reviews and Health Care Planning support sessions 	<ol style="list-style-type: none"> 1. 10.4% of individuals known to the team are supported into employment 2. Increase the percentage of individuals known to the team into settled accommodation 3. Supporting primary care services to provide individuals

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	to happen.	<ol style="list-style-type: none"> 7. Eligible Learning Disability clients to have an assessment of needs completed within 4-6 weeks and relevant referrals completed by assessors. 8. To re-evaluate review system to incorporate assessment process with placement core hours (group home assessments to be completed by the same worker for continuity) 9. Safeguarding processes to be prioritise within the service. Recruitment of lead to develop duty and lead on safeguarding. 	<ol style="list-style-type: none"> 5. Support commissioning with the successful re-tendering of the specialist learning disabilities health contracts 6. Review the current CPA systems ensuring that those requiring this support are appropriately identified and develop healthcare staff skills, knowledge and experiences in care coordinating and case management 7. Continue to develop greater integrated working within the service 	
Hospitals and Health	<p>The Hospitals & Health Partnerships Team service area comprises of the following social care teams and services:</p> <ul style="list-style-type: none"> • Barnet Hospital • Chase Farm Hospital • Royal Free Hospital • Edgware Community Hospital • Finchley Memorial Hospital • Barnet Integrated Locality Team (BILT) • Out of Borough Hospital SW Service • Discharge To Assess • Continuing Healthcare Assessments & Panel • Neuro Rehab Social Work Service 	<ol style="list-style-type: none"> 1. Provide a high quality strength based assessment and discharge planning service to Barnet residents. 2. Ensure delayed discharges attributable to LBB are kept to a minimum. 3. Work in partnership with health colleagues to facilitate a prompt, safe and effective discharge service from hospital for Barnet residents. 4. Work with colleagues with the aim of reducing the time older people spend in hospital and improve the quality of their journey back in to the community. 5. Provide a responsive service to A&E within acute hospital settings with the aim of preventing unnecessary admission in to hospital and enabling residents return to their own homes. 6. Reduce the numbers of admissions into residential and nursing care through effective assessment, support planning and the provision of equipment and services which keep residents within their own homes. 7. Identify appropriate Telecare services and equipment to enable the safe discharge home of the service user, delay the escalation of need and reduce the need for home care support. 8. Identify carers' needs and support services. Undertake Carers Assessments and have a good understanding and knowledge of carers' support services. 9. Work in partnership with health colleagues providing a high quality social work service to the Barnet Integrated Locality Team (BILT), a joint 	<ol style="list-style-type: none"> 1. Ensure an effective introduction of the new Mosaic workflow system within hospital teams. 2. Work in partnership with health colleagues on the provision of an expanded BILT Service 3. Further develop the model of Discharge to Assess freeing up much needed hospital provision. 4. Exploring 'Host Authority' assessments at B&CFH and RFH with neighbouring Local Authorities. 5. Seek to improve the social work service provided to the Neuro Rehab settings within LBB. 6. Ensure our work with health colleagues in Continuing Health Care is robust and challenging and that provision is in line with comparable authorities. 7. Ensure recording standards are monitored and improved through regular internal case file audits. Supervision practice to embody strengths based values and deliver effective support to all staff. 8. Develop excellent working relationships with other colleagues/teams within the Delivery Unit and with external partners 	<ol style="list-style-type: none"> 1. Keeping delayed discharges to a minimum through undertaking timely strengths-based assessments and discharge planning 2. Signing off the agreed weekly sitreps for the acute and rehab settings within LBB 3. Weekly reporting to ADASS on DToCs in the acute and rehab settings within LBB 4. Weekly reporting on the numbers of Assessment & Discharge Notifications received 5. Supervision to be completed monthly in line with quality assurance standards. 6. Case audits to be undertaken at each supervision session. 7. Risk assessments to be completed in all safeguarding cases.

