Business Plans Progress Reports

Improvement Priority	'Must do' actions	Progress
What it is and why you're focussing on it		
Developing Integrated Commissioning In line with the wider Organisational Design workstream of the STP, we will undertake a review of our existing integrated commissioning governance arrangements in order that they are flexible and an enabler to achieving change and system transformation. In doing so we will seek to simplify, streamline and collaborate to achieve reduced operating costs.	 Governance- A review of Integrated Commissioning Governance arrangements to determine overall effectiveness and to make recommendations to eliminate duplication and streamline decision-making. Finance- To review the effectiveness of the Integrated Fund and to make recommendations as to future direction and scope including hosting arrangements, management and potential to extend. Staffing- To review the current staffing arrangements and evaluate whether there are further opportunities to integrate in order to remove duplication and ensure there are the right capabilities and capacity to deliver change. Strategic Commissioning and Placed Based Commissioning- To work with the emerging Strategic Commissioning Function to develop an operating model that supports a Devon Wide Strategic Commissioning Function and Local Care Partnerships. 	A 'Strategy on a Page' that sets out to System has been developed and agree Plan (STP). NHS England confirmed the approval important step in our journey to cree as part of our ambition to better inter local communities Work has now commenced to desig Sustainability and Transformation Pla
Improvement Priority	'Must do' actions	Progress
What it is and why you're focussing on it		
Wellbeing & Prevention Commissioning for Wellbeing and Intervention has three priority areas: Thrive Plymouth, Health & Wellbeing Hubs and Making Every Adult Matter. These are existing priorities from the Wellbeing strategy and actions over 2018-19 will be a continuation of the delivery of these priorities	 Thrive Plymouth – Continuing to work closely with Public Health, Thrive Plymouth will continue on its 10 year programme to build on our population prevention agenda. Health and Wellbeing hubs – Aligning to the common framework and principles of the STP, it is our intention to commission a network of Wellbeing Hubs across the footprint. These Hubs will enable and support people in the local community to tackle the underlying social issues that they face, and make life choices that will improve their health and wellbeing. By March 2019 we will have launched 5 hubs. Phase 2 to be complete by March 2020. To support the Hubs and continue our drive towards good information and advice being available to the citizens of Plymouth a refreshed online service directory and website will be launched in April 2019. Making Every Adult Matter(MEAM) - We will adopt the MEAM vision of ensuring that people experiencing multiple needs are supported by effective coordinated services and empowered to tackle their problems, reach their full potential and contribute to their communities. To achieve this we are launching a new Integrated Substance Misuse, Homelessness and Offender System aligning with Mental Health services in April 2019. This service will be delivered by an Alliance which is an innovative contractual environment where suppliers and Commissioners share responsibility for achieving outcomes and are mutually supportive, making decisions based on the best outcome for the service user. 	 Stephens opening the first site during centre open by the end of 2018. The following functions to be delivered in Social prescribing service providit Housing, legal benefits, d advocacy Counselling, befriending Employment and volunte Education, training, learn Healthy Lifestyles and he Social and peer support Arts, crafts and therapeut

t the design criteria for the future Integrated Care reed across the Sustainability and Transformation

val of the merger of the two CCGs. This is an reate a single strategic commissioner for Devon ntegrate health and care services to benefit our

sign the future commissioning function at Plan (STP) level and place.

^d at Jan Cutting Healthy Living Centre with Simon ing his visit. Four Greens and the Mannamead the opening of these three sites has allowed the I in our most deprived communities:

