Public Document Pack

Gareth Owens LL.B Barrister/Bargyfreithiwr
Chief Officer (Governance)
Prif Swyddog (Llywodraethu)

To: Cllr Carol Ellis (Chair)

Councillors: Amanda Bragg, Peter Curtis,
Adele Davies-Cooke, Andy Dunbobbin,
Veronica Gay, Cindy Hinds, Hilary Isherwood,
Stella Jones, Brian Lloyd, Mike Lowe,
Hilary McGuill, Dave Mackie, Ian Smith and
David Wisinger

CS/NG

12 December 2014

Sharon Thomas 01352 702324
sharon.b.thomas@flintshire.gov.uk

Dear Sir / Madam

A meeting of the **SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE** will be held in the **DELYN COMMITTEE ROOM, COUNTY HALL, MOLD CH7 6NA** on **THURSDAY, 18TH DECEMBER, 2014** at **10.00 AM** to consider the following items.

Yours faithfully

Democracy & Governance Manager

A G E N D A

1   **APOLOGIES**

2   **DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)**

3   **MINUTES** (Pages 1 - 6)

   To confirm as a correct record the minutes of the meeting held on 13 November 2014 (copy enclosed).

County Hall, Mold. CH7 6NA
Tel. 01352 702400 DX 708591 Mold 4
www.flintshire.gov.uk
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 croesawu gohebiaeth yn y Gymraeg neu'r Saesneg

SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE
13 NOVEMBER 2014

Minutes of the meeting of the Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held in the Delyn Committee Room, County Hall, Mold on Thursday, 13 November 2014

PRESENT:Councillor Carol Ellis (Chair)
Councillors: Peter Curtis, Adele Davies-Cooke, Andy Dunbobbin, Veronica Gay, Hilary Isherwood, Brian Lloyd, Mike Lowe, David Mackie, Hilary McGuill, Ian Smith and David Wisinger

APOLOGIES: Councillors: Amanda Bragg and Stella Jones

CONTRIBUTORS: Cabinet Member for Social Services, Chief Officer (Social Services), Provider Services Manager,Fieldwork Service Manager, and Project Manager

IN ATTENDANCE: Environment and Social Care Overview & Scrutiny Facilitator and Committee Officer

32.   **DECLARATIONS OF INTEREST**

Councillors David Mackie and Hilary McGuill both declared a personal interest in relation to Agenda Items 4 and 5as members of the Community Health Council.

Councillor Andy Dunbobbin declared a personal interest in agenda item 5 as a Kinship Carer.

33.   **MINUTES**

The minutes of the meeting held on 9 October 2014 had been circulated with the agenda.

Matters arising
Councillor Hillary McGuill advised that she had not received the information from the Commissioning Manager regarding e-dynamics. The Environment and Social Care Overview & Scrutiny Facilitator advised that an email had been circulated providing an update on e-dynamics.

Councillor Hilary McGuill also referred to the outstanding information awaited from BCUHB regarding waiting times at the four orthodontist practices across North Wales. The Overview & Scrutiny Facilitator advised that the outstanding information had been provided but had given rise to an additional question of why the waiting list for the orthodontists in Connah's Quay was almost twice that in other areas.

It was agreed that if a response was not provided then the request would be escalated to the BCUHB management team.

RESOLVED:

That the minutes be approved as a correct record and signed by the Chair.

34. **SINGLE POINT OF ACCESS (SPOA)**

The Chief Officer (Social Services) introduced the report to provide an update on the Regional Single Point of Access Programme and the local developments to date in Flintshire. He provided background information and invited Carol Dove, Project Manager, to report on the Regional Single Point of Access programme.

The Project Manager advised that the Single Point of Access aimed to create an integrated and streamlined access route to community health and social care services for all individuals over 18 years of age. It also provided professionals with a means of sharing information and providing better coordinated health and social care services. This would mean a 'First Contact, Right Response' approach where the focus was on what mattered to the person. She advised that the partners were the 6 Local Authorities, Betsi Cadwaladr University Health Board (BCUHB) and the independent sector. The goal was to have one Single Point of Access per County with all six up and running by March 2016. The single Point of Access was being regionally developed to ensure sharing of learning and best use of resources and would be locally developed to ensure it was responsive to local need.

The Project Manager referred to the key considerations as detailed in the report and advised that Flintshire was currently reviewing the Denbighshire model, which went live in June 2014, with a view to adopting a similar model in Flintshire. She reported on the key principles that had been collectively agreed as the foundations for the new Flintshire Single Point of Access and advised that the first stage of the Implementation Plan was to co-locate health and social care staff to form the new team. The proposal was to have a co-located team by Spring 2015.

The Chair thanked the Chief Officer and Service Manager for their overview and invited Members to raise questions.

Councillor Hilary McGuill: referred to the dedicated contact number which had been set up for the Denbighshire model and asked if there would be a dedicated contact number for the Single Point of Access in Flintshire. She also asked if there would be a bespoke IT system for the Single Point of Access which would incorporate the PARIS system. In his response the Chief Officer (Social Services) referred to the work that was ongoing around a national IT system which worked around all Authorities and the NHS in Walesto integrate co-systems. The Project Manager commented that Denbighshire provided an interim solution which worked for the professionals involved.

Councillor Dave Mackie expressed concerns around the use of a temporary system and said that this posed a risk.

The Chief Officer (Social Services) acknowledged the points made and explained that the Service was committed to be part of the national solution around public sector values and that it had to make the most of the systems it currently had. Councillor Mackie responded that he was not comfortable with the approach.

Councillor Peter Curtis referred to the Third Sector Event held on 3 July 2014, and asked if organisations such as the Deaf Association and Vision Support had been invited to attend. The Project Manager confirmed that they would have been invited.

Councillor Hilary McGuill referred to the difficulties that may arise with linking into the District Nurses Information Systems and the need to factor in the challenges experienced by Denbighshire in this respect.

In response to a question from the Chair concerning the risk of funding, the Chief Officer (Social Services) explained that the Single Point of Access Project including Programme and Project staff was funded through the Welsh Government Regional Collaboration Fund (RCF). The current proposals were predicted on the basis that the WG Funding would continue until 2016. However, the WG had indicated that the third year of RCF funding may be at risk and that contingency plans had been developed to ensure SPOA could be implemented in Flintshire County Council.

It was agreed that the Chief Officer (Social Services) would provide an update report to a future meeting of the Committee.

RESOLVED:

(a)   That the local development and implementation of the Single Point of Access which is aligned to the Regional vision be supported; and

(b)   That the Chief Officer (Social Services) provides an update report to a future meeting of the Committee.

35.   SAFEGUARDING AND CARE PLANNING OF LOOKED AFTER CHILDREN AND CARE LEAVERS WHO EXHIBIT VULNERABLE AND RISKY BEHAVIOUR

Mr. Ray Dickson, Fieldwork Service Manager, introduced a report on the Inspection Report by Care and Social Services Inspectorate Wales (CSSIW) on the Inspection carried out between 24 March and 27 March 2014, into Safeguarding and Care Planning of Looked After Children and Care Leavers who exhibit vulnerable and risky behaviours and the resulting Action Plan.

The Fieldwork Service Manager, provided background information and outlined the aim of the national inspection. He advised that the Inspection had focussed on the work undertaken with looked after children over eleven years of age and care leavers who were identified as being vulnerable and/or involved in risky behaviours, against defined criteria.

The Fieldwork Service Manager, explained that there were five questions that the Inspectors posed which resulted in positives and areas for improvements. Significantly there had been positive feedback on Corporate Parenting and Elected Members. Safeguarding had been correctly identified as a priority for all staff and child protection processes were being used effectively. Concerning the issue of sexual exploitation the report recorded that agencies were working well together, especially in relation to missing young people and child sexual exploitation. The Report was complimentary in relation to the reviewing system for Looked After Children stating that Flintshire was compliant with guidance and reviews were timely and updated accordingly. Importantly it was reported that social workers were making strong efforts to ensure that young people understood their lives and were empowered to represent their views in the care planning process. The Fieldwork Service Manager, advised that a number of areas for improvement had been identified and an action plan to address the work required was appended to the report.

Referring to the CSSIW Report, Councillor Davie Mackie commented that he disliked the use of bullet points in the report and asked if they could be removed. He explained that they did not assist in identifying between the areas for improvement and the Action Plan.

Councillor Hilary McGuill referred to the role of Corporate Parents in relation to Out of County Placements and expressed the need for face to face communication with the young people concerned. The Fieldwork Service Manager, responded to the concerns raised and advised that due to the increase in Foster Care placements there were less out of county placements than in previous years. During discussion it was agreed that the Fieldwork Service Manager would liaise with the Resources Service Manager to arrange an out of county visit for members.

Referring to the Action Plan and the timescale for addressing the action concerning the perceived gaps in the Homeless Protocol relating to LAC and Care Leavers, Councillor McGuill commented that she would expect the action to be completed sooner than April 2015. The Fieldwork Service Manager, gave reassurance that work was well underway and it was anticipated that the action would be completed earlier than April 2015. It was agreed that an update on progress would be provided to a future meeting of the Committee.

Councillor Hilary Isherwood referred to CAMHS and expressed concerns around the action concerning the delay in accessing Mental Health Services. Councillor Andy Dunbobbin also expressed concern on the length of delay and commented on the damage that could be caused to a child

before he/she came into the Authorities care. The Fieldwork Service Manager, responded to the concerns raised and advised that an appointment had been made to specifically address the needs of Looked After Children. Councillor Hilary McGuill asked for clarification regarding funding for the post. The Fieldwork Service Manager confirmed that the post was ongoing.

It was agreed that a further performance report would be submitted to a future meeting of the Committee to show an improved overview.

RESOLVED:

(a)   That the Inspection Report by Care and Social Services Inspectorate Wales (CSSIW) on the Inspection carried out between 24 March 2014 and 27 March 2014 and resulting action plan be noted;

(b)   That the Fieldwork Service Manager would liaise with the Resources Service Manager to arrange an out of county visit for members; and

(b)   That a progress report be provided to the Committee in six months time

36.   ROTA VISITS

Councillor Hilary McGuill reported on her visit to North East Wales Community Equipment Services(NEWCES) based in Hawarden, Deeside. She said that the facilities provided by the Service were excellent, however, due to progression the building was in need of expansion. She raised concerns around the assessment process and the length of time taken between when an individual made a request for equipment and an assessment of needs was undertaken. She emphasised that this did not reflect on the service provided by NEWCES as there was no delay in despatching the equipment required by the service user.

Councillor Dave Mackie gave a positive report on his visit to Freshfields. He said the visit had been enjoyable and he had been given the opportunity to talk to and observe service users who had not been restricted in the variation of tasks they were able to perform.

RESOLVED:

That the information be noted.

37.   FORWARD WORK PROGRAMME

The Environment and Social Care Overview & Scrutiny Facilitator introduced the Forward Work Programme of the Committee.

The Facilitator advised that budget consultation workshops, which were not Committee specific, had been scheduled for Members on the 27 October and 3 November 2014.

Members reviewed the current programme and agreed that the following items be considered at the next meeting of the Committee on 18 December 2014:

- Q2 Performance reporting
- CSSIW Annual Report
- Regional Safeguarding (Adults) Proposals
- Rota Visits

Councillor Hilary McGuill asked if the Assessment Team could be invited to attend the meeting of the Committee scheduled to be held on 29 January 2015

RESOLVED:

That the Forward Work Programme be agreed.

38.   **MEMBERS OF THE PUBLIC AND PRESS IN ATTENDANCE**

There were no members of the press or public in attendance.

(The meeting started at 2.00pm and ended at 3.10pm)

…………………………
Chair

FLINTSHIRE COUNTY COUNCIL

REPORT TO: **SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**

DATE: **THURSDAY, 18 DECEMBER 2014**

REPORT BY: **CHIEF OFFICER (SOCIAL SERVICES)**

SUBJECT: **CSSIW ANNUAL REPORT**

1.00 **PURPOSE OF REPORT**

1.01 The Care and Social Services Inspectorate for Wales (CSSIW) have produced their annual report for Flintshire Social Services. The report relates to performance for 2013/2014.

1.02 This report provides an overview of CSSIW's evaluation of social care in Flintshire.

2.00 **BACKGROUND**

2.01 CSSIW produce an annual report for every local authority in Wales identifying areas of progress and areas for future improvement

2.02 The CSSIW report is based on a performance evaluation which draws on the annual report of the Chief Officer for Social Services and a range of underpinning evidence that was provided to CSSIW to support the Chief Officer's assessment.

The performance evaluation also draws on evidence available from CSSIW inspections, reviews and investigations, as well as the views of other audit and inspection bodies.

2.03 Flintshire's annual report for 2013/2014 is presented in Appendix A.

3.00 **CONSIDERATIONS**

3.01 In summary the CSSIW report identifies:

- an accelerated drive to greater efficiency, improving strategic partnership working, more integrated services and a growing commitment to regional commissioning

- evidence of progress in in a number of key areas in adult services

- less consistent performance in children's services in key areas such as health care and educational attainment

- our service transformation programme is responding to the requirements of the Social Services and Wellbeing (Wales) Act 2014

- integration plans for health and social care services for older people with complex needs meet the key requirements of a shared governance framework with emphasis upon prevention and early intervention

3.02   In their report CSSIW provide their assessment on progress in areas that were identified for improvement last year. The following table provides a breakdown of the areas for improvement, CSSIW's assessment of progress and our assessment of the current position (October 2014):

Area for improvement identified last year	Progress in 2013/14	Current position
The ability to influence locality focused strategic planning with Betsi Cadwaladr University Health Board (BCUHB)	Some progress in adult services, but more needs to be done to ensure that children and young people receive appropriate health care	Strategic Partnerships Board meets quarterly with members from the executive of both FCC and BCUHB. The Strategic Locality Group is Chaired by BCU with standing membership of senior staff from the Organisation
All adult service users having a timely review	Almost all have their care plans reviewed on time – the best performance in Wales.	Good performance continues
Adult carer data capture	This requires further improvement as numbers of known carers have fallen by almost 50%.	Q2 data for carers was as follows: Adult carers: 1274 identified in the first half of the year (776 last year but this did not include data from NEWCIS). Young carers: 18 identified in the first half of the year (12 for the whole of last year) and 100% were assessed.

Timely reviews for children in need	This has weakened further with little more than 50% of children in need having a timely review.	Performance at the end of quarter 2 for 2013/14 is now in line with the Welsh average (78%). This is an improvement on 2013/14 where performance was 53%.
Stability of placements for looked after children	Placements are steadier and performance is amongst the best in Wales	Good performance continues
Securing consistently robust outcomes in adult safeguarding	There is some evidence that safeguarding developments are leading to greater consistency in risk mitigation	Good performance continues
Stronger care management role in adult safeguarding	Awareness of safeguarding is increasing and there is greater care management representation.	Good performance continues
Health assessments for looked after children	More work needs to be done with health colleagues to ensure that these are done	This is a partnership indicator with Health. 3 of the local authorities with performance in the bottom quartile fall within the BCUHB area. We have raised this issue with BCU and are working to secure improvement
Dental checks for looked after children	More work needs to be done with health colleagues to ensure that these are done	We have raised this issue with BCU and are working to secure improvement
Educational attainment for looked after children at age 16	There has been some improvement, but this needs to be sustained in order to match the best in Wales.	There has been some improvement in attainment results but this needs to be sustained in order to match the best in Wales. Performance to be reported March 2014/15

Absence management outcomes	There has been little progress in recognise that the Council is able to evidence a range of positive outcomes which have been delivered through its strategic transformation of services	We believe that we made a significant improvement in absence levels during the last financial year, reducing absence by 3.56 days lost per FTE at the end of March 2014. However, we recognise that there is more to do and

3.03 The report identifies many strengths and areas where sound progress has been delivered. Specific areas of progress in Adult Services include:

- Needs-led commissioning in adult services
- Timely reviews of care plans for adults.
- Increasing range of initiatives that promote independence and support for older people and carers.
- Reablement outcomes.
- Self-assessment initiative for small items of equipment.
- Dedicated social work role for safeguarding investigation in adult services.

