

**Headquarters
Kent Adult Social Services Directorate
Annual Business Unit Operational Plan
2008/9**

MANAGING DIRECTOR'S INTRODUCTION

Introduction

This year the structure of our Unit plans is substantially different, reflecting changes over the last two years within the Directorate and the Health Service. We now have an East Kent Area and a West Kent Area Plan, which also incorporate those in-house services managed within the Areas. This major change has had implications for other Unit Plans too. Outlined below are some of the key issues which will impact on the Directorate's Business planning processes in the coming year. More detailed proposals can be seen in the Medium Term Plan and the appropriate Business Plans.

Service Challenges – National Context

'Our Health Our Care Our Say' – published two years ago has underpinned a major programme of change focussed on independence, personalisation and partnership working particularly with the Health Service. This programme of change is now moving into a further phase. Recently, Government has published a range of key documents including 'Putting People First', 'Transforming Social Care' and 'Valuing People Now'. In the summer the Government are expected to launch two key national strategies on carers and dementia. Furthermore, a Green Paper is expected shortly on the 'future funding of social care'. All continue to underline the core values of:

- Promoting Independence,
- Personalisation,
- Prevention and
- Partnership.

Aligned to this is the new performance framework being developed to focus on these priorities. This framework will be overseen by the new Care Quality Commission, and will stretch beyond the new 198 national indicators and Health's 'Vital Signs' to focus jointly on Health and social care. Annual Assessments will continue to be a key feature, which will feed directly into the new Comprehensive Area Assessment.

It has been well documented that Adult Social Services nationally continue to face major demographic challenges – people living longer, more people with more complex needs and people's expectations are growing. These issues have been highlighted in the recent report from CSCI 'The State of Social Care 2006-07'. The report also notes that this has led to 75% of Local Authorities raising their eligibility criteria to substantial or even critical, with more planning to do so. Kent is therefore unusual in maintaining moderate eligibility criteria.

Service Challenges – Kent Context

Within Kent the key priorities of Promoting Independence, Personalisation, Prevention and Partnership are embedded in The Vision for Kent, T2010 and Active Lives. Section 3 of the Medium Term Plan outlines in more detail how we aim to work towards these priorities in the next three years.

The accompanying Business Plans outline how these priorities will be delivered in the next year. Underneath the Unit Business Plans, the Directorate has, where appropriate, District, Service and Team plans which feed into personal action plans and set out in further detail the ways in which individuals and teams will work towards the stated priorities.

In working with Health and other partners, the Joint Strategic Needs Assessment is helping identify the future health and wellbeing needs of the Kent population, and is being used to agree shared priorities and strengthen joint commissioning. The JSNA provides strong evidence that investment is needed in preventive and early intervention services, given the significant demographic pressures facing Kent. For this reason, the Directorate will be leading on the following two targets within Kent Agreement 2:

- *Improved Health and Wellbeing* - NI125 Achieving independence for older people through rehabilitation/intermediate care.
- *High Quality Homes* - NI141 Number of vulnerable people achieving independent living (a Supporting People target).

Some of the key challenges for the Directorate this year are:

- **Active Lives for Adults (ALfA).** This is a major cultural change, which will see a shift in emphasis away from 'managing care packages' and towards personalisation - supporting people in identifying how best to meet their own needs. It will transform all front line services.
- **Workforce - KASS** continues to have a skilled and stable workforce. Staff Care package, Training and IIP have all contributed to maintaining this healthy position. As outlined already the future holds a range of challenges and to meet these the Directorate will need a skilled, committed workforce with the right 'skill mix'. Within ALfA workforce development is a major workstream. The issues regarding workforce extend beyond KASS to the Private & Voluntary Sector and the NHS. We have been working now for sometime with the Private and Voluntary Sector to develop the wider social care workforce as evidenced by such initiatives as 'Training 4 Care'. We are working with the PCTs to look at some of these issues. The Directorate has developed a detailed workforce plan to address these and other issues such as succession planning and continuous improvement.
- **Mental Health.** Currently the Mental Health Trust is in the process of seeking Foundation Status and the outcome of this will have implications for the Directorate.
- **Valuing People Now.** As part of this review, the Local Authorities nationally are taking the lead on Learning Disabilities, including the transfer of resources and those people placed in NHS units. The Directorate is determined that the principles of person centred planning will be paramount in meeting the needs of those people transferring from the NHS. This will be a significant challenge for which significant planning is already underway.
- **Transition.** This is a key T2010 Target that we share with CFE. Good transitional planning is a key element ensuring independence and personalisation and is a key issue in Valuing People Now. Implementing the recommendations of the recent select committee will be a key driver.
- **Carers.** Kent is committed to implementing the recommendations of the recent KCC Select Committee report, and a National Carers Strategy is expected this year.

Efficiency & Innovation

The drive for innovation and efficiency is underpinned by the Directorate's Modernisation agenda. This agenda is focussed on the personalisation of services, which will in turn lead to efficiencies and improved outcomes. The Modernisation Board is overseeing this and key issues for this year are:

- ALfA.
- Development of mobile working.
- The residential change programme with the NHS to enable people with learning disabilities to live fulfilled lives in the community, with access to the full range of activities in the community.
- A Strategic Review of Older People's Services.
- The continued development of the Telecare and Telehealth projects. The Government has awarded Kent £5.1m, for a Whole Systems Demonstrator to enable Health and social services to make new technologies available for more people to live independently. The project will demonstrate integrated working with Health through the application of assistive technology.

Personalisation and Choice

Personalisation and Choice are key drivers for the Directorate, and are fundamental to ALfA. We continue to increase the numbers of people who are using Direct Payments. We are looking at a range of initiatives, which includes the increasing take up of the Kent Card. In developing ALfA and other initiatives to promote personalisation, we have involved the public, particularly those who use our services.

A significant issue in the drive for 'personalisation' is ensuring that the issues of equality and discrimination are championed. In line with the Council's Equalities Strategy, the Directorate has developed an Equalities Work Programme (Oct 2007-Mar 2009) to address the needs of staff, service users and carers. It sets out how Kent Adult Social Services will promote equality of opportunity, enhance community cohesion and tackle unfair discrimination. Currently work is taking place with the Partnership Board, District Groups and other agencies to tackle issues of 'hate crime' that people with Learning Disabilities have experienced. This was an issue which was highlighted during the work with the public on developing Active Lives.

Excellent Services and Continued Improvement

The Directorate has robust performance and financial management systems in place, which enable us to evaluate and improve services. A significant part of this involves engagement and feedback from the public. The Directorate has a strong ethos of public involvement and the public are engaged in a variety of ways, including being involved in the recruitment of staff, at all levels.

Involving the public in producing Active Lives and the recent work the Directorate has led in developing Kent's Strategy for Later Life are key examples of how the Directorate engages the public in shaping future priorities.

The Directorate has a strong customer care ethos. Outcomes and trends from complaints feed directly into the business planning process. A major development for the next year is the possible introduction of a single complaints process for Health and social care. Following a recent consultation '*Making Experiences Count*' the Department of Health are identifying several areas to pilot this process with a view to full implementation in April 2009.

Partnership and Joint Working

The future development of seamless health and social care is dependent on the close working relationship between KCC and the NHS. The new PCT arrangements in Kent offer excellent opportunities for partnership working, building on a successful history of close working relationships with the health service.

In developing shared priorities and joint commissioning arrangements with Health, the Joint Strategic Needs Assessment with Health will strengthen joint commissioning, which is essential to make best use of resources to achieve outcomes as determined by the assessment of need. Another significant driver for KCC's working relationship with Health is the Public Health Strategy, the implementation of the action plan stemming from the Strategy, and the Annual Public Health Report.

The Directorate has a strong relationship with the Voluntary and Private Sector. Around 85% of services are purchased from outside the Directorate. We will continue to build upon partnerships with the private and voluntary sector, working closely to develop the new commissioning arrangements that are needed as more people choose to direct and control their own support.

The Directorate now also works more closely than ever with District and Borough Councils over housing issues, sustainable development (including ensuring good community infrastructure in the growth areas), and social inclusion.

Performance and Risk

For the sixth year running the Directorate maintained its 3 star status and a major driver will be to maintain and improve on this performance. As outlined above, the performance framework is currently undergoing significant change and increasingly the performance of adult social care will be intrinsically linked to that of the Health Service in Kent.

A major challenge will be to continue to provide high quality services within a balanced budget. The Directorate is currently managing significant increases in activity, which is placing major pressure on available resources. The key factors are that both demand and the cost of providing social services are increasing. The reasons for this have been well documented in past reports and are briefly summarised below:

- Demand is increasing as a result of demographic changes. The numbers of older and disabled people in Kent are growing but, in addition, the level of need that individuals have is greater. For example, numbers of people with dementia are rising fast, as is the number of young people with severe and profound disabilities coming through the transition process.
- Increased choice and control (Direct Payments) is resulting in people who previously did not receive support now coming forward, so we are dealing with a tranche of unmet need.
- The Government's policy direction (as reflected in Active Lives) and the new initiatives we are putting in place, is raising public expectations of the support they wish to receive.

The big challenge is how to continue to invest further in the preventative and early intervention services (including intermediate care and other short-term support to people aimed at getting them independent after a crisis or accident) whilst still having to deal now with those who need intensive support.

This year the management of the Central Government Grants, such as the carers grant, will be different. From 2008-09 these will be allocated as part of the Area based grant through the Local Area Agreement framework. Given that these grants make up a significant part of the Directorate's budget, it will be essential to ensure that they are distributed appropriately.

Oliver Mills

SECTION 1: SERVICE PROFILE

PURPOSE OF THE SERVICE

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

RISKS

Given the strategic nature of this plan, the Directorate Risk Register and the controls apply and are attached as an appendix.