iding access to: , debt support, care

ng and other support groups

nteering

rning and digital inclusion

health promotion

rt activities

eutic activities

rt and IT training

		1
		- Podiatry
		- Active for All
		- Better Futures
		- Long-term Condition Support
		- Sensory Solutions
		Cumberland and Stirling Health centre further six Hubs will be launched in 19
		A range of contracts and services are Wellbeing Hubs. By November 2019, provide support to people with menta directly in the hubs and in the surrour enhanced by social prescribing, advice a range of interventions that support p
		Pre-procurement work has been under partners to establish an integrated and seeing increased collaboration between complimentary services. This is impro- outcomes and ultimately diverting peo- systems.
		By April 2019 our new Plymouth Onli basis of our virtual hub offer and repla platform will focus on a more localised resources in the first instance. It will e provide consistent information to citiz may access services whilst giving them advice and guidance needs are met.
		Procurement for Complex Lives Allian including mental health, drug and alcol mainstream mental health
care and extending access for the population. The delivery of this hinges on three priority areas: delegated commissioning of Primary Care, development of an Integrated Primary Care system	 Delegated Commissioning of Primary Care – It is proposed that commissioning of Primary Care will be delegated to Local Clinical Commissioning footprints within the next two years. Consultation on joint commissioning has already commenced and it proposed that further consultation around delegated commissioning will take place in early 2019 ahead of an April 2019 launch. Integrated Primary Care System – As a system, we will design and implement a sustainable system based on the Primary Care Home model. Delivery will be based on papeling the knowledge care and recovered of primary care. 	Joint commissioning of General Practice 2018. The other primary care provide NHSE. Note that the intention is that move to a 'delegated light' position (in giving local commissioners as much int formal delegated responsibilities which from 1 st April 2019
and the launch of the Integrated Pharmacy Service. System Lead: Nicola Jones	on pooling the knowledge, care and resources of primary care, community and mental health services, social care, pharmacists and voluntary, community and social enterprise sector partners, to manage the population health of their community. Increasingly specialist services, delivered in hospital settings, will be delivered as part of the system wherever there is a population benefit of doing so. It is proposed that the design of the Integrated Primary Care System will be signed off by the end March	Improved Access went live on I st Oct access to GPs for all patients across th deadline being brought forward by six build on the day one location and serv Doctors extending their hours and ro information, moving it to a scaled up

tres will open by the end of March 2019 and a 19/20.

re being redesigned to be delivered from the 9, we will have re-procured services that will ntal ill-health and long-term conditions both bunding communities. Additionally, this will be ce and information and a 'virtual hub' to provide rt people as a whole person across the city.

idertaken with the current providers and wider and strategic system response. We are already even current providers by collocating to provide roving people's experience of services and their people from our primary and urgent care

nline Directory will go live which will form the place our existing information offer. The new sed offer, signposting customers to local Il enable the hubs and other organisations to itizens of Plymouth regardless of where they em greater control on how their information,

liance is underway encompassing 26 services, cohol, supported housing, offender projects and

ctice was established with effect from 1st August ders currently have to be commissioned by at from 1st Jan 2019 the whole of Devon will (in place in the South Devon & Torbay area), influence as is possible without progressing to ich we expect to apply for and might take effect

Actober 2018. This delivers evening and weekend is the Western locality. With the national six months, the two providers are continuing to ervice offer of Beacon Medical and Devon rota'd staff whilst working closely to share key up GP-led model over the course of the next

2019

Integrated Pharmacy Service - As a priority, we will work with partners and providers to develop an integrated pharmacy service for Western spanning the whole system through acute, community, care homes and primary care. This will ensure system prioritisation of workforce improving recruitment, retention and efficiency and effectiveness of the workforce through the development of the right service model able to deliver the right outcomes for people, populations, the workforce and the system. It is proposed that the initial integration of functions will commence in early 2019 with design work taking place in 2018.

twelve months. Plans for full procur are underway.

Working closely with the developing Strategic Commissioner to tie in with plans regionally such as telephone triage and use of prescribing and acute hub. Work is underway to design a sustainable system based on the Primary Care Home model including: care for people in care homes, extended primary care team and extended access

International GP Recruitment Programme is progressing at pace with International GP Fairs taking place in early July and September. Further round of International Recruitment programme due to take place alongside other workplace initiatives to support the sector.

Early visiting scheme being piloted for care homes with primary care and community crisis response team undertaking a test of change.

Plans are underway to develop the Primary Care Home model and developing wider multi-professional Enhanced Primary Care teams. Other key programmes include to the launch of the online e-consult function, development of the Practice Nurse Strategy and the developing Repeat Prescribing Hub.

