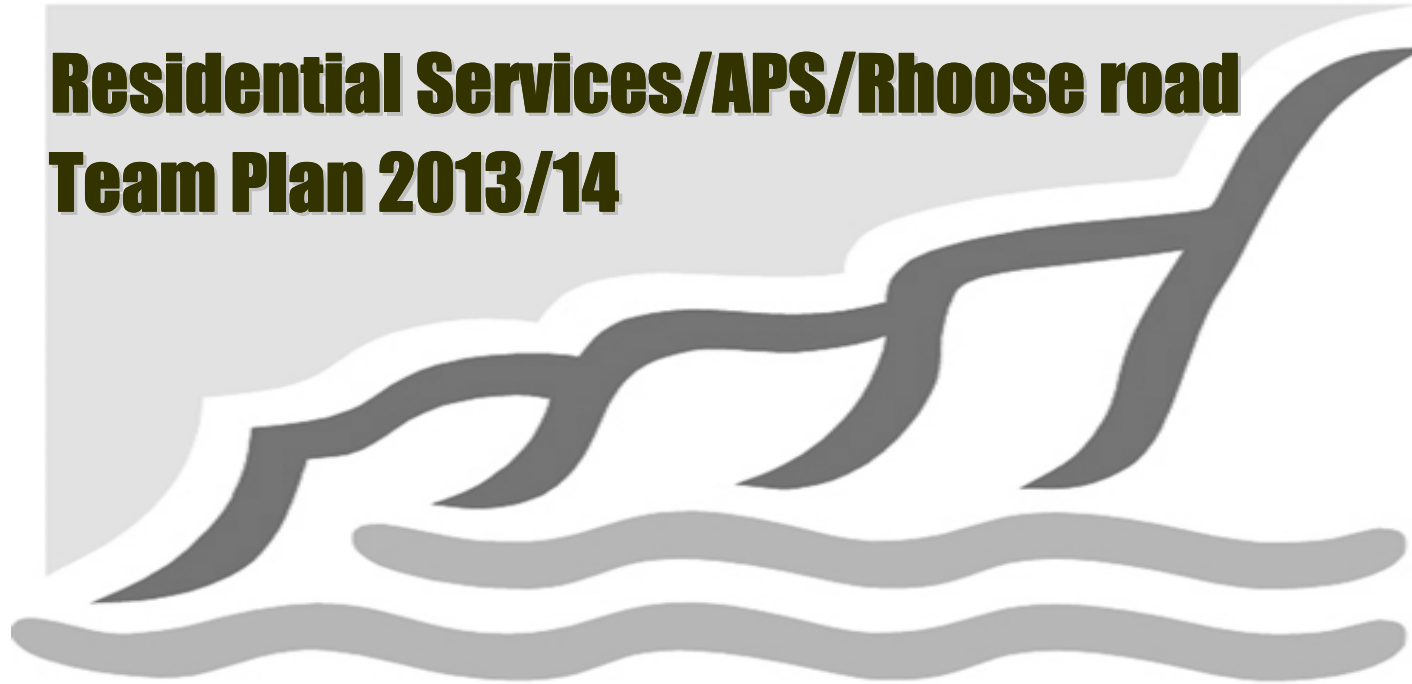


# VALE of GLAMORGAN

## **Residential Services/APS/Rhoose road Team Plan 2013/14**



# BRO MORGANNWG

Team Manager	Marijke Jenkins
Service Plan	Social Services Directorate
Date signed off	
Signed off by	Carys Lord

