

DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE – 25 FEBRUARY 2013

REPORT ON: SOCIAL WORK DEPARTMENT SERVICE PLAN

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 84-2013

1.0 PURPOSE OF REPORT

- 1.1 This report recommends the committee approve the Social Work Department Service Plan appended to the report.

2.0 RECOMMENDATIONS

- 2.1 The committee notes the report and approves the attached plan.

3.0 FINANCIAL IMPLICATIONS

- 3.1 All actions and targets included in the attached plan are included on the basis that they can be delivered within the department's budget. When actions and projects have financial implications these will be reported to committee in due course.

4.0 MAIN TEXT

- 4.1 The Department Plan takes forward the Council Plan 2012 - 2017 (report 333 - 2012).
- 4.2 Section one of the plan provides an overview of the strategic challenges faced for each section of the Department over the coming years.
- 4.3 Section two of the plan outlines the major areas of work within the department that will continued to be developed over the next five years. The plan indicates the actions the Social Work plans to take to deliver improved outcomes for our service users against the relevant outcomes and intermediate outcomes in the Council Plan.
- 4.2 Upon approval by committee of the attached plan the performance indicators, targets and actions will be entered into the council's online plan and performance monitoring databases. This includes who the lead officer is for each. Lead officers will update the database with the latest performance figures and updates on delivery of actions. This process aids performance management and the production of monitoring reports for committee on at least an annual basis.

5.0 POLICY IMPLICATIONS

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

An Equality Impact Assessment has been carried out and will be made available on the Council website <http://www.dundee.gov.uk/equanddiv/equimpact/>

6.0 CONSULTATIONS

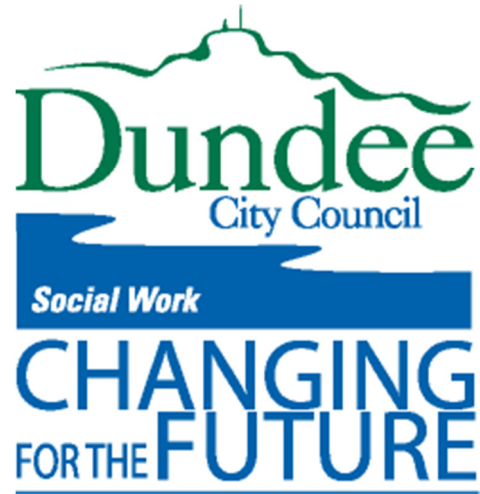
The Chief Executive, Director of Corporate Services and Head of Democratic and Legal services have been consulted in preparation of this report.

7.0 BACKGROUND PAPERS

The Single Outcome Agreement 2012 -2017
The Council Plan 2012 -2017

Alan G Baird
Director of Social Work

DATE: 31/01/2013



**SOCIAL WORK DEPARTMENT
SERVICE PLAN 2012 - 2017**

Vision and Values

The Social Work Department is committed to delivering the Vision for Dundee contained within the Single Outcome Agreement

Through Our Partnership Dundee:

- will have a strong and sustainable city economy that will provide jobs for the people in Dundee, retain more graduates and make the city a magnet for new talent
- will offer real choice and opportunity in a city that has tackled the root causes of social and economic exclusion, creating a community which is healthy, safe, confident, educated and empowered;
- will be a vibrant and attractive city with an excellent quality of life where people choose to live, learn, work and visit;

The Department is also committed to **Changing for the Future** and the Council's vision statement.

Our vision is for a City Council that;

- we are all proud of, where we provide services our citizens need, in an efficient and customer focused manner
- values, listens to, respects and recognises its employees, is not bureaucratic, but responsive and able to change policy swiftly and effectively
- is recognised by its peers for its innovation and drive, never complacent and is always seeking to improve its services.
- listens and communicates with its customers, making it easy for them to get help and services when they need them
- does what it says it will do.

Dundee City Council's Values

To be that kind of Council members and staff need to live by the following values:

- we put the council's customers first
- we have a 'can do' attitude - looking for ways to make things happen
- we will report honestly both internally and externally
- we will motivate and develop ourselves
- we will be outcomes and results driven, seeking the highest performance within our resources.
- we will be continually improving ourselves and the processes we carry out
- we will recognise and encourage innovation and good practice
- we will keep things simple, reduce bureaucracy and communicate in plain English
- we will work together as part of a 'whole' organisation to develop the partnership potential and avoid departmental silos of information and resources

Statement by the Director of Social Work

The greatest challenge for all social work services will be to continue to enable better outcomes for people. During the life of this plan, this will have to be achieved against a background of changing expectations and increasing demand. It will also have to take account of the needs of a population which is ageing and experiencing increased morbidity. All of this will have to be delivered against a reducing resource base, at a time of severe fiscal constraint, and with an ageing workforce. We will be working towards changing the way we deliver services to result in more self directed care with more people being supported to do things for themselves.

One of our biggest challenges over the next 5 years will be to deliver on the Scottish Government's agenda for the integration of health and social care. Our focus will be centred around a Change Plan for older people in the first instance. This integration will enable social care services to work closer with health professionals to promote community based care and independence for older people.

High quality services cannot be provided in isolation and good partnership working with service users, carers and other agencies, including the private and voluntary sector, will be essential. We will work to build our already well established partnerships and develop more integrated services. These will deliver better outcomes for people by strengthening public protection arrangements, improving the balance of care, promoting and supporting early intervention and by addressing social inclusion and health inequalities.

There will be considerable emphasis on continuing to deliver the *Getting It Right For Every Child* (GIRFEC) agenda. Ensuring that children are safe, healthy, achieving, nurtured, active, responsible, respected and included will be a priority for all partners. Social work will be aided in its task by the role of universal services who will work with the wider population while social work will target its resources and expertise at the most vulnerable and those at risk of harm.

Our strong emphasis on responding to the 'Protecting People' agenda will continue. We will continuously improve our services, with the regular use of self-evaluation and performance management as a means of improving standards across all 'Protecting People' services. We will continue to work to join up our 'Protecting People' approaches for adult support and protection, child care and protection, violence against women and our Multi Agency Public Protection Arrangements (MAPPA) as a means of delivering improved outcomes.

