

Kent Adult Social Services

Business Planning Outturn Monitoring Report 2008/ 2009

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Business Plan Performance 2008-9

Directorate Level

Managing Directors' Statement

Kent Adult Social Services support vulnerable adults including :

- Older people
- People with physical or sensory impairments
- People with a learning disability
- People with mental health problems.

The overall purpose of Adult Social Services is:

To help the people of Kent live independent and fulfilled lives safely in their local communities.

The core business objectives for the outturn period 2008/2009 were:

- Development of community based preventative services
- Continued reduction in the rate of adults being placed in residential and nursing care
- Increase in the number of people using direct payments
- Reduction in the number of delayed discharges from hospital

These core objectives were achieved using good practice guidelines and service development. Examples are shown below:

Development of community based preventative services

Across Kent, the community based services are fundamental to supporting people within their own homes and in giving them choice and control over the services they support.

In partnership with Eastern Kent and Coastal PCT, the Directorate was successful in bidding for the £1.5 million Partnerships for Older People Project. Out of this has sprung the INVOKE (Independence through the Voluntary action of Kent Elders) project. There are three significant strands to INVOKE; the Care Navigator service, Community Information and Liaison assistants and the Community Matron Support workers. The project is designed to give older people greater independence, enhance self-management through choice and control and reduce hospital admissions. Feedback and initial research suggests that the project is a success. East Kent is about to extend the project with six additional Care Navigators to work as brokers for self directed support.

East Kent was selected as one of the DH Demonstrator Sites for Urgent Care. Again this is in full partnership with the Health Service. The aim of the programme is to treat people closer to home, to prevent hospital and long term care admissions and to provide better, integrated care in a person's own home. An extensive rollout programme of Intermediate Care for East Kent is part of the project, aimed at, providing early discharge, assessment and rehabilitation in a non acute hospital site or Intermediate Care Unit but mostly in the person's own home. Intermediate Care was started many years ago in Shepway and

evaluated by the Department of Health, where it was found to have positive outcomes and was classified as an exemplar site. This project is now operational throughout East Kent and is fully integrated between health and social care.

The Brighter Future Group (BFG) has been operating across five Districts in Kent since 2006 and is an excellent example of innovative preventative work. It is a partnership between Kent County Council, PCT's and voluntary and community organisations aimed at helping older people remain independent. It was initially funded with £1.38m from HM Treasury (Invest to Save programme). The programme is delivered via a range of volunteer services designed to reduce avoidable admissions into hospital or long-term care. As well as keeping older people healthy, promoting social inclusion and independence it produced other benefits to the volunteers and their communities. It has proved to be a success and although Treasury funding has now ceased, all projects continue to operate with other Districts adopting some BFG type services, some part-funded through the Social Care Reform Grant.

A key driver for drawing together and co-ordinating preventative services across the board has been the development of the Policy Framework for Later Life. Originally Kent Adult Social Services took the lead in developing this, but it has now been adopted across all of Kent County Council and is underpinned by the Older People's Strategic Network and the Older People's Champions Group. The Policy Framework has been written with the public - older people groups have been extensively involved. The Kent Partnership has now adopted the Policy Framework, and an underpinning action plan is being finalised. The action plan draws together a range of initiatives focusing on areas which older people feel will improve their quality of life and wellbeing.

The Council has a wide range of website pages to meet the needs of the different needs of the population, including interactive pages and video scripts for deaf people. Kent TV is an on line TV channel which is opening up new avenues of bringing information to the public and involving the public in the development of services through feedback. An example would be the use of Kent TV to publicise work around equalities groups and societies.

Kent Adult Social Services is working with health partners to expand the Map of Medicine as a web-based directory for dementia services currently accessible to GPs only, to become available for all the agencies.

Continued reduction in the rate of adults being placed in residential and nursing care

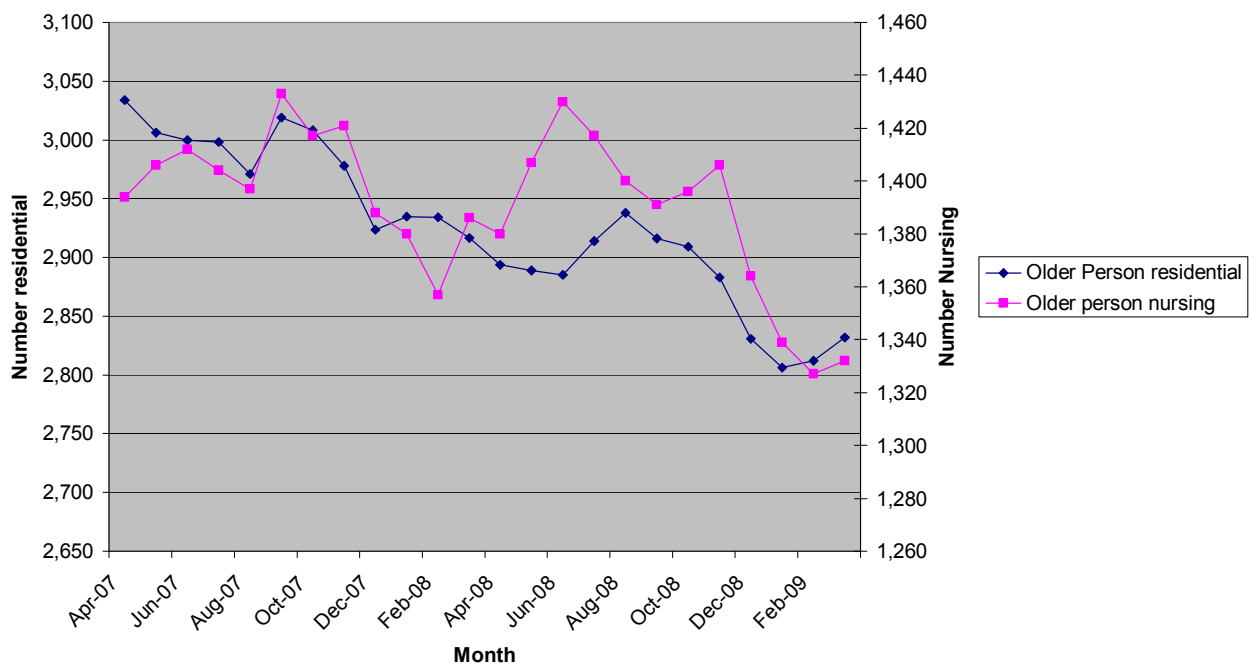
Our intermediate/recuperative care services are geared to help achieve the objectives of preventing avoidable hospital admission, facilitating safe early discharge from hospitals and maximising people’s ability to regain their independence. Kent Adult Social Services has and continues to invest in recuperative care services in care homes that it manages. Additionally, we purchase some recuperative care services from the private and Independent sector.

The Directorate also invests in non-residential intermediate care services. The in-house ‘Active Care’ provision, managed by Kent Home Care Service, is a good example of a non-residential care service that provides outcome based time-limited intensive support to people in their own homes. From July, an enablement service will be available for the independent sector as part of a strategic approach to offer people more choice.

In addition, there are a number of intermediate/rapid response services jointly commissioned with the NHS West Kent and NHS Eastern and Coastal Kent. The investment profile in this area includes Integrated Care Centre provision of Gravesham Place, West view and at West Brook House. These services have contributed to the reduction of delayed transfers of care reported across the economy. The Health Overview and Scrutiny Committee, at its meeting on 17 October 2008, formally welcomed the progress on the delayed transfers of care; a product of the partnership working between Kent Adult Social Services and the NHS in Kent.

Kent Adult Social Services is building on this by developing a discrete Enablement Service as part of its Self-Directed Support transformation. The purpose of this service will be to work with individuals by helping to restore their confidence, promote independence and minimise the need for long term ongoing community support and long-term residential care.

Older people in residential and nursing care

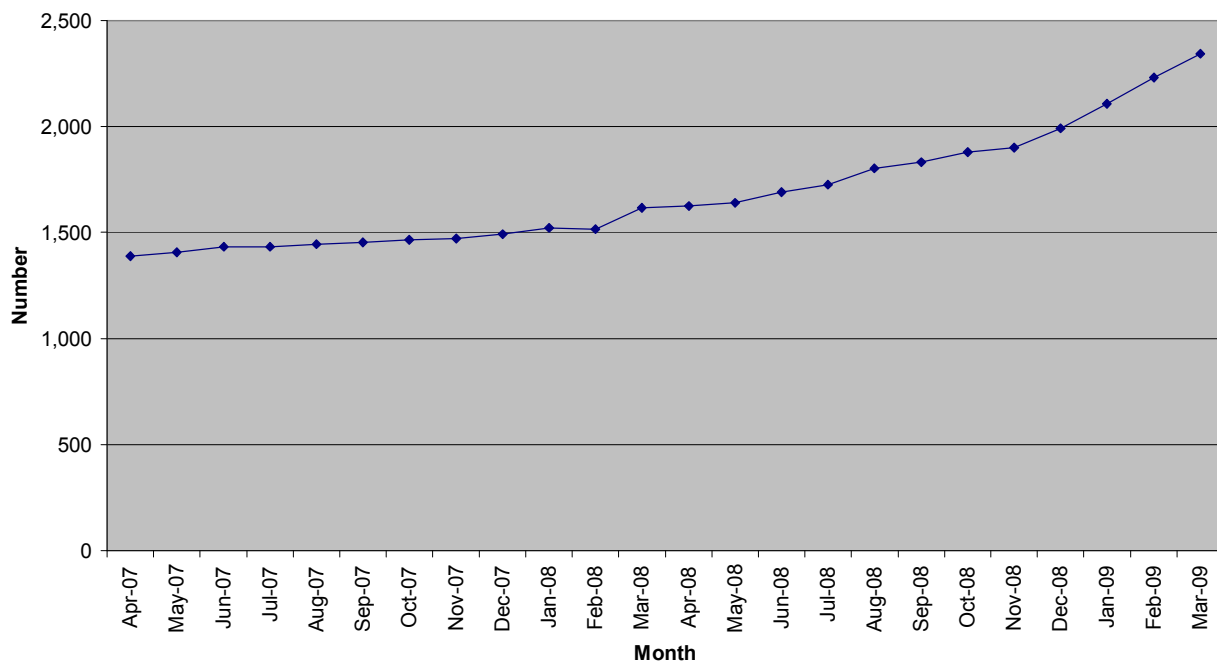


Increase in the number of people using direct payments

A key feature of enabling people to continue to live independently is to ensure they have choice and control over the support they need. The development of Direct Payments has made a significant contribution to this. In March 2009, 2342 people were in receipt of Direct Payments and this continues to rise. Over 740 of these are for older people. Whereas in 2002 there were only 9 older people using Direct Payments. A range of innovative actions has supported the increasing take up of Direct Payments, including the Kent Card. This is now being used by 831 people (figures as at end March 2009). Information on Direct Payments is available in multiple formats and languages and as MP3 sound files. Specialist Support is given to those people who are considering employing personal assistants and the feedback from those who use Direct Payments is positive. Through the East Kent Coastal PCT further development around the Kent Card is taking place due to the successful bid to personalise health budgets using the Kent card.

