

## **The Vale of Glamorgan Council**

### **Healthy Living and Social Care Scrutiny Committee: 4<sup>th</sup> December 2018**

#### **Report of the Director of Social Services**

#### **Quarter 2 (2018-19) Performance Report: An Active and Healthy Vale**

##### **Purpose of the Report**

1. To present the performance results for quarter 2, 1st April-30<sup>th</sup> September 2018 for the Corporate Plan Well-being Outcome 4, 'An Active and Healthy Vale.'

##### **Recommendations**

1. That members consider performance results and progress towards achieving key outcomes in line with the Corporate Plan Well-being Outcome 4 – 'Residents of the Vale of Glamorgan lead healthy lives and vulnerable people are protected and supported.'
2. That members consider the performance results and remedial actions to be taken to address areas of underperformance and to tackle the key challenges identified.

##### **Reasons for the Recommendations**

1. To ensure the Council clearly demonstrates the progress being made towards achieving its Corporate Plan Well-being Outcomes aimed at making a positive difference to the lives of Vale of Glamorgan citizens.
2. To ensure the Council is effectively assessing its performance in line with the requirement to secure continuous improvement outlined in the Local Government Measure (Wales) 2009 and reflecting the requirement of the Well-being of Future Generations (Wales) Act 2015 that it maximises its contribution to achieving the well-being goals for Wales.

##### **Background**

2. The Council's Performance Management Framework is the mechanism through which our key priorities and targets are monitored and realised in order to secure continuous improvement.
3. As part of the review of its Performance Management Framework, the Council has adopted a Corporate Plan (2016-20) which reflects the requirements of the Well-

being of Future Generations (Wales) Act 2015 and identifies 4 Well-being Outcomes and 8 Well-being Objectives for the Council.

4. Since May 2016, each Scrutiny Committee has received performance information linked with the Council's Well-being Outcome with which that Committee is aligned. In addition, Corporate Health priorities are considered by the Corporate Performance and Resources Scrutiny Committee. Work has also continued with Officers and the Member Working Group to further develop and enhance our Performance Management Framework arrangements and performance reporting in line with our duties as outlined in the WBFG (Wales) Act and the LGM with reference to the wider local government agenda.
5. In June 2018, consideration was given by the Member Working Group to proposed changes to the annual improvement planning and monitoring timetable and Members were supportive of the proposed simplified approach which will reduce the number of performance related reports that Scrutiny Committees considered as well as the level of duplication due to timing of reports. Group members were also supportive of the proposed report structures aimed at providing a more accessible view of performance. Cabinet subsequently endorsed the changes to the Council's annual improvement planning and monitoring timetable on 30th July 2018 (minute C378 refers).
6. The quarterly performance report focuses on our progress in delivering our key priorities as aligned to year 3 of the Corporate Plan 2016-20. It is intended to present the reader with a more accessible view of performance for the Well-being Outcome and draws together information from a wide range of sources. An additional overall Corporate Plan Summary Report provides an overview of the contribution to the national Well-being Goals and overall progress against the Corporate Plan's Well-being Objectives and Corporate Health. This overview has been designed for use by all elected members, Council staff and customers and will be appended to the Cabinet and Corporate Performance and Resources Scrutiny quarterly performance report. The Corporate Plan Summary Report is referenced in the Background Papers to this report.
7. The performance report is structured as follows:

**Section 1:** States the overall RAG status attributed to the Well-being Outcome.

- Position Statement: Provides an overall summary of performance in relation to the Well-being Outcome and highlights the main developments, achievements and challenges for the quarter.
- Performance Snapshot: Provides an overview for each Well-being Objective, describing the status of Corporate Plan actions and performance indicators. A RAG status is attributed to actions and measures under each Well-being Objective to reflect overall progress to date and contributes to the overall RAG status for the Well-being Outcome.
- Performance Exceptions: For ease of scrutiny, any actions or PIs attributed a Red status are presented here including direction of travel and commentary on the performance.
- Achievements: Highlights the key achievements to date in delivering the intended outcomes for the Well-being Outcome.
- Challenges: Highlights the key challenges that are or could impact on achieving the intended outcomes for the Well-being Outcome.

## Section 2: Corporate Health - Managing our Resources

- Provides a summary of the key issues relating to the use of resources and the impact on delivering improvement during the quarter. The focus is on key aspects relating to People, Finance, Assets, ICT, Customer Focus and Risk Management (both service level and corporate risks) contributing to the Well-being Outcome.

**Glossary:** Provides an explanation of the performance terms used within the report.

- The performance report uses the traffic light system, that is, a Red, Amber or Green (RAG) status and a Direction of Travel (DOT) to aid performance analysis.
- Progress is reported for all key performance indicators and actions by allocating a RAG performance status.
- The risk matrix defines the level of risk by translating impact/magnitude and Likelihood/Probability into an evaluated level of risk.

### Appendices:

- **Appendix 1:** Provides, by Well-being Objective, detailed information relating to the Service Plan actions which have contributed to Corporate Plan actions.
- **Appendix 2:** Provides detailed performance indicator information linked to each Well-being Objective which show for our planned activities, how much we have done, how well we have performed and what difference this has made. It must be noted that any annual reported performance indicators that have been introduced in 2018 as part of the Council's revised Performance Management Framework will not have data available until end of year as this year will be used to establish baseline performance. A Not Available (N/A) status will be attributed to all such measures with commentary provided confirming this status. We will continue to develop our key measures within each Well-being Objective to ensure these most accurately reflect our Corporate Plan Well-being Outcomes.
- **Appendix 3:** Provides additional performance indicators which contribute to the Well-being Outcome but do not form part of the Corporate Plan basket of key performance indicators. These are made up of statutory and other national performance indicators.

### Relevant Issues and Options

8. An overall **GREEN** RAG status has been attributed to Well-being Outcome 4, 'An Active and Healthy Vale', to reflect the good progress made towards achieving improved outcomes for residents and our customers during the quarter.
9. At quarter 2, 96% of the 49 Corporate Plan actions where a RAG status could be attributed to this Well-being Outcome were on track to be delivered giving an overall Green performance status for actions.
10. Of the 31 performance measures aligned to this Well-being outcome, only two measures could be allocated a RAG status. These measures where a RAG status was applicable has exceeded target resulting in a green status being attributed.
11. There are 29 measures where no RAG status was applicable during the quarter. 18 were annual measures so are not available for reporting until end of year. The remaining measures have not been reported due to the issues that continue to be experienced Welsh Community Care Information System. 2018/19 was the first complete year where the Department has used the Welsh Community Care Information System (WCCIS). WCCIS was introduced late in November 2017

replacing the former e-Swift system for the management of all Social Services records. During Quarters 1 and 2, priority was given to cleansing data after the migration from e-Swift and the development of performance management report writing skills. We are now in a position to report on the majority of performance measures having developed the scripts necessary to facilitate this, and others are in development in readiness for reporting from Quarter 3 and Quarter 4. However, due to the ongoing cleansing of data and the absence of quality checks while skills to manage the system are still developing, the accuracy of the data we are able to report on in some cases cannot be validated. Ensuring the accuracy of the performance measures through WCCIS will be a priority for the Directorate however this is expected to take time to achieve.

12. In relation to objective 7: 'encouraging and promoting active and healthy lifestyles', 100% (12) of actions are on track for delivery giving an overall green performance status. 94% (34) of actions aligned to the objective 8: 'safeguarding those who are vulnerable and promoting independent living' were attributed a green performance status reflecting the excellent progress made during quarter 2.
13. In relation to the five quarterly measures aligned to objective 7: 'encouraging and promoting active and healthy lifestyles', data was available for one measure, this measure was attributed a green performance status. The measure related to the number of sports clubs that offer either inclusive or specific disability opportunities (CPM/028). Our performance of 54 clubs for this measure has exceeded the target of 52 clubs and performance during the same period last year at 50 clubs.
14. With regards to the eight quarterly measures aligned to objective 8: 'safeguarding those who are vulnerable and promoting independent living', data was available for one measure and was attributed a green status. This was in relation to the rate of delayed transfers of care due to social care reasons. Our performance during quarter 2 was 2.33 per 1,000 population, showing an improvement on the target of 2.5 per 1,000 population.
15. A detailed report outlining the progress this quarter towards achieving Well-being Outcome 4 is provided at [Appendix A](#).
16. An overview of overall progress against the Corporate Plan Well-being Objectives and how this contributes to the national Well-being Goals is provided in the [Corporate Plan Summary Report](#) .

### **Resource Implications (Financial and Employment)**

17. There are no additional budgetary implications arising from this report, although underperformance in some areas may have a negative impact on external assessments of the Council and could put certain funding opportunities at risk. The report includes information relating to the use of financial, asset, ICT and people resources and how these are being deployed to support the delivery of the Council's well-being outcomes.

### **Sustainability and Climate Change Implications**

18. The Corporate Plan emphasises the Council's commitment to promoting sustainable development and our understanding of our duties under the Well-being of Future Generations (Wales) Act. The many different aspects of sustainability (environment, economy, culture and social) are reflected within planned activities as outlined in the Corporate Plan and demonstrate how the Council will maximise its contribution to the Well-being Goals.

## **Legal Implications (to Include Human Rights Implications)**

19. The Local Government (Wales) Measure 2009 requires that the Council secure continuous improvement across the full range of local services for which it is responsible.
20. The Well-being of Future Generations (Wales) Act 2015 requires the Council to set and publish Well-being Objectives by April 2017 that maximise its contribution to achieving the Well-being goals for Wales.

## **Crime and Disorder Implications**

21. Activities to improve community safety are included in the Corporate Plan and one of the Well-being Outcomes is 'An Inclusive and Safe Vale' with a supporting objective 'providing decent homes and safe communities'. The Council's Performance Management Framework supports the delivery of actions associated with these objectives.

## **Equal Opportunities Implications (to include Welsh Language issues)**

22. 'An Inclusive and Safe Vale' is one of the Well-being Outcomes in the Corporate Plan with a supporting objective 'reducing poverty and social exclusion'. There is also a Well-being Outcome 'An Aspirational and culturally vibrant Vale' with a supporting action 'valuing culture and diversity'. The Council's Performance Management Framework supports the delivery of actions associated with these objectives.

## **Corporate/Service Objectives**

23. The Corporate Plan 2016-20 reflects the requirements of the Well-being of Future Generations Act and identifies 4 Well-being Outcomes and 8 Objectives for the Council. These promote improvements in the economic, social and cultural well-being of residents in the Vale of Glamorgan which in turn will contribute to achieving the Well-being goals for Wales.
24. The Council's Performance Management Framework supports the delivery of all of the Council's Corporate Plan Well-being Outcomes and Objectives.

## **Policy Framework and Budget**

25. This is a matter for Executive decision by Cabinet.

## **Consultation (including Ward Member Consultation)**

26. The performance information contained within the report is based on quarterly returns provided by service directorates to the Performance Team. Quarterly performance reports covering the Corporate Plan Well-being Outcomes and Objectives along with an overall Corporate Health Report will be considered by relevant Scrutiny Committees and the Cabinet.

## **Relevant Scrutiny Committee**

Healthy Living and Social Care Scrutiny Committee

## **Background Papers**

[Corporate Plan Summary Report \(Q2 2018/19\)](#)

**Contact Officer**

Julia Archampong, Corporate Performance Manager

**Officers Consulted**

Corporate Management Team

Huw Isaac, Head of Performance and Development

Tom Bowring, Operational Manager Performance and Policy

**Responsible Officer:**

Lance Carver, Director of Social Services and Sponsoring Director for Well-being Outcome 4, 'An Active and Healthy Vale'


**Our overall RAG status for 'An Active and Healthy Vale' is GREEN**
**1.0 POSITION STATEMENT**






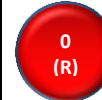





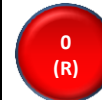
Overall, we have made good progress in delivering our Corporate Plan priorities during this quarter in relation to the Well-being Outcome 4 Objectives of, 'Encouraging and promoting active and healthy lifestyles' and 'Safeguarding those who are vulnerable and promoting independent living'. This has resulted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

96% of planned actions aligned to 'An Active and Healthy Vale' have been attributed a Green performance status reflecting that strong progress that has been made during the quarter. 4% of planned actions aligned to this Well-being Outcome have been attributed a Red status.


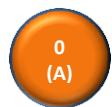

Of the 31 performance measures aligned to this well-being outcome, only two measures could be allocated a RAG status, these measures are in relation to the 'number of sports clubs which offer either inclusive or specific disability opportunities' and 'the rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over.' Both were attributed a green status. The number of sports clubs which offer either inclusive or specific disability opportunities has increased from 50 clubs during quarter 2 2017/18 to 54 clubs in quarter 2018/19, exceeding the target of 52 clubs. The rate of delayed transfers of care during quarter 2 2018/19 is within target of 2.5 with a performance of 2.33 at quarter 2 2018/19.


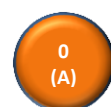

There are 29 measures where no RAG status was applicable during the quarter. 18 were annual measures so are not available for reporting until end of year. The remaining 11 measures have not been reported due to the issues that continue to be experienced with extracting data from the Welsh Community Care Information System. The change to the new IT system is likely to result in data inaccuracies for some time to come.

**1.1 PERFORMANCE SNAPSHOT**

<b>ACTIONS</b>					<b>PERFORMANCE MEASURES</b>				
Our performance against the Corporate Plan actions is on track for delivery, giving us an overall <b>GREEN</b> RAG status for this outcome					Our performance against performance measures is on track, giving us an overall <b>GREEN</b> RAG Status against this outcome				
<b>Service Plan Actions</b> Objective 7: Encouraging and promoting active and healthy lifestyles					<b>Performance Measures</b> Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total				N/A	Total
			0	12				15	16
<b>Objective 8: Safeguarding those who are vulnerable and promoting independent living</b>					<b>Objective 8: Safeguarding those who are vulnerable and promoting independent living</b>				
			N/A	Total				N/A	Total
			1	37				14 <sup>1</sup>	15











<sup>1</sup> 2018/19 will be the first complete year where the Department has used the Welsh Community Care Information System (WCCIS). WCCIS was introduced in late November 2017 replacing the former e-Swift system for the management of all Social Services records. During quarter 1 & 2 priority was given to cleansing data after the migration from e-Swift and the development of performance management report writing skills. We are now in a position to report on the majority of performance measures, having developed the scripts necessary to facilitate this, and others are in development in readiness for reporting from Quarter 3 and Quarter 4. However, due to the ongoing cleansing of data and the absence of quality checks while skills to manage the new system were developing, the accuracy of the data we are able to report on, in some cases, cannot be validated. Ensuring the accuracy of the performance measures through WCCIS will be a priority for the directorate however this is expected to take time to achieve. As a result of this data is not available for 7 PIs this quarter.