We will listen to, respect and value each person as an individual. We will encourage honesty and openness about services we provide and the decisions we make and will ensure that everyone who is involved with our services is treated with courtesy and respect. It is our aim that services will be reliable, prompt, and efficient and will be tailored to meet the outcomes identified by people who use our services.

We will achieve these outcomes by being a motivated, well-trained and empowered workforce; committed to learning, innovation and best practice and professional in our conduct whilst always aiming for continuous improvement.

Our activities will promote equality and fairness and meet the objectives of the Dundee City Council Single Equality Scheme 2009-2012 (and subsequent schemes). We will meet our Equality and Diversity statutory and regulatory duties for; Age, Disability, Gender, Race, Religion or Belief and Sexual Orientation.

Our services are provided and delivered in line with the council's vision for Dundee. Within the Partnership Single Outcome Agreement, the Council's Plan and Corporate Plan we have a vision that will ensure that we take an outcomes based approach to the delivery of service. Our service users and customers will be put first and we will listen and engage with them in the provision of the care we provide.

We will work together across departments and with our partner agencies to tackle deprivation and exclusion, offer real choice in a community setting which is safe and healthy while aiming to enhance the quality of life of our population. Within these strategic challenges we have to continue to deliver a high quality service in times when resources are constrained.

Alan Baird
Director of Social Work
December 2012

Section One

Community Care

The Community Care Social Work Service works in partnership with individuals and their carers, the health service and a range of private and voluntary sector providers to help people live healthy and fulfilled lives, as safely and independently as possible. Dundee has an ageing population that is increasingly dependant on Health and Social Care services. To deal with this and address ever-growing expectations, we are changing the ways in which we deliver our community care services.

Forthcoming legislation will advance the Scottish Government's intention to integrate Health and Social Care Services. This integration will enable social care services and health services to work more closely to promote community based care and support services that seek to improve outcomes for older people. It will improve efficiency by sharing costs and reducing duplication and in so doing will support us to deliver improved outcomes based on the needs and preferences of service users and their carers.

The integration of health and social care services will also continue to advance a 'shift in the balance of care'. This will enable more people to be supported for longer in their own homes rather than care homes and for more health care and support to be delivered in the community rather in an acute hospital setting.

Ahead of the proposed legislation on integration, there will also be legislation on Self Directed Support which will give people more flexibility, choice and direct control over the way the services that they receive are organised and delivered.

We will continue to raise the profile of adult support and protection services and ensure that all agencies work more effectively to identify, support and protect adults 'at risk of harm'.

To articulate and deliver our strategic intentions, in partnership with key stakeholders we are currently producing or revising full commissioning strategies in relation to; older people and people affected by dementia; people with a learning disability; the people with a physical disability; people with a mental health problem; and carers. These strategies will set out what is to be achieved, how it will be achieved and over what time period.

We will meet the challenges and expectations we face by giving people more choice and control over their own care, engaging people in decision making and providing access to a needs based, targeted, high quality community care service.

Children's Services

Children's services work in partnership with parents, families and a range of statutory and voluntary organisations to promote and safeguard the welfare of children and young people in Dundee in order to make a positive difference to the lives of disadvantaged children and their families in the city.

Health inequalities, poverty and deprivation continue to have an adverse impact on the life chances of many children in the city. The vision is to improve outcomes so that children feel safe, nurtured, healthy, respected and responsible, included, active and can achieve their full potential. In order to achieve this vision and deliver on these outcomes, Children's Services will strengthen the range and quality of available services and will strengthen partnerships and working arrangements with a range of agencies. These partnerships include work with Health, Education, Police, Housing and the third sector.

The service recognises that it needs to be responsive to the changing pattern of demands within the City and ensure its resources are appropriately targeted, with significant increases in the number of looked after children, a recognition of the importance of earlier intervention and an environment where resources are reducing. A significant challenge for the service will be to reduce the need for alternative forms of care and develop appropriate resources internally to minimise the number of children and young people who are placed out of authority. For those children who require permanent substitute care the service recognises the importance of early decision making to ensure they have the best chance of alternative family life.

A major focus will be to ensure social work services are delivered on an integrated basis thereby reducing the amount of different teams who are involved with individual children and their families and accordingly work is underway to integrate the work of Family Support Services into Locality Teams. Alongside key partners the service has contributed to a more integrated response to child care and protection concerns, this approach will be expanded to ensure that collectively services are improving efficiencies, sharing costs and reducing duplication.

Criminal Justice

In the last 12 months, the service has implemented new legislation in the form of Community Payback Orders (CPO), new National Standards and Outcomes, a new Criminal Justice Social Work Court Report and a new risk assessment tool. The CPO has led to significant increases in community sentences with the other developments encouraging a more forensic focus on reducing re-offending by addressing relevant risk factors and ensuring a suitable balance between rehabilitative, reparative, restrictive and restorative measures. At the same time, funding continues to reduce.

Over the life of this plan there will be significant consultations around redesigning the community justice system in terms of how offender services are planned, delivered and managed. A number of options are being considered but it is clear that the status quo is untenable and we will be fully involved in both the consultation and planning for future changes. In addition there are significant increases in workload within the context of changed expectations for practice, ongoing performance requirements and less overall resources. In response, the service will use this as an opportunity to work with other agencies to adopt a whole systems approach for offenders from diversion from prosecution through to sentencing and resettlement from prison. The aim will be to ensure both young and adult offenders receive timely, proportionate, efficient and effective interventions from the right person at the right time.

In particular, we will prioritise our approach to women offenders and we will work with the Crown Office Procurator Fiscal Service (COPFS) to increase referrals to our Diversion from Prosecution Schemes; with the Sheriffs Court to develop Bail Supervision Schemes as an alternative to remands; with the NHS to develop a clear substance misuse treatment pathway for offenders; with Third Sector partners to develop programmes addressing social skills and employability; with the Police to develop a Persistent Offender Scheme; with Scottish Prison Service to develop resettlement; and internally to develop 1:1 and group based offence focused programmes.

In partnership with Tayside Community Justice Authority and local authority partners in Angus and Perth and Kinross, the service will also undertake a review of East Port House, which provides accommodation for offenders. We will also continue to review the roles, responsibilities and balance of Social Work qualified and paraprofessional staff with a focus on providing greater levels of supervision and support to higher risk offenders.