OPERATING CONTEXT

The context within which HQ operates is set out in the Managing Director's introduction. Within that, HQ is required to:

- Work with Members to set strategic direction, vision and policy for Kent Adult Social Services and to ensure this is communicated to, and implemented by, all managers and staff. This includes strategic budget management and the Medium-Term Financial Plan
- Support and encourage continuous performance improvement to sustain the Directorate's current 3 Star performance by using robust, meaningful information and research, and delivering statutory and corporate monitoring requirements
- Seek to stabilise the care market through the contracting and commissioning processes to ensure continuity and development of service provision for the future
- Work with central government to inform and influence future policy development and legislation
- Help ensure that the Directorate collaborates with other Directorates within KCC to meet County Council Targets and Objectives
- Ensure through our Public Involvement Strategy that:
 - the Directorate puts service users and carers first
 - service users and carers have an active role in monitoring services provided
 - service users and carers receive high standards of customer care
- Support the sustainable communities agenda, particularly in relation to securing developer contributions for community infrastructure, and support community regeneration initiatives, particularly those geared towards vulnerable people or areas of deprivation
- Optimise use of External Funding in partnership with the voluntary and community sector
- Make best use of Directorate's property portfolio and assist in its modernisation, including the securing of alternative funds (including PFI) when appropriate
- Promote compliance with Data Protection, Human Rights, Freedom of Information and Equalities legislation

- Deliver the Directorate's active commitment to inclusive and accessible services and staffing policies
- Oversee and drive the modernisation agenda, including ALfA (Active Lives for Adults, the Directorate's transformational programme), the developing Capital Strategy, modernisation of in house Older People's residential care, capital elements of the "what makes a good day" project for Learning Disability services and the maintenance/upgrade of ICT systems and websites to support these.
- Develop and implement workforce planning, to ensure that we continue to deploy a competent, professional and appropriately skilled workforce over the medium to long term as needs evolve. This includes partnership work with the independent sector, as well as looking at our own workforce.
- Take the lead on identifying and proposing responses to all of the Directorate's risks, and leading on planning for and implementation of appropriate emergency planning and business continuity planning arrangements. This includes the strategic lead role for Health and Safety.
- Develop the Office Strategy and mobile working as part of the way we do business.

CUSTOMER INVOLVEMENT

We continue our commitment to actively involve current and potential service users and carers in the planning, delivery and monitoring of our services to ensure that services best fit the needs of those people using them.

Not only are lessons learned from complaints that directly feedback into services thereby improving the experiences for other users, but we are also constantly gaining feedback from complainants on the complaints process itself, as a mechanism for continual evaluation and improvement of the process.

Questionnaires have recently been developed to gain feedback from managers, service users/carers and the successful candidate on the User Involvement in Recruitment process. The outcome of this data will be fed directly into the process as a means of continual improvement of the process.

Examples of how HQ works with current and potential service users include:

- Partnership Boards which engage users of Learning Disability services at a District and Strategic Level. These are particularly successful forums for engaging Learning Disability service users in the running of the service
- Involving Users and Carers in recruitment
- Development and monitoring of the Disability Equality Scheme
- Development of 'social marketing' and initiatives such as 'Activmobs' (communities developing their own activities)
- Regular meetings are co-ordinated with the public, our Cabinet Member and our Managing Director
- We have regular Telehealth and Telecare user groups
- Quality Service Awards seek direct nominations from service users and carers
- Workshops are run on specific issues (eg Active Lives; Kent's Strategy for Later Life; etc)
- Full Equality Impact Assessments have been undertaken of several HQ policies including charging for domiciliary care (which in itself involved a major consultation exercise).

In 2008-09 we will be conducting qualitative surveys in relation to Carers and young disabled people going through transition from Children's Services to Adult Services as part

of the Towards 2010 work. We will also be developing self-assessment questionnaires as part of the ALfA work, and also working with other SE authorities to develop a means of measuring the extent to which social care support delivers the outcomes that people want.

REVIEW OF PERFORMANCE 2007/08

KEY PERFORMANCE INDICATORS

| | Actual 2005/06 | Actual 2006/07 | Target 2007/08 | Target 2009/10 |
|---|-------------------|-------------------|-------------------|-------------------|
| PAF C72. Admissions of supported residents aged 65 or over to residential/ nursing care per 10,000-population aged 65 and over. | 73 | 72 | 71 | N/A |
| PAF C28 BVPI 53. KPI Intensive Home Care per 1000 population aged 65 and over | 11 | 11 | 11 | N/A |
| PAF C32 BVPI 54. Older People aged 65 and over helped to live at home per 1000 population aged 65 and over | 75 | 75 | 76 | N/A |
| PAF D40 BVPI 55. Clients receiving a review as a percentage of adult clients receiving a service. | 85 | 86 | 88 | N/A |
| PAF D39 BVPI 58. Percentage of people receiving a statement of their need and how they will be met. | 98 | 98 | 99 | N/A |

The national release of our 2006-7 performance ratings showed that using the 21 indicators that are directly comparable with the previous year's results, the banding comparison is as follows:

(Band 5 – OPTIMUM Performance, Band 4 – GOOD performance, Band 3 – ACCEPTABLE performance, Band 2 – Ask Questions about performance, Band 1 – Investigate urgently)

| | 2005/06 | 2006/07 |
|-----------------|---------|---------|
| BAND 1 | 0 | 0 |
| BAND 2 | 3 | 2 |
| BAND 3 | 4 | 4 |
| BAND 4 | 6 | 6 |
| BAND 5 | 7 | 8 |
| CSCI not banded | 1 | 1 |
| TOTAL | 21 | 21 |

Over two thirds of our performance indicators were rated as good or optimum. This included some excellent improvements in:

- Providing equipment and adaptations more quickly to service users.
- Significant increases in the take up of Direct Payments.
- Providing more services within four weeks of assessment to all service users.
- Reducing the number of older people being admitted to permanent residential and nursing care.
- Reducing the number of people aged 18-64 in permanent residential care (LAA target).
- Supporting people with a disability or mental health need to live at home.

All of the above have been maintained throughout 2007/08 and highlighted in regular monitoring with CSCI.

The way in which Government is monitoring local government is undergoing a radical change. The Performance Assessment Framework indicators will no longer be collected after this year, and will be replaced by a National Indicator set with fewer social care indicators within it. This new framework is designed to reflect the outcomes and objectives set out in the white paper "Our Health, Our Care, Our Say". It is also intended that this will bring together the performance management in both social care and health.

From 2007/08, Kent Adult Social Services will be measured against this new performance framework. As this is a new and still developing framework, with the consultation period only just complete, the key performance indicators are listed below, and targets and updated monitoring will be provided at half year.

The Directorate plays a key role in implementing KCC's aspiration to achieve Level 3 of the Equality Standard for Local Government by March 2008 and Level 5 by March 2010. ESLG is a comprehensive guide to our delivery of inclusive and accessible services and staffing policies.

KEY ACHIEVEMENTS/OUTCOMES IN 2007/08

Kent Adult Social Services continues to achieve top rating and has done so for six years and is successfully maintaining that standard of excellence. Kent Adult Social Services continues to support KCC in achieving targets set out in Towards 2010.

- Successful project management of the performance framework process for adult social services ensuring we maintained our **3 star status**.
- Successfully bidding to gain the POPPS bid which has now been launched in East Kent – INVOKE.
- Telehealth / Telecare - Successfully achieving the **WSD grant**, which is now being implemented.
- The Kent Telehealth Pilot team was the winner of the Telehealth award at this year's Health Business Awards. Held at the Royal College of Physicians on 13 December, the awards, organised by Health Business Magazine and Public Sector Publishing, concentrate on innovation, dedication and teamwork and recognise and celebrate the significant contributions made each year by NHS Trusts and the individuals they employ. First, second and third places in all the other award categories went to NHS Trusts and teams, so it was a remarkable achievement for a team led by staff in Kent Adult Social Services to take first prize in its category.
- A further Housing PFI with four District Councils (Ashford, Dover, Thanet and Tunbridge Wells) for 182 Extra Care and Supported apartments for vulnerable people.
- Active Lives – a major process of engagement with the public in looking at KASS's priorities for the next 10 years. The new version was written with a editorial panel from the public.
- Implementation of user involvement recruitment policy.
- Successful implementation of Domiciliary Charging policy. Given the potential controversial nature of the changes, lessons were learnt from the past and it was implemented with fewer difficulties.

SERVICE COMPARISON

| <u>Comparators with other Authorities</u> | (Data from end March 07) | | | | | | |
|---|--------------------------|-------|--------|-------|-------|---------|-------------|
| | Kent | Essex | Gloucs | Lancs | Hamps | Suffolk | West Sussex |
| Intensive Home care per 1000 population aged 65 and over | 11.0 | 9.3 | 8.0 | 19.1 | 9.5 | 9.7 | 10.0 |
| Older people aged 65 and over helped to live at home per 1000 population aged 65 and over. | 75.0 | 64.5 | 63.5 | 66.1 | 83.5 | 72.0 | 56.5 |
| No. of people with a learning disability supported in their own homes per 1000 population 18-64 | 3.2 | 3.1 | 2.5 | 3.5 | 2.7 | 2.7 | 2.1 |
| No. of people with a physical disability supported in their own homes per 1000 population 18-64 | 5.4 | 3.7 | 4.3 | 4.2 | 5.9 | 4.5 | 4.7 |
| Percentage of people provided with a copy of their care plan. | 98 | 100 | 92 | 96.3 | 96.4 | 100 | 100 |

