



VALE OF GLAMORGAN COUNCIL

DIRECTOR OF SOCIAL SERVICES

ANNUAL REPORT 2010-2011

The annual report on the delivery of social services in the Vale of Glamorgan and our plans for improvement



Foreword

The Vale of Glamorgan Council values highly the work done by the Social Services Directorate on behalf of all our communities. Through my own contact with service users and carers from across the whole area, from listening to people's personal accounts, by looking at performance against national and local indicators and on the basis of independent inspection, we can talk with confidence about the evidence of many real achievements over the past year. In exceptionally difficult times, service users and carers have been able to rely upon receiving a good range of services from staff who are committed to helping them solve practical problems or deal with family crisis.

There has been much good work done to improve further the quality of the help and support made available to people in need of personal care. For example, we have developed the Vale Intermediate Care Service (VICS) which supports people following illness or injury to help them regain the skills needed for day-to-day living such as dressing, cooking and eating. One in three people receiving the service have regained their independence through this focus on reablement. We are pressing on too with our efforts to increase the use made of telecare services. Products like falls detectors, bed occupancy sensors and gas detectors have great potential to reduce incidents and risks associated with elderly and disabled people living at home. Because of my work with the Cardiff and Vale University Health Board, I am aware too of how much good partnership working is taking place, especially to ensure that services are joined up across health and social care. As chairman of the Corporate Parenting Panel, I have seen how the Council as a whole has maintained its commitment to providing the highest quality of care to children who are looked after.



We all know the challenges that face us in the years ahead, especially in the exceptionally difficult financial context for all public services and the growth in demand for social care. However, the Director's report strikes a positive note and one which is realistic. It acknowledges that there are profound difficulties ahead but sets these against other factors - the many strengths within the Council, the areas where plans for further improvement are having an impact and the clear direction for social services in the Vale of Glamorgan which is now in place.

Councillor Dorothy Turner, Cabinet Member for Social Care and Health

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Introduction

Why have I produced this report?

As Director of Social Services, I am required by the Welsh Assembly Government to report every year on the delivery of social services in the Vale of Glamorgan and on our plans for improvement.

This second annual report is my opportunity to:

- produce for people in the Vale a rounded picture of social services (based on evidence such as what users and carers say, key performance indicators, and measurements of progress against the overall goals of the Council);
- influence the plans and budgets set by the Council;
- contribute to the Council's overall management and oversight of social services; and
- provide ideas about how we can respond to the current financial crisis in the public sector and plan for the longer term.

Who is the report for?

This report is written for a wide range of people, including service users and carers but also elected Members, our staff, and the range of partners and providers who help us deliver our services. It is used by the Care and Social Services Inspectorate for Wales (CSSIW) to guide their inspection programme in the Vale. For this reason, it contains some language that may be difficult to understand at first but there is a glossary at the end, a key to the meaning of specialist words.

How is the report organised?

The report is in three parts.

1. A Summary

This sets out, in a few pages only, an overall report on the progress made by Social Services over the past year and an outline of the future direction and challenges we face.

2. Individual Heads of Service Report

This has three sections, representing the major divisions within the Social Services Directorate and their work. The key sections are:

- A. Children and young people services cover the areas of children in need, children looked after by the Council, child health and disability, and safeguarding.
- B. Adult services cover the areas of learning disability, mental health, older people, people with physical disability or sensory impairment or autism.
- C. Organisational arrangements cover the areas of corporate and political support; leadership and culture; financial stability and resources; planning and partnerships; commissioning and contracting; workforce development; management and management structure; performance quality/information systems and management; equality and diversity; vulnerable people protection services.

In each section, there is:

- an analysis of the context;
- an assessment of how well we are doing in different service areas (such as services for children in need, older people or those with mental health problems) and the evidence that supports these judgements; and
- priority areas for improvement in 2011-2012.

3. The Overview

This part of the report states the Director's view of service effectiveness currently and sets out the direction of travel for the improvements we need to make, recognising that our ambitious programmes for modernising services will take a number of years to deliver.

Please note that the overview is not meant to be a detailed description of all our current services, although it does give some key facts. Some people will be more interested in what is

happening in specific areas and the sections written by the Heads of Service provide this information.¹



I would like to thank all the many people who have contributed evidence, ideas and proposals for improvement.

Philip Evans, Director of Social Services

¹ Evidence Grids Improvement Actions – full summaries. We also have available a number of evidence grids, which contain the material that has been collated to provide the basis for analysing and judging performance. The evidence has been gathered from a wide range of sources including consultation, audit, inspection, and performance management data. The material is organised within a framework which covers the many areas of work which make up social services as a whole. Because of the amount of material, these grids are available separately on request to the Business Management and Innovation Section, Dock Offices, Subway Road, Barry, CF63 4RT.

Summary

This is the director's overall conclusion about the work of social services in 2010-2011.

- Much work has been done to deliver good quality services in the past year, with improved overall performance against key indicators and positive outcomes achieved for many of the people who depend upon these services for help.
- Considerable attention has been paid by social services, both in our own right and in collaboration with our partners, to planning how we can maintain good quality services and go on developing them.
- We are well placed overall to continue improving because of the way in which we are managing change, with a new three-year Change Plan designed to ensure that there is a clear direction for social services in the Vale.
- Given the difficult financial context and increasing demands for services, the only sustainable answer for social services in the longer-term is for us to change the pattern of services - based upon an understanding that we need to promote independence and focus services away from institutional settings and into people's homes and local communities.
- There are formidable challenges facing us - most obviously in finding ways to bridge the gap between the reducing resources available and the year on year growth in social care costs (resulting from demographic growth, increased citizen expectations, complex family structures and increasing numbers of people with long standing and complex disabilities).
- Getting full commitment to the overall programme of change requires us to increase the amount of social care that can be described as *citizen directed support*, which means people being in control of the support they need to live their life as they choose.
- To succeed, we will need consistent support from all those who are concerned to see as many people as possible supported well by social services and their partners - children protected from neglect or abuse, people with disabilities who are enabled to enjoy a more fulfilled life or older people who are supported to maintain their independence in the face of the challenges posed by frailty, isolation or dementia-related illness.

3. REPORT BY THE HEAD OF CHILDREN AND YOUNG PEOPLE SERVICES

Context and overall performance

3.1 The principal aim of Children and Young People Services is to ensure that vulnerable children, young people and families assessed as being 'in need' receive high quality services that make a positive difference to their lives.

3.2 This is achieved by offering a range of services which support a child or young person to remain with their own family or in their local community, wherever possible. If this is not possible or safe to do so, our aim is to place them in foster care within the Vale of Glamorgan and to maintain their links with family, friends and school.



3.3 *The National Framework for the Assessment of Children in Need and their Families* provides a way of looking at, understanding and recording what is happening to children and families. Additionally, it helps to ensure appropriate involvement by other agencies such as health, education and the voluntary sector. The Assessment Framework sets statutory timescales for the work to be undertaken with families. Measuring how well we deliver on these timescales provides some important indicators of performance for the Directorate and the Council.

3.4 The Children and Young People Services Division aims to deliver services in the most effective and efficient way and in accordance with legislation, guidance and policy set by central and local government. Social services cannot provide this support in isolation. It is important to recognise the critical role that partner agencies and professionals from other disciplines have to play in the planning and delivery of high quality services.

3.5 Partnership working in the Vale is strong and effective. At an operational level, there is evidence for this on a daily basis in the management of individual cases. At a strategic level, partnership working is demonstrated through a number of forums - most importantly, the Children and Young People's Partnership, the Local Safeguarding Children Board, the Community Safety Partnership and the Local Service Board.

3.6 Following the announcement of changes to the Cymorth Grant funding arrangements and the transition to the new Families First Grant, a multi-agency planning group has been established. This will plan how we can deliver a range of early intervention and preventative family support services targeted at harder-to-reach and more vulnerable children and their families. The



proposed changes will be implemented during 2011/12. In addition, in partnership with Cardiff City Council and the Cardiff and Vale University Health Board, we are planning how to meet the Welsh Government requirement that an Integrated Family Support Service (IFSS) is available from April 2012². To support this development, we have been invited by the Welsh Government to bid for pilot status. If the bid is successful, the partners would receive additional funding for 2011/12 in order to establish the service.

3.7 During 2010/11, a number of planned inspections in children and young people services were undertaken by the Care and Social Services Inspectorate Wales (CSSIW). These included:

- A follow up review of safeguarding arrangements focused on decision making, assessments and planning. This was completed at the end of 2010 and concluded that improvements had been made in all the areas.

² IFSS responds to concerns that existing services are not sufficiently meeting the needs of some children and families with complex problems. For these families there is an increased likelihood that the child's physical, social and emotional development will be impaired and for some children there will be repeated or long term episodes of being looked after by the local authority. IFSS seeks to overcome barriers to cross sector delivery and to strengthen links between services for adults and children with a focus on the family.

- Between January and March 2011, CSSIW inspected both the Fostering Service and the Adoption Service (within the wider framework of Planning for Permanence). The inspection reports are not available yet but feedback has been positive overall and any areas for improvement are already being addressed.

3.8 We have continued to implement the Integrated Children's System (ICS), an electronic case recording and case management system. The Vale is a member of a consortium of six neighbouring local authorities who have commissioned and developed this system in partnership with a national IT company. In common with the rest of Wales, we find that the level of bureaucracy associated with the processes required by central government is challenging. Currently, this means that social workers and support staff are spending too much time in maintaining the electronic system and less time with their service users. It is anticipated that there will be a concerted effort at a national level to redress the balance. The Council is embracing the use of new technologies including laptops and digi-pens to support workers to undertake their tasks as simply and efficiently as possible. Following a successful pilot project in the Fostering Team, this was extended to include the Intake and Family Support Team during 2010/11.

3.9 Spending on children and young people services in the Vale amounted to £13 million in 2010/11. The pattern of spend across placements, commissioned services and staffing is similar to that of many other local authorities in Wales. The Division has continued to achieve savings over the last year and agreed plans are in place to achieve increased savings in the current financial year. The proposed service reconfiguration was successfully implemented in August 2010. The structure now reflects much better the way in which the overall workload should be managed. Another principal aim of the service reconfiguration was to preserve the level of support to children and families, by maintaining the numbers of frontline



social workers. This has been achieved and the required level of savings accomplished through the loss of managerial and support staff posts. The second phase of service reconfiguration involves administrative staff and the proposed savings have already been built into the budget for the new financial year. Given the efficiencies that have been achieved in staffing across the service, any further savings through staffing changes are likely to mean the loss of frontline posts and potential risks to vulnerable children and young people.

3.10 Demand for services has continued to increase. Referral rates have risen from 3138 in 2009/10 to 4072 in 2010/11. The numbers of children and young people being included on the Child Protection Register and becoming Looked After have also risen significantly. Increasing demand for services and higher workloads has been accompanied by higher practice standards and public and professional expectations. Nevertheless, performance in many key priority areas has continued to improve.

3.11 The changes in the structure of teams has produced real benefits in:

- improving the overall service users' experience by providing greater coherence in respect of case transfer points and transitions;
- producing structures which reflect the social work business process, improving the Division's capacity for workload management through changes in the way in which functions are allocated to teams and addressing the problems experienced in some teams because of their remit, size and limited resilience;
- clarifying workload management issues, defining roles and responsibilities;
- ensuring that safeguarding is seen as being 'everybody's everyday business';
- developing a more effective service for young people who are aged fifteen and over, especially those who transfer to adult services; and
- maintaining improved performance against national and local indicators.

3.12 To maintain these high standards in the face of increased demand, it is important that we take concerted steps to:

- review the referral process;
- sharpen the threshold criteria for interventions;
- make full use of partnership development opportunities such as Families First and Integrated Family Support Service; and
- focus on permanence planning for Looked After Children.

3.13 Each service area within the Division faces its own challenges. Even where things are going well, we will work hard to maintain the highest possible standards and to take opportunities for further development and improvement, despite the difficult financial context.

Safeguarding and Child Protection

3.14 Safeguarding – for both children and vulnerable adults – is covered in greater detail in section 5 on organisational arrangements.

3.15 Social services have a statutory responsibility to investigate situations where a child or young person may be suffering abuse or neglect or is at risk of suffering abuse or neglect. Whenever it is necessary, we must act to protect children and young people from harm. While we always endeavour to do this in partnership with families, we sometimes have to take action against the wishes of the parents or wider family.



3.16 Referrals are received from a number of sources including schools, health visitors, GPs, hospitals, the youth offending service, police and members of the public (including families themselves). There are many reasons why referrals may be made including:

- to ask that a disabled child or young person receives help;
- because a child or young person has been harmed or is likely to be harmed by someone;
- because a child or young person is not being cared for adequately; and
- because the child or young person's parents or carers require help with their own difficulties in order to fulfil their parenting role.

3.17 All referrals are screened to establish priority and need for assessment and the provision of support. The Council has a duty to support children and young people assessed as being 'in need' and to support families to look after their children adequately. When there are concerns that a child or young person may be at risk of being harmed or neglected, the assessment commences immediately. There may be a need to convene a multi-agency Child Protection Conference where professionals and the family share all the information they have. If the decision of the Conference is to place the child's name on the Child Protection Register, then a Child Protection Plan detailing the role to be taken by all agencies will be developed to ensure appropriate safeguards are put in place.

3.18 The number of children and young people whose names are included on the Child Protection Register (CPR) has fluctuated during 2010/11 between a low of 67 and a high of 95. The numbers are rising and this appears to reflect a national trend. Despite the increase in numbers, evidence from inspection, audit and quality assurance processes shows that multi agency assessments, decision making and planning continue to be accomplished in a timely way and to a standard that ensures the most vulnerable children and young people are identified and supported appropriately. Clearly, there are

significant resource pressures as a result of any rise in numbers on the CPR including social work caseloads, Independent Chairing Officer capacity and administrative support.

3.19 These were our improvement priorities for 2010/11 and the progress made.

- *We will improve the business planning approach of the Local Safeguarding Children Board (LSCB).*

An interim Business Manager for the LSCB was appointed in 2010 and this increased capacity has facilitated progress with delivering the business plan. The manager is undertaking a review of the sub groups and how the Board is resourced; this will be reported to the LSCB by the summer of 2011. In addition, a Performance Management Framework has been developed and changes to the working of the Business Planning and Performance Management Sub Group will ensure that improvements continue to be made.

- *We will consolidate administrative support arrangements for fieldwork staff.*
The proposals for reconfiguring administrative support were delayed by the Council's Job Evaluation process but the changes are now on schedule to be completed by the autumn of 2011.

- *We will complete implementation of the Child Protection module within the Integrated Children's System (ICS).*

Delays with ICS system development across the consortium of local authorities mean that this is currently under review and will continue to be a priority for 2011/12.

- *We will explore further possibilities of collaboration with Cardiff Local Safeguarding Children Board.*

A scoping paper has been presented to the LSCBs in both local authority areas and the potential merger of a number of sub groups is underway. This now needs to be set within the context of anticipated changes in the guidance from the Welsh Government about the configuration of LSCBs.

