

Meeting of:	<b>Healthy Living and Social Care Scrutiny Committee</b>
Date of Meeting:	<b>Tuesday, 17 March 2020</b>
Relevant Scrutiny Committee:	Healthy Living and Social Care
Report Title:	Quarter 3 2019/20 Performance Report: An Active & Healthy Vale
Purpose of Report:	To present quarter 3 performance results for the period 1st April 2019 to 31st December 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 3 (1st April to 31st December 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 3 (Q3).</li> <li>86% (57) 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. 6% (4) of actions were allocated an amber status and 8% (5) of planned actions have been attributed a Red status. These performance exceptions related to reviewing the Information, Advice and Assistance Service and developing the wider and more appropriate use of the Information,</li> </ul>	

Advice and Assistance Service/Families First Advice Line, undertaking actions to support the provisions of the Public Health Wales Act 2018, 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 10 measures where a performance status was applicable. 50% (5) measures were attributed a Green performance Status, 20% (1) an Amber status and 40% (4) a Red status. A performance status was not applicable for 14 measures that includes 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 Q3 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 31st December 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 66 planned activities aligned to this Well-being Outcome for 2019/20, 86% (57) 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. 6% (4) of actions were allocated an amber status and 8% (5) of planned actions have been attributed a Red status. These performance exceptions related to reviewing the Information, Advice and Assistance Service and developing the wider and more appropriate use of the Information, Advice and Assistance Service/Families First Advice Line, undertaking actions to support the provisions of the Public Health Wales Act 2018, 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 10 measures where a performance status was applicable. 50% (5) measures were attributed a Green performance Status, 20% (1) an Amber status and 40% (4) a Red status. A performance status was not applicable for 14 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](#)

ACTIVE &  
HEALTHY

VALE OF GLAMORGAN COUNCIL

Active and Healthy Vale Performance Report

QUARTER 3:1 APRIL 2019 – 31 DECEMBER 2019



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

## 1.0 POSITION STATEMENT

During quarter 3, 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 3.

86% (57) of planned actions aligned to 'An Active and Healthy Vale' have been attributed a Green performance status reflecting that strong progress has continued during the quarter. 6% (4) of actions were allocated an amber status whilst 8% (5) of planned actions have been attributed a red status.

Of the 24 performance measures aligned to this well-being outcome, ten measures could be allocated a RAG status. Five 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 'number of Green Flag Parks', the 'percentage of re-registrations of children on local authority Child Protection Registers (CPR)' and the 'Percentage of adults who completed a period of reablement b) and have no package of care and support 6 months later'. One was allocated an amber status in relation to the 'percentage of adult protection enquiries completed within statutory time-scales'. The remaining 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					PERFORMANCE MEASURES				
Our performance against the Corporate Plan actions is on track for delivery, giving us an overall <b>GREEN</b> RAG status for this outcome					Our performance against performance measures is on track, giving us on overall <b>AMBER</b> RAG Status against this outcome				
Service Plan Actions					Performance Measures				
Objective 7: Encouraging and promoting active and healthy lifestyles					Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total				N/A	Total
			0	14				9	11
Objective 8: Safeguarding those who are vulnerable and promoting independent living					Objective 8: Safeguarding those who are vulnerable and promoting independent living				
			N/A	Total				N/A	Total
			0	52				5	13

Total for the Outcome				
			N/A	Total
			0	66

Total for the Outcome				
			N/A	Total
			14	24

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

Of the 11 indicators identified for Objective 7, nine are annual and two are quarterly. Data was only available in relation to both CPM/028: Number of Sports Clubs offering inclusive or specific disability opportunities was attributed a green status and CPM/197: Number of Green Flag Parks which was also 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)	4		
<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 8 measures this quarter, CPM/060, CPM/058 and CPM/059 were all attributed a green status. CPM/056 remained an amber status and the four remaining indicators CPM/207, CPM/208, CPM/209 and CPM/057 were allocated 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)	4		

## 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.	50		↔	Families First Advice Line Senior Advisor vacancy recruited to post (commenced 28.12.2019) following short vacancy. FACT Manager appointed and commenced post 06.12.19. These key appointments will enable us to review the effectiveness of the IAA within quarter 4. In addition, it is anticipated that within Q4 there will be some progress in the drafting of agreement and recruitment of a Mental Health practitioner who will be based at Cadoxton House (CAVUHB appointment through Transformational Funding).

**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 previously reported, 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. As a result, when the engagement with businesses and distribution of guidance materials will commence. This appears unlikely until Q4.

There were no performance measures attributed with a Red status during the Quarter 3 period for Objective 7.

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

**Corporate Plan Action AH007: Implement new ways of working in light of Social Services Well-being (Wales) Act with a particular focus on the priority workstreams of:**

- Provision of information
- Advice and assistance services
- Eligibility/assessment of need
- Planning and promotion of preventative services
- Workforce
- Performance measures

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
CS/A029: Develop the wider and more appropriate use of the Information Advice and Assistance Service/ Families First Advice Line as a single point of contact for the service.	50		↔	Families First Advice Line Senior Advisor vacancy recruited to post (commenced 28.12.2019) following short vacancy. FACT Manager appointed and commenced post 06.12.19. These key appointments will enable review and refiguration of the previous work in partnership with St Athan school as pilot Hub. Discussions progressing with CAVUHB to pilot Mental Health Practitioner to be based at Cadoxton House with the Advice Line funded by Transformation funding stream with a view to 'go live' in 2020/21.

**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.	50		↑	Due a number of vacancies within the team there are a shortfall of inspections undertaken which has had an impact on the planned intervention plan. The service is currently undertaking inspections in accordance with a risk based approach.
SRS/A036: Continue a programme of training and awareness of Child Sexual Exploitation, slavery and trafficking to protect vulnerable residents.	50		↑	We have appointed the replacement Licensing Policy Officer who is to take up post in the next three weeks. Further training for Licensing Enforcement staff and other Officers in the SRS with South Wales Police is planned for Quarter 4.

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	Direction of Travel	Commentary
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	68.3%	85%	↑	Cleansing is still on-going to improve the accuracy of this indicator. As of Quarter 3 the position continues 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	88.3%	91%	↑	These figures relate to the Part 6 Care and Support Plan Reviews for Children Looked After. Whilst we have not reached our anticipated target, there will be additional focus on the reasons reviews have not taken place within timescales and ongoing work to understand and improve this area of reviewing.
CPM/209 (SS/M018): Number of new Telecare users.	232	245	375	↑	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. 190 TeleV & 55 TeleV+ (cumulative figure = 326). Although we are on course to exceed our performance in 2018/19, performance to date still remains lower than the challenging target set by ourselves
CPM/057 (SSM/019) (PAM/025): The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	4.16	3.33	3.5	↔	Although our performance for the first nine months of the financial year (April-December 2019) is within the annual target of 3.5 our performance reporting for this measure is done cumulatively. Although our performance has been slightly better than anticipated we acknowledge that winter pressures will impact on our performance next quarter with DTOC figures likely to increase further resulting in us no longer performing within 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

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	Direction of Travel	Commentary
					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.