In all respects, we will seek to maximise development opportunities, promote efficiency and effectiveness and generate the full involvement of staff.

Strategy, Performance and Support Services

Today's social work and social care organisations deliver services in a rapidly changing environment. The Strategy Performance and Support Service plays a key strategic role by preparing the Department to meet the challenges of such continuous change.

Staff in the service have a key responsibility to make certain that achieving better outcomes for people is at the centre of all that the Department does. We work in close co-operation and collaboration with operational colleagues and with those in partner agencies and other organisations. Over the period of this plan, we will develop and implement a number of initiatives, systems and processes which will progress the strategic priorities and common aims and objectives of the Department.

The service was reconfigured during the life of the previous Service Plan and now includes Learning and Workforce Development, Strategic Planning, Performance Management and Support Services. It also hosts corporate staff from Human Resources, Protecting People and Integrated Children's Services.

Within this structure we deliver on outcomes related to protecting people, GIRFEC, customer care, public information, equalities, staff health and wellbeing, records management, health and safety, management information, self-evaluation, performance management, the learning and development of staff, organisational development, workforce planning, integrated emergency planning and community, staff and service user engagement and the provision of administrative and clerical support to staff in Dundee House.

Our priorities will include helping the individual services and partnership to achieve desired outcomes and deliver on national and local policies over the next 5 years. These priorities will include: personalisation, self-directed support, health and social care integration, protecting people, change management, GIRFEC and continuous improvement.

Finance, Contracts and Welfare Rights

In order to meet the challenges highlighted within the previous sections, the Social Work Department requires strong, effective and professional support services. At a time of unprecedented increasing demand for services but reductions in public funding, the need for effective financial management of social care services has never been greater. The Social Work finance service will continue to provide financial advice and guidance to managers to enable them to achieve the best possible outcomes while demonstrating best value. The continuing development of financial management information systems, processes and controls will be crucial to delivering service improvement over the life of the service plan.

Given the number and level of investment in social care services provided externally it is essential that effective contract management processes are in place to ensure that external services provided continue to meet the expected quality and value for money. The Contracts Section will ensure that the Council's Social Care Procurement Policy continues to be developed to reflect changes in procurement and other legislation and best practice. In particular, the Contracts Section will contribute to the development of national contractual frameworks such as residential schools and foster care.

The introduction of Self Directed Support will require a more flexible approach to financial management, while the external market and the contractual frameworks within which they operate will have to adapt to respond to the need for more personalised services. This will be a key challenge for the service over the planning period.

The proposal to further integrate social care and health services will also provide challenges to the service in building on the work carried out to date around the Integrated Resource Framework and further developing financial systems and resource allocation in addition to contract management processes to support this key government policy.

Welfare reform changes will likely increase the levels of poverty and more harmful levels of income inequality for some of the most vulnerable members of the community. Welfare Rights services and agencies need to ensure that they are geared up to mitigate against these changes as much as possible. The Welfare Rights Service already maximises income for those clients seeking assistance. However with fewer resources in the future all Social Work staff need to be aware of future welfare reform changes, how these will affect their clients and how to help or who to refer to for additional assistance. The Changing for the Future Board Review of Welfare Rights Services is working to ensure that front line staff, in all departments are able to equip their service users with up to date information whilst simultaneously giving staff training as well as the tools to answer clients' immediate concerns.

Section Two

DUNDEE OUTCOME 1: Dundee will be an internationally recognised city at the heart of a vibrant region with more and better employment opportunities for our people.

Intermediate Outcome: 1c) Dundee tackles youth unemployment by moving more of our young people into positive destinations.

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|--|---|
| 16-19 year olds not in positive destinations (MCMC population) | 1098 | n/a | 1050 |
| School leaver destination follow up study, school leavers in positive destination | 88.7% | Scotland (88.9%), Renfrewshire 89.3) | 90% |
| % of care leavers receiving aftercare support who are in education, training or employment | 38% | 38% (Renfrewshire, CLAS; Scotland 36%) | 50% (internal figure was 47% for end March) |

| Project / Service Improvement | End Date |
|---|-----------------|
| Continue to deliver on the Youth Employability agenda and the MCMC and Opportunities for All Strategy | March 2013 |
| Set up an Employment Support Strategic Planning Group and develop and implement a strategic action plan | March 2017 |
| Development of Modern Apprenticeship schemes | March 2013 |
| Further embedding and development of the Family Firm | March 2017 |

Outcome: DUNDEE OUTCOME 2: Our people will be better educated and skilled within a city renowned for learning, research, innovation and culture

Intermediate Outcome: 2b) The confidence and skills of the population is increased through Community, Further and Higher Learning.

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| Increase the number of young people with additional support needs who access further education | 28.3% | 28.3% | 38% |

| Project / Service Improvement | End Date |
|---|-----------------|
| Review and update Learning and Workforce Development Strategy | Dec 2013 |
| Fund staff in Domiciliary Care Services and Day Services to undertake the Stirling University Best Practice in Dementia Facilitators Training | Dec 2013 |

| | |
|---|------------|
| Fund staff in domiciliary care services and day services to undertake the Stirling University Best Practice in Dementia Facilitators Training | Dec 2013 |
| Develop and expand the Gowrie In-college support service | March 2017 |

| Intermediate Outcome: 2c) We have reduced inequalities through learning. | | | |
|---|---|---------------------------------------|--------------------|
| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
| Number of school age children attending Dundee College to gain qualifications. | 82 | n/a | maintain |

| Project / Service Improvement | End Date |
|--|-----------------|
| Further develop Health and Social Care Academy | March 2017 |