3.04 The report recognises that large increases in the number of referrals to children's services in 2013/14 and the increased number of children on the child protection register. Within this context of increasing demand it is positive that CSSIW acknowledge evidence of good work and specific areas of progress in Children Services include:

- Collaborative IFSS arrangement is first to be operational in North Wales
- Children seen alone by a social worker
- Stability of placements for looked after children
- Pathway plans for looked after children

3.05 The identification of this progress reflects the strategic and operational investment that has taken place in developing a service model that aims to reduce dependency and support more people to live independent lives. Increasingly this model supports a family focus to our work and the importance that families and communities play in supporting vulnerable people to lead independent and fulfilled lives.

3.06 The CSSIW evaluation provides a balanced assessment and identifies areas for improvement as well as strengths and good practice.

3.07 Positively the areas for improvement that are identified within the report are areas we are aware of and have arrangements in place to address. Progress is reported and monitored through Chief Social

Services Officer's performance report. The first 6 months of 2014/15 saw progress in:

- The timeliness of Personal Education Plans (rising from 56% on time in 13/14 to 75% on time in 14/15)
- Timeliness of statutory visits to looked after children (rising from 76% completed on time in 13/14 to 89% in 14/15)
- Timeliness of reviews for children in need (rising from 53% in 13/14 to 78% in 14/15)

3.08   We are working with BCUHB at a strategic, and operational level, to ensure that there are improvements in ensuring that looked after children have timely health assessments. This remains an area of risk for us as the looked after nurse post within BCUHB is currently vacant and the organisation is in the process of recruiting to this key post. Interim arrangements have been put in place with BCUHB to ensure service continuity during this time.

3.09   Appendix B provides an overview of the areas identified for improvement in 2014/2015 and, our progress (October 2014) and the action we intend to take by the end of 2014/15.

3.10   As part of their evaluation CSSIW have identified that they will follow improvement progress in the following areas:

- Strategic planning activity with BCUHB
- Assessment and care management arrangements for looked after children
- Assessment and care management arrangements for children in need
- Carer support in both adult and children's services
- The impact of the new senior management structure
- Absence management and its impact

3.11   Progress will be monitored through scheduled engagement meetings during the year.

3.12   CSSIW will also be contributing at a review with WAO examining whether councils are effectively supporting older people to live independently, including through joined up working across health and social care

4.00   RECOMMENDATIONS

4.01   Members are asked to note CSSIW's evaluation of performance and to scrutinise the authority's response to areas that have been identified for improvement.

5.00   FINANCIAL IMPLICATIONS

5.01   Not applicable. Management actions and controls to respond to areas for improvement and risks are in place and no additional financial resources are required.

6.00   ANTI POVERTY IMPACT

6.01   None arising from this report.

7.00   ENVIRONMENTAL IMPACT

7.01   None arising from this report.

8.00   EQUALITIES IMPACT

8.01   None arising from this report.

9.00   PERSONNEL IMPLICATIONS

9.01   None arising from this report.

10.00   CONSULTATION REQUIRED

10.01   None arising from this report.

11.00   CONSULTATION UNDERTAKEN

11.01   None arising from this report.

12.00   APPENDICES

12.01   Appendix A – CSSIW Annual Review and Evaluation of Performance 2013/2014

Appendix B – Progress Report on areas identified for improvement

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985 BACKGROUND DOCUMENTS

Contact Officer: Neil Ayling
Telephone: 01824 702500
Email: neil.j.ayling@flintshire.gov.uk

Performance Evaluation Report 2013–14

Flintshire County Council Social Services

Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

October 2014

This report sets out the key areas of progress and areas for improvement in Flintshire County Council Social Services for the year 2013–14

Annual Review and Evaluation of Performance 2013 - 2014

Local Authority: Flintshire County Council

This report sets out the key areas of progress and areas for improvement in Flintshire County Council Social Services for the year 2013-14

Summary

The council is increasingly realistic about the challenges posed by the need to deliver improving services within the context of reducing financial resources. This has accelerated the drive to greater efficiency, improving strategic partnership working, more integrated services and a growing commitment to regional commissioning.

The council has responded within a regional context in outlining its plans for the integration of health and social care services for older people with complex needs. It recognises there is no single coherent system of integration operating across North Wales, but that all current systems meet the key requirements of a shared governance framework with emphasis upon prevention and early intervention.

There is evidence of progress in a number of key areas in adult services with more people able to restore and maintain their independence, with relatively few needing residential care.

Performance is less consistent in children's services and whilst there is evidence of good work, some planning and reviewing arrangements require strengthening in order to secure more robust quality assurance and the delivery of better outcomes in key areas such as health care and educational attainment. There have been large increases in the number of referrals to children's services and those on the child protection register, with a significant fall in the numbers of children in need.

The council is responding to the requirements of the Social Services and Wellbeing (Wales) Act 2014 through its service transformation programme, and although the recent corporate senior management restructure has the potential to affect momentum, it is confident that it will remain on track to deliver key objectives.

The More Than Just Words action plan has the potential to provide a stronger framework in the delivery of equal status for English and Welsh languages.

Response to last year's areas of improvement

Area for improvement identified last year	Progress in 2013-14
The ability to influence locality focused strategic planning with Betsi Cadwaladr University Health Board (BCUHB)	Some progress in adult services, but more needs to be done to ensure that children and young people receive appropriate health care.
All adult service users having a timely review	Almost all have their care plans reviewed on time – the best performance in Wales.
Adult carer data capture	This requires further improvement as numbers of known carers have fallen by almost 50%.
Timely reviews for children in need	This has weakened further with little more than 50% of children in need having a timely review.
Stability of placements for looked after children	Placements are steadier and performance is amongst the best in Wales.
Securing consistently robust outcomes in adult safeguarding.	There is some evidence that safeguarding developments are leading to greater consistency in risk mitigation.
Stronger care management role in adult safeguarding	Awareness of safeguarding is increasing and there is greater care management representation.
Health assessments for looked after children	More work needs to be done with health colleagues to ensure that these are done.
Dental checks for looked after children	More work needs to be done with health colleagues to ensure that these are done.
Educational attainment for looked after children at age 16	There has been some improvement, but this needs to be sustained in order to match the best in Wales.
Absence management outcomes	There has been little progress in

2

remain an outstanding area for improvement from the previous year	addressing this and its impact upon capacity to deliver services.

Visits and inspections undertaken during the year

CSSIW conducted two thematic inspections during the year. The first was undertaken in partnership with Healthcare Inspectorate Wales (HIW) and Auditor General for Wales (AGW) and focused upon the commissioning of care and support for people with dementia and their carers. The second reviewed safeguarding and care planning for vulnerable looked after children and care leavers who exhibit vulnerable or risky behaviour.

The CSSIW inspection of Flintshire Fostering Services was largely positive and found that there was effective support provided by a stable and consistent team, together with a well-organised fostering panel.

CSSIW has successfully undertaken its scheduled inspection programme of regulated services operating in the Flintshire area.

Quarterly engagement meetings have taken place with senior council officers. These have been used to review social services performance and discuss progress with the areas for improvement identified in last year's report.

Areas for follow up by CSSIW next year

Priority areas for improvement have been identified in this report and progress in relation to these will be monitored through scheduled engagement meetings during the year. CSSIW will follow up:

- Strategic planning activity with BCUHB
- Assessment and care management arrangements for looked after children
- Assessment and care management arrangements for children in need
- Carer support in both adult and children's services
- The impact of the new senior management structure
- Absence management and its impact
- CSSIW will be contributing at a review with WAO examining whether councils are effectively supporting older people to live independently, including through joined up working across health and social care

Performance

Shaping services

Adults

The council is continuing to reshape and reinvest through a smarter commissioning approach that is designed to reduce dependency and promote independence. The recent CSSIW national review of commissioning in adult services found evidence of a maturing approach that balanced current and future demand against projected financial and market data. It determined that commissioning made increasingly effective use of market intelligence to inform planning and decision-making, leaving the council better positioned to secure longer-term goals. As a consequence few people need residential care as an outcome of greater emphasis upon supporting those in their own homes.

However, partnership arrangements with BCUHB for people with dementia are not as developed or effective as they should be. The council is committed to building upon existing initiatives and is hopeful that the period of senior management transition at BCUHB will be swift and that new opportunities will be presented to explore more integrated strategic planning approaches.

Partnership working with other councils across North Wales increasingly shapes planning and the council is an active participant within the North Wales Commissioning Hub (NWCH). This has resulted in improved cost rationalisation, better use of regional capacity and more consistent quality monitoring.

Resources are now more focused upon supporting strategic priorities and there is better alignment of commissioning with higher-quality outcomes for service users. For example, home care visits last a minimum of 30 minutes and the council has recently committed to no longer commissioning care home rooms with more than one bed, unless by service user choice. An increasing number of contract monitoring issues and CSSIW inspection outcomes have led to an identified need for further high-quality nursing home care in the local area. Furthermore, the council only has one nursing home for people with dementia within its boundary and 69 people who need this type of provision are placed out of county.

Children

The council is utilising grant funding e.g. Flying Start and investing more in an early intervention approach that works in partnership with key stakeholders to improve outcomes for children, young people and families. This requires a shift in focus to the causes rather than the symptoms of problems - with investment in prevention designed to reduce the demand for longer-term specialist services. As a consequence, the council is building the early intervention model within its

framework of core services. The Families First Programme is now providing a more consistent approach to fulfilling its aim of reducing poverty in families. The development of the use of the Challenging Years Programme that offers support for parents of teenagers is an example of how the Families First Programme is providing early intervention in the stage of a problem.

The establishment of the Integrated Family Support Service (IFSS) signals a greater drive to closer working partnership in delivering services. In collaboration with Wrexham County Borough Council and BCUHB, it encompasses a multi-agency approach to work with families where parents have substance misuse needs that affect the welfare of their children.

All out-of-area residential placements for looked after children are now contracted through the NWCH in order to secure greater consistency in quality and value for money.

Areas of progress

- Needs-led commissioning in adult services.
- Collaborative IFSS arrangement is first to be operational in North Wales.

Areas for improvement

- Strategic planning with BCUHB.
- Shaping and commissioning higher-quality nursing home care in the local area.

Getting help

Adults

There is a good range of information available online in formats that are responsive when viewed on a range of media devices of varying screen sizes. Accessibility is good, but a recent council survey of its website received mixed results and this has prompted a review of online navigation and signposting of services.

The council is the host organisation for a regional programme that aims to develop improved access to health and social care through the creation of a Single Point of Access (SPOA) across North Wales. The goal is to deliver a more streamlined service that will provide equal access to advice, assessment, community health and social cares services. It is anticipated that this will commence in 2016.

People contacting the council receive a timely response, and although there have been some delays in supporting people to leave hospital when ready to do so, performance remains better than the Wales average.

5

Almost all service users have timely care plan reviews - the best performance in Wales. This is important as it enables the council to monitor and review care needs on a regular basis and therefore more effectively respond to changing requirements.

The North East Wales Carers Information Service (NEWCIS) has been commissioned to assist in identifying and supporting adult carers. Last year, the council acknowledged that more needed to be done to improve data capture, as reported information suggested a fall in known carers. This has yet to reach fruition and there has been a further reduction in numbers due to continuing data issues – down by almost 50%. The council needs to address this in order to assure itself that its work with carers can be quantified and better inform commissioning processes.

Children

There is a good range of information available that is accessible and comprehensive. The council recognises that children and young people are increasingly using this online through mobile devices that require responsive websites to deliver information in formats that adapt to the size of the viewing screen. A smartphone app is also available – the first in North Wales.

Demand has significantly increased during the past year with numbers of reported requests for assessment of need growing by over 70% during the year. Repeat referrals have reduced to 13% and the initial response is timely, with over 99% of referrals having a decision made within one working day.

More initial assessments were undertaken, representing an increase of almost 18% against the previous year, although the overall proportion completed within timescales marginally reduced. More children were seen alone by social workers and this provides greater opportunities for a child or young person to express views and wishes. The number of core assessments undertaken increased by40%, although the proportion completed within 35 working days has fallen by 9%. Onsite inspection work found that some assessments were not routinely updated and that a number of associated risk assessments were not complete. The council has indicated that increased numbers of referrals have affected its ability to respond within timescales.

The council has reported that there have been delays in obtaining specialist mental health services and has therefore taken steps to address this through direct funding of a Children and Adolescent Mental Health Services (CAMHS) post – this will need to be closely monitored in order to assess its impact.

Fewer reviews of the needs of looked after children took place within required timescales, despite a small reduction in overall numbers of reviews due. This was

mirrored for children in need where there was an even greater fall in the proportion reviewed on time, with little more than 50% achieving this standard – the lowest in Wales. This was an area for improvement last year that has not received the sustained attention it requires. The council has further indicated that referral increases have affected its ability to conduct reviews on time and it will therefore need to closely monitor the impact this is having generally upon capacity and how best to address this.

Reaching young carers has been a priority and numbers have recently been increasing. Assessments are now commissioned through Barnado's Flintshire Young Carers project. These arrangements require strengthening in order to ensure more stretching service level agreement targets – as its stands, recent data suggests a fall in those known, assessed and provided with a service by social services.

Areas of progress

- Timely reviews of care plans for adults.
- Children seen alone by a social worker.

Areas for improvement

- Timely reviews for children in need – this has deteriorated despite being an area for improvement last year.
- Addressing the fall in numbers of known young, and adult, carers.

The services provided

Adults

There is a continued emphasis upon strengthening prevention and intensive early intervention opportunities for people in order to further maximise independence, promote wellbeing and enable self-determination – evidenced through initiatives such as Well Check and Living Well. Greater investment in partnership working is increasingly leading to the development of suites of services that are supporting more people in the community and fewer in residential care.

The council is seeking to increase its extra care provision through the development of two additional sites, whilst also establishing a dementia café at the Llys Jasmine setting.

The launch of the Bridging the Gap scheme for carers, in partnership with NEWCIS, provides increased opportunities to access flexible breaks and replacement care, frequently at short notice.

Contract monitoring services continue to be very effective in working proactively to identify shortfalls in care quality and seek immediate corrective action. This is increasingly influencing commissioning reviews to assist in driving up quality of care in partnership with other commissioning organisations. There has been a significant increase in action to address poor performance in care services commissioned by the council.

The council is better engaged in seeking feedback about the quality of commissioned services, having developed a set of involvement standards that are increasingly meaningful and outcome focused. This is supported by the use of questionnaires and analysis of work undertaken by independent organisations, such as Care Checkers, which provide important service user information about perceptions of care and support. This has been used by the council to underpin its development of the recently implemented Older People Commissioning Strategy.

The council recorded an increase in complaints, up from 51 to 62, of which four progressed to Stage Two of the process that facilitates an independent investigation. Over 90% of Stage One complaints were managed within the required timescale of ten working days. This represents a further improvement on last year, with those affected largely being as a result of scheduling issues.

There is evidence that complaint outcomes are prompting evaluation and review of policy and practice, and therefore driving improvement. This is indicated by recent changes to transport eligibility, hospital discharge arrangements and published information about how charges are calculated.

