



**VALE OF GLAMORGAN COUNCIL**

**HEAD OF BUSINESS MANAGEMENT AND  
INNOVATION**

**ANNUAL REPORT**

**2015/2016**

The report from the Business Management and Innovation Division looks at the areas of corporate and political support, leadership and culture, financial stability and resources, planning and partnerships, commissioning and contracting, workforce development, management, performance quality/information systems, equality and diversity (including use of the Welsh Language in the provision of services), protecting vulnerable people services.

## **Contents**

<b>Chapter</b>	<b>Page</b>
Overview	3
Corporate and Political Support and Oversight	5
Leadership and Culture	8
Involving Users and Carers	12
Partnerships and Collaborative Planning	16
Performance and Quality / Information Systems and Management	22
Commissioning and Contracting	25
Financial Stability and Resources	28
Workforce Development and Management	30
Equality and Diversity	33
Safeguarding	34
Progress in responding to the requirements of the Social Services and Well-being Act	40

## OVERVIEW

1. During 2015/2016, the range of services managed within the Division has been unchanged. However, we have placed greater emphasis on the development of integrated working with partner organisations. The Directorate has been in a strong position to begin taking on the new statutory requirements in respect of collaborative working and co-production across the Cardiff and Vale of Glamorgan region, as outlined in the Social Services and Well-being (Wales) Act (2014) which is to be implemented from 6<sup>th</sup> April 2016. We have been able to build on a good track record of maintaining productive relationships with key partners and using grant-funded initiatives.
2. The need to implement the far-reaching Social Services and Well-being Act meant that the Division devoted considerable attention to preparing for the successful transition needed if the Directorate and the Council are to function effectively under the new legislative framework. The Director of Social Services is the Lead Director for implementation of the Act across the Cardiff and Vale region. The Division managed the regional Delivering Transformation Grant from Welsh Government, intended to help provide the additional staffing capacity required to plan for very significant levels of change made necessary by new statute, regulations and guidance. It has also played an active role in making best use of the finance available under the Regional Collaboration Fund (RCF) and the Intermediate Care Fund (ICF) to introduce new services and ways of working across the region.
3. The Division has experienced a substantial shift in its senior management structure during the past year. The former Divisional Head of Service was successfully appointed to the Head of Finance post within the council. Interim arrangements were put in place for the latter part of the financial year by means of secondment from another Division. A new Operational Manager for Safeguarding and Performance took up post in November 2015.
4. During 2015/2016, spending on social services in the Vale of Glamorgan Council amounted to £52.8 million. This compares with £52.1m in 2014/2015. The funding was used to provide adult and children services and the organisational arrangements required to support the two operational divisions. The Directorate's Budget Programme Board has continued to operate throughout the year, providing essential oversight and support to

enable us to deliver statutory responsibilities within the budget set by the Council and to achieve agreed savings. The Division successfully met savings targets. However, it has been acknowledged that one of the future savings targets of in 2016-17 (£270k for contracted Domiciliary Care) would be exceptionally challenging in the current context of increasing demands and costs. It has been postponed for a further twelve months. The Directorate has contributed well to the Council's overall Reshaping Services programme, and the Division has supported adults and children's services to achieve the savings required.

5. Resource management within social services remains inherently problematic and complex. During 2015/2016, there continued to be significant pressure on the Directorate to remain within the budget set, including a requirement to make a further £1.465m efficiency savings during the year, of which £1.225m was achieved. Further details about the effective work done to deal with this financial challenge can be found later in this report. The key priority has been to minimise any adverse impact of inevitable changes on service users and carers.
6. The ongoing challenges for Social Services remain:
  - providing effective support for a rising proportion of very old people in the Vale population with increasing levels of need, for children and other people with increasingly complex health conditions and for families experiencing periods of difficulty and vulnerability;
  - developing closer partnership working in order to deliver new models of care and support services across the whole range of need - including work to help deliver more preventative services and early intervention;
  - managing reductions in funding while minimising wherever possible the impact on front line service delivery;
  - meeting new service requirements with limited public sector resources available to implement the changes, including those arising from preparations to meet the increased statutory obligations that will be introduced by the Social Services and Well-being (Wales) Act in April 2016;
  - ensuring quality of care, managing risks of service failure and increased safeguarding responsibilities; and
  - reducing unnecessary bureaucracy so that we get help to people more quickly and provide staff with more time for direct work.

## **CORPORATE AND POLITICAL SUPPORT AND OVERSIGHT**

- 7. These were our improvement priorities for 2015/2016 in respect of corporate and political support and the progress made.**
  - We have continued to work effectively with Elected Members in respect of Social Services priorities by providing timely information and professional advice. This has included agreeing the budget programme for 2015/2016, which required the service to reduce expenditure by £1.5m. Officers have worked closely to keep elected members aware of the challenges within the care sector through the introduction of the National Minimum Wage for over 25s and other compliance challenges.**
  - We have also ensured that Senior officers and Elected members have been regularly briefed at Cabinet, Scrutiny Committee meetings and Corporate Management Team meetings on the plans for implementation of the Social Services and Well-being Act and how these changes will impact on Vale residents and providers.**
  - Senior officers have continued to make a positive contribution to the effectiveness of the corporate management structure by attending and supporting corporate initiatives and meetings.**
  - There have been monthly meetings of the Budget Programme Board and Collaborative Working Board where Cabinet members and Senior officers are invited to attend.**
  - Setting up a Regional Steering Group has enabled us to meet with senior colleagues in Cardiff City Council and the UHB to establish priorities for implementation of the partnership agenda through the Social Services and Well-being Act and grant funded initiatives (including the Intermediate Care Fund).**
- 8. Through key strategic plans, we strive to ensure that there is a clear vision and direction for Social Services, partly in order to gain staff commitment to high standards and continuous improvement for the Directorate. In 2015/2016, the key plans were the Directorate Service Plan 2014-18 and the Budget Programme, which has been in place since November 2011.**

9. The unified Directorate Service Plan provides a four year overview and sets out our contribution towards achieving the Council's key outcomes and objectives, as outlined in the Corporate Plan 2013-17. The Service Plan aligned service planning with other key planning documents - the Social Service Budget Programme, the Director's Annual Report 2014/2015, the three Heads of Service Annual Reports and the recommendations from the Care and Social Services Inspectorate Wales (CSSIW) Annual Review and Evaluation of Performance.
10. A new Corporate Plan has been agreed to set the 2016– 2020 objectives and well-being outcomes for the Vale of Glamorgan Council. We have identified our contribution to the successful attainment of these targets. The Divisional and then the Team plans for 2016-17 will describe how we put into practice the 'golden thread' running through all our plans.
11. Ensuring these plans are implemented has been a priority objective across the Council and the Director is responsible for reporting progress on the plans through the corporate and political processes within the Council. Actions within the Directorate Service Plan are reported through the political process on a quarterly basis. The Budget Programme is reported on a monthly basis.
12. Senior staff in the Directorate have 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. The Leader of the Council held monthly one-to-one meetings with the Director. The Heads of Service met regularly with their Cabinet members to ensure that they were fully aware of issues affecting social services.
13. The Council remains strongly compliant with the statutory guidance on the role and accountabilities of the Director of Social Services issued by the Welsh Government in June 2009 and Social Services continue to be managed in one Directorate. The Director is a member of the Corporate Management Team and acts as Deputy Managing Director on a rotational basis with the other Directors. During 2015/2016, the newly appointed Managing Director has worked closely with senior managers in social services to ensure that our challenges and achievements are noted within the core business of the Council's work programme.

14. The Care and Social Services Inspectorate Wales (CSSIW) published its Annual Review and Evaluation of Performance for this Council in October 2015. Inspectors commented that the Council continued to be strong in leading on partnerships that provide integrated health and social care services. There is reference to the reconfiguration exercise in respect of locality services within the Adult Services Division, which helps to ensure that community health and social care services are delivered seamlessly across organisational and professional boundaries. The impact has been to bring services, staff and management together under a single, community-based model of care. The Inspectorate found that early intervention and preventative strategies in both adults and children's services remained a priority, with good evidence of progress in these areas. This placed the Directorate in a good position to respond to new requirements outlined within the Social Services and Well-being Act. We continue to have good relationships with the independent providers of care (third sector and commercial) which allows us to be innovative and responsive to need.
15. The Directorate continues to benefit from stable and effective political and corporate support in delivering its responsibilities. Managers work hard to ensure that the Executive, Scrutiny Committee and the Corporate Management Team receive the best possible professional advice and information on all Social Services matters. Work also goes on at senior officer level across the Authority to ensure that appropriate knowledge and skills from all areas are used to influence and support change within social services. This includes identifying priorities, challenges and risks.
16. The governance arrangements for managing the extensive programme of collaborative working with the NHS, Cardiff Council and the Third Sector have worked well during the year. We continue to ensure a coherent approach to this very diverse programme through the Directorate's Collaborative Working Programme Board, which meets on a monthly basis to oversee the major partnership reform programmes. The Leader, both Cabinet members, the Managing Director and other officers from across the Council are engaged in the work of the Board. Some changes have been made, to increase the scale and pace of our remodelling services agenda. The Leader of the Council became the chair of the revised Governance Board for the regional Integrated Health and Social Care Programme Board and the chief executives of the five constituent organisations formed a Strategic

Leadership Team. This gave our work strong political and corporate engagement and ownership.

17. The Directorate continues to contribute to the corporate work of the Authority by being involved in many of the key workstreams. For example, during 2015/2016, we have strongly supported through extensive staff engagement:

- The Reshaping Services Programme
- production of the Corporate Plan for 2016-20
- preparation for the Corporate Assessment
- implementation of the Welsh Language Standards
- the work undertaken by the Corporate Safeguarding Group
- co-production of the workforce development plan (corporately and at Directorate level) and the Staff Charter, which will be launched early in the next financial year.