<b>Outcome: 1</b>	People in the Vale of Glamorgan are able to request support and receive the right help in a timely manner
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<b>Objective: 1</b>	To ensure that people have access to comprehensive information about Social Services and can easily Contact key staff. Individuals get prompt advice and support, including their eligibility for service, and are well signposted to other services where appropriate.
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<b>Context for this objective:</b>	<p>APS/Rhose Road and residential services have responded to the drive to improve the options for Social Service information delivery.</p> <p>Progress has been made in standardisation of service related documentation and processes and is widely available but would benefit from further standardisation in residential care and 'bespoke format' for people with learning disabilities. APS's new interactive webpage is now operational.</p> <p>CSSIW have indicated that in future the residential registration criteria will be determined by the statement of purpose rather than variations to current registration conditions and this is under review.</p> <p>Current operational practise determines care is provided in accordance to assessed and reviewed need and specialist advice/referral to Housing services is sought when required to avoid premature ending of placements-referral to nursing care/supported housing.</p> <p>In residential care the level of need/collective need which is established by the monitoring of dependency levels ensures safety in admissions, planning and review and will ultimately determine levels of provision rather than the number of variations to registration.</p>
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Ref.	During 2013-14 we plan to:	Outcomes we'll achieve from this action are:	High , medium or low priority	Officer responsible for achieving this action	Start Date	Finish Date	How will the work be resourced?:	Progress
<i>C9 SS05/ AO16 ChP</i>	Review and standardise Statement of Purpose	Statement of purpose will accurately reflect the services that are available which will inform potential /service users and Regulators	M	Marijke Jenkins (MJ)  Jane Billings(JB)  Registered managers  Liz Hendy (LH)	13-14	13-14	Existing budgets	APS / Rhoose Road SOP accurately reflect the service and are reviewed annually  Residential statement of purpose accurately reflect the service but are to be standardised
<i>IN1 6/7 IN8</i>	Review / update/create leaflets and web content consulting B. Wickett, SALT/Communication officer (LD)/People first	Leaflets and web content will be accessible and accurately reflect services	M	MJ  JB  Registered managers	13-14	13-14	Existing budgets	Information on residential webpage /leaflets adapted  APS webpage created in 2012 - leaflets under review  Rhoose road leaflet /webpage under review

SS05/ AO16 C9	Review / update/standardise service guides + where appropriate consulting Age UK/ SALT/Communication officer (LD) /People First	Service guides accurately reflect services and are 'service user friendly'	M	MJ  JB  Registered managers  LH	13-14	13-14	Existing budgets	Rhose Road service guide reviewed in 2012 and is operational, work in progress to make this service user friendly e.g. picture format  Widget available in APS and Rhose Road
IN8	Implement a bespoke 'LD service user' complaint procedure	Complaint procedure is accessible to service users with a learning disability	M	MJ  in consultation with: RT Laura Eddings  Sharon Hughesdon (Communications development officer ) and Amanda Green	12-13	13-14	Existing budgets	Completed and in consultation with other LD services before implementation
C4	Identify patterns (incl. falls) in incident and accident records, refer to appropriate	Ensure timely action/referrals to specialist /other professional to	H	Residential managers	12-13	On- going	Existing budgets	Residential Incident/Accident log operational

	specialist/teams and record action taken	avoid escalation of issue/dependency		PIC Care staff Support staff APS team				APS consider recording format  Falls risk assessments introduced
C3 C4	Collaborative working between Housing and social services	Secure HB income in VOGC and CCC to fund eligible housing related placement costs Maintain 'gold status' for APS service users in transition placements	M	APS team	Ongoing	Ongoing	Existing budgets	Allocated HB team member for APS  HB payments on target  Gold Housing Status secured in May 2011 for APS service users seeking independent accommodation, vacating cost effective APS beds

