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Anwen Jones Solicitor/Cyfreithiwr Interim Head of Legal and Democratic Services Pennaeth Dros Dro Gwasanaethau Cyfreithiol a



To: Cllr Richard Jones (Chairman)

Councillors: Adele Davies-Cooke, David Barratt,

Hilary Isherwood, Dave Mackie, David McFarlane,

Hilary McGuill, Eric Owen and Carolyn Thomas

Marion Bateman, David Cox, Peter Curtis,

Veronica Gay, Cindy Hinds, Trefor Howorth,

CS/NG

23 March 2012

Tracy Waters 01352 702331 tracy.waters@flintshire.gov.uk

Dear Sir / Madam

A meeting of the <u>SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY</u> <u>COMMITTEE</u> will be held in the <u>DELYN COMMITTEE ROOM, COUNTY HALL,</u> <u>MOLD CH7 6NA</u> on <u>THURSDAY, 29TH MARCH, 2012</u> at <u>2.00 PM</u> to consider the following items.

Yours faithfully

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Democracy & Governance Manager

<u>A G E N D A</u>

1 APOLOGIES

2 DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)

County Hall, Mold. CH7 6NA Tel. 01352 702400 DX 708591 Mold 4 <u>www.flintshire.gov.uk</u> Neuadd y Sir, Yr Wyddgrug. CH7 6NR Ffôn 01352 702400 DX 708591 Mold 4 www.siryfflint.gov.uk

The Council welcomes correspondence in Welsh or English Mae'r Cyngor yn croesawau gohebiaeth yn y Cymraeg neu'r Saesneg

3 BETSI CADWALADR UNIVERSITY HEALTH BOARD

Presentation from Betsi Cadwaladr University Health Board:

- Healthcare in North Wales is Changing update on service reviews
- Locality Developments
- Public Health Tobacco and Alcohol update
- Members' Questions

4 FINAL DRAFT OF THE SOCIAL SERVICES ANNUAL PERFORMANCE REPORT (Pages 1 - 46)

Report of Director of Community Services enclosed.

5 **QUARTER 3 PERFORMANCE REVIEW 2011/12** (Pages 47 - 84)

Report of Learning and Social Care Overview & Scrutiny Facilitator enclosed.

6 ROTA VISITS

To receive a verbal report from Members of the Committee.

Agenda Item 4

FLINTSHIRE COUNTY COUNCIL

- REPORT TO:SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY
COMMITTEEDATE:THURSDAY, 29 MARCH 2012
- **REPORT BY:** DIRECTOR OF COMMUNITY SERVICES
- SUBJECT: FINAL DRAFT OF THE SOCIAL SERVICES ANNUAL PERFORMANCE REPORT

1.00 PURPOSE OF REPORT

1.01 To present the final draft of the Social Services Annual Performance Overview Report to the Scrutiny Committee and to seek any final views and comments before approval by the Executive Member for Social Services.

2.00 BACKGROUND

2.01 The Overview Report is part of the Welsh Government (WG) performance framework for Social Services. The report is the Director's statement on current performance and highlights good performance and areas for improvement.

3.00 CONSIDERATIONS

- 3.01 The final version of the Overview Report has been prepared following an in-depth review of current performance by service managers and performance officers and a period of consultation and challenge including a Member Task and Finish group
- 3.02 The Overview Report is a summary of the assessment of the Council's overall Social Services performance against a set of domains determined by the WG.
- 3.03 Behind the report sits a set of detailed templates and evidence that has been collected as part of the assessment.
- 3.04 The final step in the self-assessment is the production of service plans which set out the actions which need to take place to deliver on the improvement priorities identified in the assessment. Service plans for Social Services for Children, Social Services for Adults and Development and Resources are in preparation
- 3.05 The next step will be consideration of the report by the Executive Member for Social Services and approval for submission to the CSSIW.

4.00 <u>RECOMMENDATIONS</u>

Members endorse the final draft for consideration by Executive.

5.00 FINANCIAL IMPLICATIONS

None arising directly from this report but some of the identified improvement priorities may have associated financial implications which will be separately detailed in service plans.

6.00 ANTI POVERTY IMPACT

None arising from this report

7.00 ENVIRONMENTAL IMPACT

None arising from this report

8.00 EQUALITIES IMPACT

None arising directly from this report though the report contains an assessment of current performance against the equalities agenda and has associated improvement priorities.

9.00 PERSONNEL IMPLICATIONS

None arising directly from this report, but some of the identified improvement priorities may have associated personnel implications which will be separately detailed in the service plans.

10.00 CONSULTATION REQUIRED

No further consultation is planned.

11.00 CONSULTATION UNDERTAKEN

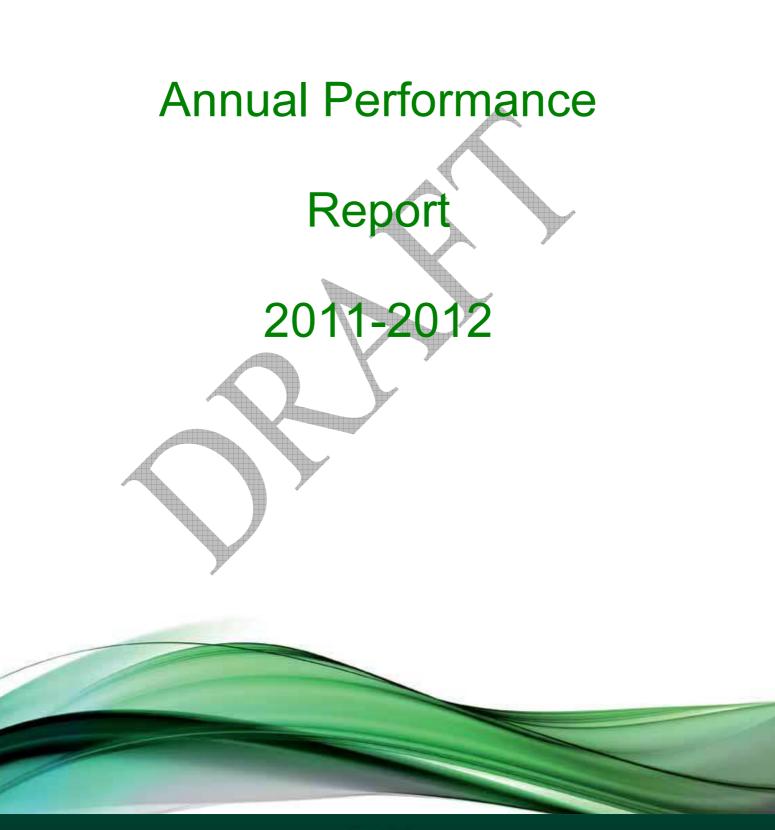
Consultation has taken place with key stakeholders including a Member Task and Finish Group.

12.00 <u>APPENDICES</u>

Appendix 1 - Overview Report

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985 BACKGROUND DOCUMENTS

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Introduction

This is my first year as Director and an opportunity to report on how well our Flintshire County Council Social Services is performing. My report will focus on how well we have done on the priorities identified for 2011 and what we see as our key aims for 2012.

New in post my personal priority for 2011 was to get to know my colleagues. I have introduced what I like to call 'back to the floor', which is where I and my colleagues in the Directorate Management Team work at locations across all the council offices. Spending quality time with teams in this way enables a two way dialogue about our vision for Social Services and the challenges we face. It is an opportunity for us to hear and really understand the concerns of our front line workforce. I have also held a series of workforce conferences and will be using the opportunity of the next one to find out what difference they have made.

Before I explain where we are at I think it would be helpful if I remind you what we are all about.

<u>Our vision</u>: To work with people to achieve independent, fulfilling lives, safeguarding vulnerable citizens, and building strong communities.

Our Values

- We will:
- Be accessible, listen and respond
- Act openly and fairly
- Be a learning organisation (develop our workforce)
- Challenge and be innovative in finding solutions
- Make best use of all our resources
- Work effectively with our partners

Our service is always changing but at the time of writing this report we are providing services to 3,475 adults and 816 children in Flintshire. We do this with an annual total budget of £54 million for 2012/2013. We support people of all ages and their carers and family members, often in times of illness and distress. We protect people from harm, abuse or neglect and help them to cope. Where possible we want to put people in control of the services they receive. Our goal is to enable people to live independently and to lead full lives as part of their communities.

We are facing some huge challenges, and like other councils in Wales we are dealing with finite and reducing budgets e.g. in 2012 / 2013 we need to save over £1 million in Transforming Social Services for Adults. We are also managing with reducing Welsh Government grant funding e.g. funding for Supporting People. On the other hand our council has rightly recognised some key social care pressures which they have supported e.g. £1.3million

agreed to support the transition of young disabled people into adulthood in 2012/2013 and £90,000 to support a strengthening of our adult safeguarding service. We are dealing with an ever increasing demand for our services, as people are living longer with complex needs like dementia and there are improved survival rates for children with profound disabilities. Quite rightly people's expectations of what we should be doing have also increased. In essence we need to do *'better for more with less'*.

I believe we are meeting these challenges head on; we are radically transforming Social Services for Adults, and at stage one of our change programme we have introduced our **Reablement** approach, where focus is on enabling people to live as independently as possible, thus reducing the requirement for ongoing support. Last year 433 people accessed and benefited from this new model. Feedback has been excellent and we are already seeing many people regain their independence with confidence. We have also significantly improved our out of county commissioning arrangements for Looked After Children.

We are scrutinising everything we do and spend, applying principles of LEAN systems to our processes. We are also gearing up to be smarter commissioners, seeking opportunities to collaborate with other councils in North Wales, where it is proven to be helpful.

Our commitment to Carers is stronger than ever and despite the pressures upon us to make savings we are prioritising a consistent level of funding for our commissioned services, that carers' value (£435,000). Our new Commissioning Strategy for 2012 to 2015 will see us build further on the support services we have in Flintshire.

We have been working hard to ensure that Social Services is rightly a priority across the whole council, which is evidenced by the approval of our budget pressures, such as the decision to strengthen our safeguarding arrangements. CSSIW stated that a priority for us was to "raise the profile of social care issues at a corporate level", and this has been achieved.

There is so much I could tell you about all our different services for adults and young people, but I'm firmly set on keeping this report punchy and to the point. As such I have chosen key change programmes from across Social Services and some of our highlights from 2011.

There are plenty of links throughout if you want to dig into the detail and a glossary (for words in bold) that may help explain unfamiliar words and terms. Please take up this offer and read more about our services and our plans to improve them. There is a wealth of information leaflets that can be accessed from our website www.flintshire.gov.uk

If you have received services from us I hope you feel that this report is a fair description of your experiences and please let me know what you think. Your feedback is vital and will help us to improve what we do.

You can write or email : Director of Email......I would like to take this opportunity to thank



CONTENTS

- 1. Overall Council Approach
- 2. Carers
- 3. Transformation of Social Services for Adults
- 4. Improvement of Services for Children and Families.
- 5. Strengthening Safeguarding
- 6. Value for Money
- 7. Partnerships
- 8. Listening
- 9. Quality Assurance
- 10. What we will do in the coming year to make things even better

GLOSSARY

1. Overall Council Approach

Social Services are significant within Flintshire County Council. How we work and our choice of priorities are influenced to a great degree by the structures, policies and objectives of the wider authority.

Flintshire County Council's Code of Corporate Governance sets out the governance arrangements for the work of the authority including the Community Services directorate. (Code of Corporate Governance) The Code sets out how the Council seeks to achieve six important objectives:-

- Being purposeful to achieve outcomes for the community and creating and achieving a vision for the local area.
- Members and Officers working together to achieve a common purpose with clearly defined functions and roles.
- Promoting values for the Authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour.
- Taking informed and transparent decisions which are subject to effective scrutiny and managing risk.
- Developing the capacity and capability of Members and Officers to be effective.
- Engaging with local people and other stakeholders to ensure robust accountability.

Working with members

Effective working with elected members is an important part of delivering on the Code of Corporate Governance.

We recognise and value the role of elected members in shaping policy and setting the direction for the service through the Overview and Scrutiny Committees.

A good example of this joint working was the member workshop held 20th September 2010. This looked at how the service can improve access to minor and major adaptations. The outcome was people will not have to wait too long for the adaptations that they need (Action Plan following workshop 2010).

Flintshire County Council, at its Executive meeting on Tuesday 17 May 2011 proposed its revised and updated set of Council Priorities.

In setting the <u>Council Priorities</u> the views of customers, communities, partners and elected members – drawn from consultations and discussions over a period of time have been influential.

The priorities are influenced by:-

- previous commitments and needs
- elected Members engaging with their communities

- customer feedback
- local / service consultations
- priorities of local and regional partner organisations
- statutory requirements
- Welsh Government Policy
- good practice and peer influence

The ten priorities show how we use our resources across the Council to secure continuous improvement and improve services themselves:

Flintshire County Council priorities

- To be the most modern, efficient and cost effective public organisation through our four resources strategies - the Medium Term Financial Strategy, the People Strategy, the Asset Management Strategy and the ICT Strategy - whilst ensuring our local taxes and fees and charges are fair and affordable.
- 2. To achieve the greatest possible cost efficiencies through regional and sub-regional collaboration to reinvest in local public services.
- 3. To be a modern, caring and flexible employer with fair and equal pay and terms and conditions of employment under a Single Status Agreement.
- 4. To achieve the highest standards of customer service and care through our Customer Services Strategy.
- 5. To make our communities safe and to safeguard the vulnerable with children and older people as priority groups.
- 6. To protect and grow the local and regional economy, to be a prosperous County and to provide help and support for those vulnerable to poverty.
- 7. To promote independent, healthy and fulfilled living in the community with the highest quality personalised and supportive social and health care services.
- 8. To meet housing need in the County and to work with partners to ensure a sufficient supply of quality and affordable homes and housing services in the social, mixed tenure and private sector housing markets,
- 9. To secure a modern and high performing range of learning, cultural, play and leisure opportunities for all ages with our schools, colleges and other partners.
- 10. To protect, plan and develop sustainable natural and built environments.

Delivering on Council priorities

Reminder of our priorities for 2011

- We will appoint a Director of Community Services
- We will apply Lean Principles to specific service areas and measure the benefits.

The social services directorate has taken a key role is delivering on the councils corporate priorities. Much of this work is highlighted elsewhere in this report however we wanted to give an overview for how our work is continuing to support the priorities of the council.