3.20 Our safeguarding and child protection improvement priorities for 2011/12 are outlined in Section 5.

Children in Need

- 3.21 Our aim is to support children and young people so that they continue to live within their own families and within their community, wherever this is possible. We intervene when it has been assessed that there are risks to children and young people, to prevent those risks escalating and to safeguard those children who have or are likely to suffer significant harm. In order to achieve this aim, we work in close partnership with other agencies and service providers to offer a range of family support services to meet assessed needs. We ensure priority is given to those children, young people and families in greatest need to ensure that the services are used most effectively and efficiently.
- 3.22 Partnership working is critical to ensuring the delivery of effective family support services. Revisions by the Welsh Government to the Cymorth grant funding, renamed Families First, and the new criteria attached to this funding will enable services to be targeted at those children and families who may be harder to reach and more vulnerable. A multi-agency review of services within the Vale has commenced through the Children and Young People's Partnership and a new Families First service model will be implemented in the latter half of 2011/12.
- 3.23 In addition, all Welsh local authorities are expected to develop Integrated Family Support Services (IFSS) from April 2012, in line with legislative guidance. IFSS is a programme designed to provide support for families affected by substance misuse who have complex needs. The service is delivered by multi-disciplinary, multi-agency teams with a focus on evidence-based interventions. This approach brings together professionals drawn from social care and health care with specialist experience to work directly with the referred families. It is recognised that these families often face multiple disadvantages that require highly specialist and intensive support. The IFS

Team will spend more time working directly with the family to create positive change. They will also work with other services and agencies to support parents and protect vulnerable children for the benefit of the family. At the end of 2010/11, the Welsh Assembly Government announced plans to roll out funding to two areas to establish pilot services ahead of full implementation. It is our intention to bid for pilot funding early in 2011/12, in partnership with Cardiff City Council and the Cardiff and the Vale University Health Board.

3.24 Timely screening and decision making on all referrals made to the service are essential. We have consistently maintained our performance above our target of 95% for decisions made within one working day and the figure stands at



99.85% for the year. Timely completion of both Initial and Core Assessments is also critical to ensuring appropriate support and services are provided to children and families 'in need'. Initial Assessments should be completed within seven working days and our performance has continued to improve from 79% in 2009/10 to 88% in 2010/11. This compares favourably to the Welsh average of 65% (2009/2010 figures). Similarly, completion of Core Assessments within the recommended 35 working days has continued to improve from 78% in 2009/10 to 88% in 2010/11, compared to a Welsh average of 63% (2009/2010 figures).

3.25 We support young carers through a service commissioned by the Council from Action for Children. Performance has been maintained in 2010/11 with 100% of young carers known to the Council being assessed and 94% receiving a service.

3.26 Given ongoing budget pressures, we have to ensure that our services are targeted on those children and young people in the greatest need. All support services commissioned by social services from other organisations (primarily in the third sector) have been reviewed in line with Council policy and savings targets set by the Division. This has been a challenging process. However, with the cooperation of our third sector partners, we have been able to make the required savings with relatively low impact upon the levels of support available to children and families. Commissioned services will continue to be monitored and reviewed in line with the planned development of Families First and the Integrated Family Support Service.

3.27 These were our improvement priorities for 2010/11 and the progress made.

- *We will strengthen intake and assessment processes in 2010/11 through service reconfiguration.*

Service reconfiguration was completed in August 2010, with many positive outcomes, but we will continue our work to assist the new Intake and Family Support team in fulfilling its role and responsibilities.

- *We will strengthen our systems for assuring the quality of assessments and care plans.*

A Quality Assurance/Audit Action Plan has been developed jointly between the Operational Managers within Children and Young People Services and the Safeguarding and Performance Unit.

- *We will continue to review the range of support services available to ensure they are targeted and prioritised for those children and young people in greatest need.*

The review of support services has been accomplished. There have been financial adjustments and increased priority for those most in need. Difficult decisions have been taken during the year which resulted in significant public and media attention. Some families have experienced relatively small changes in the level of services they receive. In order to achieve the savings anticipated for the Directorate and to meet cost pressures associated with rising demand for looked after children services, it may be necessary to

consider more extensive reductions in direct service provision but the Council will strive to avert this outcome.

- *We will commission an Independent Advocacy Service for children and young people who are accessing services.*

The tendering process for an Independent Advocacy Service was delayed by uncertainty over Cymorth funding during the year but this was completed by the end of 2010/11.

These are our improvement priorities for 2011/12.

We will:

- **award the contract for the Independent Advocacy service early in 2011 and the service will be operational by the summer of 2011.**
- **review the intake and duty systems to ensure referrals received are appropriate and make changes to the ICS electronic case management system as necessary.**
- **review the Child in Need individual case planning process to ensure consistency across the service and raise practice standards and performance. We will introduce standardised Child in Need planning and reviewing documents, making full reference to developments in the ICS electronic case management system.**
- **ensure that all partnership opportunities and developments are fully utilised to support the children and young people assessed as in greatest need, especially via Families First and IFSS.**

Looked after Children

3.28 The number of children and young people being Looked After by the Council changes on a daily, weekly and monthly basis. However, the overall trend has been towards a sustained and significant rise during 2010/11, from 179 on 31st March 2010 to 198 on 31st March 2011. There appear to be two main reasons for this increase:

- The High Court ruling known as the Southwark Judgement places an explicit duty on local authorities to assess all young people aged 16 and 17 years who present as homeless. If the assessment identifies that the young person meets the criteria of being a 'child in need', they have to be offered suitable accommodation by the local authority. Bed and Breakfast accommodation is not deemed suitable. As a result, we have seen an increase in the number of 16 and 17 year olds who have to become Looked After in order to access suitable accommodation. This has increased the LAC population by 20 during the past year.
- Historically, not all disabled children and young people receiving short breaks support were considered as Looked After for the period of the short break. This has now been rectified and accounts for an increase in the LAC population of up to 7 on any given day.

3.29 As stated above, during 2010/11, the average number of children looked after at any one time in the Vale has ranged from 179 to 203. While this figure represents an increasing trend and the rate per 1,000 children in the population remains higher than other comparable Welsh authorities, the most common reasons for children entering the Looked After system continue to be abuse or neglect. This suggests either that accommodation is being used appropriately in order to safeguard children or that we require more effective services to meet the need for intensive and targeted help to maintain children in their own family settings. The reasons for children becoming Looked After will be examined as part of the strategic objective aimed at reducing the overall number of Looked After Children in the Vale.



- 3.30 Analysis of the current LAC population shows that a number of children and young people are settled in long term placements, either at home with parents or with long-term carers. It is important for these children and young people that such long-term arrangements are made permanent. While many of the placements would still require ongoing financial support, changing the legal status of the placements by means of procedures such as Residence Orders or Special Guardianship Orders would provide children and young people with much needed stability and would reduce the workload pressures on social workers, Independent Reviewing Officers and support staff allowing resources to focus on providing more preventative supports for families.
- 3.31 Despite the overall increase in numbers, there continues to be positive evidence that all Looked After children and young people are receiving timely support and quality services.
- 3.32 The cross-party Corporate Parenting Panel helps to raise political and senior management awareness of the needs of Looked After Children and involvement in making positive changes. Chaired by the Cabinet Member for Social and Care Services (who is also the Children's Champion within the Council), the Panel emphasises the collective responsibility of the whole Council to contribute to raising standards for Looked After Children. The Panel gains significant benefit from the involvement of a young person who represents Looked After Children in the Vale.
- 3.33 The majority of children and young people requiring accommodation are placed with foster carers within the Vale. The Placements and Permanency Team continues to recruit and support carers to offer stable placements to even the most challenging of children and young people. We have a large number of children placed within their extended families with Kinship Carers or through Residence Orders. Kinship carers receive the same support as mainstream foster carers.

3.34 Every Looked After child has an allocated Social Worker and every placement starts with a Care Plan in place. Statutory visits to children and young people in their care placements are achieved in 99% of cases, with reasons clearly recorded where this has not been possible. 98% of the Care Plans are reviewed within statutory timescales. This places us as one of the top performing local authorities in Wales.



3.35 Looked After children and young people benefit from the additional support offered by the Children First Team. The CFT includes a Specialist Teacher, part-time Educational Psychologist and LAC Clinical Nurse Specialists. 53% of Looked After Children have a Personal Education Plan in place within 20 days of becoming looked after and 60% receive their health assessment on time. However, performance in both areas is below the Welsh average and clear targets for improvement have been agreed for 2011/12.

3.36 The number of young people requiring specialist residential care out of area has increased to 13. The additional placements have all been the consequence of exceptionally challenging behaviours, serious offending or the complex health needs of the individual children. Three of the placements have been directed by the courts, leaving the Service with no option. These placements alone account for an additional £700,000 on the overall placement budget for the year, which could not have been planned for and which will have to be funded from the overall funding available to the Service.

3.37 We aim to place all children within their local communities, to ensure links are maintained with family, school and friends. This means recruiting more foster carers who are able to provide placements for older children/teenagers and children with health and disability needs. Together with the nine other local

authorities that form the South East Wales Improvement Collaborative (SEWIC), we are engaged in developing regional commissioning of children's placements. As a result, we have already achieved cost savings by negotiating fees with independent sector providers. In addition, proposals are being developed to consider a regional approach to recruiting foster carers.

3.38 In March 2010, the Welsh Assembly Government issued guidance on National Minimum Allowances for Foster Carers, which must be implemented from April 2011. Initial calculations suggest additional costs to the Service in the region of £100,000 each year. This was not foreseen and it is a significant budget pressure for 2011/12.

3.39 All young people leaving care have an allocated worker and access to a Young Persons Advisor, although a small number of young people choose not to access any support. Pathway Plans are in place in all cases. The needs of all homeless young people aged 16–18 years are assessed by Social Services in partnership with the Housing Department and Llamau, a third sector provider. A better range of accommodation options suitable for young people needs to be developed across the Vale. Efforts are being made to improve access to work experience for our Looked After Children and care leavers via opportunities within the Council. The authority has a good record of supporting young people into Further and Higher Education.

3.40 These were our improvement priorities for 2010/11 and the progress made.

- *We will develop a broader 15 plus service in 2010/2011 to offer support to all vulnerable young people, including those young people Leaving Care.*

The service reconfiguration in August 2010 established a 15 Plus Team with a broader remit including assessing and supporting homeless 16 and 17 year olds.

- *We will improve outcome-focused care planning to ensure services make a difference to children's lives.*

We continue to work closely with colleagues in Safeguarding and Performance to improve the quality of care planning and assist workers to focus on outcomes for children and young people. This will be a continuous and ongoing process.

- *We will develop a 'one-stop-shop' for young people in partnership with other agencies.*

Plans for a joint 'one stop shop' in partnership with Housing and Llamau are well developed and building work in the Llamau premises in the centre of Barry has been completed. It is planned that the service will be launched in the summer of 2011.

- *We will deliver the Corporate Parenting Panel work programme.*
The Corporate Parenting Panel has been maintained and its work programme reviewed and updated at regular intervals. The Panel has received presentations and considered the issues affecting young people including accommodation options for young people leaving care, health services including CAMHS and management information relating to the changing LAC population.

- *We will improve work experience and employment opportunities for young care leavers.*

The need to gain corporate support within the Council for promoting work and training opportunities for care leavers remains a priority for action.

- *We will develop an independent Advocacy Service in 2010/11.*

The contract for the Independent Advocacy service will be awarded early in 2011 and the service will be operational by the summer of 2011.

- *We will improve transition planning for young people leaving care and those moving into Adult Services.*

A virtual Transitions Team has been operating across Adult and Children's Services. A very successful Transitions Day for young people and their families was held in the summer of 2010. A multi-agency review of the new Transition Protocol has started and the protocol will be revised in 2011/12.

These are our improvement priorities for 2011/12.

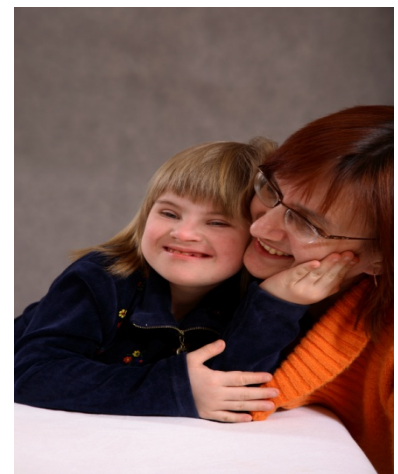
We will:

- **gain corporate commitment to improving work experience and employment opportunities within the Council for young care leavers.**
- **reduce the overall Looked After Children population by 10% by 2013 through a range of measures primarily focussing on changing the status of some long term and stable placements.**
- **produce a Commissioning Strategy for Children and Young People Services which will incorporate the accommodation needs of young homeless people.**
- **establish a multi-agency Complex Case Panel with Education and Health to consider joint planning and funding arrangements for those Looked After Children with more challenging and complex needs.**
- **implement the National Minimum Fostering Allowances in 2011/12, in line with Welsh Government guidance.**
- **implement the action plans that will be produced in response to the CSSIW inspections of the Fostering and Adoption Services.**

Child Health and Disabilities

3.41 We provide a wide range of services to meet the assessed needs of children and young people with disabilities as well as supporting their parents and carers. Services for disabled children and young people include the social work team, short breaks and leisure services provided by Action for Children and Barnardo's, Direct Payments, specialist equipment and domiciliary care. These cost £1.2 million each year. This is just under 10% of the total budget for the Division.

3.42 The multi-disciplinary Children with Disabilities Team were included in the service reconfiguration proposals implemented in August 2010. It has been more appropriately named the Child Health and Disability Team. It works to provide



appropriate support to families, enabling disabled children and young people to achieve their potential. This includes supporting social inclusion and enabling children and young people to gain skills that will enhance their independence.

3.43 Services include a range of short breaks, leisure provision and sessional support, overnight and holiday breaks with approved foster carers or at our purpose built residential provision, Ty Robin Goch. These services are provided in partnership with Action for Children and Barnardo's. In addition, families may receive Direct Payments, where they are given the money to make the choice about how best to meet their children's assessed needs. Inclusive/integrated holiday play schemes support disabled children and young people and, in addition, specialist support is provided by Social Services.

3.44 Short breaks provide invaluable support for disabled children and young people and their families. They offer opportunities for children to become more independent, widen their experiences and form real friendships outside their family. At the same time, their families get a break from caring and a chance to recharge. Resource pressures have meant that care packages have had to be reviewed across all service areas and there have been some changes made to services provided to disabled children and their families. A delay in implementing a proposed reduction of one night per fortnight in the Ty Robin Goch short breaks service led to remedial action needing to be taken in October 2010. This resulted in significant public and media attention. The Council and Action for Children (the service provider) worked hard together and tackled effectively the concerns of the families involved.

3.45 Through formal collaborative arrangements with Cardiff City Council and Cardiff and the Vale University Health Board, an Integrating Health and Social Care Services Board has been established to consider all potential areas for future collaboration and service development. One of the work streams

adopted by the Board is the development of services for children and young people with especially complex needs, including those who are disabled, require nursing care, have Autistic Spectrum Disorders, and/ or have mental health problems.

3.46 These were our improvement priorities for 2010/11

- *We will ensure all disabled children and young people have a current care plan in place and appropriate reviews by the end of 2010/2011.*

While current plans are now in place for all disabled children and young people, this work has identified inconsistencies in practice and the documentation used. As a result, a review of the Child in Need planning and reviewing process of this report will be undertaken in 2011/12 as outlined at paragraph Section 3.25.

- *We will improve outcome-focused care planning to ensure services make a positive difference to the lives of children and families.*

We continue to work closely with colleagues in Safeguarding and Performance to ensure improvements in care planning and through reviewing processes, supporting workers to focus on outcomes for children and young people.

- *The Transition Protocol, in respect of children expected to need adult services in later life, will be reviewed during 2010/2011.*

A virtual Transitions Team has been operating across Adult and Children's Services and a very successful Transitions Day for young people and their families was held in the summer of 2010. A multi agency review of the new Transition Protocol has started and the protocol will be revised in 2011/12.

- *We will strengthen the Key Worker approach.*

Each disabled child and young person has an allocated worker who adopts the keyworker approach to care co-ordination on a multi-agency/multi-disciplinary basis.

- *We will review the range of short breaks services currently being provided to ensure effectiveness and efficiency.*

All packages of support have been reviewed, a process that will continue to ensure that needs and services are well matched but also in the context of needing to achieve significant savings across the whole service.

