

## **DUNDEE CITY COUNCIL**

**REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE - 27TH FEBRUARY 2012**

**REPORT ON: DEPARTMENTAL SELF EVALUATION IMPROVEMENT PLAN**

**REPORT BY: DIRECTOR OF SOCIAL WORK**

**REPORT NO: 83 - 2012**

### **1.0 PURPOSE OF REPORT**

This report is prepared to inform the committee of the Improvement Plan produced following the self evaluation activity undertaken by the Social Work Department between April 2010 and September 2011 (committee report 426- 2011).

### **2.0 RECOMMENDATIONS**

It is recommended that committee:

- 2.1 Notes the contents of this report and;
- 2.2 Remits the Director of Social Work to produce an annual report on the progress of self-evaluation improvement plan to committee.

### **3.0 FINANCIAL IMPLICATIONS**

There are no financial implications arising from this report.

### **4.0 MAIN TEXT**

- 4.1 In 2010 the department moved to adopt the Care Inspectorate 'Guide to Supported Self-Evaluation' as its self assessment model. The process of self evaluation information gathering and analysis included:
  - drawing information from a range of evidence from supporting documents, staff, service users and carers surveys
  - inspection reports and findings
  - audits and management datasets
  - leadership staff engagement event for all line managers
  - focus groups with a range of front line staff across all service areas
  - focus groups with service users
- 4.2 The attached improvement plan (appendix1) shows the main areas for improvement and outlines what this improvement will lead to in the future. A number of these actions are extensive and there will more than one management team or individual involved in taking the action forward. Likewise it may not be possible at an early stage to give a clear time for completion. However, the department have attempted to set realistic progress review periods.
- 4.3 A number of the more extensive actions will be included in the new Departmental Service Plan which is due before committee later in 2012 and thereafter will be monitored through the Corporate Performance Monitoring Database. Other actions will be monitored by the Care Inspectorate. These are included in the Care Inspectorate Improvement Plan to

progress the three recommendations from their 2011 scrutiny report of Dundee City Council Social Work Department (committee report 425-2011).

## **5.0 POLICY IMPLICATIONS**

- 5.1 This Report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

## **6.0 CONSULTATIONS**

- 6.1 The Chief Executive, Depute Chief Executive (Support Services) and Director of Finance have been consulted in preparation of this report.

## **7.0 BACKGROUND PAPERS**

- 7.1 Equality Impact Assessment.

Alan G Baird  
**Director of Social Work**

DATE: 15th February  
2012

**Appendix 1**

**DUNDEE CITY COUNCIL SOCIAL WORK DEPARTMENT**

**SELF EVALUATION IMPROVEMENT PLAN**

**2011 -2014**

## Area for Evaluation: 1 - Key Outcomes for People Who Use Services and Their Carers

### Quality Indicator 1.1: Experience of individuals, children and their parents and carers who use our services

What do we need to do	What will it look like	Responsible	Time/Review period
Develop effective service user and carers involvement	<p>Improve co-ordination and consistency of approach to the use of self evaluation methods with users and carers across all services</p> <p>Service users are always being listened to and sufficiently involved in service development and self evaluation.</p>	Coordinated by Strategy Performance and Support Service (SPSS)	Review every 6 months over the period of the new service plan
Further develop the use of personal outcomes for service users and carers	Move away from the use of performance measures which measure processes and/or service delivery to outcomes which reflect the impact on and for service users	All management teams coordinated by SPSS	Review every 6 months over the period of the new service plan
	Further develop the use of outcomes. Some outcomes are only beginning to be measured, this applies especially to outcomes for service users where questionnaires are unsuitable method for collection of evidence	All management teams coordinated by SPSS	Review every 6 months over the period of the new service plan
	Shared outcomes with stakeholders and partners		
Ensure management teams make effective use of departmental performance management framework	Better use of the department's performance management framework to make more specific links between actions and personal outcomes at operational level	All management teams	Dec 2012
	More standardised and improved effectiveness of approach by management teams to the use of data for improvement purposes	All management teams	Dec 2012
	Improved use of knowledge, research and evidence based practice	All management teams	Dec 2012
	Improvement in the ways in which we share good practice	All management teams	Dec 2012

