

**Community Care
and
Housing Directorate Plan**

2004 - 2007

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1. Introduction

This is **West Berkshire Council's Community Care & Housing Directorate Plan 2004 - 2007**. It is intended to provide an overview of the way in which we will deliver and develop our services over the next three years. It sets out our vision and priorities, linked to a strategy for how we propose to deliver them.

The Directorate Plan is a key part of our strategic framework and is linked with many other plans. The diagram given Appendix 1 illustrates the way in which the Directorate is reliant on its partnerships, both inside and outside of the Council, in order to deliver its priorities. The Directorate Plan is an integrated part of the **Corporate Plan** which contains a detailed explanation of the Council's vision and priorities for 2003 - 2008. The Council's key priorities underpin delivery of Community Care and Housing services. These include tackling social exclusion; promoting independence for older people, those with disabilities and mental health problems; and increasing the provision of affordable housing.

The Corporate Plan supports the **Community Plan** developed by the Local Strategic Partnership, which works towards actions on the key themes of housing, transport, rural issues and learning. The LSP has been formed in conjunction with private and voluntary sector partners as well as other public sector organisations.

Our key priorities are also reflected in the Council's **Public Service Agreement** which includes specific targets to 'stretch' improvement in our services for helping more older people to live at home and for further opportunities for people with a learning disability.

We measure our progress in meeting priorities through monitoring of **Service Action Plans**. These are drawn up each year and contain detailed actions and targets for each of our service areas: older people, mental health, learning disability, physical disability, housing services and Supporting People. The action plans inform team and individual work plans, which are monitored through our Performance Management framework. The Performance Management Framework also includes regular review and monitoring of our **Risk Action Plan**.

Commissioning Strategies set out how we will arrange and deliver services for each client group. The strategies are based on demographic information, needs analysis and stakeholder views.

Better Care Higher Standards is a charter developed by Community Care, Housing and Health services. It sets out the standards which people needing support and care over the long term should expect from our services. The charter is reviewed and consulted on each year with service users and carers.

We are committed to ensuring that all of these planning documents, including this Directorate Plan, are real working tools and do not just sit on a shelf. We will do our best, together with our partners, to put the plans into practice.

2. Taking Our Services Forward

As people's expectations change, so the kinds of services we arrange, and the way in which we deliver them, need to change. Increasingly, people want more of a say in arranging their own care - possibly through Direct Payments - and in identifying which of their needs they would prefer to have met - perhaps through a self-assessment or similar model. These changes, therefore, will potentially impact on the range of services available and where and when they are delivered.

Ways of communicating with the Council and its partners change also, with the development of the Contact Centre and an increasing use of web-based technology and IT systems. Our aim is to develop user-centred services, build capacity in conjunction with our partners and lead to new ways of doing things.

We plan to work alongside our users in defining the kinds of social care services the Council ought to provide or enable from outside the council, and the ways in which these might be delivered. This will require a transformation in our services in the medium term. The Council's strategic partner - Amey West Berkshire - will provide support for this work.

3. Context

3.1 The Local Context

The Locality:

- The population of West Berkshire is 144,483 and the age profile roughly mirrors that of the country as a whole, although West Berkshire has a greater number of 30 - 59 year olds, and slightly fewer over 75's, than the average. However, the number of over 75's is forecast to rise by 1.6% per year for the next ten years, with over 85's seeing a higher growth, up 29% in the next ten years. The overall life expectancy in West Berkshire is higher than average and is increasing, meaning people will require more and different levels of services throughout their lifetime.
- Almost 18,000 West Berkshire residents reported in the 2001 Census that they have a limiting long-term illness. This equates to 12.4% of the total population, although there were local differences, varying from just under 10% in Birch Copse, to over 18% in Victoria ward.

- West Berkshire has a smaller and more scattered ethnic minority population compared with each of the other Berkshire unitary authorities and with England as a whole.
- West Berkshire covers more than half the total area of Berkshire and its population is by far the most dispersed of all the unitary authorities in Berkshire with a number of distinct communities with their own identity. While the majority of residents live in settlements west of Reading and in the major towns of Newbury, Hungerford and Thatcham, much of the district is rural. More than 60% of the area is classified as Areas of Outstanding Natural Beauty. The rural aspect of much of the district also presents many challenges. Services can be distant, public transport less viable and the supply of affordable housing cannot keep pace with demand.
- West Berkshire shares in the overall affluence of the South East. It is home to a number of well-known national and international companies. A strong industrial base, characterised by new technology industries with a strong service sector and some manufacturing and wholesale organisations, combine to give West Berkshire one of the lowest unemployment rates in the country at less than 1%.

The impact of these locality features on Community Care and Housing is significant:

- The generally high affluence of the region and of West Berkshire can mask pockets of real deprivation and exclusion. The District does have communities with individuals and families who experience particular difficulties as a consequence of being poor within a generally wealthy region. Housing is a critical strategic concern with accommodation costs consistently among the highest in the country. This has resulted in a shortage of affordable homes for local people, including key public and private sector workers, near to where they work. Sufficient and affordable housing in rural areas is also a major concern, often resulting in young adults unable to buy or rent accommodation in areas where they grew up.
- The low numbers of people from a black and minority ethnic group makes the provision of culturally sensitive care more difficult.
- The wide geographical area of the District and the dispersed nature of much of the population makes access to services difficult and service delivery relatively expensive.
- The benefits of low unemployment are offset by difficulties in recruitment to key services such as home care and residential care.

- West Berkshire has an ageing population. Among older people, the biggest proportional increase in West Berkshire has been in the 85+ age group which has increased by about one-third since the 1991 census, to a total of 2,301 people in the 2001 census. With a rise of 29% in this age group forecast over the next ten years, by 2011 the total West Berkshire population over 85 years of age will be nearly 3,000.
- These demographic changes will challenge the ways in which services have been traditionally delivered, in particular to ensure a range of supports are accessible and available where people live. For isolated rural communities this may mean additional transport links to services and the increased availability and use of broadband and other ICT technologies to provide local access to information about community care, housing and other Council services. Increased need for home adaptations or more specialised accommodation geared to allow as much independence as possible while supporting changing abilities is also likely.

3.2 National Context

The Government is promoting the key modernisation themes for public sector services of:-

- National standard setting, often applied jointly to Health and Social Care
- Increased choice for service users
- Plurality of providers across the public, private and voluntary sectors
- Delivery of prompt and responsive services
- Ensuring equal access to services
- Setting and measuring performance targets
- Securing value for money
- Achieving better outcomes for service users
- Abolishing age discrimination

National Context for Community Care

High quality, effective social care services are underpinned by the key principles of the Government document: **Modernising Social Services**, which states that:-

- Care should be provided to people in a way that supports their independence and respects their dignity.
- Services should be pulled together where appropriate to meet each individual's needs.
- Every person should be safeguarded against abuse, neglect or poor treatment whilst receiving care.
- Staff should be sufficiently trained and skilled for the work they are doing.
- Social services should work to clear and acceptable standards.

