

# Social Services Quarterly Performance: Quarter 3 Performance Overview



Overall, Social Services is on track to achieve the objectives contributing to its service outcomes, with 94% of actions currently either completed or on track. Details are provided under each objective.

Our contribution to the Corporate Plan is also well on course, with 100% of actions on track for completion. Of the 19 actions within the service plan, 17 are on track and 2 are completed.

There are 3 actions relating to the Improvement Objectives, 2 of which are completed. The other is on track.

There are currently no Outcome Agreement actions in place for the service as we have not yet received final guidance from Welsh Government.

## Examples of exceptional performance during the quarter:

In terms of notable performance, the full co-location of reablement home carers with health care rehabilitation workers is planned for the middle of February. This is a significant step in delivering community based health and social care services [SS02/A006, SS03/A008 & SS03/A009]. There has been significant improvement at quarter 3 in the rate of delayed transfers of care for social reasons (over 75's) when compared with quarters 1 and 2 [SCA001]. Quarter 3 has seen performance indicators for carers assessment [SCA018a, b and c] all reach 100%.

## How will we bring our slipped actions on track?:

[SS05/A016b] This action will need to be reviewed as the Social Services Bill is likely to provide further assistance to facilitate formal agreements between partners. The pursuance of a S33 agreement is therefore on hold. Governance arrangements have been clarified.

Analysis of existing internal and block purchased services is being performed to evidence existing demand and the need to reconsider existing arrangements in respect of spot purchase agreements [SS09/A039]. Talks are being held with a number of providers regarding movements to block rather than spot arrangements. It is not currently cost beneficial for the authority to do so and this will need to be investigated further.

Work to implement a brokerage hub for care home placements with Cardiff and Vale UHB and Cardiff Council is due to be progressed during the final quarter of this financial year [SS10/A043].

<b>All Actions</b>						
	Total Number	Completed	On track	Slipped	Not started, but due to have	Not due to have started
No.	52	6	42	3	1	0
%	100%	12%	80%	6%	2%	0%
<b>Corporate Plan Actions</b>						
	Total Number	Completed	On track	Slipped	Not started, but due to have	Not due to have started
No.	19	2	17	0	0	0
%	100%	11%	89%	0%	0%	0%
<b>Improvement Objective Actions</b>						
	Total Number	Completed	On track	Slipped	Not started, but due to have	Not due to have started
No.	3	2	1	0	0	0
%	100%	67%	33%	0%	0%	0%
<b>Outcome Agreement Actions (No Outcome Agreement in place as yet)</b>						
	Total Number	Completed	On track	Slipped	Not started, but due to have	Not due to have started
No.						
%						

## Measures Key

### Measures Key:

**GREEN** - On or above target

**AMBER** - Within 10% of target

**RED** - Missed target by more than 10%

### Direction of Travel Arrows:



Performance has improved since last quarter, in relation to target



No significant change



Performance has worsened since last quarter, in relation to target

An explanation of the referencing used in this report:

**e.g. SS01/A001**

SS - this refers to the service plan, in this case, Social Services.

01 - this refers to the service plan objective the action contributes to, in this case, objective 1.

A - this refers to the fact that this is an action. Performance Indicators will have an 'M' for 'measure' here.

001 - this is the individual number reference for the action.

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

e.g. (CP/CL1) - the CP refers to the Corporate Plan. CL1, for example, is the reference number of the Corporate Plan objective the action links to.

e.g. (IO/06) - the IO refers to the Improvement Objectives. The 06, for example, refers to the number of the objective linked to.

SEP - this refers to actions which link to the Strategic Equality Plan.

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

Performance against actions and performance indicators:

We are 100% on track towards completing the actions against this outcome. Of 6 actions, all are on track.

Of the 23 performance indicators under the outcome, 18 have met or exceeded target, 4 are within 10% of the target and 1 has missed target by more than 10%. Details are available under each objective in the next section of the report.

