



Well-being Outcome 4

- Residents of the Vale of Glamorgan lead healthy lives and vulnerable people are protected and supported.

Well-being Objectives

- 7 – Encouraging and promoting active and healthy lifestyles.
- 8 – Safeguarding those who are vulnerable and promoting independent living.

This quarter's overall RAG status for the Well-being Outcome: **AMBER**

This report provides a summary of the performance for this well-being outcome and the associated objectives for this quarter. The report is structured as follows:

- **Section 1: Outcome Summary** - This section sets out the main developments, achievements and challenges for the quarter for the outcome as a whole.
- **Section 2: Performance Snapshot** - This section provides an overview of each Well-being Objective, describing the status of Corporate Plan actions and performance indicators.
- **Section 3: Key Achievements & Challenges** - The key achievements and challenges relating to Corporate Plan actions and performance indicators for service areas which contribute to this well-being outcome are detailed in this section.
- **Section 4: Corporate Health: Use of Resources & Impact on Improvement** - A summary of the key issues relating to the use of resources and the impact on delivering improvement during the quarter is provided in section 4.
- **Appendix 1** provides, by Well-being Objective, detailed information relating to the service plan actions which contributed to the in-scope Corporate Plan actions.
- **Appendix 2** provides, by Well-being Objective, detailed performance indicator information.
- **Appendix 3** provides an explanation of the performance terms used in the report.
- **Appendix 4** provides additional performance indicators which contribute to the Well-being Outcome but do not form part of the Corporate Plan basket of key performance indicators.

1. Outcome Summary

This report gives an overview of performance at quarter 1, April – June 2016, in achieving the outcomes outlined in the Corporate Plan 2016-20 relating to Well-being Outcome 4, 'An active and healthy Vale',

An overall RAG status of **AMBER** has been assigned to this Well-being Outcome to reflect the good progress made so far in our journey to deliver the best possible outcomes for residents and our customers within a highly challenging environment.

At this stage, 14 out of 16 Corporate Plan actions under this Outcome are on track to be delivered giving an **AMBER** performance status overall for actions.

A **RED** status has been assigned to two actions (AH5 and AH13). This is because limited progress has been made in working on a co-ordinated basis with the Cardiff and Vale Health and Well-being Board to progress a range of actions to prevent and tackle obesity and encourage healthy eating and healthier lifestyles. We are meeting with Public Health Wales to determine how the Council can further support implementation of the Obesity Strategy for Cardiff and the Vale of Glamorgan, the Vale of Glamorgan Food and Physical Activity Framework, and the Cardiff and Vale Tobacco Control Plan. Currently, a number of initiatives are being run across the Vale in relation to the above programmes but there needs to be a more overarching approach to delivering these. Limited progress has been made in developing a commissioning strategy for accommodation with care as this is dependent on work being undertaken nationally on accommodation with care options in Wales, the work of the National Commissioning Board and a Vale Population Needs Assessment which is due to be undertaken this year (in line with the requirements of the Social Services and Well-being Act).

An overall **AMBER** performance status has been attributed to the quarterly measures reported against this Outcome. The three measures given a **RED** status relate to completion of the exercise referral scheme (VS/M033), the number of children attending play schemes (VS/M017) and looked after young people with whom the authority is still in contact known to be engaged in education training or employment (SCC/033f).

Managing absence remains a priority across all service areas. Corporately, much emphasis has been placed on strengthening performance management and support arrangements in relation to attendance and this is starting to have a positive effect. At Q1, 6 out of 7 of the service areas contributing to this Well-being Outcome reported performance within target. The exception was Visible Services & Transport which reported average absence per full time equivalent of 3.16 days against a target of 2.93 days; the timing of this report means that we can already report on an improvement for Q2.

Key corporate risks that have a bearing on this Well-being Outcome relate to safeguarding, integrating health and social care, response to legislative change with specific reference to the Social Services and Well-being Act, the delivery of new ways of working (under the Reshaping Services agenda) and workforce priorities. All five have been attributed a medium rating and this level of risk remained unchanged at the last review in June 2016. Relevant service areas continue to progress the respective mitigating actions outlined in their service plans.

A number of projects under tranches 1 and 2 of the Reshaping Services programme contribute to this Well-being Outcome and these are well underway. Whilst positive progress continues to be made in relation to the Social Services budget and collaborative working programmes, an overall progress rating of **RED** was last reported to the Project Board in June 2016. The Social Services budget remains under significant strain – with a challenge caused by rising demand and costs for domiciliary care for older people in adult services.

As it is early in the financial year, the forecast for Social Services is shown as a balanced budget but the growing scale of commitments puts this in considerable jeopardy. There will be great pressure on this service in the coming year. There are issues concerning Children and Young People Services in relation to continued pressure on the children's placements budget. Work continues to ensure that children are placed in the most appropriate and cost effective placements. However, it should be noted that due to the potential high cost of each placement, the outturn position could fluctuate with a change in the number of looked after children. This budget will be closely monitored during the year. The major issue concerning Adult Services relates to the continued pressure on the Community Care Packages budget. This budget is extremely volatile and has been adversely affected by the increase in the cost of packages commissioned as a result of the introduction of the National Living Wage, the continued pressure from demographic growth and clients having increasingly complex needs, and the immediate impact of the Social Services and Wellbeing (Wales) Act 2014, which came into force in April 2016. The budget could outturn with an adverse variance of up to £1 million by year end, especially as final negotiations regarding fee levels have yet to be concluded with some service providers. Proposed increases are already above the level of inflation provided for within the budget and the service is expected to achieve further savings of £300k this year. The service will strive to manage growing demand and some of these initiatives may be funded via regional grants in the current financial year. However, the level of grant funding for the year has yet to be fully determined and it is not necessarily guaranteed on an ongoing basis.

We are investing considerably in work to introduce DEWIS Cymru, the national citizen portal for providing information and advice, and for implementing the Wales Community Care Information System (WCCIS), an electronic case management system which will integrate community health and social care data.

The challenge version of the Annual Report of the Director of Social Services has been written, including priority objectives. Following consideration by the Healthy Living and Social Care Scrutiny Committee, there will be a period of consultation with key stakeholders before submission to Cabinet.

2. Performance Snapshot

Objective 7: Encouraging and promoting active and healthy lifestyles

| Corporate Plan Actions | Service Plan | Action Status | Overall Action Status | Number of Indicators | Overall Indicator Status |
|--|--------------|---------------|-----------------------|----------------------|--------------------------|
| AH1: Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity. (2019/20) | 13 | Green | AMBER | 33 | RED ¹ |

¹ Of the 33 PIs reported against Objective 7, 18 are annual measures and 15 are quarterly measures. Of the 15 quarterly measures, data was reported for 2 out of 3 existing measures with no data provided for the remaining 12 new quarterly measures. Of the data reported both measures were attributed a Red performance status, indicating performance missed target by more than 10%.

| Corporate Plan Actions | Service Actions | Plan | Action Status | Overall Action Status | Number of Indicators | Overall Indicator Status |
|---|------------------------|-------------|----------------------|------------------------------|-----------------------------|---------------------------------|
| AH2: Work with partners to deliver the Cardiff and Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions. (2017/18) | 1 | | Green | | | |
| AH3: Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families. (2019/20) | 1 | | Green | | | |
| AH4: Provide and promote a range of early years services including information and support for parents, access to childcare and learning opportunities to recognise the benefits of early development in achieving better outcomes for young people and their families. (2019/20) | 1 | | Green | | | |
| AH5: Work with the Cardiff and Vale Health and Well-being Board to undertake a range of actions to prevent and tackle obesity and encourage healthy eating and healthier lifestyles.(2019/20) | 4 | | Red | | | |
| AH6: Achieve Green Flag status for 7 parks as a mark of excellence, demonstrating good amenities and community involvement in the parks. (2017/18) | 2 | | Green | | | |
| Overall Objective Status | AMBER | | | | | |

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

| Corporate Plan Actions | Service Plan Actions | Action Status | Overall Action Status | Number of Indicators | Overall Indicator Status |
|---|----------------------|---------------|-----------------------|----------------------|--------------------------|
| AH7: Implement new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work streams of: <ul style="list-style-type: none"> • provision of information • advice and assistance services • eligibility/assessment of need • planning and promotion of preventative services • workforce • performance measures (2016/17) | 14 | Green | AMBER | 23 | AMBER ² |

² Of the 23 PIs reported against Objective 8, 9 are annual measures and 14 are quarterly measures. Of the 15 quarterly measures, data was reported for all 7 existing measures with no data provided for the remaining 7 new quarterly measures. Of the data reported, 6 measures achieved a Green performance status with the remaining 1 a Red status. A green status indicates performance was on or above target.

