QUARTERLY MONITORING REPORT

DIRECTORATE: Health & Community

SERVICE: Adults of Working Age

PERIOD: Quarter 4 to year-end 31 March 2008.

1.0 INTRODUCTION

This quarterly monitoring report covers the Adults of Working Age Department fourth quarter period up to year end 31 March 2008. It describes key developments and progress against <u>all</u> objectives and performance indicators for the service.

Given that there are a considerable number of year-end transactions still to take place a Financial Statement for the period, which will be made available in due course, has not been included within this report in order to avoid providing information that would be subject to further change and amendment.

The way in which traffic lights symbols have been used to reflect progress to date is explained within Appendix 6

2.0 KEY DEVELOPMENTS

Mental Health Partnership Board: this continues to meet every month, with full representation at a senior level from the Borough Council, the Halton and St Helens PCT and the 5BoroughsPartnership. Integration between the services has continued; one of the key achievements of the last quarter is the full integration of case records across health and social care.

Mental Health Improvement Review: the project manager for the Improvement Review will, by 31st March 2008, have successfully completed work on a number of areas for development arising from the Review. As a part of this, it has become clear that there is a need to develop a local whole-system Quality Assurance Framework for Mental Health, and this has been accepted in principle by the Mental Health Partnership Board.

Social Work Posts: Primary Care Mental Health/Assertive Outreach: both posts were advertised and appointed, although the successful candidate for the Primary Care Team has since withdrawn and this post will be re-advertised.

Mental Capacity Act 2007: this continues to be implemented through the

Steering Group which now meets on a bi-monthly basis. Detailed flowcharts have been developed for use by front line staff in implementing the Act, and staff roles and responsibilities for the new Deprivation of Liberty safeguards are being identified. The local development of the Mental Health Act 2007 will also be considered as part of this group.

"Change for the Better": at a recent event held by the 5BoroughsPartnership in Halton, positive feedback was received about many of the changes to service delivery brought about by the new model. This particularly includes the development of single sex wards, which has brought about a real change in the dignity and safety of patients. The progress and effects of the changes continue to be monitored on a monthly basis by the Mental Health Partnership Board.

Emergency Duty Team: as before, this service continues to operate successfully. The EDT Partnership Board is the accountable body for both St Helens and Halton Borough Councils. It meets every month to oversee progress and manage governance. An operational subgroup has been established which also meets every month; consisting of both operational and support staff from both Councils, this group is responsible for managing service delivery issues as they arise.

Carers Assessments: the substantial improvements in the way carers assessments are undertaken, and the resulting improvement in reported performance, have continued to be delivered successfully. As reported in the previous Quarter, 2007/08 is the "dry run" for the LPSA target of 600 carers receiving a service as a result of an assessment. By 31st March 2008, the figure for this target had reached 885 carers receiving services – substantially over the target. In addition, the national performance indicator for services received by carers was also more than 50% over its target, putting Halton in the top band for this indicator.

Bridge Building: a process has now been identified for the mainstreaming of this service in 2008/09. An additional Bridge Building post is to be established to meet the needs of people from Black and Minority Ethnic groups.

We are looking to improve the way we develop our joint working arrangements and integrated services in the learning disability specialist community team. A reconfiguration of services has been formally agreed by the council and PCT. An action plan is being implemented. The remodelling of a hub and spoke approach to the service includes the development of a service level agreement with the 5 Boroughs Partnership to operate a pan borough service with neighbouring authorities.

A project has been undertaken and its first phase completed to develop a pilot In Control/Individualised budgets for learning disabilities and physical and sensory disability services. An event took place involving managers across services to look at how the In Control/Individualised budgets agenda is progressed in Halton. As a result funding has been agreed to invest in a configuration of staff to take the project forward.

