



SOCIAL SERVICES BUSINESS PLAN

2004/05 – 2006/07

Draft 05th December

Reflecting post-settlement position

Executive Member: Cllr. Denise Capstick

Responsible Officer: Chris Bull, Strategic Director of Social Services & Chief Executive of Southwark Primary Care

Prepared by: Adrian Ward, Policy Performance and Delivery Officer

Date signed off:

Southwark Social Services Business Plan 2004/05 to 2006/07

Contents	Page Number
Part One – Strategic Overview	
<i>Section A: Vision</i>	
1. Purpose of the plan	3
2. The aims and objectives of Social Services	3
3. Statutory framework	4
4. Contribution to Strategic Priorities:	4
4.1 Social Services contribution to Community Strategy Priorities	4
4.2 Social Services contribution to Corporate Priorities	5
4.3 Social Services contribution to the CPA Improvement Plan	6
<i>Section B: Context and key issues for action</i>	
5. Key priorities, policy drivers and management issues	8
6.3 Service Profile – Community Care	13
6.4 Service Profile – Children’s Services	14
6.3 Performance and Business Support Division	16
7 Overview of Performance:	19
7.1 Children’s	20
7.2 Adults	21
7.3 SSI Annual Review of Performance	22
7.4 Star rating	24
7.5 Performance priorities 2004/5	25
8 Financial Context - Budget strategy and 3 year financial plan	26
11 Best Value Reviews and Inspections	31
12 Risk management	31
12 Table: Summary of Performance Targets in Action Plans (index for Part 2)	32
Part 2 - (in draft not included)	
Action Plans : Adults, Children's and Local Indicators Appendix 1: Customer Charter Appendix 2: LDP indicators and targets	

A *Vision*

1 Purpose of this Plan

This plan sets out the key priorities for Social Services delivery over the next three years. It is supported at a more detailed level by plans at a divisional, business unit and individual level together with a range of statutory plans which set out how our objectives will be achieved.

The plan will be subject to quarterly updates and progress reports to ensure it is used effectively in managing performance and delivery.

2 The aims and objectives of Social Services

The Social Services Department provides social care and support for the borough's most vulnerable residents.

The overarching objective of the service can be summarised as being to improve the life chances of vulnerable children and promote the independence of adults with social care needs.

To achieve this objective the department aims to:

- provide efficient, effective, high quality services in order to deliver the national priorities for the modernisation of health and social care
- ensure that resources are efficiently deployed and effectively targeted at those in most need
- ensure there is fair access to services
- promote social inclusion
- improve the protection of vulnerable children
- improve the quality of care for children looked after
- improve the life chances of children in need
- meet the social care needs of adults in a way that promotes independence
- ensure that the services we provide are user focussed and effectively co-ordinated with services provided by health and other agencies

To deliver these priorities there are a series of performance indicators, targets and associated action plans which form the high level performance plan of the division set out in part 2 (page 20). Specific priorities and policy drivers for the period of this plan are set out further in paragraph 4.

3 **Statutory framework**

The services provided for the most part reflect the requirements of primary legislation such as the Community Care Act and the Children Act, together with statutory policy guidance and performance requirements set and monitored by the Department of Health.

Statutory requirements and associated government policy directives are one of the main drivers of how services are planned and delivered.

4 **The Social Services contribution to Community Strategy Priorities**

Over the next three years the Department has a vital role to play through the delivery of this Plan in delivering the Community Strategy:

4.1.1 *Improving the health of the borough:* In conjunction with its partners the department plays a key role in improving health in the borough. This role includes working with health agencies to maximise the combined effectiveness of health and social services, as well as addressing social care needs of vulnerable children and adults that are frequently a cause, or a consequence of, ill-health. The department plays a vital role in the delivery of the Primary Care Trust's Local Delivery Plan which sets out how the NHS Plan will be delivered locally, and is increasingly integrating its services with Health to achieve objectives focussed on people's needs. The close partnership and integration with health services is supported by the fact that the Director of Social Services is also the Chief Executive of the Primary Care Trust.

4.1.2 *Tackling poverty:* The department helps deliver the tackling poverty objective by responding to the social care and health needs that are closely linked with poverty, thereby helping maximise the independence and life chances of those in poverty, and helping vulnerable children avoid poverty as they enter adulthood.

4.1.3 *Raising standards in schools:* In partnership with the education service, the department plays an important role in raising standards in schools, particularly with respect to supporting the education of children in need and children looked after, but also, through the family support strategy, for the wider group of vulnerable children living in relatively deprived neighbourhoods. Over the period of this plan it is likely that the relationship between Education and Children's Social Care (and other services for children) will become closer. The

government's Green Paper "Every Child Matters" signals the intention that these services will be delivered on an integrated basis by Children's Trusts in the longer term.

4.1.4 Cutting crime and the fear of crime: Through services delivered to vulnerable children, youth offenders, isolated older people and drug users the service has a central role to play in cutting crime and the fear of crime in the borough.

4.1.5 Making Southwark cleaner and greener: As a major employer and commissioner of local services the department also has an indirect but valuable role to play in "making Southwark cleaner and greener" by being an environmentally responsible organisation.

4.2 The Social Services contribution to Corporate Priorities

Corporate priorities have been agreed which will assist in the delivery of the Community Strategy. The social services plan reflects these priorities by focussing on the following actions:

4.2.1 Performance Management: the delivery of all priorities in this Plan and underlying plans will be supported by the department's comprehensive performance management and delivery system which will help identify the actions that need to be taken to achieve our targets. Our full participation in the Department of Health's Performance Assessment Framework (PAF) also requires detailed performance management in order to respond effectively. This plan sets out 70 key performance indicators that have been selected as they provide a good measure of progress against our wide range of priorities on specific issues. Each has a target set for the next 3 years which will be monitored quarterly and updated to ensure the target continues to provide challenge and strategic relevance. To support this, data improvements supported by the full renewal of our information systems by 2004/5 is a priority.

4.2.2 Equalities: Race impact assessments of all key service areas are being undertaken during 2003/04 in line with the Race Equality Strategy and these will shape 2004/05 plans. The objective of these assessments is to identify how services may better promote equality and tackle discrimination, with a focus on achieving equality in both access and outcomes for service users. Fair Access to Care services is already a key statutory requirement and subject to a range of initiatives supported by performance management arrangements. A key objective of Commissioning strategies is to ensure that services are sensitive to the specific needs of the black and minority ethnic population. Social Services also has a specific role to play in providing

services to people with Disabilities that promote independence and opportunity. The delivery of equal opportunities and diversity objectives in the work place through the human resources strategy and equalities plan is also an ongoing priority that will also be monitored at a high level under this plan.

4.2.3 Customer focus: customer focus policy is a key enabler of the modernisation objective of ensuring services are focussed on users, responsive and easy to access. This is reflected in our commissioning, care management and service monitoring arrangements. Indicators of relevance that are subject to particular scrutiny include customer satisfaction surveys, complaints processes and telephone answering. Consultation with service users will continue to be central to the assessment of needs and planning and commissioning of services. A key driver of the integration agenda is to ensure that services provided by different agencies to a single user are seamlessly focussed on the customer.

4.2.4 Driving down debt: The financial management arrangements of the department will be strengthened over the period of the plan. A high level of priority will continue to be placed on the efficient running of debtor systems in order to meet departmental debt reduction targets. The rationalisation of the community care charging system will have a long term impact in this area by significantly reducing the number of small scale debtors with limited means.