There has been a steady increase in the numbers of users accessing and using direct payments over the last four years. The drive to roll out direct payments across all service areas in Kent. KASS has worked with Users and Carers to expand and demonstrate the benefits for users and carers using direct payments. All new clients assessed by KASS who are eligible for a personal budget are given the option of receiving it as a direct payment and are able to choose the way of managing it that best suits them.

Number of people receiving a direct payment

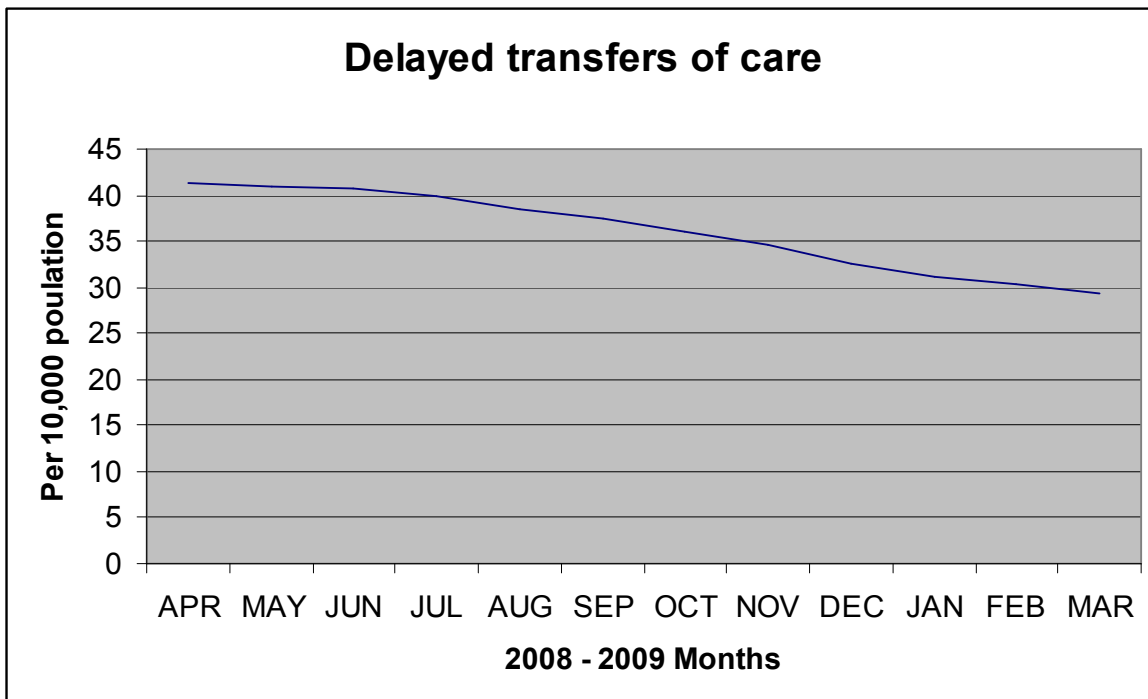


Reduction in the number of delayed discharges from hospital

Kent Adult Social Services have continued to work with East and West Kent PCT to really focus on the fundamental reasons for delays occurring.

The graph below shows a reduction in the rolling performance indicator over the 08/09 period.

The rolling Performance Indicator (PI) number, is the position as at the last week of each month, and is calculated on a rolling year basis (i.e. 52 weeks of data). The definition of the PI is; **the number of delayed transfers of care per 100,000 populations aged 65 or over.**



Planned outcomes

The Directorate has embedded key outcomes and recommendations of key policy such as 'Our Health, Our Care, Our Say', and Putting People First to drive the direction of the Directorate to address key areas:

- Personalisation
- Prevention
- Promoting Independence

Together with the views of government and the views of our users and carers that have focused the Directorate on making the service user the centre to all of our activity. These key objectives are embodied in Active Lives For Adults /Self Directed Support that is developing a new culture and structure focused on personalisation and choice.

Outcomes will also now be measured and monitored as part of the KASS performance framework. In developing the framework we are looking at new innovative ways of capturing the outcomes and the views of people. For example, Kent is just one of three Authorities to be piloting the indicator. This work has been acknowledged by the Department of Health and ADASS (The Association of Adult Social Services).

The introduction of this indicator has been in line with a major change in the performance framework. Previously known as the performance assessment framework (PAF) it has now become National Indicators. In comparison the National Indicator are far fewer with an expectation that each Adult Social Services directorate will accompany these indicators by monitoring additional areas to demonstrate what outcome the Directorate is having and exactly what difference it is making to them.

Briefly the following factors illustrate that this is making a difference:

- Since 2002 there has been a 14% reduction in residential and nursing care, at a time when the ageing population is growing.
- The data from the Kent Agreement 1 showed the number of emergency bed days have decreased, which is against the national trends
- Research underpinning Brighter Futures Group, INVOKE and Whole Systems Demonstrator indicate that all these preventative projects are making a difference.
- Nationally there has been a series of research which show the benefits of low level prevention. Currently the University of Kent at Canterbury is finalising research looking at some of the benefits of preventative day services.
- Within the Directorate we have undertaken a range of internal service evaluations which identify benefits of a range of preventative services, including intermediate care and active care rapid response teams.
- Significant take up of benefits amongst Older People, improving economic and financial independence.

What was achieved

Over the year period 08/09 the Kent Adult Social Services has planned and delivered a number of significant outcomes:

- Kent Adult Social Services was awarded 3 star rating for the 7th consecutive year.
- The implementation of ALfA and SDS across the directorate. This is a transformational project and has involved an end to end restructure of the Directorate. Teams have been reorganised and roles have been redesigned to fit the new Directorate direction of Self Directed Support. The restructure is underpinned by a shift in culture focussed on personalisation. Once completed the Restructuring will deliver significant efficiencies (£1.7 million reduction in management costs). This provides sustainable management costs for the future.
- Reorganising the Directorate and the development of services (e.g. Enablement) has been implemented to meet the challenges of increased referrals and levels of need, which arise from the demographic trends (e.g. a growing ageing population).
- The Directorate has worked with Service user groups and carers in establishing the way in which support is implemented in the directorate, for example, by holding workshops and user events to create a user led service approach.
- The Directorate has seen a reduction in the number of staff within KASS as a direct outcome of the Directorate restructure. SMT were included in the restructure.

The table below shows the staffing numbers for the directorate. The restructure has reduced staffing numbers particularly showing a significant reduction in management capacity despite increases in activity across the directorate.

2008/09		2009/10	
Grade J (KS13) and above	Below Grade J (KS13)	Grade J (KS13) and above	Below Grade J (KS13)
62.32 fte	2921.92 fte	48.85 fte	2848.15 fte

- In March 2009, the Directorate was inspected by CQC (the former CSCI – became CQC on 1st April 2009). This service Inspection is part of a national programme for all local authorities of Inspections with the theme Independence Wellbeing and Choice. In Kent the inspection focused on Safeguarding and Older People / Access to Preventative Services. The full service inspection took place between 10th – 18th march and included a survey of service users, meetings with users and carers, interviews with staff at all levels, partner agencies, members and mystery shopping. This is the first service inspection since the mid-nineties other than the joint review.

- A major project that undertaken by the Directorate over the 08/09 period was the NHS Learning Disability Transfer into KCC. This complex project has been risk managed and is on track, although there will be future financial risks post 2011. They have been identified. The framework and the agreement on the process are in place but full completion of the project is estimated for the end of the year.
- Safeguarding. The Directorate has worked with its partners to improve the management of safeguarding, which has delivered increased outcomes to vulnerable people over the year, for example increased numbers of investigations. This has included: major file audits, the development of a 3 year strategic plan with our partners and significant improvements in our performance management process which now fully involve the Cabinet Member Through confidential quarterly report on safeguarding performance.
- This year has been one of transformation for the directorate. The Independence, wellbeing and choice inspection took place during the first phase of the restructuring. However, even in the face of such major challenges, performance has continued to improve, staff morale has been maintained, staff vacancy, turnover and sickness levels continued to be low.

What was not achieved

- The transformation that KASS has undergone which has included a major re-structure has inevitable led to some projects not being delivered as outlined in the Business plans overleaf and some Consultations not been completed. A further issue which we had to manage was the Independence Wellbeing and Choice Inspection. Again this had an impact on planned projects and consultations as outlined in more detail in the following sections of this report.

All of the projects and developments not achieved have been listed within the relevant service area. To provide an overview each of the tables below show all of the amber and red categorised projects with explanations.

East Kent

East Kent 10 – this project was started and the bid was made to the Department of Health. This was a highly competitive process that was unsuccessful for Kent. This project has been removed as it cannot be taken any further.

	TITLE	OUTTURN	EXPLANATION
E K 3	To undertake consultations on the modernisation of residential respite care services where co-located with existing learning disability day services	RED	Programme revised in schedule in LD modernisation of services.
E K 4	To explore the modernisation possibilities of the older persons in-house residential units in Canterbury, Dover, Shepway and Swale	AMBER	Project in development stage. Planned to begin if approved Summer 09.
E K 6	Work in partnership with District Councils to develop supported housing for adults with specialist housing need	AMBER	Some progress made with some district councils. Further work needed.
E K 7	Whole System Demonstrator – working in partnership with PCTs to deliver assistive technology.	AMBER	The DH has changed the time scales many times during the programme, mainly due to the development and implementation of the evaluation mechanism but we are still on track. As at 31 March the programme was amber (orange) and at that time a Programme Management Office (PMO) was being set up to undertake all the administrative, processing and reporting activity requires to support programme delivery. We were reviewing all processes and procedures with a view to delivering operational efficiencies and integrating the PMO.
E K 12	Review of the Disabled Facilities Grant	AMBER	work still in progress with District Councils
E K 14	To implement revised strategy to improve transport arrangements for older people to access in-house day services	AMBER	Work underway not yet fully completed

West Kent

	TITLE	OUTTURN	EXPLANATION
W K 3	Review and modernise the services currently provided in in-house Registered Care Centres.	AMBER	Feasibility study completed. This relates to OP Strategy and has been delayed due to restructure and election/purdah. Strategy paper to be presented in summer 09 outlining modernisation programme and timetable.
W K 4	Review day opportunities provided to older service users and carers, by the KCC in-house provider and by the private and voluntary sector to ensure they meet the growth and ageing population and are fit for the future and help prevent social isolation and provide alternative models for respite care in line with ALfA.	AMBER	Delayed due to the transformation of KASS and implementation of ALfA
W K 7	Whole System Demonstrator – working in partnership with PCTs to deliver assistive technology.	AMBER	The DH have changed the time scales many times during the programme, mainly due to the development and implementation of the evaluation mechanism but we are still on track. As at 31 March the programme was amber (orange) and at that time a Programme Management Office (PMO) was being set up to undertake all the administrative, processing and reporting activity requires to support programme delivery. We were reviewing all processes and procedures with a view to delivering operational efficiencies and integrating the PMO.
W K 12	Review transport provided to KASS	AMBER	Feasibility study completed. Reviews carried out to link in with expiry dates of lease arrangements. Remainder will be completed by Summer 09.