The council received 169 compliments, up from 140 the previous year. Almost half of these related to reablement services for older people and reflects very positively on the work of staff in this area.

Work is continuing to better respond to the needs of Welsh speakers and their families or carers, with the More Than Just Words action plan providing a stronger framework for detailing the practical steps taken to ensure English and Welsh languages have equal status. Amongst a number of initiatives, this has so far resulted in the inclusion of Welsh language requirements into commissioning and planning systems.

Children

Although there has been an increase in the number of children and young people who are looked after, those experiencing multiple placements have reduced and performance is now amongst the best in Wales.

Numbers of children in need have fallen by over a third within a year and the council will need to review the reasons for this and its potential impact.

There was a significant increase in the number of complaints, up from 57 to 87, of which seven proceeded to Stage Two of the process with three moving to Stage Three.

Fewer Stage One complaints were processed within required timescales with 25% not meeting the ten working day standard.

The council has reflected upon the lessons learned from recent complaints and, as a consequence, has improved processes relating to voluntary accommodation, direct payments and safeguarding. It is also developing an appeals panel process for residential placement requests that are turned down.

There were 74 compliments, up from 67, primarily from families with some relating to work during court proceedings.

Areas of progress

- Increasing range of initiatives that promote independence and support for older people and carers.
- Stability of placements for looked after children.

Areas for improvement

- Timescales in processing complaints, particularly in children's services.

Effect on people's lives

Adults

More people are using services that focus upon prevention, rehabilitation and reablement as a consequence of increasingly effective integrated working that has supported almost 1,400 people over the previous year – an increase of 46%. The council states that 55% of people using reablement services achieved full independence, no longer requiring any further services.

The timely provision of aids and adaptations is an important factor in restoring and maintaining independence. In order to further improve its response, the council has initiated a self-assessment project that is designed to speed up the process of obtaining small pieces of equipment, as grab rails and stair rails. Provisional evaluation and positive customer feedback indicates that this approach has much potential, with almost 100 referrals received within the first six months of operation, with 72% of people provided with equipment without the need for a home visit.

The council continues to review and strengthen its safeguarding arrangements in order to deliver a more responsive and consistent service. Supporting investigations are becoming more timely and thorough since the appointment of a social worker to focus specifically on safeguarding enquiries.

The council has been more effective in raising awareness of safeguarding matters and referral numbers increasing from 96 to 184 over the past year demonstrates this.

Contracts monitoring staff continue to play a pivotal and proactive role in early identification of potential safeguarding matters and work closely with commissioning staff in driving up the quality of care.

There has been an increase in recent work to support the Deprivation of Liberty Safeguards (DoLS) that provides a legal framework to protect people living in care homes and hospitals who are vulnerable because of mental disorder and lack of mental capacity. Recent case law has considerably widened the scope for potential application of the safeguards and this is already having a marked impact upon demand and the need for the council to appropriately respond. Provisional analysis suggests that this could have significant resource implications for the council and it will need to work closely with partners on a regional basis to meet increasing demand.

Children

Numbers on the child protection register have grown sharply; up from 58 to 133 when compared at 31 March 2014 to the same point the previous year. While all have an allocated social worker, the increase in numbers will undoubtedly have had an impact upon capacity to provide the same level of support as previously.

Fewer initial child protection conferences are conducted within required timescales - down from 97% to 89% - and the council needs to closely monitor its performance in order to minimise any potential drift in ensuring a timely response at this critical stage.

Statutory visits to looked after children form an important part of the process of safeguarding and promoting welfare – they provide vital opportunities for a child or young person to voice concerns or raise issues. Although all were undertaken, fewer took place within timescales, with performance being amongst the lowest in Wales, affecting over 300 children and young people. The council needs to speedily understand and respond to this sharp decline in performance.

The importance of ensuring looked after children have equal access to health care services was identified as an area for improvement last year and, although some progress has been made, much more needs to be done. Health assessments

remain fundamental to this, but the proportion undertaken remains amongst the lowest in Wales at 57%. Although a shared responsibility with BCUHB, this requires effective partnership working to drive rapid improvement and must be prioritised by the council.

High quality and up-to-date Personal Education Plans play a key role in supporting positive educational outcomes for looked after children. They serve as the overarching means of ensuring needs are met, aspirations documented and progress tracked. On that basis, more needs to done to address the decline in those being undertaken, when required, within the initial period of 20 school days – little more than half meet this standard, amongst the lowest performers in Wales.

Pathway plans are central to providing young people with opportunities to express their wishes and aspirations for the future – and how they can be supported in meeting them. The council does well in continuing to achieve a standard whereby all looked after children have pathway plans as required – this places it amongst a small number in Wales who achieve this level.

Educational attainment for looked after children aged 16 continues on an upward trend, but more needs to be done to improve life chances in this important area if the council is to rank amongst the best in Wales.

Outcomes for young adults aged 19 who were formerly looked after are mixed, with only seven of the twelve, known to be engaged in education, training or employment.

Areas of progress

- Reablement outcomes.
- Self-assessment initiative for small items of equipment.
- Dedicated social work role for safeguarding investigation in adult services.
- Pathway plans for looked after children.

Areas for improvement

- Initial child protection conference timescales.
- Statutory visits for looked after children.
- Health assessment for looked after children.
- Timely Personal Educational Plans for looked after children.
- Outcomes for young adults who were formerly looked after.

Capacity

Delivering Social Services:

The council champions a 'one sector, one workforce' approach in order to secure the best outcomes for people in living independently. There is a clear sense that planning for future workforce development requires the input of all stakeholders and strong partnership arrangements. This has resulted in increasing numbers of independent and voluntary sector staff receiving training alongside the council workforce.

Training options have been expanded in areas that support the council's vision to promote more integrated working that delivers better quality services – this includes wellness recovery action planning, reablement, dementia, Direct Payments, looked after children and safeguarding.

Staff turnover remains low, at 6% in adult services and 8% in children's services. This is balanced against sickness absence rates that are relatively high, with 16 days lost per full time worker in adult services and 13 in children' services. This compares with a UK all sectors average in 2013 of just over four days lost per full time worker. The council has made some progress in addressing long-term absences, but this remains an area for attention.

Performance monitoring arrangements are generally good, but not always used consistently to support service development and improvement. For example, there is scope to strengthen data collation and analysis of commissioning activity, together with better systems to test the impact of investment, from both quality and value for money perspectives. In some areas it is difficult for managers to judge the effectiveness of new commissioning initiatives.

The most recently published comparative revenue outturn data indicates that council expenditure on social services is amongst the lowest in Wales. There is a reported provisional £1.4m underspend for adult services and a £1.1m overspend for children's services for 2013-14.

Areas of progress

- One sector, one workforce approach to training.
- Low staff turnover rate.

Areas for improvement

- Data collation associated with commissioning to test impact and value for money.
- Sickness absence levels.

Providing direction

The council has undoubtedly benefited in recent years from strong leadership and a clear sense of direction and purpose. There has been progress, evidenced by a transformation of a number of services with greater emphasis upon safeguarding, reablement and maintaining independence.

Leadership arrangements have been subject to recent review with the intention of delivering a leaner and more operationally efficient senior management structure. This has resulted in a significant reduction in senior management posts across the whole council, with a single tier replacing directors and service heads. The recent departure of both heads of operational services has created a period of uncertainty and presents some risks in ensuring that momentum in service transformation is maintained.

CSSIW has reminded the council of the need to provide assurance that it retains sufficient capacity and capability to effectively deliver its statutory responsibilities for social services. As a consequence, initial proposals have been revised and a senior management transition risk assessment for social services has been developed that supplements the corporate version. This provides greater clarity of accountability for services and reporting lines, but identified risks and controls for their potential mitigation are limited.

This heralds a testing time for the council as it attempts to ensure that its commitment to reducing operating costs and overheads, coupled with on-going financial pressures, do not compromise its ability to innovate and continually improve the quality of social care. Its immediate budget strategy is largely based upon generating sufficient organisational efficiency savings, whilst prioritising the protection of local services. It recognises that the new operating model is not without risk, but is confident that services will be better placed to meet increasing demand and changing expectations.

Political support remains effective with strong commitment to the modernisation programme that is rapidly seeking to redesign how services are delivered. There has been significant investment in ensuring that the workforce is actively engaged within the change process.

Areas of progress

- Strong political support for service transformation.

Areas for improvement

- Reviewing the impact of recent senior management structural changes.

This page is intentionally left blank

Service Plan Improvement Priorities 2014_15: CSSIW Action Plan

	Priority	Owner	Baseline assessment	Actions / Milestones for 2014/15	Progress
C1	The ability to influence locality focused strategic planning with Betsi Cadwaladr University Health Board (BCUHB)	NA	Strategic Partnerships Board meets quarterly with members from the executive of both FCC and BCUHB. The Strategic Locality Group is Chaired by BCU with standing membership of senior staff from the Organisation	Provide feedback and take part in consultation activity relating to the new operating structure for BCUHB Explore the potential of joint posts between LA and BCUHB Agree with BCUHB how we can strengthen arrangements to ensure children and young people receive appropriate and timely health care	Green
C2	Shaping and commissioning higher quality nursing home care in the local area.	LH	Regular Provider meetings in place to support effective working relationships and promote quality initiatives Specific challenge of recruiting and retaining managers with the skills and experience to lead high quality nursing provision.	A regional meeting is plannned in the new year involving Local Authorities, BCU and CSSIW. The intention is to explore how we can take a regional approach to this challenge. Provide a development event for Care Homes Managers on effective leadership Establish a Joint Inter-agency Management Panel (JIMP) to support effective practice development and to shape/influence the market to provide high quality care and ensure a sufficient supply of competent qualified nurses. Provide support and training to improve the quality of service provision for people with dementia and palliative care Develop an action plan in response to the Older People's Commissioner report on Care Home provision in Wales Progress on actions November 2014: Development event held for Managers of Homes in Flintshire 9 / 10 /2014, further event planned for Spring 2015. Learning set's held for Flintshire Dementia Care Homes in June 2014 and two further study days arranged on 'person centred' care planning and Dementia Care and Communication in Autumn 2014. Flintshire JIMP established September 2014, Task and Finish Group established to explore sub regiona	Red
C3	Timely reviews for children in need – this has deteriorated despite being an area for improvement last year.	RD	Performance at the end of quarter 2 for 2013/14 is now in line with the Welsh average (78%). This is an improvement on 2013/14 where performance was 53%.	Managers in Children's teams to meet quarterly with the Chief Officer to review data and agree actions for further improvement. Regular review of progress within Teams through supervision. Teams have assigned senior practitioners with responsibility for CIN reviews to ensure compliance.	Amber
C4	Addressing the fall in numbers of known young, and adult, carers.	LH	Q2 data for carers was as follows: Young carers: 18 identified in the first half of the year (12 for the whole of last year) and 100% were assessed. Adult carers: 1274 identified in the first half of the year (776 last year but this did not include data from NEWCIS).	Meeting with Provider of carers services for young person to ensure appropriate referrals from SSD and associated recording by the Provider Recording processes to be reviewed and revised to ensure full and accurate data capture about adult carers. NEWCIS is setting up as a Social Enterprise with a trading arm and will be able to seek additional funding to support carers in Flintshire from this November. A review is being prepared of the Carers' Strategy as part of the business planning process for Social Services and this will include the redefinition of carer's priorities for the next 5 years. Continued roll out of the successful training programme by NEWCIS, which includes a slot from Barnardos to raise awareness of the need for early identification of children with a caring role. Progress on actions November 2014 Data collection to evidence our work with adult carers has improved, and information from NEWCIS is regularly received. Work continues with Barnardos to ensure that information on children with a caring role is robustly captured. Evidence received from Barnardos for the first half of the year shows that more young carers In conjuction with NEWCIS, 12 week training programme developed for families and carers of people w	Green

C5	Timescales in processing complaints, particularly in children's services.	JS	Timeliness of responding to complaints needs to be improved at stage 1 and stage 2.	Implement a project management approach to complaints Meet with operational Teams in Childrens services to establish additional support that can be given to ensure an early and effective outcome, reducing the need for complaints to be escalated. Review local guidance regarding complaints being put on hold where there are overiding issues (eg. court). Revise quarterly complaints report to include details of reasons for non-compliance. Standing agenda item for quarterly performance forum, and refer outstanding issues to fortnightly Fieldwork Managers group. Weekly bulletin to manager group with notification of 1. Resolutions due in the week; 2. Resolutions overdue. Address the dip in attendance at complaints training by a programme of visits to teams by the Complaints Officer in response to CSSIW recommendation.	Green
C6	Initial child protection conference timescales.	RD	Q2 performance improved to 93%. However, there were some challenges in quarter 1 which cumulative brings performance to 87.5%.	Managers in Children's teams meet quarterly with the Chief Officer to review data and agree actions for further improvement.	Green
C7	Statutory visits for looked after children.	RD	The timeliness of statutory visits also improved, from 85.9% to 91.3% in Q2.	Identified Senior Practitioners who has responsibility for ensuring that statutory visits are completed within their area. Senior Practitioners will attend performance meetings with the Chief Officer to proactively monitor and review performance.	Amber
C8	Health assessments for looked after children.	PR	This is a partnership indicator with Health. 3 of the local authorities with performance in the bottom quartile fall within the BCUHB area.	Raise the need to deliver improvements in this area with BCUHB including clarificying roles, responsibilities and processes - especially as the LAC nurse post funded by BCUHB is about to become vacant. Actions from Task & Finish Group: - Develop online notification form and incorporate into childcare procedures. - LAC PI checklist to be used in supervision. - Revise process for requesting health assessments and share with staff. - Replacement LAC nurse to be invited to foster care training.	Red
C9	Timely Personal Educational Plans for looked after children.	RD/PR	Performance at the end of quarter 2 for 2013/14 is now in line with the Welsh average (78%). This is an improvement on 2013/14 where performance was 53%.	Social Services and Education have both identifed a Lead Officer to work together to improve communication and joint arrangements with schools for the timely completion of PEPs.	Green
C10	Outcomes for young adults who were formerly looked after.	RD	Improvement recorded in Q1. There were no young people in the cohort in Q2.	Managers in Children's teams continue to meet quarterly with the Chief Officer to review data and agree actions for further improvement.	Green
C11	Data collation associated with commissioning to test impact and value for money.	LH	Quality circles in place to bring together intelligence about service performance, impact and value	Work ongoing with IPC and regional collegues to develop a Market Position Statement identyfing current need and future projected demand Formally implement the regional contract for Care Home provision and embed outcome focussed contract monitoring arrangements. Regional PPA Contract to be rolled out in January 2015 and 'enhanced service specification for dementia care' to be launched April 2015.	Green
C12	Absence management outcomes and impact upon capacity	NA	Realign structures on Trent to ensure that sickness can be accurately reported and performance managed	Social Services made a significant improvement in absence levels during the last financial year, reducing absence by 3.56 days lost per FTE at the end of March 2014. Proghress remains positive in 2014/2015 with a reduction in absence in Safeguarding & Children's services. Absence remains more of a challenge in Integration/Adult services. This year's corporate target for absence is set at 9.6 days per FTE and all services have been asked to set local targets for improvement. It is unrealistic to expect absence rates in Social Services to meet the corporate target within the next 12 months when they have been much higher than this historically.	Amber
C13	Reviewing the impact of recent senior management structural changes.	NA	Structure operational and senior posts appointed (Safeguarding/Childrens lead to commence in February 2015)	Review once all appointments have been in place for 3 months (Spring 2015).	Green
C14	Educational attainment for looked after children	PR	There has been some improvement in attainment results but this needs to be sustained in order to match the best in Wales. Performance to be reported March 2014/15	Lead Officers appointed within Social Services and Education to enhance systems and secure performance improvement	Amber
C15	Assessment and care management arrangements for looked after children	RD	Meet targets for Personal Education Plans and statutory visits	Improve performance in SCC/024 Improve performance in SCC/033 Quality assurance framework under development will provide a coherent strategy for evidencing improving outcomes for looked after children. Quarterly performance & quality forum with managers and senior practitioners to review quantitative and qualitative information about performance.	Amber

C16	Assessment and care management arrangements for children in need		Meet target for timeliness of CIN reviews.	Improve performance in SCC/016 Quality assurance framework under development will provide a coherent strategy for evidencing improving outcomes for looked after children. Quarterly performance & quality forum with managers and senior practitioners to review quantitative and qualitative information about performance.	Amber
		RD			

This page is intentionally left blank

FLINTSHIRE COUNTY COUNCIL

REPORT TO: SOCIAL AND HEALTH CARE OVERVIEW & SCRUTINY
                  COMMITTEE

DATE: THURSDAY, 18 DECEMBER 2014

REPORT BY: CHIEF OFFICER (SOCIAL SERVICES)

SUBJECT: NORTH WALES ADULTS SAFEGUARDING BOARD

1.00   PURPOSE OF REPORT

1.01   This report requests that Committee considers and comments on the proposal that the statutory requirement to establish a Safeguarding Adults Board be discharged on behalf of the authority by the North Wales Safeguarding Adults Board.