| Outcome: DUNDEE OUTCOME 3: Our children will be safe, healthy, achieving, nurtured, active, respected, responsible and included | | | |
|--|---|---------------------------------------|--------------------|
| Intermediate Outcome: 3a) Children are protected from abuse, neglect, exploitation and harm by others at home, at school and in the community | | | |
| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
| Number of children affected by domestic abuse assisted through Multi-Agency Risk Assessment processes | 99 | n/a | increase |
| Number of crimes/offences committed by children | 832 | n/a | 752 |
| % of MASH meetings resulting in NFA | 3% | n/a | Maintain below 5% |
| % of initial Case Conferences taking place within 15 working days of a decision to hold a Case Conference | 58% | n/a | 90% |
| % of Child Protection referrals responded to within 24 hours | 97% | n/a | maintain |
| % of children de-registered after less than one year on the Child Protection Register. | 72% | 84% | 85% |
| % of children made subject to a supervision order that were seen by a supervising officer within 15 days. | 89% | n/a | 95% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Develop and deliver, along with partner agencies, an multi-agency, integrated Protecting People Framework | June 2013 |
| Contribute to the development and implementation of multi-agency child protection business & improvement plans | March 2017 |
| Deliver GIRFEC practice tools (assessment and care planning, child's plan, lead professional, named person, chronology and meetings framework) and deliver the GIRFEC core competencies | March 2017 |
| Review child protection case conference processes and decision making systems with a view to ensuring they reflect all legislative requirements and practice guidance | June 2013 |
| Undertake self evaluation of child protection services and report on outcomes to the CCPC and engage in multi-agency self-evaluation development and implementation activity developed by the CCPC | December 2017 |
| Establish processes and practice for joint assessment and planning for integrated children's services. | April 2015 |
| Complete a Best Value Review of Children's Services. | Dec 2014 |
| Embedding the learning from total place (pathfinder) approaches to GIRFEC initially for the under fives and roll out to all age groups across the city. | Dec 2017 |
| Publish and implement the new Integrated Children's Services Plan 2013-2017. | Dec 2017 |
| Ensure that all young people assessed as high risk have their cases managed through multi-agency meetings | Dec 2016 |
| Update and fully Implement the Parenting Strategy (Being a Parent in Dundee) taking account of the National Parenting Strategy | Dec 2017 |
| Continue to be part of the development and delivery of a multi-agency Strategic Framework for Child Care and Protection and report on achievement of outcomes | Dec 2013 |

Intermediate Outcome: 3b) Children have the highest attainable standards of physical and mental health, access to suitable healthcare, and support in learning to make healthy and safe choices

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| % of LAC young people offered a support plan | 100% | 100% (Scottish Government guidelines) | 100% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Working to ensure that referrals are made to LAC Nurse Team to ensure all new LAC have a health assessment | April 2013 |
| Developing pathways for vulnerable young people | April 2013 |
| Ensuring young people in custody have suitable release plans in place | June 2013 |

Intermediate Outcome: 3c) Children have raised attainment and achievement and are supported and guided in their learning and in the development of their skills, confidence and self-esteem at home, at school and in the community

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|---|
| % of looked after children gaining Literacy and Numeracy at National 3 | n/a (change to curriculum, first results 2014) | n/a | Unknown (New national exams) |
| The gap between the % of looked after and non-looked after children excluded from school at least once in a school year | 20.1% | n/a | 20% (want to reduce exclusion numbers but unlikely to reduce gap) |
| % Looked After Children in positive and sustained destinations | 56% | n/a | 65% |
| % of young people receiving aftercare in education, training and employment | 47% | 36% | 55% |
| Average tariff score of looked after children | 80 | 79 | 100+ |
| number of instances of exclusion per 1000 LAC (i.e. same child excluded twice is counted twice) | 546 | 326 | Reduce |

| Project / Service Improvement | End Date |
|---|-----------------|
| Increase level of specialist interventions from Educational Psychology services to residential units in order to increase capacity of staff to support improved educational outcomes. | March 2017 |

Intermediate Outcome: 3d) Children have a nurturing place to live, in a family setting with additional help if needed or, where this is not possible, in a suitable care setting

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|--|--------------------|
| Number of young people placed in secure accommodation per year | 19 (2011/12) | n/a We only have benchmark for numbers in secure at cut off date | 12 |
| % of LAAC in foster care living with Dundee foster carers | 68% | n/a | 80% |

| | | | |
|--|-----------|--|----------|
| Number of children secured in adoptive placements on 31 st July per year (counted as no. of children staying with prospective adopters) | 18 | 17 (Renfrewshire, (Educ. Outcomes for LAC, SG) | Increase |
| Number of children who receive intensive family support services | 38 (2012) | n/a | 40 |

| Project / Service Improvement | End Date |
|--|-----------------|
| Ensure that all young people initially assessed as presenting a high risk of harm to others and/or themselves have an appropriate multi-agency care plan managed through multi-agency meetings | Dec 2016 |
| Further development the Corporate Parent Strategy | March 2017 |
| Develop and implement Kinship Care Strategy | Dec 2013 |
| Develop and established new supports and services for looked after 2 year olds | Dec 2014 |
| Annual evaluation of 'Have Your Say' forms | Dec 2017 |
| Undertake a review of foster care and implement recommendations to increase number of internal carers | March 2013 |
| Complete Review of Elms working group and implement recommendations arising from review. | Feb 2013 |
| Undertake a review of existing decision making fora to ensure a focus on risk taking behaviour. Extend Whole System Approach. | Feb 2013 |
| Implement Intensive Family Support Service | Dec 2013 |

Intermediate Outcome: 3e) Children have opportunities to take part in activities such as play, recreation and sport which contribute to healthy growth and development, at home, at school and in the community

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| % of looked after children who complete 'Have Your Say' forms and report they take part in extra-curricular activities | 85% | n/a | 85% |

Intermediate Outcome: 3f) Children are involved in decisions that affect them and have their voices heard

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| Proportion of children aged 8 and over who are linked with the Engagement Officer prior to review of child protection case conference. | 60% | n/a | 90% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Develop and implement a framework for service user engagement | Dec 2014 |
| Improve the involvement of children in decision making in the LAC and CP process | Dec 2017 |
| Improve the effectiveness of the involvement of children in decision making in the CP process | Dec 2015 |
| Actively contribute to the LAC Champions Board, in particular regarding the development of more child friendly meetings, increased child input into care planning and increased support for children in foster care and looked after at home | Dec 2017 |

Intermediate Outcome: 3g) Children take a responsible role in their schools and communities

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| Number of children referred to the Reporter on offence grounds | 155 | 170 (Renfrewshire (SCRA)) | 120 |
| Attendance rates at school for LAC | 90% | 89% | 93% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Continued implementation of Whole Systems Approach including operational guidance on each strand | Dec 2013 |

Intermediate Outcome: 3h) Children have help to overcome social, educational, physical and economic inequalities and are accepted as part of the community in which they live and learn

