

# Social Care, Health and Wellbeing

## Directorate Business Plan

April 2016 to March 2017  
(Draft v.04)



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## Foreword from our Corporate Director

I am pleased to present you with the Social Care, Health and Wellbeing Directorate Business Plan, for the financial year beginning April 2016 to the financial year ending March 2017.

This Business Plan reflects our transformation vision, core values and commitments which inform our services. It also sets out the important information about the key roles and responsibilities that come with working in our Directorate, in carrying out functions in fulfilling the legal obligations and other objectives placed on the Kent County Council (KCC), in respect of Children's Social Services, Adult Social Care and Public Health.

The primary purpose of our Directorate is to work with people who need help and support because of their circumstances and who may therefore require any of the services we provide. We do this, by working with people to understand their needs and, help them to build on their strengths and capabilities. We always aim to promote their independence and/or welfare and we seek to contribute to improving outcomes that are important to people. Within this core purpose, we make it our top priority to discharge our statutory safeguarding responsibilities often working with relevant partner organisations.

Looking to the 2016/17 financial year ahead, it is clear that we will continue to deal with significant external pressures. First, the Directorate will be expected to do all it can to provide services within the ongoing challenging financial settlement that is imposed on local authorities which, in some ways accentuate the pre-existing funding pressures. Due to the broader funding pressures that KCC faces, our directorate along with other directorates will be required to find ways for achieving value for money and making its resources stretch further without comprising our core values and commitments. Second, we will continue to support people who increasingly present with complex set of needs because of the rising number of people living longer.

We will progress putting further systems in place to embed the transformational changes into 'business as usual' and, we will ensure that the embedding measures are sustained and led by KCC staff. We will also begin the planning for Adults Transformation Phase 3 so will require fundamental changes of the operational arrangements to help deliver additional benefits. Our Directorate will continue to play a leading role in making a reality of the health and social care integration ambitions outlined in the KCC Strategic Statement 2015 – 2020. These are being taking forward under the Integrated Care Pioneer Programme. In so far as they may affect the local authority functions, we will also actively engage with the new planning arrangements being introduced under the Government's mandate to NHS England for 2016 – 17.

Our strategic and operational response will be called upon in dealing with the significant additional pressures due to the unprecedented, very high number of unaccompanied asylum seeking children and, related care leaver issues. The Adoption Service and how it operates within the planned regional network will be addressed. We are fully prepared and we will response positively to any external review of our children's services by OFSTED.

We also recognise that our services will need to demonstrate organisational resilience to assist us in achieving the progress we plan for this year. This means that we must sustain a high calibre workforce able to carry out consistently high standard of practice. To ensure that this objective is achieved we will put the steps described in our 'Workforce

Development Plan' into action. The types of support we put in place and, the investment that we make, will reflect the collaborative and the partnership arrangements in place. Improving joint working between teams within KCC and, between KCC, NHS organisations, districts councils and schools is essential for making the 'transition process' run smoothly for people moving from one service to another.

Finally, despite the challenges that we will undoubtedly be dealing with this financial year, I am confident that we have the necessary resourcefulness, skills and capabilities in place. We will seize the opportunity to ensure that we make sound commissioning decisions and drive for the delivery of quality services that improve outcomes and wellbeing for people.

This Business Plan for 2016/17 should be read alongside other relevant directorate and KCC strategic documents. I look forward to working with all our internal and external partners to achieve the objectives outlined in this plan.



**Andrew Ireland**  
Corporate Director, Social Care, Health and Wellbeing

## Overview of our Directorate

We are known as the Social Care, Health and Wellbeing directorate and, we have the foremost role in discharging the statutory responsibilities for social care and public health that Kent County Council (KCC) is obliged to fulfil.

### Divisions in our Directorate

Our directorate is made up of five divisions which are recognised as a formal part of the organisational structure of KCC. The divisions are illustrated below and followed by a short statement about the responsibilities and the overall purpose of each division. Additional information about the roles and responsibilities of the business areas can be found in the divisional business plans which support this business plan.



## **Specialist Children's Services Division**

Our Specialist Children's Services are responsible for carrying out the statutory responsibilities for children's social work. The overarching duties are safeguarding children and young people from harm and promoting their health and wellbeing. We do this by working with all the relevant partners. The purpose of the division is to deliver positive outcomes for Kent's children, young people and their families. The division is made up of ten key business areas (Central Referral Unit, Family Support Teams, Integrated Children in Care Service, Fostering Service, Adoption Service, Safeguarding and Quality Assurance Unit, Local Authority Designated Officer Service, Virtual School Kent, Family Group Conferencing and Management Information Team).

## **Older People and Physical Disability Division**

Our Older People and Physical Disability services provide a range of services to improve outcomes for older people and physically disabled adults and their carers. The purpose of the division is supporting older and vulnerable adults wherever they live in our community to live independently by promoting their wellbeing, promoting and supporting their independence. The division is made up of eight key business areas (Area Referral Management Service, Adult Community Teams, Kent Enablement at Home, Sensory and Autistic Spectrum Conditions Service, Integrated/Registered Care Centres, Day Centres, Programme Management Office and Health and Social Care Integration Team).

## **Disabled Children, Adult Learning Disability and Mental Health Division**

Our Disabled Children, Adult Learning Disability and Mental Health services provide a range of services for children and young people with disabilities, adults with a learning disability, people with mental health conditions and their carers.

The purpose of the division is to support vulnerable adults and disabled children wherever they live in our community to live independently by promoting their wellbeing, and independence and supporting their independence. The division is made up of five key business areas (Community Learning Disability Teams, Learning Disability Provision Services, Disabled Children's Services and Short Breaks, Mental Health Services and Operational Support Unit).

## **Strategic Commissioning Division**

Our Commissioning division is responsible for commissioning and procuring a range of social care services for vulnerable adults, children and young people and carers. The purpose of the division is supporting adults and children wherever they live in our community to have greater choice and control to lead healthy lives. It ensures that the right level of quality care is provided at the right time, in the right place and at the right cost. The division is made up of four key business areas (Commissioning, Adult Safeguarding Unit, Performance and Information Management and Programme Management Office).

## **Public Health Division**

Our Public Health division is responsible for the commissioning and the provision of services that aim to improve and protect the health of the population. The purpose of Public Health team is to understand and highlight the factors that affect peoples' health,

helping people to stay healthy and preventing illness. With our partners we seek to promote and deliver actions across the lifespan to improve the overall health and wellbeing of residents and to reduce inequalities in health. The division is made up of six key business areas (Children and Young People, Health Improvement Services, Kent Public Health Observatory, Health Protection and Sexual Health, Mental Health and Community Wellbeing and Health and Social Care Integration and Health Inequalities).

## Our Financial and Staffing Resources

The Directorate has a total budget allocation of £491,077.5m and a total of 3,533.2 FTE staff.

## Our Directorate Priorities

### County Council Vision

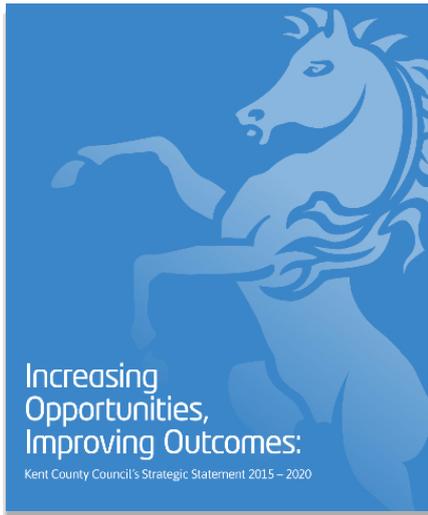
**Our focus is on improving lives by ensuring that every pound spent in Kent is delivering better outcomes for Kent's residents, communities and businesses**

Our main responsibilities as a Directorate include, carrying out individual and population-level needs assessments; commissioning and/or arranging help, care and support services to meet the needs of residents who are eligible and; taking the appropriate actions in respect of KCC's overarching duties for safeguarding and promoting the welfare of vulnerable children (as set out in the Children Act 1989) and, safeguarding adults who are unable to protect themselves from either the risk of, or the experience of abuse or neglect (as set out in the Care Act 2014). In this respect, the safeguarding duties regarding children and adults have a legal impact on other organisations which are specifically mentioned in the legislation such as, the Police and the NHS and other organisations.

Our seven Directorate priorities for 2016/17 and how these contribute to the Kent County Council's Strategic Statement 2015 – 2020 are explained in the following section of the business plan. In brief, we are committed to:

- Priority 1: Proactive and effective management of safeguarding responsibilities
- Priority 2: Transformation which is focused on improving lives and achieving better outcomes
- Priority 3: **Greater integration between health and social care services that deliver better outcomes**
- Priority 4: **Improving outcomes for people living with mental health conditions**
- Priority 5: Ensuring people **experience a smoother transition and improving outcomes**
- Priority 6: **Outcome-based commissioning and the move to becoming a commissioning authority**
- Priority 7: Sound decision making by knowledgeable, skillful and resilient workforce.

The two strategic outcomes (and 14 supporting outcomes) that strongly influence what we do are:

	<p><b>Strategic Outcome</b></p> <p><i>Children and young people in Kent get the best start in life</i></p>
	<p><b>Strategic Outcome</b></p> <p><i>Older and vulnerable residents are safe and supported with choices to live independently life</i></p>

The above directorate priorities form part of a number of things we do which demonstrate our overall contribution towards the achievement of the outcomes outlined in the KCC Strategic Statement. Much of the focus of our activities is directed at addressing the above two strategic outcomes, even so, many of our activities also contribute to the other outcome – “Kent communities feel the benefits of economic growth by being in-work, healthy and enjoying a good quality of life”.

