

SCRUTINY COMMITTEE (SOCIAL CARE AND HEALTH)

Minutes of a meeting held on 13th July, 2015.

Present: Councillor R.L. Traherne (Chairman); Councillors Ms. R. Birch, R.J. Bertin, H.C. Hamilton, Dr. I.J. Johnson, J.W. Thomas, S.T. Wiliam and Mrs. M.R. Wilkinson.

Also present: Councillors S.C. Egan and N. Moore.

223 APOLOGIES FOR ABSENCE -

These were received from Councillor Mrs. M.E.J. Birch (Vice-Chairman) and Councillor E. Hacker.

224 MINUTES -

RECOMMENDED - T H A T the minutes of the meeting held on 15th June, 2015 be approved as a correct record.

225 DECLARATIONS OF INTEREST -

No declarations were received.

226 REQUEST FOR CONSIDERATION - COMMISSIONING DOMICILIARY CARE SERVICES FROM THE INDEPENDENT SECTION (COUNCILLOR R.J. BERTIN) -

The Chairman, in presenting this item, commented that he was sure that all Members of the Scrutiny Committee had seen the 'Week In Week Out' television programme, which highlighted allegations of poor practice by a provider. The successful provision of high quality domiciliary care to frail and vulnerable people in the Vale of Glamorgan was a very important matter. If there was a problem with any provider, however limited it may be, it was right and proper that the Scrutiny Committee should be seeking reassurances from the Directorate.

He went on to advise Members that the investigation into this matter was not fully complete and as such he had considered that there was little point at this stage in asking the CSSIW or the provider to attend the meeting as the Scrutiny Committee would not have all the facts available. He asked Members to note that there was to be a further report to this Committee on the specifics of the 'Week In Week Out' allegations and both the CSSIW and the provider would be asked to attend a future Committee meeting in order to answer any questions.

The Chairman also stated that whilst he felt that the Committee did not have all the information available in order to appropriately consider the specifics of the 'Week In Week Out' allegations, he did feel that it was important to consider some aspects of this matter at today's meeting. It should be noted that the provider identified in the

programme was one of 37 independent providers of domiciliary care in the Vale. Most importantly, the provision of high quality domiciliary care in the Vale was not ultimately the responsibility of the CSSIW or any one independent provider. Accountability for ensuring the quality of care provided lay directly with the Director of Social Services and the Cabinet.

Councillor Bertin then thanked the Chairman for allowing this item to be discussed at the Committee meeting and stated that it was important for the Committee to look at this issue and to allay some of the real concerns that Members may have. He recognised that there were legal constraints in respect of tonight's debate but he wanted reassurance from officers that the service was responding appropriately. He also requested a future report to be presented before the Committee once the investigation was concluded.

In response to Councillor Bertin's request, the Head of Business Management and Innovation presented the report which began by highlighting that the commissioning of social care services involved deciding what services were required in order to effectively respond to the needs of service users and carers both now and in the future. This would include making decisions about the capacity, location, cost and quality of services, who would deliver them and how.

Commissioning within the Vale was underpinned by the core values of social care - promoting independence and personal development and enabling service users to keep control of their lives. As a commissioner of services, the Council was responsible for ensuring that the mixed economy of care provision worked effectively and that services provided on behalf of the local authority met regulatory standards.

The Welsh Government had provided statutory guidance on commissioning social services, to the Commissioning Framework Guidance Good Practice which set out the responsibility of local authorities within this area of work. In November 2011 the Vale of Glamorgan Council published its Social Services' Commissioning Framework, which set out how it would ensure compliance with Welsh Government's standards when producing its commissioning strategies to individual service user groups. The Commissioning Strategy for Older People Services 2011-2018 was approved by Cabinet in November 2011.

Currently in the Vale of Glamorgan, 37 independent sector providers were providing 14,660 hours of domiciliary care to 934 service users every week. The Council would commission domiciliary care through spot contract arrangements, in contrast to the block purchase system which operated in some local authorities, which had proved problematic when large scale contracts came to an end. Individual assessments of need, combined with spot contacts and the use of brokerage, meant that every individual care package for an individual service user was bespoke. The Council retained a statutory accountability for the way in which these services were provided.

In order to provide services on behalf of the Vale of Glamorgan Council, providers must be on the Social Services Accredited Approved Provider List. This involved:

- Signing the Heads of Agreement documentation which provided a generic service specification. This document, the general terms and conditions and the individual care plan for each service user collectively formed this contract.
- Complete a questionnaire in relation to the services there would provide.
- Provide a breakdown of their costs.
- Give evidence of Public Liability Insurance to £5m.
- Give evidence of Employers Liability Insure to £10m.
- Demonstrate that they have registered with the Care and Social Services Inspectorate Wales or the Care Quality Commission, where appropriate.
- Provide references. If the provider is based in the Vale, two references were required. If the provider is out of county, the service would require the host authority to confirm that (a) they were currently contracting with the provider and (b) that they had no concerns including Protection of Vulnerable Adult Issues. If there were any current issues, the service would ask the local authority to provide details and the stage at which the issues were being tackled.

Once a provider had been placed on the Approved Provider List, ongoing monitoring would take place to ensure that quality standards were maintained. This would include:

- Ensuring that insurance cover was maintained on an annual basis.
- Requiring providers to undertake an annual questionnaire in relation to their business.
- Undertake arranged visits to providers.
- Make spot visits, if issues of concern were raised.

The CSSIW played a key role in the regulation of services in social care. Domiciliary care providers must be registered with the CSSIW in order to provide services. This ensured that they met minimum standards. As a regulatory body, the CSSIW would undertake inspections of all registered providers announced and unannounced, and these reports were all made public. Through the Directorate's monitoring processes, any concerns identified within the CSSIW reports were followed up with the individual providers and the Council would seek satisfactory action in respect of any recommendations or compliance issues. Since February 2013, Domiciliary Care Managers were also required to be registered with the Care Council for Wales.

Officers from the CSSIW and Social Services would meet on a quarterly basis to discuss any particularly providers in the Vale where there was cause for concern and to share information that had been gathered via the inspection and contract monitoring process. This enabled agencies to make an early response. Additionally, any issues that were raised would be shared as soon as they became apparent, to ensure a timely and appropriate response from both agencies.

Under the auspices of provider performance monitoring, a quality assurance/provider performance meeting would be held on a monthly basis. This would involve key stakeholders including contracting staff, senior managers for adult services, Protection of Vulnerable Adult Arrangements (POVA), practitioners and nurse assessors from the Cardiff and Vale University Health Board. Advocates were also invited to contribute or attend for specific issues. The purpose of these meetings was to share information between key stakeholders about providers and to make a judgement about any

intervention required. If appropriate, providers would be referred to consideration under the provider performance protocols. This protocol was reviewed and revised earlier this year. It now included a pre-escalating concerns stage where providers were invited in to discuss any low level misgivings that the service may have and to agree an action plan. This allowed for remedial action when concerns were first identified, with a purpose of avoiding escalation into full provider performance meetings.

