

## VALE OF GLAMORGAN COUNCIL

## Active and Healthy Vale Performance Report



#### QUARTER 3:1 APRIL 2017 - 31 DECEMBER 2017

#### Our overall RAG status for 'An Active and Healthy Vale' is Amber

### **1.0 POSITION STATEMENT**

Overall, we have made good progress in delivering our Corporate Plan priorities during this quarter in relation to the Well-being Outcome 4 Objectives of, 'Encouraging and promoting active and healthy lifestyles' and 'Safeguarding those who are vulnerable and promoting independent living'. This has resulted in an overall Green status for the outcome.

Despite this good progress there has been some slippage in relation to 7 actions but we anticipate this underperformance will mostly be addressed by year end. These related to adoption of the Council's Leisure strategy, concluding the pilot of the therapeutic fostering scheme, undertaking further development of the use of the DEWIS Cymru portal, the review of the Learning Disability Strategy, the exploration of the self-service options in relation to customer enquiries, maximising the use of the Intermediate Care Funding and Primary Care Fund to support development of integrated services, the development of information sharing processes for transition between CAMHS and Adult Mental Health Services and the development of tools to safeguard vulnerable people via effective procedures.

In relation to our performance measures we continue to perform well for the measures associated with delivery of this Corporate Plan outcome. As during the quarter, four of the six measures met or exceeded target (green status) and two missed target by more than 10% (red status). The red measures related to completion rates on the exercise referral scheme and completion rate of individuals on substance misuse treatment programmes. In order to improve completion rates in future quarters, both service areas will be focusing on ways in which to re-engage service users.

During the quarter there have been a number of achievements we can celebrate, including the successful launch of the Integrated Autism Service. This has seen the co-location of a multi-agency and multi-disciplinary team that is based at Hafan Dawel. The service has enabled clients to meet with both health and local authority practitioners to access a broad range of holistic support services that best meets the needs service users, their families/carers.

We successfully launched the Welsh Community Care Information System (WCCIS). We are one of only a small number of authorities have gone live with the new system. All staff have been fully trained and are using the new system across the Social Services Directorate. However, the implementation of the system has not been without its challenges particularly in relation to business continuity, resilience and performance reporting.

During the quarter we have also delivered a comprehensive play programme to children and their families. This has included delivering a play programme to 50 disabled children and young people and the delivery of a Family Fund Day that was delivered in conjunction with the Family Information Service and Families First to 550 people.

We have also successfully implemented a Transition Protocol to reinforce and enhance best practice across agencies and support the smooth transition of Children to Adult Services.

However, there are a series of risks and challenges facing services that contribute to the delivery of the well-being priorities as part of this Corporate Plan Outcome. The financial challenges facing the Social Services remain significant going forward. This has been the result of increased demand for social care services driven by changes in demographics and the presentation of increasingly complex health and care needs. Challenges also exist in relation to adherence to the Deprivation of Liberty Safeguards in terms of capacity and resourcing.

Despite these pressure points we continue to respond well to the challenges evidenced by our consistent performance in relation to this outcome area.

## **1.1 PERFORMANCE SNAPSHOT**

#### ACTIONS

Our performance against the Corporate Plan actions is on track for delivery, giving us an overall AMBER RAG status for this outcome

#### **Service Plan Actions**

**Objective 7: Encouraging and promoting active and healthy lifestyles** 

11			N/A	Total
(G)	(A)	(R)	0	12

**Objective 8: Safeguarding those who are vulnerable and promoting independent living** 

23		7	N/A	Total
(G)	(A)	(R)	0	31
Total for th	e Outcome	:		
34		8	N/A	Total
(G)	(A)	(R)	0	43

#### **PERFORMANCE MEASURES**

Our performance against performance measures is on track, giving us on overall AMBER RAG Status against this outcome

**Performance Measures** 

Objective 7: Encouraging and promoting active and healthy lifestyles

3		2	N/A	Total
(G)	(A)	(R)	10	16 <sup>1</sup>

Objective 8: Safeguarding those who are vulnerable and promoting independent living



16

31

## 1.2 Objective 7: Encouraging and promoting active and health lifestyles

Of the 16 indicators identified for Objective 7, 10 are annual and 6 are quarterly. Data was available for 5 indicators due to be reported this quarter. 3 were attributed a RAG status of Green (CPM/186, CPM/028 & CPM/197) with the remaining 2 indicators attributed a Red RAG status (CPM/090 &CPM/195). Data was not available for CPM/187 at the time of reporting.

Corporate Health Actions		Action	Direction of Travel
	Service Plan Actions	Action Status	compared to previous quarter status
<b>AH1:</b> Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity. (2019/20)	8	G	

<sup>&</sup>lt;sup>1</sup> Data was not available for CPM/187 'Improvement in the quality of life of clients accessing substance misuse treatment' at time of reporting.

<sup>&</sup>lt;sup>2</sup> The implementation of WCCIS into Social Services is still ongoing after its launch in November 2017; whilst the users are slowly gaining confidence in recording; we currently have no reporting tool to extract the data out of WCCIS for the performance indicators. As a result data is not available for 7 PIs this quarter. This accounts for the remaining indicators.

Corporate Health Actions		Action	Direction of Travel
	Service Plan Actions	Action Status	compared to previous quarter status
<b>AH2:</b> Work with partners to deliver the Cardiff and Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions. (2017/18)	1	G	
<b>AH3:</b> Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families. (2019/20)	1	G	
<b>AH4:</b> Provide and promote a range of early years services including information and support for parents, access to childcare and learning opportunities to recognise the benefits of early development in achieving better outcomes for young people and their families (2019/20)	1	G	
<b>AH5:</b> Work with the Cardiff and Vale Health and Well-being Board to undertake a range of actions to prevent and tackle obesity and encourage healthy eating and healthier lifestyles.(2019/20)	1	G	
<b>AH6:</b> Achieve Green Flag status for 7 parks as a mark of excellence, demonstrating good amenities and community involvement in the parks. (2017/18)	0	N/A	Planned action for 2017/18 has been completed and the Vale of Glamorgan has retained its 7 Green Flag awards.

# 1.3 Objective 8: Safeguarding those who are vulnerable and promoting independent living

Of the 15 indicators identified for Objective 8, 7 are annual and 8 quarterly. Data was only available for 1 indicator this quarter, and this indicator was attributed a RAG status of Green (CPM/050). For the other 7 quarterly indicators, no RAG status was attributable, due to the lack of a reporting tool to extract data from the WCCIS software.

Corporate Plan Actions		Action	Direction of Travel
	Service Plan	Action Status	compared to
	Actions		previous quarter
<ul> <li>AH7: Implement new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work streams of:</li> <li>provision of information</li> <li>advice and assistance services</li> <li>eligibility/assessment of need</li> <li>planning &amp; promotion of preventative services</li> <li>workforce</li> </ul>	14	G	

Corporate Plan Actions		Action	Direction of Travel
	Service Plan	Action Status	compared to
	Actions		previous quarter
<ul> <li>performance measures(2016/17)</li> </ul>			
AH8: Improve access to health and social care	4		
services by improving the speed, simplicity and		R	
choice of how to access services. (2018/19)			-
AH9: Work with partners to progress the	3		
integration of adult social care and community		R	
health services. (2018/19)			-
AH10: Explore options for single integrated ICT	5		
systems and integrated budgets across the		G	
Cardiff and Vale region for social care.			
(2018/19)			
AH11: Develop and implement a corporate	3		
policy on safeguarding to provide a clear		A	
strategic direction and lines of accountability			
across the Council. (2016/17). AH12: Minimise delays in transfers of care and	0	NI/A	N/A
discharge from hospital through improved co-	U	N/A	Planned action for
ordination of services and the delivery of the			2017/18 has been
Accommodations Solutions Service. (2017/18)			completed and
			monitoring is ongoing.
AH13: Review accommodation with care	1		
options for older people and develop our		G	
commissioning strategy for future years.			
(2016/17)			
AH14: Work with partners through the Cardiff	0	N/A	N/A
and Vale Local Safeguarding Children's Board to			Planned action for
develop a Child Sexual Exploitation Strategy.			2017/18 has been
(2016/17)			completed and
	-		monitoring is ongoing.
AH15: Improve procedures with providers of	0	N/A	N/A
nursing, residential and domiciliary care			Planned action for
providers to enable early intervention and			2017/18 has been
prevent the escalation of incidents. (2017/18)			completed and monitoring is ongoing.
AH16: Undertake an annual programme of	1		
targeted inspections at premises undertaking			
commercial activities that affect vulnerable			
people (for example care homes and food			
establishments in schools). (2019/20)			

## 1.4 Performance Exceptions

## 1.4.1 Objective 7: Encouraging and promoting active and healthy lifestyles

#### The table below highlights the actions attributed with a Red status and provides commentary on the performance.

Corporate Plan Action: AH1: Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity.

Service Plan Action	% complete	RAG Status	Direction of Travel	Commentary
VS/A074: Complete a Leisure Strategy for the Vale of Glamorgan.	85	R		This action was carried over from last year and was due to have been completed on 31/7/2017. The consultation period on the draft Leisure Strategy closed this quarter on the 16th November 2017. Following the responses received during the consultation period final amendments are being made to the strategy. The strategy is due to be completed and presented to Cabinet during quarter 4.