The cross divisional priorities described below hold all the divisions in the directorate to account and the senior management team as a group have undertaken to be bound by these priorities and each will act to further the achievement of the council-wide as well as directorate priorities.

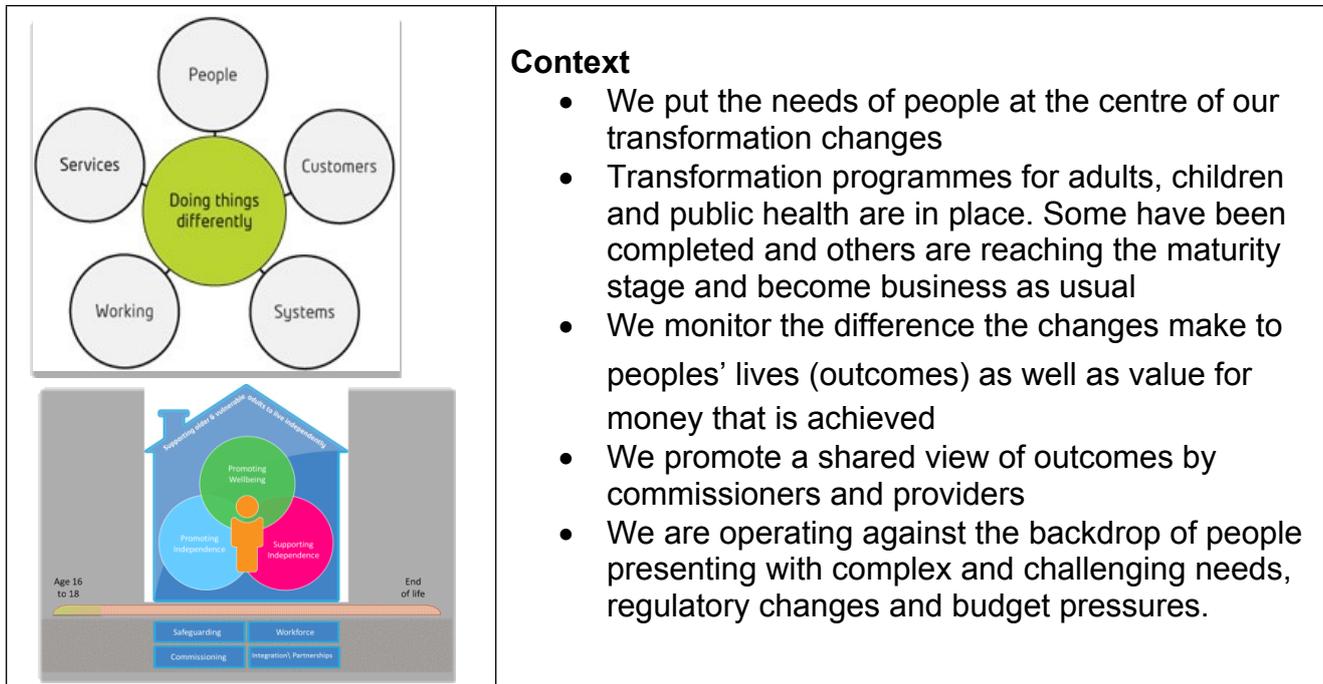
**Proactive and effective management of safeguarding responsibilities**

	<p><b>Context</b></p> <ul style="list-style-type: none"> <li>• The 1989 and 2004 Children Acts and the Care Act 2014 respectively set the overall <b>responsibilities for safeguarding and promoting the welfare and wellbeing of children and adults.</b></li> <li>• <b>Systems and processes are in place which govern actions that should be taken to protect people</b></li> <li>• <b>The law also places safeguarding responsibilities on key partner organisations</b></li> <li>• <b>Safeguarding annual reports are produced to account for how we discharge these duties.</b></li> </ul>
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<p><b>Planned key actions:</b></p> <p>We will continue to be proactive and take action where necessary with partners (internal</p>
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and external) to keep vulnerable people safe from harm, abuse and neglect. In doing so we will make sure that the voices of children and adults going through such difficult times are heard.
We will maintain the right level of investment in staff responsible for discharging the statutory safeguarding responsibilities of the county council with focus on how we deal with child sexual exploitation at both strategic and operational levels
We will ensure staff are well trained and confident in carrying out safeguarding tasks and monitor how this is effectively put into practice
We will continue to conduct practice audits with the aim of improving practice and sharing information about high quality practice in the council and we will also continue to provide regular reports to Members and produce annual reports for the Health and Wellbeing Board as well as bringing these to the attention of the boards of relevant organisations
We will consider extending the use of the signs of safety based approach which we have successfully introduced in children's services into adult social care
We will have in place a team which will lead on our preparation and response to external inspections (under the Single Inspection Framework and Joint Target Area Inspection Framework)
We will equip county councillors to take on their respective corporate parenting responsibilities through well placed briefings and bespoke training and carry out a review to assess effectiveness of such actions
We will take steps to arm staff so that we can further embed the implementation of the PREVENT strategy responsibilities through targeted cross-function and multiagency training with schools, Police, district and borough councils and the NHS
A programme of work will be taken forward so that staff working within the Healthy Child Programme can play a continuing role in making sure that safeguarding risk issues are identified and appropriate follow up actions taken
We will support the Leader of Kent County Council to lobby the Government to fully fund the true cost of providing support to unaccompanied asylum seeking children and for the repayment of historical unaccompanied asylum seeking children underfunding. We will also support efforts to ensure a national distribution scheme for unaccompanied asylum seeking children is implemented
We will continue to take steps to ensure a high level of public awareness of safeguarding so that people know how to raise any concern by working with the Kent Safeguarding Children Board (KSCB) and the Kent Safeguarding Adults Board (KSAB). We will keep our communication with the public under review

## Transformation which is focused on improving lives and achieving better outcomes



### Planned key actions:

We will focus on proactive case management with the aim of improving outcomes for children, young people and their families working in conjunction with colleagues in the Early Help division. Our objective is to ensure a sustained embedding of the transformation changes we have made in the Specialist Children's Services division

We will prioritise work in developing a more efficient edge of care service to ensure that the numbers of children in care are kept to a minimum. As with the above action, Specialist Children's Services will work closely with Troubled Families and Early Help teams. The achievement of this objective is dependent upon our ability to increase the number of appropriate step downs from Specialist Children's Services to Early Help

We will transform 16+ services and pathway plans to improve NEET outcomes by moving forward work with partners to agree a new pathway that improves on the existing arrangements. This is a joint objective between Specialist Children's Services and Early Help divisions

We will establish a project board and develop plans to support the implementation of the 'adult social care vision' which will usher in (Adult Transformation Phase 3) a new model of care to replace the traditional 'care management' approach. This will be the basis for renewing and reclaiming social work practice. We will develop new ways of doing business such as making Enablement and Occupational Therapy (KCC and NHS) work more effectively. As part of this, we will engage staff, Members, partners and the social care market. We will report on progress to the KCC Strategic Commissioning Board

We will take further action to embed the transformational changes in adult social care and ensure they are sustained and become business as usual. We will do so by making sure that all frontline staff and managers are clear about what is expected of them; perform their duties accordingly; have the necessary tools in place and timely information to track how well we are doing

We will deliver the agreed wellbeing outcomes and financial savings relating to the

ongoing transformation projects (Your Life Your Home, Kent Pathways Service, Acute Hospital Optimisation, 16-25 Accommodation and Support Programme and the Lifespan Integrated Pathway programme. Further information is provided in the divisional priorities section of this plan. We will report on progress to the KCC Strategic Commissioning Board
We will commence work with the Strategic Infrastructure division to define the ICT requirements for adult social care by September 2016. This system review will inform the development of clear pathways as part of work supporting the 'adult social care vision'. This is seen as a necessary major improvement of the client-based system which will operate in adult social care. The intention is to have systems that meet the expectations of the national policy agenda on integration between health and social care by 2020. This will be influenced by the implementation plan for the 'adult social care vision'.
We will put plans in place to ensure effective transformation of the adult and children public health improvement programmes in line with statutory guidance within allocated financial resources, as a key means for improving the health and wellbeing of local residents
We will deliver the supporting transformation programmes including the new health inequalities strategy and the district health improvement deal. The former would lead to the replacement of the existing Mind the Gap strategy.
We have defined our equalities priorities which are informed by the KCC Strategic Statement, the outcomes expressed in the 0-25 Transformation Change Portfolio, the Adults Transformation Change Portfolio and the cross directorate priorities described in this business plan.