Government policy, is driving the integration of all children and young people services at local level. It is also encouraging closer co-operation between health and community care to improve delivery of social care. The New 'Trust' structures being developed will facilitate this change. The transfer of social care services for children to the DfES will develop this policy still further.

Current **development themes** in the modernisation agenda are:

- Focus on well-being - re-ablement, reducing dependency, reducing hospital admissions
- Self-management - expert patient, self-assessment, chronic disease management
- Public Health Agenda (Wanless)
- Protection where necessary - but proportionate
- Information for local people - available everywhere, at all times
- Small scale support - transport, shopping, activities, equipment
- Speedier response times
- Use of local community services - education, training, employment, leisure - as an alternative to large institutions

(SSI 2004 Annual Report)

The **Government's objectives** for Community Care services are as follows:

Promoting independence through:

better preventive services and a stronger focus on rehabilitation;

extension of direct payments schemes;

better support for service users who are able to work;

improved review and follow-up to take account of people's changing needs;

improved support for people with mental health problems;

more support for carers.

Improving protection through:

Transition of inspection, regulation and review functions from the former separate organisations of the National Care Standards Commission, Social Services Inspectorate and Audit Commission/Joint review to the new independent Commission for Social Care and Inspection - introduction of statutory regulation for services such as domiciliary care;

improvements to the way registration and inspection are carried out;

implementation of the No Secrets initiative;

introduction of a National Register of qualified social workers.

Improving standards in the workforce through:

creating a General Social Care Council and the Social Care Institute for Excellence;

Improving training

Improving partnerships through:

developing partnership working between social services, health, housing, employment, education, the criminal justice system and voluntary and private sector providers;

legislation, which allows for the integration of health and social care services.

Improving delivery and efficiency through:

implementing the Performance Assessment and Best Value Frameworks to monitor how well services are delivered;

setting out clear objectives and priorities;

ensuring central and local government work together to ensure high standards.

National Context For Housing:

In April 2000 the Government published the Green Paper, entitled '**Quality and Choice - A Decent Home for All**', which outlined its key priorities. This includes the reduction in the use of Bed and Breakfast for homeless families, where West Berkshire's performance is already good.

The Government expects each local authority to devise a **Housing Strategy Statement**.

This should be an over-arching document that reviews housing-related issues in a local authority's area, sets out its housing objectives, establishes priorities for action both by the local authority and by other service providers and stakeholders, and sets out a clear Action Plan in agreement with the council's local partners. The Housing Strategy is being reviewed during the first part of 2004.

Supporting People went live on 1 April 2003 and amounted to a transfer of funding and responsibility of £1.8 billion for housing related support, from central to local government. This has amounted to massive changes in the supported housing sector, as well as significant new work for local authorities and their partners in probation and health. The funding, contracting, planning and development of supported housing is now managed locally rather than centrally.

The very steep rise in the overall cost of the programme nationally, from the initial estimates and again from the estimates provided at December 2002, have led government to establish an independent review of the value for money of the programme overall. The programme is under further scrutiny as part of the Comprehensive Spending Review. Some councils perceived as having high grant claims and high unit costs - including West Berkshire - are to receive an early Value for Money inspection during 2004.

The Housing Bill published 8 December 2003 aims to modernise the human habitation definition for the fitness of homes, and introduces licensing schemes for

managing living conditions in Houses in Multiple Occupation (HMOs), house seller information packs and curbs on abuses of the Right to Buy schemes.

Part 2 of the Housing Bill introduces the mandatory licensing of houses in multiple occupation (HMOs). The aim of the licensing regime is to provide greater protection to the health, safety and welfare of the occupants of this type of property. Licensing should secure a reduction in death and injury from fire and other health and safety hazards, ensure adequate provision of amenities and, more generally, address poor management practices.

Community Care & Housing Services in West Berkshire 2004 - 2007

What does the local and national context mean for the delivery and development of our services over the next three years?

Vision:

'People who are frail, vulnerable or at risk of social exclusion will be able to access services which will promote and restore health and well being, help them to remain independent, will protect them from harm and enable them to participate as full members of our community.'

Putting this into practice, our key themes will be:

- **Promoting Independence and Protecting Vulnerable People**
- **Social Inclusion**
- **Increasing the provision of homes that are affordable to those on low incomes**
- **Performance Improvement and ensuring quality services**
- **Supporting staff to develop skills and competencies to manage change**
- **Building capacity through working in effective partnerships**

These key themes also reflect the Council's Corporate Priorities.

Key Theme: Promoting Independence

Promoting Independence *for Older People -*

What are the issues?

Demographic change both nationally and locally shows that people are generally healthier, and are living longer, with a consequent increase in the numbers of older people and in particular of very elderly people as a proportion of the total population. People are more likely to have long and active retirement. However, it may also mean that when older people require support and care they are likely to be more frail either physically or mentally.

The largest group of adult users of social care services is people aged 65 and over. Within that group, those aged 85+ make up nearly half of all older people relying on care or support from the council. We have approximately 2000 service users at any one time, of whom 800 are in receipt of home care, some 280 are in residential or nursing home care and the remainder receiving care management, day care, equipment or other services.

Our primary aim is to provide a sufficient level of quality domiciliary supports to help older people stay at home, where that is both their wish and it is appropriate to do so. The Council's Public Service Agreement (PSA) includes a specific target for helping more older people to be supported to live in their own home. Although it is likely that a number of people will continue to need the level of care and protection only available in a residential/nursing home setting, the council is also looking to extend the range of supports it is able to provide - and so increase the choices available to people - through the provision of extra care sheltered housing as an alternative to residential care.

Reducing the numbers of delayed transfers of care from hospital continues to be a primary focus - ensuring that older people receive the right care in the right place at the right time - additional targeted resources have helped to ease this position, although associated issues, such as lack of capacity in the residential and nursing home sector locally, and similar capacity issues in community services - due for example to difficulties in recruiting home care staff, require further attention.

The cost of nursing home beds is high and is a cause for concern we share with other authorities in the South East.

What is our key objective?

To provide services for older people which promote and support independence, and provide care for those who are most vulnerable and potentially at risk.

What are we already doing?

