

|                                                                             |                                                                            |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------------|
| <b>Meeting of:</b>                                                          | <b>Cabinet</b>                                                             |
| <b>Date of Meeting:</b>                                                     | <b>Thursday, 23 July 2026</b>                                              |
| <b>Relevant Scrutiny Committee:</b>                                         | Live Well Scrutiny Committee                                               |
| <b>Item which the Chair has decided is urgent (Part I)</b><br>(If yes, why) | Not applicable                                                             |
| <b>Urgent Decision Procedure Used</b><br>(If yes, why)                      | Not applicable                                                             |
| <b>Item Type</b>                                                            | Part I                                                                     |
| <b>Report Title:</b>                                                        | Annual Report of the Director of Social Services 2025-2026 – Final Version |
| <b>Portfolio Holder:</b>                                                    | Cabinet Member for Social Care and Health                                  |
| <b>Strategic Leadership Team:</b>                                           | Director of Social Services                                                |
| <b>Lead Officer:</b>                                                        | Lance Carver                                                               |

## 1.0 What is this report about?

- 1.1 A Challenge Version of the Director's report was considered by Live Well Scrutiny Committee in May. Committee Members provided positive feedback and wished for their gratitude to be extended to staff in Social Services for the work that the report represents.
- 1.2 A finalised version following feedback from partners is presented to Cabinet for approval.
- 1.3 The report contains several priorities which the Director of Social Services and Social Services senior management team has determined and reflect the Directorate Plan. These have been set in the context of significant increases in demand. Cabinet is asked to agree the Director's report and its priorities.

## 2.0 What are the Recommendations?

|     | <b>Recommendations – What and How?</b>             | <b>Reason for Recommendation – Why?</b>                                       |
|-----|----------------------------------------------------|-------------------------------------------------------------------------------|
| 2.1 | That Cabinet considers the content of this report. | To ensure that the Director's Annual Report is considered by Elected Members. |

|     | <b>Recommendations – What and How?</b>                                                                                     | <b>Reason for Recommendation – Why?</b>                                                              |
|-----|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| 2.2 | That Cabinet approves the Director's Annual Report for 2025-26 (Appendix 1).                                               | To ensure that the Director's Annual Report for 2025-26 has the approval and agreement of Cabinet.   |
| 2.3 | That Cabinet agrees the improvement priorities for Social Services as set out in the Director's Annual Report for 2025-26. | To ensure that the priorities as set out by the Director of Social Services are approved by Cabinet. |

### **3.0 What is the background to this report?**

- 3.1 As part of the statutory duties, the Director of Social Services is required by the Welsh Government to produce an annual report on the effectiveness of social care services in the Vale of Glamorgan and on our plans for improvement. This gives the Director an opportunity to provide people in the Vale with a rounded picture of social services based on evidence drawn from a wide range of sources such as what users and carers say, key performance indicators and measurements of progress against the overall goals of the Council.
- 3.2 The format of the report has been set out as a requirement by Welsh Government through regulation. This guidance was changed in May 2024 and so this report format differs from prior reports. The format requires 8 high-level quality standards, reported under 4 headings. The guidance also allows for signposting to other relevant documents. Additional guidance was published by Welsh Government in March 2025 and so the report is required to fulfil both guidance documents.
- 3.3 The report is written for a wide range of people, including service users and carers but also Elected Members, the Council's own staff, and the range of partners and providers who help us deliver our services. It is used by Care Inspectorate Wales (CIW) as evidence and to guide their inspection programme in the Vale of Glamorgan.
- 3.4 The report reflects on progress over the last financial year.
- 3.5 Vale 2030 sets the vision by identifying priorities that are aligned to well-being outcomes and objectives. The Directorate Plan has been used to set out our improvement agenda, and these key actions are now reflected in the Director's Annual Report.

### **4.0 What issues are there to be considered?**

- 4.1 This is an important report for the people of the Vale of Glamorgan, Members of the Council and our partners, both statutory and in other sectors. It outlines the current context within which social services are operating and priorities for improvement.

### **5.0 How has evidence been used to inform the report, including the views of others?**

- 5.1 The final report has been prepared following the circulation of a challenge version. This has allowed key stakeholders opportunities to comment and make observations before the

report is finalised, ensuring that it accurately reflects the position of social services.

- 5.2 As part of the challenge process, the challenge version of the report was presented to Scrutiny Committee to provide Elected Members with an opportunity to contribute their views. This is regarded as a key milestone in finalising the report because of the crucial role which the Committee has in providing consistent oversight and monitoring of social services.
- 5.3 Scrutiny Committee provided helpful comments regarding the challenge version. This resulted in changes being made to the report which included adding page numbers, an explanation of the use of percentages in the performance sections and improved linkages between the evidence in the self-assessment and how this informed the development of priorities.

## **6.0 What are the next steps if the recommendations are approved?**

- 6.1 The final report will be translated into Welsh and made available on the Council's website.

## **7.0 How does this report support Vale 2030 and Reshaping?**

- 7.1 The priority areas in the report are taken from the Directorate plan each of which links closely to Vale 2030. The Social Services reshaping agenda is also reflected through these actions which make our transformation programme.

## **8.0 How does this demonstrate the Five Ways of Working?**

- 8.1 The challenge version of the report was a consultation document and was sent for consideration to a wide range of partners. A feedback proforma was provided which was returned via email. The comments received were evaluated and, where appropriate changes to the report were made. There are no matters in the report which relate to an individual ward.
- 8.2 The need to ensure that services are sustainable in the longer term is a key element in the priority outcomes set out in the annual report. Delivering sustainable social services will require greater emphasis on prevention and people accepting more responsibility for tackling factors which can increase demand for social care and health services.

## **Resources**

### **9.0 Finance**

- 9.1 The report is set out within the context of:
- Increasing demand for help and support;
  - Managing the impact of finite budgets;
  - Efforts to focus more of our work on supporting people to remain as independent as possible.

- 9.2 The priority objectives contained in the reports will be delivered within the financial constraints set by the Social Services Budget Programme, which is approved by Cabinet and reported regularly.

## **10.0 Workforce**

- 10.1 There are no employment issues as a result of this report.

## **11.0 Legal and Equalities**

- 11.1 **Does an Equalities Impact Assessment need to be completed? If not, why?** Equalities Impact Assessment has not been completed as the priorities reflect the actions already agreed through the Directorate plan. The other elements of the report reflect an assessment of the service and so do not indicate a change in policy that would require such an assessment.
- 11.2 The former reporting requirements for Directors of Social Services in Part 6 of the “Statutory Guidance on the Role and Accountabilities of the Director of Social Services” (Welsh Government June 2009) have been replaced as a consequence of both the Social Services and Well-Being Act 2014 and the Regulation and Inspection of Social Care (Wales) Act 2016.
- 11.3 The requirements for the social services report are contained in a number of pieces of legislation and codes. In purely headline terms the requirements are that every Local Authority must produce an annual report on the discharge of its social services functions and the report must include:
- An evaluation of the performance in delivering social services functions for the past year including lessons learned (Part 8 Code on the role of the Director).
  - How the Local Authority has achieved the eight quality standards.
  - Qualitative and quantitative data relating to the achievement of well-being outcomes (also set out in the code on measuring performance).
  - The extent to which the Local Authority has met requirements under Parts 3 and 4 of the SSWB Act as set out in the separate codes covering assessment needs and meeting needs. Objectives for promoting the well-being of people needing care and support and carers needing support for the following year including those identified by population needs assessments under Section 14 of the SSWB Act.
  - Assurances concerning: structural arrangements enabling good governance and strong accountability, effective partnership working via Partnership Boards and safeguarding arrangements.
  - The Local Authority’s performance in handling and investigating complaints responses to any inspections of its social services functions.
- 11.4 An update on Welsh language provision on how the Local Authority has engaged people (including children) in the production of the report.

## 12.0 **Key Contacts**

### 12.1 **Who are the primary officers to contact with any comments and/or queries on the report?**

|                                                                                                                                                      |                                                                                                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Lead Officer:<br>Lance Carver,<br>Director of Social Services.<br><a href="mailto:lcarver@valeofglamorgan.gov.uk">lcarver@valeofglamorgan.gov.uk</a> | Democratic Services Officer<br>Matt Swindell<br>Cabinet and Committee Services Officer.<br><a href="mailto:mlswindell@valeofglamorgan.gov.uk">mlswindell@valeofglamorgan.gov.uk</a> |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## **Appendix**

Appendix A – Annual Report of the Director of Social Services 2025-2026 – Final.

### **Background Documents**

Report to Live Well Scrutiny Committee – 19th May 2026 (Minute 26)

The Local Authority Annual Social Services Reports Guidance:

<https://www.gov.wales/sites/default/files/publications/2024-05/director-of-social-services-annual-report-guidance.pdf>

2025/2026

# Director's Report



Social Services  
Vale of Glamorgan

## Introduction

As the Director of Social Services for the Vale of Glamorgan Council, I am pleased to present our Annual Report for 2025-26.

As always, the year has seen significant challenges. Predominantly because changing demographics continue to increase demand levels in all areas in a context of limited finances.

These challenges were anticipated and are likely to continue and so this means we need to make further changes to our services. We have to evolve and adapt in these rapidly changing and uncertain times.

We are supporting more people than ever before, much faster than ever before and in ways that give them more control over their arrangements. None of that could have been achieved without the dedication and resilience of our staff. By working with our partners, communities, and citizens we have been able to maximise our efforts and help those most in need. We owe it to all of those that need and use our services to make them responsive and available to them in a timely way.

I want to thank all those members of staff and our partners for the vital role they play in delivering high quality care and support to the citizens of the Vale of Glamorgan. This report provides an overview of the performance of social care services over the past year. It highlights key achievements, challenges, and areas for future development. Our aim is to ensure high-quality, person-centred care that meets the needs of our community.

The report is in the same format as last year's following updated guidance from Welsh Government in the previous year. The report also details the progress made against each of the priorities we said we would focus on over the past 12 months, and these can be found in the 'performance assessment' section.

## Who We Are and What We Do

The Directorate comprises three key service areas:

- **Adults Services** – Supporting adults to live as independently as possible, focusing on their strengths, family, and community connections while meeting assessed eligible needs in line with the Social Services and Well-being (Wales) Act 2014.
- **Children and Young People Services** – Promoting and safeguarding the well-being of children and young people, providing timely support to families, and ensuring high-quality alternative care when necessary.
- **Resource Management and Safeguarding** – Overseeing leadership, financial planning, workforce development, safeguarding, commissioning, residential care, performance management, and strategic planning to ensure the effective delivery of services.

### **Key Achievements**

- Even quicker response times for support for individuals to enable them to live at home.
- More people supported to live at home.
- The development of the Vale Family Compass providing families with one easy place to access information and support.

### **Challenges and Areas for Improvement**

- Sufficient resources to meet the needs of an aging population and the increasing number of children who require our intervention.
- Recruitment and retention challenges remain in some key areas.
- Developing the information technology to ensure staff have the best tools for the job.

### **Looking Ahead**

Our priorities for the coming year will need to focus around two key changes namely, the implementation of the new social care records system, and the relocation to different accommodation for the majority of our staff. These significant changes will limit the amount of progress we can make in other areas during 2026/27.



**Context:****Leadership:**

Social Services in the Vale of Glamorgan are overseen through the new Living Well Scrutiny Committee and given direction by the lead cabinet member. The Directorate operates with close connectivity to the other four directorates in the Council. This report is set in the context of a new Corporate Plan ([Vale 2030](#)). Vale 2030 was developed with insights gleaned from a Panel Performance Assessment and so the objectives set out have a clear evidence base. Social Services has a new [Directorate Plan](#) to help fulfil Vale 2030 and to support the various transformation programmes in the service. The coming years will continue to see some of the biggest changes in social care in the Vale. Notably the fulfilment of Welsh Government's 'Eliminate Profit' agenda will require significant work.

Over the past year, we have:

- Undertaken a programme of Compassionate Leadership supported by Social Care Wales to ensure that we are managing and leading the whole service in a consistent and supportive way.
- Worked with WLGA to ensure that we are embracing opportunities to develop innovative ways of working through the Digital in Social Care Framework.

**Workforce:**

Our social care workforce is the foundation of delivering high-quality, person-centred services. We continue to deliver a comprehensive training plan and are reaping the benefits of a grow your own scheme for Social Workers.

Over the past year, we have:

- Made progress towards delivering the ADSSC (Association of Directors of Social Services Cymru) recommendations for eliminating racism (see 'other information' section below)
- Had funding approved to develop new office space for Adult Services

For the coming year, we will:

- Implement the new social care case management system, including secure data migration, integration of core functionality, and finance module, while laying the foundations for workforce readiness and performance reporting to ensure smooth adoption and long-term improvement
- Support staff to move offices and develop front facing services for residents

**Financial Resources**

Our financial management ensures that resources are allocated efficiently to support service delivery. That said the Directorate has significantly overspent this year. This overspend was approximately £2M in Children and Young People's Services primarily attributed to an increased number of children who required high levels of support such as residential accommodation. The overspend is predominantly attributed to the need to intervene, protect and support more children. For Adult Services the overspend was approximately £1M as a result of providing care and support to an increasing number of

people. The growing older population continues to require greater levels of care to live independently. In summary we are supporting more people than ever before, and this is impacting on our budget.

For 2025/26 the Social Service budget was **£106.519 million**.

Additionally, the directorate had to deliver **£3.624 million** worth of savings. I am pleased to say that most of these savings have been achieved. We work hard to transform services and minimise any impact of such savings on our residents. We have also been fortunate that the Council has prioritised funding services that support its most vulnerable residents. Over the past year, we achieved these savings through a number of transformation approaches including:

- Reduced use of agency social workers in Children and Young People's services.
- Safe reduction of the number of double handed domiciliary care calls through targeted interventions and improved manual handling and use of equipment.
- Debt recovery and increased income

For the foreseeable future, the Council is required to reduce budgetary spend significantly as we are unable to keep up with the cost pressures caused by growing demand and price rises. The Directorate will continue to undertake service reviews to identify areas where efficiencies can be realised leading to a reduction in expenditure or an increase in income generation as appropriate.