| Corporate Plan Actions | Service Actions | Plan | Action Status | Overall Action Status | Number of Indicators | Overall Indicator Status |
|---|------------------------|-------------|----------------------|------------------------------|-----------------------------|---------------------------------|
| AH8: Improve access to health and social care services by improving the speed, simplicity and choice of how to access services. (2018/19) | 4 | | Green | | | |
| AH9: Work with partners to progress the integration of adult social care and community health services. (2018/19) | 1 | | Green | | | |
| AH10: Explore options for single integrated ICT systems and integrated budgets across the Cardiff and Vale region for social care. (2018/19) | 2 | | Green | | | |
| AH11: Develop and implement a corporate policy on safeguarding to provide a clear strategic direction and lines of accountability across the Council. (2016/17). | 3 | | Green | | | |
| AH12: Minimise delays in transfers of care and discharge from hospital through improved co-ordination of services and the delivery of the Accommodations Solutions Service. (2017/18) | 1 | | Green | | | |
| AH13: Review accommodation with care options for older people and develop our commissioning strategy for future years. (2016/17) | 1 | | Red | | | |
| AH14: Work with partners through the Cardiff and Vale Local Safeguarding Children's Board to develop a Child Sexual Exploitation Strategy. (2016/17) | 3 | | Green | | | |

| Corporate Plan Actions | Service Actions | Plan | Action Status | Overall Action Status | Number of Indicators | Overall Indicator Status |
|--|------------------------|-------------|----------------------|------------------------------|-----------------------------|---------------------------------|
| AH15: Improve procedures with providers of nursing, residential and domiciliary care providers to enable early intervention and prevent the escalation of incidents. (2017/18) | 1 | | Green | | | |
| AH16: Undertake an annual programme of targeted inspections at premises undertaking commercial activities that affect vulnerable people (for example care homes and food establishments in schools). (2019/20) | 4 | | Green | | | |
| Overall Objective Status | AMBER | | | | | |

3. Key achievements and challenges

We are well on track to deliver the key outcomes contributing to Well-being outcome 4, Residents of the Vale of Glamorgan lead healthy lives and vulnerable people are protected and supported. Our key achievements at quarter 1 are outline below:

- The Council has again been recognised for its commitment to providing clean, green spaces for residents and visitors to enjoy. At this year's Green Flag Awards, the Council continued its trend of increasing the number of parks to be awarded with a Green Flag Award. In this year's awards, Barry Island Promenade became the latest green space in the Vale of Glamorgan to be recognised as one of the best in the country, achieving high environmental standards. The first Green Flag Awards were awarded in 1997 and since then, the Vale of Glamorgan has received awards for seven green spaces, including the latest award. It is regarded as the benchmark against which parks and green spaces across the UK are measured. The other Green Flag locations in the Vale of Glamorgan are Penarth's Belle Vue Park, which was the Vale's first award winner, and has been held for 12 years. Barry's Victoria Park has held a Green Flag for 8 years. Romilly Park, Central Park and Alexandra Park/Windsor Gardens have each held theirs for 3 years and Knap Gardens, for the past 2 years. Green spaces managed by volunteer and community groups, were also included in the awards. The Green Flag Community Award (formally Green Pennant Award) was awarded to four new locations in the Vale of Glamorgan this year. Barry Community Garden, Birch Grove Woodlands, Old Hall Gardens and Elizabethan Orchard were the new additions. They join Upper Orchard Field, Wenvoe Community Orchard and Cwm Talwg local nature reserve, which has held its Green Flag Community award for the longest, being successfully awarded every year since 2004.
- The go-ahead to take forward the development of six new all-weather 3G sports pitches at the Colcot Sports Centre, has been approved by the Council. A total of £614,000 of funding has been made available to finance the development of the new facilities, which will include four 5-a-side pitches and two 7-a-side pitches. The development of further smaller 3G pitches, in support of the pitch development at Jenner Park by the Council last year, will increase playing opportunities for clubs and schools across the Vale. This contributes to the Council's aim to encourage increased participation of Vale residents in physical activities as part of their well-being.
- As part of its commitment to encourage increased physical activity and social interaction, the Council has continued to promote a wide selection of its community centre venues in which residents can take part in sport and exercise. For some residents, visiting a leisure centre to take part in a class is not something they feel confident or comfortable doing. 19 of the Vale Council's 22 community centres offer opportunities for sport and physical activity, with over 21 different activities on offer across the centres, ranging from badminton to table tennis, tai chi to karate, street dance to salsa and these are being actively promoted to residents.
- 100% of the schools we cater for (46 primary and 5 secondary schools) are compliant with Healthy Eating in Schools (Wales) Regulations and their compliance is monitored regularly through compliant products from our contracted suppliers, internal monitoring inspections from the catering service and an annual certificate from the Food in Schools Co-Ordinator, WLGA. In addition 100% of

the secondary schools we cater for are compliant with the food based standards contained within the Healthy Eating in Schools (Wales) Regulations and these standards are also monitored. The Vale has 46 primary schools and 8 secondary schools.

- Safer Recruitment continues to be actively promoted within all service areas and monitored on an ongoing basis. All schools within the Vale of Glamorgan Council have adopted the policy. For appointments within the scope of policy, compliance by schools has increased from 40% in April 2015 to 90% currently. In a number of cases, non-compliance is the result of a signed risk assessment not being submitted before employment starts and this is raised with relevant service areas via the Human Resources audit. 100% compliance has consistently been achieved for corporate services. Training continues to be provided in line with the policy. The situation in schools is an improving picture and we are well on the way to achieving full compliance.
- The uptake of Telecare services by Vale residents continues to increase, contributing to the Council's commitment to promoting independent living. The increase has enabled more people to remain within their own homes safely and with a better quality of life. At Q1, the number of new Telecare users has increased by 84 and we are on track to achieve our target of 308 new users at end of year.
- As part of the National Adoption Service, the Vale, Valleys and Cardiff Regional Adoptive Collaborative Model went live on 1st June 2015 with staff from the four Local Authorities (including the Vale) now co-located in Pontypridd. Services are provided by 3 co-located specialist teams, contributing to improved levels of service for users and the delivery of a more efficient and resilient service. The service also contributes to our goal of managing the numbers of children looked after by the Vale.
- Following approval of our Day Opportunities Strategy, we are reviewing the current day care arrangements for individual service users. As a result, individual care arrangements are being adjusted to facilitate work, training and leisure activities as part of universal services wherever appropriate to do so. In addition, work has continued to increase the types of opportunities offered to service users and their carers at times of the day and week where respite is most needed.
- Much work has gone into improving the delayed cares of transfer for over 75s, due to social care reasons. At Q1, a rate of 0.78 was reported which equates to 9 delays of care due to social care reasons out of a population of 11,480. This represents a significant improvement on the same quarter last year where the rate was 1.48. We are working towards a challenging end of year accumulative target of 3.2 and collaborating closely with the Cardiff and Vale Health Board to deliver a 'Home First' Plan.
- Risks were appropriately managed in all (100%) adult protection referrals. This related to 21 adult protection referrals in Q1, which mirrors our performance in Q1 last year. The expected additional pressures associated with winter means that maintaining this performance will be challenging. We are working towards an end of year accumulative target of 3.2 and with the Cardiff and Vale Health Board to deliver a 'Home First' Plan. The plan includes a number of initiatives and developments which aim to reduce the length of time people stay in hospital and enable people to return to their own accommodation wherever feasible.
- Improvements continue to be made in our Disabled Facilities Grants (DFGs) processes enabling us to reduce delivery times further. 39 DFGs were completed during Q1 at average of 174 days, compared to 180 days and 40 DFGs in the same period last year (2015/16 end of year performance of 178 days). Of the 39 DFGs completed at Q1, one related to a young person and this was

delivered in 154 days compared to 185 days and the same number of DFGs in the same period last year (201 days at year end 2015/16.) 39 clients were helped to retain independence at home or remain living at home with less assistance to bathe, cook or mobilise around their homes.

- We ran a successful inaugural mini triathlon event which included Hen Goleg League of Friends and the New Horizons Day Service for adults with a physical disability. The event was fully inclusive and catered for all abilities, with 28 of the participants having a disability and 12 being wheelchair users. So far, in the region of £1500 has been raised through the event and the money will be used to purchase specialist gym equipment.
- We have made good progress in implementing key parts of the Social Services and Well-being (Wales) Act 2014 which brought in new duties for local authorities, local health boards and other public bodies from April 6th 2016. The Act is intended to put people at the heart of the new social care system by giving them an equal say in the support they receive, with an emphasis on promoting the prevention of escalating need and ensuring that the right help is available at the right time. This involves a change in practice in working in an outcomes-focused manner, and asking the key question of people who need care and support 'What matters to you?'
- New services are being developed and this includes delivery of an Information, Advice and Assistance Service. An important element in this Service is single points of access for social care services which adults, children and carers can use easily. A national resource directory has been developed that helps people to get accurate, up-to-date information at any time using the internet so that they can think about their well-being needs and find services/resources which could assist them. It is called Dewis Cymru and it now contains over 1000 resources across the Vale and Cardiff.
- The Shared Regulatory Service (across the Vale of Glamorgan, Bridgend and Cardiff) was elected to pilot a project regarding Residential Care Homes as a national Health and Safety intervention between April and July 2016. This project was identified as a priority health and safety intervention for the 2016-2017 work plan following several significant incidents in care home settings nationally in the last 5 years. The project has focused on lifting equipment safety, managing the risk of Legionella, managing the risk of scalding, the prevention of falls from a height and the management of bed rails. This project is a national Health and Safety intervention and SRS were elected to pilot the project between April and July 2016; other S.E. Wales local authorities will undertake the work soon after and the remaining Welsh local authorities would schedule this project for late in 2016/17 or towards the beginning of 2017/18. Colleagues in the Social Care teams in each partner authority have been apprised of this work. Of the 43 care homes visited, 14 Improvement Notices were served, of which 10 (71%) related to inadequate Legionella management controls. All remaining homes were informed of contraventions and recommendations by formal letter, with compliance monitored by officer revisits and duty holders producing action plans. The project included care homes operated by national companies, small companies and sole proprietors. The key points raised in this report were evident throughout all care homes visited, irrespective of the size of the organisation operating the care home or local authority. The project identified that the control of Legionella and thorough examination of lifting equipment were the two topic areas with the greatest level of non-compliance.

