

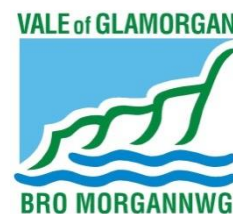
**ACTIVE &
HEALTHY**



VALE OF GLAMORGAN COUNCIL

Active and Healthy Vale Performance Report

QUARTER 1:1 APRIL 2018 – 30 JUNE 2018



Our overall RAG status for 'An Active and Healthy Vale' is GREEN

1.0 POSITION STATEMENT

Overall, we have made good progress in delivering our Corporate Plan priorities during this quarter in relation to the Well-being Outcome 4 Objectives of, 'Encouraging and promoting active and healthy lifestyles' and 'Safeguarding those who are vulnerable and promoting independent living'. This has resulted in an overall GREEN status for the outcome.

100% of planned actions aligned to 'An Active and Healthy Vale' have been attributed a Green performance status reflecting that strong progress that has been made during the quarter.

Of the 31 performance measures aligned to this well-being outcome, only seven measures could be allocated a RAG status. In relation to the measures where a RAG status is applicable, five of the seven met or exceeded target (green status), one measure missed target by 10% (amber status) and one measure missed target by more than 10% (red status). The amber measure related to the percentage of substance misuse treatment commencements within 20 working days. Our performance of 78.8% for this measure just marginally missed the national target of 80%. The red measure related to the number of new Telecare users where our performance of 80 missed both the target of 94 by more than 10% and was lower than our performance during the same period in the previous year (96 new users in quarter 1 2017/18).

The first quarter of 2018/19 has seen good progress in relation to the planned activities aligned to this Well-being Outcome. Of significant note is our exceptional performance in relation to the Green Flag awards. Eight of our urban parks and two of our Country Parks were successfully awarded Green Flag status during the quarter which recognises how well our parks and green spaces are managed and sets a benchmark for the standards for outdoors spaces both across the UK and the rest of the world.

During quarter 1 we delivered a comprehensive play programme for children and their families at a variety of events during the quarter such as the Dinas Powys Fun Day and Eats, Beats and Treats event at Barry Island as well as the provision of disabled play schemes during the Whitsun holiday.

Significant progress was also made in relation to concluding work on the Accommodation with Care Strategy which is due to be launched in October 2018. Expansion of the Adult Placement Scheme is also progressing well with two new hosts being approved during quarter 1.

We have also raised the profile of the new Integrated Autism Service by undertaking visits to Community Mental Health Teams and training for professionals on the new service has been developed to ensure we can deliver a consistent and fully integrated model across the Vale of Glamorgan.

Our focus in relation to Corporate Safeguarding continues to be strengthened where during the quarter we developed an e-module of training for staff. Our focus continues to be on compliance with the Safer Recruitment policy where our corporate compliance during quarter 1 was 86%.

Despite this progress a number of key risks and challenges remain that could over time have an adverse impact on our ability to deliver priorities associated with this well-being outcome. The financial challenges facing the Social Services remain significant going forward. This has been the result of increased demand for social care services driven by changes in demographics and the presentation of increasingly complex health and care needs in relation to both Children and Young People and Adults. The challenges associated with adherence to the Deprivation of Liberty Safeguards in terms of capacity and resourcing remains an ongoing pressure. Within Leisure Services, the greatest

challenge relates to our staff capacity to deliver on the key commitments within the Local Authority Partnership Agreement (LAPA), which could in turn have an impact on physical activity rates in the Vale.

Despite these pressure points we continue to respond well to our challenges as evidenced by our consistent performance in relation to this outcome area.

1.1 PERFORMANCE SNAPSHOT







ACTIONS				
Our performance against the Corporate Plan actions is on track for delivery, giving us an overall GREEN RAG status for this outcome				
Service Plan Actions				
Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total
			0	15
Objective 8: Safeguarding those who are vulnerable and promoting independent living				
			N/A	Total
			3	39
Total for the Outcome				
			N/A	Total
			3	54

PERFORMANCE MEASURES				
Our performance against performance measures is on track, giving us an overall AMBER RAG Status against this outcome				
Performance Measures				
Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total
			13	16
Objective 8: Safeguarding those who are vulnerable and promoting independent living				
			N/A	Total
			11	15 ¹
Total for the Outcome				
			N/A	Total
			24	31

1.2 Objective 7: Encouraging and promoting active and health lifestyles


Of the 16 indicators identified for Objective 7, 11 are annual and 5 are quarterly. Data was available for just three measures this quarter, CPM/028: Number of Sports Clubs offering inclusive or specific disability opportunities & CPM/187 Percentage of clients accessing substance misuse services who reported an improvement in their quality of life were attributed a green status and CPM/249: Percentage of substance misuse treatment commencements within 20 working days was attributed an amber status. For one measure relating to substance misuse (CPM/236) no RAG was attributed, as no target has been set and the service is establishing a baseline for this measure. For CPM/248 in relation to substance misuse no RAG was applicable, as the figure for the period was not reported.








¹ The implementation of WCCIS into Social Services is still ongoing after its launch in November 2017; whilst the users are slowly gaining confidence in recording; we currently have no reporting tool to extract the data out of WCCIS for the performance indicators. As a result data is not available for 4 PIs in Objective 8 this quarter. This accounts for the remaining indicators.

Corporate Health Actions	Action		Direction of Travel compared to previous quarter status
	Service Plan Actions	Action Status	
AH1: Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity. (2019/20)	7		N/A at quarter 1
AH2: Work with partners to deliver the Cardiff and Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions. (2017/18)	1		N/A at quarter 1
AH3: Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families. (2019/20)	1		N/A at quarter 1
AH4: Provide and promote a range of early years services including information and support for parents, access to childcare and learning opportunities to recognise the benefits of early development in achieving better outcomes for young people and their families (2019/20)	1		N/A at quarter 1
AH5: Work with the Cardiff and Vale Health and Well-being Board to undertake a range of actions to prevent and tackle obesity and encourage healthy eating and healthier lifestyles.(2019/20)	3		N/A at quarter 1
AH6: Achieve Green Flag status for 7 parks as a mark of excellence, demonstrating good amenities and community involvement in the parks. (2017/18)	2		N/A at quarter 1

1.3 Objective 8: Safeguarding those who are vulnerable and promoting independent living

Of the 15 indicators identified for Objective 8, 7 are annual and 8 quarterly. Data was available for 4 indicators this quarter, 3 were attributed a RAG status of Green (CPM/060 (SSM/027), CPM/057 (SSM/019, PAM/025) & CPM/056 (SSM/018), the remaining indicator was attributed a Red Status (CPM/209). For the other 4 quarterly indicators, no RAG status was attributable, due to the lack of a reporting tool to extract data from the WCCIS software.

Corporate Plan Actions	Action		Direction of Travel compared to previous quarter
	Service Plan Actions	Action Status	
AH7: Implement new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work streams of:	12		N/A at quarter 1


Corporate Plan Actions	Action		Direction of Travel compared to previous quarter
	Service Plan Actions	Action Status	
<ul style="list-style-type: none"> • provision of information • advice and assistance services • eligibility/assessment of need • planning & promotion of preventative services • workforce • performance measures(2016/17) 			
AH8: Improve access to health and social care services by improving the speed, simplicity and choice of how to access services. (2018/19)	6		N/A at quarter 1
AH9: Work with partners to progress the integration of adult social care and community health services. (2018/19)	6		N/A at quarter 1
AH10: Explore options for single integrated ICT systems and integrated budgets across the Cardiff and Vale region for social care. (2018/19)	1		N/A at quarter 1
AH11: Develop and implement a corporate policy on safeguarding to provide a clear strategic direction and lines of accountability across the Council. (2016/17).	6		N/A at quarter 1
AH12: Minimise delays in transfers of care and discharge from hospital through improved co-ordination of services and the delivery of the Accommodations Solutions Service. (2017/18)	1	N/A	N/A at quarter 1
AH13: Review accommodation with care options for older people and develop our commissioning strategy for future years. (2016/17)	1		N/A at quarter 1
AH14: Work with partners through the Cardiff and Vale Local Safeguarding Children's Board to develop a Child Sexual Exploitation Strategy. (2016/17)	1		N/A at quarter 1
AH15: Improve procedures with providers of nursing, residential and domiciliary care providers to enable early intervention and prevent the escalation of incidents. (2017/18)	0	N/A	N/A at quarter 1
AH16: Undertake an annual programme of targeted inspections at premises undertaking commercial activities that affect vulnerable people (for example care homes and food establishments in schools). (2019/20)	5		N/A at quarter 1

1.4 Performance Exceptions

1.4.1 Objective 7: Encouraging and promoting active and healthy lifestyles

There were no actions or performance measures attributed with a Red status during the quarter 1 period.

1.4.2 Objective 8: Safeguarding those who are vulnerable and promoting independent living

Performance Indicator	Q1 2017/2018	Q1 2018/2019	Q1 Target 2018/2019	Direction of Travel	Commentary
CPM/209: Number of new Telecare users.	96	80	94		During this quarter there were 80 new Telecare users, this can be broken down as 64 TeleV & 16 TeleV+ users.

1.5 OUR ACHIEVEMENTS

<ul style="list-style-type: none"> Positive progress continues to be made with the delivery of the Vale's Sport Plan (LAPA). The approved Local Authority Partnership Agreement (LAPA) is being implemented with additional activities planned this year in our Parks to include a number of festivals that are scheduled during quarter 2. During quarter 1, an annual report for 2017/18 was produced and submitted to Sports Wales. Sports Wales have given us positive feedback in the form of an end of year monitoring report on the Authority and identified no areas of concern. The funding for 2018/19 has been secured with Sports Wales and project delivery is underway in relation to key programmes such as the Active Young People Programme, Aquatics Triathlon, Hot Shots, Squash, Badminton, Tennis, Time banking and a Mental Well-being project. The Vale's Leisure Strategy is in its final stages development and is due to be presented shortly.
<ul style="list-style-type: none"> We have continued to work with our partners in Public Health to deliver the Public Health Wales Agenda. During the quarter some key highlights have included: <ul style="list-style-type: none"> We have progressed the implementation of the 3 year Dementia Strategy where our Dementia Champion is represented on a range of strategy meetings across the region that also feeds into the work of the Regional Project Board (RPB). Promoting the availability of healthy options awards to food businesses in Cardiff and the Vale to encourage healthier lifestyles; <ul style="list-style-type: none"> Making Active Travel improvements including walkways and cycleways have been made across the Vale and these are being promoted to encourage more active travel lifestyles; Working with schools to ensure compliance with Healthy Eating in Schools (Wales) Regulations. All primary schools are compliant with the nutritional regulations with all secondary schools compliant with food-based standards in relation to the regulations.
<ul style="list-style-type: none"> We continue to successfully deliver a comprehensive play programme for children and their families which saw during quarter 1 the delivery of Disability Play schemes during the Whitsun holiday as well as play activities that were delivered at events such as Dinas Powys Library Fund Day and the Eats, Beats and Treats event at Barry Island. The Play section have also been liaising with a variety of partners including the Council's Events Team, the Town and Community Councils to organise community-based play provision and events during the summer school holidays.
<ul style="list-style-type: none"> We continue to focus on improving the overall condition and the quality of changing facilities at our Leisure Centres. During quarter 1, electrical works, that has included the upgrading of electrical systems, commenced in our main Leisure Centres. During the quarter, Tenders were also received for the works on upgrading the changing rooms. The successful tenderer will be appointed during quarter 2.
<ul style="list-style-type: none"> Eight of our urban parks and two of our Country Parks were successfully awarded a Green Flag status during the quarter. These were in relation to Romilly Park, Barry Island, Central Park, Victoria Park, Knap Gardens, Alexandra Park, Belle Vue Park Gladstone Park as well as the two Country Parks in relation to Cosmeston and Porthkerry.