2.00   BACKGROUND

2.01   Section 134 of the Social Services and Wellbeing Act (Wales) 2014 requires that Safeguarding Children Boards (SCBs) and Safeguarding Adults Boards (SABs) be set up. This will put the safeguarding of adults on to a statutory footing similar to that for safeguarding children.

2.02   Regulations will follow the act, and will set out those areas in Wales for which there are to be Safeguarding Boards ("Safeguarding Board areas"). Welsh Government has consistently said that safeguarding board areas will follow the public service footprint set by the Health Boards and Police Authorities: the six Counties that constitute North Wales.

2.03   Work has been underway to develop regional arrangements for both Children's and Adult's Boards in advance of the legislation, and a report on the proposed structure for Safeguarding Adults Boards was circulated to the relevant partner agencies in 2013. This report proposed a two-tier arrangement similar to that in operation for the children's boards at the time.

2.04   Safeguarding Children Boards have been statutory since 2006, and joint sub-regional boards have been in place for some time. This has meant that the children's boards were able to move towards regionalisation more quickly than the adult's boards; however, this now means that the adult's boards can learn from the experiences of the children's boards.

2.05   In recognition of the size and diversity of the North Wales area, the children's boards developed a model which kept the statutory functions of the existing sub-regional Local Safeguarding Children Boards (LSCBs) at the sub-regional level. In addition, a regional board was established whose function was to reduce duplication, share best practice, and provide strategic direction; this latter included directing four regional sub groups to carry out some of the functions of the

boards. This was called the 'two tier' model. This model differed from that adopted across much of Wales where fully regional arrangements were put in place. The two-tier model and the fully regional model have both been evaluated by Sheffield University and a detailed report is available on request.

2.06   Whilst there have been successes with the two tier model, there have also been significant drawbacks. Section 3 of the attached report provides further information.

2.07   In response to the lessons learned from the operation of the two-tier system the children's boards are now proposing to move away from this model towards a stronger regional board. In this revised model, the statutory functions will rest with the regional board, and the sub regional delivery groups will ensure that local practice meets local need. A report proposing this has been taken to the relevant partner agencies, and it is now proposed to adopt this revised model for the adult's board.

2.08   If these proposals are accepted, existing multi-agency Adult Protection Committees in place in Conwy, Denbighshire, Flintshire and Wrexham, and the joint Gwynedd & Anglesey Adult Safeguarding Board will be superseded by the North Wales Adult Safeguarding Board. In their place, alongside the North Wales Safeguarding Adults Board will be sub regional joint Safeguarding Adults Delivery Groups in Flintshire & Wrexham, Conwy & Denbighshire, and Gwynedd & Anglesey.

2.09   The implementation plan for the establishment of the Adult Safeguarding Board is given at Appendix 2. In addition to establishing the Board and associated sub groups, the implementation plan includes the identification of funding to support the statutory board, agreement on a host authority for the funds, staff and website.

3.00   CONSIDERATIONS

3.01   Safeguarding Adults Boards are statutory boards that contribute to the delivery of the council's responsibilities for vulnerable adults.

3.02   To reduce duplication and improve the efficiency and effectiveness of safeguarding boards across North Wales. Proposals will also meet the Welsh Government's requirements to establish safeguarding boards.

3.03   Regionalisation may result in increased travel for some Safeguarding Board Members, but full use will be made of electronic communications where possible. The net reduction in the number of meetings across North Wales should result in less car travel and a lower carbon footprint.

4.00   RECOMMENDATIONS

4.01   That Members consider the statutory requirement to establish a Safeguarding Adults Board be discharged of behalf of the authority by the North Wales Safeguarding Adults Board.

4.02   That Members consider and comment on the structure for the regional Adult Safeguarding Adults Board, to be known as the North Wales Safeguarding Adults Board (NWSAB) as shown in Section 4.2 of the attached report at Appendix 1. The NWSAB will be supported by regional function-based groups and sub-regional Delivery Groups.

5.00   FINANCIAL IMPLICATIONS

5.01   The Adult Safeguarding Board is a statutory board and will need to be funded by contributions from its partners. The issue of funding will be considered ahead of 2015/16, including the option to use the common support provided for the Regional Safeguarding Children Board.

6.00   ANTI POVERTY IMPACT

6.01   None

7.00   ENVIRONMENTAL IMPACT

7.01   None

8.00   EQUALITIES IMPACT

8.01   Human Rights Legislation

9.00   PERSONNEL IMPLICATIONS

9.01   As detailed above

10.00   CONSULTATION REQUIRED

10.01   The Regional Leadership Board considered and agreed a report outlining the changes to the Children's Board arrangements, which noted that the Adults Board would be developed along the same model. All the relevant partners have also since received this report. The Joint Gwynedd and Anglesey Safeguarding Adult's Board, and the local Adult Protection Committees across the remaining four Local Authority Areas have been consulted on the suggestions for change. Their comments have contributed to the final proposals.

12.00   APPENDICES

12.01   Background to the NWSAB and Implementation Plan

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985 BACKGROUND DOCUMENTS

None.

Contact Officer: Susie Lunt, Senior Manager, Integration Lead Adults
Telephone: 01352 701407
Email: susie.lunt@flintshire.gov.uk

This page is intentionally left blank

<u>**Appendix 1**</u>

<u>Development of a North Wales Safeguarding Adults Board</u>

1. Background

1.1 Conwy CBC, Denbighshire CC, Flintshire CC, and Wrexham CBC each has an Adult Protection Committee (APC) which operates within the Local Authority boundary. Gwynedd & Anglesey have a joint Safeguarding Adults Board.

1.2 The Social Services and Wellbeing Bill (Wales) Act 2014

1.2.1 Section 134 of the Social Services and Wellbeing Act (Wales) 2014 requires that Safeguarding Children Boards (SCBs) and Safeguarding Adults Boards (SABs) be set up. This will put the safeguarding of adults on to a statutory footing similar to that for safeguarding children.

1.2.2 According to the Act, the objectives of a Safeguarding Adults Board are:

(a) to protect adults within its area who have needs for care and support (whether or not a local authority is meeting any of those needs): and
(c) are experiencing, or are at risk of, abuse or neglect,
(d) to prevent those adults within its area mentioned in paragraph (a)(i) from becoming at risk of abuse or neglect.

1.2.3 A Safeguarding Board must seek to achieve its objectives by co-ordinating and ensuring the effectiveness of what is done by each person or body represented on the Board.

1.2.4 Regulations will follow the act, and will set out those areas in Wales for which there are to be Safeguarding Boards ("Safeguarding Board areas"). Statements released by the Deputy Minister for Children and Social Services from 2011 onwards have indicated a preference for the safeguarding board areas to follow the public service footprint set by the Health Boards and Police Authorities.

2 North Wales activity ahead of the legislation

2.1 Safeguarding Adults

2.1.1 A Regional Safeguarding Adults seminar took place on 25th January 2013. A list of those who attended is shown at paragraph 5. Following the seminar, an options paper was developed and a preferred option identified. The preferred option followed the structure being developed for the Safeguarding Children's Boards, and proposed a two-tier structure with a regional board and three sub regional boards. The sub regional boards were to be created by the six local authorities forming joint boards on the Gwynedd & Anglesey, Conwy & Denbighshire and Flintshire & Wrexham pattern. The paper also proposed that elements such as training, performance and audit, policy, and serious case reviews should be undertaken regionally, again as was being developed for the Safeguarding Children Boards. A 'Common script' report was then circulated to partners for reporting purposes. The options paper and common script report was further discussed at the Social Services and Health Programme Board 2nd May 2013.

2.1.2 Gwynedd and Anglesey Adult Protection Committees have since come together to form a Joint Adult Safeguarding Board.

2.1.3 A Regional Safeguarding Adults Training Group has been established for several years, but had not met for over 18 months. However, a reinvigorated group met at the beginning of May 2014, agreed new terms of reference, and agreed to meet every two months until the workplan and training programme is well established.

2.2   Safeguarding Children

2.2.1   The North Wales Local Safeguarding Children Boards (LSCBs) have also been moving towards regionalisation, but their different starting point has put them ahead of the adult's boards in several respects. Children's Board's have been statutory since 2006, and three joint boards were already in place in 2011 when the Deputy Minister asked local authorities to take action in advance of the legislation.

2.2.2   During 2012, the three North Wales LSCBs developed and agreed recommendations to pilot a two tier regional/ sub regional structure, and a shadow Regional Safeguarding Children Board (RSCB) was established. In January 2013, the shadow board was replaced by a fully constituted Board, which then established four regional sub groups. This structure took into account the need to:

- reflect local needs, culture and language;
- maintain governance arrangements with elected members within Local Authorities;
- support the Statutory Directors of Social Services in their duties and responsibilities.

2.2.3   This two tier structure kept the statutory functions of the LSCB at the sub regional level. The sub regional boards (the LSCBs) continued to report via the Directors of Social Services to the Elected Members in each Local Authority area. The Regional Board's function was to reduce duplication, share best practice and provide strategic direction, and including directing the four regional sub groups to carry out some of the functions of the boards.

2.2.4   Whilst there have been successes with the two tier model, there have also been significant drawbacks. The lessons learnt from the operation of the two-tier model for the safeguarding children boards can now be applied to the development of the model for safeguarding adult's boards.

3   Lessons learnt from the Safeguarding Children regional arrangements

3.1   The experience of the children's boards has been that the sub-regional joint boards between two authorities work well. Reverting back to a Local Authority footprint has never been seriously considered at any point during the development of the revised regional and local arrangements for the children's boards.

3.2.   The four regional Safeguarding Children Board sub groups have developed well and have delivered some key successes, for example, a very successful regional conference, the development of regional training packages training to address key issues, and cross North Wales collaborative working on child practice reviews.

3.3   However whilst regional working has been successful in many respects, particularly in the work underway in the regional function based sub groups, there have been tensions:

- There has been increased pressure on the capacity of senior representatives, as membership of regional bodies is replicated at the sub regional level;
- The regional board has been unable to move ahead as quickly as it would like on issues such as funding, business support and setting regional priorities and direction;
- sub-regional LSCBs can respond differently to communications from the regional board;
- There are concerns that the regional board and its agenda cannot adequately meet local needs in terms of cultural differences and local issues;
- Staff at operational manager / team manager level feel distanced from the Safeguarding Board, and lacking in direction;
- Feeling distanced from decisions and direction, local sub groups have continued to set their own agendas.

3.4   The North Wales two-tier pilot model was one of two regional structures chosen to be evaluated by the University of Sheffield on behalf of the Association for Directors of Social Services (ADSS) Wales Safeguarding Policy Group and Welsh Local Government Association (WLGA). The evaluation was completed in early April 2014 and will inform the writing of guidance to implement

the Social Services & Wellbeing (Wales) Act 2014. The report acknowledges the tensions inherent in the two-tier structure, but also recognises the need to reflect local culture, language and concerns.

3.5 The regional SCB recognised that there was a need to resolve these tensions, whilst maintaining mechanisms to deliver regional direction and engage professionals at a local level, and have now developed a revised structure to address these issues. The regional Safeguarding Children Board agreed the revised structure at its meeting of 8th April 2014, and it was agreed in principle by the Regional Leadership Board on 25th April 2014.

3.6. The revised structure proposes maintaining the regional function-based sub groups, but shifting the balance of power and responsibility from the LSCBs to the Regional Board. The regional board will be the statutory board, and the LSCBs will re-configure as sub regional delivery groups. This structure continues to meet concerns around local needs and engagement and the responsibilities of the Directors of Social Services, whilst allowing the regional board to move ahead with setting a regional agenda.

4. Current Situation: Safeguarding Adults

4.1 Each county currently operates a Protection of Vulnerable Adults Committee and therefore expects representation at 5 committees across North Wales (Gwynedd and Mon have merged). They are currently not on a statutory footing and this reflects the lack of status and value.

4.2 Diagram 1 – Proposed Structure for North Wales Safeguarding Adults Board
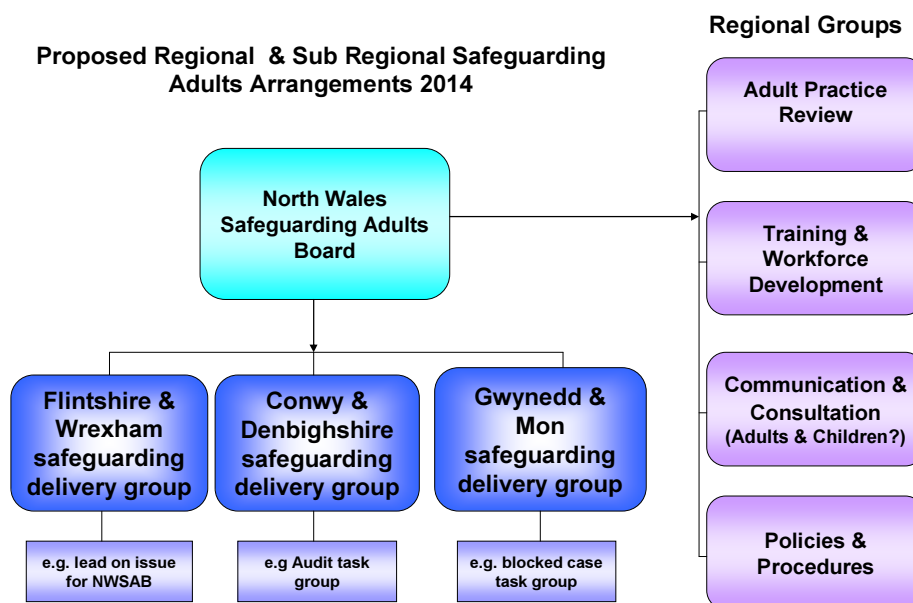
4.3 Whilst the adult's function-based regional groups could learn from the regional children's groups, the agendas for children and adults were too different to make joint working viable. However, the group did consider that there may be scope for the regional Communications and Consultation Group to cover both adults and children.

4.4 Joint two-authority delivery groups will ensure that local practitioners remain involved and that local practice is strengthened. This sub regional arrangement also reduces duplication, particularly for the pan-North Wales organisations, whilst also promoting closer working and the sharing of best practice.