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| Proportion of looked after and accommodated children who receive specialist interventions | n/a | n/a | 60% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Increase level of specialist interventions from Educational Psychology services and Community Adolescent Mental Health Teams to residential units in order to increase capacity of staff to support improved educational outcomes. | Dec 2017 |

DUNDEE OUTCOME 4: People in Dundee will experience fewer health inequalities

Intermediate Outcome: 4a) People living in community regeneration areas have improved health

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| Proportion of eligible women on a community sentence or resettlement from prison who have been offered a health care assessment. | No baseline | n/a | 100% |
| Proportion of eligible women on a community sentence or resettlement from prison who have received health care support | No baseline | n/a | 60% |

| Project / Service Improvement | End Date |
|---|-----------------|
| Develop a framework which progresses an integrated delivery model for Health and Social Care in Dundee | March 2017 |
| Identify and map health and social care data/spend through the Integrated Resource Framework and remodel future resources to meet local need. | March 2017 |
| Develop and implement a Delayed Discharge Improvement Plan. | March 2014 |
| Continued development of Health pathways for women offenders. | Dec 2013 |

Intermediate Outcome: 4b) Our young people engage in less risk-taking behaviour

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| Number of crimes/offences committed by young people | 832 | n/a | 752 |

| Project / Service Improvement | End Date |
|---|-----------------|
| Develop and implement a strategic framework for vulnerable young people at risk | June 2013 |
| Undertake a review of existing decision making fora to ensure a focus on risk taking behaviour. Extend Whole System Approach. | Feb 2013 |

Intermediate Outcome: 4c) We have improved health for at risk groups

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| Proportion of eligible offenders offered an assessment in line with Keep Well initiative who have attended for assessment | 84% | n/a | 85% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Continue progress toward related recommendations from Commission on Women Offender regarding access to health interventions at a one- stop-shop Community Justice Centre model | April 2017 |
| Continued promotion of Keep Well health checks for ex-prisoners and offenders aged over 35. Anticipated future reporting of the proportion of eligible offenders offered an assessment in line with the Keep Well Initiative who have attended for assessment. | March 2014 |
| Develop and implement a Partnership Mental Health Commissioning Statement | March 2017 |
| Develop and implement a Partnership Commissioning Statement for Older People and People with Dementia | March 2017 |
| Agree and implement a Medication Management in the Community policy | April 2015 |
| Continued promoting of Keep Well health checks for ex-prisoners and offenders aged over 35 | March 2014 |
| Develop and implement a Partnership Commissioning Statement for people with a Learning Disability and/or Autism | March 2017 |
| Develop and implement a Partnership Commissioning Statement for people with a Physical Disability and/or Sensory Impairment | March 2017 |
| Develop and implement a Partnership Carer's Strategy | March 2017 |

DUNDEE OUTCOME 5: People in Dundee will have improved physical and mental well-being

Intermediate Outcome: 5b) People have better mental health and well-being

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| Reduce the number of suicides per 100,00 population | 18.1 | n/a | 17 |
| Increase the number of people with a diagnosis of dementia and exceed the Eurodem target of 61% | 57.7% | 57.7% | 61% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Prepare and implement a Dundee and Angus Choose Life Joint Partnership Commissioning Statement | March 2017 |
| Establish a Tayside Suicide Review Group | April 2013 |
| Report on the progress of the Choose Life Action Plan | April 2013 |
| Test revised models for the early diagnosis of dementia and post diagnostic support | April 2015 |
| Review the current level of psychological services within Adult Mental Health Services and Psychiatry of Old Age Services | March 2017 |
| Develop and implement a Partnership Commissioning Statement for Older People and People with Dementia | March 2017 |
| Further develop resources which support people with dementia and their carers | March 2017 |
| Agree of model of Care Home support which meets the needs of people with dementia | March 2014 |
| Through the Change Fund Budget progress a work-stream to address the impact of social isolation on older people and test potential developments for sustainability | March 2015 |
| Develop and implement a Partnership Mental Health Commissioning Statement | March 2017 |
| Develop and implement a Partnership Commissioning Statement for people with a Learning Disability and/or Autism | March 2017 |
| Develop and implement a Partnership Commissioning Statement for people with a Physical Disability and/or Sensory Impairment | March 2017 |
| Review and update Promoting Health Framework for Staff and Service Users | March 2013 |
| Further develop use of Critical Incident Debriefing within DCC | October 2013 |

Intermediate Outcome: 5c) We have reduced harm associated with substance misuse to individuals, families and communities, and increased number of people who have recovered from substance misuse

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| % successful completion of Drug Treatment and Testing Orders | 85% | 73% (national) | 73% |
| Estimated percentage (and number) of drug users, of working age. | 3.2% (2,800) | 3.2% | 2.8% |
| Estimated percentage (and number) of injecting drug users, of working age. | 0.89% (845) | 0.89% | 0.7% |
| Number of service users waiting more than 3 weeks from referral to commencement of treatment | 112 | 112 | 100 |

| Project / Service Improvement | End Date |
|--|-----------------|
| Work with all substance misuse treatment/care services to implement target for access to services and develop a Recovery-based Integrated Care Pathway for substance misuse services | Dec 2014 |
| Develop contracting arrangements with NHS in context with service to DTTO and Community payback order substance misuse requirements. | October 2013 |
| Report on the progress of ADP annual review | October 2014 |

DUNDEE OUTCOME 6: People in Dundee are able to live independently and access support when they need it

Intermediate Outcome: 6a) People who receive care and treatment services achieve positive personal outcomes