- The social services directorate is working hard to make the best use of *Flintshire County Council's* 'physical assets'. This will help us save money, while ensuring we focus on the needs of people, services and the wider Council. We in social services are challenging current ways of working by developing agile or mobile working. Many of our staff such as home carers already work from home, and we have developed facilities to enable some staff including the Director of Community Services to work from different sites across Flintshire.
- Our offices will be brought into local communities and we will use our emerging Flintshire Connects facilities to deliver a wide range of services (Executive Committee Report December 2011). Working at a local level with our public sector partners will provide a rich multiagency service that will more effectively support local people. All of these measures are designed to create a citizen first approach which sees people placed at the centre of everything we do. This is an ambitious programme of activity but will bring very tangible and positive improvements in ensuring that we respond to needs at the right time and in the right way.
- We want to be an efficient service as possible and use '<u>LEAN</u> <u>techniques</u>' to simplify processes and therefore improve efficiency. To do this we use Flintshire County Council's internal LEAN team to independently review two of areas of work each year. In 2011 they looked at Telecare. They recommended the introduction of a computer system to eliminate waste; reduce the duplication of information; reduce over ordering of equipment and free up the installers' time which would result in reduce waiting times (Lean Telecare power-point recommendations 9th June 2011)

- As part of the Council's **Flintshire Futures** programme which incorporates our transformation of Social Services we have successfully re- located our Learning Disability provider management team, to our offices in Flint. The benefits of co-locating with other teams means expertise can be shared and money can be saved (approximately £60,000 per annum), and being in a town centre means that the team is now more accessible to the people whom it serves.
- 2011 saw a 5% increase in the number of people finding out about our services through the Flintshire County Council website. Between April and December 2011 over 15,000 leaflets were produced for Social Services for Adults. Ensure people get the right information when they need it can also save money. Increasing the numbers of people accessing information on-line can also save valuable resources. Our Communication strategy sets out how we will continue to improve our online information which will include extensive changes as we embark on the transformation of our services.

Workforce

Reminder of our priority for 2011

• We will closely monitor workforce absence and set targets for reduction

Our workforce is important to us, and we recognise that change can be both challenging and exciting.

2011 saw increased training opportunities for frontline workforce, in house and in the independent sector, as we extended the Reablement service. We know that colleagues have acquired the necessary skills to help people regain independence by the success of the service and the feedback from service users and families (Outcome Agreement 2010- 2011)

We are sensitive to the needs of our workforce, as we progress with our transformation agenda. A further investment of £16,000 has been made in management development training, which includes assisting our managers with the skills needed to help transform and modernise services.

A priority identified for 2011 was the close monitoring of workforce absence. Managers have been pro-actively managing staff absence within the Council's overall policy. But we are conscious that we need to do as much as we can to ensure our workforce is healthy and well supported to do their job.

- Improve the information about our services on the <u>Flintshire</u> <u>County Council Website</u> and be more efficient in the production and distribution of service leaflets.
- Review workforce absence and set targets for reduction



2. Carers

Reminder of our priority for 2011:

• We will improve our methods for identifying and supporting young carers

The social services directorate will continue to prioritise carers and the support we give them. This is because we recognise that carers are our key partners in the delivery of social care.

It is not only morally right but it makes good financial sense to support carers. As the population who require social care is set to increase, so will our reliance on the people who provide support to them. Our commitment to carers is stronger than ever and despite significant financial pressure we are prioritising protecting the level of funding for the services that carers' value. In 2112/2113 these services will be funded to the level of £435,000.

2011 saw the development of our multi-agency <u>Carers Commissioning</u> <u>Strategy for 2012- 2015</u> which aims to set the direction; to make sure that everyone is clear about the needs of carers and to identify how we in partnership with others, will provide support to carers. In developing this Carers have again told us that they want better recognition and information from professionals. (Carers Commissioning Strategy 2012-2015, Section 3.1 *What carers are telling us in 2011?*)

The Census 2001 identified that there were over 16,000 of people in Flintshire providing unpaid care and we know this will now be much higher. We have made great strides and things are improving as a result of our robust and effective multi-agency working, for example:

- More carers are getting support, the number registered with **NEWCIS** (North East Wales Carers Information Services) that coordinates and provides support to carers now stands at 3372 (Dec 2011) which is a 13% increase on 2010.
- In September 2011 1340 carers in Flintshire were registered as a carer with their GPs which is an 11% increase on the previous year. This happens through close liaison between NEWCIS and GP practices. ensuring that carers are linked in effectively to available support.
- More carers are being identified and receiving services such as breaks and carers grants (one off payments to help them in their caring role e.g. with gardening and decorating). By the end of September 2011

60% (217) carers had received a service in their own right which exceeds both our local target (52%) and the All Wales average (58%).

• We are looking forward to the planned move for 2012 of our current short break overnight provision for children and young people with disabilities from Cornel Clyd to Arosfa. The new location will create 340 bed nights instead of the current 240 at Cornel Clyd which is a 54% increase in a service valued by families.

We will be doing some things differently, such as developing a model of support that will provide carers with more flexible breaks and emergency respite. We are only at the start of the journey with this development, but having identified some key partners we are hopeful that we will have a model of support that will meet the needs of carers by the end of 2012.

Young carers

We need to improve the way we identify and support young carers but we know this is difficult as many young people do not welcome the involvement of Social Services owing to a perceived risk of being taking in care.

We have a long term strategy which we have produced with key partners to support young carers (Young Carers Strategy 2012-2015)

We were particularly concerned that we were not identifying young carers when they come into contact with our services. To try to better understand how we could improve our identification of young carers we undertook a snap shot family audit across our Community Mental Health Teams and Community Drug and Alcohol Team. This showed that where a young carer was identified, an assessment and support was offered in the majority of cases. 16 young carers were identified and 12 agreed to a young carers' assessment. Although this is positive we recognise that further work needs to be done to ensure young carers are identified even when their role is not initially apparent to our teams.

In 2011/2112 we developed a Young Carers professional pack. This is an information booklet produced by the Young Carers Strategy Group and Young Carers for professionals; it is a tool to raise awareness of needs and available support. The pack however failed to make the impact we had hoped for so we are modifying it and identifying how we can better promote it to professionals.

Another initiative is the 'Access to Action' card which is for young carers, looked after children and care leavers. Colleagues have been working with young people to develop this idea which will allow them quick access to the person they need to see. Young carers will be able to present their cards to teachers in the event they are late to school or their homework is late without having to explain over and again they are a young carer. It will be launched in June by the Children's Commissioner and will be rolled out to other agencies in the future.

- Increase the number of carers and young carers we identify and support.
- Develop a model of support that will provide carers with flexible breaks and emergency respite in 2012.
- Launch the Young Carers and Looked after Children 'Access to Action Card' in June 2012.
- Increase the short break overnight provision for children and young people with disabilities by 54% more available bed nights.

3. Transformation of Social Services for Adults

Reminder of our priorities for 2011

- We will continue to redesign our services to promote the reablement / recovery/ promoting independence agenda
- We will develop a model and structure of Older People's Services that is fit for the future which includes developing more flexible and person centred services for people with dementia and the develop the second extra care scheme with a dementia unit
- We will minimise the time take to deliver major and minor adaptation

Flintshire County Council is radically transforming Social Services for Adults. We are focusing on creating a new generation of services that will enable people to live as independently as possible, thus reducing the requirement for ongoing support. This transformation agenda is necessary so we can meet the significant challenges of our ageing population, the increased expectations of people who use social care and reducing budgets.

The transformation of Flintshire's adult services is a significant project that is broken down into a number of phases, which will take at least two years to complete. The changes we are making are already saving us money while giving people what they want, namely services that focus on promoting independence and well being. In total we have identified 13 work streams. Our plan for Adults 'A Journey Towards A new Independence' will provide you with the details on all the different work streams, our reasons for transforming and how we are going about it.

Reablement

The main focus for phase one is our reablement workstream.

Reablment is an intense, short term approach to social care where individuals are supported to gain or regain the skills and confidence to live as independently as possible. This service is provided through our trained reablement team.

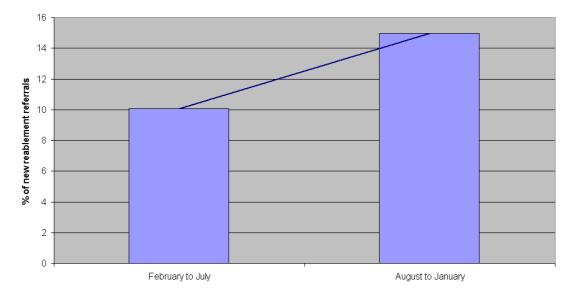
Case of Mrs D taken from Flintshire Excellence Awards Submission 2011

Mrs D, a 78 year old lady contacted Social Services and was referred to the Reablement team as this lady had issues with her confidence and

independence owing to a deterioration in her mobility which had increased her anxieties managing within her own home.

Mrs D has been an independent lady being able to go out and visit friends, able to go shopping and supporting her husband with his daily living tasks as he is in a wheelchair and depends on her for support. Due to deterioration with mobility, Mrs D has been struggling to cope with her own and her husband's daily living activities, and this had resulted in her low mood. A specialist Physiotherapy assessment was carried out and an intervention plan was agreed. A technical instructor visited twice weekly to help Mrs D with her individual programme designed to improve her mobility. By participating in the programme Mrs D's confidence in her lower limb. Mrs D increased level of independence resulted in no care package required and her ability to continue supporting her husband with his daily living needs.

We are pleased with the rapid growth of our Reablement team and the number of people being helped. Month on month we are seeing a steady increase in referrals being accepted by the team, although we have some way to go before we maximise the potential of the team.



Reablement 'new' referrals as a percentage of all 'new' referrals to Adult Social Care in 2011/2012

- In 2011 433 people completed a period of reablement from our Reablement team,
- 64% of people who completed a period of reablement required no further homecare package
- An additional 16% of people had their homecare package care package reduced or maintained following a crisis. A crisis would normally result in an increase in homecare services.

This means we saved money but more importantly adult reliance on home care was reduced. This was estimated at 3.8% for the period from 2010/11 to 2011/12. This is very positive considering that we have faced increased demand for our services (Transformation of Social Services for Adults-Supporting Data Feb 2012) and raising fees for domiciliary care of 1%.

The positive difference the Reablement approach is making for people is also being captured in our returned Satisfaction Questionnaires. The data we have from April 2011 to September 2011 indicated that 97% of people who returned the survey thought they had received enough support from the Reablement team, and 93% (76) indicated that the arrangements for Reablement support suited their needs.

Feedback comments included: 'It helped me to get better quicker' . 'I really did feel as if they had my needs exactly right. To get me mobile again'. (Reablement Satisfaction Questionnaires).

Telecare

Often our Reablement approach requires people having access to **telecare** equipment. Telecare equipment is a range of sensors and detectors such as a smoke detector, and a panic button which supports independence. We are pleased to report that the numbers of people accessing equipment from April to November 2011 is up by 24% on the same period in 2010.

Extra Care

It was a priority for last year to develop our second **Extra Care Scheme** in Mold in collaboration with Wales and West Housing Association.

Progress had stalled while a new building contractor was identified, but we are back on course and aiming to be operational in 2013.

The scheme will be based on the concept of our award winning Shotton Extra Care Scheme which at its essence provides a more contemporary housing option, aiming to maintain independence for as long as possible in the local community where people want to live. The Scheme will offer support to 48 older people and a further 15 people with moderate dementia. We are particularly proud of the fact that having a scheme specialising in dementia

will be the first of its kind in Wales. Our aim is to have a further 2 Extra Care Schemes in Flintshire by 2016.

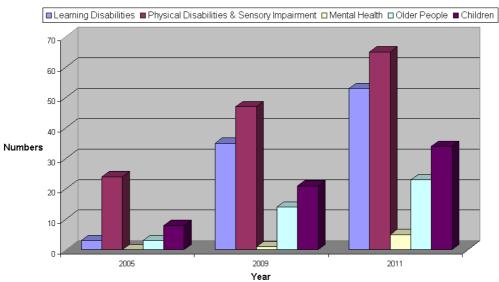
Minor Adaptations to properties are crucial to increasing independence and quick access is a key part of our Reablement approach. We have recognised that people are waiting too long but we have taken steps to tackle this issue with the help of our elected members. Efforts are paying off as things are improving (Quarter 2 performance report to Scrutiny October 2011)

Quicker access to all adaptations will continue to remain a high priority for everyone but we are encouraged by the trend of improvement.

Direct Payments and Citizen Directed Support is another work stream; a service option that promotes independence, where people have the opportunity to take control and make their own arrangements to meet their needs.

We want to increase the number of people taking up these opportunities and get value for money. We have set ourselves at a target of 170 direct payments for 2012/13.

Through ongoing awareness raising and workforce training, the numbers have increased with 180 people now using direct payments which compares to 156 for 2010. We are encouraged by the rise in the number of older people, which was identified by CSSIW as an area we needed to develop. In 2010 there were 15 older people now in 2011 there are 23. The graph below shows our increased growth across all service user groups.



Direct Payment Uptake 2005-2011

In relation to Citizen Directed Support the number of people in receipt has increased from 7 in 2010 to 14 in 2011. A working group has been set up to explore piloting Citizen Directed Support in older people's services. We continue to work closely with SSIA to further develop a Citizen Directed Support approach that is appropriate for Wales, having been one of the leading Welsh Authorities from the start.

Recovery approach

Our Mental Health and Substance misuse services saw continued efforts to embed the recovery approach in 2011. The recovery approach seeks to provide services that help people make their own recovery rather than them becoming dependant on long term social care. The recovery approach recognises that people have the right to build meaningful lives as defined by themselves regardless of their mental health problems. The focus is on strength and wellbeing and central to the recovery approach is hope.

Our **Wellness and Recovery Planning (WRAP)** courses have increased the number of colleagues and service users now trained in using the technique. From December 2010 to December 2011 43 colleagues undertook training and in May 2011 14 went on to qualify as WRAP trainers, 8 of whom use our services. This trained pool of staff and service users will increase understanding of the recovery approach within the Mental Health and Substance misuse teams.

WRAP explained in Mindful Winter 2010 by service user and WRAP trainer Quotes (taken from article)

'WRAP is a plan which you write yourself to help you manage a crisis and nip things in the bud...'

'If you can identify sources of support when you are well and write this into your plan this can make things easier if you become unwell'.

'WRAP helped me to open up and made me think about how I could take control of my life and put myself in the driving seat'. We know that as a result of this work people's care plans are becoming more focussed on recovery which includes a person's employment, social roles, occupation and housing needs because:

- The numbers accessing our support services have increased. For example **Next Steps** a service we provide that supports and guides people to access education, training, voluntary work and employment has seen a 24% increase in people using it's service in March 2011 compared to March 2010. We are really pleased that 5 people have been supported to get a job.
- Also, in response to need last year we set up and funded a volunteering mentoring project, hosted with Mind. The project is already getting great results, having supported 18 Mental Health service users to undertake volunteering, 2 of whom have gone on to secure full time employment (November 2011).
- To give hope to others people have continued to share their journeys of recovery in our successful <u>Mental Health Mindful Newsletter</u>.

