CYNGOR **Sir y Fflint**
Flintshire
COUNTY COUNCIL

APPENDIX 1

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

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

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

Progress Status Outcome RAG is Amber to reflect timeliness of DFGs		**Progress RAG**	**G**	**Outcome RAG**	**A**

What we did in 2014/15

Reablement/Recovery
We have continued to make good progress with our successful reablement and recovery approaches as evidenced by the continued increase in the number of adult service users who benefit from the service. 1,235 referrals for reablement have been completed in the year, with 78% of people requiring a maintained, reduced or no support following a period of reablement.

Telecare
We have seen a steady growth in the number of people using Telecare. New technology is becoming available all the time, and our strategy is to continue to trial small items to determine their effectiveness in reducing support and promoting independence.

Adaptations
In total in the year, there were 232 major adaptations provided in council and private homes. They were delivered within the capital budget provided and customer satisfaction remains high.

89 major adaptations for adults were completed through the DFG (Disabled Facilities Grant) process, in an average of 332 days, therefore the timescales achieved in 14/15 for the delivery of disabled adaptations for adults in private housing was not maintained. Due to the complex nature of the 2 children's adaptations in private housing the average days significantly increased on that achieved in 2014/15. Two major adaptations for children were completed through the DFG process in the year; none between October and March.

488 minor adaptations (under £1,000) were completed in the year, in an average of 61 days.

What we did well
We continue to deliver more effective services to more people which improve their quality of life and help them to live independently.
What did not go so well
We were unable to sustain the improvement in the timeliness of the delivery of major adaptations which we achieved in the previous year.

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

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

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	2014/15 Outturn	Performance RAG	Outcome Performance Predictive RAG
PSR/009a - The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people.	Chief Officer – Social Services	257 days	257 days	231 days	1238 2 **619 days**	R	R
PSR/009b - The average number of calendar days taken to deliver a Disabled Facilities Grant for adults.		247 days	247 days	231 days	28632 89 **322 days**	A	A
SCAM2L - Percentage of referrals where support was maintained or reduced or no further support was required at the end of a period of Reablement.		77%	71 – 75%	80%	961 1235 **77.81%**	G	G

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

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

Risk Progress Summary for 2014/15
All actions have been completed and the risk remains at a low level.

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

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	DFG's are prioritised within the Private Sector Housing Regeneration & Strategy Capital programme to ensure that demand can be met.

The Service is exploring greater partnership working with the third sector in order to help reduce timescales. | M | M | A | The Housing Regeneration & Strategy Service is in the process of a restructure which will build additional capacity to help further improve DFG performance. A vacant post has been recruited to. | Chief Officer – Community & Enterprise | ↔ | L | L | G | Mar 2016 |

Risk Progress Summary for 2014/15
The downturn in the timeliness of provision of a disabled adaptation has been attributed to reduced capacity within the Housing Regeneration & Strategy Service, and it is intended that this will be addressed through the forthcoming restructure. For this reason the risk remains at an amber level.

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

What we did in 2014/15

Rightsizing

Right sizing has progressed to 20 out of 22 of the local authority Supported Living houses, continuing to focus on the quality of life for the person and the structure of the care package provided. 5 of the houses provided by Health have also been "right sized". We are currently undergoing an audit of what has been achieved, which will include the quantifying of actual savings made.

The next phase will be the roll out to properties in the independent sector (about 20 properties), from July 2015 onwards.

Night Support Service

The Night Support Service pilot became operational in February and will run through to September 2015. We can support a maximum of 20 – 30 people at any one time within the pilot service. To date 16 people have been referred.

What we did well

We continue to deliver more effective services to more people which improve their quality of life and help them to live independently.

What did not go so well

Not applicable.

