

APPENDIX 1

Year End Chief Officer Report

Report Author: Chief Officer – Social Services
Report Date: April 2015
Report Period: 01 October 2014 to 31 March 2015

Introduction

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

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

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

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

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

Plus supporting appendices: -

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

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

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

Section 1 - Performance Overview

This report covers the following functional areas:

- Children's Services
- Adult Social Care
- Commissioning

Areas of Positive Performance

Safeguarding Vulnerable Adults and Children

The Children's Safeguarding Managers and the Independent Reviewing Officers for Looked After Children are now co-located with Adult Safeguarding in Flint, under a single line manager structure. This has provided opportunities to share and adopt good practice in approaches to safeguarding children, young people and adults.

National Performance Indicators in Children's Services

The decline seen last year in the reported performance against the national key indicators for Children's Service has now recovered. We have collected positive outturns for most of the indicators in Quarter 3. Some data is not yet available for Quarter 4 but we expect that improvement will be evidenced in most areas.

Social Services and Wellbeing (Wales) Act

As part of our Action Plan to deliver on the requirements of the Social Services and Wellbeing (Wales) Act, we have commissioned the delivery of training and qualifications to ensure the workforce is equipped to deliver services in accordance with the Act and the Welsh Language More Than Just Words Strategic Framework. Basic Awareness Training has been rolled out to staff, Children's and Adult Services roadshows have been held and a workshop on the Act has been delivered.

We have also started to put in place integrated arrangements to undertake proportionate and outcome focussed assessments that focus on 'what matters' to a person. Training has been delivered to staff and is ongoing. "What matters" and the core data set have been implemented and now need to be embedded into practice. Work is continuing on the identification and measurement of personal outcomes for older people and the development of person centred care. Plans are in place to implement Phase 2 in the forthcoming year.

'Judgement Framework' for Contract Monitoring

The judgement framework is being applied to all Regulated services and Flintshire monitoring reports on residential Care Homes will shortly be shared across North Wales through a secure web page. Implementation of a new judgement framework by CSSIW later this year will require a further piece of work to ensure that the two frameworks are aligned.

Improvement Plan (non-in year priorities)

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

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

ACRF Priorities for 2014/15

Progress on the 35 priorities identified in the Social Services Annual Performance Report 2014/15 and in the subsequent response letter from the Care and Social Services Inspectorate (Wales) is summarised below.

Green	25	Amber	8	Red	2
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The red priorities are those regarding the shaping and commissioning of higher-quality nursing home care in Flintshire, and improving the timeliness of Health Assessments for Looked After Children. These are both included in the risk summary below (In Operational Risks 1 and 3).

Summary of Operational Risks (from the above sections)

Risk Type	Risk Ref. and Description	Net Risk Score	Risk Trend	Target Risk Score & Date
Operational	Resilience of Independent Sector: <ul style="list-style-type: none">Care home capacity for residential careRecruiting and retaining high quality nursing staff for residential care	R	↔	A March 2016
Project	Single Point of Access The RAG refers to overall risk for the project, on the basis that Health are yet to identify who will join the SPoA from their organisation.	A	↔	A
<i>(This is based on the assumption that the regional collaboration funding will continue until 2016.)</i>				
Operational	Decline in nationally reported performance in some areas of Children's Services	Awaiting data for 2014/15	↓	G March 2015

Summary of Compliments and Complaints

194 compliments were received regarding Adult Services and 77 compliments were received regarding Children's Services.

The processing of complaints is summarised as follows:

	<u>ADULT SS</u>	<u>CHILDREN SS</u>
Number of Stage 1 complaints (local resolution)	56	48
Number of Stage 2 complaints (independent investigation)	3	3
Number of Stage 3 complaints (WG appointed panel)	0	1
* Number of Stage 1 complaints resolved in timescale	53 out of 56 resolved in timescale (95%)	38 out of 48 resolved in timescale (79%)
**Number of Stage 2 complaint investigations completed in timescale	2 out of 3 completed in timescale (67%)	2 out of 3 completed in timescale (67%)
Number of complaints investigated by Ombudsman	0	0

All late responses received an apology, and their reasons varied including:

- Ongoing child protection or disciplinary proceedings
- Complex legal matter with possible financial implications
- Late due to other completing work demands

Apologies were made for the lateness of 2 Stage 2 investigations and complainants were kept informed throughout the process.