There is a project in learning disability services that has started with the North West Training & development team (NWTDT) and supported by CSCI to develop person centred reviews with people with Profound & Multiple Learning Difficulties (PMLD). This is a tripartite project with neighbouring authorities and already Person Centred Plan (PCP) Review training and development for Care Managers and some Health staff. The project commenced in October 2007 and has been reviewed positively in April 08. It has been agreed for additional work to span to Dec 2008 to develop processes to link outcomes from PCP reviews to inform strategic Commissioning.

A key development in Physical and Sensory Disability services is agreement to begin a work topic with members to review the voluntary sector contracts; the project work began in October 2007. A report is now in draft stage to be taken through the Councils formal committee process in June 2008.

A new sub group to support the achievement of the LPSA target on PSD carers has been established, this group has developed new terms of reference and has begun to identify targets and creative developments with the carers grant and involve carers in service development.

3.0 EMERGING ISSUES

Mental Health Act 2007: this is now due to be fully implemented in October 2008, although minor aspects are coming into force at the end of April 2008. A Steering Group has been established, including all service areas and the PCT, and will be meeting from April 2008. This group will be responsible for delivering the changes required within the council; in addition, the Council is represented on a group led by the 5BoroughsPartnership which aims to ensure that new procedures are harmonised across all localities.

Deprivation of Liberty Safeguards: these continue to be developed under the remit of the Mental Capacity Act Steering Group. An action plan is to be developed to ensure this is fully implemented by April 2009.

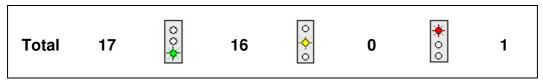
Management structure, Community Mental Health Teams: the departure of two of the existing managers within mental health service provided the opportunity to consider alternative models of management. A new structure has now been agreed within the Partnership board, which strengthens the lines of accountability and gives greater clarity about roles and responsibilities.

Redesign of day services: a process has now started to redesign the way day services for people with mental health problems are delivered. All current users of day services will receive an individualised plan ensuring that their needs and wishes are met where appropriate. The focus of the changes to service delivery will be to ensure that people have the opportunity to engage more fully with their communities.

Effective Care Co-ordination (ECC): this is the process for health and social care services to deliver care and aftercare to people with severe mental health problems. Following an extensive national review, new national guidance on the operation of ECC was issued late in March 2008. This will need to be implemented by October 2008 and will require all partners across the 5BoroughsPartnership to deliver an agreed process and receive appropriate training.

An early examination of the PSD fieldwork team structure is to be started in April 2008 which potentially could lead to a review of the service.

4.0 PROGRESS AGAINST KEY OBJECTIVES / MILESTONES



Of the seventeen milestones for the service, sixteen have been achieved by their target date. One milestone, relating to increasing the number of people supported into employment, has incurred some slippage as the strategy designed to progress this is still in the final stages of sign-off. For further details, please refer to Appendix 1.

4.1 PROGRESS AGAINST OTHER OBJECTIVES / MILESTONES

There are no other objectives for the service. Eleven milestones within the key objectives are designated 'non-key'. Those milestones are reported in Appendix 1 and are designated by the use of *italic* text.

5.0 SERVICE REVIEW

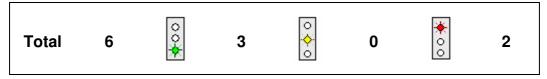
Improvement Review, Mental Health: the Mental health Partnership Board and the Halton Mental Health Local Implementation Team have both continued to monitor progress against the Improvement Review Action Plan. As at 31.03.08, the Project Manager has completed his main work and a detailed final report has been presented to the Partnership Board. A range of activities has been successfully completed, notably the development of integrated case files across

health and social services, and the development of a series of operational policies for all statutory mental health services. One additional piece of work has been identified from this – the development of a Quality Assessment Framework for mental health services, and it has been agreed in principle to appoint the same project manager to deliver this piece of work.

In learning disability services there has been a review of respite services in development of services to offer a menu of short breaks services. A temporary project manager was in post from September '07 to March '08 to accelerate an action plan, which has been implemented. Reviews of all Individuals receiving respite services currently are now underway.

