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To: Cllr Hilary McGuill (Chair)

Councillors: Mike Allport, Marion Bateman, Paul Cunningham, Jean Davies, Carol Ellis, Gladys Healey, Cindy Hinds, Mike Lowe, Dave Mackie, Michelle Perfect and David Wisinger

3 December 2021

Dear Sir/Madam

NOTICE OF REMOTE MEETING SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE THURSDAY, 9TH DECEMBER, 2021 at 2.00 PM

Yours faithfully

Robert Robins
Democratic Services Manager

Please note: This will be a remote meeting and 'attendance' will be restricted to Committee Members and those Members of Council who have asked the Head of Democratic Services for an invitation. Such attendees may only speak at the Chair's discretion.

The meeting will be live streamed onto the Council's website. A recording of the meeting will also be available, shortly after the meeting at https://flintshire.public-i.tv/core/portal/home

If you have any queries regarding this, please contact a member of the Democratic Services Team on 01352 702345.

AGENDA

1 APOLOGIES

Purpose: To receive any apologies.

2 <u>DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)</u>

Purpose: To receive any Declarations and advise Members accordingly.

3 **MINUTES** (Pages 5 - 10)

Purpose: To confirm as a correct record the minutes of the meeting held

on 30 September 2021.

4 FORWARD WORK PROGRAMME AND ACTION TRACKING (S & H) (Pages 11 - 18)

Report of Social and Health Care Overview & Scrutiny Facilitator

Purpose: To consider the Forward Work Programme of the Social &

Health Care Overview & Scrutiny Committee and to inform the

Committee of progress against actions from previous

meetings.

5 <u>SOCIAL CARE WORKFORCE PRESSURES AND RESPONSES</u> (Pages 19 - 28)

Report of Chief Officer (Social Services) - Deputy Leader of the Council (Partnerships) and Cabinet Member for Social Services

Purpose: To advise Committee of the challenges associated with

recruitment within the social care sector and the national,

regional and local responses.

6 TRANSITION PROGRAMMES – UPDATE ON ACHIEVEMENTS (Pages 29 - 34)

Report of Chief Officer (Social Services) - Deputy Leader of the Council (Partnerships) and Cabinet Member for Social Services

Purpose: To receive an update on the achievements of transition

programmes.

7 <u>SUPPORTING THE STABILITY OF THE SOCIAL CARE MARKET</u> (Pages 35 - 54)

Report of Chief Officer (Social Services) - Deputy Leader of the Council (Partnerships) and Cabinet Member for Social Services

Purpose: To identify pressure points within the social care market and

the associated action to support sufficiency and stability of high

quality provision (to include fees and funding).

8 **EARLY YEARS AND FLYING START PROGRAMMES** (Pages 55 - 76)

Report of Chief Officer (Social Services) - Deputy Leader of the Council (Partnerships) and Cabinet Member for Social Services

Purpose: To report on the extensive work to support parents and

families and the address the impact the pandemic has had on

babies and young children.

9 **DIRECT PAYMENTS** (Pages 77 - 84)

Report of Chief Officer (Social Services) - Deputy Leader of the Council (Partnerships) and Cabinet Member for Social Services

Purpose: To receive an update

10 <u>COUNCIL PLAN 2021-22 MID-YEAR PERFORMANCE REPORTING</u> (Pages 85 - 116)

Report of Social and Health Care Overview & Scrutiny Facilitator - Deputy Leader of the Council (Governance) and Cabinet Member for Corporate Management and Assets

Purpose: To review the levels of progress in the achievement of

activities and performance levels as identified in the Council

Plan.

Please note that there may be a 10 minute adjournment of this meeting if it lasts longer than two hours

Procedural Note on the conduct of meetings

The Chair will open the meeting and introduce themselves.

The meeting will be attended by a number of Councillors. Officers will also be in attendance to present reports, with Democratic Services officers acting as hosts of the meeting.

All attendees are asked to ensure their mobile phones are switched off and that any background noise is kept to a minimum.

All microphones are to be kept muted during the meeting and should only be unmuted when invited to speak by the Chair. When invitees have finished speaking they should go back on mute.

To indicate to speak, Councillors will use the chat facility or use the electronic raise hand function. The chat function may also be used for questions, relevant comments and officer advice and updates.

The Chair will call the speakers, with elected Members addressed as 'Councillor' and officers addressed by their job title e.g. Chief Executive' or name. From time to time, the officer advising the Chair will explain procedural points or suggest alternative wording for proposals, to assist the Committee.

If and when a vote is taken, the Chair will explain that only those who oppose the proposal(s), or who wish to abstain will need to indicate, using the chat function. The officer advising the Chair will indicate whether the proposals are carried.

If a more formal vote is needed, this will be by roll call – where each Councillor will be asked in turn (alphabetically) how s/he wishes to vote

At County Council and Planning Committee meetings speaker's times are limited. A bell will be sounded to alert that the speaker has one minute remaining

The meeting will be live streamed onto the Council's website. A recording of the meeting will also be available, shortly after the meeting at https://flintshire.public-i.tv/core/portal/home

SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE 30 SEPTEMBER 2021

Minutes of the meeting of the Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held remotely on Thursday 30 September 2021

PRESENT: Councillor Hilary McGuill (Chair)

Councillors: Mike Allport, Marion Bateman, Jean Davies, Carol Ellis, Cindy Hinds, Mike Lowe, Dave Mackie, Michelle Perfect and David Wisinger

SUBSTITUTIONS: Councillor Sean Bibby (for Gladys Healey) and Councillor Geoff Collett (for Paul Cunningham)

ALSO PRESENT: Councillor Patrick Heesom

APOLOGIES: Chief Officer (Social Services)

<u>CONTRIBUTORS</u>: Councillor Christine Jones (Deputy Leader for Partnerships and Cabinet Member for Social Services); Councillor Glyn Banks – Cabinet Member for Streetscene; Councillor Paul Johnson - Cabinet Member for Finance, Social Value and Procurement; Councillor Billy Mullin – Deputy Leader of the Council (Governance) & Cabinet Member for Corporate Management & Assets; Chief Executive, Chief Officer (Housing & Assets); Senior Manager – Integrated Services and Lead Adults, Senior Manager – Children and Workforce; Senior Manager – Safeguarding and Commissioning; Corporate Finance Manager; Strategic Finance Manager; and Principal Accountant (Social Services)

IN ATTENDANCE: Social Care and Environment Overview & Scrutiny Facilitator; and Democratic Services Officer.

33. DECLARATIONS OF INTEREST (INCLUDING WHIPPING)

None were received.

34. MINUTES

The minutes of the Joint meeting held with the Education Youth and Culture Overview & Scrutiny Committee on 17 June 2021 were submitted. The minutes were approved and moved by Councillor David Wisinger and seconded by Councillor Dave Mackie.

RESOLVED:

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

35. BUDGET 2022/23 – STAGE 2

The Chief Executive provided background information and context.

The Chief Executive and Corporate Finance Manager introduced the second budget stage report which detailed the forecast and the cost pressures which would make-up the total budget requirement.

A report to Cabinet and the Corporate Resources Overview & Scrutiny Committee in July provided an updated position on the budget for 2022/23. The cost pressures identified were referred to the respective Overview & Scrutiny Committees with a request that they all undergo a rigorous review. The details of the cost pressures for Social Services were included in the report.

The Chief Executive, Corporate Finance Manager, Senior Manager (Children and Workforce), Senior Manager – Safeguarding and Commissioning, and Senior Manager – Integrated Services and Lead Adults, provided a joint presentation which covered the following areas:

- purpose and background
- summary totals of cost pressures
 - Social Services pressures
 - School Budget pressures
- summary of all cost pressures
- out of county budget pressure
- strategic solutions
- update on efficiencies
- budget timelines

Councillor Dave Mackie referred to Social Services Pressures (1) in relation to the Children's Residential Care home and suggested that as the Committee had agreed to this amount last year he suggested the Committee must agree to the pressure this year.

Councillor Hilary McGuill referred to the changes announced regarding National Insurance and that the costs would affect the Council as an employer and also the private sector and would have implications on the funding of the private sector going forward. The Chief Executive agreed and outlined the Councils' position. He said this has been escalated to Ministers and would expect that key public sector bodies who commission and provide social care would get an extra enhancement to cover their own National Inurance costs. He added that the Council have put forward a case to Ministers with a view that the providers of Health & Social Care should be exempt from the National Insurance employers rate.

Councillor Carol Ellis referred to the pressure of £1.952m under Social Care Commissioning and felt that this did not reflect the current shortages and pressures regarding recruitment of staff – with pressures potentially much higher than £1.952m. She asked how much funding had been set aside in the MTFS to meet the 'Real Living Wage' and additional care provider costs and how much support the Council receive from Welsh Government (WG). In response the Chief Executive advised that a letter from all six Council leaders in North Wales, supported by Police, Ambulance, Health and other partners, was being submitted

to WG with a costed requirement around all of the issues raised to ease the pressure.

In response to a question from Councillor Dave Mackie regarding future business pressures in relation to the Children's Services Group Homes, the Senior Manager – Children and Workforce advised that a business case had been developed which had identified a need to develop two new group homes for the next 3 years. He added that if the Council moved forward with that ambition the budget pressure would be for this financial year and then replicated twice. He added that two new group homes would be developed and that whilst notionally asking for a commitment for three years, he recognised that as part of that programme each year there would be a gateway review.

Councillor Carol Ellis expressed concerns around the pressure on the Homecare service and asked what support was available from the Health Board. The Senior Manager Integrated Services, Lead Adults advised that the Health Board was part of the community response and the Council worked jointly with Community Response Teams (CRT's) which included nurses, physiotherapists, and occupational therapists. She added that some funding had been made available for additional capacity to support people with mental health for both diagnosis and treatment.

In response to a question on funding from the Health Board the Senior Manager – Integrated Services and Lead Adults outlined the contribution available through the Integrated Care Fund (ICF) and the Health Board. Councillor Carol Ellis expressed concern that the ICF care fund ceased at the end of the financial year and asked if it would be replaced.

The Chair requested that an update on the Integrated Care Fund and future arrangements be brought to a future meeting. This was supported by Councillor Dave Mackie.

In response to the concerns expressed by Councillor Carol Ellis on the Transformation Fund which ceased at the end of the financial year the Senior Manager – Safeguarding and Commissioning agreed to provide the information requested following the meeting.

Councillor Marion Bateman: asked if there was funding available to help the refugees that were arriving in Flintshire The Chief Officer – Housing and Assets advised that the Afghan refugees were funded from central government and that Flintshire received funding to support them in terms of accommodation etc.

Councillor Dave Mackie asked if the £1m joint pressure for out of county placements took into account the pressure in the current year. The Senior Manager – Children and Workforce explained that the £0.897m for out of county budget pressures for this year was expected to rise to £1m for next year.

Councillor Hilary McGuill: asked if National Insurance costs had been factored in to the budget. The Senior Manager – Children and Workforce, explained that National Insurance costs hadn't. He said a meeting was to be held on 21 October and all the providers for the children's residential care had been invited to meet with hims0elf to understand what was likely to happen.

Councillor Carol Ellis referred to the shortfall of £16.75m and asked if this would increase by £1m. The Corporate Finance Manager advised that the £1m was already included in the figure. He explained that out of county placements was a volatile and high risk area. Councillor Ellis added that she felt Welsh Government needed to provide support for local authorities in funding out of county placements.

In response to a question from the Chair, the Senior Manager – Children and Workforce, advised that if someone moved to Flintshire and the child lived in Flintshire then they had ordinary residence and the child would become the responsibility of Flintshire County Council.

Councillor Carol Ellis drew attention to the information in section 1.07 of the report regarding the Integrated Care Fund and that future funding had been approved by the WG from April 2022 to March 2027, however, the details such as the funding allocations and eligibility criteria had yet to be shared. She asked how much was the current ICF funding, when would the Council find out what it would be replaced with, how much would it be, and what the implications for the budget were.

The Senior Manager Integrated Services, Lead Adults advised that the ICF fund was a 5 year allocation but it was not yet known how much the allocation would be. She added that it was hoped that it would be known by October and that officers were currently in liaison with the Welsh Government regarding this. Officers advised that the projects currently funded by ICF which were relevant to Flintshire amounted to around £3.5m. The Senior Manager – Integrated Services and Lead Adults suggested that when the allocated funding and criteria was known a report be submitted to a future meeting of the Committee. The Corporate Finance Manager reported that the UK Spending Review had been confirmed for end of October which would feed into the WG budget. The WG overall budget would be made known on 20 December and Provisional Settlement on 21 December.

It was agreed that whilst the Committee supported the cost pressures presented, Members had significant concerns around the scale of the changing and not fully quantifiable impacts going forward for services currently supported by the Integrated Care Fund and increases in National Insurance contributions which would be fed back to the Corporate Resources Overview & Scrutiny Committee.

The following recommendations were moved by Councillor Dave Mackie and seconded by Councillor Mike Lowe.

RESOLVED:

- (a) That the Committee supports the Social Services portfolio cost pressures;
- (b) That there are no further cost efficiency areas identified by the Committee to be explored further; and
- (c) That the Committee's significant concerns around the scale of the changing and not fully quantifiable impacts going forward for services currently supported by the Integrated Care Fund and increases in National Insurance contributions be fed back to the Corporate Resources Overview & Scrutiny Committee.

36. MEMBERS OF THE PUBLIC AND PRESS IN ATTENDANCE

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

(The meeting started at 10.00 am and ended at 11.32 pm)

Chair





SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE

Date of Meeting	Thursday, 9 December 2021
Report Subject	Forward Work Programme and Action Tracking
Report Author	Social & Health Care Overview & Scrutiny Facilitator
Type of Report	Operational

EXECUTIVE SUMMARY

Overview & Scrutiny presents a unique opportunity for Members to determine the Forward Work programme of the Committee 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.

The Committee is asked to consider, and amend where necessary, the Forward Work Programme for the Social & Health Care Overview & Scrutiny Committee.

The report also shows actions arising from previous meetings of the Social & Health Care Overview & Scrutiny Committee and the progress made in completing them. Any outstanding actions will be continued to be reported to the Committee as shown in Appendix 2.

RECO	RECOMMENDATION				
1	That the Committee considers the draft Forward Work Programme and approve/amend as necessary.				
2	at the Facilitator, in consultation with the Chair of the Committee be thorised to vary the Forward Work Programme between meetings, as e need arises.				
3	That the Committee notes the progress made in completing the outstanding actions.				

REPORT DETAILS

1.00	EXPLAINING THE FORWARD WORK PROGRAMME AND ACTION TRACKING		
1.01	Items feed into a Committee's Forward Work Programme from a number of sources. Members can suggest topics for review by Overview & Scrutiny Committees, members of the public can suggest topics, items can be referred by the Cabinet for consultation purposes, or by County Council or Chief Officers. Other possible items are identified from the Cabinet Work Programme and the Improvement Plan.		
1.02	In identifying topics for future consideration, it is useful for a 'test of significance' to be applied. This can be achieved by asking a range of questions as follows:		
	 Will the review contribute to the Council's priorities and/or objectives? Is it an area of major change or risk? Are there issues of concern in performance? Is there new Government guidance of legislation? Is it prompted by the work carried out by Regulators/Internal Audit? Is the issue of public or Member concern? 		
1.03	In previous meetings, requests for information, reports or actions have been made. These have been summarised as action points. Following a meeting of the Corporate Resources Overview & Scrutiny Committee in July 2018, it was recognised that there was a need to formalise such reporting back to Overview & Scrutiny Committees, as 'Matters Arising' was not an item which can feature on an agenda.		
1.04	It was suggested that the 'Action tracking' approach be trialled for the Corporate Resources Overview & Scrutiny Committee. Following a successful trial, it was agreed to extend the approach to all Overview & Scrutiny Committees.		
1.05	The Action Tracking details including an update on progress is attached at Appendix 2.		

2.00	RESOURCE IMPLICATIONS
2.01	None as a result of this report.

3.00	CONSULTATIONS REQUIRED / CARRIED OUT		
3.01	In some cases, action owners have been contacted to provide an update on their actions.		

4.00	RISK MANAGEMENT
4.01	None as a result of this report.

5.00	APPENDICES			
5.01	Appendix 1 – Draft Forward Work Programme			
	Appendix 2 – Action Tracking for the Social & Health Care OSC.			

6.00	LIST OF ACCESS	IBLE BACKGROUND DOCUMENTS		
6.01	Minutes of previous meetings of the Committee as identified in Appendix 2.			
	Contact Officer:	Margaret Parry-Jones Overview & Scrutiny Facilitator		
	Telephone: 01352 702427			
	E-mail:	Margaret.parry-jones@flintshire.gov.uk		

7.00	GLOSSARY OF TERMS
7.01	Improvement Plan: the document which sets out the annual priorities of the Council. It is a requirement of the Local Government (Wales) Measure 2009 to set Improvement Objectives and publish an Improvement Plan.