Our key areas of challenge are:

- Limited progress has been made in working with Public Health Wales in progressing the Cardiff and Vale Tobacco Control Action Plan, Vale of Glamorgan Food and Physical Activity Framework and in developing an Obesity Strategy for the Vale. A meeting has been scheduled in Q2 with Public Health Wales in order to determine how best the Council can support these programmes. Currently, a number of initiatives are run across the Vale in relation to the above. However, there needs to be overarching approach to delivering these to ensure success.
- We are intent upon increasing completion rates on the exercise referral scheme. 28.5% of participants completed the exercise referral scheme at Q1 compared to 97.90% in the same time period last year. The exercise referral scheme team are reviewing factors that lead to customers not completing the scheme with the aim of improving completion rates.
- There is a focus on increasing attendance at play schemes. The majority of play scheme participations accrue during the school summer holidays. No inclusive play schemes were delivered during the May 2016 holidays as there was no core funding available, with the exception of disabled children play schemes with funding secured through the Families First initiative.
- Increasing the number of young people leaving care who are engaged in education, training or employment remains a priority. Of the 29 young people with whom the Council is in contact, 13 are not in education, training or employment mainly due to illness, disability or being a young parent. Each of these young people is allocated a Young Persons Advisor (YPA) who works with them to support their increased independence; engagement in education, training or employment is a key element. Where this is not achievable at a defined point in time, efforts to support engagement continue recognising the need to match the young person's needs with the appropriate package of support.
- The Reshaping Services Social Services budget programme remains a key challenge due to rising demand (and associated cost) for domiciliary care for older people in adult services. Coupled with the more intensive assessment process required by the Social Services and Well-being Act, the service will need to remodel quickly to avoid a deterioration in response times.
- Work will need to continue throughout 2016-17 to refine the structure and content of the Information Access and Advice Service and to complete a Population Needs Assessment.
- Central to the Social Services and Well-being (Wales) Act 2014 is a fundamental change to the way that we work in relation to proportionate assessments and planning how to help meet people's needs for support and care. In summary, the Act aims to put individuals and their needs at the centre of their care, giving them a significant voice in and control over achieving the outcomes that are important to them in the light of increasing needs and diminishing budgets. This means encouraging individuals to support themselves wherever possible, with local authority care and support being focused on the most vulnerable. We and our partners in other public services especially the NHS will need to focus even more on earlier intervention; increasing preventative and well-being services within the community and helping people maintain their independence. People must be able to get the help they need before their situation becomes critical. In partnership with Public Health Wales, we are carrying out (on a regional and local basis) a Population Needs Assessment which will ascertain the extent of need for preventative services across all public services. This

assessment will be important in providing an evidence base for future developments, including investment in our parks, green spaces and leisure services as crucial facilities in promoting healthy lifestyles and contributing to well-being outcomes across the population.

- The introduction of the Social Services and Wellbeing Act requires us to strengthen our relationships with citizens, to inform future service delivery. Co-production will be a key area of work in the autumn as we endeavour to determine how best to seek the views of citizens in a meaningful and inclusive manner via a Citizens Panel and to promote the provision of services by the third sector and social enterprises.

4. Corporate Health: Use of Resources & Impacts on Improvement

Use made of our resources has an impact upon our ability to undertake the actions that will deliver our well-being objectives and outcomes. The following sets out for each of the “corporate health” perspectives, the most pertinent issues for this quarter.

| Corporate Health Perspective | Commentary |
|-------------------------------------|---|
| People | <p>The successful delivery of the outcomes outlined for this Well-being Outcome is very much dependent on the Council’s staff to deliver it and our ability to manage and respond to risks. Managing absence remains a priority across all service areas both in terms of the number of working days lost and the impact this has on our ability to deliver services as well as the financial cost of sickness to the organisation. At Q1, 6 out of 7 of the service areas contributing to this Well-being Outcome reported performance within target with the exception of Visible Services & Transport which reported average absence per full time equivalent of 3.16 days against a target of 2.93 days. However, the timing of this report allows it to be reported that the second quarter data already shows an improvement. Housing Services reported a performance of 1.08 days against a target of 2.93 days; Children and young people services 2.77 days against a target of 2.90; Performance & Development 1.04 days against a target of 1.45 days; Business Management & Innovation 2.90 against a target of 2.90; Shared Regulatory Services 1.12 against a target of 2.93, Adult Services, 2.54 against a target of 2.90.</p> <p>In addition, the commitment to deliver on our workforce development priorities through improved corporate arrangements for employee engagement and development is contributing towards broadening skills sets and ultimately building service resilience in these challenging times. To date, a number of core training modules which focus of priority workstreams have been rolled out and are being supported by local training which in turn is helping staff to meet the requirements of the Social Services and Well-being Act.</p> |
| Financial | <p>A number of projects under tranches 1 and 2 of the Reshaping Services programme contribute to this Outcome and these are well underway. The scope of the review of Visible Services has been broadened in order to enable efficient project and operational management and to recognise the complementary nature of services and now includes Parks and Grounds and Leisure services. An overall progress rating of AMBER was reported at the last Project Board meeting in July.</p> <p>Whilst positive progress continues to be made in relation to the Social Services budget and collaborative working</p> |

programmes an overall progress rating of RED was last reported to the Project Board and Cabinet in July 2016. The Social Services budget remains under significant strain – with a challenge caused by rising demand (and associated cost) for domiciliary care for older people in adult services. The National Living Wage is having a considerable impact on all the services commissioned externally by the Social Services Directorate.

The Social Services Budget programme also contains a number of projects which are contributing towards a specific Reshaping Services target for the Directorate as part of tranche two of the programme. Specific schemes have been identified to deliver the overall savings target for Reshaping Services in the Directorate for 2017/18. These schemes include work that is underway in Day Services and Respite Services. The Council has worked with Mutual Ventures and the Wales Cooperative Centre to evaluate the potential for Day Services to be provided offered by alternative forms of service delivery, such as cooperatives and staff mutuals. Business cases exploring the potential for delivering differently are under development. Work is also underway to review Meals on Wheels and an initial review of the service has been considered by the relevant Scrutiny Committee (Healthy Living & Social Care Scrutiny Committee) earlier this year.

The Social Services Directorate has an established programme to oversee the various collaborative activities underway in this area. The emphasis of the work of the Regional Partnership Board is currently on the Intermediate Care Fund (ICF) and implementation of the Social Services & Well-Being Act. These collaborative activities contribute towards this Outcome, with a particular emphasis on the management of demand and promotion of independence.

Domiciliary care is a rapidly growing service; the anticipated spend by the local authority is in excess of £13m for this financial year. On 6 April 2016, the Council awarded a 3.5% increase to the hourly fee being paid to independent providers of domiciliary care for older adults; care homes received 0.5% above existing contractual arrangements for fee uplift. This meant that all providers across the sector were offered a 3.5% increase. At the time of award, 97% of domiciliary care hours were being commissioned from the independent domiciliary care sector. Although the increase was welcomed by many organisations, some of them sought to discuss their individual financial circumstances further with the Council. The exercise concluded that, following the introduction of the National Living Wage for over 25's, on-going National Minimum Wage for under 25's and auto-enrolment to pensions, some domiciliary care providers required further support to remain contractually compliant. This has resulted in a proposal to introduce a base rate, i.e. the minimum rate that the Vale of Glamorgan Council will use to purchase an hour of domiciliary care. This will be operational from 1st October. In addition, a pilot outcome-based commissioning of domiciliary care will be started. Further increases to the National Living Wage proposed by the UK Government for April 2017 and incrementally until 2020 will compound the difficulties local authorities are experiencing in providing social care within the resources

