

Meeting of:	<b>Healthy Living and Social Care Scrutiny Committee</b>
Date of Meeting:	<b>Wednesday, 11 December 2019</b>
Relevant Scrutiny Committee:	Healthy Living and Social Care
Report Title:	Quarter 2 2019/20 Performance Report: An Active & Healthy Vale
Purpose of Report:	To present quarter 2 performance results for the period 1st April 2019 to 30th September 2019 for the Corporate Plan Well-being Outcome 4, 'An Active and Healthy Vale.'
Report Owner:	Lance Carver, Director of Social Services and Sponsoring Director for Well-being Outcome 4, 'An Active and Healthy Vale.' .
Responsible Officer:	Lance Carver, Director of Social Services and Sponsoring Director for Well-being Outcome 4, 'An Active and Healthy Vale.' .
Elected Member and Officer Consultation:	Consultation has been undertaken with designated Corporate Risk Owners, the Insight Board and Corporate Management Team. The performance report applies to the whole authority. 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 Cabinet. Consultation has been undertaken with relevant Sponsoring Directors, Corporate Management Team and the Head of Policy & Business Transformation.
Policy Framework:	This is a matter for Executive decision by Cabinet.
<p><b>Executive Summary:</b></p> <ul style="list-style-type: none"> <li>The performance report presents our progress at quarter 2 (1st April to 30th September 2019) towards achieving our Corporate Plan Well-being Outcomes for year 4 of the Corporate Plan 2016-20 as aligned to Well-being Outcome 4, 'An Active and Healthy Vale'.</li> <li>We continue to make progress in delivering our Corporate Plan in relation to the Well-being Outcome 4 Objectives of, 'Encouraging and promoting active and healthy lifestyles' and 'Safeguarding those who are vulnerable and promoting independent living'. This has contributed to an overall <b>AMBER</b> status for the Outcome at quarter 2 (Q2).</li> <li>87% (60) of planned activities aligned to an, 'Active and Healthy Vale' have been attributed a Green performance status reflecting the good progress made during the quarter. 1% of actions were allocated an amber status and 12% (8) of planned actions have been attributed a Red status. These performance exceptions related to reviewing the Information, Advice and Assistance Service, undertaking actions to support the provisions of the Public Health Wales Act</li> </ul>	

2018, further strengthening and extending shared working between the Contact Centre and the health Board to integrate services, implementing a Team around an individual approach to Dementia services, working with partners to develop a Vale locality model, exploring the development of an integrated model for Long Term Care Service, undertaking interventions in accordance with the Food Law Enforcement Service Plan and continuing a programme of training and awareness of Child Sexual Exploitation, slavery and trafficking.

- Of the 24 performance measures aligned to this Well-being outcome, data was reported for 8 measures where a performance status was applicable. 37.5% (3) measures were attributed a Green performance Status, 12% (1) an Amber status and 50% (4) a Red status. A performance status was not applicable for 16 measures including a number of annual indicators and those establishing baseline performance for the year.
- In relation to our measures, there is a need to improve our performance in relation to the Percentage of care and support plans for adults that were reviewed within agreed timescales (CPM/207), the percentage of care and support plans for children that were reviewed within agreed timescales' (CPM/208) and the numbers of new Telecare users (CPM/209) and the rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over (CPM/057).
- The report seeks elected members' consideration of Q2 performance results as aligned to Well-being Outcome 4 and the proposed remedial actions to address areas of identified underperformance. Upon consideration, the Scrutiny Committee is recommended to refer their views and any recommendations to Cabinet for their consideration.

## Recommendations

1. That members consider performance results and progress towards achieving key outcomes in line with our year 4 priorities for 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 remedial actions to be taken to address areas of underperformance and to tackle the key challenges identified, with their views and recommendations referred thereafter to Cabinet for their consideration and approval.

## Reasons for 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 2015 that it maximises its contribution to achieving the well-being goals for Wales.

## 1. Background

- 1.1 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.
- 1.2 As part of the review of its Performance Management Framework, the Council has adopted a 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 Well-being Objectives for the Council.
- 1.3 On a quarterly basis, each Scrutiny Committee receives performance information linked with the Council's Well-being Outcome with which that Committee is aligned. In addition, Corporate Health priorities are also considered by the Corporate Performance and Resources Scrutiny Committee. Work has continued with Officers and a Member Working Group to further develop and enhance our Performance Management Framework arrangements and performance reporting in line with our duties as outlined in the WBFG (Wales) Act and the LGM with reference to the wider local government agenda.
- 1.4 **Appendix A** outlines our performance for the period 1st April to 30th September 2019 as aligned with Well-being Outcome 4, 'An Active and Healthy Vale. The quarterly performance report presents the reader with a more accessible view of performance in relation to our priorities and draws together information from a wide range of sources. An additional overall Corporate Plan Summary Report provides an overview of the contribution to the national Well-being Goals and

- 1.5** overall progress against the Corporate Plan’s Well-being Objectives and Corporate Health. This overview has been designed for use by all elected members, Council staff and customers and will be appended to the Cabinet and Corporate Performance and Resources Scrutiny quarterly performance report. The Corporate Plan Summary Report is referenced in the Background Papers to this report.
- 1.6** The performance report is structured as follows:
- 1.7 Section 1:** States the overall RAG status attributed to the Well-being Outcome reflecting the progress made in delivering our priorities.
- **Position Statement:** Provides an overall summary of performance in relation to Corporate Health and highlights the main developments, achievements and challenges for the quarter.
  - **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 actions and measures under each Well-being Objective to reflect overall progress to date and contributes to the overall RAG status for the Well-being Outcome.
  - **Performance Exceptions:** For ease of scrutiny, any actions or PIs attributed a Red status are presented here including a direction of travel and commentary on the performance.
  - **Achievements:** Highlights the key achievements to date in delivering the intended outcomes for the Well-being Outcome.
  - **Challenges:** Highlights the key challenges that are or could impact on achieving the intended outcomes for the Well-being Outcome.
  - **Section 2:** Corporate Health - Managing our Resources
  - 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 People, Finance, Assets, ICT, Customer Focus and Risk Management (both service level and corporate risks) contributing to the Corporate Plan Well-being Outcome.
  - **Glossary:** 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 and actions by allocating a RAG performance status.
  - **Appendices:**
  - **Appendix 1:** Provides, by Well-being Objective, detailed information relating to the Service Plan actions which have contributed to Corporate Plan actions.
- 1.8 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 any annually reported performance indicators will be reported at

end of year when data becomes available. In addition, new performance indicators that have been introduced in 2019 as part of the Council's revised Performance Management Framework will not have data available until end of year 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. 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.

## 2. Key Issues for Consideration

- 2.1 An overall **AMBER** RAG status has been attributed to Well-being Outcome 4, 'An Active and Healthy Vale', to reflect the progress made towards achieving improved outcomes for residents and our customers during the quarter.
- 2.2 In relation to the 69 planned activities aligned to this Well-being Outcome for 2019/20, 87% (60) of planned activities aligned to an, 'Active and Healthy Vale' have been attributed a Green performance status reflecting the good progress made during the quarter. 1% of actions were allocated an amber status and 12% (8) of planned actions have been attributed a Red status. These performance exceptions related to reviewing the Information, Advice and Assistance Service, undertaking actions to support the provisions of the Public Health Wales Act 2018, further strengthening and extending shared working between the Contact Centre and the health Board to integrate services, implementing a Team around an individual approach to Dementia services, working with partners to develop a Vale locality model, exploring the development of an integrated model for Long Term Care Service, undertaking interventions in accordance with the Food Law Enforcement Service Plan and continuing a programme of training and awareness of Child Sexual Exploitation, slavery and trafficking.
- 2.3 Of the 24 performance measures aligned to this Well-being outcome, data was reported for 8 measures where a performance status was applicable. 37.5% (3) measures were attributed a Green performance Status, 12% (1) an Amber status and 50% (4) a Red status. A performance status was not applicable for 16 measures including a number of annual indicators and those establishing baseline performance for the year.
- 2.4 In relation to our measures, there is a need to improve our performance in relation to the Percentage of care and support plans for adults that were reviewed within agreed timescales (CPM/207), the percentage of care and support plans for children that were reviewed within agreed timescales' (CPM/208) and the numbers of new Telecare users (CPM/209) and the rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over (CPM/057).
- 2.5 A detailed report outlining the progress made this quarter towards achieving Well-being Outcome 4 is provided at **Appendix A**.

- 2.6 An overview of overall progress against the Corporate Plan Well-being Objectives and how this contributes to the national Well-being Goals is provided in the [Corporate Plan Summary Report](#)

### **3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?**

- 3.1 Performance Management is an intrinsic part of corporate governance and integrated business planning which underpins the delivery of the Council's Corporate Plan and its Well-being Outcomes. Our Corporate Plan has been structured around the Well-being of Future Generations (Wales) Act 2015, through the development of four Well-being Outcomes and eight Well-being Objectives. By aligning our Well-being Outcomes in the Corporate Plan with the Well-being Goals of the Act, this will enable us to better evidence our contribution to the Goals.
- 3.2 Performance reporting is an important vehicle for showing our progress, not only in terms of impacts across the national well-being goals through achievement of our well-being objectives but also in terms of the changes and improvements made in our approach to integrated planning.
- 3.3 The five ways of working are a key consideration in our corporate Performance Management Framework ensuring that we continue to focus on working differently and in an inclusive way to challenge why, what and how we respond to our key performance challenges.

### **4. Resources and Legal Considerations**

#### **Financial**

- 4.1 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.
- 4.2 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.

#### **Employment**

- 4.3 There are no direct workforce related implications associated with this report. However, there are a number of issues contained within the performance report that if not effectively managed have the potential to impact on our staff establishment and performance overall. This may in turn impact adversely on achievement of key outcomes associated with the Corporate Plan and our Corporate Health priorities.

### **Legal (Including Equalities)**

- 4.4 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.
- 4.5 The Well-being of Future Generations (Wales) Act 2015 requires the Council to set and publish annual Well-being Objectives that maximise its contribution to achieving the Well-being goals for Wales and report its progress in meeting these.

### **5. Background Papers**

[Corporate Plan Summary Report](#)



## Our overall RAG status for 'An Active and Healthy Vale' is AMBER

### 1.0 POSITION STATEMENT

During quarter 2, we have continued to make good progress in delivering our Corporate Plan priorities in relation to the Well-being Outcome 4 Objectives of, 'Encouraging and promoting active and healthy lifestyles' and 'Safeguarding those who are vulnerable and promoting independent living'. Overall this has resulted in an overall AMBER status for the outcome at quarter 2.

87% of planned actions aligned to 'An Active and Healthy Vale' have been attributed a Green performance status reflecting that good progress has continued during the quarter. 1% of actions were allocated an amber status whilst 12% of planned actions were have been attributed a red status.

Of the 24 performance measures aligned to this well-being outcome, eight measures could be allocated a RAG status. Three of these measures were attributed a green RAG status and were in relation to the 'number of sports clubs which offer either inclusive or specific disability opportunities', the 'percentage of re-registrations of children on local authority Child Protection Registers (CPR)', and the 'Percentage of care and support plans for children that were reviewed within agreed timescales (WG interim data set).' One was allocated an amber status in relation to the 'percentage of adult protection enquiries completed within statutory time-scales'. The final four measures were allocated a red status, and these were in relation to the 'number of new Telecare users', the 'Percentage of care and support plans for adults that were reviewed within agreed timescales', the 'Percentage of care and support plans for children that were reviewed within agreed timescales' and The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.'