- Ongoing redesign of our services to promote the Reablement, Recovery and the Independence agenda
- Our second Extra Care Scheme, to support 48 older people and 15 people with moderate dementia will be operational in 2013.
- Expand our Direct Payment and Citizen Directive Schemes so more people can benefit. Our target for 2012/13 in relation to the number of people using direct payments is 170.
- Reduce times taken to deliver minor adaptations, which are important for people's independence

4. Improvement of Services for Children and Families.

Reminder of our priority for 2011

• We will develop a Transition Team for young disabled people moving into Social Services for Adults

We are moving to a model of early intervention that supports the whole family. Our 'whole family' model will see us do two key things.

We will introduce an **Integrated Family Support Service (IFSS)** with the desired outcome of improving the quality of life and life chances of vulnerable families through an integrated multi-agency approach. We are at the start of the process and will be learning from the experience of the three IFSS pilot sites in Wales. An implementation plan for Flintshire will be produced once specific guidance is received from Welsh Government.

Also, and further ahead is our implementation of the **Families First Initiative** which will reduce the impact of poverty on families in Flintshire. Our Flintshire Families First plan is part of our response to the Child Poverty Strategy (Welsh Government 2010). It is based on consultation with partner agencies, parents, children and young people during 2011 and will promote the development of effective multi-agency systems and support, with a clear emphasis on prevention and early intervention for families, particularly those living in or at risk of poverty.

Both initiatives will mean better outcomes for children, and future savings for us as fewer children will need to go into care.

Pride of Flintshire Awards

Yet again in 2011 we celebrated the achievements of our looked after children and care leavers with our prestigious Pride of Flintshire Awards. The award ceremony is our way to show our commitment to being a corporate parent as set out in our Corporate Parenting Strategy and Action Plan (2006). The first ceremony was held in 2007 and since that time the ceremonies have gone from strength to strength. Young people are nominated for awards by their foster carers, parents and social workers for effort and / or achievement in various categories including: sport, music, academic studies and citizenship. There are also specific awards for care leavers to celebrate their achievements.

We try to ensure that all looked after children and care leavers are nominated but some choose not to be. This year 146 were nominated. We are proud that year on year the evaluations reflect the enjoyment of all those attending and particular mention has been made of the awards by the Children's Commissioner for Wales, Keith Towler, who has attended the event over the past two years. After the ceremony in 2011 one young person wrote:

"I'm still pinching myself, I didn't think that anyone had noticed what I was doing"

whilst a County Councillor wrote:

"We are given lots of paperwork and information about corporate parenting but seeing the children, their carers and hearing what they go through makes it real."

The award ceremony is a real opportunity for us to value our young people, celebrate their vocational achievements, promote their self esteem and positively profile Flintshire as a corporate parent.

Transition

The improvement of our transition service for young people with disabilities moving into adulthood has been a priority during 2011. It has involved intensive planning, learning from other councils', consulting with young people, families and affected colleagues and has culminated in the structure for a new transition team being approved in September 2011.

The Transition team will be a joint team between Children and Adult Services, situated in one place with common line management. This will mean that a person's journey from children's to adult services will be smoother and effective assisted by the introduction of a young persons single transition plan. We are aiming to have the team operational by April 2012.

Care planning

Care planning across all Social Services is focussing more on **outcomes** as evidenced by our file audit process (our regular checks on files). During these checks we look for evidence to answer a series of questions, such as:

- Did we help you?
- Did we treat you well?
- Have the outcomes the service user or carer wanted been recorded?

This means working with people to focus on the outcomes that people themselves are seeking. Examples could include getting healthier, going to college/ getting a job etc. In other words, their needs and not the services we can offer. To embed this further the Family and Adolescent Support Team in Social Services for Children undertook training in 2011 on the <u>Outcome star chart</u>, a useful tool that is used with the young person in agreeing personal outcomes, the type of support needed and the journey of progress.

Family Placement Team

In February 2011, our Family Placement Team had a CSSIW Inspection and positive feedback was received. An action plan was developed to address recommendations. For example we have improved our systems to ensure that the review of foster carers' approval takes place every 12 months therefore complying with fostering regulations.

A further inspection was undertaken in February 2012 and we are waiting on the feedback.

Fostering

The Family Placement Team is in the process of implementing the new "Welsh Foster Care Induction standards." A training programme has been established in Flintshire and further work will be completed by the end of May to embed it into practice.

The Foster Carer Support Groups continue to be well attended and having in excess of 60 carers attending each function. Recent examples of activities include a murder mystery evening and an evening with a guest speaker who spoke about communication and the challenges that young people face when being placed in foster care. We continue to have the Stepping Stones support group for children of foster carers. This group has its own committee to plan the year ahead and young people have an integral role in this forum. A new project the Stepping Stones group will be involved with is the "Film Blast" workshops, which involves the Art Council. 'Film Blast' is a community film project that gives community groups the opportunity to work with a resident professional film maker and a specialist arts practitioner. The Stepping Stones group alongside other groups will produce a film to be screened at the Flintshire Filmfest in June 2012.

Volunteer Mentor Project

The volunteer mentor project provides a range of supports for young people. Initially the project was focused on looked after children and care leavers, specifically developing their independent living skills and personal and social skills with one-to-one support from a volunteer mentor. A volunteer mentor can be a member of the public or our workforce. People can register their interest in volunteering for the project via a volunteering website. Volunteers come from a variety of backgrounds. We receive a high level of interest from people who wish to pursue a career in social care. These individuals are contacting the service direct after recommendation from college tutors. The service has a good record for retaining volunteers, with over 50% of our volunteers have been with the service for over 12 months. The project was expanded during 2011 to include children in need. The number of volunteer mentors has increased to 24.

Our focus for 2012- 2013 is to improve the efficiency and effectiveness of the service delivered. Our aim is to speed up our processes and create systems that enable us to measure the effectiveness of the intervention.

- Implement a 'whole family' model (integrated Family Support Services Initiative and Families First Initiative).
- Transition Team to become operational in April 2012, thus ensuring that a person's journey from children to adult services is even smoother and effective
- Volunteering Mentoring project to become more efficient and a system created to measure the effectiveness of the intervention.



5. Strengthening Safeguarding

Reminder of our priorities for 2011 We will implement the new all Wales adult protection procedures. We will continue to work with Wrexham SSA to explore the feasibility of merging adult protection committees Work with colleagues in education to improve the safeguarding arrangements within schools

Protecting vulnerable people will always be one of Social Services' main purposes.

The Council's commitment to this priority is evident by financial investment with an agreed additional budget of £44,000 for 2012/ 2013 increasing to $\pm 90,000$ for 2013/2014, enabling us to further strengthen our safeguarding arrangements by recruiting an additional post for Social Services for adults.

We have fully implemented the new all Wales adult protection procedures. The training for 380 social workers, nurses, managers and support workers from across adult services during last year has resulted in increased referral rates for adult protection: 217 in 2010/2011 which compares to 187 for 2009/2010.

We know that we still need to improve the recording of risk management in adult protection as identified by CSSIW and this in part will be achieved in 2012 when we further strengthen adult protection through the introduction of a second specialist post.

The priority to work with Wrexham County Borough Council to merge our two adult protection committees has been superseded by the imminent intention of Welsh Government for a regional approach to Adult Protection based on North Wales boundaries. The work we have already undertaken with Wrexham puts us in a good place to join a North Wales Adult Protection Forum based on the Betsi Cadwaladr Health Board (BCU Health Board) and North Wales Police Authority boundaries.

In 2011, Social Services for Children realised its aspiration for an enhanced Safeguarding Unit, which now incorporates the Independent Reviewing Officers and the two Safeguarding Managers. We will be looking to reap the benefits of our enhanced unit in 2012 by offering a supportive advice and direction to fieldwork services.

CSSIW reported in 2011 that we continue to develop improved ways of engaging with children and young people, one such initiative is the successful **Conference Buddy scheme**. The purpose of this project is to enable children and young people to be involved in the discussions and decision making processes which relate to their own lives. The scheme provides children and young people with the opportunity to participate in, and when appropriate, attend Child Protection Meetings (including conferences and core groups) or for their views and wishes to be expressed via their independent 'buddy.', by way of example see below.



1) What I would like the Case Conference to know.

When I was younger I was very dissources in school and at nome But two now I take 2 ADHD tablets every marning and now an more older i am more well behaved very dissource Most of time.

2) What I would like to happen?

For everybody to get about. And for my dad to find a flat/house of his own

The scheme has been running since 2007 and to date 86 children have taken up the opportunity to participate and numbers are increasing year on year.

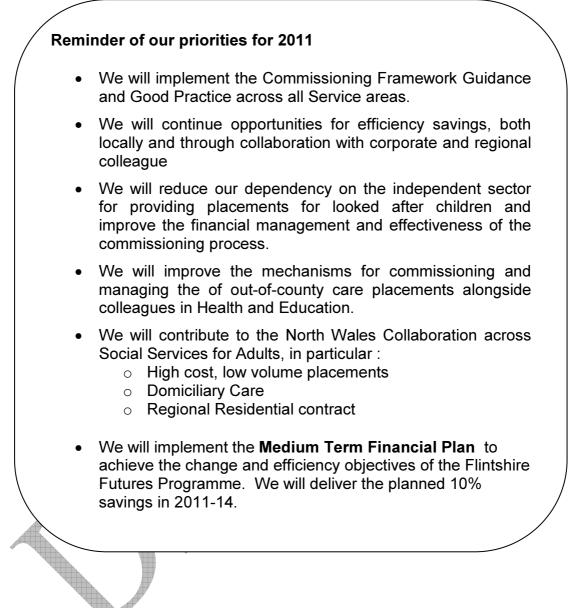
Social Services for Children achieved its 2011 improvement priority of working with colleagues in education to improve the safeguarding arrangements within schools. This was acknowledged by CSSIW in their response to our annual review and more recently we had a positive endorsement following an inspection by Estyn of our education services.

"Since 2009, the authority has made good progress to improve the referral and monitoring systems for training in safeguarding. There is a clear safeguarding policy. At the time of the inspection, there were effective systems and guidance in place to provide CRB checks and to offer appropriate and comprehensive safeguarding and child protection training to all education staff."

We are pleased to announce that in April 2011 the Flintshire and Wrexham Local Safeguarding Children Board was launched (FWLSCB). A communication plan is in place to raise awareness of the role and function of the FWLSCB. An article was published in "<u>Your Community, Your Council</u>" which goes to every home in Flintshire explaining what to do if you have concerns about a child. In addition findings of a survey widely circulated to professionals, members of the public and young people will also provide a judgement on where the FWLSCB is at. This will inform the FWLSCB work programme for next year.

- Maximise on the benefits of our enhanced Safeguarding Unit for Children by offering a support and advice role to our frontline workforce.
- Strengthen Adult protection with the introduction of a further specialist post.
- Further raise awareness and monitor safeguarding activity through the joint (with Wrexham) Local Safeguarding Children Board

6. Value for Money



We have to save money and improve services; this can be done, as we are going to do things differently.

An important Welsh Government document for us is <u>Sustainable Social</u> <u>Services for Wales: A framework for Action 2011</u>. It clearly states that partnership working is not enough if we are to save money. The way we commission, procure and deliver services has to change and the expectation from Welsh Government is that we will commission on a regional level and there will be more **collaborations**. (Welsh Government: Sustainable Social Services for Wales: A Framework for Action)

We have already committed to deliver over £1 million savings in Transforming Social Services for Adults in 2012/ 2013. How this is going to be done is set out in the **Medium Term Financial Plan (MTFP).**

The two priority areas for us have been our radical transformation of Social Services for Adults and the improved out of county commissioning arrangements for out of county children. Both of these key programmes are on track to meet timescales and efficiency savings (Improvement Plan Monitoring Report February 2012)

Social Services for Adults have worked very hard throughout the year to make the necessary efficiency targets for 2012–13. We have achieved this by our committed workforce working together. Although this is good news we can't afford to be complacent as we are at the start rather than the end of a process and we have to factor in the increasing numbers needing our services and their rising expectations.

The budget pressure created by the need to procure out-of-county placements for looked after children remains a key risk but we are taking positive steps to meet this challenge. Through the implementation of the Family Placement Team Recruitment Strategy, we are working to increase the pool of in-house foster carers from 61 to 69 by 2012 (and from 11 short breaks foster carers to 16 in 2012) to reduce our dependency on the independent sector.

In terms of improving our financial management and effectiveness a Commissioning and Marketing Strategy has been developed to get best value from independent service providers. Real success has been achieved with regard to reducing costs with existing providers and identifying new service providers. Through our multi-agency Out of County Placement Panel, a process and partnership with Life Long Learning we now have greater scrutiny of the cost and quality of placements. All the steps we are taking are paying off in that over the last 18 months we have saved £440 k. The attempt to achieve best value and cost volume reductions will continue on case by case basis.

We want to become smarter commissioners i.e. getting the best prices for the services that we commission. As such we are investing in this function:

- A commissioning manager will be appointed during 2012 / 2013.
- The new job description for our four Social Services Planning and Development Officers will focus on the function of commissioning.
- A commitment to have commissioning plans in place for all services by April 2013.

The commissioning plan for Learning Disability Services is well advanced as this was identified as an area of priority by CSSIW. We have taken the decision to take a staged approach starting with where people live, which will be completed by April 2012. A review of our existing day opportunities for people with Learning Disabilities will then follow. The aim of this review is to ensure that we have a service that is fit for the future. By collaborating with other councils across North Wales we will achieve value for money.

One project that has come to fruition in 2011 is the development of a single **domiciliary contract** developed with councils, BCU Health Board and the Independent sector, launched in September 2011. By having a single contract as opposed to many different contracts will result in savings.

Headway has been made in achieving better value for money for high cost low volume Learning Disability placements, as such we have reduced the amount we spend. The case for the creation of a **Regional Commissioning**, **Hub** for all high cost low volume placements has been approved by Flintshire's Executive and will be a great step forward.

- Become smarter Commissioners and have commissioning plans for all services by April 2013
- Reduce our dependency on the independent sector for providing placements for looked after children and improve the financial management and effectiveness of the commissioning process
- Take up opportunities for collaboration where money will be saved.