Headquarters

	TITLE	OUTTURN	EXPLANATION	
H Q 2	Whole Systems Demonstrator - Delivering assistive technology	AMBER	This is a DH national demonstrator on 3 sites - Kent, Newham and Cornwall. It is a randomised trial with evidence evaluated by UCL. Conducted over a 2 year period finishing in July 2010. KCC is in partnership with East and West PCTs to deliver the target numbers of patients into the trail. The delivery is complex working with a range of stakeholders. The costs are fully funded by the DH. Currently 700 on the trial against a target of 2000.	
H Q 3	Implementing 'Valuing People Now'	AMBER	Valuing People Now published Jan 2009, Development Manager in post April 2009, 6 Key deliverables for initial year of strategy have delivery groups in place - Housing Plan in hand, Good Health Group focusing on access to primary care, Employability post in place, SDS needs to improve linkage into LD, Large VPN event in planning and Partnership Board under Review.	
H Q 4	Transfer of people with learning disabilities from health-funded accommodation.	AMBER	Although well on track and partially implemented, not yet fully signed off. Full completion expected towards the end of the year.	
H Q 5	Finalise Kent's Strategy for Later Life	AMBER	On track but not yet fully completed	
H Q 6	Implement the Joint Strategic Needs Assessment recommendations	AMBER	Given the long term nature of the JSNA it is never completed as it's success inevitable identifies more areas of activity to focus on. The JSNA is now being re-drafted as the Govt guidance has now been published and through the MOSAIC we have far more sophisticated information & analysis. Specialist Assessments - have been completed in Mental Health & Dementia and other specialist assessments are planned for Housing, disability, and carers in the future. JSNA and its findings have influenced commissioning - for example the development of more preventative services focused on Dementia	
H Q 9	Moving to Flexible and Mobile Working	AMBER	the project is on track but the KASS restructure has delayed the timetable	
H Q 10	Workforce Plan	AMBER	On track, this strategy is due to publish in the Autumn. Delayed completion due to the restructure	
H Q 12	SWIFT Development	AMBER	Work is on track and is an ongoing process.	
H Q 13	Better Homes Active Lives Housing PFI	AMBER	Project on planned programme with some supported housing open and operational.	
H Q 14	Excellent Homes for All Housing PFI	AMBER	Entering Procurement stage and OJEU advert for July 09.	

H Q 15	LD Services Modernisation	AMBER	Good Day programme in place, projects underway in Dartford, Gravesend, Maidstone, Sevenoaks, Ashford, Canterbury, Dover, Thanet. Initial/ outline work underway in Shepway, Tunbridge Wells, Tonbridge and Malling – Swale is in need of more input. Better links between Day services and Employment organisations, concentration on person centred lives and SDS linked to Community Capacity Building. 4 Project Managers active with responsibility for programme moving to Head of Strategic Commissioning
H Q 16	In house residential services for Older People	AMBER	Project in development stage. Planned to begin if approved Summer 09.
H Q 17	Carers	AMBER	On track, regular updates are provided through the monitoring process of target 53 Towards 2010.

Kent wide

	TITLE	OUTTURN	EXPLANATION
K W 4	Introduce TextBox server	AMBER	Delayed due to technical problems
K W 6	Implement deafblind strategy based on project report going to Senior Management Team (SMT) in April	AMBER	Delayed due to the restructure
K W 8	Establish a Kent-wide partnership based Sign Language Interpreting (SLI) service	AMBER	Delayed due to challenges of multi-agency working
K W 9	Develop Service Access project linked to Active Lives for Adults (ALfA) fast track work stream	AMBER	Project has been absorbed into the SDS work
K W 10	Evaluate integrated Visual Impairment (VI) service and introduce Rehabilitation Pilot Project	AMBER	Project has been absorbed into the SDS work
K W 11	Introduce Rehabilitation Pilot Project	AMBER	Project has been absorbed into the SDS work
K W 13	Support Kent Districts, Medway Council and South East Regional Assembly (SEERA) on future Gypsy and Traveller accommodation provision	AMBER	Not yet completed
K W 14	Support Swale Borough Council with any improvements to the Three Lakes site	AMBER	KCC have contributed to Swale BC's Corporate Policy Document on Gypsies and Travellers, and a joint (KCC-SBC- Amicus Housing Association) approach has been agreed to the site needs issues. An alternative site location has been identified for some of the families, and this is being pursued
K W 15	Support Tonbridge and Malling Borough Council with any improvements to the Coldharbour site	AMBER	On track. The grant bid to be submitted in June 2009
K W 16	Manage implications of Housing and Regeneration Bill now going through parliament.	AMBER	On track and ongoing

K W 17	Promote closer engagement with those from Gypsy and Traveller Communities	AMBER	On track and ongoing
K W 23	Develop Kent Supported Employment (KSE) as a trading organisation to ensure it can be more responsive to changes in the Employment Support sector	AMBER	Project delayed due to the restructure

Mental Health

All completed

Supporting People

	TITLE	OUTTURN	EXPLANATION
S P 2	Five Year Strategy	AMBER	On track - progress report being taken to the Commissioning body at the beginning of July.

**Oliver Mills
Managing Director**

Kent Adult Social Services

Key Performance Indicators & Activity Levels

From April 2009, KASS will be using the newly implemented Performance Strategy that focuses on outcomes and embraces the new national performance framework.

Indicator	2006/07 Actual	2007/08 Actual	2008/9 Target	2008/ 09 Forecast	Trend
PAF C28 - Intensive Homecare per 1,000 population aged 65 and over	11	11	10.9	10.9	▶ GREEN
PAF C32 - Older People aged 65 and over helped to live at home per 1,000 population aged 65 and over	75	77	78	78	▶ GREEN
PAF D40 - Clients receiving a review as a percentage of adult clients receiving a service	86	86	88	88	▲ GREEN
PAF D39 - Percentage of people receiving a statement of their need and how they will be met	98	98	98	98	▶ GREEN

All of the above indicators are all performing at the highest levels – it is therefore challenging to make any significant improvements in performance.

Key to trends

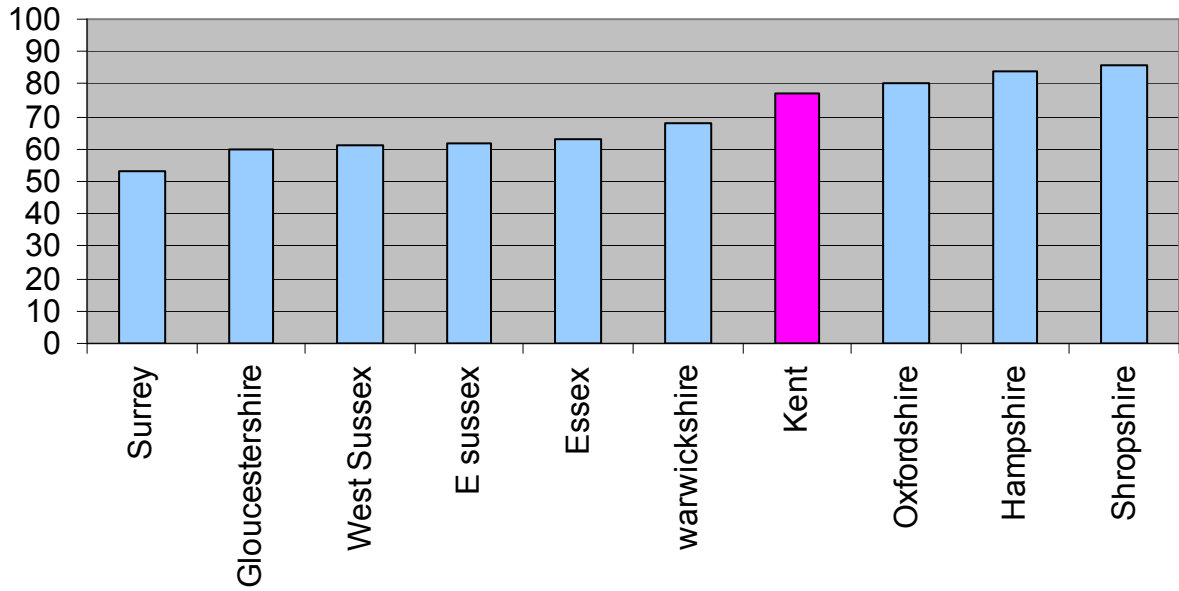
- ▲ improving
- ▶ not improving
- ▼ deteriorating

Benchmarking Information

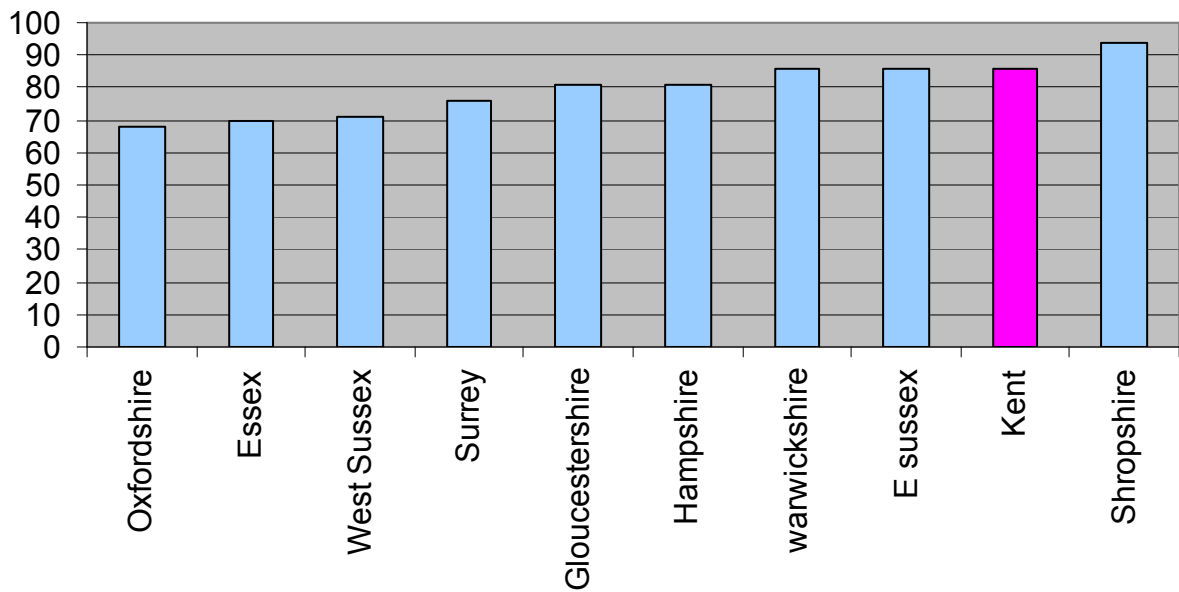
The graphs shown below demonstrate ``Kent's' position compared to other local authorities for two of the performance indicators listed above:

- PAF C32 – Older People helped to live at home
- PAF D40 – Clients receiving a review

PAF C32 - Older people helped to live at home



PAF D40 - Clients receiving a review



Towards 2010

Target Number	Definition	Status (March 2009)
52	Increase the number of people supported to live independently in their own homes. This will include: <ul style="list-style-type: none"> • encouraging the development of more housing for older people, disabled people and those with special needs • encouraging more people to take control of their care/support through Direct Payments taking advantage of new technologies, such as expanding our Telehealth and Telecare programmes	On Course AMBER
53	Strengthen the support provided to people caring for relatives and friends	On Course AMBER
54	Work with our colleagues in the health service to reduce the number of avoidable admissions to hospital and combine resources, where appropriate, to improve the health and well-being of the people of Kent	On Course AMBER
55	Ensure better planning to ease the transition between childhood and adulthood for young people with disabilities and to promote their independence	On Course AMBER
56	Improve older people's economic well-being by encouraging the take-up of benefits	On Course AMBER

External Evaluation

- The user feedback on the homecare survey (08/09) achieved 92% of service users receiving a homecare service were satisfied.
- The CQC Inspection report (08/09) is embargoed until mid July 2009.
- East Kent were assessed with visits made to various KCC sites across East Kent, including, for KASS, St Peter's House, Broadstairs, Wayfarers RCC in Sandwich, Margate DOS/ILS and Thanet District Teams. East Kent was awarded Green ISO 14001 accreditation. West Kent will be assessed during 09/10.

Staffing Information

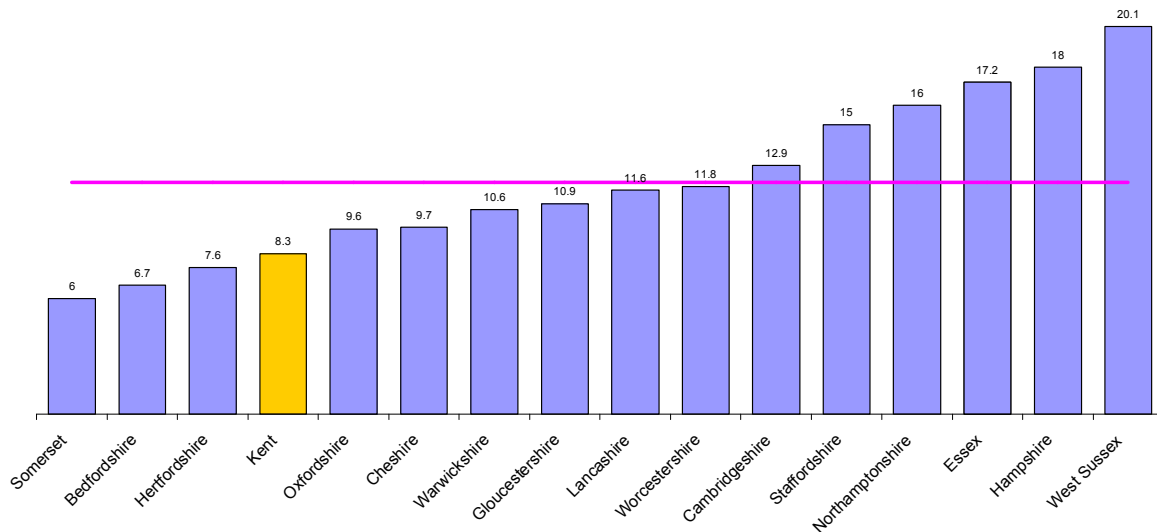
TURNOVER

2008/09 Target	2008/09 Outturn	2009/10 Target
9.0%	8.34% GREEN	8.25%

Please note: Vacancies figures are based upon numbers actively recruited to posts.

The figures shown above show that KASS is reducing the staff turnover figures annually.

8.3GN242 – Recruitment and Retention Indicator (Staff Turnover) : Percentage of Adult services directly employed staff that left during the year.



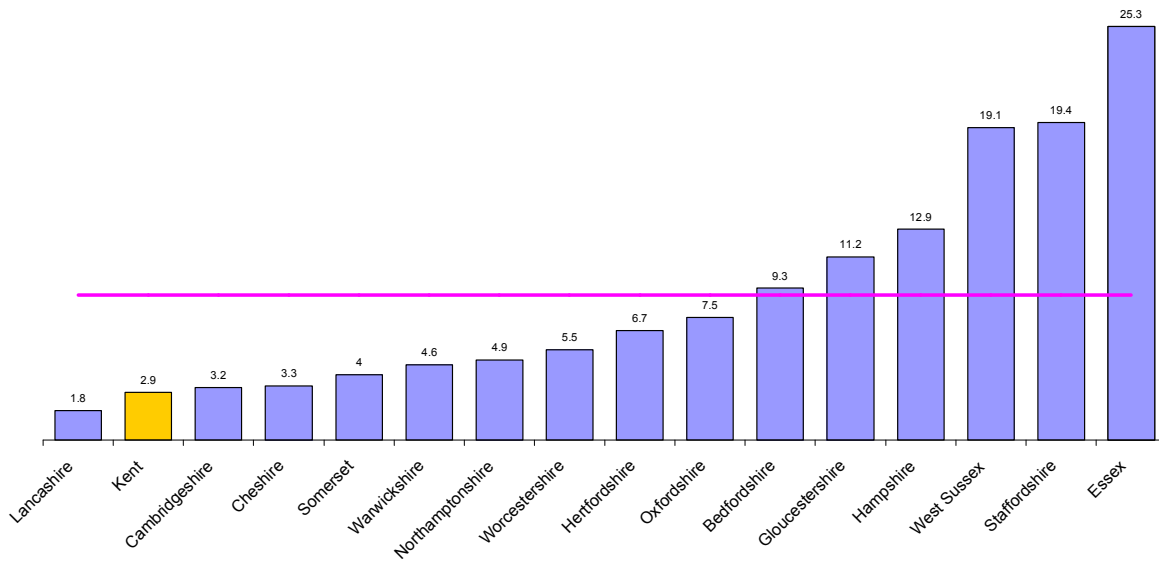
VACANCIES

2008/09 Target	2008/09 Outturn	2009/10 Target
3.0%	4.53% GREEN	4.0%

The vacancy rates within KASS had been reducing to very low numbers, the impact of the Directorate wide restructure has meant that vacancy rates have been affected. However, KASS have set a target to reduce these figures again.

Please note: Turnover is the average FTE divided by the total number of leavers for the period.

8.3GN243 – Recruitment and Retention Indicator (Staff Vacancies) : Percentage of Adult services directly employed posts vacant.



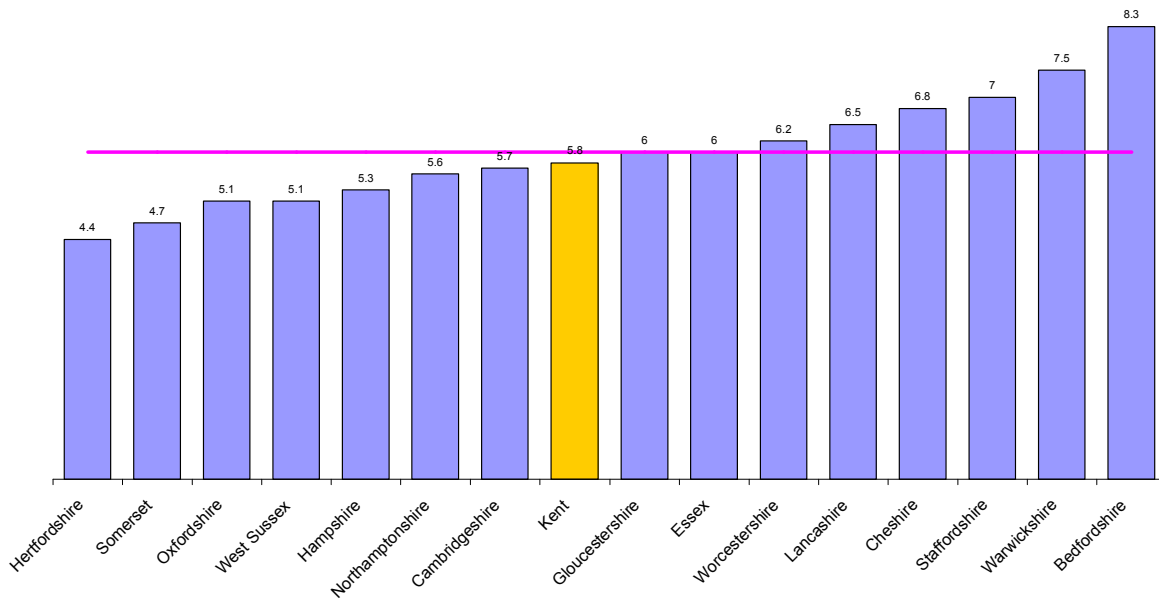
SICKNESS

2008/09 Target	2008/09 Outturn	2009/10 Target
5.5%	4.59% GREEN	4.5%

The Sickness rates across KASS have also reduced over recent years. KASS continues to aim for a lower rate by setting a target for further reductions.

Please note: Sickness is the working hours lost divided by the number of contracted hours for the period.

8.3GN244 – The percentage of Social Services working days / shifts lost to sickness absence during the financial year (Adult Services).