### 1.1 PERFORMANCE SNAPSHOT CPM

ACTIONS				
Our performance against the Corporate Plan actions is on track for delivery, giving us an overall <b>GREEN</b> RAG status for this outcome				
Service Plan Actions				
Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total
			0	16
Objective 8: Safeguarding those who are vulnerable and promoting independent living				
			N/A	Total
			0	53

PERFORMANCE MEASURES				
Our performance against performance measures is on track, giving us on overall <b>AMBER</b> RAG Status against this outcome				
Performance Measures				
Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total
			10	11
Objective 8: Safeguarding those who are vulnerable and promoting independent living				
			N/A	Total
			6	13

Total for the Outcome				
			N/A	Total
			0	69

Total for the Outcome				
			N/A	Total
			16	24

## 1.2 Objective 7: Encouraging and promoting active and health lifestyles

Of the 11 indicators identified for Objective 7, ten are annual and one is quarterly. Data was only available in relation to CPM/028: Number of Sports Clubs offering inclusive or specific disability opportunities was attributed a green status.

Corporate Health Actions	Action		Direction of Travel compared to previous quarter status
	Service Plan Actions	Action Status	
<b>AH1:</b> 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)	5		
<b>AH2:</b> Work with partners to deliver the Cardiff and Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions. (2017/18)	1		
<b>AH3:</b> Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families. (2019/20)	1		
<b>AH4:</b> 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)	3		
<b>AH5:</b> 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)	6		
<b>AH6:</b> Achieve Green Flag status for 7 parks as a mark of excellence, demonstrating good amenities and community involvement in the parks. (2017/18)	<b>Action Completed</b>		

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

Of the 13 indicators identified for Objective 8, data was available for 6 measures this quarter and 2 were attributed a Green RAG status. These related to CPM/060 and CPM/057. CPM/056 was attributed an amber status and the two remaining actions CPM/207 and CPM/208 were attributed a red status.

Corporate Plan Actions	Action		Direction of Travel compared to previous quarter
	Service Plan Actions	Action Status	
<b>AH7:</b> 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"> <li>• provision of information</li> <li>• advice and assistance services</li> <li>• eligibility/assessment of need</li> <li>• planning &amp; promotion of preventative services</li> <li>• workforce</li> <li>• performance measures (2016/17)</li> </ul>	15		
<b>AH8:</b> Improve access to health and social care services by improving the speed, simplicity and choice of how to access services. (2018/19)	9		
<b>AH9:</b> Work with partners to progress the integration of adult social care and community health services. (2018/19)	8		
<b>AH10:</b> Explore options for single integrated ICT systems and integrated budgets across the Cardiff and Vale region for social care. (2018/19)	4		
<b>AH11:</b> Develop and implement a corporate policy on safeguarding to provide a clear strategic direction and lines of accountability across the Council. (2016/17).	6		
<b>AH12:</b> 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		
<b>AH13:</b> Review accommodation with care options for older people and develop our commissioning strategy for future years. (2016/17)	1		
<b>AH14:</b> Work with partners through the Cardiff and Vale Local Safeguarding Children's Board to develop a Child Sexual Exploitation Strategy. (2016/17)	2		
<b>AH15:</b> Improve procedures with providers of nursing, residential and domiciliary care providers to enable early intervention and prevent the escalation of incidents. (2017/18)	2		
<b>AH16:</b> 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)	5		

## 1.4 Performance Exceptions

### 1.4.1 Objective 7: Encouraging and promoting active and healthy lifestyles

**Corporate Plan Action AH004: 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.**

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
RM/A028: Review the effectiveness of the Information, Advice and Assistance Service and its associated pathways in relation to the provision of Family Information and Support.	25		↔	Temporary Manager Vacancy within FACT has resulted in postponement of review to quarters 3 and 4. Recruitment process in place.

**Corporate Plan Action AH005: Work with the Cardiff and Vale Health and Well-being Board to undertake a range of actions to prevent and tackle obesity and encourage health eating and healthier lifestyles.**

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
SRS/A031: Undertake actions to support the provisions of the Public Health (Minimum Price for Alcohol) (Wales) Act 2018.	0		↔	As advised for Q1 there has been a delay in implementation of the legislation and as a result, we await news from Welsh Government with regard to when this is likely to occur and as a result when the engagement with businesses and distribution of guidance materials will commence. Again, this appears unlikely until Q4.

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

**Corporate Plan Action AH008: Improve access to health and social care services by improving the speed, simplicity and choice of how to access services.**

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
PD/A032: Continue to strengthen and extend shared working between C1V and the Health Board to provide a more integrated service for the public and better resilience.	30		↑	Operational cooperation continues in the delivery of key projects. A review of the potential for closer integration with Contact One Vale, Adult Services Intake and Assessment and Cardiff and Vale Health Boards Communications Hub has been initiated under the banner of Wellbeing Matters.

**Corporate Plan Action AH009: Work with partners to progress the integration of adult social care and community health services.**

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
AS/A042: Implement a 'Team around an individual' approach to Dementia Services.	25		↔	The service model has been reviewed and clinical leadership will change as a consequence of pending retirement. Challenges in getting the model and staffing correct. Ongoing discussions to remedy this and ensure that the planned project outcomes are delivered accordingly.
AS/A043: Work with partners to develop a Vale locality model in response to the recommendations of the Parliamentary Review.	25		↑	Funding only confirmed at end of September through Transformation monies. Research into other models of Alliancing being explored and set up visits for early in Qtr 3, plans to then recruit Project Management/Consultancy resource to progress this work under Transformation scheme for the next 12 - 15 months.
AS/A044: Explore the development of an integrated model for Long Term Care Service and Nurse Assessor Team at Ty Jenner.	25		↔	Health partners are not in a position to jointly fund the Integrated Team Manager post and are uncomfortable with the HR rules meaning that the Vale Funded Integrated Manager post will be ringfenced to VOG staff only in first instance, so consultation events on hold. Meeting planned with UHB OD, HR and leadership team to endeavour to provide reassurance and move forward in Qtr 3 and 4.

**Corporate Plan Action AH016: 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)**

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
SRS/A035: Undertake interventions where appropriate in accordance with the Food Law Enforcement Service Plan.	25		↑	The Food Law Enforcement Service Plan obtained approval by SRS Joint Committee on 10th September 2019. There remains a number of vacancies within the service which presents a challenge in relation to the completion of the programme of interventions.
SRS/A036: Continue a programme of training and awareness of Child Sexual Exploitation, slavery and trafficking to protect vulnerable residents.	25		↓	Following appointment of the policy officer to a Team Manager role in the SRS this action has been pushed back to quarters 3 and 4. Recruitment of a replacement is underway, and this action will form part of the role targets for the last two quarters.

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	Direction of Travel	Commentary
CPM/057 (SSM/019) (PAM/025) (SCA/021): The	2.33	2.11	3.5	↑	Although our performance for the first six months of the

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	Direction of Travel	Commentary
rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.					financial year (April-September 2019) is within the annual target of 3.5 our performance reporting for this measure is done cumulatively. Therefore, we anticipate that within the next two quarters our DTOC figures are likely to increase further resulting in us no longer performing within target. Based on quarter two's performance we project a cumulative annual performance of 3.74 which would give us a red status at end of year against target. Performance in this area continues to be a significant ongoing challenge due to capacity within and the viability of the domiciliary sector which impacts negatively on delayed transfers of care. In order to address these pressures, we are working with the independent home care sector and our own reablement care service to increase this capacity.
CPM/207 (AS/M017): Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	No data reported	56.49%	85%	N/A	Adult services continue to invest in the review team to prioritise reviews of Care and Support within agreed timescales. This figure is not considered to reflect an accurate position of the percentage of reviews undertaken within timescale. Adult services are focussing on the recording of planned and completed reviews over the coming months and expect the accuracy and performance to improve.
CPM/208: Percentage of care and support plans for children that were reviewed within agreed timescales (WG interim data set).	No data reported	87.01%	91%	N/A	Although the target was narrowly missed; all reviews have been completed albeit not in the recommended timescales.
CPM/209 (SS/M018): Number of new Telecare users.	No data reported	168	375	N/A	This is a local measure, which continues to be rolled out; to further promote the

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	Direction of Travel	Commentary
					awareness and take up of Telecare services amongst our service users to remain living independently at home for as long as possible. 134 TeleV & 34 TeleV+ (cumulative figure = 336).

## 1.5 OUR ACHIEVEMENTS

- The Vale of Glamorgan Council continues to have high participation levels in physical activity and sport. During quarter 2, there were 5,115.5 visits to local authority sport and leisure facilities during the quarter per 1,000 population which is an increase on the previous year (of 4,598.9) and has exceeded the target of 2,842. To enhance visitor numbers, we have continued to focus on improving the overall condition and the quality of facilities at our Leisure Centres. Work has progressed well in relation to the refurbishment of Penarth Leisure Centre's wet changing facility which will open during quarter 3. The Leisure Strategy has been approved by Scrutiny Committees and is awaiting adoption by Cabinet in October. We continue to focus on developing the range of leisure and community facilities to enhance participation levels. For example, during quarter 2 new partnerships have been established to enable the self-management of Bowling Greens that will commence in October. There are now further proposals being considered in relation to netball facilities.

We have continued to work with our partners in Public Health to deliver the Public Health Wales Agenda. During the quarter some key highlights have included:

- Continuing to work with schools as a priority to ensure compliance with the Healthy Eating in Schools (Wales) Regulations and all primary schools remain compliant with the nutritional regulations whilst all secondary schools remain compliant with food-based standards from the regulations. Our current menu has a certificate for the year, that evidences our compliance with these regulations/standards.
- Work continues with local communities to maximise our existing assets including improving access to green spaces, local playing facilities and community centres, enabling them to offer increased opportunities to participate in leisure and physical activity. 8 Green Flags applied for this year and all have been retained and the Vale now has 25 Green Flags in total and this includes community Green Flags. This is joint top performance (with Cardiff Council) in Wales.
- Funding through the Welsh Government's Holiday Hunger programme enabled the Healthy Living Team to deliver a Healthy Holiday Hydration initiative that promoted hydration whilst reducing single use plastic through the provision of reusable water bottles provided to children who attended the sessions. Fresh fruit was also provided at some sessions.
- Active Travel improvements including walkways and cycleways continue to be delivered across the Vale and these are being actively promoted to encourage more active travel lifestyles. Several transport schemes including the new five-mile lane have incorporated active travel routes and core active travel funding is being used to improved existing Active Travel routes.

- We continue to successfully deliver a comprehensive play programme for children and their families. During quarter 2, we successfully delivered a range of play activities across the Vale of Glamorgan. During the summer there were more than 4,900 participations in play activities delivered by the Healthy Living Team in partnership with other organisations including Dinas Powys and Wick Community Councils, United Welsh Housing, the Rotary Club of Barry, MOD St Athan, Flying Start, Vale Housing, POBL and the Family Information Service. In addition, there were 31 open access community sessions delivered across 18 venues with 392 children/young people registered. Funding through the Welsh Government's Holiday Hunger programme enabled the Healthy Living Team to deliver a Healthy Holiday Hydration initiative that promoted hydration whilst reducing single use plastic through the provision of reusable water bottles provided to children who attended the sessions. Fresh fruit was also provided at some sessions. This initiative was also delivered at the Families First Holiday Club (disability playscheme) who welcomed Rebecca Evans, Minister for Finance and Trefnydd and Cllr Lis Burnett to visit the scheme and see the children enjoy making fruit kebabs as part of the Holiday Hunger programme. 76 disabled children aged 4 – 11 years attended the Holiday Club

with a total of 374 participations over 12 days. Children were also able to enjoy fresh fruit snacks at the Dinas Powys Playscheme thanks to a daily donation from Tesco.