If there were ongoing or serious issues regarding an individual social care provider, these were dealt with through an escalating concerns process. This process was applied throughout Wales. Again, all appropriate agencies would come together to share information and to take the necessary action to ensure the safety of service users. The service was involved in the discussions and an action plan agreed to address the outstanding issues. Progress against the action plan was monitored and failure to agree to and complete the required actions could have serious consequences for the provider agency.

The Committee was also advised that the Council could place an embargo on a provider, which would mean that the Council would stop any new placements or care packages being placed with that provider.

With regard to all services provided by the independent and third sectors, surveys were undertaken to ensure that staff were appropriately trained. Any training requirements identified through this process were addressed through the annual training plan. There was also a qualifications framework in place for Social Care Services which identified the appropriate qualifications for all social care staff. The Care Council for Wales had set targets for achieving these qualifications; this too was validated by the CSSIW and by the Social Services training team. Social Services would help to provide staff from all sectors with access to appropriate courses and the qualification levels within the Vale had improved markedly in recent years. In addition, service user questionnaires were used to gather information and feedback about the quality of care and services provided to vulnerable people in the Vale.

In respect to the recent 'Week In Week Out' programme which highlighted allegations of poor performance by one provider which operated in a number of Welsh local authority areas including the Vale of Glamorgan, the report outlined that the historical allegation raised in that programme was currently being investigated by the authority and once those investigations had been concluded, there would be a further report made available to the Scrutiny Committee (Social Care and Health). The authority had been working closely with the provider, including reviewing its service user packages of care, undertaking monitoring activity and also liaising with the CSSIW. The service was satisfied that the provider currently met the contractual obligations it had with the authority and the service would continue to work with the provider to ensure that service user care needs were met in an appropriate and safe way.

The Director of Social Services emphasised to Members that it was the Council's responsibility to ensure quality of care provided to service users and that this was a paramount consideration. He reiterated that the service would continue to maintain a raft of safeguarding procedures and that all providers of services were fully registered. All providers were also inspected by the CSSIW on an annual basis and all of these reports were published within the public domain. The service also had further

obligations to ensure close monitoring of complaints takes place and this was something that the service would take very seriously. He also confirmed that information regarding the Council's use of the escalating concern process would be reported to the Committee on a more regular basis.

The Director went on to reflect upon the potential impact of the new Regulation and Inspection Bill and the risks posed by underlying problems in funding good quality care. There were emerging problems in finding enough suitable providers of domiciliary care, particularly in the more rural parts of Wales. There were also concerns regarding the cap on the charges that individual services users could be asked to pay for social care services. He assured Members that, although the service had to work in a particular economic context, decisions regarding the procurement of services were not purely based upon costs. He also told Members that the service had received additional information from the BBC in order to deal with the most concerning allegations and to undertake a thorough investigation.

In answer to a Committee Member's query regarding the use of embargos on providers, the Head of Business Management and Innovation advised that over the past 18 months an embargo had been placed on three providers, one in each of the residential, nursing and domiciliary care sectors. Each embargo had lasted quite a long time, although for domiciliary care providers the time would be usually shorter. The time was used to ensure that any changes required from the provider were fully embedded.

The Committee also queried whether cost was the main aspect when tendering for new services. In response, the Director of Social Services explained that different systems operated throughout Wales. In the Vale, the Council did not operate a so-called 'Cost Calculator' whereby contracts were awarded to the cheapest bidder.

A Committee Member queried the criteria used in respect of the Approved Providers List and questioned whether this included categories such as Welsh speakers or people with a learning disability. In response, the Head of Business Management and Innovation stated that for all new providers each would be asked a set of questions, such as would they work across the whole of the Vale and for which client group they would provide a service. Members were asked to note that the brokerage team had an important part to play in this aspect as this team would have a thorough knowledge of each individual provider and would be able to understand if these providers were unable to respond in the appropriate way. The western part of the Vale was a particular pinch point in which a number of providers had highlighted the potential cost factor. An important part of the criteria was the need to ensure that all the staff were properly trained and that each provider had the necessary supervision and support mechanisms in place.

In terms of the client categories and whether there was an appropriate level of Welsh language provision, this was something that officers would need to look into further and report back to Members accordingly.

A Committee Member enquired whether more regular checks of providers should be undertaken as opposed to annual monitoring visits. In response, the Head of Business Management and Innovation commented that the service would on a monthly basis check the CSSIW website for reports on providers and would regularly meet with the

CSSIW to share soft intelligence. In addition, the CSSIW would provide the Council with prior notice should they have any concerns during the inspection process.

In response to the report, Councillor Bertin thanked officers for their reassurances and he was glad to hear that the allegation was being dealt with. He was also pleased to note that cost was not the only major factor when procuring services from the independent sector and he queried whether the service could issue a press statement stating that, should anyone have any concerns, they should inform the Director or Head of Service immediately.

He also stated that he was looking forward to the further report and in the meantime he asked whether a reminder could be sent to providers reiterating their obligations around the quality of care provided. In response to this, the Director of Social Services stated that in terms of safeguarding alerts it would be better for individuals to use the normal safeguarding procedures as he did not want to undermine the current system.

The Director confirmed that a second report would be provided to Members once the investigation had been completed and that a representative from the care provider agency and the CSSIW would be invited in order to answer any queries that the Committee may have.

RECOMMENDED -

- (1) T H A T the current arrangements for working with the domiciliary care sector in providing safe and effective care and support services be noted.
- (2) T H A T a representative from the CSSIW and the provider be invited to attend a future meeting to answer any questions and to allay any concerns that Members may have.

Reasons for recommendations

- (1) To ensure effective scrutiny of a key function undertaken by the Council.
- (2) In order to ensure that the relevant issues are considered and to seek reassurances that care providers are meeting their legal obligations.

227 REVENUE AND CAPITAL MONITORING FOR THE PERIOD 1ST APRIL, 2015 TO 31ST MAY, 2015 (DSS) -

The purpose of the report was to advise the Scrutiny Committee of the position in respect of the revenue and capital expenditure for the period 1st April to 31st May, 2015. In addition, the report also highlighted progress made in delivering the Social Services budget programme.

As it was very early in the financial year, the current forecast for Social Services was a balanced budget. A table and graph setting out the variances between the profiled budget and actual expenditure to date and the projected position at year end was attached at Appendix 1.

For Children and Young People's Services it was currently anticipated that there would be a £300,000 underspend within the budget at year end. The key issue for this service continued to be managing demand for the Joint Budget for Residential Placements for Looked After Children, however, it was forecast to outturn with a £100,000 underspend by the end of the year. Work had been ongoing to ensure that children were placed in the most appropriate and cost effective placements, however, it was noted that it was very early in the financial year and that due to the potential high costs of each placement the outturn position could fluctuate with a change in the number of children looked after. There were also potential underspends within Children's Services of £65,000 on staffing and £135,000 on alternative means of provision and accommodation costs required for the current cohort of children.