7. Partnerships

Reminder of our priorities for 2011

- We will work in partnership with the BCU Health Board to ensure joined up service planning and delivery of health and social care services.
- We will integrate with the BCU Health Board (via Section 33 agreements) for Community Mental Health Teams and Community Substance Misuse Teams

To us this means working with external partners such as BCU health board, the voluntary sector, independent organisations and other councils or across teams and council departments. We have numerous examples of partnership and collaborative activity.

2011 saw an ongoing priority to work with BCU Health Board to ensure that we join up service planning and delivery of health and social care services at a local level. **Locality leadership teams** are established in the three localities in Flintshire, each working on plans to set up co-located teams, where different agencies will be together to deliver services for residents in their respective locality. This will mean that Social Workers, Occupational Therapists and District Nurses will work together in one office which will improve the coordination of care. We envisage that our first team will be co-located this year, and will be one of the first of its kind in Wales. This contributes to the wider corporate Asset Strategy, saving money for ourselves and BCU Health Board whilst providing a better service.

We continue to be an active and equal partner in Flintshire's Local Service Board. The Welsh Government is currently consulting on its proposal to strengthen the role and accountability of Local Service Boards in Wales. The proposals include replacing the four existing statutory plans, which includes our Health and Social Care Wellbeing Strategy and Children and Young Peoples Partnership with a single integrated plan which will be driven by the Local Service Board. The expectation is that the single plan would be based on a comprehensive needs assessment, use an outcomes based methodology, and pay attention to the needs of all people in the local area but with a specific focus on groups who are disadvantaged, vulnerable or at risk of becoming vulnerable.

We have taken the decision not to formally join with the BCU Health Board our Community Mental Health Teams and Community Substance Misuse Service, as we get all the benefits from our existing informal arrangements. We remain as partners in our ongoing efforts to improve services, working jointly on strategic initiatives. One such strategic initiative is the implementation of the <u>Mental Health</u> (<u>Wales</u>) <u>Measure</u> which places duties on mental health services, effectively creating rights for mental health service users. There has been additional funding to BCU Health Board to implement the measure. Together with the BCU Health Board we are well underway with Part 1 which aims to strengthen the role that primary care plays in delivering mental health care and treatment which includes training and guidance to G.P.s.

- Deliver on the Locality Team Action Plans to join up service delivery at a local level and establish our first of three teams this year.
- Implement with the BCU Health Board the Mental Health Measure, creating more rights for people who use mental health services

8. Listening

Reminder of our priorities for 2011

• We will build on Service User and Carer involvement across both Adult and Children's Services and launch our Community Services Involvement Action Plan.

We are fully committed to involving service users and carers in all aspects of our service delivery and development, and there are many creative examples happening across our services. To provide you with a flavour a few examples have been chosen from across Social Services.

Weekly participation groups take place for looked after children and care leavers, on average 8 young people attend each week. It is an opportunity for young people to discuss ways of improving services and comment on national initiatives set by the Welsh Government and Children's Commissioner. As part of our commitment to corporate parenting members of the groups also share their views and perspectives with Elected Members at the Children's Services Forum. In 2011, 5 looked after children from the group attended a Family Justice Council training event to speak to judges, solicitors and social workers about their experiences of court proceedings.

We are keen to capture feedback from people one such way is from satisfaction questionnaires. General and specific questionnaires such as the child protection conference survey are regularly sent out, findings of which are considered by our Senior Management Team. December 2011 saw the launch of a Service User questionnaire in older people services which would gather feedback at the Review stage.

In addition to the wealth of satisfaction surveys we send out a crucial element to improving our performance is learning from the complaints and compliments we receive. In total for 2010/2011 we received 118 complaints and 184 compliments. Findings of complaints are used to change policy and practice in delivering services. At the end of every investigation an Improvement Action plan is produced and implemented. This is monitored and reported quarterly to the Senior Manager responsible for complaints. The forthcoming Social Services Bill will require us to strengthen the complaints procedure. We have already taken steps by identifying additional workforce resources and will be implementing a revised management system and relaunching our training. Ultimately this will lead to a more robust 'lessons learnt' process and improved services.

Examples of actions we have taken as a result of complaints in 2011 have included the tightening of workforce rotas in Homecare and a refresher training course for workforce on medication procedures and record keeping.

The Mental Health and Substance Use Involve project has grown in strength; the number of service users and carers on the database is increasing and now stands at 199. There is also a trained pool of 16 service users and carers in the recruitment process and all interviews that have and will take place will have a service user on the panel.

People with disabilities are actively supported to influence service developments. We have allocated resources and time to support the user representatives in preparing for Learning Disability Planning Group meetings in advance and debrief afterwards. A personalised guide sheet helps the user co-chair of the planning group to control the agenda items. All agendas and minutes are **only** produced in easy read. The meetings take on a workshop style activity so all can contribute on an equal footing with the aim of improving our services, an example of which I have listed in the table below.

However, we have recognised for sometime that we need a consistent involvement approach across our Services, while being responsive to the groups of people we support. Our <u>Involvement Action Plan</u> launched in early 2012 at workforce conferences will be implemented throughout 2012. In essence we have agreed that there are 7 standards that will set the direction for all our involvement activities.

Our priorities for 2012

- Implement Involvement Action Plan to improve involvement for all people who use our services and their carers, delivering on the overall outcome of the provision of better services.
- A revised Complaints management system and training programme, which will lead to a more robust 'lessons learnt' process and improved services.

9. Quality Assurance

Reminder of our priority for 2011

• Following on from being successfully selected as a WLGA Equality Improvement Framework pilot site we are introducing a robust system across the directorate to undertake Equality Impact Assessments.

We consider the quality of our service delivery to be really important. Within the context of the 10 Council Priorities, and the <u>Community Services Priorities</u> we assess progress in a range of different ways, some of which we have already mentioned throughout this report. They include:

- Performance Indicators and in particular those identified with elected members as improvement targets
- Feedback from Inspections
- Monitoring of the Directorate and Head of Service Plans
- the Outcome Agreement and the Improvement Plan
- Feedback from Service User Engagement
- Undertaking and implementing the results of Equality Impact Assessments

We report performance quarterly to our Social Care and Health Overview and Scrutiny Committee.

Having robust data on the people who use our service is vital for commissioning and the future development of our services. During 2010/11 the data quality was not consistent at the beginning of the year because of the introduction of our IT Business System (PARIS). This was highlighted by CSSIW. Since in 2010, we have and continue to improve the data quality through joint concerted efforts on the part of the Business Systems Team, performance staff and operational managers. Operational managers now have a range of reports available to them to support them in improving performance.

We are strengthening the performance culture across Social Services and need to respond to senior managers 'demand' for necessary data to improve services. In 2012, we will do this by developing a more robust performance staffing structure with increased staff, and increasing the establishment, as part of our review of the Partnerships Development and Performance Team.

Our performance is strong overall and we have made significant improvements in 2011.

Within Social Services for Children:

- Our timeliness for assessing children within 7 working days is good and improving, exceeding our own target of 89%
- The percentage of reviews of children in need carried out within accordance with statutory timescales has improved dramatically. Reports for the first 6 months of 2010 identified us having achieved 49%, and at a similar time in 2011 it is 89.4%. This has been achieved by using a flagging system to notify social workers of the due dates.

We are aware that **CSSIW** highlighted a number of <u>key improvement areas</u> particularly with looked after children, and as a result of this we have reclassified some targets as improvements for 2012. We will have improvement actions in place to address the issues. We need to ensure that looked after children are seen and spoken to regularly by their social worker, and the way in which we measure this is by the timeliness of LAC statutory visits. Identifying this as an improvement area will serve to raise the profile with Social Workers.

Within Social Services for Adults:

- **CSSIW** identified the review of care plans as an area of development for Social Services for Adults. With increased efforts on this activity we have improved. At the end of September 2011, approximately 80% (1700 of 2132) of people who were due a review were reviewed, which exceeds the All Wales average for 2010/11 of 75% and is in line with our target for 2011/2012
- Disabled Facilities Grants Adaptations to properties are crucial to increasing independence. Due to increased demand impacting on waiting times we have taken steps to tackle this issue with the help of our elected members. For example a workshop was held and a LEAN approach has been applied to some of our processes. As a result in Social Services for Adults there is improvement but we have yet to meet our targets. The reverse is the case for Social Services for Children our performance during 2010/2011 was the best in Wales. Quicker access to all adaptations will continue to remain a high priority, a strategic risk and is highlighted in the outcome agreement.

A simple system is now in place to ensure that all our services and any new policies and projects undergo an **equality impact assessment** (EIA), this is how we ensure that our services are accessible to all people who are eligible and that they don't discriminate. For every change we now make which impacts on people or our workforce an assessment is undertaken.

During 2011 we have undertaken assessments on our Transition service and Reablement approach. Workforce training on EIA completion is arranged for 2012 and all completed assessments are run past the Council EIA Quality Assurance Group, which is made up of members of the public, representative of the different groups.

The Community Services priorities referred to earlier will be supported by the following improvement targets:

- The average number of calendar days taken to deliver low cost adaptation works in private dwellings where the Disabled Facilities Grant process is not used. PSR/006L
- The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people. PSR/009a
- The average number of calendar days taken to deliver a Disabled Facilities Grant for adults. PSR/009b
- The percentage of carers of adults who were assessed or reassessed in their own right during the year who were provided with a service. SCA/018c
- The percentage of adult protection referrals completed where the risk has been managed. SCA/019
- Number of adults receiving a personal budget for services via either a direct payment or citizen directed support. IA1.1L4
- The percentage of looked after children reviews carried out within statutory timescales during the year. SCC/021
- The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations. SCC/025
- The percentage of young carers known to Social Services who were assessed. SCC/030a
- The percentage of young carers known to Social Services who were provided with a service. SCC/030b
- The percentage of child protection reviews carried out within statutory timescales during the year. SCC/034

Our priorities for 2012

- Ensure that statutory visits to looked after children are undertaken on time (every 3 months). Our target for 2012 is 93%.
- Strengthen the performance team by the recruitment of a Team Manager and additional performance assistant.
- Reduce times taken to deliver major adaptations (Disabled Facilities Grants), which are important for people's independence



10. What we will do in the coming year to make things even better

Overall Council Approach

Improve the information about our services on the <u>Flintshire County Council</u> <u>Website</u> and be more efficient in the production and distribution of service leaflets.

Review workforce absence and set targets for reduction

Carers

Increase the number of carers and young carers we identify and support.

Develop a model of support that will provide carers with flexible breaks and emergency respite in 2012.

Launch the Young Carers and Looked after Children 'Access to Action Card' in June 2012.

Increase the short break overnight provision for children and young people with disabilities by 54% more available bed nights.

Transformation of Social Services for Adults

Ongoing redesign of our services to promote the Reablement, Recovery and the Independence agenda

Our second Extra Care Scheme, to support 48 older people and 15 people with moderate dementia will be operational in 2013.

Expand our Direct Payment and Citizen Directive Schemes so more people can benefit. Our target for 2012/13 in relation to the number of people using direct payments is 170.

Reduce times taken to deliver minor adaptations, which are important for people's independence

Improvement of services for Children and Families.

Implement a 'whole family' model (integrated Family Support Services Initiative and Families First Initiative).

Transition Team to become operational in April 2012, thus ensuring that a person's journey from children to adult services is even smoother and effective

Volunteering Mentoring project to become more efficient and a system created to measure the effectiveness of the intervention.

Strengthening Safeguarding

Maximise on the benefits of our enhanced Safeguarding Unit for Children by offering a support and advice role to our frontline workforce.

Strengthen Adult protection with the introduction of a further specialist post.

Further raise awareness and monitor safeguarding activity through the joint (with Wrexham) Local Safeguarding Children Board

Value for Money

Become smarter Commissioners and have commissioning plans for all services by April 2013

Reduce our dependency on the independent sector for providing placements for looked after children and improve the financial management and effectiveness of the commissioning process

Take up opportunities for collaboration where money will be saved.

Partnerships

Deliver on the Locality Team Action Plans to join up service delivery at a local level and establish our first of three teams this year.

Implement with the BCU Health Board the Mental Health Measure, creating more rights for people who use mental health services

Listening

Implement Involvement Action Plan to improve involvement for all people who use our services and their carers, delivering on the overall outcome of the provision of better services.

A revised Complaints management system and training programme, which will lead to a more robust 'lessons learnt' process and improved services.

Quality Assurance

Ensure that statutory visits to looked after children are undertaken on time (every 3 months). Our target for 2012 is 93%.

Strengthen the performance team by the recruitment of a Team Manager and additional performance assistant.

Reduce times taken to deliver major adaptations (Disabled Facilities Grants), which are important for people's independence



GLOSSARY

We appreciate that some people will not read this report on line so if you would like more information or copies of any of the plans and strategies mentioned in this Overview please contact

Barnardos A voluntary sector organisation that runs a project which provides one to one support, group sessions, summer breaks and activities for Young Carers in Flintshire.

Children and Young Peoples' Partnerships A partnership of all agencies that contribute to the wellbeing of children, families and young people in Flintshire e.g. Flintshire County Council, BCU Health Board, Police and the voluntary sector. The partnership is responsible for producing the Children and Young People's Plan, which records what work needs to be done, and by whom, to achieve improved outcomes for children, young people and families in Flintshire.

Children and Young Adults Support Team -A fieldwork team in Social Services for Children that supports care leavers and children accommodated either voluntarily or subject to a Care Order where a plan for permanence is in place, care proceedings are concluded and long term fostering is the outcome.

Citizen Directed Support - It is where people choose, organise and control their own support to meet assessed and agreed social care needs in a way that suits them with an identified budget. It is about using available resources to achieve what is important to them. The service package can be made up of statutory and other services.

Commissioning – involves making decisions about what services are required to respond to need. It involves making decisions about the capacity, location, cost and quality of services together with how and who will deliver them.

Collaborations - where agencies pool resources (time, expertise and money) to work together to deliver and develop services.

Conference Buddy scheme A conference buddy is someone independent who supports a child / voung person through the child protection conference case process, very much like an advocate, who ensures their views and feelings are shared at conference.

CSSIW (Care and Social Services Inspectorate Wales) - CSSIW encourages the improvement of social care, early years and social services by; regulating, inspecting reviewing and providing and professional advice to Welsh Ministers and policy makers.

Direct Payments – Payments given to people who are eligible as a means of controlling their own care, allowing more choice and flexibility. They are regular monthly payments from Social Services enabling people to purchase their own care, instead of receiving help arranged by social services.

Domiciliary contract - A single regional contract for care in the home being developed in partnership with Local Authorities, Betsi Cadwaladr University Health Board and the Independent Sector. This means that all providers work to the same standard and service specification. To be launched in April 2012.