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

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	2014/15 Outturn	Performance RAG	Outcome Performance Predictive RAG
Number of minor adaptations (under £1000) completed for service users with a disability. (Year to date)	Chief Officer – Social Services	377 *	TBC	TBC	608	N/A	N/A
Number of people receiving Direct Payments / Citizen Directed Support on last day of period.		302	320	350	378	G	G
Maintain the percentage of clients who are supported in the community in the top quartile for Wales. (SCA/020)		86%	90%	90%	86%	A	A

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

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

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	Joint Action Plan developed with Health to support people with dementia. Regional specification for enhanced dementia care in residential and nursing care homes to be rolled out Sept 2015. Reassignment of ordinary nursing beds in Independent Sector provision to provide specialist dementia care, and new models of support.	M	M	A	Development of dementia provision within 2 new Extra Care developments. Planning granted for Flint site and building on site. Awaiting planning agreement for Holywell. Regional agreement for enhanced specification. Discussions ongoing with provider representative. 22 beds re-categorised as EMI Nursing but performance issues linked to recruitment of specialist nurses.	Chief Officer – Social Services	↓	L	L	G	Apr 2016

Risk Progress Summary for 2014/15
Risk reducing since planning issues for Flint site have been resolved. However issues with recruitment of specialist nurses are still ongoing.
For this reason the risk remains amber.

3. Use a whole family approach by implementing the Integrated Family Support Service				
Progress Status		**Progress RAG**	G	**Outcome RAG**	G

What we did in 2014/15:-
There were 19 referrals to IFSS (Integrated Family Support Services) in the year, involving 14 families. 9 of these families are still working with IFSS.
Of the 19 referrals, all completed the initial consultation, and 14 progressed to the phase 1 assessment.
2 families have so far completed the 4 goals of the programme.

What we did well
The whole family approach has been successful in achieving good outcomes for families that have worked with the programme.

What did not go so well
Not applicable.

Achievements will be measured through:
- Number of families receiving a service: 14 families
- Average "distance travelled" score at 12 month review: 2 families completed the 4 goals
- Maintain level of repeat referrals to Children's Social Services
- Alignment of Flintshire's policies and procedures with those of Wrexham

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

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	2014/15 Outturn	Performance RAG	Outcome Performance Predictive RAG
Number of families referred to IFSS (Flintshire County Council only)	Chief Officer – Social Services	13	Maintain 13	Maintain 13	19 families	**G**	**G**
Average "distance travelled" score at 12 month review		1.4	Maintain 1.4	TBC	Not Available	**N/A**	**N/A**
SCC/010a – The percentage of referrals that are re-referrals within 12 months *		13%	Below 15%	Below 15%	440 1896 23.2%	**A** (based on Q1-3 data)	**A** (based on Q1-3 data)

*Final year end data will be tabled at the Social and Health Overview and Scrutiny Committee meeting

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4. Examine the Children's Services structure with a view to remodelling the teams to create capacity to do more preventative work.				
Progress Status		**Progress RAG**	A	**Outcome RAG**	G

What we did in 2014/15:-
Work has commenced to restructure Children's Services which will place stronger emphasis on:
- activity that is undertaken is predicated on the experience of the child and their journey;
- Implementation of practice standards;
- Effective utilisation of appropriate caseload management tools;
- The voice of the child at the heart of all work;
- Strong leadership with a robust focus on practice and quality;
- Continued collation and application of intelligence in all aspects of the business

The current activity is focussing on gathering intelligence in relation to the demand that is placed on all aspects of the service; identifying the new requirements from the Social Services and Wellbeing Act and identifying the most appropriate models. It is the intention that the new structure will be agreed by the end of Summer following consultation with staff.

What we did well
We considered various models and have successfully appointed a Children's Lead who will manage the restructure going forward.

What did not go so well
Not applicable.

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

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

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	2014/15 Outturn	Performance RAG	Outcome Performance Predictive RAG
SCC/016 - The percentage of reviews of child in need plans carried out in accordance with the statutory timetable	Chief Officer – Social Services	53%	82%	100%	174 215 80.9%	**A** (based on Q1-3 data)	**A** (based on Q1-3 data)
SCC/010a – The percentage of referrals that are re-referrals within 12 months *		13%	Below 15%	Below 15%	440 1896 23.2%	**A** (based on Q1-3 data)	**A** (based on Q1-3 data)

*Final year end data will be tabled at the Social and Health Overview and Scrutiny Committee meeting

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

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

What we did in 2014/15:-

Delivered a pilot that worked to the spirit of the new legislation. Homeless prevention cases were opened for all who approached for assistance irrespective of priority need status or local connection. Remodelled the service to provide a triage service which has freed up officer time to prevent and work on cases. Close join up between Supporting People and Housing Options has ensured support is delivered promptly to all those with additional support needs.