Forward Work Programme

Date of meeting	Subject	Purpose of Report	Scrutiny Focus	Responsible / Contact Officer	Submission Deadline
20 January 2.00 pm	January 2022 - Young Carers Contract (NEWCIS) Review of budget risk	To consider the latest budget position as agreed at the meeting on 21 January 2021.	Assurance	Craig Macleod	
	Extra Care	To receive an update	Assurance	Mark Holt	
	Council Plan development 2022-23	To consider the Council Plan development for Social Services portfolio service area.	Pre-decision scrutiny	Jay Davies	
	Children's Services Transformation	To receive an update	Assurance	Craig Macleod	
	North Wales Population Needs Assessment	To consider the report prior to consideration by Cabinet	Assurance	Chief Officer	
	Microcare	To receive an update	Assurance	Chief Officer	
9 June 2.00 pm	Year-end Performance Indicators for Recovery, Portfolio and Public Accountability Measures	To enable members to fulfil their scrutiny role in relation to performance monitoring. Members are required to review the levels of progress in the achievement of activities, performance levels and current risk levels as identified in the Council Plan.	Performance monitoring/ assurance	Facilitator	

40.00	9	As requested at Committee on 30 th September 2021.			
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Regular Items

Month Item		Purpose of Report	Responsible/Contact Officer	
	Safeguarding	To provide Members with statistical information in	Chief Officer (Social	
		relation to Safeguarding - & Adults & Children	Services)	
May	Educational Attainment of Looked	Education officers offered to share the annual	Chief Officer (Social	
-	After Children	educational attainment report with goes to Education &	Services)	
		Youth OSC with this Committee.	,	
May	Corporate Parenting	Report to Social & Health Care and Education & Youth	Chief Officer (Social	
_		Overview & Scrutiny.	Services)	
	Comments, Compliments and	To consider the Annual Report	Chief Officer (Social	
	Complaints	·	Services)	
	Betsi Cadwaladr University Health	BCUHB are invited to attend on an annual basis -	Facilitator	
	Board Update	partnership working.		

Town Centres/Shopping Centre visits - accessibility / equalities – Fiona Mocko

Invite Theatr Clwyd representatives to a future meeting

Action Tracking Appendix 2

ACTION TRACKING FOR THE SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE

Meeting Date	Agenda Item	Action Required	Action Officers	Action taken	Timescale
27 May 2021	Mental Health Services in Flintshire	Following comments made by Cllr Gladys Healey, it was agreed that a letter be written to Welsh Government to ask if a proportion of the additional funding provided to Health Boards across Wales would be provided to Local Authorities to provide mental health support services and whether additional funding would be provided specifically to address mental health issues arising as a result of the pandemic. Also to ask how many child and adult physiatrists were in post across Wales and whether there were any concerns around recruitment and retention.	Facilitator	Letter sent to Welsh Government. Response awaited Further email sent to Welsh Government on 25/11/21	Ongoing
30 September 21	Budget Report	Report on Integrated Care Fund requested	Facilitator	On Forward Work Programme for new Municipal year	Completed

Action Tracking Appendix 2

4 November 21	BCUHB	Information to be circulated when available on the primary care engagement events.	Facilitator/ Rob Smith	Email received from Rob Smith advising that they are finalising the details for the events and will be in touch shortly.	Ongoing



Social & Health Care Overview & Scrutiny Committee

Date of Meeting	9 th December 2021
Report Subject	Social Services Workforce
Cabinet Member	Cabinet Member for Social Services
Report Author	Chief Officer (Social Services)
Type of Report	Strategic

EXECUTIVE SUMMARY

Nationally we are operating in the context of considerable and sustained pressures that threaten Local Authorities' ability to fully meet statutory responsibilities and regulatory requirements. The challenges include:

- Increasing demand and complexity of demand
- Insufficient supply of qualified and experienced social workers and Occupational Therapists
- Shortage of direct care workforce, particularly domiciliary care staff, across local authority and independent sector providers
- Limited applications from suitable foster carers aligned to the age and need profile of our looked after children
- Severely restricted supply of reliable, suitable and affordable agency social workers

Many local authorities are working on a range of short, medium, and long term measures attuned to their particular circumstances. This report identifies the specific risks we are managing locally, and the range of actions we are taking to proactively respond to protracted recruitment and retention challenges across the social care sector. However, resolving the pressures across the social care system will take investment and necessitate a range of actions at a national, regional and local level. This includes a call for a standardised national pay scale for social workers and the harmonisation of pay rates for health and social care workers.

RECOMMENDATIONS

To acknowledge the current staffing crisis in the social care workforce and the impact this is having on the Council's ability to consistently deliver a safe and effective service.

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To support the action being taken in response to this crisis to ensure sufficient capacity and resilience to effectively support vulnerable adults and children.

REPORT DETAILS

1.00	WORKFORCE PRESSURES
1.01	Nationally, there are employment and vacancy pressures across key sectors of the economy. The Health and Social Care pressures are pressing and require urgent action. Demand for services is higher than pre-Covid levels and coincide with a reduced workforce capacity. Regional partners are taking all the actions within their scope and power to alleviate the pressures on the service. Despite all that is being done locally, and in the region, health and social care services are in a serious and deteriorating position which could take us into winter crisis. Our drive to keep services functioning and able to meet demand are being led professionally in the regional Recovery Co-ordination Group. The need for direct assistance with capacity and resources has been escalated to Welsh Government given the emergency we are facing in maintaining services and the risk of service failure this winter.
1.02	Flintshire has responded proactively to recruitment and retention challenges with a range of measures. Specifically, over the last 12 months we have:
	 sponsored officers to commence studies to become social workers sponsored 4 OT places on the Open University (OU) course targeted newly qualified employees and developed a 3 year programme to enable them to develop to level 3 social workers recruited additional children services assistants and developed routes for them to qualify as social workers expanded our pool of Senior Practitioners to build management support for new staff and enhance retention opportunities for experienced workers
	 develop a 'values' based approach to recruiting front line care workers with robust induction and development support worked with the independent sector to support the development of approaches to recruit and retain care workers worked with Health to seek to align and develop complimentary recruitment initiatives and minimise competing for the same cohort of
	 staff worked with local university and colleges to promote social care as a career of choice and to attract new workers launched the Maethu Cymru/Foster Wales brand supported by national TV and media campaigns to attract new foster carers. promoted and worked with social care Wales to launch the WeCare Wales recruitment campaign developed a number of well-being programmes to support the existing workforce to stay well

1.03 However, even with these strategies we have been unable to ensure workforce sufficiency leading to pressures across the social care system. More recently we have social workers moving to other employers via agency work, and to other local authorities offering higher salaries. Unfortunately, even with a rolling programme of adverts, we have been unable to recruit experienced social workers, OT's or a sufficient number of additional direct care workers. 1.04 The workforce challenges are leading to: waiting lists including access to early help, social work and OT support Senior Practitioners in some Teams are having to hold cases, particularly for complex cases where vacancies or sickness arise, there is no capacity in the system to redistribute cases and they are having to be managed by staff on the daily Duty system. This results in reactive case work until the case can be allocated Newly Qualified Social Workers (NQSW), Children Services Assistants/ Personal Advisors (CSA/PA) and Community Care Officers (CCO) are holding or supporting complex cases, necessitating additional management oversight and support pressures in sourcing domiciliary care for people, resulting in a wait for care packages at home pressures in sourcing registered placements for teenagers leading to the short term use of provision operating outside of regulation people waiting for homecare packages in residential care homes in step down placements. pressure of sourcing care home placements in county for nursing and complex dementia care reduced service provision meeting critical needs only 1.05 In response we are making decisive and responsive service adjustments that are interim to ensure that limited resources are deployed proportionately across cases depending on need as demand and risk shifts. This approach reduces risk when compared to an attempt to maintain all levels of service with the same approach i.e. with the risk that services are less targeted and more thinly deployed across the board. 1.06 Whilst it is acknowledged that this approach falls short of our desired good practice models, and in some cases will perhaps only represent minimum acceptable practice and support, our core principle is that any approach will continue to prioritise and maintain safeguarding responsibilities across all services. 1.07 **Workforce Project Board** A Task and Finish Project Board has been established chaired by the chief social serves and head of HR to maximise the effectiveness of recruitment to all roles within in social services. The meeting currently meets fortnightly and takes forward the following specific actions.

1.08 Commissioned care costs – Regional Approach

Actions have been identified to respond to escalating risk of Providers exiting the market as increases in the cost of living and insurance impact on business viability. This includes a letter sent to WG from the Chief Executives of the organisations represented at the RCG, asking for support to implement a long term sustainable fee model for commissioned care.

1.09 Streamlining of HR processes

Actions have been developed to streamline HR processes to make our recruitment processes more efficient and responsive, where deliverable within our current IT systems. These include:

- A fast track approval process for front line Social Services vacancies
- Developing a reduced application form giving due regard to safe recruitment principles and legislation within RISCA (Registration and Inspection of Social Care (Wales) Act
- Review of existing processes to identify opportunities for efficiencies

1.10 Marketing of Job Opportunities

Actions centre on innovative advertising and marketing approaches to attract a good quality workforce. To do this we are building on the Values Based Recruitment initiative and maximising the positive reputation of working for Flintshire County Council. This includes:

- Refreshed advertising and social media campaigns, including training for HR staff on using social media effectively.
- New advertising templates
- Advertising on Care@Flintshire website
- Showcase direct care roles at job fayre / community events including the planning a social care job fayre in February 2022
- Engagement with Job Centre, Careers Wales and DWP to ensure the promotion of social care opportunities
- Promotional video work some already prepared with WeCare Wales.
- Social Services open days / leaflet drops

1.11 Attracting people to work in social care

- Working with Coleg Cambria to promote social care and attract new entrants
- Developing placements for newly qualified staff and those seeking sponsorship
- Working with Communities for Work to explore where we can offer incentives to care workers
- Developing an options appraisal for Social Care Workforce Academy

1.12 Retention of Workforce

There is a need to consider how we might support the current workforce to continue with the resilience and hard work shown to date and retain them in the sector in the long term. Ideas being explored include:

Evaluate proposal for rotation of SW and OT staff in areas vulnerable to burnout and fatigue
 Develop a local sector awards ceremony for direct care staff
 Explore positive approaches to encourage and reward high workplace attendance
 Market Supplement for level 3 childcare social workers
 One of the immediate actions we have had to take is to instigate the authority's Additional Payments Policy. This is in response to a pressing need to ensure sufficient experienced level 3 qualified childcare social workers following repeated, unsuccessful recruitment campaigns. The Policy has enable a temporary 12 month market supplement to bring the salary for level 3 experienced and qualified childcare social workers to become comparable with posts outside of the Council.

2.00	RESOURCE IMPLICATIONS
2.01	The implementation of the market supplement as a short term, temporary arrangement of 12 months duration in November 2021 is £183k. Given the budgetary pressure already in place for Children's Services this will be a Corporate financial pressure to be met from corporate un-earmarked reserves.

0.00	INDAOT ACCESSIVENT AND DICK MANAGEMENT
3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	A comprehensive risk register has been developed and is attached as
	Appendix 1.
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2.00	
3.02	The monitoring and review of a full project risk register is being undertaken
	by a specific task & Finish Group. Risks are categorised as follows:
	 Reputational: the Council's inability to fulfil its statutory and
	essential social care functions.
	essential social care functions.
	 Financial: the pressure created by the escalating cost of agency
	staff and our inability to retain the workforce
	·
	 Legislative: delays in the management of court proceedings and
	safeguarding.
	 Operational: the Market Supplement is time limited with no long tem
	solution
	Other operational risks are detailed in the Project Risk Register

CONSULTATIONS REQUIRED/CARRIED OUT
None
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5.00	APPENDICES
5.01	Appendix 1 Workforce Risk Register

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None

7.00	CONTACT OFFICER DETAILS
7.01	Contact Officer: Craig Macleod Telephone: 01352 701313 E-mail: craig.macleod@flintshire.gov.uk
7.02	Contact Officer: Susie Lunt Telephone: 01352 701407 E-mail: susie.lunt@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
8.01	None

Appendix 2 Social Services Recruitment & Retention Project

Note1: Risk reworded and escalated from Operational to

Version 1

Published: 11/10/2021

Risk Register – Recruitment & Retention

Financial

Underlying Risk Rating	The risk rating before any mitigating actions This risk rating following the planned mitigation actions	
Current Risk Rating		
Target Risk Rating	The risk rating which is realistically achievable and by when	
Risk Trend	The trend of the risk since the last review date	
NC ↔	No change in risk trend since	last review
Risk Status	Open denotes a live risk	Closed denotes a closed risk
SS	Social Services	

Financial									
Risk Ref.	Risk Title	Risk Type	Lead Officer	Supporting Officers	Underlying Risk Rating	Current Risk Rating	Target Risk Rating	Risk Trend	Risk Status
Emerging	The pressure created by the escalating cost of agency workers and our inability to retain staff is not part of the identified pressures and will be additional to any current or future budget plans	Strategic	Neil Ayling	Jonathan Davies	А	А	G Q4 2021/22	↑ R	Open
Emerging	Commissioned providers exiting the market because of escalating costs, where a long term sustainable fee model is unaffordable for Local Authorities.	Strategic	Jane Davies	Dawn Holt	R	А	Y Q3 2022/23	↑ R	Open
Reputation	onal								
Page 25	Insufficient capacity in the social care workforce (social work and occupational therapy) is a risk to the reputation of the Council and its ability to fulfill its statutory and essential functions with respect to social care. Note: We are experiencing significant challenges in workforce recruitment within a highly competitive market, where people are choosing other, often better paid, career	Strategic	Neil Ayling	Craig Macleod/ Susie Lunt	R	R	G Open	R ↑	Open

External Regulation

choices.

Strategic

	Legislative risks and risks to managing court proceedings and safeguarding processes	Operational	Craig Macleod	Susie Lunt	Α	Y	G Q4 22/23	G ↓	Open
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Adult Services

SS09	Insufficient numbers of residential and nursing beds to meet demand because of the long term fragility and instability of the care home sector and challenges in the recruitment of staff	Strategic	Jane Davies	Dawn Holt	R	Υ	Y Open	R ↑	Open
SS10	Insufficient capacity to provide the quantities and levels of care to clients at home and in the community because of challenges in recruitment of direct care workers and instability in the care market	Strategic	Jane Davies	Dawn Holt	R	А	Y Open	NC ↔	Open
Emerging	Vacancy pressures in Adult Services due to difficulties in recruitment and retention of qualified and experienced social workers impact on service delivery.	Operational	Susie Lunt	Jane Davies	R	R	G Open	NC ↔	Open

Children's Services / Early Years

Retention difficulties as council staff become demoralised, as

they perceive agency workers having less pressure and

There is an increased reliance on newly qualified staff,

coupled with an insufficient supply of practice teachers.

Hardship fund ceasing next March and the transition

Failure to work together on salary level with regional and

Emerging between funding streams will become an additional pressure

Emerging bordering Authorities will result in competition between

additional flexibility around working hours.

for the Council.

Authorities.

Officer of the	Services / Eurry rears								
Emerging	Vacancy pressures in Children's Services due to difficulties in recruitment and retention of qualified and experienced social workers impact on service delivery.	Operational	Craig Macleod	Jane Davies	R	R	G Open	NC ↔	Open
Emerging	The Market Supplement Policy ends after 12 months with no exit strategy and no plans for the future for those workers	Project	Craig Macleod		R	А	G Q4 22/23	G ↓	Open
Emerging	Risk to regional working if not co-ordinated with other North Wales Authorities.	Project	Craig Macleod/ Susie Lunt		А	Α	G Q4 22/23	NC ↔	Open
Adult & Cl	nildren's Services		-1			1			,
Emerging	Vacancy pressures across Social Services due to difficulties in recruitment and retention of qualified and experienced occupational therapists impact on service delivery.	Operational	Susie Lunt	Jane Davies	R	R	G Open	NC ↔	Open
Emerging	Risk of escalating complaints from individuals as waiting times increase and individuals express dissatisfaction with services	Operational	Jane Davies	lan Maclaren	Υ	Y	G Q4 22/23	NC ↔	Open
Emerging	Partnership working is adversely impacted as we are increasingly unable to provide a timely response	Operational	Jane Davies		R	R	G Q4 22/23	NC ↔	Open
Emerging	Recruitment difficulties are compounded by a rising absence rate, as staff miss the support of their colleagues due to long term home working.	Operational	Craig Macleod/ Susie Lunt		А	А	G Q4 22/23	NC ↔	Open
ည Generging	Agency rates become unaffordable as demand for qualified social workers exceeds supply.	Operational	Craig Macleod/ Susie Lunt		R	R	G Q4 22/23	NC ↔	Open

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Neil Ayling

Operational

Operational

Strategic

Strategic

Risk Matrix

Emerging

Emerging

Impact Severity	Catastrophic	Υ	А	R	R	В	В
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Critical	Υ	Α	А	R	R	R	
Significant	G	G	Υ	А	А	R	
Marginal	G	G	G	Υ	Υ	Α	
	Unlikely	Very Low	Low	High	Very High	Extremely High	
	Likelihood of risk happening						

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Social and Health Care Overview and Scrutiny Committee

Date of Meeting	9 th December 2021
Report Subject	Transition Service for young people with disabilities, aged 16-25 years old.
Portfolio Holder	Cabinet Member for Social Services
Report Author	Chief Officer for Social Services
Type of Report	Operational.