Some activities already in place include:

- Expansion of home care

In 2003/04 have increased the numbers of clients receiving a home care service by 11% at the end of March 2004. Reduction in 15-minute calls and up to 30 minute calls to better meet client needs.

- Delayed transfers

We have seen a reduction in the numbers of delayed transfers from an average of over 22 at the end of 2002, down to less than 10 by the end of 2003. Numbers continue to fall as we increase our range of community care services.

- Intermediate care

The Intermediate Care Team is established jointly with the Newbury and Community Primary Care Trust to prevent hospital admission and to facilitate hospital discharge. It provides rehabilitation to hospital patients, in residential care and in the individual's home, aiming to improve the individual's abilities to manage independently.

- Capacity planning

We are reviewing how we can meet the demands of an ageing population by investigating a range of alternatives to residential care, including the introduction of sheltered housing with home care support and an expansion of intensive home care.

- Community meals

We have contracted a new hot meals service (Apetito) in order to achieve a 7-day a week service across the district.

- Elderly Mentally Infirm Users

We have extended weekend day care services for Elderly Mentally Infirm users, arranged specialist training for residential staff working with this group and developed home care expertise with people suffering from dementia.

What will we do in the next three years?

- Help more Older people to Live at Home

- linked to the corporate plan priority, this will be partly delivered by directing additional resources to domiciliary care and increasing the numbers of people offered a high-intensity package (6 hours or more per week; 10 visits or more).

- We are also seeking to shift away from a residential model to extra-care supported housing, and to extend our rehabilitation services to ensure that as many older people as possible are helped to return home from hospital.

Our target is to increase the numbers of older people supported intensively to live at home to 30% of the total being supported by Community Care services at home or in residential care.

- Prevention

- linked to our Public Service Agreement targets and the Supporting People programme, this is about providing lower levels of support and identifying problems earlier, combined with an extension of day care and respite

opportunities investing in Anchor staying put (small repairs in the home service) and increased help for carers.

- Partnership working
 - integration of services with our Health partners towards seamless care delivery. This will include the further alignment of services at a number of different levels including senior management, Care Managers with GP practices, an extension to the number of services which are jointly funded or which have pooled budgets and the development of housing options for older people in conjunction with housing associations. Joint training opportunities and development of generic care assistants working across Health and Social Care will further streamline care provision.

- Protection of the most vulnerable
 - which includes the development of 24 hour, 7 days a week services, rapid response for emergencies and crisis cover as well as the identification and screening of over 75's likely to be at risk and a review of Adult Protection procedures.

- Building Capacity
 - continue to expand home care service and offer more hours of support in the home.
 - provision of housing with 24 hour care on site for OP with EMTT
 - increased residential rehabilitation for individuals being discharged from hospital and requiring a short-term higher level of support.
 - review of days services and focus on specific needs - rehabilitation and dementia.
 - progress development of EMTT nursing home in Newbury with 60 beds
 - contract 16 beds in a new nursing home in Reading for dementia and elder frail.

- Performance improvement
 - focussed particularly on extending user involvement in service planning, revising procedures and performance management and appraisal systems, undertaking regular practice audits and developing workforce planning strategies.

Promoting Independence ***For People with Learning Disabilities***

What are the issues?

There are just under 400 people with learning disabilities using our services at any one time. Our strategy for the development and provision of services is based on the Valuing People framework, which has the key objectives:

- To enable people with learning disabilities and their families to have greater choice and control over where and how they live;
- To enable people with learning disabilities to lead full and purposeful lives within their community and to develop a range of friendships, activities and relationships.

The Corporate Priorities of promoting independence, reducing social exclusion and delivering affordable housing underpin this strategy. The Council has a local target for Learning Disability services as part of its Public Service Agreement. This looks to stretch targets for delivery of supported living, employment opportunities and the extension of direct payments.

What is our key objective?

To ensure the implementation of the *Valuing People* strategy to enable more people with a learning disability to have choice and control over where and how they live and to ensure the inclusion of people with a learning disability as part of the West Berkshire community.

What are we already doing?

- Supported Living

We have achieved significant success in this area, with over 60 people moving into their own tenancies in the past 18 months. This has been progressed through close co-operation and good joint working between Community Care staff, the Housing and Supporting People teams and local housing associations. Many people who would otherwise have remained in institutional or residential care have been empowered to try independent living, including several for whom it was not thought possible initially.

- Day Opportunities

The need to revitalise day opportunities has been a pressing one, addressed by appointing a Development Manager to oversee the transition from Newbury Day Centre, which has provided a very traditional model of service. The service has been refocused with a new emphasis on learning and development and plans are under way to develop a much wider range of day activities in the future. This will be further facilitated by the development of a new resource centre to replace the existing building as part of the Council's Capital Programme.

- Employment

We have already expanded a number of supported employment projects in conjunction with a number of different partners, including Thrive and Rangers, and appointed job coaches to facilitate a move into the workplace. There are currently 120 users of learning disability services in a range of work placements, from one to one job coaching, through distant support and paid employment.

For example: Service users have set up ROAR - an urban and woodland regeneration project - in conjunction with the Ramblers association, to clear public rights of way and common land areas; the Cottismore Garden Centre is a joint business/education venture between Community Care and Newbury College, providing work and learning opportunities to national qualification standard.

Leisure opportunities have also been developed and will be part of the planning for the new day opportunity service as it develops. A very successful service is now operating at Greenfield House, which will expand its capacity over time; future developments will be progressed alongside the Mencap Link-up Project at Greenham Common.

- Respite services

Respite services have been boosted by the opening of the new respite bungalow in conjunction with Mencap, who funded the building whilst the Council purchases the places. A crisis short break service has also been established in response to requests from carers, partly funded through the Carer's Grant. The need to ensure appropriate support for carers, alongside comprehensive information about the future direction of service modernisation, has remained on primary focus.

- Public Education

The wider education of the public on learning disability issues is also being addressed through media and arts projects. New Greenham Arts staged "Does He Take Sugar" during 2003, a drama and music project portraying some of society's prejudices towards disabled people. Learning disabled users played an active role in the production, countering many of the myths and stereotypes about people's abilities.

At the end of last year service users took part in making a film about what having a learning disability means, the effect it has had on their lives and what the future could hold if they were embraced by society. This was launched early in 2004, accompanied by a DVD and book release.

- **Advocacy**

Self-advocacy groups have been established and expanded over the past 12 months, and Mencap have offered training support to help users participate fully. The *It's My Life* Advocacy Group consists of three inter-linked groups. They consult with a wide range of service users over modernisation and change, gather information and feedback into learning disability services.

What will we do in the next three years?

