

The Vale of Glamorgan Council

Healthy Living & Social Care Scrutiny Committee 8th December 2016

Report of the Director of Social Services

Quarter 2 (2016-17) Performance Report: An Active and Healthy Vale

Purpose of the Report

1. To present the performance results for quarter 2, 1st April-30th June, 2016-17 for the Corporate Plan Well-being Outcome 4, 'An Active and Healthy Vale'.

Recommendations

1. That members consider progress to date in achieving key outcomes in line with the Corporate Plan Well-being Outcome 4 - 'Residents of the Vale of Glamorgan lead healthy lives and vulnerable people are protected and supported.'
2. That members consider the performance results and remedial actions to be taken to address areas of underperformance and to tackle the key challenges identified.

Reasons for the Recommendations

1. To ensure the Council clearly demonstrates the progress being made towards achieving its Corporate Plan Well-being Outcomes aimed at making a positive difference to the lives of Vale of Glamorgan citizens.
2. To ensure the Council is effectively assessing its performance in line with the requirement to secure continuous improvement outlined in the Local Government Measure (Wales) 2009 and reflecting the requirement of the Well-being of Future Generations (Wales) Act that it maximises its contribution to achieving the well-being goals for Wales.

Background

2. The Council's Performance Management Framework is the mechanism through which our key priorities and targets are monitored and realised in order to secure continuous improvement.
3. As part of the review of its Performance Management Framework, the Council has recently adopted a new Corporate Plan (2016-20) which reflects the requirements of

the Well-being of Future Generations (Wales) Act 2015 and identifies 4 Well-being Outcomes and 8 Objectives for the Council.

4. In order to ensure a more cross-cutting approach to scrutinising the Well-being Outcomes in the Corporate Plan and to reduce potential for duplication, the remits of Scrutiny Committees have been re-aligned with the Well-being Outcomes contained in the Corporate Plan with performance reporting revised to reflect these arrangements.
5. Service Plans have been completed at Head of Service level and focus on the contribution made by those areas to the Council's Well-being Outcomes and Objectives.
6. As approved by Cabinet, from 2016-17, the Corporate Plan will be monitored on a quarterly basis by an overall Corporate Health Performance Report and this will be reported to the Corporate Performance & Resources Scrutiny Committee. It will be supplemented by specific quarterly performance reports for each of the four Well-being Outcomes. This will enable Members to focus on scrutinising the progress being made towards achieving the Council's Well-being Outcomes. Services have continued to report performance data quarterly to the Council's Performance Team and this information has been used to compile and present the more focused Well-being Outcome Reports for the quarter 2 period. The newly devised report formats have been designed to make it easier to assess overall progress in each objective/outcome, whilst continuing to provide detailed supporting information relating to actions and indicators.
7. Work has been undertaken to review the Council's existing performance indicator dataset. This included workshops for all four Well-being Outcome areas, chaired by the respective Sponsoring Director and Lead officers/ Heads of Service. These produced a basket of proposed measures comprising some existing and some new measures for consideration by the Member Working Group for each Well-being Outcome. The draft quarterly Well-being Outcome report template and the proposed basket of measures were approved by both the Member Working Group and Cabinet (16th June and 25th July respectively) as the basis for preparing quarterly performance monitoring reports for 2016-17. Following consideration of the quarterly reports by Scrutiny Committees and Cabinet, feedback on the format of the reports will be considered by Officers and the Member Working Group as part of the on-going development of the Council's performance management arrangements.
8. The performance report is structured as follows:
 - **Page 2:** Provides an explanation of the performance terms used within the report. The performance report uses the traffic light system, that is, a Red, Amber or Green (RAG) status and a Direction of Travel (DOT) to aid performance analysis.

Progress is reported for all key performance indicators by allocating a RAG performance status, Green relates to performance that has met or exceeded target, Amber relates to performance within 10% of target and Red relates to performance that has missed target by more than 10%. A DOT arrow is also attributed to each measure indicating whether current performance has improved, stayed static or declined on last year's first quarter performance. An upward arrow (↑) indicates that performance has improved on the same quarter last year, a static arrow (↔) indicates performance has remained the same and a downward arrow (↓) shows performance has declined compared to the same quarter last year.

For actions, a Green status relates to a completed action or one that is on track to be completed in full by the due date. An Amber status relates to an action where there has been a minor delay but action is being taken to bring this back on track by the next quarter. A Red status relates to an action where limited progress has been made, and an explanation must be provided including any planned remedial action(s) and where appropriate a revised completion date.

- **Section 1: Outcome Summary** - Provides an overall summary of performance and highlights the main developments, achievements and challenges for the quarter as a whole. It includes an evaluation of the progress made against actions and performance indicators as well as corporate health (resource) impacts which supports the overall RAG status for the Well-being Outcome.
- **Section 2: Performance Snapshot** - Provides an overview for each Well-being Objective, describing the status of Corporate Plan actions and performance indicators. A RAG status is attributed to each Well-being Objective to reflect overall progress to date and contributes to the overall RAG status for the Well-being Outcome.
- **Section 3: Key Achievements and Challenges** - Highlights the key achievements and challenges to date in achieving the intended outcomes for the Well-being Outcome.
- **Section 4: Corporate Health: Use of Resources and Impact on Improvement** - Provides a summary of the key issues relating to the use of resources and the impact on delivering improvement during the quarter. The focus is on key aspects relating to staffing, finance, assets, ICT, customer focus and risk management.
- **Appendix 1:** Provides, by Well-being Objective, detailed information relating to the Service Plan actions which have contributed to Corporate Plan actions.
- **Appendix 2:** Provides detailed performance indicator information linked to each Well-being Objective which show for our planned activities, how much we have done, how well we have performed and what difference this has made. It must be noted that new annual and quarterly reported performance indicators have been introduced as part of the Council's revised Performance Management Framework and for a number of these data will not be available as this year will be used to establish baseline performance. A Not Available (N/A) status will be attributed to all such measures with commentary provided confirming this status. Where possible cumulative data will be provided in future quarterly reports as this becomes available. This is the first year of reporting against the new Corporate Plan and we will continue to develop our key measures within each Well-being Objective to ensure these most accurately reflect our Corporate Plan Well-being Outcomes.
- **Appendix 3:** 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.

Relevant Issues and Options

9. An overall **GREEN** RAG status has been attributed to Well-being Outcome 4, 'An Active and Healthy Vale', reflecting the positive progress made to date in making a difference to the lives of residents and our customers within a highly challenging environment.

10. At Q2, 15 out of 16 Corporate Plan actions under this Well-being Outcome are on track to be delivered giving an overall Green performance status for actions. Limited progress has also been made during this quarter in implementing monitoring arrangements for the Corporate Safeguarding policy (AH11). This delay is largely due departure of the Operational Manager for Safeguarding who was the lead officer for this work. The next meeting of the Corporate Safeguarding group will now consider proposals for the monitoring of the policy.
11. An overall Amber performance status has been attributed to the quarterly measures contributing to this Well-being Outcome. Of the 9 quarterly measures reported, performance met or exceeded target for 6 indicators with the remaining 3 missing target by more than 10%. These 3 relate to the exercises referral scheme (VS/M033), young people looked after whom the authority is still in contact with who are engaged in education, training or employment (SCC/033f) and adult service users receiving a Direct Payment (AS/M020).
12. A detailed report outlining the progress at quarter 2 towards achieving Well-being Outcome 4 is provided at Appendix 1.