	Purpose	Core commitments	Improvement priorities	Key performance indicators
	<ul style="list-style-type: none"> 7 day Weekend Working <p>The purpose of the team is to provide a high quality strengths-based assessment and discharge planning service to residents, ensuring a prompt safe and effective discharge from hospital.</p>	<p>initiative with Health with the aim of reducing demand of unplanned health and social care and through planned and managed interventions improve the ability of service users to manage their own care.</p> <ol style="list-style-type: none"> 10. Providing a quality and responsive service in its joint working with the BCCG in all areas relating to Continuing Health Care 11. Work with health colleagues in providing a robust and effective Discharge To Assess service which aims to reduce the time older people spend in hospital and improve the quality of their journey back in to the community. 12. Undertake strengths-based, high quality, person-centred safeguarding practice in line with legislation, and develop effective safeguarding plans. Have effective monitoring and recording systems in place which provide assurance that individuals are being kept safe. 13. Provide a quality social work service to London Borough of Barnet residents in all out of borough hospitals and within Neuro-Rehab Hospital settings. 	<ol style="list-style-type: none"> 9. Ensure compliance with LB Barnet complaints process and that responses meet statutory and corporate standards and timescales. 10. Ensure compliance with agreed quality assurance standards and that staff evidence good safe practice, with a relevant monitoring and reporting framework. 11. Ensure safeguarding concerns and risk assessments are completed promptly and that safeguarding enquiries meet agreed timescales and quality standards. 12. To further develop strengths based practice when working with residents. To be evidenced through active engagement with workforce, development programme, case study examples of work with clients, observations of practice, feedback from regular supervision meetings and service user feedback. 	
Mental Health	<p>Provides services to adults age 18 years and above who are experiencing a mental health issue</p>	<ol style="list-style-type: none"> 1. Provides care management as per the Care Act 2. Provides an enablement and prevention service 3. Works in partnership with key MH stake holders 4. Uses the strength based model when working with people 5. Provides an integrated service 6. Supports service user involvement 7. Provides an AMHP service 8. Supports carers 9. Care management for people with long term enduring MH services 10. Works with service providers 	<ol style="list-style-type: none"> 1. To embed the new structure and model of strength based MH services 2. Increase the number of reviews carried out for service users and carers 3. Improve the quality of appraisals for staff, linked with their PDPs 4. Improve the process for lessons learnt from safeguarding and complaints 5. Secure a new base for the enablement/Network team 6. Engage in the 2nd year Think Ahead programme 7. Work with the commissioning unit to improve quality of options available for employment and accommodation 8. Embed the joint pathways with other 	<ol style="list-style-type: none"> 1. Successful completion of the implementation plan and new model becomes business as usual 2. Number of reviews completed increase 3. Safeguarding reduce and services improve 4. Services re. accommodation and employment provide better outcomes for individuals and are of a high standard 5. Delayed discharges reduce