- **Supported Living**

We will continue to work towards our Public Service Agreement target which aims to have 64 new tenancies in place by the end of the PSA in 2005/06, with 90% of those maintained beyond one year.

- **Day Opportunities**

The Modernisation of Day Services Strategy has been developed as a local tool to be used by commissioners and all key partners to bring about change. This strategy is about how we move from a building based, service led model to a needs led approach that supports people in their local communities. In this context, day services are undergoing an evolutionary change, which involves the gradual replacement of day centre based services by the systematic development of alternative day opportunities. Key to this change is the re-provision of Newbury Day Centre, which along with Greenfield House will create resource centres that will act as hubs for all day opportunities.

- **Employment**

We have already exceeded our Public Service Agreement target of 97 people engaged in valued occupation, work and employment by 2005/06 as there are currently 120 people placed (March 2004). We will continue to take a proactive approach to this area, ensuring that people with a learning disability can: achieve inclusion in ordinary work settings;

- find jobs which offer the same pay and terms and conditions as other employees doing comparable work;
- find the necessary support to function in the workplace
- assist those with severe and complex disabilities to find work and provide ongoing support as required.

These aims will be supported by the partnership project, Pathways to Employment .

- Lifelong Learning

The role of education is crucial in modernising day services through providing vocational and work related training opportunities. We work closely in liaison with Newbury College and are developing several joint projects to deliver learning goals or accreditation. For example, from Summer 2004, Newbury College will be running summer workshops in partnership with learning disability day opportunities. This will be called the Rose Tinted Theatre Company and is supported by the European Social Fund.

Promoting Independence

- for people with mental health problems

What are the issues?

This is an area where joint working between the Council and its Health partners needs to be particularly strong, to prevent crises, manage risk and provide appropriate care quickly to ensure the safety of individual users and those around them.

A National Service Framework (NSF) for mental health services sets down standards required for service availability, good practice and new developments. The NSF is implemented by a Local Implementation Team (LIT) and progress monitored by the Thames Valley Strategic Health Authority on behalf of the Department of Health.

National targets relate to the development of assertive outreach, crisis reduction and early intervention services for those in acute phases of their illness. These are to be complemented by support for people to live at home, use of Direct Payments, help for carers and better access to information and advocacy. We are making good progress in relation to most of these areas, with some further work still to do in relation to early intervention.

Local services have experienced some difficulties since April 2003 as a result of the financial problems facing the Berkshire Healthcare Trust, which provides Mental Health services across Berkshire. The Trust was required to achieve a significant level of savings, in order to reach a balanced position for 2004/05, this has had a significant impact on community services locally and resulted in changes in services operating across localities. The Council will need to work closely with other partners to ensure that the development of community-based services continues.

What are our key objectives?

The Council's strategy for mental health services, underpinned by the corporate priorities of promoting independence, reducing social exclusion and delivering affordable housing, encompasses:-

Implementation of the NSF targets alongside local priorities, focussing on the provision of respite and crisis accommodation locally in order to build an effective infrastructure of community based services.

Ensuring efficient use of beds and other hospital based services in the new Prospect Park hospital, complemented by the provision of appropriate crisis and respite services locally.

Ensuring smooth transfer to CMHT and the day services from their current base at George House to the new base on the site of the West Berkshire Hospital.

Ensuring the active and sustainable development of all of our 250 users and their carers at all stages and levels of planning at service delivery.

What are we already doing?

- **Integration**

In the past year, we have achieved further integration of health and social care staff and achieved a single point of referral for all mental health services, aided by a significant increase in the provision of ICT equipment which has allowed the sharing of records for new referrals.

- **Assertive Outreach**

Needs assessment work indicates that there are approximately 25 people with severe and enduring mental health problems who require assertive outreach services at any one time. We have therefore recruited two Assertive Outreach workers to the Community Mental Health Team, who will provide a specialist service to people with this level of needs.

- **Crisis response**

Crisis response services are jointly funded locally, with the aim of providing an initial response, rapid assessment and short-term intervention. There is now provision for people to access mental health services 24 hours a day, 7 days a week, with access to a Newbury based service until 9 p.m., and then to one covering the West of Berkshire from 9 p.m. to 9 a.m.

- **Respite services**

Additional respite services to ensure that carers have a break have been made available with additional funding. We have set up a well-publicised information guide

which is available on-line, and have established good links with community groups who may identify unmet need among their service users.

What will we do in the next three years?

- **Integration**

During the coming year we hope to finalise plans to move a number of services on to the new West Berkshire hospital site at Turnpike, which will have the advantage of bringing services together and strengthening professional groupings.

- **RESOURCE**

RESOURCE - a non statutory organisation currently operating in Reading - will be setting up a service in Newbury during 2004/05 which will promote a much needed focus for day opportunities and access to work for those with mental health problems in Newbury Town Centre.

- **Crisis response**

We will be seeking through partnership with a housing association to develop locally based crisis accommodation, outside of a hospital environment

- **Performance improvement**

Recruitment and retention of staff in this area is very challenging, workloads are high and continued focus needs to be given to supervision, support and training of staff.

Promoting independence

- <i>for people with physical and sensory disabilities</i>
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What are the issues?

Once again, the corporate priorities of promoting independence, reducing social exclusion and increasing the provision of affordable housing are key to the delivery of services for this user group.

A Physical Disability Strategy Group oversees a change programme, working with housing colleagues to deliver supported living objectives and with other corporate and community partners to implement the Pathways to Employment programme.

What are our key objectives?

To increase the numbers of people with a physical disability helped to live at home
To ensure inclusion of people with a physical disability in the West Berkshire community

What are we already doing?

- **Specialist Team**

A small, specialist Physical Disability Team has been established, working out of Greenfield House in Tilehurst. This team has been very successful in case managing the more complex cases, and has included a specialist MS worker part-funded with the Multiple Sclerosis Society locally.

- **Supported Living**

The Supporting People programme has delivered a number of benefits, allowing users to move into their own supported accommodation, some of who have transferred from nursing home placements.

- **Day Opportunities**

The Ormonde Day Centre is now based on the new College site and continues to offer a highly valued service. The installation of Empower IT facilities, as part of the Council's successful funding bid, has proved very popular. Work placement schemes are being piloted within the authority and outside it and a number of people have been supported into employment during the past year. Ormonde Centre users have started a very successful lunchtime sandwich business at the Waterside Centre in Newbury, where a popular drop-in service has also been established on Tuesdays and Saturdays.