- The ongoing development of Welsh Community Care Information System (WCCIS) has continued, with the initiation of work in relation to piloting a financial module. During the quarter, work has been undertaken to collate the financial information needed to migrate this to the new module on WCCIS. We have gained agreement for a part-time temporary Project Manager to be appointment to progress the work involved with establishing this module.
- We continue to successfully roll out the Childcare Offer universally to three and four year-olds across the Vale of Glamorgan. During quarter 2, 849 applications for the Child Care offer were received from Vale of Glamorgan parents. Through the Childcare Offer scheme there are 182 childcare providers who are currently registered to participate in the programme, which is an increase on the previous quarter. Now that the Childcare Offer has been rolled out across Wales, a national marketing campaign is due to start in late October. Plans are also developing to put in place a centralised digital system to process all applications, payments and monitoring.
- The Shared Regulatory Services (SRS) has continued to explore the requirements and scope of becoming a training centre to deliver Level RSPH infection control courses for the region to prepare businesses for the forthcoming changes/requirements set out in the Public Health Bill. We are currently considering best utilisation of resources in order to manage course administration and delivery.
- We continue to make positive progress in meeting the requirements of the Social Services and Well-being (Wales) Act. Good progress has been made in the development of a regional pool of policies for children and adults in line with the requirements of the Act, with the first phase of our implementation plan close to completion. A number of policies have now been produced for children's service to bring them in line with the policies for adults and these are now undergoing final review. We are looking to recruit to the post of Regional Policy Officer to help support this area of work with interviews underway. Meetings have been scheduled with ICT to consider options available for developing a website that is accessible to both practitioners and the public to be kept informed about policies, procedures and practice.
- We have continued to develop clear and coherent Continuing Health Care Processes (CHC). Having reviewed our processes it has been decided that there is no longer the need to recruit a Senior Social Worker to focus on Continuing Health Care as staff have demonstrated they feel more confident in this area. Reviews continue to be ongoing to provide outcomes for individuals that are eligible for CHC funding by the NHS. As a result, the team are effectively managing the workflow in this area, and as a consequence savings are being achieved by signposting eligible CHC patients accordingly. Ongoing monitoring of the process will remain in place to ensure that clear and appropriate processes are being applied.
- The Customer Contact Centre remains pivotal to the work of the Vale Locality, Adult Social Care services and regional community health services. We have continued to enhance our referral management processes at the Customer Contact Centre. In relation to Intake and Assessment, referral pathways have been re-established to remove blockages within the referral pathway.
- In relation to further implementing a preferred option for the Contact Centre to act as a single point of contact, there has been ongoing work to re-brand the service to a 'Well-being Matters' service. The Joint Staff Forum is established to support this stream of work to further improve the patient/citizen experience at the 'front door'.
- Enhanced Outbound Officer posts (Well-being Officers) have been created with C1V (Contact Centre) to provide a consistent response to all adult service contacts including an improved Information, Advice and Assistance service as well as rapid decision making/progress to social work interventions. Full establishment of these Well-being Officers will be in quarter 3.
- We have continued to focus on enhancing the Information, Advice and Assistance model within Adult Services, as four of the existing Customer Service Representatives within C1V are being upgraded to Well-being Officers as part of the Outbound Team to offer enhanced information as well as assistance and advice following proportionate assessments via telephone call. In addition, we are recruiting two newly funded Well-being Visiting Officers to provide outreach support for the Information, Advice and Assistance service and Non-complex Care and Support (including provision of Occupational Therapy equipment) to enhance independent living and well-being.
- To support this work, referral pathways as part of intake and assessment (adults) within C1V (Contact Centre) have been re-established to make the process more seamless and remove any blockages within the referral pathway. Princess of Wales referrals are now directed towards the Integrated Discharge Service.
- Managing the stability of placements for children and young people remains a key priority for Social Services. Placement instability is more likely to have a negative impact on the child/young person's well-being in terms of social/physical health as well as their educational outcomes. Our performance in this area continues to remain strong, as during quarter 2 just 2.3% of Children Looked After experienced three or more placements during the year compared against a target of 9%. By focusing on improving the stability of placements we have also been able to minimise the cost of more expensive placements.

<ul style="list-style-type: none"> <li>We have continued for focus on supporting our Care Leavers to access education, employment and/or training opportunities. During quarter 2, 75% of all our care leavers were in education, training or employment, 24 months after leaving care compared to a target of 53%.</li> </ul>
<p>Safeguarding continues to be a core focus across all Council services. Some key developments during quarter 1 have included:</p> <ul style="list-style-type: none"> <li>Continuing to monitor and report on compliance with the Safer Recruitment Policy. Overall our compliance corporately during quarter 2 was 100%, which is the same as the previous year and for school positions our compliance for the quarter 2 period was 97% compared to 93% in the previous year (April-September 2018). which is an improvement on the previous year. We continually strive to improve compliance levels across the Board and during quarter 2 changes were agreed with schools in consultation to further strengthen our safer recruitment mechanisms and these enhancements were implemented in September. The improvements focused on strengthening the escalation process and the use of the risk assessment form in exceptional circumstances. Work continues to progress with the review of the Corporate Safeguarding Policy to further assist with our monitoring of compliance with the Corporate Safeguarding Policy.</li> <li>Work continues to progress well in relation to finalising the All Wales Safeguarding Procedures with the procedures due to be launched in quarter 3 (November 2019).</li> <li>We have continued to contribute to the development of a Regional Exploitation Strategy that encompasses all aspects of exploitation (including child sexual exploitation). The action plan to support the strategy is currently under development.</li> </ul>
<ul style="list-style-type: none"> <li>The piloting of a GP Triage Scheme is part of a Transformation Bid project that will support us in implementing the recommendations of the Parliamentary Review for Health and Social Care. This Transformation project continues to make steady progress where we are exploring the option of using the Contact Centre to host a GP triaging service to promote the General Medical Services (GMS). The Head of Adult Services/Locality Manager leading on this work that will see us bringing together primary care and social prescribing using the Customer Contact Centre as a platform. Work has currently focused on working with GP practices in the Eastern Vale to understand and map demand with ongoing data analysis and clinical models being developed. Given the nature of work, we are focusing on managing risks and reassuring stakeholders whilst ensuring that these new functions are integrated and/or provided by health colleagues. Our joint project team continues to work closely through these risks and any barriers to find sustainable solutions to information sharing and governance arrangements.</li> </ul>
<ul style="list-style-type: none"> <li>We have continued to work effectively with Housing Services to implement our 'Accommodation with Care' approach to support and enhance independent living. For example, the Penarth Older Persons with Care project has progressed to the 2<sup>nd</sup> Stage of financial appraisal. £120K of Integrated Care Funding has been secured to facilitate this project work. The Project Management Group has met twice, and legal advice has been sought to secure the services of a preferred Registered Social Landlord partner to cost and prepare a pre-planning application for the delivery of an extra-care facility.</li> </ul>

## 1.6 OUR CHALLENGES

<ul style="list-style-type: none"> <li>We continue to deliver a play programme across the Vale of Glamorgan against a back drop of rising demand and pressure on our resources. The challenge is how we continue to sustain the delivery of a play programme in at a time when funding continues to diminish. Delivering an ambitious and comprehensive play programme that is in line with the requirements of new legislation will continue to be a challenge at a time when budgets are being squeezed. To address this, we will continue to look at new ways of engaging and working with community groups and key stakeholders to develop and deliver more sustainable play opportunities in the future.</li> </ul>
<ul style="list-style-type: none"> <li>Sustaining and improving participation levels in physical activity at a time of diminishing resources continues to be a challenge. Despite successfully securing £305K of funding to deliver the Local Authority Partnership Agreement (LAPA) for 2019/20 in real terms there has been a cut in our budgets. This has mainly affected the Aquatics programme that has seen a 50% cut and the Active and Young People's programme that has seen a 5% cut compared to the previous year. Although some budgetary cuts were anticipated and planned for (in relation to the Active Young People Programme), the cuts associated with Aquatics have potential implications for delivering free swimming sessions through the Leisure Centres. Our focus will continue to be on how we bring together all aspects of leisure and physical activity under the umbrella of a Leisure Strategy that will be used as a vehicle to maximise opportunities and our resources to increase physical activity and participation rates across the Vale. We will also continue to work closely with key stakeholders such as Sport Wales.</li> </ul>
<ul style="list-style-type: none"> <li>We have worked effectively in partnership with The Cardiff and the Vale Health and Well-being board to promote healthy eating and lifestyle messages, the ability to effectively change can be slow and difficult to evidence. We</li> </ul>

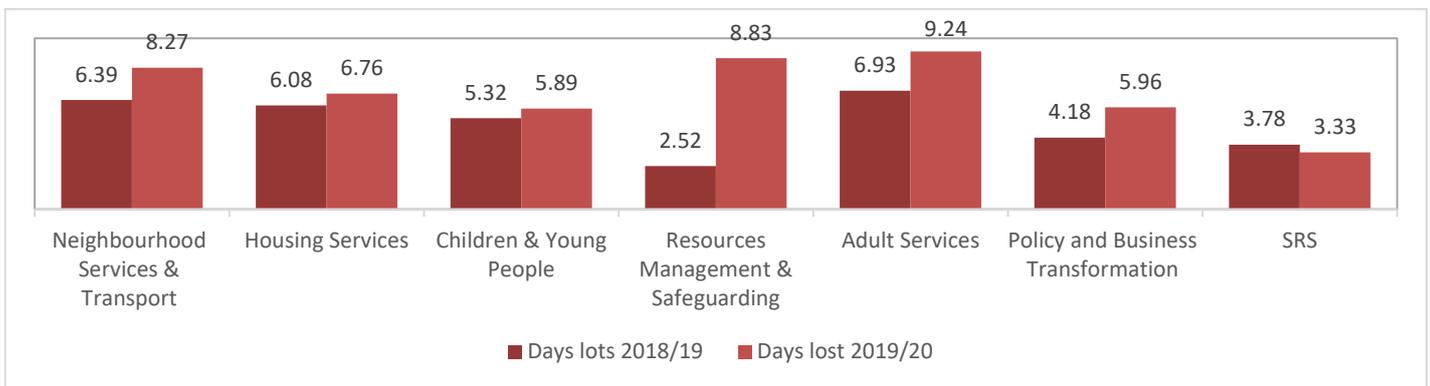
<p>continue to ensure that we are maintaining a high profile on all relevant Board meetings to ensure that we can have a say on emerging initiatives so that we can have support and influence over developments.</p>
<ul style="list-style-type: none"> <li>• Sustaining and improving levels of service delivery and performance whilst managing demand for our services at a time when resources are diminishing is increasingly more challenging. This is particularly relevant in the context of the growing demand for services that is being experienced across the board (and within Social Services). Demographic changes are having a significant impact on our capacity to meet rising demand for our services. There are increasing numbers of children and young people and their families and adults are presenting with more complex needs which is affecting our ability to meet those needs in the current financial climate.</li> </ul>
<ul style="list-style-type: none"> <li>• Managing customer expectations in a climate when there is a high demand for our services continues to be a challenge in relation to accessing health and social care services. There has continued to be investment and focus on improving the simplicity and the choice of how our citizen access our health and social care services via our Single Point of Access within the Customer Contact Centre (C1V). Although we have further integrated health and social care services through the ongoing development of the GP Triage Service and Get Me Home projects, there are some challenges to overcome in terms of their development in relation to joining up processes, information systems, enhancing closer operational management, staff engagement and ways of working and further strengthening the shared brand 'Well-being Matters'. We continue to focus on reassuring our stakeholders to manage the risks associated with this work to ensure functions are integrated and/or provided by our Health colleagues. However, given that we are operating across organisational boundaries, we have limited power to resolve some issues in terms of recruitment and systems. Our joint project team continues to work through these risks and barriers and find sustainable solutions to complex information sharing and governance arrangements.</li> </ul>
<ul style="list-style-type: none"> <li>• Ability to continue to focus on the reduction in delayed transfers of care remains a challenge. Although we have continued to place a significant emphasis on improving how we integrate and co-ordinate health and social care services to minimise any delayed transfers of care, our performance in this area continues to be a challenge. The availability of domiciliary care has impacted on our performance in this area. The service continues to look at ways through the Integrated Discharge Service it can address any issues. The current delays in the system have been associated with brokerage and availability of domiciliary care agencies to take on the packages.</li> </ul>
<ul style="list-style-type: none"> <li>• Our capacity to meet the growing demand for children and family support services to ensure that needs are met whilst minimising duplication in service delivery is a challenge. To help address this we have invested resources to increase our capacity at the 'front door' to improve the timeliness of assessments of need and risk and enable appropriate signposting to other services. This has been an effective way of preventing the escalation of issues by seeking to support families at the lowest tier.</li> </ul>
<ul style="list-style-type: none"> <li>• There is a lack of capacity and resilience within local markets to fulfil the requirements of domiciliary care and the availability of placements for Children Looked After. Monitoring the quality of our externally commissioned service providers is increasingly more challenging due to insufficient capacity and resources to undertake this work, which is further compounded by the volatility of external markets.</li> </ul>
<ul style="list-style-type: none"> <li>• Timescales for adhering to the Deprivation of Liberty (DoLS) continues to place significant pressure on the division in terms of officer work load/capacity and budgets. It is hoped that forthcoming changes in legislation (in the form of the Mental Capacity (Amendment) Act and the proposed Liberty Protection Safeguards (LiPS) will help to address some of the resource/capacity issues when the legislation comes into force. Therefore, our focus over the coming year will be on reviewing our service to identify our readiness for these changes and to work with legal services to gain advice on the next steps of implementation.</li> </ul>
<ul style="list-style-type: none"> <li>• We have made significant progress in strengthening our responsibilities in relation to Safeguarding across the Council by ensuring that it is 'everyone's responsibility' and raising awareness and understanding of the safeguarding policy and practice that has been the core of this work. Resources carry on being cut, placing pressure on our capacity to ensure that safeguarding procedures remain robust, are regularly reviewed, updated and applied consistently.</li> </ul>
<ul style="list-style-type: none"> <li>• Delivering a targeted inspection programme as part of the Shared Regulatory Service against a back drop of reducing resources will continue to be challenging. Staff capacity is particularly having an impact on delivery of our SRS statutory inspection programme, as within the Food and Port Team there are currently a number of vacancies. Although recruitment to these vacant posts is underway, the service will need to engage with contractors to assist us with our inspection work.</li> </ul>