4.2.5 Making the Council a greener organisation: The department will ensure that in the expending of its resources and the commissioning of services it adheres to all corporate standards on environmental issues.

4.3 The Social Services contribution to the CPA Improvement Plan

In the Comprehensive Performance Assessment (CPA) the Audit Commission classed Southwark as a “weak” authority. The Department is committed through this plan to help deliver the borough’s CPA Improvement Plan to tackle this issue, in particular through ensuring:

- The maximisation of the Social Services Star Rating Assessment which translates into the overall score of the Council in the CPA , with a short term target of increasing the Children’s rating from 2 to 3
- Clarity of long term strategic objectives, policy objectives and plans for improvements towards clear targets
- Improving our capacity to deliver, enabling us to improve services in a more dynamic fashion

- Further embedding our performance management arrangements, ensuring they are used to identify and improve weak areas and secure best value
- Sound financial management and effective strategic alignment of resources with priorities
- Further developing our already strong partnership arrangements, both with other agencies but also, through improved commissioning, with social care market providers in order to ensure local needs can be met
- Contributing to improved corporate management and inter-departmental working on cross cutting issues
- Investing in ICT and customer care and e-governance
- Improving communications with staff and partners, for example by maintaining Investors in People standards
- Improving our ability to learn as an organisation, from ourselves and others, by ensuring comparative analysis and best practice informs policy development
- Engaging fully with the Member development agenda
- Contributing to “Forward@Southwark” projects

B Context and key issues

5.1 Key Priorities, Policy Drivers and Management Issues 2004/5 – 2006/7

In addition to corporate priorities the department must also deliver on the specific statutory requirements and national performance expectations. Underlying specific performance targets there are a number of key policy themes which influence our plans at all levels as follows;

Departmental themes:

- 5.1.1 Modernisation:** Modernisation is a useful catch all word for all the improvements and changes that the department is seeking over the next three years. It is about ensuring services are user focussed, efficient, effective, joined up, equitable, high quality and help support the delivery of national strategic objectives for health and social care. Modernisation involves reform of existing services, and requires disinvestment from some traditional services in order to fund new priority areas. All the objectives in this plan contribute to this goal to a greater or lesser degree.
- 5.1.2 Integration and organisational change:** Over the next three years there will be further progress towards integration of services with health and other agencies and, where not formally integrated, the services will be increasingly co-ordinated to deliver the best results for users. This process will be assisted by the joint role of Chris Bull as both the Director of Social Services and Chief Executive of the Primary Care Trust. By the end of 2006/07 we expect there to be integration of the funding, commissioning, assessment and delivery of community services for people with learning disabilities, mental health (already achieved), older people's services and services for people with physical disabilities, including Occupational Therapy and community equipment, Children's Disabilities Services and other aspects of Children's Services. Strategic and support services will also be increasingly integrated. Managing this organisational change in way that secures the best outcome for service users will be an ongoing challenge over the next three years. The integration agenda also means that many of the targets in this plan will increasingly be the responsibility of new organisations, and the traditional concept of the Social Services Department may be increasingly irrelevant.
- 5.1.3 The Primary Care Trust (PCT) Local Delivery Plan (LDP):** The department will be a key partner of the PCT in delivering health and social care improvements set out in the Primary Care Trust Local Delivery Plan for 2004/05. The planning processes

of the PCT and Social Services will become increasingly integrated to ensure effective delivery of services, and the finalisation of this plan will be undertaken in tandem with the development of the PCT. This will be reflected by the development of an overarching PCT/SSD Business Plan.

5.1.4 National Priorities for Health and Social Care 2004/5-2006/7:

The Department of Health document "***Improvement, expansion and reform: the next 3 years*** – Priorities and Planning Framework" sets the agenda for a number of key priorities for health and social care. This includes some challenging targets which supplements the National Priorities Guidance and National Service Frameworks underlying the existing performance assessment and modernisation framework. These are incorporated into this plan.

5.1.5 Commissioning and market stabilisation:

Ensuring that Commissioning functions are playing a leading and dynamic role in modernising services and forging strong and stable partnerships with social care market providers and other agencies is a vital foundation for the delivery of this Plan. We must ensure that appropriately configured services exist with sufficient capacity to meet the needs we wish to address. This is also an area where, nationally and locally, the system faces one of its major risks. A specific challenge within this is to address the shortage in supply of quality social care placements, particularly in residential and nursing care for adults, homecare, intermediate care and children's foster care.

5.1.6 Fair Access to Care :

Ensuring social services are appropriate to the needs of Southwark's diverse population has long been a priority. The outcome of the 2003/04 Race Impact Assessments across all services will feed into our equalities plans. Through the delivery of our mainstreaming equalities policy we will seek to further improve this area to ensure that services are provide an appropriate and fair response to people's needs taking into account factors of ethnicity, culture and religion. It will be ensured that our eligibility criteria continue to operate within "Fair Access to Care" and that we deliver on other statutory guidance of relevance to the equalities agenda that is specific to social care.

5.1.7 Targeting resources:

The Department is in the process of modernising policy by ensuring resources are appropriately targeted on those most in need, whilst maintaining an appropriate level of investment in effective preventative services. In some cases this means diverting resources away from services for adults with lower levels of needs, and investing that resource in services for Children and Adults who are highly vulnerable. Far reaching changes initiated in 2002/03 to home

care **eligibility** policy will continue to be managed over the period of this plan. Over the next three years the investment in subsidised child care for working parents through the Early Years service will also be phased out to enable further investment in more targeted support for vulnerable children.

5.1.8 Delivery: The Department has recognised past problems in implementing its policy priorities in a sufficiently dynamic fashion. This has in part been caused by capacity problems in the face of a crowded change agenda compounded by often severe operational pressures. However it can also be linked to past weaknesses in the management of change. To tackle this a new delivery framework based on sound project and programme management practice is being developed which should become fully embedded during the next two years and assist the department in maximising its capacity to deliver the changes in this plan.

5.1.9 Investing in our staff: A major challenge underpinning this plan is ensuring that we have staff in place with the appropriate skills and sufficient support to deliver our objectives. This is also acknowledged as a key risk area due to pressures in the social care employment market. The department seeks to transform the way it trains, develops, supports and communicates with all our staff so that their skills, work programmes and motivation match what needs to be delivered in this plan. We will be using the **Investors in People** framework to help deliver this. Staff management improvements will also be targeted on increasing productivity and recruitment and retention strategies will continue to be developed to tackle the shortage of social work staff in London.