## 1.5 OUR ACHIEVEMENTS

- The Vale of Glamorgan Council continues to have high participation levels in physical activity and sport. During quarter 3, there were 7,808.8 visits to local authority sport and leisure facilities during the quarter per 1,000 population which is an increase on the previous year of 6,915.5. The increase in visits compared to the same period in the previous year, has mainly been driven by increased usage of our leisure centres. To enhance visitor numbers, we have continued to focus on improving the overall condition and the quality of facilities at our Leisure Centres. Work continues to progress well in relation to the refurbishment of Penarth Leisure Centre's changing facilities and will reopen during quarter 4. The new Leisure Strategy was adopted by Cabinet during quarter 3.
- We continue to focus on developing the range of leisure and community facilities to enhance participation levels in physical activity. Discussions are ongoing in relation to the formation of partnerships for the management of the Council's single use sports ground programme for example with Football and Rugby Clubs in the way facilities are managed going forward.

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.
- 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 from Welsh Government totalling £100k is being used to improve existing Active Travel routes. In addition to this, work has commenced on piloting cycle hire in Penarth. During quarter 3, Next Bike were appointed as the cycle hire provider. We anticipate that the installation of e-bike docking stations will be in place in Penarth during quarter 4.
- We have successfully delivered a comprehensive play programme for children and their families. During quarter 3, we have worked closely with United Welsh Housing to develop an unused allotment plot in Dinas Powys to turn it into a community play space. We have also successfully delivered a range of play activities across the Vale of Glamorgan that has attracted high-levels of participation. As part of our deprivation work programme, five Healthy, Active and Indoors (play and sports) sessions were held in the Colcot area that resulted in 39 participations. There were over 200 participants at the Barry lights switch on and a Christmas Party at Barry Leisure Centre was attended by over 20 organisations who provide advice and support to families which in turn was attended by 300 participants. In addition to this, the Play team have also delivered a range of other events in conjunction with other partners such as the Pumpkin in the Park event was organised in collaboration with Holton Road Traders which saw over 100 participants. We have also worked with Play Wales, Cardiff Council, Recreate and Agored Cymru on a HAF funded project to develop Play Ambassadors aged 14-19.

## OUR ACHIEVEMENTS

- We have worked effectively with our partners on the Area Programme Board to develop our approach to Substance Misuse Services and Commissioning. By working with Cardiff Council we have contributed to the production of a regional bid to access Welsh Government funding that will enable us to review drug and alcohol services for those who are homeless or at risk of becoming homeless. It is anticipated that we will receive notification of the outcome of this bid during Quarter 4. An operational group has also been established to explore options for the commissioning of services for Cardiff and the Vale. The outcomes of this work are due to be presented at the next Area Programme Board meeting in Quarter 4.
- Strong progress has been made in progressing the inter-generational work we undertake across our Vale-run residential care homes. There is an ongoing collaborative arrangement between Cartref and Romilly Primary School where pupils work alongside care home residents to engage in range of activities and a local playgroup now regularly attends Southway to undertake inter-generational activities with residents and pre-school children. Tovertafel equipment (a projector with infra-red sensors, and speakers) is being used in Cartref to run a series of games to enhance and stimulate physical and cognitive activities of residents with Dementia. We have explored the use of this technology by engaging with Digital Champions in a local high school to deliver/participate in these games with residents. We have been in contact with a high school in Barry to explore implementing a similar project at Ty Dyfan, once Tovertafel has been installed. It is hoped this inter-generational approach could be rolled out more widely, as during the quarter we have had meetings with private sector care homes and sought to match care homes with local schools that may be interested in taking this idea forward.
- We continue to successfully roll out the Childcare Offer universally to three and four-year-olds across the Vale of Glamorgan. During quarter 3, 1,204 applications for the Child Care offer were received from Vale of Glamorgan parents with 1,075 being approved. Through the Childcare Offer scheme there are 186 childcare providers who are currently registered to participate in the programme, which is an increase of four on the previous quarter. As at 28<sup>th</sup> November 2019, this scheme has enabled 750 children to access 30 hours of free childcare in the Vale. The marketing of this scheme is now well established which has been supported by the launch of a national communications campaign that utilise websites, social media, radio and TV. Now that the Childcare Offer has been fully rolled out across Wales, a national marketing campaign commenced 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. During Quarter 3, we successfully appointed a permanent Policy Officer who will be responsible for prioritising and progressing key policy areas relevant to each Head of Service's remit. There have been ongoing meetings with respective ICT leads across the region to explore the option of developing a website that is accessible to both practitioners and the public to be kept informed about policies, procedures and practice. A Project Brief has been compiled to make a case for utilising Share Point as a potential solution.
- Progress continues to be made in the review and development of a Social Services Performance Management Framework which is being led by our Regional Co-ordinator as part of a regional workstream. This workstream is currently reviewing the final list of new performance metrics and forms are being aligned to ensure consistency of recording and reporting across the region.
- We have continued to develop a clear and coherent approach to Continuing Health Care Processes (CHC). Adult Services Social Work Teams continue to work with individuals and families to review and identify people with CHC triggers and make the necessary referrals to DST/CHC assessments with Health colleagues with well-established pathways for referral to CHC assessments. By operating in this way, the teams have been able to effectively identify and support those eligible for CHC funding by the NHS. For example, the teams have identified and supported 10 individuals to progress to CHC funding in 2019/20 which represents a saving of £188,071 this year and £201,301 per annum ongoing.

## OUR ACHIEVEMENTS

- The Customer Contact Centre remains fundamental part of the work being delivered as part of the Vale Locality, Adult Social Care services and regional community health services. We have enhanced our referral management processes at the Customer Contact Centre. In relation to Intake and Assessment, referral pathways are well established. The Intake and Assessment Team continue to work closely with the Contact Centre (C1V) to focus on reducing the wait times for Adult Services responses. For example, as at the 4<sup>th</sup> November 2019 the queue was 284 which was significantly reduced to 72 by the 3<sup>rd</sup> December 2019, this was whilst continuing to manage 20-30 referrals per day and deal with 250 Blue Badge applications. Although, this represents good progress, this has put some additional strain on social work teams within Intake and Assessment. It is anticipated that optimising the use of the newly appointed Well-being Officers within C1V will help to alleviate some of this pressure.
- Well-being Officers (Enhanced Outbound Officers) have now been fully established within C1V for Adult Services processes 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. The Intake and Assessment Team Manager is providing ongoing support to these Well-being Officers through upscaling their knowledge-base of Adult Services and by reviewing the screening tool and associated knowledge-base toolkit. In addition, two Well-being Visiting Officers have been recruited and are due to start during quarter 4 (January 2020) and will be responsible for more of the outreach function in terms of undertaking screening of Adult Services referrals, proportionate assessment and provision of information and advice over the phone as well as conducting home visits where needed. It is anticipated that this added specialist capacity will relieve the current pressure on the Intake and Assessment Team and reduce waiting times, enabling citizens access a full range of IAA without delay.

- 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 3 just 5.3% 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.
- In relation to Children Looked After experiencing one or more changes in school, during quarter 3, just 10% of children looked after experienced one or more changes in their school.

- Good progress has been made in the implementation of the Joint Learning Disability Commissioning Strategy with workstreams established to ensure effective delivery. There are action plans aligned to each workstream that meet regularly, and these action plans are reviewed by the Learning Disability Partnership Board on a quarterly basis with reporting upwards to the Learning Disability Implementation Group and Learning Disability Regional Partnership Board where necessary. There is a dedicated Project Officer in place through the ICF to support managing this implementation. Engagement and information sharing events for people with learning disabilities, parents, carers and other stakeholder have been planned for quarter 4 (January 2020), to share information on achievements to date and to explore/present the challenges to the strategy's delivery.