4.5 The North Wales Safeguarding Adults Board will be able to agree regional objectives, set direction, standardise approaches, and reduce duplication.

4.6 The functions of the regional and sub-regional boards were also discussed, and the group proposes the following division of labour.

4.6.1 The North Wales Safeguarding Adults Board will:

- Add value and improve outcomes for vulnerable adults in need of safeguarding and protection;
- Develop and provide a regional strategic direction;
- Direct and monitor regional groups for Training & Workforce Development, Policies & Procedures, Communications & Consultation and Adult Practice Reviews;
- Develop and monitor a performance management framework;
- Provide challenge & support to regional agencies and Local Authorities;
- Agree and manage the budget;
- Provide the interface with Welsh Government and the National Safeguarding Board.

4.6.2 The sub regional Adult Safeguarding Delivery Group will:

- Implement regional strategy & the business plan
- Co-ordinate & monitor sub-regional multi-agency activity;
- Examine local performance data, e.g: Outcomes, referrals, POVAs, escalating concerns, adult protection & support orders;
- Attendance at strategy meetings;
- Training uptake & impact;
- Conduct audits & provide quality assurance;
- Consider cases of special interest/ blocked cases/ near misses;
- Provide a local interpretation of regional protocols;
- Lead on issues at the request of the regional board.

4.7. These proposals have since been taken to the existing Adult Protection Committees and Gwynedd & Anglesey's joint Safeguarding Adults Board.

4.8   Implementation Plan -North Wales Safeguarding Adults Board (NWSAB)

	Work Area	Action	Expected Outcomes	When	Who	Status
	Establish the NWSAB	Election of chair and vice chair.	Draft to be produced for Board and agreed by the Board		**GH, JW**	
		NWSAB development session	Membership, operating method, Key Priorities,	**16th July 2014**	**GH, JW**	
		Report to governance structures		**July / August 2014**		
		First meeting of NWSAB		23rd Sept 2014		
	Develop a Strategic Plan.	Take forward key priorities and develop into a strategic plan	Strategic Plan 2015-18 and business plan 2015-16	**Dec 2014**		
	Develop a Performance management framework	Establish a performance framework that meets the requirements of WG, CSSIW & HIW	Full understanding of safeguarding work Ability to hold partners to account Ability to identify areas of concern Improved performance			
	Establish funding for the NWSAB	Statutory Partners to include funding in 2014/15 budget discussions	Agreement to funding formula Agreed contributions to be available to the NWSAB from April 2015	**Jan 2015**		
		Host Authority to be agreed.	Host for staff, funds, website			
		Business support needs to be identified	Agreement to business support structure	**Jun 2015**		

	Work Area	Action	Expected Outcomes	When	Who	Status
	Establish business support for the NWSAB	Once contributions and support needs agreed, business support to be recruited	Recruitment to business support	**Sep 2015**		
	Establish the regional SA function groups	Adult Practice Review Group	Terms of Reference and membership agreed	**Oct 2014**		
			Work plan agreed	**Dec 2014**		
		Training Group	Terms of Reference and membership agreed	**May 2014**		**Completed**
			Work plan agreed	**Dec 2014**		
		Communications & Consultation	Terms of Reference and membership agreed	**Oct 2014**		
			Work plan agreed	**Dec 2014**		
		Policies & Procedures	Terms of Reference and membership agreed	**Oct 2014**		
			Work plan agreed	**Dec 2014**		
	Sub regional delivery groups	Conwy & Denbighshire	Meeting between Local Authority representatives in Conwy & Denbighshire	**28th July 2014**		
			First Joint Meeting of C&D Delivery Group			
		Flintshire & Wrexham	First Joint Meeting of F&W Delivery Group			
		Gwynedd & Anglesey	Re-constitute G&A ASB as a Delivery Group.		**Sue Adams Gwen Carrington**	

<u>FLINTSHIRE COUNTY COUNCIL</u>

REPORT TO: <u>SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE</u>

DATE: <u>THURSDAY, 18 DECEMBER 2014</u>

REPORT BY: <u>ENVIRONMENT & SOCIAL CARE OVERVIEW & SCRUTINY FACILITATOR</u>

SUBJECT: <u>MID YEAR CHIEF OFFICER PERFORMANCE REPORT</u>

1.00   <u>PURPOSE OF REPORT</u>

1.01   To consider the 2014/15 Mid Year Service Performance Report produced at Chief Officer level for their respective portfolios. The report covers the period April to September 2014.

2.00   <u>BACKGROUND</u>

2.01   The new style Improvement Plan adopted by Council in June 2013 which is aligned to the new three year Outcome Agreement, focuses on the priorities which are expected to have the most impact during 2014/15.

2.02   In addition to the Chief Officer performance reports, quarterly Improvement Plan Monitoring Reports will be presented to Overview & Scrutiny Committees according to the priority area of interest.

3.00   <u>CONSIDERATIONS</u>

3.01   A copy of the detailed Chief Officer Mid Year Service Performance Report is attached at Appendix 1.

3.02   The contents of the Chief Officer reports include:-

- areas of positive performance;
- areas of concern;
- the Council Improvement Priorities that are not set as an in-year priority;
- progress for key projects and collaborative areas of work;
- risk summaries;
- reporting against findings from internal and external regulatory bodies e.g. Wales Audit Office, Care and Social Services Inspectorate Wales or Estyn; and
- performance against the statutory national performance indicators (NSIs and PAMs).

3.03 Analysis of performance against the Improvement Targets and NSIs is undertaken using the RAG (Red, Amber and Green) status. This is defined as follows:-

- RED – equates to a position of unacceptable performance

- AMBER – equates to a mid position where the performance has not achieved target but is within an acceptable level

- GREEN – equates to meeting or exceeding target

3.04 The indicators which showed a high (RED) status against target were:-

Operational Risk – Resilience of the independent sector
This risk is particularly concerned with care home capacity for residential care and the recruitment and retention of high quality nursing staff for residential care. Actions to help mitigate the risk include:-

- development of training and support programmes for the care home market to ensure there is high quality and robust leadership;
- development of market position statements which set out commissioning intentions and the need for developing residential care home capacity; and
- close working with Health to ensure a sufficient supply of competent qualified nurses.

4.00 RECOMMENDATIONS

4.01 That the Committee consider the 2014/15 Mid Year Service Performance Report produced by the Chief Officer, highlight and monitor poor performance and feedback details of any challenge to the Corporate Resources Overview & Scrutiny Committee who are responsible for the overview and monitoring of performance.

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   Publication of this report constitutes consultation.

11.00   CONSULTATION UNDERTAKEN

11.01   Not applicable.

12.00   APPENDICES

12.01   Appendix 1 – Chief Officer (Social Care) Performance Report.

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985
BACKGROUND DOCUMENTS
None.
Contact Officer: Margaret Parry-Jones
Telephone: 01352 702427
Email: margaret.parry-jones@flintshire.gov.uk

This page is intentionally left blank

Mid-Year Chief Officer Report

Report Author: **Chief Officer – Social Services**
Report Date: **November 2014**
Report Period: **April to September 2014**

Introduction

The Chief Officer report is produced on a half yearly basis and provided to Cabinet Members for review and assurance focusing on the 'business as usual'. The reports are provided for Overview and Scrutiny Committees as part of their Forward Work Programmes. Chief Officer reports compliment the Improvement Plan monitoring reports.

Chief Officer reports are exception reports which summarise the key information Members should be aware of, including both good and poor performance. Emerging issues / operational risks are also detailed. The reports are split into three distinct sections: -

1. Performance Overview - This section is used to give an overview of the progress being made towards delivery of key plans for the services which include those Improvement Priorities which do not have an in year focus i.e. these are not reported within the quarterly Improvement Plan monitoring. It is also used to highlight good news and key issues (including operational risks) arising. In addition, summary progress is given for key projects and collaborative areas of work.

2. Internal and External Regulatory Reports - this section summarises regulatory work reported in the half year and its outcomes and intended actions arising from recommendations.

3. Corporate Reporting - this section summarises the performance in relation to corporate issues i.e. Equalities and Welsh Language

Plus supporting appendices: -

Appendix 1- Performance Indicators - summary table of the key performance indicators used to manage the services. In addition, any NSI and PAM (statutory PIs) reported by the services are included.

Appendix 2 - High level (red) operational risk detail - completed full risk templates for those risks currently assessed as high (red).

Appendix 3 - ACRF/CSSIW In-Year Priorities - progress update.

Section 1 - Performance Overview

This report covers the following functional areas:
- Children's Services
- Adult Social Care
- Commissioning

Areas of Positive Performance

Safeguarding Vulnerable Adults and Children

As part of our Modernising Social Services Programme, our additional investment in safeguarding services last year has enabled us to make progress in reshaping our services to deliver person centred safe outcomes for children, young people and adults. The Children's Safeguarding Unit, incorporating the Children's Safeguarding Managers and the Independent Reviewing Officers for Looked After Children, have now re-located to shared premises in Flint and will be shortly be joined by the Adult Safeguarding Team. Oversight for Children's and Adult Safeguarding will be provided by one Senior Manager, recently appointed and who will be joining the team in February 2015.

In the first half of this year, 191 Adult Safeguarding referrals were received. For referrals that were completed in the period, the risk was reduced or removed in 100% of cases.

The Children's Safeguarding Unit conducted 72 initial Child Protection conferences, and continue to perform well against the national performance indicators.

National Performance Indicators in Children's Services

Performance indicators for looked after children improved in Quarter 1 and again in Quarter 2. The timeliness of statutory reviews improved from 76.6% at the end of last year to 92.1% for the first half of this year. The timeliness of statutory visits also improved, from 85.9% to 91.3%. Personal Education Plans for looked after children of school age were completed within timescales for 75% of children (improved from 56.7%). All care leavers who turned 19 in the first half of the year were in suitable accommodation and engaged in education, training or employment.

Reablement and Telecare

The success of our reablement and recovery approach is being maintained; 78.3% of people referred in Quarter 2 completed a period of reablement resulting in their support package being maintained or reduced, or not requiring further support.

The multi-room sensor piloted in Supported Living houses has reduced the need for waking night support, which has now been replaced by sleep-in support, resulting in an increase in the independence of people with a learning disability. For further information please refer to Independent Living Improvement Plan Sub-Priority monitoring report.

Services for People with Dementia

The dementia café at Llys Jasmine opened, and provides a resource for people living with dementia and their carers both in extra care and the wider community. There is to be a formal launch in November.

Services to support Carers

We have improved our data collection to evidence our work with adult carers, and regularly received information from North East Wales Carers Information Service (NEWCIS). NEWCIS is a voluntary organisation and is setting up as a Social Enterprise with a trading arm and will be able to seek additional funding to support carers in Flintshire from this November.

The number of young carers identified declined last year, so we have been working with Barnardos to ensure that information on children with a caring role is robustly captured on our systems. Evidence received from Barnardos for the first half of this year shows that we have already identified more young carers than in the whole of last year.

Direct Payments and Citizen Directed Support

The take-up of direct payments continues to increase; at the end of Quarter 2 there were 380 service users in receipt of a direct payment. We are continuing to extend the range of services for which direct payments are offered.

Learning Disability Services

Glanrafon Day Centre has had new changing room and bathroom facilities which have helped to improve the experience of users at the centre. However, there are still concerns about the condition of the building.

Reviews of Adult service users

Performance continues to be well above the All Wales average for the percentage of adult service users with a care plan that was reviewed; last year Flintshire's percentage for reviews was the best in Wales.

Residential Care

The closure of a care home resulted in the loss of 42 residential beds, further reducing capacity in the residential sector. However, staff across operational services and in commissioning and contract monitoring worked hard to ensure that clients were placed in other suitable residential placements within a very short timescale. Ways in which the market can be sustained are currently being considered.

Areas of Concern

Co-location of Community Based Social Care and Health Teams

Co-location is not progressing as quickly as anticipated, and it is now likely that co-location for the South team will not be achieved by March 2015. However, joint working with Health staff at an operational level has been successfully achieved in all three locality teams. Please refer to Strategic Risk in Integrated Community Social & Health Services Improvement Plan Sub Priority.

National Performance Indicators in Children's Services

Last year a decline was reported for some of the key indicators for Children's Services. For the most part, year to date data suggests that performance has now recovered. The remaining challenges are the percentage of child in need reviews carried out within timescales, which has improved but there is still some way to go, and the timeliness of statutory health assessments for looked after children. This is a partnership indicator with Health. Three of the local authorities with performance in the bottom quartile last year fall within the BCUHB area. Social Services will raise the need to deliver improvements in this area with BCUHB, especially now that the LAC nurse post funded by BCUHB is about to become vacant.

Improvement Plan (none in year priorities)

Property Adaptations - Reported under the Independent Living Improvement Plan sub-priority.

Children and Vulnerable Families - IFSS is reported under the Independent Living Improvement Plan sub-priority.

ACRF Priorities for 2014/15

35 priorities have been identified in the Social Services Annual Performance Report 2014/15 and in the subsequent response letter from the Care and Social Services Inspectorate Wales (CSSIW). Progress on these priorities is monitored quarterly by Social Services Management Team and at the end of Quarter 2, the RAG positions were as follows:

Green	25	Amber	8	Red	2

The red priorities are regarding the shaping and commissioning of higher-quality nursing home care in Flintshire, and improving the timeliness of Health Assessments for Looked After Children. These are both included in the risk summary below (in Operational Risks 1 and 3). A summary report showing progress on all the priorities is included as Appendix 3.

Key Projects

Quest (Families First Grant Funded)

Quest aims to:
- reduce the number of families living in a workless household;
- raise aspirations and motivation to work;
- improve the skill levels of parents and young people in no / low income families so that they can secure well paid jobs;
- enable choices and empowerment; and
- reduce inequalities that exist in health, education and economic outcomes for children living in poverty;

by improving outcomes of the poorest. There were 33 referrals to Quest in Quarter 2 which resulted in a service being provided.

Novus (ESF Grant Funded)

The NOVUS Project supports economically inactive and unemployed people to increase their employability, moving them closer to the labour market. The project specifically concentrates on those who are parents and more particularly lone parents, to enable them to overcome the barriers which prevent them from entering and sustaining long term employment.

Outcomes in the last 12 months are as follows:

Forecast:	*Target*	*Outcomes to date*	*Explanation*
Participants	110	113	
Gaining qualifications	20	25	
Employment	14	10	Further data to follow – target will be met
Further learning	18	14	Further data to follow – target will be met
OPO's (other positive outcome)	50	45	

Single Point of Access (SPOA)

SPOA is a 3 year collaborative project between Betsi Cadwalader University Health Board, Flintshire County Council and Flintshire Community Voluntary Council to develop and implement a single point of access to Health, Social Care and Community Services. The project is on track and is progressing well. A venue is under consideration and business processes are being mapped.

New Builds

The builds for Extra Care (please see Improvement Plan sub-priority update for Extra Care Housing) and Flint Primary Health Centre are progressing and are on track to meet agreed milestones for December 2014 and March 2015.

Dementia Inspection

A joint Health & Social Care Action Plan is being developed in response to the CSSIW inspection of commissioning of dementia services which took place in January 2014. Feedback was received from CSSIW in April of this year and reported to Social & Health Care Overview and Scrutiny Committee on 1 May, which highlighted some areas of good practice and set out some recommendations around joint working with Health.