Resource Implications (Financial and Employment)

13. There are no additional budgetary implications arising from this report, although underperformance in some areas may have a negative impact on external assessments of the Council and could put certain funding opportunities at risk. The report includes information relating to the use of financial, asset, ICT and people resources and how these are being deployed to support the delivery of the Council's well-being outcomes.

Sustainability and Climate Change Implications

14. The Corporate Plan emphasises the Council's commitment to promoting sustainable development and our understanding of our duties under the Well-being of Future Generations (Wales) Act. The many different aspects of sustainability (environment, economy, culture and social) are reflected within planned activities as outlined the Corporate Plan and demonstrates how the Council will maximise its contribution to the Well-being Goals.

Legal Implications (to Include Human Rights Implications)

15. The Local Government (Wales) Measure 2009 requires that the Council secure continuous improvement across the full range of local services for which it is responsible.
16. The Well-being of Future Generations (Wales) Act 2015 requires the Council to set and publish Well-being Objectives by April 2017 that maximise its contribution to achieving the Well-being goals for Wales.

Crime and Disorder Implications

17. Activities to improve community safety are included in the Corporate Plan and one of the Well-being Outcomes is 'An Inclusive and Safe Vale' with a supporting objective 'providing decent homes and safe communities'. The Council's Performance Management Framework supports the delivery of actions associated with these objectives.

Equal Opportunities Implications (to include Welsh Language issues)

18. An Inclusive and Safe Vale' is one of the Well-being Outcomes in the Corporate Plan with a supporting objective 'reducing poverty and social exclusion'. There is also a Well-being Outcome 'An Aspirational and culturally vibrant Vale' with a supporting action 'valuing culture and diversity'. The Council's Performance Management Framework supports the delivery of actions associated with these objectives.

Corporate/Service Objectives

19. The Corporate Plan 2016-20 reflects the requirements of the Well-being of Future Generations Act and identifies 4 Well-being Outcomes and 8 Objectives for the Council. These promote improvements in the economic, social and cultural well-being of residents in the Vale of Glamorgan which in turn will contribute to achieving the Well-being goals for Wales.
20. The Council's Performance Management Framework supports the delivery of all of the Council's Corporate Plan Well-being Outcomes and Objectives.

Policy Framework and Budget

21. This is a matter for Executive decision.

Consultation (including Ward Member Consultation)

22. The information contained within the report is based on quarterly returns provided by service directorates to the Performance Team. Quarterly performance reports covering the Corporate Plan Well-being Outcomes and Objectives along with an overall Corporate Health Report will be considered by relevant Scrutiny Committees and the Cabinet.

Relevant Scrutiny Committee

Healthy Living & Social Care Scrutiny Committee

Background Papers

[Performance Management Framework](#), Report of the Leader, Cabinet, 25th April 2016

[Corporate Assessment 2016](#), Report of the Leader, Cabinet, 5th September 2016

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Vale of Glamorgan Council Corporate Performance Report - Quarter 2 (1 July – 30 September 2016)

This report provides a summary of the performance for this well-being outcome and the associated objectives for this quarter.



Well-being Outcome 4: An Active and Healthy Vale

Citizens of the Vale of Glamorgan have a good quality of life and feel part of the local community.

Well-being Objectives:

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

For this quarter, our performance can be summarised by:

The overall status of the actions we are taking:	The overall status of the indicators we use to measure our performance:	Which indicates the overall status of this Well-being Outcome is:
GREEN	AMBER	GREEN

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 Well-being Outcome as a whole.

Section 2: Performance Snapshot – This section provides an overview for each Well-being Objective of 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 contributing to this Well-being Outcome are detailed in this section.

Section 4: Corporate Health: Use of Resources & Impacts on Improvement – A summary of the key issues relating to the use of resources and the impacts this has had for the quarter on delivering improvement is provided in section 4.

Appendix 1 provides, by Well-being Objective, detailed information relating to the Service Plan actions contributing to the in-scope Corporate Plan actions.

Appendix 2 provides, by Well-being Objective, detailed performance indicator information.

Appendix 3 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.

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
<p>Green: Performance is on or above target</p> <p>Amber: Performance is within 10% of target</p> <p>Red: Performance missed target by more than 10%</p>	<p>↑ : Performance has improved on the same quarter last year</p> <p>↔ : Performance has remained the same as the same quarter last year</p> <p>↓ : Performance has declined compared to the same quarter last year</p>	<p>Green: Action completed or on track to be completed in full by due date.</p> <p>Amber: Minor delay but action is being taken to bring action back on track.</p> <p>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.</p>	<p>Green: indicates that we are well on track to deliver the key outcomes relating to the Objective as set out in the Corporate Plan.</p> <p>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.</p> <p>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.</p>

Service Plan Actions			
VS: Visible Services	CS: Children & Young People Service	AS: Adult Services	SRS: Shared Regulatory Services
HS: Housing Service	BM: Business Management & Innovation Services	PD: Performance & Development	

1. Outcome Summary

This report gives an overview of performance at quarter 1, April – September 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 **GREEN** has been assigned to this Well-being Outcome to reflect the good progress made to date in achieving improved outcomes for residents and our customers.

At this stage, 15 out of 16 Corporate Plan actions under this Well-being Outcome are on track to be delivered, giving an overall Green performance status for actions. Limited progress has also been made during this quarter in implementing monitoring arrangements for the Corporate Safeguarding policy (AH11). This delay is largely due to the departure of the Operational Manager for Safeguarding who was the lead officer for this work. The next meeting of the Corporate Safeguarding group will now consider proposals for monitoring the policy.

An overall Amber performance status has been attributed to the quarterly measures reported against this Well-being Outcome. Of the 9 performance indicators for which data was reported this quarter, 6 met or exceeded target and 3 missed target by more than 10%. The 3 indicators that missed target relate to the exercises referral scheme (VS/M033), young people looked after with whom the authority is still in contact and who are engaged in education, training or employment (SCC/033f) and adult service users receiving a Direct Payment (AS/M020).

The majority of service areas contributing to this Well-being Outcome reported **absence performance** within target and no significant issues were highlighted as impacting negatively on progress with planned improvement activities. Monthly monitoring of attendance continues to be undertaken in line with corporate arrangements, with priority cases being reviewed monthly in order to ensure performance remains on track.

At the last review of the **Corporate Risk** Register in September 2016, the level of risk attributed to the risks impacting on this Well-being Outcome remained largely unchanged, with the exception of the Reshaping Services risk which has increased to a medium-high rating from a medium. Mitigating actions for service and corporate risks continue to be progressed alongside service plan actions.

A number of **emerging service risks** were identified by the Social Services Directorate which could impact adversely on their contribution to this Well-being Outcome. These include the continued challenges resulting from increasing demand for domiciliary care services and the case for extra resources which remain significant, with a projected £600k overspend for the year. Whilst some work is being done to re-model services to ensure that they are delivered by the most effective means, the Council could eventually have to face difficult choices around how and what service services are delivered, if the current budget pressures and savings requirements continue to grow.