Consultation around the delegation of Primary Care Commissioning to a local level has been initiated and a number of events have been held with local providers in this regard. Further events are scheduled for coming weeks.

Initial engagement has taken place around the development of the Integrated Pharmacy Service. Plans were put on hold to allow UHP to work on implementing Care Quality Commission's (CQC) recommendations around Pharmacy. Plans to be reconsidered once performance improvement is realised.

Improvement Priority	'Must do' actions	Progress
What it is and why you're focussing on it		
Integrated Children's Young People and Families Services The Plymouth ambition is to commission Integrated Children, Young People and Families services that provide the best start to life. Children, young people and families will be supported to stay healthy, achieve and aspire. Our children, young people and families will be able to access what they need at the right time and in the right place, provided by three system offers: Universal (advice, information and services which meet the needs of the majority of the CYP population), Early Help and Targeted (help and support which identifies need early and prevents escalation; and Enhanced/Specialised Support (statutory assessment and risk	 Universal Offer – Focus will be on the continued development of services available to everybody looking at enhancing the information and advice offer, providing core support to schools, raising awareness around key issues such as child sexual abuse and aligning and developing pre-existing pathways such as Maternity services Early Help & Targeted – Building on the development of the Early Help Assessment Tool and the creation of the Early Help Gateway, development of this offer will focus on: creation of a Single Point of Access, development of Family Hubs through the redesign of children's centres and enhancing emotional health and wellbeing provision including an offer to schools Enhanced & Specialised – The service priority for this offer will be to bolster the support to statutory functions, including the development of a parental support function, increased crisis response for children and young people in and on the edge 	A new ten year contract to provide co services (health visiting, school nursing, Services, speech and language, designat This was designed to continue the jour building on operational work to create SW, UHP and Plymouth City Council's A new Early Help and Targeted Suppor following consultation with professiona due at Cabinet in early summer to set utilising the children's centres and othe Hubs and Targeted Support for more of with system partners working with fam Community Sector and schools. It will

twelve months. Plans for full procurement process for services beyond April 2020

community health, wellbeing and SEND support ing, Child and Adolescent Mental Health nated doctors and nurses) has been awarded. ourney of integration of children's services, ate a single "Access" to services across Livewell cil's SEND services.

port offer for the city is being designed, onals, families and children. A business case is set out an integrated 0-19 model of delivery, other family support services to create Family re complex needs. This work will closely align families, for example the Voluntary and vill also align with the Wellbeing Hubs to ensure

support)	of care, work to support the sufficiency of 'in area' placements and implementation of	a joined up offer.
	the Regional Adoption Agency	The emotional health and wellbeing in 2019, and consideration is currently I funding for the service.
		A 14-25 commissioning plan is being for young people with additional need
		A support offer for mothers who have been procured, and contracted to a lintensive programme, enabling wome make positive changes for the future. grant from the Life Chances Fund to achieved.
		As part of a drive to avoid children as contract for local residential children months; the city now has ten beds co contracted beds within twenty miles city outside the contract which are al children and young people.
		The Regional Adoption agency, hoste October 2018.
Integrated Care Partnership(ICP) In response to the compelling case for change and in order to ensure joined up whole person care, we will commission an ICP for adults and older people. The ICP will bring together Core Community Health, Adult Social Care, Acute, Local Mental Health Services and potentially certain Primary Care Services	Creation of the ICP - It is proposed that the scope of creating the ICP will include the integration of services, alignment of systems and processes, creation of one workforce and one culture. Commissioners recognise that the journey to develop a high functioning ICP will take a period of several years. Therefore, in order to form and crucially develop the ICP we will actively work with providers to develop a comprehensive implementation programme based around four high level stages End of Life Coordination Services - through a Lead Provider arrangement. The aims of the service are to coordinate end of life care for patients registered with GP's in the Western locality and ensure that care provided to people at the end of life at home or in care homes in the western locality is commensurate with their need and equitably distributed. It is proposed that will be commissioned through a lead provider arrangement and work to develop this will take place through 2018/19. Home First Philosophy - Embedding and accelerating the Home First Philosophy through the full implementation of Discharge to Assess Pathway I to deliver 'assessment' and 'rehab/reablement care plan' at home within 2 hours of discharge with same day access to reablement or domiciliary care 7 days per week	 Plymouth's Strategic Commissioning the system's intention to integrate cathemes, some of which are already pies. Wellbeing & Prevention Transformed & Sustainable Piesenvices Integrated Care Services Integrated Responsive Menta Enhanced Care and Support System Enablers.
	Reduce Bed Based Intermediate Care - Reducing the reliance on bed based intermediate care through implementing the Discharge to Assess Pathway 2 provision to deliver 'assessment' and 'rehab/reablement care plan' within 48 hours of admission to care home. Undertake professional reviews of goal achievement and optimise step down and length of stay for patients. This will lead to a reduction in DTA2 care home beds; Local Care Centre beds converted to DTA2 pathway beds and reduced average length of stay to 14 days.	An Integrated Care Model (ICM) Pro representation across the system. The reviewed (Oct 2018). The End of Life (EOL) plan is now in launch in November 2018.
		Integrated Diabetes clinics are workin Delivery Plan including Diabetes Supe