#### **Our improvement priorities 2016-17**

- We will continue to work as members of corporate working groups to ensure the Council delivers its objectives within the Corporate Plan.
- We will further develop effective working relationships with partners to progress the integration agenda in line with legislative requirements.

## **LEADERSHIP AND CULTURE**

18. These were our Leadership and Culture improvement priorities for 2015/2016 and the progress made.

- We have been active participants in the Council's change programme, including the Reshaping Services agenda which began to take effect in 2015. It has demonstrated that the Council recognises the need to operate differently if it is to meet the dual challenges of increasing demand and diminishing resources. The programme is very ambitious and tightly managed. Diverse service delivery models have been adopted, according to the context. This includes appropriate use of in-house provision, the third sector and commercial enterprises. Information and papers are shared with staff on Staff Net and in Core Brief documents.



- **We have ensured that communication with staff is timely and effective with regards to changes planned for services. Detailed engagement has taken place with staff in corporate and Directorate events to explain the rationale for the Reshaping Services Programme and to obtain views and ideas to support the implementation of change.**
19. The Social Services Management Team comprises the Director, Heads of Service and Operational Managers from across the Directorate. There has been some movement during the past year, with interim arrangements put in place. An Interim Head of Business Management and Innovation was appointed from within the Directorate, with implications for other managers. Some staff have taken opportunities to advance to more senior positions on a temporary basis, helping with succession planning.
  20. There have been some changes to our managers at operational and team level this year. Children's Services have seen some temporary arrangements whilst staff were released to become change champions for the implementation of the Act. Adults Services has managed the consequences of an Operational Manager acting up in the role of Head of Service and the appointment of the Operational Manager for Learning Disabilities as Assistant Director in Cardiff City Council, which has provided some career progression on a temporary joint basis across the region.
  21. Within the Business Management and Innovation Division, we have welcomed a new Operational Manager for Safeguarding and Performance. There has been stability amongst our team managers and front line staff. This stability and the extensive experience which managers have will help us to provide a sustained and coherent direction but one which is responsive to local and national priorities. Managers have been encouraged to take on national and regional service development and strategic roles.
  22. The Head of Adult Services has been the Chair of the All Wales Head of Adult Service Group. The Head of Children's Services heads up the Regional Adoption Collaborative and the Interim Head of Business Management and Innovation is the regional lead for the implementation of the Social Services and Well-being Act. She has also undertaken roles within the Editorial Board for the training materials for the Act and next year she will become Chair of the Adults Brokerage Service managed by the ten SEWIC local authorities.

23. Management teams (both centrally and within each of the three divisions) meet on a regular basis, ensuring that the key strategic and service issues for social care are well considered and appropriate decisions made to support service delivery and improvement.
24. There is a strong professional culture in the Directorate and a willingness by staff to accept responsibility for their own practice and learning. They are encouraged to regard the Vale as a place where professional practice and skills in delivering citizen-centred services in partnership are valued and encouraged. The structures within the Directorate work well, with clear delineation of responsibilities but also recognition of the need to adopt a family-oriented approach and to deal effectively with transition issues where staff share responsibilities for working well with individuals whose needs cross organisational boundaries. This is demonstrated, for example, by the good outcomes achieved within the transitional arrangements for young people with disabilities as they move from children's to adult services. This culture has equipped us well for the new ways of working needed to be compliant with changed legislative requirements from April 2016.
25. We have an extensive range of policies and procedures in place across the Directorate, which establish quality standards for the service. These are readily available to staff. A review framework is in place to ensure that policies are updated at least every three years and more regularly where policy and legislative changes dictate. Policy consultation arrangements are in place, together with robust process ratification via the senior management team.
26. A clear vision for social care has been developed with communities and partners. It is expressed in key strategies for groups of service users and carers which are well embedded and understood. These have an appropriate balance of local and national priorities. An ordered planning process gives life to the Council's vision, linked with those of key partners. There is considerable evidence of measurable change to people's lives and improvement to services.
27. Business is done efficiently. Risks are evaluated and managed well. Legal duties are delivered to a good standard. The Director of Social Services helps to shape corporate agendas relevant to people needing social care and support. Links between children's and adult social services are good: they promote shared approaches and joined up support for individuals and families. Staff and providers are mostly skilled in delivering

citizen-centred services in partnership: they understand each other's roles and they are helped to deliver responsibilities delegated to them.

28. Evidence from successive years is that senior managers can sustain significant service change. Strong project management means almost all planned reforms do happen, unless changes in context require us to rethink our approach. Staff engagement with top managers is regular, varied and productive: our local priorities inform service and personal development plans, and staff views inform management actions.
29. Corporate recognition of the need for additional support for staff and placing greater value on their contribution has generated a significant programme of staff engagement. In turn, this has led to production of a staff charter which will be launched early in the new financial year.

#### **Our improvement priorities 2016-17**

- We will support the delivery of the Council's transformational change programme, Reshaping Services, to enable it to meet the future needs of citizens of the Vale of Glamorgan within the context of unprecedented financial challenges.
- We will align the workforce plan to the Reshaping Services Strategy, ensuring staff have the necessary skills and training to adapt to the changes in how services are planned and delivered.
- Ensure that the Directorate's current structure is fit-for-purpose in meeting new statutory requirements and the significant challenges facing social care.

## INVOLVING USERS AND CARERS

30. **These were our improvement priorities for 2015/16 and the progress made.**
- **We planned and delivered a new range of events to celebrate Carers Week in 2015. Two events were organised at Cardiff City Stadium in a partnership between Cardiff and the Vale University Health Board, Cardiff Council and the Vale of Glamorgan Council. The events were split into two themes – Staying Safe and Staying Well.**
  - **We ensured that the new Carers Support Officers capacity was used across services, with a dramatic impact in areas that previously did not have a dedicated resource.**
31. The Social Services consultation framework for the past year has been successful and accurately reflects service priorities. Each consultation exercise considers the most appropriate method of consultation for that service user group, with the flexibility to adapt methods for individual service users as required. Reports and issue logs are prepared and shared with service areas to identify recommendations and existing good practice to inform service improvements. Consultation exercises are now timed to support any service reconfiguration work being undertaken. Equality Impact assessments are completed to identify clearly the effects on individuals with protected characteristics and provision is made to accommodate these.
32. The Social Services and Well-being Act asserts a strong emphasis on engagement of users and the public. We are working on the development of a Citizens Panel that builds on the successful structure for engagement already in operation within the Vale of Glamorgan.
33. The Act also requires a significant emphasis on attaining qualitative data, a range of information about how we deliver our services and how we meet an individual's well-being objectives and outcomes. During the coming year, we will be focusing our efforts on attaining base line data and developing tools to ensure that we effectively engage with people and how we use this information to support them better in future.
34. A key change that the Act introduces is that of an eligible need, as opposed to an eligible *individual*. This is a key shift in the way we work and we will be focusing training for our

staff on ensuring 'Better Conversations' with people at the earliest opportunity, preventing duplication and appropriately signposting people to preventative services based within their own communities and networks.

35. In future, there will not be the same distinction between service user and carer when assessing a need. We will consider them as individuals in their own right and meet their needs in consultation with them as we develop a care and support plan.
36. Our performance during 2015/16 in completing carers' assessments has remained at a high level. The Council continues to receive very positive comments from carers in relation to the support offered to carers within the Vale of Glamorgan.
37. Carers Support Officers (CSO) have been in post since 2008 and these roles were reviewed in 2014/2015 to ensure the service will be able to meet the requirements of the Social Services and Well-being (Wales) Act. The posts are seen as essential in ensuring that carers received advice, support and assessment to enable them to continue in the caring role. During 2015/16, we successfully appointed additional Carers Support Officers and currently each care management team has a dedicated resource they can access to support their client group.
38. Young carers will benefit from our extending the capacity of Carers Support Officers with a dedicated resource to cover Children and Young People's Services. A full-time officer will support both parent and young carers in respect of their information and assessment needs. Work is ongoing to ensure young carers are identified and referred appropriately to the targeted support that the Council and its partners have in place.
39. The Carers Measure Working Group continued to meet monthly until it was disbanded in December 2015. The group utilised this period of time to give momentum to the implementation of the Interim Carers Action Plan. Work will now proceed under the auspices of the Social Services and Well-being (Wales) Act, 2014. This will consider the results of the 'State of Caring Wales (2015) survey, the Young Carers 'Speak Out' survey and the 'How Cardiff and Vale University Health Board Workforce Engage with Carers' report.

40. Cardiff and Vale UHB and Vale of Glamorgan Council have developed a GP Carer Accreditation Scheme. The Scheme identifies the criteria that GP practices need to achieve to obtain accreditation for supporting carers and their families. The Bronze level largely focuses on carers' information, ensuring that GP surgeries are providing the most up to date relevant information.
41. There are carers' services, funded by the Carers Services Budget, available to carers of people with dementia which do not require an assessment of either the carer or the person for whom they care: Vale of Glamorgan Crossroads (respite), Age Connects (Hospital Discharge Service for Carers/respite), Carers Advocate, Carers Handyman, Training, Carers' Emergency Card.
42. In relation specifically to Young Carers, the Vale of Glamorgan externally commissions a Project delivered through Cardiff YMCA. Entitled 'Time for me', this service provides opportunities for young carers to participate in social activities, events and short breaks outside the school and home environment. Starting in late 2014, the service is jointly funded by the Children and Young People's Partnership (via the Families First Funding) and by Social Services. It builds on the previous delivery model by introducing more individual case work to support young carers to improve their educational attendance and attainment. Since April 2015, fifty Young Carers have been using the Project and we have received 100% positive feedback from participants.
43. The full time Young Carers Project Worker for the Vale of Glamorgan has been working with the Council's Carers Development Officer in delivering a series of young carer awareness raising presentations to practitioners across the statutory sector and other organisations. In March 2016 young carers took part in a 'Thank You' event which was held in acknowledgement of all their caring roles. The day focused on looking at how services for young carers could be improved. There are a series of young carers consultation events planned to take forward the issues raised at this event.
44. The Family Information Service is a one-stop information service for parents and carers of children and young people aged 0-20 years in the Vale of Glamorgan, as well as for professionals working with families. It provides free information on a wide range of childcare options and activities for children, their families and carers. The FIS maintains a database of over 1,000 services. Families and professionals can contact the service

directly and the information is also available online via search facilities. The information is updated at least annually.