1.5 OUR ACHIEVEMENTS

This is three more flag awards than we achieved in the previous year (2017). The Green Flag status recognises and awards well managed parks and green spaces and sets the benchmark for the standards of outdoor spaces across the UK and the rest of the world.

- During the quarter, we successfully identified a number of schemes that will benefit from S106 funding subject to Members agreement. These include Fferm Goch, Ogmore and Penarth Heights). It is anticipated that these sites will benefit from an improved walking and cycling infrastructure as part of the sustainable transport provision around the Vale of Glamorgan.
- The Shared Regulatory Services (SRS) has continued to focus its attention on targeting underage tobacco sales in the Vale of Glamorgan. During quarter 1 a series of test purchasing exercises were undertaken relating to e-cigarettes. These operations enable us to assess compliance in relation to the legal requirements associated with tobacco and e-cigarette sales.
- During quarter 1, final preparations were made in readiness for the launch of the 'Buy with Confidence' Scheme with a focus on finalising the procedures and safeguards before inviting businesses to join the scheme. The service is looking to develop this into a regional model, as a number of other local authorities have expressed an interest in the scheme across a Cardiff City Footprint to enable consumers to be more informed and confident in their purchases.
- We continue to make positive progress in meeting the requirements of the Social Services and Well-being (Wales) Act. In relation to the work associated with the Regional Steering Group, a number of work streams are now in place to deliver a comprehensive action plan. For example, a carers work stream has been established and work has now commenced on developing a Carers Strategy.
- During the quarter a Regional Performance Sub-group was established. This sub-group has identified and agreed a series of performance measures that are in line with requirements of the Act that will enable us to develop a more outcome-focused approach to our performance management.
- The Contracting and Fees Setting Group has identified sub-group members whose role it is to further explore joint commissioning opportunities in line with Part 9 of the Social Services and Well-being (Wales) Act. During quarter 1, the Reflect Project, that seeks to support families who have previously had children in the care system, was commissioned on a regional basis with Cardiff as the lead authority.
- The new Integrated Autism Service has focused on raising the profile of the service amongst Community Mental Health Teams (CMHT). During quarter 1, the service visited 5 of the 8 CMHTs to promote the service. Parent/Carer workshops were also devised and are planned to be delivered during the summer. Training for professionals on the new service has also been developed. This will help to ensure that we can offer a consistent approach to delivering a fully integrated Autism Service across the Vale of Glamorgan.
- During quarter 1, we have continued to strengthen our approach to Corporate Safeguarding through implementing the recommendations arising from the Safeguarding Internal Audit report. These recommendations have now been embedded within the Corporate Safeguarding Action Plan. As part of this work, a safeguarding e-module is due to be rolled out in September to ensure all relevant staff have received the appropriate training. We continue to focus on monitoring compliance with the Safer Recruitment policy and during June 86% of appointments were compliant with the policy.
- During quarter 1, work concluded on the Accommodation with Care Strategy which is due to be launched in October 2018. Within the Market Position Statement, the Cardiff and Vale of Glamorgan Regional Partnership Board (CVGRP) are committed to reviewing local housing strategies in light of current provision in order to develop a joint regional accommodation with care strategy. As part of this there was agreement to undertake an evaluation of the level of care and support required both now and in the future. In order to complete this work, the Housing Learning and Improvement Network were commissioned by the CVGRP partnerships to undertake a review using funding from the Welsh Government's Integrated Care Fund. Their final report on this was presented in July to Scrutiny.
- We continue to focus on collating and reviewing our data sets in relation to Child Sexual Exploitation Data to analyse safeguarding activity. We have put in place a clear monitoring process, where data is reported to the authority by the lead Child Sexual Exploitation Officer via strategy meetings. This approach ensures that cases are evaluated based on the critical enquiry framework and are reported to the Regional Safeguarding Children's Board (RSCB).
- During quarter 1, 100% of adult protection enquiries were completed within the statutory timescales.
- During the quarter, only 9% of children were re-registrations on the Child Protection Register the reflects the positive impact our focus on preventative services has had on this area of performance.

1.5 OUR ACHIEVEMENTS

- Adult Social Services support and assistance continues to be successfully provided through the Customer Contact Centre (C1V) in an integrated manner. Work has commenced to review health, social care and customer services. A project manager has been appointed and HR and Organisational Development resources from the council and the University Health Board (UHB) have been accessed. It is anticipated that following an engagement period any forthcoming proposals will be developed and presented for consideration in the latter part of quarter 3. Currently 55% of adult services enquiries are resolved at the first point of contact and 88% within the Single Point of Access, including the Adult Services Intake and Assessment Team.
- Expansion of the Adult Placement Scheme is progressing well with two new hosts being approved during quarter 1. In total 14 new people have accessed the Adult Placement Scheme during the quarter for either long term/respite or additional support. We are also continuing our work on developing regional service model across Cardiff and Vale.
- Within Adult Services, a number of staff have been involved in workshops to inform the proposals /business cases in order to access ring-fenced Integrated Care Fund (ICF) monies for Dementia Services. We are also involved with developing a team around the individual approach in relation to our Dementia Strategy. This will ensure that we can better support citizens with Dementia and their carers following diagnosis.

1.6 OUR CHALLENGES

- Effective communication arrangements in relation to the transition of children and young people to Adult Mental Health services has been hampered by attendance at Transition Review and Interface group (TRIG) forums. This is an issue that has been followed up with Child and Adolescent Mental Health Service and a transition tracking mechanism has been developed to ensure that we can monitor the effectiveness of our transitional approach.
- As at quarter 1, the forecast for Social Services was one of a balanced budget. However, the financial challenges remain significant as there continues to be pressure on this service. In relation to Children and Young People Services the greatest cost pressure continues to be in relation to the placements budget linked to the cohort of children being supported who have increasingly complex needs. Within Adult Services, the main cost pressure relates to the Community Care Packages budget which is severely impacted by legislative changes in the National Living Wage. The other going challenge, is the inter-dependency on grant funding to enable us to deliver more collaborative service delivery models. The level of funding associated with the Welsh Government's Intermediate Care Fund and other regional grants is not guaranteed on an ongoing basis, which puts in jeopardy the sustainability of some of our more innovative service delivery models.
- Related to the financial challenges is managing demand for our services. The ability to meet the growing support needs of clients is increasingly becoming more difficult which in turn puts further pressure on our tight budgets. This is the result of changes in the demographic makeup (ageing population) and the increasing number of people presenting with increasingly more complex needs. This applies to both Children and Young People Services and Adult Services and is a pressure that will not disappear over time.
- The Deprivation of Liberty Safeguards (DoLS) Team has experienced inordinate demand for DoLS assessments which in turn is placing further pressure on our already stretched budgets. The timescales for adhering to these Deprivation of Liberty Safeguards (DOLS) assessments is putting pressure on officer workloads. Although, some additional resource has been allocated by the three partners, the rate of referrals continues to exceed capacity and as a result has created a backlog of outstanding requests. There has also been additional financial pressures following the ruling of AJ v A Local Authority case in 2015 which resulted in a guidance change whereby an independent Relevant Persons Representative needs to be appointed where there's any potential for a conflict of interest where a family member/friend is involved. As a result, this has added to the financial burden of the service. It's important to note that these challenges are not unique to the Vale, but is an issue that is being experienced nationally by most local authorities. To address the resource/capacity issue, a business mapping exercise will be undertaken during quarter 2 to review current business function and identify further ways in which the service can be streamlined to make more efficient use of the team's time and resources in order to address the backlog.
- WCCIS has been operational since November last year, but its roll out has not been without its challenges. Its implementation has progressed well and some previously identified issues have now been resolved. The commissioning of consultancy support to develop the finance functionality of the system has now been secured.

1.6 OUR CHALLENGES

- However, business continuity and resilience issues continue to be a challenge. In relation to staffing resilience, this is still problematic and is likely to be an issue during the next quarter. There is vulnerability in relation to system administration that is likely to impact on the development of WCCIS locally and limit our ability to resolve issues and develop forms within the system. Another ongoing problem continues to be the extraction of information/data for performance monitoring purposes. We continue to experience difficulties with the reporting of performance data but this is an issue that has also been experienced by other local authorities who are at a similar stage of the implementation process. To address this we are working closely with other local authorities to find suitable resolution to extract data more efficiently. A relatively newer challenge in relation to WCCIS implementation has been limitations of the print function within the system, which has meant that some forms cannot be printed. We are working closely with the IT department and WCCIS to rectify the issue.
- During quarter 1, the rate of delayed transfers of care was 0.75 per 1,000 population although this performance is worse than the same period in the previous year (quarter 1 2017/18); we continue to remain within our target of 2.5%. However, sustaining this level of performance going into the winter months during quarters 3 and 4 will be challenging when there will be an increased pressure on hospital beds.
- Staff capacity has had an impact on delivery on the exercise referral scheme. During quarter 1, only 64.5% of clients reported an increase in their leisure minutes at 16 weeks. Only 33.5% of clients continued to participate in an exercise programme after 16 weeks. Although this is a slight improvement on the same period in the previous year, the performance has still been impacted by the staffing numbers. As a result of depleted staff numbers, there were insufficient staff available to provide support needed by clients to maintain their momentum and encourage them to increase their activity rates. Despite the staffing pressures we endeavour to seek ways to further engage and motivate clients to complete the programme.
- We continue to perform solidly and within target in relation to visit to local authority sports and leisure facilities with 2,441.27 per 1,000 population compared with 1,452.24 per 1,000 during the same period in 2017/18. Despite this improvement, the collection of this data across its multiple sources continues to be problematic particularly in relation to sourcing data from our schools. We are working closely with schools to ensure we can receive the data in a timely way.
- Although good progress has been made in implementing projects/activities associated with the Local Authority Partnership Agreement (LAPA), there is the concern that staff shortages in the short to medium term within the division could impact on our ability to deliver on our commitments and in particular impact on physical activity rates into the longer term.
- Although our Safer Recruitment compliance has remained fairly consistent, it remains an ongoing priority for the Corporate Safeguarding Group. To address this, the Corporate Safeguarding Group are developing a proposal to further improve safer recruitment will be considered by the group over the forthcoming months with the view to implement a new approach to improve rates of compliance.

