

Name of Committee:	Healthy Living and Social Care Scrutiny Committee
Date of Meeting:	05/03/2019
Relevant Scrutiny Committee:	Healthy Living and Social Care
Report Title:	Quarter 3 (2018-19) Performance Report: An Active & Healthy Vale
Purpose of Report:	To present the performance results for quarter 3, 1st April-31st December 2018 for the Corporate Plan Well-being Outcome 4, 'An Active & Healthy Vale.'
Report Owner:	Lance Carver, Director of Social Services and Sponsoring Director for Well-being Outcome 4, 'An Active & Healthy Vale'.
Responsible Officer:	Huw Isaac, Head of Performance and Development
Elected Member and Officer Consultation:	The performance report applies to the whole authority. 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. Consultation has been undertaken with relevant Sponsoring Directors, Corporate Management Team, the Head of Performance & Development and the Operational Manager, Performance and Policy.
Policy Framework:	This is a matter for Executive decision by Cabinet.

Executive Summary:

- The performance report presents our progress at quarter 3 (1st April to 31st December 2018) towards achieving our Corporate Plan Well-being Outcomes for year 3 of the Corporate Plan 2016-20 as aligned to Well-being Outcome 4, 'An Active & Healthy Vale'.
- Overall, we have made good progress in delivering our Corporate Plan priorities 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 contributed to an overall green status for the Outcome at quarter 3 (Q3).
- 96% of planned activities aligned to 'An Active & Healthy Vale' have been attributed a green performance status reflecting the exceptional progress made during the quarter. 4% of planned actions aligned to this Well-being Outcome have been attributed a red status. There is a need to progress work in relation to launching a 'Buy with Confidence' scheme and conducting an underage sales exercise in relation to alcohol sales.
- Of the 31 performance measures aligned to this Well-being outcome, 17 are annual measures and consequently these will be reported at the end of the year. Of the 7 measures where data was provided at quarter 3, 2 were attributed a green performance status and 5 a red status. The PI's that were categorised as red relate to the percentage of re-registrations of children on LA Child Protection Registers; the percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training or work based learning without an approved external qualification; the rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over; the percentage of adult protection enquiries completed within statutory timescales and the number of new Telecare users.
- The report seeks elected members' consideration of Q3 performance results as aligned to Well-being Outcome 4 and the proposed remedial actions to address areas of identified underperformance and to tackle the key challenges identified. That upon consideration, the Committee refers their views and recommendations to Cabinet for their consideration and approval.

1. Recommendation

- 1.1** 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'.
- 1.2** That members consider the remedial actions to be taken to address areas of underperformance and to tackle the key challenges identified, with their views and recommendations referred thereafter to Cabinet for their consideration and approval.

2. Reasons for Recommendations

- 2.1** 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.

- 2.2** 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.

3. Background

- 3.1** 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.
- 3.2** 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.
- 3.3** 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.
- 3.4** 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).
- 3.5** 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.
- 3.6** 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 a 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.

4. Key Issues for Consideration

- 4.1 An overall **GREEN** RAG status has been attributed to Well-being Outcome 4, 'An Active and Healthy Vale', to reflect the excellent progress made towards achieving improved outcomes for residents and our customers during the quarter.
- 4.2 At quarter 3, 45 (96%) of the 47 Service Plan actions attributed to this Well-being Outcome are on track to be delivered giving an overall green performance status for actions.
- 4.3 Of the 31 performance measures aligned to this Well-being outcome, 17 are annual measures; consequently these will be reported at the end of the year. Of the 7 measures where data was provided at quarter 3, 2 were attributed a green performance status and 5 a red status.
- 4.4 In relation to the Objective 'encouraging and promoting active and healthy lifestyles' 100% of actions are on track for delivery giving an overall green performance status reflecting the excellent progress made at Q3.
- 4.5 94% (34) of actions were attributed a green performance status in relation to the Objective 'Safeguarding those who are vulnerable and promoting independent living'. 6% (2) of planned actions aligned to this objective have been attributed a red status and as a result there is a need to progress the launch of the 'Buy with Confidence' scheme and the delivery of an underage alcohol sales scheme.
- 4.6 2/16 PI's aligned to Objective 7 'encouraging and promoting active and healthy lifestyles' were attributed a green performance status. 11 of the indicators are annual indicators therefore will be reported at end of year. Data was not reported for 4 applicable indicators.
- 4.7 Of the 15 measures aligned to Objective 8, 'safeguarding those who are vulnerable and promoting independent living', 6 are annual and 9 are reported quarterly. Data was available for 5 measures all of which were attributed a red status. The PI's that were categorised as red relate to the percentage of re-registrations of children on LA Child Protection Registers; the percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training or work based learning without an approved external qualification; the rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over; the percentage of adult protection enquiries completed within statutory timescales and the number of new Telecare users. 4 measures have not been reported due to the issues that continue to be experienced with extracting data from the Welsh Community Care Information System.
- 4.8 A detailed report outlining the progress this quarter towards achieving Well-being Outcome 4 is provided at **Appendix A**.

