

# Public Document Pack

**Gareth Owens LL.B Barrister/Bargyfreithiwr**  
Head of Legal and Democratic Services  
Pennaeth Gwasanaethau Cyfreithiol a Democraataidd



To: Cllr Carol Ellis (Chair)

CS/TAW

Councillors: Marion Bateman, Peter Curtis,  
Adele Davies-Cooke, David Evans, Veronica Gay,  
Cindy Hinds, Stella Jones, Brian Lloyd, Mike Lowe,  
Dave Mackie, Hilary McGuill, Gareth Roberts,  
Ian Smith and David Wisinger

2 May 2013

Tracy Waters 01352 702331  
tracy.waters@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, 9TH MAY, 2013** at **2.00 PM** 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 - 8)

To confirm as a correct record the minutes of the meeting held on 11 April 2013.

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County Hall, Mold. CH7 6NA  
Tel. 01352 702400 DX 708591 Mold 4  
[www.flintshire.gov.uk](http://www.flintshire.gov.uk)  
Neuadd y Sir, Yr Wyddgrug. CH7 6NR  
Ffôn 01352 702400 DX 708591 Mold 4  
[www.siryfflint.gov.uk](http://www.siryfflint.gov.uk)

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

- 4 **PROVISION OF HEALTH AND SOCIAL CARE SERVICES, BY THIRD SECTOR ORGANISATIONS IN FLINTSHIRE** (Pages 9 - 12)  
Report of Flintshire Local Voluntary Council enclosed.
- 5 **ANNUAL REPORT ON THE SOCIAL SERVICES REPRESENTATION AND COMPLAINTS PROCEDURE 2012-13** (Pages 13 - 26)  
Report of Director of Community Services enclosed.
- 6 **TRANSFORMATION OF DOUBLE CLICK TO A SOCIAL ENTERPRISE** (Pages 27 - 32)  
Report of Director of Community Services enclosed.
- 7 **TRANSITION UP-DATE** (Pages 33 - 36)  
Report of Director of Community Services enclosed.
- 8 **SOCIAL SERVICES AND WELL-BEING (WALES) BILL** (Pages 37 - 46)  
Report of Director of Community Services enclosed.
- 9 **FORWARD WORK PROGRAMME** (Pages 47 - 52)  
Report of Environment & Social Care Overview & Scrutiny Facilitator enclosed.

# Agenda Item 3

## **SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**

**11 APRIL 2013**

Minutes of the meeting of the Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held at Delyn Committee Room, County Hall, Mold CH7 6NA on Thursday, 11 April 2013

**PRESENT: Councillor Cindy Hinds (Vice-Chair in the Chair)**

Councillors Marion Bateman, Stella Jones, Brian Lloyd, Dave Mackie, Hilary McGuill, Gareth Roberts, Ian Smith and David Wisinger

**APOLOGIES:**

Councillors: Carol Ellis and Veronica Gay

**CONTRIBUTORS:**

Cabinet Member for Social Services, Director of Community Services, Head of Social Services for Children and Head of Social Services for Adults

Manager of Emergency Duty Team for minute number 80

Senior Manager for Partnership, Development and Performance for minute numbers 81 and 82

Planning and Development Officer for minute number 81

Performance Team Manager for minute number 82

**IN ATTENDANCE:**

Environment and Social Care Overview and Scrutiny Facilitator and Committee Officer

**78. DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)**

Councillor H.J. McGuill declared an interest as a member of the Community Health Council.

**79. MINUTES**

The minutes of the meetings of the Committee held on 28 January and 28 February 2013 had been circulated to Members with the agenda.

**Matters Arising**

Councillor I. Smith indicated that he had not received a response to his question about how many children were affected by the Welfare Reform Act changes. The Director of Community Services indicated that he would ensure that a written response was provided.

**RESOLVED:**

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

## 80. EMERGENCY DUTY TEAM UPDATE

The Director of Community Services introduced a report on the update on the joint Wrexham, Flintshire and Denbighshire Emergency Duty Team based in Wrexham. He also introduced Mr. Mike Bell who was the Manager of the Emergency Duty Team based in Wrexham.

The Director explained that the service was well established and stable and would reach its fifth anniversary in June 2013. He reminded Members that this service was for emergency social work and should not be confused with Galw Gofal. The aims of the report were to provide an update and to seek the views of Members and make them aware of the proposal to allow Conwy County Council to become a Member of the North East Wales Emergency Duty Team (NEWEDT).

The Manager advised that the report highlighted the developments made in the NEWEDT and the action points which had been identified as a result of the workshop review. Further enhancement of information systems had been achieved with the implementation of a new enhanced electronic data set which captured performance activity which in turn would inform future planning and service strategy to better target resource allocation. Details of the review of 2012-13 service outcomes, performance indicators and performance data were reported along with the key service objectives for 2013-14. The Manager explained that the performance data for staff attendance was not due to staff sickness (which was only 2% in the service) but to a range of reasons including the example of absence due to staff attending training. He also explained that not all calls could be answered by the Out of Hours team as they were not able to be in the office all of the time but that when this was not possible, the calls were answered by the call centre who would contact the officers if there was an urgent need.

Councillor H.J. McGuill felt that the report did not include enough information. She queried the number of social workers in the NEWEDT and whether the appointment of four additional social workers meant that the service had been operating below capacity. In response, the Manager said that there were ten members of staff in the team and that the four sessional social workers had been appointed to provide cover so were in addition to the team of ten. Councillor McGuill also requested further information on the breakdown of calls for children and adults, and whether the calls were from hospitals because patients were being discharged and requested a breakdown of the 299 calls listed as 'other'. The Manager confirmed that he would provide the information requested. In response to a comment from Councillor McGuill that she wanted to ensure that the team were not taking on unnecessary referrals from hospitals, the Director of Community Services said that referrals from health would be monitored going forward.

Councillor S. Jones queried the need to agree a common format referred to in the report as she felt that this should already be in place. The Director explained that this referred to a common format for reports to Partner Authority Scrutiny Committees and did not refer to the service itself. Councillor H.G. Roberts queried the number of calls received from the Adult Services under 65 service user group. In response to a query from Councillor McGuill, the Director

provide details of the types of calls received by the team and advised that future update reports could include case studies to provide more detail for Members.

Councillor D.I. Mackie asked how this Committee could assist if a situation arose where the team was insufficiently staffed even though the Manager was based in, and reported to, Wrexham County Borough Council. He raised concern that the Committee did not have access to officers as it would if the team were based in Flintshire. In response, the Director said that any concerns could be raised with him and he would report the comments and concerns to the Governing Board. He advised that it was a three county partnership but that governance which had been agreed by all of the authorities involved was in place.

The Chair suggested that further update reports be received by the Committee.

**RESOLVED:**

- (a) That the report be noted;
- (b) That the proposal to allow Conwy County Council to join the partnership be agreed;
- (c) That update reports be submitted to future meetings of the Committee;
- (d) That further information on the breakdown of calls for children and adults, whether the calls were from hospitals because patients were being discharged and a breakdown of the 299 calls listed as 'other' be provided to Members.

**81. ANNUAL COUNCIL REPORTING FRAMEWORK**

The Director of Community Services introduced a report to present the final draft of the Social Services Annual Performance Overview Report to the Committee and to seek any final views and comments on both the content and proposed layout before approval by Cabinet.

The final version of the report had been prepared following an in-depth review of current performance by service managers, planning and performance officers and a period of consultation and challenge including a Member Task and Finish Group. The report was a summary of the assessment of the Council's overall Social Services performance, benchmarking the Council against the key areas identified in the Strategy for Sustainable Social Services for Wales in anticipation of the Social Services and Well Being Bill. It also identified the targets for the year ahead. The Director referred to "Double Click" Design Work scheme for Mental Health service users, who had prepared the mock up pages for the final version of the report.

The Senior Manager for Partnership, Development and Performance confirmed that the comments of the Task and Finish Group had been incorporated into the draft report.

Councillor S. Jones felt that the first priority listed within the draft report should include the word 'care'. The Director responded that the priorities listed were for 2012/13 and that the priorities for 2013/14 were being worked on and that he would feed back the comment. Councillor H.J. McGuill requested that the pages numbers for each section be included on the contents page and that each section start on a new page. Councillor D.I. Mackie said that it was difficult to read documents in landscape. The Senior Manager for Partnership, Development and Performance said that the comment on the format of the document would be fed back to "Double Click".

The Chair welcomed the report and spoke of the achievements by Social Services and the work that had been undertaken.

**RESOLVED:**

- (a) That Members endorse the final draft for consideration by Cabinet; and
- (b) That the comments on the styles proposed by "Double Click" be fed back.

**82. SOCIAL & HEALTH CARE QUARTER 3 SERVICE PERFORMANCE REPORTS**

The Environment and Social Care Overview & Scrutiny Facilitator introduced a report to request that the Committee note and consider the 2012/13 Quarter 3 service performance reports, note the update on the Strategic Assessment of Risks and Challenges (SARC) contained within the performance reports, note the progress made against the Improvement Targets and note the further detail relating to Disabled Facilities Grants.