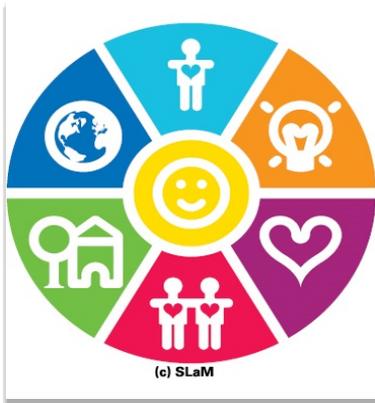
**Greater integration between health and social care services that deliver better outcomes**

	<p><b>Context</b></p> <ul style="list-style-type: none"> <li>• Kent is a national Integrated Care Pioneer site required to deliver integrated care and support</li> <li>• Kent has a Better Care Fund (BCF) pooled fund of £105.3 million for 2016/17</li> <li>• Government mandate to the NHS England's and the Sustainability and Transformation plans will influence the integration work in Kent</li> <li>• Integration with health is relevant to both adult children social care</li> <li>• New forms of integration of provision and commissioning are being considered as part of the next phase of transformation.</li> </ul>
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<b>Planned key actions:</b>
We will continue to work with our NHS partners on the Integrated Care Programme, of which the Better Care Fund is a key component. The objective is to provide the most efficient and effective service for the public with the explicit aim of improving outcomes for

people in line with the KCC strategic outcomes. Further information about this can be found in the major service redesign section of this business plan
In supporting the work of the Health and Wellbeing Board, we will take forward plans to use the Design Centre for Clinical and Social Innovation approach to critically evaluate the contribution of new models of integration care
We will consider and take forward options for integrated provision as well as integrated commissioning (for example, encompass Multi Community Specialist Provider (MCP) (formerly Whitstable Vanguard), Integrated Care Organisations, Accountable Care Organisations) where these would add value and lead to an even quicker improvement in outcomes, resulting in fewer unplanned admissions to hospital and care homes. We will update members on our progress via the adult social care performance dashboard report
We will be exploring further joint commissioning arrangements between health and social care for children's services, building on joint commissioning of children's services we have in place with North Kent CCG
We will carry on working with the Ebbsfleet Development Corporation and other key partners to influence the nature of social care provision that may be needed as part of the construction of Healthy New Towns in north Kent
We will take forward work with CCGs and NHS England to ensure that the vision for adult social informs further integration arising from the new planning arrangements for health and social as set out in the Government mandate to NHS England for 2016 – 17 and the associated guidance (Sustainability and Transformation plans)
We will continue to work with health colleagues from Kent Community Health Foundation Trust and Kent and Medway Partnership Trust in the well-established integrated teams that support people with learning disability and mental health needs
We will implement the Integrated Commissioning Project for Learning Disability with the establishment of the integrated commissioning team in KCC and which will be overseen by a new Section 75 Integrated Commissioning Board for Learning Disability.

## Improving outcomes for people living with mental health conditions

	<p><b>Context</b></p> <ul style="list-style-type: none"> <li>• Mental health is valued equally with physical health and is now referred to as 'parity of esteem'</li> <li>• Live It Well Strategy is our joint strategy for improving the mental health and wellbeing of people in Kent and Medway</li> <li>• KCC (public health, children's services and adult services) jointly commission a range of services with CCGs to help children and adults living with mental health conditions</li> <li>• Services also take account of people with dual mental health and learning disability needs</li> <li>• Prevention, early intervention and recovery services is also a focus for mental health</li> </ul>
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services.

**Planned key actions:**

We will make further progress on the outcomes set out in Kent's Emotional Wellbeing Strategy for Children and Young People by advancing actions described in the Delivery Plan (including CAMHS) and we will judge local systems against the six pledge commitment to children and young people

We will work with a strategic partner to deliver community mental health and wellbeing service which will help people to avoid entering the formal social care and health systems. The focus of service delivery will be community first, values driven and outcome focused provision for people with mental health needs

We will implement a new primary care social care service which will sit outside of the secondary mental health service.

We will explore with key partners further opportunities that can be taken to combat social isolation and loneliness as part of the preventative measures for improving the mental health wellbeing of residents. This is a key objective of the Kent Joint Health and Wellbeing Strategy for Kent

We will produce and implement a new Live it Well strategy based on a set of key principles linked to the CCGs strategy for mental health and the 'adult social care vision'. Each Commissioning agency that is, KCC, Medway Council, NHS England and CCGs will also publish corresponding commissioning plans linked to Outcome 4 of the Kent Joint Health and Well Being Strategy for Kent.

We will focus mental health services as a key priority as part of making progress on the Kent Social Care Accommodation strategy which we developed with the involvement and agreement of our key partners

**Ensuring people experience a smoother transition and improving outcomes**

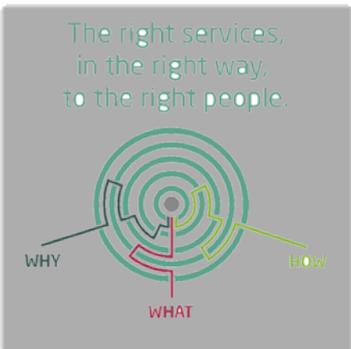


**Context**

- Joining up and integrating services are key goals for achieving improved outcomes for people
- The Kent Local Offer is one example of how we work to make it easier for people to find out about services for 0-25 year olds with special educational needs and disabilities
- Transition takes place at different points for people depending on their needs
- Several services and strategies are interdependent (LD Transformation Programme; 0-25 Commissioning, Emotional Wellbeing Strategy; Specialist Service Pathway; Sensory Strategy; Neuro developmental Pathway)

<b>Planned key actions:</b>
We will continue to ensure that the transition(s) processes are carefully planned so that there are no gaps in the service we provide or arrange for young people. We will also ensure that young people and their families are fully involved in the planning processes
We will seek to make further progress with the implementation of Lifespan Pathway Programme to support people with disabilities and ensure improvement of the coordination of a person's care and support as they move from children's services to adults' services. This work will call for the involvement of several functions in KCC to work together with key partners providing universal services
We will develop a new pathway for transition of young people with a disability from children's services to adult services. This will take account of interdependent issues as we develop services such as all ages county sensory services, 0-15, 16-25 and 26+ services
We will also continue to work with health, education and housing to support young people with special educational needs and disability (and their parent or carers) when accessing services via the local offer
We will continue to review how much more can be done in widening the reach of the Kent Pathways Service and the Your Life your Home for new people requiring adult social care support

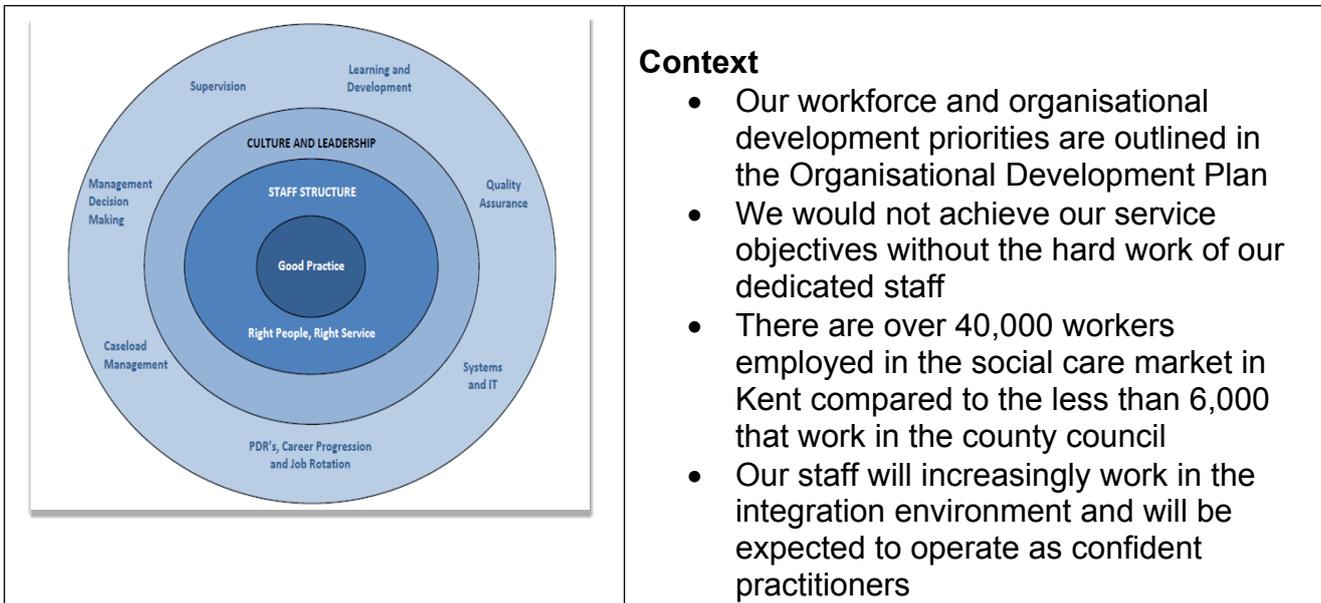
## Outcome-based commissioning and the move to becoming a commissioning authority

 <p>The right services, in the right way, to the right people.</p> <p>WHY      HOW WHAT</p>	<p><b>Context</b></p> <ul style="list-style-type: none"> <li>• The KCC Commissioning Framework demands strengthening of our commissioning work and it introduced the principle of contestability</li> <li>• The policy intention is that outcome-based approach should be the foundation of all our commissioning exercises</li> <li>• Regulations stipulate that children services, public health and adult social care have to meet sufficiency and provision responsibilities for a range and quality of services in the local area</li> <li>• The move to becoming a fully-fledged commissioning authority requires clarification of roles in the commissioning cycle</li> <li>• Commissioning is increasingly framed by integration and strategic partnerships</li> </ul>
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<b>Planned key actions:</b>
We will increase the number of outcome-based commissioned services as the term of existing contracts come to an end. In this endeavour, we will adhere to the principles outlined in the Commissioning Framework with the expectation that commissioning activities will be strengthened and contract management enhanced
We will carry out our legal responsibilities for market shaping by regularly considering the