Equality impact assessment - An equality impact assessment is a systematic method to assess implications of an organisation's decisions on people from different backgrounds. Impact assessment should place take when considering a new policy, strategy or revising an existing policy or reviewing a function, service or procedure.

Families First Initiative -Improving the delivery of services to families across Wales, especially those living in poverty, as set out in the Welsh Assembly Government's Child Poverty Strategy 2010.

Care Scheme Extra _ Llvs Eleanor, Flintshire's first extra care provides independent scheme living for older people in Flintshire. The scheme was developed by Flintshire County Council in partnership with the Pennaf Housing Group and won the Best Housing and Regeneration award in the annual Association for Public Service Excellence awards. Llvs Eleanor has 50 one and two bedroom apartments with а restaurant, lounge, mini cinema, gym, games room, IT suite and hair

dressing salon amongst the communal facilities on offer as well as a treatment / therapy room. A state of the art alarm system and 24 hour care is available on site. Apartments can be purchased by or rented to people aged 60+ who have care and accommodation needs which meet the eligibility criteria for the scheme.

Flintshire Connects Implementation (with partners) of six face to face customer service facilities in each of the main county towns, delivering hiah quality proactive services with highly skilled generic staff (to the most residents). vulnerable and supporting the implementation of agile working and the use of new self-serve technologies to access services.

Flintshire Futures Programme -The Council's corporate programme for modernising and changing the organisation to make the best use of its resources and secure efficiencies. The four year organisational change programme is structured around 4 themes or quarters - i) Corporate Change - a range of projects for the whole organisation; improving the way the Council works, improves customer services and delivers efficiency savings; ii) Service Change service specific projects including the third phase of service reviews e.g. Transforming Social Services for Adults: Regional iii) Collaboration portfolio of collaborative projects and subregional collaboration projects; iv) Local County Collaboration projects within Flintshire with our local partners

Health and Social Care Welling Strategy - This document contains a set of priorities that Flintshire County Council and BCU Health board has agreed with other partner organisations, in order to improve the health, social care and well being of Flintshire's residents. The current strategy entitled Good Health, Good Care in Flintshire is effective from 2011-2014.

Integrated Family Support Service - An innovative service model that aims to reform services provided to vulnerable children and families in Wales. For families with complex problems there is an increased likelihood that the child's social and emotional physical, development will be impaired and for some children there will be repeated or long term episodes of being looked after by the local authority. The main aim of IFSS is to support families to stay together by empowering them to take positive steps to improve their lives.

Locality leadership teams There are three teams in Flintshire - North East (Deeside), North West (Flint and Holywell) and South (Buckley, Mold etc). The overall aim of the Locality Leadership Teams is to enable multi-agency staff from the locality to work in partnership as an integrated team to plan, deliver and monitor the best possible locality services for residents by:

1) Maintaining independence and well-being at home and in the community as appropriate, and avoiding unnecessary admissions to hospital and long term care 2) Improving the multi-disciplinary care of people with chronic conditions and 3) Targeting resources more effectively in the community to include a range of health promotion and preventative interventions.

Local Service Board – A local Leadership Team of Flintshire's public service bodies (Council, Police, BCU Health Board, Further and Higher Education, Probation, Fire and Rescue, Environment Agency, Voluntary Sector). It has four principal roles as a set of local leaders: to take ownership of the provide community strategy; and monitoring oversight of relevant partnerships; identifv common issues 🌙 as public bodies/employers and promote effective joint working in the design and provision of public services.

Mental Health (Wales) Measure -The proposed Measure places duties on Local Health Boards and local authorities in Wales in relation to assessment of mental health and treatment of mental disorder. It also makes provision in relation to independent mental health advocacy for gualifying patients those are persons subject to the compulsory powers of the Mental Health Act 1983, and persons receiving treatment in hospital (suffering with a mental disorder).

Medium Term Financial Plan -The plan forecasts available resources. financial pressures. for efficiencies/ opportunities savings for both revenue services and the capital programme. The Plan builds on 2011/2012 and forecasts forward 3 years to 2014/2015. The plan is an integral part of our Medium Term Financial Strategy which can be found on our Council website.

Minor and Major Adaptations -Minor Adaptation is an adaptation which costs under £1000 such as a grab rail or level access shower (not equipment). A major Adaptation is over £1000 and would be through the Disabled Facilities Grant or if a Housing Association tenant through Scheme 1A which is Welsh Government funded (e.g. bathroom, kitchen or bedroom extension, stairlift or lift)

Newcis – A voluntary sector organisation based in Mold which co-ordinates and provides services for carers.

Next Steps – A branch of Mental Health Support Services that provides individual support and guidance for people with Mental health and/or Substance Misuse access education. issues to voluntary work training. and employment opportunities.

Outcome - 'Outcomes' are defined as the impact, effect or consequence of a service or policy. Outcomes-focussed services are therefore those that meet the goals, aspirations or priorities of individual service users.

Reablement – Reablement is an approach which aims to maximise independence, choice and quality of life, this means that all people who wish to access Social Care Services undergo a period of assessment and support to enable them to live as independently as possible, minimising the requirement for ongoing support. Reablement is short term а assessment and intervention service which is person centred and outcome focused. As such the duration of the reablement will vary for each person (from a few days to a maximum period of six weeks) . During the reablement phase there will be regular reviews to assess progress agreed outcomes.

Regional Commissioning Hub - A collaboration of the six North Wales' authorities for the commissioning and contracting of high cost low volume care home placements for adults and children.

Social Care Bill – The Bill will set out the core legal framework for social services and social care, reinforcing people's rights to information and services and supporting the delivery of our services in an integrated way to ensure that social services and social care is sustainable.

Telecare - is a way in which support can be provided through telecommunication devices in the home. It uses simple technology to manage risk and give people the peace of mind they need to live in own homes for their longer. Telecare equipment is provided Community Equipment through Stores and fitted and monitored by Carelink. There are currently over 400 homes in Flintshire with Telecare as part of an assessed care package.

FLINTSHIRE COUNTY COUNCIL

REPORT TO:SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY
COMMITTEEDATE:THURSDAY, 29 MARCH 2012

REPORT BY: LEARNING AND SOCIAL CARE OVERVIEW AND SCRUTINY FACILITATOR

SUBJECT: QUARTER 3 PERFORMANCE REVIEW 2011/12

1.00 PURPOSE OF REPORT

- 1.01 To note and consider the 2011/12 Quarter 3 service performance reports produced at the Head of Service / Divisional level under the adopted business model of the Council. The reports cover the Quarter 3 period (October to December 2011).
- 1.02 To note the update of the Strategic Assessment of Risks and Challenges (SARC) contained within the performance reports.
- 1.03 To note the progress made against the Improvement Targets contained within the performance reports.

2.00 BACKGROUND

2.01 The quarterly performance reports seek to provide the reader with the 'narrative' of quarterly performance, which gives the context for overall performance. These reports are a quarterly review of service plans.

3.00 CONSIDERATIONS

- 3.01 Copies of the detailed Quarter Three (October to December 2011) performance reports are attached at Appendix 1.1 Social Services for Children, Appendix 1.2 Development and Resources, Appendix 1.3 Social Services for Adults and Appendix 2 SARC summary position.
- 3.02 A number of issues had been raised in relation to quarterly performance reporting. As a result a group of staff with representation from each Directorate and Corporate Services met to discuss possible solutions to the issues. In addition, two Overview & Scrutiny Committee Chairs attended the meeting to contribute to the discussions. Subsequently a small sub-group (including Member representation) prepared a set of guidance notes for the proposed revised format of quarterly reporting.

- 3.03 The new approach is based on **exception reporting** and splits the reports into 3 distinct sections:
 - Foreword to summarise key information that the Head of Service feels Members should be aware of, including both good and poor performance. Emerging issues should also be highlighted in this section e.g. a new SARC identified (as agreed by CMT).
 - 2. **Performance Summary** This section contains an 'at a glance' summary of performance for the quarter against the following, in a tabular format for each:-

Improvement Plan – giving a summary of both RAG statuses for the progress and outcome, (as in the first mid year review).

SARC – a summary of the risk Rag status at the end of the quarter.

Performance Indicators - as a minimum this section will include all (PIs) classified as Improvement Targets and those which are aligned to the Improvement Priorities for the purpose of measuring outcomes. The summary will show target and outturn performance with a RAG status and trend.

Improvement Target Action Plan – this section summarises whether actions to support the achievement of Improvement Targets are 'on track' or 'behind schedule'.

Key Actions from the Service Plan – summarises whether key actions/areas for improvement are 'on track' or 'behind schedule'. (This will include other key areas of work not already identified.)

Internal & External Regulatory Reports – summarises regulatory work reported in the quarter and its outcomes and intended actions.

- 3. **Exception Reporting** This section of the report is broken down in the same way as the service plan is sectioned e.g. by Service Teams. This section is to be used to report in detail the emerging issues and poor performance identified in Section 1 and also any poorer performance identified in Section 2 e.g. items which have an amber or red RAG status or are 'behind schedule'. The detail will include the reason for the issue / poor performance arising and what is to be done to rectify the situation.
- 3.04 A revised SARC summary position of the present Red, Amber and Green status for all of the reported strategic risks and challenges is provided at Appendix 2.

4.00 RECOMMENDATIONS

4.01 That Members consider the 2011/12 Quarter Three performance reports produced by the Heads of Service, highlight and monitor poor

performance and feedback details of any challenge to Corporate Resources O&S Committee who are responsible for the overview and monitoring of improvement targets.

5.00 FINANCIAL IMPLICATIONS

5.01 None as a result of this report.

6.00 ANTI POVERTY IMPACT

6.01 None as a result of this report.

7.00 ENVIRONMENTAL IMPACT

7.01 None as a result of this report.

8.00 EQUALITIES IMPACT

8.01 None as a result of this report.

9.00 PERSONNEL IMPLICATIONS

9.01 None as a result of this report.

10.00 CONSULTATION REQUIRED

10.01 Not applicable.

11.00 CONSULTATION UNDERTAKEN

11.01 Not applicable.

12.00 APPENDICES

12.01 Appendix 1.1 Social Services for Children Appendix 1.2 Development and Resources Appendix 1.3 Libraries, Culture and Leisure Appendix 2 SARC summary position

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985 BACKGROUND DOCUMENTS

None.

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Page 50



Quarterly Performance Report – Social Services for Children

Report Author	Head of Social Services for Children
Report Date	March 2012
Report Period	Quarter 3: 1 st October 2011 to 31 st December 2011

Introduction

The report is produced on a quarterly basis and provided to Executive members for review and assurance and will be available for Overview and Scrutiny Committees as part of their Forward Work Programmes.

The report consists of an overview of the key messages to highlight across all work streams in Social Services for Children, which is followed by highlights from each service area. Parts 2 and 3 of the report include an assessment of performance in the quarter from the following sources:

- Improvement Plan Monitoring
- Strategic Assessment of Risks and Challenges
- Performance Indicators and Outcome Measures
- Improvement Target Action Plan Monitoring
- Key Actions from Service Plan
 Monitoring
- Internal and external regulatory reports
- Customer satisfaction and feedback
- Awards and accreditations
- Resource Management (HR, ICT, Finance, Assets)

RAG Status

RED equates to a position of under-performance, downward trend, non-achievement of target, non-achievement of action milestones.	R
AMBER equates to a mid position where improvement may have been made (i.e. improved trend) but the target for the year is unlikely to be reached, or where action milestones have been deferred or narrowly missed.	
GREEN equates to a position of positive trend on performance, meeting target and achieving action milestones.	G

1. Foreword

Report highlights for this quarter are the following items: -

Performance	Of the 13 improvement targets, 9 (69%) of these are allocated a green RAG status this quarter, and the other 4 are amber. A detailed analysis of the amber targets is presented in Section 3.0 of this report. Highlight performers for Quarter 3 include planning for permanence for looked after children (SCC/001b) which remains at 100%, timeliness of initial assessments (SCC/042a) which is maintained at 93%, and the average number of calendar days taken to deliver a Disabled Facilities Grant (PSR/009a) for children, which has improved since Quarter 2.
Independent Sector	Refurbishing Arosfa is ongoing and it is envisaged that this should be completed by April. It is expected the new Residential Service will become operational May / June.
Advocacy tender	The tendering process for a new service provider for specialist advocacy and independent visiting is ongoing and a decision should be reached by early March.
Young Carers and Looked after children	Work is ongoing between groups of young carers and looked after children, resulting in the development of the ID card for young carers, looked after children and care leavers. The ID card was to be launched on the 4 th April, but has had to be postponed on Peter Evans' advice due to the local government elections and Purdah.
Supervised contact arrangements	The external evaluation of Supervised Contact Arrangements has been completed, and an action plan is to be formulated in response.
Transition	The structure of the new Transition Team has been approved and is on target for implementation.
Integrated Family Support Services	The bid for SMAT funding to backfill posts to allow our staff to spend time with the IFFS Team in Wrexham was supported. This activity will inform our plans for the rollout of IFSS.

Other highlights by service area are as follows: -

Youth Justice Service	 A successful bid has been agreed to develop a Dual Diagnosis Service for those young people with substance misuse and mental health related problems. This is currently being developed with Flintshire CAMHs. Volunteer Mentor Support Scheme is being developed to support young people across the range of YJS activities including enhancing support available as part
	activities including enhancing support available as part of Youth Rehabilitation Order (YRO) / Detention

P P P P	
	 Training Order (DTO) exit strategies. Open College Network (OCN) qualifications are currently being developed within the service and integrated across a range of YJS activities and to be delivered primarily by case managers and targeted support staff with direct support from a dedicated OCN assessor based within the Service.
Families First	 The Families First Plan was submitted to WG by the deadline of 31st October 2011. WG gave conditional approval on the 2nd December 2011. The conditional approval gave consent to develop a commissioning strategy for Families First by 31st March 2012. During Quarter 3: Quest continued to offer services to parents to assist in the development of their confidence and to enable them to start the journey towards training/employment. Team Around the Family delivered multi-agency training to raise awareness about when to refer families to the Team Around the Family. Each person who attended training has been given a toolkit to assist them in referring families on to appropiate services. Family Information Service have improved access to their service by working collaboratively with Wrexham and Denbighshire to engage employers in making low paid employees aware of information about Tax Credits and how they can access advice and guidance from CAB and Welfare Rights. CAB and Welfare Benefits Unit continue to provide advice to families who have financial issues such as debt, need access to housing, finance etc.