**Social Services for Children**

The Head of Social Services for Children gave a short presentation on the performance within the service area, outlining work which had been undertaken to improve performance and areas where improvement was needed, as outlined within the report.

In response to a request from Councillor H.J. McGuill on further information on indicator SCY/001a, the Head of Social Services for Children advised that she would provide a written response. Councillor M. Bateman felt that an explanation including the numbers of those affected should be shown alongside the percentage figures. Councillor S. Jones asked about the average of 350 calendar days taken to deliver a Disabled Facilities Grant (DFG). The Head of Social Services for Adults said that adaptations for children were more complex than those for adults but said that it was hoped that there would be an improvement in the figure in the future. The Head of Social Services for Children added that the adaptations had to be sustainable.

Councillor McGuill sought assurance that assessments were future proof but the Senior Manager for Partnership, Development and Performance advised that it may be obvious at the time of the assessment that a child would require a wheelchair in the future, but the parents may not be ready to accept that and

therefore some of the delays in DFGs occurred because of the need to identify the right solution for the longer term.

### Development and Resources

The Director of Community Services gave a short presentation on the performance within Development and Resources, outlining work which had been undertaken to improve performance and areas where improvement was needed, as outlined within the report.

He explained that an open day for Llys Jasmine was to be held at the Daniel Owen Centre on 24 April 2013. Of the 60 units at Llys Jasmine, 15 were designed specifically for people with dementia.

In response to a question from Councillor S. Jones on the relationship with the Local Health Board and the impacts on public and primary health, the Director said that there were some signs of encouragement but that further work still needed to be undertaken. He spoke of home enhanced care provision and on the issue of dementia, he said that there was a need to ensure that there was not significant movement of patients from hospital into the community without the required funding. He spoke of proposals around a community based service and the Head of Social Services for Adults said that enhanced care was a challenge and that the resources needed to be in place to support those who needed assistance.

The Cabinet Member for Social Services advised that the Authority was working with Betsi Cadwaladr University Health Board (BCUHB) about funding for the enhanced care service. Councillors McGuill and Bateman raised concern about care for those with dementia and Councillor D.I. Mackie suggested that the issue could be included in the Forward Work Programme. The Environment and Social Care Overview & Scrutiny Facilitator suggested that the issue could be raised when BCUHB attended the Committee meeting in June 2013. The Head of Social Services for Adults also suggested that BCUHB provide an update on the specialist dementia nurse.

### Social Services for Adults

The Head of Social Services for Adults gave a short presentation on the performance within Adult Social Services, outlining work which had been undertaken to improve performance and areas where improvement was needed, as outlined within the report.

In response to a question from Councillor D.E. Wisinger about the impact of the 'bedroom tax', the Head of Social Services for Adults explained that the impacts had not fed through yet but that the situation, including the impact on mental health, would be monitored.

Councillor H.J. McGuill asked whether the 'man in the van' pilot had finished. The Head of Social Services for Adults confirmed that the pilot scheme had ended and that an update would be provided in the quarter 4 report.

Councillor McGuil said that she found the process map on the Disabled Facilities Grants confusing. The Head of Social Services provided further detail and explained that the process map would not apply if it was a life threatening case. He also provided a detailed response to a question from Councillor McGuil on the table on page 127.

**RESOLVED:**

- (a) That the reports be received;
- (b) That Betsi Cadwaladr University Health Board be advised about the concerns of Members about care for those with dementia and that they be asked for an update on the specialist dementia nurse; and
- (c) That a written response be provided on performance indicator SCY/001a in the Social Services for Children report (the percentage change in the average number of hours of suitable education, training or employment children and young people receive while within the youth justice system by children and young people of statutory school age).

**83. FORWARD WORK PROGRAMME**

The Environment and Social Care Overview and Scrutiny Facilitator introduced a report to consider the Forward Work Programme of the Committee.

She explained that a joint meeting with Lifelong Learning Overview and Scrutiny Committee was due to take place on Tuesday, 11 June 2013. The Facilitator also detailed the items which were due to be considered at the meeting scheduled for 9 May 2013 and advised that the Head of Adult Services had asked that a report on 'Double Click' be considered at that meeting.

The items scheduled for the meetings on 20 June and 25 July were also detailed and the Facilitator explained that the Directorate Plan needed to be considered at a future meeting and that she would discuss this with the Chair and Vice-Chair. The Ambulance Trust had agreed to attend the meeting on 25 July 2013. Dates were still being discussed for the workshops which had been requested on Welfare Reform and Public Law Outline but all Members were to be invited to both workshops. Following a suggestion by the Facilitator, Members agreed that it would be appropriate to delay the Welfare Reform workshop until September 2013.

**RESOLVED:**

That the Forward Work Programme be approved subject to the amendments identified.

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

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



(The meeting started at 10.00 am and ended at 11.29 am)

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**Chair**

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## FLINTSHIRE COUNTY COUNCIL

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

**DATE:** **THURSDAY 9<sup>TH</sup> MAY 2013**

**REPORT BY:** **FLINTSHIRE LOCAL VOLUNTARY COUNCIL**

**SUBJECT:** **PROVISION OF HEALTH AND SOCIAL CARE SERVICES, BY THIRD SECTOR ORGANISATIONS IN FLINTSHIRE**

### **1.00 PURPOSE OF REPORT**

- 1.01 To update committee and demonstrate the range of health and social care services in Flintshire provided by third sector organisations.
- 1.02 To inform committee of third sector involvement in commissioning of health and social care services.

### **2.00 BACKGROUND**

- 2.01 The third sector refers to community associations, self help groups, charities, faith groups, voluntary organisations, social enterprises and housing associations.
- 2.02 Across Flintshire, third sector organisations provide an extensive range of health and social care services and activities, which contribute significantly to the management of specific health conditions; support carers; support vulnerable people; provide home care and support; befriending; advocacy; counselling; self help; provision of health related information and advice; volunteer development.
- 2.03 With increasing demand across social services, alongside a difficult financial outlook for all public services, social service policy and legislation is, seemingly, heading in a direction of change to make social services sustainable.
- 2.04 There is increasing expectation on public and third sector organisations to deliver more with less, thus requiring effective pooling of existing resources.

### **3.00 CONSIDERATIONS**

- 3.01 With a duty on social services and the NHS to collaborate in the delivery of integrated services, including the expectation of the use of

pooled budgets and other flexibilities, third sector organisations are well placed to respond.

- 3.02 There are a number of third sector organisations (currently approximately 20), in Flintshire, commissioned by Flintshire County Council and /or Betsi Cadwaladr University Health Board (BCUHB) to deliver health and social care services.
- 3.03 There are a large number of organisations who do not receive funding from the public sector, which provide a range of health and social care related activities.
- 3.04 Locally based third sector organisations are fundamental to the provision of a range of accessible and appropriate services to enable individuals to maintain independence within the community.
- 3.05 A small number of third sector organisations have effective working links and provide services which support both the FCC re-ablement team and Crisis Intervention team. This joint working is crucial to enable individuals to remain at home, avoiding nursing care or hospital admission.
- 3.06 The third sector is involved in the planning and intended delivery of Enhanced Care across Flintshire.
- 3.07 The presentation slides (available at meeting) provide an overview of third sector provision of health and social care services across Flintshire.
- 3.08 Much of the third sector provision of health and social care services in Flintshire contributes to the effective implementation and delivery of strategic plans such as Flintshire Carer's Strategy, Together for Mental Health, Families First.
- 3.09 Third sector service provision also enables the local authority and BCUHB to meet statutory requirements such as the mental health measure and the undertaking of carer's assessments.
- 3.10 Commissioning is the process of specifying, securing and monitoring services to meet people's needs at a strategic level. This applies to all services, whether they are provided by the local authority, NHS, other public agencies or by private or voluntary services.
- 3.11 Commissioning is essentially a cycle which starts with identifying needs and leads to securing the services that most appropriately address the needs and wishes of the individual service user. Services are monitored and reviewed and the results feed into the next cycle of planning and delivery.

- 3.12 In very recent years, third sector involvement and contribution to commissioning of health and social care services across Flintshire and North Wales has varied greatly.
- 3.13 A consistent approach to the involvement of the third sector, in the commissioning of health and social care services is lacking with variations apparent, across organisations and departments.
- 3.14 This presents a number of challenges for the sector which impact negatively on the opportunity to develop the optimum model of service delivery.
- 3.15 Voluntary organisations, as a sector, are well placed to provide meaningful contribution to the full commissioning process including planning, service development, purchasing services and monitoring and evaluation.
- 3.16 There are existing mechanisms and networks in the third sector to enable some elements of this to happen.

#### **4.00 RECOMMENDATIONS**

- 4.01 The contribution and provision of health and social care services by third sector organisations across Flintshire, is noted.
- 4.02 The committee supports the recommendation from FLVC to develop and adopt, with appropriate officers from Flintshire County Council, guidance for involving the third sector in commissioning, in its broadest definition.
- 4.03 FLVC provide an annual overview of third sector health and social care service provision, to the scrutiny committee.