## 2.0 CORPORATE HEALTH: MANAGING OUR RESOURCES

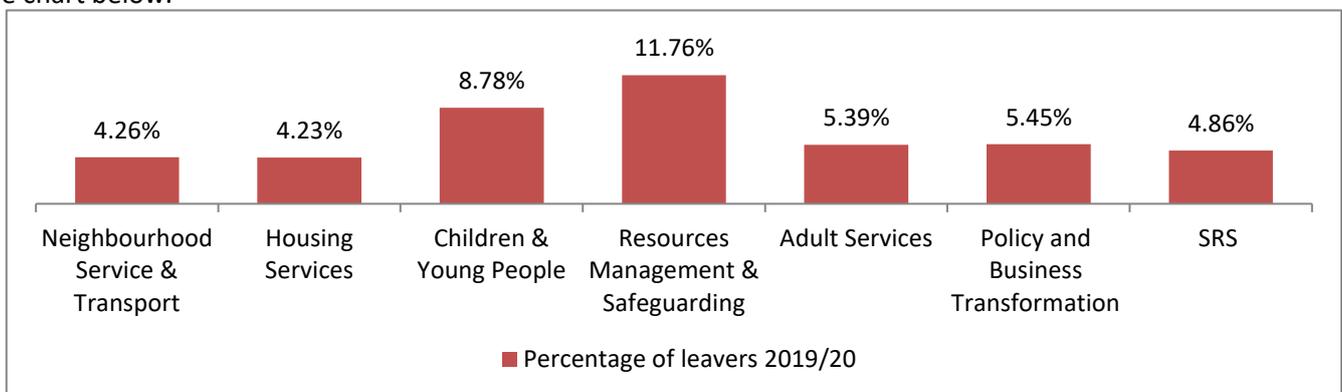


### 2.1 PEOPLE

Attendance management remains a corporate priority and we continue to closely monitor progress to help improve performance corporately. Across the Council (including schools) for the Quarter 2 period between 2018/19 and 2019/20, the number of days lost per full time equivalent (FTE) due to sickness increased by 1.03 days from 3.71 working days lost in Quarter 2 in 2018/19 to 4.74 days in Quarter 2 2019/20. The graph below shows the sickness absence data for services contributing to this Well-being Outcome at quarter 2 over the last two years.



The total percentage turnover for services contributing to this Well-being Outcome during Quarter 2 2019/20 can be seen in the chart below.



The [sickness absence report](#) provides a review of attendance management across all council services during Q2 2019/20.

Positive progress continues to be made in relation to a number of ongoing workforce-related issues identified by services contributing to this Well-being Outcome. Overall, services across the Council continue to make positive progress in implementing succession planning arrangements including those contributing to this Outcome.

Key highlights for Q2 include:

- We continue to work with corporate colleagues to deliver a targeted recruitment exercise in relation to 'hard to recruit' post. The services is continuing to successfully seek permanent recruitment to all of the relevant posts. This is having been highly successful in the majority of the teams, with only a small number continuing to be a challenge in CPP where a bespoke advert is being prepared. The open advert for SW vacancies that were outline in Quarter 1 have been implemented.

## 2.1 PEOPLE

- We have reviewed the Resource Management and Safeguarding division, and to build resilience into the safeguarding structure, a Safeguarding Team Manager have been appointed. This will bring greater stability and strength to the team.
- We have reviewed the remuneration of Approved Mental Health Professionals to improve recruitment and retention with new remuneration in place. Changes to Job Descriptions and Person Specifications are being discussed with Trade Unions/HR to incorporate the expectation that all Social Workers will make themselves available to train as Approved Mental Health Professionals is still to be progressed.
- An extensive programme of training for the Welsh Community Care Information System (WCCIS) has been delivered to ensure that we continue to meet the requirements of the Social Services and Well-being (Wales) Act. Fundamentals training has been delivered by an agency trainer up to her retirement in July 2019. We will also continue to provide introductory training on WCCIS via our Super users to staff. We also intend to increase the number of Superusers in each service area. We are also offering further support by using Guidance notes and offering one to one support when necessary to staff. Opportunities to buy into training programmes of neighbouring authorities is to be explored pending a regional solution.
- We continue to deliver training and advice to our staff in schools to achieve a Level 4 or 5 Hygiene rating in all school kitchens. All existing and new school staff are all training to Level 2 Food Hygiene standard. All environmental health inspections have so far been Level 4 & 5 in 2019/20.
- We continue to develop a corporate approach to dealing with cyber bullying and online abuse aimed at council employees. Social Media Code of Conduct, Violence at Work Policy and Unacceptable Actions of Citizens policy have successfully been progressed through consultation through Terms and Conditions, CMT, Change Forum and Corporate JCF. These have been included on Staffnet supported by an internal publicity campaign except of the Unacceptable Actions of Citizens policy which the Head of Policy and Business Transformation, will be referring to Cabinet in Quarter 3 for formal approval of the Council given the interactions between elected members and the public.

All service areas continue to contribute to the Council's Workforce Plan and Staff Charter initiatives in relation to workforce development, succession planning, recruitment and retention.

## 2.2 FINANCIAL

The latest Revenue Monitoring report relates to the period 1<sup>st</sup> April to 31<sup>st</sup> August 2019 which was reported to Cabinet on the 7<sup>th</sup> October 2019. As per this report, the forecast for Social Services is shown as a balanced budget, but this is after a potential unplanned transfer from reserves of £2.2m.

Across the Social Services divisions there continue to be a number of cost pressures facing the services. Regarding Children and Young People Services the greatest cost pressure continues to be in relation to the placements budget linked to the cohort of children being supported who have increasingly complex needs which results in higher cost placements. Our continued focus is to ensure that children are in the most appropriate and cost-effective placements to meet their needs and support their well-being. But given the volatility of the budget associated the complexity of needs and the national challenges in identifying placements, it is projected that this budget could overspend by approximately £1.5m this year. Depending on the number of Children Looked After and the complexity of need, this outturn position could fluctuate. Although in previous years, the Welsh Government have provided some additional funding to assist with this cost pressure at year end, it cannot be guaranteed and relied upon at this early point in the financial year. The service does hold a reserve, that could be accessed at year end to fund high cost placements should it be required.

Within Adult Services, the division is currently projecting a break-even position. However, the main area of concern during this financial year will be the cost pressure associated with Community Care Packages, this has been reassessed and it could have a net overspend at end of year of roughly £700k. The outturn position on the budget is difficult to predict, as the budget is extremely volatile. This division faces pressures due to demographic growth. Within the Vale of Glamorgan, we have an increasingly ageing population that have increasingly complex needs, which is impacting on the cost of care packages and service provision. The service continues to focus on managing this growing demand and is looking at savings initiatives that may be funded via regional grants. The Welsh Government has continued to provide the Integrated Care Fund (ICF) grant to Cardiff and Vale University Health Board to enable collaborative working between Health and Cardiff and Vale Councils, but this funding is not guaranteed on an ongoing basis. However, this level of grant funding is not guaranteed on an ongoing basis. The service does hold a reserve that could be accessed at year end to fund any eventual overspend if required.

Overall the authority has a savings target of £3.020m for 2019/20 (excluding schools). For the service areas aligned to this outcome, £545K of savings have been identified for Social Services and £102K of savings in relation to the Shared Regulatory Service. Within Social Services it is projected that 83% of the savings target will be achieved giving the Directorate an Amber status in relation to savings. Within SRS it is projected that they will achieve 100% of their savings targets for the year.

In relation to Social Services, progress continues to be made in relation to Tranche 4 projects of the Reshaping Services programme and the Social Services Budget Programme with ongoing monitoring in place. There are currently five projects within Social Services aligned to the Reshaping Services Programme. Of these five projects, one has been attributed a green status (psychology support for foster carers) three have been attributed an amber status (maximising reablement, direct payments and review of complex needs) and one has been allocated a red status (older person's day services).

## 2.3 ASSETS

During the quarter, positive progress has been made to date in relation to maximising our key asset priorities as follows:

We continue to upgrade our changing room facilities, to enhance the provision of leisure facilities. During Quarter 2 we continue to make good progress in development of the Penarth changing village which is due to reopen in quarter 3.

We have continued to focus on exploring opportunities to better use our assets with partner to make the best use of our pooled resources this quarter. We explore the opportunities for joint ventures through the Reshaping Asset Board which the Head of Adults Service is a member for the Directorate. The 'shared properties' meeting for the quarter has been postponed which has led to limited progress being made, but we continue to work in partnership with Health colleagues re our assets and identify opportunities for investment and renewal.

## 2.4 ICT

We continue to make good progress towards delivering our ICT priorities during this quarter contributing to improving services for residents and customers. Key projects of particular note are outlined below:

Positive progress has continued with the work with the Care Package Commitments Tasks and Finish Group to implement a new dashboard application for the monitoring of Care Packages, with the new service request form being devised for implementation on Welsh Community Care Information System (WCCIS). The new service request form has been developed to fulfil several tasks currently undertaken via email which includes requests for care packages. We will continue to prioritise the move to full completion, authorisation and brokering of care packages via WCCIS.

Within Adult Services we have continued to review the website content to ensure it remains relevant and up to date. We have successfully agreed a plan for reconstruing new pages and renewing our content. Officers have been appointed as editors for each area within adult services to ensure that the information on the web pages is kept up to date. Work is being managed by the Social Care Information Co-ordinator with the support of Adult Services OM's.

The Social Service Directorate continues to support delivery of the ‘Digital Place’ strand of the Digital Strategy. Within Adult Services our focus has been on maximising the use of digital technology within our residential care homes and day services. The See Me pilot project commenced in the previous quarter that focuses on utilising digital technology with Learning Disability day opportunities service users. This pilot project enabled service users to record their own profiles enabling them to outline how they wish to be supported and what’s important to them and their preferences.

## 2.5 CUSTOMER

Ensuring good customer focus remains a key priority in delivering council services and a number of planned improvement activities have been undertaken across the Council during the quarter with this focus in mind.

We successfully continue to work with our citizens to establish the self-management of Bowling greens which is commencing on the 1<sup>st</sup> October. Partnership working is showing positive progress as work continues to grow with the proposals for new netball facilities. This is to help our citizen engage and participate in new and exciting activities, while increasing their individual physical activity levels.