- **Equipment and adaptations**

Equipment and adaptations services are key to promote independence for people with physical disabilities and our high standards of performance in relation to the speedy delivery of equipment continue through involvement in the Berkshire partnership arrangement with Berksability. Funding for adaptations work through Disabled Facilities Grants has been problematic over the past year. This an area to watch in terms of our need as a Council to continue to resource DFGs as a crucial component of our strategies to promote independence and reduce social exclusion.

- **Direct Payments**

A key element of promoting independence is facilitating the use of direct payments. A review of the current service during the year resulted in a re-tendering exercise and a new provider. This will ensure that the service expands and that more community care users are able to use it. Direct payments allow people to choose and employ their own carers, at times to suit them, undertaking the tasks that they define.

What will we do in the next three years?

- **Helping People to Live at Home**

We aim to increase the numbers of people with a physical disability helped to live at home by at least 17%.

- **Direct Payments**

There are currently 33 people in receipt of Direct Payments. We aim to increase this to 110 by 2007.

- **Review of Disability Services**

We will be reviewing Disability Services to ensure the most effective use of resources to support the promotion of independence; expansion of opportunities for people with a physical disability and ensure equality of access to services across the district.

- **Independent Living Fund**

We aim to increase take up of the Independent Living Fund by people with a physical disability to support independent living.

Promoting Independence

- <i>through supporting Carers</i>

What are the issues?

Informal carers provide support and care for many vulnerable and disabled people in our society, and their value has been made more explicit since the late 1990's. Government grants have enabled the development of a number of carer-related services, and carers' strategies are now required from all Councils. We currently have 470 people on our carers database and we are aware of the need to reconcile the 470 Carers on database, with the figure of 2,850 from the Census data, who provide 20 hours or more unpaid care, in any one week

Young carers can be particularly hard to reach, but need support in their caring role as well as in ensuring they can access the same opportunities as other young people. The Council has a statutory responsibility to ensure that all carers of people for whom we are providing a service are offered an assessment of their own needs.

What are our objectives?

Our basic principle is that Carers are the main providers of care in the community, and that we will enable them to provide care or to continue to do so for as long as they and the cared-for wishes. We will actively involve individuals and their carers in planning and evaluating services to meet their needs. We will do this in partnership with all local agencies.

The "Joint Plan for Carers in West Berkshire 2002 - 2005" identifies the following objectives.

1. To recognise and value carers by raising the profile of carers and encouraging hidden carers to become visible.
2. To provide carers with full, clear and up to date information about services from all agencies.
3. To assess carers needs.
4. To consult and involve carers in policies, plans and developments in health and social care.
5. To provide breaks from caring.
6. To support and guide carers
7. To give a choice of quality services.
8. To offer carers equal opportunities of access to services they need.

What are we already doing?

- Finding Carers Through targeted publicity, registration with GPs and the annual Carers' Week we aim to increase the number of carers we are in contact with.
- Use of Carers Grant We work with West Berkshire Carers Forum and other groups to consult on the use of the Carers Grant

Examples of services provided include:-

- Breaks for all Carers by Crossroads
- Community Support services for carers of people with dementia by St John Ambulance
- Family advice, clubs and activities for people with a learning disability by Mencap
- Advice and representation for carers via CAB
- Training for carers of people with dementia by the Alzheimers Disease Society
- Carers support service by Princess Royal Trust
- Drop-in service to support carers of people with learning disabilities
- Support for carers of young people with dementia
- Breaks for parent carers by providing activities for children (2 schemes)
- Young carers scheme

What will we do in the next three years?

- User/Carer Involvement Strategy

We are developing a strategy in consultation with stakeholders and partners to ensure a consistent approach to the involvement of users and carers in the planning, development and monitoring of services. A User/Carer Development Officer has recently been appointed to take this forward.

- Specific services that carers have asked to see developed include:
 - Rural services for those whose access to the urban areas is difficult
 - New services for carers of people with mental health problems
 - New services for carers of people with a learning disability
 - A respite service for carers of younger people with dementia

We will work with the Carers Forum to prioritise these and other areas for funding from the Carers Grant

Promoting Independence - Protecting Vulnerable Adults
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What are the issues?

Vulnerable adults need an effective multi- agency system to protect them from abuse. This is also a national requirement of the " No Secrets " guidance.

In West Berkshire therefore we need to ensure that our local procedures are effective and that we work with other agencies as part of the West of Berkshire Adult protection Committee to ensure that all relevant agencies are aware of and use the procedures.

What are our objectives?

To ensure that all vulnerable adults are protected from abuse by :-

- Providing a good local process for dealing with issues of adult protection.
- Providing training for all West Berkshire staff who work with vulnerable adults
- Engaging with other organisations to develop awareness of adult protection and to assist in helping their staff to access training.
- Working at a strategic level via the Adult Protection Committee to ensure there is a consistent response to vulnerable adults across all agencies in the West of Berkshire.

What are we already doing?

We are currently reviewing the procedures and processes in West Berkshire to ensure that they are effectively protecting vulnerable adults from abuse.

We will continue to provide an adult protection co-ordinator to oversee the local process, provide advice to all professionals who have concerns about a vulnerable adult, and to collate and monitor information.

What will we do in the next three years?

- Review the local training in adult protection.
- Continue to promote the development and training in adult protection across all agencies locally.

Key Theme: Social Inclusion

What are the issues?

West Berkshire, with its generally high levels of affluence and areas of outstanding national beauty can mask pockets of real deprivation and exclusion. This general picture of an attractive, wealthy district only adds to the sense of isolation for those experiencing problems.

West Berkshire Council is committed to ensuring that all citizens, whatever their circumstances, can play as full a part as they would wish in their community. We therefore have a specific corporate priority to work with our partners to reduce the effects of social exclusion and develop more inclusive communities.

All Council services have a part to play in this objective, as many of the issues are inter-linked, e.g.: unemployment; low income; poor skills; poor housing; poor health; transport; community safety; family breakdown.

What are our key objectives?

Community Care and Housing work directly with many of the people who are most at risk of social exclusion in West Berkshire.

We play an active part in the Council's corporate steering group for inclusion and actions are detailed in the Council's plan for this priority. Our key objectives can be summarised as:-

To ensure that our services are inclusive and that all people who are frail or vulnerable feel able to access them.

To ensure that users and carers can participate in all aspects of planning, delivery and quality monitoring of our services.

To work with partners across the Council and in the wider community to ensure that service users are able to access the facilities they need and wish to use.

Much of our activity links with social inclusion. Some specific actions are highlighted below:

What are we already doing?

- User/Carer Involvement

We actively involve users and carers in planning of services and individual care decisions. We are developing our user/carers participation and involvement strategy to ensure a more inclusive approach. This is being supported by the development of self-advocacy and training.