45. FIS provides an outreach service which supports parent groups in schools and new intake sessions. The service works across agencies to support those individuals who are in most need of the information to empower them to participate in their communities as they wish. During 2015/16, FIS increased its use of social media to promote the service and to reach parents and professionals in the digital age. Facebook and Twitter are used on a regular basis to highlight campaigns and promote events and activities. FIS continues to be a highly valued service with a very positive response when users are asked about satisfaction levels.
46. FIS also administers the Disability Index, which is a directory of children and young people in the Vale who have specific impairments. Almost 400 children are now registered on the Index and their families receive regular information; this has been an increase of 18% in the last twelve months.
47. The Older People's Forum in the Vale continues to be very active advocates and provide an important voice in service development issues. The Council also has a Corporate Parenting Panel, to make sure that all the children and young people it looks after receive the support, care and protection they deserve.
48. In readiness for implementing the Act, an information portal has been developed called DEWIS Cymru. Regionally, we have worked hard to upload information about all our services and commissioned services onto this portal. The third sector has been helped to take part in this exercise complete this and we support health services to use it to maximum effect.
49. The portal is a key cornerstone for the development of an Information, Advice and Assistance (IAA) service as stipulated within the Act, to support people to access information at an early stage and maintain their independence without the need for formal statutory services support.

### **Our improvement priorities 2016-17**

- We will continue to develop the Information, Advice and Assistance Service through ongoing utilisation of the DEWIS Cymru portal.
- We will understand the requirements of the Social Services and Well-being Act in relation to all carers and respond accordingly.
- We will set up an effective Citizens Panel for engagement purposes.

## **PARTNERSHIPS AND COLLABORATIVE PLANNING**

**50. These were our improvement priorities for 2015/2016 and the progress made.**

- **We have worked with Cardiff Council and the University Health Board to develop and implement integrated services following the external review of integrated services which was started in 2014/2015.**
- **We have acted as the lead organisation with regard to the Regional Collaboration work needed for preparing to implement the Social Services and Well-being Act, ensuring all work streams were completed on time and within their agreed budget.**
- **The SEWIC collaborative arrangements are helping to ensure more effective use of resources. The collaborative now has an extensive programme including the Children's Commissioning Consortium Cymru (4Cs), which helps us to find good quality external placements for children who are looked after, an in-house fostering development project, regional adoption services, a regional brokerage and a procurement hub for high-cost adult placements.**

**51. We have continued to support joint appointments and there remain three senior posts within adult services that are joint appointments with either Cardiff Local Authority or the Cardiff and Vale UHB. In addition, the managers within adult services now have**



responsibilities across the Council and the UHB services. The Programme Manager for the Collaboration Programme has also been a joint appointment with Cardiff Local Authority.

52. In recognition of the integration agenda, an Assistant Director for Integration has been appointed across the region, with shared management of the post with Cardiff Council, Cardiff and Vale UHB and the Vale of Glamorgan Council. The appointed individual started in the role in February 2016. She will be supporting implementation of the Act through co-ordination of the Population Needs Assessment, in partnership with Public Health Wales, and development of the Regional Partnership Board. The Assistant Director for Integration also has oversight of the Intermediate Care Fund and development of the joint commissioning / pooled budget arrangements outlined in Part 9 of the Social Services and Well-being Act.
53. The Council remains committed to collaborative working where this benefits our residents and helps to ensure good use of resources, effectiveness and consistency. The Directorate continues to show commitment and leadership with regard to partnership working with the University Health Board and Cardiff Council, the third sector and private providers of social care.
54. The area of Health, Social Care and Well-being for the Vale of Glamorgan is a key component of the Council's Community Strategy. The work is driven through two main partnership bodies, i.e. the Integrated Health and Social Care Partnership and the Public Health and Well-being Board. The Partnership oversees the collaborative work undertaken between the key stakeholders (the Vale of Glamorgan Council, Cardiff Council, Cardiff and Vale University Health Board, the Vale Centre for Voluntary Services and Cardiff Third Sector Council) in developing and supporting joint social care and health services. The Public Health and Well-being Board has responsibility for steering collaborative work that addresses key health determinants for the population such as use of tobacco, food and physical activity, alcohol consumption and the uptake of immunisations. It operated originally within the Vale of Glamorgan only. Following development of a Joint Local Service Board with Cardiff Council, it was agreed that this partnership stream should be aligned with similar work undertaken in Cardiff.

55. The Partnership has benefited from the revised governance structure which was set in place last year with the aim of increasing the scale and pace of integration across health and social care services. The Integrated Health and Social Care Governance (Partnership) Board meets quarterly. The Leadership Team, comprising the Chief Executives of the relevant organisation, meets every other month and the Strategic Implementation Group of senior officers meets monthly.

56. Recent progress can be summarised as follows.

i) Strategic Review

An independent consultancy was commissioned by the Leadership Team to undertake a review of current resources and activity levels across community health and local authority services for older people. The work sought to identify key priority areas for further development. The Governance Board considered the report and agreed that the Vale of Glamorgan Council, Cardiff Council and the University Health Board (together with third sector partners) will fast track a far-reaching integration programme which will provide the public with joined up services across the region. Key members of the Board made an important public statement confirming this approach. It describes the decision as marking a historic moment in our work to deliver jointly effective services for our communities and to ensure that we make best use of our resources. In the Vale of Glamorgan, this Council and the UHB locality are already putting in place many of the changes required by the new programme of change, which will focus initially on bringing together services for older people to prolong their independence in their own homes and provide sustainable care within the community. We have made good progress. Our staff have responded exceptionally well to the new opportunities and challenges involved in reshaping services across a wide range of service user groups. An implementation plan that will ensure effective integration of priority service areas across the region has been agreed by the Board. We will be looking to involve staff as much as possible in this work through good communication and engagement, especially in team and service meetings.

ii) Delayed Transfers of Care (DToCs)

Following a meeting with the Deputy Minister for Health, the IHSC Partnership has been asked to take a lead in ensuring a significant reduction in Delayed Transfers of

Care across the Cardiff and Vale of Glamorgan community. The Vale of Glamorgan Local Authority is able to demonstrate significant progress in this area over the last two years and, as such, it is in a position to share the learning from that process with other partners. The first two months of 2015 saw a marked increase in the numbers reported across the whole Cardiff and Vale but this was followed by a significant and sustained reduction since February 2015, achieving the target rate of a 25% decrease for the year. The Deputy Minister for Health met regularly with key figures from our health and social care community to receive monitoring reports for the shared DTOC delivery plan and to review performance. Following further work to map out and change operational processes which get in the way of timely discharge, the IHSC Partnership and then the Regional Partnership Board required under the Social Services and Well-being Act will oversee a new performance management system and the delivery of remodelled services to be set in place through the Intermediate Care Fund and the Regional Collaborative Fund.

57. This partnership working has been imperative to enabling the Council to make best use of the funding made available through the Regional Collaboration Fund and the Intermediate Care Fund. These funding streams have been made available to support Local Authorities and their partners to develop services for adults in their areas. Progress on both of these initiatives has been reported to Scrutiny Committees in the Vale and Cardiff Local Authorities.
58. The Public Health and Well-being Board was established in 2011/2012 and representation at a senior level across local authority services has been maintained. During the year work has started to identify a model to improve public health and well-being across Cardiff and the Vale of Glamorgan which allows for increased collaboration and joint working while respecting the specific needs of individual communities and the roles and responsibilities of statutory organisations. It has been agreed that obesity is now the key topic which will be prioritised, to introduce a renewed approach for prevention across the Vale of Glamorgan and Cardiff. A Task Force is being initiated to develop an ambitious approach to tackling obesity, including a review of best practice internationally. The Public Health and Well-being Board has now been replaced with a joint structure including both the Vale of Glamorgan and Cardiff Local Authorities. The new structure incorporates a Performance Management Group which: ensures delivery of existing action plans and that

business 'as usual' continues at a local level on tobacco, food and physical activity; links with ongoing work by the Area Planning Board, Healthy Schools and the Cardiff and Vale Immunisation Steering Group.

59. Other key partnerships in which Social Services play a lead role continue to work well. This includes the Children and Young People's Partnership. The Local Safeguarding Children Board (LSCB) and the Local Safeguarding Adults Board (LSAB) were re-launched as regional Boards covering the Vale and Cardiff during 2014/2015. This is now a statutory requirement under the Act.
60. During 2015/2016, further integration was achieved via the projects identified through the Intermediate Care Fund. The funding was made available through the University Health Board budget and proposals were agreed by the IHSC Governance Board. There were a number of regional schemes within the programme but also some that were Vale specific that are having very positive outcomes for services users. These include:
- transforming the access arrangements to services, ensuring that people receive the support they require when they contact the service;
  - developing outcome based services to ensure people received the support they required to achieve their personal outcomes; and
  - improved working with housing services to support people to live in their own homes and to return there following an episode in hospital, including use of a respite flat within Extra Care.
61. 2015/16 was the third and last year of the Regional Collaborative Fund 15. With the reduced funding available (from £785,000 to £533,000), projects were realigned. The Programme focused on two projects - Enhanced Services for People with Learning Disabilities and Enhanced Reablement Services. The former allowed us to carry out timely reviews of care and support packages for all people with learning disabilities. New models of working, to create supported living provision in the community, were developed with housing providers. People who were in residential provision out of area were given opportunities to move closer to home and live in properties that have been adapted. The Joint Day Opportunities Strategy was implemented and it set in place some of the essential elements required to implement the Social Services and Well-being Act. The Enhanced Reablement Services project involved:

- reviewing the therapy component of complex packages of care, to achieve a more unified approach which will also reduce overall care costs;
  - increasing the capacity to screening and allocate resources effectively, to help reduce the response times for the Community Resource Service and to promote timely assessment and discharge from support services; and
  - continuing to fund third sector partners, Age Connects and the British Red Cross, to provide additional resources to accelerate the reablement of service users, using a preventative approach.
62. External funding streams such as the Intermediate Care Fund, Flying Start and the Delivering Transformation Grant have been well managed and used effectively to support our change programmes. Our work with Welsh Government policy and professional leads, the service and workforce regulators, audit and inspection bodies is characterised by mutual respect and a willingness to cooperate in improvement activity. Considerable work has been done during the year to enhance the joint working that is undertaken to ensure that all organisations are committed to the joint journey of travel and initiatives are monitored at a strategic level.
63. We continue to be an active member of the South East Wales Improvement Collaborative (SEWIC) for social services. SEWIC brings together directors of social services from ten local authorities in the area to review and develop new services that require cooperation across the region. The collaborative now has an extensive programme including the Children's Commissioning Consortium Cymru (4Cs), which helps us to find good quality external placements for children who are looked after, an in-house fostering development project, regional adoption services, a regional brokerage and a procurement hub for high-cost adult placements. The work from 2014/2015 has continued into 2015/16 to include working with Health on high cost mental health placements, which is being undertaken as an All Wales project (CCAPS). This programme is underpinned by new models of service provision, improves the availability of appropriate placements for very vulnerable service users and enables us to influence the costs charged by independent care providers.