We continue to carry out work in relation to the implementation of the preferred option for the Customer Contact Centre as a single point of contact, by carrying re-branding the service to become the ‘Wellbeing Matters’ Service. Work has continued with the Joint Staff Forum to aid this stream of work and improve further the patient and citizen experience.

As part of the Carers Workstream associated with the Social Services and Well-being (Wales) Act 2014, a series of citizen engagement sessions have been undertaken to help inform the development of the Regional Carers Strategy and action plan. A Project Manager has been appointed to take the lead on further progress with element of work.

There is ongoing promotion of the Children and Young People’s Advocacy Service with both children and young people as well as key partners. This has helped to raise awareness of the service to maintain a sustained improvement in the number of referrals to the service and those in receipt of the ‘active offer’.

## 2.6 CORPORATE RISK

The most recent review of the Corporate Risk Register was used to inform this quarter’s reports. As at quarter 2 there were six corporate risks that are aligned to this Well-being Outcome, in relation to CR9: Public Buildings Compliance, CR10: Safeguarding, CR11: Integrated Health & Social Care, CR12: Unauthorised Deprivation of Liberty Safeguards, CR13: Welsh Community Care Information System (WCCIS) and CR14: Brexit. (Deprivation of Liberty Safeguards), Two risks scored medium/high (Brexit and Deprivation of Liberty Safeguards), three risks were scored medium (Public Buildings Compliance, Integrated Health and Social Care and WCCIS) and finally one risk scored medium/low (Safeguarding). In terms of direction of travel and forecast direction of travel, all risks have remained static with the exception of Deprivation of Liberty Safeguards where the direction of travel has decreased to reflect the reduction in risk status from high to medium/high. The Risk Management Plans aligned to each of these risks closely monitors progress made in relation to delivering mitigating actions to these risks and these actions are also addressed via our Service Plans. The current status of the key corporate risks that have a bearing on this Well-being Outcome are as follows:

Risk Ref	Risk	Residual Risk Score			Direction of Travel <sup>1</sup>	Forecast Direction of Travel <sup>2</sup>
		Likelihood	Impact	Total		
CR9	Public Buildings Compliance	2	2	4 (M)		
Risk Ref	Risk	Residual Risk Score			Direction of Travel	

<sup>1</sup> **Direction of travel** compares residual risk score for the current quarter with the previous quarter to indicate whether the risk is increasing/decreasing or staying static.

<sup>2</sup> **Forecast direction of travel** anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

 risk is increasing,  risk is decreasing,  risk is remaining static

Ref		Likelihood	Impact	Total			Forecast Direction of Travel
CR10	Safeguarding	1	3	3 (M/L)			
CR11	Intergrated Health and Social Care	2	2	4 (M)			
CR12	Unauthorised Deprivation of Liberty Safeguards	4	2	8 (M/H)			
CR13	Welsh Community Care Information System (WCCIS)	2	3	6 (M)			
CR14	Brexit	3	3	9 (M/H)			

## 2.7 SERVICE PLANS RISKS

The current status of the Service Plan risks that have a bearing on this outcome are as follows:

Risk Description	Service Area	Status		Direction of Travel	Forecast Direction
Availability of other partners to support the preventative services agenda.	Resources Management, Safeguarding and Performance	Medium			
Sport development and delivery is provided regionally based on the consortium area with the Vale of Glamorgan being worse off as a result.	Neighbourhood Services and Transport	Medium /Low			
Service users cannot access services swiftly and their needs are not met.	Adult Services	Medium /High			
	Children and Young People Services	Medium			
Risk Description	Service Area	Status		Direction of Travel	Forecast Direction

Reduction in service availability because of increasing demand, higher expectations and changes to eligibility criteria.	Resources Management, Safeguarding and Performance	Medium /High			
Closure/failure of our commissioned providers.	Resources Management, Safeguarding and Performance	Medium /High			
Impact of increasing Looked After Children numbers on placement availability where in-house fostering capacity is exceeded and there is an increased reliance on Independent Fostering Agency placements, and the demand on Social Work and Placement Teams.	Children and Young People Services	High			
The Council is unable to meet statutory responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	Resources Management, Safeguarding and Performance	Medium			
Other organisations are unable to meet their responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	Children and Young People Services	Medium			
Insufficient funds to meet rising demand for services.	Resources Management, Safeguarding and Performance	Medium /High			
Continued reduction and regionalisation of grant funding.	Children and Young People Services	Medium			
Increase in numbers and complexity of care proceedings in the context of reduced court timescales impacting on court costs, Social Worker caseloads and ensuring that other cases receive the attention they require.	Children and Young People Services	Medium /High			
<b>Risk Description</b>	<b>Service Area</b>	<b>Status</b>	<b>Direction of Travel</b>	<b>Forecast Direction</b>	

Capacity and capability to meet the needs of our most vulnerable clients at a time when resources are reducing.	Children and Young People Services	Medium			
Inability to provide levels of training for staff or independent sector to ensure quality of care for citizens provided by Council.	Resources Management, Safeguarding and Performance	Medium /High			
Insufficient operational staff capacity to ensure timely assessments are completed.	Adult Services	Medium /High			
	Children and Young People Services	Medium			
Capacity of Approved Mental Health Professionals (AMPs) to undertake reviews in line with the requirements of the Mental Health Act.	Adult Services	Medium /High			
Insufficient funding and staff capacity to meet the growing demand for services.	Children and Young People Services	Medium			
Lack of available of specialist residential placements and the associated financial impact of high cost placements on our ability to effectively meet the increasingly complex needs of children and young people.	Children and Young People Services	High			
Social Services Well-being Act impacting the ability to secure income (through charging) putting the authority at potential financial risk.	Resources Management, Safeguarding and Performance	Medium /Low			
Inability to implement requirements of the Social Services and Well-being (Wales) Act.	Resources Management, Safeguarding and Performance	Medium			
<b>Risk Description</b>	<b>Service Area</b>	<b>Status</b>		<b>Direction of Travel</b>	<b>Forecast Direction</b>

Compliance with the requirements of the Social Services and Wellbeing (Wales) Act 2014.	Adult Services	Medium /Low	6(Y)		
Insufficient capacity in care settings to deliver services to meet the care and support needs of service users	Resources Management, Safeguarding and Performance	Medium	6(Y)		

## GLOSSARY OF TERMS

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

## SERVICE PLAN ACTIONS

NS: Neighbourhood Services and Transport	CS: Children and Young People Service	AS: Adult Services	SRS: Shared Regulatory Services
HS: Housing Services	RM: Resources Management and Safeguarding	PD: Performance and Development	

## RISK MATRIX

The **Inherent Risk** defines the risk score in a pre-control environment i.e. what the risk would look like (score) without any controls in place to manage the risk.

The **Residual Risk** can be defined as the subsequent risk score as a consequence of applying controls to mitigate this risk.

Possible Impact or Magnitude of Risk	Catastrophic	4 <i>MEDIUM</i>	8 MEDIUM/HIGH	12 HIGH	16 VERY HIGH
	High	3 <i>MEDIUM/LOW</i>	6 <i>MEDIUM</i>	9 MEDIUM/HIGH	12 HIGH
	Medium	2 LOW	4 <i>MEDIUM</i>	6 <i>MEDIUM</i>	8 MEDIUM/HIGH
	Low	1 VERY LOW	2 LOW	3 <i>MEDIUM/LOW</i>	4 <i>MEDIUM</i>
Low 1-2 Low/Medium 3 Medium 4-6 Medium/High 8-10 High 12-16		Very Unlikely	Possible	Probable	Almost Certain
		Likelihood/Probability of Risk Occurring			

**Direction of travel** compares residual risk score for the current quarter with the previous quarter to indicate whether the risk is increasing/ decreasing or staying static.

**Forecast direction of travel** anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

### Risk Key

	Risk level <b>increased</b> at last review
	Risk level <b>decreased</b> at last review
	Risk level <b>unchanged</b> at last review