<b>Outcome (insert number): 1</b>	People in the Vale of Glamorgan are able to request support and receive the right help in a timely manner
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<b>Objective (insert number): 2</b>	To ensure that people using Social Services are supported by assessments, care and support plans which are regularly reviewed
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<b>Context for this objective:</b>	<p>Service user plans in APS/Rhose Road and Residential services reflect information provided in UA, Risk profile and care plans. To ensure the plans continue to accurately reflect the service user's support needs they are reviewed at regular intervals and as required, involving service users, carers and other professionals.</p> <p>All services are regulated by CSSIW and it is a legislative requirement that a service user plan is in place within 48 hours of a placement being made and that all plans reviewed regularly.</p> <p>This performance standard and the quality of support plans is measured by CSSIW, SP and during PIC visits.</p>
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<b>Ref.</b>	<b>During 2013-14 we plan to:</b>	<b>Outcomes we'll achieve from this action are:</b>	<b>High , medium or low priority</b>	<b>Officer responsible for achieving this action</b>	<b>Start Date</b>	<b>Finish Date</b>	<b>How will the work be resourced?:</b>	<b>Progress</b>
RM6 C9	Maintain consistency of placement / service user plans and associated reviews	Service user and associated plans accurately reflect support needs are person centred and	H	Registered managers  PIC	On-going	On-going	Existing budget	Service user plans and associated reviews meet regulatory standards

		outcome focussed		JB Support workers APS team Care staff				Residential assessment and service plan documentation have been revised in 2013 to reflect UAP domains
RM6 C9	Ensure that service user and associated plans and delivery focus on positive outcomes for service users	Provision of measurable outcome data for efficacy of services	H	Registered managers JB PIC Support workers APS team Care staff	2013	2014	existing budget	APS service user plan under review Rhoose Road and Residential service user plans recently reviewed Person Centred planning training for residential and support staff has taken place and is explored for APS hosts Partnership working with CST

								Life story training has taken place
C3	Maintain client files/records to required standard in line with agreed format and in preparation of file audits /inspections	Standards are consistent, meet VOGC agreed format and are effectively monitored	M	Registered managers JB PIC Support workers APS team Care staff	On-going	On-going	existing budget	File format agreed , maintained and audited  Placements and Client file content reviewed by care/support staff and during PIC visits  APS File structure under review  New residential Kardex system piloted



IHSC6	Ensure that Requests for Service and UA's are complete and all relevant information regarding risk factors is identified, recorded and reviewed.	<p>UA's /referrals service plans and risk assessments are completed in accordance with good practice.</p> <p>Risks to self and others are assessed to inform placements</p>	H	<p>Registered managers</p> <p>JB</p> <p>PIC</p> <p>Support workers</p> <p>APS team</p> <p>Care staff</p>	On-going	On-going	existing budget	<p>UA and service requests on file</p> <p>Risk Assessments completed and reviewed</p>
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<b>Outcome (insert number): 2</b>	People eligible for social services in the Vale of Glamorgan are able to choose from a range of high quality services helping them to maximise their independence whilst keeping them safe
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<b>Objective (insert number): 3</b>	To provide services which meet assessed individual needs
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<b>Context for this objective:</b>	<p>APS/Rhose Road and Residential services increase the range of options available to people requiring support, including provision of respite which enables Service users to retain independence (WYN campaign) and remain at home longer as a result of appropriate respite support.</p> <p>Service users living in residential care, using respite services or APS are encouraged to gain/maintain skills/ability and live as independently as possible whilst data on occupancy provides an indication of demand for services.</p> <p>Service plans promote community presence, increased/maintenance of self-reliance, independence, dignity and freedom of choice. Support offered focuses on the following elements, which are not listed in order of priority: Autonomy, Citizenship, Inclusion, Attainment, Well-being, Individuality and Diversity.</p> <p>Collaborative working with commissioning teams and specialist teams assists in the effective review of placements and ensure timely action to avoid escalation of issue/dependency</p>
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<b>Ref.</b>	<b>During 2013-14 we plan to:</b>	<b>Outcomes we'll achieve from this action are:</b>	<b>High , medium or low priority</b>	<b>Officer responsible for achieving this action</b>	<b>Start Date</b>	<b>Finish Date</b>	<b>How will the work be resourced?:</b>	<b>Progress</b>
RM2 RM5	Collect data on service demands and needs based on evidence	Service provision is based on predictive	M	APS Team	2012	On-going	Existing budget	ICT systems in situ to collect