It is disappointing that a proper UK wide or Welsh mechanism for funding social care is not in place or planned.

In 2026/27 we expect our budget to be £114M and for us to be required to deliver £1.74M of savings.

For the coming year, we will:

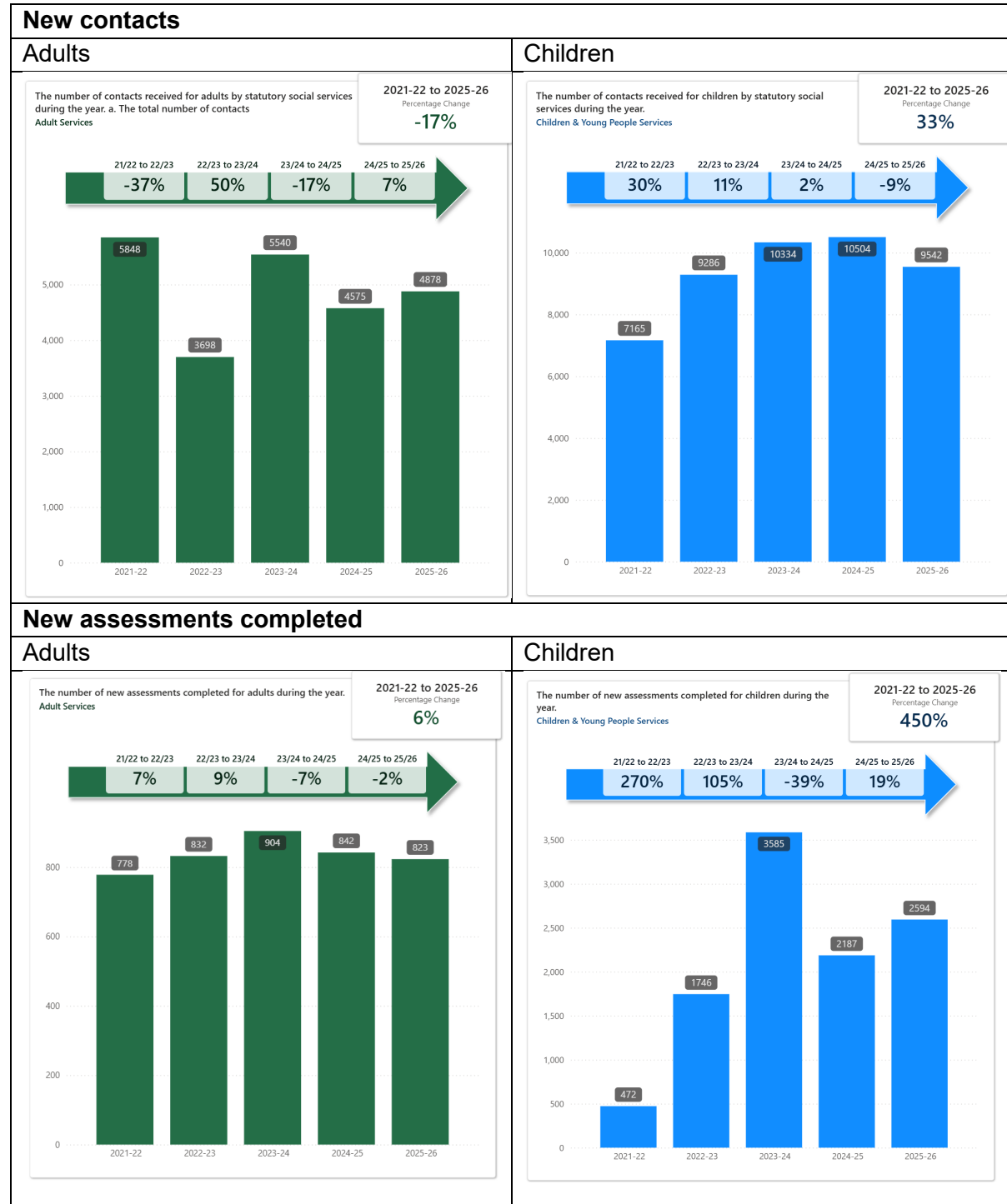
- Deliver an ambitious £1.74M savings programme which includes the following.
  - Continuing to reduce double handed calls where safe to do so
  - Embedding a reablement first model to ensure we maximise an individual's independence before commissioning longer term packages of care.
  - Improving debt recovery
  - Efficiently using residential accommodation for children
  - Supporting families to stay together and avoid the need for more costly intervention
  - Reducing use of agency staff

The social care budget is allocated across service areas as follows:

- Adult Services – £77.1 million (£73.1 million previous year)
- Children and Young People Services – £27.6 million (£24.7 million previous year)
- Resource Management and Safeguarding – £9.4 million (£8.7 million previous year)

## Activity Data

The use of percentages in the various data charts in this report indicate the change from year to year. The percentage figure in the top right-hand corner represents the overall change from 21/22 to 25/26.

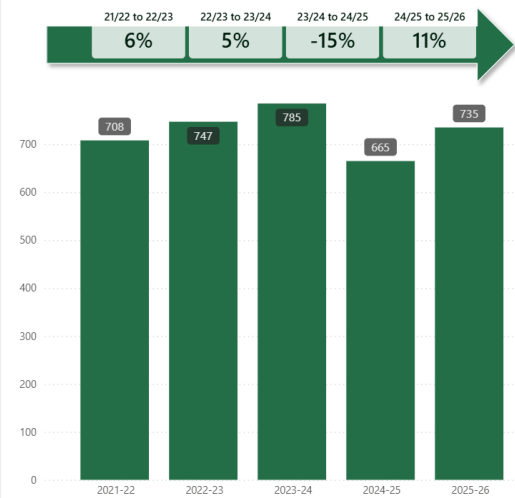


## Assessments completed where needs can only be met with a care and support plan

### Adults

The number of assessments completed for adults during the year where: a. Needs were only able to be met with a care and support plan.  
Adult Services

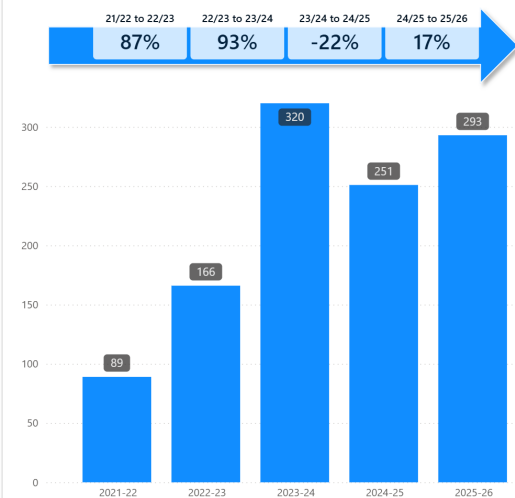
2021-22 to 2025-26  
Percentage Change  
**4%**



### Children

The number of assessments completed for children during the year where: a. Needs were only able to be met with a care and support plan.  
Children & Young People Services

2021-22 to 2025-26  
Percentage Change  
**229%**

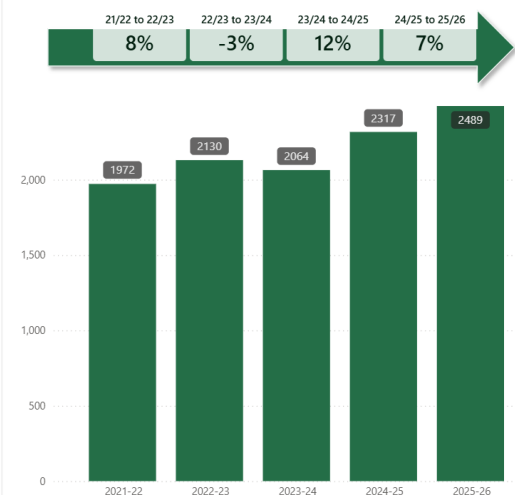


## Care and support plan in place at the end of the year.

### Adults

The number of adults with: a. A care and support plan on 31st March.  
Adult Services

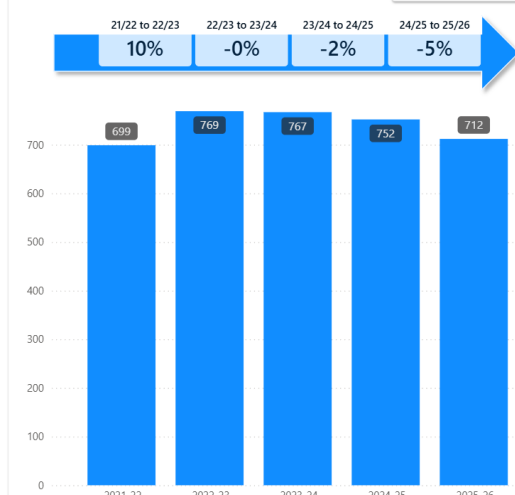
2021-22 to 2025-26  
Percentage Change  
**26%**

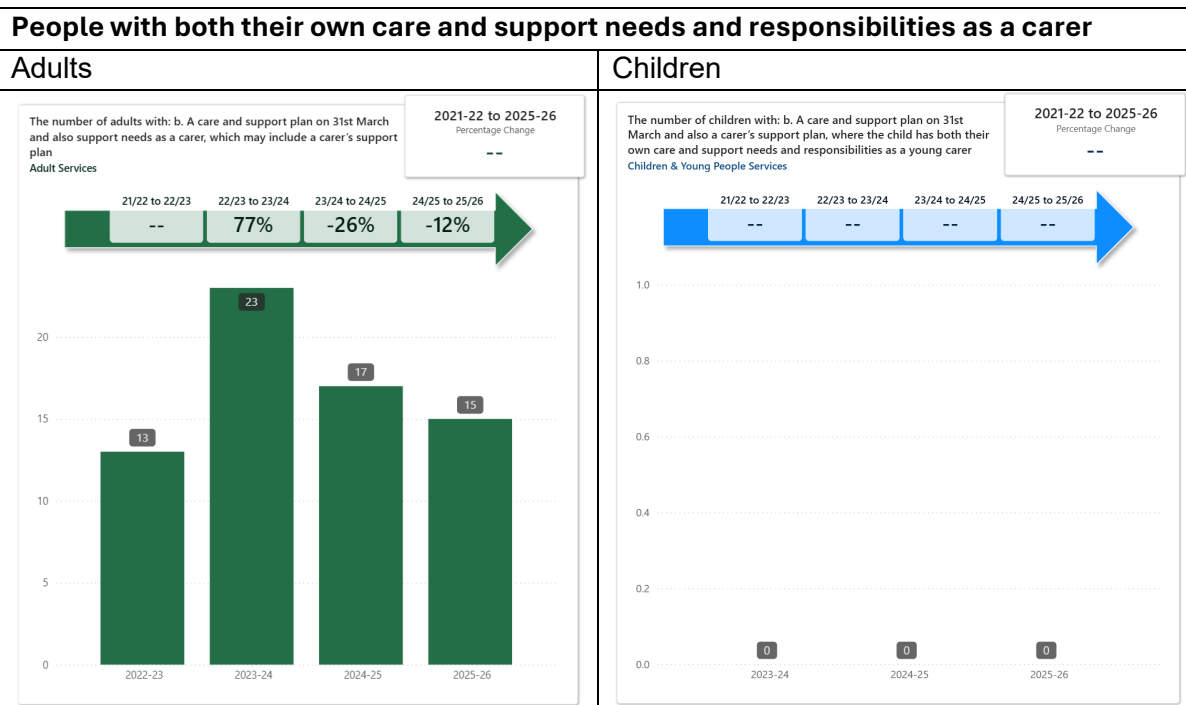


### Children

The number of children with: a. A care and support plan on 31st March.  
Children & Young People Services

2021-22 to 2025-26  
Percentage Change  
**2%**





### Activity Data – Current Year

| Metric Ref | Metric name                                                                                                                                                                                        | 2025-26 |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| AD/001a    | The <b>total</b> number of contacts received for adults by statutory social services during the year.                                                                                              | 4878    |
| AD/004     | The number of <b>new</b> assessments completed for adults during the year.                                                                                                                         | 823     |
| AD/005a    | The number of assessments completed for adults during the year where needs were only able to be met with a care and support plan.                                                                  | 735     |
| AD/012a    | The number of adults with a care and support plan on 31st March.                                                                                                                                   | 2489    |
| AD/012b    | The number of adults with a care and support plan on 31st March and also a carer's support plan, where the adult has both their own care and support needs and responsibilities as a carer         | 15      |
| CH/001     | The number of contacts received for children by statutory social services during the year.                                                                                                         | 9542    |
| CH/006     | The number of new assessments completed for children during the year.                                                                                                                              | 2594    |
| CH/007a    | The number of assessments completed for children during the year where needs were only able to be met with a care and support plan.                                                                | 293     |
| CH/015a    | The number of children with a care and support plan on 31st March.                                                                                                                                 | 712     |
| CH/015b    | The number of children with a care and support plan on 31st March and also a carer's support plan, where the child has both their own care and support needs and responsibilities as a young carer | 0       |

In November 2025 we changed the way that people contact Children and Young People's services through the development of the Vale Family Compass. This means that the numbers of contacts do not compare with previous years.

## **Performance Assessment**

This section provides a self-assessment of our performance across the four key quality standards: People, Prevention, Partnership and Integration, and Well-being. The assessment is based on operational data, feedback from service users and carers, staff engagement, and external evaluations.

### **1. People**

The local authority remains committed to ensuring individuals are at the heart of their care and support. Over the past year, we have utilised our quality assurance framework to enhance service performance evaluation. This framework supports evidence-based practice, ensuring that our interventions are effective, accountable, and continuously improving to meet people's needs.

#### **Ensuring High-Quality, Evidence-Based Practice**

Our quality assurance framework has been embedded to drive consistency in practice, alongside a supervision policy that ensures high standards across teams. We are monitoring supervision to ensure that it is being provided across the whole directorate. The implementation of a new social care record system has also begun, ensuring future improvements in digital case management.