- 4.9** 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**.

5. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?

- 5.1** Performance Management is an intrinsic part of corporate governance and integrated business planning which underpins the delivery of the Council's Corporate Plan and its Well-being Outcomes. Our Corporate Plan has been structured around the Well-being of Future Generations (Wales) Act 2015, through the development of four Well-being Outcomes and eight Well-being Objectives. By aligning our Well-being Outcomes in the Corporate Plan with the Well-being Goals of the Act, this will enable us to better evidence our contribution to the Goals.
- 5.2** Performance reporting is an important vehicle for showing our progress, not only in terms of impacts across the national well-being goals through achievement of our well-being objectives but also in terms of the changes and improvements made in our approach to integrated planning.
- 5.3** The five ways of working are a key consideration in our corporate Performance Management Framework ensuring that we continue to focus on working differently and in an inclusive way to challenge why, what and how we respond to our key performance challenges.

6. Resources and Legal Considerations

Financial

- 6.1** 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.
- 6.2** 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.

Employment

- 6.3** There are no direct workforce related implications associated with this report. However, there are a number of issues and risks contained within the performance report that if not effectively managed have the potential to impact on our staff establishment and performance overall. This may in turn impact adversely on achievement of key outcomes associated with this Well-being Outcome.

Legal (Including Equalities)

- 6.4 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.
- 6.5 The Well-being of Future Generations (Wales) Act 2015 requires the Council to set and publish annual Well-being Objectives that maximise its contribution to achieving the Well-being goals for Wales and report its progress in meeting these.

7. Background Papers

[Corporate Plan Summary Report \(Q3 2018/19\)](#)



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, seven measures could be allocated a RAG status, these measures are in relation to the 'number of Green Flag Parks', 'number of sports clubs which offer either inclusive or specific disability opportunities' which was attributed a green status, 'the percentage of re-registrations of children on local authority Child Protection Registers (CPR)', 'the percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training or work based learning without an approved external qualification', 'the rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over', 'the percentage of adult protection enquiries completed within statutory timescales', and the 'number of new Telecare users' and the number of which were attributed a red status.

Of the 31 measures applicable to this Outcome, 17 are annual measures so are not available for reporting until end of year. Data was available for 7 measures, 2 were attributed a green status and 5 were red; 4 are awaiting external information/verification and the remaining 4 measures have not been reported due to the issues that continue to be experienced with extracting data from the Welsh Community Care Information System.

1.1 PERFORMANCE SNAPSHOT

ACTIONS				
Our performance against the Corporate Plan actions is on track for delivery, giving us an overall GREEN RAG status for this outcome				
Service Plan Actions				
Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total
			0	11

PERFORMANCE MEASURES				
Our performance against performance measures is on track, giving us on overall RED RAG Status against this outcome				
Performance Measures				
Objective 7: Encouraging and promoting active and healthy lifestyles				
			N/A	Total
			14	16

Objective 8: Safeguarding those who are vulnerable and promoting independent living				
			N/A	Total
			0	36
Total for the Outcome				
			N/A	Total
			0	47



Objective 8: Safeguarding those who are vulnerable and promoting independent living				
			N/A	Total
			10 ¹	15
Total for the Outcome				
			N/A	Total
			24	31