Total for the Outcome				
			N/A	Total
			2	49

Total for the Outcome				
			N/A	Total
			29	31

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















Of the 16 indicators identified for Objective 7, 11 are annual and 5 are quarterly. Data was available for just one measure this quarter, CPM/028: Number of Sports Clubs offering inclusive or specific disability opportunities was attributed a green status. Data was not reported for 4 quarterly indicators (CPM/249, CPM/248, CPM/236 and CPM/187).

Corporate Health Actions	Action		Direction of Travel compared to previous quarter status
	Service Plan Actions	Action 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)	7		
<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		
<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		
<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)	0	 <b>All actions completed at quarter 1</b>	N/A
<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)	3		
<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	 <b>All actions completed at quarter 1</b>	N/A



## 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 available for just one measure, CPM/057 (SSM/019, PAM/025) the rate of delayed transfers of care for social care reasons was attributed a green status.

Corporate Plan Actions	Action		Direction of Travel compared to previous quarter
	Service Plan Actions	Action Status	
<b>AH7:</b> 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: <ul style="list-style-type: none"> <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> <li>• performance measures(2016/17)</li> </ul>	12		
<b>AH8:</b> Improve access to health and social care services by improving the speed, simplicity and choice of how to access services. (2018/19)	6		
<b>AH9:</b> Work with partners to progress the integration of adult social care and community health services. (2018/19)	6		
<b>AH10:</b> Explore options for single integrated ICT systems and integrated budgets across the Cardiff and Vale region for social care. (2018/19)	1		
<b>AH11:</b> Develop and implement a corporate policy on safeguarding to provide a clear strategic direction and lines of accountability across the Council. (2016/17).	6		
<b>AH12:</b> Minimise delays in transfers of care and discharge from hospital through improved co-ordination of services and the delivery of the Accommodations Solutions Service. (2017/18)	0	N/A	N/A
<b>AH13:</b> Review accommodation with care options for older people and develop our commissioning strategy for future years. (2016/17)	1		
<b>AH14:</b> Work with partners through the Cardiff and Vale Local Safeguarding Children's Board to develop a Child Sexual Exploitation Strategy. (2016/17)	1		
<b>AH15:</b> Improve procedures with providers of nursing, residential and domiciliary care providers to enable early intervention and prevent the escalation of incidents. (2017/18)	0	N/A	N/A
<b>AH16:</b> Undertake an annual programme of targeted inspections at premises undertaking commercial activities that affect vulnerable people (for example care homes and food establishments in schools). (2019/20)	4		



## 1.4 Performance Exceptions

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



There were no actions or performance measures attributed with a Red status during the quarter 2 period.

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

#### Corporate Plan Action AH009: Work with partners to progress the integration of adult social care and community health services.

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
<b>AS/A025:</b> Improve communications with the Mental Health Service in order to support effective transition for young people to move into Adult Mental Health Services.	25			<i>The completion date for this action is 31/03/2019.</i> One referral through TRIG has been received this quarter. Integrated Managers have not been able to provide figures on other data. Have requested this be prioritised for Q3. Work continues on developing a joint regional Transition protocol.

#### Corporate Plan Action AH016: Undertake an annual programme of targeted inspections at premises undertaking commercial activities that affect vulnerable people (for example, care homes and food establishments in schools).

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
<b>SRS/A012:</b> 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.	25			<i>The completion date for this action is 31/03/2019.</i> Progress halted pending outcome of SRS consultation on Trading Standards budget savings.

There were no performance measures attributed with a Red status during the quarter 2 period.

## 1.5 OUR ACHIEVEMENTS

We have continued to work with our partners in Public Health to deliver the Public Health Wales agenda. During the quarter some key highlights have included:

- Working with all schools as a priority to ensure compliance with the Healthy Eating in Schools (Wales) Regulations. All primary schools are compliant with the nutritional regulations and all secondary schools are compliant with food based standards from the regulations.
- Promoting the availability of healthy options awards to food businesses in Cardiff and the Vale to encourage healthier lifestyles
- Continuing to progress the implementation of the 3 year Dementia Strategy where our Dementia Champion is represented on a range of strategy meetings across the region that also feeds into the work of the Regional Project

<p>Board (RPB); and</p> <ul style="list-style-type: none"> <li>• Making Active Travel improvements including walkways and cycle ways have been made across the Vale and these are being promoted to encourage more active travel lifestyles by maximising the use of S106 monies;</li> <li>• Undertaken test purchasing of tobacco as part of the Cardiff and Vale's Tobacco Control Action Plan. The recently test purchasing failures have now been submitted for consideration of legal proceedings.</li> </ul>
<p>Safeguarding continues to be a core priority across all Council services. Some key developments during quarter 2 have included:</p> <ul style="list-style-type: none"> <li>• Recommendations arising from the 2017/18 safeguarding internal audit works have been built into the Corporate Safeguarding Action Plan.</li> <li>• Work is being undertaken to ensure everyone across the Council, where appropriate, undertakes the safeguarding e training module to help ensure effective compliance with safeguarding policy and responsibilities.</li> </ul>
<ul style="list-style-type: none"> <li>• Continuing to regularly monitor and report on Safer Recruitment Policy compliance. Compared with the previous quarter our compliance has significantly improved and during quarter 2, compliance was 80% in July, 100% in August and 98% in September.</li> <li>• Continuing to review the current processes association with the All Wales Child and Adult Protection Procedures. The first two chapters are in a draft state and are open to consultation.</li> </ul>
<ul style="list-style-type: none"> <li>• We have continued to embed and enhance the work of the Integrated Autism Service. During quarter 2, the Integrated Autism Service visited a range of key stakeholders including the Substance Misuse Team, Housing Into Work, Supported Living and Homelessness Teams to raise awareness of the service. The staff have also delivered two parent carer workshops to 48 parents and have worked jointly with Barnardos to deliver the Sygnet Parenting programme. Adult clients are accessing support to enhance their independence such as the 'social eyes' social skills training (a 'skills for life' course) and a 'get cooking' programme with the support of the dietetics team.</li> </ul>
<ul style="list-style-type: none"> <li>• The Accommodation with Care Strategy has been completed and presented to Scrutiny during the quarter. The Housing, Health and Social Care Board has now been established to progress the recommendations within the Strategy to further promote independent living.</li> </ul>
<p>During the quarter we have successfully secured funding for a number of project and services:</p> <ul style="list-style-type: none"> <li>• We have secured £1.3million Transformation Bid funding over a two year period to further integrate services in relation to GP triaging to the Customer Contact Centre. This will allow us to meet recommendations outlined in the Parliamentary Review and develop a more seamless approach to care for our citizens.</li> <li>• We have secured an additional £600K of ICF funding for the Cardiff and Vale region that is ring fenced for Dementia to support a 'Team around an Individual'. This new model will be launched during quarter 3.</li> <li>• We have successfully secured Integrated Care Fund (ICF) Capital funding for our Residential Care Homes that will enable further developments to be undertaken to improve access to our services and the ability to explore improved models of care and inclusion of the community.</li> </ul>
<ul style="list-style-type: none"> <li>• The Food Law Enforcement Service Plan has been completed and has now been approved by Shared Regulatory Services Joint Committee. As part of the Food Standards Agency's Framework agreement the Councils are required to produce a Food Safety Service Plan setting out the arrangements in place to discharge these duties. This Service Plan is produced in response to that requirement and is designed to inform residents, the business community of Bridgend, Cardiff and the Vale of the arrangements the Councils have in place to regulate food safety.</li> </ul>
<p>Positive progress continues to be made with the delivery of the leisure, sports and physical activity in the Vale of Glamorgan:</p> <ul style="list-style-type: none"> <li>• The Vale's Sport Plan (LAPA) 6 month progress report has been submitted to Sports Wales who fund the Vale Sport and Physical Activity Plan that shows that our project work is progressing well.</li> <li>• The Vale's Leisure Strategy has been endorsed by Cabinet.</li> <li>• During quarter 2 the number of sports clubs in the Vale that offer either inclusive or specific disability opportunities has increased from 50 clubs during quarter 2 2017/18, to 54 clubs, exceeding the target of 52.</li> <li>• The Sport Wales Adult Participation Survey recently reported that the Vale of Glamorgan is ranked first with the highest levels of physical activity and is ranked as having the lowest obesity levels. This demonstrates the continued impact of leisure services provided by the council and its partners.</li> </ul>
<p>We continue to successfully work with our partners to deliver a comprehensive play programme for children and their families. During quarter 2 the following was delivered:</p> <ul style="list-style-type: none"> <li>• Delivered the Families First Holiday Club during the school holidays where 32 sessions were attended by 62 Disabled Children accruing 815 participations.</li> <li>• A number of play scheme and Play Rangers session took place during the school holiday that were attended by 224 children.</li> <li>• A series of summer events that resulted in over 1,000 participations such as Barry Island Weekender, Dinas Powys</li> </ul>

<p>Family Fun Day, Rotary Club Barry Family Fund Day, National Play Day and the Rotary Club Schools event.</p> <ul style="list-style-type: none"> <li>• The University Health Board and Adult Services continue to work together to provide a single point of access for community health and social care services at the Contact Centre. Quarter 2 has seen further consolidation of work in relation to how we meet the objectives emerging from the Parliamentary Review of Health and Social Care in Wales through launching an engagement event in September with all staff. The purpose of this engagement event was to involve staff in helping to shape and develop how we develop health and social care services in the future in line with the Parliamentary Review recommendations. We anticipate that recommendations on the way forward will be developed by January 2019, that will include a review of options to enhance our digital services.</li> <li>• Good progress has been made with the delivery of our Area Plan for Care and Report. The quarter 2 progress update to the Regional Partnership Board showed that we are on target for all year one actions by end of year.</li> <li>• The expansion of the Adult Placement service continues to progress well by working closely with the Shared Live Co-ordinator to further develop and embed service improvements. During quarter 2, 10 new referrals were received by the service and during this period, we also received 4 new host applications and two have now progressed to assessment. During the quarter, two hosts were also approved at panel for the provision of respite.</li> </ul>
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## 1.6 OUR CHALLENGES

<ul style="list-style-type: none"> <li>• Despite more staff members being put in place in the exercise referral scheme, only 40% of clients continue to participate in the exercise programme at 16 weeks missing the target of 46%. This is a decrease when compared to performance during quarter 2 2017/18 where 46.03% of clients continued the exercise.</li> </ul>
<ul style="list-style-type: none"> <li>• As at quarter 1, the forecast for Social Services was one of a balanced budget. However, the financial challenges remain significant as there continues to be pressure on this service. In relation to Children and Young People Services the greatest cost pressure continues to be in relation to the placements budget linked to the cohort of children being supported who have increasingly complex needs. Within Adult Services, the main cost pressure relates to the Community Care Packages budget which is severely impacted by legislative changes in the National Living Wage. The other going challenge, is the inter-dependency on grant funding to enable us to deliver more collaborative service delivery models. The level of funding associated with the Welsh Government's Intermediate Care Fund and other regional grants is not guaranteed on an ongoing basis, which puts in jeopardy the sustainability of some of our more innovative service delivery models.</li> </ul>
<ul style="list-style-type: none"> <li>• 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. This applies to both Children and Young People Services and Adult Services and is a pressure that will not disappear over time.</li> </ul>
<ul style="list-style-type: none"> <li>• The Deprivation of Liberty Safeguards (DoLS) Team has experienced inordinate demand for DoLS assessments which in turn is placing further pressure on our already stretched budgets. The timescales for adhering to these Deprivation of Liberty Safeguards (DOLS) assessments is putting pressure on officer workloads. Although, some additional resource has been allocated by the three partners, the rate of referrals continues to exceed capacity and as a result has created a backlog of outstanding requests. There has also been additional financial pressures following the ruling of AJ v A Local Authority case in 2015 which resulted in a guidance change whereby an independent Relevant Persons Representative needs to be appointed where there's any potential for a conflict of interest where a family member/friend is involved. As a result, this has added to the financial burden of the service. It's important to note that these challenges are not unique to the Vale, but is an issue that is being experienced nationally by most local authorities. To address the resource/capacity issue, a business mapping exercise is underway to review current business function and identify further ways in which the service can be streamlined to make more efficient use of the team's time and resources in order to address the backlog.</li> </ul>
<ul style="list-style-type: none"> <li>• WCCIS has been operational since November last year, but its roll out has not been without its challenges. Its implementation has progressed well and some previously identified issues have now been resolved. The commissioning of consultancy support to develop the finance functionality of the system has now been secured. However, business continuity and resilience issues continue to be a challenge. In relation to staffing resilience, this is still problematic and is likely to be an issue during the next quarter. There is vulnerability in relation to system administration that is likely to impact on the development of WCCIS locally and limit our ability to resolve issues and develop forms within the system. Another ongoing problem continues to be the extraction of information/data for performance monitoring purposes. We continue to experience difficulties with the reporting of performance data but this is an issue that has also been experienced by other local authorities who are at a similar stage of the implementation process. To address this we are working closely with other local authorities to find suitable resolution to extract data more efficiently. It is likely that once the data is properly reportable that</li> </ul>

further work will be required to ensure its validity and that entries on to the system are being done correctly. A relatively newer challenge in relation to WCCIS implementation has been limitations of the print function within the system, which has meant that some forms cannot be printed. We are working closely with the IT department and WCCIS to rectify the issue.