Performance Indicator	Q3 Actual	Q3 Actual	Q3 Target	Direction	of	Commentary
CPM/090 (VS/M033): Percentage of people who have completed the exercise referral scheme.	2016/2017 44.03%	2017/2018 31.12%	<u>2017/2018</u> 40%	Travel		Quarter 3 shows a down turn in completions. This coincides with the festive period, when people's priorities/focus shift away from exercise/health. This is evident in the data for the period December has been a particularly slow month for referrals and this has been a pattern for the time of the scheme. Even if people are referred in December they prefer to start after Christmas. At present 61 of the 196 people who participate in the exercise referral scheme have completed the scheme however the figures reported here reflect live data therefore these figures would have changed slightly.
CPM/195 (HS/M046): Percentage of individuals who complete substance misuse treatment.	N/A	62.79%	72%	N/A		The National target for this indicator is 72%. Vale performance of 62.7% in Q3 indicates a dip of 10% below the national target (as 27 out of a possible 43 closures were

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	Direction Travel	of	Commentary
						planned). Where individuals disengage from treatment, the re- engagement service (managed via the aftercare contract) is making every effort to motivate these clients to come back into services prior to the point they are classified as an 'unplanned exit'.

## 1.4.2 Objective 8: Safeguarding those who are vulnerable and promoting independent living

Corporate Plan Action: AH7: Implement new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work streams of: • provision of information • advice and assistance services • eligibility/assessment of need • planning and promotion of preventative services • workforce • performance measures

Service Plan Action	% complete	RAG Status	Direction of Travel	Commentary
CS/A014: Conclude the pilot of our Therapeutic Fostering Scheme and undertake a	25	R		This action is due for completion on the 31/03/2018.
cost/benefit analysis				We have concluded the pilot, which has confirmed the merits of the service but we have identified issues in relation to the recruitment and retention of Psychology staff for a Social Services department. Current work is underway with the C&V UHB in developing a costed proposal for how our two organisations can work in partnership to deliver a Therapeutic Fostering Scheme.
BM/A024: Undertake further development of the DEWIS Cymru portal to expand and extend its use.	50	R		This action is due for completion on the 31/03/2018. Agreement as to how this can be better supported and to provide a more sustainable service is underway. This involves taking a regional approach which is being implemented through the Regional Steering Group

Corporate Plan Action AH8: Improve access to health and social care services by improving the speed, simplicity and choice of how to access services.

Status       Travel         AS/A015: Review of our Learning Disability Strategy.       50       The completion date for this action is the 31/03/2018.         Day Service Joint Strategy: All work has now been gathered for the review of the 2014-2017 strategy.       Cardiff OM is currently drafting a         review report which was originally planned to be completed by the end of November 2017 however this has now slipped to March 2018. The next meeting with the day service managers and OM's (Cardiff and Vale) is scheduled to be held in February.         Director and Heads of Service meeting took place in October 2017 to progress discussions on the next phase of regional working for delivery of complex needs day services.         Joint Learning Disability commissioning Strategy: The Project Outline Document has been completed this quarter. The Integrated Health and Social Care Team project management support has been secured to assist the 3 partners (Vale & Cardiff LAS and Cardiff and Vale UHB) to develop project plans. The Institute of Public Care (IPC) support has been secured to assist
Due to the nature of regional working, meetings/priorities are not solely within the control of the Vale hence some slippage in the area of day service review, despite a great deal of work happening at ground level. A bigger push will take place in the next quarter with additional ICF project management

Service Plan Action	% complete	RAG Status	Direction of Travel	Commentary
PD/A017: Continue to look at ways to improve self-service options and ensure that customer enquiries are resolved quickly and effectively in line with requirements of the Social Services Wellbeing Act.	50	R	1	The completion date for this action is the 31/03/2018. This will now be taken forward within the Digital Customer theme of the Digital Strategy. The next working Group meeting is due to be held in January 2018.

## Corporate Plan Action: AH9 Work with partners to progress the integration of adult social care and community health services. (2018/19)

Service Plan Action	% complete	RAG Status	Direction of Travel	Commentary
AS/A006: Maximise the use of Intermediate Care (ICF) and Primary Care (PCF) funding to support the development of further integrated services.	50	R		The completion date for this action is the 31/03/2018. The recruitment of additional reablement support workers has paused due to the implementation of a new rostering system taking priority. Recruitment will recommence in quarter 4 now that the web roster programme has been successfully implemented.
AS/A016: Develop robust processes to improve information sharing between key partners to enable a smoother transition between Children and Young People Services and Adult Mental Health Service	50	R		The completion date for this action is the 31/03/2018. Mental health workers continue to attend TRIG. Regional Transition meetings continue to progress Joint protocol – sub group tasked with this. Unfortunately Interim lead nurse CAMHS has left and there has been no named replacement. Liaison work identified following meeting held on the 13th November has not yet been progressed.

Corporate Plan Action: AH11 Develop and implement a corporate policy on safeguarding to provide a clear strategic direction and lines of accountability across the Council.

Service Plan Action	% complete	RAG Status	Direction of Travel	Commentary
BM/A013: Develop tools to support staff to feel more confident to safeguard vulnerable people through effective procedures for referral, and also use of Adult Protection Support Orders (where relevant) in line with the Social Services Well-being Act.	50	R		The completion date for this action was the 30/09/2017. The Operational Manager (OM) for Safeguarding commenced in post in September 2017, and is working through this action although this is closely linked with National processes and policy development. Cardiff is leading this piece of work which we are contributing to.

## 1.5 OUR ACHIEVEMENTS

- Positive progress continues to be made with the majority of projects identified within the Vale Sport Plan (LAPA) progressing well with the overall Plan remaining on track for completion. A 6 month progress report was presented to and accepted by Sports Wales and the Vale Sport Management Board this quarter. The report highlights progress made so far against the projects under the 6 priorities showing all identified projects which have commenced are either on track or completed, case studies/feedback on the work carried out and issues/areas for consideration in addition to noting each projects track status, allocated budget and spend to date.
- We continue to successfully deliver a comprehensive play programme for children and their families which saw over the half term this quarter 20 disabled young people and 30 disabled children access the Disabled Teen scheme and Play scheme. We continue to work closely with partners in this area such as the Rhoose Homework club which is accessed by over 100 children/young people, Housing colleagues with regards to consultations being held on developing outdoor community spaces and the Family Information Service which were supported to deliver a family fun day as part of Families First which was accessed by approximately 550 people.
- The Council has successfully implemented transition services underpinned by a Transition Protocol, which supports best practice across agencies this quarter. The effective implementation of the Transition Policy will enable a smooth transition from Children to Adult Services.
- The Welsh Community Care Information System (WCCIS) was successfully implemented as planned on 27th November 2017. WCCIS is a national electronic information sharing system which is designed to deliver improved health social care and support for clients. The system will result in enhanced information sharing between the Health Boards and Social Services departments to deliver improved care and support for health and social care clients as a result of effective planning, co-ordination and delivery of support services.
- Adult Social Services support and assistance continues to be successfully provided through the Customer Contact Centre (C1V) in an integrated manner. An organisational review has concluded this quarter, and the results from which will be used to create proposals that will be presented in the next quarter to improve its efficiency. The Elderly Care Assessment Service (ECAS) has now been transferred to C1V further developed the Contact Centre as a single point of access for community health and social care services. This transfer will enable further centralisation of a locality/community service, a further income stream for the centre, foster good relationships between the services and improve referral pathways.
- We were awarded additional funding in December by the Welsh Government to enable us to upgrade our pedestrian/cycle tracks at Cosmeston Lakes Country Park. This will enable us to further invest in improvements to the park improving accessibility and facilities for local residents to enjoy the park whilst promoting physical activity.
- As a result of internally auditing our data collection processes in relation to our recording of visits to local authority sport and leisure facilities during the year we have managed to enhance what is collected as part of this measure. As a result our performance has significantly increased compared to our performance in the same quarter in the previous year from 4,166.49 visits per 1,000 population in quarter 3 2016/17 to 8,565.62 in quarter 3 2017/18.

## **1.5 OUR ACHIEVEMENTS**

- We continue to exceed the national target set for the number individuals reporting a reduction in substance misuse after accessing substance misuse treatment this quarter; 73.68% of individuals reported a reduction in after accessing treatment against a target of 67%. However there has been a decline in the percentage of individuals who completed planned substance misuse treatment during the quarter with 62.79% completing the treatment missing the target of 72%, the re engagement service are actively making every effort to motivate clients who disengage to return to the service which is having a positive effect.
- The new Integrated Autism Service between Cardiff and the Vale of Glamorgan Council has been publically launched. This has involved the co-location of a multi-agency and multi-disciplinary team that enables service users to access a broader range of support for autistic adults, families with children and carers looking after adults or children with autism. The model is still in its infancy, but be further developed over the rest of the financial year.
- During quarter 3, we further strengthened our approach to Corporate Safeguarding through the delivery of a successful Staff Safeguarding Conference in November to mark 'National Safeguarding Week'. The purpose of the event was to raise awareness amongst staff that Safeguarding is everyone's responsibility. In total 100 staff attended the event from a broad spectrum of services across the Council. The post conference evaluation identified that 86% of non-Social Services respondents said they felt they could put into practice the learning from the event and 83.7% felt the event made them feel more equipped in their roles.
- The Shared Regulatory Services (SRS) is developing a 'Buy with Confidence' (responsible trader) scheme for across the region. To date the service has engaged with businesses to gage interest in the scheme and to align appropriate resources, before it is rolled out fully. The purpose of the scheme is to provide residents with peace of mind when shopping/selecting a tradesperson. It also assists by supporting reputable businesses with a 'Trading Standards approved endorsement'.