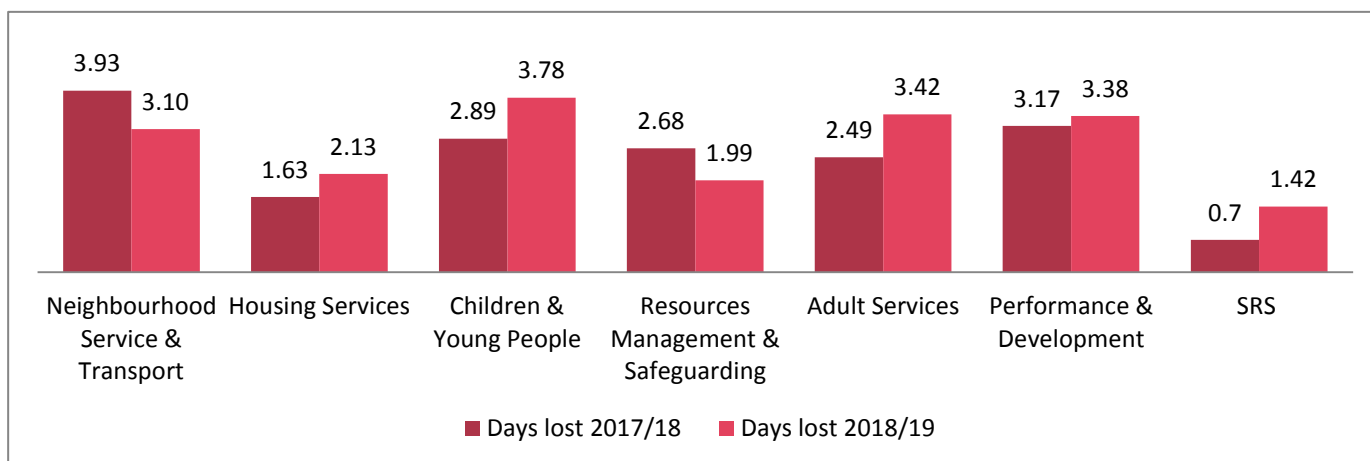
2.0 CORPORATE HEALTH: MANAGING OUR RESOURCES



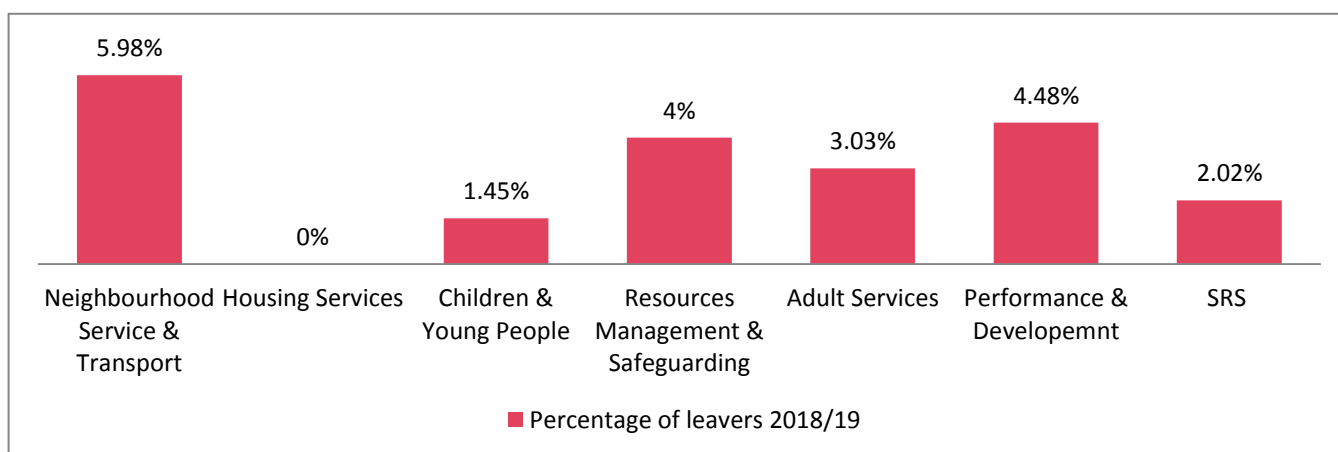
2.1 PEOPLE

Attendance management remains a corporate priority and we continue to closely monitor progress to help improve performance corporately. Between Quarter 1 2017/18 and Quarter 1 2018/19 the number of days lost per full time equivalent (FTE) due to sickness decreased by 0.27 days. Sickness absence for the whole local authority decreased from 2.28 working days lost in Quarter 1 in 2017/18 to 2.1 days in Quarter 1 2018/19. The graph below shows sickness absence data for services contributing to this Well-being Outcome at quarter 1 for the past 2 years.

2.1 PEOPLE



The total percentage turnover for services contributing to this Well-being Outcome during quarter 1 2018/19 can be seen in the chart below.



The [sickness absence report](#) and [employee turnover report](#) provide a review of attendance management and staff turnover across all council services during 2017/18.

Positive progress continues to be made in relation to a number of ongoing workforce-related issues identified by services contributing to this Well-being Outcome. Overall, services across the Council continue to make positive progress in implementing succession planning arrangements including those contributing to this Outcome. Key highlights for Q1 include:

- The new Resource Management and Safeguarding Service structure has now been fully embedded within the Social Services Directorate that has increased our service flexibility and improved service resilience. The focus during quarter 1 has been on recruitment to the remaining vacant posts within the new service structure.
- Linked to the recent service restructure within the Resource Management and Safeguarding division has been the focus on building service resilience and fluidity within teams. During quarter 1, we have progressed our review of the existing skill mix within the division and proactive recruitment has commenced to enable staff movement between sections. This approach is supported by our Staff appraisal process (#itsaboutme) to effectively identify and development staff and their potential.
- Further enhanced fluidity and resilience across the Children and Young People Services division during the quarter. Work in this area included the conclusion of a service development work stream in consultation with staff that will see the implemented of a new service structure from September 2018. This work stream consultation has given staff the opportunity where their remits have changed to express their preferences for teams they would like to work in as part of the new structure. It has also been a positive exercise to ensure we have the right skill mix within the new teams. The new structure will also add resilience to the 'front door' and create dedicated teams for children looked after and care planning and proceedings in areas where capacity was previously an issue.

2.1 PEOPLE

- A Regional Workforce Training Unit has been established with a TUPE transfer of Vale staff to the host authority (Cardiff Council). This new working arrangement between Vale of Glamorgan and Cardiff Council staff will provide a more joined up approach to social care training and development. The new model will also enable us to work purposefully and coherently on developing our approach to workforce development, business planning and improvement at a regional level. This Regional Workforce Unit will also enable us to build greater resilience within teams whilst supporting succession planning. The roll out of this new model remains an ongoing development that is overseen by the Regional Workforce Boards and Regional Steering Group.
- To support our approach to succession planning, an exercise was undertaken within Adult Services during quarter 1 to offer qualified social work staff opportunities to express their interest in emerging vacancies. This approach has proved effective and will now be implemented with support from HR from July 2018. There has also been the continued focus on the recruitment and retention of Approved Mental Health Professionals (AMHPs), as this is an area of with higher levels of staff turnover.
- Within Adult services, we have actively engaged in discussions with the newly formed Regional Workforce Training Unit to develop a new approach to mentoring newly qualified social work staff to improve consistency of support provided and we are also reviewing our local induction for the Directorate and the Division. We continue to embed practices in relation to the Social Services and Well-being (Wales) Act and all social care staff have received training on the outcome-based care planning process associated with the 'Your Choice' policy.
- Within Shared Regulatory Services (SRS), the focus has been on the development of an action plan to address opportunities for improvement identified through the recent Staff . This piece of work will continue into quarter 2, which includes a number of actions aligned to the PDR process. The Workforce Development Plan associated with the SRS will be monitored via the SRS Senior Management Team (SMT) on a quarterly basis.

All service areas continue to contribute to the Council's workforce plan and staff charter initiatives in relation to workforce development, succession planning, recruitment and retention.

2.2 FINANCIAL

The latest update for the Reshaping Service Programme was reported in April 2018, and the main work stream associated with this Well-being outcome relates to the Social Services budget programme where the focus is on managing the budgetary savings and pressures facing the Directorate. The latest update has attributed the Social Service budget programme an amber status overall. The 15 Reshaping Projects that make up the budget programme include Learning Disability Respite Care (Green status), Review Team-Review and sizing of care packages (Green status), Learning Disability Day Services (Amber status), Direct Payments (Amber status), Charging and income generation (Amber status), Reshaping Services Tranche 3-procurement (Amber status for all social Services divisions and Youth Offending Service), Reshaping Establishment Review (Amber status), physical learning disability (red status), review of older person's day centres (red status), residential care services (red status). No RAG status was applicable to two projects in relation to domiciliary care commissioning and review of management of adult care packages as the projects relating to these are not yet due to commence.

As at quarter 1, the forecast for Social Services was one of a balanced budget. However, the financial challenges remain significant as there continues to be pressure on this service. Leisure Services makes up part of the Neighbourhood & Transport Services budget, which is currently projected to out-turn on budget.

Across the Social Services divisions there continue to be a number of cost pressures facing the services. With regard to Children and Young People Services the greatest cost pressure continues to be in relation to the placements budget linked to the cohort of children being supported who have increasingly complex needs. Our focus continues to be on ensuring that children are in the most appropriate and cost effective placement to meet their needs and support their well-being. This is an increasingly volatile budget given that the complexity of need and numbers of looked after children can fluctuate over time.