in schools contracts are due to expire in August v being given to the future requirements and

ng developed to ensure that services are in place eeds, to prepare them for adulthood.

have experienced recurrent care proceedings has a local charitable provider. This will provide an men to "Pause", reflect on their own needs and re. This is supported by a Social Investor and a to contribute towards payments for outcomes

and young people being sent out of area, a block en's home placements has been in place for nine commissioned across six homes, with five further es of Plymouth. There are a further five beds ine also used as often as possible for Plymouth

sted by Devon County Council, went live on 1st

ng Intentions were agreed in June 2018 signalling care which would be based on the following picked up in this plan:

Primary Care

ntal Health services rt

nd integrating community and complex adult's de elements of local mental health services to rvice Delivery Model. Commissioners are working mencing an intensive period of co-design with the general public.

Programme Delivery Board is meeting with senior The priority delivery plan for ICM is being

in place and the EoL coordination hub is due to

king in Primary Care The Community Diabetes uper 6 will be developed and in place by 2020.

		The integration of Respiratory service
		The Repeat Prescribing Hub pilot will 2018.
		The Discharge to Assess 'Home' Path reframed with wide system involveme been required to achieve the culture, ensure that Home First is truly embe so. Interim appointment to an integra and the new 'Home First' team have program and shared their journey nat
		Care home pathway has been review embedded to ensure oversight and right nature of the pathway is supported. intermediate care beds from 200 to 1 and the 'stranded' and 'Extended Leng continue to drive flow.
		As a result of the improvement in ger number of block beds have been deco contract has highlighted the need to r ensure reablement is adequately com
Integrated Mental Health Services Local Mental Health Services will be commissioned to be an integral component of the Integrated Care Partnership, wrapped around Primary Care and supporting the MEAM Agenda so that individuals with complex needs; including homelessness, substance misuse and risk taking behaviours have access to appropriate mental health support. In doing so, it is the expectation that mental health services will work across pathways and organisational boundaries to provide seamless and integrated support and treatment.		Livewell South West have completed to WPCP (western primary care part provide a Dr-Dr consultation offer to
	Enhanced Social Prescribing - Enhance the Social Prescribing offer and test out whether an integrated approach with IAPT services delivers better outcomes for people living in some of the more deprived areas. We will run a pilot starting in April 2018 and make recommendations for learning and implementation for 2019/20	The pilot has been overtaken by wide offer to a larger number of GP practi practices which were to provide space placing its offer in the H&WB hubs al Greens subject to IT adaptions. They Stirling Road and Cumberland Centre
		IAPT service have presented at WPC people with long term conditions
	Rapid Response – The launch of a local extended hours crisis assessment service, supporting Primary care by October 2018	First response Business Case is curre Clinical Commissioning Group (CCG approved timescales for implementat
	Expanded Access - Extension of Psychiatric Liaison provision, working towards	Crisis café has opened 4 nights per w
	Core24. We will deliver a 24/7 assessment service into the Emergency Department	day/week service.
	Core24. We will deliver a 24/7 assessment service into the Emergency Department by April 2018 and then expand over the next 3 years until we meet the CORE 24 standards	day/week service. Liaison Psychiatry now available 24/7

ices has commenced.