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| % (and number) of people requiring reduced homecare following enablement | 54% | 54% | 61% |
| Number of people receiving Direct Payments | 48 | 54 | 95 |

| | | | |
|---|-------|-------|--------|
| Number of people with a learning disability who have productive day opportunities (employment, volunteering, education) | 955 | 832 | 1146 |
| Home Care - total hours as a rate per 1,000 population aged 65+ | 474.5 | 510.3 | 444.77 |
| Home Care - number of Home Care clients aged 65+ receiving personal care as a % of clients. | 63% | 51.5% | 63% |
| % of people who felt more independent after receiving Occupational Therapy support. | 88% | 88% | 90% |

| Project / Service Improvement | End Date |
|---|-----------------|
| Develop and implement a Partnership Commissioning Statement for Older People and People with Dementia | March 2017 |
| Monitor progress against commissioning statement outcomes annually with a 3 year review | Dec 2016 |
| Report on progress of Change Plan for Older People | Apr 2015 |
| Develop and implement a Partnership Commissioning Statement for Adults with a Physical Disability and/or Sensory Impairment | March 2017 |
| Develop and implement a Partnership Commissioning Statement for people with a Learning Disability and/or Autism | March 2017 |
| Develop and implement Outcome Focussed Assessment Framework | March 2014 |
| Develop and implement a Partnership Mental Health Commissioning Statement | March 2017 |
| Develop an Implementation Plan for the introduction of the Self-Directed Support in line with the legislative programme. | October 2015 |
| Introduce Medication Management in the Community | October 2015 |
| Develop and implement a Partnership Carer's Strategy | March 2017 |

| Intermediate Outcome: 6b) Carers are supported in their caring role whilst having a life of their own and have their caring role acknowledged | | | |
|--|---|--|--------------------|
| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
| Number of carers offered carers' assessments | 114 | 135 (Figure is assessments completed. Only started recording offered and declined in 2012. The 2012-2017 calculations will be assessments) | 184 |

| | | | |
|---|----------|---------------------------------------|-----------|
| | | completed plus offered plus declined) | |
| 5(a) 65+ - Respite care - total overnight respite nights provided for older people aged 65+ per 1,000 population. | 340.26 | 445.36 | 353.87 |
| 5(c) 65+ - Respite care - total daytime respite hours aged 65+ | 70574 | 59320 | 73,369.96 |
| 5(d) 65+ - Respite care - % of daytime respite not in a day centre aged 65+ | 31.81 | 28.28 | 33.08 |
| 5(a) 18-64 - Respite care - total overnight respite nights provided for people aged 18-64 per 1,000 population. | 64.18 | 70.89 | 66.75 |
| 5(b) 18-64 - Respite care - % of respite nights not in a care home aged 18-64 | 0.22 | 1.05 | 0.23 |
| 5(c) 18-64 - Respite care - total daytime respite hours provided for people aged 18 - 64 per 1,000 population. | 1.992.57 | 2053.29 | 2,072.27 |
| 5(d) 18-64 - Respite care - % of daytime respite not in a daycentre 18 - 64 | 54.38 | 49.72 | 50 |

| Project / Service Improvement | End Date |
|---|-----------------|
| Develop and implement a revised Dundee Carers Strategy for the period 2013 - 2015 | March 2017 |
| Initiate a new service that provides Moving and Handling advice and training to carers | December 2012 |
| Develop a further range of respite and short break options for adults and older people and their carers | March 2017 |

| Intermediate Outcome: 6c) Older people and other adults access timely and appropriate preventative, enabling and rehabilitative treatment and support | | | |
|--|---|---------------------------------------|--------------------|
| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
| Number of episodes of emergency admissions to hospital for those aged 65+ | 7,076 | 7079 | 6,654 |
| Bed days for emergency admissions to hospital for those aged 65+ | 47,394 | 57565 | 44,840 |
| %(and number) of people requiring reduced homecare following enablement | 54% | 61 | 61% |
| % of new service users accessing the enablement service | 91% | 73.94% | 91% |

| | | | |
|--|-------|-------|-------|
| Number of people 65+ receiving intensive homecare (rate per 1,000 population) | 17.04 | 17.66 | 16.92 |
| % of all Community Care assessments completed within 20 days | 79% | 80% | 90 |
| Number of service users using tele-care equipment as part of a care package or as an assessment tool | 5766 | 5766 | 6054 |
| % of OT service users seen within 24 hours of referral (| 35% | 35% | 40% |
| % of OT assessments completed within 20 working days | 74% | 58% | 80% |
| % of OT store deliveries made within 3 days of being ordered | 83.3% | 83.3% | 85% |
| % of OT store collections made within 3 days | 74.9% | 74.9% | 75% |

| Project / Service Improvement | End Date |
|---|-----------------|
| Develop and implement a Partnership Commissioning Statement for Older People and People with Dementia | March 2017 |
| Monitor progress against commissioning statement outcomes annually with a 3 year review | March 2017 |
| Report on progress of Change Plan for Older People | Oct 2015 |
| Develop and implement a Partnership Commissioning Statement for Adults with a Physical Disability and/or Sensory Impairment | March 2017 |
| Develop and implement a Partnership Commissioning Statement for people with a Learning Disability and/or Autism | March 2017 |
| Develop and implement a Partnership Commissioning Statement for Mental Health | March 2017 |
| Implementation plan for the introduction of the self directed support in line with the legislative programme | April 2015 |
| Implement the Telecare Strategy | March 2017 |
| Develop and implement a Falls Strategy for Dundee | March 2014 |
| Develop a Delayed Discharge Improvement Plan | March 2014 |

Intermediate Outcome: 6d) Older people and other adults receive care, treatment and support in community settings as opposed to long stay care settings

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| Proportion of clients with complex needs receiving intensive home care out of the number of clients in long stay care | 30.37% | 29.8% | 32% |
| Number of older people living in Housing with Care | 46 | 46 | 66 |

| | | | |
|--|-----|-----|-----|
| Number of adults with a learning disability and/or autism supported at home with care at home/housing support services | 162 | 121 | 156 |
| Number of adults with a physical disability who are supported at home with care at home/housing support services | 34 | 34 | 69 |
| Number of adults with a mental illness who are supported at home with care at home/housing support services | 130 | 130 | 165 |

| Project / Service Improvement | End Date |
|---|-----------------|
| Develop and implement a Partnership Commissioning Statement for Older People and People with Dementia | March 2017 |
| Monitor progress against commissioning statement outcomes annually with a 3 year review | March 2017 |
| Report on progress of Change Plan for Older People | Oct 2015 |
| Procure additional Housing with Care for Older People | March 2014 |
| Pilot and test Housing with Care step down support from hospital | March 2017 |
| Develop and implement a Partnership Commissioning Statement for Adults with a Physical Disability and/or Sensory Impairment | March 2017 |
| Develop and implement a Partnership Commissioning Statement for people with a Learning Disability and/or Autism | March 2017 |