Summary of Operational Risks (from the above sections)

Risk Type	Risk Ref. and Description	Net Risk Score	Risk Trend	Target Risk Score & Date
Operational	Resilience of Independent Sector: • Care home capacity for residential care • Recruiting and retaining high quality nursing staff for residential care	R	↔	A March 2016
Project	Single Point of Access The RAG refers to overall risk for the project, based on the assumption that the regional collaboration funding will continue until 2016. A detailed risk log is maintained by the SPOA Board.	A	↔	A
Operational	Decline in nationally reported performance in some areas of Children's Services	A	↓	G March 2015

Section 2 - Internal and External Regulatory Reports

Care Homes
CSSIW have published inspection reports for 9 Independent Sector Care Homes during the period. These reports are available from *http://cssiw.org.uk/find-a-care-service.*

CSSIW – Commissioning Dementia
Reported to Social & Health Care Overview and Scrutiny Committee on 1 May 2014.

Annual Council Reporting Framework (ACRF)
We have received the final copy of our annual review and performance evaluation from CSSIW which is generally positive, and includes a number of items of good practice, as well as some recommendations which have been noted in Appendix 3 to this report. This is due to be presented to Social & Health Care Overview and Scrutiny Committee on 18 December 2014.

National Inspection Safeguarding and Care Planning of looked after children and care leavers, who exhibit vulnerable or risky behaviours.
The final report was received from CSSIW in August, and presents a summary of their findings in the areas of corporate parenting, care planning, safeguarding, outcomes and promoting the rights and voice of the child. To be reported to Social & Health Care Overview & Scrutiny Committee 13/11/2014.

Section 3 - Corporate Reporting

Equality and Welsh Language

List the Equalities and Welsh Language Impact Assessments: -
(1) Started/Work in Progress
(2) Completed
during the period (April – September 2014)

EIA	Type	Progress
Short Term Care	Restructure	In progress
Dementia Cafe	New service	Awaiting sign off
Re-Commissioning of Supported Living Services	Re-commissioning	In progress
Estuary Craft relocation and restructure	Restructure	In progress
Getting Engaged Action Plan	Review	In progress

List the work areas / functions where diversity of customers are monitored
Adult and Children's services

Appendix 1 - Performance Indicators

Key

R	**Target significantly missed or likely to be missed by a significant margin**
A	**Target missed or likely to be missed but within an acceptable level**
G	**Target achieved / exceeded or on track to be achieved / exceeded**

The RAG status of the indicators for the half year position are summarised as follows: -

R	0	**A**	4	**G**	9

Note 1 – NSI = National Statutory Indicator   PAM = Public Accountability Measure
Note 2 – Change (Improved / Downturned) is based on comparison with the previous reporting period. Where it is more appropriate to compare performance with the same period in the previous year this should be stated in the commentary.

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Mid-Year Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
PSR/002: The average number of calendar days taken to deliver a Disabled Facilities Grant	NSI / PAM	246.43 Days	Not Set Mgt Info	18428 53 348 days	N/A	Downturned	Please see Improvement Priority update for Independent Living
SCA/001: The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	NSI	2.59 Rate per 1,000	2 rate per 1,000	0.86 Rate per 1,000	G	Improved	

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Mid-Year Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCA/002(a): The rate of older people (aged 65 or over) supported in the community per 1,000 population aged 65 or over at 31 March	NSI	65.15 Rate per 1,000	Not Set Mgt Info	66.39 Rate per 1,000	**N/A**	N/A	
SCA/002b: The rate of older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March	NSI	15.9 Rate per 1,000	21 rate per 1,000	15.8 Rate per 1,000	**G**	Improved	
SCA/007: The percentage of clients with a care plan at 31st March whose care plans should have been reviewed that were reviewed during the year	PAM	98.48%	90%	2788 / 2987 93.3%	**G**	Downturned	
SCA/018(a): The percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year	PAM	90.72%	90%	1151 / 1274 90.4%	**G**	Downturned	

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Mid-Year Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCA/019: The percentage of adult protection referrals completed where the risk has been managed	NSI / PAM	98.9%	95%	$\frac{84}{84}$ 100%	G	Improved	
SCA/020: The percentage of adult clients who are supported in the community during the year	PAM	85.1%	90%	$\frac{3520}{4091}$ 86.04%	A	Improved	The half year outturn has improved since last year; we expect the percentage of adults supported in the community to increase throughout the year as more people are supported through the reablement route.
SCC/004: The percentage of children looked after on 31st March who have had three or more placements during the year.	NSI / PAM	6.54%	10%	$\frac{16}{208}$ 7.7%	G	Downturned	This PI is based on moves during a 12 month period. There were only 3 children who moved placement between July and September. This PI includes positive moves which are planned in the interest of the child.
SCC/011(a): The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by the Social Worker	PAM	90.14%	80%	$\frac{129}{151}$ 85.4%	G	Downturned	This is based on Q1 data; Q2 data is not yet available.

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Mid-Year Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCC/011(b): The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen alone by the Social Worker	NSI	52.54%	54%	$\frac{60}{151}$ 39.7%	A	Downturned	This is based on Q1 data; Q2 data is not yet available. Some issues with recording have been identified; these are being addressed.
SCC/025: The percentage of statutory visits to looked after children due in the year that took place in accordance with the regulations	PAM	76.57%	93%	$\frac{584}{634}$ 92.1%	A	Improved	Performance has progressively improved so far this year, and we expect target to be met by year end.
SCC/033(d): The percentage of young people formerly looked after with whom the authority is in contact at the age of 19	NSI	75%	90%	0	N//A	N/A	There were no young people in the cohort.
SCC/033(e): The percentage of young people formerly looked after with whom the authority is in contact, who are known to be in suitable, non emergency accommodation at the age of 19	NSI	91.67%	95%	0	N//A	N/A	There were no young people in the cohort.

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Mid-Year Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCC/033(f): 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	NSI	58.33%	75%	0	N//A	N/A	There were no young people in the cohort.
SCC/041(a): The percentage of eligible, relevant and former relevant children that have pathway plans as required	NSI	100%	98%	$\frac{71}{71}$ 100%	G	No change	
SCC/045: The percentage of reviews of looked after children, children on the Child Protection Register and children in need carried out in line with the statutory timetable	PAM	82.14%	Not Set Mgt Info	$\frac{479}{535}$ 89.5%	N/A	Improved	

Appendix 2 –High Level (Red) Net Risks

Risk to be managed – Resilience of Independent Sector: a) Care home capacity for residential care; b) Recruiting and retaining skilled and experienced nursing staff for residential care.

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score & Date (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	Close working between staff across the operational areas of the service and in Commissioning & Contract Monitoring to ensure that where home closures are unavoidable, clients are placed in other suitable accommodation in a very short timescale. The Care Council for Wales are reviewing the qualifications for Regional Managers in Wales and are investing through their practice development team in ensuring the competency of nurses in the care home sector.	H	M	R	Development of training and support programmes for the care home market to ensure there is high quality and robust leadership. Development of market position statements which set out our commissioning intentions and the need for developing residential care home capacity. Close working with Health to ensure a sufficient supply of competent qualified nurses.	Chief Officer, Social Care	←→	M	M	A	**March 2016**

Code	QPRcode	Action	Owner	Actions / Milestones for 2014/15	Progress	
ACRF	A1	Develop and agree our Action Plan to deliver on requirements of the Social Services and Wellbeing (Wales) Act to put in place integrated arrangements to undertake proportionate and outcome focussed assessments that focus on 'what matters to a person.	CD	Implement "What Matters" and the Core data set.	Onging training for staff. "What matters and the core data set have been implemented and now need to be embedded into practice.	Green
ACRF	A2	Consolidate Year 1 actions and deliver on Year 2 actions in our More Than Just Words' Strategic Framework for Welsh Language services in Health, Social Services and Social Care.	CJ	Refer to More Than Just Words WG Framework for actions and timescales.	We are continuing to implement the actions and have delivered on a number of these within the specified time periods provided. Whilst there are a number of challenges associated with this framework, Flintshire will continue to implement the action plan via a staged implementation process.	Amber
ACRF	A3	Continue to expand the take-up of Direct Payments and Citizen Directed Support topromote greater choice and control.	JT	Increase no. of people receiving direct payments.	Q2 data: 380 people in receipt of a direct payment.	Green
ACRF	A4	Complete the review of our Involvement Action Plan learning from the evidence gathered to ensure people who use services and their carers are able to make meaningful contribution to service planning and delivery.	JS	1, Review 5 point Action Plan - Completed. 2. Relaunch "Getting Engaged" with updated membership - Nov 2015	New Terms of Reference have been drafted and discussed. Action plan has been reviewed; a number of actions are being progressed through the new group.	Green
ACRF	A5	Increase the range of opportunities and technology, including social media, for children, young people and their families to provide good quality feedback so that we are able to incorporate feedback into our lessons learnt process.	CJ	Research into using the Web to collect feedback - March 2015.	In progress.	Green
ACRF	A6	Train more Elected Members on their role as a Corporate Parent to ensure that they understand the part they play in helping children and young people who are in care to have the best outcomes.	JD	Training to be delivered to elected members by January 2015.	In 2013/14 the Research in Practice booklet explaining Elected Members' Corporate Parenting responsibilities was circulated. We are currently designing a short workshop for Elected Members to meet the need identified	Green
ACRF	A7	Further develop our programme of commissioning strategies and market position statements taking opportunities for collaboration with Health and other partners where money will be saved and the quality of service is maintained.	CM	Continue to develop commissioning strategies and market position statements.	The ICP is supporting Flintshire as part of a regional project to develop market position statements. One workshop has been held in Flintshire and a regional event isplanned for November.	Amber
ACRF	A8	Evaluate our "judgement framework" approach in Contract Monitoring to develop a shared level of understanding of levels of practice	LH	Roll out of "Judgement Framework".	The framework has been rolled out and well received by the provider sector. It has also been highlighted as good practice in the Older Peoples Review of Long Term Care.	Green
ACRF	A9	Progress plans to develop agreed Social Enterprises, including Double Click Design and explore options for the development of further viable social enterprises such as the Sure Start Crèche.	PC		See IP - PC submission	Green
ACRF	A10 (IP1.2)	Develop and agree a plan to implement a night support service for people with a frailty and / or disability to support greater independence, working with health providers including GPs.	LH		See IP Independent Living 1.2	Green
ACRF	A11	With partners, launch the regional advocacy service to ensure that the voices of vulnerable children and young people are heard.	LH/CM		Under consideration by North Wales Heads of Children's Services	Amber
ACRF	A12	Pilot and evaluate a new electronic data collection and monitoring system to better enable us to review the reasons for and rate of absence for the social care work force and set targets for further education.	SS		Absence database has been rolled out to whole Authority after successful evaluation.	Green
ACRF	A13	Commission the delivery of training and qualifications to ensure the workforce is equipped to deliver services in accordance with the Social Services Care and Well Being (Wales) Act and the Welsh Language More Than Just Words Strategic Framework.	JD	Welsh Government have designed a Basic Awareness Training course which is being piloted in October 2014 for release to local authorities for delivery in December onward. Also, Childrens Services and Adult Services Roadshows being held with Workshops delivered to update staff on the act and the implications for their service.	Pilot complete and awaiting information. Children's Services Roadshow held 22nd October 2014. Workshop on the Act delivered by Christy Jones	Green

ACRF	A14	Deliver a programme of training to support the Public Law Outline – Evidence Matters.	JD	National PLO training completed in Feb 2014. NWHOCS asked for follow up training to be delivered during 2014/15.	Peter Lund (Flintshire Children's Services Training Officer) tasked with arranging PLO follow up training across North Wales. He conducted a review of needs and the consensus amongst local authorities was that the need had been met. In Flintshire we have been delivering follow on training - "Beyond PLO Critical Thinking and Analysis" - 18 attendeed (no further demand at this stage). In addition, Service Managers within Children's Services have asked that the we now deliver Bruce Thornton "Risk Model - Assessing and Analysing Risk of Significant Harm" which follows PLO training. 3 workshops have been held - 56 attendees. No further demand identified at this time.	Green
ACRF	A15	Complete the benchmarking review of our Workforce Development Team to ensure we are a quality training provider that delivers value for money	JD	1. Gather Benchmarking data from other North Wales local Authorities - Completed. 2. Evaluation by December 2014.	Completed. Now looking to analyse the information and complete a qualitative and quantiateive evaluation of training - to be complete by 31st December, 2014	Green
ACRF	A16	Establish a Dementia Café at Llys Jasmine to provide a resource for people living with dementia and their carers both in extra care and in the wider community.	SL	Opening of Dementia Café - completed.	Dementia Café opened. Formal launch 6th November	Green
ACRF	A20	Work with our partners to develop alternative housing and support models to meet the housing needs of care leavers, other young people and people with disabilities	RD		Reporting in Improvement Plan Update	Green
ACRF	A22	As part of the Families First Initiative and pending the outcome of the Lottery bid, consider options to expand the delivery of family focussed services from the Gronant Centre.	GH	Progress Big Lottery bid.	The bid to the Big Lottery was submitted in March 2014. The bid was rejected on the basis that the Lottery were not agreeable to the proposal for West Flintshire Community Enterprises Board to act as the grant recipient . The outline bid is due to be resubmitted to the Big Lottery with the proposal that Flintshire County Council act as the grant recipient.	Amber
ACRF	A23	Work collaboratively with regional partners to develop and agree a Single Point of Access (SPOA) Plan for Adult Services in Flintshire.	CD	Refer to SPoA Action Plan.	Venue is under consideration. Business process are being mapped.	Green
ACRF	A24 (IP 1.1)	Improve the timeliness of major adaptations and evaluate the impact of the extended minor adaptations and self assessment projects to inform further service improvements and options to increase people's independence.	CD/GG	Improve timeliness of major and minor adaptations.	See IP Independent Living 1.1	Amber
ACRF	A25	Further improve the data collection for Carers and Young Carers to meet the outcomes for the Carers Strategies (Wales) measure.	LH	Resolve issues with the collection and recording of data related to carer identification, assessment and services.	Issues with the collection of data for Adult Carers have been resolved. Q2 data shows that the identification of adult and young carers is back up to expected levels.	Green
ACRF	A26	Consider the findings of research underway on parent's perceptions of the Child Protection process and take appropriate action.	TBA		Deferrered pending appointment of Children's lead.	Deferred
ACRF	A27	Develop a coherent quality assurance framework which draws together information about the quality of our services into a single quarterly report	JS	Develop a single report which demonstrates the quality of services.	First draft of QA framework is being produced.	Green
CSSIW	C1	Strategic planning with BCUHB	NA		There is an effective Strategic Parterships Board which meets quarterly with members from the executive of both FCC and BCUHB.	Green
CSSIW	C2	Shaping and commissioning higher-quality nursing home care in the local area.	LH		We are considering ways in which the market can be sustained, to meet the challenge of recruiting and retaining managers with the skills and experience to lead high quality nursing provision.	Red
CSSIW	C3	Timely reviews for children in need – this has deteriorated despite being an area for improvement last year.	RD	Meet target for timeliness of CIN reviews.	Improvement recorded in Q2. Managers in Children's teams continue to meet quarterly with the Chief Officer to review data and agree actions for further improvement.	Amber
CSSIW	C4	Addressing the fall in numbers of known young, and adult, carers.	LH		Issues with the collection of data for Adult Carers have been resolved.	Green
CSSIW	C5	Timescales in processing complaints, particularly in children's services.	JS	Improve timeliness of responding to complaints.	Implementing a project management approach to complaints.	Green