	Purpose	Core commitments	Improvement priorities	Key performance indicators
			departments,(CAF,D&A) 9. Improve the quality and availability of information available to service users 10. Strengthen partnership/co-production with service users 11. Review the AMHP service 12. Review the social care pathway for older people with MH 13. Improve discharge arrangements	
Care Quality	The service area oversees the adult social care provider portfolio, comprising contract management and monitoring, regulated sector quality improvement and brokerage.	<ol style="list-style-type: none"> 1. Manage, maintain and keep up to date the contracts register 2. Work with providers at a strategic and localised level on contract compliance and relationship management and service improvements 3. Provide a programme of operational contract management, with the appropriate level of contract management in place for all providers, with current signed contracts and audit trail of LBB contract management. 4. Deliver a programme of work with regulated providers within Barnet to deliver high quality and safe services 5. Support the workforce through provider forums, effective networking models and partnerships 6. Procure services on behalf of the delivery unit and health ranging from mainstream packages of care to negotiating complex packages 7. Develop an engagement programme with contracted and non-contracted providers of regulated services 8. Undertake quality monitoring of providers 9. Identify, intervene and manage contingency planning for provider failure and provider concerns 	<ol style="list-style-type: none"> 1. Supporting the mobilisation of new services e.g. Telecare, Equipment, Supported Living / Extra Care 2. Developing an approach for embedding strengths-based practice with providers 3. Develop and deliver an enhanced brokerage function providing creative solutions for specialist services 4. Working to maximise available capacity in the market and reduce delayed discharges from hospitals 	<ol style="list-style-type: none"> 1. Monthly spend and contracts reporting, accurate info provided for commissioners, risks managed 2. Contract compliant, risk levels low, high risk services identified, mitigation plans in place where appropriate. 3. Improved CQC ratings and Suspensions lifted on embargoed services 4. Increased /sustained attendance at provider forums and events the events 5. Reduced social care DToC 6. Third party spend managed in line with budget
Customer Care	The Customer Care Team is responsible for the management of customer care functions within the Adults and Communities – including	<ol style="list-style-type: none"> 1. Ensure residents can access clear, accurate, up to date and accessible information to ensure they are able to make an informed choice and decisions about their social care needs 2. Establish clear mechanisms for residents to engage with the council to ensure that their views inform the decision making process 	<ol style="list-style-type: none"> 1. Strengthen our External Communications to ensure people are supported to maintain their health, wellbeing and independence by providing easy access to accurate information, good advice, useful tools and preventative 	<ol style="list-style-type: none"> 1. Website satisfaction hits increase with clear positive impact on call centre calls 2. Improved intranet that staff use frequently and trust 3. Increase number of members on People Bank

	Purpose	Core commitments	Improvement priorities	Key performance indicators
	communications, engagement, complaints and customer care	<ol style="list-style-type: none"> 3. Embed a clear complaints process that is open, fair and transparent and adheres to statutory and corporate standards for response times 4. Support staff to deliver outstanding customer care with a professional and efficient approach to both internal and external customers 5. Deliver a range of internal communication methods to ensure staff are kept inform and are able to engage in business developments and progress, especially supporting the change agenda 	<ol style="list-style-type: none"> 1. services. 2. Ensure that Internal Communication supports the DU change programme – informing and engaging staff through the changes. 3. Actively promote the Adults and Communities Vision to staff, wider council and residents 4. Continue to implement the new Engagement Structure, with particular focus on improving collaboration 5. Develop and implement clear ‘Digital Vision’ for Adults and Communities including refreshing web pages to reflect strength based practice and increase number of self-service options for residents 6. Improve Complaints management through implementation of Mosaic 7. Embed learning from complaints through raising awareness and training with managers and Heads of Service 	<ol style="list-style-type: none"> 4. Residents overall satisfaction of engagement structure improved through better collaboration 5. Well attended Annual Engagement Summit – which is well attended and good satisfaction 6. Learning from complaints can be clearly evidenced at monthly reporting and annual report.
Performance & Improvement	To support frontline teams and the Delivery Unit Leadership Team to drive high performance and continuous improvement across the Delivery Unit, including production of performance and financial information, business systems support, information governance and risk management, and flexible and responsive business improvement and business support	<ol style="list-style-type: none"> 1. Provide robust performance and financial information and intelligence to managers, workers, and internal and external partners including the Commissioning Group. 2. Use A&C business expertise to provide explanation and context for performance and financial information, working closely with the CSG Finance team as well as the corporate performance service 3. Ensure that information produced for planning and monitoring is current and accurate. 4. Provide strategic leadership on use of business systems and technology within the Delivery Unit, ensuring systems are effective, efficient, coordinated, and meet business needs 5. Support and train users of A&C business systems – more than 400 in the course of the financial year – including provision of ad hoc information and advice on systems use 	<ol style="list-style-type: none"> 1. Complete implementation of the Mosaic system; embed the system and ensure correct and systematic recording by practitioners to deliver performance and financial information 2. Deliver new reporting environment and dashboards, increasing self-service access to information. 3. Develop the service’s capacity to provide more sophisticated performance and financial information and analysis 4. Promote an evidence based decision making culture within the Delivery Unit, including an annual evidence review to support the A&C Business Plan 	<ol style="list-style-type: none"> 1. Decrease in recording errors and corrections required 2. Proportion of DU staff who have received training (within one month of starting for new starters) 3. Proportion of people trained providing positive feedback 4. Increase in number of reports run by non-P& I colleagues 5. Increase in number of decisions made in response to evidence provided or presented. 6. Increased take up of mandatory health and safety