Safeguarding continues to be a core focus across all Council services. Some key developments during quarter 3 have included:

- Continuing to monitor and report on compliance with the Safer Recruitment Policy. Overall our compliance corporately during quarter 3 was 100%, which is the same as the previous year and for school positions our compliance for the quarter 3 period was 97% compared to 93% in the previous year (April-December 2018), demonstrating an improvement on the previous year. We continually strive to improve compliance levels by further strengthening our safer recruitment mechanisms which have included providing weekly updates to Head Teachers on compliance to improve communication, with quarterly updates to the Corporate Safeguarding Group and twice-yearly updates/monitoring to Scrutiny and Cabinet. For those schools who don't have an SLA with Employee Services to provide this compliance data, we are working closely with them to plan for reporting. 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.
- The new Wales Safeguarding Procedures were launched in November 2019, led by Cardiff and Vale Safeguarding Board with the Chair of the project being the Director of Social Services from the Vale of Glamorgan. These national procedures will be formally adopted and then implemented by Regional Safeguarding Boards during quarter 4 (March 2020).
- We have continued to contribute to the development of a Regional Exploitation Strategy, which is in the process of being finalised ready for approval and launch during quarter 4 (March 2020). This Strategy encompasses all aspects of exploitation (including child sexual exploitation).

## OUR ACHIEVEMENTS

- 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 good progress by utilising the Contact Centre to provide the technical platform for the GP Triage Service in order to promote the General Medical Services (GMS). This platform is ready to go live, and we anticipate that the service will be launched in quarter 4 (February 2020) with the pilot GP surgeries. Further GP surgeries will be added over the forthcoming 12 months with the intention that all GP practices will be utilising this model by March 2021.
- We have continued to work effectively with Housing Services to implement our 'Accommodation with Care' approach to support and enhance independent living. The Penarth Older Persons with Care project has progressed to the 2<sup>nd</sup> stage financial appraisal. A preferred RSL partner, Wales and West Housing Association has been commissioned to cost and prepare a pre-planning application for the delivery of an extra care facility.

## 1.6 OUR CHALLENGES

- 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.
- Sustaining and improving participation levels in physical activity at a time of diminishing resources continues to be a challenge. Despite successfully securing funding to deliver the Local Authority Partnership Agreement (LAPA) for 2019/20, in real terms this funding we have been allocated represents a cut in our budgets. 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.
- 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.
- 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 the inspection programme and delivery of any training. Within the Food and Port Team there were a number of vacancies. Although recruitment to these vacant posts has now been undertaken. The delivery of training on child sexual exploitation, slavery and trafficking has also been delayed as a result of a staffing vacancy. During quarter 3 we appointed a replacement Licensing Policy Officer who will commence in post during quarter 4. This will enable training for licensing enforcement staff and other officers in the SRS with South Wales Police to be delivered during quarter 4.
- 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 in relation to the 'Well-being Matters' agenda. Although good progress has been made in further integrated health and social care services through the Contact Centre and the ongoing development of the GP Triage Service, there are some challenges to overcome in terms of its development. For example, the implementation of the new contact centre technology that will improve access to a range of health and social care services across a range of communication channels has been delayed. The work was delayed until November 2019, due to network issues that were being experienced, as BT were unable to port telephone lines to the new platform at the same time. These issues have been escalated with the supplier who we are in discussions with to resolve. It is now anticipated that the new 'Go Live' date for the launch of the new contact centre platform will be in quarter 4 (end January 2020). In addressing these issues, our focus has been on reassuring our stakeholders that we are managing these risks effectively and we continue to work well as a joint project team to address the challenges.

## OUR CHALLENGES

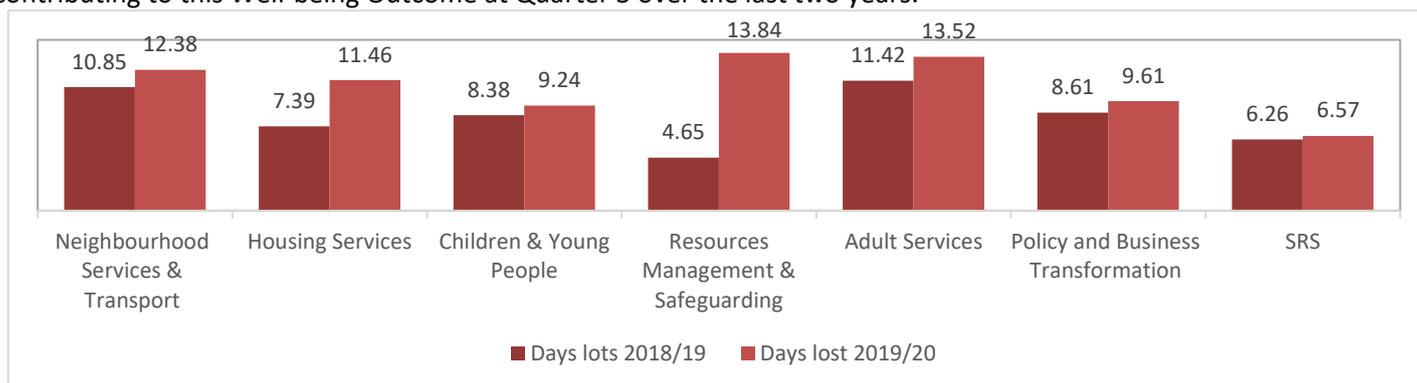
- Ability to continue to focus on the reduction in delayed transfers of care remains a challenge. Although we have made good progress in minimising delayed transfers of care during quarter 3, our performance in this area continues to be a challenge. The availability of domiciliary care has impacted on 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.
- Our capacity to meet the growing demand for children and family support services to ensure that needs are met has been a challenge. This has been particularly the case in relation to the provision of information and advice as a single point of contact via the Families First Advice Line (Information, Advice and Assistance Line). Although we have heavily invested resources to increasing our capacity at this 'front door', vacancies in relation to a Senior Families First Advice Line Advisor and a FACT Manager has put pressure on these services. These vacancies have now been filled and will enable us to effectively review and reconfigure the service. Ongoing discussions with the Health Board are progressing well and it is anticipated that Transformation Funding will be used to pilot a Mental Health Practitioner to be based at Cadoxton House as part of the Families First Advice Line service.
- 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.
- 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.

## 2.0 CORPORATE HEALTH: MANAGING OUR RESOURCES

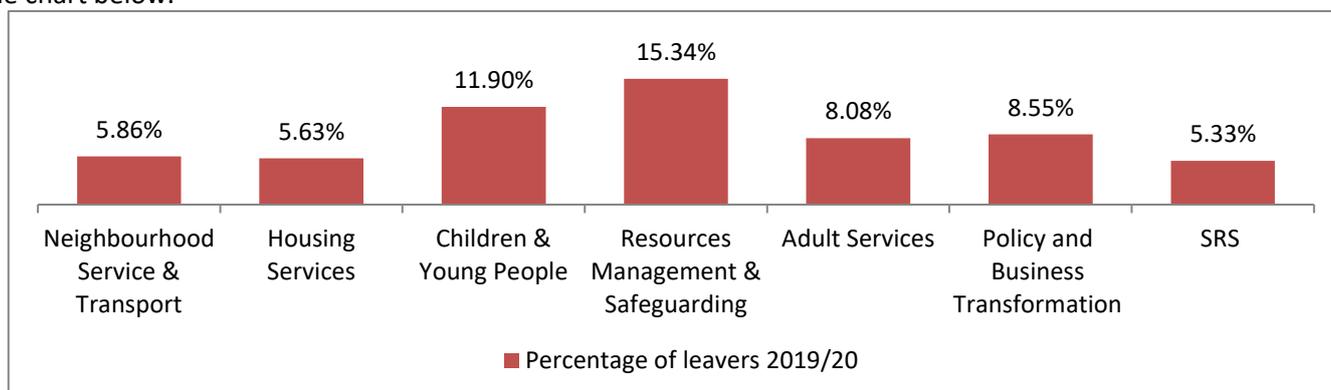


### 2.1 PEOPLE

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 3 period between 2018/19 and 2019/20, the number of days lost per full time equivalent (FTE) due to sickness increased by 1.31 days from 6.32 working days lost in Quarter 3 in 2018/19 to 7.63 days in Quarter 3 2019/20. The graph below shows the sickness absence data for services contributing to this Well-being Outcome at Quarter 3 over the last two years.