These are our improvement priorities for 2011/12.

We will:

- **in partnership with Adult Services, consider the benefits of moving from the current virtual team approach within the Transitions Service to integrated provision under one manager.**
- **support collaborative working and service integration opportunities with Cardiff City Council and the UHB through the Integrating Health and Social Care Services delivery programme.**
- **review the Child in Need planning process to ensure consistency across the Service and raise practice standards and performance.**
- **formalise the move to Independent Reviewing of Short Breaks placements for eligible children and young people.**

4. REPORT BY THE HEAD OF ADULT SERVICES

Context and overall performance

4.1 Adult services provision accounts for a significant proportion of the total budget for social services in all local authorities, including the Vale. £32.8 million was spent in 2010/2011. The funding is used to support people with mental ill health, learning disabilities, physical disability, sensory impairment and frailty or/and mental health issues associated with ageing. The division has made significant savings over the last year and, given the financial constraints on public services, this process will need to continue. Where savings have to be made, we give priority to protecting front line services.

4.2 When social services get a request for help, social workers and our partners in other agencies carry out unified assessments with potential service users and (where appropriate) their carers. Support from family carers is often the most critical factor in helping people to remain as independent as possible; social services try to add to this help, not replace it. Based on the assessments, packages of care are developed in response to the needs which have been identified. An important role is to ensure that people get access to other service provision (e.g. housing, education, employment support), where this has been identified as an area for action within the assessment process.



4.3 The work of adult social services in meeting service users need cannot be done in isolation. It is especially important that we develop even more our partnership working with the NHS, housing, the police, the third (sometimes referred to as voluntary) sector and independent providers of services. Partnerships help to ensure that:

- funding is used properly;
 - agencies are all pulling in the same direction and assisting each other to meet key goals (e.g. safe discharge from a stay in hospital); and
 - effective communication takes place.
- 4.4 This is especially important at a time of financial difficulties, a situation which all public services are facing for the foreseeable future. Adult services in the Vale are developing a good reputation for working collaboratively, especially with the NHS.
- 4.5 The scale of the support made available to vulnerable people in need of social care is shown by the following data for the twelve months from April 2010 to March 2011.

Key adult social services activity data 2010/2011

The figures for the previous year are in brackets.

- 19140 telephone call enquires made to C1V (6297)
- 2094 new referrals received (2134)
- 3969 new assessments completed (3898)
- 126 carer assessments undertaken (147)
- 1759 people supported to live at home (1153)
- 195 people receiving TeleV support (190)
- 1290 people receiving day services support (1202)
- 1127 older people helped to live at home (1430)
- 411 older people supported in residential/nursing care (414)
- 71 people living in supported accommodation (75)



- 289 protection of vulnerable adult referrals managed (281)
- The rate of delayed transfers of care for social care reasons per 1000 of the population aged 75 or over was 3.8 (3.8)

Source: Vale of Glamorgan Management Information reporting March 2011.

4.6. As you can see, many of the figures are broadly similar to those for 2009/2010. This is itself considered an achievement at times of financial cutbacks. However, improvements have also been made in how we capture some of the data, notably in respect of telephone enquiries. We now have a much more reliable understanding of the actual volume of activity and its significance to social services.

4.7 Targets set for 2011/12 include:

- reducing the rate of delayed transfers of care (from hospital settings) for social care reasons; and
- reducing the average number of working days taken between enquiry and completion of a care plan where specialist assessments are undertaken as part of the care assessment process.

We will continue to monitor the relevant performance information that we have and measure any improvements that we make.

4.8 Adult Services are in a period of significant change. Services that promote and achieve reablement are being developed. These have delivered significant improvements in our ability to promote independence, ensuring that people can return safely to their communities (after a hospital stay, for example), rebuild their lives and avoid institutional care. Adult services need to develop these services even further, partly through reshaping them in greater partnership with the NHS and the Voluntary sector. Some assessment and care management teams, notably those which work with older people

and those with physical disabilities, have been reconfigured. However, even here further change is in progress, to ensure closer collaboration with neighbouring authorities and integration with health services while achieving the best use of resources.

4.9 Adult social services provision across Wales is currently provided subject to a formal financial assessment. If people have sufficient disposable resources and can pay for/contribute to the cost of services, they are required to do so. The Welsh Government has recently set a maximum charge of £50 per week for non-residential care. Implemented in April 2011, this change in policy is already increasing the workload of the service and reducing the income it is able to generate. The demography and socio-economic determinants in the Vale suggests that the effect will be more significant here than in other local authorities.

4.10 Initial access to adult social care services is through the call centre, Contact OneVale. This service started working collaboratively with the NHS in April 2011 to provide an out of hours response for primary care. This offers an excellent basis on which to build integrated first contact services for health and social care.

4.11 Current challenges include:

- consolidating the improvements made last year;
- dealing with the consequences of having an ageing population;
- making best use of reducing resources;
- developing services that are more integrated with the NHS and the Voluntary sector; and
- reorganising the management structure for adult services to strengthen collaboration with neighbouring authorities and health services.

4.12 Each service area in addition faces its own challenges. The following sections highlight, by adult service area, those key issues which need to be addressed in the coming year.

LEARNING DISABILITY

4.13 Assessment and care management is carried out by a multi-agency team which works together effectively. It is well placed to take forward plans for increased integration of services with Cardiff Council and with the Cardiff and Vale UHB. Individual case planning for young people making the transition from children's services to adult services has been strengthened considerably with the development of a team with a specific focus on working with young people aged 16-25. In particular, this has improved decision-making with regard to possible placements in colleges. The worker who specialises in transition within Physical Disability and Sensory Impairment has joined the Transition Team and we are exploring whether a worker from the NHS can be attached to it.



4.14 The way in which the day services operate has been reviewed and the recommendations are being considered by the Cabinet. Considerable improvements have been achieved in the provision, monitoring and cost effectiveness of supported accommodation services. Three new properties have been commissioned and major refurbishment of a specialist resource is currently taking place with a view to accommodating four people with challenging behaviours. We are also reviewing our respite care provision to ensure that service users are able to access the resource most appropriate for their needs. This will enable services to be used more effectively, particularly for those with greater disabilities.

4.15 These were our improvement priorities for 2010/11 and the progress made.

- *We will convene and maintain the schedule of meetings of the HSCWB Learning Disability sub-group, to enable joint service planning.*

The Learning Disability sub group has been restarted and this has highlighted the advantages of working collaboratively with Cardiff City Council and its partners

- *We will complete the strategic review of day services, confirm recommendations and establish plan for reconfiguration.*

The day service review has been completed and the consultation process has started.

- *We will work with the Physical and Sensory Impairment Team to improve arrangements for transitions.*

Transition arrangements have been improved. An adult transition team became operational in July 2010.

These are our improvement priorities for 2011/12.

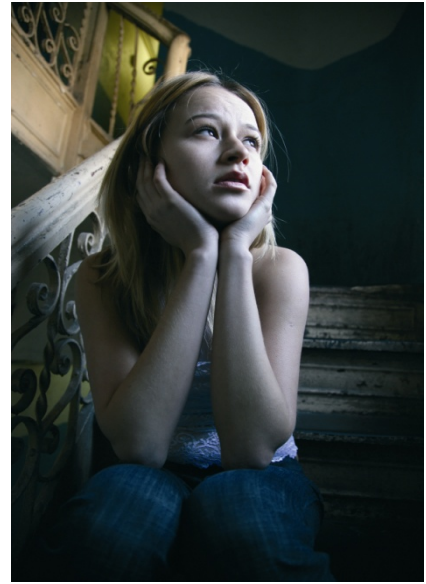
We will:

- **establish a joint strategic post with Cardiff Council, to provide clear direction for future collaborative service improvement.**
- **ensure that service users living in supported and other accommodation can make full use of appropriate Telecare equipment to facilitate independence living.**
- **complete the consultation phase started on modernising day services (e.g. with greater focus on the aspirations of individuals, promotion of independence, community presence and partnership collaboration) and establish an agreed way forward.**

MENTAL HEALTH

4.16 All referrals are screened by a multi-agency meeting to ensure appropriate allocation and this is working well. The Carers Support Officer is now an

integral part of the team; this has meant more effective and timely assessment of carers' needs. It is an approach that aligns well with the work of Hafal, which provides on behalf of the Council support to carers' groups. Community Support Workers are performing a crucial role in enabling service users to access community resources.



- 4.17 Approved Mental Health Practitioner (AMHP) work continues to increase. More staff will undertake the relevant training so that we can meet the demand for the service.

Assertive Outreach and Early Intervention responses are being piloted within the UHB area and we will seek to ensure that this health-led initiative will extend to the Vale.

- 4.18 Within the overall programme of the Integrating Health and Social Care Programme Board across health and social care services in the Vale and Cardiff, there is a specific project for mental health services. A fully integrated management structure is being put in place.

- 4.19 These were our improvement priorities in 2010/2011 and the progress made.

- *We will develop integrated Mental Health Services to provide better outcomes for users of the service.*

An integrated management structure has been developed and agreed but implementation has taken longer than expected because of the need to reconcile differing approaches to staffing and other issues.

- *We will examine with NHS colleagues how to develop different ways of working (for example, to avoid duplicating assessments).*

Because this action is dependent on the progress with management integration, it has not been achieved as yet.

- *We will create a whole systems approach that ensures promoting service user independence is a high priority in the delivery of future mental health services by adopting the Recovery Model across health services, social services and the third sector.*

A Recovery charter for mental health has been produced and is being implemented.

These are our improvement priorities for 2011/12.

We will:

- **implement the integrated management structure and develop a joint post with Cardiff to lead the strategic direction for social care (Shaping Services, Providing Direction & Organising)**
- **work with Health to integrate the AMHP service across the CMHT and the Crisis and home treatment service. (Getting Help)**
- **introduce an integrated CSW service/outreach worker service across Health and Social Services for Cardiff and the Vale of Glamorgan (Providing services)**

OLDER PEOPLE

4.20 Adult social care for older people includes preventative services, assessment and care management, nursing and residential care homes, respite care, community services (home care, day care, meals), re-ablement to prevent hospital admission or enable continued independence, intermediate care (after a spell in hospital), supported and other accommodation (including adult placement and extra care), direct payments to service users, safeguarding, and the provision of equipment and related areas (including telecare).



4.21 Spending on Older People Services in 2010/2011 was £14.1 million, which equated to 32% of the overall social services budget. In making best use of these resources in the face of rising demand and changing expectations about the range of services needed by an ageing population, social services are encouraging a reablement approach to care and reducing the pressure to accommodate growing numbers of older people in traditional residential settings. This will involve developing further the use of assistive technology and reconfiguring services through the decommissioning of traditional, high cost services in favour of more preventative models. There will be a focus on partnership with other local authorities, the NHS, the third and private sectors in order to achieve these aims through maximising efficiency and ensuring that people are supported proportionately and in a way that maintains independence as long as possible.

4.22 Increasing demand for older people services has put a strain on the services currently available. In making decisions about the budget, the Council has recognised the need for additional resources but this is in the context of a requirement that social services contribute to the savings which have to be made. Despite the pressures, there are fewer delays in allocating referrals and requests for help but more work is needed. In respect of waiting lists for assessment by occupational therapists, improved performance has been sustained but a reduction in grant funding from the Welsh Government may affect this.

4.23 The reconfiguration of adult services assessment and care management teams was designed to:

- modernise the service in response to the overall strategic vision for adult social care, which emphasises safeguarding and promoting independence;
- provide a structure which better reflects service user needs and the social work business process;

- improve the Division's capacity for workload management through changes in the way in which functions are allocated to teams and addressing the problems experienced in some teams because of their remit, size and limited resilience;
- ensure high standards of professional and management practice;
- maintain improved performance against national and local indicators;
- reduce management costs while safeguarding frontline services and practitioner posts.

4.24 This programme of change is beginning to have a positive impact. Combining the older people and physical disability social work teams under single management arrangements has enabled us to develop three neighbourhood teams. The intention is to ensure greater equity of approach and service development. Further reconfiguration of older people services is required to deliver a more integrated model with the NHS. We intend to develop integrated reablement services as well as building upon our current contact centre service.

4.25 Services for older people with mental health problems including dementia-related illnesses are delivered through a multi-disciplinary team comprising health and social care staff. Resources within the team include Mental Health Nurses, Social Workers, Occupational Therapists, Physiotherapist, Psychologist, Carers



Support Officer, Nurse Assistants and Social Care Officers. The team also has direct access to out-patient and in-patient services as the Consultant Psychiatrist is also part of the team. It provides a direct referral system for service users and professionals. All referrals are screened at the point of

contact to ensure risks are identified and that cases are given the right priority and allocated appropriately.

4.26 The risk assessment process adopted by the Vale has been incorporated alongside risk assessments that are contained within the Care Programme Approach, a specific assessment within Mental Health Services. Staff who work in mental health services have attended the Wales Applied Risk Research Network (WARRN) training. There continues to be a significant increase in statutory work under the Mental Health Act, Mental Capacity and Deprivation of Liberty Safeguards in this area.

4.27 These were our improvement priorities for 2010/2011 and the progress made:

- *We will take forward plans to deliver Extra Care facilities.*

A preferred site for an extra care facility in Barry has been found and Hafod Care Association has been commissioned by the Council to take forward this development.

- *We will increase provision of specialist dementia residential care.*

We have achieved an increase of 26 beds registered for people with dementia in council-run residential care.

- *We will establish a new intermediate care service (VICS).*

The new VICS service is being delivered, increasing significantly the capacity for reablement and enabling people to live independently.

- *We will develop a business plan for crisis beds through the established partnership group.*

We are working with UHB colleagues on this issue, anticipating additional funding to enhance the capacity of the Community Mental Health Team Older People (CMHTOP) to respond to crises.

- *We will contribute to the work of the Integrating Health and Social Care Services Programme Board.*

A new model for older people's services has been produced for consultation, building upon the work done in Wales by John Bolton regarding more efficient ways of providing support.

These are our improvement priorities for 2011/12.

We will:

- **develop an integrated Crisis Response Service for Older People with Mental Health problems, in partnership with the NHS, covering out of hours and linked with existing CMHTOPs.**
- **develop a residential intermediate care service at Ty Dyfan, working with the NHS.**
- **reduce further the waiting times for assessment and casework involvement.**

PHYSICAL DISABILITY AND SENSORY IMPAIRMENT

4.28 Our information about services is good but needs updating to reflect recent changes. The Adult Services Coordinator within the contact centre, C1V, has worked to improve responses to enquiries and to ensure more effective arrangements for signposting people to appropriate sources of help. With the help of the CIV Operational Manager, changes have been introduced, including:



- development of dedicated staff;
- fluctuating capacity based on demand;
- improved access to Adult Services training opportunities; and

- more specialist supervision with regard to the Social Services function and responsibility.
- 4.29 An additional Adult Services Social Worker is to be recruited who will undertake a role in improving workflows between CIV, VICS and the Adult Community Care Team (ACCT), with the aim of reducing delays.
- 4.30 The development of the VICS has improved equity of access to reablement services and timely reviews are undertaken towards the end of the reablement period (usually 4 to 6 weeks). Further work is required to increase the focus on undertaking timely annual reviews.
- 4.31 These were our improvement priorities for 2009/10 and the progress made:
- *We will improve consistency and reduce duplication of information available to service users and carers.*
We have developed information packs for Unified Assessment, Carers, Occupational Therapy enquiries and assessment, VICS and meals on wheels.
 - *We will recruit a social worker for the contact centre to improve initial contact for service users and enquirers, in part through support to existing C1V staff.*
We have not yet recruited a Social Worker for the contact centre, C1V but we have improved the arrangements for collaboration between C1V, VICS and the assessment and care management teams.
 - *We will complete the review of Service Level Agreements/contracts with third sector service providers, to improve the range of preventative services.*
The review of Service Level Agreements and contracts with third sector organisations is beginning to take effect and there is now an agreed programme for ongoing liaison.
 - *We will monitor the impact of reconfiguring assessment and care management teams/introducing locality-based teams.*

Reconfiguration of teams has occurred with minimal disruption to service users. The new reconfiguration allows us to work more easily to integrate locality based services with the NHS.