vill be implemented in part of Plymouth in late

athway I has been reviewed, redesigned and ment. A number of workforce changes have re, leadership and performance required to bedded as the default option wherever safe to do grated therapy role has proved hugely successful e taken part in an NHSI rapid improvement mationally.

wed and a number of operational processes rigour is applied to ensure the intermediate . This has led to a reduction in patients within o 140. Average length of stay is now 6 weeks ength of Stay' metrics have been applied to

general operational management of these beds a ecommissioned and a review of the current o review the current contract specification to mmissioned across the pathway.

ed initial consultation and presented revised offer artnership) for consultation and approval, this will to GP's and primary care link workers.

der system changes –enhanced social prescribing ctices and delays in premises changes to GP ace for co-location. The service is focussing on already having an offer in Jan Cutting, and Four ney will also make an offer to the next two hubs cre

CP with respect to increasing offer to support

rently being finalised for discussion/approval at G)/Provider Executives meeting. Assuming ation will be subject to recruitment.

week plans are being developed to provide a 7

7 in Emergency Department. 24 in 2019/20 subject to funding

Enhanced Care and Support Significant work has already been undertaken to improve the sufficiency and quality of the Residential and Domiciliary Care Markets. However as we move towards a home first philosophy, coupled with a recognition that the sector is having to meet increased levels of acuity then new models of care and support will need to be developed.	 Enhanced Health in Care Homes - Building on the learning of the Vanguards, we will develop an Enhanced Health in Care Homes model. Working with providers, the ICO and Primary Care we will develop a best practice model based on seven care elements: Enhanced primary care support Re-ablement & rehabilitation High quality EOL and Dementia care Joined up commissioning and collaboration between health and social care Workforce development Harnessing data and Technology New Model of Domiciliary Care - We will work with the Market and the emerging ICP to develop a New Model of Care (NMC). The NMC will provide the opportunity to develop a single workforce ensuring carers are able to offer personalised services, to support people with a range of needs, be outcomes driven, reduce the need for ongoing long-term support 	Detailed scoping exercise has been corpriorities have been identified to be in are being planned for the programme and monitor the EHCH Programme. Red Bag Scheme is being has been law period. The Scheme will be rolled our disciplinary Care home visits are bein to Hospital. Funding has been agreed commence medicines reviews across for residents. A Culinary Care project homes with the aim of improving nutridysphagia training, offer of accredited development of a care home cookboo Art & Design. Significant demand and capacity plann winter, this will help to inform improving Discharge to Assess and Home First a established to monitor and review de In response to recommendations from providers to improve market sustaina system for understanding what capacity system we are seeing improvements is conference call established with providacross the City. Maximising Independence Project pilot packages and maximise people's indepadditional capacity. In the 9 weeks up 172.75 hours of care that's an average. The Single Accountable Provider modi implementation will be considered in Independence Project pilot packages and maximise people's indepadditional capacity. In the 9 weeks up 172.75 hours of care that's an average.
Efficiency Programmas	Kay Warkstrooms	hospital admission prevention was tra Function.
Efficiency Programmes	Key Workstreams: Commissioned Contracts Prevention and Demand Maximising Grants Making best use of our resources	See Separate Budget Report

completed for all work areas where five key e implemented in year, whilst long term priorities ne. Executive Group is established to progress e.

aunched mid-October after a successful pilot but to all care homes by December 2018. Multieing developed focussing on ten main admitters ed and additional staff have been recruited to ss care homes to ensure the right care is in place ect has been developed to support chefs in care utrition and hydration of residents. This includes ed training with City College Plymouth and book in collaboration with Plymouth College of

nning is underway for care home usage across roved market management in line with the at approach. Integrated Market Oversight Group demands across the system.