Section 2 - Internal and External Regulatory Reports

Report: Mental Health Team

Date Finalised: February 2015

Conclusion: Taking account of the issues identified Management can take substantial assurance that the controls on which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

Recommendations: 1 medium, 2 low

Summary

The reports confirm that Flintshire are operating well within the targets and in fact are consistently the top performing authority in North Wales. Flintshire's Mental Health Services have established excellent practices to ensure they are continually improving and working with partners to deliver services as required by the Measure. Obstacles to a full realisation of the main aims of the Measure are outside the control of the Authority.

Report: Llys Jasmine Extra Care Housing

Date Finalised: February 2015

Conclusion: Taking account of the issues identified, Management can take substantial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

Recommendations: 2 medium, 5 low

Summary

The report identified 12 areas of good practice and two areas for improvement. The action plan which accompanies the report details the specific recommendations made as well as agreed management actions to implement them.

Care & Social Services Inspectorate (Wales)

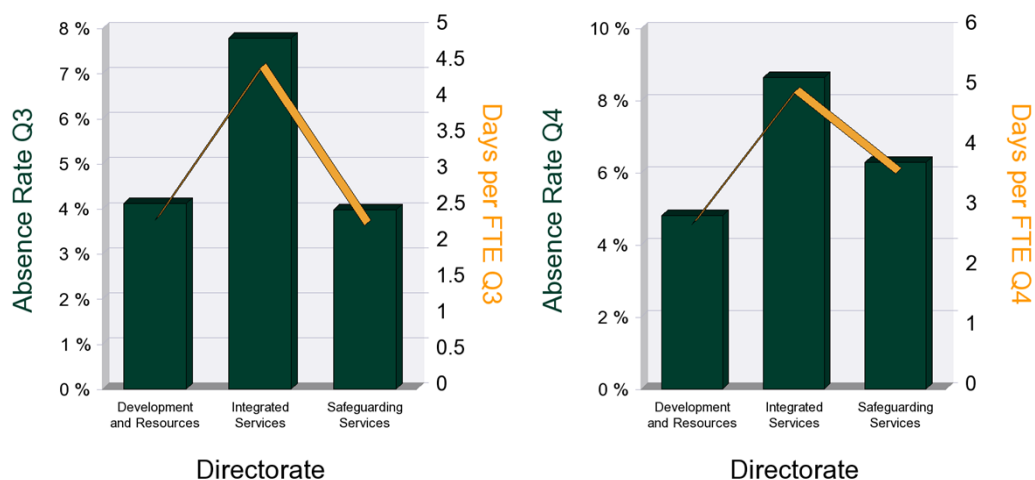
Between 1 October 2014 and 31 March 2015, inspection reports were published for the following:

Adult Residential Homes	15
Domiciliary Care providers	10
Childcare settings	17

Two local authority adult residential homes were inspected. There were no issues of non-compliance and both homes were found to meet the National Minimum Standards.

Section 3 - Corporate Reporting

Sickness Absence (Source: I-Trent)



Sickness absence over the last 6 months (October – March) is reported as follows:

Development & Resources 4.6% (5.09 days per FTE)

Integrated Services 8.2% (9.37 days per FTE)

Safeguarding Services 5.1% (5.85 days per FTE)

Employee Turnover (Source: I-Trent)

	Q3 Turnover	Q4 Turnover	Q3 Stability	Q4 Stability
Development & Resources	3.38%	3.62%	97.05%	96.83%
Integrated Services	4.01%	1.68%	92.81%	94.31%
Safeguarding Services	4.94%	2.50%	92.59%	93.75%

Employee Appraisals (Source: I-Trent)

140 staff have recorded appraisals on iTrent (please see table below). We are working with staff to ensure that those who have access to iTrent bring their appraisal records up to date, but access is not available to all staff.

	From iTrent
Development & Resources	54
Integrated Services	76
Safeguarding Services	10

Data Protection Training (Source: I-Trent)

HR records show that 46% of staff who have been identified as requiring mandatory data protection training are up to date with their training.