SECTION 2: PRIORITIES AND OBJECTIVES

KEY RESPONSIBILITIES OF THE SERVICE

| | Key Corporate / Directorate Targets | |
|----------------------|--|---|
| PLAN | NAME OF TARGET IN FULL | LEAD OFFICER |
| Towards 2010 | Target 52 – Increase the number of people supported to live independently in their own homes | Joint Lead on Target: Anne Tidmarsh, Chris Belton, Michael Thomas-Sam, Jeremy Blackman, David Weiss |
| Towards 2010 | Target 53 – Strengthen the support provided to people caring for relatives and friends | Lead for Target: Mary Silverton |
| Towards 2010 | Target 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 | Joint Lead for Target: Anne Tidmarsh, Chris Belton, Jan Harker |
| Towards 2010 | Target 55 – Ensure better planning to ease the transition between childhood and adulthood for young people with disabilities and to promote their independence | Joint Lead for Target: Michael Thomas-Sam, Colin Feltham |
| Towards 2010 | Target 56 – Improve older people’s economic well-being by encouraging the take-up of benefits | Lead for Target: Chris Grosskopf |
| The Kent Agreement 2 | NI 125 – Achieving independence for older people through rehabilitation/intermediate care | Support for Target |
| The Kent | NI 141 – Number of vulnerable people achieving | Support for Target |

| | | |
|--|---|-----------------------------------|
| Agreement 2 | independent living | |
| National Indicator | NI 127 – Self reported experience of social care users | Support for Target |
| National Indicator | NI 130 – Social Care clients receiving Self Directed Support (Direct Payments and Individual Budgets) | Support for Target |
| National Indicator | NI 132 – Timeliness of social care assessment | Support for Target |
| National Indicator | NI 133 – Timeliness of social care packages | Support for Target |
| National Indicator | NI 136 – People supported to live independently through social services (all ages) | Support for Target |
| National Indicator | NI 145 – Adults with learning disabilities in settled accommodation | Support for Target |
| National Indicator | NI 146 – Adults with learning disabilities in employment | Support for Target |
| National Indicator | NI 135 – Carers receiving needs assessment or review and a specific carer's service, or advice and information | Support for Target |
| National Indicator | NI 139 – People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently | Support for Target |
| National Indicator | NI 124 – People with a long-term condition supported to be independent and in control of their condition | Support for Target |
| National Indicator | NI 131 – Delayed transfers of care from hospitals | Support for Target |
| National Indicator | NI 149 – Adults in contact with secondary mental health services in settled accommodation | Support for Target |
| National Indicator | NI 150 - Adults in contact with secondary mental health services in employment | Support for Target |
| National Indicator | NI128 – User reported measure of respect and dignity in their treatment | Support for Target |
| National Indicator | NI 142 – Number of vulnerable people who are supported to maintain independent living | Support for Target |
| Equalities Strategy | Promotion and delivery of Disability, Race and Gender Equality schemes together with other accessibility and inclusivity targets for Age, Faith, Sexuality and social inclusion | Lead for Target: Keith Wyncoll |
| Equality Standard for Local Government | Achieve Level 3 by March 2008, Level 4 by March 2009, Level 5 by March 2010 | Lead for Target: Keith Wyncoll |

These business objectives are monitored to ensure they will be delivered. Risks associated with potential non-delivery, and the controls in place to mitigate those risks, have been assessed and documented as part of the annual operating plan process. A risk plan has been developed as necessary.

Towards 2010 detailed action plans can be found at

<http://www.kent.gov.uk/publications/council-and-democracy/towards-2010-action-plans.htm>

CORE SERVICES AND FORECAST ACTIVITY LEVELS

Director of Resources

The Resources Team assists the Director in managing resources in the most effective way by:

- Co-ordinating the property portfolio for Kent Adult Social Services
- Facilitating the review and modernisation of capital assets and providing direct support to major capital projects
- Liasing with the Personnel and Finance Business Support Teams that remain in the corporate function
- Ensuring resources are managed effectively (budgets, staff, information technology, property)
- Ensuring Personnel, Finance, Property and IS support is provided to all managers to acceptable levels
- Leading and co-ordinating the Directorate's management of Health and Safety Issues
- Advising and supporting the Directorate on all Emergency Planning and Business Continuity issues
- Project managing major projects including PFI and Capital developments that are key to the Modernisation Programme
- Leading and developing the Directorate's medium term financial planning
- Managing the Electronic Services Programme Unit, including SWIFT
- Co-ordinating and prioritising the use of information systems requirements
- Maintaining and developing a range of interactive websites
- Promoting e-Government and the use of technology
- Managing the Training and Development agenda to ensure the cost effective future provision of a skilled, knowledgeable workforce required helping the people of Kent to live safely and independently in their local communities by:
 - Ensuring that funds for training for the social care sector are spent wisely and creatively
 - Commissioning and monitoring the quality of training within the framework of the Directorate Training Plan

Director of Policy, Performance and Quality Assurance

The PPQA Team sets the strategic direction for the Directorate by:

- Ensuring the Directorate develops sound strategic and operational policies, involving the public (particularly service users and carers), to deliver high quality social care services for all adults and their carers in line with national policies and County Council priorities.
- Developing practice guidance and procedures for Kent Adult Social Services and providing advice to managers and practitioners to ensure consistent interpretation and implementation and to promote better practice
- Designing and carrying out quality audits to ensure that practice is consistently applied in line with policies and procedures and is of high quality
- Leading the development of multi-agency commissioning framework which is informed by the information developed through the Joint Strategic Needs Assessment process
- Ensuring that sound policies and procedures are in place to make sure that vulnerable adults are safeguarded
- Co-ordinating responses to corporate and national policy makers, influencing the future shape of policies, and supporting the Strategic Management Team through forward intelligence, interpretation and dissemination of policy
- Ensuring that the statutory returns and internal management information reports are delivered on time and with high quality

- Managing and co-ordinating the Annual Review Process with the Commission for Social Care Inspection, which determines the Directorate's 'star rating'
- Managing and co-ordinating the business planning process for the Directorate, the monitoring of targets (including business planning, Towards 2010 and Kent Agreement 2) and the Risk Management process.
- Promoting the "sustainable communities" agenda within the Directorate, and ensuring that Kent Adult Social Services influences the corporate agenda on this
- Providing analysis and support in relation to partnerships and inter-agency planning, performance management and performance information, health scrutiny and governance
- Supporting community development and community regeneration initiatives
- Securing external funding to support the Directorate's objectives, and supporting the development of the voluntary sector and its access to external funding
- Supporting the development of, even if that and voluntary sector relationships, Best Value plans, policy and reviews and PSA/ LAA monitoring within Kent Adult Social Services
- Co-ordinating the research and information services through the Library and Research Centre, and ensuring research is at the forefront of our activity and informs future developments
- Leading on public involvement, including user and carer involvement, customer care and complaints, internal and external communication, public information
- Fostering and developing strategic relationships with a range of stakeholders including the health economy (SHA, PCTs, Trusts) Central Government and the independent and voluntary sectors
- Delivering contracting policy and tools that continuously ensure the Directorate has access to social care in line with commissioning needs and provide value for money. Specifically:
 - Secure supply of Adult Services standard core care services through developing and implementing contracting strategies in line with service needs and financial constraints
 - Retain an overall understanding of the social care market in Kent, including price and supply pressures; in order to inform decision making and future developments
 - Retain a countywide framework for social care contract development and monitoring and ensure compliance
 - Maintain and develop strategic relations with CSCI, social care trade associations in Kent, providers and commissioners to ensure a joint approach and focus on delivery of quality social care services
 - Provide an effective Head of Profession role in order to promote and support the efficient and effective use of social care contracting in the Directorate
 - Recommend annual fees increase strategies that develop the social care sector in line with overall commissioning and local needs
- Supporting the delivery of the Directorate's Equalities Work Programme and Continuous Improvement Programme.
- Ensuring that physical and communication access to services is maintained and developed
- Ensuring that Directorate communications are as inclusively accessible as is possible or that interpretation (BSL, linguistic etc) is made available to service users or staff as necessary
- Ensuring that service planning is informed by the changing nature of Kent's population and that our services outreach to those who are 'hardly reached'

Revenue Budget

| ADULTS (OLDER PERSONS) - Budget & Services | | | | | | | | | | | | | |
|--|-----|-------------------------------|--|-----|----------------|---------------|----------------------|-------------------------------|-------------------|-----------------|-----------------|--------------------------|----------------|
| 2007-08 | | 2008-09 | | | | | | | | | | | |
| Controllable | FTE | Activity/Budget Line | | FTE | Employee costs | Running Costs | Contracts & Projects | Transfer Payments & Recharges | Gross Expenditure | External Income | Internal Income | Controllable Expenditure | Cabinet Member |
| Expenditure | | | | | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | |
| £'000 | | | | | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | |
| | | | | | | | | | | | | | |
| | | Residential Care | | | | | | | | | | | |
| 0.0 | | 41A | KCC Residential | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 10.9 | | 10.9 | KL |
| 0.0 | | 41B | Ind Sector Res Care | | 0.0 | 0.0 | -1722.3 | 0.0 | -1722.3 | 576.9 | | -1145.4 | KL |
| 0.0 | | 41D | Preserved rights - Older People residential homes | | 0.0 | 0.0 | 667.6 | 0.0 | 667.6 | -256.5 | | 411.1 | KL |
| 0.0 | | 41F | Linked Service Centres | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| 0.0 | | 41G | Preserved rights - Older People Res Pre 2002 | | 0.0 | 0.0 | -5.7 | 0.0 | -5.7 | 9.9 | | 4.2 | KL |
| 0.0 | | 41M | OPMH Residential | | 0.0 | 0.0 | 722.4 | 0.0 | 722.4 | -852.0 | | -129.6 | KL |
| 0.0 | | 41W | Integrated Care Centres | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| | | 41J | Preserved rights - Older People KCC Resid Pre 2002 | | | | | | | | | | |
| 0.0 | | TOTAL RESIDENTIAL CARE | | | 0.0 | 0.0 | -338.0 | 0.0 | -338.0 | -510.8 | 0.0 | -848.8 | |
| | | | | | | | | | | | | | |
| | | Nursing Care | | | | | | | | | | | |
| 0.0 | | 41C | Ind Sector Nursing Homes | | 0.0 | 0.0 | 826.0 | 0.0 | 826.0 | -197.4 | | 628.6 | KL |
| 0.0 | | 41E | Preserved rights - Older People nursing homes | | 0.0 | 0.0 | 111.3 | 0.0 | 111.3 | -112.1 | | -0.8 | KL |
| 0.0 | | 41H | Preserved rights - Older People Nursing Pre 2002 | | 0.0 | 0.0 | -9.5 | 0.0 | -9.5 | 73.1 | | 63.6 | KL |
| 0.0 | | 41K | RNCC | | 0.0 | 0.0 | 7303.0 | 0.0 | 7303.0 | -7303.0 | | 0.0 | KL |
| 0.0 | | 41N | OPMH Nursing | | 0.0 | 0.0 | 956.7 | 0.0 | 956.7 | -469.7 | | 487.0 | KL |
| 0.0 | | TOTAL NURSING CARE | | | 0.0 | 0.0 | 9187.5 | 0.0 | 9187.5 | -8009.1 | 0.0 | 1178.4 | |
| | | | | | | | | | | | | | |
| | | Domiciliary Care | | | | | | | | | | | |
| 0.0 | | 45A | KCC Home Care Service | | 0.0 | -347.8 | 0.0 | 0.0 | -347.8 | -79.9 | | -427.7 | KL |
| 0.0 | | 45E | Ind Sector Home Care | | 0.0 | 0.0 | 917.7 | 0.0 | 917.7 | 63.9 | | 981.6 | KL |
| 0.0 | | 45K | KCC Homecare | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| 0.0 | | TOTAL DOMICILIARY CARE | | | 0.0 | -347.8 | 917.7 | 0.0 | 569.9 | -16.0 | 0.0 | 553.9 | |
| | | | | | | | | | | | | | |
| | | Direct Payments | | | | | | | | | | | |
| 0.0 | | 45B | Direct Payments | | 0.0 | 0.0 | 845.7 | 0.0 | 845.7 | -146.4 | | 699.3 | KL |
| 0.0 | | TOTAL DIRECT PAYMENTS | | | 0.0 | 0.0 | 845.7 | 0.0 | 845.7 | -146.4 | 0.0 | 699.3 | |