In respect of Adult Services it was currently anticipated to outturn £300,000 over budget at year end. This was due to a projected overspend on community care packages of £300,000 as a result of increased demand for services, particularly for frail older clients. Whilst every effort would be made to improve this position, it could not be guaranteed that this position would not deteriorate further by year end and this budget was extremely volatile and there was a continued increase in demand for services. The Annual Deferred Income Budget for 2015/16 had been set at £715,000 and as at 31st May, 2015 income received to date was £57,000 as an over-recovery. The year end projection for this was to break even against budget.

In terms of capital expenditure, Appendix 2 detailed financial progress on the capital programme as at 31st May, 2015. The report outlined that in respect of the Hen Goleg works, a request had been made to amalgamate the following schemes in order to enable a more co-ordinated approach to procuring a delivery of a number of related schemes at Hen Goleg. The total budget for the amalgamated scheme would be £246,000 which was broken down as follows:

- Hen Goleg Damp Proofing - £97,000
- Hen Goleg Car Park redesign - £46,000
- Hen Goleg Clock Tower £103,000.

Appendix 3 provided non-financial information on capital construction schemes.

For all schemes where it was evident that the full year's budget would not be spent during the year, relevant officers were required to provide an explanation for the shortfall which would be taken to the earliest available Cabinet meeting.

2015/2016 Budget Programme

The Directorate was currently required to find savings totalling £3.568m by the end of 2019/20. A year by year analysis of this target was shown in the following table. At present there was a surplus of £186,000 which was as a result of the foster carer recruitment project which was being developed in addition to the required savings targets. This surplus could be used to mitigate any increase in savings to be found in future years.

Year	Savings Required £000	Savings Identified £000	In Year Surplus/ (Shortfall) £000	Cumulative Surplus/ (Shortfall) £000
Savings Brought Forward		34	34	34
2015/16	1,465	1,541	76	110
2016/17	1,133	1,209	76	186
2017/18	320	320	0	186
2018/19	320	320	0	186
2019/20	330	330	0	186
TOTAL	3,568	3,754		

Appendix 4 provided an update on the individual areas of savings.

A Committee Member queried the impact on the budget as a result of pressures and demands usually seen at this time of the year. In response, the Head of Adult Services stated that it was too early to predict. He also stated that during 2014/15, the situation had been helped by a number of grant funded schemes and he assured Members that mechanisms were in place in order to identify any rise in demand.

In terms of the Reshaping Services Programme, a Committee Member queried as to what impact this was likely to have on the contract arrangements for domiciliary care. The Head of Business Management and Innovation advised Members that the service was looking at a number of ways that savings within domiciliary care could be achieved. Particular attention had been placed around the cost pressures of the service and the way that services would be commissioned. One particular option was around the use of the third sector and Members noted that third sector organisations were very interested and keen to work in partnership with the Council in a number of areas. Members were advised that other local authorities had used block contracts, which in some instances, presented an inherent difficulty and that the approach used by the Council around spot contracts was more flexible.

At this point the Director of Social Services stated that in relation to domiciliary care there were concerns in terms of possible increase in demand and also a reduction in resources. This would be in addition to increased costs such as the implementation of the National Minimum Wage / Living Wage which was likely to affect this service area more than others. He went on to advise that the service had been reluctant to change quickly how services were commissioned and that savings in this area had been delayed. However, this would need to be tackled and the Council would need to look at savings within this area in more detail.

With reference to the Flying Start projects, Members were advised that authorisation to continue the work had been required from the Welsh Government which had now been

received. Welsh Government understood that issues affecting this programme were outside the control of the Council.

Having considered the report the Committee

RECOMMENDED -

(1) T H A T the position with regard to the 2015/16 Revenue and Capital Monitoring be noted.

(2) T H A T progress made in delivering the Social Services Budget Programme be noted and be referred to Cabinet for information.

Reasons for recommendations

(1) To ensure Members are aware of the position with regard to the 2015/16 Revenue and Capital Monitoring relevant to this Scrutiny Committee.

(2) T H A T Members are aware of the progress made to date on the Social Services Budget Programme.

228 CLOSURE OF ACCOUNTS 2014/15 (DSS) -

The report informed the Scrutiny Committee of the financial position for the Directorate for the 2014/15 financial year. Included within the report was a table, as set out below which compared the amended budget and the actual expenditure for the Directorate.

Service	Amended Revenue Budget £'000	Total Provisional Actual £'000	Variance +Favourable () Adverse £'000
Year - 2014/15			
Children and Young People	14,358	14,343	+15
Adult Services	36,830	36,864	(34)
Business Mgt & Innovation	308	300	+8
COMMITTEE TOTAL	51,496	51,507	(11)

The main reasons for the variances were as follows.

Children and Young People's Services - for this service there was an overall favourable variance of £15,000. This included a favourable variance relating to the Joint Budget with Education for Children's Placement of £4,000 and an adverse variance of £24,000 for other Children's Placements.

The overall favourable variance also included an underspend of £191,000 on staffing due to vacancies within the Social work teams and the admin team budgets. There were further favourable variances of £95,000 due to additional adoption income and £160,000 for alternative means of provision and accommodation costs required for the current cohort of children. Underspends were achieved on transport of £35,000 and supplies and services of £96,000 with other favourable variances totalling £64,000. There had been transfers to reserves of £245,000 to fund future high cost residential placements and £289,000 towards the cost implications of legislative changes.

In the area of Adult Services there had been an adverse variance of £34,000 overall.

This included an adverse variance of £340,000 on Community Care packages. This figure included £147,000 for under recovery of income received under the Deferred Payment Scheme and the use of the Intermediate Care Fund Grant to fund Community Care packages via Accommodation Solutions and Reablement work stream to the value of £305,000. There was also an adverse variance of £36,000 in respect of Deprivation of Liberty Safeguard team. Favourable variances included £58,000 on staffing due to vacancies and £54,000 on transport, with £115,000 associated to supplies and services. There was an over recovery of income for customers receipts which resulted in a favourable variance of £53,000 and additional grant income of £144,000. The service had transferred £92,000 to reserves in order to contribute towards the cost implications of legislative changes.

In respect of Business Management and Innovation this service area showed an overall favourable variance of £8,000. The majority of this budget was recharged to Children's and Adult's Services. The position before recharges to services was a favourable variance of £44,000. This was made up of £80,000 on transport, £15,000 on receipt of income and £10,000 on other small variances. £24,000 had been transferred to reserves to contribute towards the cost implications of legislative changes. The favourable variances had meant that there had been a reduced internal charge to Children's and Adult's Services of £12,000.

As part of the Social Services Budget Programme, £2.031m had been utilised in year from the Social Services Provision and £168,000 had been utilised from the Social Services Plan Reserve. The Social Services Provision had now been fully utilised, with a balance on the Social Services Plan Reserve, as at 31st March, 2015, standing at £4.025m.

The overall outturn for the Directorate in relation to Capital was a variance of £274,000 as detailed in Appendix 2 to the report. The main variance in 2014/15 related to the Flying Start Programme which requested slippage of £203,000 which received Welsh Government approval.