om CQC new fees have been agreed with nability. Commissioners have developed a new acity is available in Domiciliary Care and as a s in how we manage the market. Weekly oviders to review referrals and monitor capacity

iloted with a Dom Care Provider to review lependence where possible – thus creating up to 9th October 2018 the project released age of 20 hours per week.

odel has been developed and options for its in line with the Integrated Care Partnership.

ce@Home service that supports discharge and ransferred in the Council to the Retained Client

Retained Client

Improvement Priority	'Must do' actions	Progress
What it is and why you're focussing on it		
Provision	Maximise utilisation – As the last two remaining provisions for adults in the	Maximise utilisation
The Retained Clients provision functions take the form Of Colwill	Council, there is a real focus on maximising the utilisation levels at both Colwill Lodge and the Vine to release pressure elsewhere in the system. Focus will be on looking at	The Vine occupancy has risen from
Lodge Short Breaks and Respite Centre, The Vine Day Centre and the Community Reablement	schemes to release capacity such as transferring outreach clients and looking at	Colwill average occupancy risen from
the Community Readlement	increasing the number of clients attending sessions. A more long term focus will be looking at the infrastructure requirements and service standards for both services moving forwards, with the development of a business case to look at a single site option. There will also be a focus on changing the culture of the Vine to ensure it is used as a more short term intervention for individuals where it is identified that the provision can provide specific outcomes for them. If achieved, this will provide	Both Colwill and The Vine have sup helping the improved utilisation of the alternative provision. This has also be thorough supporting a Cornish client The longer term work looking at a se
	greater throughput at the Vine and increase the utilisation levels.	commenced and an OPE Bid was sul support the design and feasibility sta
	Efficiency of Workforce – Part of the End to End Review of the units in 2017 looked at how capacity and the workforce was managed across both units. The idea	expected in February 2019.
	of a peripatetic workforce working across both sites will be looked at to realise	Efficiency of Workforce
	efficiencies for the service. Quality – Colwill Lodge was the subject of a CQC inspection in 2017, receiving an overall Good rating. However, the service received a 'requires improvement' around its responsiveness. This has led to an improvement plan being developed to move that rating to good and delivery of this will be a focus in 2018.	Workforce efficiencies and some de has happened and supported part of Targeted to Deliver £250K of saving
		The single workforce agenda will be site provision work that is ongoing.
	Targeted Support – The Community Reablement service are able to flexibly target specific cohorts of clients as part of their approach to deliver specific system outcomes. Two of these areas are Complex Needs and Transitions. In 2018 the service will look to work in partnership with Livewell South West to better manage transitions into adult services and to focus on supporting clients with complex needs to live more independently with a less intensive package of care.	Quality
		CQC Inspection at Colwill took plac across all areas an improvement on
		Quality continues to be a focus acro
		Targeted Support
		The close partnership working with and Transitions areas is ongoing and independent lives it has also be depl Containment targets this year.
Improvement Priority	'Must do' actions	Progress
What it is and why you're focussing on it		
Safeguarding & Deprivation of Liberty Safeguards The Local Authority has lead responsibility for Safeguarding in the City. The service priorities around this function are made up of actions identified within the corporate Safeguarding Improvement Plan and targets already in place around DoLS	to the standards outlined within the Care Act, Mental Capacity Act and Human Rights Act, local integrated service arrangements and in national guidance. In 2018, focus will be on annual reviews of all guidance and developing the right tools to support the system in working to them	Compliance
		The Plymouth Multi-Agency Adult Sabeen reviewed and updated; awaren Safeguarding Adults Board and its su Network.
	Plymouth Safeguarding Adults Board –Statutory responsibility to establish and	Plymouth Safeguarding Adults
	Support the PSAB to deliver its Strategic Plan, annual report and Safeguarding Adult Reviews as required, whilst contributing to Board development.	PSAB review conducted in 2018, the

m 77% to 85% throughout the year.