The total percentage turnover for services contributing to this Well-being Outcome during Quarter 3 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.

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. Shown below are some key highlights for the quarter 3 period relating to this well-being outcome.

- Within the Social Services Directorate, and particularly in relation to Children and Young People Services we continue to work with corporate colleagues to deliver a targeted recruitment in relation to hard to recruit/business critical posts. During Q3 we have succeeded in recruiting to the majority of teams where there have been vacancies. However, there continue to be some minor challenges within the Children's Placements and Permanency Team. It is anticipated that changes to the capacity of roles within this team will support a bespoke advert that will be published in January 2020. There is also an ongoing open advert for Social Work vacancies that has generated a lot of positive interest with early signs that this may translate to potential appointments albeit not in the Placement and Permanency Team.

## 2.1 PEOPLE

- We continue to deliver a programme of refresher training to staff on the Welsh Community Care Information System (WCCIS) on an ongoing basis. To enable us to do this we have permanent staff in place to assist with the delivery of training as required on a one to one basis. We have also established super-users within teams, to assist with resolution of day to day issues as they arise.
- We have reviewed the Resource Management and Safeguarding division, to further build resilience into the safeguarding structure. We have done this by successfully recruiting a Safeguarding Team Manager and filling all Independent Reviewing Officer positions. These appointments will commence in early 2020.
- The model for integrating the Long-term Care Team and Nurse Assessor team has been discussed with senior managers within Social Services and the University Health Board. It has been agreed that work can progress without delay on establishing a single line management structure. OM Locality and Lead Nurse will progress this work into Quarter 4.
- We have continued support work on the audit of staff skills. This will support our approach to succession planning and will enable us to nurture a broader skill mix of staff.
- We have reviewed the remuneration of Approved Mental Health Professionals to improve recruitment and retention of these positions and have put in place new remuneration. Potential changes to Job Descriptions and Person Specifications are being discussed with Trade Unions/HR. This will enable us to incorporate an expectation that all Social Workers will make themselves available to train as Approved Mental Health Professionals. Work around this area will continue to be progressed.

## 2.2 FINANCIAL

The latest Revenue Monitoring report relates to the period 1<sup>st</sup> April to 30<sup>th</sup> November 2019 which was reported to Cabinet on the 20<sup>th</sup> January 2020. 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 £1.2m.

Across the Social Services divisions there continues to be a number of cost pressures facing the services. In relation to Children and Young People Services the greatest cost pressure continues to be in relation to the Children's placements budget which continues to be linked to the cohort of children being supported who have increasingly complex needs which results in higher cost placements. Our focus continues to be on ensuring children are placed in the most appropriate and cost-effective placements. Some positive progress has been made and it is now projected that the budget will be overspent by around £00k this year. It should be noted that due to the high cost of placements, the outturn position could fluctuate as a result of any changes in the number of children being looked after and/or the complexity of each individual's needs. This position is inclusive of the utilisation of the £500k grant funding provided by Welsh Government which had been provided on a one-off basis in 2019/20. The service holds a reserve that could be accessed at year end to fund high cost placement if should they be required. Within the Youth Offending Service, it is anticipated that this service will outturn with an underspend of £100k at year end. This is due to staff vacancies.

Within Adult Services, the main area of concern continues to be the Community Care Packages budget, and it is projected there will be a net overspend at end of year of roughly £700k. The outturn position is difficult to predict currently as the budget is extremely volatile. The service continues to be affected by the on-going pressures due to demographic growth, with an increase in the cost of service provision and the Community Care Packages budget will have to achieve further savings this year. The service continues to focus on managing this growing demand and is looking at developing 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.

An allocation of £2,022m for the Shared Regulatory Service, represents the Vale of Glamorgan's budget for its share of the service. A separate set of accounts is maintained for the SRS and periodically reported to the Shared Regulatory Service Joint Committee. It is anticipated that the SRS will outturn on target at year end.

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 93% 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:

- Leisure Services- We have continued to progress work on the upgrade to our changing room facilities, to enhance the provision of leisure facilities. During Quarter 3 we had a slight delay due to flooring issues with the Changing Village in Penarth. This is now due to open in Quarter 4, this will be highly beneficial to the public, providing them access to new cubicles and lockers and a fully accessible area that allows users to have more privacy and offers families more space to change.
- Within Social Services, we have continued to focus on exploring opportunities to better use our assets with partners to make the best use of our pooled resources this quarter. We continue to explore the opportunities for joint ventures through the Reshaping Asset Board which the Head of Adults Service is a member of for the Directorate. On going work continues with the University Health Board (UHB) and council departments to ensure our assets are utilised as efficiently as possible.

## 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:

- We continue to work with the Care Package Commitments Task and Finish Group to enable us to implement a new dashboard application for the monitoring of Care Packages. During quarter 3 the absence of key personnel and availability of consultant time has unfortunately resulted in the project being slightly delayed. Although this has occurred in Quarter 3, we are anticipated to complete during quarter 4 as the Welsh Community Care Information System (WCCIS) finance module will be in place to assist with end of year financial assessment processes.
- We continue to explore the use of technology to enable us to further enhance integration and communication with our partners. During quarter 3, the Social Services Directorate successfully migrated onto Office 365 and continue to explore new opportunities for technology that will enable communication. For example, we have been utilising conference calling and video-conferencing with other officers.
- Within Adult Services we have continued to review the content of the website to ensure it remains relevant and up to date. The new structure to the Adult Services Website is being developed to provide greater accessibility for all citizens. Officers have been appointed as editors for each of the different areas within adult services, this enables the information on the website page to be updated. Each Adult operational manager and team leader is tasked with updating information for the new structure.
- The Social Service Directorate continues to support delivery of the 'Digital Place' strand of the Digital Strategy. 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 Q1 which allowed the focus on utilising digital technology with Learning Disability day opportunities service users, and when this work was reviewed in Quarter 3, we have identified highly positive outcomes. This pilot project enabled service users to record their own profiles enabling them to outline how they wish to be supported and to identify what is important to them and their preferences in terms of their care and support. The project group is now reviewing the potential to roll this out further to enable us to raise the voice of people with care and support needs.