## 1.6 OUR CHALLENGES

- The financial challenges in Social Services are significant with the latest budget forecast indicating a potential overspend. The budgetary pressures across the Social Services Directorate are a consequence of the rising demand for our services across a spectrum of our services. The introduction of policy changes such as the national living wage and changes to charging arrangements.
- Related to the financial challenges is managing demand for our services. The ability to meet the growing support needs of clients is increasingly becoming more difficult which in turn puts further pressure on our tight budgets. This is the result of changes in the demographic makeup (ageing population) and the increasing number of people presenting with increasingly more complex needs. There has also been an increase in the number of children who have complex behaviour/health conditions which continues to create enormous pressure across our social care services and impacting on placement costs.
- Timescales for adhering to the Deprivation of Liberty Safeguards (DOLS), continue to place significant pressure on the Council both through officer work load and through budgetary constraints.
- Although WCCIS was successfully launched during the quarter, it's not been without its challenges. These challenges have mainly been in relation to delays associated business continuity and resilience issues. Although the SWIFT contract has been extended by a further 6 months, the SWIFT Legacy system (read only archive of data) does not easily interface with the WCCIS software. Further work will be undertaken to effectively create an interface between the two systems, but in the meantime SWIFT and WCCIS will work in parallel to ensure continuity of service and access to service user information. The dissolution of the SWIFT Consortium Support team from 1st November there is very little resilience to support the ongoing support of migrating information from SWIFT (e.g. data migration and legacy system) and the transition to the new system. Access to and the extraction of performance data has also proved challenging. At the moment we are unable to extract data for social service performance indicators, many of which inform the quarterly performance reporting. We are currently working to successfully extract the data required more efficiently. Going forward we will be focusing on working with colleagues in other Councils to identify more efficient ways of extracting data for reporting purposes.
- Work to further develop the DEWIS Cymru portal has been slow this quarter. Progress to find a regional solution to further the development of the portal as a source of information, advice and assistance from preventative services to residents, as it is being implemented via a Regional Steering Group which requires buy in from multiple partners.

## 1.6 OUR CHALLENGES

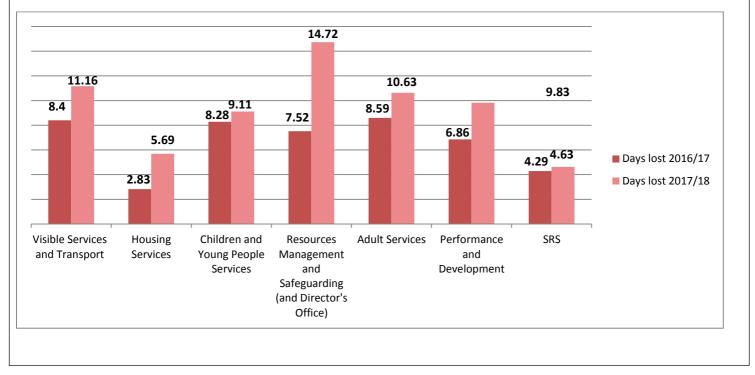
- The percentage of people completing the exercise referral scheme has fallen this quarter to 31.12%, missing the target of 40%. This decrease can be seen as a result of the festive period as often people's priorities change. In addition December tends to be a slow month for referrals, the already lower than usual numbers are further affected as often people who are referred in December prefer to start the scheme after the Christmas period. We will continue to endeavour to seek ways to further engage and motivate clients to complete the programme.
- Our ability to progress and deliver transition arrangements in relation to children and young people into Adult Mental Health services has been hampered due to capacity issues, as the interim lead nurse within CAMHS has left with no named replacement. This has affected progress of liaison work and the development of a joint protocol.

## 2.0 CORPORATE HEALTH: MANAGING OUR RESOURCES



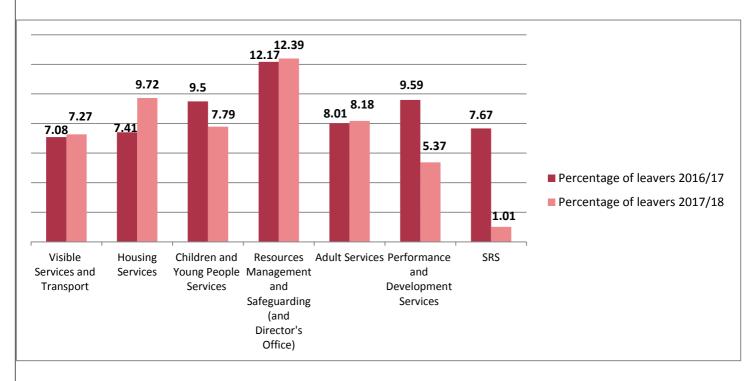
#### 2.1 PEOPLE

Attendance management remains a corporate priority and we continue to closely monitor progress to help improve performance corporately. Between Quarter 3 2016/17 and Quarter 3 2017/18 the number of days lost per full time equivalent (FTE) due to sickness increased by 1.13 days. Sickness absence increased from 6.05 working days lost in Quarter 3 in 2016/17 to 7.18 days per FTE across the Council at Quarter 3 2017/18. The graph below shows sickness absence data for services contributing to this Well-being Outcome at quarter 3 for the past 2 years:



## 2.1 PEOPLE

The total percentage turnover for services contributing to this Well-being Outcome during quarter 3 2017/18 compared to quarter 3 in the previous year can be seen in the chart below.



Overall, going forward it is anticipated that there will be an increase in turnover across all Council services including those contributing to this Well-being Outcome as services continue to review how they deliver services in order to improve efficiency and effectiveness, in line with the Reshaping Services programme.

During Q3 2017/18, staff turnover across the Council including and excluding schools is 7.31% and 6.47% respectively. In comparison, during the same period in 2016/17 staff turnover across the Council including and excluding schools was 8.28% and 8.13%.

The overall voluntary figure for Q3, 2017/18 was 5.04% (excluding schools) and 5.44% (including schools) compared to 6.18% (excluding schools) and 6.01% (including schools) during Q3 the previous year (2016/17).

#### 2.1 PEOPLE

Efforts to further develop a younger workforce continue to be an area of focus for the majority of services contributing to the Outcome. One method being used to help increase the number of younger workers is increasing the use of trainees. Within Resources Management and Safeguarding this is being addressed through working with the newly appointed Workforce and OD manager to consider a strategy that could be developed to increase the younger people within the workforce. Visible Services are also continuing to develop opportunities to retain graduates and increase the proportion of under 24 years old in the workforce through the Reshaping Programme which will include the creation of more trainee and graduate posts.

Succession planning also continues to be an area of focus across the Council. For example, within Social Services as a result of a restructure there have been a large number of internal promotions. The recent restructure of Business Management and Innovation (now Resource Management and Safeguarding) was successfully implemented on the 4<sup>th</sup> September 2017. At the time some key posts were yet to be permanently recruited, although the majority of these were filled on an interim basis. At the time, the Head of Service for Resource Management and Safeguarding was also yet to be appointed.

Recruitment to critical posts remains a priority for many of the services contributing to this Outcome. Services such as Resources Management and Safeguarding are conducting a review of job descriptions for posts where staff recruitment and retention is an issue. Within Children and Young People's Service the recruitment focus continues to be placed upon recruitment to vacant posts across statutory team, particularly within the Care Management Team.

A Cabinet paper was presented to and approved by Members on the 6<sup>th</sup> November 2017 to establish a Regional Social Care Workforce Development Training Unit for the Vale and Cardiff. This Regional Workforce Unit will enable us to further enhance our capacity, knowledge and skills by bringing together two training units to form a cohesive and sustainable regional unit that better meets the needs of the wider social care workforce. The service is to be hosted by Cardiff Council, so work is ongoing to ensure the smooth transition to the service by April 2018. Recruitment to the new Regional Manager position is pending and will be completed during the next quarter.

## 2.2 FINANCIAL

At present the forecast for Social Services at year-end is one a potential overspend of around £1.4m. The main budgetary pressures associated with this potential overspend relating to Community Care Packages budget where it is currently projected that there could be an overspend this year of around £1.2m and the budgetary pressures associated with the children's placement budget, which has a projected overspend of £200K. These budgetary pressures are due to the increased demand for services due to an increasingly ageing population that are presenting with more complex needs and the increasing complexities of the children currently being supported very high cost placements. Work continues to ensure that children are placed in the most appropriate and cost effective placements.