#### **Welsh Language: Active Offer and More Than Words**

##### **Over the last year we have:**

- Established the Mwy Na Geiriau (More Than Words) workstream, consisting of professionals across the Council with a remit and ability to drive the Welsh Active Offer forward, in order to meet the Mwy Na Geiriau 5 year plan.
- Established a new “Shwmae Bawb” working group, focusing on promoting the Welsh language in an engaging and accessible way. The group has produced a series of e-bulletins designed to highlight Welsh language standards, promote learning opportunities, and celebrate Welsh culture in a fun and inclusive format.
- Shared information and instructions with staff on how to record language choice at assessment stage and the importance of offering conversations and meetings in Welsh. This has supported a more proactive approach to delivering Welsh-medium interactions and the Welsh active offer.
- Uploaded Welsh courses onto the Social Services online training directory, increasing reach.
- Successfully delivered an “Introduction to Welsh” course, attended by 45 staff members across the Council. The strong enthusiasm has directly led to three new entry level *Mynediad* courses, which started in January.
- Encouraged staff to complete a Welsh language skills assessment. The Equalities Officer now produces a regularly updated list of Welsh speaking staff. This resource ensures colleagues can quickly identify internal support when responding to individuals requesting Welsh language communication.
- Distributed Welsh language lanyards and courtesy cards with simple Welsh phrases, to frontline Welsh learners, helping promote a welcoming and bilingual environment.

**Over the next year we plan to:**

- Continue to promote the Welsh Language Standards using creative and engaging tools. This will include producing a set of short, informative videos that team managers can easily share with their staff to reinforce key messages and good practice.
- Promote the Welsh Language Awareness Course and other learning opportunities through the *Shwmae Bawb* e-bulletins, highlighting positive feedback from current learners to encourage wider uptake.
- Encourage managers to discuss Welsh Language courses during annual staff appraisals.
- Arrange for a *Learn Welsh* tutor to present at manager meetings to showcase the full range of courses available.
- We will continue to embed the Welsh language into policies across Social Services, ensuring that Welsh language considerations are consistently reflected in documents and processes.
- Raise awareness of the Common European Framework of Reference for Languages (CEFR) and the Welsh Language Skills Framework among staff involved in recruitment. This work aims to ensure that each role and subsequent vacancy is supported by an appropriate Welsh skills assessment

**How do we know?**

- **Domiciliary Care Experience:**

**Your Choice** is the Vale of Glamorgan Council's flexible, outcome-focused approach to Care and Support at Home. It puts people at the centre of their care by offering greater choice and control over how support is planned and used. Instead of fixed timetables or task-led visits, individuals work in partnership with care providers to use their allocated hours in ways that matter to them, supporting independence, wellbeing, and everyday life.

Grounded in the **Social Services and Well-being (Wales) Act 2014**, Your Choice promotes care that is planned *with* people rather than *for* them. Support arrangements are designed to be person-centred, adaptable, and responsive, allowing care to change as needs or circumstances change.

As part of ongoing quality assurance and performance monitoring, the Council consulted adults receiving domiciliary care to understand their lived experiences. The survey included people supported by both Your Choice and non-Your Choice providers and was shared through commissioned providers via paper and online formats, with completed responses returned to the Council for collation and analysis.

Overall feedback from the survey demonstrates **strong satisfaction with domiciliary care**, particularly in relation to the quality of frontline staff and the relationships developed between carers and individuals receiving support.

Across both **Your Choice** and **non-Your Choice** care arrangements, respondents consistently highlighted:

- Kindness, professionalism, and compassion of carers
- Being treated with dignity and respect
- The importance of care in supporting independence, wellbeing, and remaining at home

These positive themes were consistent across providers and care models and were reflected in the qualitative feedback received.

Respondents told us:

*“The carers treat my mother with kindness and respect and never fail to maintain her dignity.”*

*“Carers are like family to us. They help me stay in my own home.”*

*“Without the care and support I receive I would struggle to manage independently.”*

These responses indicate that, regardless of delivery model, **frontline care is a clear strength** and a key contributor to positive lived experience.

- **Placements Rolling Consultation and Engagement:**

**People are at the heart of the work of the Placements Team and Fostering Service**, which supports foster carers, kinship carers, special guardians and children and young people to experience safe, stable and nurturing care. Over the past year, the service has maintained a strong focus on capturing lived experience and strengthening how feedback is gathered and used. The Quality Assurance and Placements Teams have worked closely to redesign consultation tools, improve digital engagement and develop clearer pathways for participation, ensuring that carers' and children's voices are reflected more consistently across the fostering journey.

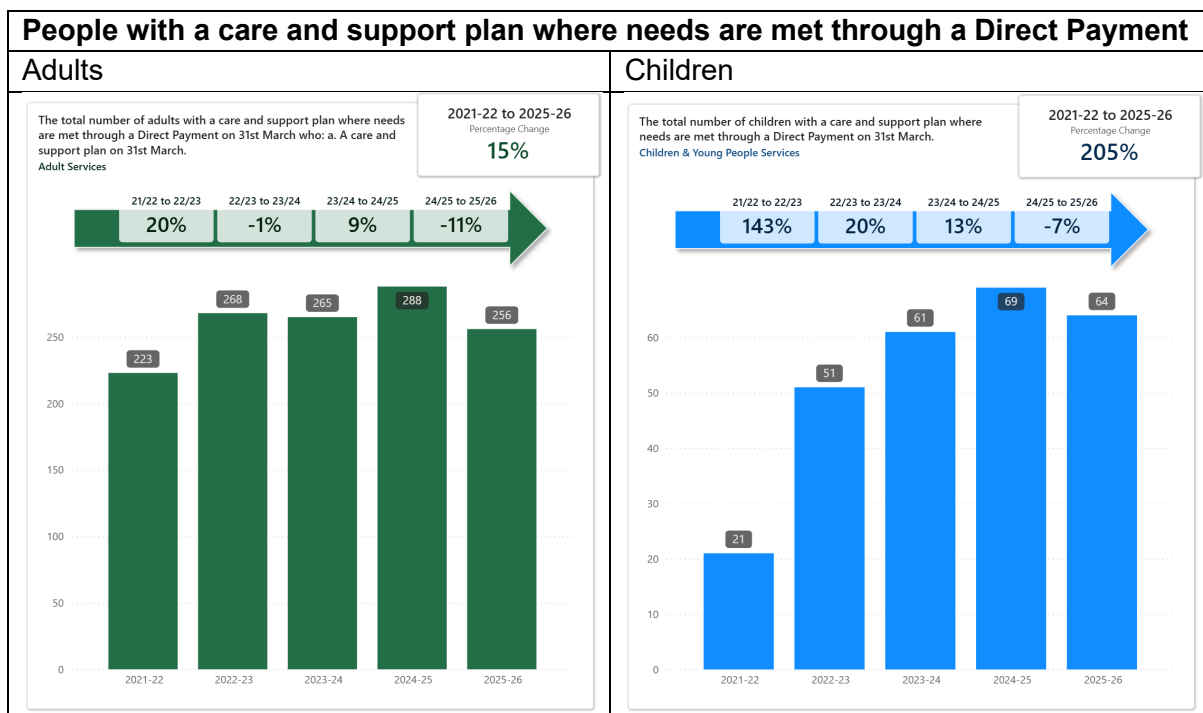
**Consultation findings across the year provide positive assurance about key aspects of the service**, particularly relationship-based practice, preparation and children's sense of safety and belonging. Engagement levels were strong in several areas, including Skills to Foster training (100% response rates) and review activity, enabling meaningful insight into lived experience. Foster carers frequently described feeling respected, supported and involved in review discussions, while children and young people consistently reported feeling safe, cared for and able to speak to trusted adults. One young person described their placement as *“a proper home”*, while another noted that carers *“give second chances, no matter what”*.

**Across both reports, clear positive themes emerge that demonstrate the impact of people-centred practice.** Relationship-based working remains a consistent strength, particularly where continuity of social worker support exists. Preparation and learning are highly valued, with carers reporting increased confidence and readiness following training; all Skills to Foster participants rated trainer delivery as *Very Good*, and carers highlighted the benefit of linking theory to real-life fostering practice. Children's voices reinforce these



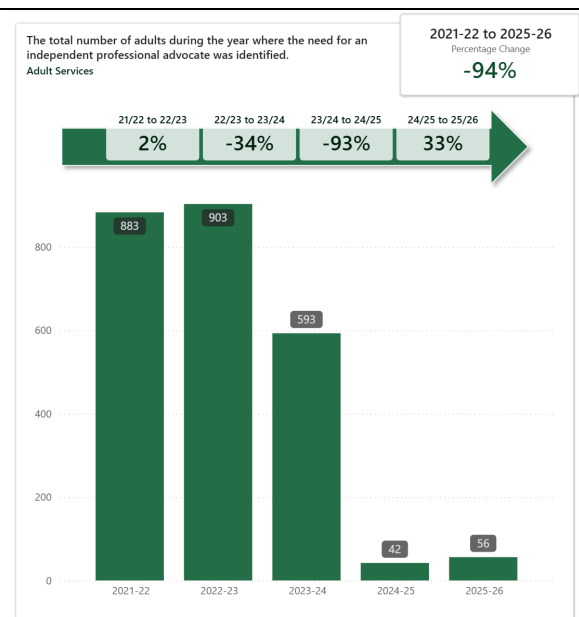
strengths, evidencing stability, emotional safety and a strong sense of belonging within placements. While consultation also identified system pressures and communication challenges, these were frequently framed by carers within an understanding of wider service demands, reinforcing a constructive and engaged relationship between citizens and the service. Overall, the findings underline a service that values feedback and remains committed to ensuring that the experiences and voices of its people continue to shape improvement and outcomes.

## People Data:



### People where the need for an independent professional advocate was identified

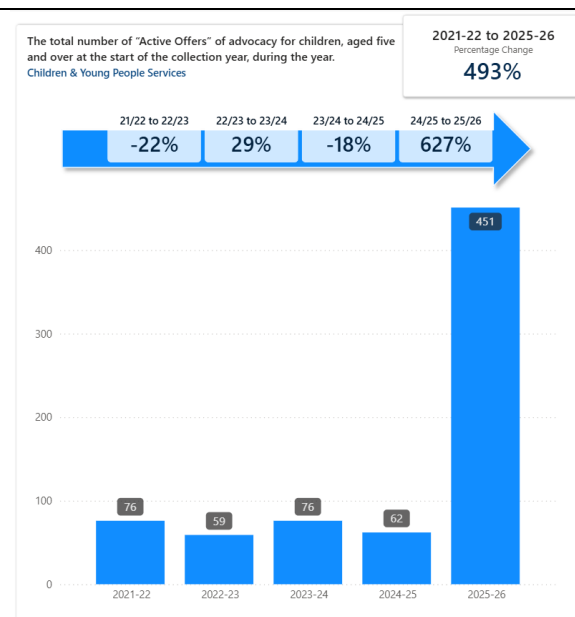
#### Adults



There is a very noticeable change in reporting between 22/23 to 24/25. This is due to the specification change of 'Independent Professional Advocate as opposed to any other type of advocacy.

### "Active Offers" of advocacy for children, aged five and over

#### Children



The sharp increase in the number of 'Active Offers' of advocacy for children aged 5 and over reflects a change in how this figure is calculated, and now more accurately represents the total number of offers made throughout the year.

### Current Year:

| Metric Ref | Metric name                                                                                                                            | 2025-26 |
|------------|----------------------------------------------------------------------------------------------------------------------------------------|---------|
| AD/013     | The total number of adults with a care and support plan where needs are met through a Direct Payment on 31st March.                    | 256     |
| AD/032     | The total number of adults during the year where the need for an independent professional advocate was identified.                     | 56      |
| CH/016     | The total number of children with a care and support plan where needs are met through a Direct Payment on 31st March.                  | 64      |
| CH/056     | The total number of "Active Offers" of advocacy for children, aged five and over at the start of the collection year, during the year. | 451     |

## **What progress did we make on last year's priorities?**

Over the past year, we have:

- We are now actively implementing local micro enterprises (small business offering support to the community) to enable residents to have a wider choice of innovative community led services. While still in its early stages the recruitment stage has commenced.
- Made good progress in developing local not for profit accommodation to meet the needs of our children with the development of 3 residential facilities
- Progress has been made in helping children remain at home wherever possible and the numbers of children looked after has stabilised.
- We have continued to deliver support for carers through the Vale Carers Hub and have developed a monthly carers bulletin
- Discussions have taken place with some of the children we look after to shape the Corporate Parenting Panel advisory group to provide a formal mechanism for young people to influence decisions and services that directly affect them.

For the coming year, we will:

- Expand or develop alternative offers of care such as Shared Lives, Telecare, Micro-providers.
- Continue to develop local, not for profit accommodation to meet the needs of our children looked after, including a diverse and flexible range of fostering, residential and supported accommodation options for those children requiring care.

These priorities have been chosen as we recognise that residents want a wider range of services and to fulfil Welsh Government's Eliminate Profit agenda.

## **2. Prevention**

Prevention remains at the forefront of our approach to social care. Over the past year, we have worked with partners to promote community models of care, ensuring people receive the right support at the right time.

