

## **The Vale of Glamorgan Council**

### **Scrutiny Committee (Social Care and Health) 5th October 2015**

#### **Report of the Director of Social Services**

#### **Quarter 1 Social Services Performance Report 2015-16**

##### **Purpose of the Report**

1. To present the performance results for quarter 1, 1st April-30th June, 2015-16.

##### **Recommendations**

1. That committee note service performance results and remedial actions to be taken to address service underperformance.
2. That committee note progress to date in achieving key outcomes as outlined in the Corporate Plan 2013-17, the Outcome Agreement 2013-16 and the Improvement Plan Part 1 2015-16.

##### **Reasons for the Recommendations**

1. To ensure the Council is effectively assessing its performance in line with the requirement to secure continuous improvement outlined in the Local Government Measure (Wales) 2009.
2. To consider the quarter 1 Social Services performance results as at 30th June 2015 in order to identify service areas for improvement.

##### **Background**

2. The Service Plans are designed to focus on the achievement of key objectives within each directorate which in turn contribute towards the achievement of identified outcomes in the Corporate Plan 2013-17, the Outcome Agreement 2013-16 and the Improvement Plan Part 1 2015-16.
3. Quarterly performance reports have been developed to reflect these Service Plans and designed to ensure that the council reports performance in the context of progress against its objectives.
4. The performance report is structured as follows:
  - An overview provides a snapshot of the directorate's progress towards achieving the objectives contributing towards its service outcomes. It also highlights progress towards key actions in the Corporate Plan 2013-17, the Outcome Agreement 2013-

16 and the Improvement Plan Part 1 2015-16 for which the directorate has lead responsibility. Areas of underperformance are highlighted as are the planned remedial actions to bring these back on track.

- A brief evaluation is provided of each service outcome outlining overall progress towards achievement.
- Detailed progress is reported for each service objective looking at all actions and measures.
- Progress is reported for all performance indicators by allocating a performance status symbol, ☺ relates to performance that has met or exceeded target, ☹ relates to performance within 10% of target and ☹ relates to performance that has missed target by more than 10%. A direction of travel arrow is also provided against each measure indicating whether current performance has improved, stayed static or declined on last year's first quarter performance. An upward arrow indicates that performance has improved on the same quarter last year, a static arrow indicates performance has remained the same and a downward arrow shows performance has declined compared to the same quarter last year.

### **Relevant Issues and Options**

5. The Social Services directorate is well on track to achieving the objectives contributing to its service outcomes, with 75% of actions currently either completed or on track. 73% of the Corporate Plan actions are on track for completion (of the 22 Corporate Plan actions, 1 has been completed, 15 actions on track, 5 have slipped and one action was not due have started this quarter). There are 19 actions relating to the Improvement Objectives, of which 1 is complete, 13 are on track, 4 have slipped and 1 is not due this quarter. There are currently no Outcome Agreement actions.
6. Of 68 performance indicators, 32 have met or exceeded target, 7 are within 10% of target, 17 have missed target by more than 10%.
7. The six actions where slippage was reported are as follows:
  - SS/A004 (CP/CYP5): Continue to improve multi-disciplinary transition support for young people moving into adulthood. The first attempt to recruit to the Change Manager/Project officer post to lead the work was recently unsuccessful, and the post is currently being re-advertised. This area of work remains a high priority for the post holder once appointed, and will be informed by the ongoing multi-agency work on the revision of the transitions policy and protocol.
  - SS/A015: Work to examine how best to secure an increased range of service providers in social care, especially those who use a social entrepreneurial approach has slipped. A workshop was arranged, but had to be cancelled. This project will start again in September / October 2015 when the Interim Head of Service has been appointed.
  - SS/A010 (CP/H2): The development of a wide range of options for older people requiring support and the preparation of feasibility studies for the provision of an older people's village or similar has been suspended pending the appointment of the Interim Head of Service in September 2015.
  - SS/A072: The implementation of the LSCB Integration Programme as it relates to agreed priorities regarding children with disabilities, CAMHS provision, and models for entry into Children and Young People Services has slipped this quarter. A

Change Manager Post is currently out to advert and work will commence once this capacity is secured to lead the programme.

- SS/A043: In relation to the implementation of a brokerage hub for care home placements with Cardiff and Vale University Health Board (UHB) and Cardiff Council, a workshop was arranged but had to be cancelled. This Project will start again in September/ October 2015 when the Interim Head of Service has been appointed.
- SS/A055b (CSSIW/AREF/IP2/2011) (IO2): The work to consider the options for the delivery of long term care to address any shortfall in independent sector provision, particularly in relation to people with dementia-related illnesses has slipped. A workshop was arranged but had to be cancelled. This Project will start again in September/ October 2015 when the Interim Head of Service has been appointed
- 8. Of the 68 measures, 32 (47%) have met or exceeded target, 7 (10%) were within 10% of target, and 17 (25%) have missed target by more than 10%. Data was not available for 12 measures. The seventeen indicators that have missed target relate to:
  - SS/M016 and SS/M018: Whilst the number of telecare installations completed within one calendar month and the number of new users missed target, these are cumulative indicators and performance will increase throughout the year.
  - SCA001: The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over is a cumulative indicator and should the first quarter's performance continue for the year then the measure would meet and exceed target.
  - SS/M004: The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by a worker. There will be situations where it is not always appropriate for a child to be seen during the initial assessment; therefore, performance is satisfactory in this context.
  - SS/M009: The percentage of complaints dealt with within statutory timescales did not meet target because one complaint was just out of timescale due to a slow response from a Team Manager. Action has been taken to increase awareness of the process timescales for complaints.
  - SS/M019a and SS/M019b: Whilst the rate per 1,000 population of over 65s who have had a UA assessment and an Occupational Therapy assessment missed the quarter's target, the estimate for performance over the year shows both measures meeting target.
  - SCC030a: Both the percentage of young carers known to Social Services who were assessed and those who were provided with a service (SCC030b) missed target in quarter 1. However, this was because no young carers became known to Social Services in quarter 1.
  - SCC039: Percentage of health assessments undertaken for looked after children due in the year. Following concerns regarding performance in 2014/15, the Head of Service has met with the Named Doctor for Looked After Children (LAC) and agreed steps to be undertaken during quarter 2 to look at deficits in how the data is quality assured and to address performance issues. It will also highlight where the shortfalls are and enable focused attention in these areas. It is anticipated the UHB, and therefore the Local Authority, will be able to provide a more informed position at the end of quarter 2.