Appendix 1.1 **2. Performance Summary**

2.1 Improvement Plan Monitoring

Council Priority	Target Date	Progress RAG	Outcome RAG	Commentary			
5.0 To make our communities safe and to safeguard the vulnerable, with children and older people being priority groups.							
5.1.1 Develop robust commissioning arrangements for out of county placements.	March 2012	А	G	See Section 3.1			
5.3 Further raise awareness and monitor safeguarding activity through the joint (with Wrexham) LSCB.	December 2012	G	G				
5.5 Implement the Integrated Family Support Services initiative (also 7).	June 2011	G	G				
6.0 To protect and grow the local and re- provide help and support for those vulne	-	•	prosperous	County and to			
6.9 Implement the Families First initiative (also 5).	March 2012	G	G				
7.0 To promote independent, healthy and fulfilled living in the community with the highest quality personalised and supportive social and health care services.							
7.3 Develop a range of temporary accommodation and independent living options for care leavers (also 8).	December 2011	G	G				

2.2 Strategic Assessment of Risks and Challenges (SARC)

The table below summarises the position of SARCs at the end of the reporting period.

Commentary is included in section 3 for those SARCS: -

- that are showing a Red RAG status
- where the RAG status has changed since the last reporting period
- where the Green Predictive Date has changed since the last reporting period
- where there has been considerable change or additions of secondary risks and activity

SARC – CD23 Procurement of Independent Sector Placements for Looked After Children	Previous RAG Status	Current RAG Status	Green Predictive
Increase the choice and diversity of FCC foster placements to help to reduce the need to procure placements from the independent sector.	A	A	April 2012
Increase the availability of in-county residential short break care for children with a disability to help meet unmet need and reduce	A	A	June 2012

Appendix 1.1

the need to procure out-of-county placements from the independent sector.			
Improve the mechanisms for procuring and managing independent sector placements to ensure that looked after children are appropriately placed and best value is achieved.	A	A	June 2012
Improve the effectiveness of social care interventions designed to rehabilitate children with their families and/or appropriately return them to an in-county placement from an emergency out-of-county placement	G	G	March 2012

2.3.1 Performance Indicators and Outcome Measures

The status of the indicators are summarised for this quarter below:







Graphs and commentary are included section 3 for those indicators shown with a RAG status of either Amber or Red. An asterisk (*) indicates that the indicator is an *improvement* target.

Indicator	Annual Target	Previous Quarter Outturn	Current Quarter Target	Current Quarter Outturn	RAG	Change e.g. Improved / Downturned
* SCC/042a The percentage of initial assessments completed within 7 working days.	89%	93.1%	89%	93.7%	G	Improved
* SCC/042b The average time taken to complete initial assessments that took longer than 7 working days.	Below 10.5 days	22.1 days	Below 10.5 days	13.8 days		Improved (See Section 3.2)
* SCC/028 The percentage of Looked After Children who had a fully completed and updated	70%	-	70%	66.7%		None due in Q2 but Improved on 2010/11 (See Section 3.2)

Appendix 1.1						
Assessment and Progress Record at their third review.						
* SCC/039 The percentage of health assessments for Looked after Children due in the year that have been undertaken.	75%	57.1%	75%	72.6%		Improved (See Section 3.2)
HTH/001 The percentage of Health Assessments appointments requested within timescales.	Not set	85.7	Not set	91.9%	No target	Improved (See Section 3.2)
* SCC/030a The percentage of young carers known to social services who were assessed.	80%	100%	80%	100%	G	Maintained
YC/001 The percentage of young carers identified in the period who were offered a Young Carer's Assessment.	90%	100%	90%	100%	G	Maintained
* SCC/030b The percentage of young carers known to social services who were provided with a service.	80%	100%	80%	100%	G	Maintained
* SCC/025 The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations.	93%	74.5%	93%	77.8%	A	Improved (See Section 3.2)

Appendix 1.1						
* SCC/016 The percentage of reviews of child plans for children in need carried out in accordance with the statutory timetable.	70%	89.4%	70%	88.1%	G	Maintained
* SCC/001b For those children looked after whose second review (due at 4 months) was due in the year, the percentage with a plan for permanence in place.	100%	100%	100%	100%	G	Maintained
* SCC/024 The percentage of children looked after during the year with a Personal Education Plan within 20 school days of entering care or joining a new school.	80%	66.7%	80%	-		None due in Q3
*SCC/033c The percentage of young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19.	75%	100%	75%	80%	G	Downturned but still better than 2010/11
* PSR009a The average number of calendar days taken to deliver a Disabled Facilities Grant (DFG).	350 days	383 days	350 days	293 days	G	Improved

Appendix 1.1						
* PSR006 Timing of low cost adaptations not funded by a Disabled Facilities Grant (Childrens cases only).	88 days	119 days	88 days	-	G	No completions in Q3
SCY/001a The percentage change in the average number of hours of suitable education, training or employment children and young people receive while within the youth justice system by children and young people of statutory school age	6%	59.5%	6%	32.3%	G	Downturned (See Section 3.2)

2.3.2 Improvement Target Action Plan Monitoring

Ref	Action & Planned Completion date	Progress
*SCC/042a	Because of the delays experienced with the electronic management authorisation of assessments, it has been agreed that Social Workers will now sign off their own assessments, with managerial oversight provided at the point of transfer or closure. The Performance Team will continue to flag up unauthorised assessments.	С
*SCC/042b	Because of the delays experienced with the electronic management authorisation of assessments, it has been agreed that Social Workers will now sign off their own assessments, with managerial oversight provided at the point of transfer or closure. The Performance Team will continue to flag up unauthorised assessments.	С
*SCC/028	Members considered the issues around this PI, including the length and complexity of the paperwork required and the very low All Wales average for this indicator, and recommended that the target should be reclassified to incremental at the next target setting event.	С
*SCC/039	A process of continuous scrutiny and overview remain central to our internal activities. As noted in previous action plans we remain limited in our response to Health activities and deadlines. We continue to have a dialogue with Health Representatives both in the North Wales area and other Health	С

Appendix 1.1		
	colleagues when children are placed out of county about time frames and standards.	
	Notifications of new placements are being sent by the Performance Team to the LAC Nurse to speed up the booking process.	С
	Development of a new local PI to capture appointments requested within timescales.	С
*SCC/030a	Multi-agency young carers strategy and action plan developed.	С
	Work to begin to making existing internal young carers assessment consistent with Barnardo's own assessment.	\checkmark
	Joint protocol to be strengthened using ADASS / ADCS report.	★ (see Section 3.3)
	Young carers Professionals Pack to include 'Think Family' focus.	(see Section 3.3)
	Continue to monitor the local performance indicator which measures how good we are at offering young carers assessments to children identified as having a caring role.	С
*SCC/030b	Actions as above.	
*SCC/025	The Team Manager of the Permanency Team (CYAST) has been notified of the remedial work that needs to be completed in order that the visit records are brought up to date. Additional capacity provided within the team will ensure that visits are recorded promptly in order to be counted within the PI.	✓
*SCC/016	The flagging system for notifying social workers of the due dates for forthcoming reviews has enabled them to prioritise their workload and meet the required timescales more effectively. It is envisaged that this system will eventually be replaced by a Team Managers operational report within Paris, which will enable them to monitor performance within their own teams on an ongoing basis. This is being developed as part of the Flintshire/Denbighshire Paris collaboration project.	✓
*SCC/001b	We have experienced a lack of consistency between managers in the interpretation of what constitutes a plan for permanency for a looked after child. The complication is around children who are in court proceedings for whom a permanency plan cannot be finalised until the judge has made a decision, which may not be within 4 months of the child coming into care. Discussions have taken place with other authorities around the definition of a plan for permanence and a Flintshire definition has been agreed.	С

*SCC/024	An All Wales PEP is currently being developed (through the revision of the Education of LAC guidance); the draft document is even more lengthy than our version. We are unsure whether we will be required to use the All Wales version once this is released – we are awaiting advice from Lifelong Learning.	✓
	Amend the Care Procedures Manual to the effect that when a child comes into care or changes school, a notification is sent from the social worker to the IRO and the Performance Team so that the need for a PEP can be logged and chased.	С
	LACE coordinator to contact staff in Permanency Team (CYAST) to ensure that they are aware of their responsibilities around meeting with school staff and completing the PEP within the timescales.	С
*SCC/033c	Last year care leavers were able to take advantage of the Flintshire Skill Build project to improve their potential to access either education or work based training placements. Flintshire are currently in talks with neighbouring authorities to explore whether this project can be extended.	~
*PSR009a	Actions are included in the Social Services for Adults Quarterly Performance Report.	
*PSR006	Actions are included in the Social Services for Adults Quarterly Performance Report.	

2.4 Key Actions from Service Plan Monitoring and ACRF

The following table shows which areas are on track and which have incurred slippage or have been subject to a revised timetable. Commentary to explain the slippage/revised timescales can be found in Section 3.3.

Improvement Area	On- track?	Commentary
Major and minor adaptations	\checkmark	
Transition Service	~	
Identifying and supporting young carers.	×	See Section 3.3
Supporting looked after children and care leavers	~	
Regional collaboration	~	
Regional integration	×	See Section 3.3
Improve safeguarding arrangements	\checkmark	

		-
Develop Integrated Family Support Service	✓	
Apply LEAN principles	✓	
Welsh Language compliance	✓	
Monitor and reduce staff absence	×	See Section 3.3
Service user and carer involvement	~	
Reduce dependency on the independent sector and improve commissioning process	✓	
Develop the Families First Initiative	~	
Prevent offending by children and young people	✓	

2.5 Internal & External Regulatory Reports

No internal or external audit/regulatory work has been completed during the quarter.

3. Exception Reporting

3.1 Improvement Plan

5.1.1 Develop robust commissioning arrangements for out of county placements.

Robust mechanisms for procuring and managing independent sector placements will ensure that looked after children are appropriately placed and best value is achieved. In order to achieve this, changes have been made to existing processes and guidance issued regarding the new Options Appraisal forms for all future submissions to the Out of County Placement Panel.

In addition, a visit has taken place and discussions are ongoing regarding the possible purchasing of bedspaces at the Bryn Awel unit in Denbighshire. It is envisaged the outcome of these discussions will be known by the end of Quarter 4.

3.2 Improvement Targets

It is pleasing to see despite the reduced capacity in some areas of Fieldwork Services, we have been able to maintain a Green RAG status in 9 of our 13 improvement targets. There are no Red indicators this Quarter, but 4 Ambers, shown below. One indicator was not reported in Q3 as there was no relevant activity.

Appendix 1.1



SCC/042b

The average time taken to complete initial assessments that took longer than 7 working days.



SCC/028

The percentage of Looked After Children who had a fully completed and updated Assessment and Progress Record at their third review.



SCC/025

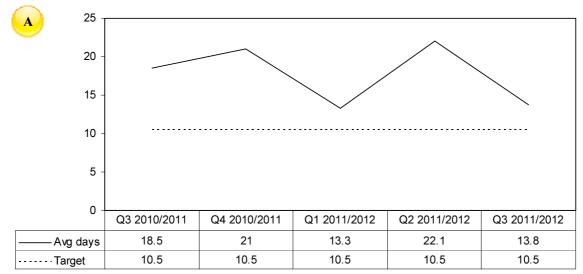
The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations.



SCC/039

The percentage of health assessments for Looked after Children due in the year that have been undertaken.

SCC/042b The average time taken to complete initial assessments that took longer than 7 working days.



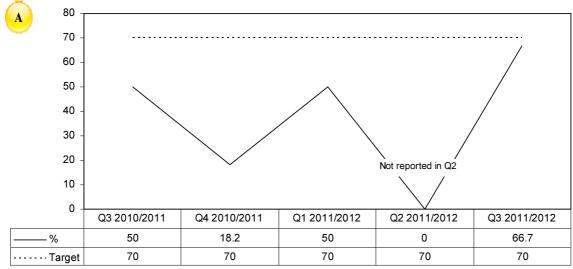
A downward direction of travel in this graph represents an improvement.

Because of the delays experienced with the electronic management authorisation of assessments, it has been agreed that Social Workers will now sign off their own assessments, with managerial oversight provided at the point of transfer or closure. This means that completed assessments can now be signed of in a timely manner. The Performance Team will continue to flag up unauthorised assessments.

However, in some cases where there is no urgent child protection need, and where the service user finds it difficult to engage with Social Services, assessments may take longer than the statutory 7 working days to complete.

In Quarter 3, five initial assessments were completed outside the statutory timescale of 7 working days. One was allocated late because of insufficient capacity in the Duty & Assessment Team to carry out the assessment. Additional temporary capacity has been provided in the team. The other four assessments were conducted at the service user's pace, the longest taking 19 days.

Appendix 1.1 SCC/028 – The percentage of Looked After Children who had a fully completed and updated Assessment and Progress Record at their third review.



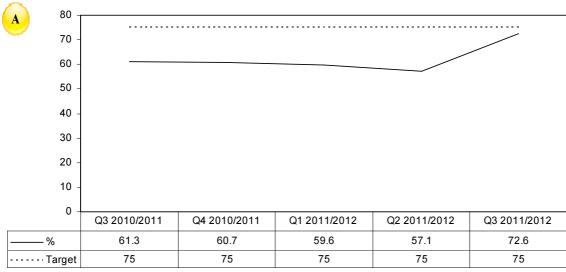
A upward direction of travel in this graph represents an improvement.

The Performance Team meet on a monthly basis with the Children and Young Adults Support Team to advise of assessments which are becoming due. However, the ICS Assessment and Progress Record is a lengthy and time-consuming document to complete, and where cases are in court proceedings, priority is given to adoption and court paperwork.

Members considered the issues around this PI, including the length and complexity of the paperwork required and the very low All Wales average for this indicator, and recommended that the target should be reclassified to incremental at the target setting event in November 2011.

In Quarter 3, three out of nine Assessment and Progress Records were completed outside the statutory timescales. In one case, work on the document was started in early January, and in the other two cases a recommendation was made by the Independent Reviewing Officer that the work should be completed by the time of the next review.

Appendix 1.1 SCC/039 – The percentage of health assessments for Looked after Children due in the year that have been undertaken.



A upward direction of travel in this graph represents an improvement.

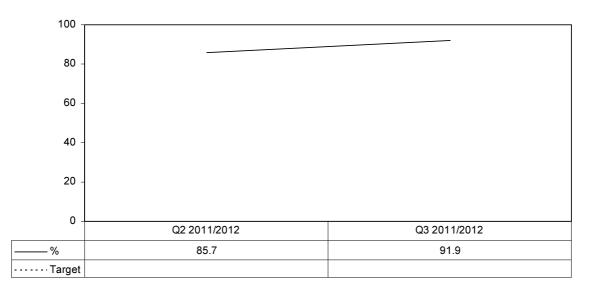
A process of continuous overview and scrutiny remain central to our internal activities. As noted in previous action plans we remain limited in our response to Health activities and deadlines. We continue to have a dialogue with Health Representatives both in the North Wales area and other Health colleagues when children are placed out of county about time frames and standards.