We have made significant progress in:

- Commencing a Reablement First model where adults who need care and support participate in a period of reablement which should maximise levels of independence for more people.
- Expanding Flying Start Services to support more children across a wider area.
- Simplifying the first contact for Children and Young People Services meaning families get access to a wider range of information and support.
- Developing pre-birth support
- Introduction of CYPS Threshold Guidance “Right Help at the Right Time”

### **How do we know?**

- Continued compliance with our targets in relation to timeliness of our adult safeguarding enquiries.
- Increased understanding and awareness of preventative and early intervention support for children and families
- Right support being provided at the right time, reducing CYPS interventions at crisis point
- Understanding across our partnerships about support that can be accessed for families and the appropriate level of intervention

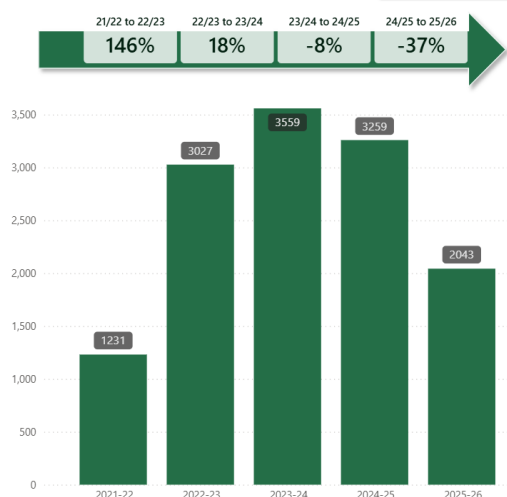
## Prevention Data:

### The number of new contacts received by statutory Social Services during the year where advice or assistance was provided

#### Adults

The number of new contacts for adults received by statutory Social Services during the year where advice or assistance was provided.  
Adult Services

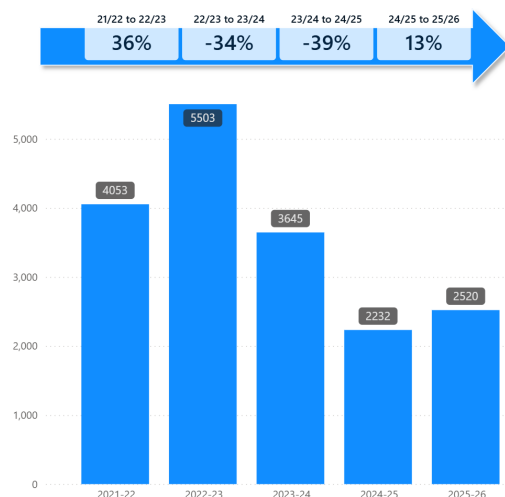
2021-22 to 2025-26  
Percentage Change  
**66%**



#### Children

The number of contacts for children received by statutory Social Services during the year where advice or assistance was provided.  
Children & Young People Services

2021-22 to 2025-26  
Percentage Change  
**-38%**

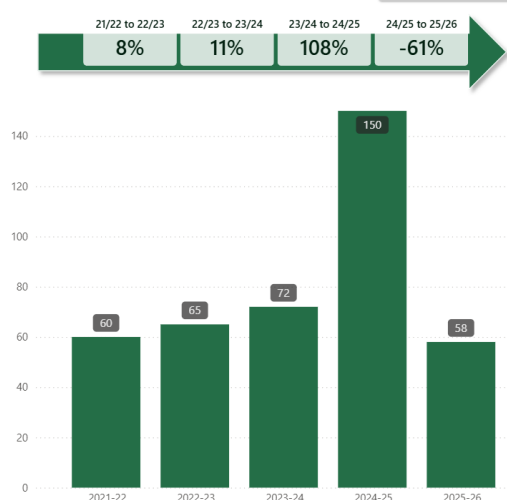


### Needs were able to be met by any other means

#### Adults

The number of assessments completed for adults during the year where: b. Needs were able to be met by any other means.  
Adult Services

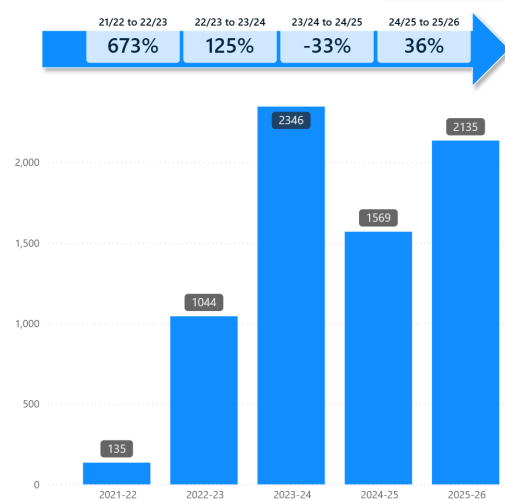
2021-22 to 2025-26  
Percentage Change  
**-3%**



#### Children

The number of assessments completed for children during the year where: b. Needs were able to be met by any other means.  
Children & Young People Services

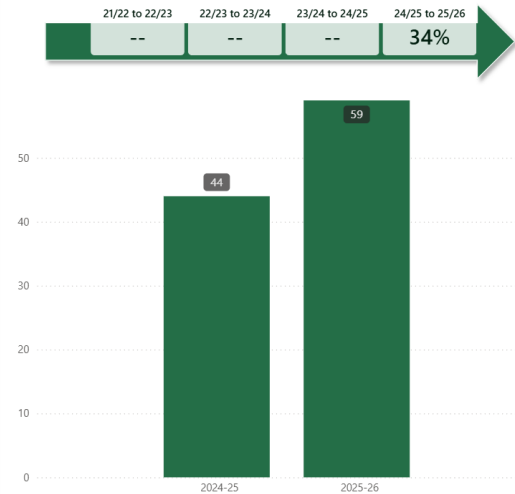
2021-22 to 2025-26  
Percentage Change  
**1481%**



## Number of adults receiving reablement

As at 31 March, the number of adults that are receiving reablement Adult Services

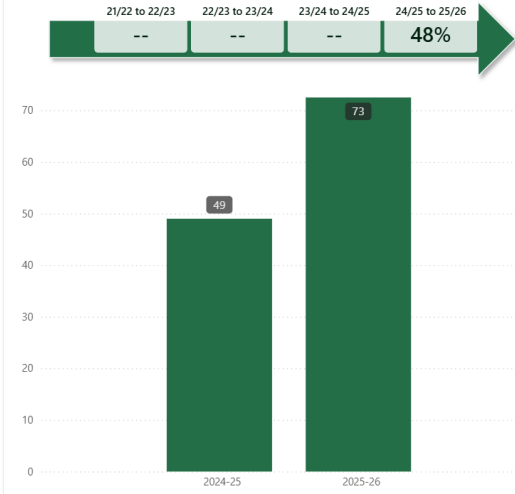
2021-22 to 2025-26  
Percentage Change  
--



## Number of hours of reablement provided in a single day

As at 31 March the number of hours of reablement that are currently being provided in a single day Adult Services

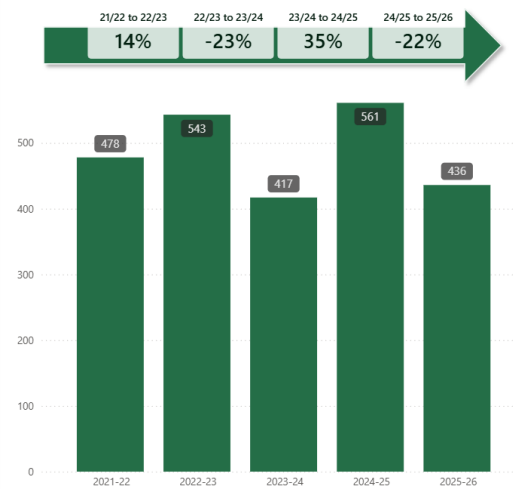
2021-22 to 2025-26  
Percentage Change  
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## Number of packages of reablement for adults completed during the year

The total number of reablement packages completed during the year. Adult Services

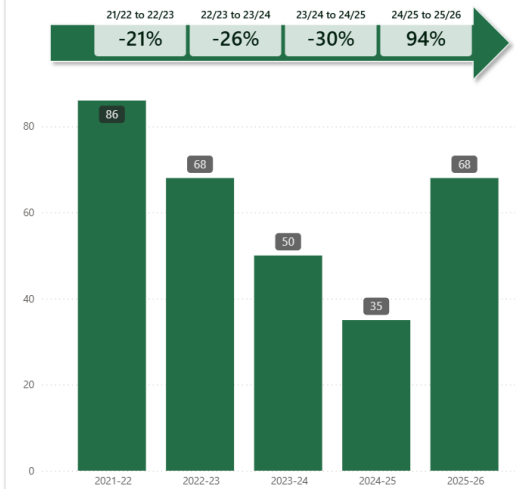
2021-22 to 2025-26  
Percentage Change  
-9%



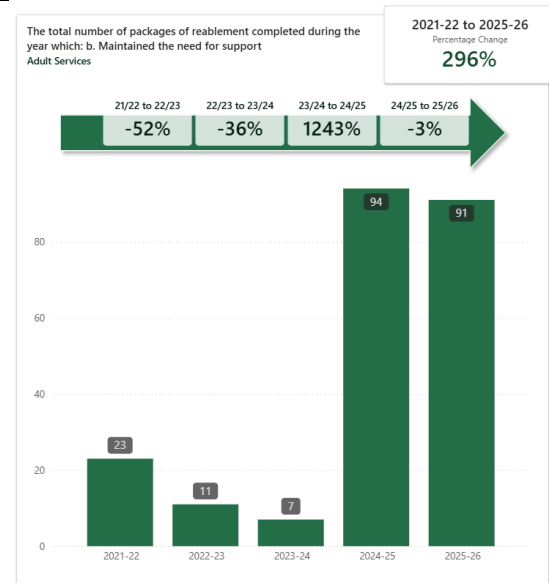
## Number of packages of reablement which reduced the need for support

The total number of packages of reablement completed during the year which: a. Reduced the need for support Adult Services

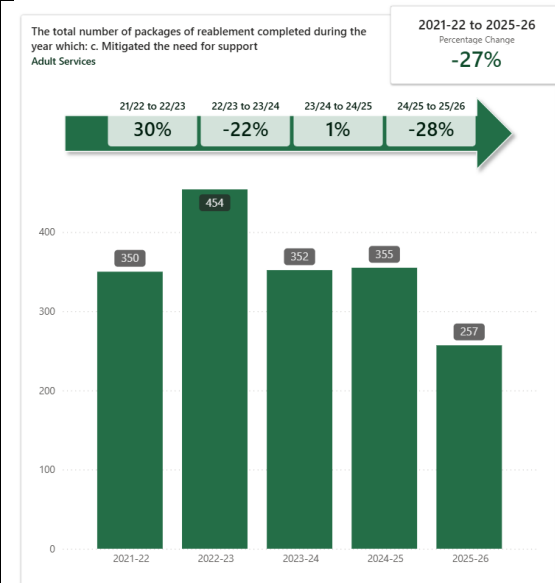
2021-22 to 2025-26  
Percentage Change  
-21%



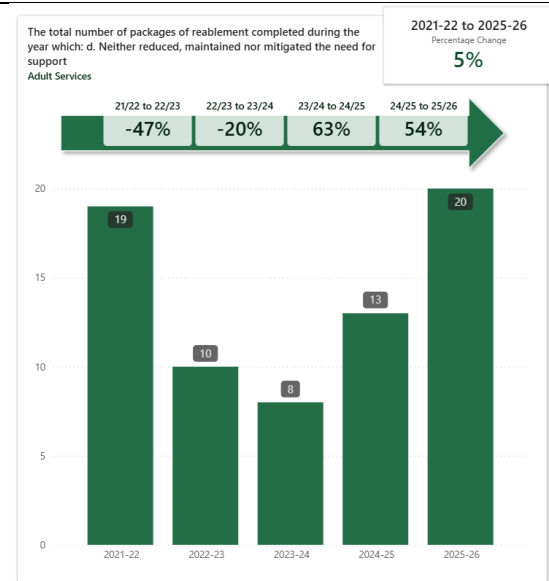
### Number of packages of reablement which maintained the need for support



### Number of packages of reablement which mitigated the need for support



### Number of packages of reablement which neither reduced, maintained nor mitigated the need for support



## Current Year

| Metric Ref | Metric name                                                                                                                                   | 2025-26 |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------|---------|
| CH/002     | The number of new contacts for children received during the year where advice or assistance was provided.                                     | 2520    |
| CH/007b    | The number of assessments completed for children during the year where needs were able to be met by any other means.                          | 2135    |
| AD/002     | The number of new contacts for adults received by Social Services during the year where advice or assistance was provided.                    | 2043    |
| AD/005b    | The number of assessments completed for adults during the year where needs were able to be met by any other means.                            | 58      |
| AD/010     | The total number of reablement packages completed during the year.                                                                            | 436     |
| A9         | Number of adults receiving reablement as at 31 <sup>st</sup> March                                                                            | 59      |
| A9.1       | Number of hours of reablement currently being provided in a single day as at 31 <sup>st</sup> March                                           | 73      |
| AD/011a    | The total number of packages of reablement completed during the year which: a. Reduced the need for support                                   | 68      |
| AD/011b    | The total number of packages of reablement completed during the year which: b. Maintained the need for support                                | 91      |
| AD/011c    | The total number of packages of reablement completed during the year which: c. Mitigated the need for support                                 | 257     |
| AD/011d    | The total number of packages of reablement completed during the year which: d. Neither reduced, maintained nor mitigated the need for support | 20      |

## What progress did we make on last year's priorities?

Over the past year, we have:

- Expanded the Flying Start childcare offer with 475 postcodes added this year and we now have over 50 childcare providers.
- We have developed a pre-birth pathway with dedicated pre-birth workers as part of our Interventions Hub. The combination of specialist roles and structured processes is helping to identify and address risks early, supporting better outcomes for children and families.

For the coming year, we will:

- Expand Reablement Services to support people to be as independent as possible.
- Embed an effective approach to early help and prevention, offering effective and timely solutions for children and families in need of support, and reducing escalation of need.

These priorities have been chosen to expand our services which support independence and early access to support with the intention of reducing the need for more costly services in the longer term.



### **3. Partnerships and Integration**

#### **Collaboration for Integrated, High-Quality, and Sustainable Outcomes**

The local authority remains committed to strong partnership working to ensure that people receive high-quality, sustainable, and fully integrated services. The Vale of Glamorgan has integrated arrangements in place across the majority of social care and community health services. Most adult teams are integrated or at least co-located, and managers have responsibility for both health and social care staff. This results in more seamless health and care arrangements and motivated staff who work well together to support our residents in the best way they can.