## APPENDIX 1: Service Plan Actions

### Objective 7: Encouraging and promoting active and healthy lifestyles

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH001</b>				
NS/A034 (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.	31/03/2020	50	Green	New partnerships established for self-management of Bowling greens commencing 1st October. Partnership working continues to grow with proposals for new netball facilities under considerable.
NS/A075: Enhance the provision of leisure facilities by upgrading changing rooms.	31/03/2020	75	Green	Penarth changing village will open during quarter 3.
NS/A036 (VS/A037): Provide a School Crossing Patrol service at high risk locations to enable children to walk safely to and from school.	31/03/2020	50	Green	The Council successfully maintains 18 school crossing patrol sites, and employees 19 officers across the Vale to enable children to walk safely to and from school at specific high risk locations identified. Other high risk sites have the benefit of push button controlled or pedestrian crossing facilities to improve child safety and therefore no longer require school crossing patrols.
NS/A076: Implement the 2019/20 Local Authority Partnership Agreement (LAPA).	31/03/2020	50	Green	As per previous update, projects are progressing in conjunction with partners including schools, local sports clubs, uniformed groups such as Brownies, Guides, YMCA Young Carers group, Housing Associations and internal departments. The 5x60 school scheme has been negatively impacted upon by long term staff sickness. Aquatics plan for next 18 month period has been agreed by Sport Wales - 50% reduction in funding available which impacts on the amount of free swimming opportunities that can be offered. Currently completing 6 month progress report and preparing plan for 2020 - 2021.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
NS/A048: Finalise and implement a Leisure Strategy for the Vale of Glamorgan.	31/03/2020	75	Green	Strategy approved by Scrutiny now awaiting adoption by Cabinet in October.
<b>AH002</b>				
HS/A092: Work with partners on the Area Programme Board to develop a new Cardiff & Vale Substance Misuse Commissioning Strategy.	31/03/2020	50	Green	The Area Planning Board have received a funding opportunity from Welsh Government to review drug and alcohol services for those that are homeless or at risk of being homeless. The Vale have contributed to the regional bid with Cardiff for funding and will be notified in Qtr. 3 if successful.
<b>AH003</b>				
NS/A040 (VS/A047): Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families.	31/03/2020	50	Green	<p>More than 4900 participations during a busy summer of activities delivered by the Healthy Living Team in partnership with organisations including Dinas Powys &amp; Wick Community Councils, United Welsh Housing, Rotary Club of Barry, MOD St Athan, Flying Start, Vale Housing, POBL and the Family Information Service, who also assisted with the promotion of activities.</p> <p>31 open access community sessions delivered across 18 venues – 392 children/young people registered. The Healthy Living Team also held two Family Fun Days and supported an additional eight community events attended by more than 3900 people.</p> <p>Thanks to funding through the Welsh Government’s Holiday Hunger Programme, the Healthy Living Team were able to promote Healthy Holiday Hydration (and reduce single-use plastic consumption) by providing reusable water bottles to every child who attended our Healthy, Active and Outdoors sessions along with fruit provided at some sessions. The</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				<p>initiative was also delivered at the Families First Holiday Club (disability playscheme) who welcomed Rebecca Evans, Minister for Finance and Trefnydd and Cllr Lis Burnett to visit the scheme and see the children enjoy making fruit kebabs as part of the Holiday Hunger programme. 76 disabled children aged 4 – 11 years attended the Holiday Club with a total of 374 participations over 12 days. Children were also able to enjoy fresh fruit snacks at the Dinas Powys Playscheme thanks to a daily donation from Tesco. The National Play Day was attended by Marianne Mannello, Assistant Director of Play Wales and Catrin Awoyemi, Play Policy Officer for Welsh Government who were delighted with the range of low cost / no cost ideas being promoted to the families. The families were also provided with a Playful Childhood: Playful Parenting Guide which was funded through funds secured from the Welsh Government’s All Wales Play funding.</p>
<b>AH004</b>				
RM/A027: Support the pilot roll out of the Welsh Government’s Child Care Offer.	31/03/2020	50	Green	<p>There are currently 182 childcare providers now signed up to the Offer in the Vale of Glamorgan. 849 applications from parents have been received (by 23 August). The Childcare Offer is now available across Wales and a national marketing campaign is due to start in late October. Plans are in pace to have a centralised digital system to process all applications, payments and monitoring etc. Vale FIS have received 137 enquiries since July regarding the Childcare Offer since January</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				2019. A marketing and communication plan is underway to promote the Childcare Offer as widely as possible.
RM/A028: Review the effectiveness of the Information, Advice and Assistance Service and its associated pathways in relation to the provision of Family Information and Support.	31/03/2020	25	Red	Temporary Manager Vacancy within FACT has resulted in postponement of review to quarters 3 and 4. Recruitment process in place.
RM/A029: Review and extend the age criteria in relation to the Index.	31/03/2020	50	Green	Following Review meeting with Transition Team, it was decided not to carry on with the extension of Index to age 25yrs. Instead, young people can be added to a separate list once the child reaches 18yrs until they are 19yrs. They will receive information on Transition. Families of children age 14+ are asked about transition information during annual review.
<b>AH005</b>				
SL/A062: Deliver the School Holiday Enhancement Programme for 2019/20 in partnership with our partners in Public Health.	31/03/2020	100	Green	SHEP was delivered in Cadoxton School for the second year running. The 40 pupils coming from some of other primary schools in the Barry area did not attend and the one school that did attend it was only a few days out of the 15.
SL/A037: Continue to monitor compliance with the Healthy Eating in Schools (Wales) regulations.	31/03/2020	100	Green	Our current menu has a certificate that runs for a 1 year period. The menu meets all Welsh government regulations. The secondary school continue to meet the Welsh Government food based standards.
SL/A063: Continue to deliver training and advice to all schools to achieve a Level 4 or 5 Hygiene rating in all school kitchens.	31/03/2020	50	Green	All existing and new school staff are trained to Level 2 Food Hygiene standard. All environmental health inspections have so far been Level 4 & Level 5 in 2019/20
SRS/A030: Undertake actions to support the provisions of the Public Health (Wales) Act 2017.	31/03/2020	50	Green	Officers from SRS continue to support the task and finish groups in relation to the licensing of special procedures. SRS is currently exploring the requirements and scope of becoming a training centre for the region.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
SRS/A031: Undertake actions to support the provisions of the Public Health (Minimum Price for Alcohol) (Wales) Act 2018.	31/03/2020	0	Red	As advised for Q1 there has been a delay in implementation of the legislation and as a result, we await news from Welsh Government with regard to when this is likely to occur and as a result when the engagement with businesses and distribution of guidance materials will commence. Again, this appears unlikely until Q4.
RM/A002: Contribute to the local Public Health Wales agenda by promoting and encouraging healthy eating and healthier lifestyles within our services.	31/03/2020	50	Green	<p>At Q2, we have continued to make good progress in supporting the local Public Health Wales agenda for encouraging healthy eating and healthier lifestyles. Key highlights include:</p> <ul style="list-style-type: none"> <li>• We are making good progress in delivering the Vale Physical Activity Plan and evidence (through a variety of projects) shows that the work of the Council and its partners is having a positive impact on residents' well-being. For example, the latest obesity data shows the Vale as having the lowest obesity levels in Wales. The latest national benchmarking data also shows that the Vale of Glamorgan is ranked 3rd in Wales in terms of physical activity levels. The continuation of partnership working is essential to maintaining this position and in line with our commitment to residents' well-being, new partnerships are being established with the health service (proposed health hub at Penarth) and Housing Associations to maximise opportunities to further enhance our performance.</li> <li>• We continue to provide play opportunities for children and young people across the Vale to help develop and encourage healthier lifestyles into adulthood and all our play schemes promote activities for all, including disabled, autistic spectrum disorders and children and young people with adverse childhood experiences. Take up of play activities is high as is demand which proves challenging given reducing budgets. We</li> </ul>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				<p>continue to explore opportunities to further expand provision for the future, funding permitting.</p> <ul style="list-style-type: none"> <li>The Vale Council's Healthy Living Team delivered an extensive play programme during the summer where there were more than 4,900 participations in activities that were delivered in partnership with Dinas Powys, Wick Community Councils, United Welsh Housing, Rotary Club of Barry, St Athan, Flying Start, Vale Housing, POL and the Family Information service.</li> <li>Funding through the Welsh Government's Holiday Hunger programme enabled the Healthy Living Team to deliver a Healthy Holiday Hydration initiative that promoted hydration whilst reducing single use plastic through the provision of reusable water bottles provided to children who attended the sessions. Fresh fruit was also provided at some sessions.</li> <li>We continue to work with all schools as a priority to ensure compliance with the Healthy Eating in Schools (Wales) Regulations and all primary schools remain compliant with the nutritional regulations whilst all secondary schools remain compliant with food-based standards from the regulations.</li> <li>Work continues with local communities to maximise our existing assets including improving access to green spaces, local playing facilities and community centres, enabling them to offer increased opportunities to participate in leisure and physical activity. 8 Green Flags applied for this year and all have been retained and the Vale now has 25 Green Flags in total and this includes community Green Flags. This is joint top performance (with Cardiff Council) in Wales.</li> <li>We continue to proactively promote the 'availability of healthy options' awards (via the Shared Regulatory Services) to</li> </ul>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				<p>food businesses in Cardiff and the Vale to encourage healthier lifestyles.</p> <p>Active Travel improvements including walkways and cycleways continue to be delivered across the Vale and these are being actively promoted to encourage more active travel lifestyles. A number of transport schemes including the new five mile lane have incorporated active travel routes and core active travel funding is being used to improved existing Active Travel routes. We continue to deliver the School Holiday Enhancement Programme for 2019/20 in partnership with our partners in Public Health. The SHEP sessions were delivered during quarter 2 in Cadoxton School. These sessions were provided to pupils to support their transition to secondary school.</p>
<b>AH006</b>				

The one action for AH006 has been completed in Quarter 1.

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

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH007</b>				
LS/A015: "Provide legal advice and support on legal matters in relation to implementing new ways of working arising from the Well-being (Wales) Act with a particular focus on the priority work streams of: - Provision of information	31/03/2020	50	Green	Throughout the year ongoing input from a Legal Services perspective will be provided when required. During Q2 advice has been ongoing in regards to charging and debt recovery.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<ul style="list-style-type: none"> <li>- Advice and assistance services</li> <li>- Eligibility/assessment of need</li> <li>- Planning and promotion of preventative services</li> <li>- Workforce</li> <li>- Performance measures</li> <li>- Charging (debt recovery)</li> <li>- Direct Payments provision – WG regulations awaited</li> <li>- Pooled Funds."</li> </ul>				
RM/A030: Develop a regional pool of policies for children and adults in line with the requirements of the Social Services and Well-being (Wales) Act.	31/03/2020	50	Green	Work on the development of the regional policies is in progress with the first phase of our implementation plan close to completion. A number of policies have now been produced for children's services to bring them in line with the policies for adults and these are now undergoing final review. We are looking to recruit to the post of regional policy officer to help support this area of work, and interviews are taking place this week.
RM/A031: Develop a website that is accessible to both practitioners and the public to be kept informed of policies, procedures and practice.	31/03/2020	50	Green	Meetings have been arranged with ICT to enable us to consider what options might be appropriate for us to use.
RM/A032: Contribute to the ongoing review of the Social Services Performance Management Framework and its implementation.	31/03/2020	50	Green	The Regional Coordinator for Sustainable Social Services attended the Welsh Government Business Intelligence Group, where the findings of the all wales consultation were considered. A revised framework will now be produced, and we are working with our colleagues across the region to ensure we have systems in place that will enable us to report on the new matrix

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A033: Implement an outcome-based Residential Care Home/Nursing contract that is jointly developed with the University Health Board and Cardiff Council.	31/03/2020	50	Green	The regional carers workstream is continuing to monitor its action plan to ensure we deliver on the relevant areas in the RPB action plan.
RM/A034: Contribute to the development and implementation of the Regional Partnership Board Annual Report.	31/03/2020	50	Green	The regional carers workstream is continuing to monitor its action plan to ensure we deliver on the relevant areas in the RPB action plan.
RM/A026 (BM/A026): Continue to identify opportunities for joint commissioning where it can be evidenced to be of benefit in line with duties set out in Part 9 of the Social Services and Well-being (Wales) Act.	31/03/2020	50	Green	Monthly meetings of the Regional Commissioning Board, with colleagues from Cardiff Council and Cardiff and Vale UHB, continue to take place, with this being discussed as a standing agenda item.
RM/A036: Establish a monitoring process for the implementation of the Social Services and Well-being (Wales) Act via the Steering Group.	31/03/2020	50	Green	The Regional Steering Group continues to meet, and its development plan is monitored to ensure the regional workstreams continue to deliver the agreed priorities.
RM/AM037: Continue the work of the Regional Steering Group (priorities set out in the Action Plan) and progress work as part of the Healthier Wales agenda.	31/03/2020	50	Green	The Regional Steering Group continues to meet, and its development plan is monitored to ensure the regional workstreams continue to deliver the agreed priorities.
RM/A038: Delivery of the Regional Commissioning Work Programme priorities for 2019/20.	31/03/2020	50	Green	Final draft is now completed and out for consultation with providers across the region.
AS/A033: Implement the preferred option for the Customer Contact Centre as a single point of contact.	31/03/2020	50	Green	Ongoing work in this area to re-brand the service to Wellbeing Matters Service. Work with joint staff forum to support this stream of work and improve further the patient/citizen experience at the front door. Preparation for the go-live of the GP triage Pilot project (transformation monies). Link to AS/A036