### Quality indicator 1.2: Performance against National and Local Targets

What we need to do?	What will it look like?	Responsible	Time/Review period
We need to ensure we have the correct and outcomes focussed targets to improve performance and effective methods of monitoring these targets	Targets are met within Children's Services	Children's Services Management Team	Quarterly
	Local targets will be reset due to the fact that they been exceeded for some time and could be more ambitious, or because they do not reflect national targets	All management teams with input from SPSS	Annual
	Ensure that there are targets on any of the measures shown, whether they are perception or indicator measures. The lack of targets makes it difficult to assess if planned results are achieved.  Further develop outcome focussed targets	All management teams with input from SPSS	Dec 2012
	Achieve segmented results data to help to prioritise action plans and improvement activities	SPSS Information Officers	Dec 2012

### Area For Evaluation: 1 - Impact on People who use our services

#### Quality indicator 2.1: experience of individuals, children and their parents and carers who use our services

What do we need to do?	What will it look like?	Responsible	Time/Review period
Improve consultation with hard to reach groups	Improved consultation with offenders and other hard to reach groups.	SPSS to lead	Review every 6 months
	Improved consultation with children and young people and their parents or carers	SPSS to lead	Review every 6 months
Improve the opportunities for service users in their communities.	Working more effectively to help people lead less isolated lives, especially in residential care services	Community care Management team	Service Plan annual review
	Doing more to help people feel part of their community and reduce isolation	SPSS to lead	Service Plan annual review
Ensure advocacy for service users is available	Better supporting people attending meetings to ensure they have their voices heard	Operational Management Teams	Review every 6 months

### Area for Evaluation 3 - Impact on employees

#### Quality Indicator 3.1: Motivation and satisfaction

What do we need to do?	What will it look like?	Responsible	Time/Review period
Improve staff motivation and effectiveness	<ul style="list-style-type: none"> <li>Enhanced engagement of social work staff in the planning of services</li> <li>Absence rates will be reduced</li> <li>Skills and expertise will be being fully utilised, especially in front line services</li> <li>A reduction of the use of temporary posts in key services</li> <li>Clarification of the role of the qualified social worker</li> <li>Improved the percentage of staff in criminal justice and community care services who feel valued by their managers</li> <li>Improved the percentage of fieldworkers and residential care workers who feel valued by their managers</li> <li>Improved results in relation to all indicators on Capacity for Change by increased empowerment of staff</li> </ul>	SPSS lead  Management Teams  Management Teams Management Teams  SPSS lead  CJS Management Team  Management Teams  Management Teams	Reviewed by staff survey in 2012

What do we need to do?	What will it look like?	Responsible	Time/Review period
Fully implement the effective support to staff and good practice and management handbook	Implemented the CLF/EPDR policy and process.	Learning and Workforce Development Service (L&WFD) lead	Dec 12
	Increase the range and effectiveness of practice supervision and individual development opportunities	L&WFD lead	Annual
	Enhance the effectiveness of our management and communication arrangements	Directorate	Annual
	Increase in use of co-location and integrated working	Directorate	Annual
	Improved working relationships in areas where these are identified as less positive in the social work or corporate staff surveys.	Management teams	2012 Staff Survey
	Improved approach to the leadership of change and our capacity to respond to change as an organisation	Directorate	Annual
	<p>Ensure we are making best use of staff skills and qualifications to improve outcomes especially:</p> <ul style="list-style-type: none"> <li>▪ increased use of mentoring and coaching</li> <li>▪ increased use of supervised practice as well as 1:1 supervision</li> <li>▪ providing more opportunities for reflection and reflective practice</li> <li>▪ improving the visibility of senior managers</li> </ul>	SPSS (L&WFD) lead	Annual