| Intermediate Outcome: 6e) Older people and other adults are protected from harm | | | |
|--|---|---------------------------------------|--------------------|
| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
| Number of high risk victims of domestic abuse discussed at MARAC meetings | 80 | n/a | 208 |
| Number of referrals to social work, considered under Adult Support and Protection Procedures which proceed to: | | | |
| a) Initial Management Discussion | 578 | 369 | 1052 |
| b) Initial Referral Discussion | 124 | 130 | 350 |
| c) Case Conference | 63 | 53 | 153 |
| People accessing information on Adult Support and Protection - number of hits received on DCC Adult Support and protection website | 6,358 | 3,966 | 10,000 |

| Project / Service Improvement | End Date |
|---|-----------------|
| Undertake self assessment of Adult Protection and report on outcome and prepare and integrate into the Adult Support and Protection Committee Business Plan | April 2013 |
| Develop and deliver an integrated Protecting People Framework | Dec 2014 |

| | |
|---|-----------|
| Identify appropriate personnel from within the Department to contribute to chairing of MARAC meetings | June 2013 |
|---|-----------|

DUNDEE OUTCOME 7: Our communities will be safe and feel safe

Intermediate Outcome: 7a) Dundee has reduced levels of crime

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|--|--------------------------------|-------------|
| % of offenders completing sex offender programmes - Dundee only | 92% | 83% (Tayside figure) | 70% |
| % Offenders commencing CPO with first contact within one working day | 89% | 71% (national) | 95% |
| % Offenders commencing CPO within 7 days (Unpaid work or other requirements) | 59% | 71% (CJA area average) | 60% |
| % offenders on level 1 unpaid work completed within court & national standard specified timescales | 73% | 69% (CJA area average) | 90% |
| % offenders completing CPO | 82% | 81% (national) | 85% |

| | | | |
|--|-----|------------------------|-----|
| % offenders on level 2 unpaid work completed within court & national standard specified timescales | 79% | 79% (CJA area average) | 95% |
|--|-----|------------------------|-----|

| Project / Service Improvement | End Date |
|--|---------------|
| Implement a programme of alternatives to custody that aim to prevent re offending. | Dec 2016 |
| Continued development of approaches to diversion from prosecution and Fiscal Work Order schemes. | December 2013 |
| Implement Resettlement trial for offenders released from custody from agreed SPS establishments. | April 2014 |
| Continued development of services for women in line with recommendations from Commission on Women Offenders. Including - Mentoring Services & bid to Scottish Government for pilot one - stop - shop Community Justice Centre. | April 2017 |
| Scope and develop model for Persistent Offenders Project in context with Multi Agency Persistent Offenders Strategy. | April 2014 |
| Progress review / options appraisal with Community Justice Authority for East Port House supported accommodation project. | April 2016 |
| Continue to develop 3rd sector contracts to deliver / support the delivery of key objectives. | April 2017 |

| | |
|--|------------|
| Develop integrated framework (with partners) to evaluate and report progress toward intermediate outcomes for service users - incorporating LS/CMI, specific service user outcome reporting tool, service user feedback. | April 2014 |
|--|------------|

Intermediate Outcome: 7b) Dundee has reduced fear of crime

| Project / Service Improvement | End Date |
|--|-----------------|
| Continued consultation with communities over which type of unpaid work projects carried out by offenders are delivered in their respective local areas | April 2017 |
| Engage with media through Community Safety partnership and Community Justice Authority | April 2017 |

Intermediate Outcome: 7c) We have improved safety of our local communities by reducing the risk to life, property and the environment from fire

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| Number of people who have a fire risk assessment | n/a | n/a | Increase |

| Project / Service Improvement | End Date |
|--|-----------------|
| Establish and implement a Fire Risk Assessment protocol | March 2013 |
| Review and maintain an up to date fire risk assessment for care homes and centres in the community | March 2017 |

Outcome: DUNDEE OUTCOME 8: Dundee will be a fair and socially inclusive City.

Intermediate Outcome: 8a) We have reduced deprivation in Community Regeneration Areas

| Project / Service Improvement | End Date |
|---|-----------------|
| Identify and map Health and Social care spend/data through the Integrated Resource Framework and use this data to remodel resources to meet local need. | March 2017 |

Intermediate Outcome: 8b) We have reduced financial exclusion, income inequalities and fuel poverty

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| Annual cash amount of ongoing benefit/credit gained per case | £2,887 | n/a | £2,887 |
| Income generated for Dundee citizens as a result of successful claims for welfare benefits and tax credits (£) | £3,070,970 | n/a | £3,919,423 |
| Amount of debt rescheduled for Dundee Citizens as a result of money advice provision (£) | £1,355,854 | n/a | £1,730,451 |
| % of service users rating the Welfare Rights Service as excellent or good in customer evaluation questionnaires | 95% | n/a | 100% |

| Project / Service Improvement | End Date |
|---|-----------------|
| Maximise the take up of welfare, money, debt and fuel poverty advice and action. | April 2014 |
| Review strategies and create a plan to mitigate the potential negative impact of the welfare reform changes | April 2013 |
| Monitoring the effectiveness of the corporate review of Welfare Rights. | March 2017 |

Intermediate Outcome: 8c) People in Community Regeneration Areas are skilled, confident and resilient

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| Proportion of offenders referred who subsequently start with Apex to improve skills, and increase employability prospects. | 38% | 43% (CJA average) | 50% |

| Project / Service Improvement | End Date |
|---|-----------------|
| Identify and map Health and Social care spend/data through the Integrated Resource Framework and use this data to remodel resources to meet local need. | March 2017 |
| Continued development of approaches within criminal justice to literacy and numeracy screening and performance monitoring | Dec 2017 |

DUNDEE OUTCOME 10: Our communities will have high quality and accessible local services and facilities

Intermediate Outcome: 10a) Our neighbourhoods receive better services

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| Proportion of unpaid work projects where the recipients were satisfied with the work | 100% | n/a | Maintain |

| Project / Service Improvement | End Date |
|--|-----------------|
| Prepare and action a Partnership work plan in response to the Government's proposals for the integration of Health and Social Care | March 2017 |
| Review the possibilities for co locating in community regeneration areas i.e. building on Whitfield 'Crescent' model | March 2017 |
| Deliver the care for people aspect of integrated emergency management | March 2017 |
| Further develop feedback processes for the recipients of unpaid work | Dec 2017 |
| Undertake a Business Continuity Risk Assessment and update plans accordingly | Dec 2013 |

