*WHERE ARE WE NOW?*

*This is a simple recording tool, to help you* ***briefly*** *sum up the key findings from your initial evidence-gathering about local information and advice provision. (NB Depending on the extent and depth of your research, you may have collected other background material - including consultation reports, market analysis, contract monitoring information, etc. Such material could be appended to this tool and/or to your Strategy).*

*You may also have become aware of some more useful improvements already being made, which can be built upon as you implement your Strategy: these can be listed or summarised in this template.*

*As an option, you may decide to complete a SWOT Analysis at this stage.*

*(You may also wish to refer back to the Care Act requirements at this stage, if you have not already done so[[1]](#footnote-1)).*

*It would be a good idea to share your conclusions (as summarised in the tool) with your steering group or co-production group, and check that everyone agrees.*

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| 1. **Where are we now?** |
| From what we have found out about **local people’s experience** of getting information and advice, our improvement goals are:  *(Summarise briefly – e.g. 3-10 succinct points)* |
| From our analysis of **population needs** (including self-funders), our key target groups are:  *(Summarise briefly – e.g. 3-10 succinct points)* |
| From our assessment of the **council’s current provision** of information and advice, our improvement goals are:  *(Summarise briefly – e.g. 3-10 succinct points)* |
| From our assessment of **other statutory information and advice provision**, and of key **national resources**, the key links we must make are:  *(Summarise briefly – e.g. 3-10 succinct points)* |
| From our assessment of **specialist local information and advice services**, our improvement goals are:  *(Summarise briefly – e.g. 3-10 succinct points)* |
| From our assessment of our **other community assets**, our improvement goals are:  *(Summarise briefly – e.g. 3-10 succinct points)* |
| Thoughts on **relevant new developments and ongoing work:**  We believe that the following **ongoing developments** are exceptionally important and relevant, and will be key building blocks of our Strategy: *(Add notes or bullet points).*  *(Note: You may already have identified most of these in the earlier section (“Strategic Context”)****.*** *So, this section prompts you to record any additional impressive work that can be incorporated into your Strategy. Examples might be: the planned opening of new internet access points in key locations, new databases on local sources of support, a new public health campaign, the training of volunteer “health champions”, new tools being produced by user-led organisations, etc).* |
| Thoughts on **the quality of our provision:**  The Care Act 2014 gives us a responsibility to ensure that local information and advice is of high quality. (For example, it should be clear, comprehensive, consistent, accurate and up-to-date).  From our assessment, we believe that much good quality information is available to local people, but we have the following challenges: *(Add notes).* |
| Thoughts on **joining things up:**  The Care Act 2014 gives us a responsibility to help join up information and advice organisations locally, so they can work more collaboratively.  From our assessment, we believe we have already established some good links between agencies, and have demonstrated that our “signposting” arrangements work well in the following ways: *(Add notes).*  We have found scope to create stronger links, and to improve “signposting”, in the following ways: *(Add notes).* |
| Thoughts on **becoming more efficient:[[2]](#footnote-2)**  In the current climate, we have a responsibility to be as efficient as we can – optimising “value for money” across the whole system. Our senior responsible officer has given us the following initial guidance about the level of investment that can be made in this area: *(Add notes).*  From our assessment, we have concluded that the following areas may be under-resourced: *(Add notes).*  However, we have also found scope to achieve efficiencies (for example, by reducing duplication, making more use of online resources, combining back-office processes, making better use of people’s skills, etc). Our ideas are: *(Add notes).* |
| Other headline thoughts on our **strengths, weaknesses, opportunities and threats:**  From our assessment, we have some other thoughts about what we can feel confident about, and what we are concerned about: *(Add notes or bullet points).*    *(NB As an option, you could complete a more formal SWOT Analysis).* |

1. *A Summary of the key requirements can be accessed in the GETTING STARTED section of this toolkit, under the heading:* ***“Understanding the requirements of the Care Act 2014”.*** [↑](#footnote-ref-1)
2. *For some ideas about the potential process and cost benefits of information and advice, you may wish to refer to the tool on “Understanding the benefits of Information and Advice”, which can be accessed in the GETTING STARTED section of this toolkit under the heading:* ***“Understanding the importance of information and advice”.*** [↑](#footnote-ref-2)