### Quality Indicator 3.2: Employees' ownership of vision, policy and strategy`

What do we need to do?	What will this look like?	Responsible	Time/Review period
Improve the employees ownership of vision, policy and strategy	Skills are being fully utilised, especially in front line services	Management Teams	2012 Staff Survey
	Review and update the departmental vision in line with a more outcomes focussed approach, as highlighted through leadership events and focus groups with staff	SPSS Lead	June 2012
	Improve the percentage of staff who are aware content and implementation of the SSSC Codes of practice, especially among administrative and support staff.	SPSS Lead	2012 Staff Survey

### Area for Evaluation: 4 - Impact on the Community

#### Quality Indicator 4.1: Community perception, understanding and involvement

What do we need to do?	What will this look like?	Responsible	Time/Review period
Improve wider community engagement/consultation	Full representation on LCPP's and supporting groups by SW,	Manager SPSS	Annual
	Improve the percentage of staff who think that their service helps people to lead less isolated lives (84% in 2010 staff survey:	Management Teams	2012 Staff Survey
	Improve the percentage of service users who think that social work services have helped them to feel a part of their community (58% in 2010 service user survey.	Management Teams	2012 Staff Survey
	Increase support to social enterprise initiatives.	Management Teams	Annual over next two years (Impact of new Commissioning Strategies)



#### Quality Indicator 4.2: - Impact on other stakeholders

What do we need to do?	What will this look like?	Responsible	Time/Review period
We need to keep our stakeholders informed about the range of available services and eligibility criteria.	Develop and implement a partnership questionnaire on the impact and value of social work services	SPSS	Dec 2012
	Develop more shared outcomes across our stakeholders	Partnerships with Health, Police, internal and the third sector	6 monthly over the life of the new Service Plan
Provide opportunities for job shadowing across services	Improve working relationships with education, housing and health services across the department based on 2010 staff survey results	Directorate	2012 Staff Survey

#### Quality Indicator 4.3: Community Capacity

What do we need to do?	What will this look like?	Responsible	Time/Review period
Develop and implement a community engagement strategy for social work services.	A community engagement strategy will be in place and implemented Maximise our use of resources. e.g. foster carers, adopters and volunteers  Explore/develop the social work role in relation to self-help and social enterprise initiatives and build it in to developing our long term Commissioning Strategy	SPSS Lead  SPSS/ Children's Services  SPSS Lead	Service Plan annual review

## Area for Evaluation 5: delivery of key processes

### Quality Indicator 5.1: Access to services

What do we need to do?	What will this look like?	Responsible	Time/Review period
Ensure people can be informed about and can access our services	Establish a process management system and/or quality management systems in process management	SPSS	Dec 2012
	Improved access to social work information for both service users and carers and improve consistency of initial responses	SPSS & operational management teams	June 2012
Ensure people can be informed about and can access our services	<p>Changed and an improved processes so that they support and help drive actions highlighted from surveys and external audits to.</p> <ul style="list-style-type: none"> <li>• ensure that service users: <ul style="list-style-type: none"> <li>○ find it easy to get social work information on services</li> <li>○ get a good response in the evening and/or at weekends</li> <li>○ receive a good induction pack at the start of home care services</li> </ul> </li> <li>• ensure that carers: <ul style="list-style-type: none"> <li>○ can use the language of their choice</li> </ul> </li> <li>• revise and update the departmental Public Information Strategy</li> </ul> <p>ensure consistency of initial responses</p>	All management teams	Annual Review

### Quality Indicator 5.2: Day-to-day planning and resource allocation

What do we need to do?	What will this look like?	Responsible	Time/Review period
We must achieve Best Value by effectively utilising all resources and stakeholders to deliver good quality services.	Improve working with partners to ensure early intervention by unives services before social work becomes involved	Directorate	Dec 2013 with review every six months
	Continue improvements for information sharing among agencies, especially communication from health and housing.	Operational management teams	Dec 2013 with an annual review
	Enhance use and consistency of workload management across The department.	Operational management teams	Dec 2012 for completion
We must achieve Best Value by effectively utilising all resources and stakeholders to deliver good quality services	Improve the ways in which we ensure consistency of quality.	SPSS lead	Dec 2012 for completion
	Ensure carers have their needs assessed and addressed.	Operational management teams	Quarterly
	Enhance the identification of unmet need and its management across services.	Operational management teams and SPSS	Quarterly