- SCC042b: The average time taken to complete initial assessments that took longer than 7 working days missed target for this quarter. Of the 98 initial assessments (IA) completed, 10 were out of out of timescale. These IA's have skewed performance; especially where information is not provided to the social worker by other involved parties in a timely manner.
  - SS/M020: In relation to the percentage of complaints received by or on behalf of people over 65, which have resulted in service modification or improvement, one complaint has been received during the period which is still in progress. No service outcome has yet been determined.
9. A detailed report of the directorate's overall performance is provided at Appendix 1.

### **Resource Implications (Financial and Employment)**

10. There are no additional budgetary implications arising from this report although underperformance in some areas may have a negative impact on external assessments of the Council and could put certain funding opportunities at risk.

### **Sustainability and Climate Change Implications**

11. Underperformance issues relating to sustainability will be given due consideration both corporately and within the relevant service areas.

### **Legal Implications (to Include Human Rights Implications)**

12. The Local Government Act 1999, the Wales Programme for Improvement and the Local Government (Wales) Measure 2009 require that the Council secure continuous improvement across the full range of local services for which it is responsible.

### **Crime and Disorder Implications**

13. Underperformance issues relating to crime and disorder will be given due consideration both corporately and within the relevant service areas.

### **Equal Opportunities Implications (to include Welsh Language issues)**

14. Underperformance issues relating to equalities will be given due consideration both corporately and within the relevant service areas.

### **Corporate/Service Objectives**

15. The Corporate Plan 2013-17 outlines community leadership as a priority for the Council. Improving how the Council evidences and reports achievements of its outcomes and objectives contributes towards effective community leadership.

### **Policy Framework and Budget**

16. This is a matter for Executive decision.

### **Consultation (including Ward Member Consultation)**

17. The information contained within the report is based on quarterly returns provided by service directorates to the Performance and Development Team. An overall Council report on performance will be considered by Cabinet. Quarterly performance reports are reported to relevant Scrutiny Committees.

## **Relevant Scrutiny Committee**

18. Social Care and Health

### **Background Papers**

Quarter 1 Social Services Performance Report - Appendix 1

### **Contact Officer**

Julia Archampong, Corporate Performance Manager

### **Officers Consulted**

Corporate Management Team

Huw Isaac, Head of Performance and Development

Tom Bowring, Operational Manager Performance and Policy

### **Responsible Officer:**

Phil Evans, Director of Social Services

# Social Services Performance: Quarter 1 Overview Report

## Performance Summary

- Overall, the department is considerably on track to achieving its Service Plan actions, with 75% of actions currently either completed or on track. There are a total of 28 actions in the Service Plan; 1 has been completed, 20 are on track, and 6 have slipped this quarter. One action was not due to start this quarter.
- Our contribution to the Corporate Plan is also on course, with 73% of actions either completed or on track for completion. Of the 22 Corporate Plan actions, 1 has been completed, 15 are on track, 5 have slipped and 1 is not due this quarter.
- Of the 19 actions relating to the Improvement Objectives, 1 is complete, 13 are on track, 4 have slipped and 1 is not due this quarter.
- There are currently no Outcome Agreement actions.
- Of the 68 Performance Indicators that are measured quarterly, 32 (47%) have met or exceeded target, 7 (10%) were within 10% of target, and 17 (25%) have missed target by more than 10%. Data was not available for 12 measures. The seventeen indicators that have missed target relate to SS/M016, SS/M018, SCA001, SS/M004, SS/M009, SS/M019a, SS/M019b, SCC030a, SCC030b, SCC039, SCC042b, SS/M020, SCA007, SCC034, SCC011b, SCC025, SCC033f. Please see relevant objectives for reasons for underperformance and proposed remedial action where appropriate. There are currently 4 Performance Indicators relating to the Improvement Objectives 2 have met/exceeded target, and 2 have missed target by more than 10%. There are also 10 Outcome Agreement measures for this directorate, 4 have met/exceeded target, and 6 have missed target by more than 10% this quarter.

A summary of action plan and performance status is provided below:

Service Plan Actions 2015/16	Total number	Complete	On Track	Slipped	Not due to have started	Performance Indicators	Total number	😊	😐	☹️	N/A
All Actions	28	1 (4%)	20 (71%)	6 (21%)	1 (4%)	All Measures	68	32 (47%)	7 (10%)	17 (25%)	12 (18%)
Corporate Plan Actions	22	1 (5%)	15 (68%)	5 (22%)	1 (5%)	Improvement Objective Measures	4	2 (50%)	0	2 (50%)	0
Improvement Objective Actions	19	1 (5%)	13 (69%)	4 (21%)	1 (5%)	Outcome Agreement Measures	10	4 (40%)	0	6 (60%)	0
Outcome Agreement Actions	0	0	0	0	0						

## Understanding the Performance Symbols and referencing system

### Key

#### Measures:

- ☺ Performance is on or above target
- 😊 Performance is within 10% of target
- ☹ Performance missed target by more than 10%

#### Direction of travel:

- ↑ Performance has improved on the same quarter last year
- ↔ Performance has remained the same as the same quarter last year
- ↓ Performance has declined compared to the same quarter last year

#### Actions:

- Completed:** Completed in full by due date.
- On track:** Progressing and due to be completed by due date. On track actions reported at end of year relate to actions with an end date later than 31 March 2015.
- Slipped:** Limited progress has been made and an explanation must be provided including any planned remedial action(s) where appropriate.
- Not due:** Action has been rescheduled for a later start date than that originally planned.