| | |
|-----------------------|---|
| | <p>available.</p> <p>For supported living services, changes to sleep-in payments required by case law means payment of an hourly rate for sleep-in duty instead of the long-standing block payment. A request for one-to-one meetings from several domiciliary, care home and supported living service providers followed. These meetings were all held during Q1 after providers had completed a financial questionnaire. A more detailed process was undertaken with the three main providers of supported living for people with learning disability as they are subject to additional sleep-in cost pressures. A solution has been identified which will support these providers on an interim basis.</p> |
| Assets | <p>A key priority is the management of the leisure contract with legacy leisure and ensuring that the leisure centre assets are managed in an effective and sustainable way. Monitoring arrangements are in place and regular partnership meetings with legacy leisure ensure that key issues that arise are addressed in a timely manner. Negotiations are currently on going in terms of investment that is needed in changing facilities at Penarth and Barry leisure centres.</p> |
| ICT | <p>During Q1, there has been considerable work alongside our third sector partners on the development and implementation of DEWIS within the Vale of Glamorgan. Some challenges regarding access to the portal at the initial stages have been resolved. The portal is now accessible both to upload and edit information and to search services.</p> <p>We are supporting plans for implementing the Wales Community Care Information System (WCCIS) programme. A project group within the Vale of Glamorgan is due to meet in October 2016 which will seek to translate the national programme into a local context. Implementing the system will pose resource challenges but a further grant from Welsh Government is likely to be made available.</p> |
| Customer Focus | <p>The focus on the leisure centre assets, demonstrates a commitment to put the customer at the heart of service delivery, alongside the need to ensure sustainable and efficient leisure centre buildings. All the survey work undertaken and feedback received, reveal that the majority of customer concerns are in respect of the condition of changing facilities and discussions are underway to ensure appropriate capital investment to improve conditions, and in turn, customer satisfaction.</p> <p>The Social Services and Well-being Act reinforces the expectation that citizens play the central role in deciding how best to meet their care and support needs. The ethos is to give citizens more control and choice over their care and support decisions. Social Care practitioners must to plan support and care based on outcomes identified by the citizen through key questions focused on “What matters?”, that is what matters to the individual, what is important to them and what do they wish to achieve. A key change brought about by the Act is that individuals are no longer eligible. The ‘need’ itself is</p> |

one which is eligible for the provision of statutory services. Therefore, Social Services may support people with certain 'eligible' needs, but may also signpost citizens to other sources of support from their family, friends, community or third sector organisations. This is a critical change in practice for most staff. It enables us to consider peoples strengths and their skills as 'assets', reducing the risks of unnecessary dependence on statutory services.

With implementation of the Act, consultation must focus more on outcomes for service users and their families. The Social Services Quality Assurance officer is exploring how service users experiences choice, whether their needs are addressed through service provision and whether they feel they are sufficiently involved in both the assessment process and care planning. We are looking more closely at the provision of information, advice and assistance, and how this has helped citizens who have made contact with the service.

Consultation with citizens by the Social Services Directorate is undertaken in accordance with a three-year priority plan, which has recently been updated to incorporate new requirements for 2016-18. Implementing the Act means that we will be carrying out additional consultation activity to respond to requirements from the Welsh Government. Pre-determined questionnaires (developed by the Welsh Government) are to be sent to a sample of adult service users with a care and support plan and all children who are involved with social services to ascertain satisfaction levels. Currently, the priorities and themes are identified in January of each year and internally. The requirements of the Act mean that we must focus on service specific questions, rather than the general themes that the questionnaires for the Act will address. The timing of consultation exercises will have to incorporate Welsh Government requirements. The implications of this are that consultation priorities identified by senior management for the three-year priority plan will be carried out from January to August. Care will be taken to ensure that people with whom we consult are not sent additional questionnaires, with a risk of 'consultation fatigue'. We will continue to identify key areas for specific consultation projects to support the existing process and the priorities for consultation will continue to be reviewed annually. All services that are registered and inspected (please refer to the list below) will remain a consultation priority, in addition to the qualitative measures required by the Act:

- Residential Services
- Adult Placement Service
- Respite Services
- Fostering Service
- Adoption
- Carers (support and assessment)

| | |
|-------------|---|
| | <ul style="list-style-type: none"> • Looked After Children. |
| Risk | <p>Key corporate risks that have a bearing on this Outcome relate to safeguarding, integrating health and social care, response to legislative change with specific reference to the Social Services and Well-being Act, the delivery of new ways of working (under the reshaping services agenda) and workforce priorities and all five have been attributed a medium rating. This level of risk has remained unchanged for all five risks at the last review in June 2016 and relevant service areas continue to progress the respective mitigating actions outlined in their service plans. Another risk relates to the management of the Leisure centre contract and this is referred to above.</p> <p>The Council has been able to access the Intermediate Care Fund (ICF) for the past three years with successful outcomes in supporting our work to remodel patterns of services, to make them more responsive to the needs of citizens. Currently, the ICF budget is allocated to the NHS, although it is the Regional Partnership Board which determines how the fund will be allocated. The priority areas include services for older people (including dementia), learning disabilities, children and young adults with complex needs. There is a risk that the focus will be more on resolving issues within acute hospitals than providing funds for developing community-based health and social care services which provide more sustainable solutions. There is a need to ensure that additional investment is available for the preventative services required by the Act and promoting the use of social enterprises and third sector provision.</p> |

APPENDICES

Appendix 1 – Detailed Corporate Plan Actions Information

Objective 7: Encouraging and promoting active and healthy lifestyles.

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------------|------------|------------|---|
| AH1 | | | | |
| VS/A034: Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity. | 31/03/2017 | 25% | Green | Levels of physical activity continue to be strong with an increase of 8% recorded in the most recent Sport Wales school Sports Survey that measures the activity levels of Children and Young People. In the Vale of Glamorgan more partnerships are continuing to be developed to increase participation opportunities. These have included new links with Welsh Cycling, Welsh Badminton and the Vale of Glamorgan mini Football league. |
| VS/A035: Seek s106 and other funding to deliver improved walking and cycling access to parks and other leisure facilities. | 31/03/2017 | 25% | Green | Parks - Regular meetings are occurring with the Section 106 team to ensure opportunities for funding are fully explored, ultimately ensuring that any provision is in accordance with schemes listed in the Local Transport Plan and the Local Development Plan. A popular addition to Victoria Park has been the installation of drinking fountains funded via an s106 contribution. New play areas have also been completed at key locations in Barry with plans advanced to completely refurbish more play areas including the cliff top in Penarth. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------|------------|------------|--|
| VS/A036: Work with Sustrans and other partners and the Cardiff and Vale Health Board to deliver transport education and training to schools. | 31/03/2017 | 25% | Green | This programme is ongoing annually. We continue to work with partners to maximise opportunities to provide the most up to date education, training and publicity for road safety to reduce the risk of accidents, particularly KSIs and to encourage active travel lifestyles to improve health and well-being. Child Pedestrian Training has been delivered to 371 pupils in this school term (244 national standard cycling training level 1, 231 level 2, 11 Pass Plus Cymru and 1 Bikesafe). Sustrans are assisting with schools under set projects to include Active Travel and training for scooters and bike maintenance etc. in partnership with this team, and funded by Vale Health Board. |
| VS/A037: Provide a School Crossing Patrol service at high risk locations to enable children to walk safely to and from school. | 31/03/2017 | 25% | Green | This is delivered term time only in accordance with adopted Policy, which prioritises high risk locations. All sites are currently being surveyed to ensure they still comply with adopted Policy. |
| VS/A38: Seek funding to improve and upgrade the changing facilities at Barry and Penarth Leisure Centres. | 31/03/2017 | 25% | Green | Discussions are on-going with Legacy leisure (the Council's partner in delivering leisure services) and both Cabinet and Council reports have been prepared regarding the up-grading of these areas. An Equality Impact Assessment has also been completed as part of the preparations. |
| VS/A039: Seek to assist Sports Clubs and other suitable organisations with potential Community Asset Transfers where there is a clear financial and community benefit for both the applicant and the Council. | 31/03/2017 | 25% | Green | Three initial expressions of interest have been received following publication of the new Community Asset Transfer Guidance (CAT) in April. The CAT working group are currently progressing these applications. |
| VS/A040: Commence the production of a Draft Leisure Strategy for the Vale of Glamorgan. | 31/03/2017 | 25% | Green | The request for quotation documentation has been completed to procure the services of external advice and expertise in assisting with the preparation of this strategy during 2016. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|--------------------------------|-------------------|-------------------|--|
| VS/A041: Increase the completion rates for customers on the exercise referral scheme (2016/17). | 31/03/2017 | 25% | Green | The exercise referral scheme team are presently reviewing factors that lead to customers not completing the scheme. |
| VS/A042: Implement the 2016/17 Local Authority Partnership Agreement (LAPA) resulting in increased physical activity opportunities. | 31/03/2017 | 25% | Green | Funding for 2016/2017 has been successfully secured. Where relevant, part of the funding has been provided to external partners to deliver projects on our behalf. There is ongoing liaison with partners involved in each of the projects. A six month progress report is due in September 2016. All project plans are being implemented. As part of the Olympics plan, the Sports Development Team have been involved in the planning of activities including sports coaching sessions within the pilot SHEP programme (School Holiday Enrichment Programme) targeting children on free school meals to ensure they receive healthy food and activity during the summer school holiday period. |
| VS/A043: Investigate further improvements to the Council's Community Centres enabling them to meet more of the needs of existing and potential users. | 31/03/2017 | 25% | Green | The Community Development Officer is currently in discussions with various Community Centre Committees about potential improvements required in various centres in order to meet more of the needs of existing and potential users. Recent improvements have been made to Barry Island Community Centre to make it more attractive and a new boiler has been installed at St. Francis Millennium Community Centre with financial assistance from the committee at this site. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------------|------------|------------|---|
| VS/A044: Seek to extend the Council's Leisure Management contract with Legacy Leisure to the benefit of both parties. | 31/03/2017 | 25% | Green | Early discussions have taken place with representatives of Legacy Leisure in relation to a contract extension. These discussions are continuing in a positive manner with a view to reporting to Cabinet before the end of this calendar year. |
| VS/A045: Work in partnership to develop all-weather 5-a-side football pitches at the Barry Sports Centre site. | 31/03/2017 | 25% | Green | A report was prepared for Cabinet meeting on 11th July 2016, which has since been approved. Work has now commenced in taking forward the development of all-weather sports pitches. This contributes to the Council's aim to increase participation of Vale residents in physical activity to improve their health and well-being. |
| VS/A046: Seek alternative management arrangements at Jenner Park that reduce costs whilst maintaining a high level of community use. | 31/03/2017 | 25% | Green | A working group is currently looking at potential options, such as the formation of a trust, which will contribute towards reducing the cost of the operation of Jenner Park, whilst maintaining the current high levels of community use |
| AH2 | | | | |
| HS/A022: Work with partners to deliver the Cardiff and Vale Substance Misuse action plan (2016/17 actions). | 31/03/2017 | 25% | Green | Prevention work continues with partners aimed at reducing substance misuse and related harm. Q1 data has identified an increase in anti-social behaviour relating to cannabis use, in open spaces and in neighbouring properties. A specific project is being developed aimed at targeting this rise and incorporates education/ prevention/ engagement and enforcement. It is anticipated that the multi-agency plan will be in place during Q2. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------------|------------|------------|---|
| AH3 | | | | |
| VS/A047: Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families. | 31/03/2017 | 25% | Green | Whilst there was a delay in identifying core internal funding to deliver play activities, funding has now been confirmed. We have been successful in securing funding through s106 Penarth Heights funding to deliver play activities over a 3 year period. This will enhance the previous s106 funding obtained for Central Park and Romilly Park areas. Funding has also been secured through Dinas Powys Community Council, Llantwit Major Town Council, Wick Community Council and Barry Town Council to deliver summer play activities including play schemes, Play Ranger sessions and play events. The funding will enable us to protect and where possible enhance play opportunities in the Vale of Glamorgan. |
| AH4 | | | | |
| CS/A004: Evaluate options available to provide a bespoke Family Information Service (FIS) database and record management system. | 31/09/2016 | 50% | Green | The Vale is involved in discussions on a national basis and informing the consultation process. An invitation has been received from the Wales Local Government data Unit (WLGDU) in relation to a project to develop a FIS Wales Standalone Database Platform (SDP). For this pre-Phase 1 stage, they are seeking expressions of interests (EOIs) from individual FIS who wish to: explore the possibility of a unique SDP for FIS in Wales being developed; and take part in discussions with the Wales Local Government Data Unit (WLGDU). The submission of an EOI would not mean a formal commitment to the project nor result in any financial commitment at this stage. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------------|------------|------------|--|
| AH5 | | | | |
| BM/A001: Develop an Obesity Strategy for Cardiff and the Vale of Glamorgan. | 31/03/2017 | 0% | Red | This work will involve supporting Public Health Wales to implement its strategy. We will arrange to meet to determine how we can support this further during quarter 2. |
| BM/A002: Implement the Vale of Glamorgan Food and Physical Activity Framework. | 31/03/2017 | 0% | Red | This work will involve supporting Public Health Wales to implement this Framework. We will arrange to meet to determine how we can support this during quarter 2. |
| BM/A003: Monitor compliance with the Healthy Eating in Schools (Wales) Regulations. | 31/03/2017 | 100% | Green | Of the 46 primary and 8 secondary schools in the Vale, we cater for 46 primaries and 5 secondary schools. Of those that we cater for, 100% of the primary schools are compliant with Healthy Eating in schools (Wales) Regulations and their compliance is monitored regularly through compliant products from our contracted suppliers, internal monitoring inspections from the catering service and an annual certificate from the Food in Schools Co-Ordinator, WLGA. 100% of the secondary schools are compliant with the food based standards contained within the Healthy Eating in Schools (Wales) Regulations. These standards are also monitored as above. |
| BM/A004: Increase activity in relation to Cardiff and Vale Tobacco Control Action Plan. | 31/03/2017 | 0% | Red | Given this is a new responsibility for the Social Services Directorate we are due to meet with Public Health Wales to determine how we can best support this programme. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------------|------------|------------|--|
| AH6 | | | | |
| VS/A048: Maintain the current 6 Green Flags at key urban parks throughout the Vale of Glamorgan. | 31/03/2017 | 100% | Green | 6 Green Flags have been retained for 2016/17 in line with the Council's commitment to maintain high quality urban parks in the Vale of Glamorgan. This will be recognised as part of an Award Presentation on 28 July, 2016. |
| VS/A049: Seek a 7th Green Flag for Parks in the Vale of Glamorgan at Barry Island Promenade Gardens. | 31/03/2017 | 100% | Green | A 7th green flag has been awarded for Barry Island, further emphasising the Council's commitment to improve the quality of its urban parks. A celebration and presentation of the Green Flag Award will take place on 28 July, 2016. |