### Area for Evaluation: 5.3 Assessment, care management and statutory supervision

What do we need to do?	What will this look like?	Responsible	Time/Review period
There areas for improvement are being addressed and monitored in the Care Inspectorate Scrutiny Report Action Plan	Develop joint training to address the need for a common language for all services to determine 'risk'	L&WFD lead	Care Inspectorate Improvement Plan 2012
	Ensure all of our assessment methods are fit for purpose.	Operational management Teams	Care Inspectorate Improvement Plan 2012
	Better co-ordinate and drive the improvement agenda of performance management and ensure that the improvement element is embedded	SPSS Lead	June 2012
	Where there are changes in eligibility criteria this is transparent and clear to SWs, service users carers and other partners	Operational management teams	Annual review of Service Plan

What do we need to do?	What will this look like?	Responsible	Time/Review period
There areas for improvement are being addressed and monitored in the Care Inspectorate Scrutiny Report Action Plan	Develop our transition processes between services	Children's and Community Care management teams	Dec 2013
	Better management of balancing rights/risks between individual and others	Management Teams	Care Inspectorate Improvement plan 2012
	The effectiveness of the TAAT will be revisited and the use of other assessment tools to better reflect outcomes for service users will be explored	Community Care management team	June 2012
	Improve recording and collation of information on unmet need to inform service delivery	SPSS	Quarterly

#### Area for Evaluation: 5.4: Risk management and accountability

What do we need to do?	What will this look like?	Responsible	Time/Review period
These areas for improvement are being addressed and monitored in the Care Inspectorate Scrutiny Report Action Plan	Improve consistency across teams in undertaking assessments, including risk assessments and the use of tools	Operational management teams	Care Inspectorate Improvement plan 2012
	Workers effectively analyse risk assessments and assessments in order to determine appropriate care plans (Children's Services)	Children's Services management team	Care Inspectorate Improvement plan 2012
	Further develop staff in adult services in relation to risk assessment and assessment (Community Care)	Community Care management team	Care Inspectorate Improvement plan 2012
	Further standardise the use of assessment tools and information sharing (Criminal Justice Service)	Criminal Justice Services management team	Care Inspectorate Improvement plan 2012
	The role of team leaders and service managers will be enhanced in assuring the quality of risk assessment, assessment and care planning	Directorate	Care Inspectorate Improvement plan 2012

<b>What do we need to do?</b>	<b>What will this look like?</b>	<b>Responsible</b>	<b>Time/Review period</b>
These areas for improvement are being addressed and monitored in the Care Inspectorate Scrutiny Report Action Plan	The low numbers of carers assessments being reported by carers will show an improvement	Operational management teams	Care Inspectorate Improvement plan 2012
	Improved use of chronologies across all services	Operational management teams	Care Inspectorate Improvement plan 2012
	Better identify and address areas of poor practice with individual workers	Operational management teams	Care Inspectorate Improvement plan 2012

#### **Area for Evaluation: 5.5: Personalised approaches**

<b>What do we need to do?</b>	<b>What will this look like?</b>	<b>Responsible</b>	<b>Time/Review period</b>
These areas for improvement are being addressed and monitored in the Care Inspectorate Scrutiny Report Action Plan.	Improve consistency in the quality of care plans in relation to high risk offenders - where 10% of risk management plans were found to be weak and 20% adequate (SWIA self-evaluation August 2010) (CJS)	CJS Management Team	Care Inspectorate Improvement plan 2012
	Address fully the findings of the advocacy review and have developed regular reporting on the efficacy of advocacy arrangements and services	Community Care management team	Sept 2012
	Roll out the use of the personalised outcomes approach	Operational management teams and SPSS	Annual review of new service plan
	Services will be seeking the views of service users and carers and routinely using these to make day-to-day and more strategic improvements to services	SPSS	Issue survey by Sept 2012