#### **5.00 FINANCIAL IMPLICATIONS**

- 5.01 The development and implementation of County commissioning guidance will influence the most effective and resourceful allocation of funding.

#### **6.00 ANTI POVERTY IMPACT**

- 6.01 Third sector organisations provide services to and support the most vulnerable people in our society. As highlighted in the attached presentation some services and activities exist due to the number of people experiencing poverty and it is the aim of the organisation to prevent people becoming further impoverished and to support them to increase their income.

**7.00 ENVIRONMENTAL IMPACT**

7.01 N/A

**8.00 EQUALITIES IMPACT**

8.01 Third sector organisations provide services to and support the most vulnerable people in our society. As highlighted in the attached presentation some services and activities exist to support people who may be experiencing difficulties due to a disability, race, or gender

8.02 There are a number of third sector organisations which exist to positively promote and lobby on behalf of particular population groups. Their aim is to have a positive impact on equality.

**9.00 PERSONNEL IMPLICATIONS**

9.01 None arising from this report.

**10.00 CONSULTATION REQUIRED**

10.01 None

**11.00 CONSULTATION UNDERTAKEN**

11.01 'Realising the Potential' research report into commissioning of third sector by BCUHB, April – September 2011

11.02 Third sector role in Enhanced Care January 2013

11.03 Falls – Third sector provision in Flintshire February 2013

11.04 Flintshire Third sector forum February 2013 - Third sector involvement in public sector commissioning.

**12.00 APPENDICES**

12.01 None.

A presentation – Third Sector Provision of Social Care Services, in Flintshire will be delivered at the meeting.

**LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985  
BACKGROUND DOCUMENTS**

None.

**Contact Officer: Kate Newman Health and Social Care Facilitator  
Flintshire Local Voluntary Council**

**Telephone: 01352 744003**

**Email: [kate.newman@flvc.org.uk](mailto:kate.newman@flvc.org.uk)**

## FLINTSHIRE COUNTY COUNCIL

**REPORT TO:** **SOCIAL AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE**

**DATE:** **THURSDAY 9<sup>TH</sup> MAY 2013**

**REPORT BY:** **DIRECTOR OF COMMUNITY SERVICES**

**SUBJECT:** **ANNUAL REPORT ON THE SOCIAL SERVICES REPRESENTATIONS AND COMPLAINTS PROCEDURE 2012 - 13**

### **1.00 PURPOSE OF REPORT**

1.01 To report on the compliments, representations and complaints received by Adult and Children Social Services for the year April 2012 to March 2013.

### **2.00 BACKGROUND**

2.01 The NHS and Community Care Act (1990), Children Act (1989 Part III) and the National Minimum Standards and Regulations (2002) for Fostering Services require local authorities to maintain a representations and complaints procedure for social services functions. The Welsh Government (W.G.) expects each local Authority to report annually on its operation of the procedure.

2.02 Feedback in the form of compliments and complaints from service users, their parents or carers can highlight where services are working well or where services need changing. Flintshire County Council wants to learn from this feedback and use the experiences to improve services for everyone who uses them.

2.03 The annual report contains information about the number and type of complaints received and also provides details of the activities undertaken by the Complaints Officer to develop the service.

### **3.00 CONSIDERATIONS**

#### **3.01 Review of Complaints and Compliments – Adult Social Services**

##### **3.1.1 Overview of Complaints – Adult Social Services**

51 complaints were received in the year, a decrease compared to previous years (89 during 2011-12 and 76 during 2010-11).

4 complaints in the year progressed to Stage 2 of the procedure (independent investigation), a significant fall compared to last year (10 during 2011-12). These statistics should be considered against the number of service users receiving a service: TBC during 2012-13.

1 complaint was considered at a Stage 3 Panel Hearing: the Panel concurred with the Department's actions in the case and did not uphold the complaint.

### 3.1.2 Services complained about:

<b>Service</b>	<b>2012-13</b>	<b>2011-12</b>	<b>2010-11</b>
Older People - Care Management	9	11	9
Older People – Intake	4	3	4
Financial Assessment	1	3	6
Community Support Service (Previously known as Home Care)	1	24	12
Independent Sector	9	8	15
Learning Disability	12	11	14
Mental Health and Substance Misuse	4	6	1
Occupational Therapy	2	6	3
Physical Disability and Sensory Impairment	2	8	4
Transition	3	0	0
Residential	0	5	4
Other	4	0	3
<b>Total number of complaints</b>	<b>51</b>	<b>89</b>	<b>76</b>
<b>Total number of service users</b>	<b>TBC</b>	<b>5,047</b>	<b>4,561</b>

There has been a significant fall in the number of complaints made regarding Adult Social Services (a reduction of 43%). This may be attributed to the fact that only one complaint regarding Community Support Services was made during the year when last year a total of 24 were received (these were mainly about late visits). This welcome decrease could be attributed to a range of areas including the embedding of the new rota system staff plan; the scheduling of work programmes with a new electronic access for managers at home and all staff now have mobile phones, which have all improved communication.

Following restructuring of the service, e.g. moving to Living Well and Reablement Services, staff and service users have more autonomy to agree when the package of care is delivered.

Also of particular note is the zero complaints received about Residential Services, compared to the several received in recent years.



The Complaints Officer is also proactive with Managers across the Department to resolve issues before they escalate further and the complaints service is continuously promoted with Managers and staff via attendance at team meetings. A series of training workshops has also been developed for Managers and Senior Practitioners (see 3.10).

### Older People Care Management

9 complaints made about care management issues were considered in the year. They ranged from disagreements with decisions made, staff not following procedures, a lack of communication and alleged breaches in confidentiality. These were resolved by explaining decisions and subsequent actions, confirming procedures had been followed and apologising where appropriate for lapses in communication.

2 complaints were dealt with at Stage 2 of the procedure. One complaint related to the standard of care provided to a complainant's wife who had dementia – the complaint was not upheld as the investigation found processes had been followed. The second complaint related to the Department's decision to place a complainant's partner in a care home rather than in her own home with direct payments. The complaint was not upheld and found the Department had acted in the individual's best interests and in accordance with the family's wishes. This latter complaint was also considered at Stage 3 – the Panel concurred with the Department's actions in this matter.

### Older People – Intake

The four complaints related to breakdowns in communication following discharges from hospital, a family not being involved in an assessment and a service user not being able to attend Croes Atti for personal safety reasons. Resolutions included apologies being made where appropriate; a reassessment is being completed with the family, and agreement to attend half day sessions at Croes Atti whilst OT completed an assessment.

### Financial Assessment

A family complained that they had not been informed their mother's case would be transferred to another county when she moved from Flintshire. Information should have been provided at the time of the move and information literature has been revised to reflect this.

### Community Support Service

One complaint was received during the year. The complaint related to a package of support not being in place following a hospital discharge. A support package was quickly put in place that afternoon, an apology made and a review on processes is to be completed to avoid a similar incident happening in the future.

### Independent Sector

The 9 complaints included: a care package being cancelled, concerns re. the standard and quality of care provided by homes, staff damaging personal property and a family being charged for emergency callouts. These were resolved with an apology where appropriate, POVA procedures being instigated regarding the standard of care provided, a package of care being reviewed, reimbursement for property accidentally damaged and callout bills being cancelled.

Of these 9 complaints, 3 related to issues of dignity and the standards of care and support provided.

### Learning Disability

The 12 complaints included an incident between two service users in their workplace, an individual having to attend meetings at a venue where they weren't comfortable, and a service user being taken on a trip out which wasn't deemed suitable by her family.

Responses to these issues included: workplace arrangements being reviewed, reminding an individual that meetings had to be in a safer environment following her assault against staff, and explaining to the family that their daughter had asked to accompany staff and friends on the trip out; there was no risk involved and the individual concerned enjoyed their trip out.

### Mental Health and Substance Misuse

The 4 complaints related to a lack of service provision, being turned down for direct payments and professionalism of staff during drop-in sessions.

These were resolved by explaining previous appointments to discuss services had been cancelled by the complainant themselves but they were encouraged to participate in support groups and signposted to their G.P. if counselling needed. Other resolutions included explaining the criteria for direct payments and explaining what other options there were available, and offering mediation where appropriate.

### Occupational Therapy

Of the 2 complaints made, one related to having to wait 10 months for a shower to be installed. An apology was made. The other complaint related to a piece of equipment causing injury to a service user. Upon further examination, it was found the equipment concerned was not Council property (and no major fault was found).

### Physical Disability and Sensory Impairment

The 2 complaints related to an appeal against a Waiver Panel decision

and live-in carer arrangements, and appealing against arrears accrued for care costs.

These were resolved by clearly explaining Panel's decision and reviewing the service user's personal circumstances and their care arrangements. The other complainant had previously agreed to pay back the arrears but a re-assessment was offered so they could pay back the arrears without undergoing personal financial hardship.

### Transition

The 3 complaints included issues about case management and a family moving into Flintshire but not meeting the eligibility criteria.