**Objective 1: To ensure that people have access to comprehensive information about Social Services and can easily contact key staff. Individuals get prompt advice and support (including advice about their eligibility for service) and they are well signposted to other services where appropriate.**

### Actions

Completed: 0% ; On Track: 100% ; Slipped: 0% ; Not Started: 0%

### On Track Actions

Title	% Complete	Comment
SS01/A001 (CP/CYP6) Work with the third sector and other organisations to deliver information about services for children in need via the Family Information Service, the Council's Contact Centre and other communication channels.	75	The Family Information Service continues to be effective in ensuring up-to-date information is available, and that public information is distributed across the Vale. Finish Date 2015/16
SS01/A002 (CP/CYP1) Provide young children and their families with a 'flying start' by improving information regardsuitable childcare places and activities which meet their particular needs.	75	The WG Flying Start initiative requires us to provide a full 'offer' of services to eligible families of the four streams of service. Contact has been established with all eligible families within the Castleland area and Flying Start has secured all four streams/elements as required to comply with the 'offer'. Finish date 2016/17
SS01/A003 (CP/CL14) Tackle child poverty by working with families in need to raise awareness of entitlements to welfare benefits and allowances and to facilitate access to support services that help people into employment and training.	75	CYPS routinely refer families to CAB for specialist advice. Families First fund additional CAB services for families in need. The Children and Young People's Partnership are responsible for Council wide development of a Poverty Strategy.

### Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SCC013aiiiQ The percentage of open cases of children in need who have an allocated social worker	77.57	60.00	■	74.74	
SCC013aiiQ The percentage of open cases of children looked after who have an allocated social worker	100.00	100.00	■	100.00	
SCC013aiQ The percentage of open cases of children on the Child Protection Register who have an allocated social worker	100.00	100.00	■	100.00	

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SCC006Q The percentage of referrals during the year on which a decision was made within 1 working day	96.32	95.00	↓	99.27	
SS01/M001Q Percentage of service users visited within 20 working days of Financial Assessment for Residential/Nursing care being requested.	99.22	95.00	↑	98.05	
SS01/M002Q Percentage of service users visited within 10 working days of Financial Assessment for non-residential care services being requested.	91.98	90.00	↑	79.63	

**Objective 2: To ensure that people using Social Services are supported by assessments, care and support plans which are regularly reviewed.**

### Actions

Completed: 0% ; On Track: 100% ; Slipped: 0% ; Not Started: 0%

### On Track Actions

Title	% Complete	Comment
SS02/A004 (CP/CYP5) Continue to improve multi-disciplinary transition support for young people moving into adulthood.	75	Appointment of a dedicated Transitions Social Worker in the CHAD Team supports this work. Finish date: 2014/15
SS02/A005 (CP/HSCW8) Establish integrated social care and health assessment and care management teams for all adult services in partnership with the Cardiff and Vale University Health Board.	75	Integrated models in place in MH, OPMH and LD. Further work initiated for locality services.
SS02/A006 (CP/HSCW10) Work with partners to implement the Carers information and Consultation Strategy.	50	Joint working in relation to the carers measure continues to progress. Agreement from Welsh Government on spending proposals has been received. An update report was approved by all partners and submitted to Welsh Government in October 2013. Finish date: 2014/15

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SCA018aQ The percentage of carers of adult service users who were offered an assessment in their own right during the year	100.00	100.00	▬	100.00	
SCA018bQ The percentage of carers of adult service users who had an assessment in their own right during the year	100.00	100.00	▬	98.60	
SCA018cQ The percentage of carers of adult service users who were assessed during the year who were provided with a service	100.00	100.00	↑	99.29	