**Area for Evaluation: 5.6: Inclusion, equality and fairness in service delivery**

<b>What do we need to do?</b>	<b>What will this look like?</b>	<b>Responsible</b>	<b>Time/Review period</b>
We need to maximise the use of information about our communities in order to deliver services in a fair and equitable way which embraces Best Value	Improve ways of working with partners including contracted services to better provide services which are inclusive and promote equality.	Finance Contracts and Welfare Rights Services (FC&WRS)	Annual review of new Service Plan
	Better links with partners to optimise the use of information gathered by consultations and be using this information to avoid duplication.	Finance Contracts and Welfare Rights Services (FC&WRS)	Annual review of new Service Plan
	Develop better ways of finding out about those who may need our support but do not access it.	SPSS	Annual review of new Service Plan
	Individual circumstances and need rather than age will determine service level to reduce the impact of transition and possible age discrimination particularly young adults and retired persons.	CS &CC management teams	Quarterly
	Improve the information that we hold about the demographics of service users.	SPSS - (Social work information group)	Quarterly

**Quality Indicator 5.7: Joint and integrated delivery of services**

<b>What do we need to do?</b>	<b>What will this look like?</b>	<b>Responsible</b>	<b>Time/Review period</b>
Use a Best Value approach to improving service outcomes.	Develop methods of measuring outcomes and capturing outcome information	SPSS	Annual
	Look at the timing of meetings/case conferences to enable better involvement of young people	Children's Services Management team	June 2012
	Increase the flexibility of delivery of services	Directorate	Annual review of new Service Plan

**Area for evaluation 6 - policy and service development, planning and performance management**

**Quality Indicator 6.1: Development of Policy and Procedures**

<b>What do we need to do?</b>	<b>What will this look like?</b>	<b>Responsible</b>	<b>Time/Review period</b>
We need to ensure that we achieve Best Value by ensuring we have in place effective processes and performance targets	Further evidence around how the relevance and effectiveness of policies and strategies are evaluated or critical success factors are identified and reviewed and updates made to policies and strategies	SPSS	April 2013
	Identify and design a framework of key processes needed to deliver policies and strategies. This should make it clear how to ownership of key processes is deployed. The effectiveness of this framework should be regularly reviewed	SPSS	April 2013
	Clarify how short term and long term pressures and requirements are balanced to help ensure that policy and strategy are driving the organisation on the correct course	SPSS	April 2013
	More evidence of the effectiveness of the process framework in delivering policy and strategy and will have better developed process indicators and performance targets	SPSS	April 2013
	Develop the use of implementation plans in relation to all policies and strategies to ensure effective deployment, taking account of learning and workforce development needs	SPSS	April 2013
	Review and update the process for the development and review of procedural guidance	SPSS	April 2013

### Quality Indicator 6.2: Operational and Service Planning

What do we need to do?	What will this look like?	Responsible	Time/Review period
We need to ensure there is full engagement of all staff when planning services and setting targets	Improve and extend our use of benchmarking information when developing service/plans etc	SPSS	June 2012
	Personal action plans or team plans in all services	All management teams	Dec2012
We must ensure our people experience more personalised services which promote greater self-determination	More trend over time information from surveys and use to continuously improve what we do and how we do it	SPSS	Dec2012
	Improve and extend our engagement of service users and carers in service planning and review processes	SPSS lead	Dec 2013

### Quality Indicator 6.3: Strategic planning including partnership planning

What do we need to do?	What will this look like?	Responsible	Time/Review period
Further develop partnership and commissioning arrangements	Improve processes for reaching a good joint understanding of how population needs, and the outcomes of care or supervision planning processes, inform strategic plans	SPSS lead	2012 (Care Inspectorate Improvement Plan)