	Purpose	Core commitments	Improvement priorities	Key performance indicators
	functions.	<ul style="list-style-type: none"> 6. Act as the internal liaison point for CSG IS and support delivery – and troubleshooting – of new and existing IS systems 7. Lead on the production of strategies, policies and agreements including the annual Management Agreement with the Commissioning Group and underlying business plan. Ensure the business plan articulates and realises the Delivery Unit's vision and objectives for the year. 8. Support and deliver a continuous improvement culture within the Delivery Unit, including production of an annual business improvement plan which supports and delivers the Delivery Unit's business plan, as well as support and leadership of specific projects. 9. Support and improve key 'business basics' for the Delivery Unit, including information governance, risk, and health and safety. 10. Deliver a robust process for managing complaints and Member Enquiries 11. Ensure that the service (including service providers) can continue to deliver our services whatever the circumstances (BCP), with specific business continuity plans in place for <ul style="list-style-type: none"> a. Office failure b. Hot weather c. Cold weather 	<ul style="list-style-type: none"> 5. Review the business support offer, especially in light of Mosaic implementation, and deliver the relevant recommendations 6. Embed key business basics including health and safety management and the revised corporate approach to risk management; maintain and improve the Delivery Unit's approach to information governance 7. Design and manage a complaints improvement plan in response to assessment against the Council's Complaints Maturity Model 8. Continue to develop a more strategic approach to business improvement, including reviewing approaches to Delivery Unit and project management and governance. 9. Support the delivery of key improvement projects, including implementation of the new Telecare service, review of Learning Disability client independence, web and other digital improvements 	<ul style="list-style-type: none"> training 7. Increased health and safety incident reporting 8. Reduction in repeat IG breaches due to email errors

6. Detailed Improvement and Development Plan

Priority Area	Projects and Activities	Target completion month	SRO	Project Management
Evolving practice and quality	Mosaic			
	Provide change management and troubleshooting support for staff, with focus on high quality recording	July	James Mass	Pete Brown
	Complete Mosaic phases 1.5-1.9	August	James Mass	Pete Brown
	Design and implement change control process	April	James Mass	Pete Brown
	Publicise standard operating procedures and ensure use in supervision	April	Elissa Rospigliosi	Will Hammond
	Agree Phase 2 developments as part of digital strategy	TBC	James Mass	Pete Brown
	Quality Board Work plan			
	Complete Quality Board work plan	April	Jon Dickinson	Dipal Patel
	Complete strengths-based coaching for all teams	Ongoing	Jon Dickinson	Carol Baxter
	Ensure link between panel and Quality Board	April	Jon Dickinson	Dipal Patel
	Embed reporting of customer feedback in Quality Board	April	Jon Dickinson	Dipal Patel
	Feedback from Direct Observations in Quality Board	May	Jon Dickinson	Emily Bowler
	Review reviewing function	May	Jon Dickinson / Julie Hughes	Neil Shaw
	Implement reviewing improvements	August	Jon Dickinson	Neil Shaw
	Launch refreshed Supervision Policy	April	Jon Dickinson	Joyce Hendry
	Complete first supervision audit	June	Jon Dickinson	Dipal Patel
	Prepare and deliver Practice Week	September	Jon Dickinson	Dipal Patel
Working together effectively	Front Door			
	Complete front door transformation implementation design and plan	June	Andrea Breen	Neil Shaw
	Implement new front door model, including new safeguarding pathway	August	Andrea Breen	Neil Shaw
	Contribute to development of MASH options appraisal	TBC	Sue Smith / Andrea Breen	Emma Coles
	Review necessary changes for OPPD safeguarding pathway and implement	In line with front door redesign	Sue Smith	TBC
	Review Hospital, LD and MH necessary changes and implement	End of financial year / in line with MASH	Sue Smith	TBC