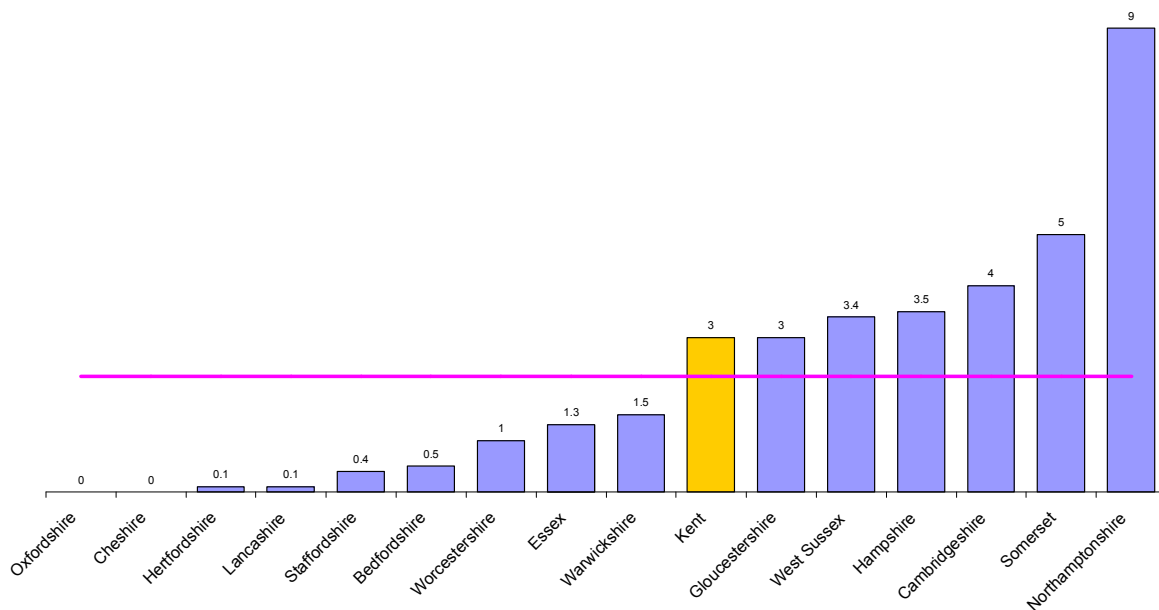


ETHNICITY 'NOT STATED'

2008/09 Target	2008/09 Outturn	2009/10 Target
5.0%	3.0% AMBER	4.0%

The Ethnicity not stated rates have reduced over recent years. However, KASS acknowledge that this figure will not necessarily reach zero without some change in requires, as currently it is optional to staff if they wish to disclosure their ethnicity for the purposes of personnel monitoring.

8.3GN247 - Percentage of staff in post at 30 September where ethnicity "Not Stated" (Adults Services).



Complaints and Customer Care

Kent Adult Social Services (KASS) operates a robust and effective complaints procedure in line with statutory requirements. Complaints are seen as one mechanism for providing valuable feedback from people who have actual day to day experience of our services.

Each local authority that provides social services is required to publish an annual report relating to the operation of its complaints and representations procedure. For KASS, this is presented to SMT in October and Members in November each year. This Annual Report provides Members with information about the operation of the Adult Social Services complaints procedure between 1 April and 31 March for the year in question.

The report provides a brief overview of the current complaints procedure. It also contains information on the number and type of complaints received by the Directorate, together with examples of how the lessons learned from complaints are utilised to inform, influence and improve service design and delivery. It also provides information on any complaints that are referred to the Ombudsman with the associated outcome.

Consultation and User Involvement Monitoring

At the half-year monitoring point;

35.7% consultation/ user involvement meetings were Done and Ongoing

50% were On Course

14.3% were listed as More Progress Needed

			Half Year Position	Outturn
HQ1	Home Care Survey	To find out service users views regarding the home care services they receive.	AMBER	GREEN
HQ2	Carers Survey	To find out carers views regarding the support and services they receive	AMBER	GREEN
SP 1	Service User Involvement Strategy	A strategy for engagement with Service Users	GREEN	GREEN
WK 1	Culturally Appropriate Services	Consultation with elders and community leaders	AMBER	GREEN
WK 2	LD day opportunities	Modernisation services is part of the ongoing programme to promote independence, choice and employment opportunities	AMBER	GREEN
MH1	Mental Health Survey	Service User satisfaction survey	GREEN	GREEN
EK 1	Day Services Review Ashford	Users and carers of Ashford day opportunity centre	AMBER	GREEN
EK 2	Day services review swale	Users and cares of Faversham day opportunity centre	RED	RED
EK 3	Day service review swale	User and carers of Doubleday lodge	RED	RED
KW 1	Survey of public satisfaction	Our service and site and public information about it	AMBER	GREEN
KW 2	Survey of licensee satisfaction	Our service and site and public information about it	AMBER	GREEN
KW 3	Towards Equity and Access project	Addressing the DH report to inform LDP process	GREEN	GREEN
KW 4	ICES (VI) project	Consulting on the proposed option for service improvement	GREEN	GREEN
KW 5	Interpreting Project	Improving interpreting services in Kent on a public partnership basis	GREEN	GREEN

At Outturn Monitoring point:

- 86% Task Complete:
- 14% Red tasks

SEE APPENDIX ONE FOR COMMENTS ON ALL RED RATED CONSULTATIONS

Environment and Climate Change

- Delivery plan in place
- ISO 14001 awarded.

Business Plan Performance 2008-9

East Kent

Summary Business Plan details

Core Business

We support older people, people with physical or sensory impairments, people with a learning disability and people with mental health problems. We do this through the Care Managers, the Occupational Therapy Bureau and via the in-house domiciliary service, Kent Home Care Service. Through the Supporting People Programme assistance is also provided to people with a wider range of housing-related support needs. The East Kent Area of Kent Adult Social Services is served by a number of service units which are listed below:

- East Kent Service Provision (Learning and Physical Disability and Older People)
- Social Economy Unit
- Occupational Therapy
- Area Business and Performance Management Unit
- Community Services Team
- The Kent Home Care Service

Due to the restructure, this structure has changed significantly over 09/10

Planned Outcomes

See Director's Statement

What was achieved

ALfA/ SDS

- The restructure of KASS during 08/09 was successfully achieved. Major changes have been implemented across the Directorate; the detail on the specific changes for East Kent can be seen in the East Kent Business Plan 2009/10. An example of an outcome of change as a result of the restructure for East Kent is the County Duty Service. This service has now become KCAS (Kent County Assessment Service) and as it is situated at Kroner House, Ashford the direct line management and budget management for this service has moved to East Kent with effect from 1st April 2009.
- To maximise Kent Adult Social Services role within Gateways through a partnership approach to improve access to public services

Environment

- East Kent achieved Green 14001 accreditation.

Housing Growth

- A system is in place for monitoring all planning applications for new housing to ensure that the community infrastructure needs of the Districts are clarified and developer contributions sought within the Kent County Council's Developer Contributions Guide. This work has been developed further by the direct involvement of KASS representatives within the Local Development Framework.
- To receive results of submission of PFI round 5 including extra care sheltered housing proposals and if successful to identify key actions to enable the implementation of the schemes
- Identify impact of all new housing growth being planned across East Kent, in terms of demographics and the impact it will have on the service provision within East Kent

Inspection

- Working with HQ and cross Directorate to link into providing evidence and offering services for the assessment purposes of the CQC for the Inspection.

Workforce issues

- Office strategy – development of mobile and flexible working as part of drive to reduce office accommodation

Transport

- To implement revised strategy to improve transport arrangements for older people to access in-house day services. Strategy revised and new transport now in place.

Working with Health

- Whole System Demonstrator Telecare / Telehealth – working in partnership with PCT and housing organisations to successfully rollout implementation of assistive technology

Housing

- New Extra Care Sheltered Housing and supported accommodation through PFI (Better Homes, Active Lives).

What was not achieved

Learning Disability

- Consultation did not commence on modernisation of residential respite services due to changes of priority within the good day programme.

Housing

- Work in partnership with District Councils to develop supported housing for adults with specialist housing need this continues to progress but has been constrained by finding suitable property.

Grants

- Work has commenced on a review of the Disabled Facilities Grant system with district councils but yet to be completed.

Key Performance Indicators & Activity Levels

For performance indicators (cross-service) see page 8

Activity

Outlined below are key examples of activity

- Older People Residential Care, Independent Sector.
Over 2008/09 there was 2874 permanent clients at a net cost of £220.57 per week. In total 107,381 weeks of care were provided for permanent independent residential care for older people.

- Older People Nursing Care, Independent Sector.
Over 2008/09 there was 957 permanent clients at a net cost of £301.08 per week. In total 36,311 weeks of permanent care were provided for permanent independent nursing care for older people.

- Older People Domiciliary Care, Independent Sector.
During 2008/09 7555 clients received domiciliary care at gross cost per hour of £14.51. Over the 2008/09 period 1,539,112 hours of domiciliary care were provided.

Staffing

	2008/09	2009/10
Grade KS 13 (or equivalent) and above	16	8
Grade KS 12 (or equivalent) and below	1206.79	1243.22
TOTAL	1222.79	1251.22
Of the above total, the estimated FTE which are externally funded	30.70	

Staffing figures overall have reduced, the increase shown above for grade KS 12 and below is due to the transfer of in-house services to areas.

Performance Against Projects/Developments / Key Actions

At the half-year monitoring point;

17.65% projects / key actions were Done and Ongoing

76.65% were On Course

5.88% were listed as More Progress Needed

		Half year position	Outturn
EK 1	Development of Learning Disability services under the 'Good Day Programme'	AMBER	GREEN
EK 2	Active Lives for Adults (AlfA Project) / total transformation in service delivery	AMBER	GREEN

EK 3	To undertake consultations on the modernisation of residential respite care services where co-located with existing learning disability day services	RED	RED
EK 4	To explore the modernisation possibilities of the older persons in-house residential units in Canterbury, Dover, Shepway and Swale	AMBER	AMBER
EK 5	Office strategy – development of mobile and flexible working as part of drive to reduce office accommodation	AMBER	GREEN
EK 6	Work in partnership with District Councils to develop supported housing for adults with specialist housing need	AMBER	AMBER
EK 7	Whole System Demonstrator – working in partnership with PCTs to deliver assistive technology.	AMBER	AMBER
EK 8	Development of Extra Care Sheltered Housing and supported accommodation through PFI (Better Homes, Active Lives)	AMBER	GREEN
EK 9	To receive results of submission of PFI round 5 including extra care sheltered housing proposals and if successful to identify key actions to enable the implementation of the schemes	AMBER	GREEN
EK 11	To maximise Kent Adult Social Services role within Gateways through a partnership approach to improve access to public services	AMBER	GREEN
EK 12	Review of the Disabled Facilities Grant	AMBER	AMBER
EK 13	Identify impact of all new housing growth being planned across East Kent	AMBER	GREEN
EK 14	To implement revised strategy to improve transport arrangements for older people to access in-house day services	AMBER	AMBER
EK 15	Brighter Futures Group	GREEN	GREEN
EK 16	Partnerships for Older Peoples Projects	GREEN	GREEN
EK 17	Learning Disability Development Fund	RED	AMBER

East Kent 10 – this project was started and the bid was made to the Department of Health. This was a highly competitive process that was unsuccessful for Kent. This project has been removed as it cannot be taken any further.