In terms of reserves Appendix 3 detailed a schedule as shown to this Directorate at 31st March, 2015 and it had been proposed that a new fund be established with a value of £500,000 in order to cover the costs associated with the renovation of Social Services buildings in order to update facilities to meet future demands.

As part of this final Revenue Budget Proposals for 2014/15, a savings target of £713,000 had been set. Progress on the achievement of these savings had been

monitored and reported to the Committee during the year. Appendix 4 to the report confirmed the final status of the savings at the end of 2014/15 and all savings had been achieved.

As a result of the Capital underspend in 2014/15, an allocation of £269,000 had been approved via the Managing Director's Emergency Powers on 16th June, 2015, as slippage into 2015/16 for this Directorate. This would fund the completion of schemes as shown in Appendix 5.

A Committee Member sought clarification around the savings achieved and was advised that savings of £713,000 had been achieved however £2.199m of funding had been utilised from the Social Services provision/reserve. The Committee were asked to note that the Social Services Fund was created several years ago to be used to off-set budgetary pressures and savings targets had been set each year to reduce the reliance on this Fund.

A Committee Member in questioning the range of savings planned for the next 4 years, was informed that around £1.5million would be required to be saved during 2015/16, £1.2million for 2016/17 and then a further £320,000 for 2017/18 and 2018/19.

In response to a Committee Member's query regarding the exit strategy associated with the Intermediate Care Fund (ICF) and the Regional Collaborative Fund, the Director of Social Services stated that Health had now agreed to maintain and fund some ICF projects and so there were no immediate implications. He advised that the Regional Collaborative Fund still had nine months to run and that this would need to be considered in due course. Health had been given more funding for primary health care services and there would be some benefits to social care services from this allocation.

In seeking clarification around the new Social Services Buildings Reserve, the Committee was advised that the Directorate would still be able to bid for minor building improvement works through the normal process. This special reserve had been created in order for the Directorate to update and improve facilities in Council premises in order that the service could better meet future demands.

The Director of Social Services, when asked whether he was happy with the budget position, stated that the scale of challenge within Social Services was significant and that the budget was not 'protected'. He alluded to the impact following large scale legislative changes which was likely to increase demand and, along with demographic changes, would mean that the situation was not going to be easy over the coming years.

RECOMMENDED - T H A T the report and the financial measures taken and proposed be noted.

Reason for recommendation

To note the report and financial measures taken and proposed.

229 CHILDREN AND YOUNG PEOPLE'S SERVICES - ANNUAL PLACEMENT REVIEW (DSS) -

The Head of Children and Young People's Services presented the report, the purpose of which was to outline the actions taken within the Children and Young People's Services during 2014/15 with regard to placement provision for Looked After Children (LAC) and the priority actions for 2015/16.

In providing a background summary the report outlined that resource management in children's social care was inherently problematic. This was particularly the case in the area of children's placements. The number of children with complex needs was increasing and meeting these needs within appropriate placements was placing pressure upon budgets. This cohort of children related both to those with challenging and complex behaviour and to those with disabilities. The costs of placements for children with complex needs could exceed £200,000 per year.

Within Children and Young People's Services, the major issue was the continuing pressures on placements for Looked After Children. This was the Division's most volatile budget and the one that most depended on levels of service demand which were not within the Council's direct control. One of the key savings projects for the Division related to residential placements for Looked After Children, with a target of £150,000 in cashable savings each year between 2014/15 and 2016/17.

Attached at Appendix 1 was a report which officers had analysed the financial position, the demand for placements and the spending patterns.

A Committee Member queried as to how the Division would know that service users were happy within their placements. In response, the Committee were advised that all Looked After Children would have a Social Worker and regular visits would be undertaken as part of statutory requirements. In addition, regular placement meetings are held and independently chaired Looked After Children reviews take place within specified timeframes. Furthermore, regular consultation exercises would be undertaken in order to understand the views of children who are looked after.

The Committee requested an update around the new residential unit and was advised that close monitoring of the home was undertaken which included police involvement in instances of children going missing. Social Workers would also write regular reports of their visits to the home and quarterly meetings would be held with the provider. A second home in a more rural setting was being developed and the provider had applied to the CSSIW for registration. However, this could take 12 weeks and the Division was looking at September 2015 in regard to when the new unit would open. Members were also advised that the Division was still to decide whether a third unit was needed.

In terms of some of the benefits of the approach to bring placements back to the Vale, the Committee was advised that some specialist placements could cost thousands of pounds per week depending on the type and setting of the placement. There were also other cost considerations such as Social Work time in travelling to and from a long distance placement. Importantly there were also benefits for the young person, such as being able to have more contact with family and friends and with being able to attend the same school.

In response to a Member's query regarding an update of the 'When I Am Ready' scheme, the Operational Manager for Children and Young People's Services stated that the Division was preparing for a 2016 implementation start date, for which all young people placed with foster carers would be able to remain within the placement post 18 years of age. At present, the Division was planning for around 8 such young people who had expressed the wish to remain with their foster carers. This would increase to 10-15 during the next financial year.

With regard to the possible cross over between Looked After Children and remand placements, the Committee was informed that at present there were no remand placements but there were three last year. The challenge here was to produce community based plans. The Youth Offending Service had an important role in this process and it was vital to make the very best use of preventative strategies.

Having considered the report the Scrutiny Committee

RECOMMENDED -

- (1) T H A T the contents of the report be noted.
- (2) T H A T the Committee receives regular updates through existing reporting arrangements including the monthly budget programme report and six monthly reports on the Children and Young People's Services Commissioning Strategy and the Foster Carer Recruitment Strategy.
- (3) T H A T the Committee receives a further Annual Placement Review report in July 2016.
- (4) T H A T the report be referred to the Scrutiny Committee (Lifelong Learning) for information.

Reason for recommendations

(1-4) To provide Members with an opportunity to exercise oversight of this key statutory function.

230 ANNUAL REPORT OF THE DIRECTOR OF SOCIAL SERVICES 2014-15 - CHALLENGE VERSION (DSS) -

The Director of Social Services presented a copy of his Annual Report for 2014/15. He stated that for the second year in a row, through a workshop, Members of the Committee had had the opportunity to have dialogue with officers and to raise any issues and recommend changes. This was an approach that was welcomed.

The Annual Report gave 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.

The Report was written for a wide range of people, including service users and carers but also Elected Members, the Council's own staff, and a range of partners and providers who helped deliver services. It was used by the Care and Social Services Inspectorate for Wales (CSSIW) as evidence for their annual evaluation of the Council and to guide their inspection programme in the Vale of Glamorgan.

In planning how the Director would deliver the services over the next four years, a Service Plan for the period 2014 - 2019 had been put in place which provided an overview of the Directorate's improvement work. Approved by Cabinet on 13th April, 2015 this outlined what the Directorate was trying to achieve; why this was important; how it would be achieved; how we would monitor progress and what success would look like. The outcomes and priorities for 2015/16 contained in the Plan were a simple part of the Annual Report.