Intermediate Outcome: 10b) Our people engage and participate more in their communities

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| % of referrals to Oakland Centre progressed to Oakland's Community Link Service | 35% | 35% | 40% |
| Proportion of unpaid work projects carried out in response to consultation with local communities | No data available | n/a | 25% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Develop and implement a Social Work engagement strategy | Dec 2014 |
| Review Oakland's Community Link Service | April 2014 |
| Develop a range of volunteering opportunities to support the needs of Older People | March 2017 |
| Develop a city centre drop in resource for adults with a learning disability and/or autism. | March 2017 |
| Pilot, through the Change Plan a range of models to combat social isolation among older people | March 2016 |
| Further develop consultation processes on unpaid work with local community groups | Dec 2017 |

Intermediate Outcome: 11a) Dundee mitigates and adapts to the effects of climate change for the transition to a low carbon economy

| Project / Service Improvement | End Date |
|---|-----------------|
| Implement the staff travel plan | March 2017 |
| Reduce the departments carbon footprint | March 2017 |

Corporate Outcome 1: Our customers will get the services they need in an efficient and customer focused manner

Intermediate Outcome: CO1a Customers will be very satisfied with their experience of using a council provided service and when contacting the council by phone, internet or within a local office

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| % of service users who find it easy to get clear information about the range of Social Work services available | 90% | n/a | Maintain |
| % of carers who find it easy to get clear information about the range of Social Work services available | 58% | n/a | 80% |

| Project / Service Improvement | End Date |
|---|-----------------|
| Review and update Customer Care Framework | December 2013 |

Intermediate Outcome: CO1b Customers will feed back how easy it was to understand the information provided by the council about how to access and use a council service

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|------------------|---|---------------------------------------|--------------------|
| | | | |

| Project / Service Improvement | End Date |
|--|-----------------|
| Review and update our Public Information Strategy | Dec 2014 |
| Develop and implement a Protecting People Information strategy | Dec 2014 |
| Undertake and report on Carer and User surveys | Dec 2017 |

Intermediate Outcome: CO1c Customers will increasingly use the Council's website for its convenience and ease of use to order, pay for and request services

| Project / Service Improvement | End Date |
|--|-----------------|
| Identify processes within Social Work that can be access through the Council's website | March 2017 |

Intermediate Outcome: CO1d Customers and citizens will increasingly find it common practice to comment on the delivery and quality of local public services

| Project / Service Improvement | End Date |
|---|-----------------|
| Embed self-evaluation across all social work services | Dec 2017 |
| Develop and implement a framework for service user engagement | Dec 2014 |
| Develop and implement a further range of strategic engagement events which ensures that service users and carers are able to have their views heard | Dec 2017 |

Intermediate Outcome: CO1f Customers with differing needs based on age, disability, gender, sexual orientation, race, religion & belief, gender reassignment, pregnancy & maternity, marriage and civil partnership will be equally satisfied that the service they receive takes account of their specific requirements.

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| % of committee reports which have EQI Assessments | 100% | n/a | 100% |

| Project / Service Improvement | End Date |
|--------------------------------------|-----------------|
| Implement the Equality Scheme | March 2017 |

Corporate Outcome 2: our organisation values and respects its employees so involves all equally in improving our services.

Intermediate Outcome: CO2a People working for the Council will be informed, involved and engaged in improving services and making the council more efficient

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|--|---|---------------------------------------|--------------------|
| % of staff who feel value and respected | 62% | 62% (2010 department survey) | 70% |
| % of staff who feel involved and engaged in service improvements | 51% | 51% (2010 department survey) | 60% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Undertake and report on staff surveys | March 2017 |
| Embed STEP within Social Work Services | Dec 2013 |
| Review and update a framework for the Effective Support to Staff | March 2013 |
| Undertake 'All Staff' meetings for Community Care Staff | March 2017 |
| Implement a Managers Programme of Visits to Internal and External Services in Community Care | March 2017 |
| Review and update the organisation development strategy | Dec 2013 |

Intermediate Outcome: CO2b The Council will have planning processes that develops employee's skills to meet future needs.

| Project / Service Improvement | End Date |
|---|-----------------|
| Review and update Learning and Workforce Development Strategy | Dec 2014 |
| Deliver improvements based on Workforce and Capacity planning | Dec 2017 |
| Continue to develop and deliver LWFD shared services | Dec 2017 |

Intermediate Outcome: CO2c Council employees will work safely

| Project / Service Improvement | End Date |
|--|-----------------|
| Implement department Health & Safety Action plan | March 2013 |

| |
|--|
| Intermediate Outcome: CO2d Council employees will be healthy and active |
|--|

| Project / Service Improvement | End Date |
|---|-----------------|
| Continue to coordinate the delivery of the Council's Critical Incident Policy | Dec 2017 |
| Review, update and implement the Healthy Working Lives Action Plan | April 2015 |

| |
|---|
| Intermediate Outcome: CO3b The Council will reduce the number of operational properties by closing less efficient properties and reallocating staff to other operational properties thereby intensifying use and reducing running costs. |
|---|

| Project / Service Improvement | End Date |
|--|-----------------|
| Closure of Douglas and Turriff homecare property with staff re-locating staff to Claverhouse | April 2013 |
| Closure of Balmerino Road building with staff relocating to a number of main locations across the city | April 2013 |

| |
|---|
| Intermediate Outcome: CO3f The Council will increase efficiency of corporate and inter-agency processes by deploying ICT hardware and software solutions |
|---|

| Indicator | Baseline Based on previous years figures | Benchmark (source in brackets) | Target 2017 |
|---|---|---------------------------------------|--------------------|
| % of social work staff that are able to access electronic communication and intranet based facilities in the work place | 60% | n/a | 100% |

| Project / Service Improvement | End Date |
|--|-----------------|
| Develop and implement a strategy for the provision and use of information technology and management within Social Work services ensuring that all staff have equitable access to, e-learning, e-communication and council intranet | Dec 2017 |