- *We will develop the Vale Intermediate Care Service (VICS) and monitor impact.*

Since VICS started in April 2010, 30% of the people receiving the service have regained their independence through reablement.

- *We will develop a proposal to ensure that there is a Carers Support Officer available in all assessment care management teams.*

A proposal has been developed to build on the existing permanent posts so that this is provided across the entire service.

These are our improvement priorities for 2011/12.

We will:

- **integrate VICS with complementary services provided by the UHB in the locality to ensure seamless care provision. We will build upon the positive experiences and work with the voluntary sector to build this service in partnership with them.**
- **deliver even better response times to initial requests for help through improved processes and systems between care management and the contact centre, C1V.**
- **amend the proposals for reconfiguring day services in response to consultation and seek political approval for the proposed changes.**
- **follow through the proposal to ensure that Carers Support Officer capacity is available in all assessment care management teams.**

AUTISTIC SPECTRUM DISORDERS

4.32 This is an area which has not previously been included as part of the Director's report. However it is another area where we are able to demonstrate significant innovation and improvement. The service has

developed an online learning tool which has won a national award and been adopted by seventy other local authorities to help develop awareness of autistic spectrum disorders. A regional monitoring and support project for this service area will be lead by the Vale. Staff in education, children and adult services are receiving an intensive training package. We have helped to facilitate a user-led socialisation group.

These are our improvement priorities for 2011/12.

We will:

- **develop and lead a monitoring and support service for adults with Aspergers and Autistic Spectrum disorder across four local authority areas.**
- **make use of public transport easier for our service users by engaging with transport providers to improve awareness of autism.**

SUBSTANCE MISUSE

4.33 We are working very closely with Cardiff social services and the Vale Community Safety Partnership. We are active members of the multi-disciplinary Area Planning Board, which operates across the Vale and Cardiff. By working closely with the voluntary sector, the waiting list for services has significantly reduced and currently it has been eliminated, an achievement recognised by the Welsh Government.

These are our improvement priorities for 2011/12.

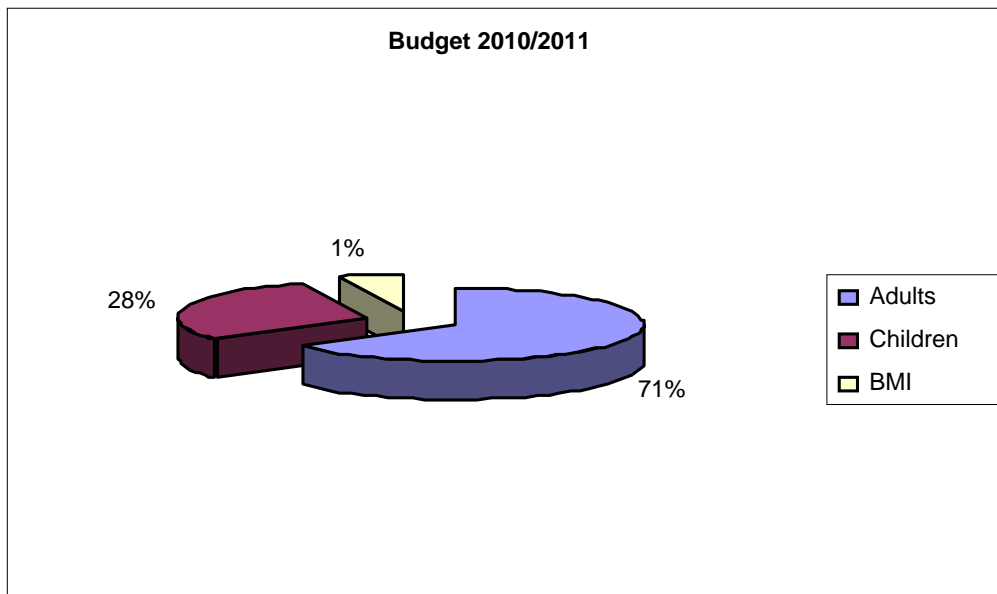
We will:

- **provide with the NHS, Cardiff Council and third sector partners a single point of entry for all services, to ensure that there is a clear system for service users which minimises waiting times.**
- **develop a tiered care pathway for this group of service users to ensure that service users receive the right service at the right time and that we do not create dependency.**

5. REPORT OF THE HEAD OF BUSINESS MANAGEMENT AND INNOVATION

Context and overall performance

- 5.1 The role of the Business Management and Innovation (BMI) Division is now well established within the Social Services Directorate. The Division has been able to make good use of the opportunities which arise from integrated management arrangements for Safeguarding, Quality Assurance and Policy. For example, the improved links between Protection of Vulnerable Adults and Provider Services Contracting have been a real asset in the past year. Each of the organisational functions within the Division has been reviewed and more work will be done to ensure that all the benefits of the structure can be realised.
- 5.2 During 2010/2011, spending on social services in the Vale of Glamorgan Council amounted to £44.7 million. This funding was used to provide adult and children services and the organisational arrangements required to support the two operational divisions appropriately.



5.3 The Directorate has made significant savings over the last four years, amounting to more than £7 million. The service is required to find another 4% of its budget in savings each year for the next three years. Wherever possible, direct services are being protected. However, the scale of savings (within a context where demand for services is growing) means that these services too have to meet the challenge of doing more with less. There is considerable work being done to review services and how needs can be met more efficiently - in part through greater collaboration with partner organisations including other local authorities and the NHS - to minimise any adverse effects of inevitable changes on service users and carers. These efforts to join up and reshape services will have even more priority in 2011/2012.

5.4 Ongoing challenges include:

- consolidating previous improvements;
- the rising proportion of older people in the Vale population;
- maximising use of resources through efficiencies;
- adhering to new requirements set out in legislation and guidance with no additional funding made available by the Welsh Government to implement the changes;
- maintaining our commitment to developing even further a competent and confident workforce (which is skilled, responsive and professional, able to

operate with a reduced volume of prescriptive government guidance about processes);

- getting increased benefits from partnership working; and
- managing reduced funding while minimising wherever possible the impact on front line service delivery.

LEADERSHIP AND CULTURE

- 5.5 The senior management structure for the social services directorate has been endorsed by Cabinet and, for the first time since 2007, all the senior posts are occupied on a permanent basis. This means that all social services functions will have the senior management capacity needed to provide clear leadership and direction in tackling the many challenges that lie ahead. The new Head of Adult Services is a joint appointment with the Cardiff and Vale UHB and he also manages the Vale Locality, responsible for community and primary health services. The revised allocation of responsibilities across the three divisions is working very well.
- 5.6 Restructuring of management tiers has taken place to clarify accountability in terms of roles, responsibilities and delegations. This has been completed within Children and Young People's Services and the Business Management and Innovation Division. The Cabinet has endorsed proposals for Adult Services, for implementation during 2011/2012. The proposed management structure within Adult Services will promote improved joint working with Cardiff Council and the Cardiff and Vale University Health Board.
- 5.7 There is in place a corporate and directorate annual planning timetable. Managers have been involved in implementing a wide range of action plans which are monitored at corporate and political levels. A new, three-year strategic Change Plan for Social Services has been developed as a result of the Director's Annual Report for 2009/2010. The evidence in this report demonstrated that the Directorate and the Council have good foundations on which to build. The Change Plan will help to ensure that, building on these strengths, there is in place a coherent direction for social services in the Vale

and an overarching framework for sustained improvement and service design. The Change Plan details the work to be undertaken by the service together with corporate and external partners to bring about transformational changes in the delivery of social services.

- 5.8 Progress in relation to the Change Plan will be monitored by key partners and external regulators, who were involved very helpfully in finalising the contents. Political oversight will be achieved through the Cabinet and Scrutiny processes within the Council, enabling Elected Members to understand and challenge the progress being made by the Directorate.
- 5.9 Producing the Change Plan has provided another opportunity to provide greater clarity about the values that underpin the work of the Social Services Directorate and the delivery of social care in the Vale of Glamorgan. The Vale Council believes strongly that social services work best when there is a strong and urgent focus on meeting the needs of service users and carers. This means making clear what residents can expect from the Council in terms of eligibility for services, the range of help available and what standards have been set regarding service quality. Some of these expectations have been set out in a social services charter.
- 5.10 In the longer-term, our goal is to increase the amount of social care that can be described as *citizen directed support*, which is about people being in control of the support they need to live their life as they choose. Such support is likely to have the following main components:
- reduced dependency so that people are more in control of their lives;
 - transparency – it should be clear to each individual the resources that have been allocated to provide their care and support packages;
 - assessment - the assessment process should be simplified so that less time is spent providing information and there is more of a focus on user-led assessment, where possible;
 - a personalised support plan that reflects an individual's ambitions for their life based on an early indication of the budget available;

- access to sources of support and advice, perhaps from a personal adviser, to help them draw up their plans;
- empowered individuals who determine their own choices and are helped to find new and innovative ways of getting a life style and being supported in a way that is right for them.

5.11 Behind the changes in areas such as structures, management arrangements and ways of working, there has been a wish to demonstrate that the Directorate is able to carry out its work in an ethical, professional, innovative and business-like way and to deal with big issues such as:

- safeguarding vulnerable people;
- improving services;
- managing increased demand for services and changing expectations; and
- tackling the effects of the crisis in public sector finances.

5.12 The Directorate has been more active in making sure that these expectations, values and aspirations are communicated to service users, carers, partner organisations and beyond. The council's website and our own e-bulletin have become key means for pursuing this aim but other opportunities, such as training events, meetings, plans and reports are also used.

5.13 Operational managers within the directorate have demonstrated a willingness to improve how we share information and learning across services at all levels, facilitated through monthly meetings of the Social Services Management Team. These opportunities extend to other managers in the Directorate by means of the Leadership Forum which works on issues of common interest. In 2010/2011, Results Based Accountability was the main theme.

5.14 Senior managers make a significant contribution to the work of the South East Wales Improvement Collaborative (SEWIC) for social services in ten local authority areas and the Integrating Health and Social Care Services Programme Board. This helps to ensure that the Vale is in the forefront of

efforts to develop services that can operate where necessary across local authority boundaries and/or in a joined up way with the NHS.

5.15 These were our improvement priorities for 2010/2011 and the progress made:

- *We will fully staff the senior management structure in 2010/2011.*

The Senior Management Team in Social Services is now complete.

- *We will ensure the Leadership Forum meets on a quarterly basis.*

We have developed a framework for change through the development of the Change Plan 2011-2014 and the Leadership Forum has taken forward responsibility for developing the use of Results Based Accountability.

- *We will progress the integration of health and social care services.*

This issue is examined in more detail later in the report but managers are making a significant contribution to the work of the Integrating Health and Social Care Services Programme Board.

- *We will progress discussions with the Cardiff and Vale University Health Board in relation to the appointment of a joint post at Head of Adult Services level.*

The new Head of Adult Services is a joint appointment with the Cardiff and Vale UHB and he also manages the Vale Locality, responsible for community and primary health services

- *We will review the management structure in adult services.*

This was delayed by the need to make a joint senior manager appointment with the UHB but a new structure has been agreed.

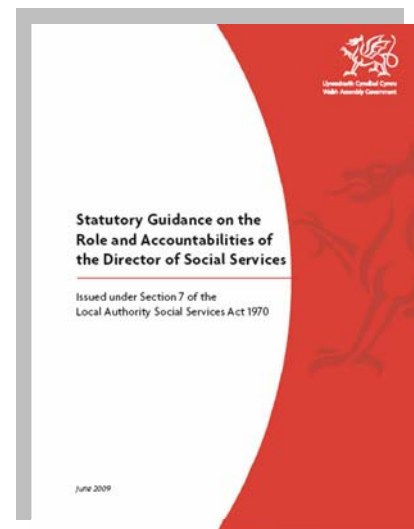
These are our improvement priorities for 2011/12.

We will:

- **implement the new management structure within adult services.**
- **help SEWIC to deliver its programme of collaborative initiatives.**
- **deliver the actions in the three-year Social Services Change Plan in accordance with the agreed timescales.**

CORPORATE AND POLITICAL SUPPORT

5.16 The arrangements in the Vale Council are strongly compliant with the statutory guidance on the role and accountabilities of the Director of Social Services issued by the Welsh Assembly Government in June 2009. There is a clear commitment to ensuring that the Director of Social Services is supported by sound arrangements that enable him to deliver good professional leadership. This Director chairs the group that is responsible for devising the three-year strategic Change Plan. The plan has been agreed by the Corporate Management Team and its members have supported this key initiative by ensuring that their service is represented by senior officers on the working group.

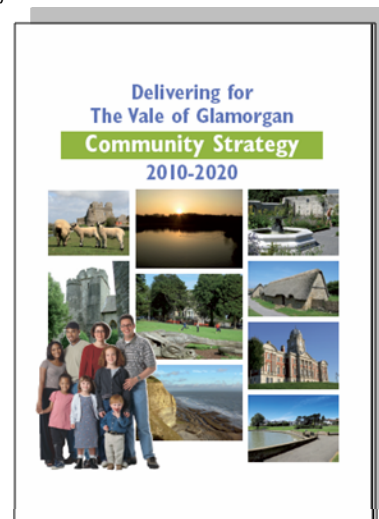


5.17 Social Services in the Vale continue to be managed within one Directorate and allocation of corporate responsibility is straightforward. It is acknowledged that the Director of Social Services retains final accountability for the quality and delivery of social care services whether these are directly provided or commissioned. He manages the three relevant Heads of Service.

5.18 The Director of Social Services reports directly to the Chief Executive. He is accountable to him and, through him, to the Council. They meet at least weekly and there are regular briefings. The Director is a member of the corporate management team, with a strategic role in delivering corporate

responsibilities and in influencing the direction of all council services. The Chief Executive and the Director of Social Services have established a good working relationship which ensures that they are able to fulfil both their distinct and complementary accountabilities.

- 5.19 With others in the Corporate Management Team, the Director of Social Services continues to make an important contribution to policy development, strategy and finance across the whole range of Council services and partnerships. For example, he is a member of the board which has oversight of education planning and he is a member of the implementation group which supports the work of the Local Service Board. He is regarded as having a key contribution to make in respect of wider corporate initiatives such as in the



promotion of wellbeing. The Heads of Service and other managers are similarly placed at the centre of the framework within which the Council functions corporately and represent the service on key corporate policy and working groups. In the past year, staff from social services have contributed effectively to the formulation of the Community Strategy and other corporate planning processes.

- 5.20 In discharging his accountabilities, the Director of Social Services is entrusted with considerable authority for managing relationships with Councillors, other Directors, senior staff in partner agencies, and service users and their families. These expectations are well established within the Council and key strategic partnerships. Appropriate leadership has been shown by the Chief Executive and the Director of Social Services to ensure that the Change Plan 2011 – 2014 is robust and accurately reflects the work the Council and its partners have to complete in ensuring that social services can meet statutory responsibilities despite the financial pressures facing the service.