EXECUTIVE SUMMARY

This report provides information on the support provided to young people with disabilities in Flintshire, the service known as Transition team within Child to Adult team. This report will provide information specifically on:

- The team
- Statistics relating to the team's work
- Challenges for the future, including Additional Learning Needs changes. (ALN)
- Some examples of the support we provide, including work during the pandemic.

RECO	MMENDATIONS
1	Members note the information contained within this report.
2	Members understand the challenges in relation to the support required and work ongoing to help families' expectations as well understanding as the challenges in relation to the Additional Learning Needs Act.

REPORT DETAILS

1.00	EXPLAINING THE TRANSITION SERVICE FOR YOUNG PEOPLE WITH DISABILITIES, AGED 16-25 YEARS OLD REPORT.
1.01	The team Transition supports young people with disabilities between the ages of 16 – 25 years and is located within Child to Adult team (C2A), as part of the wider Disability Services. Social Services discharge its functions under Social Services Well Being Act. This team operates under one team manager, however, one half of team focus on children and young people under 16 years of age, and the other half, the Transition team, focuses on supporting young people aged 16-25 years.

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	If support is still required beyond the age of 25 years, people are transferred to adult Disability teams for long term support. The C2A team not only supports the child or young person with a disability, it takes a whole family approach and so supports the siblings and parents too.
1.02	The team. Merging what was previously two separate teams has worked well for the young people and has provided continuity of worker, and has built on relationships for young people as they become young adults. The team comprises of Social Workers, Support Workers, OT's and Community Care Officers. The interface between both parts of the service benefits young people by sharing experience and knowledge, and by joint working in the best interest of the young person and their family.
1.03	To help children with a disability and families to become familiar with the staff group, we produced a 'Who's who' of the team which is included as an appendix for information. We have found that being able to see a photo of their Social Worker helps the child become familiar with the worker and it has helped with relationships and conversations about what matters to the young person.
1.04	Support is provided to young people aged 16-25 in a number of areas which include • Leaving school and what the future holds • Moving into independent living/supported living • Going to college and planning the future. • Finding work, or using day services • Long term specialist placements • Support to families • Child and adult protection work • Using Direct Payments to achieve what is important to the young person
1.05	Statistics The Total numbers of children and young people supported by C2A team is 213 with an age range of 0-25 yrs. Siblings of disabled children often receive support from the Transition team, they are not included in the numbers. We support a range of disabilities, a child can be considered to be disabled if he or she has a significant problem with, communication, comprehension, physical functioning or vision and hearing needs, disabled children can have a combination of these disabilities. Most common are learning disability, severe autism, and muscular dystrophies, cerebral palsy to name a few. At the time of writing we support. 0-16 years 114 disabled children
	16-25 years 99 disabled young people.
1.06	The budget funding is used to fund, services such as specialist residential colleges placements. The cost of these range can from £100,000 per annum to £3000, 000 depending on the needs of the young person and the specialist nature of the placement. The funding follows the young person into adulthood

1.07 Residential colleges and new legislation changes.

There are changed being introduced as part of the Additional Learning Needs Act. For some young disabled people, local colleges such as Deeside and Northop are not able to offer places. In these instances, Residential colleges offer additional support and specialist staff. For others, families express a preference for residential college over a local one, this can be for a various reasons.

The challenge comes when Social Services rightly assess for what is needed, rather than purely what families want for their son or daughter, social worker are often challenged by families in relation to college and placements and we must manage expectations.

The costs for residential placements vary due to the specialist nature of the provision and are currently part funded by Welsh Government (Educational element). Social Services are asked to fund the Social Care element of the package.

The planned introduction of the Additional Learning Needs (ALN) Act will change this funding arrangement. Welsh Government will transfer the funding to the Local Authority, the local authority will then be expected to fund the Educational element as well as the Social Care support.

It is not yet known what formula will be used to transfer the funding, or how much funding will actually transferred.

The risk to the Local Authority is that the amount of funding transferred may not be sufficient to fund all expectation of assessed needs. Once the detail is announced by Welsh Government, further work will be required. Education and Social Services are prepared for this work and a report could be presented to joint scrutiny committees if appropriate.

Early discussions with the ALN co-ordinator based in Education have commenced. Consideration is being given to into a pooled budget arrangement which will support both Education Social Services. This is work in progress and proposals will be presented to Chief officers on completion.

1.08 **Case study 1**

L is a young man with a learning disability who lived with his parents and was leaving college, making decisions about his future. During this period, his mum sadly died and L and Dad became very dependent on each other. This meant they spent lots of time at home and L became reluctant to leave the house without Dad. The Transition worker supported both of them to look to the future and to help L build a life outside the home. Three years later and after much time invested in this work, L has moved into supported living and is living the life of a young man learning to be as independent as possible. His Dad recently wrote in to the worker and said "Massive thank you. You have really made a difference to L. I know (wife) would be so proud of the young man he has turned into and a lot of that is down to you. He is thriving-you made it easier for me-at times it was really difficult, and with your help and direction, he has finally started to shine".

1.09 **Case study 2**

G is a young man with learning disability, epilepsy, some challenging behaviours and couldn't live with his family. He was in a residential placement some distance away from Flintshire which made family contact difficult. Life was quite restricted for G and his world tended to be limited to within the placement and grounds, his challenging behaviour meant going out and about was difficult, and didn't happen very often. .

The Social Worker wanted to find him something much closer to home, and with a more appropriate provider, his family supported this move. Social Worker supported by Brokerage team sourced a local provider and worked with G's family to progress this move.

He moved back into Flintshire where his family can now see him regularly. He lives with a small number of other young people and the provider has worked really hard with G, offering a homely place to live and support to be able to go out socially. For the first time ever, he recently went to the swimming baths and was supported by two staff to go in the water (staff though he would refuse but to their delight he went in and loved it). The staff took photos and video of the occasion so his family could see how far he has come. This may seem like a small step but it is a massive leap for G. He now has a safe way of exercising and reducing his challenging behaviour. He has a regular outing to look forward to and his behaviour has improved at home.

1.10 During the pandemic, families have found themselves in real difficulties with young people having to stay at home. Parents report increases in challenging behaviour, boredom, loss of routine, stress on parents and siblings. The Transition team have worked tirelessly, working within Covid regulations, to make life easier for families. Support has been difficult to arrange, has involved creativity, and includes

The team worked really hard during the first school closure to get children places in the school hub. This involved presenting the need for this provision to a panel from Education and Social Services, managing the high expectation of parents for full time provision, and arranging the agreed attendance.

Creative use of Direct Payments. An example of one application for funding came from a family who had recently booked and paid for a family holiday on the West coast of Wales. They wanted to take the young person on a boat trip but his challenging behaviour (grabbing people and pulling them) would have been a risk to others on the boat. Direct Payments was used to fund the difference between a shared boat trip and a private hire. The family were able to safely spend time on the boat for relatively low cost.

The team have worked to find whatever support has been available and includes the Theatre Clwyd schemes (which includes siblings of disabled children), and referrals to the Action For Children Creative and Flexible respite. This scheme is funded by Social Services and offers support to families in ways which they decide will work best. One example is that Action For Children can fund a support worker to accompany a family on a trip out and provide one to one support for the disabled youngster, allowing the family to enjoy their time together.

Day to day support for families. One mother told us how invaluable her regular phone calls were with the Social Worker: calls from Social Worker were a lifeline

to me, having someone just there listening to how I was feeling made a real difference to me. She didn't need to do anything, just be there for me, I don't know how I would have coped without it:

The affect the pandemic has had includes an increased request for residential placements amongst families who have found it really difficult to cope with having the person at home.

2.00	RESOURCE IMPLICATIONS
2.01	The Transition to Adulthood budget pressure currently included within the MTFS for 2022/23 is £0.943m. At this time the Local Government financial settlement for 2022/23 is not known, however the Council's budget pressures are significant and there is a possibility of a funding shortfall. To be prudent any controllable or partially controllable pressures are being reviewed and consequences for any reduction or deferment of these pressures explored. There is therefore a chance that should the Welsh Government settlement not provide sufficient funding, the 2022/23 transition pressure may be partially deferred until 2023/24.

3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	In order to support the budget planning process we hold a multi-disciplinary panel consisting of Social Workers, Education and Health colleagues. The panel identifies all our young disabled people aged 14, and considers in detail their likely future needs, these are then tracked through on going panel process and costs attributed, according to need.
3.02	Young people attending Residential College are not included in Charging Policy and therefore no income is received. Social Services could introduce a charge for services as contribute to cost of placement. Any changes to the current system would need careful consideration and consultation. This need further exploration.
3.03	Risk assessment in place as part of the ALN work with education colleagues.

4.00	CONSULTATIONS REQUIRED / CARRIED OUT
4.01	Any changes to current practice will have to be shared with young people, families, schools and wider stakeholders.
4.02	Education colleagues have appointed full time ALN co-ordinator. Both services are working closely on new process.

5.00	APPENDICES
5.01	None

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None

7.00	CONTACT OFFICER DETAILS
7.01	Contact Officer: Jo Taylor Telephone: 01352 701341
	E-mail: jo.taylor@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
8.01	



Social & Health Care Overview & Scrutiny Committee

Date of Meeting	9 th December 2021
Report Subject	Supporting the Stability of the Social Care Market
Cabinet Member	Cabinet Member for Social Services
Report Author	Chief Officer for Social Services
Type of Report	Operational

EXECUTIVE SUMMARY

The whole health and social care sector across the UK is currently experiencing sever pressures arising from COVID 19, the increased demand for services which is higher now than pre-pandemic, and a significant reduction in capacity arising from a mix of staff shortages and the inability to recruit new staff into the sector.

This report reflects the support being made available by the Council to create stability in the independent social care market which in turn increases capacity within the system and supports the health board to maintain patient flow through the health system and support the discharge of patients back into the community.

Flintshire County Council has been leading the work of the North Wales Regional Leadership Group in working creatively to address the challenges and identify immediate and long-term solutions which can either be implemented locally or which need national support by Welsh Government.

Part of this work is to review the funding required to support an inflationary increase for the social care provider market in 2022/23 as well as an ask of Welsh Government for sustainable care fees which address the true cost of care, but which are currently outside the financial envelope available to the Council.

REU	ⅳ⋷	IUAI	IONS

That the Committee notes the progress made to support the stability of the social care sector in Flintshire.

That the Committee reviews and comments on the Social Care cost
pressures.

REPORT DETAILS

2

1.00	EXPLAINING SUPPORTING THE STABLIITY OF THE SOCIAL CARE MARKET	
1.01	The COVID 19 pandemic has brought to a head the sever pressures within the health and social care sector which are manifesting themselves in many different ways. The root causes of these pressures have been identified as: • an increase in demand post-COVID as families who had cared for loved ones at home during the pandemic now turn to services for care and support • people choosing to live at home for as long as possible, with a reluctance to move to a care home, this in turn creates additional demand for domiciliary care • health services are at maximum capacity as they work through waiting lists for planned and routine treatments, whilst also continuing to care for those affected by COVID-19 • the social care workforce are exhausted with many leaving the sector either to take on roles outside social care, or making life-style changes • recruitment of workers into all areas of social care is very challenging, with care providers reporting the lowest number of applicants in living memory. Salaries, terms and conditions and competition from other sectors are seen as the main reasons for these difficulties.	
1.02	National Ask	
1.03	The Council has worked with North Wales partners to put in place an action plan for the region, as well as an ask of Welsh Government to support the sector. This was submitted to Welsh Government in September (Appendix 1) and has been part of the reference material to support Ministers and civil servants. At time of writing we await an announcement from Welsh Government of the type and level of support for social care.	
1.04	Regional Action	
1.05	The North Wales Health and Social Care Tactical Silver Response Group remains in place and has been working to deliver meaningful statistics to help identify pressure points in the system and address those, this includes work to identify and speed up the discharge of those individuals who are medically fit.	
1.06	A North Wales Workforce Task and Finish Group has been established to review and amend the Memorandum of Understanding between care providers and the health board, which gives social care providers access to the Health Board Staff Bank. This Task and Finish Group has also	

	reviewed the establishment of a corer register to support social core
	reviewed the establishment of a carer register to support social care providers who are reliant on agency care staff.
1.07	A Falls Task and Finish Group has been established to develop a multiagency Community Assistance Team who can support individuals who fall at home, or in a care home and who are unable to receive a timely ambulance response due to the increased pressures on the Welsh Ambulance Service Trust (WAST).
1.08	Local Initiatives
1.09	In 2019, the Council obtained funding through Cadwyn Clwyd and the Welsh Government Foundational Economy Fund to establish Microcare with the view to increasing the number of care providers delivering well-being and personal care in the community. The initiative is in its second year and has proven incredibly successful with 22 Microcarers now up and running delivering over 500 hours of care per week to the residents of Flintshire. This has helped to support the increased demand on both inhouse domiciliary care services and the independent sector care providers.
1.10	We have invested in our Care Brokerage Team to allow them to broker not only domiciliary care packages but to also source and arrange care home packages. Our Care Brokerage Team have invested in digital technology and utilise the Council digital mapping system to map community care packages and ensure the best use of resources at any one time.
1.11	Our Care Brokerage Team have also developed strong working relationships with the independent care providers and work closely to maximise carer capacity and reduce travel time to make best use of the resources available.
1.12	Our in-house reablement service continues to work closely with the Care Brokerage Team to deliver flexible care packages and meet the ongoing demand for domiciliary care.
1.13	The Council's strategic decision to support the expansion of Marleyfield House Care Home have created additional capacity in the system to accommodate the Discharge to Recover and Assess model (D2RA) which allows individuals to leave hospital and move into a care home where therapeutic services are on hand to support their reablement and undertake a true assessment of their care and support needs once they have stabilised following a hospital admission and discharge.
1.14	A Planning and Development Officer post has been put in place to coordinate a number of recruitment and retention initiatives across the Flintshire Social Care Sector. These initiatives include a series of job fairs, the use of electric bikes /scooters to allow non-drivers to complete domiciliary care rounds, the delivery of Social Care Induction Training for those not in education, employment or training to explore a career in social care, and many more.

1.15	A Recruitment and Retention Task and Finish Group has been established							
	to review amongst other areas, in-house recruitment processes, creative							
	and modern job adverts and the speed of recruitment.							
1.16	Financial Support							
1.17	There remains a significant risk to the financial stability and sustainability							
	of the independent care provider market as the costs of delivering care							
	continue to rise, an example being the increase in utility costs (gas and							
	electric), increase in food prices, increase in inductance premiums and the							
	necessary increase in staff wages to retain existing staff and recruit new.							
1.18	The sector is competing against other sectors in particular retail and							
1.10	hospitality and Welsh Government support is urgently required to meet the							
	Real Living Wage commitment, as well as additional care provider costs.							
	Treal Living Wage communicity as well as additional care provider costs.							
1.19	The Council has worked with providers and North Wales partners to							
	identify the inflationary cost increases anticipated for 2022/23, these have							
	been set aside in the MTFS as a Social Care Commissioning pressure of							
	£2.698m. This is an increase of £0.746m on the original MTFS forecas							
	take account of the new National Living Wage of £9.50 p.h. and a higher							
	than anticipated Consumer Prices Index increase. Further modelling is							
	currently being undertaken which may result in a further pressure if							
	inflationary increases continue to rise.							
1.20	It is important to state that these are only inflationary increases and do not							
0	address the core concerns relating to the historic national underfunding of							
	the social care sector over many years. The true cost of care is reflected in							
	the Ask of Welsh Government and in subsequent papers submitted by							
	WLGA (Welsh Local Government Association) and ADSS Cymru							
	(Association of Directors of Social Services Cymru).							
	, ,							

2.00	RESOURCE IMPLICATIONS
2.01	The 2022/23 pressure for Social Care Commissioning is currently recorded at £2.698m within the MTFS.
2.02	Resources have been made available through Recovery funding to support the Planning and Development Officer post.
2.03	A limited amount of resource has been made available to facilitate local initiative (for example the printing of leaflets to advertise care as a career and the creation of videos to attract staff to the care sector).