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SCA007Q The percentage of clients with a care plan at 31 March whose care plans should have been reviewed that were reviewed during the year	74.55	87.00	↑	87.83	The increased volume of work has resulted in reduced priority for planned reviews.
SCC001aQ The percentage of first placements of looked after children during the year that began with a care plan in place	100.00	100.00	-	100.00	
SCC001bQ For those children looked after whose second review (due at 4 months) was due in the year, the percentage with a plan for permanence at the due date	95.45	100.00	↓	100.00	
SCC016Q The percentage of reviews of child in need plans carried out in accordance with the statutory timetable	95.65	80.00	-	96.85	
SCC030aQ The percentage of young carers known to Social Services who were assessed	100.00	100.00	-	100.00	
SCC030bQ The percentage of young carers known to Social Services who were provided with a service	87.72	85.00	↑	89.74	
SCC034Q The percentage of child protection reviews carried out within statutory timescales during the year	100.00	100.00	-	97.87	
SCC041aQ The percentage of eligible, relevant and former relevant children that have pathway plans as required	97.41	100.00	↓	100.00	
SCC041bQ The percentage of eligible, relevant and former relevant children that have been allocated a personal advisor	100.00	100.00	-	100.00	
SCC042aQ The percentage of initial assessments completed within 7 working days	89.29	80.00	-	89.13	
SCC042bQ The average time taken to complete initial assessments that took longer than 7 working days to complete	15.15	15.00	↓	13.76	
SCC043aQ The percentage of required core assessments completed within 35 working days	90.17	80.00	-	87.41	
SCC043bQ The average time taken to complete those required core assessments that took longer than 35 days	60.26	55.00	↓	47.38	9 CAs allocated to a temporary staff member who has since left the service took 90 days on average to complete. Management oversight of this has now improved.
SCC045Q The percentage of reviews carried out in accordance with the statutory timescale	97.77	95.00	↑	96.64	

## Outcome 2: People eligible for Social Services in the Vale of Glamorgan are able to choose from a range of high quality services, helping them to maximise their independence whilst keeping them safe.

Performance against actions and performance indicators:

We are 100% on track towards completing the actions against this outcome. Of 9 actions, 3 have been completed and 6 are on track.

Of the 6 performance indicators under the outcome, 1 has met or exceeded target. The remaining 5 did not have targets set as they are new PIs for 2013/14. Details are available under each objective in the next section of the report.

### Objective 3: To provide services which meet assessed individual needs.

#### Actions

Completed Q1 & Q2: 37% ; Completed Q3: 0% ; On Track: 63% ; Slipped: 0% ; Not Started: 0%

#### On Track Actions

Title	% Complete	Comment
SS03/A007 (CP/CYP3) Co-ordinate preventative and early intervention services for families in the greatest need including Flying Start, Families First and Intensive Family Support Services.	75	All three preventative services are fully operational and reducing demand for longer term higher level statutory interventions. Finish date: 2016/17
SS03/A008 (CP/HSCW9) Work with the Cardiff and Vale University Health Board to provide an increased range of community based health and social care services, including the development of Barry Hospital as a centre of excellence.	75	A number of services have been developed at Barry Hospital including the reception area. Further capital funding has been made available by the UHB and through the RCF to facilitate co-location of services. Finish date 2014/15
SS03/A010 Develop a wide range of options for older people requiring support and prepare a feasibility study for the provision of an older people's village. (2013/14)	40	Accommodation with care strategy is under development. The major project regarding the use of the former Bryneithin care home site is underway and on track with the intention of marketing the site for accommodation with care for older people. The first Extra Care Development in Barry is due for completion in the summer of 2014 and will provide a new service option for older people in the Vale of Glamorgan. Finish date 2016/17
SS03/A011 (CP/HSCW5) Increase the take up of assistive technologies such as Telecare that enable older people and their carers to manage the impacts and risks associated with chronic ill health	50	There has been an increase in the number of bespoke Telecare packages being used enabling more service users to remain independent. A proposal to restructure the service is in progress and the service has moved to Adult Services. Finish date 2015/16
SS03/A013 (IO/03) Invest in pre-approval training and additional assessment capacity.	75	Three Skills to Foster courses have already been run this year with a further one planned in February. Three mainstream carers have been assessed and approved this financial year and the service is currently assessing 8 new carers, 5 of which should be approved by March 2013.