<b>What do we need to do?</b>	<b>What will this look like?</b>	<b>Responsible</b>	<b>Time/Review period</b>
<p>We need to develop a joint Commissioning and Outcomes Strategy with our stakeholders.</p> <p>Ensure our workforce are more aware of the strategic level issues which impact on their work</p> <p>Where possible we need to expand the provision of shared service to achieve economies of scale</p>	Extend the use of joint surveys and other forms of consultation with users and carers with key strategic planning and service delivery partners	Management teams	Annual review
	Ensure the development of shared outcomes is effectively linked to strategic planning and commissioning processes	SPSS&Management teams	Dec 2012
	Increased use of service mapping, gap analysis and benchmarking activities	SPSS	June 2012
	Continue to ensure that our work force plans take account of long term population needs, personalised outcomes, capacity and finance	Directorate	Annual Review
	Better engagement of staff at all levels of the organisation in key strategic planning processes	SPSS	May 2012
	Explore opportunities for shared services both within the Council, with partners and with neighbouring local authorities	Directorate & SPSS	Annual Review

#### **Indicator 6.4: Involvement of users, carers and other stakeholders**

<b>What do we need to do?</b>	<b>What will this look like?</b>	<b>Responsible</b>	<b>Time/Review period</b>
Review our User Involvement Strategy	Provide better evidence of communication of policy and strategy to stakeholders and any evaluation of awareness	SPSS	Dec 2012
	Develop a process for assessment and review of the overall approach to stakeholder involvement	SPSS	Dec 2012

#### Quality Indicator 6.5: Range and quality of services

What do we need to do?	What will this look like?	Responsible	Time/Review period
We need to review our performance management and reporting framework	Extended the production of annual reports on performance of services provided by external providers and use these to drive continuous improvement.	FC & WRS	Annual review
	Develop a more systematic way of disseminating examples of good practice	SPSS	June 201`2
	Further develop SWIM as our main method of communication within the department	SPSS	Dec 2013
	Improve recording and collation of information on gaps in services	SPSS and SWIG group	Quarterly

#### Quality Indicator 6.6: Quality Assurance and Continuous Improvement

What do we need to do?	What will this look like?	Responsible	Time/Review period
We need to evidence the use of creativity, innovation and key competencies or internal people and external partners to design and develop new products and services and in the customer servicing relationship	Better evidence how policy and strategy are developed using information from learning and innovation activities	SPSS	Sept 2010
	Be doing more to seek out best practice elsewhere and apply learning from this	SPSS	June 2012
	Better ownership of continuous improvement by leaders across the organisation through leadership engagement events, improvement task groups.	Directorate/SPSS	May 2012
	Ensure the continued involvement of staff through the use of focus groups, improvement task groups and other continuous improvement activities	SPSS	Dec 2013
	Achieve an increase the use of trend over time information to allow assessment of improvements	SPSS	Service User survey by Dec 2012
	More effective evidence from the results of internal sources of collated customer perception	SPSS	Service User survey by Dec 2012

## Area for Evaluation 7 - Management & Support of Employees

### Quality Indicator 7.1: Recruitment & Retention

What do we need to do?	What will this look like?	Responsible	Time/Review period
Improve communication with staff	Better identify the communication needs of our people and ensure that communication policies, strategies and plans are based on need, this approach would ensure the right information at the right time	SPSS	Dec 2012 with 6 monthly review
	Providing more evidence of bottom up communication channels and horizontal communication channels	All management teams	Dec 2012 with 6 monthly review
	Offering more clarity around how the department recognises and takes account of diversity and different cultural backgrounds when promoting social and cultural activities	All management teams	Dec 2012 with 6 monthly review

### Quality Indicator 7.2: Employee deployment and teamwork

What do we need to do?	What will this look like?	Responsible	Time/Review period
Review opportunities for co-location and mixed skilled teams.	Increased use of co-location and integrated working	Directorate	Annual
Evaluate 'Lochee' Pathfinder	Increase the proportion of staff who feel that their experience is fully taken into account in planning services	All management teams	2012 staff survey
	Clearer about how the resource plan aligns with the policy and strategy, the organisational structure and the framework of key processes	All management teams	2012 staff survey
	Explore reasons for slight deterioration in results on partnership working from staff survey and find ways of improving working relationships with other departments and agencies which appear to have deteriorated slightly.	SPSS	June 2012