The central aims of our Investors in People programme are to maximise the effectiveness of our staffing resources. This includes ensuring:

- all staff are provided with clear work plans with objectives that link directly to the organisational plans at all levels
- the training and development needs of all staff to deliver their work plan are properly assessed and addressed
- all staff are properly supervised and supported in the delivery of their work plan
- improved internal communications at all levels, from individual work planning meeting and team meetings through to Departmental level communications, including project planning
- good human resource management practice throughout and that there is a culture of valuing people
- application of work / life balance principles

- through investing in our staff, improving our success at recruitment and retention

Children's specific themes

- 5.1.10 Responding to the emerging national agenda on Children's Services:** The September 2003 Green Paper on the future of Children's Services "Every Child Matters" signals major organisational changes, including the integration of Education and Children's Social Services to form Children's Trusts. The Department, with its partners on the Children's Partnership Board, will be seeking to identify the best way of implementing any changes in response to this agenda such that it is in the best interests of vulnerable children in Southwark. The targets in this plan that relate to outcomes for children will be absorbed into the plans of any new organisation.
- 5.1.11 Investing in the safeguarding of vulnerable children:** The budget strategy for 2003/4 was to divert some £2.5m of real terms growth into children's services to increase its capacity to safeguard vulnerable children in line with Quality Protects and Assessment Framework standards and the recommendations of the Laming enquiry into the death of Victoria Climbié. This is part of a policy that flows from the recognition, supported by the Social Services Inspectorate, that Southwark's Children's Services have been relatively under invested in, and as a result the service did not intervene sufficiently in all cases where children were identified by other agencies as being potentially at risk. During 2004/05 a key priority is to ensure this growth and associated service improvements are fully bedded in, thereby enabling the department to provide a comprehensive service to the growing numbers of children entering the system. In 2005/06 it is anticipated that a further tranche of growth of £1m will be required as demand builds as a result of the expanded referral and assessment capacity.
- 5.1.12 Implementing the family support strategy:** The development of the borough's multi-agency family support strategy is expected to stimulate the development of services to provide early interventions for children families showing early signs of distress. It will ensure that children identified as being at risk of social exclusion are offered support at the earliest possible opportunity. Poverty will be one of the risk factors that may cause disruptions and difficulties in families. The conditions that put children and young people at risk of being involved in crime or becoming victims of crime will play a focus of early interventions. The strategy will complement the Youth Crime strategy and will contribute significantly to the multi-agency **Local Preventative Strategy for Children** that the Council will be required to lead on during the period of this plan. Schools will

play a crucial part in identifying vulnerable children and providing support.

5.1.13 Maximising the life chances of children looked after: A number of the key indicators and targets in this plan reflect the priority of improving outcomes for children who are looked after by the Council. A particular focus is on education, providing stable family placements and improving the health and reducing the offending of children looked after. The Care Leaver service has a key role to play in this by supporting Care Leavers up to the age of 25.

Community Care specific themes:

5.1.14 Supporting adults to live in their own home: A key underlying objective for all community care services is helping people with high levels of support needs to live at home. Several of the indicators and targets in this Plan reflect progress in this area. Avoiding admission of people to residential care, nursing care and hospital and facilitating timely discharge from hospital are central to this agenda. This will require over a period of time substantial increases in intensive homecare, the development of Intermediate Care options and supported housing is also a priority in this context.

5.1.15 Promoting Independence: A central theme of modernisation is to promote the independence of adults with community care needs, and this is reflected in a number of client group policies and associated targets in this plan. Traditional services for people with care needs are now frequently seen as leading to institutionalisation, dependency and social exclusion rather than promoting independence, social integration and employment opportunities. For example, long stay hospitals and large scale residential homes for people with learning disabilities are now increasingly being replaced with supported living arrangements in which carers help people to live as independently as possible in their own homes. Assisting younger adults with physical disabilities to be economically active is a requirement of care planning for this client group.

6 Service Profiles:

6.1 Community Care service profile

The Community Care Division of Social Services provides a comprehensive range of social care support services to Southwark's vulnerable adults and their carers.

Following a referral and an assessment of need, those who are eligible for community care services receive a care package which is subsequently kept under review to ensure it is adequately addressing their needs. The service provided helps adults with support needs to live independently in their own home or, if their needs can not be met at home, a high quality residential or nursing care setting is provided. The services also works closely with health partners, for example, to help avoid hospital admission and facilitate safe discharge from hospital for service users.

Based on latest annual data, overall some 6800 adults received a service in the year. The care packages commissioned included some:

- 900,000 hours of home care
- 73,000 weeks of Residential or Nursing Care
- 230,000 sessions of day care
- 187,000 meals delivered to homes or lunch clubs
- 10,400 items of occupational therapy/adaptations equipment

The division also funds a range of related services, including Advocacy, Concessionary Fares and parking, Welfare Rights Advice and a range of voluntary sector projects.

The work of the division is focussed around four main client groups:

- Older people
- Adults with physical disabilities
- Adults with learning disabilities
- Adults with mental health and substance abuse problems

Underlying this plan is a more detailed Community Care Business Plan, and underlying this are separate plans for each client group and business unit.

The division is organised into four business units:

- Assessment and Care Management and Commissioning (Older People and Adults with Physical Disabilities)
- Mental Health Services (including substance misuse)
- Learning Disabilities Services
- Provider Services (Day Care for Older People and Residential and Day Care for People with Learning Disabilities)

The division is working towards service integration and joint working with Health Partners in order to provide a co-ordinated system of health and social care.

Key achievements 2003/04: to be drafted later in year

Legal context: The service meets the Council's statutory responsibilities towards vulnerable adults under the Community Care Act, National Assistance Act and Carer's Recognition Act, although the level of service provided in response to particular needs levels is determined by local policy on eligibility criteria. The way services are delivered is subject to detailed statutory and non-statutory Department of Health guidance and performance management arrangements.

6.2 Children's Division Service Profile

The Children's Division provides a range of social care services to those children & young people and their families defined as in need of care and protection by the Council. The service is provided in line with the requirements and the spirit of the Children Act 1989 and related legislation.

The division receives referrals concerning children about whom there are concerns from a range of sources, and undertakes an assessment of need, commissions and provides appropriate services and keeps these under review to ensure the care provided is meeting needs.

In broad terms the services provided are designed to maximise the life chances of vulnerable children by:

- Looking after children for whom there is judged to be immediate and substantial risk of harm through abuse or neglect (and children facing a custodial sentence) through the provision of residential care or foster care and providing support to leavers of the care system.
- Protecting and supporting children about whom there is a general or specific concern about their potential vulnerability and who may be facing impairment of their

health and development (including support to disabled children)

Activity data: at present there are approximately:

- 650 Children Looked After
- 240 on the Child Protection Register
- 1500 Children In Need
- 400 children on the Disability Register

Services provided last year include:

- Processing of around 3,000 referrals each year of which around one third lead to an assessment
- 24,250 weeks of foster care, equivalent to 465 children at any one time
- 4,000 weeks of residential care, equivalent to 78 children at any one time
- adoption processes successfully completed for 29 Children looked after
- 280 free day care places for children under 5 whose parents need family support
- Youth Offending Services
- Services provided for care leavers
- A range of support services for children and families in need of help

The Children's division is also responsible for operating the Council's Asylum Seekers service with a turnover of some £20m.

The service also supports the development of the Sure Start projects and 40 Children's Fund projects through its partnership working.

The Division is structured into 3 main business units:

District Services provide the core assessment and care management services through the following specialist teams for the north and south of the borough:

- Referral & Assessment, including Hospital based Teams
- Family Support Services, including child protection
- Children Looked After Services.

Direct Services provides borough-wide specialist service and care provider services comprising of: - 16+ Service, Asylum seekers Team, Child Mental Health Team, Disabilities/ HIV Team, Family Court Assessment Service, Fostering & Adoption service & residential Services.

Planning & Business Development Team provide an integrated planning & commissioning and strategic business development resource for the division

Underlying this plan is a more detailed Children's Division Business Plan, and underlying this are separate plans for each client group and business unit.

Youth Justice: The business plan for the multi-agency Youth Offending Team managed by Children's Social Services is a separate document linked to the Council's Youth Justice Plan and is not captured in this Plan.

Key achievements 2003/04: to be drafted later in year

Legal context: The service meets the Council's statutory responsibilities towards vulnerable children under the Children Act 1989. The level of service provided in response to particular needs levels is determined by local policy on eligibility criteria and care management practice. The way services are delivered is subject to detailed statutory and non-statutory Department of Health guidance and performance management arrangements.