	including service needs arising from Transitions process	demand.		MJ Residential managers				data Residential assessment process agreed with OP teams Residential reviews completed Residential/APS and Rhoose Road Occupancy data collected
SS05/ A021 SHCW 7	Achieve an increased uptake of APS respite/day support placements by people with dementia/older people to maximise the opportunities for independent living and delay admission to residential care.	APS is regarded a viable alternative service option for older people and people with dementia	H	APS team	2012	On-going	Existing budget	Involvement of Psychologist in training for hosts APS Hosts have received dementia awareness training.
C3	Sustain and increase affordable APS support/accommodation	Affordable community based, person	H	APS team	Ongoing	Ongoing	If the APS service level is to be	No new APS hosts recruited post 10-11.

		centred and sustainable services					increased a Part time/full time project worker post (f/t £30,0111) will have to be created	CST LD has been approached to provide data on predicated need for placements.
SS03 A009 HSCW6 CP p 18	Monitor usage of VOGC respite services	transparent system of access to VOGC respite services.  APS is viable respite option for a generic service user group  Service users will remain at home longer as a result of appropriate respite support	H	MJ  Residential managers  JB  Support staff	2013	ongoing	Existing budget	Weekly APS Matching meetings  Respite review meetings on-going  Residential respite booking systems in situ and accessed by ACCT/CST  Provision of Additional emergency respite EMI bed under consideration
C9	Ensure placements, practices and procedures meet standards and	Purchaser/service user satisfaction  Continued	H	Registered managers JB PIC	Ongoing	Ongoing	Existing budget	Successful CSSIW /SP inspections

	regulatory expectations	CSSIW Registered status		Support workers  APS team  Care staff				VOGC QA report completed 12-13 – questionnaires sent for QA 13-14 Policies and procedures reviewed
C3 RM8 RM10 RM11	Protect APS provision by Monitoring VOGC and CCC SP Grant conditions	Successful audits. Protected SP income	H	APS team	Ongoing	Ongoing	Existing budget	VOGC payments due at end of financial year  CCC payments on target
RM10	Continue to work collaboratively with CST's and Housing services	Prevent premature transfer of clients to residential care/ nursing care/supported housing	H	APS team  Registered managers	Ongoing	Ongoing	Existing budget	Allocated HB team member for APS  HB payments on target  APS attendance at VOGC landlord mtgs  Specialist involvement e.g. CPN
RM10	Maintain 'gold status' for APS service users in transition placements	Secure HB income in VOGC and CCC to fund	H	MJ/JB	ongoing	Ongoing	Existing budget	Gold Housing Status secured in May 2011 for APS

		eligible housing related placement costs						service users seeking independent accommodation, vacating cost effective APS beds
C3 RM8 RM10 RM11	Monitor APS client contributions for ineligible housing costs	Placement funding secure	H	APS team	Ongoing	Ongoing	In -2012 -13 Long term service users contributed <b>120 K</b> to fund ineligible housing related costs	Quarterly updates and invoicing for HB shortfalls agreed with VOGC income management.  Monthly updates to CCF
C3 RM8 RM10 RM11	Agree charges and Process timesheet information to secure and monitor budget allocation	Placement funding secure. APS budget accurately reflects cost of service.	H	LH  JB	ongoing	ongoing	2012-13 costs: LT £212.80 pw Respite £426.50 pw Hourly support £9.44 per hour (weekdays) £12.53 per hour	2012-2013 costs calculated , communicated and implemented, agreed 0.5% increase for additional support and ineligible housing costs. Increase of LT and respite support cost in

							(weekends)	line with Minimum wage processed  Invoicing and data recording up to date
IHSC6	Ensure that Requests for Service and UA's are complete and all relevant information regarding risk factors is identified, recorded and reviewed.	UA's and referrals are completed in accordance with good practice.  Risks to self and others identified to inform placements	H	Registered managers  JB  PIC  Support workers  APS team  Care staff	On-going	On-going	existing budget	UA and service requests on file  Risk Assessments completed and reviewed