2.2 FINANCIAL

Within Adult Services the main area of concern during this financial year will be the cost pressures associated with Community Care Packages. Similarly this budget is very volatile as it is influenced by legislative changes associated with the National Minimum Wage, which as a result it make it difficult to predict whether the out-turn for this division will be on budget. This division also faces pressures due to demographic growth. Within the Vale of Glamorgan we have an increasingly ageing population that have increasingly complex needs, which is increasing the cost of care packages and service provision. The service continues to focus on managing this growing demand and is looking at savings initiatives that may be funded via regional grants. The other key cost pressure within Social Services is the insecurity of grant funding.

Although the Welsh Government continue to provide Intermediate Care Fund (ICF) to Cardiff and Vale University Health board to support collaborative working with both Cardiff and Vale Councils, the level of funding provided is not guaranteed on an ongoing basis.

2.3 ASSETS

During the quarter, positive progress has been made to date in relation to maximising our key asset priorities as follows:

The refurbishment works on Rhoose Road have commenced to transform it into a Supported Living facility. Individuals that current reside out of county have been identified to be brought back to the Vale following a period of transition. The service has arranged viewings and liaised with the families to support smooth transition to the new residence for the service user.

Good progress has been made with reviewing our Social Service assets (buildings) as well those of Third Party providers to assess building compliance. All baseline property assessments have now been completed and shared with the compliance department and compliance audit visits have commenced during the quarter. Regular quarterly meetings are held with the compliance department to ensure that any areas of non-compliance are followed up and progressed. Social Services is also liaising with the legal department to seek advice on the implications for Third Sector commissioning.

We continue to focus on improving the overall condition and the quality of changing facilities at our Leisure Centres. During quarter 1, electrical works that has included the upgrading of electrical systems commencing in our main Leisure Centres. During the quarter, Tenders were also received for the works on upgrading the changing rooms. The successful tenderer will be appointed during quarter 2.

2.4 ICT

We continue to make good progress towards delivering our ICT priorities this quarter contributing to improving services for residents and customers. Key projects of particular note are outlined below:

WCCIS has been operational since November last year, and its implementation has progressed well. All training has been delivered to Social Services users and the system is not in use by Social Services staff. Its implementation is monitored via a Directorate wide Operational Group to ensure issues post implementation are identified and addressed appropriately. Some previously identified issues have now been resolved in terms of the commissioning of consultancy support to develop the finance functionality of the system has now been secured. However, business continuity and resilience issues continue to be a challenge. These issues continue to be monitored by the Operational Group and within the Corporate Risk Register.

2.4 ICT

The Social Service Directorate continues to support delivery of the 'Digital Place' strand of the Digital Strategy. Within Adult Services our focus has been on maximising the use of digital technology within our residential care homes and day services. For example, we have made use of iPads to Skype members of family and to support residents to undertake tasks online. We have also developed a partnership with local schools who visit our residents where the plan is to explore the intergenerational use of technology. C1V (Customer Contact Centres) is also promoting digital referrals and seeking to promote and encourage citizens to make use of email rather than paper-based solutions.

Work is ongoing in relation to the development of an ICT solution for the Regional Adoption Collaborative (RAC), as part of the relocation to the Vale of Glamorgan. The current discussions this quarter have focused on an IT solution that will support agile working across the region.

We have successfully launched a new Family Information Service system. During quarter 1, all data was successfully transferred to the new system on the 1st May 2018 and the system is now fully operational. The new system provides free impartial help, advice and support on a range of family matters such as childcare, activities as well as family support services in the Vale of Glamorgan in a clearer and user friendly way. The new system has also been set up, so that information on the system can be easily updated and reviewed to ensure it remains current.

The Dewis Cymru information portal continues to be developed to expand and extend its use with resources <https://www.dewis.wales/> or the regional DEWIS Twitter account @DewisWales. During quarter 1, a Dewis Support Assistant was recruited who will lead on the promotion of the service across the region.

2.5 CUSTOMER

Ensuring good customer focus remains a key priority in delivering Council services and a number of planned improvement activities have been undertaken across the Council during the quarter with this focus in mind.

In relation to the Citizen's Panel work stream, work is progressing well and the group have identified a project on 'strengthening citizen engagement' as part of the Annual Council Reporting Framework (ACRF) challenge process for Cardiff and the Vale that will help to inform best practice with regard to citizen engagement and involvement.



















The Contact Centre and Adult Services continue to work together to provide a single point of access for community health and social care services. Quarter 1 has seen further consolidation, with the planned launch of an engagement activity (Late August – November) with Health and Council staff to consider how we respond to the requirements of the Parliamentary review for Health and Social Care to further integrate our services and provide seamless care for our citizens. Additionally, the Single Point of Access (SPoA) is central to initial transformation proposals to further meet the recommendations outlined in the Parliamentary review for Health and Social Care. These proposals are due to be presented as a regional response to Welsh Government early in quarter 2.

Four business engagement workshops were held with semi-permanent make-up practitioners throughout Bridgend, Cardiff and the Vale during the quarter. This formed part of the 'improving health and wellbeing' and 'supporting the local economy' strategic objectives. All 4 workshops were positively received and captured a total of 40 practitioners throughout SRS (Bridgend 14; Cardiff 14; Vale 12). Practitioners were advised about the impending licensing regime for special procedures, in addition to be provided with more detailed information about infection control measures and product safety.

2.6 CORPORATE RISK




The most recent review of the Corporate Risk Register was used to inform this quarter's reports. As at quarter 1 there were six corporate risks that are aligned to this Well-being Outcome, one (Deprivation of Liberty Safeguards) was attributed a high risk rating, one (WCCIS) was attributed a medium high risk status, two (public buildings compliance and Integrated Health and Social Care) and two were attributed a medium/low status (safeguarding and contract management). These scores remaining unchanged since the last update reported as at end of year. In terms of forecast direction of travel, it is anticipated that the majority of risks will remain unchanged with the exception of contract management and public buildings compliance where it is forecast that these risk will continue to reduce over time. In relation to contact management good progress continues to be made in relation to implementing the contract management actions associated with the risk management Plan. Also a review of contracting practices was undertaken by the South Wales Audit Partnership that concluded that our systems are robust and policies and procedures are robust and effective. In relation to public buildings compliance it is forecast this risk will also reduce over time, now that good progress has been made in relation to undertaking assessment site visits for compliance and the new compliance database (IPF) system is currently being populated. Mitigating actions for corporate risks continue to be addressed via Service Plan actions.

The current status of the key corporate risks that have a bearing on this Well-being Outcome are as follows:

Risk Ref	Risk	Residual Risk Score			Direction of Travel ²	Forecast Direction of Travel ³	
		Likelihood	Impact	Total			
CR10	Public Buildings Compliance	2	3	6 M			
CR11	Safeguarding	1	3	3 M/L			
CR12	Intergrated Health and Social Care	2	2	4 M			
CR13	Unauthorised Deprivation of Liberty Safeguards	4	3	12 H			
CR14	Contract Management	1	3	3 M/L			
CR15	Welsh Community Care Information System (WCCIS)	2	4	8 M/H			







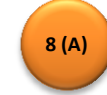

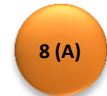

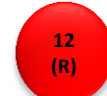

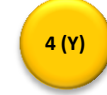



² **Direction of travel** compares residual risk score for the current quarter with the previous quarter to indicate whether the risk is increasing/decreasing or staying static.













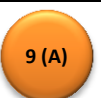


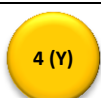


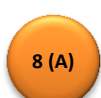








³ **Forecast direction of travel** anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

























 risk is increasing,  risk is decreasing,  risk is remaining static

2.7 SERVICE PLANS RISKS

The current status of the Service Plan risks that have a bearing on this outcome are as follows:

Risk Description	Service Area	Status	Direction	Forecast Direction
Availability of other partners to support the preventative services agenda.	Resources Management, Safeguarding and Performance	Medium		
Sport development and delivery is provided regionally based on the consortium area with the Vale of Glamorgan being worse off as a result.	Neighbourhood Services and Transport	Medium /High		
Service users cannot access services swiftly and their needs are not met.	Adult Services/ Children and Young People Services	Medium		
Reduction in service availability because of increasing demand, higher expectations and changes to eligibility criteria.	Resources Management, Safeguarding and Performance	Medium /High		
Closure/failure of our commissioned providers.	Resources Management, Safeguarding and Performance	Medium /High		
Impact of increasing Looked After Children numbers on placement availability where in-house fostering capacity is exceeded and there is an increased reliance on Independent Fostering Agency placements, and the demand on Social Work and Placement Teams.	Children and Young People Services	High		
The Council is unable to meet statutory responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	Resources Management, Safeguarding and Performance	Medium		
Other organisations are unable to meet their responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	Children and Young People Services	Medium		

Risk Description	Service Area	Status		Direction	Forecast Direction
Compliance with the requirements of the Social Services and Wellbeing (Wales) Act 2014.	Adult Serices	Medium /Low			
Increased child protection issues as a result of the number and complexity of the needs of excluded pupils.	Achievement for All	Medium			
Insufficient funds to meet rising demand for services.	Resources Management, Safeguarding and Performance	Medium /High			
Continued reduction and regionalisation of grant funding.	Children and Young People Services	Medium			
Increase in numbers and complexity of care proceedings in the context of reduced court timescales impacting on court costs, Social Worker caseloads and ensuring that other cases receive the attention they require.	Children and Young People Services	Medium /High			
Capacity and capability to meet the needs of our most vulnerable clients at a time when resources are reducing.	Children and Young People Services	Medium			
Inability to provide levels of training for staff or independent sector to ensure quality of care for citizens provided by Council.	Resources Management, Safeguarding and Performance	Medium /High			
Insufficient operational staff capacity to ensure timely assessments.	Adult Services	Medium			
	Children and Young People Services	Medium			

Risk Description	Service Area	Status		Direction	Forecast Direction
Capacity of Approved Mental Health Professionals (AMPs) to undertake reviews in line with the requirements of the Mental Health Act.	Adult Services	Medium /High			
Insufficient funding and staff capacity to meet the growing demand for services.	Children and Young People Services	Medium			
Lack of available of specialist residential placements and the associated financial impact of high cost placements on our ability to effectively meet the increasingly complex needs of children and young people.	Children and Young People Services	High			
Social Services Well-being Act impacting the ability to secure income (through charging) putting the authority at potential financial risk.	Resources Management, Safeguarding and Performance	Medium /Low			
Inability to implement requirements of the Social Services and Well-being (Wales) Act.	Resources Management, Safeguarding and Performance	Medium			
Insufficient capacity in care settings to deliver services to meet the care and support needs of service users	Resources Management, Safeguarding and Performance	Medium			
Failure to obtain Waste and Transport Revenue and any necessary Capital Funding from Welsh Government including Leisure.	Neighbourhood Services and Transport	Medium			
Implementation of new legislation may create additional demands on service delivery.	Shared Regulatory Services	Medium /low			

GLOSSARY OF TERMS

Well-being Outcome:

The relevant Well-being Outcome set by the Council and featured in the Corporate Plan 2016-20.