They were resolved by reviewing the case management arrangements and reconsidering support that could be provided under the Children Act.

### Other

Complaints related to Workforce Development, Transport and Appointeeships. The complaint involving Appointeeships was dealt with under Stage 2 and an action plan drawn up to resolve outstanding issues. A complaint, appealing against a decision re. transport was also investigated at Stage 2; the complaint wasn't upheld.

### 3.1.3 A variety of methods are used to resolve a complaint. Methods include:

A range of outcome examples are reported in the examples above, but in broad terms, complaints are responded by:

- A meeting with the complainant to discuss the concerns
- A written explanation as to the reasons for a decision
- An apology where appropriate
- Action taken to review a decision
- Independent investigation
- Mediation

### 3.1.4 Timescales

The legislation prescribes a 10 working day timescale for Stage 1 and a 25 working day timescale for Stage 2. During 2012-13, 86% of Stage 1 complaints were addressed within 10 working days, a slight fall compared to last year's 89%. However, the reasons for the majority of late responses were unavoidable, either due to the range and complexity of issues involved, or key staff being on leave. Where it is likely there may be a delay in responding, complainants are always kept informed with an explanation and an apology.

All 4 of the Stage 2 complaint investigations were completed within the statutory timescale.

### 3.1.5 Outcomes / Lessons Learned

Learning from complaints is important and we use the findings and outcomes to inform policy and practice in delivering services (known as the 'lessons learned' process). Examples of action taken on issues raised as a result of complaints to Adult Social Services include:

- Review completed of P.O.V.A. procedures and training for staff revised to reflect changes
- A reminder issued to staff to be mindful of how they record their own views or perceptions in minutes or case notes. Reflective practices in training also revised to take account of this.
- That future policy decisions take into account the impact of implementing new policies across locality areas (rather than implementing on a county-wide basis). The Equality Impact Assessment process now takes this into account.
- 40 plus recommendations were implemented or met following two separate Stage 2 investigations to improve service delivery in a range of areas including the Learning Disability Service and Appointeeships.

### 3.1.6 **Compliments - Social Services for Adults**

Social Services for Adults received 140 compliments in the year 2012-13. One of the reasons for this decrease compared to previous years is the way in which compliments are now recorded. Only compliments where it is recognised staff have done "over and above" what is expected are now logged and reported upon.

This figure, when compared with 51 received complaints, shows that the service received 174% more compliments than complaints. The number of compliments recorded within each area of work is shown in the following table:

<b>Team</b>	<b>Compliments 2012-13</b>	<b>Compliments 2011-12</b>	<b>Compliments 2010-11</b>
Older People Care Management	18	30	18
Older People - Intake	18	17	15
Community Support (Homecare)	11	13	13
Independent Sector	2	3	2

Learning Disability	9	38	30
Mental Health and Substance Misuse	22	24	15
Occupational Therapy	16	38	14
Physical Disability and Sensory Impairment	7	16	11
Residential	24	12	11
Other	13	12	1
<b>Total</b>	<b>140</b>	<b>203</b>	<b>130</b>

#### Older People Care Management

18 compliments were received for the work of Older People Care Management Teams. Service users and their families also expressed their appreciation of the high quality care provision through schemes such as Living Well and Direct Payments.

#### Older People – Intake

Service users and their families expressed 18 compliments about the quality of service provided at day centres, and by the Hospital Social Work Team and Reablement.

#### Independent Sector

2 compliments were received praising the contributions of independent service providers from Aston Hall Residential Home and Everycare Domiciliary Care Providers.

#### Learning Disability

Service users and their families expressed 9 compliments for the Learning Disability Teams. These related to care management and provision of other services such as Supported Living, Day Opportunities and Work Options etc. Others praised Rowley's Pantry and Castle Connections.

#### Mental Health and Substance Misuse

22 compliments related to Mental Health and Substance Misuse care as well as the services provided by Next Steps and Social Links projects.

#### Physical Disability and Sensory Impairment

7 compliments were received for work with service users with Physical Disabilities and Sensory Impairment and the Blue Badge Scheme.

#### Other

13 other compliments were received regarding NEWCES stores, Appointeeship, Financial Assessment Team, Flintshire Sounds and Wrap training programme.

## 3.2 Review of Complaints and Compliments – Children’s Social Services

### 3.2.1 Overview of Complaints – Children’s Social Services

57 complaints were received in the year, a slight increase compared to previous years (42 in 2010 -11 and 54 in 2011-12). This is against a backdrop of TBC referrals received during the year.

Despite the small increase in the number of complaints received year on year within Children’s Social Services (5% increase), it is a consistent pattern and reflects the proactive way in which information about making a complaint is shared with children, young people and their families.

5 complaints progressed to Stage 2 of the complaints procedure (compared to 3 during 2011-12). The Service did what it could to resolve the issues at Stage 1 at both a Team Manager and Service Manager level, but the complainants remained dissatisfied and requested their respective issues progress further.

No (zero) Stage 3 Panel Hearings were held re. Children’s Social Services during the year.

The Public Services Ombudsman for Wales published a report following their investigation into a complaint. The complaint related to the failure to deal appropriately with a referral from a Health professional in October 2009. The report highlighted a number of shortcomings in the management of the case and made 8 recommendations in total, which the Department has agreed to implement.

### 3.3 Services complained about:

Team	Complaints 2012-13	Complaints 2011-12	Complaints 2010-11
Childcare Fieldwork	36	38	25
Resources (Family Placement and Family Adolescent Support Team)	9	4	5
Children’s Integrated Disability Service (C.I.D.S.)	9	7	10
Commissioned Provider	1	2	0
Child Care Panel	0	2	0
Safeguarding Unit	1	1	2
Emergency Duty Team	1	0	0
<b>Total number of complaints</b>	<b>57</b>	<b>54</b>	<b>42</b>
<b>Total number of referrals</b>	<b>TBC</b>	<b>821</b>	<b>606</b>

## Childcare Fieldwork

36 complaints were considered in the year. The themes included: issues around communication, disputes between parents, breaches in confidentiality, procedures not being followed and disagreements with decisions/courses of action taken by the Service.

Resolutions included face to face meetings with the relevant Team Managers and Service Manager, and reminding staff that service users should be fully aware of progress with their particular case, that they understood the courses of action taken and rationale, and were clear as to the outcome. Apologies were made where the quality or level of service fell below expectation.

Three complaints progressed to Stage 2. One looked after young person appealed against a decision to move her from a placement out of county where she had settled. She had been informed the placement was only temporary whilst other more suitable options were explored, and the foster carers concerned were only approved for short term placements (as per their personal wishes).

One child in need complained that her concerns about her brothers' wellbeing weren't taken seriously. The investigation found her concerns had been taken seriously but work with the family was over a period of months which may have felt to the child concerned that little or no action was being taken. The Children and Family Court Advisory and Support Service (C.A.F.C.A.S.S.) were involved whilst her parents' case was heard in Court.

A Stage 2 complaint from a parent regarding the management of a case whilst her children were removed from her care was mostly upheld. An action plan to improve practice with regard to children placed voluntarily in the care of the Local Authority is in the process of being implemented.

## Resources Service

The 9 complaints included decisions taken around foster placements, issues regarding staff or foster carers, or recording issues.

These complaints were resolved by meeting with complainants and explaining the reasons behind decisions taken, records being revised and apologies made where appropriate.

Part of the Stage 2 made by the parent regarding Fieldwork also related to Resources Services.

## Children's Integrated Disability Service (C.I.D.S.)

The 9 complaints ranged from issues around adaptations, direct payments, case management decisions and advice provided to parents.

These were again resolved by meeting with complainants and explaining the reasons behind decisions taken or advice given.

Two complaints progressed to Stage 2 around the Service's overall management of individual cases: neither complaint's were upheld.

#### Commissioned Service Provider

One complaint was made concerning Action for Children which related to an assessment completed by their Family Project. They met with the complainant and explained all assessments were undertaken as sensitively as possible but issues may arise which cause can upset. Counselling was also offered.

#### Safeguarding Unit

The complaint related to the possible impartiality of a case conference Chair following a conversation the complainant had with them prior to the conference being held. They were reassured their conversation did not influence the situation and that any conclusion reached was a multi-agency decision.

### 3.4 Methods Used to Resolve Complaints

As explained earlier, a variety of methods are used to resolve complaints. These include:

- Meeting with the complainant to discuss their concerns and resolve them there and then, face to face.
- Providing a written explanation as to the reasons for a decision taken.
- Taking action in light of any decision reached.
- Commissioning an independent file audit in appropriate cases.
- Referring the complainant for an independent Stage 2 investigation.

All complainants receive an apology where the quality or level of service has fallen below expectation.

### 3.5 Outcomes / Lessons Learned

Learning from complaints is important and we use the findings and outcomes to inform policy and practice in delivering services. Examples of action taken on issues raised as a result of complaints to Children's Social Services include:

- Fieldwork, Resources and IRO's met to agree ways how they can improve communication between services
- A new mediation process is to be trialled for parents in dispute with each other so childcare arrangements can continue with minimal



disruption (e.g. weekend arrangements, collections to and from school etc.).