<b>Outcome (insert number): 2</b>	People eligible for social services in the Vale of Glamorgan are able to choose from a range of high quality services helping them to maximise their independence whilst keeping them safe
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<b>Objective (insert number):4</b>	To ensure that people's views on gaps in services and effectiveness of support result in changes and help inform how services are monitored and developed
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<b>Context for this objective:</b>	<p>APS/Rhose Road and residential services are committed to improving the outcome for serviced users and systems are operational to ensure measurable quality of provision.</p> <p>All services are registered with CSSIW and inspected once a year, and recommendations inform service development</p> <p>APS is partially funded by Supporting People and is the service audited yearly by the Vale of Glamorgan and Cardiff supporting people teams and service users and commissioners are invited to contribute to the quality assurance processes and inspections.</p> <p>The focus of all services is to provide a time/cost effective and person centred service that provides measurable outcome data for future service development</p>
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<b>Ref.</b>	<b>During 2013-14 we plan to:</b>	<b>Outcomes we'll achieve from this action are:</b>	<b>High , medium or low priority</b>	<b>Officer responsible for achieving this action</b>	<b>Start Date</b>	<b>Finish Date</b>	<b>How will the work be resourced?:</b>	<b>Progress</b>
SS04/5 A015 A020 SP	Consider options for greater service user and carer involvement in service	Services are responsive to client needs and preferences	H	Registered managers  JB	2013	2014	Existing budget	Carers and service users invited to attend reviews  Residential resident



DR p6	planning/review			PIC Support workers APS team Care staff				meetings take place  Age UK advocacy visit homes regularly
HR6 SPE5	Plan APS host consultation/ development programme	Hosts are offered regular training/development opportunities and are consulted on service development	H	APS team	2013	2014	Host training budget 5K	
IN8	Complete and distribute bespoke complaint procedure to LD service providers	Service users are encouraged to complain about services	H	LE MJ	2013	2014	Existing budget	In consultation
SPE 5	Standardise residential 'in house' QA systems and create yearly reports	Service specific QA system that informs practise	M	MJ Managers LH	2013	2014	Existing budget	Divisional QA system successful and meeting regulatory standards  APS yearly re-approval questionnaires operational

								Rhose Road client questionnaire operational
C3 C9	Ensure placements, practices and procedures meet standards and regulatory expectations	Purchaser/service user satisfaction  Continued CSSIW Registered status  Protected SP income	H	Registered managers  JB  PIC  Support workers  APS team  Care staff	Ongoing	Ongoing	Existing budget	Successful CSSIW inspections  VOGC QA report completed 12-13 – questionnaires sent for QA 13-14  Placements and Client file content reviewed  APS re-approval ongoing
C3 RM6	Provide Person Centred, planned and agreed means of care provision	Service delivery plans focus on outcomes for service users  Time/cost effective and person centred service delivery  Provision of measurable	H	Registered managers  JB  PIC  Support workers  APS team	Ongoing	Ongoing	Existing budget	Standardised record forms introduced and operational

		outcome data for efficacy of services		Care staff				
IN8	Respond to complaints, grievances and compliments in line with VOGC guidelines	Responsive management and service delivery  Accurate complaint /compliment data	H	Registered managers  JB  PIC  Support workers  APS team  Care staff	Ongoing	Ongoing	Existing budget	Bespoke LD complaint procedure created – now in consultation
CPE 7	All existing and new team members to receive refresher equalities training	Host/Team Awareness of equality issues when dealing with clients, and the public	M	Registered managers	ongoing	ongoing	Existing budget	Majority of contracted staff have attended equalities training

