

Sheffield City Council Adult Care and Wellbeing Working with People Delivery Plan 2024 – 2027

Our Vision and Ambitions for people of Sheffield

Our vision is that *'everyone in Sheffield lives in a place they can call home, in communities that care, doing things that matter to them, celebrated for who they are - and when they need it, they receive care and support that prioritises independence, choice, and recovery.'*

The vision is centred around delivery of five outcomes and six commitments. The Commitments and outcomes are the guiding principles we will follow and how we deliver the strategy. They show how we will achieve our outcomes and highlight what we want to do better.



What is the Sheffield City Council Adults Care and Wellbeing Working with People Delivery Plan?

Our Working with People Delivery Plan focuses on delivery of our Care Act 2014 duties and requirements relating to assessments, reviews and individuals' wellbeing.

The aim of the Plan is to ensure that Sheffield fully addresses and robustly responds to the Care Quality Commission (CQC) Quality Statements of Assessing Needs, Supporting People to Live Healthier Lives and Providing Equity in Experiences and Outcomes.

The plan was developed to coordinate our activities as a Council to maximise the effectiveness of people's care, outcomes and experience. This means putting the person at the heart of our delivery by assessing and reviewing their health, care and wellbeing needs with them in the most effective and timely way possible.

Theme	Milestone/action	When	Lead	How will we be assured?	Position Statement	RAG
Ensuring Timely assessment	Implementation of Waiting Well Framework across all services	Apr 25	Principal Occupational Therapist	Unallocated non-safeguarding tasks(waiting list); median and maximum waiting times for Care act assessment Proportion of cases progressing to CA assessment Qualitative feedback: - surveys Stories of difference Compliments/ complaints data	Now in place operationally across all Living and Ageing Well Short-Term Services with wider consultation and rollout underway for all other service areas	On Track
	Thorough review of long outstanding cases to understand maximum assessment waits	June 24	Business Information Manager/ Deputy DASS Operations	Liquid Logic: unallocated non-safeguarding cases – maximum waits	Completed: This has revealed that in many cases people are receiving long term preventative support whilst recorded as awaiting assessment. This impacts on the data, suggesting people are waiting longer for assessment than is actually the case.	Completed
	Benchmarking review of regional waiting times measures	August 24	Business Information Manager	Y&H Regional benchmarking data returns Y&H ADASS waiting times survey	Completed: Benchmarking exercise undertaken, informing us that in Sheffield we measure the longest possible timeframe, which represents people waiting from first contact to assessment completion. This has allowed us to understand our performance better and set targets more effectively	Completed
	Changes to LAS recording to enable earlier differentiation between people requiring assessment or prevention	June 25	Chief Social Work Officer	Proportion of contacts progressing to CA assessment Data to be confirmed – potential for data on: Preventative case work volumes, timescales; Timeliness of screening to determine pathway within LAS	This will be prioritised after liquid logic upgrade is completed, which is planned for completion by Feb 25. This will be supported through extensive testing to ensure it works effectively before rollout across staff teams and practice. Changes to processes will be progressed over next 4 months to enable improved data for measuring accurate waiting times and numbers awaiting for assessment as a precursor to the liquid logic changes.	Delivery Priority 24 - 26
	Self-service dashboard to review long outstanding assessments and utilisation within services	Apr 25	Director of Operations Operational AD's	Unallocated non-safeguarding tasks maximum waiting times data Data on unallocated non-safeguarding tasks open over 1 month, 3 months, 6 months	Staff performance management dashboard in place to review allocated tasks at employee level and give feedback on timeliness of recording, as well as quality of casework, assessment and recording The next step is to assure its consistent use and application within supervisions and resulting impact on case management – via portfolio led performance clinics	On Track
	Operational redesign within First Contact, positioning resources at the front door to maximise the delivery of our ambition <i>prevent, reduce, delay</i>	October 24	Asst. Director Living and Ageing Well Short Term	First Contact Care Act assessment waiting lists First Contact median days to CA Assessment First Contact % cases progressing to CA Assessment	Completed: Impact being monitored with positive indicators including: reduction in proportion of customers progressing to care act assessment noted -12% as of Sept 24	Completed
	Practice Improvement Review and deep dive - to assure timely recording of assessments and support plans	Dec 24	Director of Operations Chief Social Work Officer	Data report to compare support plan completion with CA Assessment date following review Service level review outcomes	A deep dive is underway to review recording practice and in particular whether there is a delay recording the assessment as complete until the Support Plan has been implemented into the system. This results in inaccurate data on waiting times. Once clarified, practice guidance and improvement plans will be implemented to address findings.	On Track
	Increased monitoring within all teams to build understanding and reductions in assessment waiting times	April 25	Deputy DASS Operations/ Operational AD's	Data on assessment waits – team and service breakdown (% completed within 12 mths; Period since last review etc.) Assurance of monitoring via portfolio performance clinics	Individual services have developed their own arrangements for monitoring assessment waits – Next step is to formalise structure for monitoring at all levels to ensure consistency. Increased monitoring and understanding will feed into solution -focused planning (See action below)	Delivery Priority for 24/25
	Staff engagement – Care Act Assessment: Solution-focussed planning within all operational services to address issues relating to timely care act assessment	Jan 25	Director of Operations/ Operational AD's	Service plans Service-level Business Management Improvement Plan (BMIP) actions Service level data on assessment waits	Improvement plans are already in development across services. Next step is to involve staff in this process more fully and access their solutions. Coordinated programme of regular assurance to be planned and brought to SLT	Delivery Priority 24 - 25
Establish and implement a Care and Assessment Practice Forum to embed good practice across adult care.	March 25	Director of Operations/ Chief Social Work Officer	Outcomes of consultation exercise Outcomes of learning and best practice from the forums	Based on beneficial impact of safeguarding practice forum model a proposal for a similar forum to share best practice, review strengths and risks and explore solutions with representatives from across all care and assessment service areas..Initial proposal to be reviewed at SLT/ SMG	Delivery Priority 24 - 26	