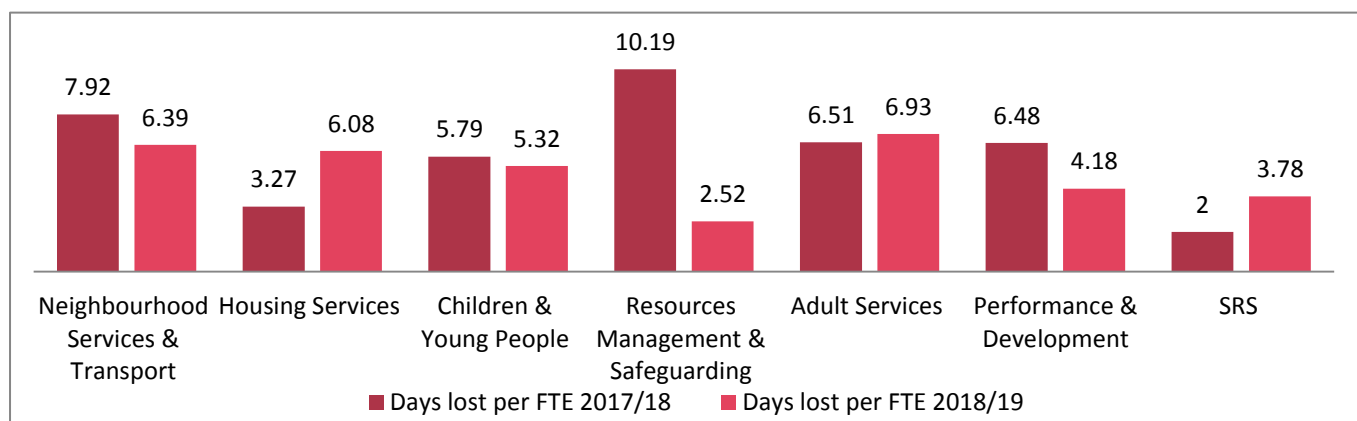
- We continue to perform solidly in relation to visit to local authority sports and leisure facilities with 4,598.90 per 1,000 population our performance has slightly dipped when compared to target of 4,750 per 1,000 population and the previous year's performance during the same period of 4,732.40 per 1,000 population. The collection of this data across its multiple sources continues to be problematic particularly in relation to sourcing data from our schools. We are working closely with schools to ensure we can receive the data in a timely way.

## 2.0 CORPORATE HEALTH: MANAGING OUR RESOURCES

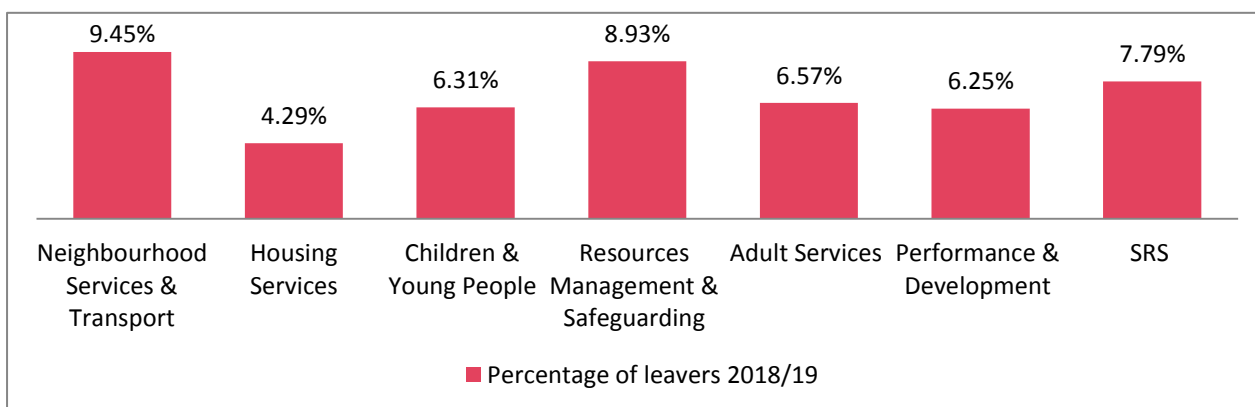


### 2.1 PEOPLE

Attendance management remains a corporate priority and we continue to closely monitor progress to help improve performance corporately. Between Quarter 2 2017/18 and Quarter 2 2018/19 the number of days lost per full time equivalent (FTE) due to sickness decreased by 0.74 days. Sickness absence decreased from 4.45 working days lost in Quarter 2 in 2017/18 to 3.71 days in Quarter 2 2018/19. The graph below shows sickness absence data for services contributing to this Well-being Outcome at quarter 2 for the past 2 years.



The total percentage turnover for services contributing to this Well-being Outcome during quarter 2 2018/19 can be seen in the chart below.



## 2.1 PEOPLE

The [sickness absence report](#) and [employee turnover report](#) provide a review of attendance management and staff turnover across all council services during 2017/18.

Positive progress continues to be made in relation to a number of ongoing workforce-related issues identified by services contributing to this Well-being Outcome. Overall, services across the Council continue to make positive progress in implementing succession planning arrangements including those contributing to this Outcome. Key highlights for Q2 include:

- Work continues to support the new Resources Managements, Safeguarding and Performance service with a number of vacant posts having now been filled. A recruitment drive has also commenced to help increase capacity within the service. To help further support recruitment a Recruitment and Retention Plan is in place and sessions with operation staff have been arranged for November to undertake a wider campaign.
- Adult Services has low numbers of agency staff within our care management teams with agency staff being utilised only for backfill or for grant funded projects. However, we remain dependent on agency staffing within our care homes to ensure that there are safe levels of staffing to care for residents.
- An exercise to support social work staff in adult services to have the opportunity to explore new roles commenced in August with staff having 6 month trials in alternative positions. This will help increase staff flexibility and skill sets.
- Work to develop staffs skill sets across services contributing to this Well-being Outcome continues to progress with staffs #itsaboutme personal development plans being completed by the deadline of 31<sup>st</sup> July. These plans help to identify training and skill needs and realise the potential of employees to help improve the quality of services by developing an engaged, multi-skilled flexible workforce.

All service areas continue to contribute to the Council's workforce plan and staff charter initiatives in relation to workforce development, succession planning, recruitment and retention.

## 2.2 FINANCIAL

The latest update for the Reshaping Service Programme was reported in September 2018, and the main work stream associated with this Well-being outcome relates to the Social Services budget programme where the focus is on managing the budgetary savings and pressures facing the Directorate. The latest update has attributed the Social Service budget programme an amber status overall. The 15 Reshaping Projects that make up the budget programme include Learning Disability Respite Care (Green status), Review Team-Review and sizing of care packages (Green status), Learning Disability Day Services (Amber status), Direct Payments (Amber status), Charging and income generation (Amber status), Reshaping Services Tranche 3-procurement (Amber status for all social Services divisions and Youth Offending Service), Reshaping Establishment Review (Amber status), physical learning disability day service (red status), review of older person's day centres (red status), residential care services (red status). No RAG status was applicable for three projects, in relation to maximising reablement and complex cases review no RAG was applicable as the works are not yet due to commence, and RAG was also not due for domiciliary care commissioning.

The latest Revenue Report for the period 1<sup>st</sup> April – 31<sup>st</sup> August 2018 shows that Social Services currently has a balanced budget for 2018/19. Although Social Services is currently out-turning a balanced budget, the financial challenges remain significant in relation to this Directorate and this position may not be maintained. Leisure Services makes up part of the Neighbourhood & Transport Services budget, also currently projects an out-turn on budget. With regard to Regulatory Services, the allocation of £2.239m represents the Vale of Glamorgan's budget for its share of the Shared Regulatory Service (SRS). A separate set of accounts is maintained for the SRS and periodically reported to the Shared Regulatory Service Joint Committee. At this stage in the year it is anticipated that the SRS will outturn on target.

## 2.2 FINANCIAL

In terms of cost pressure areas, the main issue concerning this service for the coming year will be the pressure on the children's placements budget given the complexities of the children currently being supported and the high cost placements some of these children require to meet their needs. Work continues to ensure that children are placed in the most appropriate and cost effective placements, however in the context of this complexity of need and the national challenges in identifying placements, it is currently anticipated that this budget will overspend. It should be noted that due to the potential high cost of each placement, the outturn position could fluctuate with a change in the number of children looked after and/or the complexity of need. The service holds a reserve that could be accessed at year end to fund high cost placements if required.

With regard to Adult Services, the key issue concerning this service for the coming year will continue to be the pressure on the Community Care Packages budget. This budget is extremely volatile and is influenced by legislative changes such as the National Living Wage. At this early stage of the year, the outturn position is difficult to predict. The service also continues to be affected by the pressures of continued demographic growth, an increase in the cost of service provision, the Community Care Packages budget will have to achieve further savings this year. The service will strive to manage growing demand and will develop savings initiatives which may be funded via regional grants. Welsh Government has continued to provide Intermediate Care Fund (ICF) grant to Cardiff and Vale University Health Board to allow collaborative working between Health and Cardiff and the Vale Councils however the level of grant funding is not guaranteed on an ongoing basis.

Although the Welsh Government continue to provide funding via grants such as the Intermediate Care Fund (ICF) and the Transformational Fund to support collaborative working, the level of funding provided is not guaranteed on an ongoing basis.

Positive progress has been made in relation to a number of procurement exercises this quarter. All bids received in quarter to procure support and respite service for children, young people and their families/carers have been evaluated and a new provider has been appointed. The provider commenced on the 1st July 2018. Progress has also been made in regards to the procurement of Extra Care domiciliary provision. A new provider has been appointed and will commence on the 1<sup>st</sup> October 2018. Securing this extra domiciliary provision will help further improve outcomes for the residents in relation to their health and well-being.

## 2.3 ASSETS

During the quarter, positive progress has been made to date in relation to maximising our key asset priorities as follows:

- Good progress has been made with reviewing our Social Service assets (buildings) as well those of Third Party providers to assess building compliance. Following the baseline property assessments conducted in quarter 1 we have now determined baseline requirements and these have been communicated to the Corporate Compliance department to inform the corporate monitoring system. Local monitoring will continue to be carried out on an ongoing during monthly compliance meetings.
- Works to improve Leisure Centre facilities at Penarth and Barry are continuing to progress with the contractor for carrying out the works to improve the quality and condition of changing room works at Barry and Penarth Leisure Centres has been appointed and work has commenced. Tenders have been received for the planned electrical works with work due to commence in the third quarter.

## 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:

- A number of adult service ICT projects have slipped this quarter with limited progress being made. This included developing and implementing a new self-service payment facility online for domiciliary and Telecare payments and work to support the delivery of the Digital Place strand of the Digital Strategy. These projects are dependent on other services within the Council outside of Adult Services to progress. Work is planned to progress in further quarters with a review of Telecare which will include this piece of work through the customer contact centre platforms, domiciliary care payments will be worked through the finance functionality of WCCIS.
- The Shared Regulatory Service continues to review staff technology and work is ongoing to trial the use of tablets as an alternative to laptops where appropriate to help develop agile working in the service. Work with this focus has also progressed within Social Service this quarter with a number of teams within the Resources Management, Safeguarding and Performance Service having been provided with kit to support agile working, Independent Reviewing Officers (IROs) will soon be provided with tablets to help reduce printing costs for case conferences.
- WCCIS has been operational since November last year, and its implementation has progressed well. All training has been delivered to Social Services users and the system is not in use by Social Services staff. Its implementation is monitored via a Directorate wide Operational Group to ensure issues post implementation are identified and addressed appropriately.
- The WCCIS board have met and identified opportunities for additional expertise to address some of the issues within the current system. The finance module has received a positive reaction from operational staff and as a result we will now commence implementation. Some previously identified issues have now been resolved in terms of the commissioning of consultancy support to develop the finance functionality of the system has now been secured. However, business continuity and resilience issues continue to be a challenge. These issues continue to be monitored by the Operational Group and within the Corporate Risk Register.
- The Dewis Cymru information portal continues to be developed to expand and extend its use with resources <https://www.dewis.wales/> or the regional Dewis Twitter account @DewisWales. During quarter 2, a Dewis Project Manager has been recruited to work with the Support Assistant who was recruited in the previous quarter to lead on the promotion of the service across the region. Dewis continues to be developed as a source of information provision, advice and assistance with around 1400 resources across the region.



## 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.

In relation to the Citizen's Panel work stream, work in continuing to progress well and a group of people have been identified through qualitative performance measures to work with us on the pilot 'Strengthening Citizen Engagement' in the Annual Council Reporting Framework (ACRF) challenge process for Cardiff and the Vale to inform best practise in the area. We are also working with Tempo who are supporting us with this project, encouraging participation by giving citizens the opportunity to earn Time Credits.

We have secured £1.3million Transformation Bid funding to further integrate services in relation to GP triaging to help develop the Customer contact Centre as a single point of access. This model will allow us to meet recommendations outlined in the Parliamentary Review and develop a more seamless approach to care for our citizens. We are awaiting the outcome of engagement work currently under way before a way forward is identified.

A number of questionnaires have been developed during the quarter to engage and consult with service users for; young people and adults who have been through the safeguarding process, young people who have been involved in and supported through the Child Sexual Exploitation safeguarding process and adults and young people, parents and carers who are involved with social services are now in the process of being finalised and used for data collection in mid-October. This work will be used to gain the view of service users to inform future service developments and increase satisfaction with services going forward.

## 2.6 CORPORATE RISK

The most recent review of the Corporate Risk Register was used to inform this quarter's reports. As at quarter 2 there were six corporate risks that are aligned to this Well-being Outcome, one (Deprivation of Liberty Safeguards) was attributed a high risk rating, one (WCCIS) was attributed a medium/high risk status, two were allocated a medium status (public buildings compliance and Integrated Health and Social Care) and two were attributed a medium/low status (safeguarding and contract management). These scores remain unchanged since the last update reported as at quarter 1.

In terms of forecast direction of travel, it is anticipated that the majority of risks will remain unchanged with the exception of contract management and public buildings compliance where it is forecast that these risks will continue to reduce over time.

The Deprivation of Liberty Safeguards (DoLS) risk has remained high. This reflects that Social Services continues to experience pressures in relation to their resources as a result of increased demand for Best Interest Assessments that continue to escalate this risk. It is forecast that this risk is unlikely to diminish over time. Business process mapping exercise and a service review is underway, led by the Business Improvement Team who are reviewing business functions of the team to better streamline processes and enable more efficient use of resources.