### **Our improvement priorities 2016-17**

- We will work with the Assistant Director for Integration to achieve the work programme for the Intermediate Care Fund (ICF) and relevant parts of the Social Services and Well-being Act.
- We will ensure that, through the completion of the population needs assessment, we identify the gaps in services and seek ways to address these gaps through commissioning, co-production and exploring the development of social enterprises.
- We will cooperate with the Assistant Director for Integration in identifying opportunities to pool budgets or develop joint commissioning intentions.

## **PERFORMANCE AND QUALITY / INFORMATION SYSTEMS AND MANAGEMENT**

### **64. These were our improvement priorities for 2015/16 and the progress made.**

- We have worked with our statutory partners to review ICT support required and plan for implementation of the new All Wales system. The new Welsh Community Care Information System (WCCIS) is being designed to allow information to be shared between different Health Boards and social services departments instantly, helping to deliver improved care and support for people across Wales. The new system will enable social services (adults and children) and a range of community health services (including mental health, therapy and community nursing) to more effectively plan, co-ordinate, and deliver services and support for individuals, families and communities. It will support information sharing requirements, case management and workflow for Health and Social Care organisations across Wales. It will show where a patient is within their treatment journey and alert health professionals to key data, which will support the delivery of effective treatment.
- Following a joint procurement process between Local Authorities and NHS Wales that began in March 2013, CareWorks has been identified as the preferred supplier of the

WCCIS. Its Care Director system is currently under development to meet all of the requirements of the WCCIS. The result of the procurement process is that all Local Authorities and Health Boards in Wales can procure WCCIS and so it has the potential of becoming a National Community Health and Social Care Services system for Wales. Cardiff and Vale regional implementation is overseen by the Integrated Health and Social Care Partnership which has agreed to appoint a regional project manager and to fund a regional 'technical' lead. The Programme Board has reinforced the fact that the key aim of the WCCIS implementation is to support health and social care integration. Until implementation of the WCCIS in our region, currently planned to take place in October 2017, services will continue to use current electronic patient / client records systems (e.g. PARIS, Swift, Care First). We remain part of the SWIFT Consortium, a group of local authorities that use the same management information system and work together in making sure that it can record all activity within the service and report in a timely manner on those activities. While we were not one of the Local Authorities directly engaged in the procurement process, because of our current contract, we were involved in the evaluation process and the Director of Social Services is on the implementation governance board at a national level.

65. Managers within the Directorate have maintained effective systems for managing performance, monitoring outcomes, achievements and shortfalls, and taking corrective action as required. Audit, inspection and other external reports on performance are reported to Scrutiny Committee. In response to their findings, action plans are produced, monitored and reported to corporate management, the Executive and Scrutiny Committees.
66. Performance is a regular item on the agenda for meetings between the Director and Heads of Service and for Divisional Management Teams. The management information reports are produced on a monthly basis and are widely circulated within the Directorate. We continue to report performance information to the Social Care and Health Scrutiny Committee on a quarterly basis. The annual report for 2015/2016 highlighted a number of areas of significant achievement which included :
  - Children and Young People Services have finalised a transitions protocol that will enable the smooth transition to adulthood for children with learning disabilities through planned and timely information sharing with all key partners and agencies.

- A change Manager has been appointed across Cardiff Council, Vale of Glamorgan Council and the Cardiff and Vale UHB to develop coordinated services that work together in the interests of disabled children, a significant part of which relates to transition. A bid has been submitted for the Intermediate Care Fund to increase the pace of this change.
  - The uptake of Telecare by Vale residents continues to grow, contributing to the Council's priority of increasing independent living. The increase has enabled more people to remain within their own homes safely and with a better quality of life.
  - A 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, individual care arrangements are being adjusted to facilitate work, training and leisure activities as part of universal services, wherever appropriate to do so. In addition, we continue to work to increase the types of opportunities offered to service users and their carers at times of the day and week where respite is most needed.
  - Golau Caredig, the first Extra Care scheme in the Vale, received its first tenants in October 2014 and it was officially opened in April 2015. It continues to be a positive experience for residents and all apartments are occupied. The scheme provides an exciting new option for older people in the Vale, enabling them to remain in their communities whilst accessing support as required.
67. In partnership with Cardiff Council, amendments to the Integrated Assessment Process to reflect the requirements stipulated within the Social Services and Well-being Act have been implemented within adult and children's services, with the development of new forms for completion by social workers.
68. During 2015/2016, the Directorate continues to implement the revised Welsh Government Guidance in relation to complaints. Staff have been trained and supported with this implementation by our Social Services Complaints Officer. We continue to produce monthly reports which track how complaints are managed. These are shared with managers across the service and have assisted in improving significantly compliance with timescales for resolution. We have continued to seek an early resolution to enquiries and complaints, resulting in better outcomes for service users. This is achieved through mediation work undertaken by the complaints officer and the Heads of Services which has assisted in identifying solutions to complaints prior to the complainant escalating the complaint through the process.



69. There is an extensive range of policies and procedures in place across the Directorate, which establish quality standards for the service. These are readily available to staff. A review framework is in place to ensure that policies are updated at least every three years and more regularly where policy and legislative changes dictate. Policy consultation arrangements are in place, together with robust process ratification via the senior management team.

#### **Our improvement priorities 2016-17**

- We will continue to work with our statutory partners to prepare for implementation of the All Wales Social Care and Community Health IT system (WCCIS).
- We will work with Welsh Government to ensure that we report performance information in line with the new requirements of the Act during this transition year (baseline information).

## **COMMISSIONING AND CONTRACTING**

70. These were our improvement priorities for 2015/16 and the progress made.

- We set out to review our commissioning arrangements for domiciliary care to ensure value for money and quality service provision. However, this work stalled during the year due to policy changes in such areas as the National Living Wage which meant priority was given to resolving these issues before the independent sector could commit to engaging in the process. The independent sector is keen to get involved and there are plans for this work to continue into the next financial year.
- We continued to work with the Wales Cooperative Centre to develop 'accommodation with care' services for older people. A further workshop took place in January 2016. Because of welfare reform within the housing sector, this project has been halted temporarily. However, there is a considerable amount of

**work going on nationally to which the Vale of Glamorgan is linked. This action will be forwarded into next year's improvement priorities.**

- **We have been co-operating with the University Health Board and Cardiff County Council to develop an approach for jointly commissioning services as appropriate. This is necessarily long-term but quicker progress is likely as the result of appointing a regional Assistant Director for Integration, with a remit to identify opportunities for pooling budgets or developing joint commissioning intentions in keeping with the requirements of the Social Services and Well-being Act.**
71. We now have commissioning strategies in place for a range of services. These set out how the Council intends to secure the services that people will need (both now and in the future), whether these are provided by social services directly, by the third sector, by the private sector or by organisations such as stakeholder cooperatives. Commissioning is a key priority for social services and a number of actions within both the Corporate Plan and Service Plan relate to developing this area of work.
72. We use the agreed Commissioning Strategies to assist in reshaping our services and regularly monitor our progress against the agreed intentions in the Strategies. A Market Position Statement for Older People Services has been developed, enabling us to share with our providers our intentions and how we wish to work with them in the future. A workshop was held during the year which was well attended with some good suggestions. However, we have been unable to progress this further because of competing priorities and changing policy direction from Welsh Government regarding housing.
73. Through the use of Regional Collaboration Fund (RCF) we have continued to develop a completely integrated approach to reablement services and this is indicative of our ability to turn intent into service remodelling. Staff have been provided with joint training, single management, new equipment and one base. We have continued to invest in this service during 2015/16 to enhance the service through extended opening times and increased staffing.
74. We have seen an increase in the demand for Direct Payments. This is in line with the Council's priority to increase people's control and independence over their lives and care arrangements.

75. There are strong bridges between service and financial planning. As a consequence, we can provide good evidence about our work in reviewing, planning and developing services that deliver best value for money and improve outcomes for service users and carers.
76. The Provider Performance Protocol was used on a number of occasions during the year as providers have failed to meet the quality standards required. The protocol enables the Local Authority and its partners to deal with issues of poor performance in a considered and timely manner. The Protocol was revised during 2014/2015 to enable the Authority to have discussions with providers who are experiencing difficulties prior to the issues escalating which can result in risks for the individuals receiving services. This additional stage has been used well on some occasions, resulting in corrective action being taken and reducing the need to invoke the Escalating Concerns Process.
77. The Directorate has responded to the Flynn Report, *In Search of Accountability*, which followed the outcome of Operation Jasmine. We have contributed to a regional response and we are currently working through an Action Plan which tasks partners with working together closely to improve the lives of people living in care homes. Although Operation Jasmine relates to care within care homes, the lessons are also applicable to community settings and domiciliary care agencies. Our primary focus is safeguarding but we will use the opportunity to focus also on our duty to promote good quality care. This means working collectively to improve performance monitoring and ensuring robust contract monitoring, developing joint protocols and information sharing opportunities.