| | | | | | | | | | | | | |
|------------|-----|---|--|---------------|---------------|----------------|------------|----------------|-----------------|------------|---------------|----|
| | | | | | | | | | | | | |
| | | Other Services | | | | | | | | | | |
| 0.0 | 45C | Ind Sector Day Care | | 0.0 | 0.0 | 767.9 | 0.0 | 767.9 | -69.1 | | 698.8 | KL |
| 0.0 | 45D | Ind Sector Meals Service | | 0.0 | 0.0 | -578.3 | 0.0 | -578.3 | 361.0 | | -217.3 | KL |
| 0.0 | 45F | Voluntary Orgs | | 0.0 | 0.0 | 168.6 | 0.0 | 168.6 | 42.7 | | 211.3 | KL |
| 0.0 | 45G | KCC Day Care | | 0.0 | 39.2 | 0.0 | 0.0 | 39.2 | 0.0 | | 39.2 | KL |
| | 45J | OTB OP | | 0.0 | 1464.9 | 0.0 | 0.0 | 1464.9 | -8.8 | | 1456.1 | KL |
| 0.0 | 45L | Internal Trading Older People Day Care | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| | 45N | POPPS/Invoke | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| | 45R | Brighter Futures | | 0.0 | 0.0 | 470.0 | 0.0 | 470.0 | -470.0 | | 0.0 | KL |
| 5.1 | 45T | Assistive Technology | | 1064.0 | 3303.2 | 0.0 | 0.0 | 4367.2 | -4362.0 | | 5.2 | KL |
| | TBC | Social Care Reform | | 273.0 | 25.0 | 553.4 | 0.0 | 851.4 | 0.0 | | 851.4 | KL |
| 5.1 | | TOTAL OTHER SERVICES | | 1337.0 | 4832.3 | 1381.6 | 0.0 | 7550.9 | -4506.2 | 0.0 | 3044.7 | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 5.1 | | TOTAL SERVICES FOR OLDER PERSONS | | 1337.0 | 4484.5 | 11994.5 | 0.0 | 17816.0 | -13188.5 | 0.0 | 4627.5 | |
| | | | | | | | | | | | | |
| | | Memorandum Items: | | | | | | | | | | |
| 0.0 | | Central Overheads | | | | | | | | | | |
| 0.0 | | Capital charges | | | | | | | | | | |
| 0.0 | | Directorate Overheads | | | | | | | | | | |
| 5.1 | | Total Cost of Unit | | 1337.0 | 4484.5 | 11994.5 | 0.0 | 17816.0 | -13188.5 | 0.0 | 4627.5 | |

Activity

The purpose of the Adults Service Unit is to carry out the Local Authority's functions under the National Assistance Act 1948, the Chronically Sick & Disabled Persons Act 1970, NHS/Community Care Act 1990 and the Health & Social Care Act 2001. The Unit is responsible for responding to the White Papers 'Modernising Social Services' which sets a new framework for improving the quality and monitoring of Social Services and 'Valuing People: A New Strategy for Learning Disability for the 21st Century'.

Older People's Direct Services Unit

The purpose of the Unit is:

To provide and monitor current standard residential, standard respite and enhanced care services for older people with mental health needs, as commissioned to meet locally agreed need.

To develop and provide a recuperative care service, in partnership with local Health Authorities, within nominated OPDS under the banner of 'Intermediate Care designation'.

To provide the current day care service for the four Independent day centres and within OPDS as required by Heads of Adult Services to meet locally agreed need.

To contribute to the strategic planning of the future 'vision' for OPDS.

Kent Homecare Services

The purpose of the unit is to provide, as a preferred provider, domiciliary care for physically and mentally frail older people and physically disabled younger adults, all of whom meet the eligibility criteria set out by the Directorate.

Adult Services Provider Unit

The Adult Services Provider Unit is responsible for the provision of a range of responsive and flexible services that promote individual development with people with learning difficulties

and/or physical disabilities within their local communities, which include Day Opportunity Services, Respite Care and Independent Living Schemes, and provide on-going support to their carers and families.

Residential Care

| | |
|-----|--|
| 41A | KCC Residential |
| 41B | Ind Sector Res Care |
| 41D | Preserved rights - Older People residential homes |
| 41F | Linked Service Centres |
| 41G | Preserved rights - Older People Res Pre 2002 |
| 41M | OPMH Residential |
| 41W | Integrated Care Centres |
| 41J | Preserved rights - Older People KCC Resid Pre 2002 |

Nursing Care

| | |
|-----|--|
| 41C | Ind Sector Nursing Homes |
| 41E | Preserved rights - Older People nursing homes |
| 41H | Preserved rights - Older People Nursing Pre 2002 |
| 41K | RNCC |
| 41N | OPMH Nursing |

Domiciliary Care

| | |
|-----|-----------------------|
| 45A | KCC Home Care Service |
| 45E | Ind Sector Home Care |
| 45K | KCC Homecare |

Direct Payments

| | |
|-----|-----------------|
| 45B | Direct Payments |
|-----|-----------------|

Other Services

| | |
|-----|--------------------------|
| 45C | Ind Sector Day Care |
| 45D | Ind Sector Meals Service |
| 45F | Voluntary Orgs |

| | | | | | | | | | | |
|-----------------|-----|--|--------------|-------------|---------------|------------|---------------|---------------|------------|---------------|
| 0.0 | 46M | Internal Trading LD Group Homes | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | KL |
| 0.0 | 46R | Unstaffed Group Homes | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | KL |
| 0.0 | 46T | Adult Link Family | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | KL |
| 0.0 | 46W | Supported & Other Accommodation | 0.0 | 0.0 | -348.9 | 0.0 | -348.9 | -135.5 | -484.4 | KL |
| 0.0 | 46Y | Ind Sector Group Homes | 0.0 | 0.0 | 258.3 | 0.0 | 258.3 | -45.0 | 213.3 | KL |
| 0.0 | | TOTAL SUPPORTED ACCOMMODATION | 0.0 | 0.0 | -90.6 | 0.0 | -90.6 | -180.5 | 0.0 | -271.1 |
| | | | | | | | | | | |
| | | Other Services | | | | | | | | |
| 0.0 | 46C | Ind Sector Day Care | 0.0 | 0.0 | 159.8 | 0.0 | 159.8 | 117.2 | 277.0 | KL |
| 0.0 | 46F | Voluntary Orgs | 0.0 | 0.0 | 473.2 | 0.0 | 473.2 | 14.0 | 487.2 | KL |
| | 46G | LDDF | 0.0 | 0.0 | 989.4 | 0.0 | 989.4 | 0.0 | 989.4 | KL |
| | 46J | LD Day Opportunities Internal Trading | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | KL |
| 0.0 | 46L | Internal Trading LD Day Opportunities | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | KL |
| 0.0 | 46N | Day Opps LD | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | KL |
| | 49E | Service Provision Operational Staffing | -50.0 | 0.0 | 0.0 | 0.0 | -50.0 | 0.0 | -50.0 | KL |
| | TBC | Social Care Reform | 221.6 | 21.0 | 450.4 | 0.0 | 693.0 | 0.0 | | |
| 0.0 | 54K | Regional Regeneration Hub | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | KL |
| 0.0 | | TOTAL OTHER SERVICES | 171.6 | 21.0 | 2072.8 | 0.0 | 2265.4 | 131.2 | 0.0 | 1703.6 |
| | | | | | | | | | | |
| 0.0 | | TOTAL SERVICES FOR VALUING PEOPLE | 211.6 | 54.5 | 1440.5 | 0.0 | 1706.6 | -539.1 | 0.0 | 474.5 |
| | | | | | | | | | | |
| | | Memorandum Items: | | | | | | | | |
| 0.0 | | Central Overheads | | | | | | | | |
| 0.0 | | Capital charges | | | | | | | | |
| 0.0 | | Directorate Overheads | | | | | | | | |
| 0.0 | | Total Cost of Unit | 211.6 | 54.5 | 1440.5 | 0.0 | 1706.6 | -539.1 | 0.0 | 474.5 |
| | | | | | | | | | | |
| Activity | | | | | | | | | | |

The purpose of the Adults Service Unit is to carry out the Local Authority's functions under the National Assistance Act 1948, the Chronically Sick & Disabled Persons Act 1970, NHS/Community Care Act 1990 and the Health & Social Care Act 2001. The Unit is responsible for responding to the White Papers 'Modernising Social Services' which sets a new framework for improving the quality and monitoring of Social Services and 'Valuing People: A New Strategy for Learning Disability for the 21st Century'.

Kent Homecare Services

The purpose of the unit is to provide, as a preferred provider, domiciliary care for physically and mentally frail older people and physically disabled younger adults, all of whom meet the eligibility criteria set out by the Directorate.