There is also an adverse variance to the profiled budget for Leisure Services. The main reason for this is the high costs for vehicles during the summer season. However it is anticipated that this will reduce over the winter months and therefore is currently projected that the overall budget would outturn on target.

To date, work remains ongoing to ensure services achieve 100% of their budget savings target for 2017/18. Social Services remain on track to achieve the £335k savings for 2017/18. Visible Service has achieved 29% of the required savings of £819K. However, the majority of the savings required is tied in with the review of vehicle use within the Waste Management and Cleansing. As these are unlikely to be made in the short term due to the increased distance to be travelled to dispose of waste, as all disposal points are now situated in Cardiff. To offset this £200K will be met from reserves. Performance & Development remains on track to achieve the £178k savings required.

The latest Reshaping Programme update covering the Q3 period shows that the work streams contributing to this Wellbeing Outcome are continuing to make good progress. However, the two work streams highlighted in the December 2017 update report aligned to this Outcome, both (Social Service Budget Programme & Visible Services) have been attributed a red status.

## 2.3 ASSETS

Positive progress has been made to date in relation to maximising our key asset priorities.

The Leisure Service continues to support Sport Clubs and other community organisations with Community Asset Transfers (CATs) where there is a benefit to both the applicant and the Council. Meetings have been held this quarter with additional sporting clubs who have expressed initial interest in Community Asset Transfers however no organisations have completed successful stage 1 application at present.

Works are continuing to progress on the upgrading of electrical systems at Barry and Penarth Leisure Centres and the capital bid submitted in quarter 2 to address additional electrical works identified to be carried out in 2018/19 has been approved. The changing room scheme is due to go out to tender in February 2018 following the conclusion of final design work.

Refurbishment and upgrading works to Residential Care are continuing to progress as planned with the Capital Development Programme this quarter. Additional works have been identified to be carried out under the 2018/19 Capital Programme. These works will help ensure our care settings are maintained to high standards and effectively meet the needs of clients.

#### 2.4 ICT

We continue to make good progress towards delivering our ICT priorities this quarter contributing to improving services for residents and customers. Key projects of particular note are outlined below:

The Welsh Community Care Information System (WCCIS) was successfully implemented as planned on 27th November 2017. WCCIS is a national electronic information sharing system which is designed to deliver improved health social care and support for clients as a result of enhanced information sharing. Its implementation is now being monitored via the Directorate wide Operational Group to ensure issues post implementation are identified and addressed appropriately. Additional training will also be arranged for staff to attend as necessary. There continues to be key risks associated with this project, which is why it has been identified on the Council's Corporate Risk Register. The primarily risk is around business continuity, service/workforce resilience and extraction/availability of performance information. The risks associated with this project continue to be monitored by the Operational Group and will be monitored from next quarter in the Corporate Risk Register.

Following the declarations of interest expressed by Local Authorities during quarter 2 to develop a bespoke Family Information Service (FIS) database and record management system 15 authorities (including the Vale of Glamorgan) have now confirmed their intention to take the FIS system. This will result in a cost of £2,333 plus VAT for each local authority for 2017/18. The System now has a 'going live' date of the 1<sup>st</sup> April 2018.

The DEWIS Cymru information portal continues to be developed to expand and extend its use with resources <u>https://www.dewis.wales/</u> or the regional DEWIS Twitter account @DewisWales. This work to further expand the portal continues to be delayed as efforts have been placed on developing a regional approach through the Regional Steering Group to reach an agreement on how DEWIS can be better supported and how to ensure a sustainable service is provided.

## 2.5 CUSTOMER

Ensuring good customer focus remains a key priority in delivering Council services and a number of planned improvement activities have been undertaken across the Council during the quarter with this focus in mind.

The public consultation held on the draft Leisure Strategy closed on the 16<sup>th</sup> November 2017. Following analysis of the responses received through the consultation process a final version of the strategy will be developed taking into consideration the consultation responses gained. The amended strategy will be presented to Cabinet during the next quarter for their approval.

The Vale of Glamorgan has successfully implemented Transition Services underpinned by the development of a Transition Protocol, which supports best practice across agencies. Effective implementation of the Transition Policy will help enable a smooth transition from Children to Adult Services.

During quarter 3, progress slipped in development of a Citizen's Engagement Panel for people with care and support needs. Efforts to engage with clients through the 'Expert by Experience' pilot carried out at New Horizons has faltered as the consultancy engaged to undertake the work were unable to gain sufficient information from users on how to implement suggested improvements. In order to progress this work further a new Citizen's Engagement exercise will need to be developed.

The Contact Centre and Adult Services continue to work together to provide a single point of access for community health and social care services. The organisational review of the Customer Contact Centre which commenced in the previous quarter has now been completed and proposals for development stemming from this review will be presented in quarter 4 to improve efficiencies in this area. During this quarter there has been the successful transfer of the Elderly Care Assessment Service to C1V further developing the Contact Centre as a single point of access.

The Shared Regulatory Service has actively engaged with business this quarter in order to gage the interest that surround the 'Buy with Confidence' Scheme and align resources accordingly. The Scheme aims to provide residents with peace of mind when shopping or choosing a tradesperson and helps support reputable businesses by providing them with a 'Trading Standards Approved' endorsement. Work is also being carried out to develop a pilot scheme to test the market and ensure the chosen approach best represents the needs of reputable businesses.

## **2.6 CORPORATE RISK**

The most recent review of the Corporate Risk Register was used to inform this quarter's reports. The current status of the key corporate risks that have a bearing on this Well-being Outcome are as follows:

Risk		Residua	I Risk S	core	Direction of	Forcast
Ref	Risk	Likelihood	Impact	Total	Travel <sup>3</sup>	Direction of Travel <sup>4</sup>
13	Unauthorised Deprivation of Liberty Safeguards	4	3	12 H	Establishing baseline	$\leftrightarrow$
11	Safeguarding	1	3	3 M/L	Establishing baseline	$ \Longleftrightarrow $
12	Intergrated Health and Social Care	2	2	4 <b>Y</b> M	Establishing baseline	$ \longleftrightarrow $

At Q3, of the 3 corporate risks that are aligned to this Well-being Outcome, 1 (Intergrated Health and Social Care) has been attributed a medium risk rating, 1 (Safeguarding) a medium-low risk and the final (Unauthorised Deprivation of Liberty Safeguards), a high risk rating. These scores remaining unchanged since the last update reported at quarter 2. In terms of forecast direction of travel, it is anticipated that the risks above will remain unchanged. Mitigating actions for service and corporate risks continue to be addressed via Service Plan actions.

## **2.7 SERVICE PLANS RISKS**

The current status of the Service Plan risks that have a bearing on this outcome are as follows:

Risk Description	Service Area	Status		Direction	Forecast Direction
Availability of other partners to support the preventative services agenda.	Resources Management and Safguarding	Medium	6 (Y)	$\leftrightarrow$	$\leftrightarrow$
Sport development and delivery is provided regionally based on the consortium area with the Vale of Glamorgan being worse off as a result.	Visible Services and Transport	Medium /High	8 (A)	$\leftrightarrow$	$\leftrightarrow$
Service users cannot access services swiftly and their needs are not met or increase.	Adult Services/ Children and Young People Services	Medium	4 (Y)	$\leftrightarrow$	$\leftrightarrow$
Reduction in service availability because of increasing demand, higher expectations and changes to eligibility criteria.	Resources Management and Safguarding	Medium /High	8 (A)	<b>+</b>	$ \Longleftrightarrow $

<sup>&</sup>lt;sup>3</sup> Direction of travel compares residual risk score for the current quarter with the previous quarter to indicate whether the risk is increasing/decreasing or staying static.

1 risk is increasing, 🖶 risk is decreasing, ಈ risk is remaining static

Forecast direction of travel anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

Risk Description	Service Area	Status		Direction	Forecast Direction
Closure/failure of our commissioned providers.	Resources Management and Safguarding	Medium /High	8 (A)	$\leftrightarrow$	$\leftrightarrow$
Impact of increasing Looked After Children numbers on placements/availability where in-house fostering capacity is exceeded and there is an increased reliance on Independent Fostering Agency (IFA) placements and on Social Work and Placement Teams.	Children and Young People Services	High	12 (R)	<b>+</b>	←
Risk of judicial review as a result of insufficient capacity in care settings to deliver services that effectively meet the identified care as support needs of service users.	Adult Services	Medium	4 (Y)	<b> </b>	<b> </b>
The Council is unable to meet statutory responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	Adult Services/ Resources Management and Safguarding	Medium	4 (Y)	<b>+</b>	<b> </b>
Other organisations are unable to meet their responsibilities for responding	Resources Management and Safguarding	Medium	4 (Y)	$\leftrightarrow$	$\leftrightarrow$
effectively to situations where people are at risk of neglect or abuse.	Children and Young People Services	Medium	6 (Y)	$\leftrightarrow$	$\leftrightarrow$
Inability to implement requirements of the Social Services and Wellbeing (Wales) Act 2014	Adult Services /Children and Young People Services	Medium	6 (Y)	<b> </b>	<b>+</b>
Compliance with the requirements of the Social Services and Wellbeing (Wales) Act 2014.	Resources Management and Safguarding	Medium	4 (Y)		
Unauthorised Deprivation of Liberty.	Resources Management and Safguarding	High	12 (R)		
Implications arising from the Court of Protection associated with Deprivation of Liberty of people living in domestic settings.	Adult Services	High	12 (R)		