<p>care and support needs of people in Kent. We will include in this the care and support services available for people, and work out where the gaps are and how they can be filled. The aim, in line with the strategic outcome is to make sure that people can find care and support that meets their needs, and that a variety of options are available to suit people's individual circumstances and preferences. We consider that getting this right will make a reality of people have choice and control</p>
<p>We will continue to work hard to address the evident and pressing challenge of ensuring the right balance of non-residential and residential models of care and sufficient capacity in line with our overall strategy for children and adults with and without disability. This challenge is closely linked to the need to ensure sustainability of the residential and domiciliary social care markets and the connected social care workforce issues in Kent</p>
<p>To support the above objective we will continue to play an active role in the Workforce Task and Finish Group established by the Kent Health and Wellbeing Board to find a lasting integrated solution. We will work with our health and provider partners to use the quality assurance framework as a systematic and structured way for monitoring, measuring and improving the quality of services by provider organisations. We will measure quality through a variety of ways, including hearing the views and experiences of people who use services, surveys of parents and carers. This is one facet of making a reality of outcome-based commissioning</p>
<p>We will begin preparing services so that we are able to demonstrate how we meet the contestability requirements as a result of working to the Commissioning Framework. This will include clarification of roles, responsibilities and accountabilities within the commissioning cycle as we start to embed strategic commissioning into business as usual. Please see the major service redesign and commissioning activity and the significant divisional priorities sections of this business plan for further information</p>
<p>We will implement actions in our market position statements for adults and sufficiency strategy for children. These contain detailed information on what is needed in Kent and what and how we intend to respond to cater for current and future needs. This is a key requirement placed on us as commissioners by regulations.</p>
<p>We will build on existing partnerships such as the learning disability joint commissioning and joint commissioning of emotional wellbeing service along the lines mentioned above, under the greater integration between health and social care services that deliver better outcomes priority</p>
<p>We will focus as we have done in the past on managing increasing demand for services and actively working with the community and voluntary sector partners on improving social isolation in local areas with the expectation that more people could be helped without coming into the formal care system. This would be assisted by delivering the refreshed joint strategic needs assessment and ensuring that it becomes a widely used and effective planning tool for the wider health and care sector, and drives the refresh of the Kent Health and Wellbeing Strategy.</p>

## Sound decision making by knowledgeable, skilful and resilient workforce



### Planned key actions:

We provide frontline staff with the necessary support they need through appropriate training offer, effective supervision, clear personal action plans so that they remain confident decision makers and practitioners

We will enable staff to continually develop their skills and expertise as practitioners and be able to deal with complex cases by providing them with quality advice and guidance

We will take measures to further improve further our recruitment and retention activities especially those relating to qualified social work staff, team and service managers and other key staff, with the ultimate aim of ensuring a stable workforce. We will do so by building on our workforce engagement support - working with secondary schools, colleges and universities students and having a presence at regional recruitment events. Detailed plans on this by each division are available

We will develop bespoke support (such as a Transformation Engagement Team in adult social care) for staff and teams undergoing implementation of service transformation so that they are equipped in working in a changing or changed environment

We will maintain systems that support existing staff whose qualification and membership of professional bodies require them to meet certain annual or regular registration requirements. We will also make sure that staff comply with the standards of the new national accreditation scheme (Knowledge and Skills Statement)

We will ensure implementation of the Assessed and Supported Year in Employment (ASYE) framework for children and adult social care

In respect of succession planning, information and future resourcing requirements have been determined and we will take forward the appropriate development activity for the identified staff. This will be set out in individual development plans for 2016/17. This will be reflected in the directorate's organisational development priorities for future workforce development and it will be aligned to the vision for the future. It is expected that directors will undertake workforce planning activities within their divisions which will also shape the directorate's organisational development priorities going forwards. Further information about succession planning can be found in the directorate organisational development

priorities section of this business plan

As set out in the Commissioning Framework for Kent County Council, we are held to account for delivering KCC's strategic outcomes.

## **Our significant divisional priorities**

In the following section we set out the significant priorities of the five divisions that make up the Social Care, Health and Wellbeing directorate. These only give indication of the top priorities and further detailed information can be found in the respective divisional business plans. In addition, there are major transformation plans which provide extra information about the medium term objectives.

### **Specialist Children's Services**

#### **Continued development of best practice around Child Sexual Exploitation (CSE) and Missing Children at a strategic and operational level**

We will continue to develop best practice in respect of CSE and Missing Children at both a strategic and operational level by ensuring all staff members have access to appropriate learning, training and practice development. Workshops have been held to ensure staff are trained on use of the CSE Toolkit and Return Interviews.

District based Adolescent Risk Management Panels (ARMP) have been reinstated that will take place monthly and we will also be instigating area based quarterly review panels for Long term Missing. Membership of the ARMP will be made up from a range of services and District partners, including the Police. The information, data and intelligence from these meetings will be fed back to the Multi-Agency Child Sexual Exploitation Group (MASE) which is now the strategic Kent Safeguarding Children Board (KSCB) arm for CSE. The current KSCB CSE and Trafficking Group will now change to 'Emerging Vulnerabilities' dealing with missing children, trafficking, gangs and Prevent issues. Both groups have a detailed Action Plan.

CSE is a priority area for all agencies. To progress expertise and appropriate responses, Kent has set up a multi-agency CSE team referred to as 'CSET'. This team will lead on all aspects of CSE including 'Operation Willow', which raises public awareness of CSE issues. Their role will be to educate both professional partners/agencies and the public of CSE and associated risks, particularly for missing children. Data across all agencies will be analysed and used to inform understanding of the county profile for CSE and in planning preventative and targeted services for those children and young people affected.

#### **Embedding the outcomes of Transformation and ensure sustainability**

We will continue to embed the outcomes of transformation, focusing on sustainability of the service long term. Maintaining high levels of performance and ensuring best practice will allow for more proactive case management and improved outcomes for Children, Young People and their Families.

Working towards the continued reduction in average caseloads within the service will help staff to focus more on case progression and throughput as well as ensuring the appropriate number of cases are stepped down to Early Help using the existing threshold criteria.

We have introduced and supported staff in using the 'Signs of Safety' practice model. The model is designed to help conduct risk assessments and produce action plans for increasing safety, and to reduce risk and danger by identifying areas that need change while focusing on strengths, resources and networks that the family have.

### **Development of the Corporate Parenting Agenda**

Over the past 12 months we have worked on developing the Corporate Parenting Agenda, including the work of:

Reviewing Kent's Fostering Service and proposing a Service Specification that strengthens the role of central fostering teams and holds area fostering managers to account for meeting minimum national standards and exceeding them.

Contract monitoring the improvement partnership with Coram, and overseeing the resumption of management of Kent's Adoption Service from 23 January 2016. We will negotiate continued work with Coram as practice innovation and development partners, including keeping alive opportunities for Kent's future participation in a Regional Adoption Agency.

Drawing up an Action Plan and starting work on the direction and activity proposed by the Specialist Children's Services Participation Strategy. To make sure that Specialist Children's Services is supported in making decisions and developing services based on clear evidence and analysis of feedback from children and young people. An important step has been the recruitment and appointment of a participation co-ordinator.

In March this year the work will be continued by a permanent appointment to the Assistant Director – Corporate Parenting post. They will have a remit that spans Fostering, Adoption and Participation, but adds responsibility for Kent's Virtual School (VSK) and the Care Leavers Service. There will be a post restructure review of the Care Leavers service after one full year of operation, which will take forward recommendations from the Accommodation Strategy. A review of 16+ services and Pathway plans will be undertaken as well as looking at plans to improve NEET outcomes.

### **Recruitment and Retention of qualified social work staff and ongoing development**

We will work hard to improve the recruitment and retention of qualified social work staff including Team Managers employed by the service to develop a stable, permanent workforce, which will reduce the requirement for agency workers. This will ensure that consistent contact is maintained with Children, Young people and their Families and will improve staff morale.

We will also focus on staff development through appropriate programmes which will help ensure staff retention and increase in the proportion of social work staff that are permanent members of the workforce. Kent County Council has been invited to take part in a pilot developing the assessment process for the National Assessment Accreditation System for Child and Family social work prior to its implementation in 2016. Once implemented all relevant staff will be required to undertake the accreditation process over the next four years to 2020. This is designed to ensure that all staff meet the mandatory national standards for Children and Families Social Work. We will ensure all staff have the relevant skills, knowledge and experience and are aware of development areas to ensure we have a fit for purpose workforce.

We will take an active role in the South East Regional Partnership through the Memorandum of Co-operation to positively manage the agency workforce in terms of costs and quality and to consider broader collaborative workforce planning

## **Disabled Children, Adult Learning Disability and Mental Health**

### **Keep children and adults safe through robust and effective safeguarding**

We will continue to take active steps to safeguard and promote the welfare and wellbeing of children and adults and keep them safe from harm, abuse and neglect. We will undertake this task by working with all relevant partners as necessary. In doing so we will make sure that the voices of children and adults going through such difficult times are heard and provide an appropriate response.

We know that being able to carry out this function depends on well-trained, capable and confident staff; therefore we will make sure the right training, support and guidance are in place for staff and team managers.