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

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------------|------------|------------|--|
| AH7 | | | | |
| CS/A006: Implement Dewis Cymru (the national and local resource directory). | 31/09/2017 | 50% | Green | The DEWIS project plan for Q1 has been completed and Q2 is in progress, ensuring improved information about social care and preventative services is available to residents. To date, approximately 643 preventative service resources have been added for the Vale. |
| CS/A007: Further develop the Information, Advice and Assistance (IAA) Service. | 31/12/2016 | 25% | Green | Work in progress. Phase one is addressing the role of the Family Information Service and the Families First Advice Line. Emphasis is on ensuring that the right information and support is provided to citizens in a timely manner. |
| BM/A005: Further develop relationships with our partners to implement alternative service delivery models that support the needs of vulnerable adults and children. | 31/12/2016 | 25% | Green | <p>This work stream will be supported by the Preventative Services Task and finish Group established as a consequence of the Social Services Well-being (Wales) Act (SSWBA). It has recently been decided to retain this group and a meeting is planned for October 2016 to determine priorities going forward for the next six months. This will be monitored through the regional Steering Group and Regional Partnership Board.</p> <p>This group will identify gaps in service provision and work together to increase number of social enterprises or similar to seek to meet this gap. This work will take account of the findings of the Population Needs Assessment in identifying gaps and provide solutions through alternative delivery models.</p> |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------|------------|------------|---|
| BM/A006: Ensure that, through completion of the population needs assessment, we identify gaps in services and seek ways to address these through co-production, including regard for the duty to promote social enterprises. | 31/12/2016 | 25% | Green | The Social Services Directorate is supporting the completion of the Population Needs Assessment as required. The solutions will be reflective of the measures articulated under BM/A005 which will be managed through the Preventative Services Task and Finish Group. |
| BM/A007: Work with staff to identify ways of ensuring successful succession planning and up skilling of the social care sector to meet the demands of the Social Services Well-being (Wales) Act (SSWBA). | 31/03/2017 | 25% | Green | <p>Personal Development and Reviews (PDRS) were completed for the Directorate in the last quarter of 2015/16. This information has informed the Social Care Workforce Development Programme (SCWDP) bid to Welsh Government and implementation is underway. The SCWDP grant is based on this parameter and is monitored through a Regional Workforce group on a quarterly basis and led by the Director of Social Services (Cardiff).</p> <p>In addition, service reviews are planned in order to reflect the future working practices as a consequence of the implementation of the Act.</p> |
| BM/A008: Through the funding opportunities afforded through the Intermediate Care fund, work with partners to develop preventative services that promote independent living. | 31/03/2017 | 25% | Green | No opportunities were identified for funding within previous submission. We are currently looking at alternative funding options. |
| BM/A009: Ensuring staff and potential referrers are aware of the requirements under the statutory guidance relating to their duty to report safeguarding concerns. | 31/03/2017 | 50% | Green | Staff have attended training regarding the requirements following implementation of the Act. Through the Corporate Safeguarding Group there has been work completed on a Corporate Safeguarding Policy with a launch and information presented on StaffNet and posters/guidance also drafted. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------|------------|------------|--|
| AS/A001: Develop the DEWIS Cymru information portal to ensure it has information relating to preventative services for adults. | 31/03/2017 | 50% | Green | DEWIS project plan for Q1 was completed and Q2 work is in progress, ensuring improved information about social care and preventative services is available to residents. To date, 643 preventative service resources have been added. |
| AS/A002: Review and amend processes at the Customer Contact Centre to support the provision of advice and assistance. | 31/03/2017 | 50% | Green | Processes have been amended. The carers process is to be finalised. This work will ensure that processes used at the customer contact centre are compliant with the Act and enable advice and access to community led alternatives. |
| AS/A003: Implement new assessment processes and IT infrastructure to ensure compliance with the Social Services Well-being Act (SSWBA). | 31/03/2017 | 50% | Green | Processes have been amended. Carers process is to be finalised. This work will ensure that processes used at the customer contact centre are compliant with the Act and enable advice and access to community led alternatives. |
| AS/A004: Ensure sufficient numbers of staff (in Adult Services) are appropriately trained in order to deliver the Act. | 31/03/2017 | 25% | Green | Staff in Adult Services have received training in the 4 national modules. Further training planned throughout the year, ensuring staff have sufficient expertise to complete Act compliant assessment and care management. |
| CS/A005: Continue to promote training for staff (in Children and Young Peoples Services) in-line with legislative changes such as Social Services and Well-being Act. | 31/09/2017 | 75% | Green | The 2016-2017 Children's Services Training Calendar is complete and includes a variety of courses which support the implementation of the Social Services and Wellbeing (Wales) Act 2014. The training department will continue to provide and promote ongoing training of staff including the provision of a best practice programme to further support the integration of the Act into practice. Training Officers are committed to providing a programme which meets the changing needs of the various divisions. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------------|------------|------------|---|
| CS/A008: Implement a framework for the assessment of eligibility for care and support in compliance with the Social Services and Well-being Act (2014). | 30/06/2016 | 100% | Green | The framework is operational and will ensure the right information and right support is provided to citizens at the right time and resources are allocated according to eligibility. |
| CS/A009: Implement the 'When I Am Ready' strategy. | 31/06/2016 | 90% | Amber | The strategy has been drafted and is awaiting ratification, which is expected to take place in September/October. This has not impacted negatively on the progression of 'When I'm Ready' arrangements for young people where this is deemed appropriate and these arrangements have been put in place to improve stability for care leavers. |
| AH8 | | | | |
| PD/A005: Develop voice recognition telephony to improve self-service options and ensure that the customer gets through to the person best placed to deal with their enquiry as quickly as possible, complying with the Social Services and Well-being (Wales) Act 2014. | 31/03/2017 | 100% | Green | Access to health and social care services has been improved. Less complex well-being queries are being handled via self-service opportunities thus providing more time for call handlers to deal with the more complex enquiries, resulting in improved signposting and ultimately, better outcomes for customers. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------------|------------|------------|--|
| PD/A006: Add Adult Services self-referral form online allowing customers 24/7 access to the service. | 30/06/2016 | 100% | Green | <p>A self-assessment e-Form has been made available via the external website (and fully integrated with CRM) allowing adults to self-refer and trigger the process for assessment by a social care professional.</p> <p>To comply with the Social Services and Wellbeing (Wales) Act, customers are guided to use the DEWIS website to identify potential ways of achieving outcomes without referral for a social services assessment.</p> <p>This is contributing to improved access to services for customers and reduced telephone contact at Contact OneVale, providing greater operational efficiency.</p> |
| PD/A007: Amend our website to signpost customers to the Dewis Wales / Dewis Cymru well-being portal. | 31/03/2017 | 100% | Green | <p>Adult Social Services web pages have been amended to include information about and a link to the DEWIS website. This is helping to improve access to health, social care and 3rd sector services and ultimately will help improve outcomes for customers.</p> |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------------|------------|------------|---|
| AS/A005: Continue to develop the Customer Contact Centre as the single point of access for community health and social care services through expanding the range of services which it coordinates and enables. | 31/03/2017 | 25% | Green | <p>The customer contact centre continues to develop the potential to coordinate further services for community health and social care access. This has predominantly been funded by the Intermediate Care Fund (ICF) which has improved response times and the ability to direct patients and services users to preventative services or the correct statutory service as required.</p> <p>No additional ICF funding was agreed to support new services. However workshops have been initiated with the Cardiff Community Resource Teams (CRTs) to see if it is possible to include access to them through this same contact centre utilising existing resources.</p> |