The WCCIS risk has retained its medium/high status from the previous quarter. Although implementation of the new social care system continues to progress it has not been without its challenges. During the quarter, additional consultancy support has been commissioned to enable the development of the financial modules associated with the system. The Legacy licences have also been extended to enable us to operate dual systems. Despite this issues continue to be experienced in relation to the staff resilience and system functionality. To address these issues it is anticipated that additional capacity will be created with the agreement to establish two further performance posts and the appointment of a Systems Administrator. In response to the functionality issues, Care Works (IT Supplier) continues to work with our IT department to find a resolution to the IT print issues that continue to be experienced to date.

## 2.6 CORPORATE RISK













In relation to Integrated Health and Social Care we have a broad range of controls in place that are effectively mitigating this risk. For example during quarter 2, we secured £1.3million of Transformational Bid funding over a two year period to further integrate services in relation to GP triaging. This model will further allow us to meet recommendations as outlined in the Parliamentary Review. During the quarter we also commenced engagement works with Customer Relations, Adult Services and Health Staff in how we could further meet the objectives of the Parliamentary Review. The focus will be on to how we develop a more seamless approach to care for our citizens and anticipate that we develop a way forward in January 2019. We anticipate that this risk is forecast to remain the same.

With regard to contract management good progress continues to be made in relation to implementing the contract management actions associated with the Risk Management Plan. A review of contracting practices was undertaken by the South Wales Audit Partnership that concluded that our systems are robust and policies and procedures are robust and effective. However, it is recognised that there has been a shift change in this risk, as it has moved away from risks associated with the governance of contracts towards the risks associated with 'provider failure' and our ability to prevent a failure of commissioned services. Although it is forecast that this risk in relation to the governance aspects of contract management are reducing, there is the risk that the aspect of risk associated with 'provider failure' has the potential to escalate over time, if not addressed.

In relation to public buildings compliance it is forecast this risk will also reduce over time, now that good progress has been made in relation to undertaking assessment site visits for compliance and the new compliance database (IPF) system is currently being populated. Mitigating actions for corporate risks continue to be addressed via Service Plan actions.




The Safeguarding risk continues to remain medium/low. There are several robust controls in place to effectively mitigate against this risk. For example, review work regarding 'Adults at Risk' process is underway in line with Welsh Government guidance. We continue to embed the Safer Recruitment Policy both corporately and within schools. Our compliance during quarter 2 was 80% for July, 100% for August and 98% for September. Although this risk remains relatively low, it will continue to feature on the Risk Register due to the volatile nature of the risk.







The current status of the key corporate risks that have a bearing on this Well-being Outcome are as follows:

Risk Ref	Risk	Residual Risk Score			Direction of Travel <sup>2</sup>	Forecast Direction of Travel <sup>3</sup>
		Likelihood	Impact	Total		
CR10	Public Compliance Buildings	2	3	6 M	 	
CR11	Safeguarding	1	3	3 M/L	 	
CR12	Intergrated Health and Social Care	2	2	4 M	 	
CR13	Unauthorised Deprivation of Liberty Safeguards	4	3	12 H	 	

<sup>2</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.
















<sup>3</sup> **Forecast direction of travel** anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

 risk is increasing,  risk is decreasing,  risk is remaining static

Risk Ref	Risk	Residual Risk Score			Direction of Travel	Forecast Direction of Travel	
		Likelihood	Impact	Total			
CR14	Contract Management	1	3	3 M/L			
CR15	Welsh Community Care Information System (WCCIS)	2	4	8 M/H			

## 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, Safeguarding and Performance	Medium			
Sport development and delivery is provided regionally based on the consortium area with the Vale of Glamorgan being worse off as a result.	Neighbourhood Services and Transport	Medium /High			
Service users cannot access services swiftly and their needs are not met.	Adult Services/ Children and Young People Services	Medium			
Reduction in service availability because of increasing demand, higher expectations and changes to eligibility criteria.	Resources Management, Safeguarding and Performance	Medium /High			
Closure/failure of our commissioned providers.	Resources Management, Safeguarding and Performance	Medium /High			

Risk Description	Service Area	Status		Direction	Forecast Direction
Impact of increasing Looked After Children numbers on placement availability where in-house fostering capacity is exceeded and there is an increased reliance on Independent Fostering Agency placements, and the demand on Social Work and Placement Teams.	Children and Young People Services	High	12 (R)	↔	↑
The Council is unable to meet statutory responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	Resources Management, Safeguarding and Performance	Medium	4 (Y)	↔	↔
Other organisations are unable to meet their responsibilities for responding effectively to situations where people are at risk of neglect or abuse.	Children and Young People Services	Medium	6 (Y)	↔	↔
Compliance with the requirements of the Social Services and Wellbeing (Wales) Act 2014.	Adult Services	Medium /Low	3 (G)	↔	↓
Increased child protection issues as a result of the number and complexity of the needs of excluded pupils.	Achievement for All	Medium	6 (Y)	↔	↔
Insufficient funds to meet rising demand for services.	Resources Management, Safeguarding and Performance	Medium /High	8 (A)	↔	↔
Continued reduction and regionalisation of grant funding.	Children and Young People Services	Medium	6 (Y)	↔	↔
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)	↔	↓

Risk Description	Service Area	Status		Direction	Forecast Direction
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)	↔	↔
Inability to provide levels of training for staff or independent sector to ensure quality of care for citizens.	Resources Management, Safeguarding and Performance	Medium /High	8 (A)	↔	↔
Insufficient operational staff capacity to ensure timely assessments.	Adult Services/Children and Young People Services	Medium	4 (Y)	↔	↔
Capacity of Approved Mental Health Professionals (AMPs) to undertake reviews in line with the requirements of the Mental Health Act.	Adult Services	Medium /High	8 (A)	↔	↔
Insufficient funding and staff capacity to meet the growing demand for services.	Children and Young People Services	Medium	4 (Y)	↔	↔
Lack of available of specialist residential placements and the associated financial impact of high cost placements on our ability to effectively meet the increasingly complex needs of children and young people.	Children and Young People Services	High	12 (R)	↔	↑
Social Services Well-being Act impacting the ability to secure income (through charging) putting the authority at potential financial risk.	Resources Management, Safeguarding and Performance	Medium /Low	3 (G)	↔	↓
Inability to implement requirements of the Social Services and Well-being (Wales) Act.	Resources Management, Safeguarding and Performance	Medium	4 (Y)	↔	↔
Insufficient capacity in care settings to deliver services to meet the care and support needs of service users	Resources Management, Safeguarding and Performance	Medium	6 (Y)	↔	↔

Risk Description	Service Area	Status	Direction	Forecast Direction
Failure to obtain Waste and Transport Revenue and any necessary Capital Funding from Welsh Government including Leisure.	Neighbourhood Services and Transport	Medium	4 (Y)	
Implementation of new legislation may create additional demands on service delivery.	Shared Regulatory Services	Medium /low	3 (G)	

There are a total of 24 service risks that are aligned to this Well-being Outcome. Of these, the direction of travel of 1 service risk is anticipated to increase over the coming months in relation to impact of increasing Looked After Children numbers on placement availability where in-house fostering capacity is exceeded and there is an increased reliance on Independent Fostering Agency placements, and the demand on Social Work and Placement Teams. The remaining are forecast to stay static and only one risk is forecast to reduce in relation to Social Services Well-being Act impacting the ability to secure income (through charging) putting the authority at potential financial risk).

## 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.

Measures (RAG)	Direction of travel (DOT)	Actions (RAG)	Overall (RAG) status Objective
Performance is on or above target.	Performance has improved on the same quarter last year.	Green: Action completed or on track to be completed in full by due date.	Green: indicates that we are well on track to deliver the key outcomes relating to the Objective as set out in the Corporate Plan.

Measures (RAG)		Direction of travel (DOT)		Actions (RAG)		Overall (RAG) status Objective	
<b>A</b>	Amber: Performance is within 10% of target		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.	<b>A</b>	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.
<b>R</b>	Red: Performance missed target by more than 10%		Performance has declined compared to the same quarter last year	<b>R</b>	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.	<b>R</b>	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

NS: Neighbourhood Services and Transport	CS: Children and Young People Service	AS: Adult Services	SRS: Shared Regulatory Services
HS: Housing Services	RM: 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.

Possible Impact or Magnitude of Risk	Catastrophic	4 <i>MEDIUM</i>	8 MEDIUM/HIGH	12 HIGH	16 VERY HIGH
	High	3 <i>MEDIUM/LOW</i>	6 <i>MEDIUM</i>	9 MEDIUM/HIGH	12 HIGH
	Medium	2 LOW	4 <i>MEDIUM</i>	6 <i>MEDIUM</i>	8 MEDIUM/HIGH
	Low	1 VERY LOW	2 LOW	3 <i>MEDIUM/LOW</i>	4 <i>MEDIUM</i>
Low 1-2 Low/Medium 3 Medium 4-6 Medium/High 8-10 High 12-16	Very Unlikely	Possible	Probable	Almost Certain	
<b>Likelihood/Probability of Risk Occurring</b>					

**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
<b>AH001</b>				
NS/A034 (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.	31/03/2019	50	Green	Recent evidence in terms of the Sport Wales Adult Participation Survey (Vale ranked first with the highest levels of Physical Activity) and the latest obesity levels information (Vale ranked as having the lowest in Wales) continue to demonstrate the impact of Leisure services provided by the Council and its partners.
NS/A035: Continue to invest in Leisure Centres including electrical installations and changing facilities at Penarth and Barry.	31/03/2019	50	Green	The contractor for carrying out the Changing Room works at Barry and Penarth Leisure Centres has been appointed and work has commenced. Tenders have been received for the planned electrical works with work due to commence in the third quarter.
NS/A036 (VS/A037): Provide a School Crossing Patrol service at high risk locations to enable children to walk safely to and from school.	31/03/2019	50	Green	All high risk sites continue to be covered by a School Crossing Patrol service at present to ensure children walk safely to and from school or have the benefit of push button controlled pedestrian crossing services to for this purpose.
NS/A037 (VS/A035): Seek S106 and other funding to deliver improved walking and cycling access to parks and other leisure facilities.	31/03/2019	50	Green	<p>Transport: A number of active travel schemes are being funded by S106 contributions in conjunction with the S106 officer. In addition Welsh Government have granted £12k of funding to carry out feasibility and design works for AT improvement in St Athan.</p> <p>Leisure: A number of schemes are to be funded from S106 with member's agreement. These schemes will improve the walking and cycling infrastructure within the Vale as part of the sustainable transport provision providing access to facilities around the Vale.</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
NS/A038 (VS/A039): Continue to 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.	31/03/2019	50	Green	General meetings have now been held with single use sports clubs in relation to the proposals for full cost recovery. Individual meetings with clubs are now underway and different solutions to the issues faced are beginning to emerge.
NS/A039: Implement the 2018/19 Local Authority Partnership Agreement (LAPA) resulting in increased physical activity opportunities.	31/03/2019	50	Green	The 6 month progress report has recently been submitted to Sport Wales who fund the Vale Sport & Physical Activity plan, the progress report shows that overall the project is progressing. This plan aligns to the Corporate Plan and the Public Service Board plan, and takes into account the Well-being of Future Generations Act.
NS/A048: Finalise and implement a Leisure Strategy for the Vale of Glamorgan.	31/03/2019	50	Green	The Leisure Strategy has been endorsed by Cabinet and has been referred to Scrutiny for any comments they wish to make before being adopted.
<b>AH002</b>				
HS/A074: Work with partners to deliver the Cardiff & Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions.	31/03/2019	50	Green	Guidance is still awaited from Welsh Government in terms of future strategic priorities. In terms of the Vale there has been an increase in fly tipping relating to drug paraphernalia. Discussions have taken place between Visible Services and Community Safety to ensure that a plan is plan to tackle this issue and minimise the impact to the community.
<b>AH003</b>				
NS/A040 (VS/A047): Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families.	31/03/2019	50	Green	The Families First Holiday Club took place during the school holidays where 32 sessions were delivered attended by 62 Disabled Children accruing 815 Participations. A number of play scheme and Plat Rangers sessions took place during the school holiday period attended by 224 children. Numerous events also took place during the spring / summer period where activities play were provided which resulted in over 1,000 participations. Events included Barry Island Weekender, Dinas Powys Family Fun Day, Rotary Club Barry Family Fun Day, National Play Day and the Rotary Club Schools event. These opportunities have been delivered in (and sometimes financially supported by) partners including Dinas Powys and

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				Wick Community Councils, Llantwit Major Town Council and the Council's Events & Housing team.
<b>AH004</b>				
The action RM/A001 attributed to this Corporate Plan action for 2018/19 was completed in quarter 1. All data was successfully transferred by 1st May 2018. As a result the Family Information System (FIS) Wales system is now fully in operation providing free, impartial help, support and advice on a range of family issues.				
<b>AH005</b>				
RM/A002: Contribute to the local Public Health Wales agenda by promoting and encouraging healthy eating and healthier lifestyles within our services.	31/03/2019	50	Green	We continue to have good relationships where required for public health priority plan areas. Key highlights of progress made this quarter include: We continue to promote the availability of healthy options awards to food businesses in Cardiff and the Vale to encourage healthier lifestyles; Active Travel improvements including walkways and cycleways have been made across the Vale and these are being promoted to encourage more active travel lifestyles; We are making good progress in delivering the Vale Physical Activity Plan and recent evidence shows that the work of the Council and its partners is having a positive impact. The Sport Wales Adult Participation Survey shows that the Vale is ranked first with the highest levels of Physical Activity and the latest obesity data shows Vale as having the lowest obesity levels in Wales; A number of active travel and leisure schemes are currently being progressed from S106 contributions and these will further contribute towards improved walking and cycling infrastructure within the Vale as part of the sustainable transport provision, providing access to facilities around the Vale; We continue to work with all schools as a priority to ensure compliance with the Healthy Eating in Schools (Wales) Regulations and all primary schools are compliant with the nutritional regulations and all secondary schools are compliant with food based standards from the regulations; We have also continued working with local communities to maximise existing assets including improving access to green spaces,

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A002 continued				local playing facilities and community centres enabling them to offer increased opportunities to participate in leisure and physical activity; Significant work continues to be undertaken on falls prevention within the Vale Community Resource Service (VCRS), integrated with Health and the work of GP clusters; Positive progress continues to be made in implementing the three-year strategy for dementia and our Dementia Champion ensures representation at strategy meetings for the Region and feeds in to the work of the local authority and Regional Project Board (RPB).
SL/A037: Continue to monitor compliance with the Healthy Eating in Schools (Wales) regulations.	31/03/2019	100	Green	All primary schools are compliant with the nutritional regulations. All secondary schools are compliant with food-based standards from the regulations. This continues to be a priority for the team.
SRS/A023: Work in partnership to increase activity in relation to Cardiff and Vale Tobacco Control Action Plan (underage tobacco sales).	31/03/2019	50	Green	Investigations are currently taking place as a result of the aforementioned test purchasing failures. Two files have been submitted for consideration of legal proceedings.
<b>AH006</b>				
Both actions (NS/A041 and RP/A096) associated with this Corporate Plan action for 2018/19 were completed in quarter 1. 8 urban parks and 2 country parks were successfully awarded Green Flag status. These parks were; Urban Parks ; Romilly Park, Barry Island, Central Park, Victoria Park, Knap Gardens, Alexandra Park, Belle Vue Park, Gladstone Park, Country Parks; Cosmeston, Porthkerry. The Green Flag Awards recognises and rewards well managed parks and green spaces, setting the benchmark standard for outdoor spaces across the UK and around the world.				