EK 10	To receive results of submission to Department of Health for extra care sheltered housing
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At Outturn Monitoring point:

- 68.75% Task Complete:
- 25% Part Complete and being carried forward:
- 6.25% Red tasks

Business Plan Performance 2008-9

West Kent

Summary Business Plan details

Core Business

We support older people, people with physical or sensory impairments, people with a learning disability and people with mental health problems. We do this through the Care Managers, the Occupational Therapy Bureau and via the in-house domiciliary service, Kent Home Care Service. Through the Supporting People Programme assistance is also provided to people with a wider range of housing-related support needs. The West Kent Area of Kent Adult Social Services is served by a number of service units which are listed below:

- West Kent Service Provision (Learning Disability/Older People)
- Supporting Employment Unit
- Occupational Therapy
- Area Business and Performance Management Unit
- Community Services Team
- The Kent Home Care Service

Due to the restructure, this structure has changed significantly over 09/10

Planned outcomes

See Director's Statement

What was achieved

Housing Growth

- A system is in place for monitoring all planning applications for new housing to ensure that the community infrastructure needs of the Districts are clarified and developer contributions sought within the Kent County Council's Developer Contributions Guide. This work has been developed further by the direct involvement of KASS representatives within the Local Development Framework.
- Identify the impact of new housing growth in terms of demographics and the impact it will have on the service provision within West Kent.
- Working with District and Borough Councils to maximise independent living opportunities for people with disabilities

ALFA/ SDS

- The restructure of KASS during 08/09 was successfully achieved. Major changes have been implemented across the Directorate. Outlined below are some examples of changes:

- transfer of the Learning Disability budget and provision being managed by West Kent across the entire county.
- Modernising service delivery in line with ALfA, maximising opportunities afforded by new housing developments and challenges presented by the growth in population and the ageing population.
- Review day opportunities provided to older service users and carers, by the KCC in-house provider and by the private and voluntary sector to ensure they meet the growth and ageing population and are fit for the future and help prevent social isolation and provide alternative models for respite care in line with ALfA.
- Developing a flexible and mobile workforce

Inspection

- Working with HQ and cross Directorate to link into providing evidence and offering services for the assessment purposes of the CQC for the Inspection.

Learning Disability Services

- Modernise the services currently provided for people with a leaning disability to promote independence and employment as part of the Good Day Programme

Healthy Living

- Collaborating with local leisure centre providers to ensure services are accessible for older people and people with disabilities.

Joint Working with Health

- Joint working with Health on intermediate care, dementia, community services, delayed transfers of care. (e.g. reducing the numbers of people who have a delayed discharge from hospital)

Fair Access for all

- Reviewing and modernising services currently provided to ensure they are culturally appropriate, integrated and accessible.

Health and District Involvement

- Whole System Demonstrator – working in partnership with the PCT and Housing to roll-out implementation
- Seeking and securing opportunities for services to be co-located with Health and District and Borough Councils.

What was not achieved

Both of these are on course to be completed, but are not yet fully implemented and completed. Both have had feasibility studies completed.

- Review and modernise the services currently provided in in-house Registered Care Centres.
- Review transport provided to KASS

Key Performance Indicators & Activity Levels

For performance indicators (cross-service) see page 8

Activity

Outlined below are key examples of activity

- Older People Residential Care, Independent Sector.
Over 2008/09 there was 1728 permanent clients at a net cost of £257.54 per week. In total 51,412 weeks of care were provided for permanent independent residential care for older people.

- Older People Nursing Care, Independent Sector.
Over 2008/09 there was 1022 permanent clients at a net cost of £325.19 per week. In total 40,056 weeks of permanent care were provided for permanent independent nursing care for older people.

- Older People Domiciliary Care, Independent Sector.
During 2008/09 6700 clients received domiciliary care at gross cost per hour of £15.14. Over the 2008/09 period 1,048,027 hours of domiciliary care were provided.

Staffing

	2008/09	2009/10
Grade KS 13 (or equivalent) and above	15.80	6.61
Grade KS 12 (or equivalent) and below	862.66	900.84
TOTAL	878.45	907.45
Of the above total, the estimated FTE which are externally funded	9.50	

Staffing figures overall have reduced, the increase shown above for grade KS 12 and below is due to the transfer of in-house services to areas.

Performance Against Projects/Developments / Key Actions

At the half-year point,

100% were On Course

		Half Year Position	Outturn
WK 1	Modernising service delivery in line with ALfA, maximising opportunities afforded by new housing developments and challenges presented by the growth in population and the ageing population.	AMBER	GREEN
WK 2	Modernise the services currently provided for people with a learning disability to promote independence and employment as part of the Good Day Programme	AMBER	GREEN

WK 3	Review and modernise the services currently provided in in-house Registered Care Centres.	AMBER	AMBER
WK 4	Review day opportunities provided to older service users and carers, by the KCC in-house provider and by the private and voluntary sector to ensure they meet the growth and ageing population and are fit for the future and help prevent social isolation and provide alternative models for respite care in line with ALfA.	AMBER	GREEN
WK 5	Collaborating with local leisure centre providers to ensure services are accessible for older people and people with disabilities.	AMBER	GREEN
WK 6	Developing a flexible and mobile workforce.	AMBER	GREEN
WK 7	Whole System Demonstrator – working in partnership with the PCT and Housing to roll-out implementation	AMBER	GREEN
WK 8	Joint working with Health on intermediate care, dementia, community services, delayed transfers of care.	AMBER	GREEN
WK 9	Working with District and Borough Councils to maximise independent living opportunities for people with disabilities	AMBER	GREEN
WK 10	Seeking and securing opportunities for services to be co-located with Health and District and Borough Councils.	AMBER	GREEN
WK 11	Reviewing and modernising services currently provided to ensure they are culturally appropriate, integrated and accessible.	AMBER	GREEN
WK 12	Review transport provided to KASS	AMBER	AMBER
WK 13	Identify impact of new housing growth.	AMBER	GREEN

At Outturn Monitoring point:

- 87% Task Complete
- 13% Part Complete and being carried forward

Business Plan Performance 2008-9

Headquarters

Summary Business Plan details

Core Activities

Strategic Headquarters sets the overall direction of Kent Adult Social Services and supports the Areas in delivering the Directorate's objectives. This plan brings together all aspects of the KASS Headquarters activity and budget, which include:

- The Managing Director and Director of Operations and their support
- The Director of Resources and her support teams including Finance, Personnel, Public Private Partnerships and Property, the Electronic Services Programme Unit, Adult Services Learning Resource Team, and Management Support.
- The Director of Policy, Performance and Quality Assurance and her teams including Policy and Service Development (including Telehealth and Telecare), Performance and Planning, Contracting and Quality Assurance, Governance and Management Support, and Information Governance. The ALfA project is also managed from PPQA.
- The Joint Director, Learning Disabilities

Planned outcomes

See Director's Statement

What was achieved

- As part of the restructure appointments were made to the FAME (flexible and mobile engagement) project team. The team continue to implement and develop the ability for a flexible KASS workforce to be part of a mobile working innovate.
- As part of the transformation, SMT saw two Directors' posts assimilated, with a new post as the SMT lead for the ALfA transformation.
- Fully implementation and roll out of the new statutory complaints procedure.
- ElderGames is an innovative European Commission funded research project with the purpose of developing a series of information technology based games, which can contribute to improving the quality of life of older people.
- Completion and full implementation of the Specialist Finance teams.

What was not achieved

A number of key areas are on track to be delivered but are not yet fully complete. These areas will remain ongoing.

Such as ALfA, the NHS Learning Disability transfer and implementing Valuing People Now.

Key Performance Indicators & Activity Levels

For performance indicators (cross-service) see page 8

Staffing

	2008/09	2009/10
Grade KS 13 (or equivalent) and above	32.73	24.92
Grade KS 12 (or equivalent) and below	291.13	298.44
TOTAL	323.86	323.36
Of the above total, the estimated FTE which are externally funded	30.62	

Performance Against Projects/Developments / Key Actions

At the half-year point, projects / key actions
100% were On Course

		Half Year Position	Outturn
HQ 1	Active Lives for Adults (ALfA Project) / total transformation in service delivery	AMBER	GREEN
HQ 2	Whole Systems Demonstrator	AMBER	AMBER
HQ 3	Implementing 'Valuing People Now'	AMBER	AMBER
HQ 4	Transfer of people with learning disabilities from health-funded accommodation.	AMBER	AMBER
HQ 5	Finalise Kent's Strategy for Later Life	AMBER	AMBER
HQ 6	Implement the Joint Strategic Needs Assessment recommendations	AMBER	AMBER
HQ 7	Making Experiences Count – New Customer Care / Complaints process	AMBER	GREEN
HQ 8	ElderGames is an innovative European Commission funded research project with the purpose of developing a series of information technology based games, which can contribute to improving the quality of life of older people.	AMBER	GREEN
HQ 9	Moving to Flexible and Mobile Working	AMBER	AMBER
HQ 10	Workforce Plan	AMBER	AMBER
HQ 11	Specialist Finance Teams	AMBER	GREEN
HQ 12	SWIFT Development	AMBER	AMBER
HQ 13	Better Homes Active Lives Housing PFI	AMBER	AMBER
HQ 14	Excellent Homes for All Housing PFI	AMBER	AMBER
HQ 15	LD Services Modernisation	AMBER	AMBER
HQ 16	In house residential services for Older People	AMBER	AMBER
HQ 17	Carers	AMBER	AMBER

Year-end:

- 23.5% Task Complete:
- 76.5% Part Complete and being carried forward:

Business Plan Performance 2008-9

Kentwide

Summary Business Plan details

Core Business

This Business Unit has been collated following the restructuring of Specialist Services in 2007 and includes those services that are county-wide direct services. It includes:

- Gypsy and Traveller Unit
- Sensory Disabilities
- Community Services Team
- Kent Supported Employment
- County Duty Service

The core purpose of these services is to support the people of Kent to live independent and fulfilled lives, free from discrimination or harassment.