Risk Description	Service Area	Status		Direction	Forecast Direction
Standard of buildings of residential care homes.	Adult Services	Medium	4 (Y)	$\leftrightarrow$	
Our Corporate Safeguarding procedures are insufficient, not followed or are ineffective.	Resources Management and Safguarding	Medium	4 (Y)		+
Failure to ensure safety of our learners.	Achievement for All	Low	2 (B)	$\leftrightarrow$	₽
Increased child protection issues as a result of the number and complexity of the needs of excluded pupils.	Achievement for All	Medium	6 (Y)	$\leftrightarrow$	+
Insufficient funds to meet rising demand for services.	Resources Management and Safguarding	Medium /High	8 (A)	$\leftrightarrow$	1
Due to the impact of the Social Services and Wellbeing (Wales) Act 2014, the Council needs to consider charges for services which will affect the ability to secure income. This places the authority at financial risk.	Resources Management and Safguarding	Medium	6 (Y)		
Continued reduction and regionalisation of grant funding.	Children and Young People Services	Medium	6 (Y)	$\leftrightarrow$	$\leftrightarrow$
Increase in numbers and complexity of care proceedings in the context of reduced court timescales impacting on court costs, Social Worker caseloads and ensuring that other cases receive the attention they require.	Children and Young People Services	Medium /High	9 (A)		<b> </b>
Capacity and capability to meet the needs of our most vulnerable clients at a time when resources are reducing.	Children and Young People Services	Medium	4 (Y)		1
Inability to provide levels of training for staff or independent sector to ensure quality of care for citizens provided by Council.	Resources Management and Safguarding	Medium /High	8 (A)		•

## **GLOSSARY OF TERMS**

#### Well-being Outcome:

The relevant Well-being Outcome set by the Council and featured in the Corporate Plan 2016-20.

#### Well-being Objective:

The relevant Well-being Objective set by the Council and featured in the Corporate Plan 2016-20.

#### **Population level Performance Indicators:**

These headline performance indicators demonstrate progress in achieving outcomes at the community level rather than the individual level. The Council will certainly contribute towards population indicators through its work, however, it does not have sole responsibility for them and delivering sustained improvement on these indicators will involve a wide range of organisations working effectively in partnership.

#### **Local Council Performance indicators:**

These are performance indicators which tell us how well we are delivering our services or activities and will identify how these contribute to the overall community-wide impact. The focus is on whether customers are better off as a result of what we do. In order to identify the most important performance measures to demonstrate our progress we need know: How much did we do? How well did we do it and; What difference have we made?

What difference have we made?	How well have we performed?	How much? (contextual data)
These performance measures will help us demonstrate whether customers in the Vale are better off. They will seek to measure the quantity/quality of change for the better for customers.	These performance indicators are qualitative and will be used to demonstrate how well the Council performed its activities	These performance indicators are quantitative and will be used to measure how much and/or what the Council delivered.

#### **Overall RAG status:**

Provides an overall RAG health check showing our performance status against the Well-being Objective.

Mea	Measures (RAG) Direction of travel (DOT)		Actions (RAG)		Overall (RAG) status Objective		
G	Performance is on or above target.	1	Performance has improved on the same quarter last year.	G	Green: Action completed or on track to be completed in full by due date.	G	Green: indicates that we are well on track to deliver the key outcomes relating to the Objective as set out in the Corporate Plan.
A	Amber: Performance is within 10% of target	1	Performance has remained the same as the same quarter last year	<b>A</b>	Amber: Minor delay but action is being taken to bring action back on track.	A	Amber: indicates that at this stage, we are on target to deliver the Objective but some aspects need to be addressed in order to ensure we remain on track to fully achieve the Objective.
R	Red: Performance missed target by more than 10%	₽	Performance has declined compared to the same quarter last year	R	Red: Action has slipped with limited progress made and an explanation must be provided including any planned remedial action(s) and where appropriate a revised completion date.	R	Red: indicates that at this stage, we are not on target to deliver key outcomes relating to the Objective as set out in the Corporate Plan.

SERVICE PLAN ACTIONS				
VS: Visible Services	CS: Children and Young People Service	AS: Adult Services	SRS: Shared Regulatory Services	
HS: Housing Services	RMS: Resources Management and Safeguarding	PD: Performance and Development		

## **RISK MATRIX**

The **Inherent Risk** defines the risk score in a pre-control environment i.e. what the risk would look like (score) without any controls in place to manage the risk.

The **Residual Risk** can be defined as the subsequent risk score as a consequence of applying controls to mitigate this risk.

		4	8	12	16
	Catastrophic	MEDIUM	MEDIUM/HIGH	HIGH	VERY HIGH
pact or of Risk		3	6	9	12
of R	High	MEDIUM/LOW	MEDIUM	MEDIUM/HIGH	HIGH
		2	4	6	8
-	Medium	LOW	MEDIUM	MEDIUM	MEDIUM/HIGH
Possible Magnitu		1	2	3	4
Po Ba	Low	VERY LOW	LOW	MEDIUM/LOW	MEDIUM
Low 1-2		Very Unlikely	Possible	Probable	Almost Certain
Mediur Mediur	Low/Medium 3 Medium 4-6 Medium/High 8-10 Likelihood/Probability of Risk Occurring				
High 12	2-16				

**Direction of travel** compares residual risk score for the current quarter with the previous quarter to indicate whether the risk is increasing/ decreasing or staying static.

**Forecast direction of travel** anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

Risk Key;

Risk level <b>increased</b> at last review
Risk level <b>decreased</b> at last review
 Risk level <b>unchanged</b> at last review

## **APPENDIX 1: SERVICE PLAN ACTIONS**

Objective 7: Encouraging and promoting active and healthy lifestyles.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH1				
VS/A034: Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity.	31/03/2018	75	Green	Implementation of the 2017/18 Leisure Plan continues to be on target. Individual meetings have also taken place with both the Chairman of Sport Wales and the Chief Executive of Sport Wales this quarter regarding future plans. In addition a meeting has also been held with a representative of Welsh Government which also discussed future funding. The 2018/19 plan has now been submitted with an outcome expected in quarter 4.
VS/A035: Seek S106 and other funding to deliver improved walking and cycling access to parks and other leisure facilities.	31/03/2018	75	Green	In December 2017 funding was awarded by Welsh Government to fund upgrade of pedestrian/cycle track through Cosmeston Park, works here are to be completed by the 31st March 2018. S106 funding will be identified for Rhoose in the new financial year. All other schemes remain on-going, however grant funding is being prioritised for spend to ensure maximum spend before the deadline of 31st March 2018.
VS/A037: Provide a School Crossing Patrol service at high risk locations to enable children to walk safely to and from school	31/03/2018	75	Green	All routes continue to be covered by a School Crossing Patrol service. Once the new lights controlled crossing is completed for Sully (implementation starts 8th January 2018 and will take approximately 10 weeks), the mobile patrol will be freed up to cover any absences.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
VS/A039: Assist Sports Clubs and other suitable organisations with potential Community Asset Transfers where there is a clear financial and community benefit for both the applicant and the Council.	31/03/2018	75	Green	The service continues to provide advice on Community Asset Transfers (CATs) to interested organisations. Meetings have been held with additional sporting clubs who have expressed initial interest in Community Asset Transfers however no organisations have completed successful stage 1 application at present.
VS/A043: Investigate further improvements to the Council's Community Centres enabling them to meet more of the needs of existing and potential users.	31/12/2017	100	Green	Regular meetings continue to be held with all the Community Centre Committees to identify opportunities and issues. A capital bid has been made to ensure the community centres remain operational for the foreseeable future.
VS/A073: Upgrade electrical wiring and the changing facilities at Barry and Penarth Leisure Centres.	31/03/2018	75	Green	Work is continuing on upgrading the electrical systems and the capital bid for further works next year has been approved. The changing room scheme is due to go to tender in February 2018.
VS/A074: Complete a Leisure Strategy for the Vale of Glamorgan.	31/07/2017	85	Red	The consultation period on the draft Leisure Strategy closed this quarter on the 16th November 2017. Following the responses received during the consultation period final amendments are being made to the strategy. The strategy is due to be presented to Cabinet during quarter 4.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
VS/A075: Implement the 2017/18 Local Authority Partnership Agreement (LAPA) resulting in increased physical activity opportunities.	31/03/2018	75	Green	The 6 month progress report for the Vale Sport Plan (LAPA) was submitted to both the Vale Sport Management Board and Sport Wales (funding body) who accepted the report. The overall plan is on track for completion. There were some issues in relation to staff shortages due to sickness and staff leaving. This has resulted in increased workload for remaining staff members which is not manageable long term. It has been difficult to recruit individuals into the Welsh speaking Activity Co-ordinator post (the post has been advertised twice). This issue will continue to be considered. The application form and plan for sports funding for 2018 – 2019 financial year has been submitted to Sport Wales which includes the priority areas for the new year. Initial feedback is positive, although there is an anticipated cut of 2% for the core funded Active Young People programme. The impact of this is currently being considered and amendments to the programme will be made accordingly.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH2				
HS/A049: Work with partners and the Area Planning Board to deliver the key actions for 2017/18 as outlined in the Cardiff and Vale Substance Misuse action plan.	31/03/2018	75	Green	The Area Planning Board (APB) for Cardiff and the Vale is now being chaired by Public Health. A review of membership has taken place to ensure that all agencies are represented. A review of all services across the region is currently under way that will inform the Commissioning Strategy. Whilst the work is regional there are Vale specific projects that are being developed in order to address the need in the Vale. These include joint training and signposting clients to relevant agencies. The Vale specific projects will be evaluated during 2018/19.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH3				
VS/A047: Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families.	31/03/2017	75	Green	During the half term, 20 disabled young people and 30 disabled children accessed the Disability Teenscheme and Playscheme organised by the Play Development Officer. Where required personal care, 1:2 or 2:1 support and assistance with transport was provided. There were issues with identifying an agency nurse to administer medication to those children / young people who required that support which meant they were not able to access this service. This led to a complaint being raised by one of the families. This issue was discussed as part of a multi-department meeting and a way forward is still being considered. The Play Team have been supporting Rhoose Homework club with relevant mentoring and training to increase the play opportunities available to the 100+ children / young people who access this club. We have worked in partnership with the S106 Officer and other partners to assist with consultation of future spend of S106 funding . We have worked with the Housing Department to assist with consultation regarding the development of an outdoor community space between Ysgol Gwaun Y Nant and Gibbonsdown Primary In addition the play officer has worked with the Family Information Service on a Family Fun Day delivered as part of the Families First project which was accessed by approx. 550 people.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
VS/A047 Continued				The play officer is also working with Seren Gwyrdd, a local organisation supporting outdoor opportunities, to deliver community-based Forest Schools sessions in Romilly Park (also in partnership with the Parks Department) as well as sessions delivered to home educated pupils. The Play team is working with the Childrens' Partnership Manager to organise and deliver the L2 App and MAPS play training to increase the
				number of play qualified people within the Vale. As part of her training to become a tutor to deliver these courses, the Play Development officer will shortly be delivering the L2 App and MAPS course to University students alongside an experienced tutor. She is also working in partnership with Adult Learning/Agored Cymru in relation to these courses.
AH4				
BM/A020: Further explore options for developing a bespoke Family Information Service database and record management system.	31/03/2018	75	Green	Agreement to commit the Vale of Glamorgan to involvement in the continued development of Family Information Service (FIS) Wales has been received and 15 authorities have now confirmed that they wish to take the system, meaning that the cost to each LA for 2017/18 is £2,333+vat. The System 'Go Live' is due on the 1 <sup>st</sup> April 2018.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description	
AH5					
BM/A021: Work with Public Health Wales to identify how the Council can contribute to the development and delivery of the Cardiff and Vale Local Public Health Plan including work relevant priorities such as: tobacco cessation, obesity, falls prevention, health care/public health (including dementia support).	31/03/2018	75	Green	Ongoing engagement as requested by Public Health wales. Promotion of flu campaign amongst providers and staff.	
AH6					
Planned action for 2017/18 has been completed and the Vale of Glamorgan has retained its 7 Green Flag awards.					