Managing reductions in funding while minimising wherever possible the impact on front line service delivery remains an ongoing challenge given increasing national statutory requirements and the need to make year on year efficiency savings. Furthermore, the need to meet new service requirements with limited public resources available to implement the changes, including those arising from increased statutory obligations, continues to present significant risks. The Council faces a long term challenge in providing effective support for a rising population of older people with increasing levels of need, for children and other people with increasing complex health conditions and for families experiencing periods of difficulty and vulnerability. As a consequence, it is crucial that we develop closer partnership working in order to deliver new models of care and support services across the whole range of need. The Social Services Directorate continues to face ongoing pressures in relation to ensuring quality of care, managing risk of service failure and increased safeguarding responsibilities.

There is a need to work with key stakeholders in Education and Public Health to consider the impact of shortening lunch breaks in some schools. It could reduce opportunities available for children and young people for healthy eating, physical exercise and socialising, a key contributor to developing healthy lifestyles.

At Q2, positive progress continues to be made in relation to the **Reshaping Services** projects contributing to this Well-being Outcome. However, the Social Services budget programme continues to remain under significant strain with a challenge caused by rising demand (and associated cost) for domiciliary care for older people in adult services.

With respect to its **budget**, the Social Services Directorate is projecting to outturn with an adverse variance of £600k at year end. The major issue concerning the Children and Young People Services relate 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. 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. In relation to Adult services, the continued challenges resulting from increasing demand for domiciliary care services has contributed largely to the projected overspend for the year and the case for extra resources has been made. Whilst some work is being done to re-model services to ensure that delivery is by the most effective means, the Council could eventually have to face difficult choices around how and what services are delivered, if the current budget pressures and savings requirements continue to grow.

In relation to **key ICT** developments, the Social Services Directorate is continuing to make changes to its framework for assessment and planning in individual cases (including processes, practice and case management) and to its IT infrastructure to ensure compliance with the requirements of the Social Services & Well-being Act and to focus more on outcomes and matching needs and services. The DEWIS Cymru information portal has been successfully launched and further developmental work is ongoing to ensure it has all the content for the region in place, especially information relating to preventative services for adults and children. We continue to actively promote the resource to our professional colleagues and to third sector organisations. Work continues in supporting implementation of the Wales Community Care Information System (WCCIS) across the region. As highlighted in Q1, implementation in the Vale will pose resource challenges; however, a further grant from Welsh Government will support the local change programme .

In terms of ensuring a **customer focus** in delivering services, good progress has been made in rationalising the ICT infrastructure across partner sites of the Shared Regulatory Service with the procurement of a new single database system and the move to a single domain. In addition, a single telephone number has also been launched further improving access to services for our customers by providing a single access point.

Good progress has been made in working with independent providers to examine how we commission services and ensure best value for money with improved outcomes for citizens. As part of this work, an outcome-based commissioning pilot for domiciliary care is due to start in Q3 and a Market Position Statement has been commissioned. This work contributes to ensuring ongoing sustainability of the domiciliary care sector.

We are developing a charging policy for social services aimed at ensuring citizens are able to understand the implications of recent changes in the statutory framework. However, progress of this work has been slow, mainly because the issues are complex; legal services are now supporting this work stream. It is anticipated that a draft charging policy will be developed for Cabinet's consideration during Q3.

Positive progress is being made to maximise our **key assets**. Developments of particular note during the quarter include the 6 new intermediate care beds at Ty Dyfan, within a Reablement Unit commissioned by the Council and Cardiff and Vale University Health Board using the Intermediate Care Fund. The unit, which is on track to open in late November, will relieve some of the pressure on hospital beds and support older residents to regain independence. Our aim is to provide a bridge between hospital discharge and home for those people who require additional time in a supportive environment to maximise their independence.

In line with our priority to promote increased physical activity and healthy living amongst Vale residents, significant improvements are planned to our leisure centres in Barry and Penarth with work scheduled to commence in the new year to refurbish swimming pool changing rooms at both centres and to install a replacement floor for the main hall at Barry Leisure centre.

2. Performance Snapshot

Objective 7: Encouraging and promoting active and healthy lifestyles

Corporate Plan Actions	ACTIONS STATUS			+	INDICATORS STATUS		=	OBJECTIVE STATUS
	Service Plan Actions	Action Status	Overall Actions Status		Number of Indicators	Overall Indicator Status		Overall Objective 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	GREEN	2*	AMBER	GREEN		
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	Green						
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						

*Of the 2 performance indicators reported this quarter against Objective 7, 1 exceeded target (VS/M017) and 1 missed target by more than 10% (VS/M033).

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

Corporate Plan Actions	ACTIONS STATUS			+	INDICATORS STATUS		=	OBJECTIVE STATUS
	Service Plan Actions	Action Status	Overall Actions Status		Number of Indicators	Overall Indicator Status		Overall Objective 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	GREEN	7*	AMBER	GREEN		
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	Amber						
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	Green						
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						
AH15: Improve procedures with providers of nursing, residential and domiciliary care providers to enable early	1	Green						

intervention and prevent the escalation of incidents. (2017/18)						
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				

*Of the 7 performance indicators reported under Objective 8, five (SCA/001, SCA/019, PSR/002, AS/M021) met or exceeded target and were attributed a Green performance status with remaining two indicators (AS/M020, SCC/033f) missing target by more than 10% resulting in a Red performance status.

The table below highlights the PIs attributed with a Red status and provides commentary on the performance.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
VS/M033 (DS/M036) Percentage of people who have completed the exercise referral scheme.		29	40	Red	N/A	<p>The definition of the PI was amended for 2016/17 hence no comparative data was available for Q2, 2015/16. Due to the change in definition, there is a need to amend the existing target in order to more accurately reflect the amended definition and current performance targets set by the scheme funders, WLGA and Public Health Wales. For the Vale, the completion target for the scheme is 40% for 2016/17. It is therefore proposed that this target replace the current target of 99%.</p> <p>Whilst Q2 does see a small increase at 29% from Q1 at 28.5%, performance remains below target.</p> <p>The team are working to increase the completion rates of the scheme. However, further developments within the Leisure centres are affecting the provision of the referral scheme.</p>
SCC/033f: Percentage of young people looked after with whom the authority is still in contact who are known to be engaged in education training or employment.	50	51.72	60	Red	↑	<p>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. Each of these young people have an allocated Young Persons Advisor who is working with them to support increased independence with engagement in education, training or employment being a key area of focus.</p>
AS/M020 (SS/M021): Number of adult service users receiving a Direct Payment	146	208	286	Red	↑	<p>At Q2, 208 adult service users were in receipt of direct payment compared to 146 in the same period last year. Whilst an improvement, this performance remains below our quarterly target of 286.</p>

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 2 are outline below:

- We have formalised arrangements with partners to ensure effective information sharing takes place to ensure the safety of children who are exposed to risks of sexual exploitation.
- We have successfully secured funding to improve and upgrade the changing facilities at Barry and Penarth Leisure Centres in response to customer views and the work will commence in early 2017.
- Despite the reduction in funding and the impact of new legislation, we delivered a successful summer play programme that was well attended. 128 children accrued 380 participations at various schemes. Additional schemes were delivered for disabled children in partnership with Ysgol Y Deri, funded by Families First. 82 children accrued 842 attendances and 35 young people accrued 353 attendances. A further 164 children attended Play Ranger sessions accruing 494 participations.
- The DEWIS Cymru information portal has been successfully launched and further developmental work is ongoing to ensure it has all the content for the region in place, especially information relating to preventative services for adults and children and we continue to actively promote the resource to our professional colleagues.
- During the quarter, good progress has been made in rationalising the ICT infrastructure across partner sites of the Shared Regulatory Service with the procurement of a new single database system and the move to a single domain. A single telephone number has also been launched further improving access to services for our customers by providing a single access point.
- Performance has continued improve with respect to the rate of delayed transfers of care for social-care reasons for people aged 75. During the quarter, 15 delays were reported giving a performance of 2.09 which exceeded the target of 4.5 and was better than our performance during the same quarter last year (2.87).
- All risks were appropriately managed in all adult referrals made this quarter maintaining the 100% achieved in quarter 1 and in Q2 in the previous year.
- The average number of calendar days taken to deliver a DFG continues to improve and has exceeded the target of 177 days with a performance of 172 days. 71 DFGs were completed during the quarter, at an average of 174 days compared to 70 completed at an average of 180 days during Q2 in the previous year. This improvement reflects the continued developments in the service which are aimed at reducing delivery time for customers thus helping them to retain the independence for longer.
- We maintained contact with all young people (100%) aged 19 who have been formally looked after, mirroring the performance reported in quarter 1 and in Q2 in the previous year.
- We ensured 100% of eligible, relevant and former children have pathway plans in place mirroring our performance in Q1 and this quarter in 2015/16.
- Fewer looked after children had three or more placements (2.31%) when compared to the same time period last year (4.5%), exceeding our target of 9%.

- We continue to increase the number of Telecare users. 173 new users signed on to the service during the quarter against a target of 154.5 ensuring that we remain on track to achieve our annual target. This is an improvement on our performance during the same period last year at 106.
- Good progress has been made working with independent providers in order to examine how we commission services in order to ensure best value for money with improved outcomes for citizens. As part of this work, an outcome based commissioning pilot is due to commence in Q3, and a Market Position Statement commissioned. This work contributes to ensuring ongoing sustainability of the domiciliary care sector.
- Following an evaluation of options, work has commenced in partnership with the Data Unit and SSIA to provide a bespoke Family Information Service (FIS) database and record management system for the Vale. The new system will ensure the FIS maintains appropriate and effective operational systems and processes for information management in line with national guidance.
- We continue to work with sports clubs to increase the number offering either inclusive or specific disability opportunities. During Q2, 47 clubs were offering a variety of opportunities for disabled people to participate in sporting activities, exceeding our target of 24 for the quarter.
- Good progress is being made in delivering the substance misuse action plan. Following a successful community engagement event held during the quarter which focused on the issues of cannabis use, further development work is being taken to strengthen links between the substance misuse open access service and the ASB process. This will increase the opportunities for existing services users to make use of available diversionary activities to aid their recovery and new services users to be able to access the right services at the right time.

Our key areas of challenge are:

- Limited progress has been made this quarter in implementing monitoring arrangements for the Corporate Safeguarding policy. This delay has occurred due to the departure of the Operational Manager for Safeguarding who was the lead officer in relation to this work. The next meeting of the Corporate Safeguarding group will now consider proposals for monitoring the policy.
- We continue to work with customers to increase the number completing the exercise referral scheme. However, developments within our Leisure centres have affected provision. The target completion rate for the Vale's exercise referral scheme has been amended to more accurately reflect the 2016-17 targets for the Vale, as set by the WLGA and Public Health Wales, the funders of the scheme which is 40%. Although this quarter does see a small increase at 29% (from 28.5% at Q1), performance remains below target.
- Significant work is ongoing to increase the number of adult service users in receipt of a Direct Payment. At Q2, 208 adult service users were in receipt of direct payment compared to 146 in the same period last year. Whilst an improvement, this performance remains below our quarterly target of 286.
- Increasing the number of people leaving care who are engaged in education, training or employment remains a priority. There continues to be a number of young people who are not in education, employment or training due to illness, disability or being a young parent. Each of these young people have an allocated Young Persons Advisor who is working with them to support increased independence with engagement in education, training or employment being a key area of focus.
- Managing reductions in funding while minimising wherever possible the impact on front line service delivery remains an ongoing challenge, given increasing national statutory requirements and the need to make year on year efficiency savings. Furthermore, the

need to meet new service requirements with limited public resources available to implement the changes, including those arising from increased statutory obligations, continues to present significant challenges. The Council faces a long term challenge to in providing effective support for a rising population of older people with increasing levels of need, for children and other people with increasing complex health conditions and for families experiencing periods of difficulty and vulnerability. As a consequence, it is crucial that we develop closer partnership working in order to deliver new models of care and support services across the whole range of need.

- The Vale has a good reputation for managing its budget. However, the continued challenges resulting from the increasing demand for domiciliary care services and the case for extra resources remain significant with a projected £600K overspend for the year. Whilst some work is being done to re-model services to ensure their delivery is by the most effective means, the Council could eventually have to face difficult choices around how and what services are delivered, if the current budget pressures and savings requirements continue to grow.
- The Directorate's services continue to face ongoing pressures in relation to ensuring quality of care, managing risk of service failure and increased safeguarding responsibilities in light of the increased responsibilities and resources.
- At Q2, positive progress continues to be made in relation to the reshaping projects contributing to this Well-being Outcome. However, the Social Services budget programme continues to remain under significant strain with a challenge caused by rising demand (and associated cost) for domiciliary care for older people in adult services.
- Limited progress has been made this quarter in developing a clear charging policy aimed at ensuring citizens are able to understand the implications of charging for social care services. This is largely due to the complexity of the issues; consequently, legal services have been supporting this work stream. It is now anticipated that a draft charging policy will be developed for Cabinet's consideration during Q3.
- A meeting is being arranged with Education to discuss the impact of shortening lunch breaks in some schools. It appears that this may be reducing opportunities available for children and young people for health eating, physical exercise and socialising, a key contributor to developing healthy lifestyles.