## 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 have continued to work in collaboration with our citizens to establish the self-management of Bowling greens which commenced on the 1<sup>st</sup> October 2019. This partnership working approach is having a positive effect, as work continues to grow with the proposals for new netball facilities. This approach has enabled us to effectively engage with our citizens and enabled them to participate in new and exciting activities, while increasing their individual physical activity levels. Discussions have commenced with Clubs in the second tranche of this work about the proposed changes to the management of these sites.
- As part of the Carers Workstream associated with the Social Services and Well-being (Wales) Act 2014 the Regional Carers Strategy is being developed. During Carers Week a draft strategy was made readily available, which allowed us to receive comments from the Health Board and staff. Along with this, 6 focus groups have been run to discuss this and an online survey was also made available, where the feedback is waiting to be collated. The Regional Carers Strategy ensures that carers are recognised within our communities and we support the highest quality of life both for those providing and to residents in care.
- Positive progress continues to be made through the 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 3 there were eight corporate risks that are aligned to this Well-being Outcome, in relation to CR1: Reshaping Services, CR2: Legislative Change and Local Government Reform, 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. 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		
CR1	Reshaping Services	2	2	4 (M)		
CR2	Legislative Change and Local Government Reform	2	3	6 (M)		
CR9	Public Buildings Compliance	2	2	4 (M)		
CR10	Safeguarding	1	3	3 (M/L)		

<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

Risk ref	Risk	Residual Risk Score			Direction of Travel <sup>3</sup>	Forecast Direction of Travel <sup>4</sup>
		Likelihood	Impact	Total		
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		
	Children and Young People Services	Medium		

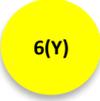
<sup>3</sup> **Direction of travel** compares residual risk score for the current quarter with the previous quarter to indicate whether the risk is increasing/decreasing or staying static.

<sup>4</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

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	8(A)	↔	↔
Closure/failure of our commissioned providers.	Resources Management, Safeguarding and Performance	Medium /High	8(A)	↔	↔
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	12(R)	↔	↑
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	4 (Y)	↔	↔
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	6(Y)	↔	↔
Insufficient funds to meet rising demand for services.	Resources Management, Safeguarding and Performance	Medium /High	8(A)	↔	↔
Continued reduction and regionalisation of grant funding.	Children and Young People Services	Medium	6(Y)	↔	↔
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	9(A)	↔	↔

Risk Description	Service Area	Status		Direction of Travel	Forecast Direction
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	4 (Y)	↔	↔
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	8(A)	↔	↔
Insufficient operational staff capacity to ensure timely assessments are completed.	Adult Services	Medium /High	9(A)	↔	↓
	Children and Young People Services	Medium	4 (Y)	↔	↔
Capacity of Approved Mental Health Professionals (AMPs) to undertake reviews in line with the requirements of the Mental Health Act.	Adult Services	Medium /High	8(A)	↔	↔
Insufficient funding and staff capacity to meet the growing demand for services.	Children and Young People Services	Medium	4 (Y)	↔	↔
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	12(R)	↔	↑
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	3(G)	↔	↓
Inability to implement requirements of the Social Services and Well-being (Wales) Act.	Resources Management, Safeguarding and Performance	Medium	4 (Y)	↔	↔

Risk Description	Service Area	Status		Direction of Travel	Forecast Direction
Compliance with the requirements of the Social Services and Wellbeing (Wales) Act 2014.	Adult Services	Medium /Low			
Insufficient capacity in care settings to deliver services to meet the care and support needs of service users	Resources Management, Safeguarding and Performance	Medium			

## 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
<b>Likelihood/Probability of Risk Occurring</b>					

**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: 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	75	Green	Discussions continue to take place in relation to new partnerships linked to the Councils single use sports ground programme. Discussions are now on-going with a number of Football and Rugby Clubs about changes to the way facilities are managed moving forward.
NS/A075: Enhance the provision of leisure facilities by upgrading changing rooms.	31/03/2020	75	Green	We are still on track to complete the changing Village at Penarth despite the slight delay with the flooring issues. Penarth changing village will open during quarter 4.
NS/A036: Provide a School Crossing Patrol service at high risk locations to enable children to walk safely to and from school.	31/03/2020	75	Green	We continue to ensure that we provide a school crossing patrol service to enable the access for children to walk safely to and from school. Any sites that do not have the benefit of safe push button controlled pedestrian crossing services continue to benefit from a School Crossing Patrol service at a number of locations.
NS/A076: Implement the 2019/20 Local Authority Partnership Agreement (LAPA).	31/03/2020	75	Green	6 month progress report submitted and accepted by Sport Wales who are pleased with progress of the projects contained within the plan. The Plan / partnership funding agreement for the next financial year has been submitted, we will be aware of the outcome by mid-February. Whilst current plan is progressing well, staff sickness has unfortunately impacted and created additional work for remaining staff.
NS/A048: Finalise and implement a Leisure Strategy for the Vale of Glamorgan.	31/03/2020	100	Green	This action is 100% complete as The Vale of Glamorgan Leisure has now been agreed by Cabinet.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<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	75	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 during quarter 4. An operational group is to be set up in relation to the commissioning of services and options open to Cardiff and Vale APB are due to be explored with the outcome set to be presented at the next Area Programme Board meeting.
<b>AH003</b>				
NS/A040: Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families.	31/03/2020	75	Green	We currently have a team working with United Welsh Housing in Dinas Powys to develop an unused allotment plot into a community play space. As part of the deprivation work programme 5 Healthy, Active & Indoors (play and sports) sessions held in the Colcot area accruing 39 participations. There was also a Family engagement event to celebrate 30 years of the United Nations Convention on the Rights of the Child. We had a huge success with 33 participation in St Athan during 3 play sessions delivered in half term. Play team involved in the Barry Christmas Lights Switch where 200+ participants enjoyed family based activities. The Sports & Play Team delivered a Christmas party at Barry Leisure Centre in partnership with the Family Information Service (also attended by 20+ organisations who offer services to families) attended by 300 participants. Play Team involved in the delivery of activities to 100+ participants at the Pumpkin in the Park event in conjunction with Holton Road Traders. Working in partnership

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				with Play Wales, Cardiff Council, Recreate and Agored Cymru on a HAF funded project developing Play Ambassadors aged 14 – 19 years. No play scheme for disabled children held as the facility was shut due to norovirus. Play Development Officer is a representative on the Ministerial Play Review Steering Group looking local and national issues affecting play.
<b>AH004</b>				
RM/A027: Support the pilot roll out of the Welsh Government’s Child Care Offer.	31/03/2020	75	Green	We received 1,204 applications from parents and 1,075 have been approved.186 childcare providers are signed up to the Childcare Offer for the Vale. The national comms campaign has been launched and includes website, social media, radio and TV: <a href="https://gov.wales/childcare-offer-for-wales-campaign">https://gov.wales/childcare-offer-for-wales-campaign</a> Vale FIS received 192 enquiries about the Childcare Offer since. October 2019 and 1,254 since January 2019. Local promotion continues by attending nursery intake sessions for parents and parent and toddler and pre-school groups. Web and social media posts are continually updated, and we work closely with Schools Admissions to ensure that information about The Offer is included in Nursery place offer letters. Updated leaflets and posters have been produced and distributed. New banners continue to be developed. Also, A Childcare Offer celebration event is planned in the Vale for March 2020 for childcare providers. 750 children accessing the 30 Hour Childcare Offer in the Vale as at 28 November 2019.
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	50	Red	Families First Advice Line Senior Advisor vacancy recruited to post (commenced 28.12.2019) following short vacancy. Families Achieving Change Together Manager appointed and commenced post 06.12.19. These key appointments will enable us to review the effectiveness of the Information Advice