#### **Our Improvement priorities for 2016-17**

- We will review accommodation with care options for older people and develop our commissioning strategy for future years.
- We will identify opportunities for joint commissioning in line with Part 9 duties of the Social Services and Well-being Act.
- We will further develop relationships with our partners to implement alternative service delivery models that support the needs of vulnerable adults and children.
- Through the completion of the population needs assessment, we will ensure that we identify the gaps in services and seek ways to address these gaps through co-production and the development of social enterprises.

## FINANCIAL STABILITY AND RESOURCES

78. These were our improvement priorities for 2015/2016 and the progress made.
- We have continued to manage the budget programme plan rigorously and identified the actions required to meet the budget target for the year. Monthly meetings and regular reports to Cabinet, Scrutiny and Corporate Management Team Scrutiny have been ongoing throughout 2015/16.
  - As set out earlier in this report, we have continued to work with the Cardiff and Vale UHB and other partners to ensure that the funding available from the ICF fund was used to benefit services in the Vale of Glamorgan.
79. Resource management is a key priority for Social Services. Establishing the Budget Programme Board has ensured that the financial position within Social Services continues to be monitored and managed at a senior level across the Council.
80. 2015/2016 proved to be a very challenging financial year for Social Services. As well as dealing with increased demand for services, Social Services was also required to make cost savings of nearly £1.5m as part of the Social Services Budget Programme. Detail of expenditure in 2015/2016 is shown below.

<b>Service</b>	<b>Budget (£'000)</b>	<b>Spend (£'000)</b>	<b>Variance (£'000)</b>
Children and Young People	14,631	14,626	+5
Adult Services	37,874	37,875	(1)
Business Management and Innovation	361	364	(3)
<b>Directorate Total</b>	<b>52,866</b>	<b>52,865</b>	<b>+1</b>

81. In Children's Services, additional savings were achieved through favourable variances in to the Joint Budget for Residential Placements for Looked After Children and the staffing budget.
82. In Adult Services, the key pressures were the demographic changes in relation to older people and the need to increase the provision of social care to those who were becoming very frail. This resulted in an adverse variance of £412k on community care packages, which also includes the under recovery of income received under the Deferred Payments Scheme. The Directorate claimed additional funding from the Intermediate Care Fund at the end of the financial year on a one-off basis.

83. Within the Business Management and Innovation Division, there was a favourable variance of £72k, with a major contribution from the staffing budget where vacancies have been held during the year pending review of services. However, a contribution to the reserves to allow for cost implications of the Social Services and Well-being Act resulted in an adverse variance of £3,000.
84. While 2015/16 ended with a favourable financial position for the Directorate, managing expenditure proved to be immensely challenging and there is little prospect of any respite in the year ahead. Social Services will have to make further savings throughout the duration of the Council's medium-term financial plan, notwithstanding increased costs and demand for care and support. The Directorate is currently required to find savings of £2.257m by the end of 2019/20 while the savings target for 2016/17 alone is £1.002m.
85. The ongoing financial pressures have been reported regularly to Cabinet, Scrutiny and the Corporate Management Team and the Budget Programme Board has continued to meet during 2015/2016.

#### **Our improvement priorities 2016-17**

- We will continue to manage the budget programme rigorously and identify the actions required to meet the budget target for the year.
- We will work with the Cardiff and Vale UHB and other key partners to ensure that the funding available from the ICF fund can be used to benefit residents of the Vale of Glamorgan and to help us to reshape models of care and support.
- We will develop an outcome-based commissioning pilot scheme for domiciliary care.

## WORKFORCE DEVELOPMENT AND MANAGEMENT

86. These were our improvement priorities for 2015/2016 and the progress made.
- We supported all front line staff to be trained in readiness for the implementation date of the Social Services and Well-being (Wales) Act 2014. Staff were regularly updated via StaffNet and Core Brief. We also engaged 'change champions' to support staff at a practitioner level.
  - We ensured that staff from across the social care sector were able to access e-learning opportunities.
  - We continued to work with partners, especially Cardiff Council, to plan and deliver training on a joint basis, to meet the requirements of the Welsh Government Social Carer and Workforce Development Grant. An operational group has been planning how to establish a joint Workforce Partnership for the Vale of Glamorgan and Cardiff and we intend to consult on a proposal in the autumn of 2016.
87. The Directorate has in place and delivers whole sector workforce plans which demonstrate that we are implementing measures to ensure that there is a sufficient, skilled, safe and focused workforce available to meet assessed needs. These plans address issues of recruitment and retention, qualifications vetting, registration, competences, skill-mix, training needs and support requirements.
88. The Performance Development and Review System (PDRS) was revised during 2014/2015 and staff from across the services are required to have an annual PDRS; this was completed for 100% of the Divisional staff. An annual qualification and training needs audit is completed for all Vale commissioned social care sector providers. Analysis of the audit material and PDRS data enables training to be planned on the basis of the needs of the whole social care sector in the Vale.
89. The process assists us to monitor the qualifications of staff within regulated social care services and provide them with training to ensure that targets are met. We can demonstrate that 25.30% of all training provided during 2015/2016 was delivered to the independent / voluntary sector. This was above the target but the proportion of staff receiving training is lower than in previous years. This was an outcome of the requirement to focus on the national implementation modules for the Social Services and Well-being

Act (Wales) 2014. Awareness sessions for the Act were made available to all our independent and third sector partners.

90. The annual training programme is responsive to the developmental requirements of the social care workforce. In the main, staff provide positive evaluations regarding training opportunities made available to them. Feedback from the Welsh Government about the way in which the Vale uses central government workforce development grants indicates that the work in the Vale continues to move in the right direction. Further work is needed to evaluate long term effects on practice.
91. Resources are used to support staff who are required to meet Welsh Government qualification targets and the percentage of qualified staff in the key groups continues to be stable. Managers and staff are very mindful of the need to promote a culture of continuous learning and evidence-based practice at all levels and to adapt social work practice in the light of relevant research.
92. We have continued to work with ICT and Corporate Training to promote and encourage greater use of e-learning through advertising, presentations, direct support and reporting. We have also increased the level of access to the Learning Pool to support this initiative. This is a cost effective and time efficient method of delivering basic awareness training and some more intensive courses.
93. For courses which are not viable when run on a single local authority basis, training is delivered in partnership with other local authorities and/or professional bodies at regional or national levels. We have a Workforce Development training and development group which includes representation from the third sector, private 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 (i.e. Cardiff University, Cardiff Metropolitan University and the Open University) and contributes to the South East Wales Education and Training Group. These arrangements help us to secure a sufficient supply of qualified social workers and practice learning opportunities.
94. The social services training team collaborate with colleagues from Health, the Care Council for Wales and the Social Services Improvement Agency to develop training

programmes in a number of Welsh Government key initiatives such as the Social Services and Well-being (Wales) Act, Dementia Care and Mental Health Services. As part of its quality assurance processes, the social services training team work closely with corporate and equalities colleagues to ensure that Vale policies and procedures, as well as national legislation and guidance, are included in all training delivered. The motivation for working in collaboration is to provide consistency, prevent duplication and ensure value for money.

95. For the last quarter of 2015/16, the primary focus for the team was to put in place the training needed by front line staff to equip them for implementation of the Social Services and Well-being Act. This has involved helping to commission a national programme and then converting it for the local context.
96. The Council has a range of policies in place which provide support to staff, including flexi-time, special leave scheme, career break scheme and job share. These all contribute to creating a settled and productive workforce. The Directorate experienced a higher level of absence due to ill health during 2015/2016 than in the previous financial year. It rose from 12.65 average days lost per FTE in 2014/15 to 13.57 in 2015/16. Stress related absence was noted in 33.4% of absences recorded. The Council has introduced new plans to improve absence management and these were starting to have an impact in the last quarter of the year.
97. The Council has established a corporate safeguarding group to ensure that its personnel policies reflect the requirements for a safe workforce and take full account of the requirements that flow from the employment of a regulated workforce and registered individuals. The group produced an action plan and Cabinet agreed a Safer Recruitment Policy for the Council and Schools in January 2013. This continues to be monitored and reported. There has been an improvement in the level of compliance with the safer recruitment policy; no breaches have been reported during the last twelve months.
98. To support the process and ensure sufficient information is available to all employees, a dedicated page has been developed on the Council's StaffNet page and the StaffNet schools page; this provides easy access to the safer recruitment policy, supporting guidance and the risk assessment form.



### **Our improvement priorities for 2016-17**

- We will monitor implementation of the Corporate Safeguarding Policy across the Council through effective audit.
- We will develop tools to support staff to feel more confident in their work to safeguard vulnerable people through effective procedures for referral and also for Adults Protection Support Orders in line with the Act.
- We will implement new corporate HR policies in areas such as staff engagement, staff charter, Management of Attendance, PDRS.

## **EQUALITY AND DIVERSITY**

99. Equality and diversity form an integral part of our service planning. The Council has a range of policies in place to ensure that we meet our obligations in areas such as the Welsh Language. The corporate centre monitors the effectiveness of the work done by the Directorate in complying with these policies.
100. We continue to work on the 'More than just words' agenda, the Welsh Government policy for health and social care services. We have supported corporate colleagues in preparing for greater compliance with the amended Welsh Language Standards which will operate from April 2016. We continue to encourage Welsh speakers to undertake refresher courses and become more confident in their ability to use the language in their work environment. Service plans are being developed to ensure that each area is better equipped to respond to the needs of Welsh speakers.
101. As well as distributing information throughout the community, we continue to make available through the corporate contact centre a range of leaflets that provide enquirers and those referred to social services with a bespoke set of information. The Vale of Glamorgan Care Directory, available at a range of outlets, offers advice and signposting to people looking to address their own social care needs independently.