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
<p>People</p>	<p>During the quarter, 5 out of 7 service areas contributing to this Well-being Outcome reported absence management figures within their respective targets with the exception of Performance and Development. No significant issues were highlighted as impacting negatively on progress with planned improvement activities. Monthly monitoring of attendance continues to be undertaken in line with corporate arrangements with priority cases being reviewed monthly in order to ensure performance remains on track.</p> <p>A number of service areas continue to face significant issues in recruiting staff and in ensuring succession is planned for. The Housing & Building Service has found it difficult to recruit Occupational Therapists, Housing Solutions staff and technical staff consequently some organisational restructuring is being undertaken in order to counter market forces with market testing on a case by case basis. In the meantime the service continues to rely on agency staff to maintain service provision. In order to improve succession the service is also reviewing the feasibility of introducing an apprentice programme/ training academy with support from the Apprentice Levy. This work is being undertaken alongside shaping its future work programmes.</p> <p>The social worker progression framework was launched in September. Practice guidance is being developed alongside training to support staff in implementation of the Social Services and Well-being Act. We continue to work to the regional workforce plan and have extended opportunities to health partners, corporate teams and the third sector to build knowledge of the SSWB Act.</p> <p>As a priority, we continue to develop the Information, Advice and Assistance Service by ensuring sufficient numbers of staff are appropriately trained in order to deliver those aspects of the Act which deal with improving the ways in which people are able to request support and receive help in a timely manner.</p>
<p>Financial</p>	<p>At Q2, positive progress continues to be made in relation to the reshaping projects contributing to this Well-being Outcome. In relation to the review of Visible Service (Amber) work has commenced on a series of “quick wins” as well as the development of a new target operating model for Visible and Transport Services. The project team have now finalised and submitted their work on the proposed new operating model and the business case recommending the approval of the new target operating model for Visible Services will be presented to Cabinet in late 2016.</p> <p>The September 2016 all projects summary highlight report for the Social Services Budget programme (Red) highlights that the 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 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. Work is continuing in relation to these projects including the review of Day Services, Respite Services and Meals on Wheels.</p> <p>In relation to the Social Services Directorate’s Collaborative Working Programme (Amber) is focusing on the significant preparatory</p>

	<p>work required to implement the Social Services and Well-being (Wales) Act. Nine work streams have been identified and a number of these link directly to the Directorate's reshaping activity. Priority has been given to the provision of the Information, Advice and Assistance service and the Eligibility/Assessment of Need work streams as this will result in service redesign and assist with the demand management strand of the Council's Reshaping Programme.</p> <p>At Q2, the Social Services Directorate budget is projecting to outturn with an adverse variance of £600k at year end. The major issue concerning the Children and Young People Services relate to the 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.</p> <p>In relation to Adult Services, it is projected that the Community Care Package budget could outturn with a variance of up to £1 million by year end. This budget is extremely volatile and has been adversely affected this year by the increase in the cost of packages commissioned as a result of the introduction of the National Living Wage, the continued pressure of the budget from demographic growth and clients having increasingly complex needs. The final outturn is, however, difficult to predict. Final negotiations regarding fee levels are being concluded with service providers but proposed increases are already above the level of inflation provided for within the budget. The service will strive to manage growing demand and try to mitigate this position and some initiatives may be funded via regional grants in the current financial year. The service proposes to use up to £1 million from the Social Services Legislative Changes fund to cover the shortfall.</p>
Assets	<p>As part of the Council's priority to promote increased physical activity and healthy living amongst Vale residents, significant improvements are planned to Barry and Penarth Leisure centres with work scheduled to commence in the new year to refurbish swimming pool changing rooms at both centres and a replacement floor for the main hall at Barry Leisure centre. During the quarter improvements were made to facilities in some Vale's parks with the installation of drinking fountains.</p> <p>6 Intermediate care beds at Ty Dyfan Re-ablement Unit have been commissioned by the Vale of Glamorgan Council and Cardiff and Vale University Health Board utilising the Intermediate Care Fund. The unit which is on track to open in late November, will relieve some of the pressure on hospital beds and support older residents to regain independence. The Re-ablement Unit is suitable for individuals who for short periods of time are likely to need more intensive support with activities of daily living than it would be possible to provide at home. Our aim is to provide a bridge between hospital discharge and home for those people who require additional time in a supportive environment to maximise independence. The multidisciplinary team (MDT) aim to ensure a seamless transition back home within a maximum of 6 weeks of admission into the Re-ablement Unit. Following an assessment of need we will work with the person to develop a re-ablement programme to maximise functional independence. The Re-ablement Unit is resourced 24/7 by in-house care staff from the Vale of Glamorgan. Therapeutic intervention is provided by the Vale Community Resource Service following a needs based assessment. The MDT work with the care staff to ensure that an enabling approach is used when supporting the person.</p>
ICT	<p>In relation to key ICT priorities contributing to this Well-being Outcome, the Social Service Directorate is continuing to make changes to its framework for assessment and planning in individual cases (including processes, practice and case management IT infrastructure) to ensure compliance with the requirements of the Act and to focus more on outcomes and matching needs and services.</p>