Well-being Objective:

The relevant Well-being Objective set by the Council and featured in the Corporate Plan 2016-20.

Population level Performance Indicators:

These headline performance indicators demonstrate progress in achieving outcomes at the community level rather than the individual level. The Council will certainly contribute towards population indicators through its work, however, it does not have sole responsibility for them and delivering sustained improvement on these indicators will involve a wide range of organisations working effectively in partnership.













Local Council Performance indicators:

These are performance indicators which tell us how well we are delivering our services or activities and will identify how these contribute to the overall community-wide impact. The focus is on whether customers are better off as a result of what we do. In order to identify the most important performance measures to demonstrate our progress we need know: How much did we do? How well did we do it and; What difference have we made?

What difference have we made?	How well have we performed?	How much? (contextual data)
These performance measures will help us demonstrate whether customers in the Vale are better off. They will seek to measure the quantity/quality of change for the better for customers.	These performance indicators are qualitative and will be used to demonstrate how well the Council performed its activities	These performance indicators are quantitative and will be used to measure how much and/or what the Council delivered.

Overall RAG status:

Provides an overall RAG health check showing our performance status against the Well-being Objective.

Measures (RAG)		Direction of travel (DOT)		Actions (RAG)		Overall (RAG) status Objective	
	Performance is on or above target.		Performance has improved on the same quarter last year.		Green: Action completed or on track to be completed in full by due date.		Green: indicates that we are well on track to deliver the key outcomes relating to the Objective as set out in the Corporate Plan.
	Amber: Performance is within 10% of target		Performance has remained the same as the same quarter last year		Amber: Minor delay but action is being taken to bring action back on track.		Amber: indicates that at this stage, we are on target to deliver the Objective but some aspects need to be addressed in order to ensure we remain on track to fully achieve the Objective.
	Red: Performance missed target by more than 10%		Performance has declined compared to the same quarter last year		Red: Action has slipped with limited progress made and an explanation must be provided including any planned remedial action(s) and where appropriate a revised completion date.		Red: indicates that at this stage, we are not on target to deliver key outcomes relating to the Objective as set out in the Corporate Plan.

SERVICE PLAN ACTIONS

NS: Neighbourhood Services and Transport	CS: Children and Young People Service	AS: Adult Services	SRS: Shared Regulatory Services
HS: Housing Services	RM: Resources Management and Safeguarding	PD: Performance and Development	

RISK MATRIX

The **Inherent Risk** defines the risk score in a pre-control environment i.e. what the risk would look like (score) without any controls in place to manage the risk.




The **Residual Risk** can be defined as the subsequent risk score as a consequence of applying controls to mitigate this risk.

Possible Impact or Magnitude of Risk	Catastrophic	4 <i>MEDIUM</i>	8 MEDIUM/HIGH	12 HIGH	16 VERY HIGH
	High	3 <i>MEDIUM/LOW</i>	6 <i>MEDIUM</i>	9 MEDIUM/HIGH	12 HIGH
	Medium	2 LOW	4 <i>MEDIUM</i>	6 <i>MEDIUM</i>	8 MEDIUM/HIGH
	Low	1 VERY LOW	2 LOW	3 <i>MEDIUM/LOW</i>	4 <i>MEDIUM</i>
Low 1-2 Low/Medium 3 Medium 4-6 Medium/High 8-10 High 12-16		Very Unlikely	Possible	Probable	Almost Certain
Likelihood/Probability of Risk Occurring					

Direction of travel compares residual risk score for the current quarter with the previous quarter to indicate whether the risk is increasing/ decreasing or staying static.

Forecast direction of travel anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

Risk Key

	Risk level increased at last review
	Risk level decreased at last review
	Risk level unchanged at last review

APPENDIX 1: Service Plan Actions

Objective 7: Encouraging and promoting active and healthy lifestyles

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH001				
NS/A034 (VS/A034): Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity.	31/03/2019	25	Green	We continue to provide opportunities for people to increase their levels of participation and physical activity with preparations for activities in 2018/19 now in the advanced stages. The approved Local Authority Partnership Agreement (LAPA) is being implemented currently being implemented and additional activities are also planned to occur in Parks this year, these activities include a number of festivals scheduled to take place in the second quarter.
NS/A035: Continue to invest in Leisure Centres including electrical installations and changing facilities at Penarth and Barry.	31/03/2019	25	Green	We continue to work to improve conditions in our leisure centres and changing facilities. Progress made in quarter 1 includes the electrical works which includes the upgrading of electrical systems commencing in the remain leisure centres following works being completed at Llantwit Major and Cowbridge in 2017/18, the works for 2018/19 are now well underway. Tenders have also been received for the Changing Room works on Sell2Wales, the successful tenderer should be appointed in quarter 2.
NS/A036 (VS/A037): Provide a School Crossing Patrol service at high risk locations to enable children to walk safely to and from school.	31/03/2019	25	Green	The Council successfully maintains 20 school crossing patrol sites across the Vale to enable children to walk safely to and from school at specific high risk locations identified. Other high risk sites have the benefit of push button controlled pedestrian crossing facilities to improve child safety and therefore no longer require school crossing patrols.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
NS/A037 (VS/A035): Seek S106 and other funding to deliver improved walking and cycling access to parks and other leisure facilities.	31/03/2019	25	Green	A number of schemes have been identified at present (Fferm Goch, Ogmore, Penarth Heights) which are to be funded from S106 with members agreement. These schemes will improve the walking and cycling infrastructure within the Vale as part of the sustainable transport provision providing access to facilities around the Vale.
NS/A038 (VS/A039): Continue to assist Sports Clubs and other suitable organisations with potential Community Asset Transfers where there is a clear financial and community benefit for both the applicant and the Council.	31/03/2019	25	Green	A report has now been considered by Cabinet looking at full cost recovery options for single use sports grounds. This is likely to lead to some further interest in Community Asset Transfers (CATs) or other models for alternative management. We will continue to provide advice and support with CATs where there is a benefit for both the Council and the applicant.
NS/A039: Implement the 2018/19 Local Authority Partnership Agreement (LAPA) resulting in increased physical activity opportunities.	31/03/2019	25	Green	The Annual end of year report for 2017 / 2018 has been produced and submitted to Sport Wales who have accepted the report and written a positive end of year monitoring report for the authority. They have highlighted no areas of concern. The funding for this financial year has been agreed with Sport Wales. Projects are in their infancy but are on track (although we do have staff shortages at the moment which could impact on figures if this becomes long term). Projects this year include; Active Young People programme, Aquatics, Triathlon, Hot Shots, Squash, Badminton, Tennis, Timebanking and a Mental Well-being project. These projects are delivered either internally and in conjunction with external partners.
NS/A048: Finalise and implement a Leisure Strategy for the Vale of Glamorgan.	31/03/2019	75	Green	Further comments have been received from the Councils performance and policy team and a further meeting is now being arranged with the consultant who assisted in the production of the strategy to finalise the document prior to presenting to Cabinet.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH002				
HS/A074: Work with partners to deliver the Cardiff & Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions.	31/03/2019	25	Green	The Area Planning Board (APB) met during Quarter 1 to review the key performance indicators (KPIs) set by Welsh Government, there are currently no concerns within the Vale. Currently the APB are awaiting guidance from Welsh Government regarding their position concerning a Substance Misuse Commissioning Strategy for 2019 onwards.
AH003				
NS/A040 (VS/A047): Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families.	31/03/2019	25	Green	We continue to provide play opportunities for all children within the Vale. Some examples of opportunities provided within quarter 1 include Disability Play schemes which took place during Whitsun holidays and play activities that were delivered at events including the Dinas Powys Library Fun Day and Eats, Beats and Treats event at Barry Island. The play section have been liaising with a variety of partners including the Council's Events team, and Town and Community Councils to organise community based play provision and events during the summer school holidays. The Healthy Living Officer (play) continues to liaise with community organisations such as Rhoose Homework Club and Seren Gwyrdd in relation to local play opportunities.
AH004				
RM/A001: Implement a bespoke Family Information Service database and record management system.	31/03/2019	100	Green	All data has been successfully transferred by 1st May 2018. As a result the Family Information System (FIS) Wales system is now fully in operation. The FIS provide free, impartial help, support and advice on a range of family issues including: childcare, activities and services for children and young people and family support services in the Vale of Glamorgan. Information can be found at http://www.valeofglamorgan.gov.uk/en/living/social_care/chil

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				dren and young people/Family-Information-Service/Family-Information-Service.aspx
AH005				
RM/A002: Contribute to the local Public Health Wales agenda by promoting and encouraging healthy eating and healthier lifestyles within our services.	31/03/2019	25	Green	We continue to have good relationships where required for public health priority plan areas. Key highlights of progress made this quarter include: Significant work continues to be undertaken on falls prevention within the Vale Community Resource Service (VCRS), integrated with Health and the work of GP clusters; Positive progress is being made in implementing the three-year strategy for dementia and our Dementia Champion ensures representation at strategy meetings for the Region and feeds in to the work of the local authority and Regional Project Board (RPB); We continue to promote the availability of healthy options awards to food businesses in Cardiff and the Vale to encourage healthier lifestyles; Active Travel improvements including walkways and cycleways have been made across the Vale and these are being promoted to encourage more active travel lifestyles; We are making good progress in delivering the Vale Physical Activity Plan and currently (2017/18) we are ranked 1 st in Wales for visits to our leisure centres where people are participating in physical activity; We continue to work with all schools as a priority to ensure compliance with the Healthy Eating in Schools (Wales) Regulations and all primary schools are compliant with the nutritional regulations and all secondary schools are compliant with food based standards from the regulations; We have also continued working with local communities to maximise existing assets including improving access to green spaces, local playing facilities and community centres enabling them to offer increased