<b>Outcome (insert number): 3</b>	The Vale of Glamorgan Council achieves good outcomes for service users and carers through its arrangements to protect vulnerable people and success in promoting independence and social inclusion
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<b>Objective (insert number): 5</b>	To ensure that people are helped to achieve the best possible outcome for them, maximising independence, developing abilities and overcoming barriers to social inclusion
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<b>Context for this objective:</b>	<p>Service users living in residential care, using respite services or APS are encouraged to gain/maintain skills/ability and live as independently as possible</p> <p>Service plans promote community presence, increased/maintenance of self-reliance, independence, dignity and freedom of choice. Support offered in all services focuses on the following elements, which are not listed in order of priority: Autonomy, Citizenship, Inclusion, Attainment, Well-being, Individuality and Diversity.</p> <p>The main aims of the services (as described in their Statement of purpose) are:</p> <ul style="list-style-type: none"> <li>• To provide respite/emergency respite to vulnerable individuals in a community environment</li> <li>• To provide support to vulnerable adults in their pursuit of meaningful community based activities</li> </ul>
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<b>Ref.</b>	<b>During 2013-14 we plan to:</b>	<b>Outcomes we'll achieve from this action are:</b>	<b>High , medium or low priority</b>	<b>Officer responsible for achieving this action</b>	<b>Start Date</b>	<b>Finish Date</b>	<b>How will the work be resourced?:</b>	<b>Progress</b>
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IHSC 7	Develop inclusive activities programme for residential services with Age Uk and Alzheimers Society	Inclusive Group Activities plan accessible to all residents	M	Residential managers	2013	2014	Existing budget  Client Contributions	Life story training and activities training attended by residential staff
C1 RM12	Prepare business case for APS growth	increase number of community based APS resource	H	MJ/JB	2013	2014	Existing budget	Proposal for APS restructure finalised
C9	Ensure that Service delivery Plans and Care Plans focus on outcomes for service users	Provision of measurable outcome data for efficacy of services	H	Registered managers  JB  PIC  Support workers  APS team  Care staff	Ongoing	Ongoing	Existing budget	Adult plans and Care Plans reviewed during placement reviews
SS03/05 A009 HSCW6 Cp p 18	Explore how to achieve an increased uptake of APS placements by people with	APS is regarded a viable alternative service option for older people and	M	APS team	Ongoing	Ongoing	Existing budget	Involvement of Psychologist in training for APS hosts

	dementia/older people to maximise the opportunities for independent living and delay admission to residential care.	people with dementia						36 Hosts have received dementia awareness training.
SS04 /05 A015 SP MP	Provision of a fair and safe system of access to APS/VOGC respite services.	Prevention and delay of admission to long term health/social care	M	Registered managers APS team APS admin	Ongoing	Ongoing	Existing budget	Respite Data collected to inform process

<b>Outcome (insert number): 3</b>	The Vale of Glamorgan Council achieves good outcomes for service users and carers through it arrangements to protect vulnerable people and success in promoting independence and social inclusion
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<b>Objective (insert number):6</b>	To ensure that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation through the Council working in coordination with other organisations
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<b>Context for this objective:</b>	<p>The authority has fully implemented the All Wales \Protection of Vulnerable Adults (POVA) procedures and POVA training is mandatory elements of the training plans.</p> <p>POVA processes are applied consistently across the services and QA and inspection processes ensure transparent auditing of the application.</p> <p>Incident and accident reporting is audited to determine patterns that maybe indicative of abuse and medication errors are audited by the Central DLM for a similar reason.</p> <p>The complaint process is made available to all service users and advocates and decisions regarding complaints and POVA matters are not reached in isolation.</p>
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<b>Ref.</b>	<b>During 2013-14 we plan to:</b>	<b>Outcomes we'll achieve from this action are:</b>	<b>High , medium or low priority</b>	<b>Officer responsible for achieving this action</b>	<b>Start Date</b>	<b>Finish Date</b>	<b>How will the work be resourced?:</b>	<b>Progress</b>
SS06 A027 DRp21	Ensure POVA procedures/guidelines are adhered to and all documentation is completed accurately	Clients kept safe from risk of abuse	H	Registered managers  JB  PIC	ongoing	ongoing	Existing budget	Risk assessment and POVA processes are applied consistently