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A034: Refresh processes at the Customer Contact Centre to support the provision of Information, Advice and Assistance (IAA) model in line with the requirements of the Social Services and Well-being (Wales) Act.	31/03/2020	50	Green	As per Qtr 1, this work progresses well. We now have additional Community Liaison (former brokers) Officers that are supporting this work, and a pilot is due to commence in Qtr 3 for Visiting officers to further enhance this IAA function to support lower level care and support needs and enquiries. This Qtr we have secured a joint tender with Cardiff and Vale UHB for a provider to support low level discharge support for people to promote earlier discharge home and giving people confidence and support in their first few days to resettle at home. Wellbeing Posts (AS/A038) have also been recruited to and will commence in Qtr 3.
AS/A035: Review the effectiveness of the reablement model used in the Vale of Glamorgan.	31/03/2020	50	Green	A review of the processes and staffing structure has been commissioned and will commence in Qtr 3. The reablement model continues to be effective and performance has exceeded targets consistently following the attention of the integrated manager considering how performance was monitored and reported.
CS/A028: Implement new assessment care and support plans (Parts 4 &6) in relation to strengthening our approach to co-production as it relates to the Social Services and Well-being (Wales) Act.	31/03/2020	50	Green	Part 4 care and support plans developed and live on WCCIS. Part 6 plans in development and due to be live in quarter 3.
CS/A029: Develop the wider and more appropriate use of the Information Advice and Assistance Service/Families First	31/03/2020	50	Green	Increased staffing establishment in place. Call activity increasing. Evaluation of activity and progress being completed Q3 on Q2 data and comparison from same period 2018/19.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
Advice Line as a single point of contact for the service.				
<b>AH008</b>				
PD/A031: Continue to work with partners to improve self-service options to ensure that customers' enquiries are resolved as quickly as possible, complying with the Social Care and Well-being (Wales) Act 2014.	31/03/2020	50	Green	Concessionary Travel Pass applications are now available online via Transport for Wales with links on Vale of Glamorgan Council website. Detailed information about access to social care services or make referrals in the Vale of Glamorgan is available on the councils website. Dewis Cymru, the central resource for well-being services across Wales, is promoted prominently across the website.
PD/A032: Continue to strengthen and extend shared working between C1V and the Health Board to provide a more integrated service for the public and better resilience.	31/03/2020	30	Red	Operational cooperation continues in the delivery of key projects. A review of the potential for closer integration with Contact One Vale, Adult Services Intake and Assessment and Cardiff and Vale Health Boards Communications Hub has been initiated under the banner of Wellbeing Matters.
PD/A039: "Contribute to the delivery of the Our Well-being matters agenda with specific focus on the following during 2019/20: <ul style="list-style-type: none"> <li>• Work with Cardiff and Vale Health Board, Social Services and Telecare to develop services that meet the needs of our citizens;</li> <li>• Implement a new contact centre platform to improve the citizen experience of accessing services across a range of communication channels and measure satisfaction levels.</li> </ul>	31/03/2020	50	Green	Customer Relations continues to contribute towards the development of customer focussed wellbeing services. Implementation of the new contact centre technology has been delayed until circa 15 November due to network issues.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<ul style="list-style-type: none"> <li>Incorporate the principles of the Council's Digital Customer Strategy at the forefront of developing new integrated services."</li> </ul>				
PD/A040: Progress the integrated Health and Social Care agenda with specific reference to the GP triage proposal.	31/03/2020	50	Green	Customer Relations is represented on the GP Triage Steering Group providing a range of advice and assistance. In particular Customer Relations is supporting the development of the telephony solution, ensuring call flows and messaging reflect the requirements of the service and provide excellent patient experience.
AS/A014: Undertake further expansion of the Adult Placement Scheme.	31/03/2020	50	Green	The Vale of Glamorgan continues to manage the service across the Vale and Bridgend. We are currently undertaking the assessment of 6 new hosts across the regions which will aide capacity and expansion.
AS/A036: Pilot delivery of a GP triaging scheme within the Vale of Glamorgan.	31/03/2020	50	Green	This Transformation project continues to make steady progress to explore the Contact Centre being able to host a GP triaging service to promote GMS (General Medical Services) sustainability through signposting patients to alterative and appropriate professionals and services rather than the default of access to a GP appointment. Given its nature we are working to manage risks and reassure stakeholders and many of the functions are integrated and/or provided by Health colleagues which we have limited power to resolve in terms of recruitment and systems. Our joint project team continue to work through these risks and barriers and find sustainable solutions to complex information sharing and governance arrangements.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A037: Implement a joint Learning Disability Commissioning Strategy to ensure that we can effectively meet the needs and outcomes of our service users both now and in the future.	31/03/2020	50	Green	Strategy completed. Launched on the 18th June. Implementation of the priorities identified within the Strategy will be managed through the LDPG and a series of workstreams. First meeting of all 8 workstreams to be held in first two weeks of October. ToR/Action Plan/Reporting forms provided for each workstream.
AS/A038: Update the referral management processes at the Customer Contact Centre.	31/03/2020	50	Green	This action is in two parts: Intake and Assessment: Referral pathways re-established to remove blockages within the referral pathway. Princess of Wales referrals directed toward Integrated Discharge Service. 2. Contact Centre: Enhanced Outbound Officer posts (called Wellbeing Officers) have been created within C1V to provide a consistent response to all adult service contacts including improved IAA and rapid decision making/progress to social work interventions. Establishment of Wellbeing Officers in Q3.
AS/A039: Monitor and improve the Information, Advice and Assistance sign off.	31/03/2020	50	Green	Four existing CSRs are being upgraded to Wellbeing Officers within C1V Outbound to offer enhanced Information as well as Assistance and Advice following proportionate assessment via telephone calls. In addition, we are recruiting 2 newly funded Wellbeing Visiting Officers to outreach the provision of IAA and non-complex Care & Support (including provision of OT equipment) to enhance independence and wellbeing.
<b>AH009</b>				
RM/A039: Progress inter-generational project work involving schools and residential care settings.	31/03/2020	25	Green	Work continues to build on the success of the intergenerational project in Cartref Porthceri. 7 residential homes have been mapped with primary schools and have commenced a programme of activity. The roll out of this work will continue throughout the year.
RM/A040: Complete the project work associated with creating a 'Dementia Friendly' environment at Ty Dewi Sant.	31/03/2020	40	Amber	Electrical upgrade has commenced in Ty Dewi. Tender in preparation for phase 2 building works, Advanced Fire Technology instructed to replace Fire doors and handrails in

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				Cartref and Ty Dyfan. Plan for replacement of vanity units in Ty Dewi Sant and Southway completed.
AS/A041: Implement the 'Get me Home' Plus Service.	31/03/2020	50	Green	Monitored as part of the Regional Commissioning Board
AS/A040: Implement a regional protocol to support transition processes across all of Adult Services.	31/03/2020	50	Green	Draft protocol currently being consulted on across education, health SNAP and social services. Leads have met with Rachel Evans and OM's and have booked to meet with Suzanne Clifton and OM's in October.
AS/A042: Implement a 'Team around an individual' approach to Dementia Services.	31/03/2020	25	Red	The service model has been reviewed and clinical leadership will change as a consequence of pending retirement. Challenges in getting the model and staffing correct. Ongoing discussions to remedy this and ensure that the planned project outcomes are delivered accordingly.
AS/A043: Work with partners to develop a Vale locality model in response to the recommendations of the Parliamentary Review.	31/03/2020	25	Red	Funding only confirmed at end of September through Transformation monies. Research into other models of Alliancing being explored and set up visits for early in Qtr 3, plans to then recruit Project Management/Consultancy resource to progress this work under Transformation scheme for the next 12 - 15 months.
AS/A044: Explore the development of an integrated model for Long Term Care Service and Nurse Assessor Team at Ty Jenner.	31/03/2020	25	Red	Health partners are not in a position to jointly fund the Integrated Team Manager post and are uncomfortable with the HR rules meaning that the Vale Funded Integrated Manager post will be ringfenced to VOG staff only in first instance, so consultation events on hold. Meeting planned with UHB OD, HR and leadership team to endeavour to provide reassurance and move forward in Qtr 3 and 4.
AS/A045: Review opportunities for the development of clear Continuing Health Care Processes.	31/03/2020	50	Green	CHC processes are clear and adhered to from the LA's perspective. The decision to recruit to a senior social work position to focus on CHC has been revisited and felt that we do not need this resource currently as our staff feel more confident

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				in this area. Reviews continue to happen and provide outcomes that individuals are eligible for CHC funding by the NHS. As this team are accommodating the workflow and achieving savings through signposting CHC eligible patients accordingly we feel that this area has been achieved and will be monitored for the remainder of the year. The risk to this is changes within the NHS staffing and accessibility of MDT professionals to conduct the Decision Support Tool (DST) meetings or should CHC panels not agree with the recommendations of the MDT.
<b>AH010</b>				
RM/A041: Undertake a formal review of existing pooled arrangements and where necessary put in place formal agreements.	31/03/2020	50	Green	During quarter 2 we have focused on scoping out the existing pooled arrangements as part of the work plan of the Joint Regional Commissioning Board in order to determine if more formal arrangements need to be put in place.
RM/A042: Implement joint contracts in relation to Nursing and Residential Care homes.	31/03/2020	75	Green	Consultation is currently being finalised on the joint specification and contract and a decision regarding the implementation will be presented to cabinet in February 2020.
RM/A043: Implement/pilot the use of the financial module in relation to WCCIS.	31/03/2020	50	Green	Work has taken place to collate the financial information required to migrate to the module. Agreement given for Project Manager (part time temporary) to be sought to keep the project on track.
RM/A044: Develop a suite of core performance reports in WCCIS to meet the statutory reporting requirements.	31/03/2020	50	Green	Regular meetings take place with Operational Managers from all Divisions to ensure that the reports are up to date and appropriate. Data cleansing of information on the system continues. Staff competencies in relation to report writing continue to be improved to support this requirement.
<b>AH011</b>				

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
HR/A016: Review and maintain the Council's Safer Recruitment Policy.	31/03/2020	50	Green	The changes agreed through the consultation with Schools (as per Q1) were implemented from 1st September 2019. The changes included strengthening the escalation process and that the Risk Assessment form/process should only be used in exceptional circumstances. For the half year period (April 2019 to September 2019), the overall compliance across new starters under the Safer Recruitment Policy within the Council is 98%. This compares to 95% for the same period in the previous year (April 2018 to September 2018). For Schools positions, the compliance for April 2019 to September 2019 is 97% compared to 93% in the previous year (April 2018 to September 2018). For Corporate positions under Safer Recruitment, the compliance for April 2019 to September 2019 is 100% which is the same as the previous year (100% in April 2018 to September 2018). In terms of Risk Assessment usage, 42 out of 256 new starters recruited under the Safer Recruitment Policy involved a risk assessment being put in place prior to all checks being completed.
HR/A017: Develop a corporate approach to dealing with cyber bullying/online abuse aimed at Council employees.	31/03/2020	75	Green	Social Media Code of Conduct, Violence at Work policy and Unacceptable Actions of Citizens policy have successfully progressed through consultation through Terms and Conditions, CMT, Change Forum and Corporate JCF. These have been included on Staffnet supported by an internal publicity campaign EXCEPT of the Unacceptable Actions of Citizens policy which the Head of Policy and Business Transformation, will be referring to Cabinet in Q3 for formal approval of the Council given the interaction between elected members and the public.
RM/A010: Enable the Corporate Safeguarding Group to continue to focus on delivery of Corporate Safeguarding Action Plan and put in place appropriate	31/03/2020	80	Green	Review and update of CSG policy is underway. The updated policy will enable review of mechanisms in place to provide assurances of the effectiveness of corporate safeguarding arrangements across the Local Authority.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
mechanisms to monitor compliance of the Policy.				
RM/A045: Lead the review and update the All Wales Safeguarding Procedures in line with the Welsh Government Guidance with the Regional Safeguarding Business Unit.	31/03/2020	100	Green	Cardiff & Vale RSB has been the lead on the new Wales Safeguarding Procedures. These are being launched in November 2019. Following the launch of the procedures there will be a period of time for implementation and training across the region.
RM/A046: Review compliance of all Directorates with completion of the Safeguarding e-module.	31/03/2020	90	Green	Review of compliance with e-module is an ongoing piece of work that takes place bi-annually.
AA/A043: Provide appropriate staff training in relation to safeguarding in all education settings and continue to monitor and challenge compliance.	31/03/2020	50	Green	The training programme continues to be delivered and will be ongoing throughout the year.
<b>AH012</b>				
AS/A046: Evaluate and review the use of assistive technology for adults.	31/03/2020	50	Green	Still awaiting written confirmation of Phase two funding from WG for the Smart House. Plans drawn up and project management support now in place. Monthly project meetings on going. Aim to maximise peoples independence within a supported living environment using the most advanced technology. This project is a partnership with Innovate Trust and Housing colleagues. SeeMe project in LD day services in development. People will have one page video profiles outlining their needs, aspirations and how they want to be supported. 6 support staff trained to use, all day service officers and manager. 6 individuals having profiles developed and edited - 1 completed.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				Will be sharing learning at Learning Disability Wales Conference 6th Nov, where Sarah (Manager) will be leading a workshop.
<b>AH013</b>				
RM/A047: Work with partners (Housing) to implement our 'Accommodation with Care' approach to support and enhance independent living.	31/03/2020	50	Green	Penarth Older Persons with Care project has progressed to the 2nd stage financial appraisal. ICF funding has been secured (£120k) to facilitate it. The Project Management group has met on 2 occasions and legal advice sought to secure the services of a preferred RSL partner to cost and prepare a pre planning application for the delivery of an extra care facility.
<b>AH014</b>				
RM/A048: Contribute to the development of a Regional Exploitation Strategy that encompasses all aspects of exploitation including Child Sexual Exploitation.	31/03/2020	85	Green	This a regional strategy being produced via the RSCB. This work is ongoing and the action plan to support the strategy is being developed. There are representatives from the Vale within the project group.
RM/A049: Implement a Data Dashboard in relation to exploitation.	31/03/2020	85	Green	This dashboard will be developed in line with the identified priorities and actions within the Regional Exploitation Strategy.
<b>AH015</b>				
RM/A050: Work with partners to deliver a consistent regional footprint for the management of escalating concerns.	31/03/2020	50	Green	Final draft completed and has now been checked with legal colleagues across the region. Move now into implementation phase.
RM/A051: Review our quality assurance approach in relation to residential care.	31/03/2020	50	Green	Consultation stage completed and on track for implementation
<b>AH016</b>				
SRS/A032: Prepare businesses for the special procedure's requirements set out in the Public Health Bill.	31/03/2020	50	Green	The service continue to engage with working groups as described above. SRS is currently awaiting further progress from Welsh Government to move this forward.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
SRS/A033: Secure approval of the Communicable Disease Service Plan 2019/20.	31/03/2020	100	Green	The Communicable Disease Service Plan obtained approval by SRS Joint Committee on 10th September 2019.
SRS/A034: Undertake interventions in accordance with the Statutory Health and Safety Section 18 Plan.	31/03/2020	50	Green	The Section 18 Health and Safety Plan obtained approval by SRS Joint Committee on 10th September 2019.
SRS/A035: Undertake interventions where appropriate in accordance with the Food Law Enforcement Service Plan.	31/03/2020	25	Red	The Food Law Enforcement Service Plan obtained approval by SRS Joint Committee on 10th September 2019. There remains a number of vacancies within the service which presents a challenge in relation to the completion of the programme of interventions.
SRS/A036: Continue a programme of training and awareness of Child Sexual Exploitation, slavery and trafficking to protect vulnerable residents.	31/03/2020	25	Red	Following appointment of the policy officer to a Team Manager role in the SRS this action has been pushed back to quarters 3 and 4. Recruitment of a replacement is underway, and this action will form part of the role targets for the last two quarters.