### An explanation of the referencing used in this report:

E.g. **SS/A001**

- **SS:** This refers to the service plan, in this case, Social Services
- **A:** This refers to the fact that this is an action. Performance indicators will have an '**M**' for 'measure' here.
- **001:** This is the unique/individual number reference for the action.

### Where our actions link to other strategic plans, the following references may be seen in brackets after the action name:

- **CP/CL1:** The **CP** refers to the Corporate Plan. **CL1** is the reference number of the Corporate Plan objective the action links to.
- **IO/06:** The **IO** refers to the Improvement Objectives. **06**, refers to the number of the Improvement Plan objective linked to.
- **OA/01:** The **OA** refers to the Outcome Agreement with Welsh Government. **01** refers to the number of the Agreement linked to.
- **WAO:** This refers to Wales Audit Office improvement proposals related to the service area.

## What have we achieved and is anyone better off?

### Outcome 1: People in the Vale of Glamorgan are able to request support and receive help in a timely manner.

#### Performance snapshot

- 75% of actions are currently either completed or on track. There are a total of 12 actions aligned to this outcome; 9 are on track, and 2 have slipped and one is not due this quarter.
- Of the 36 Performance Indicators that are measured quarterly, 14 (39%) have met or exceeded target, 4 (11%) were within 10% of target, and 12 (33%) have missed target by more than 10%, 6 (17%) have not been reported due these Performance Measures being deleted by Welsh Government.
- Work continues on embedding the integrated locality restructure health and social care model to support service users' journey through the system. A management structure has been established and clear processes are being developed to reduce the number of transition points which will in turn minimise duplication of effort with respect to information gathering, shared assessments and recording systems in place. This will help give service users a more responsive and positive experience when accessing services.
- As a result of implementing our Day Opportunities strategy, individual care arrangements are being adjusted to facilitate work, training and leisure activities as part of universal services. This approach is part of wider efforts to implement new service models to support individuals to access a wider range of inclusive opportunities to meet identified need.

#### What will we do to bring our slipped actions and measures back on track?

- **SS/A004 (CP/CYP5):** Moves to continue to improve multi-disciplinary transition support for young people moving into adulthood has slipped this quarter. The first attempt to recruit to the Change Manager/Project officer post to lead the work was recently unsuccessful, and the post is currently being re-advertised. This area of work remains a high priority for the post holder once appointed, and will be informed by the ongoing multi-agency work on the revision of the transitions policy and protocol.
- **SS/A015:** The examination of how best to secure an increased range of service providers in social care, especially those who use a social entrepreneurial approach has slipped. A workshop was arranged, but had to be cancelled. This project will start again in September / October 2015 when the Interim Head of Service has been appointed.
- **SS/A010 (CP/H2):** The development of a wide range of options for older people requiring support and the preparation of feasibility studies for the provision of an older people's village or similar has been suspended pending the appointment of the Interim Head of Service in September 2015.
- **SS/M016:** The number of telecare installations completed within one calendar month has missed target. This is a cumulative indicator that will be reported at the end of the year.
- **SS/M018:** The number of new telecare users has missed target. This is a cumulative indicator that will be reported at the end of the year.
- **SCA001:** The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over, this is a cumulative indicator should the first quarter performance continue for the year then the measure would meet and exceed target.

- **SS/M004:** The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by a worker missed target this quarter. There will be situations where it is not always appropriate for a child to be seen during the initial assessment. Therefore, performance is satisfactory in this context.
- **SS/M009:** The percentage of complaints dealt with within statutory timescales missed target this quarter. One complaint was just out of timescale due to a slow response from the Team Manager. To improve performance for quarter 2, moves have been taken to improve the awareness of the process timescales for complaints.
- **SS/M019a:** The rate per 1,000 population of over 65s who have had a UA assessment missed this quarter's target. The estimate for performance over the year shows this measure meeting target.
- **SS/M019b:** The rate per 1,000 population of over 65s who have had an OT assessment missed its target for this quarter. The estimate for performance over the year shows this measure also meeting target.
- **SCC030a:** Both the percentage of young carers known to Social Services who were assessed and those who were provided with a service (**SCC030b**) missed target in quarter 1. However, this was because no young carers became known to social services in quarter 1.
- **SCC039:** percentage of health assessments undertaken for looked after children due in the year missed target. Following concerns regarding performance in 2014/15, the Head of Service has met with the Named Doctor for Looked After Children (LAC) and agreed steps to be undertaken during quarter 2 to look at deficits in how the data is quality assured and to address performance. It will also highlight where the shortfalls are and enable focused attention in these areas. It is anticipated the UHB, and therefore the Local Authority, will be able to provide a more informed position at the end of quarter 2.
- **SCC042b:** The average time taken to complete initial assessments that took longer than 7 working days missed target for this quarter. Of the 98 initial assessments (IA) completed, 10 were out of out of time scale. These IA's have skewed performance; especially where information is not provided to the social worker by other involved parties in a timely manner.
- **SS/M020:** The Percentage of complaints received by or on behalf of people over 65, which have resulted in service modification or improvement, has missed its target. One complaint has been received during the period which is still in progress. No service outcome has yet been determined until the complaint has been completed.

## Outcome 2: The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion

### Performance snapshot

- 100% of actions are currently either completed or on track. There are a total of 5 actions aligned to this outcome; 20% (1) is completed and 4 are on track.
- Of the 31 Performance Indicators that are measured quarterly, 17 (55%) have met or exceeded target, 3 (20%) were within 10% of target, 5 (45%) have missed target by more than 10%, 6 measures are not reported this quarter.
- As part of the National Adoption Service, the Vale, Valleys and Cardiff Regional Adoptive Collaborative Model went live on 1st June 2015. Staff from the four Local Authorities are now co-located in Pontypridd. A regional manager is in place and governance arrangements have been agreed via a Collaborative Agreement. The Collaborative will be working alongside other regions and will increase the number of and range of adopters and improve the experience of those children and families involved in the adoption process. This approach will ensure delivery of a more efficient and resilient service and an overall reduction in the Vale's Looked After Children population.