3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	A full Risk Register is recoded and maintained through the Recruitment and Retention Task and Finish Group. These risks are reported at each group meeting and shared with the Social Services Programme Board as a standing agenda item.

4.00	CONSULTATIONS REQUIRED/CARRIED OUT
4.01	Consultation has been taking place regularly with our independent care providers in Flintshire, as well as with partner agencies from across North Wales. The findings from these consultation and engagement sessions are feeding into the work of the Planning and Development Officer and the Task and Finish Group.

5.00	APPENDICES	
5.01	Appendix 1 – North Wales Regional Leadership Board Letter to Welsh Government	

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None

7.00	CONTACT OFFICER DETAILS							
7.01	Contact Officer: Jane Davies, Senior Manager Safeguarding and Commissioning Telephone: 01352 702503 E-mail: jane.m.davies@flintshire.gov.uk							

8.00	GLOSSARY OF TERMS						
8.01	(1) MTFS – Medium Term Financial Strategy – financial pressures which make up the additional budget requirement within a Portfolio area.						
	(2) Health Board Staff Bank – an in house staffing agency arrangement where staff can be employed by the health board on either flexible contracts and provide relief cover when shifts cannot be staffed.						
	(3) Foundational Economy Fund – A Welsh Government fund which allows for the testing of innovative ways of supporting and growing foundational economy so that we can spread good practice right across Wales. The Fund supports experimental projects that are collaborative and innovative, test which Governmental interventions works best and challenge the conventional ways of doing things.						
	(4) Cadwyn Clwyd - Focuses on actions, which stimulate grass-root participation, partnership working and innovation to support projects for						

rural communities and sector groups. It works directly with local communities to assist in the development and implementation of projects, which benefit the area's local economy.

- (5) Real Living Wage The Real Living Wage is based on the cost of living and is voluntarily paid by nearly 9,000 UK employers.
- (6) National Living Wage (National Minimum Wage) The National Minimum Wage is the minimum pay per hour almost all workers are entitled to. The National Living Wage is higher than the National Minimum Wage and is paid to workers over the age of 23.

Bwrdd Arweinyddiaeth Rhanbarthol Gogledd Cymru

Arwain Gwasanaethau Cyhoeddus

North Wales Regional Leadership Board

Leading Public Services



Gan Gadeirydd Bwrdd Arweinyddiaeth Rhanbarthol Gogledd Cymru, Swyddfa'r Arweinydd Cadeirydd Cyngor Bwrdeistref Siriol Wrecsam, Neuadd y Dref, Wrecsam, LL11 1AY From the Chair of the North Wales Regional Leadership Board, Office of the Leader Wrexham County Borough Council Guildhall, Wrexham,

Ffôn/Telephone: 07775 885053

Email/Ebost: stephen.jones@wlga.gov.uk

Date: 29th September 2021

LL11 1AY

Eluned Morgan MS,

Minister for Health and Social Services

Email/Ebost: Correspondence.Eluned.Morgan@gov.wales

Welsh Government, 5th Floor, Ty Hywel, Cardiff Bay, Cardiff, CF10 3NQ

Dear Eluned,

Critical Pressure on Health and Social Care Services in North Wales

The North Wales Regional Leadership Board met on 17th September 2021. The meeting received a report from the Regional Co-ordination Group, which is acting with support from this Board, the Local Resilience Forum and all the partner organisations to assess the current strain on services and to make recommendations on how to mitigate against the pressures on our services.

The meeting heard that there are severe pressures on health and social care services arising from Covid 19, demand for services rising higher than pre-Covid levels and reduced capacity arising from a mix of staff shortages and reduced productivity due to the additional cleaning and PPE measures to prevent the spread of Covid-19.

The Board concluded that services and partners are working well and closely together. Partners in the region are doing their utmost to increase capacity and maintain the flow of patients through the system from the community/primary care into hospitals and then the discharge of patients back into the community, including formal care arrangements.













Bwrdd Arweinyddiaeth Rhanbarthol Gogledd Cymru

Arwain Gwasanaethau Cyhoeddus

North Wales Regional Leadership Board

Leading Public Services



The regional partners are taking all the actions within their scope and power to alleviate the pressures on the service. Despite all that is being done locally, and in the region, health and social care services are in a serious and deteriorating position which could take us into winter crisis. Indeed, one of our officers advised us that the winter pressures of 2021/22 will be the worst we have ever experienced.

Our drive to keep services functioning and able to meet demand are being led professionally in the regional Recovery Co-ordination Group. Our officers had no option but to advise that the emergency we are facing in maintaining services is escalated to you because will not be able to prevent service failure this winter without help from the Welsh Government. We are escalating to only where decisions, capacity and resources are beyond our control.

Special recognition of the efforts of staff in health, social care and public services more generally over the last year is needed. They have kept services going through the Pandemic. However, after over 18 months "hard grind" keeping services going through the Pandemic, many staff are experiencing "burnout". Maintaining the capacity and capability of the workforce is the highest risk identified by the Board in keeping services viable.

The Board appreciates the support and partnership of the Welsh Government throughout the Covid-19 pandemic. The Board aims to establish a strong and focussed partnership with you to develop an action plan with additional resources for relevant partners that will enable us to maintain services through the winter. We welcome that your officials have invited the RCG to make detailed and costed requests on our behalf.

The region's Recovery Co-ordination Group has developed a set of current and costed proposals that cover a dynamic and changing set of pressures on social care and health services. This document of proposals escalates mitigation measures to you. The principle of escalation and the development of proposals have been discussed with your officials and they are expecting the RCG to submit the paper by the 1st October 2021. We are pleased to attach and submit the document for urgent review and discussion between your officials and the RCG.

The proposals are based on whole systems review of the health and social care sector and will benefit both social care and hospitals by improving flow and care in a challenging environment for the sector.













Bwrdd Arweinyddiaeth Rhanbarthol Gogledd Cymru

Arwain Gwasanaethau Cyhoeddus

North Wales Regional Leadership Board

Leading Public Services



Examples of the help we need which were discussed in the meeting were: -

- Retention of the Covid-19 Local Authority Hardship Fund (and LHB/WAST equivalent) through to April 2022. Additional funding will enable partners to help retain and recruit staff through higher pay rates and retention/recruitment bonuses. Social care jobs are simply not competitive with retail and delivery occupations which offer similar or more pay with less stress.
- Messaging from the Welsh Government to manage public expectations through the winter and to clarify pathways to care for the public this winter, in the context of a perfect storm of CV-19, flu and the demand for health and social care services higher than pre-pandemic levels.
- Relaxing statutory and performance reporting and frameworks to allow every possible working hour on the part of all levels of staff to be focussed on responding to averting a winter crisis.
- Instituting a limited temporary visa scheme for health and social care workers aimed at former residents of the UK who left post-Brexit (by making representations to the UKG). The loss of access to employment markets across the EU and the outflow of many EU citizens following Brexit has exacerbated labour shortages.

These suggestions, and more, are described in more detail in the attached RCG paper.

Public Services worked successfully and effectively in partnership under the leadership of the Welsh Government to battle through previous phases of the Covid-19 Pandemic. We seek to offer you a partnership with us. We have a one care system approach that, with the additional resources and flexibilities your support can bring, can make an impact in averting a crisis in care this winter. We look to you for that critical leadership and funding that will enable us to work our way through this year's challenging "winter pressures".

The Board is a strong regional partnership with representation from, and the support of, the six councils, BCUHB, WAST, NWP and NWRFS. If we can work together with you to manage and reduce (where we can) demand and also increase the capacity of the workforce we can maintain services, albeit at a lower level than normal. We can then work together on recovery, seeking to clear backlogs and raise standards of performance and quality of service.













Bwrdd Arweinyddiaeth Rhanbarthol Gogledd Cymru

Arwain Gwasanaethau Cyhoeddus

North Wales Regional Leadership Board

Leading Public Services



We look forward to your officials and our officers in the RCG being able to agree a package of measures for the region that will enable health and social care services to be maintained through this winter.

Yours sincerely,

Councillor Mark Pritchard, Chair, North Wales Regional Leadership Board and Leader Wrexham County Borough Council

Mark Polin OBE, Chair, Betsi Cadwaladr University Health Board

Councillor Ian B. Roberts, Leader, Flintshire County Council

Jan B. Rober

Cynghorydd Linos Medi Huws, Vice Chair, North Wales Regional Leadership Board a Arweinydd, Cyngor Sir Ynys Mon

Councillor Huw Evan OBE, Leader, Denbighshire County Council

Cynghorydd Dyfrig Siencyn, Arweinydd, Cyngor Gwynedd

Councillor Charlie McCoubrey, Leader, Conwy County Borough Council













North Wales Recovery Co-ordination Group Support for North Wales Health and Social Care

The North Wales Recovery Co-ordination Group (RCG) was commissioned by the Regional Leadership Board to develop this submission to Welsh Government. This paper is supported by the North Wales Health & Social Care Leadership Group and the North Wales Health and Social Care Tactical Silver Group, with members of both groups contributing extensively.

As key regional partners in North Wales we have come together to review and act on the Health and Social Care system challenges which we currently face. We have a challenging and deteriorating situation and need to act now to avert a winter crisis within the sector.

We are working together and creatively, to do everything within our scope and power to address the challenges. We have identified both immediate and long-term solutions and this paper seeks to escalate requests where we do not have the decision-making power, capacity or resources to enact solutions. National support and intervention is needed urgently.

The Immediate Ask

We have identified that the recruitment and retention of the social care and social services workforce is the core issue and the region's ask of Welsh Government is summarised below:

- Enhanced national recruitment campaign.
- Parity of esteem reflected in national press releases and Ministerial messaging.
- Relaxation of CIW and SCW guidance and regulations to allow flexible deployment of care workers across services.
- Agree flexibility of grant funding to allow existing WG grants to be utilised creatively to support the current crisis
- Sustainable Care Fees allowing for Fair Pay for Care Workers.
- Sustainable Fair pay for Local Authority employed Care Workers.
- Cease the tapering of the Hardship Fund and extension of the fund into 2022/23.
- Review of PHW Guidance
- Support for Unpaid Carers
- Greater flexibility in the re-deployment of health care staff (OT, Practice
 Development Nurses, CHC staff) to increase the wrap around support for care
 providers with a focus on training, education and quality and safety. This may
 result in breaches in the new CHC framework delivery
- Virtual Recruitment Days
- Recruitment and Retention bonus payments
- Delay in the delivery of the new CHC Framework
- Financial support to facilitate regional mutual aid programmes.

It is acknowledged that these asks need to be supported by full risk assessments completed by the key partners and in conjunction with Welsh Government as required.

Proposals

National Ask	Context	Regional Actions	Initial Costing	Timescale
Enhanced national recruitment campaign	Current TV advertising limited to terrestrial channels. Our request is for more advertising under the 'We Care Wales' brand to include: • more frequent TV advertising • advertising on TV subscription and On-Demand services • a radio advertising campaign • a smart and social media campaign targeting individuals according to their profiles	A north Wales media campaign supported by local marketing activity centring on personal stories to spotlight intrinsic motivation factors associated with care and social services. Identify local "champions" or NHS/GPs to front our Recruitment campaigns – to emphasise the integrated element of our Workforce – e.g "by join the social care Workforce you're helping the NHS"	Regional Budget Requirements – TBC	Immediate
Parity of Esteem Health colleagues are hugely respected and valued (and rightly so), however the same value is not currently bestowed upon the social care workforce	Support from national influencers: First Minister, Minister and Deputy Minister for Health and Social Services, CMO etc. Strong messaging on value of social care, esteem in which workforce are held. A national Hearts and Minds Campaign.	Identify local influencers within our communities and create the same narrative to reinforce the value of social care in our local communities.	No identifiable finance implication	Immediate

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	National Ask	Context	R	egional A	ctions		Initial Costing	Timescale
	Relaxation of CIW	Direction from Welsh Government to					No identifiable	Immediate
	and SCW	allow for the temporary relaxation of					finance	
	regulation	regulations that prohibit the movement					implication	
		of staff between social care settings.						
		With greater flexibility on how the						
		workforce can be utilised, local						
		authorities and care providers can make best use of the workforce						
		available to deliver care where demand						
		is greatest.						
		lo grodicot.						
	Agree flexibility of	Existing grants are available supporting					No identifiable	Immediate
	grant funding to	(for example Flying Start). At this time					finance	
	allow existing WG	of crisis, the flexibility to utilise grant					implication	
	grants to be	money to support the whole social care						
	utilised creatively to support the	sector would give additional support where needed.						
,	current crisis.	Where heeded.						
	carront oncio.							
	Sustainable Care	Current Pay Rates for carers are	We have	already u	ndertak	en an	If our aspiration	By 01/04/22
;	Fees –	around the National Living Wage. The	open boo			_	is to meet	
	Independent	current North Wales fee structure	a care ho	•			£12.00 p.h. for	
	Providers	allows for c.£9.00p.h. for the	utilised th		_		all care workers	
		independent care sector care workers.	model to				across north	
		Those employers compete against:	of Care across the region, based on an average carer pay rate of £10.31p.h.				Wales as well	
		These employers compete against: Local Authorities - £10.82 p.h.					as accounting for other cost	
		Health Board - £11.13 p.h.	Tale of LT	0.5 lp.ii.			increases (e.g.	
		Lidl - £10.70 p.h.	Category	Current	True	%	insurance,	
		'		Average	Cost	Inc.	agency costs,	
		Whilst pay is not the only factor, a lack	Res EMI	£599 £641	£950 £918	59% 43%	increase hours	
		of fair pay to reflect to complexities of	Nurs	£855	£1,221	43%	due to enhance	
		the work is a significant contributor in	Nurs	£897	£1,074	20%	service user	
		the current crisis.	EMI				complexity) the	
							annual gap as	
		Based on 2021/22 figures					at 2021/22 is c.	
		Dased Off 2021/22 figures					£133.803m	
Į			l				~ 100.000111	I .