In response to the implementation of the Care Act we have worked with the Kent and Medway Partnership Trust to put in place new local authority-led safeguarding management arrangements.

### **Work with partners to deliver an integrated service for adult Learning Disability and adult Mental Health primary and secondary care**

The services we deliver or arrange to be delivered on our behalf will be person centred, holistic and non-stigmatising. A key feature of this is that we will focus on promoting wellbeing, independence, recovery and promoting social inclusion. We want to ensure that the service is really accessible for people who need it: with no wrong door for entry to the service.

The Community Mental Health and Wellbeing service will form a key part of an integrated pathway across the voluntary sector, primary care mental health and social care and include public health initiatives to ensure there are appropriate, equitable, timely and cost effective interventions for vulnerable people in the community. The service will be based on recovery and social inclusion principles and designed to be accessible to anyone needing mental health and wellbeing support in Primary Care, and prevent people who may fall through the gaps between services.

We will continue to work in partnership with Kent and Medway Partnership Trust which has delegated authority from KCC to deliver an effective Approved Mental Health Service. This service leads on assessments under the Mental Health Act for people with acute mental health issues.

We will continue to work with health colleagues from Kent Community Health Foundation Trust and Kent and Medway Partnership Trust in the well-established integrated teams that support people with learning disability and mental health needs.

We will implement the Integrated Commissioning for Learning Disability with the establishment of the integrated commissioning team in KCC. This work will be overseen by a new Section 75 Integrated Commissioning Board for Learning Disability.

We also implement and embed key transformation phase 2 project such as Your Life Your Home, Kent Pathways Service and Shared Lives. The services will help us to provide the opportunity for some service users who previously resided in residential homes to move to alternative accommodation that allows them to lead more independent lives and support people to do more for themselves through 6-12 weeks intensive training either to learn new or re-learn skills after a change in their circumstances.

**Ensure that services for disabled children and adults with a learning disability form a lifespan pathway in order to ensure a smooth transition for young people from children's services to adults' services**

We will implement Lifespan Pathway Programme which aims to ensure the improvement of the coordination of care and support as people move from children's services to adults' services. The key element of this Programme is an integrated approach from 0-15, 16-25 and 26 plus services. This work will help us join up service delivery between social care, education and health. It will also help us to identify opportunities to jointly commission services with our health and education colleagues.

# Older People and Physical Disability

## **Improve Social Care Practice, Performance and Ensure that Key Business Processes are Efficient and Continually Evolve**

Our workforce will be trained, qualified, supported and clear about their roles and accountabilities this will improve the experience for the public in contact with the service. All staff will be clear about their accountabilities through personal action planning and individual performance management. Staff will receive regular supervision; reflect on their practice, development and performance management. Social care staff will be clear about how they deliver quality standards through systematic sharing of best practice, lessons learnt and developing their understanding of the inspection and regulatory framework for adult social care. Our workforce will have a clear understanding of what performance means and how it applies to service delivery and our managers will effectively use our Performance Framework to support understanding of performance trends and issues and take relevant actions.

## **Keeping Vulnerable Adults Safe, Promoting Independence and continue to Transform and modernise our Services**

The experience of the public in contact with the service will be improved with reduced time between initial contact and assessment of need and we will ensure promoting independence through Enablement and Occupational Therapy (KCC & NHS). We will support people to go home after a hospital admission and will help people to access voluntary sector support in the community instead of having to access long term social care support. We will continue to review Safeguarding arrangements to ensure the protection of vulnerable people and ensure that Safeguarding closures are timely.

## **Implement the Integrated Care and Support Pioneer Programme and Delivery Plan, Integrating Health and Social Care Commissioning and Service Delivery (Including Better Care Fund)**

We will work alongside our health and social care partners to implement the Integrated Care Pioneer Programme. The service we deliver to the public will be improved through integrated commissioning and service provision, avoiding duplication and ensuring clearer care and support planning from strategic to individual service user level.

# Strategic Commissioning

## **Commissioning Assessment**

The service aims to enhance the value that People Commissioning provides to the vulnerable children and adults of Kent, and to enable us to evidence our impact. We will be focusing on the work that we do and the way that we do it, specifically the way that we manage change and delivery aspects of our role.

As with the transformation programmes in both Adults and Children's Services, the assessment is the first stage and this took place during January and February 2016 to identify the areas that will be taken forward to a design phase between March - June 2016. Implementation activity will commence from July 2016 onwards, with any significant changes to the way Commissioning functions, or is structured will apply from this time onwards.

## **Business process review**

We will review and then recommend changes to business processes and systems processes to optimise efficient and effective working. This will incorporate the development and/or review of the current business processes which underpin the systems recording, and ensure we are maximising efficiencies in systems process and operational practice processes. Based on this evidence, we will clarify roles and responsibilities with the business processes and provide a clear documented understanding of responsibility and accountability. The outcome will be to define our requirements for Social Care Systems across the business areas in scope, including anticipating future requirements and potential systems.

## **Safeguarding**

We will work with other agencies in ensuring that the statutory role of the Kent and Medway Safeguarding Adults Board is fulfilled.

We will work with other Units in Commissioning to implement the Quality in Care Protocols and utilise intelligence from the Care Quality Commission to reduce the number of providers with a safeguarding or quality concern.

We will use all resources available to effectively meet the challenges presented to the Deprivation of Liberty Safeguards service following the Cheshire West Judgement.

# Public Health

## **To ensure effective transformation of the Adult and Children's Public Health Improvement programmes, in line with statutory guidance and within financial resource**

Develop a new approach needed to meet the challenges faced in Public Health, the changing needs of the population and the financial envelope of the Public Health grant.

We will drive an intelligence led approach to the innovative design and implementation of the Public Health improvement programmes, ensuring the most effective services are provided, aiming to reduce health inequalities.

## **To deliver the supporting transformation programme including the new health and inequalities strategy and District health improvement deal**

We will work with colleagues in the public sector and our partners, including Clinical Commissioning Groups and District Authorities, to finalise our strategic delivery plan for Public Health, ensuring Public Health outcomes are integral to the design and delivery of services.

## **Delivering the refresh of the Joint Strategic Needs Assessment (JSNA), ensuring that it becomes a widely used and effective planning tool for the wider health and care sector, supporting the refresh of the Kent Health and Wellbeing Strategy**

We will ensure that the JSNA is used to inform the whole public sector, and that it will support the development of services targeted to achieve maximum effect. We will support the work of the Better Care Fund to deliver the integration of health and social care and a whole systems approach to reducing the service demand.

## **Ensuring a coordinated and effective programme of Health Improvement Campaigns across the health and care sector, delivering consistent health improvement messages to the public. Raising awareness of key Public Health challenges both through proactive public relations and through a series of campaigns, with the aim of educating and supporting people to take more responsibility for their own health and wellbeing.**

In order to support people to take responsibility for their own health and wellbeing, and that of their family during 2016/17, we will take every opportunity to raise the level of understanding of what can damage peoples' health and wellbeing, and provide information on how they can make positive changes.

We will utilise media interest and focus during certain times of the year to proactively promote our key messages in our priority areas of alcohol, smoking, obesity and physical activity, and mental health.

Whilst maintaining targeted campaigns aimed at reducing harm in specific areas, e.g., smoking in pregnancy, reducing suicides, encouraging safer sexual practices, taking action on child obesity, improving provision for mental health services, including reduction in suicides, and encouraging uptake of NHS health checks.





C	Learning Disability Day Services – commissioning of external learning disability day care provision, completing a procurement process to have a model which is fit for purpose and to implement quality and cost controls of external market of over 90 providers	K	D			R							
C	Infrastructure Support to the Voluntary Sector – commissioning an infrastructure support to the voluntary sector that is fit for purpose, and aligns to the outcomes identified by the sector and supports the intentions in KCC Voluntary Sector Policy	K	D			R							
C	Commissioning of community based Wellbeing Services in line with the Strategic Vision of Adult Social Care	A	P			K	D						
C	Carers assessment and support service		A			P/K		D				R	
C	Healthwatch Kent Service			R		D	A	P/K	D			R	
C	Carers Short breaks Service			A		P		K	D				R
SR	Internal Day Care							D		R			
SR	Short breaks		K	D		R							
SR	Lifespan Integrated Pathway			D		R							
SR	KCC Services for Autistic Adults and Children	A	P	D		R							
SR	Vulnerable Adults Pathway	P	D	R									
SR	Transformation Programme Phase 3	A	P/K	D		R							
C	Integrated Community Equipment Services Contract – annual review			R					R				R
C	Technology Enabled Care Services contract – annual review			R					R				R
SR/C	Commissioning of nurse led outcome based homecare in line with the Strategic Vision of Adult Social Care	A/K	P	P		K	D	D					



	short breaks respite service to achieve provision of short break from caring for parents of disabled children because current contract due to expire 30 June 2016												
C	Commissioning of specialist term time & residential placements and Day care providers to replace spot purchasing arrangements		A	A	A	P	PK	D	D				
C	Commissioning of mental health services as contracts due to expire March 2017	AD	D	D	DK	D							
SR	Care Leavers Pathway	D	D	D	R								
SR	Supported Accommodation and Floating	P	D	D	D	D	D	R					
SR	Supported Lodgings SAFE	D	R										
SR	Care Leavers Social Housing	D	D	R									
SR	16/17 Homeless Protocol	D	D	R									
<b>Public Health</b>													
SR	Staying Well Health Visiting Service	P	P/K	D		R	A	P	D		R	A	P
SR	Starting Well Family Nurse Partnership (FNP)	P	P/K	D		R	A	P	D		R	A	P
SR	Starting Well School Public Health Service	P	P/K	D		R	A	P	D		R	A	P
C	Starting Well Young People's Substance Misuse Service	D	A	P	D	R	D	A	R	P	D		R
SR	Starting Well Infant Feeding Service	R	A	P	D								
C	Community mental health and wellbeing service	D			R	D			R	D			R
C	Kent Sheds	D		R/A	P/D	D	D	D	D	D	D	D	D
C	Healthy lifestyle services – healthy weight, health trainers, physical activity services, other community services, Healthy Living	P	D/K	D	R	R	R	A	P	D	R	A	P