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

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH007</b>				
AS/A009: Review and amend processes at the Customer Contact Centre to support provision of advice and assistance (IAA model) in line with requirements of the Act.	31/03/2019	50	Green	Work remains ongoing to undertake this and ensure continued compliance, ongoing exploration to improve access to alternative digital channels.
AS/A022: Promote the use of Dewis Cymru for the provision of information, advice and assistance for preventative services for adults.	31/03/2019	50	Green	A Dewis Project Manager has been recruited during the quarter and is working together with the Dewis Project Support Assistant to lead on the promotion of the resource directory across the region. Dewis continues to be developed as a source of information provision, advice and assistance with around 1400 resources across the region. It can be accessed at <a href="https://www.dewis.wales/home">https://www.dewis.wales/home</a> .
CS/A024 (CS/A016): Continue to work with Cardiff Council and Cardiff and Vale University Health Board to increase the transparency of the continuing health care process, as it relates to children and young people and seek local authority membership of the panel.	31/03/2019	50	Green	The work of the task and finish group remains on track. A draft policy is timetabled for consultation during November and December.
CS/A025: Utilising the frameworks offered by the Children's Commissioning Consortium Cymru (4Cs) and the National Fostering Framework, address the challenges associated with the shortfall of children's placements.	31/03/2019	50	Green	The National Fostering Framework (NFF) regional work programme is subject to close monitoring. Its current focus is on the development of a regional website with the intention of increasing the number of enquiries and driving up recruitment numbers. This will be supported by the M&R Officer post agreed for the Vale's Fostering Team.
LS/A015: 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:	31/03/2019	50	Green	During quarter 2 work has remained ongoing in the development of Pooled Budgets following the finalisation of the Pooled Budget Agreement in March 2018, with commencement in April 2018, a review for April 2019 agreed. This quarter has seen Legal Services advise in relation to the drafting of the Authorities updating charging policy including discretionary

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<ul style="list-style-type: none"> <li>- Provision of information</li> <li>- Advice and assistance services</li> <li>- Eligibility/assessment of need</li> <li>- Planning and promotion of preventative services</li> <li>- Workforce</li> <li>- Performance measures</li> <li>- Charging (debt recovery)</li> <li>- Direct Payments provision – WG regulations awaited</li> <li>- Pooled Funds.</li> </ul>				<p>charging elements which went to Cabinet on 30th July. In addition to this, work continues in respect of ongoing implementation of the changes in legislation policy and practice under the Social Services Well-being (Wales) Act (SSWWA) 2014, including safeguarding, direct pay and deferred payment.</p>
<p>RM/A003: Contribute to the development and implementation of the Regional Partnership Board Annual Plan.</p>	31/03/2019	50	Green	<p>A 6 month Update on the Area Plan for Care and Report Needs was reported to Regional Partnership Board on 26th October with 1 year actions on target for completion by the end of the year. A full update will be incorporated into the RPBs Annual Report in 2019.</p>
<p>RM/A004: Review and amend our processes for Adults at Risk to ensure we remain compliant with the Social Services and Well-being (Wales) Act.</p>	31/03/2019	50	Green	<p>The review of current processes is underway, taking into account the new Welsh Government guidance. The first two chapters are now in a draft form and open to consultation. This work will help assure staff to feel confident in using procedures and ensure effective compliance with our Safeguarding responsibilities under the Act.</p>
<p>RM/A005: Support the Assistant Director for Integration to develop a more joined up approach to developing preventative services that are aligned to the Social Services and Well-being (Wales) Act and Well-being of Future Generations Act to better promote independent living in relation to Adults.</p>	31/03/2019	50	Green	<p>Both Integrated Care Fund (ICF) and DTG funding has been successfully utilized to established small community groups. The summary report was compiled and another round of applications will be considered in November.</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A006: Deliver the Citizens' Panel work stream and establish a Citizens' Panel that complies with requirements of the Social Services and Well-being (Wales) Act.	31/03/2019	50	Green	The regional work stream continues to meet and is working well. A group of people have been identified through the qualitative performance measures to work with us on our pilot 'Strengthening citizen engagement in the Annual Council Reporting Framework (ACRF) challenge process for Cardiff and Vale' to inform best practice in this area. We are working with an organisation called Tempo (formerly Spice), who are supporting us with this project, encouraging participation by giving citizens the opportunity to earn Time Credits.
RM/A007: Continue the work of the Regional Steering Group and the long term commitment of the previous Delivering Transformation Grant associated with delivery of new Social Services legislation.	31/03/2019	50	Green	The Regional Steering Group continues to work well. The associated workstreams are in place and meet on a regular basis. The workstreams are led by senior member of the management team and each has developed a project brief which outlines the key actions they are required to deliver on. Colleagues from across the regions are working together to ensure they are achieved.
RM/A008: Support the Welsh Government review and further implementation of the National Performance Measurement Framework in line with the new requirements of the Social Services and Well-being (Wales) Act going forward.	31/03/2019	50	Green	The region is supporting Welsh Government in the development of a new Performance and Review Framework. Heads of Service are participating in workshops which give them the opportunity to shape the detail of the new Framework, and the Regional Coordinator for Sustainable Social Services is representing the region on the Quantitative Writing group, providing technical expertise and developing new requirements for the quantitative data and accompanying guidance.
RM/A026 (BM/A026): Continue to identify opportunities for joint commissioning where it can be evidenced to be of benefit in line with duties set out in Part 9 of the Social Services and Well-being (Wales) Act (Collaboration and Partnerships).	31/03/2019	50	Green	Regional work is now in place with the Reflect Project and Adult Advocacy Service. The Fee and Contracting Group continue to meet regularly to discuss and identify joint working possibilities.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH008</b>				
AS/A005: Continue to develop the Customer Contact Centre as the single point of access for community health and social care services through expanding the range of services which it coordinates and enables.	31/03/2019	50	Green	The Single Point of Access (SPoA) is central to initial proposals to address issues outlined in the Parliamentary review of Health and Social Care. The Customer Contact Centre continues to also explore opportunities for further developing our single point of access for health and social care. We have progressed towards the consultation phase in quarter 2 and the feedback from the sessions will be collated and considered. We have also secured £1.3million Transformation Bid funding (which relates to a 2 year period) to further integrate services in relation to GP triaging. This model will allow us to meet recommendations outlined in the Parliamentary Review and develop a more seamless approach to care for our citizens. We are awaiting the outcome of engagement work currently under way before a way forward is identified.
AS/A014: Undertake further expansion of the Adult Placement Scheme.	31/03/2019	50	Green	In Q2 10 new referrals have been received. Social Care Officer and Project Workers are currently working to complete adult plans and matching to appropriate hosts. We have received 4 new host applications and 2 are being progressed to assessment. 2 hosts were approved at Panel to provide respite. We continue to consider regional working. We also continue to work closely with Shared Lives co-ordinator to develop our service further.
AS/A023: Develop a Learning Disability Commissioning Strategy to ensure we can effectively meet the needs and outcomes of our service users both now and in the future.	31/03/2019	50	Green	A Draft Strategy was presented to SLG on the 28/09/18 and the Learning Disability Partnership Group on the 09/10/18 for their comments. The Strategy is to be presented at Vale Scrutiny on the 06/11/18. A final version is aimed for completion in early 2019.
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 Well-being Act.	31/03/2019	50	Green	Authorisation has been granted to commence an engagement exercise with Customer Relations, Adult Services and Health staff on how to meet the objectives following on from the Parliamentary Review of Health and Social Care in Wales. Staff meetings were held in September 2018 to launch the engagement with recommendations on a way forward expected



Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				in January 2019. This work includes a review of options to improve the IAA process.
PD/A031: Continue to work with partners to improve self-service options to ensure that customers' enquiries are resolved as quickly as possible, complying with the Social Care and Well-being (Wales) Act 2014.	31/03/2019	50	Green	Authorisation has been granted to commence an engagement exercise with Customer Relations, Adult Services and Health staff on how to meet the objectives following on from the Parliamentary Review of Health and Social Care in Wales. Staff meeting where held in September to launch the engagement with recommendations on a way forward expected in January 2019. This work will include a review of options to make services available digitally.
PD/A032: Continue to strengthen and extend shared working between C1V and the Health Board to provide a more integrated service for the public.	31/03/2019	50	Green	Staff engagement towards the option of creating a seamless health, social care and wellbeing service in the contact centre environment to provide a more integrated service commenced in September 2018 and is expected to be completed by the end of October 2018. Recommendations relating to the development of the service in the future are expected in January 2019.
<b>AH009</b>				
AS/A024: Maximise access and the use of grant funding streams such as Integrated Care Funding to support the development of further integrated services.	31/03/2019	50	Green	Planned progress against all projects funded via ICF has been achieved as per the project plans with some minor exceptions which are being addressed. In addition, we have successfully secured ICF Capital funding for our Residential Care Homes that enables further developments to improve access to our services and the ability to explore improved models of care and inclusion of the community.
AS/A025: Improve communications with Mental Health Service in order to support effective transition for young people to move into Adult Mental Health Services.	31/03/2019	25	Red	1 Referral through TRIG this quarter. Integrated Managers have not been able to provide figures on other data. Have requested this be prioritised for Q3. Work continues on developing a joint regional Transition protocol.
AS/A026: Work with partners to develop locality models further in response to the recommendations of the Parliamentary	31/03/2019	50	Green	The Vale of Glamorgan Council worked with regional partners to prepare and submit a proposal for the Transformation bid. This was submitted in August with information regarding

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
Review.				approval due in September/October.
AS/A027: Implement the new Community Mental Health Teams Integrated model to support working age adults with mental health needs.	31/03/2019	50	Green	Vale Locality Mental health Team now in operation at Barry Hospital. Models of service delivery being piloted currently which will inform the roll out for the two Cardiff Locality Teams next year.
AS/A028: Work with partners to launch a 10 year Dementia Strategy to better integrate service via a multi-agency service model.	31/03/2019	50	Green	Vale Adult Services have worked alongside partners to develop the 'Team Around the Individual' Model to provide specialist dementia workers to support the Vale Community Response Team to be able to provide rehabilitation for people with cognitive impairment and dementia.
AS/A029: Further develop and enhance the Integrated Autism Service with a specific focus on enhancing links with other services, service users and their carers and the provision of training for professionals.	31/03/2019	50	Green	The Integrated Autism Service (IAS) has visited a range of stakeholders including the substance misuse team, housing, Into Work, supported living, homeless team etc. Staff have delivered two parent carer workshops to 48 parents. Staff have worked jointly with Barnardos to deliver the Sygnet parenting programme. Adults engaging with the service have participated in Social Eyes social skills training, a "skills for life" course looking at a range of skills needed to become more independent and will shortly embark on a "Get Cooking" with the support of the dietetics team.
<b>AH010</b>				
RM/A009: Continue full implementation of the Welsh Community Care Information System (WCCIS) for the Directorate with a focus on developing the financial aspects of the system.	31/03/2019	50	Green	The WCCIS Board has met and identified opportunities to acquire additional expertise to address some of the issues within the system. The finance module has received a positive reaction from operational staff and therefore we will commence implementation.
<b>AH011</b>				
AA/A014: Work in conjunction with the Corporate Safeguarding Group to identify, develop and implement current priorities relating to education services.	31/03/2019	50	Green	The Training Log and systems are in place, giving sanctions and encouragement to ensure training is attended. Safer recruitment changes have been agreed. Compliance was 100% in September. The corporate safeguarding group continue to meet.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
HR/A002: Continue to support and monitor the application of the Council's Safer Recruitment Policy.	31/03/2019	50	Green	Regular reports and updates are provided regarding the application of the safer recruitment policy. Compliance is as follows; July 80%, August 100% and September 98%. There has been an increase in compliance especially for the busiest period of September. Regular monitoring will continue.
RM/A010: Enable the Corporate Safeguarding Group to continue to focus on delivery of Corporate Safeguarding Action Plan and put in place appropriate mechanisms to monitor compliance of the Policy across the Council for all relevant staff, contractors and volunteers.	31/03/2019	50	Green	During this quarter we have continued to work with and representatives from other Directorates who provide reports and information in relation to their safeguarding activities. Delivery of the Corporate Safeguarding Action Plan continues to be monitored regularly by the Corporate Safeguarding Group.
RM/A011: Develop and implement training workshops for staff in respect of safeguarding enquiries relating to Adults at Risk.	31/03/2019	70	Green	The OM for Safeguarding is part of the Project Board for the All Wales Safeguarding Procedures. In line with the development of these procedures it is anticipated that there will be training events and materials that will be utilised to further progress this area of work. A mandatory safeguarding e-module has been developed and being launched November 2018.
RM/A012: Support the completion of the review of the All Wales Child and Adult Protection Procedures.	31/03/2019	50	Green	The first chapter of the review has been sent out for consultation this quarter, the second has been considered by a development workshop and will be reissued. This work is planned to take place over more than one year and will help staff to feel more confident in using the procedures.
RM/A013: Implement agreed recommendations arising from the 2017/18 Safeguarding Internal audit work.	31/03/2019	75	Green	Roll out of this module is scheduled for November 2018 in line with National Safeguarding Week.
<b>AH012</b>				
The work on implementing the care package approval process was completed during quarter 4 2017/18. We continuously review our arrangements to ensure the mechanisms remain effective in supporting hospital discharges.				