- 5.21 Senior staff in the Directorate have direct access to all Councillors and a defined role in meetings of the Cabinet, Scrutiny Committee and the Council. At the level of governance, the Director of Social Services plays a key role in advising the Executive on policy-making and budget setting. This includes advising on reports to the Executive and the Council (from whatever source) which raise issues that may have an impact upon the way in which the social services function is performed.
- 5.22 The weekly liaison meeting between the Cabinet member for Social Care and Health, the Director and Heads of Service ensures that she is fully aware of issues affecting social services at all times and contributes a very helpful political perspective to discussions. This also means that the Cabinet member is able to brief the Leader of the Council when required and she presents all social services reports to Cabinet. The Director also meets with the Leader on a monthly basis. The Cabinet member is also a member of the Cardiff and Vale University Health Board and this means that issues affecting health and social care are flagged up early in the planning stage. Through her involvement in meetings with the WLGA and the Deputy Minister, the Cabinet member has developed a sound awareness of national policy and developments in other local authorities. She acts as the Executive champion for older people, children and carers and she is chairman of the Corporate Parenting Panel.
- 5.23 The Directorate is well engaged in setting the agenda for the Social Care and Health Scrutiny Committee and in providing reports that help members of the Committee to consider how the Council's policy and budgetary decisions are translated into managerial, professional and service strategies. Staff are expected to account in the Committee for the effectiveness of systems for policy implementation, performance management, and budget allocation and control. These arrangements work well and members of the Committee have developed considerable awareness and knowledge of the issues faced by social services. A key concern has been the Department's search for savings and efficiencies and a keen interest has been shown in the impact of budgetary pressures on service users.

5.24 These were our improvement priorities for 2010/2011 and the progress made.

- *We will maintain liaison meetings with the Cabinet member for Social Care and Health.*

We have maintained liaison meetings with the Cabinet member, ensuring that she is fully briefed on social services issues and can contribute political leadership.

- *We will support the Corporate Parenting Panel to ensure good outcomes.*

The membership of the Corporate Parenting Panel has been reviewed to include more elected members across the political parties and the work programme for 2010/2011 has been delivered.

- *We will maintain an effective Directorate presence in Corporate Working Groups.*

The Directorate has been engaged actively in all the major corporate initiatives, including job evaluation and the medium-term financial plan.

These are our improvement priorities for 2011/12.

We will:

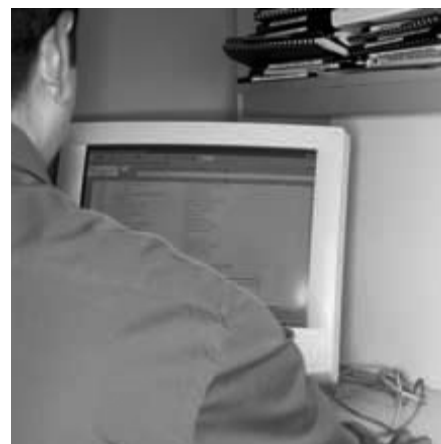
- **deliver the individual targets for corporate working set for senior officers in the Directorate.**
- **evaluate the work of the Corporate Parenting panel to ensure that it is achieving positive outcomes for children and young people.**
- **reintroduce the programme of Directorate briefings for all Elected Members.**

PERFORMANCE QUALITY/INFORMATION SYSTEMS AND MANAGEMENT

5.25 We have continued to develop our quality assurance framework and tools. The Directorate meets the requirements of the Council's performance management framework and has developed a performance culture within its management structure. The Directorate continues to report performance on a quarterly and monthly basis. The quality of the information recorded has improved during the year, although a manual check of data has been required in some instances. Information has been used to inform the reconfiguration of services during the year, including Children and Young People Services and VICS. Quality assurance has remained a priority even though the services have been under pressure for a number of reasons.

5.26 Performance is a regular item on the Divisional Management Team agendas within the Directorate and we use the Ffynnon database to good effect. We are working to improve the way in which management information is used to inform business planning within teams and services. Two teams are piloting an approach which incorporates results based accountability. Improvements have been made in the systems used to measure performance in respect of safeguarding work in children and adult services. A 'dashboard' is provided to managers as a way of focusing attention on key indicators and data accuracy. Auditing tools, such as case audits, are especially important and we have been able to transfer the practice experience which exists in children's services into our work for adult services.

5.27 In collaboration with five other local authorities, we are developing a common software system (SWIFT) to support case management processes in adult and children's services. During 2010/2011, the Unified Assessment Process module within the SWIFT electronic case management system has been implemented in adult services. Staff have received training and support to use the system. The



implementation of the Child Protection module has been partial only because of issues with the software.

5.28 The monitoring arrangements in relation to complaints from service users and carers have been improved during the year. An annual report for 2010/2011 has been compiled using the data. This demonstrates improved levels of compliance in respect of statutory timescales and outcomes for complainants. The use of mediation has increased during the year, with the result that fewer complaints are progressing through the formal processes for investigation and resolution.

5.29 During the year, the staff supervision policy was reviewed. An audit undertaken as part of the review confirmed that staff have been receiving formal supervision in a timely manner across the service. The Performance Development and Review System (PDRS) process is in place and, in 2010/2011, 100% of staff had a PDRS. This represents a significant achievement by staff.

5.30 One of the greatest challenges is sharing performance information with other agencies, particularly the NHS because we do not have joint systems and information data bases which connect effectively. Through the Integrating Health and Social Care Services Programme Board, greater use of the Ffynnon system is being explored.

5.31 These were our improvement priorities for 2010/2011 and the progress made.

- *We will undertake further work at team level to use management information to predict performance and resolve problems.*

The quality of data recorded has improved and this has been used in shaping and allocating resources for new services (for example, the Vale Integrated Care Service).

- *We will transfer the lessons learned in relation to audit processes/audit report reporting carried out within Children and Young People to Adult Services.*

The lessons learned in relation to audit processes/audit report reporting carried out within Children and Young People have been transferred to Adult Services. Regular quality assurance work is now standard procedure within both services.

- *We will ensure that the audit reporting and the issues log process are appropriately owned and prioritised by operational staff.*

Audit reporting and the issues log process are now appropriately owned and prioritised by operational staff.

- *We will develop a balanced score card approach to performance reporting.*
- Regular information is available for managers including financial, HR and service based details. This is not, however, currently available in an integrated format.

These are our improvement priorities for 2011/12.

We will:

- **continue to improve data quality, meeting the level required on a consistent basis.**
- **improve the quality assurance framework, ensuring that it effectively encompasses the lessons from audit, consultation and complaints, and supports appropriate ownership and prioritisation by operational staff.**
- **seek to improve our capacity for sharing performance information with the UHB.**

FINANCIAL STABILITY AND RESOURCES

5.32 The Council's Corporate Plan has been updated for the period 2011/2014 and is fully costed. The Council's medium term financial plan was updated in 2010/2011 and managers in Social Services were fully involved in this work. Resource Management is a key priority in the Change Plan 2011/2014 and this programme will be managed by the service and the corporate finance

section. Some aspects of financial planning will be improved, including obtaining better information about needs and complexities, in order to reach better aggregated data to inform service planning and produce better alignment of budgets with priority needs. Additionally, we must establish strong links between the service efficiency agenda and the partnership agenda, especially in developing new, more sustainable service models.

- 5.33 The overall theme for social services is the need to find innovative ways of reconciling the exceptionally challenging financial context for public services (locally and nationally), changes in demography and the effect on demand, the effectiveness of resource management systems and processes, and the need for achieving efficiencies at the same time as maintaining or improving service delivery and performance.
- 5.34 In 2010/2011, the Directorate managed to achieve a balanced budget again, although it was evident that some service areas were under great pressure. This was done through sound budget management processes and strategies and good overall financial management. The main pressure points were providing services for people with particularly complex needs, increased referrals in children's and adults' services, the costs associated with placements for looked after children and people with a learning disability, increases in the number of people presenting with dementia and autism, and the financial challenges associated with successful transition from children's services to adults' services.
- 5.35 In this context, the loss of revenue funding and the removal of external grant funding by the Welsh Government cause us particular concern. We have lost the Joint Working Grant, seen reductions in Cymorth funding and been asked to deal with the Welsh Government determined cap on charges for non-residential care which will have significant funding implications.
- 5.36 The Council has sought to alleviate the impact of all these pressures but the outcome remains that Social Services will be required to achieve 4%

efficiency savings each year for the next three years. This follows on from considerable budget savings in every year since 2007/2008.

5.37 Detail of expenditure in 2010/2011 is shown below.

Service	Budget (£'000)	Spend (£'000)	Variance (£'000)
Children and Young People	13,137	12,826	311
Adult Services			
Elderly	10,839	10,843	(4)
Physical and Sensory Disability	4,631	4,293	338
Mental Health	1,849	1,585	264
Learning Disability	10,376	10,078	298
EMI	4,923	6,004	(1,081)
Total Adult Services	32,618	32,803	(185)
Business Management and Innovation	396	501	(105)
Directorate Total	46,151	46,130	21

5.38 A review of the budget commitment systems for the community care budget was undertaken. The system was found to be robust and it will continue to be used as an integral part of the budget management framework. All service users continued to receive a benefit check, to ensure they are receiving money to which they are entitled. As a result, income for both the individual service user and the Council is maximised. The deferred charges system was fully implemented and resources allocated to ensure that income due to the Council was received. This had a marked effect with nearly £500,000 being received in the year as a result of the scheme.

5.39 Partnerships have been developed to support cost effective service development. Partnership working with domiciliary care providers has led to

the establishment of standard fees, producing reduced administration and speedier delivery to service users. We have also introduced electronic invoicing, to reduce further the administrative time needed for processing payments.

5.40 We started to implement the First Steps to Improvement Guidance in 2010/2011 and this will be continued in 2011/2012. The impact of a possible reduction in income as a result of this initiative will be monitored.

5.41 These were our improvement priorities for 2010/2011 and the progress made.

- *We will review the scheme of budget delegation.*

The budget delegation process in Adults Services was reviewed and simplified. The revised process gathers the information required to manage budgets without requiring a large time commitment from team managers

- *We will develop Brokerage/Direct Payments links, learning from best practice in other local authorities*

We have developed Brokerage services to ensure we make best use of the block contracts that are in place for day services. Social work teams are now aware of the services available and able to refer people to these services in a timely manner.

- *We will establish exit strategies for schemes dependent on short term funding.*

We have successfully ensured that services have been able to continue, despite the end of short-term grant funding. This has included services provided through the joint working grant and the independence and well being grant.

- *We will monitor the Joint Equipment Service to ensure continued effectiveness and we will audit service user satisfaction levels.*

We have been able to meet the requirements of service users with regard to the provision of equipment to individuals in a timely manner.

- *We will implement Unified Assessment Process (UAP) software update.*

The UAP software became available during 2010/2011. Staff in Adult Services have been trained and they are using the new system, which improves the quality of the information that can be recorded for service users.

- *We will extend the standard fee structure to remaining providers of domiciliary care.*
Extending the standard fee structure to the majority of providers of domiciliary care in the Vale has resulted in efficiencies within the sector and the Council.
- *We will implement agreed electronic spreadsheet invoicing.*
- Electronic spreadsheet invoicing has been implemented with some providers during 2010/2011. The impact has been a streamlining of payment processes for both the providers and the Council. Further work will continue in 2011/2012 to engage more providers in this process.

These are our improvement priorities for 2011/12.

We will:

- **implement the First Steps to Improvement Guidance and monitor the impact on the Council**
- **work with corporate colleagues to identify cost pressures on the service for the coming three years.**
- **work with SEWIC and the Integrating Health and Social Care Improvement Board to realise savings from collaborative working.**
- **continue engagement with providers to increase the number utilising the electronic spreadsheet invoicing system.**

COMMISSIONING AND CONTRACTING

5.42 The importance of effective commissioning in responding to changing needs, in bringing about more efficient service delivery and in modernising services has been recognised by the Directorate. Work has been undertaken to agree commissioning priorities within Children and Young People Services and Adult Services. A commissioning strategy for older people's services is being developed and this will be completed early in 2011/2012. The strategy has been informed by joint working undertaken with Cardiff Local Authority and Cardiff and Vale University Health Board regarding current capacity within the area, particularly in relation to care home placements. The strategy was also

informed by the workshop with strategic partners facilitated by John Bolton in December 2010, which encouraged a new perspective on service options for older people.

- 5.43 Service Level Agreements and contracts in place with third sector provider organisations have been reviewed. The purpose was to ensure that the services being commissioned meet service user needs and represent value for money. The independent domiciliary care sector and the Directorate have been collaborating to improve working practices. This has brought about streamlined processes, to the benefit of both parties.
- 5.44 Contracts have been renegotiated with some providers, to reflect the changing needs of service users and carers. These have ensured better use of block contracts in day services for older people with dementia-related illnesses and supported accommodation for adults with a learning difficulty. In conjunction with the South East Wales Improvement Consortium, the cost of some out of county placements in learning disabilities and mental health has been reviewed. There has been some success in reducing the cost of some packages whilst maintaining the levels of care for the service users. We have done considerable work in developing a framework for ensuring that the costs of residential care providers are taken properly into account when deciding the fees which the Council will pay for placements.
- 5.45 In August 2010/2011, the Welsh Assembly Government issued statutory guidance for social care commissioning. Meeting the guidance in its entirety represents a significant challenge for the service. The importance attached to this work is shown by the inclusion of a commissioning work stream within the Change Plan 2011/2014. Joint strategies with other organisations are being developed through SEWIC and the Integrating Health and Social Care Services Programme Board. We work hard to develop good relationships with independent service providers, in part through participation in the Provider Forum. Production of the Health, Social Care and Wellbeing Strategy has encouraged all agencies to focus on identifying need and demand for services.

- 5.46 On an annual basis, the Council asks providers to complete a questionnaire detailing:
- variations to registered provider;
 - variations to registered manager;
 - variations to category of care;
 - variations to number of beds;
 - actions from previous inspection reports; and
 - service user satisfaction surveys.
- 5.47 The team maintain an understanding and awareness of issues involving the sector through attendance at relevant Protection of Vulnerable Adult strategy meetings. This is also achieved through the engagement with advocacy providers who enter homes on a regular basis, and safeguarding staff within the POVA, Reviewing, Advocacy, Complaints and Contracting sub group of the Area Adult Protection Committee.
- 5.48 An internal audit report has highlighted some issues regarding how operational staff engage in commissioning processes and these are being addressed. The structure of the Contracting Team will be reviewed during 2011/2012 to ensure it is able to meet the increasing requirements that result from the statutory guidance and the audit report.
- 5.49 These were our improvement priorities for 2010/2011 and the progress made.
- *We will develop a more strategic approach to re-tendering services.*

Contracts have been renegotiated with some providers, to reflect the changing needs of service users.
 - *We will establish key priorities in relation to future commissioning.*

Older Peoples Services are the first priority for action and work is underway to develop a commissioning strategy.

- *We will develop plans to eradicate duplication of funding/funding of non-essential services.*

We have reviewed current commissioning arrangements to eradicate duplication of funding/funding of non-essential services. Service Level Agreements and contracts in place with third sector provider organisations have been reviewed.

- *We will promote greater understanding of commissioning through engagement with operational staff.*

All Service Level Agreements and contracts in place with third sector provider organisations have a nominated manager from the operational divisions.

- *We will develop a commissioning strategy for Learning Disability services as a key area. This will include a review of placements.*

This work was not completed in 2010/2011 but is a priority for action in 2011/2012.

- *We will develop a commissioning strategy for Extra Care.*

Progress was made in 2010/2011 in relation to the development of the first Extra Care Scheme in the Vale and planning permission was obtained in April 2011. Work to develop a strategy for older people's accommodation, including extra care, is ongoing.

These are our improvement priorities for 2011/12.