	Sustainable Fair Pay for Local Authority Care Workers	Increase the average local authority pay rate from £10.82 per hour to £12.00 per hour (an increase of £1.18 p.h.) Based on 2021/22 figures.	An agreement to pay £12.00 per hour as a minimum wage for all direct care staff across the north Wales social care sector would significantly reduce workforce movement between employers. It is acknowledge that initially this may need to be arranged through either 'retainer pay' or 'market supplement' mechanisms until full Job Evaluation processes can be implemented. It is also important to note that this would need to be an all Wales consideration.	£3.534m	By 01/04/22
J	Linked to Sustainable Pay Rate, we need to support providers immediately. We ask that Welsh Government cease the tapering of the Hardship Fund and continue at the current levels until 30 September 2022	We recognise that achieving sustainable care fees may not be achieved until the next financial year (2022/23), therefore our immediate ask is the continuation of the Hardship Fund to provide ongoing support to address inflationary pressures in 2021/22. It is recognised that local authorities agreed to the tapering of the hardship fund, however circumstances have changed significantly since the start of this current financial year and it is felt that the situation has deteriorated significantly. We also ask for a continuation of the Hardship Fund at current levels in first 6 months of 2022/23, to further stabilise the sector.		Estimated cost - £15m Estimated cost - £15m	Immediate

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	National Ask	Context	Initial Costing	Timescale
	Review of PHW	Time a care home is closed (Red Status) – currently we do whole home	No identifiable	Immediate
	Guidance	testing (WHT) after the home has been clear of any positive results	finance	
		(residents or staff) for 14 days. Even if all the results are negative, the home	implication	
		cannot open until after the 21st day. Could consideration be given to		
		removing the restrictions earlier?		
		Other care settings and those for working age adults – further guidance		
		has been promised but to date none received. The risk factors for those		
		who are not extremely clinically vulnerable have not been communicated		
		as fully for those who are.		
		Guidance for new residents entering a red home – Although this is a		
		PHW decision, we need speedier turnaround times on decisions. An		
		example is a young person in hospital for over 2 months who requires a		
		specialist placement which keeps going red, and discharge has repeatedly been missed – this is not in the best interest of the individual to remain in		
		hospital, but no alternative placement is available. In August PHW advised		
		that a Risk assessment tool kit, supported by training was in development		
		and we await it		
ס		All residents require 14 days isolation on return or entering a Care		
Page		Home from hospital (Green or Red Homes) – could the isolation		
е		requirements be reviewed so that vaccination status and an enhanced		
50		testing regime introduced to minimize risk?		
)		Care Home Status – currently a home goes red as soon as there are two		
		or more cases – this does not take into account the size or type of home or		
		the number of staff working there. For our larger homes this results in		
		them being red for prolonged periods and repeated episodes of isolation,		
		restricted visiting for the residents. In addition some of the homes have		
		separate facilities which could be co-horted, so that part of the home (with		
		agreement with the EHO, IPC advice) be opened. Can a more		
		proportionate response be considered?		
		Staffing – In situations of extreme staffing crisis when consideration is being given to moving the residents into hospital or other care settings,		
		could they be further guidance on how this is managed. What		
		circumstances would be acceptable for physically well positive staff		
		(voluntary, with full disclosure) caring for positive residents, and who		
		should make that decision		

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National Ask	Context	Regional Actions	Initial Costing	Timescale
Support for Unpai Carers		Respite – boost to funding provided to local authorities to fund a range of respite provision	c. 8,000 individuals in North Wales receive Carer's Allowance – a payment of £230 to all would equate to	Immediate
Virtual Recruitment Days	Replicate a recent Health Board virtual recruitment Day, but for Social Care specifically	Regional virtual recruitment days to be arranged to obtain expressions of interest to work in Social Care	TBC	Immediate
Recruitment approach – golder hello	All new starter in Wales during the remainder of financial year. Payment made after 6 weeks. Suggest £250.	Local authorities to administer	To illustrate - 3,000 joiners at £250 = £0.750m	Immediate
Retention approach – payment at 6 months (but consider further payment, or split payment to 12 months to encourage stability)	Benchmarked against labour market competitors. Payment in March, to retain capacity by incentivising people to stay in the sector.	Local authorities to administer	c. £20m	By 01/04/22

	of the potential for unavoidable breeches in delivering the New CHC framework and others	Development Nurses, CHC staff) to increase the wrap around support for care providers with a focus on training, education and quality and safety. This may result in breaches in the new CHC framework delivery With additional wrap around support care providers are more confident to provide care for individuals within the acuity mix, supporting improved patient flow from hospital.		is ask.	implication but discussion required with HIW/CIW	
Page 52	Financial support to facilitate regional mutual aid programmes.		De •	elivery of the following: A Falls Support Programme through North Wales Fire and Rescue and St. John's Ambulance – replicating an existing service in South Wales. To reduce demand on WAST to lift fallers.	Estimated costs £0.270m	by 30/11/21
			•	Redeploy office based nurses into the community to create further capacity in the District Nursing and Community Psychiatric Nursing pool	No identifiable finance implication	
			•	Regional advertising campaign	Estimated cost £0.050m	

Context

Greater flexibility in the re-deployment

of health care staff (OT, Practice

Regional Actions

To undertake a comprehensive

risk assessment associated with

Initial Costing

No identifiable

finance

£160.247m

Timescale

By 31/10/21

National Ask

Acknowledgement

of the potential for

Total Financial

Ask

Exc. Hardship Fund

The immediate ask of the North Wales Region

As a region we are also requesting mutual aid from partners, outlined below:

- To build on previous Falls Support pilot programme delivered by North Wales Fire and Rescue and develop a model to support our current demands.
- Acknowledgement of the potential for unavoidable breeches in delivering the New CHC framework and others
- Deliver a proactive, multi-media regional advertising campaign that mirrors the national campaign and compliments local advertising and marketing activity.

Long Term Solutions - Identified for future review

- Grade compression and the need to review and increase pay for Senior Care Workers, Deputy Managers, Team Managers etc. across both the independent sector and local authority employed carers.
- The Health and Social Care Workforce model of the future, including integrated teams, equal pay for equal value, harmonised Terms and Conditions of Employment.
- Extension of the existing Health Board Nursing Bank to include 2nd phase agency brokers.
- Health Board delivery of domiciliary care or the block commissioning of care home beds – at this critical time it is felt this would further destabilise the market.
 However, as a region we appreciate there is a need to explore alternative delivery

models once the immediacy of the crisis has passed.

- Review of the choice agenda.
- Explore options with Registered Socal Landloads to provide low level domiciliary care tasks.

Contributing Partners

- Betsi Cadwaladr University Health Board
- Conwy County Council
- Denbighshire County Council
- Flintshire County Council
- Gwynedd Council
- Isle of Anglesey Council
- Ministry of Defence
- Natural Resources Wales
- North Wales Councils Regional Emergency Planning Service
- North Wales Fire and Rescue
- North Wales Police
- Public Health Wales
- Wales Ambulance Service Trust
- Wrexham County Borough Council



SOCIAL AND HEALTH CARE SCRUTINY COMMITEE

Date of Meeting	9 th December 2021
Report Subject	Ealy Years and Flying Start programmes
Cabinet Member	Deputy Leader of the Council (Partnerships) and Cabinet Member for Social Services
Report Author	Chief Officer (Social Services)
Type of Report	Operational

EXECUTIVE SUMMARY

This report provides an overview of early years services and the impact the pandemic has had on babies and young children. The report sets out: i) the 'response' we deployed to support parents and young children through Flying Start and speech, language and communication (SLC) support and ii) our work with partners to develop effective and seamless services as we enter the recover/rebuild phase of the pandemic and the associated service development.

The next phase of service development is critical. Whilst the pandemic has brought challenges, it has also brought opportunities for new learning and adaptation of service delivery to ensure families receive the support required. Our approach to rebuilding is aligned to the aims of the Early Years Pathfinder Integration and Transformation work, providing the best start for every child, to move beyond pre-pandemic services and structures to a nurturing society that supports the caregiving capacity of parents, to enable parents to help us design better systems, working in collaboration with partners. Our core priorities center on the continuation of support for the Flying Start programme; funding for childcare for more families; services to support relationships and mental health, SLC support and the development and use of partnership data to ensure an informed and targeted approach to service delivery.

This work forms part of wider system development and support and we are urging for longer-term, sustainable financial investment enabling inequalities faced by so many babies, toddlers and young children to be addressed. By doing so, these investments will improve outcomes, save money, reduce inequalities and provide multi-generational post-pandemic brighter futures.

RECO	RECOMMENDATIONS	
1.	Members review and note the work of early year's services to proactively support young children and families during the response phase of the pandemic.	
2.	Members support the continued work to develop effective seamless services with key partner as part of our recovery strategy to providing the best start for every child.	

REPORT DETAILS

1.00	EXPLAINING THE EARLY YEARS FLINTSHIRE
1.01	There are a variety of programmes and teams that provide early years and family support. The aim for all partners is for all Flintshire children, from all backgrounds, to have the best start in life, as it is during the earliest years that a large part of the pattern of adult life is set, creating a foundation for the future. The Flintshire early years population, as at 2020 was 14,064 aged 0-7 year olds, of these 8,373 were aged 0-4 year, of which 1,286 were living in a Flying Start area.
	The focus continues to be on improving outcomes for young children and their families by promoting child and family health; supporting quality relationships and family stability; reducing inequalities in child development; supporting children to be school ready; supporting parenting aspirations and parenting skills; and providing sufficient quality childcare in quality environments to enable children to flourish, and support communities and the economy.
1.02	The pandemic and policy context There are various reports exploring the impacts of the pandemic and lockdown on children and their families. There is concern that the voices of parents with new babies have been absent from key pandemic responses. Research shows there is a mixed picture, shining a light on huge disparities between different families and their communities. (Babies in Lockdown).
	It is evident that both parents and children have been impacted by the change in service offer and delivery, and home and community circumstances within the context of the pandemic. The following is evident: isolation, lack of face-to-face support from frontline services, community groups e.g. playgroups, economic anxiety, some benefiting from a slower pace of life and more time together at home, others anxious, confused and feeling a loss. All parents navigating uncertainty.
	The pandemic has brought challenges, but has also brought opportunities for new learning and adaptation of service delivery to ensure families receive the support required within the restrictions of the Covid Guidance. This has meant ongoing adaptation and development focussing on child outcomes and policy direction. There has been a continued willingness to collaborate to deliver better process for the child and family and move

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towards seamless provision, maximising on all funding streams and opportunities with the central focus on the child.

The Welsh Government, 'Programme for Government' recognises that demands on care services continue to grow and the need to protect, rebuild and develop services for vulnerable people. It prioritises the continuation of support for the Flying Start programme; funding for childcare for more families; relationships and mental health.

The following policy continue to be the drivers for delivery of early year's services.

Prosperity for All Social Services and **Build on current** Well-being of Future Wellbeing (Wales) A Healthier Wales early years Generations (Wales) Act programmes and Coordinating health create a more Four principles of and social care. joined-up, Improve integration well-being, people, involving NHS, local responsive system and collaboration partnership and authority, and other that puts the unique between services integration, and organisations needs of each child prevention at its heart

1.03 | The Flying Start Programme

The Flying Start programme has strong leadership in Flintshire and has continued to develop services for the best outcomes for children. The deliverable programme elements have continued to be: ante-natal; health visiting (1:110 children ratio); parenting; speech, language and communication and quality childcare.

The team continue to focus on supporting children to reach their developmental milestones and preparedness for school through the delivery of the Flying Start programme within targeted areas; the Flying Start outreach programme for children identified with a need outside of the Flying Start areas, and what support could be offered by Flying Start or with/through partners; and working alongside partners to integrate and transform services and the early years system through the Early Years Integration and Transformation Pathfinder and the Early Support transformation (Funding Flexibilities, Children and Communities Grant).

1.04 | Flying Start - Pandemic Response 2020/2021

In 2020/21 the resilience and dedication to Flying Start families and children and commitment to multi-agency working was completely evident. The commitment and dedication of staff galvanised to ensure:

- All centres were kept open for key works and critical health and safeguarding contacts.
- Covid safe environments were developed with enhanced protective measures.
- Health and Safety and risk assessments were developed and are reviewed and updated as required.

Throughout 2020/21 the average Flying Start caseload across the four locality bases was 1,213 children aged 0-4, with support provided to just over 1,800 children. 13,530 contacts were made face to face (17%) or

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virtually (83%) to 1,539 children aged 0-4 years. There were 307 new births and it is these children that are being given attention, along with children not meeting their developmental milestones due to life circumstances and heightened by the pandemic. The services are being delivered and the right early intervention and prevention being offered working with key partners.

During 2020/21, 28 childcare settings delivered Flying Start childcare (17,106 childcare sessions), 35 children were supported through the Flying Start outreach programme (873 sessions), 14 children were identified and received 1:1 support and 36 children received additional funded childcare (1,108 sessions), all supported by the Childcare Advisory team. The team also provided direct advice to 401 families.

Interestingly, this September has seen the highest take up for childcare (available the term after their 2nd birthday), with parents requesting the full five days. This will enable children to interact with other children, develop their social skills, cognitive and motor skills and their speech, language and communication.

1.05 | Flying Start - Recovery Phase 2021/2022

The continued success in 2021/22 includes:

- Support for essential childcare provision and funding working with key partners has been enhanced to best meet the needs of individual children.
- A continued focus on children meeting their developmental milestones with an increasing number of children showing development delays and concerns.
- Operational assistance has been provided to Flintshire foodbank and team working from the Flying Start Family Centres.
- Clinics have been established within Flying Start Family Centres to allow face to face contact via an appointment system.

There continues to be capital investment with a new modular underway in Aston planned for occupancy March 2022, opening of a new childcare facility in Garden City (September 2021) now at full capacity, enhanced facilities at the Westwood Family Centre, Buckley being used for group work and family contacts, and support to other childcare providers including Bagillt Merllyn, which opened October 2021, and is at full capacity, with 29 children registered.

Parenting programmes have been adapted to provide for delivery via virtual platforms, and progress is being made on face to face delivery in a safe environment. This is at the request of parents. The current parenting programme offer has evolved with a current review of the parenting programmes framework and a move to programmes that provide more understanding of the impact of early relationships, brain development and attachment as well as sharing learning with key partners and family workers on positive parenting, social learning theories, engaging families and collaboration; building positive relationships between parent and child and strategies for redirecting negative behaviours. This will be a pilot with a selected cohort of workers across Flintshire in collaboration with Bangor University.

Welsh Government have recognised the increasing demand and various funding steams have been made available to support working earlier in a child's life and addressing issues when they first appear. The current situation is showing the need for parent intervention and support as parents aim to 'recover' and work out their own circumstances. Further developments to support social and emotional development will include the piloting of programmes such as GroBrain and Video Interactive Guidance (VIG), with a local evaluation about continuation. This is being done in collaboration with Health partners including CAMHS Early Years.

1.06 | Speech, Language and Communication

The development of early year's speech, language and communication (SLC) is a key outcome in reducing health inequalities and essential for positive health, wellbeing, education and employment outcomes. Promoting SLC in the early years can reduce the impact of social disadvantage across the life course. The ability to understand and use language is a fundamental life skill. Communication is a complex process consisting of a number of skills. Receptive language (understanding) typically precedes expressive language (spoken language or talking); speech clarity is the way that words are spoken and communication is how we interact with each other. Research shows that children living in poverty suffer disproportionately from delayed language as poor skills are passed down from parent to child.

Through the Early Years Pathfinder, Flying Start, Speech and Language Therapies there is a particular focus on pathways and what works for under 4s and primary school. This is supported by the national guidance, 'Siarad Gyda Fi' 'Talk with Me'. We want every child to have the best start in life. Supporting children in the early years makes a real difference to their futures. We do not want children to face lifelong challenges as a result of poor speech, language and communication skills.

The Flintshire plan through the Early Years Integration and Transformation work for the SLC element is to:

- Develop referral pathways aligned with Flying Start, Flying Start outreach, Health Visitors and Early Help Hub.
- To increase access to information, advice and assistance, creating a model of knowledge about useful approached and strategies, resources and services. Building upon the work undertaken by Flying Start and BCUHB Speech and Language Therapy (SaLT).
- To increase workforce confidence, when to help, and when to seek help and where from. Developing Elkan programme and Wellcomm assessment, alongside other packages which are good for early education onwards including Talk Boost. This will enable the workforce to offer basic language support and prompt referral to SaLT service when required.
- Provide joint role for service provision and service development. Offering direct therapy and 'fast track' for advice and support.

This work started pre-Covid working with key services including childcare settings, early foundation phase education and third sector and has continued to develop. Its aim is to increase the confidence in the workforce, and to implement evaluated and evidence-based, manualised

intervention, with expertise in working with young children, providing support by specialist staff to enhance and develop practice and expertise in learning through play and working in partnership with parents and carers.

1.07 Speech, Language and Communication Pandemic Response 2020/2021

For the speech and language entitlement, the Wellcomm screening tool continued to be used at 20 months. 226 children were screened, with 77 parents given additional support for their child's speech and language. Of those parents who completed a targeted package of support 90% recorded a positive distance travelled, that there had been a positive benefit. Speech and language was also encouraged through provision of age appropriate activity packs, hand delivered by Family Workers and virtual Stay and Play drop-in, with most parents attending at least two drop-in's. Comments received from parents have shown the value of these activities. Settings are also supported to use the Wellcomm screening tool at 36 months with 37 children being screened and appropriate action taken based upon the results. The speech and language offer continues to be developed and is aligned to the Early Years Pathfinder work, supporting ongoing development, integration and transformation.

1.08 Speech, Language and Communication Pandemic Recovery 2021/2022

As part of our ongoing plan for SLC and the development of the workforce the Early Talk Boost and Talk Boost Key Stage 1 have continued with further cohorts of school staff being trained seeing an additional 22 schools (153 staff members) across Flintshire accessing Early Talk Boost and/or Talk Boost KS1 training between 14/04/2021-06/05/2021. Support is provided through a weekly 'Talk Boost Advice Line' and Early Talk Boost and Talk Boost KS1 in cohort 1 and 2 via a virtual Talk Boost Community meeting, giving the opportunity for settings who have been trained to share ideas, tips and give feedback as well as providing Tracker update virtual sessions to schools who have already been trained.

There have also been Early Talk Boost and Talk Boost KS1 overview sessions for those schools invited to attend future training, A Smart Survey has been compiled and sent out to schools who have been trained in Early Talk Boost and Talk Boost KS1 to gain information around the implementation of the intervention within their setting. The information from this survey was used to determine which schools required additional support to develop practice, practice support or implementation support.

The results of this delivery is being captured through I-CAN and the results so far as showing significant impact in a child's SLC development. Further work is being undertaken to explore and better understand the results to support future developments.