| AH9 | | | | |
| AS/A006: Use Intermediate Care and Primary Care funding to support the development of further integrated services. | 31/03/2017 | 50% | Green | Primary care funding has supported the growth of the Integrated CRTs and developed well-being coordinators linked to GP practices. This is contributing to a larger Community Resource service with capacity to support more people to greater levels of independence. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|--|------------|------------|--|
| AH10 | | | | |
| BM/A010: Support the implementation of the Welsh Community Care Information system (WCCIS) for the Directorate. | 31/03/2017 (ongoing project to 31/3/18) | 25% | Green | <p>There has been representation at all Project Board meetings. A number of meetings with the Project Lead for implementation and local working groups are in the process of being set up.</p> <p>Currently, the project is at Project Initiation stage regionally and due to be presented to the Board for agreement in September 2016. Transition to the new system is still planned for Autumn 2017. The Vale of Glamorgan project Group will have its first meeting in October 2016 to ensure that national programme is translated for local implementation.</p> |
| BM/A011: Work with the Assistant Director for Integration to identify opportunities to pool budgets or develop joint commissioning intentions. | 31/03/2017 (ongoing project to 31/3/18) | 25% | Green | <p>Initial meetings have taken place with a view to establish a Joint Commissioning Board to monitor the progress in this area (Autumn 2016). Attendance at several key workshops to undertake this agenda has also been beneficial to understand the expectations. Officers are supporting the work of the National Commissioning Board and currently providing census information to support gaining information relating to Care Homes across Wales.</p> <p>Arrangements under Part 9 of the Social Services and Wellbeing Act stipulate the areas expected to establish pooled budgets. All partners are working to ensure that organisations are prepared for this in April 2018. The links between current operational commissioning activity is key to this programme to ensure that we maintain the current commissioning intentions with a view on the longer term.</p> |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------------|------------|------------|---|
| AH11 | | | | |
| HR/A002: Support and monitor the application of the Council's Safer Recruitment Policy. | 31/04/2016 | 100% | Green | The application of Safer Recruitment is promoted within service areas and monitored on an ongoing basis, with reports to Cabinet on a six-monthly basis. The most recent report was considered at Cabinet on 20th June 2016 to update on Corporate Safeguarding arrangements. The report identifies that all schools within the Vale of Glamorgan remit have adopted the policy. Compliance has improved from 40% in April 2015 to 80% compliance in March 2016. The average figure for this period was 76%, an increase in compliance of 13% in comparison to last years out-turn. Measures are in place to support compliance with the policy corporately and in schools. This includes on-going training in respect of safer recruitment, which covers training for school administrators, and on-going application of the escalation process corporately and for schools. |
| BM/A012: Monitor implementation of the Corporate Safeguarding policy across the Council through effective audit. | 31/03/2017 | 25% | Green | The Corporate Safeguarding policy has been ratified and implemented. Work is ongoing via the Corporate Safeguarding Group in relation to monitoring arrangements. |
| BM/A013: Develop tools to support staff to feel more confident to safeguard vulnerable people through effective procedures for referral, and also use of Adult Protection Support Orders (where relevant) in line with the Act. | 31/06/2016 | 50% | Green | All front line staff have been trained in the new responsibilities of the Act in relation to safeguarding. National training is due to commence in September 2016 in relation to the introduction and use of the Adults Protection Support Order. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------------|------------|------------|---|
| AH12 | | | | |
| AS/A007: Improve the effectiveness of the Integrated Discharge Service and ensure that it joins up with the accommodation solutions service. | 31/03/2017 | 25% | Green | <p>The Vale Integrated Discharge Service (IDS) continues to make improved links with Hospital Wards. The Accommodations Solutions Officer (ASO) is established in the team and offers rapid access to housing, adaptations, house cleaning and supported accommodation.</p> <p>The ASO has assisted with 15 discharges this quarter. This is a regional project across the Vale of Glamorgan and Cardiff. The service operates with one officer in the Vale and two in Cardiff. Therefore based on a regional target of 160 for 2016/17, the Vale's target is 54.</p> |
| AH13 | | | | |
| BM/A014: Continue to build on the work initiated in 2015/16 to develop an effective commissioning strategy for accommodation with care to meet the increasing demand of older people to remain independent for as long as practical. | 31/12/2016 | 0% | Red | This action has been carried over from 2015/16. This programme of work needs to gain momentum but with changes in officers and members there is a need to revisit this priority in light of policy changes to ensure that we are responsive to the needs of the population. This will be informed by the work done nationally on Accommodation with Care options in Wales and the work of the National Commissioning Board, in addition to our own local Population Needs Assessment. |
| AH14 | | | | |
| BM/A015: Develop and implement a child sexual exploitation strategy across all partners through effective engagement with other organisations. | 31/09/2016 | 25% | Green | The Principal Officer for Safeguarding is leading completion of the draft strategy which will be circulated for consultation. . |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|--|-------------------------|------------|------------|--|
| BM/A016: Ensure information sharing protocols are in place and utilised appropriately to ensure the safety of children exposed to risks of sexual exploitation. | 31/09/2016 | 25% | Green | Current arrangements within the Vale have been formalised to ensure effective information sharing protocols. Weekly CSE meetings are held to discuss actual cases, and a bi-monthly partnership group meeting is convened to discuss on-going strategic CSE issues. |
| BM/A017: Raise awareness of the behaviours that may indicate CSE, either as a victim or a perpetrator in order to minimise the incidence of CSE. | 31/03/2017 | 25% | Green | The Sexual Exploitation Risk Assessment Framework (SERAF) referral process has been adopted across all partners working in the Vale and in close regional working with Cardiff Council. This process ensures that all behaviours indicative of CSE are measured and highlighted consistently and effectively, and the correct timely response implemented. |
| AH15 | | | | |
| BM/A018: Support implementation of the actions contained in the Operation Jasmine Action Plan. In particular look at ways to bring policies and processes together with Cardiff Council and review the escalating concerns policy. | 31/09/2016 | 25% | Green | There are several groups developed to progress the actions outlined in response to Operation Jasmine. These are progressing as planned. Progress is reported to the Local Safeguarding Adults Board (LSAB). |
| AH16 | | | | |
| SRS/A005: Regulate the market place to ensure a fair, safe and equitable trading environment in which vulnerable groups are protected from harm. | 31/03/2017 | 25% | Green | This is achieved by completion of an inspection programme, response to complaints and surveys of the market place. The inspection programmes are all on "target" and will be the subject of reports to the Joint Committee. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------------|------------|------------|--|
| SRS/A003: Deliver food safety interventions in accordance with the food law Code of Practice. | 31/03/2017 | 15% | Red | The service currently has five officers undertaking training required by the Food Law Code of Practice before inspections can be carried out. To ensure the service stays on track, it is currently employing the services of contractors to reduce the shortfall of inspections. It is anticipated that all interventions will be complete as per the Food Law Enforcement Plan at end of year. |
| SRS/A004: Deliver health and safety interventions in accordance with the requirements of the Section 18 Health and Safety at Work Etc. Act. | 31/03/2017 | 25% | Green | All objectives for quarter 1 have been met. The Health and Safety Enforcement Team has completed 79 proactive visits in Q1, this includes: 7 High Risk (A) rated inspections. 72 proactive project visits (35 estate visits, 29 residential care home visits and 7 Gas Safe visits). The Estates Project is now complete and the Residential Care Home Project is on schedule for completion on time. We are commencing the gas safe project ahead of schedule. Pro-action visits range in duration from 30 minutes to over 5 hours (with an average of approximately 3 ½ hours). Reactive work has included response and investigation of 92 complaints (including accidents). The work undertaken to date has ensured that all the premises are operating in accordance with legal requirements and in the case of the care homes visit that the interests of vulnerable people are being met. |