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SS03/M008aQ The number of Home Care packages provided for less than 5 hours per week.	230.00				No target set for 2013/14. This is a new indicator - establish baseline.
SS03/M008bQ The number of Home Care packages provided for 5-9 hours per week.	271.00				No target set for 2013/14. This is a new indicator - establish baseline.
SS03/M008cQ The number of Home Care packages provided for 10-19 hours per week.	383.00				No target set for 2013/14. This is a new indicator - establish baseline.
SS03/M008dQ The number of Home Care packages provided for more than 20 hours per week.	189.00				No target set for 2013/14. This is a new indicator - establish baseline.
SS03/M008eQ The total number of Home Care packages provided.	3272.00				Total HC packages provided as at 31st December. Since 1st April there were 3272 new/ amended HC packages

**Objective 4: To ensure that people's views on gaps in services and effectiveness of support result in changes and help inform how services are monitored and developed.**

### Actions

Completed: 0% ; On Track: 100% ; Slipped: 0% ; Not Started: 0%

### On Track Actions

Title	% Complete	Comment
SS04/A015 Examine how best to secure an increased range of service providers, especially those who use a social entrepreneurial approach which engages communities and groups of service users or carers in design and delivery of services...	50	A report has been prepared outlining the options for future service delivery models in social care. Consultation processes have been initiated for the Learning Disabilities Commissioning Strategy. Finish date 2016/17

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SS04/M009Q Percentage of complainants dealt with within statutory timescales	87.10	80.00	↑	80.70	



### Outcome 3: The Vale of Glamorgan Council achieves good outcomes for service users and carers through its arrangements to protect vulnerable people and success in promoting independence and social inclusion.

Performance against actions and performance indicators:

We are 95% on track towards completing the actions against this outcome. Of 19 actions, 2 have been completed, 16 are on track and 1 has slipped.

Of the 24 performance indicators under the outcome, 12 have met or exceeded target, 5 are within 10% of the target and 3 have missed target by more than 10%. 1 does not have a RAG status as it is an Education related PI which is measured against target at the end of the year. DATA NOT UPDATED FOR 3 INDICATORS. Details are available under each objective in the next section of the report.

### Objective 5: To ensure that people are helped to achieve the best possible outcome for them, maximising their independence, developing their abilities and overcoming barriers to social inclusion.

#### Actions

Completed Q1 & Q2: 9% ; Completed Q3: 0% ; On Track: 82% ; Slipped: 9% ; Not Started: 0%

#### On Track Actions

Title	% Complete	Comment
SS05/A016 Ensure that service specifications are derived from commissioning plans and that they are clear about the practice and quality standards expected.	40	Commissioning strategies either complete or in draft form. All service agreements are reviewed in line with them. MH Partnership arrangements are ensuring that this work is completed across the UHB partnership. Finish date 2015/16
SS05/A016a With our two statutory partners, develop a service level agreement and governance arrangements for the service, which clarify accountability, management, financial and HR issues.	75	The decision making body has agreed to review its current integration arrangements to ensure arrangements for governance are in place. This is not likely to take the form of an SLA
SS05/A016c Base decisions about investing resources upon robust business appraisals covering revenue and capital proposals that demonstrate the relative worth of various options in terms of quality, costs and effectiveness	75	All actions within the budget programme are supported by costed models.
SS05/A016d Prioritise completion of actions set out in the Social Services Budget Programme	75	The budget programme is monitored on a monthly basis and reported to Scrutiny Committee.
SS05/A017 (CP/HSCW3) Work with partners to raise awareness, provide appropriate support and targeted action in line with the Tobacco Free Strategic Action Plan, the Substance Misuse Strategy and the Alcohol Strategy.	40	Work is being taken forward through the Public Health Board to support these strategies across the public sector community. Finish date 2016/17
SS05/A018 Through the integrated Community Learning Disability Service, support individuals to access a wider range of inclusive opportunities including leisure, work and training.	25	Steering group established to set strategy.. Mapping and Gap analysis completed. Finish date 2015/16
SS05/A020 Consult upon and publish a commissioning strategy for learning disabilities to inform the further development of our services.	75	Draft prepared. Consultation complete.
SS05/A021 (CP/HSCW7) Work with the Third Sector and business organisations to deliver a preventative, community approach to supporting older people to live as independently as possible, including people with dementia related illness.	75	This work was started as part of the Change Plan 2011 – 2014. The RCF has supported a tender for voluntary sector brokers as an alternative to statutory services. Further voluntary sector engagement planned for January.
SS05/A022 (CP/CYP2) Develop and promote opportunities for all children and young people including those who have a disability or who undertake a caring role to engage in play, physical and cultural activity.	75	All opportunities for integration of disabled children are explored and supported. Additional Families First funding targeted at play opportunities. Finish date: 2015/16