6.3 Performance and Business Support Division

The Performance and Business Support Division provides a range of core support services to assist in the effective and efficient delivery of the front line service objectives as set out in this plan.

Key priorities for the forthcoming year are to further improve in the following areas:

Human Resources (HR)

- ◆ Continue to provide high quality advice and support to managers and staff in areas such as employment law, and the management and development of staff
- ◆ Ensure that we attract and retain sufficient suitably skilled staff
- ◆ Drive and sustain organisational effectiveness through the performance management of staff.
- ◆ Ensure we are a 'good employer' in comparison to best practice
- ◆ Undertake a review of the HR function across the Department to ensure organisational fitness

Policy Performance and Delivery Team

- ◆ Ensuring an effective performance management framework is in place to monitor delivery
- ◆ Providing quarterly performance reports setting out progress against the targets in this plan and actions for improvement
- ◆ Establishing better project delivery management arrangements
- ◆ Undertaking analysis of performance issues to inform policy development, including the updating of this plan
- ◆ Integrating with the PCT Performance Team and developing a joint performance management framework to support service integration

Information Systems Unit

- ◆ Completing the replacement of Childrens Services IT systems with CareFirst
- ◆ Embarking on the replacement of Community Care IT systems
- ◆ Continuing the programme of IT Infrastructure upgrades and PC replacements, ensuring systems access for all front line staff
- ◆ Ensuring effective processes and policies in place to manage IT faults

Strategic Finance and SAP Team (SFAST)

- ◆ Provide ongoing financial advice and management support
- ◆ Undertake long term strategic planning to ensure the best use of resources
- ◆ Ensure high quality financial management is in place in all services
- ◆ Ensure the satisfactory delivery of the budget strategy
- ◆ Facilitate the timely and accurate completion of statutory returns
- ◆ Further contribute to the Driving Down Debt targets of the Council

Departmental Services Team

- ◆ Improve upon the management of complaints within the Department
- ◆ Ensure both managers & staff understand and comply with their responsibilities under health & safety legislation
- ◆ Ensure that the Department remains customer focussed

- ◆ Provide a responsive public relations & communications service
- ◆ Provide property and office management support
- ◆ Improve Departmental management and maintenance of records
- ◆ Ensure the Department is able to meet its role in responding to major emergencies

Special Projects Team

- ◆ Drive forward a number of key projects that are designed to help the Department become more efficient and customer focused, and deliver on key Departmental and corporate targets. For example: Investors in People, the Administration review (as part of [forward@southwark](#)) and Equalities Impact Assessments

7 Overview of Performance 2002/03

A detailed analysis of performance against each target is set out in section 2 and the summary table attached.

Overall the picture is positive with significant improvements towards targets in a number of key areas. This is reflected by the average increase in the DoH performance rankings for our indicators (the “blob” ratings in which one blob is the lowest and five blobs is the highest).

In particular the performance improvements in Children’s services are significant, continuing the progress made during 2001/02. Improvements have also been made in aspects of Adult’s services, although progress towards targets has been less pronounced than in Children’s services.

7.1 Children’s performance

Key points about the performance of Children’s Services include:

- ◇ duration on the child protection register: Whilst further improvements are targeted it has now improved sufficiently to move out of the lowest Department of Health performance category “investigate urgently” (one “blob”). This was the last remaining indicator in this category in 2001/02 (out of five such indicators in 2000/02) clearly demonstrating the overall picture of continuous improvement.
- ◇ the indicator on health of children looked after has increased markedly
- ◇ performance has also improved on adoptions, re-registrations on the child protection register, timely reviews of children on the child protection register, educational attainment of children looked after (but this remains the key priority for improvement – see below), and final warnings and convictions of children looked after.
- the department also received a good rating on the Victoria Climbié audit set by the Department of Health to test compliance with child protection standards
- good performance has been broadly consolidated in the following areas, although a slight downward trend needs to be carefully monitored;

- ◇ stability of children looked after,
 - ◇ the proportion of Children Looked After in family placements
- performance has deteriorated more significantly in the following areas and will be managed closely;
- ◇ employment, education and training for care leavers
 - ◇ unit costs of residential care and foster care have increased above inflation, although this is linked to market stabilisation factors and a deliberate policy of investing in the in-house foster care service to ensure its continued high performance in an increasingly competitive market

7.2 Adults performance

Overall the picture of performance in adults is mixed, with some improvements and good overall performance rankings, but with some areas not making sufficient progress towards targets.

Improvements have been made in the following key areas:

- ◇ Intensive homecare rates as a proportion of all intensive social care
- ◇ Admissions of older people to residential and nursing care
- ◇ Clients receiving a review
- ◇ Carers Assessments
- ◇ Assessments of older people per head of population
- ◇ Assessments leading to services
- ◇ Emergency admissions to hospital
- ◇ Emergency psychiatric re-admissions
- ◇ Adults with mental health problems helped to live at home
- ◇ Items of OT equipment delivered within 3 weeks

However, significant further improvements are required in many of these indicators to deliver our targets:

Areas where performance has deteriorated include:

- ◇ Waiting time for care packages
- ◇ Unit costs: although this is linked to market stabilisation strategy
- ◇ Admissions of younger adults to residential and nursing care
- ◇ Households receiving intensive homecare
- ◇ Adults and older people with physical disabilities helped to live at home – although this is an intended consequence of the eligibility criteria policy changes

With regards to the four new PAF indicators the picture is also mixed:

- ◇ Delayed transfer from hospital: our performance ranking is low at two blobs, although it is considered that in the specific context of Southwark performance was well relatively well managed
- ◇ Direct payments uptake: our performance on this indicator was also two blobs as a result of low user numbers
- ◇ The user satisfaction survey question was good (4 blobs) on general satisfaction, but weaker (2 blobs) on the specific question regarding satisfaction with the response to requests for changes in the care package.

7.3 Annual Review of Performance 2002/03 by the Social Services Inspectorate (SSI)

At the end of the annual performance assessment cycle the SSI draw together all their findings on social services performance and discuss the key issues in an Annual Review Meeting with the Council. Following this meeting their final conclusions are summarised in an Annual Review letter, which informs the star ratings (see below).

Key points from the Annual Review letter are quoted below. All issues raised will be taken forward in our detailed plans for 2003/04 as well as 2004/05.

Children:

Improvements observed since the previous annual review.