| Service Plan Actions | In Year Completion Date | % Complete | RAG Status | Progress & Outcomes Description |
|---|-------------------------------|------------|------------|---|
| SRS/A006: Investigate sporadic outbreak notifications of communicable disease and undertake necessary preventative action to reduce the spread. | 31/03/2017 | 25% | Green | <p>All objectives have been met for Q1. The team has responded, investigated and where appropriate taken action on:</p> <ul style="list-style-type: none"> • 9 clusters/outbreaks of communicable disease of which 4 have been confirmed (3 Campylobacter and I.C difficile. Our quick response has ensured no onward transmission within the wider community. • 74 allegations of food poisoning. 74 pathogens of public health significance (including Salmonella, Hepatitis A and E, Cryptosporidium, Typhoid, Legionnaire's Disease). 187 Campylobacter notifications. A food poisoning database has been set up to review businesses associated with food poisoning which improves intelligence and communication in responding to and restricting the impact of communicable disease. |

Appendix 2 – Detailed Performance Indicator Information

Objective 7: Encouraging and promoting active and healthy lifestyles.

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|---|---------------------|---------------------|---------------------|------------|---------------------|--|
| Population Indicators | | | | | | |
| WO4/M001: Percentage of adults aged 16+ who have fewer than two healthy lifestyle behaviours (not smoking, health body mass index, eat five portions fruit or vegetables, not drinking above guidelines, meet guidelines on weekly minutes of physical activity.) | N/A | N/A | N/A | N/A | N/A | New annual Well-being National Indicator. Establish baseline performance during 2016/17. |
| WO4/M002: Percentage of children who have fewer than two healthy lifestyle behaviours (not smoking, eat five fruit/vegetables daily, never/rarely drink and meet the physical activity guidelines.) | N/A | N/A | N/A | N/A | N/A | New annual Well-being National Indicator. Establish baseline performance during 2016/17. |
| WO4/M003: Children age 5 of a healthy weight | N/A | N/A | N/A | N/A | N/A | New annual Well-being National Indicator. Establish baseline performance during 2016/17. |
| WO4/M004: The average number of years a new born baby can expect to live if current mortality rates continue. | N/A | N/A | N/A | N/A | N/A | New annual Well-being National Indicator. Establish baseline performance during 2016/17. |
| What difference have we made? | | | | | | |
| HS/M044: Reduction in problematic substance misuse of clients accessing substance misuse treatment | N/A | No data provided | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| HS/M045: Improvement in the quality of life of clients accessing substance misuse treatment | N/A | No data provided | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| RP/M056: Number of Communities First clients completing a healthy eating programme who report feeling more confident cooking a fresh meal. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|--|---------------------|---------------------|---------------------|------------|---------------------|---|
| RP/M057: Number of Communities First clients completing a healthy eating programme who report eating fresh fruit or veg daily. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| CS/M036 (IO): Percentage of Flying Start children reaching developmental milestones at age 3. (IO) | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| CS/M035: Percentage of pupils achieving at least the expected outcome (outcome 5+) for Foundation Phase | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| VS/M041: Percentage of adults reporting that they participate in sports/ physical activity three or more times a week. | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| How well have we performed? | | | | | | |
| VS/M033 (DS/M036) Percentage of people who have completed the exercise referral scheme. | 97.90% | 28.5% | 100% | Red | ↓ | The exercise referral scheme team are reviewing factors that lead to customers not completing the scheme. |
| VS/MX (DS/M015): Number of participations of children and young people in the 5x60 scheme. (IO) | N/A | N/A | N/A | N/A | N/A | Existing annual measure. An annual target of 45,100 has been set for 2016/17 against a performance of 43, 867 in 2015/16. |
| VS/M042: Number of participations in Dragon Sport (7-11 year olds) | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| VS/M043: Number of participations supported by sports volunteers | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| HS/M046: Percentage of individuals who complete substance misuse treatment | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| CS/M037: Percentage of eligible Flying Start children that take up childcare offer. | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| CS/M038: Percentage of attendance at Flying Start childcare. | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| SI/M050: Percentage user showing satisfaction with the Families First Service accessed. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| SL/M025: Percentage of Council catered schools that offer healthy food options. | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|---|---------------------|---------------------|---------------------|------------|---------------------|--|
| How much have we done? (contextual data) | | | | | | |
| VS/M044: Number of Green Flag Parks | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| VS/M014 (DS/M035): Number of sports clubs which offer either inclusive or specific disability opportunities | N/A | N/A | N/A | N/A | N/A | Existing annual measure. An annual target of 48 has been set for 2016/17 against a performance of 47 in 2015/16. |
| VS/M017 (DS/M016) (IO): Number of children attending play schemes. | 107 | 82 | 175 | Red | ↓ | The majority of play scheme participations will be accrued during the summer school holidays and we are working towards an annual target of 700. Inclusive play schemes were not delivered during the May 2016 holidays as there was no core funding available. There was only funding available to deliver play schemes for disabled children secured through Families First funding. |
| VS/M045a: Number of sports volunteers trained: Young people | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| VS/M045b: Number of sports volunteers trained: Adults | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| BM/M001 (IO): Number of people contacting the Family Information Service (FIS) for health, wellbeing and leisure information. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| BM/M002 (IO): Number of Family Information Service (FIS) enquiries for childcare information. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| RP/M028: (IO) Number of participants enrolled on Communities First and Flying Start healthy eating programmes. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| VS/M046: Number of children receiving national standards: cycling (Level 1) | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| VS/M047: Number of children receiving national standards: cycling (Level 2) | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016/17. |
| SI/M051a: Number of users benefitting from a Families First service: Children and young people. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|--|----------------------------|----------------------------|----------------------------|-------------------|----------------------------|---|
| SI/M051c New PI: Number of users benefitting from a Families First service: Families | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016/17. |
| HS/M048 (CS/C131): Number of referrals into drug and alcohol services. | N/A | No data reported | N/A | N/A | N/A | Existing quarterly measure. Data to be available in Q2 and will incorporate Q1 data once available. |