We will:

- **complete agreed service models and commissioning strategies for all areas of service.**
- **ensure the engagement of operational teams in reviewing and commissioning/de-commissioning of services to meet the needs of service users and carers.**
- **complete actions in the Change Plan in accordance with the timescales.**
- **examine with Cardiff & Vale UHB and Cardiff Council areas for joint commissioning.**

PLANNING AND PARTNERSHIPS

5.50 This has been a very significant year for the Directorate in improving its arrangements for planning in partnership with other council departments, other local authorities and other agencies, particularly the local health board and voluntary sector. We have embarked on a considerable programme of change to increase the scale of partnership working by social services, through the South East Wales Improvement Collaborative (SEWIC) and the Memorandum of Understanding with Bridgend County Borough Council.

5.51 With the support of Leaders and Chief Executives in each local authority, ten Directors of Social Services in South East Wales (Vale of Glamorgan, Bridgend, Cardiff, RCT, Merthyr Tydfil, Blaenau Gwent, Caerphilly, Torfaen, Newport and Monmouthshire) have formed the South East Wales Improvement Collaborative (SEWIC). They are working together to improve the provision and commissioning of social services in the region.

5.52 The ten Directors have now produced a feasibility study, to identify potential areas of collaboration across and within the SEWIC region - between local authorities and with wider key stakeholders such as NHS partners, Housing and the Third Sector. As a result, the SEWIC Board has agreed to take forward six new projects. These are:

- reviewing and negotiating high cost adult care packages;
- developing a regional high cost adult procurement hub or brokerage point;
- collaborative extension of Shared Lives/Adult Placements schemes;
- realising current investment plans for supported and extra care housing and development of additional capacity;
- implementing Assistive Technology (including Telecare) and the regional commissioning of such technology; and
- regional commissioning of adoption and fostering services.

5.53 This programme will help to provide the local authorities with an additional means of delivering service modernisation and cost effectiveness. Each project is still at an early stage and it is too early to say which of them will be adopted fully. However, there is a clear commitment by the Directors to work collaboratively wherever possible in all activities where social care services are being commissioned.

5.54 As part of the agreement for closer working between the Vale Council and Bridgend Council, there have been early discussions about how both social services departments can benefit from joint staff appointments, the sharing of specialist skills, and shared services. Potential areas for collaboration have been proposed, including the adult placement service and training.

5.55 The work of the Integrating Health and Social Care Improvement Board places this Council in a good position for responding positively to increased emphasis on implementing new service models. The programme board has senior representatives from the Vale Council and Cardiff Council and from the Cardiff and Vale University Health Board. It oversees the operational integration of selected health and social care services by taking responsibility for a number of key projects. Currently, this includes projects for:

- joint assessment and care planning ;
- securing long term care placements, especially for older people;
- learning disabilities integration;
- adult mental health integration;
- locality team development;

- coordinating service provision for children with the most complex needs.
- 5.56 The Vale of Glamorgan Council has developed an Integrated Community Strategy for 2011/2014 which provides one overall document for service planning for the Vale area. The Directorate worked with colleagues in the NHS and the third sector to produce the Health Social Care and Wellbeing chapter within the Strategy, building on the joint priorities already adopted in the Improvement Board.
- 5.57 The Health Social Care and Wellbeing Partnership has been very active in developing the statutory strategic plan for 2011/2014 and an implementation plan. A review of the planning framework for Health Social Care and Wellbeing has been undertaken which seeks to streamline the work being undertaken across the Partnership and the Integrating Services Programme Board. This work will be implemented in 2011/2012. The review has considered the sub group structure which works to the Partnership. Some but not all the sub groups met during 2010/2011. Within the proposed structure, work will be undertaken to establish joint engagement panels with Cardiff Council and the Cardiff and Vale UHB.
- 5.58 Managers from the Directorate contributed towards development of the strategic Children and Young People Plan and senior staff are involved in the Partnership and its business planning group, which helps to oversee the Cymorth funding.
- 5.59 The Directorate takes a lead role in both the Local Safeguarding Children's Board and the Area Adult Protection Committee. This work is described elsewhere in the report.
- 5.60 The challenge for Social Services is to make best use of this collaborative working to achieve better outcomes for users and carers and to gain efficiencies.
- 5.61 These were our improvement priorities for 2010/2011 and the progress made.

- *We will hold Health Social Care and Wellbeing sub group meetings and plan an annual cycle.*

Two of the sub groups continued to meet during 2010/2011, namely Challenge Vale and the Carers Sub Group. The two groups have been able to continue to develop services in accordance with their action plans. The other sub groups have not met during the year and these will be reviewed as part of the review of the partnership structure which will be completed in 2011/2012

- *We will ensure full engagement of stakeholders in the sub groups within the Health Social Care and Wellbeing partnership.*

Please see above

- *We will develop the Health Social Care and Wellbeing Strategy for 2011/2014, ensuring its full integration with a revised Community Strategy and other key strategies.*

The Health Social Care and Wellbeing Partnership has met and agreed the Strategy and Implementation Plan for 2011/2014.

- *We will agree performance targets for monitoring the new plan.*

We have supported the new corporate structure for supporting partnership working, based in the Chief Executive's Department, and the work to develop a management information framework.

- *We will continue to support the Carers Forum.*

The Forum and sub-group continue to implement the Carers Strategy.

These are our improvement priorities for 2011/12.

We will:

- **complete and implement the review of the strategic planning structure for Health, Social Care and Wellbeing.**
- **introduce an agreed monitoring framework to ensure that the implementation plan for the Health Social Care and Wellbeing Strategy is delivered.**
- **continue the work with Cardiff and the Cardiff and Vale UHB to develop and implement integrated health and social care services, where this will benefit service users and carers.**

WORKFORCE DEVELOPMENT, MANAGEMENT AND MANAGEMENT STRUCTURE

5.62 Staff in social services are aware that they work in a context where mistakes are seen as inexcusable and where there is limited public awareness about their success in managing risks or helping people with very complex needs. They have to operate nationally prescribed systems for managing cases which are overly bureaucratic and very time consuming. Sometimes, they have to cope with vacancies within their team which places a greater workload burden on the remaining staff, especially when demand is rising. All this can have an impact upon morale and confidence.

5.63 The Vale is fortunate that, in most areas of work, social services have a relatively stable and experienced workforce with a high level of appropriate qualifications. Where vacancies occur, we have been able to recruit very good replacements. Mainly through good use of the social care workforce development grant from the Welsh Assembly Government, our ability to train staff and support them in their efforts to acquire the additional skills they need has been sustained. Good progress has been made in reducing levels of sickness absence, lessening the burden on remaining staff and having a positive impact upon service quality.

- 5.64 At the same time, staff have been involved in developing our use of technology, partly as a means of increasing the time available for direct contact with service users. This has involved better use of the Council's Contact Centre (C1V), improving the case management databases and introducing new technology such as digi-pens which make recording easier. The challenge ahead is to reduce the amount of bureaucracy and paper-chasing required of our staff so that they can spend more time in direct contact with service users and carers.
- 5.65 Each team in social services has an annual Business Plan that details the relevant workforce issues for the coming financial year. This element of the Business Plans will be strengthened in 2011/2012. The Performance Development and Review System (PDRS) process identifies the training needs of individual staff. During 2010/2011, an annual training needs analysis was undertaken for both the Council's social care staff and for staff from other sectors involved in social care provision. The findings were used to develop the training programme for 2011/2012. We can demonstrate that 27% of all training provided during 2010/2011 was delivered to the independent/voluntary sector, exceeding the 25% target, and helping to equip all across the Vale for increased levels of multi-disciplinary and multi-organisational working. Despite this level of support and analysis, too many training events were cancelled during the year because of low take up. The reasons for this and the format for training will be reviewed in 2011/2012.
- 5.66 The implementation of the new software system to support the training function was a key priority in 2010/2011. The system was operational for April 2011 and will streamline administrative support within the training function.
- 5.67 This year we supported four team managers to complete the new Social Services Improvement Agency training development programme. This is a keystone of our ongoing work to improve standards of practice in front-line teams and more staff will be supported in 2011/2012. The revised supervision process introduced during 2009/2010 ensures staff are supported in their work. The review of the system in 2011/2011 confirmed that staff are receiving regular and planned supervision.

5.68 For courses which are not viable on a single local authority basis, training is delivered in partnership. We also have a Workforce Development Working group in place which includes representation from the third sector, independent providers, the local further education college and the wider Council. The Vale has continued to be actively represented on the Practice Assessment Panels and Programme Management Committees of our partners (that is Cardiff University, UWIC and the Open University). We contribute to the South East Wales Education and Training Group. As a result, the Directorate successfully provides sound practice learning opportunities for more than thirty social work students annually.

5.69 StaffNet is currently used for staff to access policies and procedures and to book training online. The Vale of Glamorgan website is used by external agencies and



partners to access the current training programme and book online courses. We are working with Bridgend Council to develop a joint training and development function which will improve the training and development opportunities available to staff in the sector.

5.70 The Vale has a range of policies in place which provide support to staff, including flexi-time, special leave scheme; career break scheme; job share. These all contribute to creating a stable workforce. Human Resources is one of the priority areas in the three-year Social Services Change Plan, which sets out a range of actions to ensure that the Vale has the best possible workforce – well-trained and motivated, supported by effective managers and systems which help them to perform well.

5.71 These were our improvement priorities for 2010/2011 and the progress made.

- *We will improve our systems to ensure that induction is delivered appropriately.*

Access to induction has been improved, enabling staff to access training in the early stages of employment.

- *We will support team managers involved in the SSIA and Managing Change programmes for adult and children's team managers respectively.*

Four team managers were supported to undertake the SSIA and Managing Change programmes for adult and children's team managers respectively.

- *We will undertake annually an evaluation of the training provided to the third and independent sectors.*

All training courses were evaluated by attendees during the year, to ensure that they met the training needs identified. Further work to develop an evaluation process will start in 2010/2011

- *We will ensure that a full data collection and analysis of the social care workforce training/development needs are undertaken for 2011/2012.*

A full data collection and analysis of the social care workforce training/development needs was undertaken in 2010/2011 which informed the programme for 2011/12.

- *We will implement the SDMS system by September 2010.*

The SDMS package was ready for implementation in April 2011.

These are our improvement priorities for 2011/12.

We will:

- **develop an evaluation tool for training.**
- **continue to work with Bridgend Council to develop a joint training and development function.**
- **develop a workforce planning framework for the social care sector in the Vale of Glamorgan.**
- **help to equip managers with any additional skills they need to develop staff and implement successful change programmes.**

SAFEGUARDING

5.72 The safeguarding unit is now well established within the Directorate and learning and experience is being transferred between the child and adult protection processes. During the year, an appointment has been made to the central Designated Lead Manager (DLM) post and this has made a positive impact on the service. The division of work between this post and the DLMs in the teams has been reviewed, enabling the central DLM to provide mentoring and support as well as undertake some developmental work. A workshop has been undertaken with all DLMs regarding the new All-Wales Guidance.

5.73 The relationship between Protection of Vulnerable Adults (POVA) arrangements, complaints and contracting has been strengthened during the year to ensure timely sharing of information and action if required.

5.74 We were unable to recruit to the post of Business Support Manager for the Area Adult Protection Committee (AAPC) and the Local Safeguarding Children Board (LSCB). The post has been filled on an interim basis for the latter part of the year with the priority being to support the LSCB. This arrangement is continuing into the new year while the implications of the intended changes in safeguarding structures set out in "Sustainable Social Services for Wales: A Framework for Action" are considered.



5.75 Within the Vale, significant improvement has taken place in arrangements to protect vulnerable adults. The AAPC is now well established and the annual report for 2010/2011 includes updates from the key agencies outlining their progress in relation to vulnerable adults. The actions from the 2009/2010



report have been mainly completed. The sub groups have an agreed work programme with progress reported to the AAPC and the Social Care and Health Scrutiny Committee.

- 5.76 The Council continues to host the Cardiff and Vale Deprivation of Liberty Safeguarding service. During 2010/2011, training was provided to 134 care homes across Cardiff and the Vale of Glamorgan.
- 5.77 During 2010/2011, the Council signed off as complete the Action Plan developed in response to the findings from the National Safeguarding Review. The follow up review undertaken by CSSIW following the Case Management Inquiry reported that progress had been made with the issues raised by the case. The Scrutiny Committee was involved in overseeing this process.
- 5.78 We are an active member of the South Wales Adult Protection Forum and the South Wales Child Protection Forum. In adult protection, the authority has signed up to the interim All Wales Protection of Vulnerable Adults (POVA) procedures. Within child protection, the All Wales procedures are the framework we use. Both sets of procedures are easily available to all staff and partner agencies.
- 5.79 These were our improvement priorities for 2010/2011 and the progress made.

Safeguarding Children

- *We will improve the business planning approach of the Local Safeguarding Children Board.*
We have provided additional resources to the Local Safeguarding Children Board to improve the business planning. This has enabled progress to be made against key actions within the business plan.
- *We will consolidate administrative support arrangements on a permanent basis.*
The support arrangements for the LSCB have been addressed on a short-term basis. The permanent structure will be reviewed during 2011/2012
- *We will complete implementation of the child protection module in the Integrated Children's System.*

We have implemented some of the child protection module in the Integrated Children's System. This is enabling staff to record and report on work with Children in a more timely manner.

- *We will explore further collaboration possibilities with Cardiff Local Safeguarding Children Board.*

We have had discussions regarding further collaboration with Cardiff Local Safeguarding Children Board but these are now on hold pending clarification of Welsh Government intentions in respect of safeguarding structures.

Safeguarding Adults

- *We will plan for implementation of the All Wales Protection of Vulnerable Adults policy and procedures - dissemination, briefings of staff and training programme.*

We have adopted the Interim All Wales Protection of Vulnerable Adults policy and procedures. Briefings have been provided for staff in all agencies.

- *We will develop and implement audit tools to monitor compliance with procedures and the quality of work undertaken.*

We have developed audit tools to monitor compliance with procedures and the quality of work undertaken. The audit tool was piloted in 2011/2012 and concluded that staff are using the new procedures effectively

- *We will develop use of the case conference stage.*

We have adopted the case conference stage within our Adult Protection procedures. This stage was not utilised in 2010/2011

- *We will explore integration with Cardiff Area Adult Protection Committee and sub groups.*

We have worked with Cardiff Area Adult Protection Committee and sub groups regarding possible closed joint working. This will not progress in the immediate future.

- *We will explore with relevant Local Health Boards how to ensure sufficient Designated Lead Manager capacity.*

We have worked with the Local Health Boards to ensure sufficient Designated Lead Manager capacity.

- *We will review workload and capacity of the Directorate's Central Designated Lead Manager.*

We have reviewed the workload and capacity of the Directorate's Central Designated Lead Manager and introduced an improved system of allocation. This has allowed the Central DLM to undertake mentoring and support for other staff and to be more engaged with the developmental work required to implement the new procedures.

Shared Safeguarding

- *We will develop joint investigative practice via a training programme.*
We have introduced joint investigative practice via a training programme.
- *We will recruit to the Business Manager post.*
The post has been filled on an interim basis and has been able to address some of the outstanding issues for the Local Safeguarding Children Board. This role will be reviewed during 2011/2012.

Deprivation of Liberty Safeguarding (DoLS)/Mental Capacity Act

- *We will develop quality standards for assessments under the DoLS procedures, compliant with Welsh Assembly Government guidance.*
We have developed quality standards for assessments under the DoLS procedures, compliant with Welsh Assembly Government guidance.
- *We will reinforce links with the Protection of Vulnerable Adults Team.*
We have reinforced the links with the Protection of Vulnerable Adults Team through regular dialogue with the Central Designated Lead Manager (POVA) and membership of the AAPC sub groups.
- *We will assist the University Health Board and the local authority in the development of policy and procedures.*
We have assisted the University Health Board and the Local Authority in the development of policy and procedures.
- *We will raise awareness of the DoLS with visitors to registered premises.*
We have delivered training, including provision of written material, to ensure that visitors are aware of DOLS

These are our improvement priorities for 2011/12.