- *the percentage of looked after children fostered or adopted is increasing;*
- *more looked after children have had the necessary health checks;*
- *timely reviews of both looked after children and children on the child protection register have increased;*
- *there has been significant improvement in performance, in re-registrations on the child protection register*
- *there has been a significant increase in the percentage of initial and core assessments achieved to time, but there is still room for further improvement.*

Areas for Improvement

- *performance on the education of looked after children remains poor, although there has been some progress over the year.*

- *although there have been improvements, not all looked after children and children on the child protection register have an allocated social worker. All need to be allocated;*
- *children are still remaining too long on the child protection register, although this has improved from last year;*
- *the percentage of completed assessments that set out objectives and appropriate service responses has increased but remains low*

Capacity for Improvement

- *there is good corporate support from elected members and senior managers and children and young people are a priority for the council;*
- *an additional £2.5 million has been allocated to children's services to strengthen front line services and improve recruitment. This includes additional management posts to improve supervision and quality assurance;*
- *an improvement in human resource management and rationalisation of use of agency staff has resulted in increased stability in staffing;*
- *there is good investment in the training and development of staff, which will increase capacity;*
- *there are strategic partnerships and moves towards integrated provision for services to children with disabilities;*
- *an improved information management system is being implemented for children's services.*

Assessment has highlighted the following concerns about capacity:

- *there has been improved performance overall on children's services during 2002-2003. However, in some areas improvement has fallen short of what was planned;*
- *it will be important to ensure that the early termination of the public private education contract does not have a detrimental effect on the education of looked after children in Southwark.*

Adults

Improvements observed since the previous annual review

Assessment has highlighted the following improvements to services since the last Annual Review:

- *eligibility criteria have been reviewed, revised and applied from April 2003;*
- *on delayed transfers of care, there has been active management and good partnership work to get numbers down virtually to target by*

March 2003. Process delays have been managed out, but more effective commissioning is needed to tackle capacity issues;

- *there is good progress against most key mental health NSF targets;*
- *after a dip last year there is now improved performance on the percentage of equipment delivered within three weeks.*

Areas for Improvement

Assessment has highlighted the following concerns about performance:

- *there has been only very limited progress on achieving carers' assessments and plans across all adult groups. There is a need for sustained improvement in this area;*
- *some people are waiting too long for packages of care following an assessment;*
- *of all adults who are receiving community based services, only 27 are in receipt of Direct Payments*
- *unit costs of residential care for people with learning disabilities remains very high, although it is recognised that this is for historical reasons and will not be easy to change in the short term;*

Capacity for Improvement

Assessment has highlighted the following improvements to capacity:

- *the council's race equality scheme was published before December 2002 and was assessed as being 'clear and effective' in the corporate assessment;*
- *there is effective partnership working at both the commissioning and provider level. Performance management is integrated with the Primary Care Trust and quality assurance systems are in development;*
- *additional money has been allocated in an attempt to stabilise the nursing care market and there is a planned expansion in the number of people benefiting from intermediate care;*
- *expenditure and achievement in staff training and development are generally positive; and*
- *the workforce reflects the diversity within the local population except at senior management level where further attention is needed.*

Assessment has highlighted the following concerns about capacity:

- *last year's Annual Review highlighted the need to progress improved information management systems for adults as well as children. For adults the systems will not be in place until January 2004; and*
- *although the number of vacant posts is reducing, vacancy levels are still above the inner London average and may impact on the organisation's ability to meet objectives.*

7.4 Star Rating

Note: to be updated for recent 2 star rating for 2002/03 – which included an improved underlying rating for Children’s Services

Southwark received a “**two star**” rating for 2001/2 under the Department of Health’s Performance Assessment Framework for Social Services. In this system the maximum star rating is three, the minimum is zero.

The underlying assessment was:

- ◇ Adults – Serving **most** people well and prospects **promising**
- ◇ Children – Serving **some** people well and prospects **promising**

This is on a scale in which the top rating is serving **all** people well and prospects for improvement are **excellent**.

The underlying judgement derives from a number of sources including:

- ◇ performance against the 50 statutory Performance Assessment Framework indicators
- ◇ detailed monitoring of performance and policy delivery in the twice yearly “Delivery and Improvement Statement”
- ◇ the outcome of any inspection activity

Although clearly demonstrating that there is scope for improvement, in comparative terms it should be noted that the rating was relatively strong, with the majority of London Boroughs receiving either one or zero star ratings.

It is the long term objective of Southwark Social Services to improve performance to the three star level by delivering the objectives and targets in this plan. In the short term it is a specific priority to achieve an assessment of “serving most people well” in Children’s, which in turn will increase the service score for the CPA assessment (see 4.3).

7.5 Performance Priorities 2004/5 (PIs)

For specific performance indicators the targets for improvement 2003/4 – 2006/07 are shown in section 2 (page___). Although all these targets are important, our top priorities are to achieve the targets in the following areas:

Children's:

- further improving educational attainment of children looked after and rates of employment, education and training for care leavers
- consolidating the performance achievements of 2002/03
- maintaining high rates of stable foster care and adoption rates for children looked after
- bedding in improvements to the child protection system to; help achieve 100% allocation and review rates; improve performance on assessment framework timescales and further improve performance on duration on the child protection register
- improving performance on the numbers of disabled children and families benefiting from disabilities services, especially respite care
- together with a range of partners, improve the multi agency response to delivering national teenage pregnancy targets

Adults

- meeting challenging new government waiting time targets
- further improving rates of intensive homecare as opposed to residential, nursing and hospital care admission. This will require successful delivery of a number of commissioning strategies, including intermediate care development, supported housing, homecare and service integration
- reducing delayed transfers of care
- increasing direct payments up take
- stabilising the social care market to ensure an adequate supply of quality placements. This is an objective that is a pre-requisite to good performance on a range of PIs
- modernising residential care for people with learning disabilities to increase numbers helped to live at home, and reduce the unit cost of residential care
- improving carers services, especially assessment rates
- improving the rates of service user reviews

8.0 Social Services Financial strategy

8.1 Background

The department's financial strategy is to ensure that:

- ◇ available resources are appropriately aligned with the policy and performance priorities set out in our plans
- ◇ unavoidable budget pressures to deliver statutory services are funded
- ◇ resources are effectively targeted at those most in need
- ◇ the investment in children's services is increased over time towards benchmark levels to better meet Safeguarding objectives

In the last two years there has been significant restructuring of budgets to achieve these goals.

In 2002/03 the budget strategy was underpinned by changed policy on eligibility criteria for community care service. A sizeable gap had emerged between resources available for Social Services and the projected expenditure required to fund the existing configuration of services. It was agreed that the most appropriate way of reconciling the gap was by restricting eligibility for homecare services such that those people formally assessed as having low needs would no longer receive a service, and by reducing the average package size of remaining users reflecting the more targeted approach to risk. This policy enables the department to focus its resources on meeting the needs of those in greatest need of support whilst delivering a balanced budget.

This eligibility change was a major structural adjustment which is still working through the system as new referrals are assessed and existing users are reviewed. The impact has been to significantly scale down the community care system to levels similar to comparable authorities. It has also improved balance between the services we commit ourselves to providing people at a given level of assessed need and the resources we have available to do so.

For 2003/4 the agreed budget strategy was take this forward to identify funds to invest in the delivery of priority areas by:

- Diverting some £1.5m from Adult Day Care services for those in low risk categories by the application of the revised eligibility to this user group
- Achieving £1m efficiency savings without impacting on front line services
- Reducing social services related investment in subsidised child care for working parents via the Early Years service

Along with £6m real terms growth under the strategy these savings are being invested in 2003/04 as follows:

- £2.5m real terms growth in Children's services to achieve objectives around safeguarding children and strengthening the overall child care system. This was based on a recognition that the local system was insufficiently resourced to achieve national and performance priorities
- £1m real terms growth for supporting hospital discharge services to meet key targets
- Meeting inflationary and structural growth pressures
- Investing in social care markets to secure a good supply of quality services to meet social care needs in line with the priorities in this plan

8.2 2004/05 Budget Strategy and Local Government Finance Settlement

Subject to decisions on budget 16th December

The forecast requirement for net growth in 2004/5 is £16.823m including basic inflation of £2.9m on the 2003/04 budget of £99.291m. After taking into account Quality Protects grant mainstreaming of £8.764m (see below) this equates to real mainstream funding growth of £7.896m (8%) including inflation. This level of growth is equal to the increase in FSS (Formula Spending Share) Southwark Social Services received in the 2004/05 settlement. This growth reflects the level of additional investment the government recognises is necessary to meet demand pressure and to deliver on national performance expectations. In the settlement specific grant growth totalling £4.1m was also received for investment in particular areas of national concern. This gives the department overall growth of 9% including inflation, which is in line with the governments stated intention that there should be 6.5% real terms growth in Social Services in 2004/05 to achieve national objectives.