- Existing training for staff was strengthened to assist staff in situations where service users are distressed (empathy)
- A comprehensive action plan is in the process of being implemented following a report by the Ombudsman into the failure to deal appropriately with a referral from a Health professional in 2009.

### 3.6 Timescales

During 2012-13, 80% of Stage 1 complaints were addressed within 10 working days, an improvement on previous years (70% in 2011-12 and 57% in 2010-11). It was also encouraging to note that the last two quarters of the year saw the number increase to 90% within timescale. Again, some delays are unavoidable because of key staff being on leave etc.

4 out of the 5 Stage 2 complaint investigations were completed within the statutory timescale. One was late as it related to several parts of Children's Social Services and was a complex investigation.

### 3.7 Compliments – Social Services for Children

Social Services for Children recorded 57 compliments in the year 2012-13 from families and the Courts and additional 10 compliments relating to the work of the Youth Justice Service. They were in the form of cards and letters or praise expressed during Court proceedings. This figure, when compared with 42 received complaints, shows that the service received 59% more compliments than complaints. The number of compliments recorded within each area of work is shown in the table below:

<b>Team</b>	<b>Compliments 2012-13</b>	<b>Compliments 2011-12</b>	<b>Compliments 2010-11</b>
Childcare Fieldwork	22	31	30
Resources (Family Placement and Family Adolescent Support Team)	29	30	28
Children's Integrated Disability Service (C.I.D.S.)	5	6	8
Safeguarding Unit	1	2	0
Youth Justice Team	10		
<b>Total</b>	<b>67</b>	<b>69</b>	<b>64</b>

### 3.8 Other Developments

The Complaints Officer is Chair of the All Wales Complaints Officers Group and represents the Local Authority on the North Wales Complaints Officers Group. The All Wales Group discusses new or revised policies, guidance and initiatives whilst the North Wales Group focuses more on developing the complaints process at a regional level. This includes the development of a shared framework to streamline processes across the region and ensure better consistency, e.g. recruiting independent people, negotiating a single hourly rate for investigations and maintaining a central database to hold independent people's records.

In early 2012, the Welsh Government produced a consultation paper: 'Making Things Better'. The paper explored proposed changes to managing complaints about Social Services in Wales, including the removal of the Stage 3 process (Independent Review Panel) and the role of the Care and Social Services Inspectorate for Wales (C.S.S.I.W.) in dealing with complaints about residential homes and people who self-fund. The consultation paper was responded to and the Welsh Government produced a summary which outlined respondents' views on their proposals. At the time of writing this annual report, further consultation is expected from the Welsh Government and a further paper for Scrutiny will be produced once it is confirmed by Welsh Government what these changes will be and its impact in Flintshire. The changes will form part of the Social Services and Well Being Wales Bill)

Following a service review in early 2012, the changes made to the management of complaints in Social Services has seen more direct advice and support being provided to Managers in responding to and resolving complaints about their respective Services. Feedback received indicates this has been well received.

In late 2012, the Complaints Officer has started running a half day training workshop aimed at Managers and other key staff. The workshop goes through the complaints process and what is expected from them as Managers, as well as discussing different approaches to resolving complaints as quickly and effectively as possible at Stage 1. The workshop runs every other month and feedback from participants indicate they valued its content and the information given should help them respond effectively to complaints in future.

#### Categorisation of Complaints

Below is a breakdown using the Annual Council Reporting Framework (A.C.R.F.) model to categorise complaints. As from April 2012, the All Wales Complaints Officers' Group has reached a common approach as to what complaint themes fall under which A.C.R.F. domain/category and this will help CSSIW to compare across Wales.

<b>ACRF Domain (Category) 2012-13</b>	<b>Adult SS</b>	<b>Children SS</b>
Access to services	3	1
Care Management and Review	20	18
Range of services	9	-
Quality of Service	8	19
Safeguarding	3	6
Assessment	8	7

#### **4.00 RECOMMENDATIONS**

4.01 That Members accept this report as an overview of the Administration and outcomes of the Social Services representations and complaints procedure.

#### **5.00 FINANCIAL IMPLICATIONS**

5.01 The total cost of the 4 Stage 2 investigations for the year for Adult Social Services was £3,969.20 (1 investigation was conducted internally therefore there was no cost). The cost for 2011-12 was £12,602 (a total of 10 complaints).

5.02 The total cost of the 5 Stage two investigations for Children's Social Services was £8,964.45 (an increase compared to last year's £6,451 when there were 3 Stage 2 investigations).

Complaints involving both Adult and Children's Social Services are Commissioned to independent Investigating Officers (and an Independent Person for Children's Social Services as set out in the Children Act, 1989).

#### **6.00 ANTI POVERTY IMPACT**

6.01 No direct impact.

#### **7.00 ENVIRONMENTAL IMPACT**

7.01 No direct impact.

#### **8.00 EQUALITIES IMPACT**

8.01 The Directorate uses complaints to inform its ongoing programme of equality impact assessments.

**9.00 PERSONNEL IMPLICATIONS**

9.01 No direct impact

**10.00 CONSULTATION REQUIRED**

10.01 None required.

**11.00 CONSULTATION UNDERTAKEN**

11.01 None required.

**12.00 APPENDICES**

12.01 None

**LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985  
BACKGROUND DOCUMENTS**

‘Listening and Learning’ Welsh Assembly Government April 2006

**Contact Officer:** Ian Maclaren  
Complaints Officer  
Social Services  
County Hall

**Telephone:** 01352 702623  
**Email:** [Ian.Maclaren@flintshire.gov.uk](mailto:Ian.Maclaren@flintshire.gov.uk)

## FLINTSHIRE COUNTY COUNCIL

**REPORT TO:** **SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**  
**DATE:** **THURSDAY, 9 MAY 2013**  
**REPORT BY:** **DIRECTOR OF COMMUNITY SERVICES**  
**SUBJECT:** **TRANSFORMATION OF DOUBLE CLICK TO A SOCIAL ENTERPRISE**

### **1.00 PURPOSE OF REPORT**

1.01 This report describes our proposal to transform the service delivery of Double Click from a Social Services run work-scheme to a Social Enterprise working in partnership with Flintshire County Council as a new business.

### **2.00 BACKGROUND**

2.01 In the past ten years there has been a significant interest in social enterprise and Local Authorities and other public bodies have increasingly engaged with social enterprises to deliver sustainable services and to help stimulate local economies.

2.02 There are more than 62,000 social enterprises in the UK, contributing £24 billion to the UK economy and employing almost one million people.

2.03 There are a range of different models across the country and in Wales there are already many good examples of social enterprises delivering public services. The Wales Cooperative Centre has recently published a research paper "Social enterprise in the service of the public" (2011). It is evident that there is considerable scope and potential in this approach.

2.04 The research provides a realistic view of the challenges for social enterprises but notes that as a model to deliver public services they share and can deliver on a number of public service objectives, such as:

- reaching and engaging local people in ways which neither private nor public bodies can
- offering different ways of involving users and citizens in the development of services
- offering novel combinations of skills and capabilities which meet the needs of particular groups
- offering flexibility for new approaches without the profit motive distorting implementation

- bringing innovative capacity and momentum and leveraging different forms of finance
  - playing a key role in regeneration by acting as role models for community enterprises and ensuring that money spent on public services circulates in the local economy
- 2.05 The development of social enterprises is a stated aim of the current administration, with the council aiming to develop a number such projects within its tenure. Social enterprises can be developed from current services or through the development of new services to meet stated public service goals
- 2.06 Double Click was established in 2010 in its current form but had previously operated under the name of “Capabilities” based in Buckley for around 10 years. The entire running cost of the day service is approximately £100k.
- 2.07 Double Click is currently a Social Services run work-scheme based in Deeside Enterprise Centre. The service employs 5 staff in total (3WTE) and supports 23 service users on a weekly basis.
- 2.08 Double Click support service users who are in the recovery phase following an acute episode of acute mental health illness
- 2.09 Double Click are a printing business. They focus on printing specific publicity material for businesses, printing individualised invites and other personalised printing runs.
- 2.10 We consider Double Click to be suitable for development to a social enterprise for a number of reasons:-
- The nature of the work service lends itself well to further development. With improved community links and further business model development there is significant room for growth in the business.
  - The aims of the service are consistent with the goals of social enterprise with the aim of providing employment to specific groups locally and to retain resources within the local economy.
  - There is the potential for developing employment opportunities for service users, whilst at the same time developing further training places for new service users.
  - The development is of a manageable proportion and supports organisational learning.
- 2.11 Plans to develop Double Click to a Social Enterprise have been

considered since 2010. Advice has been sought by Social Firms Wales, and appropriate legal and personnel advice is available to support its transition from a social services run business to a Social Enterprise operating within a competitive framework.

### **3.00 CONSIDERATIONS**

#### **Social Enterprise Model chosen**

3.01 There are a range of social enterprise models which can take many legal and organisational forms but what unites them all is the commitment to a beneficial social impact which is combined with a commercial business.