45 out of the 62 health assessments (72.6%) due in the quarter were undertaken within the statutory timescales. This was a good improvement on Quarter 2.

The actions to notify the LAC nurse of new placements, and to develop a new local performance indicator to capture appointments which were requested to Health within timescales, have both been completed. The performance against this local indicator is shown below:

NEW LOCAL PI HTH/001 – The percentage of Health Assessments appointments requested within timescales.

Appendix 1.1

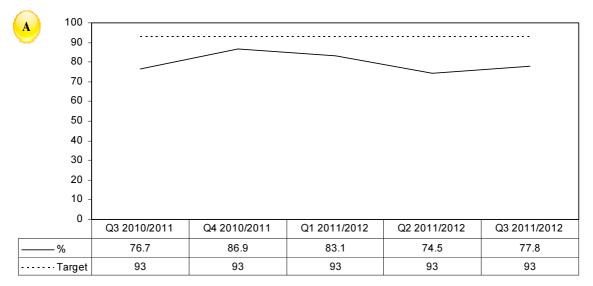


In Quarter 3, 57 out of the 62 health assessments (91.9%) that were due were requested by Social Services to Health within the statutory timescales.

All reasons for late health assessments are given below, together with the age bands of the children.

Reason Assessment not provided within timescale	0	1-4	5-9	10-15	16+
Appointment provided within timescale but family					
failed to attend.	1			1	3
Appointment requested late to Health by Social					
Worker.		4	1		
Requested within time but appointment not provided					
in timescales.	1	2		4	

SCC/025 – The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations.





All Statutory visits are now required to be recorded on Paris in order to be verified and counted within the PI, which means that the data is now fully auditable. No verbal assurances that visits have taken place within timescales have been accepted.

Capacity problems due to sickness in the Permanency Team (CYAST) have impacted on the recording of statutory visits to looked after children in Quarter 3. An analysis of the records of visits on Paris has been completed and the Team Manager has been notified of the remedial work that needs to be completed in order that the visit records are brought up to date. Additional capacity provided within the team will ensure that visits are recorded promptly in order to be counted within the PI.

SCY/001a - The percentage change in the average number of hours of suitable education, training or employment children and young people receive while within the youth justice system by children and young people of statutory school age.

This PI is also a national PI that the Youth Justice Board requires all Youth Justice Services to report upon. The cohort of young people counted are those of statutory school age who have had community based programmes or custodial sentences ended in the quarter. This can sometimes be very low numbers so any variances can greatly affect the final outturn figure. In Quarter 3, only 2 young people comprised the cohort; in the previous quarter, there were 4 young people in the cohort.

3.3 Head of Service Plan

Improve our methods for identifying and supporting young carers

Young carers strategy implemented and i.d. card to be launched on 02/04/12 as planned. However the rollout out of the Professionals Pack and revised assessment forms won't be until after April 2012. Although the PI's for the assessment and services for young carers are running at 100%, we have not significantly improved the identification of young carers and the Young Carers' Action Plan is in place to address this.

Work with Wrexham to integrate respective Children's Integrated Disability Services (C.I.D.S.), enabling a more efficient and effective use of resources to improve service delivery for disabled children and their families

The issue of collaboration with Wrexham is now on hold although both Flintshire and Wrexham are working together regionally with the advent of Families First

Monitor and reduce staff absence

We continue to monitor staff absence but unfortunately there has been an increase across the Directorate.

Quarterly Performance Report – Community Services -Development & Resources

Report Author
Report DateHEAD OF DEVELOPMENT AND RESOURCES
JANUARY 2012Report PeriodQuarter 3: 1st October 2011 to 31st December 2011

Introduction

The report is produced on a quarterly basis and provided to Executive members for review and assurance and will be available for Overview and Scrutiny Committees as part of their Forward Work Programmes.

The report consists of an overview of the key messages to highlight across all work streams Development & Resources, which is followed by highlights from each service area. Parts 2 and 3 of the report include an assessment of performance in the quarter from the following sources:

- Improvement Plan Monitoring
- Strategic Assessment of Risks and Challenges
- Performance Indicators and Outcome Measures
- Improvement Target Action Plan Monitoring
- Key Actions from Service Plan Monitoring
- Internal and external regulatory reports
- Customer satisfaction and feedback
- Awards and accreditations
- Resource Management (HR, ICT, Finance, Assets)

RAG Status

RED equates to a position of under-performance, downward trend, non-achievement of target, non-achievement of action milestones.	R
AMBER equates to a mid position where improvement may have been made (i.e. improved trend) but the target for the year is unlikely to be reached, or where action milestones have been deferred or narrowly missed.	
GREEN equates to a position of positive trend on performance, meeting target and achieving action milestones.	G

Appendix 1.2

1. Foreword

Report highlights for this quarter are the following items:

	The new Blue Badge scheme begins in April and the team are working with the Welsh Government to ensure this transition is as smooth as possible.
Business Services	Paris was upgraded to version 4.4 in December. This is in preparation for the introduction of the finance module. Work is currently being undertaken alongside Denbighshire County Council to ensure the finance module is compatible with the payments and billing systems.
Partnerships, Planning & Performance	The new supporting structure for the implementation of the Strategy for Older People is now in place, with a streamlined Flintshire Older People's Partnership Management Group; a 50+ Action Group and an Executive Group, all working towards improving outcomes for older people.
Workforce Development	Three of our social work trainees graduated from the Open University and Glyndŵr University with a BA (Hons) degree in Social Work.

2. Performance Summary

2.1 Improvement Plan Monitoring

The table below summarises the Progress and Outcome RAG status' for each of the secondary improvement priorities for the current quarter. A RAG status of 'R' or 'A' is discussed in more detail in section 3.

Progress RAG - Complete the RAG status using the following key: -

- **R** Limited Progress delay in scheduled activity; not on track
- **A** Satisfactory Progress some delay in scheduled activity, but broadly on track
- **G** Good Progress activities completed on schedule, on track

Outcome RAG – Complete the RAG status using the following key: -

- **R** Low lower level of confidence in the achievement of outcome(s)
- **A** Medium uncertain level of confidence in the achievement of the outcome(s)

G High - full confidence in the achievement of the outcome(s)

Council Priority	Target Date	Progress RAG	Outcome RAG	Commentary	
6. To protect and grow the local and regional economy, to be a prosperous county and to provide help and support for those vulnerable to poverty.					
6.10 Work on a North Wales approach to develop a shared methodology to determine Care Fees in the future	January 2012	A	A	See paragraph 3.1.1	

7. To promote independent, healthy and fulfilled living in the community with the highest quality personalised and supportive social and health care services

7.2 Expand the Council's extra care housing provision by April 2013	April 2013			Please see paragraph 3.1.2	
7.4 Develop new Supporting People services to strengthen homeless prevention	March 2012	G	G		
7.5 Review the Charging Policy for social services and housing related support (as part of the corporate fees and charging project)	April 2012	A	G	Please see paragraph 3.1.3	
7.7 To introduce locality working with Betsi Cadwaldr University Health Board in support of enhanced primary health care services	January 2012	A		Please see paragraph 3.1.4	

2.2 Strategic Assessment of Risks and Challenges (SARC)

The table below summarises the position of SARCs at the end of the reporting period.

Commentary is included in section 3 for those SARCS: -

- that are showing a Red RAG status
- where the RAG status has changed since the last reporting period
- where the Green Predictive Date has changed since the last reporting period
- where there has been considerable change or additions of secondary risks and activity

SARC	Previous RAG Status	Current RAG Status	Green Predictive
CL07 RELATIONSHIP WITH LOCAL HEALTH BOARD AND IMPACTS ON PUBLIC & PRIMARY HEALTH	A	A	April 2013

2.3.1 Performance Indicators and Outcome Measures

There are no statutory performance indicators in these services.

2.3.2 Improvement Target Action Plan Monitoring

There are no Improvement Targets in these services.

2.4 Key Actions from Service Plan Monitoring

The following table shows which areas have incurred slippage or have been subject to a revised timetable and references the page number where commentary can be found to further explain the slippage/revised timescales: -

Appendix 1.2

KEY - ✓ on track, ≭ behind schedule, **C** completed

Improvement Area	On-track?	Commentary
Key Improvement Priorities from the ACRF		
We will implement the Commissioning Framework Guidance and Good Practice across all Service areas. (1)	×	See 3.2.1
Introducing a system across the directorate to undertake Equality Impact Assessments. (2)	\checkmark	
We will continue opportunities for efficiency savings, both locally and through collaboration with corporate and regional colleagues. (4)	✓	
We will closely monitor staff absence and set targets for reduction. (5)	×	See 3.2.2
We will work in partnership with the BCU Health Board to ensure joined up service planning and delivery of health and social care services. (8)	✓	
	\checkmark	
We will build on Service User and Carer involvement across both Adult and Children's Services. (18)		
Areas for Improvement from Service Plan: -		
 1 - Supporting People 1a – Regional Collaboration 1b – SPRG Handover 1c – Outcome Based Commissioning 1d – Service User Involvement 1e – Young Peoples Accommodation Strategy 	✓	
2 - Business Services 2a – Business Systems 2b – Business Continuity Planning 2e – Asset Management	✓	
 3 - Workforce Development 3a – Qualification & Credit Framework 3b – Social Worker Training & Development 3c – Communication with Care Sector Providers 3d – Evaluation Strategy 3e – Coaching and Mentoring 	✓	
 4 - Performance & Planning 4a – Performance Management 4b – Strategy Implementation 4c – Service Planning 4d – IRO Service 	✓	
 5 - Finance 5a – Building a New Team 5b – Performance of Financial Management 5c – Budget Realignment 5d – Building Maintenance Trading Account 	✓	

5e – Prompt Payment of Suppliers		
 6 - People 6a – Customer Focused Services 6b – Organisational Change 6c – Resource Management & Collective Working 6d – Performance Management and Learning & Development 6e – People Management Practice & Working in Partnership 6f – Corporate Projects / Programmes 	✓	
 7 - Project Management 7a – Supporting Housing 7b – Care Fees 7c – Charging Policy 7d – TSSA 7e – Review Family Placement Service 	~	
8 - Equalities	~	

2.5 Internal & External Regulatory Reports

The following internal or external audit/regulatory work has been completed during the quarter and the outcome of the work can be summarised as follows. Negative outcomes should are discussed in more detail in section 3 and page numbers are referenced in the table below.

Undertaken By	Title & Date Report Received	Overall Report Status
		None received in the quarter

3. Exception Reporting

3.1 Improvement Plan Monitoring

3.1.1 - 6.10 Work on a North Wales approach to develop a shared methodology to determine Care Fees in the future.

The anticipated completion date of January 2012 has been reset to March 2012 following a request from Care Forum Wales for additional work to be completed regarding the costs of capital and staffing ratios.

3.1.2 - 7.2 Expand the Council's extra care housing provision by April 2013

It is expected that both the progress and outcome RAGs will be green by year end. There had been some delay due to contractor failure, but a new contractor is now on site and the Mold Extra Care Scheme should complete in early 2013.

3.1.3 - 7.5 Review the Charging Policy for social services and housing related support (as part of the corporate fees and charging project)

The Charging Policy has been reviewed and transferred into the Corporate Fees & Charges work which has now been presented to members. The target date is to be changed to October 2012 to fall in line with the work currently being undertaken on the corporate review of fees & charges.

3.1.4 – 7.7 To introduce locality working with Betsi Cadwaldr University Health Board in support of enhanced primary health care services

Locality Leadership Teams are now in place for all three localities and an agreement has been reached in principle to move towards co-located teams. However, a number of measures need to take place before this can be realised including to the agreement of a model for locality working with NHS colleagues, the completion of the restructuring of Social Services for Adults, the identification of suitable locations and agreement on the apportionment of costs and the necessary IT systems.

3.2.1 We will implement the Commissioning Framework Guidance and Good Practice across all Service areas.

As part of the TSSA project, a Commissioning Manager post has been created to lead on the implementation of the guidance. It is anticipated that the post will be filled by April 2012.

We have used the Framework Guidance to develop and implement a robust Carers Commissioning Strategy for 2012-2015.

Work has also commenced to develop a Commissioning Plan for Learning Disability Services with anticipated completion in April 2012. The target date for the completion of remaining commissioning plans is December 2012.

3.2.2 We will closely monitor staff absence and set targets for reduction.

Unfortunately, staff absence has increased in the division due a small number of staff with long-term health problems. These are being dealt with in line with the Council's policy.

Quarterly Performance Report Social Services for Adults (Community Services Directorate)

<u>REPORT AUTHOR:</u>	HEAD OF SOCIAL SERVICES FOR ADULTS
REPORT DATE:	FEBRUARY 2012
REPORT PERIOD:	QUARTER 3 OCTOBER - DECEMBER 2011

1. Foreword

We are pleased to report that we have worked very hard throughout the year to position ourselves favourably in order to make the necessary efficiency targets for 2012 - 13 We have achieved this by our committed workforce, working together to progress the journey of Transforming Social Services for Adults

Report highlights for this quarter are the following items:

Transforming Social Services for Adults (TSSA)	Transforming social service for adults is a major project that we are undertaking in partnership with others. To share our aim, our vision and our journey for service improvements a Member workshop was held in October, presentations were also made to the voluntary sector and focus and discussion groups have been held with staff and service users. This work culminated in a report to Executive in November 2011 seeking and gaining approval for a Phase 1 redesign of Adult Social Care, service and team management structure.
Phase 1	The implementation of Phase 1 is now well underway, we are steadily working through job descriptions, JEQs, job matching and the assimilation process. We expect to complete Phase 1 redesign on target by March 2012. Given the ongoing flexibility and engagement of our staff & managing a significant number of vacancies, Phase 1 of service redesign is expected to deliver without the need for compulsory redundancies.
Focus on reablement	This redesign of service structures has already begun to facilitate the shift towards promoting Reablement and locality working with health colleagues, with Reablement showing a steady month on month increase in referrals Reablement specifically describes an approach to care provision that aims to optimise independence and support people to manage their own care at home. During the past quarter we have seen an increase in service users completing a period of reablement. However, where people need long term ongoing support, this is provided.