Planned outcomes

See Director's Statement

What was achieved

- All projects completed or on track for completion
- Fully embedded the new staffing structure to improve efficiency of the service
- Replaced existing database with a new web-based system to improve available management information and to support flexible working.
- Modernisation of the Direct Payments public helpline
- Development of the training strategy linked to active lives
- Review of the outcomes of the DH community equipment and wheelchair services retail model pilots

Key Performance Indicators & Activity Levels

For performance indicators (cross-service) see page 8

Activity

Outlined below are key examples of activity

- County Duty service anticipated receiving in the region of 90,000 new contacts and referrals during 2008/09
- The Sensory Service received over 17,000 referrals during 2008/09

Staffing

	2008/09	2009/10
Grade KS 13 (or equivalent) and above	3.00	2.00
Grade KS 12 (or equivalent) and below	129.90	132.09
TOTAL	132.90	134.09
Of the above total, the estimated FTE which are externally funded	3.00	

Performance Against Projects/Developments / Key Actions

At the half-year point,

56.5% projects / key actions were Done and Ongoing

26.1% were On Course

17.4% were listed as More Progress Needed

		Half year position	Outturn
KW 1	Extend Fast Track Occupational Therapy (OT) equipment assessment and provision service.	GREEN	GREEN
KW2	Extend County Duty Service function into new and developing Gateways.	GREEN	GREEN
KW3	Modernise Direct Payments Public Helpline	GREEN	GREEN
KW4	Introduce TextBox server	AMBER	AMBER
KW 5	Introduction of Integrated Children Services (ICS) database	GREEN	GREEN
KW 6	Implement deafblind strategy based on project report going to Senior Management Team (SMT) in April	AMBER	AMBER
KW 7	Develop Training Strategy linked to Active Lives for Adults (ALfA)	AMBER	GREEN
KW 8	Establish a Kent-wide partnership based Sign Language Interpreting (SLI) service	AMBER	GREEN
KW 9	Develop Service Access project linked to Active Lives for Adults (ALfA) fast track work stream	AMBER	AMBER

KW 10	Evaluate integrated Visual Impairment (VI) service and introduce Rehabilitation Pilot Project	AMBER	GREEN
KW 11	Introduce Rehabilitation Pilot Project	AMBER	GREEN
KW 12	In partnership with Health and service users, develop and implement action plans in relation to "Towards Equity and Access" (TEA) project	GREEN	GREEN
KW 13	Support Kent Districts, Medway Council and South East Regional Assembly (SEERA) on future Gypsy and Traveller accommodation provision	RED	AMBER
KW 14	Support Swale Borough Council with any improvements to the Three Lakes site	RED	AMBER
KW 15	Support Tonbridge and Malling Borough Council with any improvements to the Coldharbour site	RED	AMBER
KW 16	Manage implications of Housing and Regeneration Bill now going through parliament.	AMBER	AMBER
KW 17	Promote closer engagement with those from Gypsy and Traveller Communities	AMBER	AMBER
KW 18	Review Community Equipment service following outcome of Department of Health (DH) User satisfaction survey	AMBER	GREEN
KW 19	Continue to integrate ICES stores & pooled arrangements with Health & third sector colleagues, utilising M-Soft support as agreed	GREEN	GREEN
KW 20	Transfer Children's Community Equipment Services & administration of Section 31 agreement to CFE	GREEN	GREEN
KW 21	Review outcomes of DH Transforming Community Equipment & Wheelchair Services Retail Model pilots.	GREEN	GREEN
KW 22	Implement new staff structure to support delivery against existing externally-held contracts, Service Level Agreements and externally-funded Pathways to Work	GREEN	GREEN
KW 23	Develop Kent Supported Employment (KSE) as a trading organisation to ensure it can be more responsive to changes in the Employment Support sector	RED	AMBER

Year-end:

- 52.2% Task Complete:
- 47.8% Part Complete and being carried forward

Business Plan Performance 2008-9

Mental Health

Summary Business Plan details

Core Business

One in four people will suffer from a mental health issue in their lifetime, from conditions such as depression through to schizophrenia. Most people with mental health problems are cared for by their GP, but some 9% are referred on to specialist services for assessment, advice and sometimes treatment, and this is provided by the Adult Mental Health Service. The service also has a role in ensuring that opportunities are provided for people with mental health problems to gain access to positive life experiences (e.g. decent accommodation, valued work and real friends).

The Adult Mental Health Service provides fully integrated (between the NHS and Adult Social Services) mental health services ranging from in-patient care, residential care, recovery-based services in the community, and preventative services. The Kent and Medway NHS and Social Care Partnership Trust ('the Trust') is the service provider.

Planned outcomes

See Director's Statement

What was achieved

- All projects were completed
- Mental Health Act fully implemented and rolled out
Target employment opportunities for people with a Mental Health problem, introduction of a 'one stop shop' type of facility.

Key Performance Indicators & Activity Levels

For performance indicators (cross-service) see page 8

Activity

- 286 clients received mental health residential care, receiving a total of 14,090 weeks
- 1,497 clients received domiciliary care during 2008/09 receiving a total of 35,060 hours.
- 7,250 assessments were undertaken over the year period with 1,476 people accessing a service via a voluntary organisation.
- A further 909 mental health carers covering all ages accessed services.

Staffing

	2008/09	2009/10
Grade KS 13 (or equivalent) and above	8.51	6.32
Grade KS 12 (or equivalent) and below	242.70	255.70
TOTAL	251.21	262.02
Of the above total, the estimated FTE which are externally funded		26.40

Performance Against Projects/Developments / Key Actions

At the half-year point,

33.3% projects / key actions were "Done and Ongoing

66.7% were "On Course

MH 1	Redesign of Informal Day Services in Dover, Deal and Ashford.	AMBER	GREEN
MH 2	Review Carers Support Services to ensure equity of distribution across Kent.	GREEN	GREEN
MH 3	Expand One Stop Shop Model for employment services	AMBER	GREEN
MH 4	Develop strategic and operational links to promote the physical health of service users.(Pilot in East Kent)	GREEN	GREEN
MH 5	Develop a range of supported accommodation which includes the Horizons- a supported housing and recovery service project.	AMBER	GREEN
MH 6	Mental Health Act Implementation	AMBER	GREEN

At Outturn Monitoring point:

- 100% Tasks Completed

Business Plan Performance 2008-9

Supporting People

Summary Business Plan details

Core Business

The Supporting People (SP) Programme is a grant-funded government initiative, which aims to provide a better quality of life for vulnerable people and enable them to develop and sustain their capacity to maintain their housing situations. In providing such welfare services, the Programme seeks to prevent the problems that can lead to hospitalisation, institutional care and homelessness.

The Supporting People Team is responsible for the implementation of the Programme, in accordance with the directions of the Commissioning Body. Its operational functions include contracting, paying for and monitoring housing related support services, the performance review and reporting of the programme and the production and co-ordination of policy and strategy as it pertains to the programme. The setting of eligibility criteria, which does not include personal care or domiciliary care which is funded through mainstream Kent Adult Social Services budgets, is a responsibility of the Team. Although not directly responsible for the delivery of services, the Team is additionally responsible for management of the referral system for all Floating Support services delivered in the County.

Planned outcomes

See Director's Statement

What was achieved

- 85% of projects were completed
- See activity examples and data attached.

Staffing

	2008/09	2009/10
Grade KS 13 (or equivalent) and above	1.0	1.0
Grade KS 12 (or equivalent) and below	17.86	17.86
TOTAL	18.86	18.86
Of the above total, the estimated FTE which are externally funded		18.86

Key Performance Indicators & Activity Levels

Core Service Activity	Core Service Activity	Half Year Position	Outturn
1	At end March 2009, all providers will have received the correct payment on the specified date known to all providers. All payments shall have been made in accordance with the contractual terms and conditions applied to fixed capacity, block subsidy and block gross payment models.	AMBER	▲ GREEN
2	Data contained within SWIFT database will be maintained and updated with accurate information	AMBER	▲ GREEN
3	All complaints, adult protection alerts and serious incidents will be responded to within stipulated Supporting People procedures Kent and Medway Adult Protection procedures and Kent County Council procedures.	AMBER	▲ GREEN
4	The quality of services provided to service users will be improved through Contract monitoring procedures and processes. Officers will validate service compliance with quality levels of services as stipulated within the Supporting People Quality Assessment Framework	AMBER	▲ GREEN
5	The accuracy and completeness of performance indicator data from providers will be improved by ensuring that 100% of providers return their workbooks within the published deadlines. All anomalies will be investigated and resolved with the provider as they arise each quarter. Data verification exercises will also be carried out on a 20% sample of services each quarter.	AMBER	▲ GREEN
6	Two business benefits will be demonstrated as a result if improved cross authority working between contract departments of Supporting People Teams in the South of England.	AMBER	▲ GREEN
7	A need analysis will be conducted every six months enabling future planning and commissioning to be best matched to local demand.	AMBER	▲ GREEN
8	Data quality and availability of performance information regarding the floating support referral process will be improved and developed by the end of March 2009.	AMBER	▲ GREEN
9	Compliance with the Audit commission's new KLOE's for the Supporting People Programme will be monitored and managed. The Audit Commission recommendations/ action plan will be delivered by March 2009. Areas identified as below average performance will be discussed as standing items at Team Meetings until satisfactory improvement has been achieved.	AMBER	▲ GREEN
10	Service Users will become actively and demonstrably involved in the development and strategic planning of the Supporting People Programme through involvement and consultation identified via the strategy.	AMBER	▲ GREEN
11	The team will increase the level and quality of multi-agency working with probation, health, housing sector, districts and boroughs, adult social services and voluntary organisations throughout 2008/09 including in house contracting units and the regular provision of referral data to partner agencies.	AMBER	▲ GREEN

12	The team will continue to ensure that fair access to services is offered to all potential and existing service users through conducting quality impact assessments on all procedures and protocols.	AMBER	▲ GREEN
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The Department of Communities and Local Government (CLG) set two Key Performance Indicators for Supporting People programmes

KPI 1 - Service users who are supported to establish and maintain independent living as a percentage of the total number of users who have departed

KPI 2 - Service users who have moved on in a planned way from short term services as a percentage of all who have moved on

The CLG publish the performance of all programmes nationally against these indicators on the SPKweb www.spkweb.org.uk. The quarters are published in arrears; the latest publication relates to Quarter 23 October 2008 – January 2009.

The Core Strategy Development Group and Commissioning Body have agreed targets of a target of 98% for KPI 1 and 71% for KPI 2 for 2008/09. The KPI 2 target is also the Supporting People target for Local Area Agreement 2. The target for 2008/09 is 66.7%.