	Centres												
C/SR	Tier 3 - Healthy weight	D	D	D	D	D	D	D	D	D	D	D	D
SR	Other KCC Public health investments - integrated domestic abuse services, Homelessness services, learning disabilities etc.	D	D	D	D	D	D	D	D	D	D	D	D
SR	Befriending service	R/A	R/A	P	P	D	D	D	D	D	D	D	D
C	Postural stability	D	D	R/A	R/A	D	D	D	D	D	D	D	D
C	Winter Warmth	D	D	R/A									
C	Re-commission East Kent Adult Drug and Alcohol Service to support and enable residents	A	P/K	D	D	D	R	R	R	R/A	R/P	R/D	R
SR	Co-design and implement a new operating model for the West Kent Drug and Alcohol Service	R	D	D	R	R/A	R/P	R/D	R	R/A	R/P	R/D	R
C	Commissioning Public Health Services (including NHS Health Checks and Stop Smoking Services) from primary care (GP practices and pharmacies). Existing contracts due to end in September 2016.	P	D/K	D	R	R	R	A	P	D	R	A	P
C	Review new community sexual health services contracts implemented in 2015 and consider whether to extend existing contracts or re-procure services from April 2017.Existing contracts due to finish in March 2017.	A	P/K	D	D	D	R	R	R	R/A	R/P	R/D	R

**\*Categories**

Commissioning (C)  
Service Redesign (SR)

**Each activity is mapped by against:**

Analyse (A)  
Plan (P)  
Do (D)  
Review (R)  
Key Decision Point (K)

## Our in-house and external service providers

Service*	Internal or external	If external:			Next Review stage**
		Contract value (£)	Provider name	Contract end date	
<b>Adult Services</b>					
<b>Nursing and Residential Care:</b>					
Learning Disability (aged 18+)	External	75,224.4	Various	None	1/4/2016
Mental Health (aged 18+)	External	7,047.5	Various	None	1/4/2016
Older People (aged 65+) Nursing	External	21,385.2	Various	31/3/2020	1/4/2016
Older People (aged 65+) Residential	External	26,121.4	Various	31/3/2020	1/4/2016
Older People (aged 65+) Residential	Internal	14,467.1	KCC Residential Service		
Physical Disability (aged 18-64)	External	11,849.7	Various	None	1/4/2016
<b>Supported Living:</b>					
Learning Disability (aged 18+)	External	31,544.2	Various	30/9/2017	1/4/2016
Learning Disability (aged 18+)	In-house	2,154.7	Independent Living Scheme	None	
Learning Disability (aged 18+) Shared Lives Scheme	In-house	3,330.9	Shared Lives Scheme	None	1/4/2016
Older People (aged 65+)	External	400.7	Various	30/9/2017	1/4/2016
Physical Disability (aged 18-64)/Mental Health (aged 18+)	External	3,879.6	Various	30/9/2017	1/4/2016
Learning Disability Day Services	External	£5,743, 000 (annual)	Various	None	March 2016
Physical Disability Day Services	External	£676, 750 (annual)	Various	None	March 2016
Day Care Transport	External	£1,500,000	Various	None	April 2016
Learning Disability Day Services	External	£76,031 (annual)	Wood n Ware	March 2017	Sept 2016

		£230,801 (total)			
Learning Disability Day Services	External	£90,000 (annual) £270,000 (total)	Mersham Street Café	January 2017	None
Learning Disability Day Services	External	£34,695 (annual) £106,568 (total)	Clay and COlour Works	March 2017	Sept 2016
Learning Disability Day Services	External	£72,600 (annual)	Yeomans Groundworks	May 2016	None
Learning Disability Day Services	External	£241,852 (annual)	Princess Christian Farm (Hadlow College)	September 2034	July 2016
Business Support to Voluntary Sector	External	£105,000	Social Enterprise Kent	March 2016	None
Valuing People Now	External	£140,000 (annual) £420,000 (total)	East Kent Mencap	March 2017	April 2016
Employment support for adults with a disability	Internal	£209,000	Kent Supported Employment	March 2017	October 2016
Carers assessment and support	External	£3.9M	Carers First East Kent Carers Consortium Involve	March 2018	July 2016
Healthwatch Kent	External	£667,000	Engaging Kent CIC	March 2017 +1	Sept 2016
Carers Short Breaks	External	£1.3m contract part funded by CCGs £1.2m annual grant	Crossroads	March 2017 + 1	October 2016
Kent Advocacy	External	£1.3m	SEAP	March 2019 + 2	September 2016

LD Advocacy Integrated Community Equipment Service  Technology Enabled Care Services  Just Checking Home Care Contracts 2014  Home Care Contracts 2002 & Spot Contracts	External	£298K	Advocacy for All	March 2017	July 2016	
	External	circa £55m (for KCC and NHS CCGs)	Nottingham Rehab Ltd (trading as NRS Healthcare)	30/11/2020	1/12/16	
	External	circa £5.5m	Invicta Telecare Ltd (trading as Centra Pulse and Connect)	30/11/2020	1/2/16	
	External	£69K	Just Checking	16/1/2018	1/2/17	
	External	circa £25M	Various (19 providers)	June 2017	March 2016	
	External	circa £5M	Various (approx. 50 providers)	Ongoing; spot contract	March 2016	
	<b>Specialist Children's Services</b>					
	Independent Adoption & Special Guardianship Order Support Services	External	£1,505,100	Barnardos	30/09/2018	September 2016
	Safer Stronger Families	External	£2,135,732	Core Assets	31/10/2016	January 2016
Representation, Rights & Advocacy (RRA)	External	£845,400	The Young Life's Foundation	31/03/2018	October 2016	
Independent Fostering Framework	External	£15,000,000	33 Framework Providers	02/06/2017	March 2016	
Independent Children's Homes	External	Various (spot purchasing arrangements)	Various (spot purchasing arrangements)	Spot purchasing (no end date)	(no end date)	
Independent Semi-Independent Accommodation	External	Various (spot purchasing arrangements)	Various (spot purchasing arrangements)	Spot purchasing until new accommodation		

				services are in place	
Targeted level Disabled Children's Short Break Fun Club Service	External	£597,672.00	Imago	30/06/2016	February 2016
Specialist level Disabled Children's Short Break School holiday play schemes & Term Time Clubs	External	£584,870.00	Various	31/03/2018	February 2016
Specialist level Disabled Children's Short Break School holiday play schemes & Term Time Clubs	External	£584,870.00	Various	31/03/2018	February 2016
Targeted level Disabled Children's Short Break School holiday play schemes & Term Time Clubs	External	£180,000.00	Various	31/03/2018	February 2016
Disabled Children's Family Days (Sensory & PD)	External	£60,000.00	Core Assets	31/03/2017	February 2016
Risk Assessments and Harmful Sexual Behaviours services	External	£504,504.00	tbc	31/03/2019	February 2016
Direct Payments Support Service 0-25	External	£975,000.00	CxK	31/09/2016	February 2016
Young Healthy Minds	External	£4,737,872.20	Action for Children	30/03/2017	February 2016
Post Sexual Abuse Services	External	£777,985.00	Sussex Partnership NHS Foundation Trust	31/03/2017	February 2016
Community CAMHS contribution	External	£4,500,000.00	KCC-IASK	31/03/2017	February 2016
Information and Advice Service Kent (I-ASK)	Internal	£90,000.00	Various	n/a	February 2016
Disabled Children Day care agencies - spot purchased	External	n/a	Various	n/a	February 2016
Disabled Children's Term time & Residential placements - spot purchased	External	n/a	Various	n/a	February 2016

Disabled Children's overnight short breaks placements - spot purchased	External	n/a			
Supported Accommodation in a Family environment	External	£671,952.00	Catch22	March 2018	
Dover Housing Support Services	External	£76,583.23	Porchlight	31/03/2016	tbc
New Town Street	External	£694,700.33	Porchlight	31/03/2016	tbc
New Wharf	External	£754,324.68	Porchlight	31/03/2016	tbc
Swale Young Persons at Risk	External	£312,970.35	Porchlight	31/03/2016	tbc
The Grove	External	£526,358.27	Depaul Trust	31/03/2016	tbc
Ashford Young Persons Service	External	£1,684,122.00	Home Group Ltd	31/03/2016	tbc
Dover Young Persons Service	External	£768,853.20	Home Group Ltd	31/03/2016	tbc
Trinity Foyer	External	£3,164,745.93	Home Group Ltd	31/03/2016	tbc
Maidstone Housing Supported Service	External	£68,073.97	Sanctuary Housing Association	31/03/2016	tbc
Ryder House	External	£1,940,164.26	West Kent YMCA	31/03/2016	tbc
Shepway Young Persons at Risk	External	£253,458.07	Lookahead Care and Support	31/03/2016	tbc
Bridge House	External	£1,285,150.18	Centra	31/03/2016	tbc
Overton House	External	£144,273.10	Centra	31/03/2016	tbc
Porchlight Young Person Hostel	External	£2,087,738.68	Porchlight	31/03/2016	tbc
YMCA Thames Gateway	External	£1,118,914.83	YMCA Thames Gateway	31/03/2016	tbc
Church View	External	£81,135.07	YMCA Thames Gateway	31/03/2016	tbc
Calverley Hill	External	£362,281.23	Chapter 1	31/03/2016	tbc
Wincheap	External	£596,674.50	Cantercare	31/03/2016	tbc
Old Colonial	External	£245,601.13	Family Mosaic	31/03/2016	tbc