The Director's Annual Report was important for the people of the Vale of Glamorgan, Members of the Council and partners, both statutory and in other service sectors. It outlined the current context within which Social Services were operating and detailed proposed priorities for improvement. A Challenge Version of the Director's Report was attached at Appendix 1.

As in previous years, each Head of Service in the Directorate had also provided an Annual Report, including an assessment of how well each Division was doing in different service areas and priority objectives for improvement 2015/16. These were attached at Appendices 2, 3 and 4. They were published separately but at the same time as the Director's Report. All the reports represented the views of the Director and other managers in Social Services, they were not Council policy at this stage. Social Services end of year performance information was attached at Appendix 5.

Circulating the Challenge Version was intended to allow key stakeholders an opportunity to comment and make observations before the Report was finalised, ensuring that it accurately reflected the position of Social Services. Attached at Appendix 6 was the Challenge Feedback Form.

The Report was set within the context of:

- increasing demand for health and support
- managing the impact of the U.K. government's austerity measures on public sector finances, which meant ongoing cuts to budgets for the foreseeable future
- efforts to focus more of the Directorate's work on supporting people to remain as independent as possible.

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

The final reports would be presented to Cabinet for approval of the priority objectives and then circulated widely. They would be made available via the Council's website.

A Committee Member sought clarification around the drop in the number of visits by the Complaints Officer. In response to this, Members were advised that the main reason for this was that mediation had allowed for quicker resolution of complaints. Should members of the public not be content with the Directorate's response, at any stage they were able to pass on their complaint to the Ombudsman.

With regard to implementation of the Welsh Government's "More Than Just Words" initiative, the Head of Business Management and Innovation explained that the aim of this was to strengthen the use of the Welsh language among frontline health and social services. She stated that the provision of Welsh was improving and that a lot of resources were available in Welsh should a person choose. The service could respond in writing through Welsh and, as part of a person's assessment, the service would ask a person's preferred language. This meant that the service knew exactly who its Welsh speakers were.

In answer to a Member's question regarding the promotion of services in Welsh, the Committee was informed that all leaflets and service information was available in Welsh. Members were asked to note that the Family Information Service, for example, kept a record of all child-minders that were able to speak Welsh.

In response to a Member's query regarding an update on Dementia resources, the Head of Adult Services advised that the Vale of Glamorgan was one of the lead Authorities within Wales in this area of work. A post had been created within Rondell House in order to look at how services could be improved and the Directorate had been able to acquire funds from the European SPIDER Project which had been used to develop the service. In addition, a Cardiff and Vale Dementia Task and Finish Group had been created to look at dementia services.

A Committee Member enquired as to the progress with regard to a query raised at the previous Committee meeting, around the number of health assessments completed for Looked After Children. In response, the Committee was advised that comparative data for Cardiff Council and the Vale Council had been distributed to Members. This had highlighted that the performance of both Authorities was below the Wales average. In order to look into this issue further, the Head of Children and Young People's Services stated that she would be meeting with colleagues from the Local Health Board.

Having considered the reports the Committee

RECOMMENDED -

- (1) T H A T the content of the report be noted.
- (2) T H A T the Committee agrees with the improvement priorities for Social Services as set out in the Director's Annual Report for 2014/15 - Challenge Version.
- (3) T H A T the report be referred to Cabinet for consideration.

Reason for recommendations

(1-3) To provide Elected Members with an opportunity to contribute to the challenge process for the Director's Annual Report 2014-15.

231 IMPLEMENTATION OF THE SOCIAL SERVICES AND WELLBEING (WALES) ACT 2014 (DSS) -

The Committee received its 4th monthly update in respect of the Social Services and Wellbeing (Wales) Act 2014 and the approach being taken in regards to its implementation.

The Social Services and Wellbeing Act would come into force in April 2016 and the Committee had requested regular updates on the progress being made in readiness for implementing the requirements of the Act in the Vale of Glamorgan. Scrutiny Members last received an update on 15th June, 2015. This included information about the second tranche of public consultation regarding regulations and codes of practice for specific aspects of the Act, issued on 8th May and closing on 31st July. Details of this tranche were set out in the appropriate web links contained within the report.

Officers had attended a briefing session managed by Welsh Government on second tranche regulations and code of practice in June. This would help inform the Council's consultation response. As reported last time, the Vale of Glamorgan Social Care Development and Workforce Plan (SCDWP) had been submitted to Welsh Government. It included a summary introduction on behalf of both Cardiff Council and the Vale Council. The Director of Social Services in Cardiff was the nominating regional lead for workforce issues relating to the implementation of the Act. As required to qualify for the Welsh Government SCDWP grant, a new Cardiff and Vale of Glamorgan Regional Social Care and Workforce Development Partnership was to be established. Welsh Government required that by September, an update on the progress being made to deliver this.

Consequently a workshop was to be held on 23rd July to which social care providers from across the region were invited. The purpose was, in part, to secure agreement among partners regarding:

- the opportunities the new Partnership would offer the industry, carers and service users
- how the service would work together as a region
- how the service would work as a Partnership
- what being a member of the Partnership may mean.

In addition, a Board was to be established to oversee the operation of the Partnership. The role of the Board would be to ensure that:

- the Partnership was fit for purpose
- the Partnership was planning for the future
- there were appropriate governance and accountability arrangements in place, that ensured plans were properly devised, agreed, implemented and monitored.

Key providers had been asked to take on the role of representing sectors of the industry on this Board. The Glamorgan Voluntary Services was working in partnership with the Council to co-ordinate a workshop event intended to raise awareness of the Act and its implications. Two half day briefing sessions had been arranged on 9th July and invitations had been sent to staff within the Authority, third sector and health board. After the event, workshops would be held on the following areas of the Act:

- Community and Wellbeing Outcomes, prevention and early intervention
- Assessing and meeting the needs of individuals
- Care and support for adults and children
- Working in partnership.

These workshops would be facilitated by members of the Social Services Management Team.

The Chairman, in referring to the briefing sessions held on 9th July, queried whether the invitees were surprised by the scope of the new Act. In response, the Director of Social Services stated that most delegates welcomed the idea of having a constructive dialogue around how their needs were to be met in the future. All delegates did voice some form of concern in respect to the implications for resources available.

The Chairman went on to query whether there were any thoughts raised in respect to the new assessment framework. The Head of Adult Services stated that an important part of the Act was the requirement for local authorities to only provide a service in cases when they were the only organisation or agency that could do so. He also stated that there would be a need to move resources away from long term care and support in order to enhance resources provided to preventative and intervention services. He indicated, however, that the evidence was not fully clear as to whether this approach would be fully successful.

In querying the take up of the briefing sessions, the Committee was advised that over 100 individuals had attended the sessions which included a number of representatives from the Glamorgan Volunteer Services and also a very good representation from the Vale Council such as the Director of Learning and Skills. Members were further advised that the next workshop to be held on 21st July was aimed at looking at the second tranche of the regulations and codes of practice associated within the Act which was in relation to partnership working. For this, senior leaders from the Cardiff and Vale Councils and also the University Health Board would be in attendance along with representatives from the Voluntary Sector and the Care Council for Wales.