Over the past year, we have engaged with an Organisational Change Programme which Cardiff and Vale UHB developed alone. We reinforced the need to continue to deliver services through our integrated service delivery model. This proved challenging although the health board addressed the most serious concerns that we highlighted. Overall, the outcome has resulted in less integrated and locally based oversight of health services in the Vale and this is disappointing.

We have actively worked with partners to promote community-based models of care, ensuring that individuals receive the support they need in the right setting. This aligns with the Welsh Government Frailty Standard, ensuring that unnecessary hospital stays are minimized, and people receive timely, person-centred care. The Delayed Pathways of Care data for the Vale of Glamorgan shows that we are high performing in supporting fast and effective discharges from hospital.

We continue to meet our statutory duties and co-operation by having a consistent and engaged presence within multi-agency forums such as MAPPA, MARAC and the Regional Safeguarding Board. A key achievement has been our continued collaboration on the replacement system for WCCIS, ensuring that future care coordination is more efficient and supports integrated service delivery. We are doing this with Rhondda Cynon Taff, Merthyr Tydfil and Bridgend Councils. We have been very fortunate to have had the support of WLGA and ADSSC in this area too.

We are fortunate to be part of developments with Cardiff and Vale UHB in regard to shared access to a summary of health and social care records. This is a positive development which enables information sharing for practitioners. This is happening while we are trying to implement a new records system and so progress is limited due to capacity.

#### **How do we know?**

- **Vale Community Resource Service (VCRS) consultation:**
- The Vale Community Resource Service (VCRS) is an integrated Health, Social Care and Third Sector Team based at Barry Hospital, working in collaboration with other services across Cardiff and the Vale of Glamorgan.

- The team work with individuals in their own homes to maximise functional independence in activities of daily living (ADL), thus reducing the need for admission into hospital and longer-term Social care services. They offer therapeutic intervention and reablement support to people following admission into hospital, so that the return home can be as timely as possible. They aim to provide excellent individual-centred therapeutic intervention and support. VCRS work in partnership with the individual towards achieving goals that have been jointly identified.
- The team includes Occupational Therapists, Social Workers, Physiotherapists, Speech and Language Therapists, Dieticians, Nurses, Care Co-ordinating staff and Reablement Support Workers (Home Carers). There are approximately 45 Reablement Support Workers who work with people in an enabling way to support the individual in achieving confidence and independence following an episode of ill health. The VCRS Social Workers work with individuals to establish ongoing support needs, linking in with care management teams within Social Services to set up ongoing packages of support if required.
- Individuals can receive therapeutic intervention and reablement support for up to 6 weeks. A client-centred therapeutic programme/service delivery plan is co-produced with the individual and reviewed throughout the intervention process.
- The VCRS operates 7 days per week 365/6 days per year.

### **Supporting recovery, independence and confidence at home**

We engaged with 130 citizens across the year, and feedback consistently shows that VCRS plays a strong preventative role in helping people to recover following illness or hospital discharge and to maintain independence at home. A large majority of respondents reported improvements in independence, confidence, mobility and ability to manage daily tasks, often describing how support reduced the risk of deterioration or readmission. Many people highlighted the value of timely equipment, adaptations and therapy input in enabling them to remain safely at home rather than requiring longer-term care. One citizen reflected: *“They enabled and encouraged me to return to independence... the aids provided enabled me to return home and supported my mobility,”* while another noted, *“The equipment made a huge difference to my confidence, safety and my mood.”*

### **Feeling safe, supported and reassured**

Feeling safe at home emerged as one of the strongest and most consistent themes, underlining the preventative impact of the service. Citizens frequently described reassurance gained from regular contact, professional advice and knowing help was available if needed. Emotional support was also repeatedly referenced, particularly by people living alone or experiencing anxiety following illness or injury. Comments such as *“They made me feel safe, supported and cared for”* and *“Just knowing they were there helped me cope and regain confidence”* reflect the importance of relational support in preventing isolation, loss of confidence and avoidable escalation of needs.

### **Positive experience of staff and multidisciplinary working, with learning identified**

Feedback was overwhelmingly positive about staff kindness, professionalism and encouragement, with many people valuing being supported to do things for themselves rather than having tasks done for them. This strengths-based, reablement approach was seen as central to recovery: *“They always encouraged me to do things for myself,”* and

*“They listened, explained things clearly and helped me judge my progress.”* Overall, the feedback provides strong assurance that VCRS is delivering preventative outcomes, while clearly highlighting where continued quality assurance and service improvement will further strengthen impact.

- **Vale Alcohol and Drug Team (VADT) consultation:**

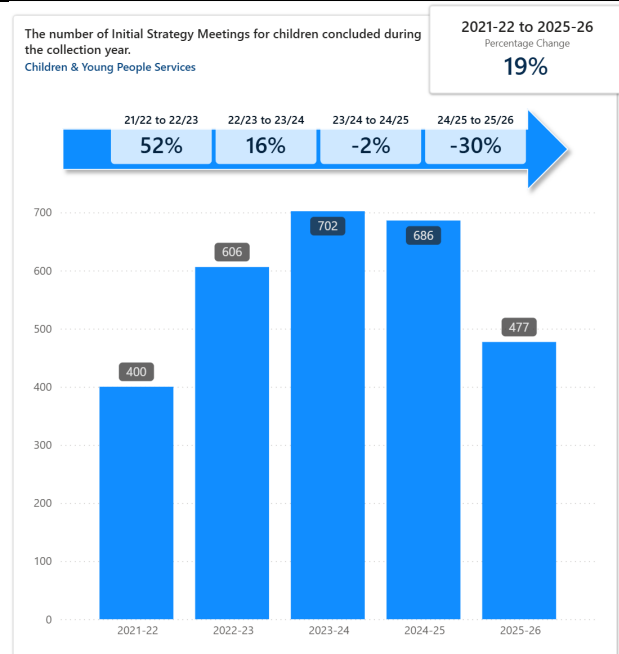
The **Vale Alcohol and Drug Team (VADT)** supports adults (18+) in the Vale of Glamorgan affected by substance misuse. The service promotes independence and wellbeing through personalised, strengths-based support, working collaboratively with individuals to develop tailored plans aligned to their needs and desired outcomes. VADT is not abstinence-based and offers a range of preventative interventions including one-to-one harm reduction, specialist domiciliary care, residential rehabilitation assessments and access to a dedicated Support Worker.

Engagement with 14 of 32 individuals receiving support between May and June 2025 highlights the significant role VADT plays in early intervention, stabilisation and recovery. 13 of the 14 participants reported that staff clearly explained available support at the point of engagement and rated the impact on their wellbeing as Good or Excellent, demonstrating strong preventative outcomes. Many individuals linked progress to reduced substance use, increased stability and feeling safer, with several describing the service as *“life-saving”*.

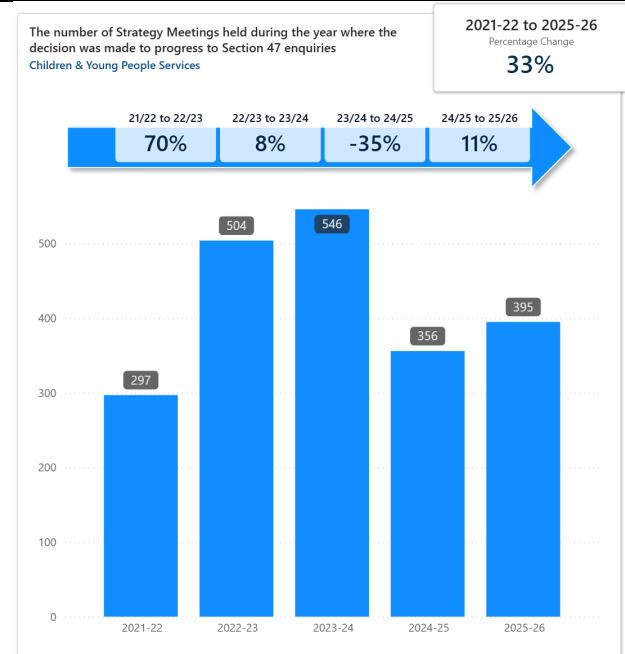
Relationship-based, person-centred practice is a clear strength. Most individuals accessed support via a Social Worker or Support Worker with contact levels generally appropriate to need. 11 reported achieving their goals, and 13 rated VADT as Helpful or Very Helpful in supporting access to rehabilitation and specialist pathways. Overall satisfaction was high, with 13 Very or Quite Satisfied and feeling fully involved in personalised, flexible and co-produced Care and Support Plans. While feedback also identified areas for development around continuity and proactive contact, the findings provide strong assurance that VADT is delivering effective preventative support and positively influencing long-term resilience.

## Partnerships & Integration Data:

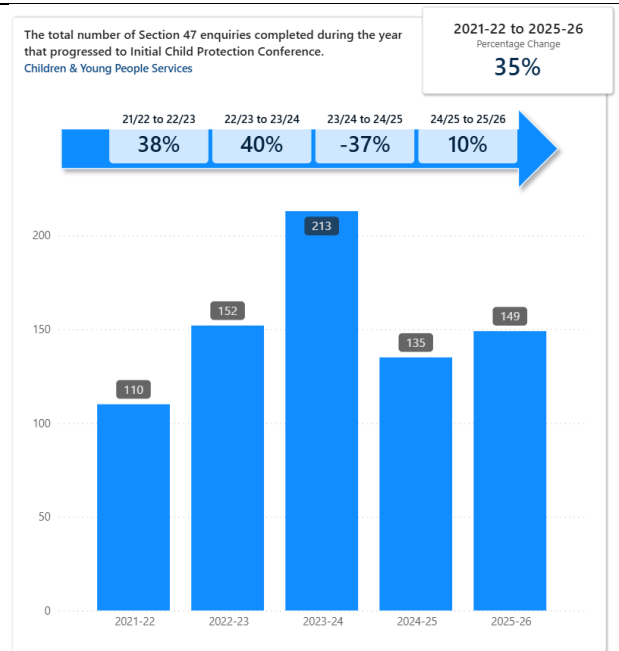
### Initial Strategy Meetings for children concluded during the collection year.



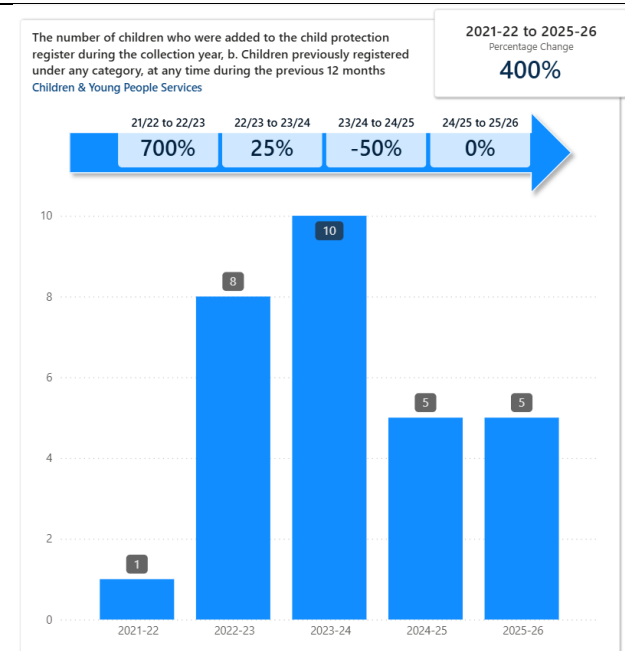
### Strategy Meetings held during the year that progressed to Section 47 enquiries.



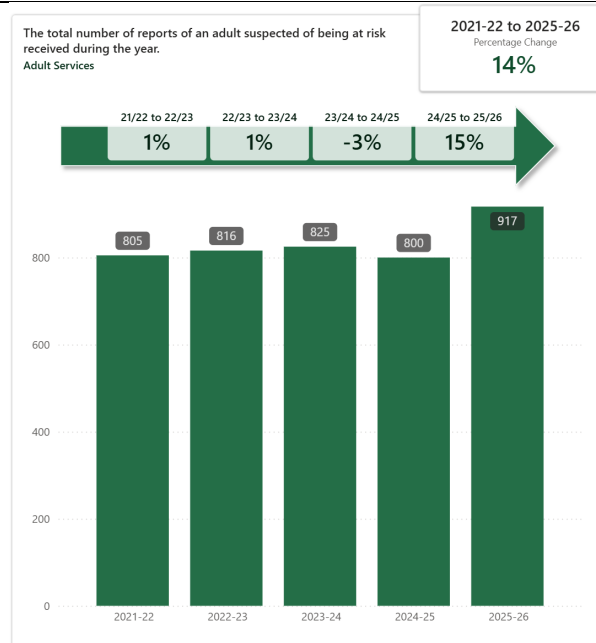
### Section 47 enquiries completed during the year that progressed to Initial Child Protection Conference.