We will:

Safeguarding Children

- agree a way forward in respect of the Child Protection Module in ICS and progress implementation as appropriate.
- devise a local procedure to implement the Child Sexual Exploitation Protocol.
- review the Child Protection audit process, including collation of findings, identification of themes and reporting.
- progress plans for joint investigation training with the Police.
- launch a Neglect Protocol in the Vale.

Adult Safeguarding

- review the implementation of All Wales POVA policy and procedures with other South Wales authorities.
- consider the implementation of the South Wales audit tool when available.
- develop the use of the case conference stage and increased involvement of service users and their families in line with the All Wales procedures.
- finalise the AAPC Annual Report 2010/11 and Action Plan 2011-14.
- develop a provider performance and home closure protocol.

Shared Safeguarding

- respond to the current safeguarding reviews in respect of LSCBs and POVA.
- review the role of the Business Manager

Deprivation of Liberty Safeguarding (DoLS)/Mental Capacity Act Actions

- continue to improve NHS awareness of the Mental Capacity Act and the DoLS procedures through providing training at all levels within UHB.
- develop quality standards for assessments under the DoLS procedures compliant with Welsh Assembly Government Guidance.
- assist the UHB and the LA in the development of Policy and Procedures.

INVOLVING USERS AND CARERS

5.80 The Vale Older People's Strategy Forum has a wide membership. It is led by a fourteen member Executive Group who represent the needs of older people in the Vale by sitting on a range of working parties in the statutory and third sectors at local and national levels. This work is further progressed by the Executive's four working sub-groups who work on Health, Age Discrimination, Housing and Transport issues. The Council supports the work of the Older People's Strategy Forum, its Executive Group and working-Sub Groups. The Forum has been consulted about service developments consistently during the year (for example, the day services review). Further work needs to be done to ensure the same level of representation for other client groups and this will be achieved through the proposals for changes in the strategic planning processes for Health, Social Care and Wellbeing and Children and Young People.

5.81 Social Services manage a two-year rolling programme of consultation with service users, to gather information regarding their experiences when they use our support. This information is fed back to services managers, to influence service developments and reconfiguration. In the interests of openness and transparency, we make the results of these consultations available on our website. Although the process continues to work well in general, the level of consultation work completed in 2010/2011 was reduced because of a key vacancy within the Business Management and Innovation Division but it will continue from July 2011. Work will be undertaken in 2011/2012 to introduce a consultation timetable that incorporates both Adult Services and Children and Young People's Services in the same year, based on agreed priorities.



5.82 The performance in relation to the completion of carers' assessments has been improving following appointment of three part time officers to undertake the work. The Council has received positive comments from carers regarding the quality of work being done.

5.83 A Carers Forum has been established in the Vale and membership is increasing. The Forum works actively working with the Council to review services available for carers and to monitor implementation of the Carers Strategy, which was updated in 2009/2010. The Vale holds a well attended Carers Day during National Carers week, which receives positive feedback. During 2010/2011 a Carers Handbook was produced and widely distributed, with a positive response from carers.

5.84 These were our improvement priorities for 2010/2011 and the progress made:

- We have established a Carers Forum and continued to support it during 2010/2011.
- The Carers sub group within the Health Social Care and Wellbeing Partnership has continued to review services and ensure progress against the priorities in the Carers Strategy.
- We have produced a Carers Handbook, which has been well received.
- We have consulted service users on service reconfiguration plans.
- We have improved the role of advocacy during the year. The Age Concern project within older people's homes has been advertised and more homes now participate in the scheme. Progress has been made during the year to link the findings of advocacy services with the POVA process and the contracting process.



These are our improvement priorities for 2011/12.

We will:

- **review the services made available with the carers funding, to ensure that these continue to meet the needs of carers.**
- **determine what work is required to meet the requirements of the Carers Measure and develop an implementation plan.**
- **ensure that the programme of consultation work with service users and carers is delivered during 2011/2012.**

- 5.85 Equality and diversity forms an integral part of service planning. All divisions within social services are working towards the Vale Equalities Scheme, which has identified four levels of achievement. This work will continue in 2011/2012. The Directorate is a member of the Corporate Equalities Working Group which looks at issues of disability, language, gender and race. There is mandatory training for staff.
- 5.86 A review of all public information has started and the work is ongoing. During the year, the number of distribution points for social services information increased to 153. This includes each of the 33 GP surgeries. The Vale of Glamorgan Council website is currently rated first within a league table of 431 local authority websites across the UK. The Social Services information is regularly updated on the site. The use of the website as a vehicle to support information access for both staff and the public has been progressed.
- 5.87 All service changes in Social Services have been the subject of an Equality Impact Assessments (EIAs) and these are now included as appropriate in Cabinet Reports. This is a requirement across the Council. We use the EIAs to identify any improvement actions and feed these into the service planning process. Capital resources are used to ensure that services continue to move towards compliance with the Disability Discrimination Act.
- 5.88 These were our improvement priorities for 2010/2011 and the progress made.
- *We will further improve consistency and reduce duplication when information is provided to customers.*
- We are reviewing our public information and increasing the number of distribution points across the Vale
- *We will develop our contract monitoring arrangements.*
- These have been highlighted in section 5.4 above.
- *We will improve the system for collating information within Contact One Vale about activity signposting people to other sources of help and making referrals to other agencies.*

We have worked with Contact 1 Vale to improve the system for collating information to signpost people to other sources of help and making referrals to other agencies. This has ensured that enquirers are dealt with in a more timely manner and been assisted to find alternative support where appropriate.

6. THE DIRECTOR'S OVERVIEW AND THE WAY FORWARD

6.1 My overall conclusion about the work of social services in 2010-2011 is set out in the summary at the beginning of this report on page 7.

Managing Change

6.2 In my last Annual Report, I described the many challenges that face social services. The report described how, on behalf of service users and carers, we need to deal with issues such as:

- the increasing demand for services because of population changes, different family structures, growing numbers of looked after children, those on the child protection register, older people with complex care needs, people registered with the local authority as having a learning disability;
- people's changing expectations about the sort of help they want and how much control they will have over the services provided; and
- managing the crisis in public sector finances which means continuing cuts to our budgets.

6.3 I also set out in the report the work needed to ensure that social services in the Vale are able to meet those challenges. The Vale Cabinet agreed these improvement priorities and asked me to produce a Change Plan, describing how they would be achieved over a three-year period.

6.4 The evidence in last year's Annual Report demonstrated that the Vale is building on good foundations. We were able to show sustained progress in areas such as making sure that people were satisfied with services, providing a skilled and experienced workforce and a more responsive range of services which focus on supporting people to remain as independent as possible. The new Change Plan is designed to ensure that, building upon these strengths, there is a clear direction for social services in the Vale and a blueprint for

sustained improvement and service redesign. The plan is available on the Council's website

http://www.valeofglamorgan.gov.uk/living/social_care/change_plan.aspx



It sets out formally as a Council strategy the long-term strategic plan for social services with key actions, responsible officers for delivering those actions and timescales for completion.

- 6.5 There are seven priority areas in the plan:
- i. using different ways to improve access to information and services;
 - ii. joining up health and social care services in cooperation with the Cardiff and Vale University Health Board and Cardiff Council;
 - iii. joining up services in the community for children and young people;
 - iv. improving how we shape and commission social care services³;
 - v. providing a stable, skilled workforce and reducing the amount of bureaucracy and paper-chasing our staff have to do so that they can spend more time in direct contact with service users and carers;
 - vi. making sure that the Council uses the money and assets it provides for social care services as effectively as possible;
 - vii. increasing the amount of social care that can be described as *citizen directed support*, which means people being in control of the support they need to live their life as they choose⁴.

6.6 The Council anticipates that delivering the actions set out in the plan will realise the following benefits.

1) ³ Commissioning social care involves deciding what services are required to respond effectively to the needs of children, young people and adults - both now and in the future - and then deciding about the capacity, location, cost and quality of services, who will deliver them and how).

⁴ In the Change Plan, this is called *co-production*.

- Provide sustainable, flexible and innovative services (which can adjust to new circumstances and needs).
- Increase user and carer satisfaction with the range of services (which emphasise recovery, restoration and reablement).
- Provide services users and carers with a strong voice and real control over their services.
- Make best use of the fact that social services is an integral part of local government (able to call upon all the resources available within the local authority to meet statutory obligations including the community leadership role, the expertise available in other parts of the council, performance management and improvement frameworks, etc.).
- Develop even further a competent and confident workforce (which is skilled, responsive and professional, able to operate with a reduced volume of prescriptive government guidance about processes).
- Work together more collaboratively, especially with the NHS (to deliver better service integration).
- Secure better value in the use of scarce resources (through efficient and effective delivery of services, promoting independence and reducing demand for intensive support services through a focus on prevention).

6.7 Events over the past year have made our three-year programme of change even more essential. The Vale Change Plan anticipates many of the themes contained in the strategic plan produced by the Welsh Government for putting social services nationally and locally on a better footing, ‘Sustainable Social Services for Wales – A Framework for Action’

<http://wales.gov.uk/docs/dhss/publications/110216frameworken.pdf>

This framework emphasises the need to collaborate with other local authorities and integrate services with the NHS.

6.8 Much progress is being made. For example, we are already giving considerable priority to planning with the NHS and other partners how to provide more joined up services in service areas such as families with complex needs, transition to adulthood for disabled children and reablement for older people. One of the most striking features to emerge from the reports

by the Heads of Service is the amount of partnership activity taking place at both the strategic and operational levels. Very productive efforts are being made to have better working relationships between



adults' and children's services, between social services and other Council services, with the NHS, third sector and private sector organisations and with other councils voluntary across geographical boundaries. Not only does this help us to develop more joined up services but it also it helps to improve assessment and care management in individual cases through faster response rates, better care planning and reviews, more effective arrangements for transition from one service to another.

- 6.9 As set out in the section of this report that deals with planning and collaborative working, the work of the Integrating Health and Social Care Services Programme Board places the Vale Council in a good position for responding positively to increased emphasis on implementing new service models.
- 6.10 The programme board has senior representatives from the Vale Council and Cardiff Council and from the Cardiff and Vale University Health Board. Under the auspices of a formal collaborative agreement, it co-ordinates agreed projects, defines the outcomes expected and provides the overarching leadership required to manage and take forward significant change, promoting partnership approaches across both public and third sector bodies. The board has allocated a senior responsible officer to implement and oversee the following delivery programmes:
- Mental Health;
 - Older People's Services;
 - Learning Disability;
 - Substance Misuse;
 - Children's Services (including IFSS);
 - Programme Delivery Support function;
 - Complex Care for Adults Project.

- 6.11 Creation of a Unified Health Board has increased the opportunities for partnership working. An appointment to the joint post of Head of Adult Services and Locality Manager for the Cardiff and Vale UHB was made in 2010 and the successful candidate took up post in January 2011. This is a very significant development in supporting our aim to promote joint working between the Council and University Health Board. Further joint management posts with Cardiff Council in adult services have now been established.
- 6.12 The pace of collaboration with the NHS is increasing but sustained momentum depends on dealing with some of the more intractable problems – different approaches to commissioning, the risks of cost shunting, slow progress in using formal agreements such as Section 33 agreements, limited understanding within the NHS about the way in which local authorities work and vice versa, conflicting performance management drivers and difficulties in reconciling IT systems. .
- 6.13 The Vale has already embarked on a considerable programme of change to increase the scale of partnership working by social services, through the South East Wales Improvement Collaborative (SEWIC) and the Memorandum of Understanding with Bridgend County Borough Council.
- 6.14 With the support of Leaders and Chief Executives in each local authority as part of “Connecting South East Wales”, ten Directors of Social Services in South East Wales (Vale of Glamorgan, Bridgend, Cardiff, RCT, Merthyr Tydfil, Blaenau Gwent, Caerphilly, Torfaen, Newport and Monmouthshire) have formed the South East Wales Improvement Collaborative (SEWIC). We are working together to improve the provision and commissioning of social services in the region.
- 6.15 The collaborative has already established a pioneering Regional Commissioning Unit to negotiate with independent providers of fostering and residential placements for children in respect of fees and service quality. The aggregate spending on Looked After Children by the ten SEWIC authorities is

in excess of £81million per year. Purchasing of fostering services from the independent sector alone comprises over £27 million of that expenditure and the figure was rising rapidly (in excess of 30% per year). An early, independent evaluation of the Unit indicates considerable success. Price uplifts from providers have been avoided through SEWIC negotiations. These are worth at least £500,000 per year and exceed the direct costs of the regional unit by around 80%. Cost efficiencies and volume discounted prices have been achieved. Outcomes for children also appear to be improving.



- 6.16 The ten Directors have produced a feasibility study, to identify other potential areas of collaboration across and within the SEWIC region - between local authorities and with wider key stakeholders such as NHS partners, Housing and the Third Sector. As a result, the SEWIC Board has agreed to take forward six projects. These are:
- reviewing and negotiating high cost adult care packages;
 - developing a regional high cost adult services procurement hub or brokerage point;
 - collaborative extension of Shared Lives/Adult Placements schemes;
 - realising current investment plans for supported and extra care housing and development of additional capacity;
 - implementing Assistive Technology (including Telecare) and the regional commissioning of such technology; and
 - regional commissioning of adoption and fostering services.
- 6.17 The overall programme will help to provide the local authorities with an additional means of delivering service modernisation and cost effectiveness. The projects are at different stages of development but already there is strong evidence of purposeful and effective collaboration.

- 6.18 As part of the agreement for closer working between the Vale Council and Bridgend Council, there have been discussions about how both social services departments can benefit from joint staff appointments, the sharing of specialist skills, and shared services. Potential areas for collaboration have been proposed, including the adult placement service and training.
- 6.19 Along with these individual projects, there have been considerable efforts made to improve the overall framework for partnership working by social services. We have been actively engaged in taking forward the work of the five strategic multi-agency partnerships in the Vale, which operate under the leadership of the Local Services Board. This is especially the case with the Health, Social Care and Wellbeing Partnership and the Children and Young People Partnership. Both partnerships have made good progress in producing the three-year plans required by the Welsh Government and putting in place performance management systems which monitor the extent to which they have been implemented.

Managing our resources

- 6.20 There are formidable challenges facing us, most obviously in finding ways to bridge the gap between the resources available and the year on year rises in social care demand and costs. The causes are many and varied - the demographic growth in the numbers of people who are very old and frail; increased citizen expectations; more complex family structures; increasing numbers of people with long standing and complex disabilities; and greater awareness of the need for action to safeguard vulnerable children and adults. We know that, in many areas of work, demand is increasing while our capacity at best remains the same and sometimes has been reduced.
- 6.21 We have to deal with a growing volume of referrals and greater complexity in cases where social services are already involved whilst simultaneously trying to improve standards of care and provide more responsive services. At the same time, 'Sustainable Social Services for Wales – A Framework for Action' also poses a whole range of new challenges. These will have to be met at a time of severe financial constraints for local government and social services.

Social services must respond to increasing demand and greater expectations but they have to do so within the resources available. The amount of money available to social services is decided primarily by central government (Parliament in London and the Welsh Government in Cardiff).

6.22 Although it was evident that some service areas were under great pressure in 2010/2011, the Directorate achieved a balanced budget again. This was done through sound budget management processes and strategies characterised by a shared sense of direction and priorities for spending, a better understanding of what things cost and how to be efficient, developing financial skills among managers and a willingness to tackle value for money issues. We have tried to reduce the use made of very expensive long-term care placements, often outside the Vale, both for children and adults. These do not always provide the sort of help people need. We are also cooperating more with other local authorities in negotiating the costs of these placements and keeping close watch on the fees that are paid.

