Haringey Council

Adult, Culture and Community Services

PERFORMANCE IMPROVEMENT PLAN

2007 – 2008

Areas for further development and exploration
(27 October 2008)

Haringey Council

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Vision and Key Service Objectives

The Haringey Strategic Partnership (HSP), in consultation with residents and partner organisations, has developed a Sustainable Community Strategy (SCS) 2007-2016. This will help enable Haringey to be a Borough we can all be proud of. The Adult Service is committed to helping the HSP meet this vision and the work of the service will help delivery of the strategy's priority of 'Healthier people with a better quality of life.'

The Council Plan takes its priorities from the Sustainable Community Strategy (SCS) and there is a clear golden thread that links the SCS to the Council Plan and down to the Adult Services Business Plan. One of the Council Plan's key priorities is to 'Promote independent living whilst supporting adults and children where needed' and the outcomes that the Adult Service delivers play a key role in supporting the council to deliver this priority.

In October 2007 the Well-being Partnership Board adopted Haringey's first *Strategic Framework for Improving Adults' Well-being 2007-2010*. The Framework is for all people aged 18 years and over in Haringey. Our vision is that "All people in Haringey have the best possible chance of an enjoyable, long and healthy life". The Framework aims to promote a healthier Haringey by improving well-being and tackling inequalities. Local residents, statutory, voluntary, community and commercial organisations all have a role to play in improving well-being. This includes access to health and care services; access to appropriate leisure and educational services; access to employment; and, opportunities for a healthier lifestyle. The Framework was developed by the Council, health and the voluntary sector in partnership and provides strategic direction for all work on well-being by partner agencies in the borough.The Framework is based on seven outcomes for improving well-being from the Government White Paper, *Our Health Our Care Our Say*. Linked to each outcome there are priorities and key initiatives.

Experience Counts – Older People's Strategy, launched in 2005, is Haringey's strategy for improving the quality of life for older people in the borough. The strategy aims to tackle discrimination and promote positive attitudes towards ageing in Haringey so that older people are enabled to be as informed, active, healthy and independent as possible and empowered citizens at the heart of the community. The strategy is being reviewed and, as before, this process is being developed with key partners including health and the voluntary sector. More importantly, older people living in Haringey are at the heart of the consultation process and continue to be the key drivers for the development of the strategy. The great strength of the document is that it does not belong to any one

organisation but to the whole community, cutting across a range of mainstream services including housing, libraries and leisure, as part of an ambitious vision that addresses quality of life issues with good balance and emphasis on independence and well-being.

The strategy was praised in Haringey's 2006 Corporate Performance Assessment, and will be cited as notable practice in a forthcoming Audit Commission national report, 'Learning from local government'.

Experience Counts covers all aspects of older people's lives and is represented by ten goals which link to the seven outcomes of the Well-being Strategic Framework as follows:

Links between WBSF and Experience Counts

WBSF outcomes	Experience Counts goals
Improved health and emotional well-being	**Staying healthy:** to promote healthy living
Improved quality of life	**Being active:** to create opportunities for being active, including getting involved, volunteering, socializing and life long learning **Feeling safer:** to create safer communities **Having a safe, comfortable and well maintained home:** to ensure that older people have a safe, comfortable and well-maintained home (and garden) which meets their need **Getting out and about:** to ensure that older people are able to get out and about, including being able to use public transport
Making a positive contribution	**Being active:** to create opportunities for being active, including getting involved, volunteering, socializing and life long learning
Increased choice and control	**Keeping informed:** to ensure that older people have accurate information on which to base their decisions **Living with support:** to enable older people to live independently with support for as long as possible in their own homes
Freedom from	**Being respected:** to ensure that older people are respected and valued

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WBSF outcomes	Experience Counts goals
discrimination or harassment	
Economic well-being	**Choosing work:** to create opportunities for employment **Making the most of your income:** to enable older people to maximize their income.
Maintaining personal dignity and respect	**Being respected:** to ensure that older people are respected and valued

The government has developed strategic plans for the health and social care sector as a whole, through the auspices of the Social Care Institute for Excellence, setting out its vision for the future. The vision that this sets out is fully supported by Haringey's Adult Services. The vision is:

- To promote and enhance people's independence, safety and quality of life
- To provide services that meet each individual's specific needs
- To provide services in a fair, transparent and consistent way
- To provide services which are effective and meet clear standards
- To ensure service users have a say, and are involved in planning

We were recently rated by our external assessors, the Commission for Social Care Inspection (CSCI), as providing a 2 star 'Good' service, with 'Promising' capacity to improve. This demonstrates the high quality services we provide for vulnerable people based on the principles of early intervention and high quality support for those with long-term needs.