## APPENDIX 2: Performance Indicators

### Objective 7: Encouraging and promoting active and healthy lifestyles

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
CPM/182 (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	N/A	N/A	No Target	N/A	N/A	Annual performance indicator. To be reported at quarter 4.

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
guidelines, meet guidelines on weekly minutes of physical activity).						
CPM/183 (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	No Target	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/184 (WO4/M003): Children age 5 of a healthy weight.	N/A	N/A	No Target	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/185 (WO4/M004): The average number of years a new born baby can expect to live if current mortality rates continue.	N/A	N/A	No Target	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
<b>What difference have we made?</b>						
CPM/191 (VS/M041): Percentage of adults reporting that they participate in sports/ physical activity three or more times a week.	N/A	N/A	No Target	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
<b>How well have we performed?</b>						
CPM/096 (CS/M038): Percentage of attendance at Flying Start childcare.	N/A	N/A	75%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/111 (CS/M037): Percentage of eligible Flying Start children that take up childcare offer.	N/A	N/A	90%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/170 (SI/M050): Percentage of users showing satisfaction with a Families First service accessed.	N/A	N/A	97%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/196 (SL/M025): Percentage of Council catered schools that offer healthy food options.	N/A	N/A	100%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
<b>How much have we done?</b>						

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
CPM/028 (VS/M014): "Number of sports clubs which offer either inclusive or specific disability opportunities. "	54	55	55	Green	↔	No additional clubs added from previous.
CPM/197 (VS/M044): Number of Green Flag Parks.	10	N/A	10	N/A	N/A	Annual performance indicator. To be reported at quarter 3.

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

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
CPM/098 (AS/M019): Percentage of adult service users receiving a direct payment.	N/A	N/A	15%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/060 (SSM/027) (CS/M006): The percentage of re-registrations of children on local authority Child Protection Registers (CPR).	No data reported	4%	5%	Green	N/A	No commentary provided
CPM/203: Percentage of adults at risk of abuse or neglect reported more than once during the year.	N/A	N/A	8%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
<b>What difference have we made?</b>						
CPM/057 (SSM/019) (PAM/025) (SCA/021): The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	2.33	2.11	3.5	Green	↑	Although our performance for the first six months of the financial year (April-September 2019) is within the annual target of 3.5 our performance reporting for this measure is done cumulatively. Therefore, we anticipate that within the next two quarters our DTOC figures are likely to increase further resulting in us no longer performing within target. Based on quarter two's performance we project a

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
						cumulative annual performance of 3.74 which would give us a red status at end of year against target. Performance in this area continues to be a significant ongoing challenge due to capacity within and the viability of the domiciliary sector which impacts negatively on delayed transfers of care. In order to address these pressures, we are working with the independent home care sector and our own reablement care service to increase this capacity.
CPM/058 (SSM/020a) (AS/M003): The percentage of adults who completed a period of reablement a) and have a reduced package of care and support 6 months later.	No data reported	17.27%	45%	Green	N/A	No commentary provided
CPM/107 (HS/M033): Percentage of Supporting People service users who confirm that the support that they have received has assisted them to maintain their independence.	N/A	N/A	85%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/059 (SSM/020b) (AS/M004): The percentage of adults who completed a period of reablement b) and have no package of care and support 6 months later.	No data reported	80.88%	75%	N/A	N/A	No commentary provided
<b>How well have we performed?</b>						
CPM/056 (SSM/018) (AS/M001) The percentage of adult protection enquiries completed within statutory timescales.	No data reported	83.58	90%	Amber	N/A	In line with the SSWA, work continues to ensure that all adult protection enquiries are completed within 7 working days. Measure is cumulative.

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
CPM/112 (HS/M030): Percentage of Supporting People clients satisfied with the support they have received.	N/A	N/A	100%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/206 (PD/M026): Percentage of telecare customers satisfied with the telecare monitoring service.	N/A	N/A	97%	N/A	N/A	Annual performance indicator. To be reported at quarter 2.
CPM/207 (AS/M017): Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	No data reported	56.49%	85%	Red	N/A	Adult services continue to invest in the review team to prioritise reviews of Care and Support within agreed timescales. This figure is not considered to reflect an accurate position of the percentage of reviews undertaken within timescale. Adult services are focussing on the recording of planned and completed reviews over the coming months and expect the accuracy and performance to improve.
CPM/208 (CS/M039): Percentage of care and support plans for children that were reviewed within agreed timescales (WG interim data set).	No data reported	87.01%	91%	Red	N/A	Although the target was narrowly missed; all reviews have been completed albeit not in the recommended timescales.
<b>How much have we done?</b>						
CPM/209 (SS/M018): Number of new Telecare users.	No data reported	168	375	Red	N/A	This is a local measure, which continues to be rolled out; to further promote the awareness and take up of Telecare services amongst our service users to remain living independently at home for as long as possible. 134 TeleV & 34 TeleV+ (cumulative figure = 336).

**APPENDIX 3- Additional Performance Indicators (Well-being Outcome 4)**  
**Objective 7: Encouraging and promoting active and healthy lifestyles**

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
There are currently no additional national measures reported under this section.						
<b>What difference have we made?</b>						
PAM/042: Percentage of National Exercise Referral Scheme (NERS) clients who reported an increase in leisure minutes at 16 weeks.	81.8%	74%	90%	Red	↓	74 % of people who completed the exercise referral scheme reported increasing their leisure time minutes on the SPAQ questionnaire. The leisure provider does not provide any incentivised scheme to allow access to the leisure centres for finishers of the NERS scheme. Prior to the Partnership between Legacy (Parkwood) and the Vale of Glamorgan a reduced price membership was in place to allow scheme finishers access to facilities and increase the probability of them continuing to increase their leisure minutes of activity. As prices continue to rise for all in the centres this will, and has, caused a drop in the number of clients who continue to use the leisure centres post NERS referral completion and may show in these figures.
<b>How well have we performed?</b>						
PAM/041: Percentage of National Exercise Referral Scheme (NERS) clients who continued to participate in the exercise programme at 16 weeks.	40%	43.31%	40%	Green	↑	This is live data and adjustments will continue to be made over the course of the year.
<b>How much have we done?</b>						
PAM/017 (LCS/002b): Number of visits to local authority sport and leisure facilities during the year where the visitor will be participating in physical activity per 1,000 population.	4,598.9	5115.5	2842	Green	↑	Usage figure of 360,111 with a total for q1 & q2 being 668,548 although schools is normally supplied later in the year.

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

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
There are currently no additional national measures reported under this section.						
<b>What difference have we made?</b>						
SSM/025 (CS/M004): The percentage of children supported to remain living within their family.	No data reported	75.02%	No Target	N/A	N/A	No comment needed, performance for this measure is for monitoring purposes only; as this measure is dependent on the looked after children population.
SSM/034a (CS/M029): The percentage of all care leavers who are in education, training or employment at 12 months after leaving care.	No data reported	20%	53%	Red	N/A	No commentary provided
SSM/034b (CS/M030): The percentage of all care leavers who are in education, training or employment at 24 months after leaving care.	No data reported	75%	53%	Green	N/A	No commentary provided
SSM/001: Percentage of people reporting that they live in the right home for them.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/002: Percentage of people reporting they can do what matters to them.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/003: Percentage of people reporting that they feel safe.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/004: Percentage of people reporting that they feel a part of their community.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/005: Percentage of people reporting they feel satisfied with their social networks.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/006: Percentage of children and young people reporting that they are happy with who they live with.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
SSM/017: Percentage of People reporting they chose to live in a residential care home.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
<b>How well have we performed?</b>						
SSM/023 (AS/M005): The percentage of Adults who have received support from the information, advice and assistance service and have not contacted the service again during the year.	N/A	N/A	85%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/024 (PAM/028) (CS/M004): The percentage of assessments completed for children within statutory timescales.	No data reported	65.63%	85%	Red	N/A	No commentary provided
SSM/026 (CS/M005): The percentage of looked after children returned home from care during the year.	No data reported	5.29	7%	Green	N/A	No commentary provided
SSM/030 (CS/M007): The percentage of children seen by a registered dentist within 3 months of becoming looked after.	No data reported	22.22%	60%	Red	N/A	No commentary provided
SSM/021 (AS/M015): The average length of time older people (aged 65 or over) are supported in residential care homes.	No data reported	791.91	N/A	N/A	N/A	No commentary provided
SSM/022 (AS/M016): Average age of adults entering residential care homes.	No data reported	82.84	N/A	N/A	N/A	No commentary provided
SSM/028 (CS/M025): The average length of time for all children who were on the Child Protection Register during the year.	No data reported	313.8	250	Red	N/A	This measure for Q2 has a very small cohort of children; currently skewed by two children who were on the CPR for 784 days. Decisions for removing a child from the CPR are taken in the best interests of the child by practitioners working with the child. Performance in this area is significantly improved compared to 2018/19.

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
SSM/029a (CS/M026): Percentage of children achieving the core subject indicator at key stage 2.	N/A	N/A	70%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/029b (CS/M027): Percentage of children achieving the core subject indicator at key stage 4.	N/A	N/A	25%	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/032 (SCC/002): The percentage of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March.	No data reported	6.15%	11.50%	Green	N/A	No commentary provided
SSM/031 (SCC/040): The percentage of looked after children registered with a GP.	No data reported	100%	99%	Green	N/A	No commentary provided
SSM/033 (PAM/029) (SCC/004): The percentage of looked after children on 31 March who have had three or more placements during the year.	No data reported	2.3%	9%	Green	N/A	No commentary provided
SSM/035 (CS/M031): The percentage of care leavers who have experienced homelessness during the year.	No data reported	3.4%	12%	Green	N/A	Cumulative figure = 7.00%. No YP experienced homelessness in Q2
SSM/007: Percentage of people reporting they have received the right information or advice when they needed it.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/008: Percentage of people reporting they have received care and support through their language of choice.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/009: Percentage of people reporting they were treated with dignity and respect.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.

Performance Indicator	Q2 2018/19	Q2 2019/20	Q2 Target 2019/20	RAG Status	Direction of Travel	Commentary
SSM/010: Percentage of young adults reporting they received advice, help and support to prepare them for adulthood.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/011: Percentage of people with a care and support plan reporting that they have been given written information of their named worker in social services.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/012: Percentage of people reporting they felt involved in any decisions made about their care and support.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/013: Percentage of adults who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/013: Percentage of children who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/014: Percentage of parents reporting that they felt involved in any decisions made about their child's care and support.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/015: Percentage of carers reporting they feel supported to continue in their caring role.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
SSM/016: Percentage of carers reporting they felt involved in designing the care and support plan for the person that they care for.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
<b>How much have we done?</b>						
There are currently no additional national measures reported under this section.						