A Committee Member enquired whether there was any update in respect of the Action Plan submitted to Welsh Government. In response, the Committee noted that an updated Action Plan would be submitted to Welsh Government in September which would include progress around what actions had been taken and what actions remained to be completed.

RECOMMENDED -

- (1) T H A T the content of the report be noted.

(2) T H A T the Committee continue to receive regular updates about implementing the Act.

(3) T H A T the report be referred to Cabinet for information.

Reason for recommendations

(1-3) To ensure that Elected Members are kept informed about fundamental changes in the policy and legislative framework which underpins the work of Social Services.

232 SERVICE USER AND CARER CONSULTATION 2014 (DSS) -

The Head of Business Management and Innovation presented the report, the purpose of which was to provide Members with an update on consultation activity in 2014, an overview of the ongoing service user engagement activity within Social Services and information about future plans for consultation.

The Directorate's Policy and Quality Assurance Officer on an annual basis would undertake a programme of consultation from January to December, to explore the experiences and views of service users and the families across Social Services. The three year consultation plan was developed with Operational Managers and Heads of Service allowing sufficient flexibility to respond to emerging needs. The current plan was set out in Appendix 1 to the report.

During 2014, consultation was undertaken in the following areas:

- Satisfaction with support, information received and level of involvement from the protection service with vulnerable adults and their families (POVA) and families in receipt of child protection services;
- The effectiveness of the signposting and information provided by C1V for the preceding two years;
- The effectiveness of support to achieve independence in a pilot scheme of an "enhanced" Vale Community Resource Service;
- Satisfaction with the support received in Respite services ;
- Satisfaction with the referral process, matching and placement within Adult Placement Services;
- Satisfaction with the Residential Care Service (moving in, living arrangements and general management);
- Satisfaction amongst foster carers about the support surrounding the fostering processes; and
- Satisfaction with processes and support available during recruitment, training, matching, placement and review within the adoption process.

A report was produced for each consultation and an action plan would be developed with appropriate managers, to address areas identified for improvement. To ensure that learning from one area was translated into improvements across the Directorate, issues were also collated thematically.

Overview of 2014 thematic learning

Information provision

- Users of services were satisfied with the information they received before services started but, some wanted more about costs/financial implications of the service they were going to receive.
- People were generally pleased with the quantity and quality of the documentation that they received before and during service delivery and found it to be relevant.
- Officers were reported as being polite and helpful when providing information.
- Areas for development in the provision of public information include more detail about financial costs attached to services, information to improve awareness about protection services and information about the different roles of individuals within teams.

Services and Support

- Support and assistance were consistently available to meet service users' assessed needs. Many felt help was available in the right settings.
- Many service users felt involved in the planning of their care and that the services provided meet their needs.
- Issues that were problematic prior to becoming involved with services such as Youth Offending were reduced on completing the service. This was recognised by both service users and carers.

Carers/Relatives:

- In most settings, carers were satisfied with the information and the support the service user receives. Visits to care settings prior to the start of service delivery were appreciated. Carers felt that the service provides support and assistance appropriate for the service user's needs.
- Officers were highly regarded across all services consulted, particularly with respect to support provided and the help they gave to service users. However, carers/relatives reported not always feeling supported enough in terms of their own stress and ability to cope.
- Consistent completion of carers' assessments and ensuring that people understand what the assessment entails were areas for development.

Complaints and Compliments:

- Provision of complaints information remains inconsistent and respondents could not always recall whether they had been provided with a copy of the procedure.
- Where a complaint had been made, respondents felt mostly satisfied with the way in which it had been managed and resolution had been achieved in most cases. Many respondents had not felt the need to make a complaint and had provided a compliment.

Respondents reported the following was being helpful to them.

- Being involved actively throughout their contact with Social Services.
- Officers being friendly and supportive.
- Having elements of the service explained in detail.
- Having tailored interventions that help achieve specific outcomes.
- Being able to regain or maintain independence as a result of the support provided.

Respondents also identified areas for improvement that would assist them:

- For young people, greater social worker continuity and more contact.
- More contact and follow-up in some cases to ensure that the service has worked/is working well.
- Being introduced and having opportunities for mutual support with others involved with Social Services in similar situations (young people in care, parents involved in youth offending services, foster carers who were new to the service).
- More information about events taking place in care settings to keep service users informed and involved.
- More interaction between staff and service users in settings.

There was a procedure in place to ensure that actions identified in consultation activity are addressed by the specific service area. Thematic learning was shared more widely across the Social Services Directorate at the Social Services Management Team meetings and Divisional Management Team meetings.

To support children and young people to engage more in talking about and influencing what matters to them, a standing young person's reference group was being developed. There were already expressions of interest from young people which the Policy and Quality Assurance Officer was pursuing. The Head of Children and Young People's Services also advised that the main aim around this was to improve the level of dialogue with Looked After Children in order to better understand the aspirations of young people, for which this was one mechanism to be used.

The report also outlined that the Social Services Wellbeing (Wales) Act 2014 set out a whole range of new challenges for local authorities, including a requirement to undertake an increased amount of consultation across the Council and a right to independent advocacy. Work would be undertaken during 2015 to ensure that this service was able to meet the new requirements of the 2014 Act.

A Committee Member, in querying the use of social media in order to engage young people, was advised that new more modern ways of engagement was an approach adopted by the Family Information Service that used Facebook and Twitter on a regular basis. The Consultation Officer was required to look at the best ways to engage with all population groups but it was important to ensure that a whole range of approaches was adopted, which were also the most appropriate for each client group.

In referring to the low number of Protection of Vulnerable Adults service users satisfied with the level of information provided, as detailed on page 8 of the Appendix, a

Committee Members queried as to what was being done to improve this process. In response, the Head of Business Management and Innovation stated that this represented a very small number of individuals. This would not be more than five service users, some of which may not know that they were part of the POVA process and so, there were a number of delicate issues that needed to be considered.

In answer to a Committee Member's query regarding the measurement around improving the quality of life for service users the Head of Business Management and Innovation stated that the CSSIW as a regulator, would be moving away from the old tick box scenario and was now more focussed on acquiring more qualitative data which was more aligned to talking to service users in order to understand their perspectives and points of view.

Having considered the report the Committee

RECOMMENDED -

- (1) T H A T the Service User and Carer Consultation report be noted.
- (2) T H A T information about consultation activity be reported on an annual basis.

Reason for recommendations

(1&2) To ensure effective scrutiny of a key function undertaken by Social Services on behalf of the Council.

233 REPRESENTATIONS, COMPLAINTS AND COMPLIMENTS (DSS) -

In presenting the report, the Head of Business Management and Innovation advised that the purpose of the report was to advise Members of activity, performance and achievements within this area of work during 2014/15 and to advise of improvements planned in 2015/16.

As a background summary, the report outlined that handling complaints well was a crucial part of the responsibilities undertaken by the Social Services Directorate. An effective and properly managed complaints and compliments system played a key role in ensuring that users received the services to which they were entitled.