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH013</b>				
RM/A014 (BM/A014): Work with our partners regionally to develop an Accommodation with Care Strategy to promote independent living.	31/03/2019	100	Green	The Accommodation with Care Strategy has been completed and presented at Scrutiny. The Housing, Health and Social Care Board has been established to take forward the recommendations.
<b>AH014</b>				
RM/A015: Collate and review a data set linked to Child Sexual Exploitation, to enable the authority to analyse the safeguarding activity and outcomes in this area.	31/03/2019	70	Green	Monthly information is regularly provided to the authority by the lead Child Sexual Exploitation (CSE) officer, one method is through the strategy meetings. Cases are evaluated based on the critical enquiry framework and are reported to the Regional Safeguarding Children's Board (RSCB).
<b>AH015</b>				
AH015: Improve procedures with providers of nursing, residential and domiciliary care providers to enable early intervention and prevent the escalation of incidents. The Operation Jasmine Action Plan was supersede by the 3-year business plan for the Regional Adults Safeguarding Board last year. Some actions remain ongoing and are regularly monitored on a quarterly basis by the Board.				
<b>AH016</b>				
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.	31/03/2019	25	Red	Progress halted pending outcome of SRS consultation on Trading Standards budget savings.
SRS/A015a: Undertake monitoring of outbreaks of communicable disease in schools.	31/03/2019	50	Green	In quarter 2, 13 outbreaks were investigated; 4 in Bridgend, 4 in Cardiff and 5 in the Vale of Glamorgan. There were 5 outbreaks in care homes, 5 in schools and 3 in preschool/nursery setting. All 13 were suspected Norovirus. 489 Communicable Disease cases were investigated, 404 were confirmed and 85 suspected.
SRS/A017: Perform an Annual Food Inspection of premises that undertake commercial activities that includes vulnerable people in accordance with the Food Law Enforcement Service Plan.	31/03/2019	50	Green	The Food Law Enforcement Service Plan is now complete. The Plan was approved by Shared Regulatory Services Joint Committee on 18th September 2018.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
SRS/A025: Conduct an underage sales exercise in relation to on line alcohol delivery sales to a person under the age of 18.	31/03/2019			Activity in relation to this action is not planned to commence until later in the financial year. Works are planned for quarter 3.

## APPENDIX 2: Performance Indicators

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

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
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. To be reported at quarter 4.
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. To be reported at quarter 4.
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. To be reported at quarter 4.
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. To be reported at quarter 4.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>What difference have we made?</b>						
CPM/187: Percentage of clients accessing substance misuse services who reported an improvement in their quality of life.	74.3%	No data reported	67%	N/A	N/A	No update has been provided at quarter 2.
CPM/191: 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 performance indicator. To be reported at quarter 4.
CPM/236: Percentage of problematic substance misuse clients accessing treatment who maintain or reduce their substance misuse.	N/A	No data reported	N/A	N/A	N/A	Establishing baseline. No update has been provided at quarter 2.
<b>How well have we performed?</b>						
CPM/096: Percentage of attendance at Flying Start childcare.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/111: Percentage of eligible Flying Start children that take up childcare offer.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/170: Percentage of users showing satisfaction with a Families First service accessed.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/192: Number of participations of children and young people in the 5x60 scheme.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/196: Percentage of Council catered schools that offer healthy food options.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/248: Percentage of individuals who exit substance misuse treatment in a planned way.	N/A	No data reported	N/A	N/A	N/A	Establishing baseline. No update has been provided at quarter 2.
CPM/249: Percentage of substance misuse treatment commencements within 20 working days.	N/A	No data reported	80%	N/A	N/A	Establishing baseline. No update has been provided at quarter 2.
<b>How much have we done?</b>						
CPM/028: Number of sports clubs which offer either inclusive or specific disability opportunities.	50	54	52	Green	↑	Presently there are 54 organisations offering inclusive opportunities. The Senior Healthy Living Officer (disability) is seeking to progress Insport accreditation with an additional

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
						identified club.
CPM/197: Number of Green Flag Parks.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 3.

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

Please note: 2018/19 will be the first complete year where the Department has used the Welsh Community Care Information System (WCCIS). WCCIS was introduced in late November 2017 replacing the former e-Swift system for the management of all Social Services records. During quarter 1 & 2 priority was given to cleansing data after the migration from e-Swift and the development of performance management report writing skills. We are now in a position to report on the majority of performance measures, having developed the scripts necessary to facilitate this, and others are in development in readiness for reporting from Quarter 3 and Quarter 4. However, due to the ongoing cleansing of data and the absence of quality checks while skills to manage the new system were developing, the accuracy of the data we are able to report on, in some cases, cannot be validated. Ensuring the accuracy of the performance measures through WCCIS will be a priority for the directorate however this is expected to take time to achieve.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
CPM/060 (SSM/027): The percentage of re-registrations of children on local authority Child Protection Registers (CPR).	0%	No data reported	10%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/098: Percentage of adult service users receiving a direct payment.	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.
CPM/203: 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	Annual well-being national indicator. To be reported at quarter 4.
<b>What difference have we made?</b>						
CPM/026: 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 performance indicator. To be reported at quarter 4.
CPM/050: The percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 3.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
or work based learning without an approved external qualification.						
CPM/057 (SSM/019) (PAM/025): The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	1.2	2.33	2.5	Green	↓	No update has been provided at quarter 2.
CPM/058 (SSM/020a): The percentage of adults who completed a period of reablement a) and have a reduced package of care and support 6 months later.	8.57%	No data reported	10%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/059 (SSM/020b): The percentage of adults who completed a period of reablement b) and have no package of care and support 6 months later.	77.14%	No data reported	75%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/107: 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 performance indicator. To be reported at quarter 4.
<b>How well have we performed?</b>						
CPM/056 (SSM/018): The percentage of adult protection enquiries completed within statutory timescales.	100%	No data reported	100%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/112: Percentage of Supporting People clients satisfied with the support they have received.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/206: Percentage of telecare customers satisfied with the telecare monitoring service.	96.9%	No data available	97%	N/A	N/A	Annual performance indicator. The annual survey of Telecare customers has been delayed and will start during quarter 3. Satisfaction levels will now be reported in quarter 4.
CPM/207: Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	79.53%	No data reported	85%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/208: Percentage of care and support	90.95%	No data	91%	N/A	N/A	No update has been provided at quarter 2.



Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
plans for children that were reviewed within agreed timescales (WG interim data set).		reported				Please see note above.
<b>How much have we done?</b>						
CPM/209: Number of new Telecare users.	182	No data reported	188	N/A	N/A	No update has been provided at quarter 2. Please see note above.

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

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

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
There are currently no additional national measures reported under this section.						
<b>What difference have we made?</b>						
PAM/042: Percentage of National Exercise Referral Scheme (NERS) clients who reported an increase in leisure minutes at 16 weeks.	N/A	81.8%	90%	Amber	N/A	Establishing baseline. Although new staff have been put in place, hours are still lower than establishment figures prior to staff taking Maternity leave. The team are working hard to correct the difference but the numbers are still below last year's level as staff are in work less hours so there is less chance of follow up of clients.
<b>How well have we performed?</b>						
PAM/041: Percentage of National Exercise Referral Scheme (NERS) clients who continued to participate in the exercise programme at 16 weeks.	46.03%	40%	46%	Red	↓	Although new staff have been put in place, hours are still lower than establishment figures prior to staff taking Maternity leave. The team are working hard to correct the difference but the numbers are still below last year's level as staff are in work less hours so there is less chance of follow up of clients.
<b>How much have we done?</b>						
PAM/017: Number of visits to local authority sport and leisure facilities during	4,732.41	4,598.9	4,750	Amber	↓	Qtr 2 total usage was 281,508 compared with Qtr 1 of 319,518. Qtr 2 is normally lower due to

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
the year where the visitor will be participating in physical activity per 1,000 population.						the time of year. We are still awaiting some information from schools.

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

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
There are currently no additional national measures reported under this section.						
<b>What difference have we made?</b>						
SSM/025: The percentage of children supported to remain living within their family.	67.34%	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/034a: The percentage of all care leavers who are in education, training or employment at 12 months after leaving care.	43.75%	No data reported	45%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/034b: The percentage of all care leavers who are in education, training or employment at 24 months after leaving care.	53.33%	No data reported	53%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/001: Percentage of people reporting that they live in the right home for them.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/002: Percentage of people reporting they can do what matters to them.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/003: Percentage of people reporting that they feel safe.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/004: Percentage of people reporting	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
that they feel a part of their community.						reported at quarter 4.
SSM/005: Percentage of people reporting they feel satisfied with their social networks.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/006: Percentage of children and young people reporting that they are happy with who they live with.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/017: Percentage of People reporting they chose to live in a residential care home.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
<b>How well have we performed?</b>						

SSM/023: 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 national performance indicator. To be reported at quarter 4.
SSM/024 (PAM/028): The percentage of assessments completed for children within statutory timescales.	90.12%	No data reported	91%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/026: The percentage of looked after children returned home from care during the year.	2.82%	No data reported	6%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/030: The percentage of children seen by a registered dentist within 3 months of becoming looked after.	61.11%	No data reported	60%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/021: The average length of time older people (aged 65 or over) are supported in residential care homes.	797.22 days	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/022: Average age of adults entering residential care homes.	78.68 years	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/028: The average length of time for all children who were on the Child Protection Register during the year.	254.09 days	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/029a: Percentage of children	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
achieving the core subject indicator at key stage 2.						reported at quarter 4.
SSM/029b: Percentage of children achieving the core subject indicator at key stage 4.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/032: 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.	3.23%	No data reported	12%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/031: The percentage of looked after children registered with a GP.	98.21%	No data reported	99%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/033 (PAM/029): The percentage of looked after children on 31 March who have had three or more placements during the year.	5.70%	No data reported	9%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/035: The percentage of care leavers who have experienced homelessness during the year.	5.50%	No data reported	12%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
PAM/026 (SSM/015): Percentage of carers reporting they feel supported to continue in their caring role.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
PAM/024 (SSM/013): Percentage of adults who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
PAM/027 (SSM/013): Percentage of children who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/007: Percentage of people reporting they have received the right information or advice when they needed it.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/008: Percentage of people reporting they have received care and support	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
through their language of choice.						
SSM/009: Percentage of people reporting they were treated with dignity and respect.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/010: Percentage of young adults reporting they received advice, help and support to prepare them for adulthood.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/011: Percentage of people with a care and support plan reporting that they have been given written information of their named worker in social services.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/012: Percentage of people reporting they felt involved in any decisions made about their care and support.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/014: Percentage of parents reporting that they felt involved in any decisions made about their child's care and support.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/016: Percentage of carers reporting they felt involved in designing the care and support plan for the person that they care for.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
<b>How much have we done?</b>						
There are currently no additional national measures reported under this section.						

## 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
<b>AH001</b>				
NS/A034 (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.	31/03/2019	50	Green	Recent evidence in terms of the Sport Wales Adult Participation Survey (Vale ranked first with the highest levels of Physical Activity) and the latest obesity levels information (Vale ranked as having the lowest in Wales) continue to demonstrate the impact of Leisure services provided by the Council and its partners.
NS/A035: Continue to invest in Leisure Centres including electrical installations and changing facilities at Penarth and Barry.	31/03/2019	50	Green	The contractor for carrying out the Changing Room works at Barry and Penarth Leisure Centres has been appointed and work has commenced. Tenders have been received for the planned electrical works with work due to commence in the third quarter.
NS/A036 (VS/A037): Provide a School Crossing Patrol service at high risk locations to enable children to walk safely to and from school.	31/03/2019	50	Green	All high risk sites continue to be covered by a School Crossing Patrol service at present to ensure children walk safely to and from school or have the benefit of push button controlled pedestrian crossing services to for this purpose.
NS/A037 (VS/A035): Seek S106 and other funding to deliver improved walking and cycling access to parks and other leisure facilities.	31/03/2019	50	Green	<p>Transport: A number of active travel schemes are being funded by S106 contributions in conjunction with the S106 officer. In addition Welsh Government have granted £12k of funding to carry out feasibility and design works for AT improvement in St Athan.</p> <p>Leisure: A number of schemes are to be funded from S106 with member's agreement. These schemes will improve the walking and cycling infrastructure within the Vale as part of the sustainable transport provision providing access to facilities around the Vale.</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
NS/A038 (VS/A039): Continue to 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.	31/03/2019	50	Green	General meetings have now been held with single use sports clubs in relation to the proposals for full cost recovery. Individual meetings with clubs are now underway and different solutions to the issues faced are beginning to emerge.
NS/A039: Implement the 2018/19 Local Authority Partnership Agreement (LAPA) resulting in increased physical activity opportunities.	31/03/2019	50	Green	The 6 month progress report has recently been submitted to Sport Wales who fund the Vale Sport & Physical Activity plan, the progress report shows that overall the project is progressing. This plan aligns to the Corporate Plan and the Public Service Board plan, and takes into account the Well-being of Future Generations Act.
NS/A048: Finalise and implement a Leisure Strategy for the Vale of Glamorgan.	31/03/2019	50	Green	The Leisure Strategy has been endorsed by Cabinet and has been referred to Scrutiny for any comments they wish to make before being adopted.
<b>AH002</b>				
HS/A074: Work with partners to deliver the Cardiff & Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions.	31/03/2019	50	Green	Guidance is still awaited from Welsh Government in terms of future strategic priorities. In terms of the Vale there has been an increase in fly tipping relating to drug paraphernalia. Discussions have taken place between Visible Services and Community Safety to ensure that a plan is plan to tackle this issue and minimise the impact to the community.
<b>AH003</b>				
NS/A040 (VS/A047): Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families.	31/03/2019	50	Green	The Families First Holiday Club took place during the school holidays where 32 sessions were delivered attended by 62 Disabled Children accruing 815 Participations. A number of play scheme and Plat Rangers sessions took place during the school holiday period attended by 224 children. Numerous events also took place during the spring / summer period where activities play were provided which resulted in over 1,000 participations. Events included Barry Island Weekender, Dinas Powys Family Fun Day, Rotary Club Barry Family Fun Day, National Play Day and the Rotary Club Schools event. These opportunities have been delivered in (and sometimes financially supported by) partners including Dinas Powys and