This level of growth is obviously highly welcome and will enable the department to meet the unavoidable growth requirements set out in the budget process. However it is important to note that although the FSS growth is being transferred to Social Services, the growth will still leave the department budget under FSS (£134m) by 13%.

This proposed growth is underpinned by the following strategic reasoning:

- ◆ a number of key statutory Children's services currently funded by Quality Protects **specific grants** should continue to be funded from the core budget now that the funding of these has been mainstreamed into main grant as predicted. As such it is

important to note that this is not real growth for the Council, but a decision to passport mainstreamed funding relating to the social services function. This totals £8.764m of which the largest part is for the Care Leaver services (£5.8m) alongside the main Quality Protects (£2.463m) and the Disability grant (£0.5m). There is not considered to be a realistic policy option in terms of not funding these services, which are either statutory or otherwise crucial to overall service performance.

- ◆ Some growth is identified as being essential to bridge emerging structural **funding gaps** in order to maintain existing statutory services. This includes funding for the Care Leaver Service (£400,000), Nursing Care (NHS funded nursing care gap) (£500,000), children's disabilities (£757,000), National Assistance Act services for asylum seekers (£200,000) and learning disability residential services £500,000 (growth in young adults entering services from Children's Services)
- ◆ **Market stabilisation:** Social care market instability remains a key threat to the overall system. Extra investment is required to secure access to a sufficient number of quality placements across a range of services. This includes meeting above inflation cost pressures in the sector in order to sustain the viability of providers and safeguard capacity. It also includes targeting extra resources at specific providers in return for qualitative and capacity improvements that will meet the assessed requirements of the population. Particular areas of concern are in adult nursing care, especially for older people with mental health problems, residential care, home care and intermediate care. In children's there is a particular need to stabilise the market share of the in-house foster care service as the longer term consequence of not doing so are potentially massive in financial and performance terms, as increased reliance would necessarily be placed on expensive residential and agency fostering services. £1.75m is sought overall for this purpose in 2004/05. This is equivalent to around 2.3% above RPI inflation and is in line with national cost pressures in social services.
- ◆ **Funding for performance imperatives:** There are a number of areas where extra growth is essential in order to meet national performance and policy requirements for 2004/05. This includes funding to meet a range of new targets on **waiting times for assessments and care packages** which will require extra capacity in care management services (£268,000). This extra capacity will actually contribute to a range of key targets including **review rates and carers assessments**. *Note: this item will be funded from specific grant growth rather than mainstream resources.* The government expects a substantial increase in the numbers receiving **community equipment services** and in the speed with which the system responds to needs which is

estimated to require £350,000 growth in 2004/05. *Note: consideration is being given to whether £293,000 of this item will be funded from specific grant growth rather than mainstream resources.* The lack of **Direct Payments** locally is becoming a major issue with the Department of Health and £145,000 is required to boost user support services. Poor local progress in implementing national targets for the development of **intermediate care** and **supported housing** services will have a knock on impact on a range of indicators in the longer term and £421,000 is sought for specific commissioning initiatives to address this. To support a range of National Service Framework targets for **mental health** £350,000 growth is sought for improving early intervention psychosis services.

- ◇ At the time of setting original growth bids, additional funding for **child protection and family support** services of around £1m was expected to be required in 2005/06 (not 2004/05). This would give the structural change associated with the £2.5m growth invested in 2003/04 an opportunity to bed in during 2004/05 and allow the impact to be assessed. It is anticipated that the current expansion of the referral and assessment capacity will result in the identification of previously unmet needs, and the provision of a service response to these, which will generate pressures throughout the system in future years. Extra funding will also help the division achieve convergence with benchmark funding levels in relation to the FSS. *In the settlement for 2004/05 the government has set aside £1.5m of children's growth in the form of a new Safeguarding Grant for Southwark for these purposes. This is to enable Council's to implement the Green Paper "Every Child Matters" released since the last stage of the budget process. This signals the need to move this investment forward and plans for the investment of this grant are being worked on.*
- ◆ The identification of **efficiency savings** to fund this growth is not considered possible in 2004/05. A period of consolidation is required after two years of major structural budget changes including significant savings and redirection of resources. Some of this has not fully worked through the system and budgets are, for a range of reasons, under extreme pressure, particularly in the infrastructure required to support the delivery of the major change programme underway. For similar reasons it is also considered that there is no practical scope for **front line service reductions** to produce savings to fund growth. The previous year's strategies of making savings from lower risk home care and day care services has exhausted the current potential for a similar redirection of resources. This would require a damaging and potentially unacceptable change in eligibility criteria that would exclude people in medium risk bands. The loss of the preventative value in these services would also be potentially

financially counter productive as users needs deteriorate and more intensive services are eventually required.

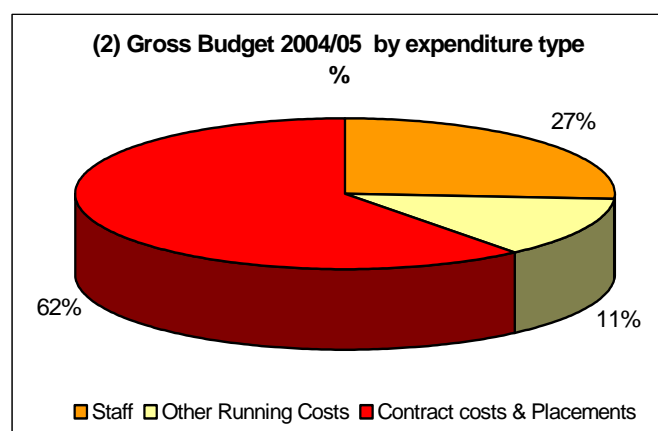
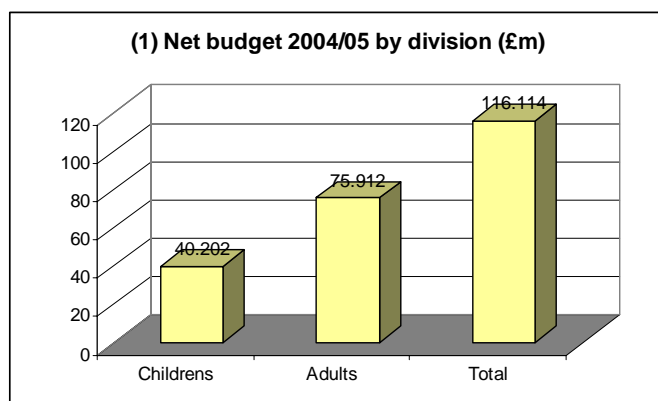
Note: unresolved budget risks at time of writing this draft:

Care Leaver Services for unaccompanied asylum seekers: *Following the "Hillingdon Judgement" the Council will be required to provide a full Leaving Care Service for all unaccompanied asylum seekers. It is not yet clear to what extent Southwark will receive grant funding for these additional costs. This presents a risk of up to £800,000. Government announcements on grant coverage of these costs will be announced soon.*