Adult Services Provider Unit

The Adult Services Provider Unit is responsible for the provision of a range of responsive and flexible services that promote individual development with people with learning difficulties and/or physical disabilities within their local communities, which include Day Opportunity Services, Respite Care and Independent Living Schemes, and provide on-going support to their carers and families.

Residential Care

| | |
|-----|---|
| 42A | Adult Support Units |
| 42B | Ind Sector Residential Care |
| 42C | Ind Sector Nursing Care |
| 42D | Preserved rights - learning difficulties |
| 42E | Preserved rights - learning difficulties Pre 2002 |
| 42F | Adult Support Units |
| 42K | RNCC |

Community Care

| | |
|-----|-------------------------|
| 46A | KCC Home Care Service |
| 46E | Ind Sect Home Care |
| 46H | Internal Trading LD ILS |
| 46K | KCC Home Care |
| 46X | Ind Living Scheme |

Direct Payments

| | |
|-----|-----------------|
| 46B | Direct Payments |
|-----|-----------------|

Supported Accommodation

| | |
|-----|---------------------------------|
| 46M | Internal Trading LD Group Homes |
| 46R | Unstaffed Group Homes |

| | |
|-----------------------|---------------------------------------|
| 46S | |
| 46T | Adult Link Family |
| 46W | Supported & Other Accommodation |
| 46Y | Ind Sector Group Homes |
| Other Services | |
| 46C | Ind Sector Day Care |
| 46D | Ind Sector Meals Service |
| 46F | Voluntary Orgs |
| 46L | Internal Trading LD Day Opportunities |
| 46N | Day Opps LD |
| 46P | Pre-Work Programme |
| 46V | Client Transport |
| 53A | SESEU KCC Community Care LD |
| 53C | SESEU Administration |

| ADULTS (PHYSICAL DISABILITY) - Budget & Services | | | | | | | | | | | | | |
|--|-----|-------------------------------|---|-----|-----------------------|----------------------|------------------------------------|--|----------------------|--------------------|--------------------|-----------------------------|-------------------|
| 2007-08 | | 2008-09 | | | | | | | | | | | |
| Controllable | FTE | Activity/Budget Line | | FTE | Empl oyee costs | Runn ing Costs | Contr acts & Proje cts | Transfer Payments & Recharge s | Gross Expenditure | External Income | Internal Income | Controllable Expenditure | Cabinet Member |
| Expenditure | | | | | | | | | | | | | |
| £'000 | | | | | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | |
| | | Residential Care | | | | | | | | | | | |
| 0.0 | | 43A | KCC Residential Care | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 4.8 | | 4.8 | KL |
| 0.0 | | 43B | Ind Sect Res Care | | 0.0 | 0.0 | 564.6 | 0.0 | 564.6 | -36.6 | | 528.0 | KL |
| 0.0 | | 43D | Preserved rights - physical disabilities | | 0.0 | 0.0 | 34.4 | 0.0 | 34.4 | -13.2 | | 21.2 | KL |
| 0.0 | | 43E | Preserved rights - physical disabilities Pre 2002 | | 0.0 | 0.0 | -5.2 | 0.0 | -5.2 | -26.2 | | -31.4 | KL |
| 0.0 | | 43K | RNCC | | 0.0 | 0.0 | 244.9 | 0.0 | 244.9 | -244.9 | | 0.0 | KL |
| 0.0 | | TOTAL RESIDENTIAL CARE | | | 0.0 | 0.0 | 838.7 | 0.0 | 838.7 | -316.1 | 0.0 | 522.6 | |
| | | Domiciliary Care | | | | | | | | | | | |
| 0.0 | | 47A | KCC Home Care Service | | 0.0 | 50.0 | 0.0 | 0.0 | 50.0 | 15.3 | | 65.3 | KL |
| 0.0 | | 47E | Ind Sector Home Care | | 0.0 | 0.0 | 40.1 | 0.0 | 40.1 | 18.6 | | 58.7 | KL |
| 0.0 | | 47H | Internal Trading PD ILS | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| 0.0 | | 47K | KCC Home Care | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| 0.0 | | 47X | Ind Living Scheme | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |

| | | | | | | | | | | | | |
|-----------------|-----|---------------------------------------|--|-------|-------|--------|-----|--------|--------|-----|--------|----|
| 0.0 | | TOTAL DOMICILIARY CARE | | 0.0 | 50.0 | 40.1 | 0.0 | 90.1 | 33.9 | 0.0 | 124.0 | |
| | | | | | | | | | | | | |
| | | Direct Payments | | | | | | | | | | |
| 0.0 | 47B | Direct Payments | | 0.0 | 0.0 | 59.6 | 0.0 | 59.6 | -16.0 | | 43.6 | KL |
| 0.0 | | TOTAL DIRECT PAYMENTS | | 0.0 | 0.0 | 59.6 | 0.0 | 59.6 | -16.0 | 0.0 | 43.6 | |
| | | | | | | | | | | | | |
| | | Supported Accommodation | | | | | | | | | | |
| 0.0 | 47W | Supported & Other Accommodation | | 0.0 | 0.0 | -251.3 | 0.0 | -251.3 | 0.0 | | -251.3 | KL |
| 0.0 | | TOTAL SUPPORTED ACCOMMODATION | | 0.0 | 0.0 | -251.3 | 0.0 | -251.3 | 0.0 | 0.0 | -251.3 | |
| | | | | | | | | | | | | |
| | | Other Services | | | | | | | | | | |
| 0.0 | 47C | Ind Sector Day Care | | 0.0 | 0.0 | 115.0 | 0.0 | 115.0 | -13.5 | | 101.5 | KL |
| 0.0 | 47F | Voluntary Organisations | | 0.0 | 0.0 | 249.3 | 0.0 | 249.3 | 0.1 | | 249.4 | KL |
| | 47G | KCC Day Care PD | | | | | | 0.0 | | | 0.0 | KL |
| 0.0 | 47J | OT Bureau - PD | | -39.2 | - | 322.0 | 0.0 | 161.0 | 5.1 | | 166.1 | KL |
| | | | | | 121.8 | | | | | | | |
| 0.0 | 47L | Assisted Phone Alarms | | 0.0 | -1.1 | 0.0 | 0.0 | -1.1 | 0.0 | | -1.1 | KL |
| 0.0 | 47N | Internal Trading PD Resources Centres | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| 0.0 | 47Y | Resource Centres | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 | KL |
| | TBC | Social Care Reform | | 52.4 | 10.0 | 115.8 | 0.0 | 178.2 | 0.0 | | 178.2 | KL |
| 0.0 | | TOTAL OTHER SERVICES | | 13.2 | - | 802.1 | 0.0 | 702.4 | -8.3 | 0.0 | 694.1 | |
| | | | | | 112.9 | | | | | | | |
| | | | | | | | | | | | | |
| 0.0 | | TOTAL SERVICES FOR PD | | 13.2 | -62.9 | 1489.2 | 0.0 | 1439.5 | -306.5 | 0.0 | 1133.0 | |
| | | | | | | | | | | | | |
| | | Memorandum Items: | | | | | | | | | | |
| 0.0 | | Central Overheads | | | | | | | | | | |
| 0.0 | | Capital charges | | | | | | | | | | |
| 0.0 | | Directorate Overheads | | | | | | | | | | |
| 0.0 | | Total Cost of Unit | | 13.2 | -62.9 | 1489.2 | 0.0 | 1439.5 | -306.5 | 0.0 | 1133.0 | |
| | | | | | | | | | | | | |
| Activity | | | | | | | | | | | | |

The purpose of the Adults Service Unit is to carry out the Local Authority's functions under the National Assistance Act 1948, the Chronically Sick & Disabled Persons Act 1970, NHS/Community Care Act 1990 and the Health & Social Care Act 2001. The Unit is responsible for responding to the White Papers 'Modernising Social Services' which sets a new framework for improving the quality and monitoring of Social Services and 'Valuing People: A New Strategy for Learning Disability for the 21st Century'.

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Adult Services Provider Unit

The Adult Services Provider Unit is responsible for the provision of a range of responsive and flexible services that promote individual development with people with learning difficulties and/or physical disabilities within their local communities, which include Day Opportunity Services, Respite Care and Independent Living Schemes, and provide on-going support to their carers and families.

Residential Care

| | |
|-----|---|
| 43A | KCC Residential Care |
| 43B | Ind Sect Res Care |
| 43D | Preserved rights - physical disabilities |
| 43E | Preserved rights - physical disabilities Pre 2002 |
| 43F | KCC Res Care |
| 43K | RNCC |

Domiciliary Care

| | |
|-----|-------------------------|
| 47A | KCC Home Care Service |
| 47E | Ind Sector Home Care |
| 47H | Internal Trading PD ILS |
| 47K | KCC Home Care |
| 47X | Ind Living Scheme |

Direct Payments

| | |
|-----|-----------------|
| 47B | Direct Payments |
|-----|-----------------|

Supported Accommodation

| | |
|-----|---------------------------------|
| 47S | |
| 47W | Supported & Other Accommodation |

Other Services

| | | | | | | | | | | |
|------------|--|--------------|-------------|------------|------------|--------------|------------|------------|--------------|----|
| 0.0 | Strategic 56A Management | 905.1 | 62.6 | 0.0 | 0.0 | 967.7 | 0.0 | | 967.7 | KL |
| 0.0 | Total Strategic & Area Management | 905.1 | 62.6 | 0.0 | 0.0 | 967.7 | 0.0 | 0.0 | 967.7 | |
| | | | | | | | | | | |
| | <u>Memorandum Items:</u> | | | | | | | | | |
| 0.0 | Central Overheads | | | | | | | | | |
| 0.0 | Capital charges | | | | | | | | | |
| 0.0 | Directorate Overheads | | | | | | | | | |
| 0.0 | Total Cost of Unit | 905.1 | 62.6 | 0.0 | 0.0 | 967.7 | 0.0 | 0.0 | 967.7 | |
| | | | | | | | | | | |

The resources and activities that set the overall direction and underpin service delivery include:

Strategic and Area Management

Resources Management

Performance Management

Contract and Planning

Training & Development

The purpose of these services is to provide overall policy direction and performance management and to ensure the Directorate makes the best use of available resources. It seeks to ensure the Directorate delivers the aspirations and targets set out in:

The Vision for Kent

The Kent Agreement

The Next 4 years

Supporting Independence

Active Care-Active Lives

The many multi agency plans with which Social Services is involved

Strategic & Area Management

56A Strategic Management

56B Area Management Team

PPQA - Budget & Services

| 2007-08 | | 2008-09 | | | | | | | | | | |
|--------------------------|-----|--|-----|----------------|---------------|----------------------|-------------------------------|-------------------|-----------------|-----------------|--------------------------|----------------|
| Controllable Expenditure | FTE | Activity/Budget Line | FTE | Employee costs | Running Costs | Contracts & Projects | Transfer Payments & Recharges | Gross Expenditure | External Income | Internal Income | Controllable Expenditure | Cabinet Member |
| £'000 | | | | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | |
| | | Performance, Contracting & Planning | | | | | | | | | | |
| 0.0 | | 55A Performance Unit | | 2670.2 | 336.1 | 55.4 | 26.8 | 3088.5 | -141.4 | | 2947.1 | KL |
| 0.0 | | 57A Contract & Planning | | 451.8 | 133.4 | 0.0 | 0.0 | 585.2 | -1.8 | | 583.4 | KL |
| 0.0 | | TOTAL PERF, CONTRACTING & PLANNING UNIT | | 3122.0 | 469.5 | 55.4 | 26.8 | 3673.7 | -143.2 | 0.0 | 3530.5 | |
| | | <u>Memorandum Items:</u> | | | | | | | | | | |
| 0.0 | | Central Overheads | | | | | | | | | | |
| 0.0 | | Capital charges | | | | | | | | | | |
| 0.0 | | Directorate Overheads | | | | | | | | | | |
| 0.0 | | Total Cost of Unit | | 3122.0 | 469.5 | 55.4 | 26.8 | 3673.7 | -143.2 | 0.0 | 3530.5 | |

Activity

To ensure that there is a range of contracted and in-house providers able to meet the service needs assessed by the Adults Service Units.

Resources - Budget & Services

| 2007-08 | | 2008-09 | | | | | | | | | | |
|--------------------------|-----|----------------------|-----|----------------|---------------|----------------------|-------------------------------|-------------------|-----------------|-----------------|--------------------------|----------------|
| Controllable Expenditure | FTE | Activity/Budget Line | FTE | Employee costs | Running Costs | Contracts & Projects | Transfer Payments & Recharges | Gross Expenditure | External Income | Internal Income | Controllable Expenditure | Cabinet Member |
| £'000 | | | | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | |

| | | | | | | | | | | |
|------------|--|---------------|---------------|-------------|-------------|----------------|---------------|------------|----------------|----|
| | Resources | | | | | | | | | |
| 0.0 | 54A Resources Pension Enhancements | 1059.0 | 0.0 | 0.0 | 0.0 | 1059.0 | -102.8 | | 956.2 | KL |
| 0.0 | 54C Resource Finance Resources Area Info | 1240.5 | 1155.5 | 24.3 | -109.2 | 2311.1 | -4.9 | | 2306.2 | KL |
| 0.0 | 54D Systems | 1104.5 | 309.3 | 0.0 | 0.0 | 1413.8 | 0.0 | | 1413.8 | KL |
| 0.0 | 54E Resources Human Resources | 1256.4 | 49.4 | 24.8 | 0.0 | 1330.6 | -48.0 | | 1282.6 | KL |
| 0.0 | 54F Resources Legal SLAs | 0.0 | 0.0 | 0.0 | 200.3 | 200.3 | -0.7 | | 199.6 | KL |
| 0.0 | 54G Resources Other SLAs | 0.0 | 58.3 | 0.0 | 0.0 | 58.3 | 0.0 | | 58.3 | KL |
| 0.0 | 54H Facilities | 25.4 | 251.6 | 0.0 | 0.0 | 277.0 | 0.0 | | 277.0 | KL |
| 0.0 | 54J Training | 2739.1 | 277.2 | 0.0 | 0.0 | 3016.3 | 64.7 | | 3081.0 | KL |
| 0.0 | 54M Finance staffing | 2076.0 | 58.8 | 0.0 | 0.0 | 2134.8 | -41.3 | | 2093.5 | KL |
| 0.0 | TOTAL RESOURCES | 9500.9 | 2160.1 | 49.1 | 91.1 | 11801.2 | -133.0 | 0.0 | 11668.2 | |
| 0.0 | TOTAL RESOURCES | 9500.9 | 2160.1 | 49.1 | 91.1 | 11801.2 | -133.0 | 0.0 | 11668.2 | |
| | <u>Memorandum Items:</u> | | | | | | | | | |
| 0.0 | Central Overheads | | | | | | | | | |
| 0.0 | Capital charges | | | | | | | | | |
| 0.0 | Directorate Overheads | | | | | | | | | |
| 0.0 | Total Cost of Unit | 9500.9 | 2160.1 | 49.1 | 91.1 | 11801.2 | -133.0 | 0.0 | 11668.2 | |

The purpose of these services is to provide overall policy direction and performance management and to ensure the Directorate makes the best of available resources. It is to ensure the Directorate delivers the aspirations and targets set out in:

- The Vision for Kent
- The Kent Agreement
- Towards 2010

- Active Care
- And the range of multi-agency plans, many of which we lead on, including the Youth Justice Plan, the 16+ Plan, the Child Protection Business Plan, the Drug Action Business Plan and the Community Safety Strategy.

ASYLUM ALL APPEAL RIGHTS EXHAUSTED - Budget & Services

| 2007-08 | | 2008-09 | | | | | | | | | | |
|--------------------------|-----|---------------------------|-----|----------------|---------------|----------------------|-------------------------------|-------------------|-----------------|-----------------|--------------------------|----------------|
| Controllable Expenditure | FTE | Activity/Budget Line | FTE | Employee costs | Running Costs | Contracts & Projects | Transfer Payments & Recharges | Gross Expenditure | External Income | Internal Income | Controllable Expenditure | Cabinet Member |
| £'000 | | | | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | |
| | | AAARE | | | | | | | | | | |
| 0.0 | | 54P AAARE | | 0.0 | 100.0 | 0.0 | 0.0 | 100.0 | 0.0 | 0.0 | 100.0 | KL |
| 0.0 | | TOTAL AAARE | | 0.0 | 100.0 | 0.0 | 0.0 | 100.0 | 0.0 | 0.0 | 100.0 | |
| | | <u>Memorandum Items:</u> | | | | | | | | | | |
| 0.0 | | Overheads | | | | | | | | | | |
| 0.0 | | Capital charges | | | | | | | | | | |
| 0.0 | | Internal Overheads | | | | | | | | | | |
| 0.0 | | Total Cost of Unit | | | | | | | | | 100.0 | |

The Managing Director is authorised to negotiate, settle the terms of, and enter the following agreements/projects:

| Project/ development/key action | a/c manager | Link to Corporate/Directora te Target | Deliverables or outcomes planned for 2008/09 | Target dates |
|---|---------------------------------------|--|--|--|
| Active Lives for Adults (ALfA Project) / total transformation in service delivery | SMT | Active Lives, Towards 2010 Target 52, Towards 2010 Target 53, Towards 2010 Target 54, Towards 2010 Target 55, Towards 2010 Target 56, District Plans | ALfA will see a shift away from 'managing care packages', towards enabling people to remain independent and accessing services that they want to meet their needs. It will transform all front line services and deliver significant efficiencies. | March 2009 |
| Whole Systems Demonstrator | Service Development Project Manager | Active Lives, Towards 2010 Target 52, Towards 2010 Target 54 | Whole Systems Demonstrator (WSD) is a DH programme which will examine the effect of telehealth and telecare over and above any service redesign as detailed of the White Paper Our Health, Our Care, Our Say. The programme is of national significance and will be evaluated by a team of independent academics commissioned by the DH. | March 2009 – this will be evaluated and will extend beyond this date |
| Implementing 'Valuing People Now' | Joint Director, Learning Disabilities | Active Lives, Towards 2010 Target 52, Towards 2010 Target 55 | The implementation of this will be undertaken with the partnership board and District partnership groups and with other agencies particularly the NHS | March 2009 |
| Transfer of people with learning disabilities from health-funded accommodation. | Joint Director, Learning Disabilities | Active Lives, Towards 2010 Target 52, Towards 2010 Target 55 | There is a specific strand to this project concerning the financial issues of the transfer, led by the Director of Resources. | March 2009 (progress will be reviewed and evaluated throughout the year) |

| | | | | |
|--|--------------------------------|---|---|---|
| Finalise Kent's Strategy for Later Life | Head of Performance & Planning | <p>Vision for Kent: Improved health, care and well-being,</p> <p>Vision for Kent: Stronger and safer communities,</p> <p>Vision for Kent: Learning for everyone,</p> <p>Vision for Kent: Keeping Kent moving,</p> <p>Vision for Kent: Environmental excellence,</p> <p>Vision for Kent: Economic success – opportunities for all,</p> <p>Vision for Kent: High quality homes,</p> <p>Vision for Kent: Enjoying life, Active Lives,</p> <p>Kent Agreement 2: NI125</p> | Complete the consultation and develop a Strategy/Action Plan using an editorial panel of older people which is endorsed by the Kent Partnership. | September 2009 |
| Implement the Joint Strategic Needs Assessment recommendations | Head of Performance & Planning | <p>Vision for Kent: Improved health, care and well-being,</p> <p>Active Lives</p> | <ul style="list-style-type: none"> • Establish, in conjunction with the Public Health Observatory, an evolving source of data and analysis to inform local commissioning • Complete further needs assessments on learning and physical disability | <p>September 2008</p> <p>September 2008</p> |