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				Assistance (IAA) within quarter 4. In addition, it is anticipated that within Q4 there will be some progress in the drafting of agreement and recruitment of a Mental Health practitioner who will be based at Cadoxton House (CAVUHB appointment through Transformational Funding).
RM/A029: Review and extend the age criteria in relation to the Index.	31/03/2020	100	Green	This action is 100% complete with no further work required. From quarter 2 we concluded that it was decided not to carry on with the extension of Index to the age of 25 years. Instead, young people can be added to a separate list once the child reaches 18 years until they're 19 years. They will receive information on transition. Families of children aged 14 plus are asked about transition information during their annual review.
<b>AH005</b>				
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	100	Green	All staff are trained to Level 2 Food Hygiene standard. Advice is provided during the monitoring visits by the Area Manager to achieve Level 4 & Level 5 scores. This will continue on a rolling annual programme.
SRS/A030: Undertake actions to support the provisions of the Public Health (Wales) Act 2017.	31/03/2020	75	Green	Officers from SRS are continuing to support the teak 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.
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.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
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	75	Green	<p>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:</p> <ul style="list-style-type: none"> <li>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.</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>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 from Welsh Government totalling £100k is being used to improve existing Active Travel routes. In addition to this, work has commenced on piloting cycle hire in Penarth. During quarter 3, Next Bike were appointed as the cycle hire</li> </ul>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				provider. We anticipate that the installation of e-bike docking stations will be in place in Penarth during quarter 4.
<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 -Advice and assistance services -Eligibility/assessment of need -Planning and promotion of preventative services -Workforce -Performance measures -Charging (debt recovery) -Direct Payments provision – WG regulations awaited -Pooled Funds."	31/03/2020	75	Green	Throughout the year ongoing input from a Legal Services perspective will be provided when required. During Q3 advice has been ongoing in regards to charging and debt recovery and pooled funds.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
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	75	Green	We have successfully appointed to the new permanent policy officer post, who commenced in the Vale on the 2nd December. Work has commenced to prioritise key policy areas with the respective heads of service.
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	75	Green	Following meetings with respective ICT leads across the region, a project brief is now being compiled to put forward the case to develop SharePoint as a potential solution.
RM/A032: Contribute to the ongoing review of the Social Services Performance Management Framework and its implementation.	31/03/2020	75	Green	Lead by the Regional Coordinator, the regional workstream is currently reviewing the final list of the new performance metrics, and forms are being aligned to ensure consistency of recording and reporting across the region.
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	75	Green	The final draft of the document is with providers for comment, prior to submission to Cabinet in March 2020 where the implement of the document will be recommended. The anticipated start date for the contract is 1st April 2020.
RM/A034: Contribute to the development and implementation of the Regional Partnership Board Annual Report.	31/03/2020	75	Green	The regional carers workstream, supported by the newly appointed Carers Project Officer, is continuing to monitor its action plan to ensure we deliver on the relevant areas in the RPB action plan. An update will be presented at the next RSG.
RM/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	75	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	31/03/2020	75	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.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
Services and Well-being (Wales) Act via the Steering Group.				
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	75	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	75	Green	Common Contract and Specification - All tasks on track for regional sign off by March. Let's Agree to Agree - Cost of delivering Care by residential providers, Vale pilot. Tool has been finalised, cost of delivering care in Vale of Glamorgan to be agreed.
AS/A033: Implement the preferred option for the Customer Contact Centre as a single point of contact.	31/03/2020	75	Green	The re-branding of the single point of access to Wellbeing Matters is on-going but due to competing demands and a focus on reducing waiting lists progress has been slow in the quarter.
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	100	Green	The provision of relevant and timely Information, Advice and Assistance is central to a well performing Social services Intake Team. Three of the four Wellbeing Officers are now in post and developing the skills and knowledge to offer appropriate Information at the first point of contacts. Where necessary the Wellbeing Officers link with the newly appointed Wellbeing Visiting Officers (Transformation Grant Funded) to undertake proportionate assessments to provide Advice and Assistance. This additional specialist capacity within the Contact Centre has reduced the waiting list for IAA from over 300 to approximately 50, meaning that people can access the full range of IAA without delay.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A035: Review the effectiveness of the reablement model used in the Vale of Glamorgan.	31/03/2020	75	Green	Support provided by the Business Improvement team to enable workforce engagement in reviewing the internal processes. Staff engagement has also allowed the team to look at gaps in service. The team continues to excel and perform with activity but also maintain quality to the people they support.
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	75	Green	Part 6 plans have been signed off but delay in WCCIS development due to a National issue with publishing forms. On track for Quarter 4 going live.
CS/A029: Develop the wider and more appropriate use of the Information Advice and Assistance Service/Families First Advice Line as a single point of contact for the service.	31/03/2020	50	Red	FFAL Senior Advisor vacancy recruited to post (commenced 28.12.2019) following short vacancy. FACT Manager appointed and commenced post 06.12.19. These key appointments will enable review and refiguration of the previous work in partnership with St Athan school as pilot Hub. Discussions progressing with CAVUHB to pilot Mental Health Practitioner to be based at Cadoxton House with the Advice Line funded by Transformation funding stream with a view to 'go live' in 2020/21.
<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	60	Amber	The new telecare form is available on the council website, but further work is dependent on delivery of a new Digital platform.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
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	45	Amber	The wellbeing matters project is continuing to investigate opportunities for greater integrated working, customer relations is providing technical support for the new GP Triage service being launched in Penarth.
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> <li>• Incorporate the principles of the Council's Digital Customer Strategy at the forefront of developing new integrated services."</li> </ul>	31/03/2020	60	Amber	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. Expected go live for the new contact centre platform is 29 Jan 2020, delays have been a result of BT being unable to port telephone lines to the new platform at the same time. Issues with implementation have been escalated within the council and with the supplier.
PD/A040: Progress the integrated Health and Social Care agenda with specific reference to the GP triage proposal.	31/03/2020	90	Green	Customer relations have provided the technical platform for the GP triage service and is ready to go live. The service has been delayed due to resource issues with the health board, but on our end, it is on track.
AS/A014: Undertake further expansion of the Adult Placement Scheme.	31/03/2020	75	Green	We are continuing to increase capacity across Vale and Bridgend and currently have 7 potential host families going through the