### What will we do to bring our slipped actions and measures back on track?

- No actions have slipped this quarter in relation to Outcome 2.
- **SCA007:** The percentage of clients with a care plan at 31 March whose care plans should have been reviewed, that were reviewed during the year has missed target for this quarter. This is indicative of the increase in demand for services. Priority has to be given to progressing new Integrated Assessments over reviewing established cases.
- **SCC034:** The percentage of child protection reviews carried out within statutory timescales during the year has missed target. One Child Protection conference (5 children) was cancelled on four occasions, a further Child Protection conference was cancelled due to child moving out of county and a further two conferences due to IRO sickness.
- **SCC011b:** The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen alone by the social worker. Although this target was missed, it is not always appropriate for a child to be seen during the initial assessment. 20 of the 98 IA's (20.4%) were fast tracked due to child protection concerns. Efforts continue to ensure accurate recording.
- **SCC025:** The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations missed target this quarter. Although some visits were outside of the timescale, all children are receiving their statutory visits. We are currently looking at processes to improve the quality of recording as some statutory visits were not recorded in a timely manner.
- **SCC033f:** The percentage of young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19. Of the eleven young people not in education, employment or training; four are currently unable to work due to illness/ disability and one is a young parent. Social Services are currently working with the remaining six young people to provide help and support in finding suitable education, employment or training opportunities.

## Outcome 3: Social Services in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals

### Performance snapshot

- 64% of actions are currently on track. There are a total of 11 actions aligned to this outcome; 7 are on track, and 3 have slipped and one is not due this quarter.
- There is one performance indicator that is measured quarterly relating to training opportunities for non-council staff, and this has exceeded target.
- In line with our commitment to develop a Dementia Resource Service for service users and their carers', we are considering a number of proposals which will be implemented in the next quarter. This will provide better direct support and care for those whose lives are directly affected by dementia, thus reducing the number of referrals for commissioned packages of care on a crisis basis and reduced reliance on respite facilities.

### What will we do to bring our slipped actions back on track?

- **SS/A072:** The implementation of the LSCB Integration Programme as it relates to agreed priorities regarding children with disabilities, CAMHS provision, and models for entry into Children and Young People Services has slipped this quarter. A Change Manager Post is currently out to advert and work will commence once this capacity is secured to lead the programme.
- **SS/A043:** In relation to the implementation of a brokerage hub for care home placements with Cardiff and Vale University Health Board (UHB) and Cardiff Council, a workshop was arranged but had to be cancelled. This Project will start again in September/ October 2015 when the Interim Head of Service has been appointed.
- **SS/A055b:** the work to consider the options for the delivery of long term care to address any shortfall in independent sector provision, particularly in relation to people with dementia-related illnesses has slipped. A workshop was arranged but had to be cancelled. This Project will start again in September/ October 2015 when the Interim Head of Service has been appointed.

# Annex A: Detailed Quarter 1 Report

**Outcome 1: People in the Vale of Glamorgan are able to request support and receive help in a timely manner**

**Objective 1: To ensure that people have access to comprehensive information about Social Services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans and services which meet their individual assessed needs.**

## Actions - Quarter 1 Progress Update

**Completed: 0%; On Track: 75%; Slipped: 17%**

Action Ref	Completion Date	% Complete	Status	Progress/ Outcomes
SS/A001 Work with the third sector and other organisations to deliver information about services for people in need via the Family Information Service, the Council's Contact Centre and other communication channels. (CP/CYP6)	31/03/2016	25	On Track	Work continues with the third sector and other organisations to deliver information about services via the family Information Service, Contact One Vale and other channels of communication.
SS/A007 Co-ordinate preventative and early intervention services for families in the greatest need including Flying Start, Families First and Intensive Family Support Services. (CP/CYP3)	31/03/2016	25	On Track	The multi-agency Families First (FF) and Flying Start (FS) Board meets monthly to oversee delivery of the FF and FS programmes. All programmes are targeted with the intention of reducing longer term higher level statutory interventions. The Board is currently considering the implications of the Social Services and Well Being (Wales) Act and has coordinated a multi-agency/third sector workshop to take place in July. Intensive Family Support Services (IFSS) is hosted by Cardiff and is, therefore, subject to separate governance arrangements. It has been agreed to establish an Operational Group to review delivery of the programme and ensure best use of the resource.

Action Ref	Completion Date	% Complete	Status	Progress/ Outcomes
SS/A056 Consolidate integrated social care and health assessment and care management teams for Learning Disability in partnership with the Cardiff and Vale University Health Board. (IO2)	31/03/2016	25	On Track	Joint operational management arrangements are now in place.
S/A057 Continue to utilise and develop processes to ensure a full exchange of information between Child Health and the Disability Team and partner agencies is completed in a timely manner.	31/03/2016	25	On Track	Regular meetings with partner agencies and Adult Services are held to review the transition policies and protocols. There are currently three work strands and an overarching co-ordinating group which makes the links to the overall transition policy and protocol. The Operational Manager for Learning Disabilities is leading a group on local responses to local needs particularly focused on young adults with learning disabilities and their future learning and support needs, supported employment, volunteering etc. involving Careers Wales , colleges, CYPS and Adult social services, third sector agencies. It has resulted in some teaching staff in Ysgol Y Deri being designated as transition support staff. There is a further group involving Cardiff and Vale UHB which is reviewing the policy on Continuing Health Care criteria and the differences in entitlement between children and adult services. The group aims to reach a position of clarity about the panel decision making process by September 2015. The Transition Interface Group (TRIG) is a standing group which meets quarterly and involves the young person, their family and all involved professionals/ agencies across child and adult services. It considers in detail the needs and plans for individual young people as they move on from children's services, school etc., the outcome being a much better co-ordinated experience. The policy and protocol review group is currently meeting quarterly to complete the revision of the policy and protocol, and includes Health, CYPS , Adult Learning Disability, Learning and Skills, schools and