What went well:-

The pilot meant more homeless prevention work was undertaken and the service maintained an 85% prevention rate. The average time spent in B&B accommodation was reduced for all households and significantly reduced for families.

What did not go so well:-

The numbers of people accessing B&B increased and the numbers of households making homeless applications increased slightly. There will be ongoing work to manage the increased demand for housing assistance.

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

Achievement Milestones for strategy and action plans:
The outcomes of the evaluation of the pilot has identified the appropriate resources that will be needed to be put in place from April 2015 in readiness for the new statutory homeless duties within the Housing Act (Wales) 2015

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	2014/15 Outturn	Performance RAG	Outcome Performance Predictive RAG
HHA/013 - The percentage of all potentially homeless households for whom homelessness was prevented for at least 6 months.	Chief Officer – Community and Enterprise	84.89%	90%	90%	85.17%	**A**	**A**
Homeless prevention for at least 6 months for people who are victims of domestic abuse.		N/A	Baseline to be established	N/A	Not Available	**N/A**	**N/A**
Homeless prevention for at least 6 months for people who are ex-offenders.		N/A	Baseline to be established	N/A	Not Available	**N/A**	**N/A**
Homeless prevention for at least 6 months for people who are young people including care leavers.		N/A	Baseline to be established	N/A	Not Available	**N/A**	**N/A**

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

Progress Status		Progress RAG	G	Outcome RAG	G

What we did in 2014/15:-
The outstanding action from the Transition Review was to provide young people and families with an information pack that involves every agency and will provide service users with a single pathway through transition. This pack is now being developed, and will be launched at the next service user evaluation event, at which point we will be able to gather feedback on the pack, and on the effectiveness of the pathway as a whole.

What we did well
The review generated some useful feedback from young people and families, and this information was used to make the improvements detailed in the Transition Review Action Plan.

What did not go so well
One outstanding action remains and will be completed in the forthcoming year.

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

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

Achievement Measures	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	2014/15 Outturn	Performance RAG	Outcome Performance Predictive RAG
Number of people receiving Direct Payments / Citizen Directed Support.	Chief Officer – Social Services	302	320	350	378	G	G

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

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
M	M	A	Implement Action Plan from Transition Review. Resolve long-term absence issue – completed.	M	M	A	Complete information pack. Arrange launch event to evaluate the pack and review the service as a whole.	Chief Officer – Social Services	↓	L	L	G	Jun '15

Risk Progress Summary for 2014/15
Net score remains amber due to outstanding task from service review. We are still expecting this to be completed by June 2015.

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

Gross Score (as if there are no measures in place to control the risk)			Current Actions / Arrangements in place to control the risk	Net Score (as it is now)			Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	Target Score (when all actions are completed / satisfactory arrangements in place)			
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score	Target Date
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)	
H	H	R	Regular performance and activity data is produced to continually monitor and project service demand.

The "what matters?" conversation and the core data set have been implemented in localities and training is being rolled out to practitioners.

We are in the process of reviewing our funding arrangements with the voluntary sector to help us ensure that we target resources in ways that enables the voluntary sector to provide early support to people and reduce/delay the need for statutory intervention | M | M | A | Regional approach to Integrated Assessment to ensure consistency.

The Business Plan for 2016/17 has been completed, and includes a plan for delivering efficiencies and managing and responding to demand.

Development of a Commissioning Strategy for Disabled People to help best meet demand in 2015/2016

Implementation of the Single point of access in 2015/2016

Launch of remodelled website in April 2015. | Chief Officer – Social Services | ↓ | L | L | G | 2017 |

					Review the structure of Children's services with a view to strengthening links to prevention and early intervention services/support.						
		We have started the process of developing a Co-Produced commissioning strategy for adults with a disability. The intention is to work with all sectors to develop, and bring together support across sectors to enable people to live good quality independent lives. The strategy will also articulate our commissioning intentions and how we best use limited resources. Project group established to remodel the content of our website including information about how people can access universal and community based services. Work is progressing to develop a Single Point of Access (SPoA) to help ensure that people can access the right support, from the right sector at the right time.									

Risk Progress Summary for 2014/15
Likelihood and impact of the risk reduced to amber in line with actions noted above.