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OUTCOME 1 – Improving health and emotional wellbeing

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?					Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
Older People	Area for further development	Delayed Transfer of Care The levels of delayed transfers of care as reported by the Council decreased by 40% to 38.55, though this was still above other London council. The Council worked closely with the PCT to develop transparent systems and improve communication. PCT capacity and performance management for health delays were improving. Delays attributable to the Council decreased but remained high	NI 131	PAF D41 NI 131	The Council is working closely with the Primary Care Trust (PCT) to ensure delays are kept to a minimum and the following processes are underway to help achieve improved performance:- -Monthly performance call over structure & systems deeply embedded now into practice; -Senior and middle management and performance representation at the monthly Whole Systems Capacity Planning Meeting	PAF D41 38.55	PAF D41 TBC	Bernard Lanigan

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
		within London. Increased use of telecare (noted in Outcome 2.1), step-down supported housing units and the work of the Rapid Response and Re-ablement Teams contributed to these improvements, but they needed to be sustained.			-The PCT has recently re-invested further in the Rapid Response service which means the Council can extend it further –and this will be a major contribution in reducing delays and admission avoidance. -Regular meetings with the Assistant Director, Adult Services and the PCT Director regarding all performance, joint practice issues and negotiations with the PCT regarding joint investment of step-down beds to reduce delays and extension of use of telecare and				

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
					telehealth; Please note that NI 131 now includes acute and non acute delays and is calculated using the whole 18+ population.				

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OUTCOME 2 – Improved quality of life

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	Nationa l Ind.	Measur e	Action	Outtur n 07/08	Target 08/09		Lead Officer
Older People	Area for exploration	Promoting independence (intensive home care) Although in line with the London average, levels of intensive home care decreased. The estimated level of intensive home care purchased via direct payments increased but was below the London average. This trend should be investigated. Diversion was clearly occurring, but is normally correlated with	N/A	PAF C28	Although performance in this area has reduced we remain in the top performance banding. This controlled reduction in performance is a reflection of the services drive to promote independent living, which has lead to a slight reduction in the number of services users in receipt of intensive homecare, but not a reduction in the number of homecare hours overall. Please note this PI has	20.5	21		Len Weir

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	Nationa l Ind.	Measur e	Action	Outtur n 07/08	Target 08/09		Lead Officer
		intensive services for those with high needs.			not been transferred to the new National Indicator Set and statutory reporting is no longer required.				
Carers	Area for developme nt	Promoting independence (carers) Measured by the key performance indicator, support for carers (an area for improvement 2006/07) increased but was below the London average. The total number of breaks provided was roughly in line with London, while the number of black and minority ethnic carers receiving breaks service was above the average.	NI 135	PAF C62	In 2008/09 we have worked hard to increase the profile of carers and improve accessibility of carers assessments for carers within the department by: -Ensuring a much higher profile given ensuring the wellbeing and welfare needs of carers are met through assessment and service provision. -High profile of carers in Performance Call-Overs. -Increased profile of carers in team meetings	PAF C62 9.91%	NI 135 14.22 %		Jan Bryant

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
		However that for people with learning disabilities was below the average. Within an overall good assessment system, assessments of carers caring for older learning disabled people were very low.			and supervision. -Promoting the services available to carers as a result of contact with the Council. -Promoting the use of voluntary sector partnership arrangements to undertake delegated assessments of 'hidden' carers. Please note that NI 135 now includes those carer assessments which resulted in information and advice being provided in addition to specific carers' services.				
Older People	Area for developme	Preventative Services (extra-care housing)		SAS 1.2OP0	Two developments are in process of being built.	484 (No. of	500 (No. of		Barbara Nicholls