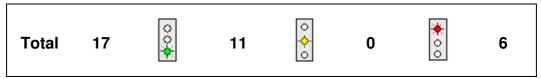
In learning disability services we have commissioned a Consultant Behaviour Analyst on a "behavioural solutions project" to assist us to review the way services are delivered for people with complex needs, whose behaviour is experienced as difficult or challenging. We have a project brief, which will start incrementally by working with selected providers for two 24-hour supported living schemes. The schedule of training and interventions commenced in October 07 and has been positively reviewed. This will continue to be progressed with an in-house provider service

6.0 PROGRESS AGAINST KEY PERFORMANCE INDICATORS



Of the six key performance indicators for the service, three have hit target at the year-end point. Two indicators have not achieved target (PAF C73 – admissions into residential care, and KTI1 – ethnicity of adults assessed). PAF B17 – Unit cost of home care for adults and older people cannot be reported until closure of accounts in June/July 2008. For further details, please refer to Appendix 2.

6.1 PROGRESS AGAINST OTHER PERFORMANCE INDICATORS



Of the seventeen other performance indicators for the service, eleven have hit target at the year-end point. PAF B12 – Unit cost of home care for adults and older people cannot be reported until closure of accounts in June/July 2008. Six indicators have not achieved target at year end For further details, please refer to Appendix 3.

7.0 PROGRESS AGAINST LPSA TARGETS

There are no LPSA targets for this service. The service contributes towards an LPSA around providing services to carers, which is in the Older People's Services service plan, and is reported in the Older People's Services quarterly monitoring report.

8.0 RISK CONTROL MEASURES

During the production of the 2007-08 Service Plan, the service was required to undertake a risk assessment of all Key Service Objectives.

Where a Key Service Objective has been assessed and found to have associated 'High' risk, progress against the application of risk treatment measures is to be monitored, and reported in the quarterly monitoring report in quarters 2 and 4.

For further details, refer to Appendix 4

9.0 PROGRESS AGAINST HIGH PRIORITY EQUALITY ACTIONS

During 2006/07 the service was required to undertake an Equality Impact Assessment. Progress against actions identified through that assessment, with associated High priority are to be reported in the quarterly monitoring report in quarters 2 and 4.

For further details, please refer to Appendix 5.

10.0 APPENDICES

- Appendix 1- Progress against Key Objectives/ Milestones
- Appendix 2- Progress against Key Performance Indicators
- Appendix 3- Progress against Other Performance Indicators
- Appendix 4- Progress against Risk Control measures (Q2 & 4)
- Appendix 5- Progress against high priority equality actions (Q2 & 4)
- Appendix 6- Explanation of traffic light symbols