Building upon the work of Flying Start and their work with childcare settings, the Wellcomm training has been provided to the Early Entitlement team and some settings. However, this has been halted due to the wider work being undertaken by Welsh Government to look at screening tools. This will be reviewed following the published results from the national SLC screening tool study. Learning is also being shared with Blackpool Better

Start. In the meantime, it has been acknowledged that there is a need for SLC training to be provided to setting staff which would include underpinning knowledge and strategies for supporting children. This is an ongoing piece of work and the impact will be assessed in 2022.

A developing imitative with the Centre for Evidence Based Early Intervention, Bangor University is underway for two Book Sharing studies. The first will be for parents and children ages 2.5-5. The second will be for children ages 10-18 months. Dialogic book-sharing (DBS) is an interactive form of shared reading in which the adult follows the child's interest, asks open questions, follows the child's answers with further questions, repeats and expands on the child's responses, and provides praise and encouragement for the child's participation. This increases children's interest in books and encourages their attention and language skills.

It has strong research evidence and practical applications and demonstrates increased expressive vocabulary and oral language skills both for typically developing children and for those who are considered atrisk. DBS significantly benefits child cognitive development, and the strongest evidence for its value comes from studies where instruction has been provided to carers to improve the quality of their book sharing skills, either in one-to-one interventions, or in small groups.

Dialogic book sharing programmes have reported benefits for parents with low literacy skills as parents can share a book regardless of their level of literacy skills because the approach focuses on describing and talking about the pictures rather than reading. It is found that parents who could not read shared books with their children more frequently and parental vocabulary improved. And benefits for teenage mothers, with an increase in the quantity and quality of words that mothers used with their infants during book sharing and improvements in infant language. With regards to older children who already have some language, more complex conversational turns are promoted.

Current data is showing an increase in speech, language and communication needs post-pandemic. This is being monitored, as is the impact of the work above, and other developments to ensure the best start can be provided to each child.

1.09 | Early Years Data Project

In collaboration with Nesta Cymru we are currently identifying data availability for the early years (ages 0-4), collecting available data and analysing data. Three data themes are currently being considered for analysis and subsequent action. As this is a short term collaboration in the first instance, it is likely that Theme 1 or Theme 2 and Theme 3 could be addressed through a separate project, subject to capacity and priorities.

Theme 1: Early Childhood Education and Care in Flintshire

Theme 2: Understanding the Flying Start/non-Flying Start populations

Theme 3: Parenting programmes – supporting the redesign of the Parenting offer.

In collaboration with Public Health Wales we are currently collecting information and data on the early year's population in Flintshire and

Páge 61

	available services and pathways. There is no central point for the overall view. Systems work is helping to develop this thinking, with an improved understanding across partners and action plan for continuous improvement to ensure we build back better and provide strong foundations for children.
1.10	The Way Forward In collaboration with partners every aim is made to make the best use of funding opportunities and develop, transform and integrate services for an improved child and family journey whether that be universal, early intervention and prevention or targeted support. The challenge is the multiplicity of funding streams and eligibility, working towards a shared vision and principles of operation, taking forward a shared action plan and goals.
	Our collective approach will be made communicated through social media, websites and new solutions e.g. DropBox as well as the Family Information Service e.g. Dewis, Health and Wellbeing Wales app for workers.

2.00	RESOURCE IMPLICATIONS
2.01	There are no immediate financial implications for Flintshire County Council.

3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	Provision of services outlines in this report will impact positively on structural and social inequalities.

4.00	CONSULTATIONS REQUIRED/CARRIED OUT
4.01	Consultations have been undertaken with key partners to form the baseline assessment for the Midwifery and Early Years Maturity Matrix.
	It is aimed to do further consultations during 2021-22 to identify service and population needs to support the development of the Early Years Strategy and Model. This will include work with Chester University to assess the impact of Covid on parents of children ages 0-4.

5.00	APPENDICES
5.01	Flintshire Flying Start Highlight Report 20210/21

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None

7.00	CONTACT OFFICER DETAILS
7.01	Contact Officer: Gail Bennett, Early Years and Family Support Manager Telephone: 01244 551052 E-mail: gail.bennett@flintshire.gov.uk Hayley Wilkes, Flying Start Manager Telephone: 07775544965 E-mail: hayley.wilkest@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
8.01	 (1) Early Years: defined by Welsh Government as children pre-birth to 7 years old. (2) Flying Start: Welsh Government flagship programme for supporting children ages 0-4 based on locality and need. There are four entitlements: Health; Parenting; Speech, Language and Communication; Quality Childcare for children the term after their 2nd birthday and for children with identified needs.



Flintshire Flying Start Highlight Report 2020/21







This highlight report summarises and complements the 2020/21 Flying Start yearend report, to demonstrate the achievements of the Flying Start programme and team members during the Covid Pandemic. Their resilience and dedication to Flying Start families & children and their commitment to multi-agency work is exemplified in the following statistics.

Investment in Flintshire Family Centre's

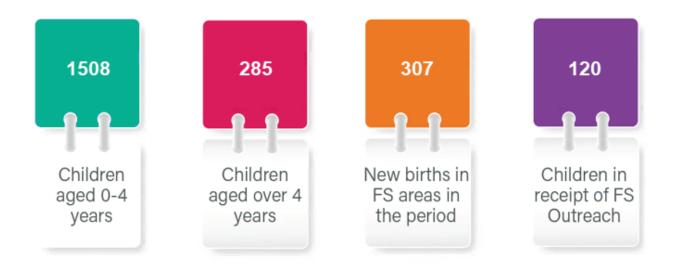


Locality investment in the period

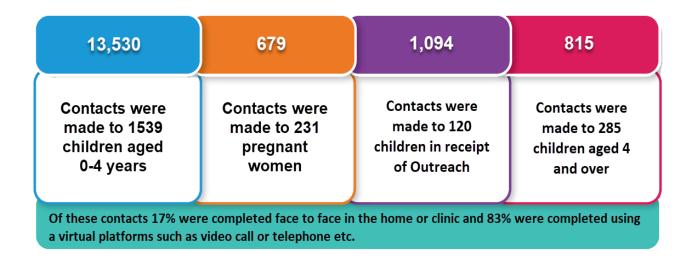


Children benefiting from Flying Start services

Throughout 2020/21 the average caseload across four teams was 1,213 children aged 0-4. Overall the teams managed to successfully contact and deliver support and Flying Start services to just over 1,800 children as follows:



They contacted these families face to face or virtually the following number of times:

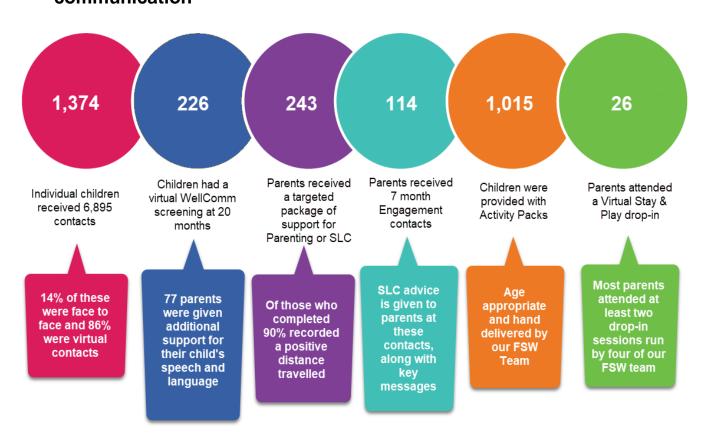


Below is a brief summary of what was achieved in 2021/22 by the Flying Start teams

The Health Team

1,438	Individual children had 7,223 contacts with a health visitor or a community staff nurse, of these completed face to face in the home or a clinic and 83% were completed virtually	23% were
1,087	Individual children received over 2000 Core contacts from the Healthy Child Wales Program in	n the period
230	Pregnant women received antenatal contacts offering advice and support about pregnancy, bi breastfeeding	irth and
463	Individual children received a Developmental Review at fifteen or twenty seven months of age health visitor or community staff nurse	from a
261	Parents received home safety advice from a health visitor or community staff nurse in the peri	od
155	Flying Start families received support and advice from the Flying Start Midwife who also facilit Solihull Antenatal courses	ated 19 Virtual
126	Individual children received over 700 Safeguarding contacts in the period	
272	Children received a 3.5 year pre-school contact in the period	
54	Parents accessed the Flying Start Counselling Service receiving over 400 sessions between help and support with their mental health	them, to
"	Katie has been amazing and completely changed her life. Without Katie she would not have had the confidence to make the changes she had. "A" said she has built up a brilliant relationship with Katie.	"
"	I really enjoy the contacts. She gives me good ideas on things that I can do with "S" with weaning and play. We work out a plan of how to do things together.	"
66	She has been amazing with me. I can always give her a ring, I never have to think 'who shall I ring 'she isn't just a health visitor to me, we always have a chit chat and have a laugh about things, sometimes those little laughs will make someone's day.	"
66	Thank you very much Health Visitor. It's so nice to see people have faith in me as a parent.	"

Family Support Team – parenting, speech, language & communication





Bespoke Targeted Packages of Support

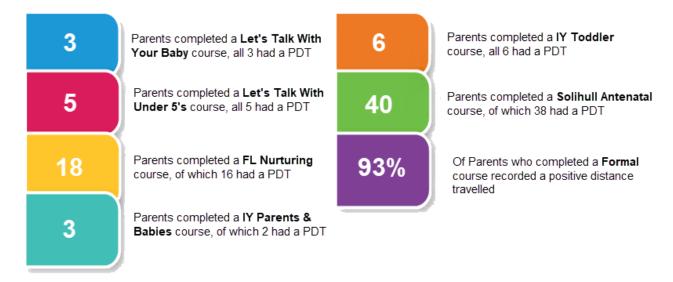
163 parents completed 177 Bespoke Targeted Package of Support in the period with 90% recording a positive distance travelled. Below is the number of parents that completed each support type:

40	39	20	15
Behaviour	Expressive Language	Understanding of Language	Sleep
11	10	9	8
Baby Massage	Play (Parenting)	Potty Training	Speech & Language
5	5	4	4
Routines	Diet	Play (SLC)	Clarity
Routines 3	Diet 1	_	Clarity 1

Parenting and Early Language (SLC)

41 Formal and Informal structured group based courses were completed in the period virtually. Over one hundred parents attended these courses with 94% recording a positive distance travelled (PDT):

Formal courses



Informal courses







Childcare and Advisory Teacher Team



In the period 28 childcare settings delivered Flying Start childcare and were supported by the Childcare Advisory team throughout:

	35	Childcare settings had 650 contacts from an advisory teacher in the period
--	----	--

401	Families were provided with 670 contacts of childcare advice, support and information from an advisory teacher
	information from an advisory teacher

- Flying Start eligible children aged 2-3 years attended 17,106 childcare sessions in 28 childcare settings
- Children attended 873 outreach funded childcare sessions
- Children attended 1,108 Additional Funded childcare sessions in 17 childcare settings
- Children had a 36 month WellComm Screening at a Flying Start childcare settings
- 14 Flying Start Children were identified and received 1:1 support in a childcare setting





101 children were placed in childcare through the CCAS scheme, of those 24 lived in a FS area and 4 had been in receipt of Flying Start Outreach Childcare support pre COVID lockdown.

In August, as the C-CAS Grant funding period came to an end, the Flying Start Advisory Teaching team engaged with Health and Social Care professionals to identify children still at increased risk. As a result of this, in September, 38 children, recognised as needing continued support, remained in childcare. Of these 14 children were not living within a FS postcode and funding for their childcare place was met through Flying Start Outreach



30,407 934 400 17,095 People saw our top 5 posts Page likes have been Post have been People saw our EPEC Being a Parent course received so far in the created within the posts in their Story time with Sue first year Facebook page Family Worker here to help timelines Virtual drop in Juliet- Top tips video

May 2020 Flintshire Flying Start Facebook page was launched to allow the team to remain in regular contact with Flying Start families as the situation of Covid was changing rapidly.

The Facebook page has grown over the past 12 months and has been a useful tool to inform the parents of any changes being made to the service in response to COVID-19.

The page has also allowed the team to provide families with simple ideas and activities to carry out with their children at home to support their development while childcare settings, drop in's and home visits were placed on hold in response to COVID-19.

We also provided advice and support through the page to families with areas that parents had reported they were struggling with due to lock down for example Positive behaviour strategies, sleeping and maintaining routines.



More comments from our families and childcare:

66	She has been amazing with me. I can always give her a ring, I never have to think who shall I ring, she isn't just a health visitor to me, we always have a chit chat and have a laugh about things, sometimes those little laughs will make someone's day.	"
66	Thank you again so much for sorting Xmas referral out. It's took a huge worry off my mind that they will have some presents now.	"
"	Having counselling has helped me be able to deal with life so much better. How I approach issues and situations has improved so has my self esteem.	"
"	Thank you so much, really appreciate it, my head head don't seem to be coping with paperwork at the mo, I was getting stressed out very quickly x	"
66	Beth is lovely and she has already started helping me loads with "M" despite not being able to visit. I am looking forward to seeing her at my house so she can help me even more as she is knows about a lot of things.	"
66	She's great. I look forward to the contact and she has helped me into other groups to learn how to support "K".	"
66	Baby massage has given me a different bonding experience with my baby. It has been an opportunity to see other people and their babies. It has given me something to get ready to go to, thank you so much I'm glad we got to do the course its been fun to do something with others	"
66	I have felt allot more confidence and relaxed about having the baby because of the things I have learnt during the course! And now he is here I am able to put to practice the things I have learnt!	"
66	I cannot thank you enough for what you have done for me and my family. The support you have shown me has proved invaluable. You are fantastic at what you do	"
66	Thank you so much for sorting it out for me (AFC). It's been really helpful having 2 afternoons a week to get Uni work done.	"









Childcare Comments

Angela was a great help at a time of need as she managed to find my son a one to one support. This was necessary as his nursery had said he couldn't go unless we found one. My son now attends his local nursery, with the help of one to one support, so without the help of Angela and Flying Start this would not have happened. Due to COVID19, Angela arranged Zoom meetings for us to meet the 1:1 support worker, before my son met her at the setting. Angela also invited us to join Makaton courses to see if that would help my little boy with his communication.

"

The support, feedback and information we receive from our advisory teacher is essential. Also during the pandemic and now as we are attempting to get back to normal we need to support the children even more and again with the help of the advisory teacher . Claire will respond to requests and queries we have and arrange straining around the nursery opening times. Claire has presented on numerous occasions which are extremely informative and enables to discuss the subject indepth

Here at this setting we are a group of three childminders working together from my home. We have cared for children from flying start for over 15 years, in one capacity or another. We are proud to be part of the flying start team and take our role very seriously, enabling us to provide quality childcare in a loving home environment. None of this could be done without Claire, our Flying start advisory teacher.













I always find that Angela and all the Flying Start staff provide a very personal service to me and the families we work with. Everyone is treated with respect, and individual needs are identified and special care is taken to ensure families receive the help and support they need, which is then used to find the appropriate setting for each family. Parents have commented to me how supportive you are, and that they feel comfortable talking through their issues, prior to starting at my setting.

"

66

Thank you for all that you do and the positive impact and opportunities that are created for childcare providers, families and especially the children we support.



SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	09 th December, 2021
Report Subject	Direct Payments
Cabinet Member	Cabinet Member for Social Services
Report Author	Chief Officer for Social Services
Type of Report	Operational

EXECUTIVE SUMMARY

Direct payments (DP) are monetary amounts made available by local authorities to individuals, or their representatives, a DP enables people to arrange individual solutions that meet their assessed care and support needs, and achieve agreed well-being outcomes. A DP can support Adults, Children and informal cares.

Direct payments are an important mechanism by which people can exercise choice, voice and control to decide how to meet their needs for care and support and achieve their personal outcomes.

Direct Payments support a collaborative approach to designing bespoke care and support solutions. Individuals with eligible care and support needs are empowered to focus on what matters to them, identify key outcomes that enable them to live their best life. A direct payment can be used to purchase support from others and moves away from the traditional approach of buying in care from commissioned providers offering much more flexibility and choice often at a lower cost.

Direct payments feature strongly throughout the SSWB (Wales) Act 2014 as a means of helping people exercise choice and control.

Fundamentally, the direct payments approaches adopted in Flintshire focus on strengths and outcomes. Flintshire County Council are recognized Nationally for their leading work in relation to supporting individual choice and control and specifically are seen as an exemplar in relation to our direct payments scheme.