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

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|--|---------------------|---------------------|---------------------|------------|---------------------|--|
| Population Indicators | | | | | | |
| WO4/M004: Percentage of adults at risk of abuse or neglect reported more than once during the year. | N/A | N/A | N/A | N/A | N/A | New annual measure. Social Services National Outcomes framework. Establish baseline performance during 2016-17. |
| WO4/M005: Percentage of re-registrations of children on local authority child protection registers. | N/A | N/A | N/A | N/A | N/A | New annual measure. Social Services National Outcomes framework. Establish baseline performance during 2016-17. |
| What difference have we made? | | | | | | |
| SCA/001: Rate of delayed transfers of care for social-care reasons per 1,000 population aged 75 or over | 1.48 | 0.78 | 4.5 | Green | ↑ | 9 Delays of transfers of care (due to social care reasons) in Q1. Full year estimate is 3.12. |
| SCA/019: Percentage of adult protection referrals completed where the risk has been managed. | 100% | 100% | 95% | Green | ↑ | Risks were appropriately managed in all adult protection referrals. |
| RP/M011 (DS/M005): Percentage of people who have received a Disabled Facilities Grant that feel that the assistance has made them safer and more independent in their own home | N/A | N/A | N/A | N/A | N/A | Annual measure. A target of 97% has been set for 2016/17 against a performance of 97% in 2015/16. |
| Measure 20a: Percentage of adults who completed a period of re-ablement and have a reduced package of care and support after 6 months | N/A | N/A | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016-17. Data will be available in Q3 due to PI definition. |
| Measure 20b: Percentage of adults who completed a period of re-ablement and have no package of care and support after 6 months. | N/A | N/A | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016-17. Data will be available in Q3 due to PI definition. |
| BM/M003 New PI: Percentage of re-registrations of children on local authority Child Protection Registers | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016-17. |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|--|----------------------------|----------------------------|----------------------------|-------------------|----------------------------|---|
| SCC/033f: Percentage of young people looked after with who the authority is still in contact who are known to be engaged in education training or employment. | 50% | 44.83% | 60% | Red | ↓ | There are a number of young people who are not in education, employment or training mainly due to illness/ disability or being a young parent. |
| HS/M047: Percentage of service users who confirm that the support that they have received has assisted them to maintain their independence. | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance during 2016-17. |
| EDU002ii: The percentage of pupils in local authority care in any local authority maintained school, aged 15 as at the preceding 31 August who leave compulsory education, training or work-based learning without an approved external qualification. | N/A | N/A | N/A | N/A | N/A | Existing annual measure (reported at Q3 in line with the academic year). A target of 0% set for the academic year 15/16 against a performance of 0% in the 2014/15 academic year. |
| How well have we performed? | | | | | | |
| PSR/002: Average number of calendar days taken to deliver a DFG. | 180.45 | 174.36 | 177 | Green | ↑ | Existing quarterly measure. Performance continues to improve and is above target. |
| RP/M010 (DS/M003): The percentage of customers satisfied with the Disabled Facilities Grant service. | N/A | N/A | N/A | N/A | N/A | Existing annual measure. Target of 98% set for 2016/17 against a performance of 98.13% in 2015-16. |
| SCC/006 (SS/M023): The percentage of referrals during the year in which a decision was made within 1 working day. | 99.24 | 99.57 | 99 | Green | ↑ | In the case of the majority referrals, a decision was made within 1 working day. |
| HS/M024: Percentage of Supporting People clients satisfied with their support. | N/A | N/A | 40% | N/A | N/A | Existing annual measure. Target of 98% set for 2016-17 against a performance of 100% in 2015-16. |
| BM/M004: Percentage of adult protection enquiries completed within 7 working days (measure 18) | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016-17. |
| PD/M027: Percentage of Telecare customers satisfied with the Telecare monitoring service. | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016-17. |
| BM/M005: Percentage of initial CP conferences due in the year that were held within 15 working days of the strategy discussion (local management information) | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016-17. |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|---|----------------------------|----------------------------|----------------------------|-------------------|----------------------------|---|
| AS/M017: Number of care and support plans for adults that were reviewed within agreed timescales (WG interim data set). | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016-17. |
| CS/M039: Number of care and support plans for children that were reviewed within agreed timescales (WG interim data set). | N/A | No data reported | N/A | N/A | N/A | New quarterly measure. Establish baseline performance during 2016-17. |
| AS/M019: Percentage of adult service users receiving a direct payment. | N/A | N/A | N/A | N/A | N/A | New annual measure. Social Services National Outcomes framework. Establish baseline performance during 2016-17. |
| How much have we done? Contextual data | | | | | | |
| AS/M020: Number of adult service users receiving a Direct Payment | 146 | 186 | 143 | Green | ↑ | We continue promote the use of direct payment. |
| AS/M021: Number of new Telecare users | 62 | 84 | 77.25 | Green | ↑ | On track towards achieving a target of 309 new users in 2016/17. |

Appendix 3 – Explanation of Performance Terms used in the Report

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

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

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

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

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

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

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

Appendix 4 – Additional Performance Indicators (Well-being Outcome 4)

Objective 7: Encouraging and promoting active and healthy

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|---|------------------------|------------------------|------------------------|---------------|------------------------|--|
| What difference have we made? | | | | | | |
| No PIs | | | | | | |
| How well have we performed? | | | | | | |
| No PIs | | | | | | |
| How much have we done? (Contextual data) | | | | | | |
| VS/M014: Number of sports clubs which offer either inclusive or specific disability opportunities | 43 | 47 | 12 | Green | ↑ | Currently progressing Insport accreditation with local badminton club. |

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

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|--|---------------------|---------------------|---------------------|------------|---------------------|--|
| What difference have we made? | | | | | | |
| SCC/033e: 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. | 100 | 100 | 95 | Green | ↔ | Maintained 100% performance which mirrors last year's. |
| CS/M007: The percentage of looked after children who have had their teeth checked by a dentist during the year | N/A | 54.55 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| CS/M030: The percentage of all care leavers who are in Education, training or employment at 24 months after leaving care | N/A | 37.5 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| How well have we performed? | | | | | | |
| RP/M012: The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people | 201.11 | 154 | 195 | Green | ↑ | Significant improvement on our performance when compared to the Q1 last year. Reflects continued developments in service aimed at reducing delivery times for customers. |
| RP/M013: The average number of calendar days taken to deliver a Disabled Facilities Grant for adults. | 176.47 | 174.89 | 176.47 | Green | ↑ | Improved Q1 performance reflects continued service developments aimed at reducing delivery times to customers. |
| CS/M004: The percentage of assessments completed for children within statutory timescales. | N/A | 92.42 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| CS/M004: The percentage of children supported to remain living with their family. | N/A | 96 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| CS/M006: The percentage of re-registrations of children on local authority Child Protection Registers (CPR) | N/A | 9.77 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| AS/M004: The percentage of adults who completed a period of reablement and have no package of care and support six months later | N/A | Available Q3 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|--|---------------------|---------------------|---------------------|------------|---------------------|---|
| AS/M005: The percentage of Adults who have received advice and assistance from the information, advice and assistance service and have not contacted the service again | N/A | Available Q3 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| CS/M005: The percentage of looked after children returned home from care during the year | N/A | 1.48 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| CS/M006: The percentage of re-registrations of children on local authority Child Protection Registers (CPR) | N/A | 9.67 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| SCA/002a): The rate of older people (aged 65 or over) supported in the community per 1,000 population at 31 March | N/A | 41.61 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance in 2016/17. |
| SCA/002b: The rate of older people (aged 65 or over) whom the local authority supports in care homes per 1,000 population at 31 March. (IO2) | 15.58 | 14.76 | 14.5 | Red | ↓ | This is an increase of 3 citizens from Q4 2015/16 and remains consistently below the Welsh average. |
| SCC/033d: The percentage of young people formerly looked after with whom the authority is in contact at the age of 19. | 100 | 100 | 98 | Green | ↔ | Contact maintained with 100% of formerly looked after children. This mirrors last year's performance. |
| SCC/037: The average external qualifications point score for 16 year old looked after children, in any local authority maintained learning setting | N/A | N/A | N/A | N/A | N/A | New annual measure. Establishing baseline performance in 2016/17. |
| SCC/041a: The percentage of eligible, relevant and former relevant children that have pathway plans as required | 100 | 100 | 100 | Green | ↔ | All relevant children have pathway plans as required. |
| CS/M018: The percentage change in the average number of hours of suitable education, training or employment children and young people receive while within the youth justice system by: Children and young people of statutory school age. | N/A | N/A | N/A | N/A | N/A | New annual measure. Establish baseline performance in 2016/17 |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|--|---------------------|---------------------|---------------------|------------|---------------------|---|
| CS/M020: The percentage change in the proportion of children and young people in the youth justice system with suitable accommodation: at the end of their court order compared with before the start of their court order | N/A | N/A | N/A | N/A | N/A | New annual measure. Establishing baseline performance in 2016/17. |
| CS/M021: The percentage change in the proportion of children and young people in the youth justice system with suitable accommodation: upon their release from custody compared with before the start of their custodial sentence. | N/A | N/A | N/A | N/A | N/A | New annual measure. Establishing baseline performance in 2016/17. |
| AS/M015: The average length of time older people (aged 65 or over) are supported in residential care homes | N/A | 905.50 | N/A | N/A | N/A | New quarterly measure. Establishing Baseline performance during 2016/17 |
| AS/M016: Average age of adults entering residential care | N/A | 80.83 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance during 2016/17 |
| CS/M025: The average length of time for all children who were on the CPR during the year | N/A | 240.63 | N/A | N/A | N/A | New quarterly measure. Establishing baseline performance during 2016/17 |
| CS/M026: Percentage of children achieving the core subject indicator at key stage 2 | N/A | N/A | N/A | N/A | N/A | Existing annual measure. |
| CS/M027: Percentage of children achieving the core subject indicator at key stage 4 | N/A | N/A | N/A | N/A | N/A | Existing annual measure. |
| SCC/004: The percentage of children looked after on 31 March who have had three or more placements during the year | 1.52 | 0.50 | 9 | Green | ↑ | Improved performance in comparison with the same period last year. |
| CS/M029: The percentage of all care leavers who are in Education, training or employment at 12 months after leaving care | N/A | 40.63 | N/A | N/A | N/A | New quarterly measure. Establishing Baseline performance during 2016/17 |
| CS/M031: The percentage of care leavers who have experienced homelessness during the year | N/A | 9.17 | N/A | N/A | N/A | New quarterly measure. Establishing Baseline performance during 2016/17 |
| CS/M034: Percentage of Flying Start children reaching developmental milestones at age 3 | N/A | N/A | N/A | N/A | N/A | Existing annual measure. |

| Performance Indicator | Q1 Actual 2015/2016 | Q1 Actual 2016/2017 | Q1 Target 2016/2017 | RAG Status | Direction of Travel | Commentary |
|---|---------------------|---------------------|---------------------|------------|---------------------|---|
| SCC/040: 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. | 100 | 100 | 98 | Green | ↔ | New quarterly measure. Establishing Baseline performance during 2016/17 |