102. The Department continues to work with its partners to produce joint information and signposting where practicable. Restructuring the Adult Services Division enabled us to provide enhanced services for people at their first point of contact, which has already brought about a significant change in the pattern of demand for adult services.

103. All service changes within Social Services have been the subject of an Equality Impact Assessment and these are now included as appropriate in Cabinet Reports, to help the Executive to make well-informed decisions.

## **SAFEGUARDING**

104. The central safeguarding unit within the Directorate is now well established. Additional capacity has been brought into the central team to minimise the burden on the case management teams within adult services. The unit provides advice, guidance and consultation across the social services directorate and to other Council directorates. Cabinet and the Scrutiny Committee are provided with regular reports to demonstrate our effective operational and strategic management of the multi-agency responses to allegations of abuse and neglect, our monitoring activity and plans for improving child and adult protection and safeguarding systems.

105. The number of children and young people whose names are included on the Child Protection Register (CPR) has risen to 101 as at 31 March 2016 (73 in 2011, 114 in 2012, 124 in 2013, 86 in 2014 and 90 in 2015). During 2015/16, there were 1055 referrals to the Intake and Family Support Team, of which 229 progressed to a strategy discussion. 167 initial child protection conferences were held compared to 178 during 2014/15. Our work in multi-agency assessment, decision making and planning continues to ensure that the most vulnerable children and young people are identified and supported appropriately.

106. A high proportion (95%) of initial and review child protection conferences have been held within statutory timescales (100% in Qtr 1 and Qtr 3, an administrative error for 2 cases in Qtr 2 which resulted in one day delay, and 1 late in Qtr 4 due to professional unavailability). All the register have a child protection plan. For adult protection, we are able to demonstrate that, in 100% of adult protection referrals, the risk was managed and vulnerable adults were satisfied or very satisfied with the protection service they received.

107. Child Sexual Exploitation continues to be a key priority area and we are well represented at the relevant planning and practice groups. The SERAF tool is now being used on a national basis to identify levels of risk for individual children in a consistent way and to ensure an appropriate response. We are piloting work to use these individual records to understand the scale of CSE activity in the area. This work is supplemented by considerable and increased sharing of intelligence with the South Wales Police and other agencies to identify specific localities where risks are higher and individuals who pose a risk to children so that CSE can be prevented or disrupted. All activity is reported to the Local Safeguarding Adults Board which co-ordinates the growing volume of work done in the region. We have introduced referral of lower level CSE concerns to the safeguarding unit to be considered for strategy discussions and we are addressing the need for more robust data collection on children and young people where CSE is a concern. We have weekly meetings with relevant agencies to share information.
108. There are established single entry referral points in both Adult and Children and Young People Services. Where referrals include concerns about risk, these are progressed as a priority. Within adult services, access to services has been made easier with the introduction of a single telephone number. All contacts and referrals for Children and Young People Services are managed through the Intake and Family Support Team. We have maintained good performance for initial decision making, with 99.62% of referrals receiving a decision within one working day.
109. There is a designated lead role for safeguarding which spans children's and adult services. There are close links between the safeguarding lead and operational services. The Council lead for safeguarding and our designated officers, all within the Social Services Directorate, provide advice and expertise to staff within the Council, wider agencies and the general public. They work hard to raise the profile of national and local guidance on child and adult protection and to ensure that all staff in the Council and in other agencies understand and operate high standards of risk recognition and safeguarding practice.
110. A corporate safeguarding policy and procedure has been developed, ratified and launched to assist all staff in their responsibilities to safeguard and promote the welfare of vulnerable people. While all staff have a responsibility to safeguard and promote the welfare of

vulnerable people, the Director of Social Services is acknowledged as being the senior officer within the Council with final accountability for this area of work.

111. The Local Safeguarding Adults Board is chaired by the Director of Health and Social Care from Cardiff Council and the Local Safeguarding Children's Board is chaired by the Vale of Glamorgan Director of Social Services. These regional boards are responsible for co-ordinating the work of partner agencies to protect those at risk of neglect or abuse and to ensure suitable arrangements are in place to prevent people becoming victims of abuse. Both Boards include appropriate multi-agency representation and both have multi-agency audit sub-groups. Identification of shortfalls is addressed by Children and Adult Services Management Teams and by the Boards. Appropriate links are made with training and policy where gaps are identified.
112. Collaboration between staff involved in Protection of Vulnerable Adults arrangements (POVA), complaints and contracting continues to operate well. There are good examples of working together to address the performance of nursing, residential and domiciliary care providers. Information is shared in a timely way in a quality assurance group that has been operational since late 2014.

## **Safeguarding Children**

**113. These were our improvement priorities for 2015/16 and the progress made.**

- We have continued to lead development of the corporate safeguarding policy for the Council. This policy has been launched and it has been placed on the StaffNet alongside guidance to support staff. Training has been provided for elected members.**
- We have started to collect will collect more robust data in respect of children about whom there are concerns relating to child sexual exploitation to inform assessment and service delivery. Child Sexual Exploitation has been and remains a key priority area for the Cardiff and Vale Local Safeguarding Children's Board. A new strategy has been completed to help consolidate emerging best practice. Police have developed a sophisticated database to help agencies gather intelligence about potential victims and perpetrators. We are engaged in a pilot scheme to gather data about the occurrence of CSE in Wales and the responses being made.**

### **Our improvement priorities for 2016-17**

- We will implement a child sexual exploitation strategy across all partners through effective engagement with other organisations.
- We will ensure that information-sharing protocols are in place and used appropriately to ensure the safety of children exposed to the risks of sexual exploitation.
- We will raise awareness of behaviours that may indicate CSE, both as a perpetrator and a victim, to reduce further the risk and scale of abuse.

### **Protecting Vulnerable Adults**

**114. These were our improvement priorities for 2015/16 and the progress made.**

- **We have worked to finalise and implement the revised structure for ensuring that Protection of Vulnerable Adult issues are dealt with in a timely and appropriate manner. A detailed action plan was developed when the current Operational Manager for Safeguarding took up her post. Improved processes are now in place, with appropriate administrative support.**
- **We have trained appropriate staff in investigating skills, helping agency decision-makers and those at the first point of contact to understand safeguarding issues, how to manage cases and provide support to people at risk of abuse or harm.**
- **We have shared information across relevant organisations and work with providers of nursing, residential and domiciliary care providers about addressing low level concerns as they arise to prevent escalation. A monthly quality assurance meeting has proved to be beneficial to partners.**

### **Our improvement priorities for 2016-17**

- We will support implementation of guidance relating to safeguarding which is being produced as a consequence of the Social Services and Well-being Act (including the Adults Protection Support Order).
- We will review the escalating concerns protocol with partners.

## **Shared Safeguarding**

**115. These were our improvement priorities for 2015/2016 and the progress made.**

- **We considered the options for providing the regional Adults Safeguarding Board with business manager capacity. This has been provided for the Local Safeguarding Children's Board and a plan has been developed to offer the same capacity to the Local Safeguarding Adults Board. Proposals are being developed for a joint business unit which will support both Boards**

### **Our improvement priorities for 2016/17**

- We will support the work of both regional Safeguarding Boards.
- We will ensure that the Operation Jasmine Action Plan is delivered.
- We will consider further the potential for joint / regional safeguarding arrangements across the two local authority areas (the Vale of Glamorgan and Cardiff).

## Deprivation of Liberty Safeguards

116. These were our improvement priorities for 2015/16 and the progress made.

- **We continued to raise awareness of the Mental Capacity Act 2005 and DoLS across health and social care through formal training and advice. A significant increase in the number of referrals is potential evidence that this has been successful.**
- **We have ensured that systems are in place for individuals and families to be kept informed of their rights under the Mental Capacity Act and Deprivation of Liberty Safeguarding processes. This has been achieved through a programme of training and an increase in the number of Best Interest Assessors.**
- **We developed a business case for additional Best Interest Assessors BIA resources for the team so that it is better able to meet statutory obligations and ensure that people are safeguarded. However, despite this additional investment, we have been unable to respond in a timely way to the increasing volume of referrals**

117. The Cardiff and Vale Deprivation of Liberty Safeguarding (DoLS) / Mental Capacity Act Team has been operational since implementation of the Safeguards in April 2009. The service is managed via the Vale of Glamorgan Council by a tripartite management board consisting of representatives from the Vale of Glamorgan Council, the University Health Board and Cardiff Council. It has developed an agreed methodology and workload management processes in line with the Mental Capacity Act 2005 and the DoLS Codes of Practice.

118. The team provides coordination of Best Interest Assessments, advice and support to health and social care teams across the sector and training for CSSIW registered care homes and all inpatient sites across the hospitals of Cardiff and the Vale of Glamorgan areas. The team received a total of 1982 referrals during 2014/2015, which is a significant increase from the previous year which was 101. This is a consequence of the significant changes to practice which were required because of a legal ruling.

### **Our improvement priorities for 2016-17**

- We will try to respond as well as possible to the demand for assessment through the increase in Best Interest Assessments capacity.
- We will ensure that we meet our statutory obligations in relation to DoLS applications, wherever possible.