Objective 8: Safeguarding those who are vulnerable and promoting independent living.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH7				
BM/A005: Further develop relationships with our partners to implement alternative service delivery models that support the needs of at risk adults and children	31/03/2018	75	Green	The Social Value Forum continues to develop and meet regularly. A Scrutiny report has now been prepared regarding the role of the Regional Partnership Board outlining the progress made to date including the Social Value Forum which is to be presented on the 15 January 2018.
BM/A009: Ensure staff and potential referrers are aware of the requirements under the statutory guidance relating to their duty to report safeguarding concerns.	31/03/2017	75	Green	The Corporate Safeguarding Group have incorporated the ongoing engagement of staff and partners in terms of maintaining awareness around duty to report safeguarding concerns. A Safeguarding Event took place this quarter reiterating this message which was well attended by a cross section of Council staff.
CS/A013: Deliver training as appropriate to staff to ensure compliance with the Social Services and Well-being (Wales) Act.	31/03/2018	75	Green	Discussions have already taken place with the Training Department to ensure that the training programme appropriately responds to the Division's training needs identified in relation to the Act. Staff continue to be supported to attend these sessions.
CS/A014: Conclude the pilot of our Therapeutic Fostering Scheme and undertake a cost/benefit analysis	31/03/2018	25	Red	We have concluded the pilot, which has confirmed the merits of the service but we have identified issues in relation to the recruitment and retention of Psychology staff for a Social Services department. Current work is underway with the C&V UHB in developing a costed proposal for how our two organisations can work in partnership to deliver a Therapeutic Fostering Scheme.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
CS/A015: Extend the pilot for Direct Family Support Plus and undertake a cost/benefit analysis	31/03/2018	75	Green	Following the agreement to extend the pilot to 31/03/2018 work to develop the service specification for tendering that will enable procurement of our family support services remains on track. A procurement exercise is timetabled to commence in Q4.
CS/A016: Increase transparency of the continuing health care process and seek local authority membership of the panel.	31/03/2018	75	Green	Work is progressing to increase transparency in this area with visits taking place with key stakeholders to inform the review into the CHC arrangements across the region and make recommendations for consideration by Vale and Cardiff Councils and the University Health Board.
CS/A017: Monitor implementation of the revised Transition Policy via the multiagency Transition Improvement Group.	31/03/2018	100	Green	The Vale of Glamorgan has successfully implemented transition services underpinned by a Transition Protocol, which supports best practice across agencies.
AS/A010: Pilot delivery of an outcome focused case management and measurement system within the Long Term Care Service	31/03/2018	75	Green	The Outcome Focused 'Your Choice' Pilot has been reviewed and well received by the people who use the service, the pilot provider and partner professionals. A Your Choice Policy is currently being developed, to enable variation to contract for roll out to all Domiciliary Care Agencies from April 2018 for all citizens and across all ages and client groups.
BM/A022: Work with partners on the Regional Partnership Board to plan services in response to the Population Needs Assessment.	31/03/2018	100	Green	Consultation active until end of Qtr 3 with plans to seek approval through each partner from January 2018.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
BM/A023: Develop a more joined up corporate approach to developing preventative services that are aligned to the Social Services Wellbeing Act requirements to promote independent living.	31/03/2018	100	Green	Consultation active until end of Qtr 3 with plans to seek approval through each partner from January 2018. We will continue to develop plans in conjunction with other service areas in relation to independent living service.
BM/A024: Undertake further development of the DEWIS Cymru portal to expand and extend its use.	31/03/2018	50	Red	Agreement as to how this can be better supported and sustainable service provided. This is a regional approach and is being implemented through the Regional Steering Group.
BM/A025: Review accommodation with care options for older people and develop our commissioning strategy for future years.	31/03/18	75	Green	We are continuing to carry out joint work with Housing colleagues supporting this measure. We are currently awaiting the outcomes from the housing LIN prior to revisiting our Accommodation with Care Strategy.
BM/A026: Identify opportunities for joint commissioning in line with Part 9 (Collaboration and Partnerships) duties of the Social Services Wellbeing Act	31/03/2018	75	Green	Work is progressing this quarter in the development of the mandatory arrangements re pooled budgets for Care Home placements. A Cabinet report is currently being prepared outlining the progress and proposal, this is due to be presented on the 22 <sup>nd</sup> January 2018.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
LS/A012: Provide legal advice and support on legal matters in relation to implementing new ways of working arising from the Well-being (Wales) Act with a particular focus on the priority work streams of: - Provision of information - Advice and assistance services - Eligibility/assessment of need - Planning and promotion of preventative services - Workforce - Performance measures	31/03/2018	75	Green	During Q3 work has remained ongoing in the development of Pooled Budgets. This quarter has seen Legal Services advise in relation to the drafting of the Authority's charging policy which is to be reported to Cabinet during Q4 (the Authority's Interim Charging Policy for care and support services under the SSWBW Act 2014 was concluded and reported to Cabinet and implemented). During Q3 Legal Services also advised on the proposed partnership with Cardiff Council in respect of the establishment of a regional training centre.
AH8				
AS/A005: Continue to develop C1V (Customer Contact Centre) as the single point of access for community health and social care services through expanding the range of services.	31/03/2018	75	Green	The organisational review of the customer contact centre (CCC) that commended during quarter 2 has now been completed and proposals are being presented in quarter 4 to the Corporate Management Team (CMT) and the Health Board, following the presentations a Cabinet report will then be prepared. The Elderly Care Assessment Service (ECAS) has now transferred over for C1V CCC to take their calls developing the centre as a single point of access for residents. This quarter has also seen an increase in property calls and discussions re the SLA for this service progressing. This transfer will enable further centralisation of a locality/community service, a further income stream for the centre, foster good relationships between the services and improve referral pathways.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A015: Review of our Learning Disability Strategy.	31/03/2018	50	Red	Day Service Joint Strategy: All work has now been gathered for the review of the 2014-2017 strategy. Cardiff OM is currently drafting a review report which was originally planned to be completed by the end of November 2017 however this has now slipped to March 2018. The next meeting with the day service managers and OM's (Cardiff and Vale) is scheduled to be held in February. Director and Heads of Service meeting took place in October 2017 to progress discussions on the next phase of regional working for delivery of complex needs day services. Joint Learning Disability commissioning Strategy: The Project Outline Document has been completed this quarter. The Integrated Health and Social Care Team project management support has been secured to assist the 3 partners (Vale & Cardiff LAs and Cardiff and Vale UHB) to develop project plans. Institute of Public Care (IPC) support has been secured to complete the needs assessment and stakeholder engagement events. Further meetings are now scheduled to take place on a monthly basis. Due to the nature of regional working, meetings/priorities are not solely within the control of the Vale hence some slippage in the area of day service review, despite a great deal of work happening at ground level. A bigger push will take place in the next quarter with additional ICF project management support in respect of regional day services will assist in getting back on track.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
PD/A017: Continue to look at ways to improve self- service options and ensure that customer enquiries are resolved quickly and effectively in line with requirements of the Social Services Wellbeing Act.	31/03/2018	50	Red	This will now be taken forward within the Digital Customer theme of the Digital Strategy. The next working Group meeting is due to be held in January 2018.
PD/A018: Work with Adult Services to review and amend processes at the Customer Contact Centre (C1V) to support the provision of advice and assistance in line with requirements of the Social Services Wellbeing Act.	31/03/2018	65	Amber	On average adult services enquiries resolved at first point of contact, without the need to transfer to Adult Services Intake and Assessment Team has increased to 55%. Work is ongoing between Adult Services and Customer Relations to establish effective Quality Assurance and Performance Management procedures to improve individual performance and iteratively improve procedures. This is an embedded, ongoing, business as usual process.
АН9				
AS/A006: Maximise the use of Intermediate Care (ICF) and Primary Care (PCF) funding to support the development of further integrated services.	31/03/2018	50	Red	The recruitment of additional reablement support workers has paused due to the implementation of a new rostering system taking priority. Recruitment will recommence in quarter 4 now that the web roster programme has been successfully implemented.
AS/A016: Develop robust processes to improve information sharing between key partners to enable a smoother transition between Children and Young People Services and Adult Mental Health Service	31/03/2018	50	Red	Mental health workers continue to attend TRIG. Regional Transition meetings continue to progress Joint protocol – sub group tasked with this. Unfortunately Interim lead nurse CAMHS Richard Barrett has left and there has been no named replacement. Liaison work identified following meeting held on the 13th November has not yet progressed.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A017: Implement a new Autism Service	31/03/2018	75	Green	All staff have now been appointed with just one part time health staff member yet to take up post. The service is accepting referrals for both diagnosis and on-going support. Work continues on establishing operational practice and defining contacts and relationships with existing services and groups. The Cardiff and Vale Integrated Autism Service can be contacted either by calling 029 2182 4240 or by emailing <u>CAV.IAS@wales.nhs.uk</u> .
AH10				
BM/A027 Support the implementation of Welsh Community Care Information System (WCCIS) for the Directorate and the Regional Partnership	31/03/2018 (ongoing project to 31/3/18)	75	Green	The Welsh Community Care Information System (WCCIS) was successfully implemented as planned on 27th November 2017, we continue to monitor and embed practice. Fortnightly meetings are taking place with operational staff to ensure that we address issues post implementation.
BM/A011: Work with the Assistant Director for Integration to identify opportunities to pool budgets or develop joint commissioning intentions.	31/03/2018	75	Green	Work is continuing to progress this quarter in the development of the mandatory arrangements re pooled budgets for Care Home placements. A Cabinet report is currently being prepared outlining the progress and proposal which is due to be presented on the 22 <sup>nd</sup> January 2018.
AS/A018: Support the implementation of Welsh Community Care Information Solution (WCCIS) for Adult Services	31/03/2018	100	Green	The Welsh Community Care Information Solution (WCCIS) went live as planned on 27th November 2017, we are now in the post implementation phase and resolving issues that have arisen as a consequence of implementation.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A019: Review processes across UHB and Adult Services to support pooled budgets	31/03/2018	75	Green	Progression in this area continues with discussions with partners taking place to find solutions and arrangements regarding pooled budgets in line with the mandatory requirements of SSWB Act.
CS/A019: Support the implementation of the Welsh Community Care Information Solution (WCCIS)	31/03/2018	75	Green	The Welsh Community Care Information Solution (WCCIS) has been launched this quarter on schedule. Implementation is being monitored via the Directorate wide Operational Group to ensure issues are prioritised and addressed. Additional training is being arranged as necessary.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AH11				
HR/A002: Support and monitor the application of the Council's Safer Recruitment Policy.	31/03/2018	75	Green	A detailed report on Safer Recruitment for the half-year period April to September 2017 was considered by the Cabinet on the 18th December 2017. The report provided detailed information on the outturn of safeguarding in general and included information on Safer Recruitment outturn across Directorates and Services. The outturn in respect of Safer Recruitment for the half-year April to September 2017 show compliance at 95% in Schools and 100% in respect of in scope corporate appointments. Overall, the compliance rate for April to September 2017 was 97%. This is an improvement in comparison to last year (April 2016 to September 2016) where the compliance rate within Schools was 93% and in Corporate was 98%. The overall compliance rate last year was 94%. Compliance of the policy is discussed at each corporate safeguarding group meeting to continually review the effectiveness of the policy and to identify potential improvements.
BM/A012: Monitor implementation of the Corporate Safeguarding policy across the Council through effective audit.	31/03/2018	75	Green	A report outlining the progress of the Corporate Safeguarding Group (CSG) has been presented to Cabinet this quarter and will now proceed through Scrutiny Committees during January 2018. A refresh of the Action Plan will be considered in quarter 4. The Operational Manager (OM) for Safeguarding commenced in post in September 2017. Training sessions have been completed with all Elected Members during the quarter.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
BM/A013: Develop tools to support staff to feel more confident to safeguard vulnerable people through effective procedures for referral, and also use of Adult Protection Support Orders (where relevant) in line with the Social Services Well-being Act.	30/09/2017	50	Red	The Operational Manager (OM) for Safeguarding commenced in post in September 2017, and is working through this action although this is closely linked with National processes and policy development, of which Cardiff is leading this piece of work, and we are contributing to.
AH12				
Planned action for 2017/18 has been completed and n	nonitoring is ongoin	g.		
AH13				
BM/A014: Continue to work on developing an effective commissioning strategy for accommodation with care to meet the increasing demand or older people to remain independent for as long as practical.	31/03/2018	75	Green	The Area Plan and Market Position Statement have now been completed, work is now proceeding with revising/developing the commissioning strategies. Accommodation with the Care Strategy is currently progressing post Housing LIN outcome.
AH14				
Planned action for 2017/18 has been completed and n	nonitoring is ongoin	g.		
AH15				
Planned action for 2017/18 has been completed and n	nonitoring is ongoin	g.		
AH16				
SRS/A012: Launch a 'Buy with Confidence' (responsible trader) scheme across the region to provide residents with peace of mind when shopping or choosing a tradesperson whilst supporting reputable businesses with a 'Trading Standards approved' endorsement.	31/03/2018	75	Green	Work is underway to craft a pilot scheme that will properly test the market, and ensure that the approach best represents the needs of reputable businesses locally. Engagement with businesses has commenced this quarter in order to gauge interest in the Scheme and align resources accordingly.