The Directorate had sought to ensure that its systems for managing complaints were robust. Effective monitoring of complaints acted as a valuable source of feedback, there were to highlight aspects of service delivery which fell below the standard the Council aimed to achieve. Handling complaints properly, effectively and responsively enhanced the Directors reputation with all its stakeholders.

A new complaints guidance from the Welsh Government - A Guide to Handling Complaints and Representations by Local Authority Social Services - came into effect on 1st August, 2014. This guidance replaced Listening and Learning which was introduced in 2006. The guidance supported implementation of the Social Services

Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014.

The new complaints procedure is a two-stage procedure as summarised below.

Stage 1 - Local resolution

- The local authority must offer to discuss (either face-to-face or over the telephone) the complaint or representation with the complainant in an attempt to resolve the matter. This discussion must take place within 10 working days of the date when the complaint was acknowledged. Where this approach leads to a mutually acceptable resolution of the matter, the local authority must write to the complainant within a further 5 working days.

Stage 2 – Formal Investigation

- A complaint or representation subject to a Formal Investigation must now be investigated by an Independent Investigator from outside the local authority. An Independent Person must also be involved where a representation is considered at the Formal Stage. The Investigating Officer will be required to produce an investigation report, which may include recommendations for the local authority to consider. This stage must be completed within 25 working days of the date the complaint is agreed with the complainant. If the local authority is not able to send a written response to the investigation report within 25 working days due to exceptional circumstances, it must write to the complainant explaining the reasons for the delay and when a response will be provided. The local authority's response must advise complainants that they have the right to complain to the Public Services Ombudsman for Wales if they remain dissatisfied following this stage of the procedure.

All complaints registered with the Complaints Team after 1st August, 2014 were handled in accordance with the new regulations and guidance.

The Annual Social Services Representations and Complaints Annual Report 2014/15 was attached at Appendix 1. As detailed in the report, the Directorate received 55 concerns or complaints in 2014/2015. The breakdown across the service was as shown below:

	Enquiries*	Complaints (Old Process)	Complaints (New Process)
Adult Services	17	6	18
Children and Young People's Services	19	11	19
Business Management and Innovation	2	1	0
Total	38	18	37

The report outlined that an enquiry was an issue of concern to the service user, dealt with by the team, without escalation to a complaint.

There had been a reduction in the number of enquiries recorded from 53 in 2013/14 to 38 in 2014/15. The Directorate had sought to target available resources to deal with these initial enquiries which as a result, resulted in only 2 of the 38 enquiries progressing to stage 1 complaint. In the same period, there was a slight increase in the number of complaints received from 54 to 55.

Increased staff awareness about their responsibilities under the Complaints Procedure and their commitment to resolving concerns at the earliest opportunity were considered to be key factors in reducing the volume of complaints. All staff had received training on the new procedure and a Complaints Officer had supported them in delivering compliance throughout the year. The Complaints Officer had continued to take on a mediation role, using a range of approaches including discussion, supplying information and listening to the concerns of the individual and ensuring that the relevant service area was notified.

To understand the volume of complaints vis-à-vis the number of service users, the figure was approximately 0.49% in Adult Services (4,880 people receiving social services or referred during the year and 24 complaints) and 1.75% in Children and Young People's Services (1,716 and 30). These figures showed a slight increase in both services compared to 2013/14. The higher proportion of complaints per service user in Children and Young People's Services reflected the fact that families were more likely to experience intervention on an involuntary basis as a consequence of safeguarding concerns.

During 2014/15, 94.44% of all complaints were responded to within appropriate timescales. This compared to the 97.22% reported in 2013/14.

The most common complaints received were as follows:

2014/2015 – Most Common Complaints Received	Adult Services	Children and Young People's Services	Business Management and Innovation
Access to records	0	2	0
Charges for Services	2	0	1
Denied a Service	1	0	0
Lack of response from a team	4	1	0
Lack of information / consultation	0	1	0
Quality / level of service	9	11	0
Complaint about staff	6	11	0
Unhappy about care provision	2	2	0
Other	0	2	0
Total	24	30	1

The figures of complaints against staff were relatively low but they also represented a typical pattern within Local Authority Social Services, partly because of the sensitive sometimes contested nature of the work in which staff would undertake but also

because of the statutory basis of Social Services was very complex. Where staff had acted inappropriately, or without sufficient sensitivity, managers remained committed to taking effective action in response and to insist on a higher standard of practice in all cases, especially in treating people with respect and dignity.

Compliments are also regarded as important information and were used to identify good practice. The Directorate received 76 compliments during 2014/15, compared to 87 in 2013/14. Details of these were included in the Annual Report. The Directorate continued to improve the way in which compliments were dealt with and achievements in 2014/15 included:

- the new complaints procedure was successfully implemented in August 2014
- training was offered to all Social Services staff on the new procedure
- there was improved adherence to timescales across the service
- the monitoring and evaluation process had been developed further to ensure that the Directorate was able to learn from complaints.

The priorities for improving the Complaints and Compliments Service during 2015/16 included:

- ensuring that all new Social Services staff were fully trained regarding the new complaints process
- collating data from complaints better, to improve services
- working effectively with the Public Services Ombudsman on complaints that were not resolved following Stage 2 of the complaints process
- supporting better complainants who had concerns regarding provider services
- implementing a policy for dealing with the extremely small number of vexatious complainants.

A Committee Member enquired whether there had been any effects from the removal in the new process of Stage 3, in which complaints could be taken to an Independent Panel. In response, the Head of Business Management and Innovation explained that under the new process it was a better system and that the percentage of complaints to Stage 3 was extremely small. Some complaints previously resolved under Stage 3 could have been dealt with at Stage 2 and it was important to be mindful that at any time a complaint could be referred to the Ombudsman.

A Committee Member in querying whether support was offered to service users when making a complaint was advised that information about complaints was provided as part of service packs and that the Directorate would always make people aware as to how to make a complaint. Members were reassured that proper support was provided to people who wanted to make a complaint.

RECOMMENDED -

- (1) T H A T the contents of the report be noted.
- (2) T H A T the Scrutiny Committee continues to receive an Annual Report in relation to complaints and compliments received by the Social Services Directorate.

Reason for recommendations

(1&2) To ensure effective scrutiny of performance in Social Services and to provide evidence of the impact upon individual service users and their carers.

234 SCRUTINY COMMITTEES' DRAFT ANNUAL REPORT - MAY 2014 TO APRIL 2015 (MD) -

The Scrutiny Support Officer presented the report the purpose of which was to allow Members to consider and approve the Scrutiny Committees' Draft 2014/15 Annual Report.

The Scrutiny Committees' Annual Report was attached at Appendix 1 and this included details of the work of all the Council's five Scrutiny Committees for 2014/15. The report represented an overview of some of the work of the Scrutiny Committees during 2014/15. Members were requested to refer specifically to the relevant sections for this Committee and to make any amendments/suggestions as appropriate.