- Black and Ethnic Minorities

We recognise that people may be discriminated against because of their race, ethnicity or nationality. Due to the minority numbers, across such a large district, there is the potential for people from these groups to feel disproportionately isolated and it can be difficult to make contact with them due to lack of representative groups. We are working with the Council's Equalities Action Group to take steps to overcome these issues and to set up consultation mechanisms.

We are carrying out access audits a part of the implementation of the Race Relations Act.

We provide mandatory Working with Diversity training for all our managers and staff.

We inform people of the availability of public documents in different languages and have access to a Language Line translation service.

- Pathways to Employment (P2E)

P2E is a partnership programme which aims to bring together employers and voluntary organisations to make sure everyone has access to work through a range of information, training and supported employment opportunities.

Community Care has piloted many innovative approaches to ensuring that vulnerable and excluded people have opportunities for training and employment, some of which have been listed in the previous section on 'Promoting Independence'.

We have identified a work placement co-ordinator to oversee work opportunities within our service area.

- Income Maximisation

The Welfare Benefits Team ensure that clients receive their full benefits entitlements. In 2003/04, for example, the team have helped people to claim an additional £320 k in benefits.

- **Community Safety**

We have worked with the West Berkshire Drugs and Alcohol Action team (DAAT) to establish services for people with substance misuse problems including an outreach service, working in rural areas and structured day care programmes, working with people on Drug Testing & Treatment Orders.

- **Access to Leisure and Social Facilities/Lifelong learning**

Our strategy is increasingly to move away from building based day opportunities towards an approach which links users with mainstream services in the community.

Current examples include:-

- We continue to fund the 'Keeping Active' programme for older people, which is now in its fourth year, with Newbury College providing very popular classes in residential homes and day centres, in partnership with Adult and Community Learning.
- The E-mpower Project was funded through the DFES Lotteries Fund to equip a range of community, day and residential services across West Berkshire in order to provide free access to IT for leisure and learning for socially excluded people.

What will we do in the next three years?

- **User/Carer Involvement**

A User/Carer Development Officer has recently been appointed to help us develop a more comprehensive User/Carer Involvement Strategy. There are already good practice examples in place, but we need to ensure that these are learnt from and linked into a more holistic approach.

Systematic user and carer involvement will be an important component of our Quality Assurance Framework for Community Care and Housing.

We are working with other Council partners to undertake a Community Needs Analysis for West Berkshire, which will bring together both quantitative data about the district as well as qualitative information from user and carer consultation.

The Community Needs Analysis, along with other service led needs information will inform commissioning plans.

- **Black and Ethnic Minorities**

We will undertake an internal equality audit of our services to assess what we are doing and to identify areas for improvement.

In liaison with the Corporate Equalities Action Group we will establish a forum with representatives from black and ethnic minority groups for consultation and communication.

- **Public Health**

Promoting healthy lifestyles plays a key part in well being. We will work with the Directors of Public Health to ensure that socially excluded and hard to reach groups have access to the same services and screening facilities as the rest of the West Berkshire community.

- **Pathways to Employment (P2E)**

We will work through the P2E partnership to raise awareness of the programme amongst local employers and employees. This will be facilitated via a number of approaches, including the development of the P2E Website (P2E.org.uk); awareness raising events; and the appointment of a West Berkshire Work Placement Co-ordinator, to liaise between the Job Centre, employers and potential employees.

- **Access to Leisure and Social Facilities/Lifelong Learning**

We will implement and promote our day opportunities strategy, to ensure that users of our services access mainstream and community facilities whenever possible.

Our aim is to promote this approach through the development of a smartcard, which will be a form of passport through to leisure, learning and social facilities.

Key Theme: Increasing the provision of homes that are affordable to those on low incomes

What are the issues?

West Berkshire is a district of almost 145,000 people, with the majority living to the west of Reading and in the towns of Newbury, Hungerford, and Thatcham. Seventy four per cent of the District is designated as an Area of Outstanding Natural Beauty (AONB), with the purpose being to conserve and enhance the natural beauty of the area. West Berkshire faces many of the common housing difficulties of the rest of the Thames Valley and the South East, but it also has to deliver a housing strategy which reflects the geographic diversity of the district and varying needs.

Housing is a critical strategic concern of our high accommodation costs. Although the housing difficulties of West Berkshire are typical of the experience in the Thames Valley, the District has seen house prices rise by almost twice that of the rest of the South East and are over 60% higher than the average across England and Wales. This has resulted in a shortage of affordable homes for local people, including key public and private sector workers, many of whom are 'priced out' of the local housing market. It effects both residents and those wishing to move to the District. This, coupled with the short supply of starter homes, causes problems for local recruitment and the retention of staff. The affordability gap has exacerbated problems for key workers.

During April and September 2002 the Council accepted a statutory duty to rehouse 97 of the 150 households who applied as homeless. It is anticipated that the figures will rise over the next five years as a result of increased statutory duties to rehouse homeless young people, ex-offenders and victims of violence. The extent of rural homelessness is unclear but 17% of all applications during April and September 2002 came from rural areas. The challenge facing the council is to provide applicants from rural areas accommodation in their area in time to coincide with their actual homelessness.

Our homelessness review found that during a 6 month period in 2002, the Council accepted a statutory duty to re-house 27 single people as they were homeless and vulnerable. Assuming these figures are typical we can expect to need more than 50 units of accommodation for single people per year where support is provided.

The Council's role is to enable the various providers of housing to meeting local needs. In order to meet local need and offer real choice we will promote effective partnerships and work towards integrating the delivery of services.

The key characteristics of the district which influence our strategy are the important urban and rural influences; the overall prosperity with the underlying pockets of deprivation; and the high levels of employment with a shortage of housing for many people who work in the area.

What is our key objective?

Our primary objective is that, through partnership working, we can extend the range of housing options to ensure everyone has access to adequate affordable housing, whether owned or rented.

We are working to create places where people want to live, and where people will continue to live. To meet this objective we recognise the need to:

- Address immediate and urgent needs for more affordable housing, both for Key Workers and for those who would otherwise be homeless
- Create conditions in which private house builders will build more homes of the right type in the right place
- Work towards a better understanding of the local housing market and to influence its longer term development
- Address the housing needs of local communities
- Make the best use of the existing housing stock
- Ensure that all tenants of social housing have a decent home by 2010 (the "Decent Homes" target) and that all tenants, social and private, get an excellent service from their landlord
- Improve housing conditions for vulnerable people across all tenures and ensure that they can receive the support they may need to live as independently as possible.

What are we already doing?