### Quality Indicator 7.3: Development of Employees

What do we need to do?	What will this look like	Responsible	Time/Review period
Review and update Learning and Workforce Development Plan	Provide better evidence of designing organisational learning opportunities for example, benchmarking processes, to drive improvements and to help increase the rate of change	L &WFD	Sept 2012
Develop robust Training Needs Analysis and Evaluation systems	Develop our approach to providing opportunities and creative behaviour. Work in this area may increase the rate of improvement	SPSS	March 2012
Extend the qualitative scope of the staff survey on supervision			

### Area for Evaluation 8 - Resources and Capacity Building

#### Quality Indicator 8.1: Financial Management

What do we need to do?	What will this look like	Responsible	Time/Review period
We need to improve our staff understanding of financial matters and undertake realignments where necessary	Improve the percentage of CJS staff who are aware of their responsibilities in relation to financial matters (65%)	CJS management team	June 2012
	Standardisation of financial delegation - some managers have a lot of information/responsibility and others have little or none	Directorate	June 2012
	Reconsidered financial authorisation levels for first line staff	Directorate	June 2012

### Quality Indicator 8.2: Resource Management

What do we need to do?	What will this look like	Responsible	Time/Review period
Achieve Best Value in managing our assets and continue to review our risk register.	Include high level risk as a live issues on all senior management meetings	Directorate	March 2012
	Rationalise and Improve the use of buildings across the Council and department and review opening hours.	Directorate	June 2012
	Further develop the use of specialist equipment, such as video conferencing, and establish inventory and booking systems	SPSS	June 2012
	Consider the need for a departmental asset management strategy	Directorate	June 2012

### Quality Indicator 8.3: Social work information systems

What do we need to do?	What will this look like	Responsible	Time/Review period
We need to ensure that our information systems can cope with demands for different types of outcome driven performance information	Evidence the generation of innovative and creative thinking through the use relevant information and knowledge	SPSS	New Service Plan
	Undertake an assessment and review of the overall approach to knowledge management	SPSS	New Service Plan
	Evidence of how other technologies other than IT are addressed in relation to customer services, e.g. carer home equipment, evaluating alternative and emerging technologies	SPSS	New Service Plan
	Provide evidence of assessment and review of all current methods and limited indication of learning or improvement or benchmarking to drive improvement in technology management	SPSS	New Service Plan

#### Quality Indicator 8.4: Partnership arrangements

What do we need to do?	What will this look like	Responsible	Time/Review period
We need to improve outcomes through stronger partnership arrangements and developing a strategic commissioning framework	Ensure the provision of appropriate access for partners to relevant information and knowledge to drive more partnership benefits	SPSS/SWIG	Quarterly
	Improve information sharing and partnership working with GPs	CC Management team	Dec 2012
	Further develop corporate parenting as a shared responsibility	CS Management team/SPSS	July 2012
	Improve partnership working with hospital based staff and ensure necessary and timely information shared i.e. hospital discharges	CC Management team	Dec 2012
	Better developed and fully implemented secure e-mail and electronic information sharing across partnerships	SPSS	Sept 2012
	Develop a fora for sharing good practice across partnerships	SPSS	Sept 2012
	Working with universal services to help develop their role in relation to JATs and GIRFEC	CC Management team/SPSS	Dec 2013
	Further enhance our working arrangements with the private and voluntary sectors	All management teams	Dec 2012