| | | | | |
|---|---|---|---|---|
| <p><i>Making Experiences Count – New Customer Care / Complaints process</i> The DOH have just issued a preliminary response – where they expect all LA's to have joint complaints processes with NHS</p> | <p>Public Involvement & Performance Manager / Public Involvement & Customer Care policy manager</p> | <p>Vision for Kent: Improved health, care and well-being, Active Lives</p> | <p>Establishing this process will be a major challenge - and the DoH are asking for early adopters to trial this. Every LA are expected to have a joint process in place by April 2009 – although given some of the issues which need to be resolved this could be over optimistic.</p> | <p>March 2009</p> |
| <p>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.</p> | <p>Policy Manager</p> | <p>Towards 2010 Target 52, Active Lives, Vision for Kent: Improved health, care and well-being, Strategy for Later Life</p> | <p>The prototype gaming table will be delivered April 2008 to Age Concern in Sevenoaks. We will be engaging 40 people between 65 years and 75 years to undertake testing and evaluation of the prototype over a twelve week period. The University of Kent will be approached to assist with the evaluation of the prototype.</p> <p>Given that this is a very new and as yet fully tested scheme it will be developed based on user feedback and evaluation.</p> | <p>March 2009 – project will be evaluated and progressed as a result of feedback & evaluation</p> |
| <p>Moving to Flexible and Mobile Working</p> | <p>Electronic Services Programme Director, David Weiss</p> | <p>Towards 2010 Target 42, ALfA, Office Strategy</p> | <p>This is a two phased project running in parallel. Phase 1 to gear the organisation towards greater Flexible Working from 2008/9. Phase 2 : Mobile Working to enable field workers to capture data electronically at the point of contact and synchronise with the back office systems.(Phase 2 will be completed by March 2010). Strong linkage to the office strategy and releasing targeted office estate and introducing new ways of working.</p> | <p>March 2009 Phase 1</p> |

| | | | | |
|---------------------------------------|---|--|---|---------------|
| Workforce Plan | Mike Bell, Sharon Herbert | Towards 2010 Target 1, Towards 2010 Target 52, ALfA, Office Strategy, Mobile Working | To develop and implement the Workforce Plan (encompassing the wider workforce of the independent sector as well as our own staff). | March 2009 |
| Specialist Finance Teams | Michelle Goldsmith | Towards 2010 Target 56, ALfA | To embed the development of specialist finance teams, work on the benefits maximisation target, assist on replacing COLLECT and pilot changes to debt collection processes. | March 2009 |
| SWIFT Development | Electronic Services Programme Director | ALfA, Towards 2010 Target 52, Office Strategy, Mobile Working | Major upgrade to SWIFT V24 : Go-live with SWIFT Financials: Close COLLECT. Archiving : Statutory Returns revised solution : Interface implementation between SWIFT and KCC integration hub (Mobile) | December 2008 |
| Better Homes Active Lives Housing PFI | Head of Public Private Partnerships & Property (Christy Holden) | Active Lives, Towards 2010 Target 52, Strategy for Later Life, Kent Agreement 2: NI125 | Develop 340 Extra Care and Supported apartments for vulnerable people with 10 District Councils. <ul style="list-style-type: none"> • Ensure processes for appropriate nominations are established. • Develop financial model. • Monitor construction and help solve any problems. | March 2009 |
| Excellent Homes for All Housing PFI | Head of Public Private Partnerships & Property (Lynn Egercz) | Active Lives, Towards 2010 Target 52, Strategy for Later Life, Kent Agreement 2: NI125 | Develop 182 Extra Care and Supported apartments for vulnerable people with 4 District Councils <ul style="list-style-type: none"> • Develop and submit Outline Business Case. • Develop Development for District Council Partners. | March 2009 |

| | | | | |
|--|--------------------|--|---|------------|
| LD Services Modernisation | Margaret Howard | Active Lives, Towards 2010 Target 52, Towards 2010 Target 55, Kent Agreement 2: NI125 | To develop and implement a capital strategy that modernises services for people with a Learning Disability. | March 2009 |
| In house residential services for Older People | Steve Leidecker | Active Lives, Towards 2010 Target 52, Strategy for Later Life, Kent Agreement 2: NI125 | To develop and implement a capital strategy for the in house residential services for Older People. | March 2009 |
| Carers | Michael Thomas-Sam | Active Lives, Towards 2010 Target 53 | Implement the recommendations of the Carers Select Committee Report. | March 2009 |

In line with financial regulations, any capital projects on this list will be subject to a prior "gateway review" by the Project Advisory Group and in consultation with the Leader

USER/ RESIDENT INVOLVEMENT PLANNED FOR 2008/9

| Name | Start date/ End date (dd/mm/y) | Feedback date (dd/mm/yy) | Target Group | Target area (Kent, Town, district, ward etc) | Brief summary | What we want to find out and how we will use the information,(approx 25 – 50 words) | Statutory Yes/No | Consultation type (*see list below table) | Contact name, e-mail & phone No. |
|------------------|---|--|---------------------------|---|--|--|-------------------------|--|---|
| Home Care Survey | 02/09 05/09 | DH survey – feedback when results have been analysed – KCC will request further detailed analysis. | Domiciliary service users | Kent | To find out service users views regarding the home care services they receive. | Results will be used by CSCI, DH and KASS to see how happy people are with their home care services to see whether improvements need to be made to local care services and for research purposes. This is also used by Contracting. | Yes | Social | Sue Williams sue.williams@kent.gov.uk 01622 696620 |
| Carers Survey | 07/09 08/09 | 11/08 | Carers | Kent | To find out carers views regarding the support and services they receive. | Results will be used by KASS to see how happy people are with support and services provided to them. This survey will also be sent to those carers without a carers assessment. Voluntary organisations will help us to do this. Results will inform a baseline for T2010 target 53. | No | Social | Sue Williams sue.williams@kent.gov.uk 01622 696620 Navdeep Mandair navdeep.mandair@kent.gov.uk 01622 694040 |

* Consultation types – Business, Council, Environment, Social, Community, Education, Leisure, Transport

CAPACITY, SKILLS AND DEVELOPMENT PLANNING

In comparison with many Adult Social Services, the Directorate continues to have good rates of recruitment retention and low sickness levels. In achieving this, the staff care policies, Investors in People, good training and career development opportunities have contributed to this. However, the Directorate recognises that it needs to continue to develop strategies to meet future challenges if it is to maintain this record and to ensure continuous improvement.

Currently the Directorate is finalising the Adult Social Services Workforce Plan. This is a detailed plan outlining the make up of the workforce, the challenges that the Directorate is facing and some of the planned actions. Significant issues highlighted in the plan are:

- The need to develop workforce planning with the private and voluntary sector. KASS recognises the importance of investing in the recruitment, development and retention of staff in order to provide quality social care for the whole community. A Kent Adult Social Care Workforce Strategy Group has been established, chaired by the Managing Director of KCC Adult Social Services, to deliver this objective. The work with the wider social care economy has already seen major initiatives such as Training 4 Care established.
- Workforce planning in partnership with Health is also an essential strategic objective. To this end we have established Strategic Workforce Planning Groups with the PCT's.
- ALfA – This is a major cultural change, which will see a shift in emphasis away from 'managing care packages' and towards personalisation - supporting people in identifying how best to meet their own needs. It will transform all front line services. It has major implications for future staff mix and skills and therefore this is a major workstream for the project.
- The changes that are taking place in in-house services as a part of the modernisation agenda.

The plan gives in depth analysis and direction for the future workforce planning, aligned to our key priorities.

EQUALITIES AND DIVERSITY

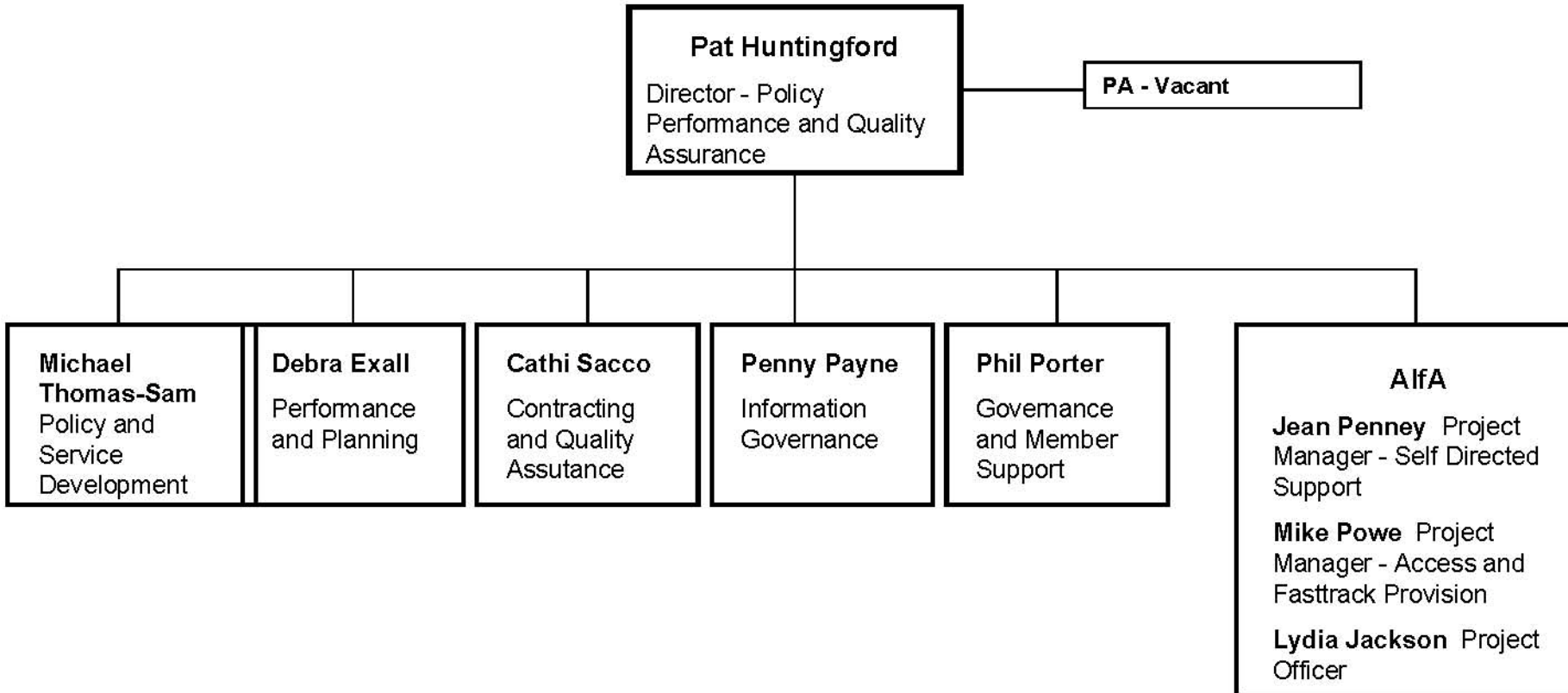
In line with the Council's Equalities Strategy, the Directorate has developed an Equalities Work Programme (Oct 2007-Mar 2009) to address the needs of staff, service users and carers. It sets out how Kent Adult Social Services will promote equality of opportunity, enhance community cohesion and tackle unfair discrimination. One means by which this can be achieved is by carrying out Equality Impact Assessment screening of all policies, procedures and practices. The completed exercise revealed that the vast majority were assessed as having "low adverse impact" on staff, service users and carers, requiring minor changes. Managers who own these policies, procedures and practices. are committed to carrying out all the necessary amendments by October 2008, to make their services more

inclusive and accessible. This includes contractual agreements with partners agencies. The Directorate Equalities Group will monitor progress.