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A002 continued				opportunities to participate in leisure and physical activity; We delivered initiatives focusing on reducing the number of people using tobacco for example, a number of test purchasing exercises were undertaken during the quarter focusing on e-cigarettes and underage sales of tobacco related products to ensure compliance. Alongside this we raised awareness raised about the dangers of smoking; 7 of our beaches have retained prestigious national seaside awards recognising best quality beaches thus ensuring visitors are guaranteed a clean, attractive and well managed coastal stretch to enjoy and we have actively promoted these facilities to encourage increased visits.
SL/A037: Continue to monitor compliance with the Healthy Eating in Schools (Wales) regulations.	31/03/2019	25	Green	All primary schools are compliant with the nutritional regulations. All secondary schools are compliant with food based standards from the regulations. This continues to be a priority for the team.
SRS/A023: Work in partnership to increase activity in relation to Cardiff and Vale Tobacco Control Action Plan (underage tobacco sales).	31/03/2019	25	Green	A number of test purchasing exercises were undertaken in quarter one focusing predominantly on e-cigarettes. The operations are used to assess compliance in relation to the legal requirements and are therefore linked to the action plan by securing compliance across the region in relation to the underage sales of tobacco.
AH006				
NS/A041: Apply for 7 Green Flag awards at key urban parks throughout the Vale of Glamorgan.	31/03/2019	100	Green	In total 8 Urban parks have been entered for and successfully awarded Green Flag status (Environment & Housing Directorate) plus 2 Country parks (via Regeneration & Planning Directorate): Urban Parks ; Romilly Park, Barry Island, Central Park, Victoria Park, Knap Gardens, Alexandra Park, Belle Vue Park, Gladstone Park, Country Parks; Cosmeston, Porthkerry. This is 3 awards higher than that achieved in 2017. The Green

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				Flag Awards recognises and rewards well managed parks and green spaces, setting the benchmark standard for outdoor spaces across the UK and around the world.
RP/A096: Apply for 2 Green Flag awards at Cosmeston Country Park and Porthkerry Country Park.	31/03/2019	100	Green	Applications were submitted to Keep Wales Tidy for both Cosmeston and PorthKerry County Parks. Following the inspections have taken place both parks have been awarded Green Flag Status. Green Flag Awards recognises and rewards well managed parks and green spaces, setting the benchmark standard for outdoor spaces across the UK and around the world.

Objective 8: Safeguarding those who are vulnerable and promoting independent living

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH007				
AS/A009: Review and amend processes at the Customer Contact Centre to support provision of advice and assistance (IAA model) in line with requirements of the Act.	31/03/2019	25	Green	A self-assessment of our Independent Advice and Assistance (IAA) service has shown that we are compliant with the requirements of the Act, however, we are continuing to explore better ways to engage with citizens at this stage and this includes using digital channels.
AS/A022: Promote the use of Dewis Cymru for the provision of information, advice and assistance for preventative services for adults.	31/03/2019	25	Green	A Dewis Support Assistant has been recruited during the quarter, they will now lead on the promotion of the service across the region. Dewis continues to be developed as a source of information provision, advice and assistance for preventative service, information can be accessed at https://www.dewis.wales/home

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
CS/A024 (CS/A016): Continue to work with Cardiff Council and Cardiff and Vale University Health Board to increase the transparency of the continuing health care process, as it relates to children and young people and seek local authority membership of the panel.	31/03/2019	25	Green	There has been an agreed commitment across the relevant agencies to develop a joint health care process. A project plan has been developed which will see the development of this process through a multi-agency task and finish group with senior manager oversight. The timeline seeks to achieve the implementation of an agreed process no later than 01/04/2019.
CS/A025: Utilising the frameworks offered by the Children's Commissioning Consortium Cymru (4Cs) and the National Fostering Framework, address the challenges associated with the shortfall of children's placements.	31/03/2019	25	Green	A regional work programme has been agreed under the National Fostering Framework (NFF) with a focus on recruitment. The Vale of Glamorgan Council is also involved in the 4Cs consultation looking at the residential requirements across Wales. Locally we intend to add a Marketing and Recruitment Officer into the establishment within the Placements Team to drive forward our recruitment campaign.
LS/A015: Provide legal advice and support on legal matters in relation to implementing new ways of working arising from the Well-being (Wales) Act with a particular focus on the priority work streams of: <ul style="list-style-type: none"> - Provision of information - Advice and assistance services - Eligibility/assessment of need - Planning and promotion of preventative services - Workforce - Performance measures - Charging (debt recovery) - Direct Payments provision – WG regulations awaited 	31/03/2019	25	Green	During quarter 1 work has remained ongoing in the development of Pooled Budgets, following the finalisation of the Pooled Budget Agreement in March 2018, with commencement in April 2018. This quarter has seen Legal Services advise in relation to the drafting of the Authorities updating charging policy which is due to go to Cabinet on 30th July. In addition to this work continues in respect of ongoing implementation of the changes in legislation policy and practice under the Social Services Well-being (Wales) Act (SSWWA) 2014 including safeguarding.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
- Pooled Funds.				
RM/A003: Contribute to the development and implementation of the Regional Partnership Board Annual Plan.	31/03/2019	25	Green	The Regional Partnership Board has continued to meet regularly. Vale of Glamorgan Council staff have contributed to the recent development day held in quarter 1 where the annual plan was considered.
RM/A004: Review and amend our processes for Adults at Risk to ensure we remain compliant with the Social Services and Well-being (Wales) Act.	31/03/2019	25	Green	The reviews of current processes are underway, taking into account the new Welsh Government guidance in relation adult safeguarding 'Handling Individual Cases'. This work will help assure staff to feel confident in using procedures and ensure effective compliance with our Safeguarding responsibilities under the Act.
RM/A005: Support the Assistant Director for Integration to develop a more joined up approach to developing preventative services that are aligned to the Social Services and Well-being (Wales) Act and Well-being of Future Generations Act to better promote independent living in relation to Adults.	31/03/2019	25	Green	An Integrated Care Fund (ICF) grant pays for Glamorgan Voluntary Services to administer the grant scheme in the Vale for preventative interventions, the first tranche has already gone out to seek applications. This work aims to see an increase in the number of preventative services recognised and developed.
RM/A006: Deliver the Citizens' Panel work stream and establish a Citizens' Panel that complies with requirements of the Social Services and Well-being (Wales) Act.	31/03/2019	25	Green	A regional Workstream has been established and is currently working well. The group has identified a project - 'Strengthening citizen engagement in the Annual Council Reporting Framework (ACRF) challenge process for Cardiff and Vale' that will inform best practice in this area.
RM/A007: Continue the work of the Regional Steering Group and the long term commitment of the previous Delivering Transformation Grant associated with delivery of new Social Services legislation.	31/03/2019	50	Green	The Regional Steering Group established has continued to work well. Relevant work streams have now been put in place to deliver the related action plan. A carers workstream has now been established and work has commenced to develop the draft Carers Strategy.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A008: Support the Welsh Government review and further implementation of the National Performance Measurement Framework in line with the new requirements of the Social Services and Well-being (Wales) Act going forward.	31/03/2019	50	Green	A Regional Performance Subgroup with this focus has been established this quarter. Relevant performance measures in line with the requirements of Act have been agreed to be monitored allowing a more outcome based approach to be taken.
RM/A026 (BM/A026): Continue to identify opportunities for joint commissioning where it can be evidenced to be of benefit in line with duties set out in Part 9 of the Social Services and Well-being (Wales) Act (Collaboration and Partnerships).	31/03/2019	50	Green	During this quarter the Contracting and Fee Setting group have identified sub group members to look at areas of joint working. The Reflect project which seeks to support families who have previously had children who have been in the care system in Children's Services has been commissioned on a regional basis with Cardiff as the lead authority.
AH008				
AS/A005: Continue to develop the Customer Contact Centre as the single point of access for community health and social care services through expanding the range of services which it coordinates and enables.	31/03/2019	25	Green	Quarter 1 has seen further consolidation, with the planned launch of an engagement activity (Late August – November) with Health and Council staff to consider how we respond to the requirements of the Parliamentary review for Health and Social Care to further integrate our services and provide seamless care for our citizens. Additionally, the Single Point of Access (SPoA) is central to initial transformation proposals to further meet the recommendations outlined in the Parliamentary review for Health and Social Care. These have are due to be present a Regional response to Welsh Government early in Quarter 2

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A014: Undertake further expansion of the Adult Placement Scheme.	31/03/2019	25	Green	Work to expand the Adult Placement Scheme (APS) is progressing with 2 new hosts being approved in quarter 1. 14 new people are accessing the APS for either long-term/respite or additional support in Q1. Work looking at regional service delivery across Cardiff and the Vale remains ongoing. As does the consultation with Shared Lives Co-ordinator and liaison with other schemes in South Wales.
AS/A023: Develop a Learning Disability Commissioning Strategy to ensure we can effectively meet the needs and outcomes of our service users both now and in the future.	31/03/2019	25	Green	Information continues to be collated and analysed in respect of Health and Social care needs across Cardiff and Vale to help design the strategy. During this quarter we have planned stakeholder and citizen engagement events to take place in quarter 2 in both the Vale and Cardiff to further this strategy.
PD/A018: Work with Adult Services to review and amend processes at the Customer Contact Centre (C1V) to support the provision of advice and assistance in line with requirements of the Social Services Well-being Act.	31/03/2019	25	Green	Work has commenced to review health, social care and customer services. A project manager identified and HR and Organisational Development resources from the council and the University Health Board (UHB) have been accessed. It is anticipated that following an engagement period any forthcoming proposals will be developed and presented for consideration in the latter part of quarter 3. Current 55% of adult services enquiries are resolved at the first point of contact and 88% within the Single Point of Access, including the Adult Services Intake and Assessment Team. A self-assessment of our Independent Advice and Assistance (IAA) service has shown that we are compliant with the requirements of the Act, however, we are continuing to explore better ways to engage with citizens at this stage and this includes using digital channels.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
PD/A031: Continue to work with partners to improve self-service options to ensure that customers' enquiries are resolved as quickly as possible, complying with the Social Care and Well-being (Wales) Act 2014.	31/03/2019	25	Green	Work has commenced to review health, social care and customer services. A project manager identified and HR and Organisational Development resources from the council and the University Health Board (UHB) have been accessed. It is anticipated that following an engagement period any forthcoming proposals will be developed and presented for consideration in the latter part of quarter 3. Current 55% of adult services enquiries are resolved at the first point of contact and 88% within the Single Point of Access, including the Adult Services Intake and Assessment Team. A self-assessment of our Independent Advice and Assistance (IAA) service has shown that we are compliant with the requirements of the Act, however, we are continuing to explore better ways to engage with citizens at this stage and this includes using digital channels.
PD/A032: Continue to strengthen and extend shared working between C1V and the Health Board to provide a more integrated service for the public.	31/03/2019	25	Green	Agreement reached between UHB and Council to commence staff and stakeholder engagement around creating a seamless health, social care and wellbeing service in the contact centre environment. Engagement planning to commence in July, with engagement activity expected to run between September and December 2018. Proposals emanating from this process are expected to be put forward to UHB and Council in January 2019.
AH009				
AS/A024: Maximise access and the use of grant funding streams such as Integrated Care Funding to support the development of further integrated services.	31/03/2019	25	Green	All Integrated Care Fund (ICF) projects from 2017/18 have continued for 2018/19 and are progressing well. These are now embedded in our business and supporting the vision of seamless services. The Learning Difficulty (LD) Commissioning Strategy (including Day Services for Complex cases), Integrated Autism Service and projects relating to Frail elderly people all