## APPENDIX 2: PERFORMANCE INDICATORS

Note: Due to the launch of the Welsh Community Care Information Solution (WCCIS) in November this quarter we are currently unable to extract data on the Social Services performance indicators at this time, this issue is likely to continue into quarter 4.

Objective 7: Encouraging and promoting active and healthy lifestyles.

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
Population Indicators						
CPM/182 (WO4/M001): Percentage of adults aged 16+ who have fewer than two healthy lifestyle behaviours (not smoking, health body mass index, eat five portions fruit or vegetables, not drinking above guidelines, meet guidelines on weekly minutes of physical activity).	N/A	N/A	N/A	N/A	N/A	Annual Well-being National Indicator. WG data not available.
CPM/183 (WO4/M002): Percentage of children who have fewer than two healthy lifestyle behaviours (not smoking, eat five fruit/ vegetables daily, never/rarely drink and meet the physical activity guidelines).	N/A	N/A	N/A	N/A	N/A	Annual Well-being National Indicator. WG data not available.
CPM/184 (WO4/M003): Children age 5 of a healthy weight.	N/A	N/A	N/A	N/A	N/A	Annual Well-being National Indicator. WG data not available
CPM/185 (WO4/M004): The average number of years a new born baby can expect to live if current mortality rates continue.	N/A	N/A	N/A	N/A	N/A	Annual Well-being National Indicator. WG data not available.