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
	nt	Investment in five step-down supported housing units continued, and the use of telecare contributed to independent living outcomes. However, the number of additional extra-care housing places was not achieved, or planned, in 2008/09. Following 2008/09, 120 units were to be available. These developments should be carefully focussed and assured, in order to sustain the current shift in balance of care in future years.		06 1.2OP004	These are both in the West of the borough and will be provided by RSL's. Each development providing approximately 40 units of different size accommodation. Both of these developments are expected to be completed by 2010/11 with 110 available units by 2010. There are two further prospective developments in the East of the borough at feasibility stage, which if achievable would come on stream 2012. Additionally, a recently completed review of existing council-owned sheltered	people funded by the council receiving intermediate care to prevent hospital admission)	people funded by the council receiving intermediate care to prevent hospital admission)		

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
					accommodation has provided the basis for further work in addressing the need to develop ECSH in the borough. With two possible existing sites being re-developed into ECSH.				

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OUTCOME 3 – Making a positive contribution - Nothing specified

OUTCOME 4 – Increased choice and control

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?					Who will do it?
SUG	**Pan Analysis**	**CSCI Findings**	**National Ind.**	**Measure**	**Action**	**Outturn 07/08**	**Target 08/09**	**Lead Officer**
All Service Users	Area for development	Care management experiences (advocacy) The total amount spent by the council on advocacy services for learning disabled people increased but remained below the London average. Mental health advocacy was reviewed in		SAS 4.6LD105	There are a number of organisations providing advocacy across the care groups in Haringey. There are four main areas of advocacy: befriending, low level practical, specialist and developmental through personalisation. A recent review of the Advocacy services identified that an investment into Advocacy services is needed. The proposal is to have a cohesive system and pathway for advocacy with all organisations working together	Our planned outturn was 14 which we exceeded with 16.	16	Gary Jefferson Barbara Nicholls

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
		2007 and a new commissioning plan developed reflecting a similar need for investment. Nonetheless, the Council commissioned the Rethink IMCA service and specialist mental health advocacy was commissioned through MIND. For carers, the Council commissioned advocacy from the Carers' Centre, MH Carers Support Association and Asian Careers			and clarity over which organisation is responsible for the various elements. This will mean reinvesting all the funding currently commissioning the above organisations and using the transforming social care grant to build capacity across all care groups.				

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
		Support Group. The Council also funded Ethiopian Community Centre UK, which advocated for HIV positive residents. A jointly commissioned advocacy service from Age Concern supporting people in hospital assisted 60 people (5 self funders). The Supporting People programme included advocacy and support in accessing social care services, and with housing related issues and							

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
		employment/training.							

OUTCOME 5 – Freedom from discrimination or harassment – Nothing specified

OUTCOME 6 – Economic Wellbeing – Nothing Specified

OUTCOME 7 – Maintaining Personal Dignity and Respect

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?					Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
All Service Users	Area for exploration	Safeguards against poor treatment (referrals) The number of referrals of vulnerable people who were buying their own care without financial support from the Council increased significantly. Although this remained below the London average, the Council considered this an important trend and noted it within the		**SAS – 7.1GN194**	We are collating the names of the self-funders who use Haringey's services through the Service Providers Forum. Information about safeguarding is publicised through posters and leaflets which will be available in service providers and public places. We are working closely with neighbouring boroughs to inform them of our policy and procedures which they pass onto the relatives of self-funders. Service providers are being educated about the	5	N/A	Olive Komba-Kono Gary Jefferson Jeremy Walsh Bernard Lanigan Douglas Maitland-Jones Eija Sinitalo Len Weir

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	**Pan Analysis**	**CSCI Findings**	**National Ind.**	**Measure**	**Action**	**Outturn 07/08**	**Target 08/09**		**Lead Officer**
		annual safeguarding report. Following an area for improvement in 2006/07, the range of access points for self-funders increased. Six self-funders were referred (four self-referred) under safeguarding procedures.			rights of self-funders to safeguarding services.				

Leadership – Nothing Specified

Commissioning and use of resources

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?					Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
All Service Users	Area for development	Market management and development

It was noted in 2006/07 that the Council should review its distribution of block and spot contracts. However, there was in 2007/08 a large increase in 'block' contracting for residential and nursing care, and | | **SAS 9.4GN296 9.4GN297 9.4GN298** | The Council needs to ensure continued good value for money in its contracting with providers.