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				assessment process. We receive regular new referrals for individuals to access the service across both areas.
AS/A036: Pilot delivery of a GP triaging scheme within the Vale of Glamorgan.	31/03/2020	76	Green	The GP Triage Services is expected to be launched in February with the pilot GP surgeries. Further GP surgeries will be added during the next 12 months with the plan for all GP practices across the Cardiff and Vale region to utilise the GP triage by March 2021.
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	75	Green	All workstream have met twice. Action plans in place for each workstream reviewed at Learning Disability Partnership Board on a quarterly basis with any issues reported up to Learning Disability Implementation Group and if necessary, Learning Disability Regional Partnership Board. Dedicated Project Officer support in place through ICF to assist in managing this. Engagement and information sharing event booked for 24th January at Vision 21 Spectrum project to inform people with a Learning Disability/ Parents/Carers/Stakeholders achievements so far and any presenting issues hindering delivery.
AS/A038: Update the referral management processes at the Customer Contact Centre.	31/03/2020	75	Green	This action is in two parts: The I&A Team have worked with C1V to focus on reducing the number of people waiting for an Adult Services response. The queue was 284 on 4th November and has reduced to 72 by 23rd December 2019 while continuing to manage between 20 and 30 referrals per day, plus over 250 Blue Badge applications. This represents very good progress but had placed significant strain on the Social Workers within I&A. This progress was primarily undertaken by I&A team members but will be sustained by the establishment of the Wellbeing Officers within C1V.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A039: Monitor and improve the Information, Advice and Assistance sign off.	31/03/2020	75	Green	The C1V Wellbeing Officers are now recruited to and established within the Adult Services process. I&A Team Manager is supporting the Wellbeing Officers in upscaling their knowledge base of Adult Services IAA through the reviewing of the screening tool and Knowledge Base toolkit. The Wellbeing Visiting Officers have been recruited and are due to start on 1st January 2019 and will undertake screening of Adult Services referrals, proportionate assessments, provision of IAA over the telephone and home visits where necessary. This will enable the I&A Team to concentrate on adults with care and support needs or adults at risk.
<b>AH009</b>				
RM/A039: Progress inter-generational project work involving schools and residential care settings.	31/03/2020	75	Green	Good progress made in Vale homes. Cartref-Romilly school on-going, Playgroup now attends Southway as well as digital champions form local high school who are involved with Tovertafel activity Contact has been made with a local high school in Barry to undertake similar in Ty Dyfan when Tovertafel installed there. Meetings with private sector have taken place and homes and schools have been matched. Further activity is determined by schools and res/nursing facilities.
RM/A040: Complete the project work associated with creating a 'Dementia Friendly' environment at Ty Dewi Sant.	31/03/2020	75	Green	Phase 2 for this action has commenced and is anticipated to be complete by the end of March 2020.
AS/A041: Implement the 'Get me Home' Plus Service.	31/03/2020	75	Green	Get Me Home is implemented and established into discharge structures. Recruitment is still on-going.
AS/A040: Implement a regional protocol to support transition processes across all of Adult Services.	31/03/2020	50	Amber	A draft regional protocol has been developed. The protocol is now subject to engagement prior to full roll out.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A042: Implement a 'Team around an individual' approach to Dementia Services.	31/03/2020	75	Green	Team Around the Individual is implemented and established within care and support structured. Recruitment is on-going.
AS/A043: Work with partners to develop a Vale locality model in response to the recommendations of the Parliamentary Review.	31/03/2020	75	Green	Discussions are taking place with UHB partners to enhance the management structure to enable to Alliance model.
AS/A044: Explore the development of an integrated model for Long Term Care Service and Nurse Assessor Team at Ty Jenner.	31/03/2020	75	Green	The model for integrating the Long Term Care Team and Nurse Assessor team was discussed with senior managers within Social Services and UHB and given green light to progress with single line management structure without delay. OM - Locality and Lead Nurse will progress in next quarter.
AS/A045: Review opportunities for the development of clear Continuing Health Care Processes.	31/03/2020	75	Green	Adult Social work teams continue to work with individuals and families to identify people with CHC triggers and make the necessary referrals for DST/CHC assessments with health colleagues. There are well established pathways for referral for CHC assessments - the teams have identified and supported 10 individuals to progress to CHC funding in 2019/20 which represents a saving of £188,071 this year and £201,301pa on-going.
<b>AH010</b>				
RM/A041: Undertake a formal review of existing pooled arrangements and where necessary put in place formal agreements.	31/03/2020	75	Green	This action will be monitored as part of the Regional Commissioning Board
RM/A042: Implement joint contracts in relation to Nursing and Residential Care homes.	31/03/2020	75	Green	This action is monitored as part of the Regional Commissioning Board. Consultation has been finalised on the joint specification and contract and the decision regarding the implementation is set to be presented to cabinet in February 2020.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A043: Implement/pilot the use of the financial module in relation to WCCIS.	31/03/2020	75	Green	The final draft of the document is with providers for comment, prior to submission to Cabinet in March 2020 where implement of the document will be recommended. The anticipated start date for the contract is 1st April 2020.
RM/A044: Develop a suite of core performance reports in WCCIS to meet the statutory reporting requirements.	31/03/2020	75	Green	Performance metrics have been agreed and work continues to ensure that WCCIS reports are produced for this information to be provided.
<b>AH011</b>				
HR/A016: Review and maintain the Council's Safer Recruitment Policy.	31/03/2020	75	Green	A review of the safer recruitment policy is near completion. In terms of compliance, regular monitoring continues for school who have an SLA with Employee Services. In terms of schools who do not have an SLA (3 schools), 1 provides the HRBP with termly updates. David Davies and Lance Carver are due to meet with the other 2 schools to discuss future arrangements going forward. Updates on the data available to HR are provided to Corporate Safeguarding Group members at each meeting. These occur every quarter. In addition, Cabinet and relevant Scrutiny committees are also provided with updates on the data available twice a year. Finally Head Teachers are now provided with weekly updates in terms of compliance to maintain communication. For Quarter 3 (April 2019 to December 2019), the overall compliance across new starters under the Safer Recruitment Policy within the Council is 98%. This compares to 96% for the same period in the previous year (April 2018 to December 2018). For Schools positions, the compliance for April 2019 to December 2019 is 97% compared to 93% in the previous year (April 2018 to December 2018). For Corporate positions under Safer Recruitment, the compliance for April 2019 to December 2019 is 100% which is the same as the previous year (100% in April 2018 to December 2018). In terms of Risk

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				Assessment usage, 78 out of 360 (21.7%) 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	As mentioned in Quarter 2 we noted that the policies were due to be present to Cabinet in Q3. This has been delayed but is on track to take place during Quarter 4.
RM/A010: Enable the Corporate Safeguarding Group to continue to focus on delivery of Corporate Safeguarding Action Plan and put in place appropriate mechanisms to monitor compliance of the Policy.	31/03/2020	100	Green	Regular CSG meetings taking place which review the action plan. Smaller task and finish group has been developed to concentrate on specific actions within directorates across the local authority. Progress on the action plan and the CSG remit is reported annually to each cabinet and scrutiny committee.
RM/A046: Review compliance of all Directorates with completion of the Safeguarding e-module.	31/03/2020	90	Green	Review of compliance has taken place, the findings from this has informed development of the safeguarding e-module for onboarding process for new employees and the refresher element for existing staff. It is also informing the areas who cannot access the e-module and the learning approach to take to engage this cohort of employees.
RM/A045: Lead the review and update the All Wales Safeguarding procedures in line with the Welsh Government Guidance with the Regional Safeguarding e-module.	31/03/2020	100	Green	The new Wales Safeguarding Procedures were launched in November 2019, led by Cardiff & Vale Safeguarding Board with the chair of the Project Board being the Director of Social Services from the Vale of Glamorgan. These national procedures will be formally adopted and then implemented by regional safeguarding boards by March 2020.
AA/A043: Provide appropriate staff training in relation to safeguarding in all education settings and continue to monitor and challenge compliance.	31/03/2020	75	Green	The training programme has been reviewed and compliance to expectations monitored. As a consequence, changes have been made to the programme to ensure that all staff receive training appropriate to their roles.
<b>AH012</b>				

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A046: Evaluate and review the use of assistive technology for adults.	31/03/2020	75	Green	The map and gap exercise identified the need to develop a range of resources/interventions to improve the provision for children and young people with ALN in Welsh medium education. As a result, organisations have been commissioned on a regional basis to develop literacy, numeracy and speech and language resources for Welsh medium schools.
<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	75	Green	Penarth Older Persons with Care project has progressed to the 2nd stage financial appraisal. A preferred RSL partner. Wales and West HA has been commissioned to cost and prepare a pre planning application for the delivery of an extra care facility by March 2020.
<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	80	Green	Final amendments of the regional strategy taking place. Launch is expected March 2020.
RM/A049: Implement a Data Dashboard in relation to exploitation.	31/03/2020	85	Green	Awaiting strategy launch to ascertain what data will be required within the dashboard. Liaising with corporate partners in relation to additional data held outside of this directorate.
<b>AH015</b>				
RM/A050: Work with partners to deliver a consistent regional footprint for the management of escalating concerns.	31/03/2020	75	Green	Final draft now with Safeguarding leads to ensure language is consistent with new Wales Safeguarding Procedures. In practice protocol already working well.
RM/A051: Review our quality assurance approach in relation to residential care.	31/03/2020	75	Green	Consultation completed and on track to be presented to Cabinet for decision.
<b>AH016</b>				