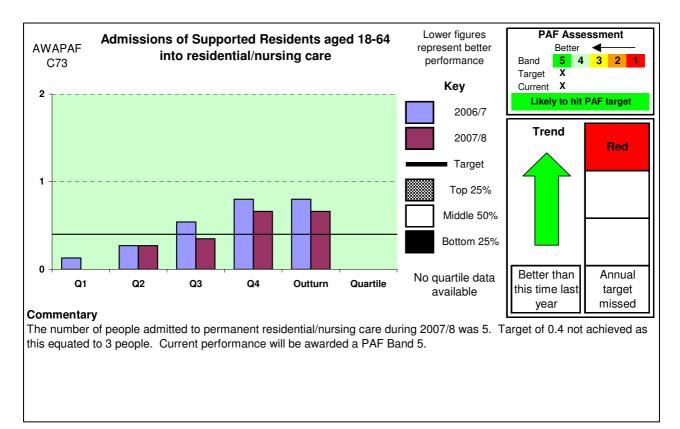
Service Plan Ref.	Objective	2007/08 Key Milestone Italic = Q2 & Q4 only	Progress to date	Commentary
AWA1	To work in partnership across traditional boundaries, always keeping service users and carers at the centre of the service, to strengthen service delivery to hard to reach groups, including those	Implement the Payments and Expenses Policy and Procedure for service users and carers to encourage and recognise their participation in service development initiatives by June 2007	••	Policy now fully implemented and will be evaluated 2008/09
	from the BME community, and to ensure that services are needs-led and outcome focussed.	Consult the BME community with the assistance of the Cheshire Halton & Warrington Racial Equality Council to ascertain whether services are meeting the needs of this community by April 2007	oo *	Training has now taken place across all partner agencies in Mental Health services and will be rolled out across all service areas 2008/09
		Continue to implement ALD's financial recovery plan to ensure that the service becomes increasingly efficient and effective by March 2008	○○ 	The project team has now ceased and the work involved absorbed into mainstream. A number of efficiencies were addressed in the life of the project.
		Review the policies and protocols in place for transitional arrangements to ensure children moving from Children's to Adults services receive a seamless service by Sept 2007	00★	Transition Strategy has been launched, multi agency strategic group oversees action plan
		Contribute to the safeguarding of children in need where a parent is receiving Adults services by ensuring staff are familiar with and follow safeguarding processes by March 2008	oo 	Audit has taken place re training on safeguarding arrangements. Induction pack now includes information on safeguarding responsibilities and access to training.

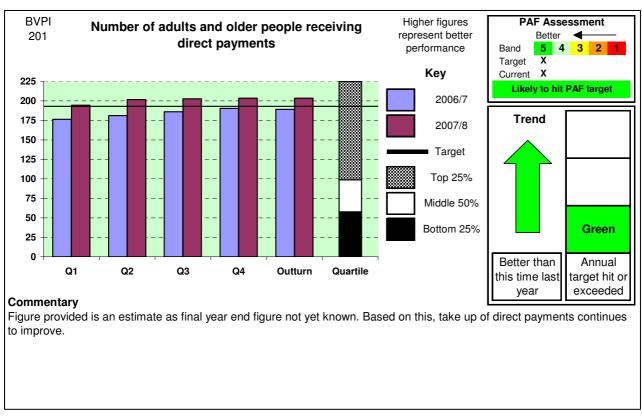
Service Plan Ref.	Objective	2007/08 Key Milestone Italic = Q2 & Q4 only	Progress to date	Commentary
AWA2	To continue to modernise mainstream socially inclusive opportunities by implementing meaningful daytime activities and maximising employment opportunities for all vulnerable people to promote independence and community inclusion	Monitor implementation of Community Bridge Building Service as part of the Day Services Strategy and evaluate by March 2008	 	Day services Community Bridge Builders link person has introduced the B.M.E worker to people who use the service and their families from the B.M.E. community. The outcome of the introductions is recorded in the B.M.E. workers report. Day Services have referred a further ten people to the Community Bridge Builders team. One referral has been received for day services after initial referral to the Community Bridge Building team. Community Bridge Builders Team continue to hold drop in sessions at day services venues.
		Implement action plan for the National Service Framework for Long Term Conditions by March 2008	○○	Support for the redevelopment and review of the action plan has been agreed with the PCT. A short term working group of senior managers to undertake the revision has been agreed