	PD Review			
	Benchmark physical disabilities spend and outcomes to identify opportunities for savings and improvement	October	James Mass	Business Improvement
	Implement PD review recommendations	March	James Mass	Business Improvement
	Independence in Learning Disabilities			
	Decision: agree with Learning Disabilities Service business case?	May	Mathew Kendall	Business Improvement
	Complete LD mobilisation	June	Head of LD	Business Improvement
	Implement LD business case	March	Head of LD	Business Improvement
	Health and social care integration			
	Develop and agree operational integration options	June	Liam Furlong	TBC
	Sprint 1 operational integration improvement work	August	Liam Furlong	TBC
	Further sprint activity	March	Liam Furlong	TBC
	Other			
	Support Mental Health restructure go-live	July	Karen Morrell	Priya Bhudia
Refresh and implement Business Support review	October	Elissa Rospigliosi	TBC	
Embedding new services	DFG			
	Increase targeted use of DFGs including recent discharges from hospital	July	Jon Dickinson	TBC
	Shared Lives			
	Increase uptake of Shared Lives provision in line with agreed targets	July	Karen Morrell, Head of LD	Business Improvement
	Supported Living and Extra Care			
	Mobilise Supported Living framework	July	Jess Baines-Holmes	TBC
	Telecare and equipment			
	Mobilise new Telecare contract	July	Jess Baines-Holmes	Sameen Zafar
	Mobilise new Equipment contract	July	Jess Baines-Holmes	External PM
	Produce and promote guidance on alternative provisions	June	Jess Baines-Holmes	Carol Baxter
Empowering and engaging others	Website			
	Complete website content update cycles	September	Emily Bowler, Will Hammond	Jennifer Dawson

	Digital and information and advice			
	Digital and information and advice strategy and business case development	June	James Mass	Will Hammond
	Digital and information and advice strategy implementation	Ongoing	James Mass	TBC
	Clarify roles and responsibilities across primary, secondary and tertiary prevention	May	Jon Dickinson	Sarah Perrin
	Implement agreed elements of prevention plan	Ongoing	Jon Dickinson	Sarah Perrin
	Liaise with Commissioning Group to clarify prevention offer and pathways	June	Jon Dickinson, Andrea Breen	
	Implement and embed Choose Care	August	James Mass	Capita
	Implement Deputy and Appointeeship system	September	James Mass, Gary Johnson	Deborah Robinson
	Ensure we have an effective service directory	September	Emily Bowler	CTP
	Input into the development of Early Support specification	Ongoing	Jon Dickinson	-
	Develop additional necessary engagement mechanisms with the VCS	December	Sarah Perrin	-
Efficient Working Practices	TW3			
	Work with Capita to improve support offer for IT including mobile working	May	James Mass	Will Hammond
	Options for touchdown space to allow more efficient working	June	James Mass	Will Hammond
	Deliver training on flexible and mobile working	August	James Mass	Will Hammond
	Design flexible working pilot	August	James Mass	Will Hammond
	Deliver flexible working pilot	January	James Mass	Will Hammond
	Review findings and make recommendations from flexible working pilot	March	James Mass	Will Hammond
	Reporting			
	Phase 1 performance reporting (critical bespoke reports)	April	Elissa Rospigliosi	Emma White
	Additional report and dashboard development	Ongoing	Elissa Rospigliosi	Emma White
	Develop and implement performance management TOM	July	Elissa Rospigliosi	Emma White
	Enablers			
	Develop touchdown space and ensure links with accommodation strategy	TBC	Mathew Kendall	Will Hammond
	Develop Independent Living Centre	TBC	Mathew Kendall	Will Hammond