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				Wick Community Councils, Llantwit Major Town Council and the Council's Events & Housing team.
<b>AH004</b>				
The action RM/A001 attributed to this Corporate Plan action for 2018/19 was completed in quarter 1. All data was successfully transferred by 1st May 2018. As a result the Family Information System (FIS) Wales system is now fully in operation providing free, impartial help, support and advice on a range of family issues.				
<b>AH005</b>				
RM/A002: Contribute to the local Public Health Wales agenda by promoting and encouraging healthy eating and healthier lifestyles within our services.	31/03/2019	50	Green	We continue to have good relationships where required for public health priority plan areas. Key highlights of progress made this quarter include: We continue to promote the availability of healthy options awards to food businesses in Cardiff and the Vale to encourage healthier lifestyles; Active Travel improvements including walkways and cycleways have been made across the Vale and these are being promoted to encourage more active travel lifestyles; We are making good progress in delivering the Vale Physical Activity Plan and recent evidence shows that the work of the Council and its partners is having a positive impact. The Sport Wales Adult Participation Survey shows that the Vale is ranked first with the highest levels of Physical Activity and the latest obesity data shows Vale as having the lowest obesity levels in Wales; A number of active travel and leisure schemes are currently being progressed from S106 contributions and these will further contribute towards improved walking and cycling infrastructure within the Vale as part of the sustainable transport provision, providing access to facilities around the Vale; We continue to work with all schools as a priority to ensure compliance with the Healthy Eating in Schools (Wales) Regulations and all primary schools are compliant with the nutritional regulations and all secondary schools are compliant with food based standards from the regulations; We have also continued working with local communities to maximise existing assets including improving access to green spaces,



Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A002 continued				local playing facilities and community centres enabling them to offer increased opportunities to participate in leisure and physical activity; Significant work continues to be undertaken on falls prevention within the Vale Community Resource Service (VCRS), integrated with Health and the work of GP clusters; Positive progress continues to be made in implementing the three-year strategy for dementia and our Dementia Champion ensures representation at strategy meetings for the Region and feeds in to the work of the local authority and Regional Project Board (RPB).
SL/A037: Continue to monitor compliance with the Healthy Eating in Schools (Wales) regulations.	31/03/2019	100	Green	All primary schools are compliant with the nutritional regulations. All secondary schools are compliant with food-based standards from the regulations. This continues to be a priority for the team.
SRS/A023: Work in partnership to increase activity in relation to Cardiff and Vale Tobacco Control Action Plan (underage tobacco sales).	31/03/2019	50	Green	Investigations are currently taking place as a result of the aforementioned test purchasing failures. Two files have been submitted for consideration of legal proceedings.
<b>AH006</b>				
Both actions (NS/A041 and RP/A096) associated with this Corporate Plan action for 2018/19 were completed in quarter 1. 8 urban parks and 2 country parks were successfully awarded Green Flag status. These parks were; Urban Parks ; Romilly Park, Barry Island, Central Park, Victoria Park, Knap Gardens, Alexandra Park, Belle Vue Park, Gladstone Park, Country Parks; Cosmeston, Porthkerry. The Green Flag Awards recognises and rewards well managed parks and green spaces, setting the benchmark standard for outdoor spaces across the UK and around the world.				

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

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH007</b>				
AS/A009: Review and amend processes at the Customer Contact Centre to support provision of advice and assistance (IAA model) in line with requirements of the Act.	31/03/2019	50	Green	Work remains ongoing to undertake this and ensure continued compliance, ongoing exploration to improve access to alternative digital channels.
AS/A022: Promote the use of Dewis Cymru for the provision of information, advice and assistance for preventative services for adults.	31/03/2019	50	Green	A Dewis Project Manager has been recruited during the quarter and is working together with the Dewis Project Support Assistant to lead on the promotion of the resource directory across the region. Dewis continues to be developed as a source of information provision, advice and assistance with around 1400 resources across the region. It can be accessed at <a href="https://www.dewis.wales/home">https://www.dewis.wales/home</a> .
CS/A024 (CS/A016): Continue to work with Cardiff Council and Cardiff and Vale University Health Board to increase the transparency of the continuing health care process, as it relates to children and young people and seek local authority membership of the panel.	31/03/2019	50	Green	The work of the task and finish group remains on track. A draft policy is timetabled for consultation during November and December.
CS/A025: Utilising the frameworks offered by the Children's Commissioning Consortium Cymru (4Cs) and the National Fostering Framework, address the challenges associated with the shortfall of children's placements.	31/03/2019	50	Green	The National Fostering Framework (NFF) regional work programme is subject to close monitoring. Its current focus is on the development of a regional website with the intention of increasing the number of enquiries and driving up recruitment numbers. This will be supported by the M&R Officer post agreed for the Vale's Fostering Team.
LS/A015: 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:	31/03/2019	50	Green	During quarter 2 work has remained ongoing in the development of Pooled Budgets following the finalisation of the Pooled Budget Agreement in March 2018, with commencement in April 2018, a review for April 2019 agreed. This quarter has seen Legal Services advise in relation to the drafting of the Authorities updating charging policy including discretionary

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<ul style="list-style-type: none"> <li>- Provision of information</li> <li>- Advice and assistance services</li> <li>- Eligibility/assessment of need</li> <li>- Planning and promotion of preventative services</li> <li>- Workforce</li> <li>- Performance measures</li> <li>- Charging (debt recovery)</li> <li>- Direct Payments provision – WG regulations awaited</li> <li>- Pooled Funds.</li> </ul>				<p>charging elements which went to Cabinet on 30th July. In addition to this, work continues in respect of ongoing implementation of the changes in legislation policy and practice under the Social Services Well-being (Wales) Act (SSWWA) 2014, including safeguarding, direct pay and deferred payment.</p>
<p>RM/A003: Contribute to the development and implementation of the Regional Partnership Board Annual Plan.</p>	31/03/2019	50	Green	<p>A 6 month Update on the Area Plan for Care and Report Needs was reported to Regional Partnership Board on 26th October with 1 year actions on target for completion by the end of the year. A full update will be incorporated into the RPBs Annual Report in 2019.</p>
<p>RM/A004: Review and amend our processes for Adults at Risk to ensure we remain compliant with the Social Services and Well-being (Wales) Act.</p>	31/03/2019	50	Green	<p>The review of current processes is underway, taking into account the new Welsh Government guidance. The first two chapters are now in a draft form and open to consultation. This work will help assure staff to feel confident in using procedures and ensure effective compliance with our Safeguarding responsibilities under the Act.</p>
<p>RM/A005: Support the Assistant Director for Integration to develop a more joined up approach to developing preventative services that are aligned to the Social Services and Well-being (Wales) Act and Well-being of Future Generations Act to better promote independent living in relation to Adults.</p>	31/03/2019	50	Green	<p>Both Integrated Care Fund (ICF) and DTG funding has been successfully utilized to established small community groups. The summary report was compiled and another round of applications will be considered in November.</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A006: Deliver the Citizens' Panel work stream and establish a Citizens' Panel that complies with requirements of the Social Services and Well-being (Wales) Act.	31/03/2019	50	Green	The regional work stream continues to meet and is working well. A group of people have been identified through the qualitative performance measures to work with us on our pilot 'Strengthening citizen engagement in the Annual Council Reporting Framework (ACRF) challenge process for Cardiff and Vale' to inform best practice in this area. We are working with an organisation called Tempo (formerly Spice), who are supporting us with this project, encouraging participation by giving citizens the opportunity to earn Time Credits.
RM/A007: Continue the work of the Regional Steering Group and the long term commitment of the previous Delivering Transformation Grant associated with delivery of new Social Services legislation.	31/03/2019	50	Green	The Regional Steering Group continues to work well. The associated workstreams are in place and meet on a regular basis. The workstreams are led by senior member of the management team and each has developed a project brief which outlines the key actions they are required to deliver on. Colleagues from across the regions are working together to ensure they are achieved.
RM/A008: Support the Welsh Government review and further implementation of the National Performance Measurement Framework in line with the new requirements of the Social Services and Well-being (Wales) Act going forward.	31/03/2019	50	Green	The region is supporting Welsh Government in the development of a new Performance and Review Framework. Heads of Service are participating in workshops which give them the opportunity to shape the detail of the new Framework, and the Regional Coordinator for Sustainable Social Services is representing the region on the Quantitative Writing group, providing technical expertise and developing new requirements for the quantitative data and accompanying guidance.
RM/A026 (BM/A026): Continue to identify opportunities for joint commissioning where it can be evidenced to be of benefit in line with duties set out in Part 9 of the Social Services and Well-being (Wales) Act (Collaboration and Partnerships).	31/03/2019	50	Green	Regional work is now in place with the Reflect Project and Adult Advocacy Service. The Fee and Contracting Group continue to meet regularly to discuss and identify joint working possibilities.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH008</b>				
AS/A005: Continue to develop the Customer Contact Centre as the single point of access for community health and social care services through expanding the range of services which it coordinates and enables.	31/03/2019	50	Green	The Single Point of Access (SPoA) is central to initial proposals to address issues outlined in the Parliamentary review of Health and Social Care. The Customer Contact Centre continues to also explore opportunities for further developing our single point of access for health and social care. We have progressed towards the consultation phase in quarter 2 and the feedback from the sessions will be collated and considered. We have also secured £1.3million Transformation Bid funding (which relates to a 2 year period) to further integrate services in relation to GP triaging. This model will allow us to meet recommendations outlined in the Parliamentary Review and develop a more seamless approach to care for our citizens. We are awaiting the outcome of engagement work currently under way before a way forward is identified.
AS/A014: Undertake further expansion of the Adult Placement Scheme.	31/03/2019	50	Green	In Q2 10 new referrals have been received. Social Care Officer and Project Workers are currently working to complete adult plans and matching to appropriate hosts. We have received 4 new host applications and 2 are being progressed to assessment. 2 hosts were approved at Panel to provide respite. We continue to consider regional working. We also continue to work closely with Shared Lives co-ordinator to develop our service further.
AS/A023: Develop a Learning Disability Commissioning Strategy to ensure we can effectively meet the needs and outcomes of our service users both now and in the future.	31/03/2019	50	Green	A Draft Strategy was presented to SLG on the 28/09/18 and the Learning Disability Partnership Group on the 09/10/18 for their comments. The Strategy is to be presented at Vale Scrutiny on the 06/11/18. A final version is aimed for completion in early 2019.
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 Well-being Act.	31/03/2019	50	Green	Authorisation has been granted to commence an engagement exercise with Customer Relations, Adult Services and Health staff on how to meet the objectives following on from the Parliamentary Review of Health and Social Care in Wales. Staff meetings were held in September 2018 to launch the engagement with recommendations on a way forward expected

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				in January 2019. This work includes a review of options to improve the IAA process.
PD/A031: Continue to work with partners to improve self-service options to ensure that customers' enquiries are resolved as quickly as possible, complying with the Social Care and Well-being (Wales) Act 2014.	31/03/2019	50	Green	Authorisation has been granted to commence an engagement exercise with Customer Relations, Adult Services and Health staff on how to meet the objectives following on from the Parliamentary Review of Health and Social Care in Wales. Staff meeting where held in September to launch the engagement with recommendations on a way forward expected in January 2019. This work will include a review of options to make services available digitally.
PD/A032: Continue to strengthen and extend shared working between C1V and the Health Board to provide a more integrated service for the public.	31/03/2019	50	Green	Staff engagement towards the option of creating a seamless health, social care and wellbeing service in the contact centre environment to provide a more integrated service commenced in September 2018 and is expected to be completed by the end of October 2018. Recommendations relating to the development of the service in the future are expected in January 2019.
<b>AH009</b>				
AS/A024: Maximise access and the use of grant funding streams such as Integrated Care Funding to support the development of further integrated services.	31/03/2019	50	Green	Planned progress against all projects funded via ICF has been achieved as per the project plans with some minor exceptions which are being addressed. In addition, we have successfully secured ICF Capital funding for our Residential Care Homes that enables further developments to improve access to our services and the ability to explore improved models of care and inclusion of the community.
AS/A025: Improve communications with Mental Health Service in order to support effective transition for young people to move into Adult Mental Health Services.	31/03/2019	25	Red	1 Referral through TRIG this quarter. Integrated Managers have not been able to provide figures on other data. Have requested this be prioritised for Q3. Work continues on developing a joint regional Transition protocol.
AS/A026: Work with partners to develop locality models further in response to the recommendations of the Parliamentary	31/03/2019	50	Green	The Vale of Glamorgan Council worked with regional partners to prepare and submit a proposal for the Transformation bid. This was submitted in August with information regarding