Daisies	External	£456,116.38	Home Group Ltd	31/03/2016	tbc
Dartford LIFE	External	£372,962.88	LIFE Housing	31/03/2016	tbc
Maidstone Teenage Parent Service	External	£328,203.70	Golding Homes	31/03/2016	tbc
Young People Floating Support East Kent	External	£469,898.72	Sanctuary Housing Association	30/09/2016	tbc
Young People Floating Support West Kent	External	£364,094.94	Sanctuary Housing Association	30/09/2016	tbc
<b>Public Health</b>					
Health Visiting and Family Nurse Partnership[	External	£22,604,400	KCHFT	30-09-16	Currently
School Public Health Service (All exc. Swale)	External	£4,852,760	KCHFT	30-09-16	Currently
School Public Health Service (Swale)	External	£828,758	MFT	30-09-16	Currently
Young people's substance misuse service	External	£3,606,932	Addaction	31/03/17	Currently
Infant Feeding Service	External	£830,354	PS Breastfeeding	30-09-18	Currently
Early Help and Prevention	Internal	£1,548,500	Early Help	TBC	Currently
Canterbury and District Early Years	External	£150,000	Canterbury District Early Years Project	30-09-16	Currently
Community Mental Health and Wellbeing Service	External	£19.925, 000	Shaw Trust Porchlight	31-03-21	Annual review and prior to contract end
Kent Sheds	External	£50,000	TBC	31-03-2017	Currently

Mental Wellbeing Evaluation Postural Stability		( including grants for Sheds)			
			The Mc pin Foundation		
	External	£100,045	KCHFT	31 <sup>st</sup> March 2017	Currently
		Contract 1 - £80,564 Contract 2 - £16,100	Involve	Contract 1 – 31 <sup>st</sup> March 2017 Contract 2 1 <sup>st</sup> Aug 2016	Currently
		Contract 1 - £71,022 Contract 2 - £21,600	Good Neighbour project	Contract 1 - 31 <sup>st</sup> March 2017 Contract 2 1 <sup>st</sup> Aug 2016	Currently
		£44, 000	Access to Resources	31 <sup>st</sup> March 2017	currently

## Our budget and staffing resource

The summary of the budget allocated to our Directorate is shown below:

2015/16 Revised Budget £000s	Division	Staffing £000s	Non-staffing £000s	Gross Expenditure £000s	Internal Income £000s	External Income £000s	Grants £000s	Net Cost £000s
3,262.7	Strategic Management and Directorate Budgets <b>(Andrew Ireland)</b>	1,016.3	13,822.5	14,838.8	0.0	-160.0	-272.9	14,405.9
32,449.3	Commissioning <b>(Mark Lobban)</b>	7,585.4	27,072.6	34,658.0	-2,5152.5	-2,064.9	-2,0804.4	28,360.2
175,244.2	Disabled Children and Adults Learning Disability and Mental Health <b>(Penny Southern)</b>	30,222.5	162,999.0	193,221.5	0.0	-12,929.5	-2,058.4	178,233.6
141,366.7	Older People and Physical Disability <b>(Anne Tidmarsh)</b>	41,307.8	203,380.8	244,688.6	-862.8	-91,332.8	-8,171.1	144,321.8
0.0	Public Health <b>(Andrew Scott-Clark)</b>	3,833.5	73,365.4	77,198.9	-50.0	-5,982.8	-71,166.1	0.0
110,429.4	Specialist Children's Services <b>(Philip Segurola)</b>	59,152.0	113,989.2	173,141.2	-15,439.1	-2,113.0	-49,559.0	106,030.1
483,092.4	<b>Total</b>	<b>150,230.9</b>	<b>610,169.1</b>	<b>760,400.0</b>	<b>-19,450.5</b>	<b>-116,564.0</b>	<b>-133,308.0</b>	<b>491,077.5</b>

Note: The information in the above table is subject to further changes to reflect the allocation of centrally held pressures and savings such as the performance reward pressure, national insurance pressure, and publicity saving.

The summary of the staffing resources in our Directorate is shown below

Division	FTE	Grade Band	FTE	%
Strategic Management Commissioning	4.4	KR6 and below	1444	41
	161.5	KR7 - 9	1204.3	34
Disabled Children and Adults Learning Disability and Mental Health	*1002.1	KR10 - 13	821.1	23
	1246	KR14 - 15	52	1
Older People and Physical Disability Public Health	65.9	KR16 and above	11.8	0.3
Specialist Children's Services	**1053.4	<b>Total</b>	<b>3533.2</b>	<b>100</b>
<b>Total</b>	<b>3533.2</b>			

\*Includes Disabled Children Services since April 2015

\*\* Excludes Disabled Children Services since April 2015

## Our property and ICT infrastructure requirements

Adult social care will commence a major programme to renew the approach to social care practice via the implementation of the 'adult social care vision'. This will mark the beginning of phase 3 of the transformation programme. This is in the light of directorate responding to KCC's policy objective of become a commissioning authority.

At the same time there is substantial work in hand to integrate the commissioning and provision of health and social care. As mentioned above under the health and social care integration priority, Kent is an Integrated Care Pioneer site and this as well as the NHS Five Year Forward View, NHS England has initiated a programme of technology projects called Personalised Health and Care 2020 will have some influence on our ICT infrastructure requirements going forward.

We operate complex and inter-related needs and financial IT systems which have important interface with other corporate systems. Therefore our system requirements must take this into account as well as offering us the flexibility to be able to move the integration agenda forward, in particular working with Clinical Commissioning Groups (CCGs).

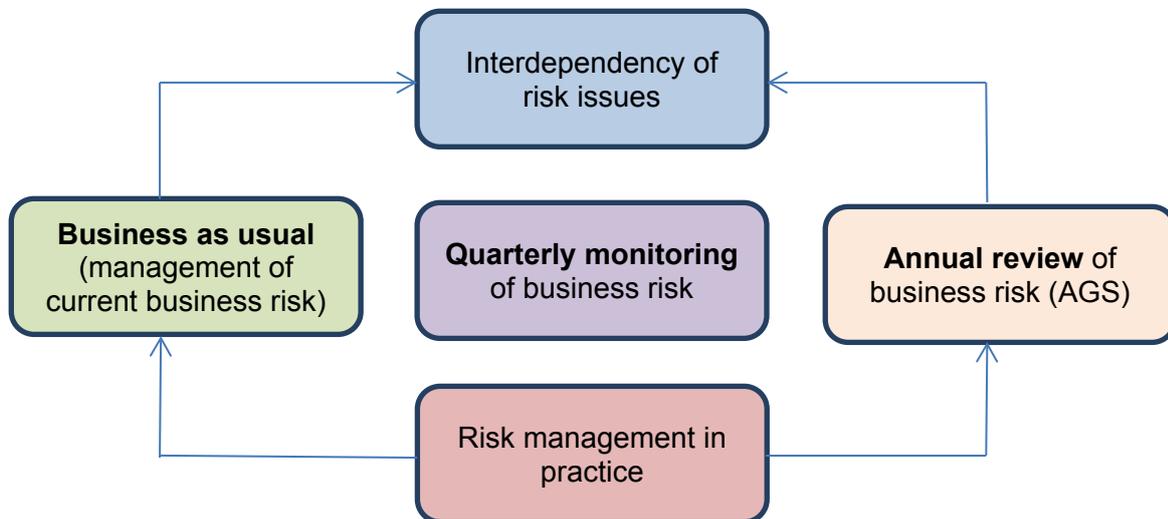
We need to have in place a system that helps us to meet the national policy intention on integration by 2020 but that is also capable of meeting the requirements associated with the implementation of Phase 2 of the Care Act by 2020.

We will take the chance and work with Agilisys to understand what additional opportunities there may be for providing citizens with online access to services and other similar facilities.

We will therefore start work with the Corporate Strategic Infrastructure division to define the ICT requirements for adult social care by September 2016. This system review will inform the development of clear pathways as part of work supporting the 'adult social care vision'. This is regarded as a necessary major development to the client-based system which will operate in adult social care.

## Our key Directorate risks

### Risk Management in the Social Care Health and Wellbeing directorate



Proactive and effective risk management is vital to ensuring we can achieve the challenging priorities and targets set out in this business plan, and is driven by the county council's strategic business plan priorities as set out in KCC's Strategic Statement.

Our risk management process informs the business planning and performance management processes, budget and resource allocation, to ensure risk management supports the delivery of our organisational priorities and objectives. The essential factor is that risk management is a function we carry out as part of the 'business as usual' as illustrated above.