## Slipped Actions

Title	% Complete	Comment
SS05/A016b Finalise a S33 agreement and governance arrangements for the service, which clarify management, financial and HR issues	10	Governance arrangements have been clarified. Agreement in principle to pursue the development of a S33 from all partners, although given the Social Services Bill this is unlikely to be taken forward as new integrated governance legislation is expected.

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SCA001Q The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	6.81	4.20	⬇️	5.95	There has been significant growth in the demand for social care services. The third quarter performance shows an improvement on the previous two quarters however as this is a cumulative indicator the total figure continues to grow. If quarter 4 performance is the same as quarter 3 a year end figure of 8.25 would be expected. The reduction for quarter 3 is in part due to the recruitment to vacant posts at the integrated discharge service. A project group has reviewed the DToC figures and an action plan to respond to the pressures is now in place.
SCA002aQ The rate of older people (aged 65 or over) supported in the community per 1,000 population aged 65 or over at 31 March	46.74	50.00	⬆️	47.66	This indicator is not a useful representation of the activity within the service
SCA002bQ The rate of older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March	16.39	17.00	⬆️	16.96	7 less Residential and Nursing placements during Quarter 3
SCA003aQ The percentage of clients, in the following age groups, who are supported in the community during the year aged 18-64	89.66	90.00	⬇️	90.09	This is a cumulative indicator which increases as the year progresses
SCA003bQ The percentage of clients, in the following age groups, who are supported in the community during the year aged 65+	76.27	80.00	⬇️	78.72	This is a cumulative indicator which increases as the year progresses
SCA020Q The percentage of Adult clients who are supported in the community during the year	80.39	80.00	⬇️	78.72	This is a cumulative indicator which increases as the year progresses
SCC002Q The percentage of children looked after at 31 March who have experienced one or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the 12 months to 31 March	11.90	0.00		21.71	
SCC004Q The percentage of children looked after on 31 March who have had three or more placements during the year	6.91	7.50	⬇️		
SCC010Q The percentage of referrals that are re-referrals within 12 months	24.18	35.00	⬇️	27.82	
SCC033dQ The percentage of young people formerly looked after with whom the authority is in contact at the age of 19.	100.00	95.00	⬇️	100.00	
SCC033eQ The percentage of young people formerly looked after with whom the authority is in contact, who are known to be in suitable, non-emergency accommodation at the age of 19.	94.74	95.00	⬇️	100.00	
SCC033fQ The percentage of young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19.	42.11	50.00	⬇️	55.56	3 YP are currently pregnant, 5 YP have refused to engage despite all efforts to encourage them to do so and 3 YP have been unable to participate due to illness.