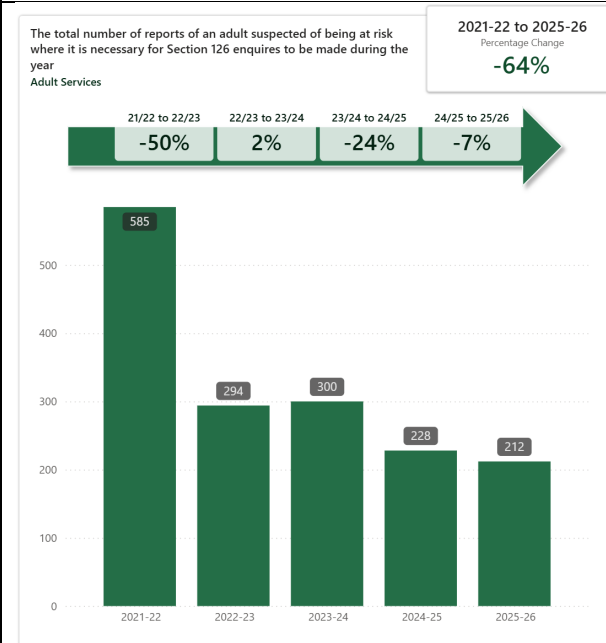
### Children added to the child protection register during the year that were previously registered at any time during the previous 12 months



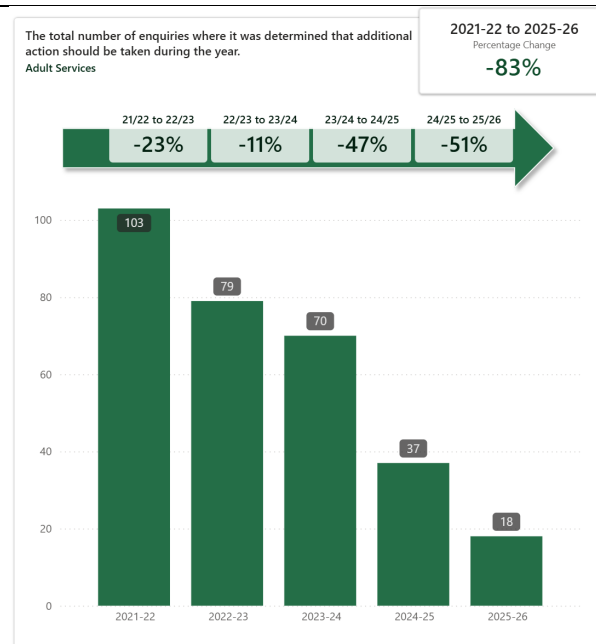
The number of reports of an adult suspected of being at risk received during the year.



The number of reports of an adult suspected of being at risk where it is necessary for enquires to be made.



The total number of enquiries where it was determined that additional action should be taken.



**Current Year:**

| Metric Ref | Metric name                                                                                                                                                                                                  | 2025-26          |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| CH/020     | The number of Initial Strategy Meetings for children concluded during the collection year.                                                                                                                   | 477              |
| CH/021     | The number of Strategy Meetings held during the year that progressed to Section 47 enquiries.                                                                                                                | 395              |
| CH/022     | The total number of Section 47 enquiries completed during the year that progressed to Initial Child Protection Conference.                                                                                   | 149              |
| CH/024     | Of those children who were added to the child protection register during the collection year, the number that have been previously registered under any category, at any time during the previous 12 months. | 3%<br>(5/149)    |
| AD/020     | The total number of reports of an adult suspected of being at risk received during the year.                                                                                                                 | 917              |
| AD/023     | The total number of reports of an adult suspected of being at risk where it is necessary for Section 126 enquires to be made                                                                                 | 23%<br>(212/917) |
| AD/026     | The total number of enquiries where it was determined that additional action should be taken.                                                                                                                | 18               |

**What progress did we make on last year's priorities?**

Over the past year, we have:

- We have embedded the Well-being Matters service and GP cluster Multi-disciplinary teams. With enhanced digital connectivity through our Shared Care Summary Care Viewer team members are able to see pertinent information from across health and social care.
- A Project Board has been created to commence the review of our care homes and a development officer has been appointed.

For the coming year, we will:

- Develop new accommodation to support services and staff in partnership with health boards.
- Develop a Care Home Strategy to ensure sufficient capacity for older people.

These priorities have been chosen to provide responsive services at the heart of our community and to ensure that we have sufficient care home capacity available for those who need high level of support.

## 4. Well-being

### **Ensuring People Are Protected and Safeguarded from Harm**

The local authority is committed to protecting and safeguarding individuals from abuse, neglect, and other forms of harm.

We continue to be a significant contributor to the regional safeguarding board, ensuring a multi-agency approach to child and adult protection. Where appropriate, further details on safeguarding arrangements can be found in [regional safeguarding board reports](#). In addition our Local Safeguarding Operational Group brings partners together at a local level to focus on safeguarding within the Vale of Glamorgan.

Senior staff in the Vale of Glamorgan provide leadership and programme oversight of the Wales Safeguarding Procedures making it well placed to ensure that we are operating using well researched and up to date practice. This year this has focussed particularly on making sure that we are acting upon the wide-ranging recommendations from the 'Our Bravery Brought Justice' Child Practice review.

### **How do we know?**

- **Post-Wellbeing Consultation:**

Rolling engagement is undertaken with children, young people and their families, as well as with adults, following the completion of a wellbeing assessment, Care and Support Plan, or review. This activity is intended to protect citizens from harm by ensuring their voices are heard, their views are acted upon, and support remains person-centred, proportionate, and responsive to risk and changing need.

Engagement levels with post-wellbeing consultation surveys varied across service areas. Where citizens did respond, feedback provided valuable insight into lived experience, highlighting positive relationship-based practice alongside areas where communication, clarity and timeliness could be strengthened.

Overall, the review demonstrates that post-intervention feedback can function as an effective preventative tool when it is clearly embedded and consistently applied. Planned actions to streamline survey arrangements, improve accessibility and embed feedback more firmly into routine practice provide a clear opportunity to strengthen participation, improve insight, and enhance the service's ability to identify and respond early to risks of harm.

- **Residential Care Consultation:**

Across the four Council-run residential homes, consultation activity engaged with a high proportion of residents (**43% - 92%**) through a combination of surveys and structured

observations, ensuring that the voices of those with communication or cognitive impairment were also represented.

**Feeling safe, protected and emotionally secure emerged as a consistent and dominant theme.** Across all four homes, **either 100% or the clear majority of residents reported feeling safe and secure**, with observations reinforcing calm, settled environments and reassuring staff presence. Residents frequently described the homes as comfortable, welcoming and homely, reflecting the protective role of residential care in reducing risk, anxiety and isolation. One resident shared, *“I had three falls before I moved here... I feel much more safe and secure now,”* while another described their home as *“like a paradise”* and *“the next best thing when I wasn’t safe at home anymore.”* This sense of safety was closely linked to staff visibility, prompt responses and familiarity with residents’ needs.

**Strong, relationship-based and person-centred practice plays a key role in supporting wellbeing and preventing harm.** Across the homes, **100% of residents consistently reported that staff are kind, respectful and approachable**, with warm, trusting relationships repeatedly highlighted by residents, relatives and professionals. Many residents spoke of staff knowing them well, listening to them and responding patiently to both verbal and non-verbal cues. Comments such as *“The girls are great – we have a laugh here,”*, *“They always look after us well,”* and *“Staff are like family”* reflect the emotional safety and reassurance provided through day-to-day interactions. Residents were also supported to retain **choice and autonomy**, with between **67% and 80% reporting full involvement in care planning** and the remainder usually or sometimes involved, depending on individual preference or capacity. This balance between protection and independence supports dignity while reducing risk.

**Wellbeing was further strengthened through reliable care, meaningful engagement and environments that promote comfort and dignity.** Across all four homes, **100% of residents confirmed their dietary needs and preferences are met**, with mealtimes observed to be sociable, calm and inclusive. Activities were generally rated as **good or excellent by around 78% of residents**, with staff adapting engagement for those who prefer quieter or one-to-one interaction. Residents valued being offered choice, even when declining activities, reflecting respect for autonomy. A Ty Dyfan resident noted, *“I don’t always want to take part – I like my word searches instead,”* while another at Southway shared, *“Dad is happier now; the loneliness has gone.”* Environments across all homes were described as **clean, comfortable and well maintained by 100% of residents**, contributing to physical safety and emotional wellbeing.

Overall, the combined findings demonstrate that the residential homes provide **protective, nurturing environments** where people feel safe, respected and supported. Strong relational practice, consistent staff presence, proactive health monitoring and attention to individuality all contribute to early identification of risk and prevention of harm. While residents identified some opportunities to further enhance wellbeing, particularly around personalised activities, outdoor access and continued support for quieter individuals, the evidence provides strong assurance that wellbeing is actively promoted and embedded in daily practice across all four services.



- **Supervision Key Information:**
- Since introducing the updated supervision policy, we've been able to better track and report key information about how supervision is being delivered. This matters because we understand how important it is for our staff to feel valued and supported in their roles. This year 3750 supervisions have taken place.
- **Wellbeing Outreach and Community Engagement:**

### **Family Information Service**

- FIS responded to 1,029 enquiries over the year, for information to support families. The most common enquiry was about the Childcare Offer funding for 3 to 4 year olds, which accounted for 39% of enquiries. 41% of enquiries were about health, wellbeing and leisure information.
- This year, the Family Information Service hosted two festive Christmas parties for families across the Vale. The first event was tailored specifically for families with children aged 0–3 years, while the second welcomed children of all ages. The event saw a positive response from the community, with a total of 715 individuals attending across both events. With funding secured from the Welsh Government Warm Spaces initiative, we were able to subsidise the parties and provide free snacks and drinks to all attendees.

A total of 22 organisations supported the events, with over 60 staff members contributing to the day. We gathered valuable feedback from 70 parents and 11 partner providers, with overwhelmingly positive results:

- Average parent rating: 4.8 out of 5
- Average provider rating: 4.9 out of 5
- 100% of parents said they would attend a similar event again
- 100% of providers said they would attend a similar event again





When families were asked 'what did you most enjoy about the party?' we had the following responses

1. *'Santa was very friendly, and took his time with the children. My daughter often struggles with characters and he made such an effort to include her along with my son. We loved all the arts and crafts especially making decorations and reindeer food, had we have done that anywhere else it would have cost money I don't have to spare. Also loved the healthy fruit and water for the children this year and would like to see that again next year.'*
2. *'We absolutely loved meeting Santa, I think he's the best one I have ever seen even as an adult and I am so glad he's the first one my son met. It was amazing to have a free morning out with so many activities and including a session from the libraries which I am going to go to in the New Year. I also found out about other groups and sessions as well as some adult learning classes for myself.'*
3. *'The DJ was a great addition this year and gave it more of a party feel and the activities were all amazing, every table had something different and we took home so many things, not just arts and crafts but toothbrushes, books, parent guides and lots of information too. We enjoyed everything on offer especially having the snacks this year which was a great idea and it being free means you can go without worrying about hidden costs.'*

Providers also reported it really positively with one saying:

*'We believe that the event was a fantastic opportunity for families within the Vale to enjoy Christmas activities without the huge cost. The layout of the room allowed plenty of families to move around without feeling that there was limited room. We particularly*

*liked that there was a visit to Santa, free snacks and drinks and a sing along. The families seemed to thoroughly enjoy the event. Our team thoroughly enjoyed too. Thank you all for your hard work.'*

### **Carer Friendly Accreditation**

The Social Care Information Team achieved Carer Friendly Accreditation, recognising our commitment to improving, sharing, and promoting support for unpaid carers across the Vale of Glamorgan.

### **Dementia Friends**

The Social Care Information Team also became Dementia Friends, strengthening our understanding of dementia and the small actions we can take to support those affected. As part of this work, the Dewis Team and volunteers prepared 100 blue leaflet bags for the first *Turn Barry Blue* event in Barry, aimed at raising awareness and reducing the stigma surrounding dementia.

### **Vale Family Compass**

November 2025 saw the launch of the Vale Family Compass, a new single front door for families to access the Family Information Service, Early Help Advice Line, Team Around the Family, Vale Parenting Service, and the Children & Young People Services Intake Team. This collaborative approach ensures families receive the right support at the right time.



The launch introduced a new contact number, email address, website, and branding, with FIS playing an integral role in the development. The website received 1.5k views in its first week and almost 4.5k in the first month. Social media promotion via the newly branded Vale Family Compass Facebook page reached over 4.5k views in total.



### **Summer Holiday Activity Programme for Children and Young People**

Last summer, the Family Information Service delivered its annual Summer Holiday Activity Programme, showcasing activities, events, and schemes available during the school holidays. For the first time, the programme was hosted on the Dewis Cymru website, making it easier for families to search and access information in one place.

Working closely with internal teams and external partners, we ensured a wide and varied list of activities was included. Promotion of the programme led to a significant uplift in



engagement, with Vale of Glamorgan views on Dewis increasing by 139% across July and August. Our social media post promoting the programme received over 4.5k views.

### Outreach at Barry Job Centre

The FIS Outreach Officer attends Barry Job Centre monthly, offering one-to-one appointments for parents needing childcare in order to start or return to work. These sessions have been highly valued by staff and families.

Feedback from the Partnership Manager:

*"We are very grateful for the support from the Family Information Service, .... The regular on-site surgery helps Work Coaches stay up to date and gives customers direct access to childcare advice and funding information. These close links provide critical support in helping customers move into work."*

Parent feedback included:

*"K was very helpful and helped me do my childcare offer application so it was done right."*

*"I found childcare using the Flying Start scheme you put me in touch with... now I am back in work."*

### The Index for Children & Young People with Disabilities or Additional Needs

The Index for families of Children with Disabilities or Additional Needs continues to grow, with 231 new registrations in the past year. There are now 921 children and young people on the register, receiving regular information. The Index Officer has established quarterly multi-agency meetings with health, third sector partners, and the Early Help Team, helping professionals stay informed about new services and improving awareness of The Index.

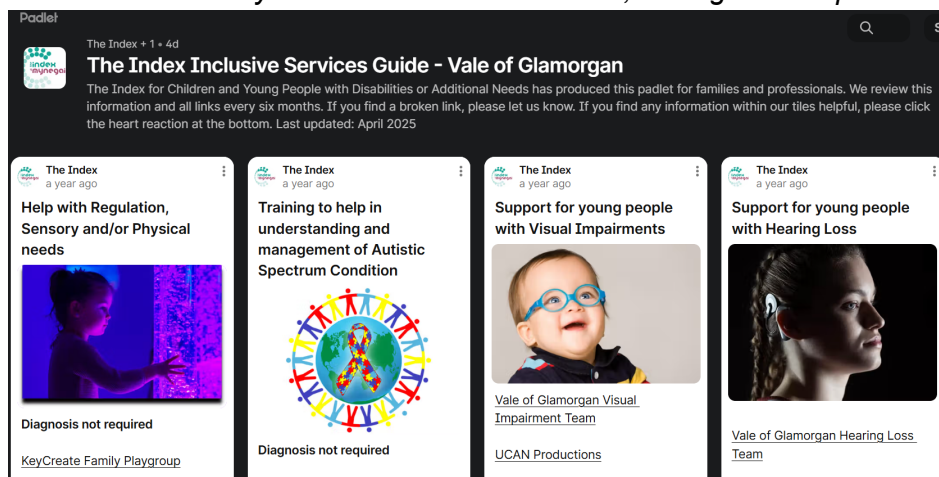
A new referral pathway has also been developed with Flying Start, where Childcare Liaison Officers introduce The Index to parents of two-year-olds who may benefit from additional support. 26 referrals were received in the first quarter.