rom 75% to 90%

upported individuals effected my market failure f these services and helped avoid costs for o led to a small income generation at The Vine ient.

a single site provision for these services has also submitted in November looking to secure funds to stages that are ongoing. An update on the bid is

deployment of staff across the two sites is in place of the Budget Containment delivery this year. ings this FY.

be one of the work stream activities in the single

blace in April 2018 and received a "Good" rating on its previous inspection.

ross all services.

th Livewell South West in the Complex Needs nd has helped a number of people live more eployed to support delivery of the Budget

t Safeguarding Policy and Procedures Manual has reness is promoted through the Plymouth sub-groups, and the Strategic Safeguarding Leads

s Board

the Safeguarding Adults Board is legislatively

Improvement Priority What it is and why you're focussing on it Implement Service Improvement Plan	'Must do' actions Following the completion of the restructure taking place within the Retained Client Function, a service improvement plan will be developed containing actions highlighted within the service review. Throughout 2018 there will be a focus to deliver the changes outlined and to support employees through a time of transition and implementation of a new service.	Progress The structure of the Retained Client F area to drive through the changes iden been simplified, safeguarding process r Reablement now manage activity using This plan will be refreshed for 2019.
Health and Adult Social Care Monitoring Regulating and monitoring the work of Livewell South West to ensure that Social Care delivery is compliant with the standards and budgetary targets the Council has outlined	 Budget Containment – Working closely with Livewell South West to ensure that best value is achieved within packages of care and that we focus on areas of service/financial risk. Performance Regulation – Continuing to monitor the performance and of the Integrated Provider to ensure it is at the required standard and that we meet the outcomes identified within the Adult Social Care Outcomes Framework, the legal framework of the Care Act and other legislation associated with the delivery of Adult Social Care within budgetary targets Transformation Oversight – Livewell South West will be a key part of the ICP and therefore will be involved in a large amount of change. The RCFs role will be to ensure that the Adult Social Care responsibilities continue to be met as a result of these changes, 	Budget Containment Budget containment work with Livewer throughout the year supporting the ow reduced care where appropriate and r system. Performance Regulation & Transf Monitoring performance across the line helping us together identify areas of po operates at detailed levels directly with through the Council Scorecards ensuring Performance metrics and dashboards en- change.
	Engagement and Networks – Due to the nature of safeguarding's ever changing policy landscape, there is a continued need to ensure that the Council is engaging with and supporting related national, regional and local agendas. This benefits our system through being able to support with implementing best practice across agencies, training and raising awareness around agendas such as Modern Slavery Deprivation of Liberty Assessments – There are strict legal frameworks and performance targets around DoLS assessments contained within the performance data in appendix 2. Focus will remain on keeping a disciplined programme of assessment and risk management around the volume of DoLS referrals currently received with a view to meeting that target.	compliant and benchmarks well against Engagement and Networks We have maintained established links a policy network and work plans, the read delivery groups. Deprivation of Liberty Safeguards Performance & Risk: We have maintain Interest Assessment completed so far priority cases to ameliorate the risk of Legal: In July 2018, the Government put which if passed into law will reform the and replace them with a scheme know Bill is has undergone several amendme legislative approval.

ainst other SABs.

nks and continue to input to the national ADASS regional group, and local partnership boards and

ards Assessments

ntained our performance this year (with 365 Best far this year) and continued to focus on high k of legal challenge.

nt published a Mental Capacity (Amendment) Bill, the Deprivation of Liberty Safeguards (DoLS), nown as the Liberty Protection Safeguards. The dments and we are awaiting timelines for its

ewell South West has progressed well overall department targets. This work has nd released valuable care capacity back into the

ansformation Oversight

Integrated Provider is now an ongoing process of positive note and concern. This process with Livewell South West and reports up nsuring sufficient oversight and governance.

rds evolve with service delivery integration and

nt Function is now complete allowing for each identified. Some Business Support Functions have ess reviewed and refreshed and Community sing Carefirst.