RECOMMENDATIONS

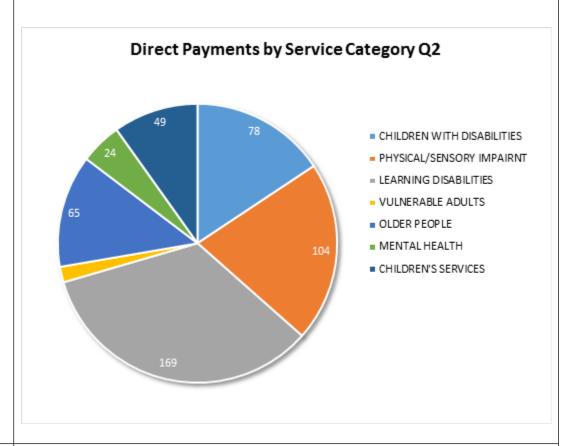
1 Members note the information contained in the report and the progress made.

REPORT DETAILS

1.00	EXPLAINING DIRECT PAYMENTS
1.01	Direct payments are monetary amounts made available by local authorities to individuals, or their representatives, to enable them to arrange individual solutions that meet their assessed care and support needs, and achieve agreed well-being outcomes. In the case of informal Carers direct payments can be used to meet their eligible support needs.
1.02	Direct payments replace care and support provided directly, or commissioned by, a local authority. They can be for all, or part, of a person's care and support arrangements.
1.03	Direct payments are an important mechanism by which people can exercise choice, voice and control to decide how to meet their needs for care and support and achieve their personal outcomes.
1.04	Direct Payments support a collaborative approach to designing bespoke care and support solutions. Individuals with eligible care and support needs are empowered to focus on what matters to them, identify key outcomes that enable them to live their best life.
1.05	Fundamentally, the direct payments approaches adopted in Flintshire focus on strengths and outcomes, they aim to enable citizens to retain autonomy over their life, support, self-determination and autonomy and efficient use of resources.
1.06	Direct payments feature strongly throughout the SSWB (Wales) Act 2014 as a means of helping people exercise choice and control. In the provision of, and operation of direct payments, local arrangements are aligned with The Care and Support (Direct Payments) (Wales) Regulations 2015' made under sections 50, 51, 52 and 54 of the Act.
1.07	Direct Payments in Flintshire Flintshire County Council are recognised Nationally for their leading work in relation to supporting individual choice and control and specifically are seen as an exemplar in relation to our direct payments scheme. The Flintshire Scheme has a long standing relationship with WG direct payments policy leads and we have supported a wide range of WG led initiatives to embed citizen directed principles and practice.
	The recent CIW Social Care Quality Assurance Inspection recognized the contribution being made by our direct payments scheme to enable citizens to exercise choice and control.

There are currently 488 people receiving a direct payment in Flintshire. This represents the highest number of recipients per head of population of any Welsh Local Authority.

During Quarter 2 (July to Sept) 498 people received a Direct Payment in Flintshire. This represents the highest number of recipients per head of population of any Welsh Local Authority. Direct Payments currently make up 39% of Home based services.



1.08 Direct Payments Team

In April 2019 FCC made the decision to establish an in-house direct payments support service. Prior to this date FCC had contracted with a specialist company to discharge statutory responsibilities for providing information, advice and support to Flintshire direct payments recipients.

The service has been completely redesigned and now provides a far more holistic service benefitting both Flintshire Citizens, social services and third sector partners. The team are unique in that they support people from across society regardless of need, from birth through to older age, informal Carers and people with mental ill health. They are available to work alongside all of Flintshire SS operational and social work teams as well as key partner organisations.

1.09 **Key Benefits**

- Far greater control over the service and how it meets the department's priorities.
- Service works collaboratively with social work teams to embed person centered practices in line with the SSWB (Wales) 2014 Act

- Shared systems, improved communication, and better access to the service.
- Outcomes focused Referral process centers on what is to be achieved and supports joint working with the individual to own the outcome and develop bespoke solutions.
- Better placed to work in partnership with third sector organisations.
- Autonomy to develop, test and imbed innovation in line with the depts. Ambition and priorities.
- Far more holistic approach centered on the needs of citizens in the first instance, but also practitioners, communities, partners etc.
- Consideration for the Personal Assistant market in terms of standards, quality, training and opportunities for progression.
- Support that is proportionate. Importantly, we don't want to over support people, but enable them to manage their own arrangements.

Some feedback from citizens using Direct Payments.

- "My life before direct payments was sometimes chaotic with Agency support. My team support each other and I am never let down now"!
- "Yes, it means our son has time away from the family unit to build on his confidence and gives the rest of the family some down time to do things we couldn't normally do"
- "It provides the freedom to use the funds to enrich my son's life in ways best suited to his needs and well-being. I recruit my Personal Assistants for my son so that he has a mix of ages and sexes and train them myself to help them better understand his needs".
- The system has enabled me to find the most appropriate care for my husband, its flexibility has given me as a carer much needed support".
- "I employ a Personal Assistant, without him I would be lost"

Prevention – Direct payments are increasingly being used to nurture opportunities for people to collaborate and use their direct payments collectively.

Further to this people have been supported to manage their own difficulties with natural supports rather than requiring more formal statutory responses that often take the control away from citizens.

Example 1:

A Yoga group established by a handful of people experiencing mental health difficulties. The group has expanded to a close support network of up to thirty people who have created their own safe space where they can establish relationships and support each other to overcome challenges. The social return on investment is significant and we are very keen to explore other similar arrangements alongside people.

Example 2: We have supported a group of gamers who had previously been quite isolated. They have now come together to form a small gaming

group where they meet, engage with each other, provide mutual support and manage their difficulties without the need for statutory services. This has proven highly successful as well as being empowering and resource efficient.

1.10 Flintshire Direct Payments Hub

Working in partnership with Flintshire I.T we have realised a vision to create a one stop shop for citizens to obtain information, advice and support in relation to direct payments. The platform encourages people to find out about direct payments and consider whether they might benefit from a different approach to meeting their assessed care and support needs.

Over a two year period, we completely redesigned the FCC Direct Payments Web pages. Our approach to providing proportionate support and information has been very well received, with positive feedback from citizens, personal assistants, professionals, third sector partners, Welsh Gov and UK wide LA's.

1.11 Next Steps

The team are working with a Flintshire based film company to create short films show casing the benefits of direct payments to citizens and personal assistants. These will be made available through the hub in a space dedicated to showcasing exciting examples of how direct payments are helping change lives in Flintshire.

1.12 **Personal Assistant Workforce**

For many citizens wanting maximum choice and control over how their physical support is met, employing Personal Assistants is a very attractive option.

Personal Assistants are employed directly by the person needing help and support, or by an appointed Suitable Person. Supported by the Flintshire Direct Payments team citizens are assisted to explore their networks to identify and recruit the perfect person for them. People generally want to employ people they can develop a trusting relationship with and many PA's stay with their employer and adapt to their changing needs over considerable lengths of time.

There are approximately 500 personal Assistants working across Flintshire, supporting some of our most vulnerable citizens. They are a diverse workforce made up of a wide range of people delivering support for numerous different reasons.

The Flintshire direct payments scheme has consciously set out to change the support available for this significant, but sometimes disassociated workforce. Some of the initiatives to date are:

Personal Assistant Coordinator engaging with the workforce.
 Pastoral support for PA's working in complex/isolated positions being built into the role.

- Personal Assistant Code of Conduct developed and implemented.
 This has helped PA's understand their role, where they fit in and what the expectations of them are.
- Flintshire Personal Assistant Induction Certificate developed around 7 core modules and designed specifically around the PA role. Since its introduction 11 PA's have completed the certificate and a further 35 are working towards the award. For PA's enrolled on the scheme there are a further 50 training modules that they are able to access in their own time. This is the first initiative of its kind and we are in discussions with Social Care Wales regarding the potential for a National approach.
- Personal Assistant Portal developed to aid recruitment for direct payments employers and to promote work opportunities for prospective PA's.
- Dedicated Direct Payments Social Media pages developed and being embedded.

1.13 | Personal Assistant Portal

Another first for Wales, the Flintshire PA Portal enable direct payments employers to search for available PA's in their area autonomously and for PA's to promote themselves and their availability to work.

Personal Assistants complete a profile describing themselves, their experience, availability etc. and prospective direct payments employers can search the data base and engage with people they feel may be able to help meet their needs and/or achieve personal well-being outcomes.

The Flintshire Direct Payments Team undertake back office tasks to ensure the system remains safe for everyone using it.

1.14 Next Steps

The team are working with I.T to develop and roll out a vacancy tool that enables citizens to post their requirements i.e. needs to be met/outcomes to be achieved, making the system a two way process.

We are also exploring whether the platform could be used to help join people together so as they can jointly procure solutions to assessed needs collectively where appropriate and beneficial, rather than having everyone arranging individual support.

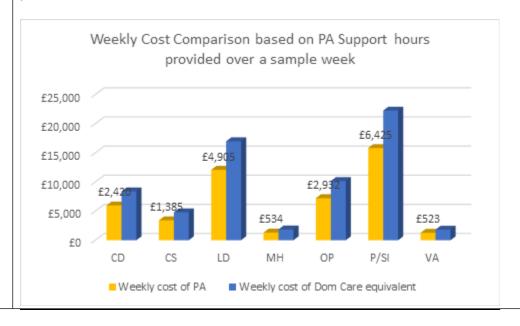
2.01 Direct Payments – Value for Money The Flintshire Direct Payments Scheme is highly transparent. Funding is paid into dedicated accounts to be used to meet assessed needs and outcomes. Direct payments recipients only use the funding when it is needed, rather than for scheduled care calls. This level of flexibility is highly valued by individuals. Unspent funding is returned to the council to support other people. Year on year approximately 200K of unspent direct payments is returned to social services.

The hourly rate made available to individuals to employ personal assistants is £13.28 per hour. This hourly rate all goes to the individual worker in the form of wages, cost for training and holiday cover. There is no managerial costs as are present in care agencies.

The following was made over a sample week and provides a crude comparison of the direct financial savings being realized.

The following chart was calculated from a sample of 255 DP recipients who use a PA, using their weekly hours x the PA rate (13.28) week. This provides a crude comparison* and the direct potential financial savings being realised, in comparison to the hourly Dom Care agency rate of (£18.67).

*These figures do not take into account contingency arrangements, avoidance of in county / out of county residential care and/or specialist provision.



3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	Positive impact on individuals able to use the scheme as well as low risk
	from an organisation perspective in that we have robust monitoring in
	place.

4.00	CONSULTATIONS REQUIRED/CARRIED OUT
4.01	Fundamentally, the direct payments approaches adopted in Flintshire focus on strengths and outcomes, they aim to enable citizens to retain autonomy over their life, support self-determination and autonomy and efficient use of resources. There is a key focus on enablement, reciprocity and coproduction. We are also committed to work with individuals and their communities to build a level of resilience that enables people to remain independent & interdependent for as long as possible.

5.00	APPEI	NDICES

5.01	None

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None

7.00	CONTACT OFFICER DETAILS
7.01	Contact Officer: Mark Cooper Telephone: 01352 701101 E-mail: mark.cooper@flintshire.gov.uk;

8.00	GLOSSARY OF TERMS
8.01	Direct Payments - a form of payment to people assessed as having Care and Support needs in accordance with Social Services and Well Being Act to achieve agreed outcomes.
	Outcomes - What is important for the person to achieve to maintain or improve their quality of life.
	Citizen - Person assessed as having Care and Support needs.



SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE

Date of Meeting	Thursday 9 th December, 2021
Report Subject	Council Plan 2021-22 Mid-Year Performance Reporting
Cabinet Member	Deputy Leader of the Council for Performance and Cabinet Member for Social Services
Report Author	Chief Officer (Social Services)
Type of Report	Strategic

EXECUTIVE SUMMARY

Flintshire County Council Reporting Measures 2020/21 were identified by portfolios and approved by Cabinet in September 2020. This report presents a summary of performance at the mid-year point for 2020/21 relevant to the Social & Health Care Overview & Scrutiny Committee.

This mid-year performance monitoring report for the 2021/22 Council Plan shows that 70% of activities are making good progress with 73% likely to achieve their planned outcomes. 53% of the performance indicators have met or exceeded their targets, 2% are being closely monitored and 20% are currently not meeting target. The remaining 25% account for measures which are new and are being monitored as a baseline year.

This report is an exception-based report and concentrates on under-performance against target.

RECOMMENDATIONS

1. That the Committee consider the Mid-Year Performance Monitoring Report to monitor areas of under performance and request further information as appropriate.

REPORT DETAILS

1.00	EXPLAINING THE PERFORMANCE AT YEAR END 2020/2021
1.01	The year-end performance monitoring reports provide explanation of the progress being made toward the agreed measures set out in the Flintshire County Council Reporting Measures 2020/21.
	These measures were approved by Cabinet after targets for 2020/21 were reassessed for forecasted performance due to the disruptions caused during the response phase of the pandemic.
1.02	This report is an exception-based report and concentrates on under- performance against in-year targets.
1.03	Monitoring Activities
	Each of the sub-priorities under each theme within the Plan have high level activities which are monitored over time. 'Progress' shows action against scheduled activity and is categorised as:
	 RED: Limited Progress – delay in scheduled activity and, not on track. AMBER: Satisfactory Progress – some delay in scheduled activity, but broadly on track.
	GREEN: Good Progress – activities completed on schedule and on track.
	A RAG status is also given for the assessment of our current level of confidence in achieving the 'outcome(s)' in-year for each sub-priority. Outcome is categorised as:
	RED: Low – lower level of confidence in the achievement of the outcome(s) in-year.
	AMBER: Medium – uncertain level of confidence in the achievement of the outcome(s) in-year.
	GREEN: High – full confidence in the achievement of the outcome(s) in- year.
1.04	In summary our overall progress against activities is:
	Progress RAG
	Making good (green) progress in 99 (70%)
	Making satisfactory (amber) progress in 38 (27%)
	Making limited (red) progress in 5 (3%)
	Outcome RAG
	 A high (green) level of confidence in the achievement of 104 (73%) outcomes.
	A medium (amber) level of confidence in the achievement of 31 (22%) outcomes.

	A low (red) level of confidence in the achievement of 7 (5%) outcomes.					
1.05	Monitoring our Performance					
	Analysis of performance against the performance indicators is undertaken using the RAG status. This is defined as:					
	RED - under-performance against target.					
	 AMBER - where improvement may have been made but performance has missed the target. 					
	GREEN - positive performance against target.					
1.06	Analysis of current levels of performance against target shows the following:					
	27 (53%) have achieved a green RAG status					
	1 (2%) have an amber RAG status					
	10 (20%) have a red RAG status					
	13 (25%) have no target set					
1.05	There are no performance indicators (PIs) which show a red RAG status for current performance against targets relevant to the Social & Health Care Overview & Scrutiny Committee.					

2.00	RESOURCE IMPLICATIONS
2.01	There are no specific resource implications for this report.

3.00	IMPACT ASSESSMENT AND	O RISK MANAGEMENT				
3.01	Ways of Working (Sustainable Development) Principles Impact					
	Long-term	Throughout all of the Mid-Year Monitoring				
	Prevention	Report there are demonstrable actions and				
	Integration	activities which relate to all of the				
	Collaboration	Sustainable Development Principles. Specific case studies will be included in				
	Involvement	the Annual Performance Report for 2021/22.				
	Well-being Goals Impact					
	Prosperous Wales					
	Resilient Wales	Throughout the Mid-Year Monitoring				
	Healthier Wales	Report there is evidence of alignment with				
	More equal Wales	the Well-being Goals. Specific strategic				
	Cohesive Wales	and policy reports include impact and risk				
	Vibrant Wales	assessments.				
	Globally responsible Wales					

Council's Well-being Objectives

The Council undertook a review of its Well-being Objectives during the development of the 2021/22 Council Plan. The updated set of Well-being Objectives are a more focused set of six. The Well-being Objectives identified have associated themes for which they resonate. See the full list below.

Theme	Well-being Objective
Poverty	Protecting people from poverty by supporting them to meet their basic needs
Affordable and Accessible Housing	Housing in Flintshire meeting the needs of our residents and supporting safer communities
Green Society and Environment	Limiting the impact of the Council's services on the natural environment and supporting the wider communities of Flintshire to reduce their own carbon footprint
Economy	Enabling a sustainable economic recovery
Personal and Community Well- being	Supporting people in need to live as well as they can
Education and Skills	Enabling and Supporting Learning Communities

4.00	CONSULTATIONS REQUIRED / CARRIED OUT
4.01	The Reporting Measures are monitored by the respective Overview and Scrutiny Committees according to the priority area of interest.
4.02	Chief Officers have contributed towards reporting of relevant information.

5.00	APPENDICES
5.01	Appendix 1: Council Plan 2021/22 Performance Report – Mid-Year.

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	Council Plan 2021/22.