Action Ref	Completion Date	% Complete	Status	Progress/ Outcomes
				colleges, Careers Wales, and consults with Housing and Leisure. The next meeting is in September 2015, with a view to complete revision of the policy and protocol by December 2015. During quarter 1 the work has looked at how we need to incorporate the SSWB Act and Learning and Skills Act changes, adopting a person centred planning approach to increase opportunities for the young person's wishes and feelings to inform their plans more, and producing a public information leaflet about transition support and services.
SS/A058 Develop proposals for separating assessment and treatment specialities in relation to mental health.	31/03/2016	25	On Track	We have worked closely with the Mental Health Clinical Board and have developed an Options Appraisal for the structure of Community Mental Health Care that will be consulted upon in a series of Roadshows in September/October 2015.
SS/A011 Increase the take up of assistive technologies such as Telecare that enable older people and their carers to manage the impact and risks associated with chronic ill health. (CSSIW/AREF/IP5/2011) (CP/HSCW5) (IO2)	31/03/2016	25	On Track	The Task and Finish Group has developed an assistive technology action plan which is being implemented. There has been a moderate increase in the number of people utilising assistive technology.
SS/A059 Implement new service models as part of supporting individuals to access a wider range of inclusive opportunities including leisure, work and training.	31/03/2016	25	On Track	The Day Opportunities Strategy has been approved and work has already commenced to review the current day care arrangements being provided on an individual basis. As a result of this, individual care arrangements are being adjusted to facilitate work, training and leisure activities as part of universal services.

Action Ref	Completion Date	% Complete	Status	Progress/ Outcomes
SS/A060 In co-operation with partners, establish an effective information, advice and assistance services in accordance with the requirements of the Social Services and Wellbeing (Wales) Act.	31/03/2016	25	On Track	The development of the Customer Contact Centre with Third Sector colleagues will help facilitate access to community alternatives to statutory provision for adult services. We will further explore the development of C1V to assess its suitability as a framework for a Council-wide information, advice and assistance service.
SS/A061 Embed the integrated locality restructure health and social care model through clear processes which support the service user's journey through the care system.	31/01/2016	50	On Track	The management structure is now in place and there is a schedule of workshops planned for processes.
SS/A004 Continue to improve multi-disciplinary transition support for young people moving into adulthood. (CP/CYP5)	31/03/2016	0	Slipped	First attempt to recruit to the Change Manager/Project officer post to lead the work was recently unsuccessful, and the post is currently being re-advertised. This area of work remains a high priority for the post holder once appointed, and will be informed by the ongoing multi-agency work on the revision of the transitions policy and protocol."
SS/A015 Examine how best to secure an increased range of service providers in social care, especially those who use a social entrepreneurial approach which engages communities and groups of service users or carers in the design and delivery of services, achieves wider training and employment outcomes and promotes better social networks (perhaps using volunteers and peer support).	31/03/2016	0	Slipped	A workshop was arranged, but had to be cancelled. This project will start again in September / October 2015 when the Interim Head of Service has been appointed.
SS/A010 Develop a wide range of options for older people requiring support and prepare a feasibility study for the provision of an older people's village or similar community-wide model for meeting need for care and support. (CP/H2)	31/03/2016	0	0	

### Performance Indicators - Quarter 1 Progress Update

PI Ref	Quarter 1 Actual 2015/16	Quarterly Target	Status	Direction of travel	Quarter 1 2014/15	Actual 2014/15	Comment
<b>How Much?</b>							
SS/M016 The number of telecare installations completed within one calendar month. (OA3)	55.00	70.75	☹	↑	0.00	283.00	This is a cumulative indicator. Full year = 220 telecare installations
SS/M017 Number of people over 65 who are clients of Social Services who are provided with benefits advice. (OA3)	416.00	221.00	☺	↑	0.00	884.00	0.00
SS/M018 Number of new telecare users. (OA3)	62.00	77.25	☹	↑	0.00	309.00	This is a cumulative indicator. Full year = 248
SS/M021 Number of adult service users receiving a direct payment. (OA3)	146.00	143.00	☺	↑	0.00	143.00	0.00
<b>How Well?</b>							
SCA001 The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over. (IO2)	1.48	1.13	☹	↓	0.82	4.55	This is a cumulative indicator. Should the first quarter performance continue for the year then the result would be 5.92 (68 DTOC's).
SCC001a The percentage of first placements of looked after children during the year that began with a care plan in place.	N/A	100.00	N/A	N/A	100.00	100.00	This PI has been deleted by WG.
SCC001b For those children looked after whose second review (due at 4 months) was due in the year, the percentage with a plan for permanence at the due date.	N/A	100.00	N/A	N/A	100.00	100.00	This PI has been deleted by WG.

SS/M002 Percentage of service users visited within 10 working days of Financial Assessment for non-residential care services being requested.	98.51	95.00	😊	↑	97.14	97.18	
SS/M003a The average number of working days between initial enquiry and completion of the care plan, for specialist assessments.	36.45	35.00	😊	↑	37.69	36.70	An improvement on last year. There is ongoing work to further improve performance
SS/M003b The average number of working days between initial enquiry and completion of the care plan, for non-specialist assessments.	12.65	15.00	😊	↑	17.49	17.99	
SS/M004 The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by a worker.	74.49	85.00	😞	↓	83.65	81.24	There will be situations where it is not always appropriate for a child to be seen during the initial assessment. Therefore, performance is satisfactory in this context.
SCC006 The percentage of referrals during the year in which a decision was made within 1 working day.	99.24	99.00	😊	↑	99.15	99.39	This Performance Indicator has been deleted by Welsh Government; but will continue to be measured as a local PI
SCC007a The percentage of referrals during the year that were allocated to a social worker for initial assessment.	N/A	50.00	N/A	N/A	32.63	56.59	This PI has been deleted by WG.
SCC007b The percentage of referrals during the year that were allocated to someone other than a social worker for initial assessment.	N/A	15.00	N/A	N/A	11.44	12.36	This PI has been deleted by WG.
SCC007c The percentage of referrals during the year that did not proceed to allocation for initial assessment.	N/A	35.00	N/A	N/A	55.93	30.85	This PI has been deleted by WG.