Items of relevance to the Committee included a summary of the work of the Task and Finish Group around the assessment of Assistive Technology and its potential to improve the independent living of those experiencing dementia. The report also highlighted the presentation to the Committee regarding diabetes along with the Committee's role in scrutinising the Social Services budget programme. In addition, the report referred to the Committee's visit to the Extra Care Housing Facility within Barry and the report highlighted some of the areas to be considered for the next municipal year.

RECOMMENDED - T H A T the contents of the draft Annual Report for the period May 2014 to April 2015 be approved, subject to any further minor amendments being agreed in consultation with the Chairman and it be submitted to Full Council in September 2015.

Reason for recommendation

To approve the draft Scrutiny Committees' Annual Report and to allow it to be submitted to Full Council in September 2015.

235 1ST QUARTER SCRUTINY DECISION TRACKING OF RECOMMENDATIONS AND WORK PROGRAMME SCHEDULE 2015/16 (MD) -

The purpose of the report was to advise Members of progress in relation to this Scrutiny Committee's recommendations and to confirm the updated Work Programme schedule for the Scrutiny Committee 2015/16.

Following a recommendation by the Chairman, the Committee agreed that a report regarding Community Mental Health Teams should be presented at a future Committee meeting.

RECOMMENDED -

(1) T H A T the following recommendations be deemed completed.

9 March 2015	
Min. No. 952 – Revenue and Capital Monitoring for the Period 1st April, 2014 to 31st January, 2015 (DSS) – Recommended	
(2) That progress made in delivering the Social Services Budget Programme be noted and referred to Cabinet for information.	Cabinet, on 13 th April 2015, noted the contents of the report. (Min. No. C2727 refers)
Min. No. 956 – Assistive Technology and Dementia Care Task and Finish Group of the Scrutiny Committee (Social Care and Health) (DR) – Recommended	
(1) That the report, recommendations and the Action Plan of the Task and Finish Group as detailed at Appendix A to the report be accepted and referred to Cabinet for approval.	Cabinet, on 13 th April 2015, resolved [1] That the recommendations of the Scrutiny Committee (Social Care and Health) Task and Finish Group and the Assistive Technology and Dementia Care Action Plan attached at Appendix A to the report be approved. [2] That the Cabinet and Scrutiny Committee (Social Care and Health) receive an update on the delivery of the Action Plan within 12 months. (Min. No. C2728 refers)
(2) That, subject to Cabinet approval, the Scrutiny Committee receive an update on the delivery of the Action Plan within 12 months.	Added to work programme schedule.
13 April 2015	
Min. No. 1077 – Implementation of the Social Services and Well-Being (Wales) Act 2014 (DSS) – Recommended	
(2) That the Scrutiny Committee continues to receive monthly updates.	Added to work programme schedule.
(3) That the concerns and views of the Scrutiny Committee as outlined in the minutes be forwarded to Cabinet for consideration, in summary these covered the following points: <ul style="list-style-type: none"> • The lack of clarity and absence of necessary detail within the Act. • Concerns regarding the potential impact upon limited resources and whether this had been appropriately costed • The potential impact on the role of social workers • The need for greater training and awareness raising for social 	Cabinet, on 1 st June 2016, noted the contents of the report and confirmed that all the points raised in Recommendation (3) would be considered. (Min. No C2785 refers)

<p>workers</p> <ul style="list-style-type: none"> • The lack of clarity over eligibility criteria and the impact on the work of social workers • The impact on the Children in Need service and those on the edge of care and the support required by those families. • Concern as to whether community based services could carry out the same level of support as Local Authorities. 	
Min. No. 1078 – The Vale Family Information Service (DSS) – Recommended	
(3) That a further update be provided on an annual basis.	Added to work programme schedule.
Min. No. 1079 – Scrutiny Decision Tracking of Recommendations and Work Programme Schedule 2015/16 (DR) – Recommended	
<p>3) That the work programme schedule attached at Appendix E to the report be amended as follows and uploaded to the Council's website:</p> <ul style="list-style-type: none"> • All adult and child safeguarding arrangements and reports to be reported to Committee every six months or more often, if need be, in a consolidated report; • The annual report on themes and topics discussed at Association of Directors of Social Services (ADSS) annual conferences be presented to the September 2015 meeting instead of the November meeting • A report on the accommodation of older people to be presented in September 2015. • The Annual Report on Service User and Care Consultation should be presented in September 2015. 	Work programme schedule amended and uploaded to the Council's website on 5 th May 2015.
21 May 2015	
Min. No. 56 – Deprivation of Liberty Safeguards (REF) – Recommended	
That Cabinet be requested to contact Welsh Government in order to seek financial support in view of the additional work that had been created.	<p>Cabinet, on 29th June 2015, resolved</p> <p>(1) That the Leader and the Cabinet Member for Adult Services, contact Welsh Government in order to seek financial support in view of the additional work that had been created.</p> <p>(2) That the letter to Welsh Government be copied to the Welsh Local Government</p>

	Association. (Min. No. C2816 refers)
Min. No. 57 – Implementation of The Social Services and Well-Being (Wales) Act 2014 (DSS) – Recommended	
(2) That the Scrutiny Committee continues to receive regular updates about implementing the Act.	Added to work programme schedule.
(3) That the report be referred to Cabinet for information.	Cabinet, on 29 th June 2015, noted the contents of the report. (Min No. C2815 refers)
Min. No. 59 – The Vale of Glamorgan and Cardiff Integrated Family Support Service Annual Report 2014/15 (DSS) – Recommended	
(3) That the report be referred to Cabinet for consideration.	Cabinet, on 29 th June 2015, resolved (1) That the contents of the report be noted and any additional reports from the Integrated Family Support Service be referred to Cabinet for consideration. (2) That the work being undertaken to provide intensive support to families, especially those where children were adversely affected by parental alcohol or drug dependence, be endorsed. (Min. No. C2817 refers)
15 June 2015	
Min. No. 94 – Disabled Facilities Grants Performance Report for End of Year 2014-15 (REF) – Recommended	
(3) That the Chairman, on behalf of the Committee, writes a letter of thanks and gratitude to the staff within the Disabled Facilities Grant service for the improved performance.	Letter of thanks sent by Chairman on behalf of the Committee.
Min. No. 97 – Implementation of The Social Services and Well-Being (Wales) Act 2014 (DSS) – Recommended	
(2) That regular updates about implementing the Act be received.	Added to work programme schedule.
Min. No. 98 – Vale of Glamorgan Council Fostering Service (DSS) – Recommended	
(3) That the Chairman write to all Foster Carers in the Vale of Glamorgan on behalf of the Committee in order to offer the Committee's thanks and appreciation.	Letter of thanks sent to Foster Carers by the Chairman.
(4) That, in future, reports to the Committee be presented following Foster Care Fortnight.	Added to work programme schedule.

(2) T H A T the Work Programme schedule attached at Appendix C be amended as follows and uploaded to the Council's website:

- A report regarding Community Mental Health Services for Adults be presented at a future meeting which highlights the pressures affecting the service and the work regarding integration between health and the Local Authority.

Reasons for recommendations

- (1) To maintain effective tracking of the Committee's recommendations.
- (2) For information.