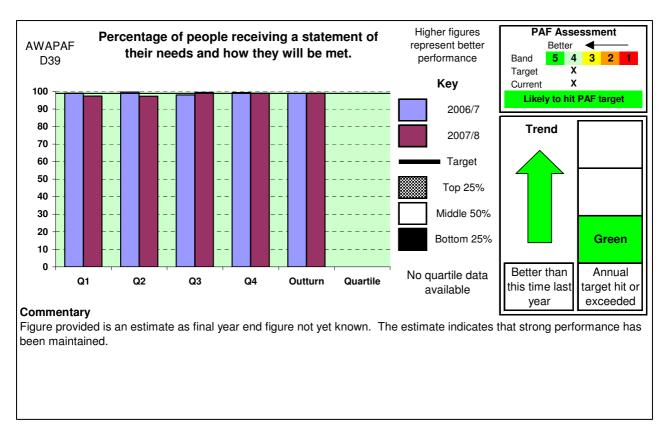
Service Plan Ref.	Objective	2007/08 Key Milestone Italic = Q2 & Q4 only	Progress to date	Commentary
		Contribute to the implementation of Change For The Better, the 5BP's new model of care for mental health services, which aims to reduce reliance on in-patient beds and develop services based on recovery and social inclusion, by March 2008	 	Change for the Better has now effectively been fully implemented in Halton, with a number of positive outcomes for service users already being reported. The steering group to deliver the changes has now been disbanded. Progress continues to be monitored through the Mental Health LIT and the Partnership Board.
		Implement "In Control" model pilot for people with learning disabilities and physical/sensory disabilities by Sept 2007	°°	Funding has now been identified to invest in a configuration of staff to accelerate this project.
		Continue to increase the number of people supported into employment, training, etc, by March 2008	*00	Strategy has been to Healthy Halton PPB and will be finalised by May 2008.
		Complete review of the Independent Living Centre in partnership with the PCT by June 2007	© 0 *	Complete. A Service User Consultation has been held the result of which has led to the establishment of a pan professional and pan disability management group. The aim is to set up a practical model of training and work experience through the delivery of work related courses and working projects providing people of all disabilities the opportunity of work experience

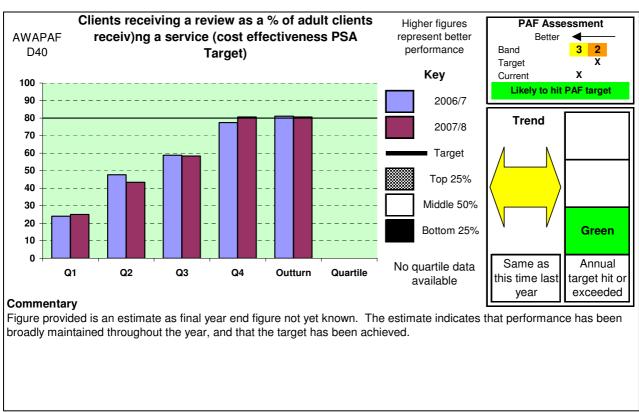
Service Plan Ref.	Objective	2007/08 Key Milestone <i>Italic = Q2 & Q4 only</i>	Progress to date	Commentary
AWA3	To develop and improve a range of services and support for carers in accordance with the Carers Strategy to ensure carers needs are met and to support the delivery of the Carers LPSA Target	Build on the success of both Carers Centres by developing new services for carers, eg, training courses, extending complementary therapies, to ensure Carers receive the help and support they need by March 2008	00*	Carers continue to be provided with an extensive range of services by the Carers Centres. A range of new services have been developed including a bespoke employment scheme run by Halton People into Jobs.
		Meet the Carers LPSA target to ensure carers receive the help, support and services they need by March 2008	00-	The LPSA target has been significantly exceeded.
		Increase the number of carers provided with assessments leading to provision of service to ensure Carers needs are met by March 2008	_00*	An extensive programme of service change took place in 2007/08 to deliver this objective, which reflects not only a national performance indicator but also a Halton LPSA target. In 2004/5, it was evidenced that 195 carers had received a service following assessment; by the latest year end, this now stood at 885 people. This placed Halton in the highest band for the performance indicator.
		Work with the Cheshire Halton & Warrington Racial Equality Council to increase carers services to the BME community by June 2007	00*	Work progressing with CHWREC regarding the promotion of carer services delivered by the Carers Centres etc to the BME community
		Develop new model to increase access to new funding for Carers Centres by March 2008	oo <mark>∗</mark>	New Model agreed by Executive Board on 21.2.08. Work progressing to implement model during 2008/9.