The Council has devised Best Value Performance Indicators (BVPI) linked to anti-discrimination legislation on Race, Gender and Disability. Kent Adult Social Services has been successful in recruiting disabled people but retention has been more challenging, resulting in the target being missed. The Directorate is committed to achieving this target while continuing to improve those on Gender and Race. Headquarters managers will contribute to achieving these and other targets within the Work Programme.

Linked to the Directorate's initiatives on Equalities is the Council's drive to achieve level 5 (the highest level) of the Equality Standards for Local Government, by April 2010. Headquarters managers will work with colleagues within Kent Adult Social Services and across Directorates to provide supporting evidence that the diverse needs of staff, service users and carers are being addressed by the Council.

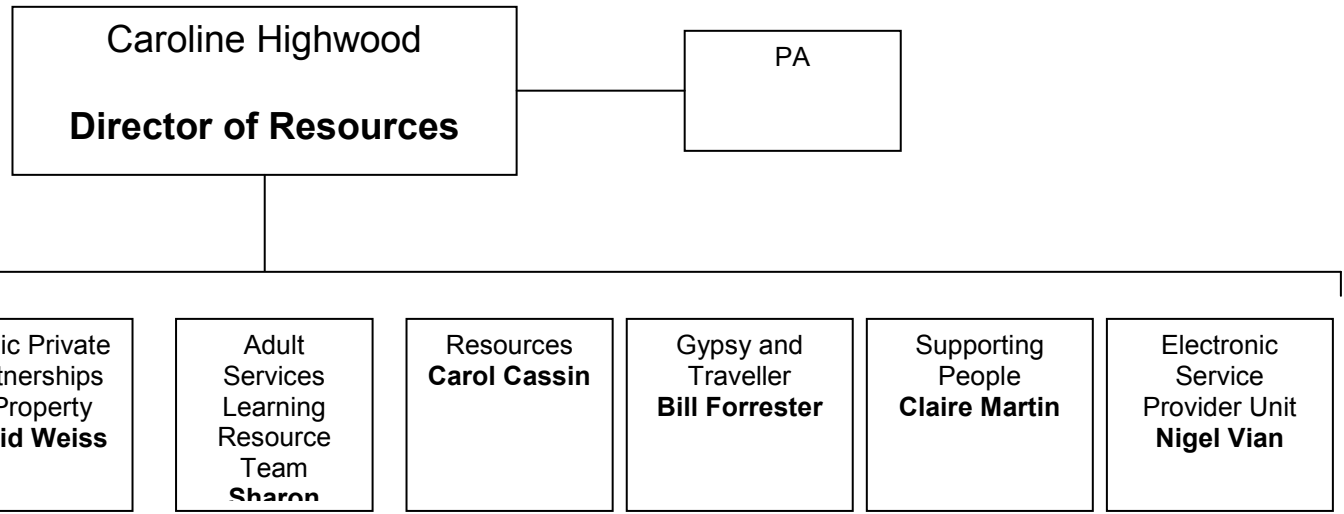
Policy, Performance and Quality Assurance Management Team



Policy, Performance and Quality Assurance Structure Chart as at 01-10-07



Kent Adult Social Services Resources Unit



Correct as at March 2008



Staffing*

Policy Performance & Quality Assurance

| Policy, Performance & Quality Assurance | 2007/08 | 2008/09 |
|---|----------------|----------------|
| Contracting & Service Quality | 9.41 | 9.39 |
| Governance & Member Support | 4.99 | 5.00 |
| Performance | 25.27 | 25.00 |
| Information Governance | 2.05 | 2.00 |
| Development` | 32.91 | 32.69 |
| Policy, Performance & Quality Assurance | 3.82 | 4.00 |
| PP&QA Total | 78.45 | 78.08 |
| Resources | | |
| Resources (& H&S) | 14.98 | 15.00 |
| Electronic Services | 25.56 | 25.40 |
| Finance | 135.16 | 134.30 |
| Personnel | 25.27 | 25.05 |
| Learning Resources | 27.62 | 27.39 |
| Public, Private Partership & Property | 11.75 | 11.76 |
| Resources Total | 249.34 | 239.62 |
| Strategic Learning Disability Project | 4.99 | 4.61 |
| Total for all HQ Plan | 332.83 | 332.31 |
| Total <i>includes</i> following number of KS 13 and above | 36.81 | 36.81 |

| | | |
|---|-------------|----------------|
| Total For the Whole of KASS | 2939 | 2921.92 |
| Total <i>includes</i> following number of KS 13 and above | 62.32 | 62.32 |

**We have introduced new unit plans this year to mirror the true nature of our business. We are still working on the correct division of staffing figures and including the Pt 13 and above. It is to be noted that we have used 2007/08 total figure and have split them into the new plan structure.*

SECTION 17 CRIME & DISORDER ACT

(Section 17 of the Crime & Disorder Act 1998 requires responsible authorities to consider crime and disorder reduction)

In the exercising of all its duties the Directorate takes seriously its responsibilities under the Crime and Disorder Act. Many of the people who use our services are vulnerable to some of the consequences of crime and disorder.

Enabling people with complex needs to live independently and to have choice and control over the services they receive inevitably means the management of greater risk. Through MAPPA (Multi-Agency Public Protection Arrangements) and the Multi Agency Adult Safeguards Board, we have robust adult protection processes in place. Together with our partners we have given Kent a reputation of excellence in this area.

The Directorate plays an active part in the Crime and Disorder Partnerships and the Community Safety Board.

An area of current concern is the level of hate crime people with Learning Disabilities have experienced. We are currently working with the Partnership Board, District Partnership Groups and other key agencies to look at ways to address this issue.

CORPORATE ENVIRONMENTAL PERFORMANCE AND CLIMATE CHANGE ADAPTATION

The Directorate is working within the programme of Corporate environmental performance and climate change adaptation. This is being led from within HQ, with lead officers identified as follows: Directorate lead – Caroline Highwood; sustainable transport and travel - Emma Hanson; Sustainable procurement - Procurement forum representative; staff engagement - Mags Harrison; sustainable estates - David Weiss. Current activity is to establish baselines and to develop appropriate targets for improved performance.

Outlined above are key areas which the Directorate is a part of in the implementation of KCC's Environment Policy. Some of the actions, which will support this, are as follows:

- Engagement of staff in the implementation of the plan.
- Review of in house transport arrangements, as part of the reviews of LD and older peoples services - Reducing use of KCC Fleet Hire and reduce carbon emissions by offering alternative options to transport people to in-house day care.
- Office strategy. As part of ALfA and other reviews the Directorate is fully reviewing it's office use.
- Development of mobile working, promoting smarter working involving less travel etc.
- Ensure that any building work is of the highest standard. This particularly applies to PFI Extra Care Sheltered Housing which will be designed to high construction standards.

SECTION 3: MONITORING AND REVIEW - HOW DO WE KNOW WE ARE THERE?

The Directorate has a robust integrated system for managing performance, which includes the following components:

1. On a monthly basis all activity performance data and budget is monitored formerly across the Directorate. The data is broken down to District level and monitoring meetings take place with the Director of Operations and the relevant Service Director. The meetings include performance and finance leads.
2. The outcomes of this work are reviewed formerly by SMT on a monthly basis.
3. Area Management Teams and service management teams also review their performance formally in preparation for action 1 (as above).
4. Heads of Service will, on a monthly basis, review their performance/ activity/budget on a monthly basis.
5. This process of performance management is replicated through to teams and individual action plans.
6. Every 3 months SMT look at a more in depth report on activity, performance and budget – which also draws out long term trends etc. This is known as the FARM report.

7. District and Unit Business Plans are monitored through the processes outlined above and are formally monitored on a 6-month basis.
8. Performance is reported formally to ASSPOC on a six monthly basis and reporting on Business Plans will be a part of this. ASSPOC also has a tradition of being involved in looking at key issues of the Directorates Performance and setting priorities. There have been recent select Committees on Transition and Carers. Recent presentations and discussions have included budget build and the MTP, and there will be a presentation on the new performance framework.
9. The cabinet member for the Directorate is fully engaged in the issues regarding the Directorates performance and is a major participant in the Modernisation Board.
10. CSCI continue to rigorously monitor the Directorate through the Annual Review process which is reported to Cabinet and ASPPOC.
11. Within the Directorate there is a strong culture of collective responsibility. SMT, as can be seen above, have strong enough processes to enable them to take action when necessary and support any focussed drive on performance improvement.
12. Running alongside these processes there are regular District workshops with frontline staff and performance staff to look at some of the issues, which are being confronted at the frontline and to keep staff updated on the changes and challenges the Directorate is facing.
13. The current national performance framework for adult social services is undergoing significant change and this is likely to be the last year of the current star rating. There will be a joint framework with the NHS and our respective performances will be closely linked. We are currently working with the PCT's to look at bringing together our performance systems and data where appropriate. Currently there are joint Board Meetings with PCT's which look at joint performance.