3.02 After detailed consideration of the options available it is recommended that steps be taken to transform Double Click into a Company Limited by Guarantee in the form of a Community Interest Company.

3.03 A CIC is a limited company, designed for social enterprises which want to use their profits and assets for the public good. *A CIC has the specific aim of providing a benefit to a community and must use its income, assets and profits for the community it is formed to serve.* The primary purpose of a CIC is to benefit the community and not its shareholders, directors or employees.

3.04 To be a CIC the company has to meet a “community interest test” which simply means that it must show, what a reasonable person might consider that its activities are being carried out for the benefit of the community.

3.05 A significant feature of a CIC is an “asset lock” which generally does not allow it to distribute its assets to members. *This protects the assets of the CIC and ensures that the assets and profits of the CIC will be devoted to the benefit of the community and not for rewarding shareholders and directors.*

3.06 This model has been selected as it is essential that the model chosen is one which fits well with the Council’s strategic objectives of economic regeneration and social wellbeing. In this instance, the objective for Social Services for adults is to create employment and training opportunities for people with disabilities.

#### **What Changes for the Service**

3.07 In supporting a safe and managed transition to a social enterprise there will be changes for staff, service users and to the way in which the mental health service supports the ongoing costs of this business.

3.08 These are described below

### **Staff Impacts**

- 3.09 The existing staff (5 staff in total, 3fte) will initially be seconded to the new firm for a period of 3 years. At the end of this process their positions will be reviewed and in the event of the continuation of the enterprise, steps will be put in place to support them to transfer accordingly.

### **Service User Impacts**

- 3.10 The new firm will have 20 training placements for people with mental health problems and some volunteer places. In the event that the firm is not successful these placements will revert to being work-scheme placements and part of a service rather than a business. There is no ongoing risk therefore.
- 3.11 A few service users (2/3) will as the business develops need to decide whether to give up benefits and opt to work for the new firm. The risk will be that they are not awarded their benefits again if the new firm does not become financially successful within the note period.
- 3.12 Service users who are part of this development will have been part of a change programme which by its very nature may succeed or fail. In the event that the business does not succeed whilst it is recognised that this may be demoralising on service users our commitment to return to a local authority service will ensure changes are kept to a minimum.

### **Local Authority Impacts**

- 3.13 As the service alters to a Social Enterprise the local authority's relationship with the business will change. Instead of directly funding the service we will commission the service to provide training placements to service users. To support the development of the business the additional cost of procuring a Business Manager has been factored in, and will be reflected in the cost of training placements. In essence costs will remain the same other than this additional funding which can be met out of savings within the Mental Health support services budget. It is essential that the business has this business expertise.
- 3.14 A formal timetable for this development will be formulated in the coming weeks as all outstanding legal, financial and personnel issues are satisfactorily addressed.

## **4.00 RECOMMENDATIONS**

- 4.01 On the basis of this report Scrutiny is asked to support the recommendation to be made to Cabinet to progress Double Click from a Social Service run work scheme to a Social Enterprise company in the form of a Company Limited by Guarantee.



**5.00 FINANCIAL IMPLICATIONS**

5.01 The costs of supporting this social enterprise will remain at present other than the commitment in year 1 to meet the cost of a Business Manager at £29k. This will be reviewed on a year by year basis

**6.00 ANTI POVERTY IMPACT**

6.01 Supports some current service users to gain paid employment.

**7.00 ENVIRONMENTAL IMPACT**

7.01 None

**8.00 EQUALITIES IMPACT**

8.01 Covered in EIA

**9.00 PERSONNEL IMPLICATIONS**

9.01 As per above 5 staff seconded from Flintshire County Council to the new business for 3 years.

**10.00 CONSULTATION REQUIRED**

10.01 If the authority agrees to proceed with the externalisation process, formal consultations with staff and service users will need to take place.

**11.00 CONSULTATION UNDERTAKEN**

11.01 Two informal consultations with service users have taken place at various stages since 2011 and 3 with staff and trade union/HR representatives. Both groups are regularly updated as to the progress of the project.

**12.00 APPENDICES**

12.01 None

**LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985  
BACKGROUND DOCUMENTS**

Contact Officer: Alwyn Jones  
Telephone: 01352 702502  
Email: Alwyn.jones@flintshire.gov.uk

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## FLINTSHIRE COUNTY COUNCIL

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

**DATE:** **THURSDAY, 9 MAY 2013**

**REPORT BY:** **DIRECTOR OF COMMUNITY SERVICES**

**SUBJECT:** **TRANSITION UP-DATE**

### **1.00 PURPOSE OF REPORT**

1.01 To provide Scrutiny Committee with updated information on the progress of the Transition Teams sited within Disability Services (Adult Social Services).

### **2.00 BACKGROUND**

2.02 The transition team was formed in August 2012 and brought together resources from Children's Social Services and Adult Social Services, Learning Disability and Physical Disability Team.

2.03 Its purpose is to better support young people with a disability and their families through the process of becoming an adult, and all the choices and challenges that time of life brings.

### **3.00 CONSIDERATIONS**

3.01 The development of the team was ambitious and at the time, little information was available on an agreed process to introduce a transition process. Flintshire, therefore, formed a project team and implemented a Project Management approach to develop this service.

3.02 At its commencement the team consisted of a part time Manager, part time social worker and three part time support workers. The team are now staffed with:

- Part time Team Manager
- Half time Manager
- Full time Senior Practitioner
- 1.5 Social Workers
- 3 half time Support Workers
- 1 part time Community Care Officer
- 1 full time admin in a shared office

3.03 Typically, the team receive referrals from CIDS (Children's Services) for a young person aged 14-15. The transition team complete the relevant assessments, make contact with the young person and their

family to set objectives and agree future outcomes. These might include:

- Support to chose a college to apply to
- Support to join a youth club or learn to use a bus
- Funding application
- Finding out what services exist

3.04 A key worker is appointed to form a relationship throughout their time with the team, usually up to the age of 25.

3.05 Achievements by the Transition Team:

(1) Key Worker for each young person. Young people tell us this works very well for them and helps them build a relationship, learn about services and have someone to represent them. It also reduces duplication of information. Work load pressures will require consideration of further Social Worker capacity to support maintaining this standard.

(2) Improvement in performance – Welsh Government National Performance Indicators demonstrates the team performing well nationally.

(3) Staff Training – A programme of training has ensured the team meet required standards in all areas including Child & Adult Protection.

(4) New procedures and processes agreed for this specialist team.

(5) Positive feedback from young people and their families – families consistently support this model which over time and with stability will have an increasingly positive impact.

(6) Gaining a positive reputation – other local authorities have registered an interest in Flintshire's model and developing their own service.

(7) The team currently support over 100 people.

3.06 Continued Challenges:

The service continues to be challenged by the numbers and complexity of young people coming into the service and in insuring good links with other teams. The team are highly motivated and driven to provide an excellent service and achieve desired outcomes. An external review of this service has been agreed and the outcomes shared.

#### **4.00 RECOMMENDATIONS**

4.01 Scrutiny Committee to note the achievements of the team.

**5.00 FINANCIAL IMPLICATIONS**

5.01 Recognised workload pressure to be managed through resources within Transitions revenue budget.

**6.00 ANTI POVERTY IMPACT**

6.01 The team provides services based on age and eligibility does not negatively discriminate on any ground.

**7.00 ENVIRONMENTAL IMPACT**

7.01 None

**8.00 EQUALITIES IMPACT**

8.01 EIA completed

**9.00 PERSONNEL IMPLICATIONS**

9.01 None

**10.00 CONSULTATION REQUIRED**

10.01 None

**11.00 CONSULTATION UNDERTAKEN**

10.02 None

**12.00 APPENDICES**

12.01 None

**LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985  
BACKGROUND DOCUMENTS**

None

**Contact Officer: Alwyn Jones**  
**Telephone: 01352 702502**  
**Email: alwyn.jones@flintshire.gov.uk**

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## FLINTSHIRE COUNTY COUNCIL

**REPORT TO:** **SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**  
**DATE:** **THURSDAY, 9 MAY 2013**  
**REPORT BY:** **DIRECTOR OF COMMUNITY SERVICES**  
**SUBJECT:** **SOCIAL SERVICES AND WELL-BEING (WALES) BILL**

### **1.00 PURPOSE OF REPORT**

1.01 To provide an explanatory report of the Social Services and Well-Being (Wales) Bill. This report arising out of the implementation of the Bill, will briefly outline some key changes and implications.

### **2.00 BACKGROUND**

2.01 The Social Services and Well-being (Wales) Bill gives effect to policy which was originally developed in the White Paper '*Sustainable Social Services for Wales: A framework for Action*'. This White Paper outlines the Welsh Governments response to the significant challenges currently facing social services in Wales, including the challenges of evolving societal expectations, demographic changes and a difficult financial resource environment.

2.02 The intended purpose of the Bill is to address the challenges highlighted by the White Paper, enabling the transformation of priority areas within services and organisations across Wales.