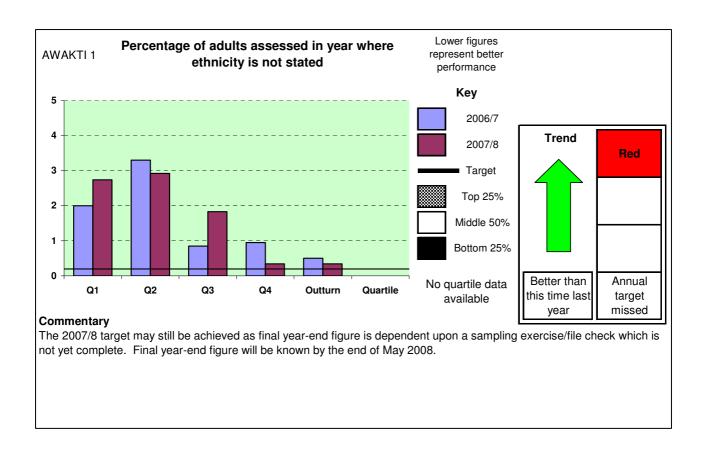
Service Plan Ref.	Objective	2007/08 Key Milestone Italic = Q2 & Q4 only	Progress to date	Commentary
		Work with Halton & St Helen's PCT to improve the physical health of carers by Sept 2007	oo. ∳	The health of Halton's carers is a work topic for the Healthy Halton Policy & Performance Board. A Report on work so far is scheduled for the June Health Halton PPB.











Ref	Indicator	Actual 06 / 07	Target 07 / 08	Quarter 4	Progress	PAF band Target	PAF band Actual	PAF Progress	Commentary
	Service Delivery Indicators								
PAF C29/ SA3	Adults with physical disabilities helped to live at home	7.6	7.4	7.87E	•	5	5	••	Figure provided is an estimate as final year end figures not yet available.
PAF C30/ SA3	Adults with learning disabilities helped to live at home	4.3	4.3	3.95E	*00	5	5	o o ♦	Figure provided is an estimate as final year end figures not yet available Target not achieved – 'Section 64' properties can no longer counted in this indicator as they are funded by the health sector, not the local authority.
PAF C31/ SA3	Adults with mental health problems helped to live at home	3	3.2	3.35E	00	5	5	00*	Figure provided is an estimate as final year end figures not yet available
PAF C62/	No. of carers receiving a specific carers service as a %age of clients receiving community based services	10.2	11.5	19.07E	©0 *	4	5	○ ○*	Figure provided is an estimate as final year end figures not yet available.
	Quality of Service Indicators								
PAF D37/	Availability of single rooms for adults & older people entering permanent residential / nursing care	100	100	100	00*	5	5	00*	All individuals are allocated single rooms.
PAF D55/ BVPI 195/	Acceptable waiting times for assessment Key Threshold >60%	83.5	83	84.59E	o o ♦	3	3	oo 	Figure provided is an estimate as final year end figures not yet available.