Equality and Welsh Language

List the Equalities and Welsh Language Impact Assessments: -

(1) Started/Work in Progress

(2) Completed (stating date completed) during the period (1 April 2014 – 31 March 2015)



EIA Scoping Sheet -
D2.xls

Percentage of employees who have completed the Equalities Monitoring / Diversity Audit (Source: I-Trent)

91% of employees have equalities monitoring data recorded about them (of 1053 staff on iTrent)

List the work areas / functions where diversity of customers are monitored.

The monitoring of this information is firmly embedded into Adult and Children's Services and commissioned providers, via assessment, quality checks and feedback processes.

Describe any initiatives to increase the percentage of equality monitoring data held for customers.

We have recently included of equality monitoring questions in core data set for 'What Matters?'

We have also recently developed a working task group to review the social services strategic equalities plan. The task group have highlighted areas of improvement and additional monitoring information which can be included within the plan going forward in order to strengthen our systems.

We have also expanded the membership and functions of our Directorate Equalities Group to ensure a whole council approach is adopted to reviewing and supporting equality monitoring processes.

Provide examples of initiatives to promote equality, eliminate discrimination and promote good community relations.

Social Services regularly promotes equality initiatives, events and training via email across the directorate.

- Disability Rocks Concert
- Hate Crime Sessions
- Cultural Awareness in Safeguarding Children
- Dyslexia & SpLDs and Mental Health Services Meet Ups across 4 Counties
- Prison Health and Equity: Meeting the Public Health Challenge
- Transgender Awareness Training
- Regular feedback obtained from EIA Quality checks group.

We at present are undertaking an initiative to embed coproduction into commissioning processes. This means involving people including those with protected characteristics in the development of services in Flintshire from the start to the end of the process. Pilot currently underway in Disability Services.

Percentage of employees who have completed the Welsh Language Skills Audit (Source: I-Trent)

Number completed: 403

Total Headcount: 1,020

Percentage completed: 40%

Describe any initiatives undertaken to ensure the provision of bilingual services.

Social Services has developed a detailed Welsh Language Specification, which is now included within assessment processes in Adult and Children Services. This specification is in line with the 'More Than Just Words' Framework and focus's is on the recording of 'Active Offers' for services in Welsh.

The Specification also provides guidance for staff with regard to good practice on the 'Active Offer' principle.

Social Services has developed a staff infonet page which is updated regularly and is a good source of information for staff regarding best practice and procedure.

Social Services sends regular emails in order to circulate information regarding best practice across the staff groups.

Social Services has also been key in the development of new Welsh Language Training for staff, ensuring the training is accessible and manageable with staff workloads. Increasing the number of staff opportunities to learn Welsh. We also continue to run our Welsh language staff discussion group which encourages staff to converse in Welsh and learn new skills.

Social Services is currently assisting in the development of a forum for Welsh Language Champions via our DEG.

Describe any initiatives undertaken to increase the use of the Welsh Language

Social Services has run a Welsh Language promotional event for staff and services users for the past two years on St David's Day. At this event we invite children and adults into our services and discuss the importance of language in care settings as well as encouraging Welsh Speaking and cultural activities.

Social Services has developed a Welsh Language Reminiscence initiative for Welsh

speaking people with dementia and their families. As part of the initiative reminiscences boxes have been designed for Welsh speakers and Welsh people or people who may have grown up or have strong links with Wales. The boxes contain sensory and memory aids and written material in Welsh. They are also specifically designed for Flintshire which means they have been developed in line with local welsh cultures, traditions and heritage.

Social Services is also attending the local college on May 6th to promote the work of officers who are embedding the 'More than Just Words' Framework in social services processes and will hand out information regarding the importance of language in care to students who may be considering a career in social care.

Appendix 1 - Performance Indicators

Key

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

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

R	0	A	0	G	4
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Note 1 – NSI = National Statutory Indicator PAM = Public Accountability Measure

Note 2 – Change (Improved / Downturned) is based on comparison with the previous reporting period. Where it is more appropriate to compare performance with the same period in the previous year this should be stated in the commentary.