				Support workers APS team Care staff				Accidents/incident record maintained in a manner that enables identification of patterns  Number of medication errors leading to harm significantly reduced and audited  Risks and change in need communicated to CST/C1V  Quarterly PIC visits
C8	Monitor DBS, capability and training needs of team	Team members skilled to provide a safe, informed and responsive service	H	Registered managers	Ongoing	Ongoing		All staff/hosts have valid DBS which is repeated every three years. Majority team members/APS hosts have



								received MCA, POVA, CP, Domestic Abuse and risk assessment training.
C9	Ensure placements, practices and procedures meet standards and regulatory expectations	Purchaser/service user safety and satisfaction  Continued CSSIW Registered status	H	Registered managers  JB  PIC  Support workers  APS team  Care staff	Ongoing	Ongoing		Successful CSSIW inspections  Yearly QA
IHSC6	Ensure that Requests for Service and UA's are complete and all relevant information regarding risk factors is identified, recorded and reviewed.	UA's and referrals are completed in accordance with good practice.  Risks to self and others identified to inform placements	H	Registered managers  JB  PIC  Support workers	July 09	Ongoing		Requests for Service and UA's are complete and all relevant information regarding risk factors are identified.  UA and service

				APS team Care staff				requests on file Risk Chronologies requested from Commissioners
C11	Ensure Health and Safety in service delivery	Safe service delivery	H	Registered managers JB PIC Support workers APS team Care staff	ongoing	ongoing		Risk Assessments completed and reviewed  Mandatory H&S checks are up to date  H&S procedures regularly reviewed  Fire safety training, fire RA's and PEEPS up to date  Equipment servicing/maintenance contract operational

<b>Outcome (insert number): 4</b>	Performance of social services is actively managed and people accessing services in the Vale of Glamorgan are supported by sufficient staff who have appropriate qualifications, training experience and skills
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<b>Objective (insert number):7</b>	To utilise performance management to improve customer outcome and the services provided
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<b>Context for this objective:</b>	<p>APS/Rhose Road and residential services are committed to improving the outcome for serviced users and systems are operations to ensure measurable quality of provision.</p> <p>All services are registered with CSSIW and inspected once a year, and recommendations inform service and staff development</p> <p>Staff performance is measured by means of practise monitoring, supervision and PDR and opportunities for development are offered to ensure practise is focussed on delivery of a time/cost effective and person centred service that provides measurable outcome data for future service development and</p>
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<b>Ref.</b>	<b>During 2013-14 we plan to:</b>	<b>Outcomes we'll achieve from this action are:</b>	<b>High , medium or low priority</b>	<b>Officer responsible for achieving this action</b>	<b>Start Date</b>	<b>Finish Date</b>	<b>How will the work be resourced?:</b>	<b>Progress</b>
C8	Monitor capability and training needs of staff and hosts	Hosts and Team members are skilled to provide a safe, informed and responsive service	H	MJ  Registered managers  APS team	Ongoing	Ongoing	Existing budget	Majority team members have received MCA, POVA, CP, Domestic Abuse and risk

								assessment training. Refreshers ongoing  Regular supervision/ yearly PDR
IN8	Respond to complaints, grievances and compliments in line with VOGC guidelines	Responsive management and service delivery  Accurate complaint /compliment data	H	Registered managers  JB  PIC  Support workers  APS team  Care staff	Ongoing	Ongoing	Existing budget	Bespoke complaint procedure in consultation
SS07 A0312 SP	Agree 'provider' performance indicators	Provide performance data to inform service planning	H	MJ  Registered managers  APS team	2013	2014	Existing budget	Provider PI's in consideration
SS04/05 A015/020	Key workers and management	Service users /advocates feel	H	Registered managers	2011	Ongoing	Existing budget	Complaint record maintained and