CSSIW	C6	Initial child protection conference timescales. RD	Improve performance in SCC/014	Q2 performance improved to 93%. Needs to be sustained in the second half of the year.	Green
CSSIW	C7	Statutory visits for looked after children. RD	Improve timeliness in SCC/025. Each Team has identified a Senior Practitioner who has responsibility for ensuring that statutory visits are completed within their area. Senior Practitioners will attend performance meetings with the Chief Officer to proactively monitor and review performance.	Improvement recorded in Q2. Managers in Children's teams continue to meet quarterly with the Chief Officer to review data and agree actions for further improvement.	Amber
CSSIW	C8	Health assessments for looked after children. PR		This is a partnership indicator with Health. 3 of the local authorities with performance in the bottom quartile fall within the BCUHB area. Social Services will raise the need to deliver improvements in this area with BCUHB, especially now that the LAC nurse post funded by BCUHB is about to become vacant.	Red
CSSIW	C9	Timely Personal Educational Plans for looked after children. RD/PR	Improve performance in SCC/024. Social Services and Education have both identifed a Lead Officer to work together to improve communication and joint arrangements with schools for the timely completion of PEPs.	Improvement recorded in Q2. Managers in Children's teams continue to meet quarterly with the Chief Officer to review data and agree actions for further improvement.	Green
CSSIW	C10	Outcomes for young adults who were formerly looked after. RD	Improve performance in SCC/033.	Improvement recorded in Q1. There were no young people in the cohort in Q2. Managers in Children's teams continue to meet quarterly with the Chief Officer to review data and agree actions for further improvement.	Green
CSSIW	C11	Data collation associated with commissioning to test impact and value for money. LH		We are working with IPC and regional collegues to develop clear Market Position Statements containing robust data which illustrate current need and future projected demand.	Green
CSSIW	C12	Sickness absence levels. NA		Unable to report due to issues with the new service structures on iTrent. Detailed breakdown of sickness absence is available however.	Amber
CSSIW	C13	Reviewing the impact of recent senior management structural changes. NA		Review once all appointments are in post; c. Spring 2015.	Green

FLINTSHIRE COUNTY COUNCIL

REPORT TO: **SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**

DATE: **THURSDAY, 18 DECEMBER 2014**

REPORT BY: **ENVIRONMENT AND SOCIAL CARE OVERVIEW & SCRUTINY FACILITATOR**

SUBJECT: **QUARTER 2 IMPROVEMENT PLAN MONITORING REPORT**

1.00   PURPOSE OF REPORT

1.01   To note and consider elements of the 2014/15 Improvement Plan Monitoring Report relevant to the Social & Health Care Overview and Scrutiny Committee. The report covers the period July – September 2014.

1.02   To note the following:-

- The levels of progress and confidence in meeting the Council's Improvement Priorities and their impacts including the milestones achieved.
- The measures which evidence achievement and the baseline data, and targets.
- The baseline risk assessment for the strategic risks identified in the Improvement Plan and the arrangements to control them.

2.00   BACKGROUND

2.01   The new style Improvement Plan adopted by Council in June 2013 which is aligned to the new three year Outcome Agreement, focuses on the priorities which are expected to have the most impact during 2014/15.

2.02   In addition to the Improvement Plan Monitoring Report, quarterly performance highlight reports will be presented from the Chief Officers. These will be similar to those previously produced for quarterly reporting.

3.00   CONSIDERATIONS

3.01   The Improvement Plan Monitoring Report gives an explanation of the progress being made towards delivery of the impacts set out in the Improvement Plan. The narrative is supported by measures and/or milestones which evidence achievement. In addition, there is an assessment of the strategic risks and the level to which they are being controlled.

3.02   For Social & Health Care Overview and Scrutiny Committee the following Improvement Plan sub-priority reports are attached at Appendix 1 and 2:-

- Independent Living
- Integrated Community Social and Health Services

3.03   Analysis of performance against the Improvement Plan measures is undertaken using the RAG (Red, Amber and Green) status.   This is defined as follows:-

Performance
- RED – equates to a position of under-performance against target.
- AMBER – equates to a mid-position where improvement may have been made but performance has missed the target.
- GREEN – equates to a position of positive performance against target.

Outcome
- RED – equates to a forecast position of under-performance against target at year end.
- AMBER – equates to a forecast mid-position where improvement may have been made but performance will miss target at year end.
- GREEN – equates to a forecast position of positive performance against target at year end.

3.04   The high (RED) risk area identified within the elements of the Improvement Plan Monitoring Report relevant to the Social & Health Care Overview & Scrutiny Committee, is as follows:-

Priority: Living Well (Independent Living)
PSR/009a – The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people (target = 257 days).
There was only one DFG completed for children in Quarter 2; this complex adaptation was completed in 471 days.

4.00   RECOMMENDATIONS

4.01   That the Committee consider the 2014/15 Improvement Plan Monitoring Report, highlight concerns and feedback details of any challenge to the Corporate Resources Overview & Scrutiny Committee who are responsible for the overview and monitoring of performance.

5.00   FINANCIAL IMPLICATIONS

5.01   There are no specific financial implications for this report; however the Council's Medium Term Financial Plan is aligned to resource the priorities of the Improvement Plan.

6.00   ANTI POVERTY IMPACT

6.01   There are no specific anti poverty implications for this report, however poverty is a priority within the Improvement Plan 2014/15.

7.00   ENVIRONMENTAL IMPACT

7.01   There are no specific environmental implications for this report; however the environment is a priority within the Improvement Plan 2014/15.

8.00   EQUALITIES IMPACT

8.01   There are no equalities implications for this report.

9.00   PERSONNEL IMPLICATIONS

9.01   There are no personnel implications for this report.

10.00   CONSULTATION REQUIRED

10.01   Publication of this report constitutes consultation.

11.00   CONSULTATION UNDERTAKEN

11.01   The Chief Officer Team and the Performance Leads from across the Authority have contributed to help shape the new approach to reporting.

12.00   APPENDICES

12.01   Appendix 1 – Independent Living
Appendix 2 – Integrated Community Social and Health Services

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985 BACKGROUND DOCUMENTS
None.

Contact Officer: Margaret Parry-Jones
Telephone: 01352 702427
Email: Margaret.Parry-Jones@flintshire.gov.uk

This page is intentionally left blank

Sir y Fflint
Flintshire
COUNTY COUNCIL
CYNGOR

<u>APPENDIX 1</u>

Priority: **Living Well**
Sub-Priority: **Independent Living**
Impact: **Improving people's quality of life**

What we said we would do in 2014/15: -

1. Maintain the success of the reablement / recovery approach, engaging in regional working for the further roll out of telecare / telehealth and improve the timeliness of adaptations.

Progress Status	**Progress RAG**	**A**	**Outcome RAG**	**G**

<u>Reablement/Recovery</u>
78.3% of people referred in the Quarter completed a period of reablement with their support package being maintained or reduced, or not requiring further support.

<u>Telecare</u>
This quarter the pilot of multi-room sensors purchased through the Health grant was successfully completed. The multi-room sensor has reduced the need for waking night support, which has now been replaced by sleep-in support, resulting in an increase in the independence of people with a learning disability. In general there has been greater focus on telecare for people with a learning disability and a member of staff has been identified to take this forward.

The regional work on the further roll out of telecare and telehealth is continuing.

<u>Adaptations</u>
The measures below (PSR/009a and PSR/009b) are the national indicators for the timeliness of the delivery of major adaptations which go through the Disabled Facilities Grant (DFG) process. This applies to adaptations in owner/occupier and private rented dwellings only. In Quarter 2, 25 adaptations for adults were completed through the DFG process, in an average of 304 days. A new surveyor has been appointed in Housing, and a reduction in the waiting time for visits is being seen as a result.

Major adaptations completed in local authority dwellings, which do not go through the DFG process, are being completed in an average of 175 days. There are two key differences between the process for DFGs and the process for local authority property adaptations which can impact on the timescales. The DFG process involves a means test and the appointment of a contractor, whereas adaptations in local

authority properties do not. However, our aspiration is to reduce the timescale of DFG provision to nearer that for local Authority properties. Housing now have access to a monitoring report which highlights cases which have been open for more than 200 days, and includes the time spent in Housing. This is being used as a monthly progress checker for long cases.

There was only one DFG completed for children in Quarter 2; the adaptation was completed in 471 days.

192 minor adaptations (under £1,000) were completed in Quarter 2, in an average of 55 days.

Achievements will be measured through
- Extended local use of telecare / telehealth technologies consistent with regional plans
- Exceed the all Wales average for adaptations
- Meet local improvement targets for reablement

Achievement Milestones for strategy and action plans:
- Extended local use of telecare / telehealth technologies consistent with regional plans by March 2015

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn Q2	Performance RAG	Outcome Performance Predictive RAG
PSR/009a - The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people.	Chief Officer – Social Services	257 days	257 days	231 days	471 / 1 **471 days**	R	A
PSR/009b - The average number of calendar days taken to deliver a Disabled Facilities Grant for adults.		247 days	247 days	231 days	7596 / 25 **304 days**	A	A
SCAM2L - Percentage of referrals where support was maintained or reduced or no further support was required at the end of a period of Reablement.		77%	71 – 75%	80%	260 / 332 **78.3%**	G	G

Risk to be managed – Service user/ family resistance to using new technologies e.g. telecare.

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
M	M	A	Regional guidance has been produced on the use of certain pieces of equipment. Successful completion and evaluation of multi-room censor pilot has been achieved.	L	L	G	All actions have been completed.	Chief Officer – Social Services	↓	L	L	G	Jun '14

Page 69

Risk to be managed – Ensuring we have enough capital funding for disabled facilities grants alongside other competing demands for capital resources

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	DFG's are prioritised within the Private Sector Housing Regeneration & Strategy Capital programme to ensure that demand can be met. Reductions to non DFG spend by the council have taken place and monies for key priorities in those areas secured through external sources	M	M	A	There has been a reduction to the capital budget in 2013/14 and a further reduction in 2014/15. This risk has been managed through a combination of more competitive pricing, achieved through tendering. The Council's move to a reablement model also appears to have had a positive on the number of referrals for major adaptations. However, this will need to be closely monitored to assess whether this process is simply delaying the need for a major adaptation, or whether this will be an ongoing trend.	Chief Officer – Community & Enterprise	↔	L	L	G	Mar 2015

2. Implement a series of actions to support greater independence for individuals with a frailty and/or disability including completion of rightsizing exercises for all supported living projects provided and commissioned. Implement a night support service.

Progress Status		Progress RAG	A	Outcome RAG	G

Rightsizing

Rightsizing has been completed in 75% (17 out of 22) of local authority Supported Living houses, with a focus on quality of life for the service user and the structure of the package of care provided. In addition, the roll out to houses provided by Health and the independent sector has begun. As a result of this process, recommendations have been made which will improve the quality of life for residents and the efficiency of the service.

Night Support Service

Work on developing the Night Support Service is continuing; the details of the pilot are being negotiated with the provider. Alongside this development, work continues through the Project Board to ensure that this service is affordable and sustainable, with a view to rolling the preferred model out across Flintshire.

Achievements will be measured through:
- o Improved quality of life for service users with a disability
- o Reduction in care hours in supported living
- o Reduction in one to one care needed in supported living

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn Q2	Performance RAG	Outcome Performance Predictive RAG
Number of minor adaptations (under £1000) completed for service users with a disability.	Chief Officer – Social Services	377 *	TBC	TBC	192	G	G
Number of people receiving Direct Payments / Citizen Directed Support.		302	320	350	**380**	G	G
Maintain the percentage of clients who are supported in the community in the top quartile for Wales. (SCA/020)		86%	90%	90%	87%	A	G

Note: Baseline data for measure 1 is based on minor adaptations (under £500) in private dwellings – we are collecting data on all minors under £1,000 from 01/04/2014. Targets to be agreed based on Q2 data in October 2014.

Risk to be managed – Keeping up with specialist demand such as the specific residential needs of those with dementia.

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	Development of a joint action plan with Health to develop an integrated and coherent approach to support people with dementia. Development of a regional specification for enhanced dementia care in residential and nursing care homes. Reassignment of ordinary nursing beds in Independent Sector provision to provide specialist dementia care, and new models of support.	M	M	A	Launch of regional specification for enhanced dementia care in residential and nursing care homes across NW. Development of dementia provision within 2 new Extra Care developments. These arrangements are still on track.	Chief Officer – Social Services	↔	M	M	A	Apr 2014

3. Use a whole family approach by implementing the Integrated Family Support Service

Progress Status		Progress RAG	G	Outcome RAG	G

There have been three new Flintshire families referred to IFFS this quarter, resulting in a total of 9 referrals over a 6 month period.

The IFFS team are currently working with 10 families, in various phases of the support programme. This represents a full caseload for the team, because of the intensive nature of the work.

An Information Sharing Protocol has been completed and signed by Wrexham, and has been passed to Flintshire for signature. Following this, signatures will be sought from Health and the Police.

IFSS carry out intensive work with a small number of families and it can be difficult to illustrate the positive impact of the service when viewed against the full caseload of the wider children's services. IFSS are considering commissioning a piece of work which will study the impact on the families who have worked with the service over the last four years, in order to demonstrate the positive outcomes being achieved for these people.

Achievements will be measured through:
- o Number of families receiving a service10 families
- o Average "distance travelled" score at 12 month review
- o Maintain level of repeat referrals to Children's Social Services
- o Alignment of Flintshire's policies and procedures with those of Wrexham

Achievement Milestones for strategy and action plans:
- ▪ Alignment of Flintshire's policies and procedures with those of Wrexham by December 2014 – Achieved.

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn Q1 & Q2	Performance RAG	Outcome Performance Predictive RAG
Number of families referred to IFSS (Flintshire County Council only)	Chief Officer – Social Services	13	Maintain 13	Maintain 13	9	G	G
Average "distance travelled" score at 12 month review		1.4	Maintain 1.4	TBC	Report March 2015	N/A	N/A
SCC/010a – The percentage of referrals that are re-referrals within 12 months		13%	Below 15%	Below 15%	13.9%	G	G

4. Examine the Children's Services structure with a view to remodelling the teams to create capacity to do more preventative work.

Progress Status		Progress RAG	A	Outcome RAG	G

The new operating model for the senior management arrangements for Children's Services has been agreed. Lead management arrangements for Resources and Early Years are in place. An appointment has been made for the Safeguarding and Children's lead, and the appointee will be joining the Authority in the New Year. Once all appointments are in place, a review of operating arrangements for other tiers will be undertaken.

Achievements will be measured through:
- Implementation of the new model by March 2015
- Maintain level of repeat referrals to Children's Social Services

Achievement Milestones for strategy and action plans:
- Implementation of the new model by March 2015

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn	Performance RAG	Outcome Performance Predictive RAG
SCC/016 - The percentage of reviews of child in need plans carried out in accordance with the statutory timetable	Chief Officer – Social Services	53%	82%	100%	77.8%	A	G
SCC/010a – The percentage of referrals that are re-referrals within 12 months		13%	Below 15%	Below 15%	13.9%	G	G

5. Prevent homelessness for people who are:
- **alcohol and drug dependent; and /or**
- **victims of domestic violence; and/or**
- **ex-offenders; and/or**
- **young people including care leavers**

Progress Status		Progress RAG	G	Outcome RAG	G

The homeless prevention pilot has been running for six months, this means the service is delivering a homeless prevention service for all those that present irrespective of their priority need status. The service has provided a homeless prevention service for an additional 114 cases only entitled to advice and assistance within current legislation over the last 6 months. Despite these additional cases the percentage prevented has improved.