	<p>Work is also ongoing to further develop the DEWIS Cymru information portal to ensure it has all the content for this region in place, especially information relating to preventative services for adults and children and we continue to publicise this with our professional colleagues.</p> <p>Work continues in supporting the implementation of the Wales Community Care Information System (WCCIS). As highlighted in Q1, implementation in the Vale will pose resource challenges however a further grant from Welsh Government will now support local implementation.</p> <p>During the quarter, good progress has been made in rationalising the ICT infrastructure across partner sites of the Shared Regulatory Service with the procurement of a new single database system and the move to a single domain. A single telephone number for the service has also been launched. This will ensure consistency of experience and allow for the deployment of a single point of contact for all SRS services.</p>
Customer Focus	<p>Good progress has been made working with independent providers in order to examine how we commission services to ensure best value for money with improved outcomes for citizens. As part of this work, an outcome based commissioning pilot is due to commence 1st October, and Market Position Statement has been commissioned. This work contributes to ensuring ongoing sustainability of the domiciliary care sector.</p> <p>Limited progress has been made in developing a clear charging policy, including accompanying information leaflets to ensure citizens are able to understand the implications of charging for services. This is largely due to the complexity of the issues and legal services have been sought to support this work stream. It is anticipated that a draft charging policy will be developed for Cabinet's consideration during Q3.</p>
Risk	<p>At the last review of the Corporate Risk register in September 2016, the key risks that have a bearing on this Well-being Outcome remain largely unchanged with the exception of the Reshaping risk which has increased to a medium-high rating from a medium rating. Mitigating actions for service and corporate risks continue to be progressed alongside service plan actions.</p> <p>A number emerging service challenges including associated risks will have an impact on the Well-being Outcome including:</p> <ul style="list-style-type: none"> - Managing reductions in funding while minimising wherever possible the impact on front line service delivery; - Providing effective support for a rising population of older people with increasing levels of need, for children and other people with increasing complex health conditions and for families experiencing periods of difficulty and vulnerability. - It is crucial that we develop closer partnership working in order to deliver new models of care and support services across the whole range of need; - The requirement to meet new service requirements with limited public resources available to implement the changes, including those arising from increased statutory obligations continues to present significant challenges. - Ensuring quality of care, managing risk of service failure and increased safeguarding responsibilities; <p>The Vale has a good reputation for managing its budget. However, the continued challenges resulting from the increasing demand for domiciliary care services and the case for extra resources remain significant with a projected £600k overspend for the year. Whilst some work is being done to re-model services to ensure their delivery is by the most effective means, the Council could eventually have to face unpalatable choices around how and what service services were delivered, if the current budget pressures and savings requirements continue to grow.</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	50	Green	Partnership working continues to be a key theme of physical activity initiatives. Examples of significant partnership working currently on-going includes a new badminton initiative with Badminton Wales, a school tennis initiative which is supported by Tennis Wales and a link up with Air Cadets exploring leadership opportunities.
VS/A035: Seek s106 and other funding to deliver improved walking and cycling access to parks and other leisure facilities.	31/03/2017	50	Green	A further meeting was held this quarter with the Section 106 team to exploit opportunities to improve walking and cycling access to parks and other leisure facilities.
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	50	Green	This work is ongoing annually, although limited training takes place during the school summer holidays, which falls within the Q2 reporting period. During this period, rail training was delivered to 60 pupils, this included Active Travel consultation.
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	50	Green	Two vacant sites were advertised in Quarter 2 along with a vacancy for a mobile. All advertised sites comply with the adopted policy.
VS/A38: Seek funding to improve and upgrade the changing facilities at Barry and Penarth Leisure Centres.	31/03/2017	100	Green	Funds for the upgrading of these areas was agreed in September 2016 - Cabinet Minute 3308. Work is due to start in early 2017 and swimming changing villages will be created in both Barry and Penarth Leisure Centres. In addition the dryside changing rooms in Penarth will be fully refurbished.
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	50	Green	A further expression of interest has been received and 2 organisations have been invited to the second stage.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
VS/A040: Commence the production of a Draft Leisure Strategy for the Vale of Glamorgan.	31/03/2017	50	Green	Strategic Leisure has been appointed as the Council's partners to develop a Leisure Strategy.
VS/A041: Increase the completion rates for customers on the exercise referral scheme (2016/17).	31/03/2017	50	Green	The team are working to increase the completion rates of the scheme. However, further developments within the Leisure centres are affecting the provision of the referral scheme and making it more difficult to increase the completion of clients on the scheme. We are continuing to work on regular contacts of clients on the scheme. We have a more robust contact programme now and a settled team who are aiming to increase attrition rates.
VS/A042: Implement the 2016/17 Local Authority Partnership Agreement (LAPA) resulting in increased physical activity opportunities.	31/03/2017	50	Green	The plan is progressing well. A 6 month progress report is currently being completed. The Active Young People end of academic year report has been completed which highlights good partnership working with schools, community clubs/organisations and national governing bodies of sport. There are several examples of positive case studies which highlight the work undertaken with targeted groups such as girls, individuals in areas classed as deprived and the development of young leaders. The results of the recently 2015 School Sport Survey are informing the delivery of this plan in addition to local consultation undertaken.
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	50	Green	Plans are advanced in terms of spending the asset renewal funds available.
VS/A044: Seek to extend the Council's Leisure Management contract with Legacy Leisure to the benefit of both parties.	31/03/2017	50	Green	A formal proposal from Legacy Leisure is expected in November 2016 that will include Management proposals for the proposed Colcot pitch scheme as well as other initiatives.
VS/A045: Work in partnership to develop all-weather 5-a-side football pitches at the Barry Sports Centre site.	31/03/2017	50	Green	Tenders have been received in relation to this scheme but no work will commence until a management plan is in place.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
VS/A046: Seek alternative management arrangements at Jenner Park that reduce costs whilst maintaining a high level of community use.	31/03/2017	50	Green	Options for future management options are being explored. The priority when evaluating options remains reducing the cost of the service whilst ensuring the facility is available to community groups.
AH2				
HS/A022: Work with partners to deliver the Cardiff and Vale Substance Misuse action plan (2016/17 actions).	31/03/2017	50	Green	<p>A community engagement event was undertaken in quarter 2 which focused on the issues of cannabis use, particularly in Barry. This event has instigated further development work that will look at formalising links between the substance misuse open access service and the ASB process.</p> <p>Work has been carried out to map key agencies and services across the Vale to improve communication to residents of the services available to them. This will help increase the opportunities for both existing services users to make use of available diversionary activities to aid their recovery and new services users to be able to access the right services at the right time.</p>

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	50	Green	5 playschemes, 1 Teenscheme, 5 Play Ranger schemes and 9 events were delivered during the summer holidays as a result of the partnership with Town & Community Councils. Due to legislation changes and the reduction in funding, only half day playschemes have been delivered across 3 sites in the Vale which was fewer sites than in previous years. 128 children accrued 380 participations at the schemes. A comprehensive playscheme was delivered for disabled children in partnership with Ysgol Y Deri and was funded by Families First. The service provision included personal care support, nurse, transport and access to specialist play equipment. 82 children accessed the 12 days of disability Playscheme accruing 842 attendances whilst 35 young people accessed the 8 days of disability Teenscheme provision, accruing 353 attendances. Partners involved in these schemes include the Child Health & Disability Team, parents & carers, Ysgol Y Deri and Specialist Health Visitors Play Ranger sessions were funded by Wick Community Council, United Welsh Housing, Dinas Powys Community Association, Llantwit Major Town Council and S106 funding. There were 164 children attending the Play Ranger sessions accruing 494 participations.
AH4				
CS/A004: Evaluate options available to provide a bespoke Family Information Service (FIS) database and record management system.	31/09/2016	100	Green	The Vale FIS has formally declared an interest in the development of a standalone database to be developed by the SSIA/Data Unit, and are part of the development working group.

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	50	Green	The Cardiff and Vale Public Health Plan 2016/17 - 18/19 identifies healthy weight as a first order priority and there is an action plan in place to encourage Cardiff & Vale residents to achieve and maintain a healthy weight. A meeting has taken place with lead officer Dr Suzanne Wood to identify how the Council can support the delivery of the actions outlined in the framework.
BM/A002: Implement the Vale of Glamorgan Food and Physical Activity Framework.	31/03/2017	50	Green	The Physical Activity Framework needs to be worked jointly with Environment and Housing colleagues, to improve active travel and access to leisure services. Physical activity continues to be promoted via numerous initiatives targeting children, young people and adults in line with the Council's Local Authority Physical Activity Plan. Active travel is being promoted in schools via an annual programme of transport education in schools. There is good availability of school sporting facilities for community use, after school hours.
BM/A003: Monitor compliance with the Healthy Eating in Schools (Wales) Regulations.	31/03/2017	50	Green	Public Health is continuing to work with schools on food and physical activity through the healthy schools, and healthy and sustainable pre-school, holiday schemes. A meeting being arranged with Education to discuss the impact of shortening lunch breaks in schools. Whilst this may deliver some savings in the short term, it is reducing opportunities available for children and young people for physical exercise and socialising.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
BM/A004: Increase activity in relation to Cardiff and Vale Tobacco Control Action Plan.	31/03/2017	50	Green	The Cardiff and Vale Public Health Plan 16/17 - 18/19 also identifies tobacco as a first order priority. Currently plans are to meet with the lead officer to identify how the Council can support the delivery of the actions with specific focus on those around parks and open spaces, which requires inter-directorate response. A significant amount of work has already been completed regarding working with younger people in schools and also ensuring outdoor play areas become smoke free. The Public health Wales Bill is now being revised to create more smoke-free areas within public areas, including beaches.