SS/M009 Percentage of complaints dealt with within statutory timescales.	75.00	90.00	☹	↑	50.00	90.91	One complaint was just out of timescale due to slow response from team manager. In order to improve performance for quarter 2, Team Manager was reminded of complaints process timescales.
SCC010 The percentage of referrals that are re-referrals within 12 months.	18.32	17.00	☹	↓	15.68	16.24	This target was narrowly missed as we are currently monitoring the decision to close a case. The average length of time between referrals is 6 months.
SCC016 The percentage of reviews of child in need plans carried out in accordance with the statutory timetable.	N/A	90.00	N/A	N/A	88.89	90.12	This PI has been deleted by WG.
SCA018a The percentage of carers of adult service users who were offered an assessment in their own right during the year. (PAM)	100.00	100.00	☺	↔	100.00	100.00	
SCA018b The percentage of carers of adult service users who had an assessment in their own right during the year.	100.00	100.00	☺	↔	100.00	100.00	
SCA018c The percentage of carers of adult service users who were assessed during the year who were provided with a service.	100.00	100.00	☺	↔	100.00	100.00	
SS/M019a Rate per 1,000 population of over 65s who have had a UA assessment. (OA3)	10.89	42.00	☹	↑	0.00	31.52	Full year estimate 43.6 (Target 42)
SS/M019b Rate per 1,000 population of over 65s who have had an OT assessment. (OA3)	5.81	33.00	☹	↑	0.00	31.96	Full year estimate 23.2 (Target 33)
SS/M022 Percentage of community supported clients receiving 20 hours or more care per week. (OA3)	20.43	30.00	☺	↓	0.00	19.30	

SCC030a The percentage of young carers known to Social Services who were assessed.	0.00	100.00	☹	N/A	N/A	100.00	We did not achieve target because no young carers became known to social services in quarter 1.
SCC030b The percentage of young carers known to Social Services who were provided with a service.	0.00	95.00	☹	N/A	N/A	100.00	We did not achieve target because no young carers became known to social services in quarter 1.
SCC039 The percentage of health assessments for looked after children due in the year that have been undertaken.	18.23	70.00	☹	↓	29.07	63.31	This is a cumulative PI which increases as health assessments are completed by the UHB during the year. Following concerns regarding performance in 2014/15, the Head of Service has met with the Named Doctor for Looked After Children (LAC) and agreed steps to be undertaken during quarter 2 to look at deficits in how the data is quality assured and to address performance. It will also highlight where the shortfalls are and enable focused attention in these areas. It is anticipated the UHB, and therefore the Local Authority, will be able to provide a more informed position at the end of quarter 2.
SCC041a The percentage of eligible, relevant and former relevant children that have pathway plans as required. (NSI)	100.00	100.00	☺	↔	100.00	100.00	
SCC041b The percentage of eligible, relevant and former relevant children that have been allocated a personal advisor.	100.00	100.00	☺	↔	100.00	100.00	
SCC042a The percentage of initial assessments completed within 7 working days.	89.80	85.00	☺	↑	75.00	89.36	

SCC042b The average time taken to complete initial assessments that took longer than 7 working days.	17.40	15.00	☹️	↑	20.62		Of the 98 initial assessments (IA) completed, 10 were out of out of time scale. These IA's have skewed performance; especially where information is not provided to the social worker by other involved parties in a timely manner.
SCC043a The percentage of required core assessments completed within 35 working days.	93.66	91.00	😊	↑	91.45	94.23	
SCC043b The average time taken to complete those required core assessments that took longer than 35 working days.	53.85	52.00	☹️	↑	62.54	51.21	Of the 192 core assessments completed, 13 were out of timescale. These core assessments have skewed performance, especially where information is not provided to the social worker or other involved parties in a timely manner.
SCC045 The percentage of reviews carried out in accordance with the statutory timescale. (PAM)	91.51	96.00	☹️	↓	97.92	96.44	Reviews have been cancelled due to children moving placements, cancellations by parents or solicitors and one of the IRO's on long term sick. Reviews which are cancelled are always scheduled to take place at the earliest opportunity.
<b>Better Off?</b>							
SS/M001 Percentage of service users visited within 20 working days of Financial Assessment for Residential/Nursing care being requested.	100.00	95.00	😊	↔️	100.00		
SS/M020 Percentage of complaints received by or on behalf of people over 65, which have resulted in service modification or improvement. (OA3)	0.00	50.00	☹️	↔️	0.00	100.00	One complaint has been received during the period which is still in progress. No service outcome has yet been determined until the complaint has been completed.

**Outcome 2: The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion**

**Objective 2: Through the Council working in co-ordination with other organisations, to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation**

**Actions - Quarter 1 Progress Update**

**Completed: 20%; On Track: 80%; Slipped: 0%**

Action Ref	Completion Date	% Complete	Status	Progress/ Outcomes
SS/A063 Implement Vale, Valleys and Cardiff Regional Adoptive Collaborative Model.	31/03/2016	100	Complete	As part of the National Adoption Service, the Vale, Valleys and Cardiff Regional Adoptive Collaborative Model went live on 1st June 2015. Staff from the four Local Authorities are now co-located in Pontypridd. A regional manager is in place and governance arrangements have been agreed via a Collaborative Agreement. The Collaborative will be working alongside other regions and will increase the number of range of adopters and improve the experience of those children and families involved in the adoption process.
SS/A021 Continue to work with the Third Sector and business organisations to deliver a preventative, community approach to supporting older people to live as independently as possible including people with dementia-related illness. (CP/HSCW7) (IO2)	31/03/2016	25	On Track	The continued monitoring and review of existing contracts is ongoing. Further engagement has taken place with regard to the council's Reshaping Services Programme.