In light of significant changes to the funding regime for affordable housing and current pressures, we have taken the opportunity to completely revise the housing strategy. This will inform our approach over the next five years as how best to

increase the number of affordable houses and increase and improve supported housing services for those most vulnerable.

Our housing strategy sets out how resources will be utilised and how best to influence the work of other statutory and voluntary agencies. It is an evolving process and contains a clear action plan so that performance can be monitored and improved.

During 2003 - 2004 an estimated 150 affordable houses have been provided. Supported housing has benefited by the Council securing an exceptionally high Supporting People Grant of £6.2 million. This has enabled us to set up new services to support people at home with mental health problems, dementia, physical disabilities, learning disabilities, and preventative support for older people. The Supporting People Programme is also providing extra support for families in temporary accommodation and other people whose tenancies may be at risk, in line with our objective to prevent homelessness.

In order to build on our enabling and strategic achievements, the Council is investing in additional resources. It is in the process of appointing a Housing Strategy Manager to oversee the housing action plan and, an Enabling Officer who will work closely with developers and planners to resolve technical issues.

The council is also establishing a Planning Task Group to consider how best to use supplementary planning guidance, including Section 106 agreements, to meet local needs. A Housing Task Group is also being established, whose primary aim is to engage private developers in helping to meet local housing needs.

Following our homelessness review, a five-year strategy geared to addressing homelessness has been developed. Recognising the important part the Housing Register plays in preventing homelessness, we have undertaken extensive consultation to develop a Common Housing Register. This is now expected to be implemented, in partnership with Sovereign Housing, by July 2004. It will provide a single point of access for those needing affordable housing and stand alone as a means to deliver a more effective, equal and open service.

The Council is currently surveying all its temporary accommodation with aim of improving the standard and increasing the supply temporary accommodation, particularly in the East of the District, where the need is greatest.

Due to the withdrawal of the Local Authority Social Housing Grant (LASHG), which previously funded disabled adaptations to local housing associations stock, there has been increased pressure on the Council's Disabilities Facilities Grant (DFG) budget. Both the DFG and the Housing Renovation Grant and the successor to the Home Repair Assistance Grant have been reviewed. As a result the budget has been increased to £780,000 for each of the next three years for DFGs despite a

further cut of £120,000 from central Government funding. A further £100,000 each has been allocated for the other two grants

What will we do in the next three years?

Following the introduction of the Common Housing Register, we aim to introduce a choice based letting scheme. This will provide a greater opportunity for applicants to input their needs and demands, increase their role in deciding where they wish to live and when they want to move. It is anticipated the current points system will be replaced by a simpler, more transparent, band system, where competing bids for property will be determined initially on the needs band and then on date order.

Current partnership arrangements will be reviewed and extended to ensure the success of the choice based letting scheme. Further links with essential services, such as health and education will be developed to ensure homeless people are able to access key services.

As part of the strategy for delivering affordable housing and supporting living we will:

- negotiate with the Housing Corporation and central government for increased capital funding
- explore options to maximise the opportunities to increase numbers of affordable housing units through the planning and development process
- enable the provision of more new homes for rent and for shared ownership and set targets for the number of new units per year
- produce a Key Worker Strategy for West Berkshire through the partnership with Reading, Wokingham and Bracknell Forest Councils

We will also continue to improve the standard of council owned temporary accommodation and to ensure people move from temporary accommodation into permanent accommodation as soon as possible.

Although we anticipate a significant reduction in central government funding for Supporting People programme, we will seek to ensure best value and strive to improve the quality of housing related support for vulnerable people. In May 2004 we shall be inspected by the Audit Commission and the Housing Corporation and the outcomes of this will inform our Supporting People Strategy for the next five. The strategy will be submitted to Government by March 2005. We aim to build on our existing priorities listed below:

- Vulnerable Young People
- Substance Misuse

- Learning Disability
- Older People
- Floating Support Services
- Nomination and allocation agreements for move-on accommodation

Key Theme: Performance Improvement & Ensuring Quality Services

What are the issues?

A successful outcome for users of our services will be underpinned by a strong quality assurance framework. This framework links a number of the means by which we ensure that our services are timely, focussed, responsive, effective, offer a high standard of customer care and are equally accessible to all who need them.

We measure the effectiveness and quality of our services through a range of methods, including:

- user and carer consultation. Listening to what people have to say about their experience of us and using this to develop and plan services
- quality audits of different aspects of our services
- systematic reporting on targets and performance indicators via the Government's Performance Assessment Framework
- continuous review through management information bulletins and discussion
- quality assurance of our commissioned services as well as direct provision
- scrutiny by elected Members.

Within the quality assurance framework, this range of measurements and assessment sit alongside:

- providing clear information about our standards along with guidance on what to do if they are not met
- a responsive and accessible complaints process
- performance management which makes an explicit link between corporate priorities; service action plans and individual employee targets, as well as financial planning
- elements of practice, for social care staff and line managers to address through individual performance management on a routine basis
- focussed and effective training and development for staff and managers which supports and promotes continuous improvement
- the development of information sharing protocols with partner agencies, which ensure privacy for service users.

Systems to support these activities have been hindered by out-dated IT systems for client records, housing, finance and Human Resources. Plans are underway to commission new systems in each of these areas.

Community Care and Housing's quality assurance framework is developed and promoted within the broader Council's context of Comprehensive Performance Assessment, the Public Service Agreements and the Corporate Plan, which has Performance Improvement as one of its four main organisational development programmes.

What is our key objective?

To ensure successful outcomes for users and carers through developing and promoting a quality assurance framework. The quality assurance framework will aim to ensure that our services are timely, focussed, responsive, effective, offer a high standard of customer care and are equally accessible to all who need them.

What are we already doing?

- **User and Carer Consultation**

We are developing a participation and involvement strategy through user and carer forums; seeking to involve users and carers more proactively in the care management process and promoting user and carer representation on planning forums. This is supported by the development of self-advocacy and training to empower more service users to be involved.

- **Quality Audit**

A rolling programme of quality audits inform service development. To date work has included audits of staff supervision and appraisal process; home care standards; IT skills and case files

- **Performance Assessment Framework (PAF) reporting**

Management information bulletins (the *Green Book*) report on our progress against Government Performance Indicators. These are shared and discussed across management teams, service team meetings and with elected Members.

- **Quality Assurance**

Our contracting process is supported by a programme of accreditation and regular monitoring of commissioned services, linked with National Care Standards Commission requirements.

- **Scrutiny**

Elected Members have set up specific scrutiny task groups to review and make recommendations on service delivery. Recent examples include scrutiny of affordable housing in the district and services for Older People.