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				meet the targets and objective of the project briefs.
AS/A025: Improve communications with Mental Health Service in order to support effective transition for young people to move into Adult Mental Health Services.	31/03/2019	25	Green	<p>A draft letter to CAMHS requesting attendance at Transition Review and Interface Group (TRIG) forums in Cardiff and Vale was sent out this quarter on the 29/05/2018 to Cardiff Social Services and Cardiff and Vale University Health Board for comments. No responses were received, they were followed up on the 28/06/2018. Transition tracking has been developed for Integrated managers to complete to monitor the following:</p> <ul style="list-style-type: none"> • Numbers of young people (YP) with mental health needs identified in TRIG • Numbers of YP transferred to the Community Mental Health Team (CMHT) directly by CAMHS • Numbers of YP referred to CMHT via other routes • Number of late transition referrals (after 18 birthday) • Number of referrals taken on by CMHT (record of reasons why not taken on) • Outcomes for all individuals taken on in the year 2018-19.
AS/A026: Work with partners to develop locality models further in response to the recommendations of the Parliamentary Review.	31/03/2019	25	Green	<p>A locality Project Board has been set up and met for the first time on the 28th June 2018. This group will share information about strategic projects to ensure there are consistent messages and opportunities are maximised efficiently. The Head of Adult Services (HoAS) has been working with partners on the development of bids for the transformation funds released to implement the recommendations within the Parliamentary review with the submissions planned for early in quarter 2.</p>
AS/A027: Implement the new Community Mental Health Teams Integrated model to support working age adults with mental health needs.	31/03/2019	25	Green	<p>A Staff consultation is under way regarding the proposed move of the three Community Mental Health Teams (CMHTs) to Barry Hospital. The preliminary date for co-location is September 2018, with plans for further integration of teams by quarter 4.</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A028: Work with partners to launch a 10 year Dementia Strategy to better integrate service via a multi-agency service model.	31/03/2019	25	Green	Several members of the Adults Division have been involved in workshops to inform proposals/business cases to access ring fenced Integrated Care Fund (ICF) monies for Dementia services. The Vale is now involved with developing a team around the individual ensuring that skills and expertise are increased within existing teams, increasing confidence to better support our citizens with Dementia and their carers from diagnosis.
AS/A029: Further develop and enhance the Integrated Autism Service with a specific focus on enhancing links with other services, service users and their carers and the provision of training for professionals.	31/03/2019	25	Green	The Integrated Autism Service (IAS) has been to 5 out of 8 Community Mental Health Teams (CMHT) this quarter to explain the service. Parent /Carer workshops have been devised and are to be delivered in the summer of 2018. Professionals training has been devised with booking now available via the Cardiff and Vale Training Department. This work will help enable a consistent approach is taken in meeting the needs of people with autism wherever they seek advice and support.
AH010				
RM/A009: Continue full implementation of the Welsh Community Care Information System (WCCIS) for the Directorate with a focus on developing the financial aspects of the system.	31/03/2019	25	Green	Work to implement the Welsh Community Care Information System (WCCIS) is ongoing however there continues to be some challenges with the implementation of the Welsh Community Care Information System (WCCIS) and capacity to support any infrastructure changes. A board meeting has been arranged for the 12th July 2018 to try and clarify matters.
AH011				
AA/A014: Work in conjunction with the Corporate Safeguarding Group to identify, develop and implement current priorities relating to education services.	31/03/2019	25	Green	The corporate safeguarding group has continued to meet quarterly. Current priorities of safer recruitment and training needs were on the agenda. A proposal to improve safer recruitment compliance is being developed and will come back for future consideration and implementation. The training log for Learning and skills has been updated.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
HR/A002: Continue to support and monitor the application of the Council's Safer Recruitment Policy.	31/03/2019	25	Green	Regular reports and updates are provided regarding the application of the safer recruitment policy. Information includes how many recruitment activities have taken place that either breached safer recruitment guidelines or whether any risk assessments have taken place. Compliance figures for quarter 1 are as follows; April 69%, May 86% and June 86%. Processes are currently being reviewed to increase percentage compliance.
RM/A010: Enable the Corporate Safeguarding Group to continue to focus on delivery of Corporate Safeguarding Action Plan and put in place appropriate mechanisms to monitor compliance of the Policy across the Council for all relevant staff, contractors and volunteers.	31/03/2019	25	Green	During this quarter we have continued to work with and support representatives from other Directorates who provide reports and information in relation to their safeguarding activities. Delivery of the Corporate Safeguarding Action Plan continues to be monitored regularly by the Corporate Safeguarding Group.
RM/A011: Develop and implement training workshops for staff in respect of safeguarding enquiries relating to Adults at Risk.	31/03/2019			Once the review of processes outlined in RM/A004 has been completed, training sessions will be established for staff to attend with this focus. Work is not due to commence this quarter, this is expected to progress towards the end of the calendar year.
RM/A012: Support the completion of the review of the All Wales Child and Adult Protection Procedures.	31/03/2019	25	Green	The first chapter of the review has been sent out for consultation this quarter, the second will be considered by a development workshop before being issued. This work is planned to take place over more than one year and will help staff to feel more confident in using the procedures.
RM/A013: Implement agreed recommendations arising from the 2017/18 Safeguarding Internal audit work.	31/03/2019	75	Green	The recommendations have now been built into the Corporate Safeguarding Action Plan. Roll out of the e-module is expected in September 2018. The roll out has been planned to ensure everyone across the Council, where appropriate, undertakes

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				the safeguarding e-module training.
AH012				
AS/A030: Further enhance the Integrated Discharged Service through implementing a Care Package Approval Process.	31/03/2019			The work on implementing the care package approval process was completed during quarter 4 2017/18. We continuously review our arrangements to ensure the mechanisms remain effective in supporting hospital discharges.
AH013				
RM/A014 (BM/A014): Work with our partners regionally to develop an Accommodation with Care Strategy to promote independent living.	31/03/2019	75	Green	The Accommodation with Care Strategy has now been completed and will be launched by October 2018. Report to go to Scrutiny on 10th July to update Members on the assessment of older person's housing and accommodation across Vale of Glamorgan and Cardiff. Within the Market Position Statement (MPS) the Cardiff and Vale of Glamorgan Regional Partnership Board (CVGRP) committed to "Reviewing local housing strategies in light of current provision and developing a joint regional accommodation with care and support strategy". As part of that commitment it was agreed that the CVGRP needed to undertake an evaluation of the level of accommodation with care and support required now and in the future. In order to complete this work, the Housing Learning and Improvement Network (LIN) were commissioned by the Partnership to undertake a review, using funding provided by the Welsh Government's Integrated Care Fund. The final report is provided at http://www.valeofglamorgan.gov.uk/Documents/_Committee%20Reports/Scrutiny-HLSC/2018/18-07-10/Older-Persons-Accommodation-Appendix-1.pdf

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH014				
RM/A015: Collate and review a data set linked to Child Sexual Exploitation, to enable the authority to analyse the safeguarding activity and outcomes in this area.	31/03/2019	50	Green	Monthly information is regularly provided to the authority by the lead Child Sexual Exploitation (CSE) officer, one method is through the strategy meetings. Cases are evaluated based on the critical enquiry framework and are reported to the Regional Safeguarding Children's Board (RSCB).
AH015				
AH015: Improve procedures with providers of nursing, residential and domiciliary care providers to enable early intervention and prevent the escalation of incidents. The Operation Jasmine Action Plan was supersede by the 3-year business plan for the Regional Adults Safeguarding Board last year. Some actions remain ongoing and are regularly monitored on a quarterly basis by the Board.				
AH016				
SRS/A012: Launch a 'Buy with Confidence' (responsible trader) scheme across the region to provide residents with peace of mind when shopping or choosing a tradesperson whilst supporting reputable businesses with a 'Trading Standards approved' endorsement.	31/03/2019	25	Green	Work has continued during quarter 1 in preparation for the launch of the scheme with procedures and safeguards currently being finalised before we commence inviting businesses to join the scheme. The Service is looking towards a regional model for delivery with other local authorities expressing an interest in running Buy With Confidence on a Cardiff City Region footprint to help consumers become more informed and confident in their purchases.
SRS/A015a: Undertake monitoring of outbreaks of communicable disease in schools.	31/03/2019	25	Green	As per our routine monitoring of communicable disease cases, a total of 2 outbreaks of Norovirus were identified in 2 schools (1 Cardiff; 1 Bridgend) during Quarter 1 of 2018-2019. Neither school closed but the outbreaks were efficiently managed following close liaison between SRS Officers and Corporate, and the implementation of enhanced cleaning regimes. Both outbreaks have now concluded.
SRS/A016: Undertake interventions at care homes in accordance with the Statutory Health and Safety Section 18 Plan.	31/03/2019	100	Green	Officers carried out verification visits to all residential care homes as part of the 'safeguarding the vulnerable' strategic priority. The aim was to monitor the level of sustained compliance from phase 1 visits and the care home business

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
SRS/A016 continued				<p>forum held in February 2017. A total of 39 homes were visited (Bridgend 12; Cardiff 18; Vale 9). The visits identified a lack of sustained compliance (particularly in relation to the management of Legionella) as a result of high staff turnover issues; particularly at management level. Of the 20 Improvement Notices that were served on 9 different duty holders, 2 related to Vale of Glamorgan Care Homes. None of these were Council-owned premises. In relation to the improvement notices issued for the 2 Vale Care Homes, these related to inadequate controls in place to manage the risk of legionella in their hot and cold water systems. These improvement notices are served to secure compliance with legislative standards.</p> <p>The outcome of these visits further informed the need for additional training for care home management. During Quarter 1, 2 half day work shops were run for care home personnel which focused on Legionella management, the control of Norovirus and Influenza. The sessions were held in conjunction with Vector Air and Water and Public Health Wales. A total of 56 delegates attended the 2 workshops; 50 (89%) reporting that the session was either good or excellent value to their business; 55 (98%) reporting that they had learnt something from attending the workshop, and 48 (86%) confirming that they would make changes in their business as a result of attending the workshop.</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
SRS/A017: Perform an Annual Food Inspection of premises that undertake commercial activities that includes vulnerable people in accordance with the Food Law Enforcement Service Plan.	31/03/2019	25	Green	The Food Law Enforcement Service Plan is currently being drafted in readiness for presentation at the next SRS Joint Committee. The annual programme of inspections is currently on track however the team has recently experienced a number of officers leaving the service which in turn will have an impact on performance going forward.
SRS/A025: Conduct an underage sales exercise in relation to on line alcohol delivery sales to a person under the age of 18.	31/03/2019			Activity in relation to this action is not planned to commence until later in the financial year.