The Index Officer has created a Padlet, [The Index Inclusive Services Guide](#) developed with partners and widely shared to highlight local support for children with additional needs.

Parent feedback included:

*"Excellent information, really great to see what's out there. Successful with grant found out from you."*

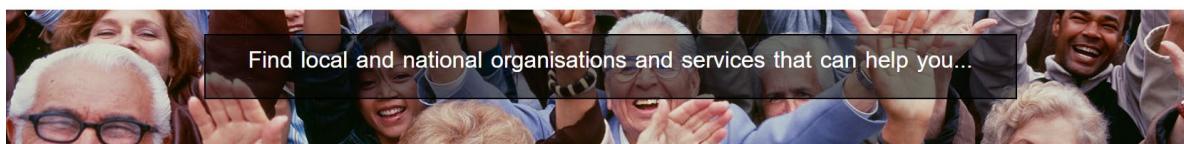
*"I wish I knew about you sooner—brilliant service, finding it so helpful."*



## Dewis Cymru online wellbeing directory



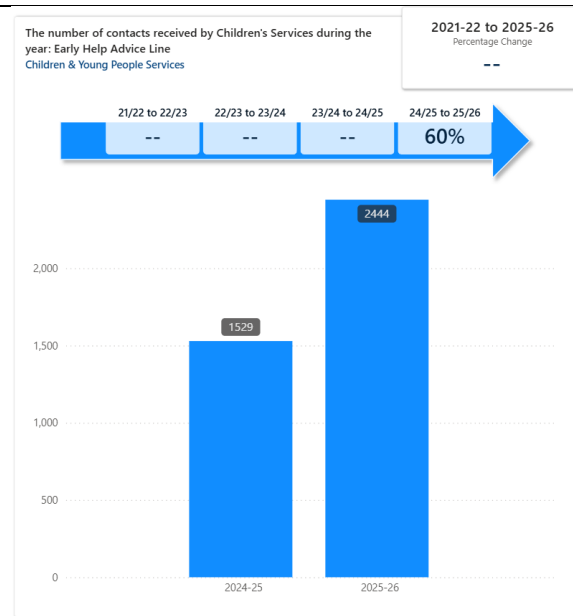
[Home](#) [About this site](#) [What matters to you?](#) [Events](#)



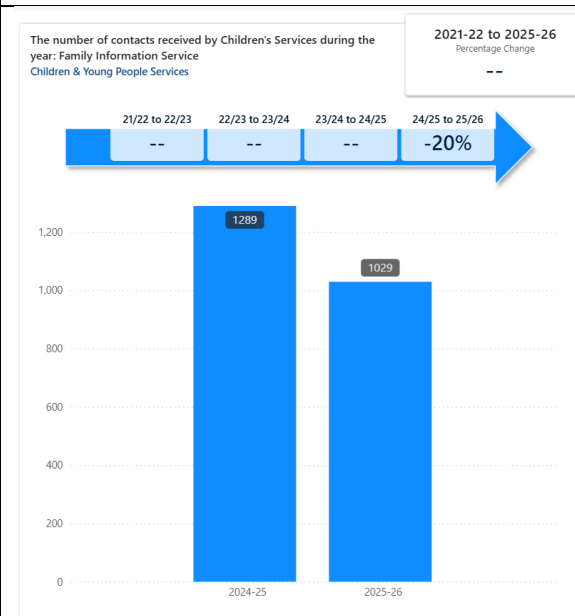
- Resources on Dewis Cymru online wellbeing directory [dewis.wales](https://dewis.wales) for the Vale of Glamorgan include services to support people in their own home such as gardeners, cleaners, domiciliary care providers, as well as social activities and support for people with learning difficulties.
- This year work was undertaken to group services into targeted lists for key groups, including unpaid carers, library services, leisure activities, and older people. This enables professionals to quickly access up-to-date information for signposting, while also making it easier for the public to find services via embedded links and QR codes
- 620 new resources were added to Dewis Cymru for the Vale of Glamorgan this year, with particularly high levels of activity during the summer months, reflecting a joint initiative with the Family Information Service to publish the Council's summer programme of activities for families and children on Dewis Cymru. Using Dewis Cymru as the central platform made the information easier for families to access, search and revisit throughout the school holidays.
- There are now over 1,258 resources published in the Vale of Glamorgan.
- We have seen increased engagement from both residents and service providers, with around 535,000 resource detail page views during the year (a 65% increase on 2024–25) and registered users increasing by 12%, reflecting continued growth in the number of organisations actively using Dewis Cymru to list and maintain services.

## Prevention / Early Help

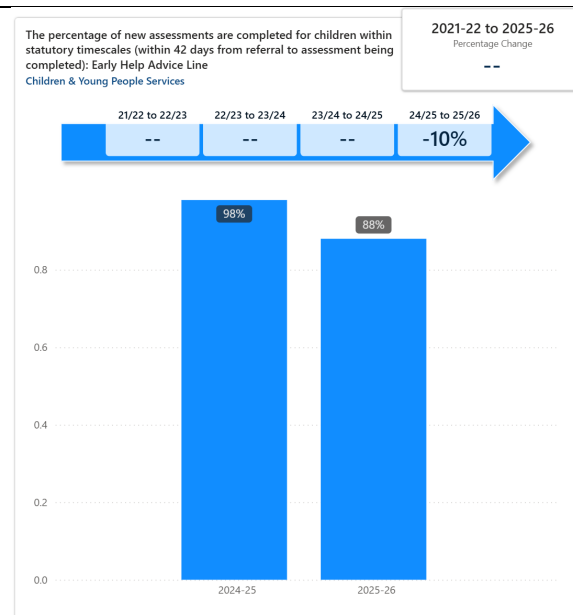
### Contacts received by Vale Family Compass Early Help Advice Line



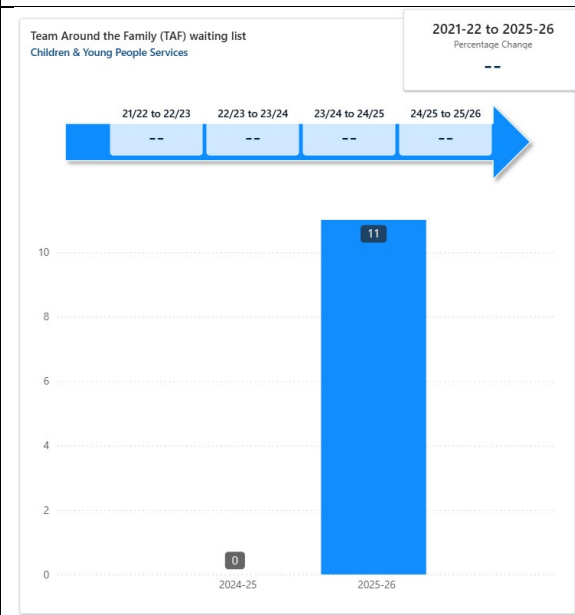
### Contacts received by Vale Family Compass Family Information Service

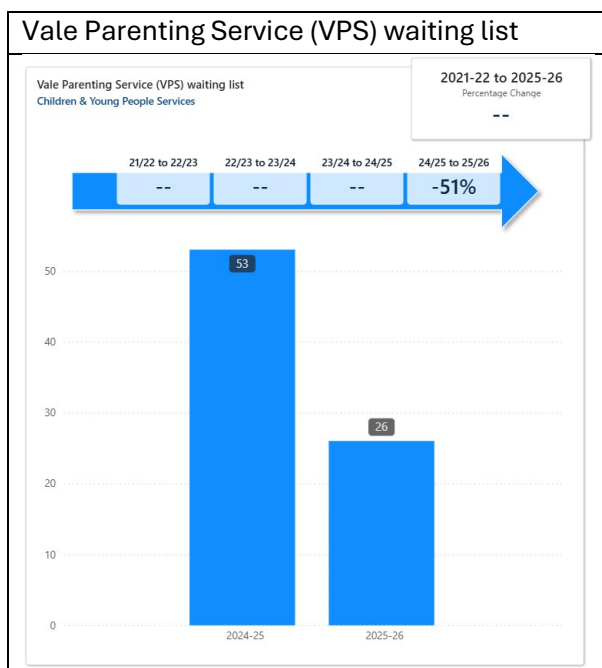


### New assessments completed by Early Help Advice Line within statutory timescales



### Team Around the Family (TAF) waiting list





### Data – Prevention / Early Help

| Metric Ref | Metric name                                                                                                                                      | 2024-25 |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| C01.1      | Number of contacts received by Vale Family Compass Early Help Advice Line during the year                                                        | 2444    |
| C01.22     | Number of contacts received by Vale Family Compass Family Information Service during the year                                                    | 1029    |
| C04.1      | Percentage of new assessments completed by Vale Family Compass Early Help Advice Line within statutory timescales (within 42 days from referral) | 88%     |
| C04.11     | Team Around the Family (TAF) waiting list                                                                                                        | 11      |
| C04.12     | Vale Parenting Service (VPS) waiting list                                                                                                        | 26      |

### What progress did we make on last year's priorities?

Over the past year, we have:

- Further strengthened our Safeguarding Framework through finalising a multi agency threshold document to support consistent practice. Our neglect toolkit is operational and embedded.
- Strengths based practice continues to develop in Adult Services through e-learning and practice development sessions.
- We have started a Reablement 1<sup>st</sup> approach using Pathways of Care funding from Welsh Government. This is expected to enable more residents to benefit from a service which helps them restore and maintain their independence.

### For the coming year, we will:

- Embed a comprehensive strategic framework for exploitation
- Implement the new Section 5 guidance for concerns about those in positions of trust.

These priorities have been chosen to help protect people in the Vale of Glamorgan from people who may take advantage of them and to ensure that we are following the new procedures relating to allegations about practitioners and people in positions of trust.

### Other information section

#### Anti Racist Wales Action Plan:

- During 2025/26, the Anti Racist Workstream has been established, bringing together representatives from Social Services Resource Management and Safeguarding, Human Resources, Communications, Equalities and Life Cycle. This group is leading the coordination and delivery of the ADDSS recommendations which were developed as part of their reports in to [Translation, Eliminating Racism, and Recruitment and Retention](#). The work stream is monitored through the Social Services Reshaping Board.
- A Cultural Ambassador role has been established and is attending the Cultural Ambassador Network. This network promotes cultural awareness, supporting staff and championing inclusive practice.
- Cultural Awareness training for recruiting managers has taken place. Managers across Social Services have attended.
- This has been supported with a programme of Anti-Racism e-learn modules, developed by Social Care Wales. To date 160 staff have started or completed this training. It has been promoted widely across the Council.
- The Translation and Interpretation Policy has been produced and plans are in place to produce a visual practical guide for staff.
- Human Resources are leading the development and update of their key policies to ensure that they properly reflect the recommendations for the ADSSC reports.

#### Commissioning:



#### [National framework for commissioning care and support: code of practice](#)

The code of practice sets out a unified vision for consistent, ethical and outcome focused principles and standards for commissioning across Wales.

The Code establishes these core principles and standards with the aims of:

- reducing complexity in commissioning systems
- facilitating national consistency of and quality commissioning practices



- rebalancing commissioning to focus on quality and outcomes, value and fair work.

The Vale of Glamorgan Social Services Commissioning Team has continued to work closely with the National Commissioning Team to implement the code and share learning with the National Implementation Team and the All-Wales commissioning network.

To support this, officers have implemented, using the National Toolkit, a local Self-Assessment tool and regular review groups to update our progress in this area.

Examples of this include the development of Your Choice principles and a revised policy in this area, which aligns to the National Framework for commissioning care and support and focusses on outcomes, values, choice and empowerment and has been co-produced with providers, commissioners and with feedback from people receiving services. (see Erin's update on consultation)

All of our commissioning activity in Social Services now aligns with the framework, and referencing the toolkit is important to ensure we continue to improve the way we commission and work in partnership with our providers to coproduce services.

The development of Western Vale Day Services is an example of a recently commissioned service which embedded elements of the framework, with consultation with people in receipt of service, coproduction of outcomes, inclusion of social value measures and market engagement. This was our first contract we have issued which has included Themes Outputs and Measures that enable us as a Local Authority to capture added Community Well Being Benefits alongside the outcomes from the service delivery within our specification.

We continue to work with providers in partnership to undertake lessons learned from our commissioning what worked well and how we can improve and strengthen our processes.

The services we commission make up approximately  $\frac{3}{4}$  of the whole budget of Social Services. Our independent sector providers are valued partners and for many of the people we serve their main care and support is provided by them. Through Your Choice and this shared 'values driven' approach we have seen innovative service developments across the sector. One such provider, Innovate Trust have been reviewing the impact of the digital solutions that they have trialled which can evidence improved independence, confidence and safety. For example, Artificial intelligence glasses have been used to enhance confidence and independence in the community for individuals with sight impairments. Digital solutions have also helped with Travel Training, Anxiety and home safety.



*Pictures Courtesy of Innovate Trust*

## **Direct Payments**

The Vale of Glamorgan has updated the Direct Payments Policy following feedback from people using the service. This new and improved policy has been published on our website, alongside our brand-new Direct Payments Hub.