Achievements will be measured through:
- Homeless prevention for at least 6 months for people who are:
  - alcohol and drug dependent,
  - victims of domestic abuse,
  - ex-offenders;
  - young people including care leavers
- Monitoring the success of the 6 month pilot being introduced to trial measures proposed in the Housing Bill to strengthen homeless prevention

Achievement Milestones for strategy and action plans:
Evaluate the success of the 6 month pilot being introduced to trial measures proposed in the Housing Bill to strengthen homeless prevention by January 2015.

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn	Performance RAG	Outcome Performance Predictive RAG
HHA/013 - The percentage of all potentially homeless households for whom homelessness was prevented for at least 6 months.	Chief Officer – Community and Enterprise	84.89%	90%	90%	88%	G	G
Homeless prevention for at least 6 months for people who are victims of domestic abuse.		During 2014/15 changes to recording and reporting of data will be made to systems to create a baseline for these indicators in 2014/15 so that target setting can take place for 2015/16.			N/A	N/A	N/A
Homeless prevention for at least 6 months for people who are ex-offenders.					N/A	N/A	N/A
Homeless prevention for at least 6 months for people who are young people including care leavers					N/A	N/A	N/A

6. Carry out a major review of the Transition Service and implement findings.

Progress Status		Progress RAG	A	Outcome RAG	G

Findings from the Transition Service review are implemented through the Review Action Plan, which is maintained and up to date. There is still a primary action outstanding, which is to provide young people and families with an information pack that involves every agency, to provide service users with a single pathway through transition. The development of the pack has been delayed as a result of the long-term absence of a manager in the service, which has had an impact on resources and capacity. It is unlikely that the pack will now be produced by the end of the reporting year; for this reason the target risk score has been increased.

We are planning the next service user evaluation event.

Achievements will be measured through:
- Effective transition pathway as demonstrated through the annual evaluation.

Achievement Milestones for strategy and action plans:
- Collection of feedback from service users by March 2015

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn	Performance RAG	Outcome Performance Predictive RAG
Number of people receiving Direct Payments / Citizen Directed Support.	Chief Officer – Social Services	302	320	350	**380**	G	G

Risk to be managed – How we encourage service users and carers to embrace greater independence

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
M	M	A	Implement Action Plan from Transition Review	M	M	A	The primary outstanding action resulting from the review is to provide young people and families with an information pack that involves every agency, to provide service users with a single pathway through transition. Resolve long-term absence issue.	Chief Officer – Social Services	↑	M	M	A	Jun '14

Independent Living: Risk to be managed – Managing demand and expectations with limited resources.

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	Regular performance and activity data is produced to continually monitor and project service demand. The "what matters?" conversation and the core data set have been implemented in localities and training is being rolled out to practitioners.	M	M	A	Project group established to look at redesign of website, focussing on signposting people to universal and community based services. Regional approach to Integrated Assessment to ensure consistency. The Business Plan for 2016/17 has been completed, and includes a plan for delivering efficiencies and managing and responding to demand.	Chief Officer – Social Services	↓	L	L	G	2017

This page is intentionally left blank

CYNGOR
Sir y Fflint
Flintshire
COUNTY COUNCIL

<u>**APPENDIX 2**</u>

Priority: **Living Well**
Sub-Priority: **Integrated Community Social and Health Services**
Impact: **Helping more people to live independently and well at home**

What we said we would do in 2014/15: -

1. Continue the integration of community based health and social care teams within three localities.

Progress Status		Progress RAG	A	Outcome RAG	A

Joint working with Health staff has been successfully achieved in all three locality teams. However, co-location is not progressing as quickly as anticipated, and it is now likely that co-location for the South team will not be achieved by March 2015.

Achievements will be measured through
- Development of our second co-located team in 2014/15
- Plans developed for our third and final co-located team in 2015/16

Achievement Milestones for strategy and action plans:
- Development of our second co-located team by March 2015
- Plans developed by March 2015 for our third and final co-located team in 2015/16

Risk to be managed – Ensuring effective joint working with BCUHB to achieve common goals.

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
M	M	A	Discussions take place at Health Wellbeing and Independence Board and Strategic Locality Group meetings. Issues escalated if required to the Strategic Partnership Group	M	M	A	Escalation process in place including Strategic Partnership Group, Strategic Locality Group and Locality Groups.	Chief Officer – Social Services	↑	L	L	G	2016

2. Support the introduction of Enhanced Care Service (ECS) in the North East and South Localities by March 2015.

Progress Status			Progress RAG	A	Outcome RAG	G

The business cases for ECS in the North East and South localities have been prepared. BCUHB have indicated that they will be reviewing the business case alongside a range of current approaches including intermediate care projects to identify the most suitable and appropriate model for delivering enhanced care in the community. The timescale for our receiving this agreement is uncertain.

Achievements will be measured through
- Agree and implement the business case for ECS in the North East & South Localities
- Improved experiences of patients

Achievement Milestones for strategy and action plans:
- Agree the business case for ECS in the North East Locality by November 2014
- Implement the business case for ECS in the North East Locality by March 2015
- Agree the business case for ECS in the South Locality by November 2014
- Implement the business case for ECS in the South Locality by March 2015
- Collection of a further 3 patient stories by March 2015

Risk to be managed – Ensuring that the new model does not result in unexpected increased costs to the Council

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
M	H	R	Continued dialogue at senior manager level. Awaiting decisions from BCUHB in order to assess any impact.	M	M	A	Upon receiving details of the proposed service model, consideration will be given to the impact and how we jointly look to deliver enhanced care at home	Chief Officer – Social Services	↔	M	M	A	Jun '14

Page 84

3. Ensure that effective services to support carers are in place as part of the integrated social and health services.

Progress Status		Progress RAG	G	Outcome RAG	G

Continued roll out of the successful training programme by NEWCIS, which includes a slot from Barnardos to raise awareness of the need for early identification of children with a caring role.

Data collection to evidence our work with adult carers has improved, and information from NEWCIS is regularly received. Work continues with Barnardos to ensure that information on children with a caring role is robustly captured. Evidence received from Barnardos for the first half of the year shows that more young carers have been identified than were identified for the whole of last year.

NEWCIS is setting up as a Social Enterprise with a trading arm and will be able to seek additional funding to support carers in Flintshire from this November.

A review is being prepared of the Carers' Strategy as part of the business planning process for Social Services and this will include the redefinition of carer's priorities for the next 5 years.

Achievements will be measured through
- Plans to support carers are agreed and implemented

Achievement Measure	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn	Performance RAG	Outcome Performance Predictive RAG
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.	Chief Officer – Social Services	85%	75% - 80%	90%	728/937 **77.7%**	G	G

4. Ensure Single Integrated Plan (SIP) priorities are progressed through localities.			
Progress Status	**Progress RAG**	**G**	**Outcome RAG**	**G**

The Health, Wellbeing and Independence Board have carried out a partnership self assessment and partners will be reviewing governance arrangements and ensuring that SIP priorities feature within their planning arrangements which will include links and progress with locality. The Strategic Locality Leadership Group provides a forum for escalating any areas where progress in Localities is limited.

Achievements will be measured through

- Improved communication and governance arrangements to ensure that localities deliver the priorities of the SIP.

Achievement Milestones for strategy and action plans:

- Inclusion of relevant SIP priorities in the Locality Leadership Teams plans by March 2015
- Achievement of relevant outcomes in Locality Leadership Teams plans by March 2015

5. Effective and efficient use of Intermediate Care Funds to support individuals to remain in their own homes.

Progress Status		Progress RAG	G	Outcome RAG	G

The local action plan is being progressed through a project management approach. Some of the outcomes to date are described below:

- 18 step down beds in 3 local authority care homes and 7 beds in Ty Cerrig have been used. 10 people using the local authority beds had originally requested residential care, and 6 of these people were subsequently able to return home.
- The assessment bed (for dementia) commissioned from a nursing home in Caergwrle has had over 70% occupancy for 7 people, with stays of between 7 and 28 days. A second bed is currently being commissioned in a different nursing home.
- Funding allocated to the voluntary sector to support people living at home has been used for helping people to prepare for discharge from hospital (13 people), supporting people with hoarding tendencies (12 people), helping people with dementia and their carers to access local services (8 people), and the provision of neurotherapy for counselling, relaxation and fatigue management (31 people).
- Agreement has been reached with BCUHB and Macmillan to pilot "Six Steps to Success Programme for Palliative Care" in Nursing Homes across Flintshire. The aim of the programme is to ensure people have improved end of life care with choice and control over their end of life care plans whilst increasing staff confidence and understanding of end of life care. The pilot also aims to reduce inappropriate hospital admissions and delayed transfers of care for those who are at end stage palliative care. Delivery will commence in Quarter 3.

Achievements will be measured through
- Agree and implement action plan for use of Intermediate Care Funds
- Independent evaluation of outcomes achieved

Achievement Milestones for strategy and action plans:
- Agree an action plan for use of Intermediate Care Funds by June 2014 – Achieved.
- Implement the action plan for use of Intermediate Care Funds by March 2015
- Determine process for evaluation of outcomes by March 2015

Risk to be managed – Spending the Intermediate Care Fund on services that we can continue with once the funding stream has finished.

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
M	H	R	Clear exit strategies are in place for ICF projects, including time limited posts.	L	L	G	Whilst we await formal notification we have been advised that the intermediate care fund will cease in March 2015. Projects were established on the basis that they will cease on 31st March 2015. Work will take place to ensure that effective exit strategies will be implemented, including continuity arrangements where appropriate. All posts funded through the ICF grant are fixed term until 31/3/15 which ensures this element of risk has been managed.	Chief Officer – Social Services	↔	L	L	G	Jun 2014

FLINTSHIRE COUNTY COUNCIL

REPORT TO: **SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**

DATE: **THURSDAY, 18 DECEMBER 2014**

REPORT BY: **SOCIAL CARE OVERVIEW & SCRUTINY FACILITATOR**

SUBJECT: **FORWARD WORK PROGRAMME**

1.00 **PURPOSE OF REPORT**

1.01 To consider the Forward Work Programme of the Social & Health Care Overview & Scrutiny Committee.

2.00 **BACKGROUND**

2.01 Items feed into a Committee's Forward Work Programme from a number of sources. Members can suggest topics for review by Overview & Scrutiny Committees, members of the public can suggest topics, items can be referred by the Cabinet for consultation purposes, or by County Council, or Chief Officers. Other possible items are identified from the Cabinet Work Programme and the Strategic Assessment of Risks & Challenges.

2.02 In identifying topics for future consideration, it is useful or a 'test of significance' to be applied. This can be achieved by asking a range of questions as follows:

1. Will the review contribute to the Council's priorities and/or objectives?
2. Are there issues of weak or poor performance?
3. How, where and why were the issues identified?
4. Do local communities think the issues are important and is there any evidence of this? Is there evidence of public dissatisfaction?
5. Is there new Government guidance or legislation?
6. Have inspections been carried out?
7. Is this area already the subject of an ongoing review?

3.00 **CONSIDERATIONS**

3.01 Overview & Scrutiny presents a unique opportunity for Members to determine the Forward Work Programme of the Committees of which they are members. By reviewing and prioritising the forward work programme Members are able to ensure it is member-led and includes the right issues. A copy of the Forward Work Programme is attached at Appendix 1 for Members' consideration which has been updated following the last meeting.

4.00 RECOMMENDATIONS

4.01 That the Committee considers the draft Forward Work Programme attached as Appendix 1 and approve/amend as necessary.

5.00 FINANCIAL IMPLICATIONS

None as a result of this report.

6.00 ANTI POVERTY IMPACT

None as a result of this report.

7.00 ENVIRONMENTAL IMPACT

None as a result of this report.

8.00 EQUALITIES IMPACT

None as a result of this report.

9.00 PERSONNEL IMPLICATIONS

None as a result of this report.

10.00 CONSULTATION REQUIRED

N/A

11.00 CONSULTATION UNDERTAKEN

Publication of this report constitutes consultation.

12.00 APPENDICES

Appendix 1 – Forward Work Programme

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985 BACKGROUND DOCUMENTS

None.

Contact Officer: **Margaret Parry-Jones**
Telephone: **01352 702427**
Email: **margaret.parry-jones@flintshire.gov.uk**

DRAFT

Date	Item	Purpose of Report/Session	Scrutiny Focus	Responsible/ Contact Officer	Submission Deadline
Thursday 29 January 2015 2.00 p.m.	Intermediate Care Fund update	Update report	Service Monitoring	Chief Officer Social Services	
	Reablement/Independent living progress update	Update report - Assessment team representative to be invited	Service Monitoring	Chief Officer Social Services	
	Partnership working – Localities/Mental Heath/CAMHS etc – ability to influence joint working		Partnership Working	Chief Officer Social Services	
Thursday 5 March 2015 10.00 a.m.	Collaborative projects/Regional Initiatives update	To receive a progress report on projects and services running collaboratively across North Wales and Nationally.	Partnership Working/ Performance Monitoring	Chief Officer Social Services	
	BCUHB	To maintain 6 monthly meetings with Betsi Cadwaladr University Health board			
Thursday 16 April 2015 10.00 a.m.	Q3 Performance Reporting	To enable members to fulfil their scrutiny role in relation to performance monitoring.	Performance Monitoring	Chief Officer Social Services	
	Annual Council Reporting Framework	To consider the final draft of the Flintshire County Council Social Services Annual Performance Report 2014/15.	Service Delivery	Chief Officer Social Services	

Date	Item	Purpose of Report/Session	Scrutiny Focus	Responsible/ Contact Officer	Submission Deadline
Thursday 14 May 2015 2.00 pm	Complaints & Compliments - lessons learned	To receive a report on the compliments, representations and complaints received by Social Services for the year April 2014 – March 2015.	Performance Monitoring	Chief Officer Social Services	
Thursday 18 June 2015 10.00 a.m.	Year End and Quarter 4 Performance Reporting	To enable members to fulfil their scrutiny role in relation to performance monitoring.	Performance Monitoring	Chief Officer Social Services	

Regular Items

Month	Item	Purpose of Report	Responsible / Contact Officer
January	**Safeguarding & Child Protection**	To provide Members with statistical information in relation to Child Protection and Safeguarding	Director of Community Services
March	**Educational Attainment of Looked After Children**	Education officers offered to share the annual educational attainment report which goes to Lifelong Learning OSC with this Committee	Director of Lifelong Learning
March	**Corporate Parenting**	Report to Social & Health and Lifelong Learning Overview & Scrutiny	Chief Officer Social Services
Half-yearly	**Betsi Cadwaladr University Health Board Update**	To maintain 6 monthly meetings – partnership working	Facilitator

Month	Item	Purpose of Report	Responsible / Contact Officer
May	**Comments, Compliments and Complaints**	To consider the Annual Report.	Chief Officer Social Services
Sept	**Protecting Vulnerable Adults & Inspection Action Plan Update**	To inform Members of the annual adult protection monitoring report submitted to the Welsh Government and to monitor progress of CSSIW Inspection Action Plan	Chief Officer Social Services

Joint Meeting with Lifelong Learning Spring 2015

Corporate Parenting
Safeguarding and Child Protection
Educational Attainment of Looked After Children
Hearing Impairment (Adults & Children)
Childcare Sufficiency Assessment
Youth Justice Services

Joint meeting with Housing

Extra Care/Telecare/Telehealth

Items to be scheduled following workshop held on 25th July:

Demands on Children's Services
Fostering Services
Children's Services Forum update – Chairman to update as relevant
Ambulance response times
ACRF - workshop or workshop plus task group?
Day Services proposals
Older People's Strategy Group rep to be invited – Ageing Well in Wales
Full Review of Adoption Service 12 months after implementation.
Site Visit to Arosfa
SPoA Progress Report
CSSIW Safeguarding and Care Planning Looked After Children progress report

This page is intentionally left blank