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SS05/M011Q Number of first time entrants to the Youth Justice System.	3.00	35.00	-	14.00	this is unverified data and may difer from published info

**Objective 6: To ensure that people at particular risk have their wellbeing promoted and are safeguarded from abuse and exploitation through the Council working in co-ordination with other organisations.**

### Actions

Completed Q1 & Q2: 13% ; Completed Q3: 0% ; On Track: 87% ; Slipped: 0% ; Not Started: 0%

### On Track Actions

Title	% Complete	Comment
SS06/A023 (CP/CYP9) Work with the LSCB, the Council's Safeguarding Steering Group and schools to deliver our safeguarding responsibilities, obtain the views of children and implement protocols in respect of neglect and child sexual exploitation.	75	The Council delivers its safeguarding responsibilities to children in accordance with the AWCPP. The Education Safeguarding Officer post is professionally supervised by the Principal Officer for Protection and Policy. The CSG monitors safeguarding compliance across the Council; areas of focus have included safe recruitment and safeguarding training. Consultation has commenced with young people subject of the CP process and will be reported to the LSCB. The Neglect Protocol has been reviewed and ratified by Cardiff and Vale LSCB. The Vale comply with the CSE requirements of the AWCPP and have a designated lead in place.
SS06/A025 (CP/HSCW12) Consult annually with vulnerable adults involved in the formal protection arrangements (Protection of Vulnerable Adults) and use the information to bring about improvements.	75	The outcome of the consultation process was reported to the Area Adult Protection Committee in June and was well received. This is an annual exercise. Finish date 2016/17
SS06/A026 (CP/CYP9) Survey annually the views of children involved in the child protection process and report this back to the LSCB.	50	A consultation exercise has commenced. Links have been made with CYPS to support young people taking part in this process. Finish date: 2016/17
SS06/A027 Deliver additional Protection of Vulnerable Adult investigation training as necessary to relevant staff to support robust investigation of abuse allegations.	75	Date made available and delivered to DLMs and appropriate social care staff on: Gathering Information Leading and Investigation – the Role of the DLM Conducting and Investigation
SS06/A028 (CP/HSCW11) Continue to prevent abuse by professionals working in social care settings and in the community by ensuring the voice of the vulnerable adult is heard and staff witnessing abuse feel empowered to report their concerns.	50	The Directorate delivers its POVA responsibilities in accordance with the All Wales Procedures. Agencies are aware of the need to ensure the voice of the VA is central to the process. Where staff raise concerns these are taken seriously and appropriate steps taken. Where concerns do not meet the threshold for POVA, information is shared by the Central DLM with the Contracting Team. The PRACC sub group is used effectively to share information regarding the quality of commissioned care. Finish date: 2014/15
SS06/A029 (CP/HSCW13) Increase compliance with Deprivation of Liberty Safeguards by providers of social care services.	50	In line with recommendations from CSIW/HIW report the MCA/DOLS service is developing an integrated training plan to raise awareness across the sector. DOLS report considered by steering group and AAPC. Finish date 2014/15
SS06/A030 Continue to offer MCA/DoLS awareness surgeries in care homes and possibly expand this service to the hospitals	75	Every care home contacted and training requirements requested. Approximately 300 staff from care homes now trained.

## Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SCA019Q The percentage of adult protection referrals completed where the risk has been managed.	100.00	95.00	-	95.83	
SCC007aQ The percentage of referrals during the year that were allocated to a social worker for initial assessment	53.88	25.00	↑	28.87	
SCC007bQ The percentage of referrals during the year that were allocated to someone other than a social worker for initial assessment	11.30	15.00	-		
SCC007cQ The percentage of referrals during the year that did not proceed to allocation for initial assessment	82.65	70.00	↑	59.19	
SCC011aQ The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by the Social Worker	71.57	65.00	-	68.58	
SCC011bQ The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen alone by the Social Worker	28.63	30.00	↓	24.31	It is not always appropriate for a child to be seen alone at an Initial Assessment. Reasons for this can include age and disability or where safeguarding concerns dictate a strategy meeting is required as a matter of urgency. The target should be seen as a guide
SCC014Q The percentage of initial child protection conferences due in the year which were held within 15 working days of the strategy discussion	98.63	100.00	↑	100.00	CPC held one day late due to availability of chairperson
SCC015Q The percentage of initial core group meetings due in the year which were held within 10 working days of the initial child protection conference	92.98	90.00	↓	97.70	
SCC021Q The percentage of looked after children reviews carried out within statutory timescales during the year	96.89	95.00	↑	95.92	
SCC025Q The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations	95.29	95.00	↓	95.22	
SCC040Q The percentage of placements started during the year where the child is registered with a provider of general medical services within 10 working days of the start of the placement	93.46	90.00	↓	97.93	