We maintain a **Directorate Risk Register** which is regularly monitored and revised to reflect action taken to mitigate the risk occurring or increasing. As risks de-escalate they are removed from the register and where necessary, new emerging risks are added.

The directorate takes a mature approach to risk, involving an appropriate balancing of risk and reward to ensure that threats to achievement of objectives are appropriately managed, while opportunities are enhanced or exploited to achieve the required transformational outcomes. The Annual Governance Statement (AGS) which is a review of how we have managed risks reflecting on action during the course of the year form part of the risk management process.

The Directorate continues to build on its business continuity preparedness arrangements working with the changes presented by national policy reforms and the local transformation programmes.

Key Topic	Key areas of risk
Financial Pressures	Public Sector financial pressures that impact on partner organisations and private sector providers
Demand for services	Managing the increasing demand for Social Care services.
Unaccompanied Asylum seeking children	Managing the impact of a significant increase in the number of Unaccompanied Asylum Seeker Children and the lack of a national dispersal scheme.
Safeguarding	Safeguarding – protecting vulnerable children and adults and meeting requirements of the PREVENT duty placed on Local Authorities, child sexual exploitation, implications of the Mental Capacity Act and Deprivation of Liberty Assessments
Transformation	Ensuring that benefits are delivered from the transformation of Children’s and Adult’s Social Care Services Maintaining performance and quality of services throughout the transformative period.
Social care market	Managing and working with the Social Care Market, achieving “Best Value” and the impact of the National Living Wage and to ensure greater stability of the workforce and the Market.
External inspection	Effective management and preparedness in order to minimise any adverse impact associated with OFSTED inspection of any our services.
Health and Social Care Integration	Health and social care integration, and the delivery of the joint KCC/Clinical Commissioning Group health and social care commissioning plan, ‘Pioneer’ programme and the Better Care Fund.
Evolving market	Ensuring the implementations of new models of health improvement, in an evolving market place and within resource constraints
Health inequalities	Potential failure in continuing to improve the health of Kent population, and reducing health inequalities
ICT Systems	Ensuring that ICT systems are “fit for purpose” and utilised to deliver services effectively and act as a key enabler of change
Business disruption	The management/governance and security of information and how the directorate operates in any business disruption

It is important to point out that several of the above risks are captured in the Corporate Risk Register due to their potential implications for the county council as a whole: the management of adult social care demand and the demand for specialist children’s services, in particular those associated with Unaccompanied Asylum Seeker Children; the impact of the changes being introduced as part of the broader health and social care integration (transformation and sustainability plans); the nature of the stability of the social care market and the aligned workforce implications; as well as the potential risks relating to data protection breaches and the impact of a business disruption or emergency incident. Additional information regarding these risks and the mitigations we have put in place can be found in the Directorate and Corporate Risk Register.

## Our key performance indicators and targets

We need to know that we are providing our services in the right way and to help us do this we have a number of key performance measures and milestones that reflect what we set out to achieve. These Key Performance Indicators (KPIs) support the delivery of our key priorities set out in this business plan.

We routinely use our monthly Performance Dashboard to track how well we are doing; identifying quickly any areas where we may need to improve or take corrective action. Our overall performance in delivering against our directorate priorities and how they contribute to the achievement of KCC's strategic outcomes will be measured by these indicators, which are published in our Quarterly Performance Report to Members. In addition, we will be able to use activity information from this business plan to inform the Strategic Statement annual report.

### Our Quarterly Performance Report

Performance indicators provide valuable information and are defined very carefully to balance the need to be proportionate in collecting information, with the level of detail that is required in order to be operationally useful. Our key performance indicators will take account of changes to the data that government requires local authorities to submit as well as the level of change and transformation within the Council that is required to respond to current challenges.

Although a small set of performance indicators will be reported to Cabinet on a quarterly basis in our Quarterly Performance Report, each of our services within the five divisions monitor a bigger set of performance indicators to ensure that the services we manage are performing as well as possible. Services and divisions usually monitor these indicators, as set out in their business plans, in monthly meetings.

Below is a list that sets the targets and activity measures we will use to measure our performance in 2016-17. It provides a flavour of the areas we monitor to assess the contribution of our services. The targets centre on the objectives linked to our vision and to particular themes within our strategic framework, and are set out in the following tables.

### Some of our targets at a glance

Key Performance Indicators				
Ref	Indicator Description	2015-16 Actual	2016-17 Floor	2016-17 Target
SCS01	Children in care placement stability: same placement for last 2 years		65%	70%
SCS02	Percentage of current CIC Foster Care Placements that are either KCC Foster Care or Relatives and Friends		75%	85%

SCS03	Average number of days between BLA and moving in with adoptive family (for children adopted)		650 days	426 days
SCS04	Percentage of case holding posts filled by KCC Permanent qualified social workers		75%	85%
SCS05	Percentage of children becoming child protection for a second or subsequent time		<10% >15	<15 >20
SCS06	Percentage of online case file audits completed that were graded good or outstanding		40%	60%
PH/AH 01	Number of the eligible population aged 40-74 years old receiving an NHS Health Check	38,400		tbc
PH/AH 02	Participation of Year R (4-5 year old) pupils in the National Child Measurement Programme	95%	85%	90%
PH/AH 03	Participation of Year 6 (10-11 year old) pupils in the National Child Measurement Programme	95%	85%	90%
PH/AH 004	Percentage of people quitting at 4 weeks, having set a quit date with smoking cessation services	53%	47%	52%
PH/AH 05	Positivity rate of Chlamydia detection per 100,000 young adults aged 15-24 years old	1,025	1,840	2,300
PH/AH 06	Percentage of clients accessing community sexual health services offered an appointment to be seen within 48 hours	100%	81%	90%
PH/AH 07	Number of new clients accessing the Health Trainer service being from the 2 most deprived quintiles	55%	56%	62%
PH/AH	Percentage of young people exiting specialist substance misuse services with a planned exit	94%	88%	98%
PH/AH 08	Successful completion of drug treatment – opiate users	9%	8%	9%
PH/AH 09	Number of mothers receiving an antenatal visit/contact with the Health Visiting Service*	tbc	63%	70%
PH/AH 10	Percentage of new birth visits conducted by the Health Visitor Service within 14 days of Birth*	tbc	81%	90%
ASC01	Percentage of contacts resolved at first point of contact (%)	tbc	tbc	tbc
ASC02	Number of clients receiving a Telecare service (snapshot)	tbc	tbc	tbc
ASC03	Number of new clients referred to an enablement service (quarterly)	tbc	tbc	tbc
ASC04	Number of admissions to permanent residential or nursing care for older people (rolling year)	tbc	tbc	tbc
ASC05	Number of promoting independence reviews completed (quarterly)	tbc	tbc	tbc
ASC06	Percentage of clients still independent after enablement	tbc	tbc	tbc

## Activity Indicators – Thresholds represent range of the activity expected

Ref	Indicator Description	Threshold	Q1	Q2	Q3	Q4	2015-16 Expected
	tbc	tbc	tbc	tbc	tbc	tbc	tbc
	tbc	tbc	tbc	tbc	tbc	tbc	tbc
	tbc	tbc	tbc	tbc	tbc	tbc	tbc
	tbc	tbc	tbc	tbc	tbc	tbc	tbc
	tbc	tbc	tbc	tbc	tbc	tbc	tbc
	tbc	tbc	tbc	tbc	tbc	tbc	tbc
	tbc	tbc	tbc	tbc	tbc	tbc	tbc
	tbc	tbc	tbc	tbc	tbc	tbc	tbc

Current performance against our Key Performance Indicators can be viewed in the Quarterly Performance Report and Directorate Dashboard

## Our Directorate organisational development priorities

KCC has a number of organisational development frameworks in place and these are designed to set out how we will deliver our statutory and mandatory training for staff in order to ensure that we deliver essential developmental programmes consistently across the Council. There are four frameworks which have been developed and reviewed with managers and staff – Health & Safety, Social Care, Leadership and Management and Staff Development.

A key focus for us this year is succession planning development actions. We will therefore take forward the appropriate development activity for key identified staff. This will be set out in individual development plans for 2016/17. This will be reflected in the directorate's organisational development priorities for future workforce development and it will be aligned to the vision for the future for all our services. Directors will undertake workforce planning activities within their divisions which will also shape the directorate's organisational development priorities going forwards.

The following priority areas have been agreed by the Directorate Organisational Development Group as key areas which we will take forward during this financial year:

### 1. **Development of workforce in relation to:**

- Professional practice improvement and development
- Implementation of national accreditation scheme for children's social workers
- Scope and plan for potential accreditation scheme for adults social workers

### 2. **Development of Principal Social Worker role for Adults arising from:**

- Future vision and reclaiming of social work
- Linked to 1. above

### 3. **Workforce planning in relation to**

- Senior level succession planning and talent management
- Service level analysis currently being undertaken in OPPD and DCLDMH
- Assessment and design activity being undertaken in Commissioning
- Identifying gaps in critical roles and resourcing plans across the directorate
- Wider workforce and integrated workforce

### 4. **Retention of staff**

- Career progression pathways
- Apprenticeships
- OU and "growing our own qualified staff"
- Step up to Social Work/Frontline – Childrens
- Think Ahead – Mental Health
- Connections with universities

### 5. **Social Work Health Check – Minimum Standards for Employers**

- Complete and evaluate current activity in Childrens
- Scope and plan for Adults