## **PROGRESS IN RESPONDING TO THE REQUIREMENTS OF THE SOCIAL SERVICES AND WELL-BEING ACT**

**119. These were our improvement priorities for 2015/16 and the progress made.**

- **During 2015/2016 we completed a significant amount of preparatory work in readiness for the launch of the new Act. We used the Delivering Transformation Grant to have a dedicated team to support the project management aspects of implementing a significant legislative and practice change.**
- **Senior officers were engaged as workstream leads. They each chaired a key priority area and the work was progressed on a regional basis.**
- **Our regional co-ordinator was fully engaged with the national work programme, benefitting the region through her knowledge and expertise.**
- **Front line staff were given priority access to for the national training programme. Change champions were appointed and they were instrumental in supporting staff to look again at their practice, translating national guidance into material specifically designed for the local context and helping to generate the shifts in organisational culture that were required.**

**120. The Vale of Glamorgan's Director for Social Services is the lead Director for the implementation of the Act across the region. The Head of Business Management and Innovation has led on planning the programme.**

- **Elected members, corporate officers and key stakeholders were provided with monthly updates about progress towards implementation of the Act, and with workshops to help move forward the implementation plan.**



121. Public services need to remain responsive to the changing needs of the citizens they serve. The demographic, social and economic context in Wales is changing: people are living longer; demand for social care is increasing; there are economic pressures on family budgets and on those organisations which support people in need. We have not been able to put in place a sufficient range of community and preventative services to help people early enough or to stop problems arising. This means that when people finally do get care, it is more intensive and costly. Too much time, skills and resources can go into over-elaborate assessment that does not help people with the things they are concerned about or achieve the outcomes they want for themselves. The Social Services and Well-being (Wales) Act 2014 is designed to address these concerns. It is the most substantial piece of primary legislation enacted by the Assembly and it will have a profound impact on the provision of social care in Wales.
122. The Act is very extensive, consolidating in one place much of the legislative framework for social services in Wales. It repeals many previous laws and guidance relating to care and support and replaces them within this Act. The new law builds on the White Paper, Sustainable Social Services for Wales: A Framework for Action, which called for modernisation of the law for care and support in ways that reflected the strengths of structures, systems and policy in Wales. It is intended to transform the way social services are delivered in Wales and covers adults, children and carers. The Act brings in new duties for local authorities, local health boards and other public bodies.
123. The Act provides a new statutory framework for social services in Wales which will operate in its entirety from 6 April 2016. It consists of three main elements – the Act itself, regulations made under the Act, and supporting codes of practice and statutory guidance. In terms of intention, the cornerstone of the Act is putting individuals and the wellbeing outcomes they wish to achieve at the centre of their care. This means giving them a significant voice in, and control over, how these well-being outcomes can be achieved. Local authorities are under a general duty (under section 5) to promote the well-being of people ‘in need’ and of carers. Well-being is defined widely in section 2. The guiding principles are about co-operation and partnership, prevention and early intervention, supporting people to maintain an appropriate level of independence and control. This co-productive approach should in turn lead to more people being supported without a need for

eligibility assessments and case-managed social care support. This is seen as especially important to sustaining effective social services in an era of limited resources.

124. The key principles described in the Act can be summarised as:

- We must support people who have care and support needs to achieve well-being.
- People are to be put at the heart of the new system by giving them an equal say in the support they receive.
- Partnership and co-operation must drive service delivery.
- Services will promote the Prevention of escalating need and ensure that the right help is available at the right time

125. A great deal of preparatory work has been done in this Council and in collaboration with regional partners, especially Cardiff Council. This continued right up to 6 April and beyond. The programme of change involves nine workstreams. It is managed through task and finish groups, each of them led jointly by the relevant heads of service from both councils. The Director of Social Services in the Vale of Glamorgan is the regional lead director for the programme. The Welsh Government has provided a Delivering Transformation Grant (DTG), since 2014/15, to support plans by local authorities for making the transition to the new arrangements. As required by this grant, regional governance arrangements are in place to monitor and oversee progress.

126. New services are being developed. This includes moves towards providing an Information, Advice and Assistance Service, as required by the Act. It is being designed to ensure that people can get access to the right help at the right time to meet their individual situation. Development of this service is still work in progress as we get a better understanding of what is required and what currently exists. An important part of this Information, Advice and Assistance Service will be single points of access for social care services which adults, children and carers can use easily. A national resource directory is being developed and it will help people to get accurate, up-to-date information at any time, either at home using the internet or by contacting a single telephone number or email address. This resource directory will be available across Wales and its success will depend on local authorities, health boards, third sector and the independent sector uploading details of the resources they provide to assist people looking for care and

support. This national information portal for Wales has been named Dewis Cymru. Work on establishing the regional content for the Vale and Cardiff is progressing well.

127. Planning and Promoting Preventative Services is an essential requirement within the Act. The aim is to rebalance the focus of care and support to prevention and earlier intervention – increasing help within the community to minimise the escalation of needs to a critical level. Generalised guidance on the obligations local authorities and Local Health Boards have in relation to the development of preventative services is provided in the Part 2 Code of Practice (General Functions). This new duty for local authorities is to ensure an appropriate range and level of preventative services which:

- help prevent, delay and reduce the need for care and support;
- promote the upbringing of children by their family;
- minimise the effect of people’s disabilities;
- slow down deterioration for people with established conditions;
- help prevent abuse or neglect;
- enable people to live as independently as possible;
- promote re-ablement and rehabilitation; and
- reduce the need for care or supervision orders, criminal proceedings against children, or taking children into local authority care or secure accommodation.

128. Our third sector partners are vital in assisting with provision of preventative services while other council services such as schools, housing, leisure facilities and libraries also provide well-being services. It is intended that a full list of preventative services will develop as the national resource directory becomes more widely used and updated. The duty to undertake a population needs assessment by March 2017 will help authorities to identify the range of preventative and well-being services available. Local authorities and local health boards must:

- jointly assess the extent to which there are people who need care and support and carers who need support in the local area;
- identify the range and level of services required to meet those needs;
- assess the current range and level of preventative services and whether these are sufficient, including the match with the profile of the Welsh language community;

- for each local government electoral cycle, publish a population assessment report which is informed by engagement with a wide range of citizens, stakeholders and providers. The population needs assessment will inform the future planning of services and identify any gaps in service provision. It will be carried out on a regional basis with the option to break down information to a locality level.

129. The Act requires local authorities to make significant changes to current Assessment and Eligibility practice, with a move away from 'identifying what services an individual needs' to an emphasis on what care and support they require to achieve the personal outcomes that 'matter to them'. The aim is to streamline assessments through a single process for children, adults and carers while recognising their different requirements. The duty to assess is mandatory if the person 'may' have a need for care and/or support (sections 19, 21 and 24). Once an assessment has commenced, then there is a duty to consider whether the person's needs meet the eligibility criteria, which consider (among other things) the availability of 'non-local authority' care and support. When undertaking the assessment, the Act and the regulations require the local authority to have regard to a wide range of factors. As long as these are considered, it is for the local authority to decide how wide and how deep the assessment ranges (i.e. what is 'proportionate in the circumstances'). This means that the local authority must look at the need for: support, preventative services; information, advice or assistance; and also whether the individual works or wishes to do so; whether they want to participate in education, training or any leisure activity, etc. Assessments must consider: (a) the person's circumstances; (b) the person's personal outcomes; (c) the barriers to achieving these outcomes; (d) the risks if these outcomes are not achieved; and (e) the person's strengths and capabilities (reg 4). Copies of assessments must be offered to the person assessed (reg 6) and reviews must be undertaken when there has been a 'significant' change in circumstances (reg 7).

130. Having completed the assessment, if the authority is satisfied that the person has needs for care and/or support then it must decide if any of these needs meet the eligibility criteria: it is the need for 'support' that is the triggering issue, requiring that the authority take the assessment to the next stage. Section 32 states that, where an authority has carried out an assessment which has revealed that the person has needs for care/support, then it must decide if these needs meet the eligibility criteria and if they do, then it must meet those needs by providing assistance in a variety of ways (listed in section 34). The Care

and Support (Assessment) (Wales) Regulations 2015 require that there must be a named person for every assessment and that she/he must have the skills, knowledge and competence to carry out the assessment and have received training in the carrying out of assessments. The Code of Practice stipulates the appropriate levels of qualification.

131. Eligibility is not about giving a right to a service; it is about access to care and support to meet personal outcomes. The individual has an eligible need for care and support if an assessment establishes that they can only overcome barriers and achieve their personal outcomes through the local authority preparing a care and support plan (or a support plan for carers) and ensuring that it is delivered. The Act not only consolidates the existing three Carers Acts, it also removes: (1) the requirement to establish that the carer is providing or intending to provide ‘a substantial amount of care on a regular basis’; and (2) the requirement that carers ‘request’ an assessment. The assessment obligation will be triggered by the appearance of need. The duty to assess applies regardless of the local authority’s view of the level of support the carer needs or the financial resources he or she has or the financial resources of the person needing care. Specific consideration must be given to:

- the extent to which the carer is able, and will continue to be able, to provide care, and the extent to which the carer is willing, and will continue to be willing, to do so;
- whether the carer works or wishes to do so; and
- whether the carer is participating in or wishes to participate in education, training or any leisure activity.

132. The assessment and eligibility process is one of the most important parts of the care and support system. It should not be viewed as a gateway to care and support, rather, a critical intervention in its own right that can help individuals to understand their situation and overcome barriers to achieving their personal outcomes. Each local authority is developing a new eligibility and assessment of need process to ensure compliance with the Act. This is being done through a series of workshops involving Change Champions and small groups of other practitioners. The old legislation contained exhaustive lists of services that could be provided for adults in need. The 2014 Act repeals these statutes and provides an illustrative list of ‘ways in which a local authority may meet needs’ (for people in need and/or carers), namely:

- accommodation in a care home, children's home or in premises of some other type;
- care and support at home or in the community;
- services, goods and facilities;
- information and advice.
- counselling and advocacy;
- social work;
- payments (including direct payments);
- aids and adaptations;
- occupational therapy.

133. The Act (as with the previous legislation) places a duty on local authorities to meet the eligible needs of adults. However, it strengthens the nature of this 'right' in relation to 'children in need' and for carers as it converts what was formerly a 'power' into a duty to have their eligible needs met. In addition, there is a duty to meet the needs of people, who (although their needs are insufficient for the purposes of the 'eligibility criteria') are nonetheless considered to be at risk of abuse or neglect. Separate sections address the duties in relation to adults, disabled children, carers of adults and carers of children.