Concessionary Fares: *An increase in the scope of the Londonwide concessionary fares scheme will increase Southwark's costs by £800k but associated grant has only increased £150k. This is being examined. As this is a corporate responsibility hosted by Social Services this shortfall should not need funding from Social Services budgets.*

8.3 Budget 2004/05

Budget 2004/05: Overall Social Services has a net budget of £116.114m for 2004/5 which, excluding grant mainstreaming, is an increase of 8.1% on 2003/4 but this includes a shortfall of £1.1m as the department has been capped at the level of Formula Spending Share increase. Including specific grant funded expenditure the gross turnover is in the region of £157m. A high level breakdown of the budget is shown in the graphs below:



3 Year financial plan

The three year financial plan for base budgets is as follows:

SOCIAL SERVICES SUMMARY 3 YEAR PLAN			
Expenditure £000	Budget 2004-05	Budget 2005-06	Budget 2006/07
Permanent Staff Costs	35,153	36,334	37,583
Temporary Staff Costs	2,179	2,252	2,330
Premises Costs	852	881	911
Other Costs/ Running Costs	15,727	16,255	16,814
Support Services	3,259	3,368	3,484
Contract Based Costs	42,659	44,091	45,608
External placements	56,809	58,716	60,736
Gross Expenditure	156,639	161,898	167,467
Income	25,149	25,903	26,681
Grants	15,376	15,799	16,233
Net Expenditure	116,114	120,196	124,553

The actual level of future budgets will be derived by assessing potential growth and savings against resources available to amend the base figures. The above figures include the unavoidable growth bids as provisional approval was granted at the time of production of this report. Inflation indices have been applied to years beyond 2004/5.

The approximate breakdown of expenditure between client groups and services is as follows:

Service Area	% of gross costs
Service Strategy	1.6%
Children:	
Childrens commissioning/ social work	8.2%
Children Looked After Services	14.3%
Family Support (inc. 5.3% Early Years)	6.5%
Youth Justice	1.5%
Adoption, Leaving Care and other	3.2%
Sub-total Children	34%
Adults:	
Older People	35.0%
Physical disabilities	7.2%
Learning Disability	13.6%
Mental Health	7.4%
Other	1.3%
Sub-total Adults	64.5%
Total	100%

Nb Based on 01/02 final outturn – to be reconstructed for 2004/05 budgets and represented graphically

Best Value Reviews and Inspections

In draft

Risk Management

In draft

12: Summary of Adults Service Performance Indicators and Targets

	Indicator	2000/1 & DoH ranking	2001/02 & DoH ranking	Target 02/03	Actual 02/03	Target 2003/04	Target 04/05	Target 05/06	Target 06/07
Cost and efficiency	B11 Intensive Home care as a Proportion of Intensive Home and Residential Care %	33.0 ●●●●● very good	31.0 ●●●●● very good	30.0 ●●●●● very good	32 ●●●●● very good	34% ●●●●● very good	36%	38%	40%
	B12 Cost Intensive social care for adults & older people (£) BVPI52	472 ●●● acceptable	489 ●●● acceptable	463 ●●●● Good	533 ●●● acceptable	560 ●● ask questions	588	588	588
	B13 Unit cost residential & nursing care for older people (£)	423 ●●● acceptable	422 ●●●● Good	462 ●●●● Good	464 ●●●● Good	487 ●●● acceptable	486	486	486
	B14 Unit cost of residential & nursing care for adults with learning disabilities (£)	1078 ●● ask questions	1078 ●● ask questions	950 ●● ask questions	1143 ●● ask questions	900 ●● ask questions	850	800	800
	B15 Unit cost of residential and nursing care for adults with mental illness (£)	460 ●●●● good	542 ●●● acceptable	477 ●●●● good	532 ●●● acceptable	558 ●● ask questions	585	585	585
	B16 Unit cost of residential and nursing care for adults with physical disabilities (£)	607 ●●● acceptable	630 ●●● acceptable	568 ●●●● good	652 ●●●● good	684 ●●● acceptable	718	718	718
	B17 Unit cost of home care for adults and older people (£)	12.3 ●●● acceptable	12.20 ●●●● good	12.5 ●●● acceptable	13.9 ●● ask questions	14.59 ●● ask questions	15.32	15.32	15.32
Effectiveness of service delivery and outcomes	C26 Admissions of supported residents aged 65 or over to residential /nursing care	121 ●●●● good	130 ●●● acceptable	112 ●●●● good	121 ●●● acceptable	110 ●●●● good	105	100	98
	C27 Admissions of supported residents 18-64 to residential nursing care	3.6 ●●●● good	3.8 ●●●● good	3.0 ●●●●● very good	4.5 ●●● acceptable	3.5 ●●●● good	3.25	3.00	2.5
	C28 Intensive home care – per 1000 households over 65 BVPI 53	26.8 ●●●●● very good	24.5 ●●●●● very good	25.0 ●●●●● very good	22.9 ●●●●● very good	25.0 ●●●●● very good	27	29	31
	C29 Adults with physical disabilities helped to live at home per 1000 ppn	4.2 ●●●● good	4.3 ●●●● good	5.0 ●●●●● very good	3.4 ●●● acceptable	5.0 ●●●●● very good	5.1	5.2	5.3
	C30 Adults with learning disabilities helped to live at home per 1000 ppn	1.5 ●● ask questions	2.3 ●●● acceptable	2.5 ●●●● good	2.3 ●●● acceptable	3 ●●●●● very good	3.25	3.50	3.6

	Indicator	2000/1 & DoH ranking	2001/02 & DoH ranking	Target 02/03	Actual 02/03	Target 2003/04	Target 04/05	Target 05/06	Target 06/07
	C31 Adults with mental health problems helped to live at home per 1000 ppn	3.8 ●●●●● very good	2.9 ●●●●● very good	4.0 ●●●●● very good	3.4 ●●●●● very good	3.75 ●●●●● very good	3.8	3.9	4
	C32 Older people helped to live at home BVPI 54	153.0 ●●●●● very good	142.0 ●●●●● very good	125 ●●●●● very good	122 ●●●●● very good	115 ●●●●● very good	115	115	115
	C33 Avoidable harm for older people	22.0 ●●● acceptable	24.0 ●●● acceptable	15.0 ●●●●● very good	24 ●●● acceptable	20 ●●●● good	15	15	15
	C52 Direct Payment – users per 100,000 ppn	-	-	-	16 ●● ask questions	30 ●●● acceptable	40	50	15
Quality of services for users and carers	D37 Availability of single rooms	98 ●●●●● very good	98.0 ●●●●● very good	98.0 ●●●●● very good	98 ●●●●● good	98.0 ●●●●● very good	98.5	99	99
	D38 Percentage of equipment costing less than £1000 delivered within 3 weeks(%) BVPI 56	96 ●●●●● very good	95.0 ●●●●● good	98.0 ●●●●● very good	96 ●●●●● good	98.0 ●●●●● very good	75 (new defn)	100 (govt set)	100
	D39 % of people receiving a statement of their needs and how they will be met (%) BVPI 58	99 ●●●●● good	99.0 ●●●●● good	100.0 ●●●●● very good	98 ●●●●● good	99.0 ●●●●● good	99	99	99
	D40 Clients receiving a review BVPI 55	36 ●● ask questions	50 ●● ask questions	60 ●●●●● very good	52 ●●● acceptable	65 ●●●●● very good	70	75	80
	D41 Delayed discharge of older people	-	-	-	104 ●● ask questions	59 ●●● acceptable	39	39	39
	D42 Carer assessments	11 ●● ask questions	11 ●● ask questions	30 ●●● acceptable	17 ●● ask questions	30 ●●● acceptable	35	40	45
	D43 Waiting time for care packages (BVPI from 2003/4)	-	19 ●●●●● good	20 ●●●●● good	26 ●●● acceptable	15 ●●●●● good	0 (govt set – new defn)	0	0
	D52 Users who said they were very or extremely satisfied with services (BVPI 182)	-	-	-	62% ●●●●● good	65% ●●●●● very good	67%	69%	71%
	D53 Users that asked for changes to services who were satisfied with those changes	-	-	-	63% ●● ask questions	72% ●●●●● very good	74%	76%	78%
	E47 Ethnicity of older people receiving assessment	-	0.9 ●● ask questions	-	1.10 ●●● acceptable	In draft			
Fair	E48 Ethnicity of older people receiving services following an assessment	-	0.94 ●●●●● good	1.0 ●●●●● good	1.02 ●●●●● good	1.00 ●●●●● good	1.00	1.00	1.00