[https://www.valeofglamorgan.gov.uk/en/living/social\\_care/Direct-Payments/Direct-Payments.aspx](https://www.valeofglamorgan.gov.uk/en/living/social_care/Direct-Payments/Direct-Payments.aspx)

The Hub will act as the central point for Direct Payments information for both practitioners and the public, bringing together clear guidance, FAQs, and support information in one accessible place.

We hope that this new policy and information hub supports improved practice and use of Direct Payments as a standard option for care and support, rather than being framed as something exceptional or only explored at a later stage.

The role and value of Personal Assistants is clearly recognised and actively promoted as an essential part of enabling flexible, personalised support. This has been enhanced with fee uplifts that support the Real Living Wage flexibility in use of hours by creating a consistent pay scale across weekdays and weekends.

The updated policy reflects current legislation and good practice and strengthens safeguarding and accountability arrangements. It has been shaped through co-production with people who receive Direct Payments. The Hub will seek to re-affirm Direct Payments as an option which supports choice, flexibility, and independence.

## **Vale Community Partnership**

This year we have engaged with our third sector and social value community partners to explore how we work more effectively together when supporting our most vulnerable citizens across the region.

An event was held in March 2026 to 're-fresh' relationships, engage with new providers and set out our commitment as a local authority to working in partnership.

The 'Refresher's Fair' brought together a wide range of third sector partners and community organisations from across the Vale. The event had an excellent turnout, with several providers hosting information stalls to highlight their services and initiatives.

The Refresher's Fair served as a significant opportunity to reinvigorate the Section 16 Provider Forum in alignment with our responsibilities under the Social Services and Well-being (Wales) Act, ensuring its future direction remains firmly rooted in the operational realities and pressures experienced by social value-led organisations in the Vale.

Providers were given the opportunity to offer candid reflections on current commissioning processes and identify key challenges, including transport barriers, funding sustainability, and the need for strengthened sector-wide connectivity. Providers were also given the opportunity to contribute clear priorities for future developmental workshops, such as partnership-building, sensory-loss awareness, and guidance on Council funding applications.

The event clearly demonstrated the need to refresh the structure and function of the Section 16 Provider Forum, with a central outcome being the vote to adopt a new identity for the forum itself, which will now be known as "Vale Community Partnership: Creating Brighter Futures Together." This rebranding represents the first step in reshaping the Section 16 Provider Forum and reaffirms our shared commitment to fostering a more connected, resilient and collaborative social value landscape in the Vale of Glamorgan.



### Inspections and reviews

- Social Services in the Vale was subject to a Performance Evaluation in 2023. The report was positive and an action plan was developed to respond to the areas identified for improvement. All of these [actions](#) have been completed.
- The Council's internal care homes were inspected in the year:
  - TyDyfan received a 'good' rating in all categories in June 2025
  - Cartref Porthceri received a 'good' rating in all categories in July 2025
  - Southway received a 'good' rating in all categories in February 2026
  - TyDewi received a 'good' rating in all categories in March 2026

- Our reablement service the Vale Community Resource Service received 2 'good' category ratings and 1 'excellent' in August 2025
- The regional adoption service and the fostering service were also inspected. There are no ratings for this type of inspection, but both highlighted many areas of positive practice as well as areas for development of the services

## Complaints and representations

### • Compliments

Compliments play a vital part in understanding what we are doing well and enable us to share this experience across the breadth of our services. It also provides a means through which we can celebrate and praise the efforts and dedication of our staff.

During 2025-26 Social Services received a total of **245** compliments compared to **184** received in 2024-25. The compliments related to a range of services and support citizens received. The compliments often named specific staff where they felt the individual had gone over and above what was expected of them.

By having a better understanding of what our citizens value and what matters most to them, will not only enable us to build a better picture of how our services are performing, but will help to reinforce a sense of pride in our work.

Outlined below is a breakdown of all compliments by Division.

| Service area                       | Number of compliments |
|------------------------------------|-----------------------|
| Children and Young People Services | 109                   |
| Adult Services                     | 84                    |
| Resource Management & Safeguarding | 52                    |
| Total number of Compliments        | 245                   |

Outlined below is a snapshot of some of the compliments we have received over this past year.

### **CYPS -Family Support 2**

*I wanted to say thank you for all your hard work and commitment with the X children and their families. I could see how dedicated you have been even though it is a case that has continued to develop and is complex. You made sure all the children's views, wishes and feelings were gathered, that direct work was completed when necessary and that safety plan was in place. The Child Protection conference report was completed on time and shared with the family. I know it has taken a lot of your time, and it is not your only case, but I can see your dedication and good practice*

## AS- Learning Disability Services

*X past experiences as you know haven't been very good the constant rejection he internalised which eroded his self-esteem drastically. To see him finally smiling and wanting to stay longer is a massive transformation, you should be proud making such an amazing difference in his life. All it took was the right people with the right manner to see him as a person not a problem*

## RMS- Finance & Commissioning

*I am writing to express my sincere gratitude and to formally compliment the team of carers currently supporting my mother at home. Over recent weeks, the care provided has been of a consistently high standard. As my mother is bed-bound and has significant needs, I have been reassured by the carers' professionalism, kindness and dignity in ensuring she is always clean, comfortable and well cared for. They are a credit to Care Mark Home Care. Thank you once again for the peace of mind you have given our family.*

- **Contacts**

During **2025–2026**, a total of **67 contacts** were received by the complaints team relating to all three divisions of Social Services. A number of these contacts represented **informal conversations or initial enquiries**, where individuals had not previously contacted the service to seek advice, request support, or attempt resolution. In many cases, contacts related to matters that did not fall within the statutory complaints process and were therefore **appropriately signposted** to the relevant service or organisation, such as **initial service requests, Subject Access Requests, the Data Protection Officer, Health services, or other partner agencies**.

- **Complaints**

Through our complaints handling process we have continued to focus on maintaining a person-centred approach to how we deal with complaints. By taking this approach, it enables us to fully understand the issues from the citizen's perspective and puts us in a stronger position to be able to find an agreeable resolution, learn lessons and consider areas for improvements.

The Complaints Officer takes a proactive approach to preventing and mediating issues before they have the potential to escalate into a complaint. Sometimes, citizens may contact Social Services unsure whether their concern equates to a formal complaint. Support and actions are taken at this early stage which consequently do not always progress on to becoming a complaint. These are captured and recorded as a contact.

As of the 31st of March 2026, a total of **129** complaints were received (compared with 117 for 24/25), **42** of which were discontinued during the year (either through no further contact or the complaint was considered not able to be considered within the complaints process).

Of the **87** (compared with 68 for 24/25) remaining complaints, **27** (31%) were resolved within the designated timescales, **49** (56.3%) were resolved outside of timescales, and **11** (12.6%) remained open at the end of the year and were carried forward into **2026–27**.

Complaints have seen an increase compared with last year which is disappointing however this should be seen in the context of increased numbers of people requesting services and being supported.

The complaints and compliments team are required to work within statutory timescales for acknowledging and responding to complaints. Designated timescales are as below:

- Responding to Stage 1 complaints 10 working days and a further 5 working days to confirm the outcome of the discussion.
- Stage 2 complaints, 25 working days.

The Complaints Team hold weekly meetings with Operational Manager and Team Managers to support timely and effective oversight and response to complaints.

The table below provides a full breakdown of all Contacts and Complaints received during 2025-26.

| <b>Service Division</b>            | <b>Contacts</b> | <b>Complaints Stage 1</b> | <b>Complaints Stage 2</b> | <b>Ombudsman</b> | <b>Responded to in timescales</b> | <b>Complaints discontinued</b> | <b>Total Complaints and Contacts received</b> |
|------------------------------------|-----------------|---------------------------|---------------------------|------------------|-----------------------------------|--------------------------------|-----------------------------------------------|
| Adult Services                     | 17              | 38                        | 4                         | 6                | 36                                | 19                             | 59                                            |
| Resource Management & Safeguarding | 29              | 7                         | 0                         | 1                | 6                                 | 2                              | 36                                            |
| Children and Young People Service  | 21              | 75                        | 5                         | 8                | 21                                | 31                             | 101                                           |
| <b>Total</b>                       | <b>67</b>       | <b>120</b>                | <b>9</b>                  | <b>15</b>        | <b>63</b>                         | <b>52</b>                      | <b>196</b>                                    |

*1 - Please note that the Ombudsman's complaints are recorded separately to the rest of the complaints data.*

The table below provides a breakdown of the nature of stage 1 complaints and Contacts by division.

| <b>Nature of Complaint by Division</b> | <b>Adult Services</b> | <b>Resource Management &amp; Safeguarding</b> | <b>Children and Young People Service</b> | <b>Total</b> |
|----------------------------------------|-----------------------|-----------------------------------------------|------------------------------------------|--------------|
| Quality of communication               | 5                     | 3                                             | 27                                       | 35           |

| <b>Nature of Complaint by Division</b>                                       | <b>Adult Services</b> | <b>Resource Management &amp; Safeguarding</b> | <b>Children and Young People Service</b> | <b>Total</b> |
|------------------------------------------------------------------------------|-----------------------|-----------------------------------------------|------------------------------------------|--------------|
| Disputing Decisions                                                          | 5                     | 2                                             | 22                                       | 29           |
| Rude or discourteous staff                                                   | 6                     | 2                                             | 18                                       | 26           |
| Unhappy with timescales                                                      | 3                     | 0                                             | 2                                        | 5            |
| Availability of services                                                     | 6                     | 2                                             | 1                                        | 9            |
| General Standards of Service                                                 | 26                    | 15                                            | 35                                       | 76           |
| Incorrect information given                                                  | 0                     | 1                                             | 2                                        | 3            |
| Serious allegations including: Assault, Theft, Neglect, Abuse & Safeguarding | 2                     | 1                                             | 6                                        | 9            |
| Unhappy with costs of services / financial support                           | 7                     | 5                                             | 5                                        | 17           |

*\*Complaints may raise more than one area of concern; therefore, the total number of issues recorded exceeds the total number of complaints and contacts received.*

## **Lessons Learnt**

During 2025-2026, a summary of key lessons learnt have been captured below:

## **Contacts**

During 2025–2026, analysis of contacts received across services highlighted recurring issues relating to communication, clarity of processes and expectation-setting.

Key themes identified from contacts during 2025–2026 include:

- Timeliness and quality of communication, particularly the need for clearer and more regular updates to citizens.
- Lack of clarity about processes and thresholds, especially where matters could not progress through the formal complaints process due to court proceedings, safeguarding considerations or consent.
- Expectation-setting at first contact, as unclear signposting often led to repeat contact or escalation.

These themes reinforce the importance of clear, timely communication and early explanation of statutory processes to improve customer experience and reduce unnecessary escalation.



## Stage 1 Complaints

Key themes identified from Stage 1 complaints include:

- Quality and timeliness of communication, particularly the need for clearer updates, explanations of decisions and improved consistency of contact.
- Disputing decisions, especially where decisions were made within statutory or policy frameworks and complainants required clearer explanations of thresholds and rationale.
- Service delays and coordination, often linked to capacity pressures, allocation timescales and transitions between teams.
- Expectation-setting, as a number of complaints arose where citizens did not fully understand processes, timescales or the scope of the complaints procedure.

These themes reinforce the importance of clear communication, early explanation of decision-making and consistent service standards to reduce escalation and improve the experience of complainants.

## Stage 2 Complaints

Learning from Stage 2 complaints this year highlights the importance of clearer understanding across services regarding **which matters are appropriate to progress to Stage 2**, helping to ensure consistency and manage expectations.

Learning from Stage 2 complaints this year identified the importance of supporting staff where investigations involve multiple practitioners and additional complexity, including language expectations. Feedback highlighted that concerns around Welsh language use affected staff confidence and created a perceived barrier to communication. While independent scrutiny remains essential, this learning emphasises the need for **early, appropriate support for staff involved in complex Stage 2 investigations**.

This includes timely engagement from the Complaints Team, such as facilitated briefings or reflective discussions, to support staff wellbeing and reinforce learning

As part of our commitment to Quality Assurance, we have developed a Stage 2 Investigation Recommendation Action Tracker. This tool is used to monitor and follow up on recommendations made by external investigators. Regular meetings are held with relevant service area managers to review these recommendations, agree on action plans, and set clear completion dates. This process ensures that all recommendations aimed at improving our services are not only implemented but also properly tracked. It reinforces our commitment to continuous improvement and accountability.

## Stage 2 Recommendations

A small number of recommendations were made through Stage 2 investigations. These will be considered and, where appropriate, used to inform improvements to practice and strengthen the overall complaints handling process.



### **Adult Services**

Stage 2 learning highlighted the need to strengthen supervision, recording and oversight, including clear documentation of decision-making and professional involvement.

Recommendations also reinforced the importance of clear explanations around care costs and information for relatives to improve transparency and understanding.

### **Children and Young People Service (CYPS)**

Stage 2 recommendations emphasised the importance of empathetic, trauma-informed communication, compliance with court directions, and continued focus on preferred language provision, in line with the Welsh Language Commissioner's findings. Learning also highlighted the need to ensure staff are well prepared and supported during complex Stage 2 investigations.

### **Cross-Service Learning**

Across services, learning reinforced the importance of clearly explaining escalation routes, resulting in updated Stage 1 response templates. Recommendations also highlighted the value of early staff support and guidance during Stage 2 investigations to promote learning, confidence and wellbeing.

Improvements in the management of complaints, contacts and compliments this year have resulted in more effective early resolution and increased assurance. While Social Services continue to face rising demand, complexity and cost pressures, learning from concerns raised has supported improvements in communication and practice. However, in the context of finite resources, further service change will be required to ensure sustainability going forward.

### **Director's Report Conclusion**

Several key improvements have been made to the service this year resulting in improved responsiveness and increased levels of assurance. Real progress has been made in service transformation particularly in response to developing accommodation and access to children's services. Additionally Social Services are supporting more people than ever before. This is in the context of continued rises in demand and costs. As a result of finite financial resources, and the unresolved UK funding position for social care, this growth is not sustainable and significant service change will be required in the future.