## **Outcome 4: Performance of Social Services is actively managed and people accessing services in the Vale of Glamorgan are supported by sufficient staff, who have appropriate qualifications, training experience and skills.**

Performance against actions and performance indicators:

We are 100% on track towards completing the actions against this outcome. Of 7 actions, 1 is completed and 6 are on track to be completed within timescale.

The 1 performance indicator under the outcome has met or exceeded target for quarter 2. Details are available under each objective in the next section of the report.

## **Objective 7: To utilise performance management to improve customer outcome and the services provided.**

### **Actions**

Completed: 0% ; On Track: 100% ; Slipped: 0% ; Not Started: 0%

### **On Track Actions**

Title	% Complete	Comment
SS07/A031 Complete a review of performance management reporting within the Directorate.	75	A review of AS MI has been completed. Discussions with CYPS have identified additional requirements which are currently being considered by the PM Team. The BMI MI report has been drafted and being considered by managers.
SS07/A032 Adopt and use a core set of analysis grids which provide evidence for the Director's Annual Report.	75	The Vale has adopted the new ACRF grid template developed through LA consultation with SSIA The grids were used to collate evidence, and were updated and used to develop HoS reports and the Directors report for 2012/2014. These will be reviewed to support the writing of the 2013/2014 report.

## Objective 8: To ensure that robust workforce planning arrangements are in place within the Directorate.


### Actions

Completed Q1 & Q2: 20% ; Completed Q3: 0% ; On Track: 80% ; Slipped: 0% ; Not Started: 0%

### On Track Actions

Title	% Complete	Comment
SS08/A033 Develop the staff engagement and communication strategy.	75	The service was involved in the development of the Workforce Development Plan. Heads of Service had agreed to lead some focus groups to develop the strategy.
SS08/A034 Develop a workforce planning framework for the social care sector as a whole in the Vale of Glamorgan.	75	A workforce plan for social services was developed for 2013/2014. Work is now ongoing with the wider sector to develop and social care workforce plan for the Vale of Glamorgan. The Council continues to offer a wide range of training opportunities to the social care sector across the Vale.
SS08/A036 Review social services training provision and use of grant monies	75	The training programme for 2013./2014 has been reviewed and circulated to the social care sector. Different methods of delivering training are being developed to ensure that staff are able to access quality training at times that best suit them. The service will be collocated with corporate training services as part of the Space Project enabling improved joint working to take place.
SS08/A037 Develop a training evaluation tool.	75	Development initiated

### Quarterly Performance Indicators

Title	Actual	Quarterly Target	Status	Actual 2012/13	Comment
SS08/M012Q Percentage of places on appropriate training courses made available to non-council employees.	27.52	25.00		25.55	

## Outcome 5: Social Services in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals.

Performance against actions and performance indicators:

We are 82% on track towards completing the actions against this outcome. Of 11 actions, 9 are on track to be completed, 1 has slipped and 1 has not been started.

There are no performance indicators collected under this outcome.

## Objective 9: To ensure that services are designed to reflect community need, that people who may use or need services and staff help to identify priorities and that clear models of services are identified in commissioning strategies and annual commissioning plans.