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
SRS/A032: Prepare businesses for the special procedure's requirements set out in the Public Health Bill.	31/03/2020	75	Green	The service continues to engage with working groups. Still awaiting further progress from Welsh Government to progress this forward.
SRS/A034: Undertake interventions in accordance with the Statutory Health and Safety Section 18 Plan.	31/03/2020	75	Green	The associated interventions outlined within the S20 Health and Safety Plan are currently on target for completion by the end of the financial year.
SRS/A035: Undertake interventions where appropriate in accordance with the Food Law Enforcement Service Plan.	31/03/2020	50	Red	Due a number of vacancies within the team there are a shortfall of inspections undertaken which has had an impact on the planned intervention plan. The service is currently undertaking inspections in accordance with a risk based approach.
SRS/A036: Continue a programme of training and awareness of Child Sexual Exploitation, slavery and trafficking to protect vulnerable residents.	31/03/2020	50	Red	We have appointed the replacement Licensing Policy Officer who is to take up post in the next three weeks. Further training for Licensing Enforcement staff and other Officers in the SRS with South Wales Police is planned for Quarter 4.

## APPENDIX 2: Performance Indicators

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

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
CPM/182: 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,	N/A	N/A	No Target	N/A	N/A	Annual performance indicator. To be reported at quarter 4.

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
not drinking above guidelines, meet guidelines on weekly minutes of physical activity).						
CPM/183: 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: 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: 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: 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: 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: 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: 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: 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>						
CPM/028: "Number of sports clubs which offer either inclusive or specific disability opportunities. "	54	56	55	Green	↑	Cowbridge Judo Club have commenced insport accreditation

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
CPM/197: Number of Green Flag Parks.	10	10	10	Green	↔	10 Green Flag Parks retained during 19/20 including Romilly Park, Knap Gardens, Barry Island, Central Park, Gladstone Gardens, Victoria Park, Belle Vue Park, Alexandra Park, plus Cosmeston and Porthkerry.

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

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
CPM/098: 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): The percentage of re-registrations of children on local authority Child Protection Registers (CPR).	15%	1.4%	5%	Green	↓	This continues to be an area where we are significantly below the All Wales % and not an area of issue during this quarter.
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): The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	4.16	3.33	3.5	Red	↔	Although our performance for the first nine months of the financial year (April-December 2019) is within the annual target of 3.5 our performance reporting for this measure is done cumulatively. Although our performance has been slightly better than anticipated we acknowledge that winter pressures will impact on our performance next quarter with DTOC figures likely to increase further resulting in us no

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
						longer performing within 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): 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	18.9	45%	Green	↑	We have had huge success with this Performance Indicators as this exceeds all Wales performance.
CPM/107: 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): 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	79.7%	75%	Green	↓	This performance indicator exceeds all Wales performance.
<b>How well have we performed?</b>						
CPM/056 (SSM/018): The percentage of adult protection enquiries completed within statutory timescales.	74.09%	82.2%	90%	Amber	↓	In line with the SSWA, work continues to ensure that all adult protection enquiries are completed within 7 working days.
CPM/112: 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: 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 4.

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
CPM/207: Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	No data reported	68.3%	85%	Red	↑	Cleansing is still on-going to improve the accuracy of this indicator. As of Quarter 3 the position continues 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	88.3%	91%	Red	↑	These figures relate to the Part 6 Care and Support Plan Reviews for Children Looked After. Whilst we have not reached our anticipated target, there will be additional focus on the reasons reviews have not taken place within timescales and ongoing work to understand and improve this area of reviewing.
<b>How much have we done?</b>						
CPM/209: Number of new Telecare users.	232	245	375	Red	↑	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. 190 TeleV & 55 TeleV+ (cumulative figure = 326). Although we are on course to exceed our performance in 2018/19, performance to date still remains lower than the challenging target set by ourselves

### APPENDIX 3- Additional Performance Indicators (Well-being Outcome 4)

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

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 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.	67.19%	76%	90%	Red	↑	76% of people who completed the exercise referral scheme reported increasing their leisure time minutes on the SPAQ questionnaire.
<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.	56.64%	76.36%	40%	Green	↑	76% of people who completed the exercise referral scheme reported increasing their leisure time minutes on the SPAQ questionnaire.
<b>How much have we done?</b>						
PAM/017: 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.	6915.5	7808.8	8526	Amber	↑	Usage figure of 352,018 with a total for the year of 1020545. Increase in usage in the leisure centres for qtr. 3. Jenner Park slightly increased although a decrease with School usage due to the use of the main hall at Cowbridge for exams.

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

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 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: The percentage of children supported to remain living within their family.	76.75	75.7	No Target	N/A	↑	No Commentary provided
SSM/034a: The percentage of all care leavers who are in education, training or employment at 12 months after leaving care.	No data reported	42.8%	53%	Red	↑	This is a small cohort of young people. The 15+ team continue to work with partner agencies to improve the outcomes for young people and have increased the number of opportunities for apprenticeships within the council.
SSM/034b: The percentage of all care leavers who are in education, training or employment at 24 months after leaving care.	No data reported	58.8%	53%	Green	↓	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	Q3 2018/19	Q3 2019/20	Q3 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: 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): The percentage of assessments completed for children within statutory timescales.	74.75	62.1%	85%	Red	↓	This continues to be an area of importance for the service with an associated plan for improvement. Issues relate to the need to ensure timely decision making in respect of referrals received and then allocation for assessment where this is required. Actions have been agreed to address efficiencies within the duty system and capacity within this function and within the wider team. Positively, analysis of the data indicates timely completion of assessments once allocated. We anticipate actions taken will see an improving position in Q4.
SSM/026: The percentage of looked after children returned home from care during the year.	5.74%	6.8%	7%	Green	↑	Performance is improving and is expected to reach the target by year end.
SSM/030: The percentage of children seen by a registered dentist within 3 months of becoming looked after.	5.41%	57.89%	60%	Amber	↑	This is a small cohort of children, all of whom are registered with a dentist. A number of children had dental checks which fell outside of the first 3 months.
SSM/021: The average length of time older people (aged 65 or over) are supported in residential care homes.	867.97	795.81	N/A	N/A	↑	No commentary provided.

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
SSM/022: Average age of adults entering residential care homes.	85.25	82.55	N/A	N/A	↓	No commentary provided.
SSM/028: The average length of time for all children who were on the Child Protection Register during the year.	385.99	381.21	250	Red	↑	Decisions for removing a child from the CPR are taken in the best interests of the child by practitioners working with the child. Regular monitoring of the length of time child are subject to registration is taking place with the focus around the effectiveness and progress of the child protection plan.
SSM/029a: 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: 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: 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.	4.06%	10.10%	11.50%	Green	↑	Traditionally the largest number of school non-transitions take place in September each year.
SSM/031: The percentage of looked after children registered with a GP.	67.06%	100%	99%	Green	↔	No commentary provided
SSM/033 (PAM/029): The percentage of looked after children on 31 March who have had three or more placements during the year.	4.78%	5.30%	9%	Green	↑	No commentary provided
SSM/035: The percentage of care leavers who have experienced homelessness during the year.	No data reported	1.42%	12%	Green	↑	No commentary provided

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
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.
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.

Performance Indicator	Q3 2018/19	Q3 2019/20	Q3 Target 2019/20	RAG Status	Direction of Travel	Commentary
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.						