2.03 The Bill is also intended to integrate and simplify current social care legislation, which is at present located in various complex legal sources.

2.04 The Bill, if successful, is envisaged to significantly change how services are delivered, to ensure long term sustainability is a viable reality. The Bill intends to achieve this success through placing greater legal obligations on Local Authorities and Local Authority partners to: promote equality, improve the quality of services and the provisions for information and advice, provide service users and carers with a stronger voice and real control over the services they receive and encourage a renewed focus on prevention and early intervention.

### **3.00 CONSIDERATIONS**

3.01 If the Bill receives the Royal Assent at the end of this year, 2013. The Welsh Government intends that implementation will commence in **2015-2016**.

3.02 The Bill is currently undergoing consultation in the National Assembly for Wales. On the 15<sup>th</sup> March 2013 Flintshire County Council provided written contributory evidence to the stage one consideration of this Bill. This evidence/consultation response has now been published by the National Assembly for Wales and can be viewed via the National Assembly website. The stage two consideration process is yet to commence.

3.03 Welsh Government Ministers are expected to provide guidance and regulations for this Bill in **2014-2015**. Until the Ministers have done so it is difficult to predict the true impact the Bill will have on services and organisations linked to Well-Being (The Term 'Well-Being' is given a broad definition within this legislation). There is currently a lack of clarity surrounding many aspects of this legislation, funding is a key example of an area which requires further explanatory guidance.

3.04 Training and implementation of key changes is anticipated to take place in **2015**.

### **3.05 Key Proposed Changes**

- Creating proportionate and accessible assessments to establish if people need and are eligible for support.
- Carers will for the first time be treated in the same way as persons in need of care and support (This is a significant change, which places carers on a similar legal footing to those they care for) . The Bill removes the requirement that a carer must be providing "a substantial amount of care on a regular basis", before they can be assessed; instead it places a single duty on Local Authorities to undertake carers assessments.
- Assessments will focus on the outcomes people want to achieve, promoting independence and control.
- There will be a duty for Local Authorities and Local Authority partners to provide information, advice and assistance to help people understand how the care and support system works, what services are available locally and how to access the services.
- There will be portable assessments of need, which will mean if service users move from one Local Authority area to another,



they will still be entitled to similar services until the new Authority can review their situation. Carers are exempt from this portability, primarily because services are generally provided to the person they look after.

- A National Independent Safeguarding Board will be created. The Bill also allows for children and adults safeguarding boards to merge.
- There will be a new national eligibility framework, meaning the level at which people are entitled to receive support from social services will be consistent across Wales.
- There will be extended duties on social services and their partners to collaborate in the delivery of integrated services, including the use of pooled budgets, partnership working and working with others to reduce bureaucracy. Collaborative working is very much part of the underlying ethos of this Bill. The Bill states there is a shared responsibility on all services and organisations to promote the well-being of service users.
- There will be new provisions for 'Adult Safeguarding,' bringing these responsibilities on to a statutory basis. Local Authorities can now make enquiries where there is suspected risk and also apply to the court for 'Adult protection and support orders'.
- There will be a greater focus on preventative services.
- There will be charging for services, including preventative services and for the provision of information, advice and assistance.
- A duty will be placed in Local Authorities and Health Boards to better understand the needs of the local population.

**The Bill Will not:**

- Guarantee services will always be available to meet an individual's needs
- Eradicate the need for individual services to have their own access criteria. (E.g. Blue badges, eye test and day care).
- Guarantee care and support services provided in one authority will be replicated if a person moves to another.

#### **4.00 RECOMMENDATIONS**

4.01 Members to be aware this legislation is coming into force and will significantly change how services are delivered across Wales.

#### **5.00 FINANCIAL IMPLICATIONS**

5.01 There have been serious wide spread concerns regarding the financial impact this Bill will have on Local Authorities and Social Services Directorates. The reasoning behind such concern is that the Bill provides very little information regarding funding and cost implications.

5.02 For example broadening provisions for preventative services and increasing carers rights to assessment will lead to additional demand, which would require additional financial resources to support quality service provision. Another potential cost implication could arise around increased duties relating to information provision.

5.03 Funding for workforce training and implementation costs has been identified in the Bill. The Welsh Government plan to fund these costs via current funding streams, for example, the workforce grant of £8.41 million is already being focussed to support the training and implementation. In addition, the Welsh Government will support transformational change through its 'Invest to Save' programme.

5.04 It is thought further clarity regarding this issue will be provided by Welsh Government Ministers when they deliver their proposed guidance and regulations in 2014-2015.

#### **6.00 ANTI POVERTY IMPACT**

6.01 Greater clarity with regard to Ministerial Regulations is required in order to decipher the potential impact and successes of the Bill.

#### **7.00 ENVIRONMENTAL IMPACT**

7.01 None arising from this report.

#### **8.00 EQUALITIES IMPACT**

8.01 The intention of this Bill is to promote Equality. If the Bill is successful, then a number of provisions (see above) when implemented will have a positive impact on equalities.

#### **9.00 PERSONNEL IMPLICATIONS**

9.01 Possible training, resource and development implications – Further clarity required.

**10.00 CONSULTATION REQUIRED**

10.01 Consultation currently underway.

**11.00 CONSULTATION UNDERTAKEN**

11.01 Consultation currently underway. The Bill was introduced in to the National Assembly for Wales on the 28<sup>th</sup> of January 2013 for consideration and scrutiny. Stage One consideration near completion.

**12.00 APPENDICES**

12.01 Appendix 1 - Social Services and Well-Being (Wales) Bill – Summary.

**LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985**  
**BACKGROUND DOCUMENTS**

- ‘Sustainable Social Services for Wales: A framework for Action’ (Welsh Government, February 2011). [http: Wales.gov.uk](http://Wales.gov.uk).
- Social Services and Well-Being (Wales) Bill

**Contact Officer: Judy Evans / Christy Jones**

**Telephone: 01352 702523 / 01352 702509**

**Email: [Judy.evans@flintshire.gov.uk](mailto:Judy.evans@flintshire.gov.uk)**

**[Christy.Jones@flintshire.gov.uk](mailto:Christy.Jones@flintshire.gov.uk)**

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## **Social Services and Well-Being (Wales) Bill – Summary**

The message from Welsh Government is clear – **this is not a Social Services Bill**. It is intended to transform services to maintain and enhance the wellbeing of people in need, involving the whole Council and the National Health Service.

The proposed Social Services and Well-Being (Wales) Bill provides the legislative framework to take forward the change programme set out in *Sustainable Social Services for Wales: A Framework for Action*.

The Bill places little emphasis on the need for additional resources and places greater emphasis on the need for services to do things differently. Initial thoughts are that this will be a challenge for Local Authorities. A number of organisations during the stage 1 consideration of the Bill in the National Assembly for Wales have also expressed concerns regarding this matter.

The Bill comprises of 11 Parts. The key points are summarised below:

### **1. Introduction**

Provides a general overview of the bill and outlines a new, broader definition of the term 'well-being,' Defining the term to include; physical and mental health and emotional well-being, protection from abuse and neglect, education, training or recreation, domestic, family and personal relationships, contribution made to society, securing rights and entitlements and social and economic well-being.

The Bill will support the delivery of services in an integrated way to people of all ages; not separately to children and adults. It will enable an approach that sees people as members of their families, networks and communities along with a focus on the development of early intervention & preventative services.

The Bill will provide a duty to maintain and enhance the wellbeing of people in need.

### **2. General functions**

The Bill provides that any person carrying out the functions of this Bill will be placed under an overarching duty to promote the well-being of people in need of care and support and carers in need of support.

The Bill will impose general and strategic duties on Local Authorities and Local Authority partners to gain a better understanding of the needs and characteristics of their local populations, in order to ensure organisations are targeting support in the right areas of need.

There will be new duties placed on Local Authorities to promote social enterprises, co-operatives and user led/third sector services. This change is hoped to encourage the growth of sustainable, cost effect, social care services.

The Bill also introduces new duties for Local Authorities and the NHS to promote the availability of preventative services and provide information and

advice to help people understand how care and support works. This change is intended to provide greater clarity for service users.

### **3. Assessing the Needs of Individuals**

The Bill provides individuals with a single statutory right to have their needs assessed, regardless of age and will require those assessments to be undertaken in a way that focuses on the outcomes people are seeking to achieve. This change is intended to give more control and power to service users. IT systems may require updating, which could lead to considerable cost implications.

The Bill also creates a single duty for Local Authorities to undertake carer's assessments. This will apply to young carers and parent carers. The Bill will replace existing law, removing the requirement that the carer must be providing "a substantial amount of care on a regular basis". This will place carers on a similar legal footing to those they care for and will mean more carers are able to access assessments. This change may increase demand on services, which will consequently result in the need for increased financial provision.

The Bill makes a distinction between child and adult carers, in an attempt to take into account the considerable issues faced by child carers.