### Actions

Completed: 0% ; On Track: 86% ; Slipped: 14% ; Not Started: 0%

### On Track Actions

Title	% Complete	Comment
SS09/A039a Produce commissioning plans that meet national standards and: i. include comprehensive population, service, market, and resource analysis; ii. clearly specify the outcomes to be achieved for service user and what service options can best provide these outcomes...	75	OP commissioning plan completed. Consultation with LD service users has recently concluded on the basis of the LD commissioning plan. MH services in the UHB are leading on the development of a commissioning plan for this area and intend to develop this for April 2014. A "Together for MH" Plan has been produced. Two commissioning strategies have been approved – Older People and Children and Young People. Others are currently being developed
SS09/A039b Put in place systems to secure information about costs and performance from service providers. Develop commissioning plans consultation with service providers in the statutory, private and third sectors.	75	Letters of understanding are being developed with funded providers alongside requirement for quarterly RBA monitoring and financial analysis. Key data also being received from Care Home and Domiciliary sectors. Extensive consultation has occurred in developing commissioning strategies in older peoples services, learning disabilities and children's services to date
SS09/A039c Ensure that service specifications are derived from commissioning plans and that they are clear about the practice and quality standards expected	75	Where services have been commissioned or are due to be commissioned in the near future, the relevant service specifications are written to ensure that our needs are met, but also link to relevant strategies/priorities that have been identified.
SS09/A039d Monitor and evaluate commissioning plans, procurement plans and the services they secure	50	The Directorate gathers considerable intelligence regarding the impact of contracting and commissioning decisions in areas such as service quality and costs. The impact of commissioning strategies will be evaluated over the coming years. Finish date: Ongoing
SS09/A040 Develop a commissioning strategy for Mental Health Services in partnership with Cardiff Council and Cardiff and the Vale UHB.	75	Initial consultation with stakeholders completed to develop the vision which has been approved by the programme board. Together for MH action plan in place and planned Jan/Feb consultation for MH commissioning strategy.

## On Track Actions

Title	% Complete	Comment
SS09/A038 Ensure the Council's Financial Regulations and Contract Standing Orders allow social care commissioners to be efficient and effective in the social care market, especially when tendering or retendering for services.	75	The Head of Financial Services has been tasked with the review. These are now being progressed with an emphasis on the contents of the WLGA model CPRs (Contract Procedure Rules) and the new Welsh Constitution model. Plans for the revisions to be incorporated into the Councils Constitution in 2014.

## Slipped Actions

Title	% Complete	Comment
SS09/A039 Review all existing spot purchase agreements, using quantitative and qualitative analysis and consultation with existing providers, successfully identifying where changes to spot purchase agreements could be achieved.	50	Analysis of existing internal and block purchased services is ongoing to evidence existing demand and the need to reconsider existing arrangements. Talks have been held with a number of providers regarding movements to block rather than spot arrangements. Not currently cost beneficial for the authority to do so.

**Objective 10: To have in place clear planning and programme management processes which help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers within defined, proportionate budgets directed to meeting service priorities.**

### Actions

Completed: 0% ; On Track: 75% ; Slipped: 0% ; Not Started: 25%

## On Track Actions

Title	% Complete	Comment
SS10/A041 Create an adult service remodelling unit with Cardiff Council.	50	Work is continuing with Cardiff Council and the UHB to progress the four workstreams identified as part of the Year 1 schedule of work. Finish date: 2015/16
SS10/A042 Consider the options for the delivery of long term care, to address the current shortfall in independent sector provision, particularly in relation to people with dementia related illnesses.	50	Work is continuing with the UHB and Cardiff Local Authority. This is now a key work stream for the integrated working framework. A Market Position Statement is being drawn up with Cardiff LA and the UHB in relation to older peoples services. Finish date 2014/15.
SS10/A044 Through the South East Wales Improvement Collaborative, plan how to develop a regional adoption service.	75	Regional Management Board established. Project Brief developed and informing development of an Implementation Plan. Project Manager identified. Sessions facilitated with managers and staff to inform suitable models of delivery.

## Not Started Actions

Title	% Complete	Comment
SS10/A043 Implement a brokerage hub for care home placements with Cardiff and Vale UHB and Cardiff Council.	0	This is now a key work stream for the integrated working framework and is to be progressed during the final quarter of 2013/14.