Action Ref	Completion Date	% Complete	Status	Progress/ Outcomes
SS/A062 Implement recommendations of the Task and Finish group for Telecare Services. (CP/HSCW5) (IO2)	31/03/2016	25	On Track	All actions from the task and finish group are being taken forward by the relevant responsible individuals
SS/A064 Continue to develop awareness of the Mental Health Capacity Act and Deprivation of Liberty Safeguards amongst ACM and Health Teams as well as providers of care. (CP/HSCW13)	31/03/2016	25	On Track	The Deprivation of Liberty Safeguarding (DoLS) Team continues to raise awareness of the MCA and DoLS through providing training sessions to Care Homes and Hospital Wards, Hospital Managers, Cardiff and Vale Residential Care Provider Forum and as part of the Service Request Authorisation process.
SS/A073 Work with Cardiff and Vale Health Board to fully implement the Integrated Discharge Policy. (CSSIW/AREF/IP5/2014)	31/03/2016	25	On Track	A Delayed Transfer of Care (DToC) action plan had been developed which will ensure that processes are reviewed across the hospitals and community services over the next 6 months.

## Performance Indicators - Quarter 1 Progress Update

PI Ref	Quarter 1 Actual 2015/16	Quarterly Target	Status	Direction of travel	Quarter 1 2014/15	Actual 2014/15	Comment
<b>How Much?</b>							
SS/M008a The number of Home Care packages provided for less than 5 hours per week.	187.00	198.00	☺	↓	226.00	198.00	Care packages continue to be monitored in line with the demands on the service.
SS/M008b The number of Home Care packages provided for 5-9 hours per week.	246.00	243.00	☺	↓	268.00	243.00	
SS/M008c The number of Home Care packages provided for 10-19 hours per week.	428.00	402.00	☺	↓	430.00	402.00	
SS/M008d The number of Home Care packages provided for more than 20 hours per week.	221.00	202.00	☺	↑	198.00	202.00	
SS/M008e The total number of Home Care packages provided.	1082.00	1045.00	☺	↓	1122.00	1045.00	
SS/M011 Number of first time entrants to the Youth Justice System.	0.00	Awaiting YJB data	N/A	N/A	N/A	N/A	
<b>How Well?</b>							
SCC013ai The percentage of open cases of children on the Child Protection Register who have an allocated social worker.	100.00	100.00	☺	↔	100.00	100.00	
SCC013aii The percentage of open cases of children looked after who have an allocated social worker.	100.00	100.00	☺	↔	100.00	100.00	
SCC013aiii The percentage of open cases of children in need who have an allocated social worker.	N/A	72.00	N/A	N/A	73.61	72.04	This PI has been deleted by WG.

SCA007 The percentage of clients with a care plan at 31 March whose care plans should have been reviewed, that were reviewed during the year. (PAM)	66.61	81.00	☹	↓	70.23	75.69	This is indicative of the increase in demand for services. Priority has to be given to progressing new Integrated Assessments over reviewing established cases.
SCC024 The percentage of children looked after during the year with a Personal Education Plan within 20 school days of entering care or joining a new school in the year ending 31 March.	100.00	97.00	☺	N/A	N/A	97.14	
SCC033d The percentage of young people formerly looked after with whom the authority is still in contact at the age of 19. (NSI)	100.00	98.00	☺	↔	100.00	100.00	
SCC034 The percentage of child protection reviews carried out within statutory timescales during the year.	89.04	100.00	☹	↓	100.00	98.95	1 Child Protection conference (5 children) was cancelled on 4 occasions (twice by the parent's solicitor, once due to a CP investigation and once due to the IRO on annual leave). 1 CP conference cancelled due to child moving out of county and 2 conferences due to IRO sickness.
<b>Better Off?</b>							
SCA002a The rate of older people (aged 65 or over) supported in the community per 1,000 population at 31 March. (IO2) (NSI)	41.89	41.00	☺	↓	48.60	41.13	
SCA002b The rate of older people (aged 65 or over) whom the local authority supports in care homes per 1,000 population at 31 March. (IO2) (NSI)	15.58	16.00	☺	↓	14.84	15.70	

SCC011a The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by the social worker. (PAM)	N/A	70.00	N/A	N/A	61.54	66.77	This PI has been deleted by WG
SCC011b The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen alone by the social worker. (NSI)	21.43	30.00	☹️	↓	25.00	29.99	Although this target was missed, it is not always appropriate for a child to be seen during the initial assessment. 20 of the 98 IA's (20.4%) were fast tracked due to child protection concerns. Efforts continue to ensure accurate recording.
SCC014 The percentage of initial child protection conferences due in the year which were held within 15 working days of the strategy discussion.	100.00	100.00	😊	↑	96.97	99.28	
SCC015 The percentage of initial child protection conferences due in the year which were held within 10 working days of the initial child protection conference.	100.00	99.00	😊	↔️	100.00	99.12	
SCC021 The percentage of looked after children reviews carried out within statutory timescales during the year.	96.67	100.00	☹️	↓	97.46	95.94	2 reviews were delayed due to a young person moving accommodation and one YP moving out of county; 1 review was delayed as the foster carer was not available. 1 review was delayed due to IRO unavoidable special leave. All Looked After Children (LAC) reviews were carried out at the earliest opportunity. The aim is to now ensure all future LAC reviews are in within timescale.
SCC025 The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations. (PAM)	85.05	95.00	☹️	↓	91.64	94.49	Although some visits were outside of the timescale, all children are receiving their statutory visits. We are currently looking at processes to improve the quality of recording as some statutory visits were not recorded in a timely manner.