SP DR p6	create opportunity for service user/advocate feedback	involved and valued  Responsive service delivery		JB  PIC  Support workers  APS team  Care staff				reviewed during PIC visits, QA, CSSIW and inspections  Monthly Service plan reviews  NOK/advocates invited to contribute to review process on quarterly basis
CPE7	Ensure all team members receive equalities training	Team Awareness of equality issues when dealing with clients, and the public	M	MJ  JB  Registered managers	ongoing	ongoing	Existing budget	Majority of Existing team members have undertaken training

<b>Outcome (insert number): 4</b>	Performance of social services is actively managed and people accessing services in the Vale of Glamorgan are supported by sufficient staff who have appropriate qualifications, training experience and skills
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<b>Objective (insert number):8</b>	To ensure that robust workforce planning arrangements are in place within the Directorate
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<b>Context for this objective:</b>	<p><b><u>Residential and Rhose Road:</u></b></p> <p>The registered residential managers and deputy managers have attained NVQ 4 Registered Managers Award</p> <p>Staff training and development programme ensures staff fulfil the aims and meet the changing needs of services and takes account of any relevant guidance of the Care Council for Wales.</p> <p>All staff receives a minimum of five paid days training per year (including in house training),</p> <p>At least 50% of care/support staff hold NVQ level 2 in care or a similar qualification recognised by the Care Council for Wales</p> <p>Domestic and Catering staff have equal access to training and development opportunities</p> <p>PDR 2012-2013 PDR's accounted for: 100%</p> <p>Days lost to sickness 2012– 2013: variable, addressed by means of two weekly MoA meetings</p>
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**APS:**

Team members and APS hosts have attended all mandatory training.

Approval Panel Members have attended Panel training

Refresher and new training courses continue to be made available to all hosts and team members.

New training introduced to hosts in 2011-2012: Dementia Awareness with a focus on Young Onset dementia

Relevant and specific needs led training is made available to hosts as required (e.g. diabetes, epilepsy, mental health)

CCfW has commenced a review of the CQF for hosts

Host Consultation and development meetings are convened 4 times per year.

<b>Ref.</b>	<b>During 2013-14 we plan to:</b>	<b>Outcomes we'll achieve from this action are:</b>	<b>High , medium or low priority</b>	<b>Officer responsible for achieving this action</b>	<b>Start Date</b>	<b>Finish Date</b>	<b>How will the work be resourced?:</b>	<b>Progress</b>
HR1 HR4/5 SS08	Continue to meet APS host and individual team members'	Staff developmental and support needs identified and responded to	H	Registered managers  APS team	Ongoing	Ongoing	Existing budget	Timely supervision provided  Training needs

A031 ChP C6	supervision, training and development requirements and complete PDRS reviews	Staff are sufficiently trained to provide effective services  100% PDRS's completed						identified and standard residential training spread sheet under construction  2012-13 - 100% PDRS returned
HR6	Share information at team level to inform decision making	Staff are aware of developments and pressures faced by the service /within the Authority  Staff are aware of expected standards of work /changes in practise and processes	H	Registered managers  JB  MJ	Ongoing	Ongoing	Existing budget	Monthly team meetings  Information sharing processes operational
HR 4/5	Monitor MoA	Reduced Sickness absence /sickness related expenditure	H	Registered managers  LH  MJ  JB	ongoing	ongoing	Existing budget	High percentage of sickness absence - influenced by long term sickness.  Fortnightly MoA meetings



								Timely referrals to Occ Health MOA data maintained and reviewed
HR4/5 RM8 C11	Plan rota effectively /avoid unnecessary overtime and spot purchase of agency staff	Cost effective rota cover	H	Residential managers Support staff	Ongoing	Ongoing	Existing budget	Overtime/agency and relief cover data maintained Rotas planned in advance MoA monitored AL planned effectively Agency data communicated monthly to CP
C5	Monitor residential staffing establishment and address temporary contracts	Vacancies/absences managed effectively	H	Registered managers MJ	Ongoing	Ongoing	Existing budget	Establishments updated /data maintained and communicated with HR Vacancy status

								reviewed frequently in collaboration with HR
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