	Quarter 21 KPI 1 (%)	Quarter 22 KPI 1 (%)	Quarter 23 KPI 1 (%)	Quarter 23 Regional Figure (%)	RAG rating (Target 98%)
Accommodation based services	98.95	99.05	98.93	99.17	GREEN
Floating Support Services	97.84	97.15	96.97	96.95	AMBER
Overall KPI 1	98.62	98.48	98.29	98.67	GREEN

*based on previous quarter

Source: CLG

YEAR to DATE ANALYSIS of LOCAL PERFORMANCE – KPI 1

Quarterly performance by primary client group

Primary Client group	Quarter 21 KPI 1 (%)	Quarter 22 KPI 1 (%)	Quarter 23 KPI 1 (%)	Quarter 23 Regional Figure (%)	RAG rating (Target 98%)
People with drug problems	100	96.15	96.52	93.57	AMBER
Frail Elderly	98.43	97.46	96.97	97.61	AMBER
Generic	96.99	95.92	93.41	95.5	AMBER
Homeless families with support needs	75	88.36	85	93.57	RED
Learning disability	98.58	98.89	98.45	99.39	GREEN
Mental health	95.88	92.95	94.95	98.01	RED
Offenders	95.29	90.11	93.33	93.14	RED

Older people with mental health problems	100	100	100	100	GREEN
Older people with support needs	98.98	99.09	99.06	99.17	GREEN
People with HIV/AIDS	93.10	100	100	100	GREEN
Physical/ sensory disabilities	100	100	100	99.06	GREEN
Single homeless with support needs	95.93	95.86	96.07	95.29	RED
Teenage parents	97.14	93.00	94.38	94.29	RED
Those at risk of domestic abuse	100	99.24	100	97.52	GREEN
Young people at risk	93.41	94.00	92.66	92.47	RED
Total (Target 98%)	98.62%	98.48%	98.29%	98.67%	GREEN

- The overall proportion of those maintaining independent living exceeded the target in quarter 23, though remains below target in floating support services.
- Services for homeless families with support needs show the lowest proportion of those maintaining independent living in quarter 23 and have consistently done so throughout the year.
- Similarly, services for people with mental health problems have not met the target set by the Commissioning Body in the quarters to date.
- Although single homeless services have failed to reach the target set by the Commissioning Body, their performance has exceeded the regional figure this quarter. The same can be said of Kent's services for young people at risk, offenders and teenage parents.
- Services for people with learning disabilities, older people with mental health problems/support needs, HIV/Aids, physical/sensory disabilities and those fleeing domestic abuse have all reached or exceeded the 98% target set.
- The Supporting People team continues to work closely with the providers of services below the target to examine the reasons for poor performance levels and agree the steps to be taken to improve. In some cases, this has lead to reconfiguration of services or contract termination.

REGIONAL and NATIONAL COMPARISION of LOCAL PERFORMANCE INDICATORS – KPI 1

The table below gives the performance of the Kent programme against Key Performance Indicator 1 for the last four quarters published by CLG

KPI1

	2007/08	2008/09		
	Q20	Q21	Q22	Q23
Kent	97.11%	98.62%	98.48%	98.29
Regional	98.06%	98.40%	98.59%	98.67

National	98.18%	98.26%	98.38%	98.44
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Key Performance Indicator 2 (KPI 2)

Primary Client group	Quarter 21 KPI 2 (%)	Quarter 22 KPI 2 (%)	Quarter 23 KPI 2 (%)	Quarter 23 Regional Figure (%)	RAG rating Target 71% for 10/11 66.7% for 08/09
People with alcohol problems*	50	100		82.35	GREEN
People with drug problems	80	40	100	55.56	GREEN
Homeless family with support needs	65.22	92.31	96	88.31	GREEN
Learning disability*	0	100		91.67	AMBER
Mental health	92.31	92.31	68.42	77.71	GREEN
Offenders	69.23	56	40	56.41	AMBER
Older people with support needs*	100			100	GREEN
Physical/sensory disability			100	100	GREEN
Rough sleepers	45.51	43.90	55.10	59.61	RED
Single homeless with support needs	80.83	71.3	68.81	64.37	GREEN
Teenage parents	100	80.0	75	89.8	GREEN
Those at risk of domestic abuse	89.83	84.29	86.21	83.39	GREEN
Young people at risk	63.27	67.12	52.83	73.49	AMBER
Young people leaving care	50	62.50	65	72.00	RED
Total (Target 71%)	66.38%	67.65%	65.56%	72.38%	AMBER

Source: CLG

* denotes services with no departures in quarter 23

- Whilst overall the KPI 2 is below target this quarter, performance against this volatile indicator overall has improved significantly in some client groups since the previous quarter. Notably, services for people with drug problems have improved their KPI 2 figure from 40% last quarter to 100% in quarter 23.(Table 2.3)
- Services for homeless families, rough sleepers, and young people leaving care have all improved their KPI 2 figure since the previous quarter.
- However, there were noticeable falls in performance in services for those with mental health problems, offenders and young people at risk.

The team has carried out performance improvement visits to providers of services where the KPI 2 figure was a cause for concern. Some of these visits have resulted in a reconfiguration of services or additional training on the completion of the workbook. It is anticipated that as a result of these visits, the programme’s KPI 2 figure will show an improvement next quarter.

REGIONAL and NATIONAL COMPARISON of LOCAL PERFORMANCE INDICATORS – KPI 2

The table below gives the performance of the Kent programme against Key Performance Indicators 2 for the last five quarters published by CLG

KPI2

	2007/08	2008/09		
	Q20	Q21	Q22	Q23
Kent	80.7%	66.4%	67.65%	65.56%
Regional	67.6%	68.3%	70.54%	72.38%
National	68.6%	70.8%	70.78%	72.88%

Source: CLG

4.2 The table shows that the overall success rate in short term services is 75.9%, an improvement of over 2.5% on the previous quarterly figure.

4.3 Particularly improved in the Economic Wellbeing category is the percentage of individuals seeking work that have either obtained or participated in paid employment (78.1%).

Activity/ Outcomes

FTE	Outturn Budget	Outcomes
16.36	32,929.30	Providing housing support to over 22,000 people

Further examples of outcomes:

Focus on Outcomes by Service Type

The outcomes dataset for short term services is based on returns made for clients who left SP funded services between 6 October 2008 and 4 January 2009, which were received and validated by the Centre for Housing Research at the University of St Andrews.

Outcome returns received by Service Type

Service Type	Total Returns
Direct access	94
Floating support	569
Foyer	40
Outreach service	146
Supported housing	332
Women's' refuge	114
Grand Total	1295

Outcome returns received by primary client group of the service user

Primary Client Group	Total
Alcohol problems	52
Drug problems	33
Frail Elderly	1
Generic	115
Homeless families with support needs	36
Learning disabilities	38
Mental health problems	139
Traveller	1
Offenders at risk of offending	124
Older people with support needs	26
People with HIV/Aids	1
Physical or sensory disability	22
Rough sleeper	10
Single homeless with support needs	394
Teenage parents	59
Women at risk of domestic violence	162
Young people at risk	59
Young people leaving care	21
<i>Not Given</i>	2
Grand Total	1295

For the purposes of the outcomes framework, provision can be divided into six categories of service types

- Direct access
- Floating support*
- Foyer
- Outreach
- Supported housing
- Women's refuge

* *Floating support is not considered to be a short term service within the context of performance workbooks.*

For services such as direct access, outreach, and women's refuges, most service users remained in the service 6 months or less. The very short nature of these services can have an influence on the ability of the provider to deliver successful outcomes in some high level categories.

Economic Wellbeing in short term services.

Whilst achievement levels in the sub-group "Obtain/participate in paid work" have improved in short term services since last quarter, there is a correlation between the comparatively low success rate in the shortest term services, i.e. women's refuges, direct access and outreach

Enjoy and Achieve in short term services

The strongest performance in this category for all service types was in the sub level outcome contact with external groups . Success rates for all service types exceeded 80% against this outcome and reached 100% in foyers.

Be Healthy

Direct access achieved the sublevel outcome "Use technology to maintain independence" in 100% of cases, along with foyers and women's refuges . The poorest performance against any outcome in this category was recorded in women's refuges where only 12.5% of those seeking to manage substance misuse did so successfully.

Stay Safe

The strongest performance in this category was recorded in foyers where 100% of outcomes were achieved in all but one sublevel.

Positive contribution

This outcome has been best achieved in women's refuges (92.9%). It is also one of the most successful for outreach services (72.9%)

Summary of outcomes data in short term services, April 08 – Jan 09

	Yes	No	Unanswered
Q24 Was this a planned move from service	770 (59.5%)	509 (39.3%)	16
Q25 If yes did this achieve greater independence	697 (90.5%)	73 (9.5%)	0

Total of 1295 returns made	Was support need identified?		Was the outcome achieved?	
	Type of Support	Yes	Yes	As a % of those needing support
Achieving Economic Wellbeing	Total needs identified 1829		Total successful 1482 (81%)	
To maximise income	927		823	88.0%
To reduce debt	560		392	70%
To obtain /participate in paid work	342		267	78.1 %
Enjoy and Achieve	Total needs identified 1659		Total successful 1251 (75%)	
To participate in training/ education	410		241	58.7%
To participate in informal learning	296		231	78%
To participate in work-like activities	224		123	54.9%
To establish contact with external groups	729		656	90%
Be Healthy	Total need identified 1352		Total successful 915 (68%)	
Manage physical health	474		366	77.2%
Manage mental health	451		303	67.1%
Manage substance misuse issues	377		203	53.8%
Technology helping to maintain independence	50		43	86%
Stay Safe	Total needs identified 1412		Total successful 1048 (74%)	
To maintain their accommodation	708		517	73%
To comply with statutory orders	218		149	68.3%
To better manage self harm	110		90	81.8%
To avoid causing harm to others	106		71	67%
To minimise risk of harm from others	270		221	81.9%
Make a Positive Contribution	Total needs identified 758		Total successful 627 (83%)	
To develop confidence and choice	758		627	82.7%
Total	7010		5323	75.9%

Performance Against Projects/Developments / Key Actions

At the half-year point,

100% were "On Course"

		Half Year Position	Outturn
SP 1	Refresh the Five Year Strategy	AMBER	GREEN
SP 2	Five Year Strategy	AMBER	AMBER
SP 3	Countywide move-on strategy.	AMBER	GREEN
SP 4	Performance Management & Governance of the Programme will be improved.	AMBER	GREEN
SP 5	Elected members	AMBER	GREEN
SP 6	Value for Money	AMBER	GREEN
SP 7	Service User Involvement	AMBER	GREEN

At Outturn Monitoring point:

- 85.7% Task Completed
- 14.3% On course and being carried forward