Indicator	2000/1 & DoH ranking	2001/02 & DoH ranking	Target 02/03	Actual 02/03	Target 2003/04	Target 04/05	Target 05/06	Target 06/07
E49 Assessments of older people per head of population BVPI59	280 ●●● acceptable	221 ●●● acceptable	200 ●●●●● very good	99 ●●●● good	130 ●●●●● very good	130	130	130
E50 Assessments of adults & older people leading to provision of service	75 ●●●● good	74 ●●●● good	70.1 ●●●● good	60 ●●●●● very good	70 ●●●●● very good	70	70	70
A5 Emergency admissions for older people % growth (interface)	New defn	6.9 ●● ask questions	-5.0 ●●●●● very good	3.2 ●● ask questions	1.0 ●●● acceptable	2.00	3	3 chk ldp
A6 Emergency psychiatric re-admission. (interface)	-	4.8 ●●●● good	- new defn	3.1 ●●●●● very good	Chk ldp			

Table 2 : Summary of Children's Service Targets & Performance Indicators

	Indicator	2000/1	2001/02	Target 2002/03	Actual 02/03	Target 03/04	Target 04/05	Target 05/06	Target 06/07
National priorities	A1 Stability of Placements of Children Looked After - % 3 or more moves BV49	8.1 ●●●●● very good	6.7 ●●●●● very good	8.0 ●●●●● very good	9 ●●●●● very good	8 ●●●●● very good	8	8	8
	A2 Educational Attainment of Children Looked After - % leavers with 1 GCSE + BV 50	24.0 ● investigate urgently	34.0 ●● ask questions	75.0 ●●●●● very good	38.2 ●● ask questions	55 ●●●●● good	60	70	75
	A3 Re-registrations on the Child Protection Register	3.0 ● investigate urgently	7.0 ●●● acceptable	12.5 ●●●●● very good	10.1 ●●●●● very good	10 ●●●●● very good	10	10	10
	A4 Employment, education and training for care leavers BV161	new	45 ●●● acceptable	55 ●●●●● very good	41 ●●● acceptable	50 ●●●●● very good	55	60	65
Cost and efficiency	B7 Children looked after in Family Placements	81.0 ●● ask questions	82.0 ●●●●● good	80.0 ●●●●● good	80.7 ●●●●● good	85 ●●●●● very good	86	87	88
	B8 Cost of Services for Children Looked After BV 51	493 ●●●●● good	521 ●●●●● good	513 ●●●●● good	551 ●●●●● good	590 ●●●●● good	590	590	590
	B9 Unit Costs of Children's Residential Care	1868 ●●●● acceptable	2074 ●●●● acceptable	1704 ●●●● acceptable	2172 ●● ask questions	2000 ●● ask questions	1950	1900	1900
	B10 Unit Costs of Foster Care	268 ●●●● acceptable	280 ●●●●● good	286 ●●●● acceptable (old defn)	307 ●●●● acceptable (340 old defn)	370 ●●●●● good	380	390	400
Effectiveness of service delivery and outcomes	C18 Final warnings and convictions of children looked after	0.4 ●● ask questions	2.3 ●●● acceptable	2.0 ●●● acceptable	1.6 ●●● acceptable	2 ●●● acceptable (review)	1.9	1.8	1.7
	C19 Health of children looked after	44 ● investigate urgently	59 ●● ask questions	75 ●●●●● good	75 ●●●●● good	85 ●●●●● very good	87.5	90	90
	C20 Reviews of Child Protection Cases BV 162	96.0 ●●●●● Very Good	98.0 ●●●●● Very Good	100.0 ●●●●● very good	99 ●●●●● very good	100 ●●●●● very good	100	100	100
	C21 Duration on the Child Protection Register	31.0 ● investigate urgently	26.0 ● investigate urgently	15.0 ●●● acceptable	18.0 ●● ask questions	12 ●●● acceptable	11	10	9
	C22 Young Children Looked After in Family Placements	92.0 ●● ask questions	92.0 ●●●● acceptable – low	95.0 ●●●●● good	97.4 ●●●●● good	96 ●●●●● good	97	98	98
C23 Adoptions of Children Looked After BV 163	1.7 ● investigate urgently	5.0 ●● ask questions	4.0 ●● ask questions	5.6 ●● ask questions	7 ●●●● good	7.5	8	8.5	

	Indicator	2000/1	2001/02	Target 2002/03	Actual 02/03	Target 03/04	Target 04/05	Target 05/06	Target 06/07
	C24 Children looked after absent from school	11 ●●● acceptable	11 ●●● acceptable	7 ●●●● good	10.8 ●●● acceptable	5 ●●●●● very good	4.75	4.5	4.25
quality	D35 Long-term Stability of Placements for Children Looked After	73.0 ●●●●● very good	68.0 ●●●● good	70.0 ●●●● good	70.8 ●●●●● very good	75.0 ●●●●● very good	75	75	75
Fair access	E44 Relative Spend on Family Support BV61	39 ●●●● good	42 ●●●● good	new defn	43 ●●●● good	45 ●●● acceptable	47	47	47
	E45 Ethnicity of Children in Need	N/a	1.10 ●●● acceptable	New defn	1.14 ●●● acceptable	1.18 ●●● acceptable	1.2	1.2	1.2

Note: PAF Performance Indicators -- A to E prefix explanation

The PAF Performance Indicators are set into five dimensions of service delivery (see left hand column) reflecting national priorities for Social Services as follows:

A indicators: "National Priorities and Strategic Objectives": the extent to which local social services authorities are delivering the national priorities for social care (set out in the National Priorities Guidance), the national Personal Social Services (PSS) objectives and their own local strategic objectives

B indicators: "Cost and Efficiency": the extent to which local social services authorities provide cost effective and efficient services

C indicators: "Effectiveness of Service Delivery and Outcomes": the extent to which services are appropriate to need; in line with best practice; to agreed standards; timely; delivered by appropriately trained staff; as well as local social services authorities' success in using their resources to increase self-sufficiency, social and economic participation, increase the life chances of looked after children, and provide safe and supportive services

D indicators: "Quality of Services for Users and Carers": user/carer perceptions and experiences of services; responsiveness of services to individual needs; continuity of service provision; involvement of users/carers in assessment and review

E indicators: "Fair Access": the fairness of provision in relation to need; the existence of clear eligibility criteria; the provision of accessible information about the provision of services

Section 2 – Action Plans

being updated