7.00	CONTACT OFFICER DETAILS
7.01	Contact Officer: Margaret Parry-Jones, Overview & Scrutiny Facilitator
	Telephone: 01352 702427
	E-mail: Margaret.parry-jones@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
8.01	Council Plan: the document which sets out the annual priorities of the Council. It is a requirement of the Local Government (Wales) Measure 2009 to set Improvement Objectives and publish a Council Plan.
	Action – Each sub-priority have high level activities attached to them to help achieve the outcomes of the sub-priority.
	Progress RAG – Shows if the action at this point in time is making limited progress (Red), satisfactory progress (Amber) or good progress (Green).
	Outcome RAG – Shows the level of confidence in achieving the outcomes for each action.
	YTD Actual – The data for the year so far including previous quarters.
	YTD Target – The target for the year so far including the targets of previous quarters.

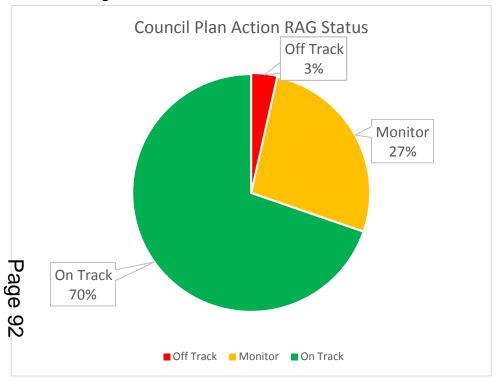


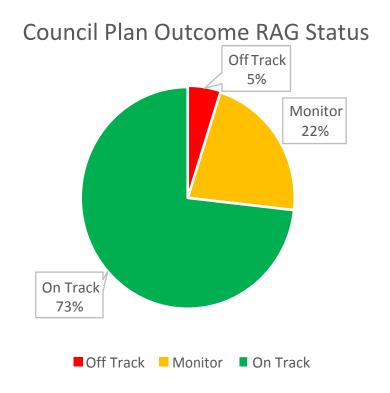


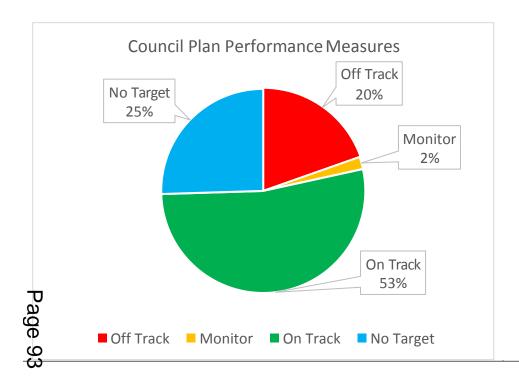
Council Plan Mid-Year Report 2021/22



Analysis



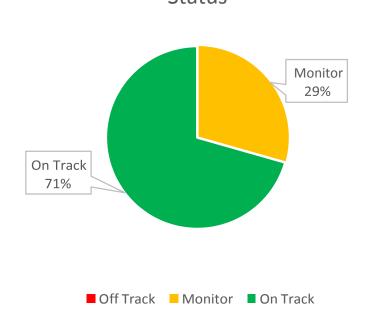




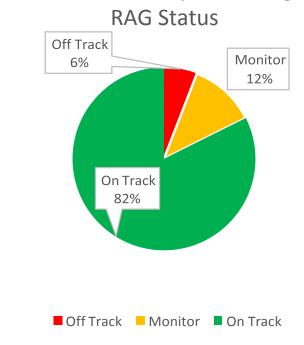
Personal and Community Wellbeing

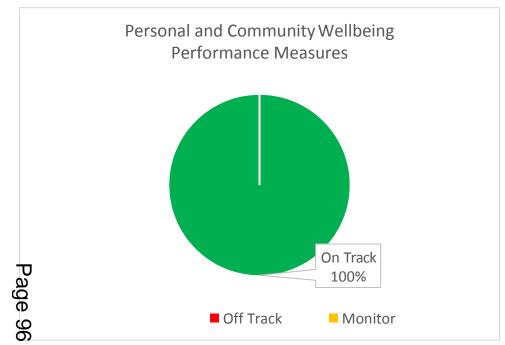
Personal and Community Wellbeing Overall Performance

Personal and Community Wellbeing Action RAG
Status



Personal and Community Wellbeing Outcome





Measures Off Track

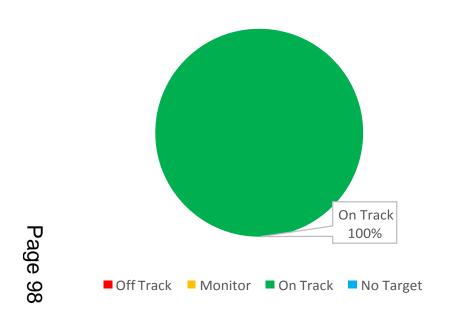
Area	Title
Personal Community and Wellbeing	There are no measures off track for this section

Independent Living Actions

Action	Percentage Complete	RAG	Outcome RAG	Comment
Developing and extend our approach to Micro Care supporting more people in their own homes	50%	*	*	Additional funding sources from the Foundational Economy to support the project until March 2022. An off framework contract has been developed to support direct commissioning of Microcarers. Work has started to integrate the opportunities into both Direct Payments Team and Brokerage.
Ensuring services for families with children aged 0•7 are better integrated through the 'Early Years Pathfinder' project	50%	•		The self-assessment of local arrangements to support families conducted by the Early Years Partnership last winter found that Flintshire was well placed to make swift progress by implementing the local actions identified in the self-assessment and the recommendations in the Early Intervention Foundation's report (June 2021). The work with Vanguard started last year to look at the family's journey through the early years pathway is now progressing through thinking and discussion around integration and transformation. A work programme is continuing for 2021/22. Work has been impacted by Covid-19 due to availability of key stakeholders, however progress is now being made. The plan for the remainder of the year is the development of the local Early Years strategy, to focus on the family experience as part of local work on multi-agency support pathways to ensure each child has a strong foundation for their future.
ncreasing the number of people who are able on make their own are arrangements through a Direct Payment	50%	•	*	We are continuing to grow this service. We now have the Personal Assistant portal to assist, but we are facing the shortage of carer issue, as in all other services and areas.
Providing additional placements at Marleyfield House Care Home to support older people	100%	*	*	The extension at Marleyfield House has now been completed and we have opened an additional 32 beds to take the total capacity to 64. This includes 48 permanent residents and 16 short-term reablement residents who are supported to transition from hospital home as quickly as possible.

Independent Living Measures

Independent Living Performance Measures



Measures Off Track

Area	Title
Independent Living	There are no measures off track for this section

Direct Payments as a % of home-based services



	Actual (YTD)	Target (YTD)	Last Year	Current RAG Rating
o _a	39.00	39.00		*
ge				

99

Comment

Our mid-year outturn is consistent with previous quarters. Our intention to increase the use of direct payments has been impacted by shortage of direct care staff. We are experiencing this across the whole direct care service, both in house and in the independent sector.

Percentage of equipment that is re-used



P				
ąç	Actual (YTD)	Target (YTD)	Last Year	Current RAG Rating
Ф	92.00	70.00	90.00	*
1				
2				

Comment

The standard of 70% is set nationally by the "National Minimum Standards for Community Equipment Services in Wales". However, the North East Wales Community Equipment Service (NEWCES) consistently achieve better than what is requested, with an average of approximately 90% reuse of equipment rather than throwing it away. By doing this there is a yearly cost avoidance of over £2m.

Percentage of requests for equipment that meet or exceed the national 7 Day standard



П	Actual (YTD)	Target (YTD)	Last Year	Current RAG Rating
a	100.00	80.00	100.00	*
де				

Comment

The North East Wales Community Equipment Service continue to provide 100% of equipment requests within the 7 day national standard.

Percentage of urgent requests for equipment that meet or exceed the national 1 Day response standard



Actual (YTD)
Target (YTD)
Last Year
Current RAG Rating
100.00
98.00
100.00

20

Comment

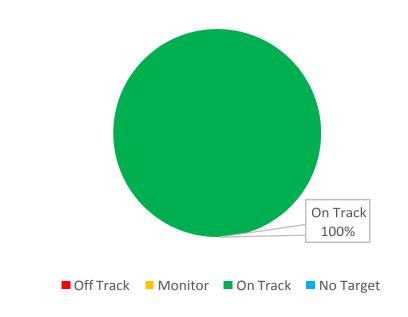
The North East Wales Community Equipment Service continue to be above target for urgent requests (1 day response time).

Safeguarding Actions

Action	Percentage Complete	RAG	Outcome RAG	Comment
Developing and relaunching our corporate e•learning package to reflect the new safeguarding procedures. This will include extending access to the safeguarding e•learning module to key partners	0%	*	*	We are awaiting updated safeguarding procedures from Welsh Government.
Implementing an 'active offer' of advocacy support for people involved in the safeguarding process	50%		*	Tros Gynnal Plant have been attending team meetings in Children's Services to promote the use of advocates for families going through the safeguarding process. In Adult Safeguarding, staff have been made aware of the need to offer advocacy; data will be collected in the second half of this year to evidence how this is progressing.
Promoting the 'duty to report' so our memployees understand their responsibility to their safeguarding concerns	50%	*	*	Information on the Duty to Report has been included in Member safeguarding training, the Council's Safeguarding Awareness training, and the mandatory e-learning for all Council employees.

Safeguarding Measures

Safeguarding Performance Measures



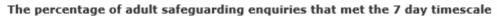
Measures Off Track

Area	Title
Safeguarding	There are no measures off track for this section

age 102

Safeguarding

05





	Actual (YTD)	Target (YTD)	Last Year	Current RAG Rating
a	96.50	96.00	96.00	*
дe				

Comment

The safeguarding unit continue to meet target for processing safeguarding enquiries.

Safeguarding

The percentage of children who were reported as having run away who were offered a return interview



ס				
aç	Actual (YTD)	Target (YTD)	Last Year	Current RAG Rating
е	100.00	100.00	80.00	*
1(
<u>6</u>				

Comment

All children reported missing should be offered a return interview. In 2020/21 we measured the percentage of children who agreed to an interview; the chart shows that a number of young people chose not to engage with the process. From April 2021, we changed the measure to reflect our performance in offering an interview.

Direct Provision to Support People Closer to Home Actions

Action	Percentage Complete	RAG	Outcome RAG	Comment
Developing the services we offer to provide respite for families with disabled children	100%	*	*	Services are in place. However, delivery is currently impacted by the national shortage of carers.
Extending Croes Atti Care Home for older people, with a focus on dementia care; complete the planning phase	50%	*	*	A Health and Social Care programme board has been set up with terms of reference agreed to oversee the rebuild of Croes Atti, progress is being made with regards to land transfer from BCUHB to Local Authority. Concept design is in progress.
Growing our in-house fostering service to support more looked for the children	50%	*	*	Flintshire is now part of Foster Wales, a National Network of 22 local authorities dedicated to increasing the number of Local Authority Foster Carers. Foster Wales launched in July 2021 and benefited from a National Tv campaign in September 2021, a recruitment strategy is being developed to establish what needs to be done locally. The target for 2021/22 is to approve ten carers. Seven have been approved and four are currently in progress. Since the recruitment campaign was launched, we have received 50 new enquiries from prospective foster carers.
Growing our in-house homecare service to support more people to live at home	50%	•	•	We are facing challenges in recruitment across the care sector. As part of the rebalancing agenda we are seeking to increase market share by growing our in house home care service. The homecare service has increased its market share to 16% of the overall market. This relates to an additional 16 staff who have been recruited to increase capacity.
Setting up a registered Children's Home to help avoid the need for residential placements outside Flintshire	50%	*	*	Progress to date includes: Appointment of a construction partner Plans have been developed and submitted for planning approval Local ward member and the community have been appraised of the plans and our vision Subject to planning consent, and the provision of a bat license, work will commence on the site in October 2021 The target date to complete the refurbishment is June 2022. At this point, we will be in a position to submit our application for registration with Care Inspectorate Wales (CIW)

Direct Provision to Support People Closer to Home Measures

Measures Off Track

Area	Title
Direct Provision to Support People Closer to Home	There are no measures off track for this section

There are no reportable measures for this period

Local Dementia Strategy Actions

Action	Percentage Complete	RAG	Outcome RAG	Comment
Developing a Flintshire Dementia strategy that sets a shared vision, and action, for the next phase of developing good dementia support for individuals, families, carers and communities	50%	*	*	Consultation with stakeholders and the community has been completed. Final actions are now being drafted before publication.
Working with registered Care homes providers and health partners to develop more long term nursing care placements for people who have dementia	50%		A	The pressures in the care home sector are widely recognised nationally and the challenges in recruiting workforce is having a significant impact on Flintshire care homes. This is particularly the case in regards to nursing care. A new post has commenced in September looking at market sustainability in Flintshire.

Local Dementia Strategy Measures

There are no reportable measures for this period

Measures Off Track

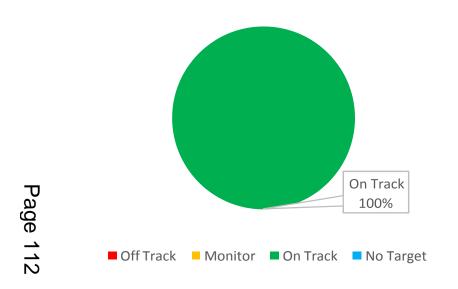
Area	Title
Local Dementia Strategy	There are no measures off track for this section

A Well-connected, Safe and Clean Local Environment Actions

Action	Percentage Complete	RAG	Outcome RAG	Comment
Keeping our local communities clean and safe through engagement, education and environmental enforcement	50%	*	*	Quarters one and two of 2021/22 have been successful with four education and engagement campaigns delivered. More will be programmed for delivery as inelegance of areas of poor Local Environmental Quality (LEQ) are identified.
Protecting residents and our environment from pollution and other public health and safety hazards by achieving the Streetscene Standard	50%	*	*	The service continues to deliver against the approved Streetscene Standards.
Working with local communities to inform a long term vision and delivery lan for using the Flexible Funding Grant programme to achieve positive outcomes for people	70%	*	*	Planning for community consultation as part of the Shotton Action Plan has commenced. This is ongoing. Community Consultation within the Holway area has commenced and actions raised by the residents are being implemented. To date there has been consultation regarding the services and groups that would support various ages living in the area that could be delivered from the newly refurbished Community Centre and playing fields. An Open Day at the Community Centre is planned for October half term to further engage the residents in planning services together. We work collaboratively with our partners in other Portfolios and in other agencies to undertake our consultation exercises so as to reduce duplication when planning service delivery.

A Well-connected, Safe and Clean Local Environment Measures

A Well-connected, Safe and Clean Environment Performance Measures



Measures Off Track

Area	Title
Local Dementia Strategy	There are no measures off track for this section

A Well-connected, Safe and Clean Local Environment

Achieve minimum level of agreed Streetscene standards



Actu	ıal (YTD)	Target (YTD)	Last Year	Current RAG Rating
<u>a</u>	35.00	85.00	51.22	*

Comment

The service continues to deliver against the approved Streetscene Standards.

A Well-connected, Safe and Clean Local Environment

Number of targeted environmental educational campaigns



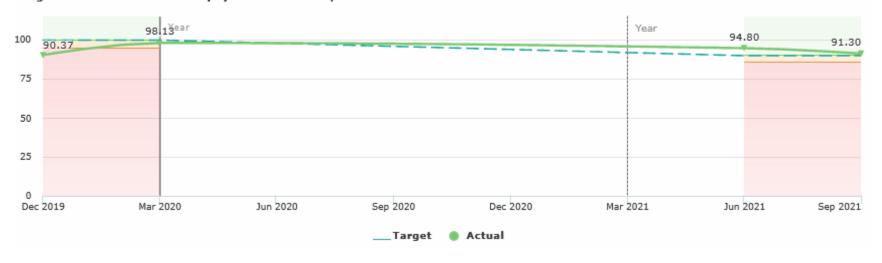
0			
Actual (YTD)	Target (YTD)	Last Year	Current RAG Rating
Φ 6.00	5.00	4.00	*

Comment

Four education and engagement campaigns took place between the dates July 2021 to September 2021 in response to escalating fly-tipping and littering events in residential areas, predominantly back alleyways and green open spaces. Information letters and waste education packs have been delivered to properties, along with advice on how to recycle and dispose of waste correctly.

A Well-connected, Safe and Clean Local Environment

Progress actions to avoid non-payment of all FPN / PCN



	Actual (YTD)	Target (YTD)	Last Year	Current RAG Rating
^э а	91.30	90.00		*

Comment

91.3% of expected income has been received to date. For the Period of July to September, there was a total of 705 Penalty Charge Notices (PCNs) issued, out of these there are still outstanding payments for 61 PCNs. Any outstanding payments will be progressed via the formal recovery process.

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