APPENDIX 7

IMPROVEMENT ACTION PROGRESS REPORT

Improvement Action Progress Report
Council: Argyll and Bute Council
Service: Community care Contact: Sandra Greer, Head of Service

1. Agreed improvement action from the 2000/01 PMP audit carried out by Audit Scotland.	2. Agreed key milestone dates from the 2002/03 PMP Audit	3. Brief description of what the improvement was intended to achieve.	4. To what extent has the improvement action been implemented? Please describe and allocate a letter A-D as per exhibit 1.	5. Evidence that can be made available to the auditor to support the assessment.	6. Dates for further follow up work agreed with Audit Scotland	Progress as at 31 October 2003.
1. Need for frontline staff to have a better understanding and application of Best Value.	Staff begin to develop an understanding of Best Value and how it applies to their work	Roll out Best Value workshops	Workshops delayed due to lack of staff resource. Intention to undertake alongside Commissioning Procedural Guidance training. (B)	Quality Assurance Team – vacancies and Manager involved in Complaints, investigations by DMT.	October 2003	Revised implementation date March 2004.
4. Need for more explicit link between local Service Centre plans within Best Value framework.	Service Centres to have business plans which take a Best Value approach.	Service Centres will be required to produce annual business plans and to have them reviewed.	2 of 4 Service Centre Plans drafted 2002/03. Remaining 2 will be rolled out 2003/04.	Copies of Plans available.	December 2003	A working template being reviewed at moment. Revised implementation date March 2004.
5. Need to develop framework to improve links between Service Centres, Service Officers and Planners.	All sections of the department to work more co- operatively and creatively together.	Examine structures and arrangements for producing Service Plans.	This will be reviewed as part of the Council restructuring exercise. (B)		February 2004	Ongoing.

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11. Service Plan to be disseminated to all Community Care staff throughout the Department.	All staff will have an improved understanding of the direction of the service and the specific targets and outcomes expected.	Newsletters as above will help. A summary in easily readable form of the Service Plan to be provided to all staff. Local workshops to be set up routinely to discuss the Service Plan in progress.	On agenda for SWMT for wide cascading of information. Discussed at Community Care Meeting. (B)		December 2003 (provisional)	Ongoing.
12. Need for staff to understand the plan.	As above.	As above.	Discussed with Managers. Service Officers had input to them. (B)		December 2003 (provisional)	Ongoing.
14. Need for Service Centre business plans to link to the Service Plan.	There will be Service Centre business plans flowing from the Service Plan.	As above.	Shorter, user friendly service plan in place. Revised this year. (B)	HQ Community Care PDR training objectives – collated. Supervision notes available.	LINK TO POINT 4	Revised implementation date March 2004.
19. Service Centre business plans need to develop local performance measurement criteria.	Service Centre business plans will have measurement	Assistance will be given by Planning and Service Officers to Service Centres to	This will be further developed 2003/04 when all four plans are finalised.		February 2004	Revised implementation date March 2004.

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	criteria in place which is in addition to the departmental requirements.	develop local performance measurements.	(B)			
22. Need to have a range of information leaflets for the public and staff in relation to Best Value Reviews and proposed action.	Regular user friendly information.	As above.	Not achieved as yet. (B)		February 2004	Revised implementation date March 2004.

A – The council manager can demonstrate that implementation has progressed as planned in the original improvement action template i.e. action complete or planned milestones met and on target.
 B – Progress is less than intended in the original improvement action place to complete the action.
 D – The council no longer intend implementing the original improvement action. Reasons should be given for not implementing the original action.