6.23 There is good evidence that local government is already the most efficient part of the public sector and, as shown above, social services in the Vale has been in the forefront of steps to reduce spending. In this context, the loss of revenue funding and the removal of external grant funding by the Welsh Government such as the Joint Working Grant cause us special concern. The Council has sought to alleviate the impact of all these pressures but the outcome remains that social services will be required to achieve 4% efficiency savings each year for the next three years. This follows on from considerable budget savings in every year since 2007/2008.

6.24 We welcome the additional funding for social services provided by the Welsh Government in the three-year revenue settlement announced in January 2011. This funding is crucial but it has to be seen in context. Across Wales, there is evidence of a net over spend for



2010/2011 of £18.5 million across Wales in respect of social services. The cost of delivering social care continues to experience significant price inflation. Additional unfunded pressures are becoming evident. Most pressing are the increasing costs in children's services arising from the costs of agency placements, a growth in demand for Looked After Children services, fostering rates and adoption costs and the recruitment and retention of qualified social workers. In addition, we have pressures in older people's services (especially in respect of people with dementia-related illnesses), learning and physical disability services and mental health services.

- 6.25 Care home fee inflation continues to be a major concern, with annual price inflation running at around 5.25 per cent. Across Wales, spending in this area has risen more than 50 per cent over the last decade. Some providers are willing to challenge council fee rates in the courts, as demonstrated in the recent Pembrokeshire case. Although the Vale has sought to maintain good relations with the private sector, this is difficult when we have to reconcile the need for securing high quality local provision with the financial consequences for the Council.
- 6.26 We anticipate too that the financial impact of the introduction of the £50 weekly cap on non-residential care charges will be more substantial than anticipated. The concern relates primarily to the numbers of people who currently pay privately for home care who will now seek support from the Council to meet these costs.
- 6.27 With much help from other parts of the Council, social services are working hard to prevent this very difficult financial context from undermining our efforts to sustain services and improve the quality of care they offer. The sections in this report on financial stability, commissioning and the workforce describe some of the ways in which we have been successful and our plans for further action over the next year.
- 6.28 For example, our work to decrease the amount of time staff are away from work because of sickness has been very effective, lessening the burden on

remaining staff and having a positive impact upon service quality. The Vale is fortunate that, in most areas of work, social services have a relatively stable and experienced workforce. Where vacancies occur, we have been able to recruit very good replacements. This year all our staff had an appraisal against their personal development plan. We have improved our ability to involve our staff as much as possible and to keep them informed, in part through producing a regular e-bulletin of important news.

6.29 Staff have responded very well, contributing to plans for change and implementing them even when they are concerned that the programmes of change will present threats as well as opportunities. They continue to gain new qualifications and skills. For example, some staff have been using new forms of information technology, partly as a means of increasing the time available for direct contact with service users.

Promoting independence

6.30 However, given the financial context and increasing demands for services, the only sustainable answer is to change the pattern of services, based upon an understanding that we



need to promote independence and focus services away from institutional settings and into people's homes and local communities.

6.31 We have been working with the UHB and Cardiff Council to develop the approach set out in the SSIA report *Better Support at Lower Cost*, ensuring that reablement becomes even more embedded in older people's services. Reablement is about supporting people to regain, following illness or injury, the skills needed for day-to-day living such as dressing, cooking and eating.

The service is often targeted at people who have just left hospital and involves a short period of intensive support. We are pressing on with our efforts to increase the use made of direct payments and telecare. Products like falls detectors, bed occupancy sensors and gas detectors have the potential to reduce the incidence of problems associated with elderly and disabled people living at home. Modernising day services is one of our specific aims, along with the need to support more people with physical disabilities to adapt their homes and receive equipment to help sustain their independence. For children and their families, services such as Flying Start and intensive family support which target the causes and impact of poor care/carer's stress have a central role.

- 6.32 As part of plans for remodelling services, we have increased the speed of plans for joining up or integrating services, increasingly through formal agreements with our partners (including voluntary organisations). For example, there are emerging plans for moving towards single access points for health and social services. The overall task is reducing the number of people dependent on social services or reducing the costs of care for those most in need of support through services such as reablement, intermediate care, community equipment, support related housing, assistive technology, crisis response, help towards independence and work. We must promote prevention and ensure that low-level services do not lead to increasing dependency. The approach will build upon developments to date and help us to change from reactive, crisis management to preventable, proactive, coordinated care in the community, with a particular emphasis on high-risk groups and those with increasing frailty and vulnerability.
- 6.33 Inevitably, some of this work has met with opposition. Changes in the pattern of services and to individual service settings such as day centres arouse considerable anxiety among those who depend upon them to keep safe and have a better quality of life. Through consultation and advocacy, we have tried to engage with service users and carers in helping us to plan these changes to services. We recognise that they often know best what works for them and whether proposals for change properly reflect their hopes and

wishes. We also consult extensively with providers of services and partner agencies. In the interests of openness and transparency, we make the results of these consultations available on our website and in Scrutiny Committee. There is still more to be done to ensure consistent involvement across all the service user groups.

6.34 As I said last year, getting full commitment to the programme of change that we must undertake (to manage the challenges posed by increasing demand for services, rising expectations and reducing resources) requires us to increase the amount of social care that can be described as *citizen directed support*⁵. We believe that the first question we should be asking is: *what is the best way of helping this individual and family, one which preserves their dignity and independence either when they are in crisis or when they need assistance in their lives?* From here emerges the next question: *how can we do this in close collaboration with others such as the different departments within the Council, the NHS, the Third or voluntary sector and independent social care providers?* Finally, *can we use all the resources at our disposal in ways that are cost effective; value the range of contributions from all organisations, do not involve duplication or over provision; and do not create dependency?* We are working hard to devise service models for the Vale of Glamorgan that will help to answer these questions.

6.35 We do need to become more intent on looking for opportunities to move forward this agenda, placing a value on co-production of services – that is delivering public services in an equal and reciprocal relationship between professionals, people using services, their families and their neighbours. There appears to be good evidence that where social services



⁵*Citizen directed support* means people being in control of the support they need to live their life as they choose.

activities are delivered in this way, both services and neighbourhoods become far more effective at generating positive change and helping people to become more self-reliant in due course. The people who are currently defined as users, clients or patients are the basic building blocks of our neighbourhood-level support systems – families and communities. One of our tasks is to support existing or to help remake, wherever possible, the social networks that reduce demand on services and enable public service interventions to succeed.

6.36 We have been able this year to improve performance yet again in areas which service users and carers tell us are most important to them – providing good information, timely assessments of need, prompt provision of help and regular reviews. There are still waiting lists for assessment or services in some areas, especially Occupational Therapy and Older People Mental Health. However, we have nearly completed the work of reconfiguring assessment and care management and fieldwork services across adult and children’s services, to modernise our structures and to make them more effective. Now that the new arrangements are in place, it has been possible to recruit new staff and to fill vacancies. Overall performance is improving steadily, although further work is needed to modernise some service areas such as day services where the focus needs to be more upon achieving agreed outcomes.

6.37 There is a clear commitment in the Vale Council to ensuring that I am supported by sound arrangements that enable me to deliver good professional leadership. The Cabinet member for Social Care and Health is also a member of the Cardiff and Vale University Health Board and this means that issues affecting health and social care are tackled in a consistent and productive way. Increasingly, we see the benefits of having a unified social services directorate, dealing with both children and adults. This helps us to ensure that services are delivered in ways that are family oriented but also with a clear focus on safeguarding the vulnerable and promoting independence.

Appendix 1: Glossary of Terms

- **AAPC** - Area Adult Protection Committee
- **CSSIW** - Care and Social Services Inspectorate, Wales
- **Cymorth grant** - A Welsh Assembly Government Grant distributed by Children and Young People's Partnerships
- **Direct Payments** - Most adult service users, carers, and carers of children with a disability can choose to organise services themselves and receive regular payments from the council to pay for all or part of this.
- **Extra Care** - A service providing accommodation with care services. Service users have more independence than they would in traditional residential care.
- **HSC&WB** - Health, Social Care and Wellbeing
- **ICS** - Integrated Children's System. A system for recording assessment and care management information of children in need throughout Wales.
- **IT** - Information Technology. Computers and related technology such as telephones and networks.
- **LSCB** - Local Safeguarding Children Board
- **OT** - Occupational Therapy
- **POVA** - Protection of Vulnerable Adults
- **Reablement** - Regaining skills, confidence and independence (often after an illness or accident).
- **SSIA** - Social Services Improvement Agency. A partnership of all the councils in Wales, with the Welsh Assembly Government and the Welsh Local Government Association.
- **Telecare** - Using a range of electronic sensors to detect that vulnerable people may need help, and alerting the alarm centre, or a carer to the potential problem.
- **Third sector** - The voluntary sector, community sector or non-profit sector
- **UA** - Unified Assessment. The system used to assess an individual's need for health and social care.

Appendix 2 Improvement Priorities for 2011/12

1. Children and Young People Services

We will:

- award the contract for the Independent Advocacy service early in 2011 and the service will be operational by the summer of 2011.
- review the intake and duty systems to ensure referrals received are appropriate and make changes to the ICS electronic case management system as necessary.
- review the Child in Need individual case planning process to ensure consistency across the service and raise practice standards and performance. We will introduce standardised Child in Need planning and reviewing documents, making full reference to developments in the ICS electronic case management system.
- ensure that all partnership opportunities and developments are fully utilised to support the children and young people assessed as in greatest need, especially via Families First and IFSS.
- gain corporate commitment to improving work experience and employment opportunities within the Council for young care leavers.
- reduce the overall Looked After Children population by 10% by 2013 through a range of measures primarily focussing on changing the status of some long term and stable placements.
- produce a Commissioning Strategy for Children and Young People Services which will incorporate the accommodation needs of young homeless people.
- establish a multi-agency Complex Case Panel with Education and Health to consider joint planning and funding arrangements for those Looked After Children with more challenging and complex needs.
- implement the National Minimum Fostering Allowances in 2011/12, in line with Welsh Government guidance.
- implement the action plans that will be produced in response to the CSSIW inspections of the Fostering and Adoption Services.
- in partnership with Adult Services, consider the benefits of moving from the current virtual team approach within the Transitions Service to integrated provision under one manager.
- support collaborative working and service integration opportunities with Cardiff City Council and the UHB through the Integrating Health and Social Care Services delivery programme.

- review the Child in Need planning process to ensure consistency across the Service and raise practice standards and performance.
- formalise the move to Independent Reviewing of Short Breaks placements for eligible children and young people.

2. Adult Services

We will:

- establish a joint strategic post with Cardiff Council, to provide clear direction for future collaborative service improvement.
- ensure that service users living in supported and other accommodation can make full use of appropriate Telecare equipment to facilitate independence living.
- complete the consultation phase started on modernising day services (e.g. with greater focus on the aspirations of individuals, promotion of independence, community presence and partnership collaboration) and establish an agreed way forward.
- implement the integrated management structure and develop a joint post with Cardiff to lead the strategic direction for social care (Shaping Services, Providing Direction & Organising).
- work with Health to integrate the AMHP service across the CMHT and the crisis and home treatment service (Getting Help).
- introduce an integrated CSW service/outreach worker service across Health and Social Services for Cardiff and the Vale of Glamorgan (Providing Services).
- develop an integrated Crisis Response Service for Older People with Mental Health problems, in partnership with the NHS, covering out of hours and linked with existing CMHTOPs.
- develop a residential intermediate care service at Ty Dyfan, working with the NHS.
- reduce further the waiting times for assessment and casework involvement.
- integrate VICS with complementary services provided by the UHB in the locality to ensure seamless care provision. We will build upon the positive experiences and work with the voluntary sector to build this service in partnership with them.
- deliver even better response times to initial requests for help through improved processes and systems between care management and the contact centre, C1V.
- amend the proposals for reconfiguring day services in response to consultation and seek political approval for the proposed changes.

- follow through the proposal to ensure that Carers Support Officer capacity is available in all assessment care management teams.
- develop and lead a monitoring and support service for adults with Aspergers and Autistic Spectrum disorder across four local authority areas.
- make use of public transport easier for our service users by engaging with transport providers to improve awareness of autism.
- provide with the NHS, Cardiff Council and third sector partners a single point of entry for all services, to ensure that there is a clear system for service users which minimises waiting times.
- develop a tiered care pathway for this group of service users to ensure that service users receive the right service at the right time and that we do not create dependency.

3. Business Management and Innovation

We will:

- implement the new management structure within Adult Services.
- help SEWIC to deliver its programme of collaborative initiatives.
- Deliver the actions in the three-year Social Services Change Plan in accordance with the agreed timescales.
- deliver the individual targets for corporate working set for senior officers in the Directorate.
- evaluate the work of the Corporate Parenting panel to ensure that it is achieving positive outcomes for children and young people.
- reintroduce the programme of Directorate briefings for all Elected Members.
- continue to improve data quality, meeting the level required on a consistent basis.
- improve the quality assurance framework, ensuring that it effectively encompasses the lessons from audit, consultation and complaints, and supports appropriate ownership and prioritisation by operational staff.
- seek to improve our capacity for sharing performance information with the UHB.
- implement the First Steps to Improvement Guidance and monitor the impact on the Council.

- work with corporate colleagues to identify cost pressures on the service for the coming three years.
- work with SEWIC and the Integrating Health and Social Care Improvement Board to realise savings from collaborative working.
- continue engagement with providers to increase the number utilising the electronic spreadsheet invoicing system.
- complete agreed service models and commissioning strategies for all areas of service.
- ensure the engagement of operational teams in reviewing and commissioning/de-commissioning of services to meet the needs of service users and carers.
- complete actions in the Change Plan in accordance with the timescales.
- examine with Cardiff & Vale UHB and Cardiff Council areas for joint commissioning.
- complete and implement the review of the strategic planning structure for Health, Social Care and Wellbeing.
- introduce an agreed monitoring framework to ensure that the implementation plan for the Health Social Care and Wellbeing Strategy is delivered.
- continue the work with Cardiff and the Cardiff and Vale UHB to develop and implement integrated health and social care services, where this will benefit service users and carers.
- develop an evaluation tool for training.
- continue to work with Bridgend Council to develop a joint training and development function.
- develop a workforce planning framework for the social care sector in the Vale of Glamorgan.
- help to equip managers with any additional skills they need to develop staff and implement successful change programmes.
- agree a way forward in respect of the Child Protection Module in ICS and progress implementation as appropriate.
- devise a local procedure to implement the Child Sexual Exploitation Protocol.
- review the Child Protection audit process, including collation of findings, identification of themes and reporting.
- progress plans for joint investigation training with the Police.

- launch a Neglect Protocol in the Vale.
- review the implementation of All Wales POVA policy and procedures with other South Wales authorities.
- consider the implementation of the South Wales audit tool when available.
- develop the use of the case conference stage and increased involvement of service users and their families in line with the All Wales procedures.
- finalise the AAPC Annual Report 2010/11 and Action Plan 2011-2014.
- develop a provider performance and home closure protocol.
- respond to the current safeguarding reviews in respect of LSCBs and POVA.
- review the role of the Business Manager (LSCB/AAPC).
- continue to improve NHS awareness of the Mental Capacity Act and the DoLS procedures through providing training at all levels within UHB.
- develop quality standards for assessments under the DoLS procedures compliant with Welsh Government Guidance.
- assist the UHB and the LA in the development of Policy and Procedures.
- review the services made available with the carers funding, to ensure that these continue to meet the needs of carers.
- determine what work is required to meet the requirements of the Carers Measure and develop an implementation plan.
- ensure that the programme of consultation work with service users and carers is delivered during 2011/2012.