Appendix 1.3

Performance	There has been good progress on all 6 improvement targets and whilst we have not met the 2011/12 target for completion time for a DFG, the time taken is improving. Overall performance is considered to be well on target, given that 5 out of the 6 improvements are green.
Budget Monitoring	Transforming SSA is a large programme of work that will deliver an efficient and sustainable service through a variety of projects including those mentioned above. Staff willingness to engage flexibly with the process and hold vacancies has placed the service in a healthy position of being able to predict a budget under spend in readiness for further budget efficiencies expected from April 2012. We have a number of measures in place for closer monitoring of resources
Complaints Handling	66 compliments and 24 new complaints were received in the quarter. It is pleasing to see that 96 % of complaints were handled within the 10 day deadline
Inspections	There have been no inspections in this quarter
Overall Context	There were 1464 referrals to Social Services for Adults for assessments in quarter 3. 25% of the referrals were for occupational therapy which equates to 373 referrals. The number of people waiting for an Occupational Therapy assessment at the end of December 2011 was 426, reflecting the rise in referrals in quarter 2. Average time spent on waiting lists for O.T. at the end of December was 3.3 months.

2. Performance Summary

Improvement Plan Monitoring

The following table summarises the progress made to date and the progress against the desired outcome of the Council Improvement Priorities on which Social Services for Adults Service lead.

<u>KEYS</u>

Progress RAG



Limited Progress - delay in scheduled activity; not on track

- **Satisfactory Progress** some delay in scheduled activity, but broadly on track
- **Good Progress** activities completed on schedule, on track

Outcome RAG



Low - lower level of confidence in the achievement of outcome(s)

Medium - uncertain level of confidence in the achievement of the outcome(s)

High - full confidence in the achievement of the outcome(s)

Council Priority	Target Date	Progress RAG	Outcome RAG	Commentary	
7. To promote independent, healthy and fulfilled living in the community with the highest quality personalised and supportive social and health care services					
7.1 Transform Social Services for Adults to promote independence and build community capacity	March 2013		G		

2.2 SARC

.The table below summarises the position of SARCs at the end of the reporting period.

Commentary is included in section 3 for those SARCS: -

- that are showing a Red RAG status
- where the RAG status has changed since the last reporting period
- where the Green Predictive Date has changed since the last reporting period
- where there has been considerable change or additions of secondary risks and activity

Strategic Assessment of Risks and Challenges (SARC)

SARC	Previous RAG Status	Current RAG Status	Green Predictive
CL05 (Demographic factors showing increased numbers of older people and an increased proportion of older people with dementia; increased pressures on the range of public and voluntary services which provide for them.)	A	A	TBC

CD 26 – DISABLED FACILITIES GRANTS – DFG's require improved process time to meet customer needs. See section 3 for detail about progress



2.3.1 Performance Indicators / Outcome Measures

Performance Indicators and Outcome Measures

The status of the indicators are summarised for this quarter below:



Graphs and commentary are included section 3 for those indicators shown with a RAG status of either Amber or Red. An asterisk (*) indicates that the indicator is an *improvement* target.

Community Support Services						
Indicator	Annual Target	Previous Quarter Outturn	Current Quarter Target	Current Quarter Outturn	RAG	Change
SCA007* The percentage of clients with a care plan at 30th September whose care plans should have been reviewed that were reviewed during the year	80%	79.7%	80%	82.3%	G	Improved
SCA/018a* The percentage of identified carers of adult service users who were offered an assessment or review of their needs in their own right during the year	87%	86.41%	87%	87.99%	G	Improved
SCA/018c* The percentage of identified carers of adult service users who were assessed or reassessed in their own right during the year who were provided with a service	52%	60.3%	52%	76.4%	G	Improved

Indicator	Annual Target	Previous Quarter Outturn	Current Quarter Target	Current Quarter Outturn	RAG	Change
PSR 006* The average number of calendar days taken to deliver low cost adaptation works in private dwellings where the Disabled Facilities Grant process is not used.	88 days	97 days	88 days	74 days	G	Improved
PSR/009b* The average number of calendar days taken to deliver a Disabled Facilities Grant for Adults	350 days	441 days	350 days	395 days	A	Improved
IA1.1L4* Number of adults receiving a personal budget for services via either a direct payment or Citizen Directed Support	170	166	170	177	G	Improved

2.3.2 Improvement Target Action Plan

Key - ✓ on track, ≭ behind schedule, C completed

Ref	Action & Planned Completion date	Progress
*SCA/007	Improved out turn evidences priority placed on undertaking reviews. However vacancy savings have been taken out of this area	~
* SCA018a	Promotion of offer of carers assessments within teams and improve recording on PARIS	~
*SCA/018c	All actions complete and out turn remains above both Wales Average and our own target	~
*IA1.1L4	All actions in place to promote the use of Direct Payments. The numbers are increasing and target achieved	~
	Average time for a minor adaptation to be completed has reduced by a further 23 days this quarter to 74 days, hence meeting our target through progressing the actions below	
* PSR/006	Work with Care & Repair to transfer work from private sector to voluntary sector.	✓
	Use additional resources to increase assessor capacity	
	Continue to progress performance through Disabled Facilities Grant	
	operational performance group.	
	Implement action plan arising from members work shop	

Ref	Action & Planned Completion date	Progress
* PSR/009b	Continue to progress improvements and performance, through Disabled Facilities Grant operations performance group. Implement OT DFG data spreadsheet to monitor, track and review DFG cases more robustly.	
See further details in section 3	Improve information sharing between housing and social care IT systems to provide accurate data recording. Implement action plan arising from members work shop. From April 2011 information on the length of time taken to complete the OT and housing components of the PI will be provided separately as contextual information. Under take a Lean review of the DFG process.	✓

2.4 Key Actions from Service Plan Monitoring

The following table shows the progress made against key areas of improvement/actions in the Social Care for Adults service plan and Key Actions from the ACRF. A × indicates those areas which have incurred slippage or have been subject to a revised timetable and references the page number where commentary can be found to further explain the slippage/revised timescales: -

Key - ✓	on track,	x	behind schedule,	С	completed
---------	-----------	---	------------------	---	-----------

Improvement Area	Progress	Commentary
Focus on Reablement	✓	
Transport	✓	
Housing Options – Mold Extra Care	✓	
Transition service by June 2012	✓	
Service Redesign	✓	
Small aids and adaptations	✓	
Social Enterprise – begin negotiations and scope opportunities by December 2012	~	
Citizen Directed Support /Direct Payments	✓	
LD Work Opportunities – have plans for review in place by June 2012	~	
Regional Collaboration and Integration	\checkmark	
Supporting Families with complex needs	~	In partnership with Children's Services
Ensure our safeguarding service remains fit for purpose	✓	Plans to strengthen this service are awaiting budget pressure approval

Key Actions from Annual Council Reporting Framework

Key Priorities	Progress	Commentary
Implement the new all Wales adult protection	1	
procedures	•	
We will closely monitor staff absence and set targets for reduction	✓	Robust monitoring processes are in place across service areas and this has been evidenced by an audit of the system. Higher sickness levels have been reported this quarter and managers are investigating this trend alongside the winter period for last year.
Promotion of reablement / recovery/	✓	
Development of Older People's Services that which includes more flexible and person centred services for people with dementia and the develop the second extra care scheme with a dementia unit.	✓	
Work in partnership with the BCU Health Board to ensure joined up service planning and delivery of health and social care services.	~	
Integrate with the BCU Health Board (via Section 33 agreements) for Community Mental Health Teams and Community Substance Misuse Teams.	×	As explained in detail last quarter, this action is no longer progressing
Contribute to the North Wales Collaboration across Social Services for Adults, in particular	~	
Minimise the time taken to deliver major and minor adaptations	\checkmark	
Apply Lean Principles to specific service areas and measure the benefits.	\checkmark	
Improve our methods for identifying and supporting young carers	✓	
Develop a Transition Team for young disabled people moving into Social Services for Adults	~	
Build on Service User and Carer involvement across both Adult and Children's Services	\checkmark	

2.5 Internal & External Regulatory Reports

Undertaken By	Title & Date Report Received	Overall Report Status		
	No inspections in this quarter			

3. Exception Reporting

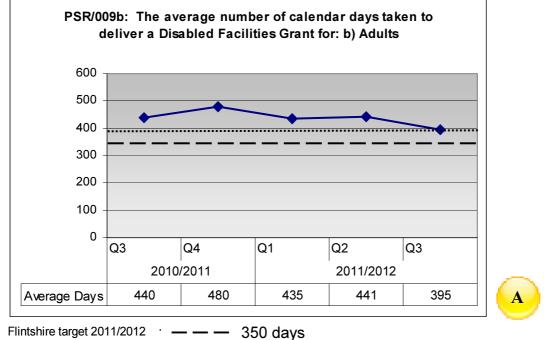
Improvement Plan Monitoring

Council Priority 7. To promote independent, healthy and fulfilled living in the community with the highest quality persoalised and supportive social and health care services

A	
Secondary Council Priority	Progress
7.1 Transform Social Services for Adults to promote independence and build community capacity	There are 13 work streams within this project. Whilst all work streams are agreed and action plans in progress or on target, this project will take 2 years to complete

National Performance Indicator (PSR/009b)

A downward direction of travel in this graph represents an improvement.



The average number of days taken to deliver a DFG for Adults was 395 days in quarter 3, with 70 .DFGs completed.

There has been, as we have identified in previous years, an increase in Occupational Therapy referrals in summer. This impacts further into the year as capacity to assess also changes. A budget pressure bid has been submitted to increase assessment capacity in imaginative ways. This will be reported later in the year.

	Average time taken for a Occupational Therapy assessment to be carried out including time spent on waiting lists for this set of completed DFG's	Average time taken in Housing for this set of completed DFG's	Average time taken for an Occupational Therapy assessment to be carried out including waiting time on the last day of the quarter
Q1	222 days	213 days	138 days
Q2	197 days	244 days	136 days
Q3	175 days	220 days	157 days

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Strategic Assessment of Risks & Challenges' RAG

Summary (Refresh)

	Risk Title	2011-2012						
		Q1	Q3	Q4	Q1	Q2	Q3	
Risk Reference	Community Leadership	June 10	Dec 10	Mar 11	June 11	Sept 11	Dec 11	Predictive Green/Amber
CL04	Affordable Housing	А	Α	А	А	Α	Α	SEP 2012
CL05	Social Care For Older People	Α	А	А	А	Α	Α	TBC
CL07	Relationship with Local Health Board & Public & Primary Health	Α	Α	Α	Α	Α	Α	APR 2013
CL08	Climate Change & Flood Risk Management		Α	Α	Α		Α	TBC
CL09	Economic Regeneration		Α	Α	Α	Α	Α	TBC
CL10	County Town Network Regeneration & Protection		G	G	G	G	G	FEB 2011
CL11	Integrated and Public Transport Infrastructure (External)	Α	G	G	Α	Α	Α	FEB 2011
CL12	Skills Needs of Employers		G	А	А	Α	G	OCT 2011
CL14	North Wales Regional Waste Treatment Partnership		Α	Α	Α		Α	2016/17
CL15	Clwyd Theatr Cymru (CTC)			A	Α	A	Α	TBC
Risk Reference	Council Delivery	June 10	Dec 10	Mar 11	June 11	Sept 11	Dec 11	Predictive Green/Amber
CD02	Streetscence	Α	Α	Α	А	Α	Α	JUN 2012
CD03	Transistion from UDP to LDP	А	Α	Α	А	Α	G	DEC 2011
CD04	Planning Protocol	Α	Α	А	G	G	G	SEP 2011
CD05	Highways Infrastructure	Α	Α	Α	Α	Α	Α	TBC
CD06	Transport Arrangments For Service Users	Α	А	А	А	Α	Α	DEC 2013
CD07	Depot Provision	Α	Α	Α	А	Α	Α	DEC 2013
CD08	Connah's Quay, Shotton & Deeside Housing Renewal Area	Α	Α	Α	А	Α	Α	MAR 2020
CD10a	Leisure - Revenue Funding					R	R	TBC
CD10b	Leisure - Capital Projects					Α	Α	SEP 2012
CD10c	Leisure - Play Strategy					Α	Α	DEC 2012
CD12a	Housing Strategy	Α	Α	Α	Α	Α	Α	APR 2012
CD12b	Housing Management	Α	Α	А	А	Α	Α	TBC
CD12c	Housing Repairs and Maintenance Services	Α	Α	Α	А	Α	Α	APR 2012
CD12d	Homelessness	Α	Α	Α	А	Α	Α	TBC
CD12e	Sheltered Housing	Α	Α	Α	Α	Α	Α	NOV 2013
CD14	Housing Ballot	Α	Α	Α	Α	Α	Α	TBC
CD19	Gypsies and Travellers	R	R	Α	Α	Α	Α	TBC
CD20	School Buildings/School modernisation	R	R	R	R		R	2018
CD22	School Improvement - Regional Project					Α	Α	TBC
CD23	Procurement of Independent Sector placements for looked after childrer	A	R	R	Α	Α	Α	TBC
CD26	Disabled Facilities Grants	Α	Α	А	Α	Α	Α	TBC
CD27a	Waste Management Targets/Food Waste Treatment Project	Α	Α	Α	Α	Α	Α	2016/17
CD27c	Waste Management Operations	Α	Α	Α	Α	Α	Α	2016/17
CD27d	Waste Management (AD Waste)	Α	G	G	G	G		SEP 2010
CD34 Risk	Severe Winter Weather	June	A Dec	A Mar	A June	A Sept	A Dec	TBC Predictive
Reference	Council Governance	10	10	11	11	11	11	Green/Amber
CG05a	Asset Management - Strategic	G	A	A	A	A	A	2015/16
CG05b	Asset Rationalisation Medium Term Financial Strategy	Δ	٨	٨	^	A	A	2015/16
CG06 CG07	Financial Management and Control	A	A	A	A	A	A	TBC
		A G	Δ	A	A	A	A	TBC
CG08 CG09	ICT Strategy Information Governance		A	A	A	A	G	DEC 2011 TBC
CG09 CG10	Human Resources and Management	A A	A A	A A	A A	A A	A A	NOV 2012
CG10 CG11	Single Status and Terms and Conditions of Employment	G	A	A	A			NOV 2012 NOV 2012
CG13	Customer Focus	G	G	A	G	A G	A G	JUN 2012
CG13 CG16	Workforce and Succession Planning	A				A	A	NOV 2012
CG18	Procurement	G	A A	A A	A A	A	A	TBC
CG18 CG19	Business Continuity (including Winter Disruption)	A	A	A	A	Δ.	A	APR 2012
CG19 CG22	Flintshire Futures	~	A	A	A	A A	A	TBC
0.022						A	A	

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