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).	31/03/2017 (work ongoing to 30/09/17)	100	Green	Q2 actions have been completed in in line with project plan ensuring improved information about social care and preventative services available to Vale residents. Dewis Cymru continues to evolve and has been promoted to professionals via a networking event to raise awareness and engage more preventative services.
CS/A007: Further develop the Information, Advice and Assistance (IAA) Service.	31/12/2016	50	Green	Work has continued to support development of the links between the Children and Young People (CYPS) duty team, the Family Information Service (FIS and the FFAL).
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	50	Green	Meetings have taken place and a report has been prepared to present to the regional Steering Group on 10th October to determine a way forward to support the preventative strategy.
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	50	Green	The Population Needs Assessment (PNA) Survey has been circulated and we are proactively supporting its completion. Directorate colleagues are attending planned workshops in Q3 to monitor emerging themes coming through the PNA.
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	50	Green	#It'sAboutMe sessions have been arranged for October. Roll out of the staff charter has been welcomed within the Division, and supporting opportunities through encouraging staff to attend coaching and mentoring courses.
BM/A008: Through the funding opportunities afforded via the Intermediate Care fund, work with partners to develop preventative services that promote independent living.	31/03/2017	50	Green	We have extended the Friendly AdvantAGE programme and a grants scheme has been developed to enable new community initiatives to be supported with their start-up costs.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
BM/A009: Ensure 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	The Corporate Safeguarding Policy has been rolled out across the Council and we are continuing to raise the profile of safeguarding across all service areas. We have engaged with Customer Services Operational Manager to ensure high levels of communication through the Council utilising existing communications mechanisms.
AS/A001: Develop the DEWIS Cymru information portal to ensure it has information relating to preventative services for adults.	31/03/2017	50	Green	Managed through the regional steering group, dedicated officer time has continued to support the implementation of Dewis, and encourage and promote its use, for organisations to upload their information. An event for professionals took place in late September to promote Dewis and demonstrate how it can assist professionals to support citizens.
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 amended. Carers process to be finalised. Further work required with C1V staff to ensure a broader approach to IAA is achieved.
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	Assessment processes have been amended to ensure compliance with SSWB Act. Progress has been made with the carers' process however this is yet to be finalised.
AS/A004: Ensure sufficient numbers of staff (in Adult Services) are appropriately trained in order to deliver the Act.	31/03/2017	50	Green	Staff in Adult Services have received training in the 4 national modules available. Further training planned throughout the year, ensuring staff have sufficient expertise to complete Act compliant assessment and care management.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
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.	31/03/2017 (work ongoing to 30/09/17)	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. The Training team is committed to providing a programme which meets the changing needs of the division.
CS/A009: Implement the 'When I Am Ready' strategy.	31/06/2016	90	Amber	Existing arrangements are in place to improve stability for care leavers. The ratification of the 'When I am ready' strategy is expected to take place by the end of Q3. This work was scheduled to be completed in June 2016.
AH8				
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	50	Green	No additional funding was agreed from the Intermediate Care Fund (ICF) to support new services. Workshops have been initiated with the Cardiff Community Resource Teams (CRTs).
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 Community Resource Teams and developed well-being coordinators linked to GP practices.
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)	50	Green	The Vale Project Steering group is set up and there are ongoing meetings with regional partners and vendor. Plan to present to Cabinet in late Autumn to seek agreement to sign a Deployment Order.
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)	50	Green	Officers continue to support the work of the National Commissioning Board, and are currently providing census information related to Care Homes across Wales.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH11				
BM/A012: Monitor implementation of the Corporate Safeguarding policy across the Council through effective audit.	31/03/2017	25	Red	The next Corporate Safeguarding group will consider proposals for monitoring the implementation of the policy. Some momentum has been lost with the departure of the Operational Manager for Safeguarding, who was the lead officer for conducting this.
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	Following on from frontline training undertaken in Q1, national training is due to commence in at the end of September 2016 in relation to the introduction and use of the Adults Protection Support Order.
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	50	Green	<p>The Vale Integrated Discharge Service (IDS) Service continues to make improved links with Hospital Wards. The Accommodations Solutions Officer is established in the team and offers rapid access to housing, adaptations, house cleaning and supported accommodation.</p> <p>During Q2, the Accommodation Solutions Officer (ASO) has assisted with 25 discharges. Further Intermediate Care Fund (ICF) funding has been made available to support the IDS.</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	50	Green	A Market Position Statement has been commissioned through Intermediate Care Fund (ICF) monies, which will lead to a refreshed Older People's Commissioning Strategy. This is anticipated to also reflect the outcomes of the 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	50	Green	This will be available in the Autumn 2016.

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	100	Green	Formal arrangements are in place and used appropriately to ensure the safety of children exposed to risks of sexual exploitation.
BM/A017: Raise awareness of the behaviours that may indicate Child Sexual Exploitation (CSE), either as a victim or a perpetrator in order to minimise the incidence of CSE.	31/03/2017	50	Green	<p>For outside agencies a tick box has been added to our multi-agency referral form (MARF) which asks if the referrer has any concerns in respect of CSE.</p> <p>There have been a number of training events for staff to include one in August specifically for fieldwork staff and the use of the Sexual Exploitation Risk Assessment Framework (SERAF) assessment tool. There is also training for safeguarding leads in schools and governors in relation to safeguarding overall which includes raising awareness of CSE concerns. Part of any training will include a profile of the usual perpetrators of CSE and there is a rising of awareness of young people who display sexually harmful behaviour. There is awareness raising training in schools for young people.</p>
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	50	Green	The Vale of Glamorgan has reviewed its policy and is continuing to work with Cardiff Council to identify synergies. The various work streams continue to meet and progress the work plans.
AH16				
SRS/A007: Regulate the market place to ensure a fair, safe and equitable trading environment in which vulnerable groups are protected from harm.	31/03/2017	50	Green	Through our annual inspection programme, effective complaints and customer engagement, vulnerable groups are protected from harm. During the quarter, Trading Standards officers assisted Operation Jasper, by identifying and removing Facebook pages that are advertising counterfeit and illicit items for sale.

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	50	Green	The service continues to inspect food businesses in line with the programme of inspections required by the Food Law Code of Practice. In relation to A and B rated inspections the service is on target. Progress has been made in relation to C rated inspections and it is anticipated the service will complete the programme by the end of the financial year. Inspections aim to ensure that premises undertaking commercial activities do not impact adversely on vulnerable people.
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	50	Green	All objectives for quarter 2 have been met. The Health and Safety Enforcement team have completed 43 proactive visits to care homes to review safety arrangements, and re-visits are being undertaken to ensure compliance with formal letters and notices. The visits considered whether work was being done safety, including moving and handling arrangements and equipment, also management of legionella and associated risks.
SRS/A006: Investigate sporadic outbreak notifications of communicable disease and undertake necessary preventative action to reduce the spread.	31/03/2017	50	Green	In Q2, 9 outbreaks were investigated, 6 in Cardiff, 1 in Vale and 2 in Bridgend. These included 1 community outbreak of Crypyosporidium, 1 Salmonella enteritidis which was part of a nationwide outbreak and 1 confirmed Norovirus. The remaining were suspected Norovirus outbreaks associated with schools, care homes and a day centre.