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
What difference have we made?						
CPM/186 (HS/M044 Percentage reduction in problematic substance misuse of clients accessing substance misuse treatment.	N/A	73.68%	67%	Green	N/A	The Treatment Outcome Profile (TOP) is an outcome questionnaire that everyone in treatment completes on entry, again every quarter, and finally on exit from services. In Quarter 3, 70 individuals out of the 95 who participated in a TOP review, reported a positive reduction in their substance misuse. Please note from Q4 onwards, clients for which there is a reduction, abstinence or no change will be factored into this calculation as a positive outcome.
CPM/187 (HS/M045): Improvement in the quality of life of clients accessing substance misuse treatment.	N/A	No data available	56%	N/A	N/A	No data available at the time of reporting.
CPM/191 (VS/M041 Percentage of adults reporting that they participate in sports/ physical activity three or more times a week.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
How well have we performed?						
CPM/090 (VS/M033): Percentage of people who have completed the exercise referral scheme.	44.03%	31.12%	40%	Red	Ļ	Quarter 3 shows a down turn in completions. This is due to the festive period. People's priorities change from health to 'other' priorities and this shows in the data collected. December has been a particularly slow month of referrals and this has been a pattern for the time of the scheme. Even if people are referred in December they prefer to start after Christmas. At present 61 of the 196 people who participate in the exercise referral scheme have completed the scheme however the figures reported here reflect live data therefore these figures may change slightly.

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
CPM/111 (CS/M037): Percentage of eligible Flying Start children that take up childcare offer.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
CPM/096 (CS/M038): Percentage of attendance at Flying Start childcare.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
CPM/170 (SI/M050): Percentage of users showing satisfaction with a Families First service accessed.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
CPM/192 (VS/M049): Number of participations of children and young people in the 5x60 scheme.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
CPM/195 (HS/M046): Percentage of individuals who complete substance misuse treatment.	N/A	62.79%	72%	Red	N/A	The National target for this indicator is 72%. Vale performance of 62.7% in Q3 indicates a dip of 10% below the national target (as 27 out of a possible 43 closures were planned). Where individuals disengage from treatment, the re-engagement service (managed via the aftercare contract) is making every effort to motivate these clients to come back into services prior to the point they are classified as an 'unplanned exit'.
CPM/196 (SL/M025): Percentage of Council catered schools that offer healthy food options.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
How much have we done (contextual da	ata)					

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
CPM/028: Number of sports clubs which offer either inclusive or specific disability opportunities.	50	75	50	Green	Î	The Disability Sport Wales Development Officer for the Vale has been continuing to liaise with the 75 local clubs / organisations who offer opportunities to disabled people and has continued to promote their provision to disabled people. The Disability Sport Development Officer is continuing to liaise with Barry Town Under 8s, Barry RFC Mini and Juniors, Sully RFC and Cogan Coronation to establish if they have had any disabled members following their attendance on a recent awareness course. If so, they will be added to this number in the future.
CPM/197: Number of Green Flag Parks.	7	7	7	Green	↔	Performance has mirrored that of last year with 7 Green Flag awards being awarded recognising the well-managed parks and green spaces across the Vale. We are aiming to increase this to 8 Green Flags for 2018/19. With Cosmeston and Porthkerry Parks also being entered by the Countryside section we should aim to increase our authorities total number of Green Flag Awarded sites to 10 for 2018/19.

Objective 8: Safeguarding those who are vulnerable and promoting independent living.

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
Population Indicators						
CPM/203 (WO4/M004): Percentage of adults at risk of abuse or neglect reported more than once during the year.	N/A	N/A	N/A	N/A	N/A	New annual measure as part of the Social Services National Outcomes framework. WG data not available.
CPM/060 (SSM/027) (CS/M006): The percentage of re-registrations of children on local authority Child Protection Registers (CPR)	3.81%	No data available	N/A	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
CPM/098 (AS/M019): Percentage of adult service users receiving a direct payment.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
What difference have we made?		-				
CPM/050 (EDU/002ii) : Percentage of pupils in local authority care in any LA maintained school, in year 11 who leave compulsory education, training or work based learning without an approved external qualification.	0%	0%	0%	Green	$\leftrightarrow$	Performance mirrors that reported in the previous year, achieving the target of 0%. No pupils in local authority care in Year 11 left compulsory education, training or work based learning without an approved qualification.
CPM/057 (SSM/019) (PAM/025) (SCA/001): The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	N/A	No data available	2.25	N/A	N/A	As the definition for this PI was amended by Welsh Government in November last year to only include the rates for people +75 (previously the measure included all +18 years old) this data is not comparable with the figure reported at quarter 3 2016/17.
CPM/058 (SSM/020a) (AS/M003): The percentage of adults who completed a period of reablement) and have a reduced package of care and support 6 months later.	10%	No data available	N/A	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
CPM/059 (SSM/020b) (AS/M004): The percentage of adults who completed a period of reablement b) and have no package of care and support 6 months later.	68.75%	No data available	N/A	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
CPM/107 (HS/M033): Percentage of Supporting People service users who confirm that the support that they have received has assisted them to maintain their independence.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
CPM/026 (RP/M011): Percentage of people who have received a Disabled Facilities Grant who feel the assistance has made them safer and more independent in their own home.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
How well have we performed? CPM/056 (SSM/018) (AS/M001): The percentage of adult protection enquiries completed within statutory timescales.	97.8%	No data available	98%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
CPM/112 (HS/M030): Percentage of Supporting People clients satisfied with support provided.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
CPM/206 (PD/M026): Percentage of telecare customers satisfied with the telecare monitoring service.	N/A	N/A	N/A	N/A	N/A	These surveys are conducted annually. Performance for 2017/18 was reported at quarter 2 showing 96.9% of respondents were satisfied.
CPM/207 (AS/M017): Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	83.98%	No data available	85%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
CPM/208 (CS/M039): Percentage of care and support plans for children that were reviewed within agreed timescales (WG interim data set). How much have we done (contextual data)	N/A	No data available	95%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
CPM/209 (SS/M018): Number of new Telecare users.	248	No data available	247.50	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.

#### Appendix 3 – Additional Performance Indicators (Well-being Outcome 4)

Objective 7: Encouraging and promoting active and healthy lifestyles

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
How well have we performed						
PAM/017 (LCS/002b): Number of visits to local authority sport and leisure facilities during the year where the visitor will be participating in physical activity per 1,000 population.	4166.499	8565.626	4575	Green	Î	A significant audit has been undertaken to include previously uncollected data in this indicator. Data from the hire of school facilities, physical activity usage at Council owned Community Centres, formal use of Country Parks such as golf and water sports, bowls usage etc. is now included in this PI as well as Leisure Centre and outdoor recreation usage. This has resulted in a significantly increase in the figure.

Objective 8: Safeguarding those who are vulnerable and promoting independent living.

Performance Indicator	Q3 Actual 2016/2017	Q3 Actual 2017/2018	Q3 Target 2017/2018	RAG Status	Direction of Travel	Commentary
What difference have we made?	•					
SSM/025 (CS/M004): The percentage of children supported to remain living within their family.	98.21%	No data available	No target	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/034a (CS/M029: The percentage of all care leavers who are in education, training or employment at 12 months after leaving care.	44.23%	No data available	45%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/034b (CS/M030): The percentage of all care leavers who are in Education, training or employment at 24 months after leaving care	50%	No data available	50%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
How well have we performed?				-	1	
SSM/023 (AS/M005): The percentage of Adults who have received support from the information, advice and assistance service and have not contacted the service again during the year.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
SSM/024 (PAM/028) (CS/M004): The percentage of assessments completed for children within statutory timescales.	76.50%	No data available	85%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/033 (PAM/029) (SCC/004): The percentage of looked after children on 31 March who have had three or more placements during the year.	5.31%	No data available	9%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/026 (CS/M005): The percentage of looked after children returned home from care during the year.	5.28%	No data available	6%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/030 (CS/M007): The percentage of children seen by a registered dentist within 3 months of becoming looked after	65.12%	No data available	60%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/021 (AS/M015): The average length of time older people (aged 65 or over) are supported in residential care homes	841.31 days	No data available	No target	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.

Performance Indicator	Q3 Actual	Q3 Actual	Q3 Target	RAG	Direction	Commentary
	2016/2017	2017/2018	2017/2018	Status	of Travel	
SSM/022 (AS/M016): Average age of adults entering residential care homes.	81.08 years	No data available	No target	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/031 (SCC/040): The percentage of looked after children registered with a GP.	100%	No data available	98%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/035 (CS/M031): The percentage of care leavers who have experienced homelessness during the year.	11.21%	No data available	14%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/028 (CS/M025): The average length of time for all children who were on the Child Protection Register during the year.	244.36 days	No data available	No target	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
SSM/029a (CS/M026): Percentage of children achieving the core subject indicator at key stage 2.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
SSM/029b (CS/M027): Percentage of children achieving the core subject indicator at key stage 4.	N/A	N/A	N/A	N/A	N/A	Annual measure to be reported at quarter 4.
SSM/032 (SCC/002): The percentage of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March.	4.73%	No data available	12%	N/A	N/A	It is not possible to extract the data for this PI from the newly launched WCCIS system at this time.
PAM/026: Percentage of carers reporting they feel supported to continue in their caring role.	N/A	N/A	N/A	N/A	N/A	New annual measure to be reported at quarter 4.
PAM/024: Percentage of adults who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	New annual measure to be reported at quarter 4.
PAM/027: Percentage of children who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	New annual measure to be reported at quarter 4.