APPENDIX 2: Performance Indicators

Objective 7: Encouraging and promoting active and healthy lifestyles

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
CPM/182 (WO4/M001): Percentage of adults aged 16+ who have fewer than two healthy lifestyle behaviours (not smoking, health body mass index, eat five portions fruit or vegetables, not drinking above guidelines, meet guidelines on weekly minutes of physical activity).	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.
CPM/183 (WO4/M002): Percentage of children who have fewer than two healthy lifestyle behaviours (not smoking, eat five fruit/ vegetables daily, never/rarely drink and meet the physical activity guidelines).	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.
CPM/184 (WO4/M003): Children age 5 of a healthy weight.	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.
CPM/185 (WO4/M004): The average number of years a new born baby can expect to live if current mortality rates continue.	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.
What difference have we made?						
CPM/187: Percentage of clients accessing substance misuse services who reported an improvement in their quality of life.	69%	71.7%	67%	Green	↑	99 of 138 clients reported improved quality of life when comparing their review or exit to their initial start TOP. This in spite of other contributing factors which the APB support team is aware of which is having an adverse impact on a clients quality of life (Welfare reform including universal credit and other

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
						social factors such as housing).
CPM/191: Percentage of adults reporting that they participate in sports/ physical activity three or more times a week.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/236: Percentage of problematic substance misuse clients accessing treatment who maintain or reduce their substance misuse.	N/A	85.60%	N/A	N/A	N/A	Establishing baseline. The number of clients achieving positive changes in address their substance misuse behaviour by either abstaining or reducing to low level use (e.g. alcohol) was 86%; subsequently achieving baseline.
How well have we performed?						
CPM/096: Percentage of attendance at Flying Start childcare.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/111: Percentage of eligible Flying Start children that take up childcare offer.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/170: Percentage of users showing satisfaction with a Families First service accessed.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/192: Number of participations of children and young people in the 5x60 scheme.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/196: Percentage of Council catered schools that offer healthy food options.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/248: Percentage of individuals who exit substance misuse treatment in a planned way.	N/A	No data available	N/A	N/A	N/A	Establishing baseline. No data is available at quarter 1 for this PI.
CPM/249: Percentage of substance misuse treatment commencements within 20 working days.	N/A	78.8%	80%	Amber	N/A	At 78.8%, the Vale was marginally outside of the national target of 80% of clients accessing treatment within 20 working days of referral; as such achieving 'Amber' status.

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
How much have we done?						
CPM/028: Number of sports clubs which offer either inclusive or specific disability opportunities.	50	52	52	Green	↑	At present there are 52 cubs which offer either inclusive or specific disability opportunities however there is also an additional club who has shown an interest in becoming inclusive so the team will work to progress this. Whilst this is not specifically included within this key performance indicator (KPI), the Disability Sport Officer has also been working with local primary schools to deliver Mini Disability Inclusion training to the primary school pupils. This is increasing their knowledge around how to include disabled people within provision.
CPM/197: Number of Green Flag Parks.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 3.

Objective 8: Safeguarding those who are vulnerable and promoting independent living

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
CPM/060 (SSM/027): The percentage of re-registrations of children on local authority Child Protection Registers (CPR).	0%	9%	10%	Green	↓	Well-being national indicator. Although performance is higher than the previous year for this time period we have remained within target at 9%.
CPM/098: Percentage of adult service users receiving a direct payment.	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.
CPM/203: Percentage of adults at risk of abuse or neglect reported more than once during the year.	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
What difference have we made?						
CPM/026: Percentage of people who have received a Disabled Facilities Grant who feel the assistance has made them safer and more independent in their own home.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/050: The percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training or work based learning without an approved external qualification.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 3.
CPM/057 (SSM/019) (PAM/025): The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	0.09	0.75	2.5	Green	↓	Performance is within target at quarter 1 resulting in a Green RAG status.
CPM/058 (SSM/020a): The percentage of adults who completed a period of reablement a) and have a reduced package of care and support 6 months later.	7.41%	No data available	10%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
CPM/059 (SSM/020b): The percentage of adults who completed a period of reablement b) and have no package of care and support 6 months later.	73.33%	No data available	75%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
CPM/107: Percentage of Supporting People service users who confirm that the support that they have received has assisted them to maintain their independence.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
How well have we performed?						
CPM/056 (SSM/018): The percentage of adult protection enquiries completed within statutory timescales.	100%	100%	100%	Green	↔	Performance at quarter 1 mirrors that of the previous year, successfully achieving the target of 100%. Performance exceeds the all wales 2016/17 average of 80.10%.
CPM/112: Percentage of Supporting People clients satisfied with the support they have received.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/206: Percentage of telecare customers satisfied with the telecare monitoring service.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 2.
CPM/207: Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	70.8%	No data available	85%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
CPM/208: Percentage of care and support plans for children that were reviewed within agreed timescales (WG interim data set).	88.89%	No data available	91%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
How much have we done?						
CPM/209: Number of new Telecare users.	96	80	94	Red	↓	During this quarter there were 80 new Telecare users, this can be broken down as 64 TeleV & 16 TeleV+ users.

APPENDIX 3- Additional Performance Indicators (Well-being Outcome 4)

Objective 7: Encouraging and promoting active and healthy lifestyles

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
There are currently no additional national measures reported under this section.						
What difference have we made?						
PAM/042: Percentage of National Exercise Referral Scheme (NERS) clients who reported an increase in leisure minutes at 16 weeks.	N/A	64.58	90%	Red	N/A	Establishing baseline. Staffing numbers have dropped again due to Maternity leave and only partial cover of hours. This has left the team depleted. Staff cover was not hired prior to Maternity leave starting which left the team working against depleted numbers for more than 6 weeks out of this 12 week period.
How well have we performed?						
PAM/041: Percentage of National Exercise Referral Scheme (NERS) clients who continued to participate in the exercise programme at 16 weeks.	29.41%	33.57%	46%	Red	↑	Although performance is higher than in the previous year performance has been affected by staffing numbers which have dropped again due to Maternity leave and only partial cover of hours. This has left the team depleted. Staff cover was not hired prior to Maternity leave starting which left the team working against depleted numbers for more than 6 weeks out of this 12 week period.
How much have we done?						
PAM/017: Number of visits to local authority sport and leisure facilities during the year where the visitor will be participating in physical activity per 1,000 population.	1452.24	2441.27	2375	Green	↑	It has not been possible to obtain all the data for quarter one as a number of data sources, notably some Schools, have not provided this data at quarter 1. We will continue working with schools to get the relevant data for quarter 2.

Objective 8: Safeguarding those who are vulnerable and promoting independent living

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
There are currently no additional national measures reported under this section.						
What difference have we made?						
SSM/025: The percentage of children supported to remain living within their family.	69.22%	No data available	N/A	N/A		Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/034a: The percentage of all care leavers who are in education, training or employment at 12 months after leaving care.	43.18%	No data available	45%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/034b: The percentage of all care leavers who are in education, training or employment at 24 months after leaving care.	40%	No data available	53%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/001: Percentage of people reporting that they live in the right home for them.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/002: Percentage of people reporting they can do what matters to them.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/003: Percentage of people reporting that they feel safe.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
SSM/004: Percentage of people reporting that they feel a part of their community.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/005: Percentage of people reporting they feel satisfied with their social networks.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/006: Percentage of children and young people reporting that they are happy with who they live with.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/017: Percentage of People reporting they chose to live in a residential care home.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
How well have we performed?						
SSM/023: The percentage of Adults who have received support from the information, advice and assistance service and have not contacted the service again during the year.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/024 (PAM/028): The percentage of assessments completed for children within statutory timescales.	82.28%	No data available	91%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/026: The percentage of looked after children returned home from care during the year.	0.42%	No data available	6%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
SSM/030: The percentage of children seen by a registered dentist within 3 months of becoming looked after.	62.5%	No data available	60%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/021: The average length of time older people (aged 65 or over) are supported in residential care homes.	821.07 days	800.12 days	N/A	N/A	↑	These figures are used for guidance only and are in line with the overarching strategy to support people living in their own home. The sum of days during quarter 1 was 156824 days, this is compared to the 17160.3 in the previous year.
SSM/022: Average age of adults entering residential care homes.	78.48 years	86.94 years	N/A	N/A	↑	The sum of ages during quarter 1 2018/19 was 1319, this is lower than the sum of 2119 reported the previous year.
SSM/028: The average length of time for all children who were on the Child Protection Register during the year.	231.83 days	No data available	N/A	N/A		Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/029a: Percentage of children achieving the core subject indicator at key stage 2.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/029b: Percentage of children achieving the core subject indicator at key stage 4.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/032: The percentage of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in	1.31%	No data available	12%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
the year to 31 March.						anticipate will be rectified for Quarter 2.
SSM/031: The percentage of looked after children registered with a GP.	100%	No data available	99%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/033 (PAM/029): The percentage of looked after children on 31 March who have had three or more placements during the year.	0.86%	No data available	9%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
SSM/035: The percentage of care leavers who have experienced homelessness during the year.	4.81%	No data available	12%	N/A	N/A	Quarter one information for this indicator is not currently able to be reported on as a result of the challenges associated with the transition to the Welsh Community Care Information System. These difficulties are temporary and we anticipate will be rectified for Quarter 2.
PAM/026 (SSM/015): Percentage of carers reporting they feel supported to continue in their caring role.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
PAM/024 (SSM/013): Percentage of adults who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
PAM/027 (SSM/013): Percentage of children who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/007: Percentage of people reporting they have received the right information or advice when they needed it.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.

Performance Indicator	Q1 2017/18	Q1 2018/19	Q1 Target 2018/19	RAG Status	Direction of Travel	Commentary
SSM/008: Percentage of people reporting they have received care and support through their language of choice.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/009: Percentage of people reporting they were treated with dignity and respect.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/010: Percentage of young adults reporting they received advice, help and support to prepare them for adulthood.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/011: Percentage of people with a care and support plan reporting that they have been given written information of their named worker in social services.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/012: Percentage of people reporting they felt involved in any decisions made about their care and support.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/014: Percentage of parents reporting that they felt involved in any decisions made about their child's care and support.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/016: Percentage of carers reporting they felt involved in designing the care and support plan for the person that they care for.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
How much have we done?						
There are currently no additional national measures reported under this section.						