### **4. Meeting Needs**

Local Authorities will be required to carry out eligibility assessments to determine whether there is an 'eligible need' and therefore whether there is a duty on the Authority to meet that need. Local Authorities will be required to meet the needs of any persons who are at risk of harm, irrespective of eligibility. Authorities will also be able to respond to urgent need, without any duty to first complete an eligibility assessment.

Welsh Ministers will have the powers to establish a national eligibility framework via regulations. These regulations will provide clarity on what will constitute as 'eligible need.' The framework will create more consistency in access to/delivery of services, though potentially a threat to local democracy.

The Bill outlines a framework which clarifies which Local Authorities may be allowed/required to make direct payments. Welsh Ministers will provide guidance in relation to the amounts and conditions etc, which will be attached to provisions for providing direct payments.

Local Authorities will have a duty to provide and review support plans for those who are eligible. Regulations will provide further detail in relation to support plans e.g. how they are to be prepared etc.

Support Plans for people (Not Carers) will be portable across Welsh Authorities. Authorities will be placed under a duty to inform other Authorities when a person is moving into their area of jurisdiction. Transitional arrangements and continued support will be provided by the receiving authority, until a needs review/re-assessment can be completed. This change will ensure continued care and support is provided to people in need, leading to a reduction in waiting times and bureaucracy.

## **5. Charging and Financial assessments**

Local Authorities can impose charges for providing or arranging services. The Bill makes separate provisions for charging for preventative services and for information, advice and assistance. Concerns have been raised with regard to whether this is a realistic expectation of service users.

Regulations will provide a framework for charges and for any matters to be taken into account when local authorities undertake financial assessments.

## **6. Looked after and accommodated children**

The Bill simplifies but does not alter the effect of the complex provisions within Part 3 of The Children Act 1989.

The Bill is not to be interpreted as a sole piece of legislation, it coexists with other statutes. Therefore Local Authorities will still be subject to duties provided in The Children Act 1989 and The Adoption Act 2002.

## **7. Safeguarding and Protection**

The Bill provides that safeguarding is a shared priority of many public services and a key responsibility of Local Authorities.

The Bill provides a new legal framework for adults at risk. Protecting adults from abuse and neglect has been prioritised by local authorities for a prolonged period of time. A legal framework around this area has never previously been created. This lack of formal guidance has led to much confusion with regard to the roles and responsibilities of those working in adult safeguarding. The Bill aims to provide clarity with regard to this issue and will provide local authorities with further duties to ensure enquires and investigations can be undertaken when it suspects an adult is at risk. Duties are also placed on Local Authority Partners to cooperate and provide information in relation to safeguarding.

The Bill will establish a National Independent Safeguarding Board – national remit; expert membership; cover protection of adults and children. Its precise structure and remit will be developed during 2014 -15. The purpose of the Board will be to improve standards, strengthen existing policy / guidance and provide strong national direction.

Provisions also provide for the creation of new Children's Safeguarding Boards and the establishment of new Safeguarding Adults Boards. These Boards are intended to promote partnership working, regulations will specify which organisations will be identified as lead partners. The Bill does include powers which extend the duties of these Boards and also will allow the Boards to merge. These Boards will also link with the new National Board.

## **8. Social Services Functions**

The Bill repeals schedule 1 of The Local Authority Social Services Act 1970, providing a new schedule of social services functions.

Welsh Ministers will issue and consult on a Code of Practice. This code will provide guidance for social services on the exercise of their functions. Welsh Ministers may give directions to Local Authorities when compliance with this

code is required. The Bill also sets out circumstances in which Local Authorities may depart from the requirements of this code.

The Bill includes a duty on Local Authorities to appoint a Director of Social Services to lead and manage family-focused social services. Ministers will have powers to specify the competences that a Director must have.

The Bill provides powers for Welsh Government Ministers to intervene in the exercise of social service functions on specified grounds.

### **9. Well-being outcomes, co-operation and partnership**

The Bill includes powers to establish a National Outcomes Statement , which will be supported by a code provided by ministerial regulations and will provide high level, measurable indicators. The aim of this change is to achieve greater transparency and continuity.

The Bill promotes partnership working, cooperation and integration. Duties will be placed on Local Authorities and Local Authority Partners to make arrangements to promote these areas of working.

Ministers will make regulations to strengthen partnership working between Local Authorities and Health Boards. Budgets will be pooled in certain areas of working to create more integrated models of service provision. A belief that potential savings from LA / NHS integrated working far exceeds those from regional collaboration.

The Bill will simplify arrangements in relation to adoption by placing a duty on the 22 local authorities to establish a National Adoption Service, which will discharge certain functions. The Bill identifies the need to prevent unnecessary delays and duplication in the adoption process. Heads of Children's Services remain unconvinced that this national agency will achieve the intended outcome.

### **10. Complaints and representations**

A new framework is provided for Local Authority duties in relation to their consideration of representations and complaints from people about social services functions. This framework will strengthen the complaints procedure and extend the Public Services Ombudsman's powers, allowing the consideration of complaints about private care home providers, private domiciliary care agencies and private palliative care services.

### **11. Supplementary and general**

Implementation of this Bill is intended to be phased and carefully planned in an attempt to ensure the smooth transition of the new arrangements. Some arrangements will require further consultation with stakeholders, to ensure the desired outcomes are achieved.

The Welsh Government has expressed its intention to proceed with the majority of implementation in 2015-16.

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## FLINTSHIRE COUNTY COUNCIL

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

**DATE:** **THURSDAY 9<sup>TH</sup> MAY 2013**

**REPORT BY:** **ENVIRONMENT AND 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 and 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 Executive for consultation purposes, or by County Council, or Directors. Other possible items are identified from the Executive 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**

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 N/A

**11.00 CONSULTATION UNDERTAKEN**

11.01 Publication of this report constitutes consultation.

**12.00 APPENDICES**

12.01 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
<b>Joint Meeting With Lifelong Learning - 11 June</b>	Educational attainment of Looked After Children	To receive the annual educational attainment report.	Performance Monitoring	Director of Lifelong Learning	
	Corporate Parenting Activity Update including Access to Action Card update	To provide an update to Members on the progress in implementing the Corporate Parenting Action Plan.	Monitoring report	Director of CS Director of LL	
	Young Carers	To inform Members of the work being undertaken with young carers across Flintshire directorates.	Information report	Director of CS Director of LL	

Date	Item	Purpose of Report/Session	Scrutiny Focus	Responsible/ Contact Officer	Submission Deadline
20 June	BCUHB	Half-yearly meeting with Betsi Cadwaladr University Health Board representatives. Discussions to include hospital waiting lists and minor condition referrals.	Partnership working	Facilitator	6 June
	Carers Strategy	To receive a progress report	Progress monitoring	Director of Community Services	
	Q4/Year end performance reporting	To enable Members to fulfil their scrutiny role in relation to performance monitoring	Performance Monitoring	Facilitator	
25 July	Rota Visits activity and outcomes	To receive a report outlining rota visit activity and outcomes during the last municipal year.	Monitoring	Director of Community Services	11 July
	Social Services Improvement Agency	To receive a report on the SSIA results based accountability model of intervention pilot in Flintshire.	Service Improvement	Director of Community Services	
	Welsh Ambulance Service	To receive a presentation from the Welsh Ambulance Service		Facilitator	

**ITEMS TO BE SCHEDULED**

Youth Justice Service update report  
 North Wales Adoption Service update  
 Local Safeguarding Children's Board  
 Family Placement Team Restructure  
 Directorate Plan

**Regular Items**

Month	Item	Purpose of Report	Responsible / Contact Officer
<b>Quarterly</b>	<b>Performance Information</b>	To consider quarterly performance outturns against directorate indicators	Director of Community Services
<b>January</b>	<b>Safeguarding &amp; Child Protection</b>	To provide Members with statistical information in relation to Child Protection and Safeguarding	Director of Community Services
<b>March</b>	<b>Educational Attainment of Looked After Children</b>	Education officers offered to share the annual educational attainment report which goes to Lifelong Learning OSC with this Committee	Director of Lifelong Learning
<b>March</b>	<b>Corporate Parenting</b>	Report to Social & Health and Lifelong Learning Overview & Scrutiny	Director of Community Services
<b>June</b>	<b>Health, Social Care &amp; Wellbeing Strategy</b>	Update report	Director of Community Services
<b>June/ December</b>	<b>Betsi Cadwaladr University Health Board Update</b>	To maintain 6 monthly meetings – partnership working	Chief Executive/ Sheila Wentworth/ Facilitator
<b>June/July</b>	<b>Foster Care</b>	To receive an update on the recruitment and retention of Flintshire's Foster Carers.	Director of Community Services

Month	Item	Purpose of Report	Responsible / Contact Officer
May	<b>Comments, Compliments and Complaints</b>	To consider the Annual Report.	Director of Community Services
September	<b>Protecting Vulnerable Adults &amp; Inspection Action Plan Update</b>	To inform Members of the annual adult protection monitoring report submitted to the Welsh Assembly and to monitor progress of CSSIW Inspection Action Plan	Director of Community Services