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
Review.				approval due in September/October.
AS/A027: Implement the new Community Mental Health Teams Integrated model to support working age adults with mental health needs.	31/03/2019	50	Green	Vale Locality Mental health Team now in operation at Barry Hospital. Models of service delivery being piloted currently which will inform the roll out for the two Cardiff Locality Teams next year.
AS/A028: Work with partners to launch a 10 year Dementia Strategy to better integrate service via a multi-agency service model.	31/03/2019	50	Green	Vale Adult Services have worked alongside partners to develop the 'Team Around the Individual' Model to provide specialist dementia workers to support the Vale Community Response Team to be able to provide rehabilitation for people with cognitive impairment and dementia.
AS/A029: Further develop and enhance the Integrated Autism Service with a specific focus on enhancing links with other services, service users and their carers and the provision of training for professionals.	31/03/2019	50	Green	The Integrated Autism Service (IAS) has visited a range of stakeholders including the substance misuse team, housing, Into Work, supported living, homeless team etc. Staff have delivered two parent carer workshops to 48 parents. Staff have worked jointly with Barnardos to deliver the Sygnet parenting programme. Adults engaging with the service have participated in Social Eyes social skills training, a "skills for life" course looking at a range of skills needed to become more independent and will shortly embark on a "Get Cooking" with the support of the dietetics team.
<b>AH010</b>				
RM/A009: Continue full implementation of the Welsh Community Care Information System (WCCIS) for the Directorate with a focus on developing the financial aspects of the system.	31/03/2019	50	Green	The WCCIS Board has met and identified opportunities to acquire additional expertise to address some of the issues within the system. The finance module has received a positive reaction from operational staff and therefore we will commence implementation.
<b>AH011</b>				
AA/A014: Work in conjunction with the Corporate Safeguarding Group to identify, develop and implement current priorities relating to education services.	31/03/2019	50	Green	The Training Log and systems are in place, giving sanctions and encouragement to ensure training is attended. Safer recruitment changes have been agreed. Compliance was 100% in September. The corporate safeguarding group continue to meet.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
HR/A002: Continue to support and monitor the application of the Council's Safer Recruitment Policy.	31/03/2019	50	Green	Regular reports and updates are provided regarding the application of the safer recruitment policy. Compliance is as follows; July 80%, August 100% and September 98%. There has been an increase in compliance especially for the busiest period of September. Regular monitoring will continue.
RM/A010: Enable the Corporate Safeguarding Group to continue to focus on delivery of Corporate Safeguarding Action Plan and put in place appropriate mechanisms to monitor compliance of the Policy across the Council for all relevant staff, contractors and volunteers.	31/03/2019	50	Green	During this quarter we have continued to work with and representatives from other Directorates who provide reports and information in relation to their safeguarding activities. Delivery of the Corporate Safeguarding Action Plan continues to be monitored regularly by the Corporate Safeguarding Group.
RM/A011: Develop and implement training workshops for staff in respect of safeguarding enquiries relating to Adults at Risk.	31/03/2019	70	Green	The OM for Safeguarding is part of the Project Board for the All Wales Safeguarding Procedures. In line with the development of these procedures it is anticipated that there will be training events and materials that will be utilised to further progress this area of work. A mandatory safeguarding e-module has been developed and being launched November 2018.
RM/A012: Support the completion of the review of the All Wales Child and Adult Protection Procedures.	31/03/2019	50	Green	The first chapter of the review has been sent out for consultation this quarter, the second has been considered by a development workshop and will be reissued. This work is planned to take place over more than one year and will help staff to feel more confident in using the procedures.
RM/A013: Implement agreed recommendations arising from the 2017/18 Safeguarding Internal audit work.	31/03/2019	75	Green	Roll out of this module is scheduled for November 2018 in line with National Safeguarding Week.
<b>AH012</b>				
The work on implementing the care package approval process was completed during quarter 4 2017/18. We continuously review our arrangements to ensure the mechanisms remain effective in supporting hospital discharges.				



Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<b>AH013</b>				
RM/A014 (BM/A014): Work with our partners regionally to develop an Accommodation with Care Strategy to promote independent living.	31/03/2019	100	Green	The Accommodation with Care Strategy has been completed and presented at Scrutiny. The Housing, Health and Social Care Board has been established to take forward the recommendations.
<b>AH014</b>				
RM/A015: Collate and review a data set linked to Child Sexual Exploitation, to enable the authority to analyse the safeguarding activity and outcomes in this area.	31/03/2019	70	Green	Monthly information is regularly provided to the authority by the lead Child Sexual Exploitation (CSE) officer, one method is through the strategy meetings. Cases are evaluated based on the critical enquiry framework and are reported to the Regional Safeguarding Children's Board (RSCB).
<b>AH015</b>				
AH015: Improve procedures with providers of nursing, residential and domiciliary care providers to enable early intervention and prevent the escalation of incidents. The Operation Jasmine Action Plan was supersede by the 3-year business plan for the Regional Adults Safeguarding Board last year. Some actions remain ongoing and are regularly monitored on a quarterly basis by the Board.				
<b>AH016</b>				
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.	31/03/2019	25	Red	Progress halted pending outcome of SRS consultation on Trading Standards budget savings.
SRS/A015a: Undertake monitoring of outbreaks of communicable disease in schools.	31/03/2019	50	Green	In quarter 2, 13 outbreaks were investigated; 4 in Bridgend, 4 in Cardiff and 5 in the Vale of Glamorgan. There were 5 outbreaks in care homes, 5 in schools and 3 in preschool/nursery setting. All 13 were suspected Norovirus. 489 Communicable Disease cases were investigated, 404 were confirmed and 85 suspected.
SRS/A017: Perform an Annual Food Inspection of premises that undertake commercial activities that includes vulnerable people in accordance with the Food Law Enforcement Service Plan.	31/03/2019	50	Green	The Food Law Enforcement Service Plan is now complete. The Plan was approved by Shared Regulatory Services Joint Committee on 18th September 2018.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
SRS/A025: Conduct an underage sales exercise in relation to on line alcohol delivery sales to a person under the age of 18.	31/03/2019			Activity in relation to this action is not planned to commence until later in the financial year. Works are planned for quarter 3.

## APPENDIX 2: Performance Indicators

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

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
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. To be reported at quarter 4.
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. To be reported at quarter 4.
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. To be reported at quarter 4.
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. To be reported at quarter 4.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>What difference have we made?</b>						
CPM/187: Percentage of clients accessing substance misuse services who reported an improvement in their quality of life.	74.3%	No data reported	67%	N/A	N/A	No update has been provided at quarter 2.
CPM/191: 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 performance indicator. To be reported at quarter 4.
CPM/236: Percentage of problematic substance misuse clients accessing treatment who maintain or reduce their substance misuse.	N/A	No data reported	N/A	N/A	N/A	Establishing baseline. No update has been provided at quarter 2.
<b>How well have we performed?</b>						
CPM/096: Percentage of attendance at Flying Start childcare.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/111: Percentage of eligible Flying Start children that take up childcare offer.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/170: Percentage of users showing satisfaction with a Families First service accessed.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/192: Number of participations of children and young people in the 5x60 scheme.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/196: Percentage of Council catered schools that offer healthy food options.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/248: Percentage of individuals who exit substance misuse treatment in a planned way.	N/A	No data reported	N/A	N/A	N/A	Establishing baseline. No update has been provided at quarter 2.
CPM/249: Percentage of substance misuse treatment commencements within 20 working days.	N/A	No data reported	80%	N/A	N/A	Establishing baseline. No update has been provided at quarter 2.
<b>How much have we done?</b>						
CPM/028: Number of sports clubs which offer either inclusive or specific disability opportunities.	50	54	52	Green	↑	Presently there are 54 organisations offering inclusive opportunities. The Senior Healthy Living Officer (disability) is seeking to progress Insport accreditation with an additional

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
						identified club.
CPM/197: Number of Green Flag Parks.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 3.

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

Please note: 2018/19 will be the first complete year where the Department has used the Welsh Community Care Information System (WCCIS). WCCIS was introduced in late November 2017 replacing the former e-Swift system for the management of all Social Services records. During quarter 1 & 2 priority was given to cleansing data after the migration from e-Swift and the development of performance management report writing skills. We are now in a position to report on the majority of performance measures, having developed the scripts necessary to facilitate this, and others are in development in readiness for reporting from Quarter 3 and Quarter 4. However, due to the ongoing cleansing of data and the absence of quality checks while skills to manage the new system were developing, the accuracy of the data we are able to report on, in some cases, cannot be validated. Ensuring the accuracy of the performance measures through WCCIS will be a priority for the directorate however this is expected to take time to achieve.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
CPM/060 (SSM/027): The percentage of re-registrations of children on local authority Child Protection Registers (CPR).	0%	No data reported	10%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/098: Percentage of adult service users receiving a direct payment.	N/A	N/A	N/A	N/A	N/A	Annual well-being national indicator. To be reported at quarter 4.
CPM/203: 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	Annual well-being national indicator. To be reported at quarter 4.
<b>What difference have we made?</b>						
CPM/026: 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 performance indicator. To be reported at quarter 4.
CPM/050: The percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 3.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
or work based learning without an approved external qualification.						
CPM/057 (SSM/019) (PAM/025): The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	1.2	2.33	2.5	Green	↓	No update has been provided at quarter 2.
CPM/058 (SSM/020a): The percentage of adults who completed a period of reablement a) and have a reduced package of care and support 6 months later.	8.57%	No data reported	10%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/059 (SSM/020b): The percentage of adults who completed a period of reablement b) and have no package of care and support 6 months later.	77.14%	No data reported	75%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/107: 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 performance indicator. To be reported at quarter 4.
<b>How well have we performed?</b>						
CPM/056 (SSM/018): The percentage of adult protection enquiries completed within statutory timescales.	100%	No data reported	100%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/112: Percentage of Supporting People clients satisfied with the support they have received.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/206: Percentage of telecare customers satisfied with the telecare monitoring service.	96.9%	No data available	97%	N/A	N/A	Annual performance indicator. The annual survey of Telecare customers has been delayed and will start during quarter 3. Satisfaction levels will now be reported in quarter 4.
CPM/207: Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	79.53%	No data reported	85%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
CPM/208: Percentage of care and support	90.95%	No data	91%	N/A	N/A	No update has been provided at quarter 2.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
plans for children that were reviewed within agreed timescales (WG interim data set).		reported				Please see note above.
<b>How much have we done?</b>						
CPM/209: Number of new Telecare users.	182	No data reported	188	N/A	N/A	No update has been provided at quarter 2. Please see note above.

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

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

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
There are currently no additional national measures reported under this section.						
<b>What difference have we made?</b>						
PAM/042: Percentage of National Exercise Referral Scheme (NERS) clients who reported an increase in leisure minutes at 16 weeks.	N/A	81.8%	90%	Amber	N/A	Establishing baseline. Although new staff have been put in place, hours are still lower than establishment figures prior to staff taking Maternity leave. The team are working hard to correct the difference but the numbers are still below last year's level as staff are in work less hours so there is less chance of follow up of clients.
<b>How well have we performed?</b>						
PAM/041: Percentage of National Exercise Referral Scheme (NERS) clients who continued to participate in the exercise programme at 16 weeks.	46.03%	40%	46%	Red	↓	Although new staff have been put in place, hours are still lower than establishment figures prior to staff taking Maternity leave. The team are working hard to correct the difference but the numbers are still below last year's level as staff are in work less hours so there is less chance of follow up of clients.
<b>How much have we done?</b>						
PAM/017: Number of visits to local authority sport and leisure facilities during	4,732.41	4,598.9	4,750	Amber	↓	Qtr 2 total usage was 281,508 compared with Qtr 1 of 319,518. Qtr 2 is normally lower due to

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
the year where the visitor will be participating in physical activity per 1,000 population.						the time of year. We are still awaiting some information from schools.

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

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
<b>Population Indicator</b>						
There are currently no additional national measures reported under this section.						
<b>What difference have we made?</b>						
SSM/025: The percentage of children supported to remain living within their family.	67.34%	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/034a: The percentage of all care leavers who are in education, training or employment at 12 months after leaving care.	43.75%	No data reported	45%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/034b: The percentage of all care leavers who are in education, training or employment at 24 months after leaving care.	53.33%	No data reported	53%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/001: Percentage of people reporting that they live in the right home for them.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/002: Percentage of people reporting they can do what matters to them.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/003: Percentage of people reporting that they feel safe.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/004: Percentage of people reporting	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
that they feel a part of their community.						reported at quarter 4.
SSM/005: Percentage of people reporting they feel satisfied with their social networks.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/006: Percentage of children and young people reporting that they are happy with who they live with.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/017: Percentage of People reporting they chose to live in a residential care home.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.

#### How well have we performed?

SSM/023: 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 national performance indicator. To be reported at quarter 4.
SSM/024 (PAM/028): The percentage of assessments completed for children within statutory timescales.	90.12%	No data reported	91%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/026: The percentage of looked after children returned home from care during the year.	2.82%	No data reported	6%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/030: The percentage of children seen by a registered dentist within 3 months of becoming looked after.	61.11%	No data reported	60%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/021: The average length of time older people (aged 65 or over) are supported in residential care homes.	797.22 days	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/022: Average age of adults entering residential care homes.	78.68 years	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/028: The average length of time for all children who were on the Child Protection Register during the year.	254.09 days	No data reported	N/A	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/029a: Percentage of children	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be



Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
achieving the core subject indicator at key stage 2.						reported at quarter 4.
SSM/029b: Percentage of children achieving the core subject indicator at key stage 4.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/032: 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.	3.23%	No data reported	12%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/031: The percentage of looked after children registered with a GP.	98.21%	No data reported	99%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/033 (PAM/029): The percentage of looked after children on 31 March who have had three or more placements during the year.	5.70%	No data reported	9%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
SSM/035: The percentage of care leavers who have experienced homelessness during the year.	5.50%	No data reported	12%	N/A	N/A	No update has been provided at quarter 2. Please see note above.
PAM/026 (SSM/015): Percentage of carers reporting they feel supported to continue in their caring role.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
PAM/024 (SSM/013): Percentage of adults who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
PAM/027 (SSM/013): Percentage of children who are satisfied with the care and support that they received.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/007: Percentage of people reporting they have received the right information or advice when they needed it.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/008: Percentage of people reporting they have received care and support	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.

Performance Indicator	Q2 2017/18	Q2 2018/19	Q2 Target 2018/19	RAG Status	Direction of Travel	Commentary
through their language of choice.						
SSM/009: Percentage of people reporting they were treated with dignity and respect.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/010: Percentage of young adults reporting they received advice, help and support to prepare them for adulthood.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/011: Percentage of people with a care and support plan reporting that they have been given written information of their named worker in social services.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/012: Percentage of people reporting they felt involved in any decisions made about their care and support.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/014: Percentage of parents reporting that they felt involved in any decisions made about their child's care and support.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
SSM/016: Percentage of carers reporting they felt involved in designing the care and support plan for the person that they care for.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
<b>How much have we done?</b>						
There are currently no additional national measures reported under this section.						