

DEVON CARE AND REPAIR SERVICE IMPROVEMENT PLAN 2010/11

APPENDIX 1

DESIRED OUTCOMES	OBJECTIVES	ACTION	WHO	MONITORING	PERFORMANCE MEASURES	TIMESCALE	PROGRESS AT 13.12.10
REDUCE WAITING TIMES FOR ADAPTATIONS AND ASSESSMENTS							
Client to get a major adaptation that suits their specific needs within the quickest possible timescale.	Reduce the time taken for each part of the process of adaptation. Each partner will work with DCR to streamline the service and reduce waiting times and duplication of work.	Recording every step of DFG timelines. Analyse the time taken for each partner and each part of the process. Agree revised working practice with each partner.	DCR Service Manager. Partners through representatives on SMDB.	KPI information presented to SMDB and DMG's.	Negotiate revised performance measures to illustrate where the agency is not responsible for delays.	Q1	Major Adaptations Timeline agreed in principle. Formal launch and monitoring roles to be agreed with SMDB.
Speed up assessment process to ensure that clients do not wait for any adaptation for long periods.	Work with partners to introduce a fastrack system that distinguishes between complex and non-complex adaptations.	Work within the HIA work package, which will oversee the development of fastrack system.	DCR and work package group.	Procurement processes completed, provider in place, fast track option made available Assessment waiting lists within ACS eliminate.	To maintain a target of an average 92.6% cases completed within 28 Days for less than £1000 and 56 Days for over £1000	Q1	North Devon Fast-track pilot commenced 7 June. Evaluation underway. Model available as 'Individual Pricing' to all fund holders from 22 November.
Speed up the time taken for	Develop Schedule of rates for	Tender to specialist	DCR Senior Technical	We will have a list of approved		Q2	SOR developed. Available from 22

work to be completed under the fast track system.	stairlifts and level entry showers.	companies to award contract for delivery of the services.	Officer.	contractors to deliver the service. Delivery times for work will improve.			November to all fund holders for LAS and non-complex works. Districts working up stair lift arrangement. Report to SMDB as to how DCR fit in awaited.
Shared vision between DCR and all partners.	To have shared understanding of the contract, and shared expectations and goals for service delivery.	Work within the workgroups, SMDB and DMG's to improve understanding of services and develop shared goals.	All partners.	SMDB to be clear about role of each partner within the contract.		Q1	DCR committed to shared vision and joined up working.
UPDATE CUSTOMER FEEDBACK TO IMPROVE SERVICE IMPROVEMENT PLANS							
Develop and implement new customer feedback methodology. Act upon feedback to improve services.	Consider the possibility of a joint feedback form to reduce administrative burden for client. Learn from the feedback on complaint and compliments forms.	Analyse data; list the improvements and suggestions and feedback on actions taken and/or improvements proposed.	DCR Service Manager and Policy Manager.	Report suggested improvements to SMDB. Each suggestion to have analysis of how we can improve or not with clear reasoning and feedback to focus groups.		Q3	FEMIS 2 introduced in July 2010 has constrained development of data reporting. Customer satisfaction processes being reviewed within all i-futures older people services.
To deliver a service that is client driven in accordance with the HIA contract	To listen to clients who use the service and improve upon service given.	To develop focus groups to consult on service delivery and priorities.	Policy Manager DCR in conjunction with stakeholders.	Report the focus groups' feedback and suggested improvements to SMDB. Each suggestion to have		Q3	Focus groups still to be set up.

				analysis of how we can improve or not with clear reasoning and feedback to focus groups.			
Improve satisfaction levels of clients.	Ensure that clients clearly understand the services being provided.	Ensure that publicity materials and contracts with clients are clear and easily understood. Focus groups to consult on documentation and authorisation forms.	DCR Service Manager and Policy Manager.	Satisfaction levels are monitored through SMDB reports. Focus groups to report back to SMDB.	Aim for 95% answering Very Good/Good on question 'overall satisfaction'.	Q1	Q1 99% HP Q1 98% non-HP Q2 % HP Q2 97% non-HP
IMPROVE THE QUALITY OF DATA COLLECTION AND PRESENTATION							
All data contained within the FEMIS database is accurate.	Improve data quality. Consistent data entry across all teams.	Revise FEMIS manual. Trained staff. Monitor the system and pick up errors. Ensure complete data collection for all closed cases. Correct errors.	i-futures Quality Support Officer.	DCC information systems manager is satisfied with data accuracy. Local team managers will have access to report, which will check outcomes of all recently closed cases and will highlight discrepancies. Discrepancies will be corrected monthly.	100% data accuracy.	Q4	Manual to be updated for FEMIS 2. Monitoring and error pick up compromised by FEMIS 2. No report at local level for outcomes and discrepancies – some further work required.
Reports to SMDB are accurate and	Work with SMDB and DMG's to get clear	Ensure accuracy using methods above.	i-futures Quality Support Officer, DCR Service	SMDB and DMG satisfaction feedback.		Q1	Performance against KPI's being reported.

reflect the information that SMDB needs to monitor performance against KPI's.	understanding of what information they need to monitor performance. Reports are more understandable and make relevant comparisons to previous performance.	Agreement by SMDB and DMG's on formation and content of reports Compare this quarter's data to same quarter in the previous year. This removes differences in work done due to lack of grant funding etc.	Manager.				Multi-agency performance against Major Adaptations Timeline not being reported.
IMPLEMENT THE SERVICES FUNDED BY CLG IN THEIR HP ENHANCEMENT PROGRAMME							
Vulnerable people are safer in their homes and will live with fewer hazards.	The Safe at Home Assessment is delivered to clients under the contract. The take up of SAH is increased.	Revised referral process using third sector and other partners to encourage take-up. Develop a voucher system to overcome reluctance to use the scheme due to cost.	Led by DCR Service Manager from May 2010.	Voucher scheme is tested and evaluated. Improved take up of SAH by clients reported to SMDB.	Target take up 26 per month per District from July 2010 to March 2011.	Q2	Targeted efforts in terms of promotions, HP training, operational practices have resulted in significant throughput. SAH strategic group successfully reinstated.
OTHER							
Clients are offered more choice about their housing options. Clients are offered to support to	A housing options service is offered to clients. Staff may assist with other options such as house move to maintain independence.	Development of Housing Options service.	DCR partners and DCC contract team.			Q4	DCR participating in Older Person's Research initiative on behalf of South West Council funding to Districts with University of

enable them to make and implement other choices.							Brighton and Hove. Caseworker and Support Officer training event held 4 November.
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