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Delivering Annual Reviews	Increased monitoring within all teams on the completion of planned reviews	March 25	Director of Operations/ Operational AD's	Data on outstanding reviews – team and service breakdown (% completed within 12 mths; Period since last review etc.) Assurance of monitoring via portfolio performance clinics Data on unallocated non-safeguarding tasks open over 3 months, 6 months	Individual services have developed their own arrangements for monitoring reviews. Next step is to formalise structure for monitoring at all levels to ensure consistency. Increased monitoring and understanding will feed into solution -focussed planning (See action below)	On Track
	Staff engagement – reviews: Solution-focussed planning within all operational services to address issues relating to planned reviews completion	Jan 25	Director of Operations/ Operational AD's	Service plans Service-level Business Management Improvement Plan (BMIP) actions Service level data on reviews	Improvement plans are already in development across services. Next step is to involve teams in identifying solutions which enable reviews to be completed on a timely basis. Coordinated programme to be planned and brought to SLT	Delivery Priority 24 - 25
	Team structure review within Living and Ageing Well	Dec 24	Assistant Director Living and Ageing Well Long Term	Impact on unplanned reviews: Data on outstanding reviews – team and service breakdown (% completed within 12 mths; Period since last review etc.)	Review team now in place with further workforce changes in consultation to build capacity of reviews within a care home setting	On Track
	Adult Future Options recruitment	Oct 24	Director of Operations	Portfolio data on outstanding reviews	Completed: Reviews were affected by 9 vacancies within service. These have now been recruited to and impact on reviews performance expected.	Completed
Delivering Annual Reviews	Undertake a test for change to test out further development of the Trusted Reviewer model across care & assessment	June 25	AD's Commissioning/ LAWLT	% reviews completed Feedback on quality of reviews.	Currently undergoing consultation for implementation within next 12 mths	Delivery Priority 24 - 25
	Training and monitoring within teams to improve recording accuracy to ensure all reviews are being recognised and recorded appropriately	Mar 25	Operational AD's	Data on outstanding reviews – team and service breakdown (% completed within 12 mths; Period since last review etc.) Employee level case management data within Staff Performance management dashboard	Staff Performance management dashboard in place for use within supervision and team meetings. Assurance via Performance clinics and governance framework.	Amber
Wellbeing Principle	Adults Assessment and Care Planning Policy and Procedures Framework Embedded in practice and knowledge across all services	Feb 25	Director of Operations/ Chief Social Work Officer	Tri.X data to assure mandatory reading ASCOF data Regular survey outcomes I-statements Case file audits data	The adults assessment and care planning policy and procedures framework has been rolled out via Trix, adult care manual. All AD's and CSWO to embed over next 3 months.	On Track
	Case file audits programme: Evidencing that practice quality is being consistently upheld and findings are being addressed through comprehensive improvement plans and practice quality developments	Apr 25	Director of Operations	Case file audits data: volume and quality metrics Outcomes data (ASCOF, I-statements)	Case File Audits Performance dashboard in place to track numbers and trends. Themes captured and feedback provided to services and senior leaders quarterly. Increasing audit numbers is a priority for improvement.	Amber
Wellbeing Principle	Staff communications: Knowledge of Care Act Principles, with a key focus on promoting wellbeing	April 25	Director of Operations/ Chief Social Work Officer	ASCOF data Regular survey outcomes I-statements Case file audits data	A series of staff communications is planned via e-bulletin and Adult Care and Wellbeing Manual on Care Act principles with a focus on promoting wellbeing. This will complement existing training. Option for follow-up engagement sessions	On Track

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