Appendix 2 – Detailed Performance Indicator Information

Objective 7: Encouraging and promoting active and healthy lifestyles.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 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/M050: Reduction in problematic substance misuse of clients accessing substance misuse treatment	N/A	N/A	N/A	N/A	N/A	New quarterly measure. Establish baseline performance during 2016/17.
HS/M051: Improvement in the quality of life of clients accessing substance misuse treatment	N/A	N/A	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	N/A	N/A	N/A	N/A	New quarterly measure. Establish baseline performance during 2016/17.
RP/M057: Number of Communities First clients completing a healthy eating programme who report eating fresh fruit or veg daily.	N/A	N/A	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.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
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.		29	40	Red	N/A	<p>The definition of the PI was amended for 2016-17 hence no comparative data was available for Q2, 2015-16. Due to the change in definition, there is a need to amend the existing target in order to more accurately reflect the amended definition and current performance targets set by the scheme funders, WLGA and Public Health Wales. For the Vale completion target for the scheme is 40% for 2016-17. It is therefore proposed that this target replace the current target of 99%.</p> <p>Whilst Q2 does see a small increase at 29% from Q1 at 28.5%, performance remains below target.</p> <p>The team are working to increase the completion rates of the scheme. However, further developments within the Leisure centres are affecting the provision of the referral scheme.</p>
VS/M049 (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/M052: Percentage of individuals who complete substance misuse treatment	N/A	N/A	N/A	N/A	N/A	New quarterly measure. Establish baseline performance during 2016/17.
CS/M042: 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.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
SI/M050: Percentage user showing satisfaction with the Families First Service accessed.	N/A	N/A	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.
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.	768	409	350	Green	↓	Included within these statistics are attendances for Play Ranger sessions as well as the change in legislation which has meant that we are not able to run play schemes in the way we have previously which has impacted on participation figures when compared to the same quarter last year. During the summer there were 12 days of playscheme provided for disabled children, 8 days provided for disabled young people through the Teen scheme and three inclusive play schemes delivered at Murchfield Community Centre, Western Vale Integrated Children's Centre and St Athan Community Centre. There were also 9 events and 5 Play Ranger schemes delivered.
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	N/A	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	N/A	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	N/A	N/A	N/A	N/A	New quarterly measure. Establish baseline performance during 2016/17.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
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	N/A	N/A	N/A	N/A	New quarterly measure. Establish baseline performance during 2016/17.
SI/M051c New PI: Number of users benefitting from a Families First service: Families	N/A	N/A	N/A	N/A	N/A	New quarterly measure. Establish baseline performance during 2016/17.
HS/M053 (CS/C131): Number of referrals into drug and alcohol services.	N/A	N/A	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	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 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	2.87	2.09	4.5	Green	↑	There were 9 delays in Q1 and 15 delays in Q2. Full year estimate = 4.18. Figures for September have been received but are still to be confirmed.
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.
SCC/033f: Percentage of young people looked after with whom the authority is still in contact who are known to be engaged in education training or employment.	50	51.72	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/M033: 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.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
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.	180.24	171.8	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.	99.81	99.21	99	Green	↑	In the case of the majority referrals, a decision was made within 1 working day.
HS/M054: Percentage of Supporting People clients satisfied with their support.	N/A	N/A	N/A	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	N/A	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	N/A	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	N/A	N/A	N/A	N/A	New quarterly measure. Establish baseline performance during 2016-17.
AS/M017: Number of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	N/A	N/A	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	N/A	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.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
How much have we done? Contextual data						
AS/M020 (SS/M021): Number of adult service users receiving a Direct Payment	146	208	286	Red	↑	At Q2, 208 adult's service users were in receipt of direct payment compared to 146 in the same period last year. Whilst an improvement, this performance remains below our quarterly target of 286.
AS/M021 (SS/M018): Number of new Telecare users	106	173	154.5	Green	↑	Performance exceeded target and we are on track to meet annual target.

Appendix 3 – Additional Performance Indicators (Well-being Outcome 4)

Objective 7: Encouraging and promoting active and healthy

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 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 (DS/M035): Number of sports clubs which offer either inclusive or specific disability opportunities	45	47	24	Green	↑	We are still progressing Insport accreditation with Penarth & Vale Badminton Club.

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

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 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	96.56	95	Green	↓	Performance is slightly down compared to last year during the same time period.
CS/M007: The percentage of looked after children who have had their teeth checked by a dentist during the year	N/A	64.51	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance in 2016/17. This quarter shows an improvement on our Q1 performance of 54.54%
CS/M030: The percentage of all care leavers who are in Education, training or employment at 24 months after leaving care	N/A	43.75	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance in 2016/17. This quarter shows an improvement on our Q1 performance of 37.5 %
How well have we performed?						
RP/M012 (PSR009a): The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people	253	188.67	195	Green	↑	Significant improvement on our performance when compared to the Q2 last year. Reflects continued developments in service aimed at reducing delivery times for customers.
RP/M013 (PSR009b): The average number of calendar days taken to deliver a Disabled Facilities Grant for adults.	178	171.1	176	Green	↑	Improved Q2 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	76.77	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance in 2016/17. This quarter shows a fall in assessment completions within statutory timescales compared to our Q1 performance of 92.42%
CS/M040: The percentage of children supported to remain living with their family.	N/A	97.9	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance in 2016/17. 9 This quarter shows an improvement on our Q1 performance of 96%.
CS/M006: The percentage of re-registrations of children on local authority Child Protection Registers (CPR)	N/A	8.57	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance in 2016/17. This quarter shows an improvement on our Q1 performance of 9.67%
AS/M004: The percentage of adults who completed a period of re-ablement 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	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 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	4.09	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance in 2016/17. This quarter shows an improvement on our Q1 performance of 1.3%.
SCA/002a): The rate of older people (aged 65 or over) supported in the community per 1,000 population at 31 March	N/A	N/A	N/A	N/A	N/A	Data no longer reported to WG and has been deleted. This PI will be no longer be reported.
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)	N/A	N/A	N/A	N/A	N/A	Data no longer reported to WG and has been deleted. This PI will be no longer be reported.
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 (SS/M025): 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
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.

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
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	879.2	N/A	N/A	N/A	New quarterly measure. Establishing Baseline performance during 2016/17. This quarter shows an improvement on our Q1 performance of 905.50.
AS/M016: Average age of adults entering residential care	N/A	80.23	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance during 2016/17. Average age has remained consistent (approximately 80 years) for both quarters.
CS/M025: The average length of time for all children who were on the CPR during the year	N/A	272.90	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance during 2016/17. This quarter shows a slight increase on the average time children spend on the CPR during the year. During Q1 this was 240.62.
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	4.5	2.31	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	45	N/A	N/A	N/A	New quarterly measure. Establishing baseline performance during 2016/17. This quarter shows an improvement on our Q1 performance of 40.6%

Performance Indicator	Q2 Actual 2015/2016	Q2 Actual 2016/2017	Q2 Target 2016/2017	RAG Status	Direction of Travel	Commentary
CS/M031: The percentage of care leavers who have experienced homelessness during the year	N/A	11.81	N/A	N/A	N/A	New quarterly measure. Establishing Baseline performance during 2016/17. This quarter shows a small increase in the number of care leavers who have experienced homelessness compared to 9.11% in Q1. The measure includes all those who are presenting as homeless even where there is a housing solution found the same day. CYPs and Housing work closely to respond quickly to individuals experiencing homelessness and this may sometimes involve accessing temporary accommodation options such as Ty Lolo Hostel. We maintain a commitment to not using bed and breakfast accommodation for young people under the age of 18 years and have achieved this in all circumstances in the last 12 months with the exception of one individual for whom all other options had been exhausted. Monitoring and support in these circumstances is increased
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.
Measure 31 (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.	97.14	98.67	98	Green	↑	Q2 performance is an improvement on the same time period last year.