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Year End Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
PSR/002: The average number of calendar days taken to deliver a Disabled Facilities Grant	NSI / PAM	246.43 Days	Not Set Mgt Info	29,870 91 328 days	N/A	Improved on mid-year outturn	Although completion times improved in Q3 and Q4, the overall average time for the year was impacted by the delays recorded in Q1. Please refer to Improvement Sub Priority update for Independent Living.
SCA/001: The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	NSI	2.59 Rate per 1,000	2 rate per 1,000	17 12,195 1.39 per 1,000	G	Improved	

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Year End Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCA/002(a): The rate of older people (aged 65 or over) supported in the community per 1,000 population aged 65 or over at 31 March	NSI	65.15 Rate per 1,000	Not Set Mgt Info	1940 29341 66.12 per 1,000	N/A		
SCA/002b: The rate of older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March	NSI	15.9 Rate per 1,000	21 rate per 1,000	470 29341 16.02 per 1,000	G	Downturned	
SCA/007: The percentage of clients with a care plan at 31st March whose care plans should have been reviewed that were reviewed during the year	PAM	98.48%	90%	2087 2125 98.21%	G	Downturned	
SCA/018(a): The percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year	PAM	90.72%	90%	1078 1163 92.69%	G	Improved	

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Year End Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCA/019: The percentage of adult protection referrals completed where the risk has been managed	NSI / PAM	98.9%	95%	146 147 99.32	G	Improved	One person declined interventions which would have reduced their risk.
SCA/020: The percentage of adult clients who are supported in the community during the year	PAM	85.1%	90%	3719 4323 86%	G	Not Applicable	
SCC/004: The percentage of children looked after on 31st March who have had three or more placements during the year.	NSI / PAM	6.54%	10%	16 221 7.2%	G	Downturned	
SCC/011(a): The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by the Social Worker	PAM	90.14%	80%	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Year End Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCC/011(b): The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen alone by the Social Worker	NSI	52.54%	54%	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.
SCC/025: The percentage of statutory visits to looked after children due in the year that took place in accordance with the regulations	PAM	76.57%	93%	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.
SCC/033(d): The percentage of young people formerly looked after with whom the authority is in contact at the age of 19	NSI	75%	90%	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.
SCC/033(e): The percentage of young people formerly looked after with whom the authority is in contact, who are known to be in suitable, non emergency accommodation at the age of 19	NSI	91.67%	95%	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.

Indicator	NSI / PAM (Note 1)	Annual Outturn 2013/14	Annual Target 2014/15	Year End Outturn 2014/15	Target RAG	Change e.g. Improved / Downturned (Note 2)	Commentary
SCC/033(f): The percentage of young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19	NSI	58.33%	75%	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.
SCC/041(a): The percentage of eligible, relevant and former relevant children that have pathway plans as required	NSI	100%	98%	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.
SCC/045: The percentage of reviews of looked after children, children on the Child Protection Register and children in need carried out in line with the statutory timetable	PAM	82.14%	Not Set Mgt Info	TBC			Preparation for the forthcoming inspection of Children's Services has meant that the data collection for Q4 has been delayed. Final data will be presented with this report.

Appendix 2 – High Level (Red) Net Risks

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

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score & Date (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	<p>Development of training and support programmes for the care home market to ensure there is high quality and robust leadership</p> <p>Action plan developed in response to the Older People's Commissioners report 'A Place Called Home'</p> <p>Initial work undertaken to explore the strategic role In House provision will play in ensuring we have a sustainable market.</p> <p>Establishment of a strategic Joint Interagency Monitoring Panel to share intelligence about the market to influence improvement and sustainability.</p>	H	M	R	<p>Delivery of the authority's response to 'A Place Called Home?'</p> <p>Development of market position statements which set out our commissioning intentions and the need for developing residential care home capacity.</p> <p>Close working with Health on a Regional footprint to ensure a sufficient supply of competent qualified nurses.</p> <p>Development of person centred profiles to support the delivery of quality of care and improve staff morale, absenteeism and retention.</p>	Chief Officer, Social Care	↔	M	M	A	March 2016