### Quality Indicator 8.5: Commissioning arrangements

What do we need to do?	What will this look like	Responsible	Time/Review period
This section will be part of the Care Inspectorate Scrutiny Improvement Plan and monitored as a separate action plan	Further develop our work with suppliers in relation to supplier recognition or to mutual development and creative thinking activities in this area	Directorate	Dec 2012
	Extend the production and use of composite Care Commission grading reports in relation to all registered services, internal and external.	SPSS & FC & WR	Dec 2012
	Strategic commissioning will be an area for 'Taking A Closer Look' using SWIA self-evaluation Guide to Strategic Commissioning	SPSS	Dec 2012
	Better use of information from care planning and review activities to inform future commissioning	SPSS	Dec 2012
	Increase the use of outcomes to inform and monitor the implementation of commissioning strategies and their impact	SPSS and operational management teams	Dec 2012
	Making more use of benchmarking to inform future commissioning	SPSS	Dec 2012

### Area for evaluation 9 - leadership and direction

#### Quality Indicator 9.1: Vision, values and aims

Improvement Area	Improvement Action(s)	Responsible	Time/Review period
We need to improve the communication of vision and objectives at all levels and all directions in the organisation as a means of improving outcomes.	Address staff ambivalence about the value placed on social work services by elected members	Directorate	June 2012
	Provide more evidence of benchmarking, learning and review specifically related to leadership; for example improvements to vision and aims	Management Teams	June 2012
	Update the departmental vision in line with feedback from leadership engagement events and staff focus groups to better reflect an outcomes approach	Directorate/SPSS	June 2012

### Quality Indicator 9.2: Leadership of people

Improvement Area	Improvement Action(s)	Responsible	Time/Review period
We need to ensure our senior managers are able to demonstrate a positive impact at all levels of the organisation.	Provide more evidence that the leadership team stimulates creativity in the organisation and develop a process to manage this.	Directorate	Dec 2012
	Revisit the roles and responsibilities of team managers to be better able to support staff	Operational management teams	June 2012
	Improve communication by senior leaders and managers by: <ul style="list-style-type: none"> <li>○ providing more positive feedback</li> <li>○ increasing visibility and accessibility, especially in CJS and Community Care</li> <li>○ providing more written communication - i.e. posting of minutes of meetings</li> <li>○ using more focussed and targeted communication</li> <li>○ including key minutes on SWIM</li> <li>○ revising the content and use of all staff meetings</li> </ul>	Management Teams/SPSS	Dec 2012
We need to ensure our senior managers are able to demonstrate a positive impact at all levels of the organisation.	Improve leadership at all levels by: <ul style="list-style-type: none"> <li>○ helping staff to see themselves as leaders</li> <li>○ harnessing leadership potential and skills</li> <li>○ increasing staff confidence in taking on a leadership role</li> <li>○ increasing development opportunities such as job shadowing, job rotation etc</li> <li>○ providing mentoring and coaching, including peer mentoring.</li> </ul>	Directorate	Dec 2012



### Quality Indicator 9.3: Leadership of change and improvement

Improvement Area	Improvement Action(s)	Responsible	Time/Review period
Change management and organisational development.	Improve communication around significant changes, including clarification about reasons for the change	Directorate and management teams	Annual
	Fully deploy our approach to how leaders help and support people to achieve plans, targets and outcomes	All management teams	6 months
	Provide more evidence of our approach to how leaders participate in professional bodies, conferences and seminars, particularly in promoting and supporting excellence locally and nationally	Directorate	Annual
	Provide more evidence of our approach to how the leadership manage change in the following areas: <ul style="list-style-type: none"> <li>➤ ensuring the effective delivery of change</li> <li>➤ communicating changes and their reasons to external stakeholders</li> <li>➤ supporting and enabling people to manage change</li> <li>➤ measuring and reviewing the effectiveness of change</li> </ul>	Directorate/SPSS	2012 survey
Change management and organisational development.	Explore the role of service managers and team leaders in respect of leading and managing change - concern from staff that service managers and team leaders are 'overwhelmed' with day-to-day responsibilities and do not have space to effectively lead change	Directorate	2012
	Provide clearer timeframes for change programmes	All management teams	2012
	Better use of impact assessments and contingency planning in change management	All management teams	2012