Ref	Indicator	Actual 06 / 07	Target 07 / 08	Quarter 4	Progress	PAF band Target	PAF band Actual	PAF Progress	Commentary
PAF D56/ BVPI 196/	Acceptable waiting times for care packages Key Threshold >60%	92.6	93	89.74E	* ○ ○	5	4	* 00	The 2007/8 target may still be achieved as final year-end figure is dependent upon a sampling exercise/file check which is not yet complete. Final year-end figure will be known by the end of May 2008.
	Fair Access Indicators								•
AWA KTI 2/ SA2	Percentage of adults with one or more services in the year where ethnicity is not stated Key Threshold >10%	0.6	0.2	0.08E	00★	N/A - 1	not a PAI	⁼ indicator	Figure provided is an estimate as final year end figures not yet available.
AWA 1/ SA5	Number of learning disabled people in paid work per 10,000 population 18-64	4.30	2.70	4.12	00*	N/A – not a PAF indicator			The number of learning disabled people in paid work is 31, giving an indicator value of 4.12 people per 10,000 population, target exceeded.
AWA 2/ SA5	Number of learning disabled people in voluntary work per 10,000 population	9.26	10.1	8.91	*00	N/A - 1	N/A – not a PAF indicator		67 clients were supported into voluntary work in the year. Although the target has been missed, this is offset by the fact that there has been a focus on supporting people into paid work. This has paid off as the target in that area has been exceeded – see AWA1.
AWA 3/ SA5	Number of physically disabled people in paid work per 10,000 population	5.5	7.4	6.25	* 00	N/A - 1	not a PAI	F indicator	The 2007/08 target has not been achieved as the focus has been on trying to progress people into real sustainable jobs, rather than finding supported permitted work placements for them.
AWA 4/ SA5	Number of physically disabled people in voluntary work per 10,000 population	2.42	2.0	2.26	o o ♦	N/A — I	not a PAI	F indicator	The number of physically disabled people in voluntary work is 17, giving an indicator value of 2.26 people per 10,000 population. Target exceeded.

Ref	Indicator	Actual 06 / 07	Target 07 / 08	Quarter 4	Progress	PAF band Target	PAF band Actual	PAF Progress	Commentary
AWA 5/ SA5	Number of adults with mental health problems in paid work per 10,000 population	4.7	6.7	5.85	* ○ ○	N/A - 1	N/A – not a PAF indicator		The 2007/08 target has not been achieved as the focus has been on progressing people into real sustainable jobs, rather than finding supported permitted work placements for them. (additional 18 people into sustainable jobs, or 2.39 per 10,000)
AWA 6/ SA5	Number of adults with mental health problems in voluntary work per 10,000 population	2.42	2.0	4.65	00*	N/A – not a PAF indicator			The number of adults with mental health problems in voluntary work is 35, giving an indicator value of 4.65. Target exceeded.
AWA 7/ SA2	Percentage of carers on the carer's database as a percentage of the number of carers identified in the 2001 census in Halton	29%	25%	34%	oo 	N/A – not a PAF indicator		- indicator	The total numbers of Carers in Carefirst is 4,620. This sum divided by the numbers of carers identified in the 2001 census (13,528) provides a percentage of 34%
AWA 8/ SA3& 4	Percentage of Carer assessments completed for adults	29.38 %	50%	30.00%	* 00	N/A – not a PAF indicator		- indicator	Year-end target not achieved. Work is ongoing within operational teams to conduct and record carer assessments.
	Cost & Efficiency Indicators								
PAF B11/ SA3	Intensive home care as a percentage of intensive home care and residential care	28	28	25.96E	* ○ ○	5	4	* ∘∘	The estimated figure is 25.96. Part of this calculation is based on the sample week of service users receiving homecare in September and therefore, this part of the calculation cannot be improved. However, the number of weeks spent in residential and nursing care will be updated once final year end figures are known.

Ref	Indicator	Actual 06 / 07	Target 07 / 08	Quarter 4	Progress	PAF band Target	PAF band Actual	PAF Progress	Commentary
PAF B12/ SA11	Cost of intensive social care for adults and older people	£471	£410	NYA	Refer to comment		NYA		Actual unit cost not available until closure of accounts in June/July 2008.