134. In part because of time taken to take the legislative framework through the Assembly, the timescales for implementing such changes will be especially challenging and some will take longer to implement than others. There will be a need also for organisations to achieve, in some areas, a cultural shift which alters the interaction between practitioners and individuals needing care and support. For example, professionals will need to help people to think about 'what sort of life I would like and what needs to change to make this happen?'.

135. IT systems are being updated to reflect the new requirements and training is planned for all staff most affected by the changes, to be delivered during March. This work will also take account of the new and revised performance measurement requirements. Section 8 requires the Welsh Ministers to issue a 'statement of outcomes'. This is intended to be a strategic planning tool that will be used to assess whether the lives of people 'in need' in Wales are being materially improved by the new legislative framework. The code of

practice in relation to measuring social services performance sets out six quality standards that local authorities 'must' achieve and on which their performance will be measured.

136. The Act aims to strengthen and build on existing safeguarding practice in Wales to ensure that people are able to live their lives to the full. There are new duties to report a child at risk or an adult at risk for all relevant partners of a local authority and also for a local authority to make enquiries if it has reasonable cause to suspect that a person within its area is an adult at risk or to make enquiries if they are informed that a child may be at risk (linking into section 47 of the Children Act); and to take steps to ensure that the child is safe. The Act introduces adult protection and support orders (APSOs). These are a new function designed to enable a local authority to properly assess whether a person is an adult at risk and, if so, to make a decision about any action that should be taken. To grant an order there needs to be reasonable cause to suspect that a person is an adult at risk and that the order is needed to be able to assess them, and that using the order will not result in their being at greater risk of abuse or neglect. APSOs are only to be used in exceptional circumstances where other attempts to speak to the adult considered to be at risk have failed.
137. The Act establishes regional Safeguarding Children and Adults Boards and these are already in place for Cardiff and the Vale, chaired by the Directors of Social Services. These Boards have two main roles - prevention and protection. There is representation on Boards from a range of statutory agencies, such as health, probation and the police, not just local authorities. Children's and Adult Safeguarding Boards have responsibility to review practice and to disseminate information on best practice. Safeguarding Boards should ensure that national policies and procedures are relevant and fit for purpose. Boards must publish a plan each financial year setting out what they intend to do, and a report on progress and work achieved at the end of that year. They can also ask for, and be asked for, information from partner agencies.
138. Children and young people are covered by all parts of the Act and there are specific duties for looked after and accommodated children and young people, and those leaving care. The Act replaces most of Part III of the Children Act 1989 (Appendix 1). The assessment of children in need and their families, and the delivery of any services to meet those

needs, is being managed through the Eligibility and Assessment of Need workstream, seeking to develop a single and streamlined assessment process.

139. The numbers of looked after children and young people in Wales have been rising. The Act seeks to address this and aims to change the way children and families' care and support needs are met. Key to the Act for children and young people is the importance of promoting their upbringing by their family. This means seeking to deescalate the need for formal intervention in their lives and to strengthen the capacity of families to care for their children wherever it is safe to do so. Where it is necessary to look after a child, the Act seeks to achieve greater stability for children by increasing the choice of placements locally, supporting continuation of important relationships and school life, and finding the right permanency solution sooner. Creation of the National Adoption Service and regional arrangements for delivering adoption services are a part of this approach. The Vale of Glamorgan is the host authority for the Vale, Valleys and Cardiff service.
140. The Act also introduces new duties, 'post 18 living arrangements', towards young people in foster care who wish to continue living with their foster parents after the age 18. The Welsh Government has developed the "When I am Ready" scheme through which the statutory duties to facilitate post-18 living will be fulfilled. We are currently working on the application of this scheme at a local level.
141. One of the key principles of the Act is collaboration, ensuring strong partnership working between organisations and co-production with people needing care and / or support. Part 9 of the Act focuses on Co-operation and Partnership setting out specific responsibilities for Local Authorities to fulfil, in partnership with Health Boards and third sector partners, and gives clear guidance on the oversight of Integrated Health and Social Care arrangements.
142. Local authorities and Local Health Boards will be required to establish Regional Partnership Boards to manage and develop services, to secure strategic planning and partnership working between local authorities and Local Health Boards and to ensure effective services, care and support are in place to best meet the needs of their respective population. The purpose is to ensure that Local Health Boards and local authorities work together to maximise their influence to shape the future development of services. The Cardiff and Vale Integrated Health and Social Care Governance Board is to be converted



into the Regional Partnership Board. The regulations set out which services will be integrated on a prioritised basis, including arrangements for pooled budgets.

143. The requirement in section 16 that local authorities must Promote Social Enterprises, Cooperatives and Third Sector Organisations to provide care and support and preventative service, including those that involve service users in the design and running of services is one of the most distinctive provisions in the Act. The attendant guidance stresses the importance of local authority awareness about procurement opportunities such as those which enable them to give preference to 'not for profit' organisations for certain contracts relating to administrative social, educational, healthcare and cultural services.
144. Workforce Development is an essential part of the change programme. Officers have been working with the Care Council for Wales, helping to develop national training materials for four core modules. External trainers were assigned through the national call off arrangements to deliver workforce development on a prioritised basis in February and March. A training plan was developed to include the period before 6th April 2016 and the months thereafter. Additional resources were available to help deliver awareness training to elected Members and to provide support for the new Regional Partnership Board.
145. As the implementation date approached, briefings on the Act increased at a team level, to support staff through this period of transition. The delivery of services and business continuity remained the top priority but it was balanced by work to continue to deliver changes in services and policy at pace over the over the next twelve months and beyond, in line with the core principles outlined in the Act. It was important to equip the Director of Social Services with the delegated authority needed to manage this balance as well as possible. The new Statutory Code of Guidance set out the duties and responsibilities of Directors of Social Services in Wales.
146. The Welsh Government has provided a Delivering Transformation Grant (DTG), since 2014/15 to support the transition for Local Authorities to the new arrangements. The Vale of Glamorgan and Cardiff will be allocated £425,220 for 2016/17 and, subject to Welsh Government's budgetary decisions, it is intended that this grant will be moved into RSG for 2017-18 in recognition of the ongoing changes which the Act is intended to drive. The grant is managed by the Vale of Glamorgan.

147. The Social Act sets a whole range of new challenges and service user entitlements which will have to be met at a time of severe financial restraints for local government and social services. It has been made clear that there will be no additional resources from the Welsh Government directly to local authorities for this purpose, apart from the transitional / transformational funding. Local authorities remain very cautious about whether there will be sufficient resources available to meet increased commitments and expectations in the face of growing demand for services. The Council will need to take into account the budget pressures that will be experienced by the Social Services Directorate as a direct consequence of the Act from the beginning of the next financial year.

148. Local authorities are empowered (but not obliged) to charge for the care and support they provide / arrange to be provided to meet a person's needs. The charge can only relate to the 'cost that the local authority incurs in meeting the needs to which the charge applies' (s59(2)). This restriction is designed to ensure that local authorities do not charge for the actual assessment process – even if the person in need is a 'self-funder'. The Act also requires that the charge imposed be no more than is 'reasonably practicable for the person to pay'. The regulations stipulate that the maximum charge for domiciliary and some other forms of community care remains at £60.00 per week. The regulations and code of practice relating to Parts 4 and 5 of the Act, introducing the updated framework, include:

- prohibiting charging for care and support for children;
- one set of financial assessment and charging arrangements for non-residential and residential care and support rather than one for each at present;
- maintaining the present weekly maximum charge and "buffer" for non-residential care and support, as well as the current capital limit used to determine who pays the full cost of their residential care themselves;
- maintaining the current individuals, and forms of care and support, for which a charge cannot be made and introducing a new provision of up to six weeks free reablement to enable a person to maintain or regain their ability to live independently so as to promote the prevention ethos of the Act;
- introducing more transparency by extending the requirement for all those who receive a charge to receive a statement detailing this and its calculation;
- introducing a consistent, universal review process to enable a person to query charges made and correct errors;

- maintaining deferred payments in residential care to enable those whose property may need to be sold to pay for this to delay its sale until a time more appropriate for them; and by introducing the ability of a local authority to charge a low set rate of interest on the amount deferred; and
- allowing authorities to recover charges and to create a charge over land where a debt occurs.

149. The charging arrangements for respite care will change so that the person will be assessed and charged as domiciliary care, rather than residential charging as at present. The estimated cost to the local authority will be approximately £107, 000. Some of the details of the new charging provisions are discretionary and officers are currently assessing the impact of the changes on current policies for residential care, non-residential care, deferred payments, direct payments and charging for carer services. We will continue to work with the existing policies until we have completed a full assessment of the changes required, in line with any additional guidance from Welsh Government.

150. Introduction of the Act is taking place within the context of the Sustainable Social Services programme. It is centrally focused on ensuring that the care and support needs of the population in Wales are not only met in the most effective way now but also in the future. Firstly, it will shift the emphasis away from responding to an individual's needs when they are becoming critical, to early intervention and preventative services to minimise the risk of those needs becoming critical in the first place. It also encourages us to make better use of resources and solutions already existing within the family or wider community, including the voluntary sector. The Act does not remove or diminish a local authority's responsibilities in any area but it is intended to reduce the reliance on more costly commissioned services over the longer term. The Act also places an emphasis on anticipating and influencing future need through better planning of services based on population needs assessments carried out jointly across the local health board footprint. The result will be targeted services that deal with the needs of the population proactively, thereby reducing the requirement for critical intervention services that would otherwise increase in a growing and ageing population.

### **Our improvement priorities for 2016-17**

- We will apply the new national performance measurement framework and the introduction of underpinning systems such as the Welsh Community Care Information System (WCCIS) and the national citizen portal (DEWIS).
- We will support the development of new approaches to practice and processes required by the Act in areas such as advocacy, assessment, the provision of Information, Advice and Assistance, etc.
- We will further develop our models of service to emphasise the role of preventative services and commissioning practices which promote social enterprises and community resilience.