- **Standards**

Our standards are set out and consulted upon through the publication and promotion of Better Care Higher Standards.

- Public Liaison

Our complaints process is supported and promoted by clear information for users and carers on how to access and use it. Quarterly and Annual reports recommend actions to be taken in learning from complaints.

Our public information strategy is regularly reviewed to ensure we have high quality, accessible information for users, carers and the general public.

- Training and Development

Following a review of our training function in 2002, a new structure and approach was implemented. This has resulted in a dynamic and focussed programme to deliver training within strategic priorities. The new team has enabled us to increase achievements for NVQ and other professional qualifications.

- Elements of Practice

There are a number of key over arching elements of practice which we are working to embed within the every day work of social care staff. The expectation is that these practitioners and line managers will address these through performance management on a routine basis:

- Practice that is open and transparent, engaging and involving the users and carers with whom we work;
- Practice based on evidence of what works; evidence gleaned from our practice as well as external research;
- Practice that makes outcomes explicit: every file should record the outcomes we are trying to achieve, agreed with users and carers;
- Practice that assesses and analyses risks, needs and strengths routinely and robustly;
- Practice that engages partnerships with other agencies.

In addition, routine quality assurance, through case file monitoring and audit activity will ensure high standards of practice, decision making and recording are sustained.

- Information sharing

We have worked through the Berkshire Caldicott Guardians group to agree a multi agency protocol for information sharing. The protocol has been developed within the broader context of relevant legislation including the Data Protection Act whilst taking into account the need to share information in a way which protects vulnerable adults and children and speeds up multi-agency responses to individuals.

A programme of mandatory training has been provided for staff across Community Care and Housing in Caldicott guidance and the Data Protection Act.

- IT and Information for Social Care

Implementation of the Information of Social Care programme has included improving access to personal computers and networking of sites; providing a programme of IT skills training; working with Corporate colleagues to develop a specification for the new Community Care IT system. Funds to replace the current system have been agreed within the Council's Capital Programme.

What will we do in the next three years?

- Quality Assurance Framework

The Quality Assurance Framework will be developed to reflect our increased partnership working with Health. We will aim to develop in shared performance and quality framework with Health partners.

- Elements of Practice

In line with our service modernisation programme we will prioritise the implementation of user focussed practice amongst teams.

- IT systems

A commissioning and tendering exercise will take place during 2004, with the aim of implementing a new Community Care IT system in 2005. This will take place alongside IT developments in HR, Finance and Housing.

- User and Carer Involvement

The appointment of a User/Carer Development Officer will support the development of a more comprehensive strategy for participation and involvement.

Key Theme: Supporting staff to develop skills and competencies to manage change.

What are the issues?

Responsive and flexible services require a workforce who are equipped to work with and manage change. As we look towards the development of Care Trust models and increased partnership working, in both Community Care and Housing the need for managers and staff who are ready to respond to changes in structures and delivery of services is paramount.

Alongside this reality is the nationally experienced problem of recruitment to the social care workforce. In West Berkshire there are particular difficulties in recruitment to home care and residential services.

New Government initiatives, such as the degree-level qualification, better practice learning, opportunities for continuous professional development alongside the new registration requirement and increased funding for post-qualifying training will all help over time.

In the meantime, the Council needs to develop workforce strategies alongside Health and other partners, to meet changing needs.

What are our key objectives?

To develop, with partners, a workforce planning strategy to delivery on local and national priorities.

To support staff and managers to develop skills and competencies to manage change.

What are we already doing?

- Workforce planning and development

We are working closely with Corporate HR and partners to improve recruitment and retention. Initiatives include developing and implementing a trainee social worker programme and the development of career opportunities for unqualified staff. The programme to review Home Care includes a specific task group focussing on recruitment and retention of staff for this service. We are currently undertaking a review of induction processes to assess and make improvements as necessary.

- *Managing Change*

We are already working closely with Health partners to provide joint training opportunities. This programme currently includes training at a variety of levels on a range of content to support the partnership working.

What will we do in the next three years?

- *Workforce Planning and Development*

We will implement our action plan to improve recruitment and retention of the social care workforce. This will include full GSCC registration for qualified social workers and, with Children's Services, establishing a practice discussion and development forum and a high profile for social work in a changing world. We will aim to establish an appropriate mix of skills across teams to enable further flexibility and choice for our clients.

- *Managing Change*

Our programme of service modernisation with increased focus on user involvement and outcomes, will be fully supported by a bespoke training and development programme for staff and managers.

Key Theme: Building Capacity through working in Effective Partnerships

What are the issues?

The continuing high priority given by West Berkshire Council to partnership working has contributed positively to the challenges posed by limited capacity. The Council works closely in partnerships at strategic and grass roots level to build capacity to ensure the delivery of high quality Community Care and Housing services.

Strong co-operation and communication between agencies also ensures that it is easier for individuals to get the advice and support they need.

What is our key objective?

To build capacity through partnership working to provide high quality, well co-ordinated services for users and carers.

What are we already doing?

- The Council has made great strides in the past two years in establishing its community leadership role. The Local Strategic Partnership brings together local businesses with the public and community sectors to work jointly on projects to tackle agreed priorities in the Community Plan.
- The Amey West Berkshire Partnership has been established for two years now and is delivering significant improvements to both customer service delivery, such as the Contact Centre and the Council infrastructure, such as the replacement of IT systems.
- Service access: the management and operation of Community Care's enquiry centre transferred to the main Council Contact Centre in January 2004, in line with our need for more seamless service delivery and developing a single point of access for the public.
- Integrated working with Newbury Primary Care Trust (PCT), and the development of joint commissioning arrangements with Reading PCT, aim to ensure users can access services more easily.
- The West of Berkshire Partnership Board takes a whole health and social care economy approach to capacity planning, market management and priority setting across West Berkshire, Reading and Wokingham Councils and both Newbury and Community PCT and Reading PCT.

- Work with local housing associations has enabled better and more appropriate services to be delivered.

What will we do in the next three years?

Those developments listed above will remain significant partnerships over the next few years, particularly those with Health.

We will also be working alongside our users in defining the kinds of social care services the Council ought to provide and the ways in which these might be delivered. This will require transformation of our services in the medium term. The Council's strategic partner - Amey West Berkshire - will provide support for this work.

There will be a particular focus on Service Access. With the increasing use of web-based technology and IT systems, we will be working with our partners to build capacity to implement these to best effect in developing user centred services. Following the successful transfer of Community Care's enquiry centre to the main Council Contact Centre, we are working with the Amey partnership to look at how we can further our aims of a single point of access and seamless service delivery.