Key Objective (Service Plan Ref. Only)	Risk Control Measures	Target / Deadline	Progress	Commentary
AWA2	Continue to modernise mainstream socially inclusive opportunities: Risk Identified – Resistance to move away from traditional segregated services leads to services remaining unchanged, with poor outcomes for service users.			
	Risk Treatment Measures: - In Control facilitates move towards individual, outcome focussed services.	Mar 08	○ ○ ♦	Funding has been identified to develop additional staffing capacity to take this work forward.
	- Development of Bridge Building service influences community capacity building and partnership work.	Mar 08	○ ♦	The Community Bridge Building Service has completed extensive community mapping and capacity building within mainstream services. This also continues to be done on a one-one basis with individuals using the service. Partnership work has enhanced over the fourteen months that the service has been in operation and two successful stakeholder sessions have been held with representatives from a wide range of services and organisations.
	Current day service modernisation develops meaningful daytime activity within community settings.	Mar 08	°°	Good progress has been made, actions completed and a Quality Improvement Team has been established which visits day services on a planned basis
	- Joint working with Employment & Enterprise Service creates wider opportunities for people to access employment.	Mar 08	* ○	Draft Strategy completed and will be formally adopted by June 2008

		tnership Board consolidates nity services with the 5BP.	Dec 07	00*	Since November 2007, it has been agreed that the direct line management of the Community Mental Health Teams is through the Borough Council, and thereby to the Mental Health Partnership Board. A new team management structure has also been agreed which strengthens this position. Case files have been integrated across health and social care and there is an agreed and share operational policy for the service.
AW	funding for Carers	el to increase access to new contres by March 2008: arers may not support this.			
	carers, St Helen's a	easure – Continue to work with and the Princess Royal Trust. nd impact assessment to be 2007.	May 2007	00☀	Executive Board agreed the formal transfer of carers centres to Princess Royal Trust, February 2008
	the physical healt	& St Helen's PCT to improve h of carers by Sept 2007: Service development with PCT			PCT has fully contributed to the Carers Strategy
		Measure – Work with PCT to regularly report back to PCT .	Sept 2007	•	Group and has committed funding for 3 years to contribute to the new arrangements with the Princess Royal Trust

HIGH Priority Actions	Target (Resp. Officer)	Progress (Traffic lights)	Commentary
Undertake a mapping exercise of informal and formal networks for BME groups	Sept 2007 (Sue Rothwell)	• *	A project worker was employed for eight months and formed part of the Community Bridge Building Team. The project was aimed at working with people from black and minority ethnic groups to enable us to identify what groups of people are currently using BME services outside of Halton in surrounding areas. Initially the Project Worker spent quite a lot of time mapping what was available locally for people from BME communities and networking with organisations that provide services to Halton residents. The worker also undertook discussions and contacts with CHAWREC. An audit of eight cases across all service areas was also undertaken to ascertain if the ethnicity was identified correctly, cultural needs and the services provided were appropriate to needs. A report was presented to the senior management team and then the equalities board and this is now being taken forward by service planning.
Improve Corporate website to ensure basic information/welcome in the four main languages in Halton, highlighting language and sources of information	Nov 2007 (John Gibbon)	© *	Completed - a welcome button on the front page of the website in 5 main languages (including Polish) now links to the attached यदिआप की पहली भाषा अंग्रेज़ी नहीं है और आप हमारी सेवाओं के बारे में जानकारी किसी अन्य भाषा में चाहते हैं तो कृपया हमें 0151 907 8300 पर फोन करें या hdl@halton.gov.uk पर ई-मेल भेजें Jeżeli angielski nie jest Twoim pierwszym językiem i potrzebujesz informacji o naszych usługach w innym języku, prosimy o zatelefonowanie do nas pod numer: 0151 907 8300 lub wysłanie maila do: hdl@halton.gov.uk 如果你的母语不是英语,而你希望得到有关我们服务的其它语言版本的信息,请致电0151 907 8300或者发送电邮至 hdl@halton.gov.uk联络我们。 ***********************************

Revisit original DDA audit of buildings to assess current situation and develop costed, prioritised programme of improvements	Mar 2008 (Janet Wood)	oo 	The proposals have been costed at approximately £ 7,000 to £10,000. This work will now be programmed into the Community Centres Minor Works programme and the Community Centre management will request our intervention, if required.'
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Please note that these actions apply to all three adult social care services (Adults of Working Age, Older People's Services and Health & Partnerships), and are detailed in each of the three plans.

timeframe.