In 2009 the Council will be reviewing the balance or spot/block contracts in the care home sector, through a full needs/gap analysis of the likely future needs of population. Specialist block contracted care home provision will still be required – such as dementia care, challenging | CARE HOMES 31/3/07 Block 14% Spot 65% Inhouse 21%

31/3/08 Block 39% Spot 46.5% Inhouse | | Barbara Nicholls |

Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
		decreases 'spot' and 'in-house' contracting. For domiciliary care, there was an increase in 'block' and 'in-house' contracting, and a decrease in 'spot' purchasing. The increase in 'block' purchasing included the opening of Osbourne Grove, a jointly commissioned in-house nursing home.			behaviour, learning disabilities and mental health. The domiciliary care 'block' percentage includes home care services provided by 'preferred providers'. There are 20 preferred providers working with the council, to compliment the two main block contracted providers. The existence of the preferred provider list ensures a degree of increased choice and control to service users. In 2007/08 the Council worked to ensure services were commissioned from the preferred provider list, only commissioning from other external providers	14.5% DOMI CARE 31/3/07 Block 60% Spot 15% Inhouse 25% 31/3/08 Block 75.9% Spot 3.4%			

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer
					where service user needs could not be met from the by the two main block contracted agencies, or the 20 'preferred providers'. The Council is seeking Procurement Committee approval to extend the current domiciliary care block contracts to 31st March 2010; and has started the process of re-tendering domiciliary care contracts. The service specification will be redesigned completely, to allow for greater flexibility for the Council and users to accommodate increased take up of individual/personal budgets.	Inhouse 20.7%			

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Service User Group	PAN Analysis	CSCI Findings	How will we measure success?						Who will do it?
SUG	Pan Analysis	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09		Lead Officer

Part B: Key Areas for Improvement

Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
All Service Users	Consider management integration with the PCT, as agreed in principle.			We are currently working with HTPCT to formalise our partnership work. An away day held on 15th Dec with CE/leader LA/PCT focussed on agreed priorities, financial drivers and joint strategic commissioning and provision. The Director and AD adults met with Chief Exec PCT and Director of operations to agree to work on further areas of			LR

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Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	CSCI Findings	Nation al Ind.	Measu re	Action	Outtu rn 07/08	Targe t 08/09	Lead Officer
				integration - delayed discharge, Nursing and allied health with community teams and joint management arrangements. The first step is for PCT to formally join with the Islington Provider arm (estimated to be by Apr 09)			
All Service Users	Improve the one remaining Adequate in-house residential home.			Red house has moved from adequate to good. Whitehall St has an agreed action plan to improve before re inspection.			GJ
All Service Users	While more people received a review, ensure reviews are	D40 (PAF)		To carry out sample audits and include feedback from users.	80%	82%	BL/GJ/DMJ

Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
	holistic and well-focused.						
All Service Users	Continue to develop the prevention framework.			Our access pathways project will improve peoples contact with Adult social care .We have established 'silver surfers' groups in our sheltered housing units. We have a specialist palliative care home care service to support those wishing to die at home. We are revising our partnership carers strategy , the project brief was agreed at WBCE and WBPB and consultation will commence in Jan			PK/LR

Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
				09. In Nov 08 we launched 'ASK SARA' a self assessment tool for community equipment.			
All Service Users	Continue existing employment related developments for everyone using adults social care services.	NI 145 (LD)		We have a welfare to work board with leads from each SU group. Each SU grp lead has a target to develop employment in their performance appraisal. There are NI's linked to employment for specific groups LD and MH which are monitored through Performance call over. Employment is also a sub work	n/a	tbc	DMJ/BL/GJ

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Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
				stream of Personalisation.			
All Service Users	Continue to increase provision of statements of need.	D39		We are currently on track to meet our target of 98%	98%	98%	GJ/DMJ/BL
All Service Users	Progress project plans for self-directed care.			Programme plans are in place and the recruitment commences in Jan 09.PD pilot is at mid way stage and LD pilot has commenced in Dec 08.			PK
All Service Users	Further progress and validation on the Equality Standards of Local Government.			ACCS has embedded the use of both the Equalities Impact Assessments and PI's in our business planning and performance management, whilst continuing to develop			MTP

![Haringey Council logo]

Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	**CSCI Findings**	**National Ind.**	**Measure**	**Action**	**Outturn 07/08**	**Target 08/09**	**Lead Officer**
				our equalities and Diversity promotional programme. We are seeking external IDeA level 3 assessment in Feb09 and level 4 self assessment in March/April 09			
All Service Users	Finalise the Joint Visiting Team with the DWP.			We have met with the DWP to discuss a Joint Working Partnership agreement. We have agreed in principal to joint working and will be meeting week beginning 22nd Jan 2009 to discuss the details of the agreement. In light of the changes expected due to the			NS

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Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
				Personalisation agenda we are working towards a flexible (light touch) agreement to be reviewed annually. This approach is intended to provide us with maximum benefit without committing to any complex set of arrangements			
All Service Users	Staff training regarding vulnerable adults increased, although this should be increased for the independent sector.			We will analyse the outcomes from training in order to target specific internal groups and providers.			DMJ/OKK
All Service	Implement the audit of quality			We have implemented a SOVA			BN

Service User Group	CSCI Findings	How will we measure success?					Who will do it?
SUG	CSCI Findings	National Ind.	Measure	Action	Outturn 07/08	Target 08/09	Lead Officer
Users	assurance by service providers and partner agencies.			audit of providers and have begun analysis of the returns.			
All Service Users	Attend to placements in some Poor residential homes, including out of borough.			Reviews are booked for the SU in these homes and we will be asking the providers for an action plan.			GJ

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Glossary

Officers

Abbreviation	Name	Job Title
MTP	Mun Thong Phung	Director Adult, Culture & Community Services
JH	Margaret Allen	Assistant Director: Commissioning & Strategy
DE	Diana Edmonds	Assistant Director: Culture, Libraries and Adult Learning
JM	John Morris	Assistant Director: Recreation Services
LR	Lisa Redfern	Assistant Director, Adult Services
GJ	Gary Jefferson	Head of Service Learning Disabilities
BL	Bernard Lanigan	Service Manager Younger and Older Adults and Occupational Therapy
LW	Len Weir	Service Manager Supported Housing and Home Care
DMJ	Douglas Maitland-Jones	Service Manager Mental Health and Safeguarding
ES	Eija Sinitalo	Service Manager Nursing Residential Care/Emergency Response

Abbreviation	Name	Job Title
JB	Jan Bryant	Commissioning Manager
PK	Paul Knight	Programme Coordinator Personalisation
PH	Phil Harris	Assistant Director Strategic and Community Housing
CL	Charlotte Law	Finance Manager (Corporate)
NS	Niyazi Soyel	Finance Manager (Community Care)
HG	Helen Gaffney	Personnel Manager Central Services
EP	Eve Pelekanos	Corporate Head of Performance & Policy
EC	Eugenia Cronin	Joint Director of Public Health
SO	Susan Otiti	Associate Director of Public Health for Adults and Older People (HTPCT)
ChG	Christina Gradowski	Director of Corporate Services and Partnerships (HTPCT)

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JW	Jeremy Walsh	Team Manager Start Team	KE	Keith Edmunds	Director Strategic Commissioning (HTPCT)
BN	Barbara Nicholls	Head of Commissioning	NS	Naeem Sheikh	Chief Executive HAVCO
HC	Helen Constantine	Head of Governance and Partnerships	RE	Robert Edmonds	Director Age Concern Haringey
SB	Sarah Barter	Head of Systems Development and Performance			

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Terminology

Abbreviation	Meaning	Service/ further explanation
ACCS	Adult, Culture and Community Services	Name of directorate
ADASS	Association of Directors of Adult Social Services	
BEHMHT	Barnet, Enfield and Haringey Mental Health Trust	
CASSRs	Council with Adult Social Service Responsibilities	
CSCI	Commission for Social Care Inspection	Inspection body for adult social care
FACS	Fair Access to Care Services	Eligibility criteria for accessing social care services
Framework-i	Haringey's Electronic Social Care System	

Abbreviation	Meaning	Service/ further explanation
Haringey TPCT	Haringey Teaching Primary Care Trust	NHS
LD	Learning Disabilities	
MHT	Mental Health Trust	
Phys Dis	Physical Disabilities Service	
SOVA	Safeguarding of Vulnerable Adults	
SAS	Self-Assessment Survey	Annual assessment of adult social care
SU	Service User	

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