SCC040 The percentage of placements started during the year where the child is registered with a provider of general medical services within 10 days of the start of the placement.	100.00	97.00	😊	↔	100.00	98.23	
SCA019 The percentage of adult protection referrals completed where the risk has been managed. (OA3) (NSI/PAM)	100.00	100.00	😊	↔	100.00	100.00	
SCC002 The percentage of children looked after at 31 March who have experienced one or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the 12 months to 31 March. (NSI)	1.60	13.00	😊	↑	3.33	13.04	
SCA003a The percentage of clients, in the following age groups, who are supported in the community during the year aged 18-65.	N/A	90.00	N/A	N/A	89.75	89.80	This PI has been deleted by WG.
SCA003b The percentage of clients, in the following age groups, who are supported in the community during the year aged 65.	N/A	78.00	N/A	N/A	77.31	77.82	This PI has been deleted by WG
SCC004 The percentage of children looked after on 31 March who have had three or more placements during the year. (NSI/PAM)	1.52	9.00	😊	↓	1.10	6.88	
SCA020 The percentage of adult clients who are supported in the community during the year.	N/A	80.00	N/A	N/A	81.40	81.13	This PI has been deleted by WG

SCC020 The percentage of looked after children who have had their teeth checked by a dentist during the year.	61.48	63.00	☹️	↑	57.89	61.76	This is a cumulative PI which increases as dental checks are completed throughout the year. This is a task which the UHB undertake on behalf of the local authority. Children's services are currently looking into assuming responsibility for recording this information to improve the accuracy of this data.
SCC033e The percentage of young people formerly looked after with whom the authority is in contact, who are known to be in suitable, non-emergency accommodation at the age of 19. (NSI)	100.00	95.00	😊	↔️	100.00	92.86	
SCC033f The percentage of young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19. (OA2) (IO4) (NSI)	50.00	60.00	☹️	↓	77.78	57.14	Of the 11 young people not in education, employment or training; 4 YP are currently unable to work due to illness/ disability and 1 YP is a young parent. Social Services are currently working with the remaining 6 YP to provide help and support in finding suitable education, employment or training opportunities.

**Outcome 3: Social Services in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals**

**Objective 3: To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities**

**Actions - Quarter 1 Progress Update**

**Completed: 0%; On Track: 63%; Slipped: 9%**

Action Ref	Completion Date	% Complete	Status	Progress/ Outcomes
SS/A039c Ensure that service specifications are derived from commissioning plans and that they are clear about the practice and quality standards expected. (CSSIW/AREF/IP2/2011)	31/03/2016	25	On Track	During quarter 1, we have completed Commissioning plans for the Vale Community Support Team and Older Persons team.
SS/A065 Consider the Day Opportunities Strategy and its application for service users with physical disabilities.	31/03/2016	25	On Track	Preliminary work is being completed in preparation for the reshaping services agenda 2016/17.
SS/A066 Develop a Dementia Resource Service for service users and their carers to provide better support and care for those whose lives are directly affected by dementia. (CP/HSCW7) (IO2)	31/03/2016	50	On Track	Proposals are being considered ready for implementation in the next quarter
SS/A067 Contribute to the development of the Together for Mental Health Delivery Plan and promote services that promote mental health wellbeing and reduce stigma.	31/03/2016	25	On Track	The Vale of Glamorgan remains an active partner in the development and review of the Together for Mental Health Delivery Plan. The Vale has recently signed up to the Time to Change Wales Campaign with aim of reducing stigma in the workplace.
SS/A068 Prioritise completion of actions set out in the Social Services Budget Programme.	31/03/2016	25	On Track	Completion on target as per the Social Services Budget Programme. Children and Young People Services are on track to make the required savings as detailed in the Budget Programme.

SS/A070 Implement key improvement areas as identified by relevant regulatory reports.	31/03/2016	25	On Track	Children and Young People's Service (CYPS) have an action plan in place following the Looked After Children (LAC) inspection in 2014.
SS/A071 To review the Children and Young People Services Commissioning Strategy 2013-18.	31/03/2016	25	On Track	Our annual placement review has been completed and work is currently ongoing to further develop our LAC profile. Both of these workstreams will inform the review of the Commissioning Strategy.
SS/A072 Contribute to implementing the LSCB Integration Programme as it relates to agreed priorities regarding children with disabilities, CAMHS provision and models for entry into Children and Young People Services.	31/03/2016	0	Slipped	The implementation of the LSCB Integration Programme has not yet started. A Change Manager Post is currently out to advert and work will commence once this capacity is secured to lead the programme.
SS/A043 Implement a brokerage hub for care home placements with Cardiff and Vale University Health Board (UHB) and Cardiff Council.	31/03/2016	0	Slipped	A workshop was arranged but had to be cancelled. This Project will start again in September/ October 2015 when the Interim Head of Service has been appointed.
SS/A055b Consider the options for the delivery of long term care to address any shortfall in independent sector provision, particularly in relation to people with dementia-related illnesses. (CSSIW/AREF/IP2/2011) (IO2)	31/03/2016	0	Slipped	A workshop was arranged but had to be cancelled. This Project will start again in September/ October 2015 when the Interim Head of Service has been appointed.
SS/A069 Deliver actions identified in the implementation plan to meet the requirements of the Social Services Wellbeing (Wales) Act.	31/03/2016	0	0	

## Performance Indicators - Quarter 1 Progress Update

PI Ref	Quarter 1 Actual 2015/16	Quarterly Target	Status	Direction of travel	Quarter 1 2014/15	Actual 2014/15	Comment
<b>How Much?</b>							
<b>There are no measures applicable this quarter</b>							
<b>How Well?</b>							
SS/M012 Percentage of places on appropriate training courses made available to non-Council employees.	26.89	25.00	☺	↓	28.44	28.51	
<b>Better Off?</b>							
<b>There are no measures applicable this quarter</b>							