1.2 Objective 7: Encouraging and promoting active and health lifestyles

Of the 16 indicators identified for Objective 7, 10 are annual and 5 are quarterly with one annual measure reported at quarter 3. Data was available for two measures this quarter; CPM/028 the number of Sports Clubs offering inclusive or specific disability opportunities was and CPM/197: Number of Green Flag Parks, both were attributed a green status. Data was not reported for 4 applicable 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	
AH1: Work in partnership to deliver a range of activities through our leisure, community facilities and parks to increase levels of participation and physical activity. (2019/20)	7		
AH2: Work with partners to deliver the Cardiff and Vale Substance Misuse Commissioning Strategy 2013-2018, providing support, information and effective interventions. (2017/18)	1		
AH3: Work in partnership to deliver a comprehensive play programme that improves the well-being of children and their families. (2019/20)	1		









¹ 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 3, the priority continues to be given to the cleansing of 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 4. However, due to the ongoing cleansing of data and, the accuracy of the data 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 5 PIs this quarter.

Corporate Health Actions	Action		Direction of Travel compared to previous quarter status
	Service Plan Actions	Action Status	
AH4: 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	All actions completed at quarter 1	N/A
AH5: 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)	2		
AH6: Achieve Green Flag status for 7 parks as a mark of excellence, demonstrating good amenities and community involvement in the parks. (2017/18)	0	All actions completed at quarter 1	N/A

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

Of the 15 indicators identified for Objective 8, 6 are annual and 9 quarterly. Data was available for 5 measures, CPM/060 (SSM/027) the percentage of re-registrations of children on local authority Child Protection Registers (CPR), CPM/050 the percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training 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, CPM/056 (SSM/018) the percentage of adult protection enquiries completed within statutory timescales and CPM/209 the number of new Telecare users . All 5 measures were attributed a red status.

Corporate Plan Actions	Action		Direction of Travel compared to previous quarter
	Service Plan Actions	Action Status	
AH7: Implement new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work streams of: <ul style="list-style-type: none"> • provision of information • advice and assistance services • eligibility/assessment of need • planning & promotion of preventative services • workforce • performance measures (2016/17) 	12		
AH8: Improve access to health and social care services by improving the speed, simplicity and choice of how to access services. (2018/19)	6		
AH9: Work with partners to progress the integration of adult social care and community health services. (2018/19)	6		

Corporate Plan Actions	Action		Direction of Travel compared to previous quarter
	Service Plan Actions	Action Status	
AH10: Explore options for single integrated ICT systems and integrated budgets across the Cardiff and Vale region for social care. (2018/19)	1		
AH11: Develop and implement a corporate policy on safeguarding to provide a clear strategic direction and lines of accountability across the Council. (2016/17).	6		
AH12: 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
AH13: Review accommodation with care options for older people and develop our commissioning strategy for future years. (2016/17)	0	All actions completed at quarter 2	N/A
AH14: Work with partners through the Cardiff and Vale Local Safeguarding Children's Board to develop a Child Sexual Exploitation Strategy. (2016/17)	1		
AH15: 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
AH16: 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 3 period.

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

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
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	50			<i>The completion date for this action is 31/03/2019.</i> Work on preparation for the scheme has begun again however the launch has been rescheduled for later in the

Service Plan Action	% Complete	RAG Status	Direction of Travel	Commentary
tradesperson whilst supporting reputable businesses with a 'Trading Standards approved' endorsement.				year following the hiatus in progress caused by the staff consultation on Trading Standards budget savings which was underway.
SRS/A025: Conduct an underage sales exercise in relation to on line alcohol delivery sales to a person under the age of 18.	0	R	N/A	<i>The completion date for this action is 31/03/2019.</i> Due to a number of vacancies within the Trading Standards team this action has been moved to quarter 4.

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	Direction of Travel	Commentary
CPM/060 (SSM/027): The percentage of re-registrations of children on local authority Child Protection Registers (CPR).	No data available	15%	10%	N/A	Cleansing of data within WCCIS continued at pace throughout Quarter 3. Confidence is improving in the performance figures being seen. An accurate performance figure will be provided at Quarter 4.
CPM/050: The percentage of all Year 11 LAC pupils in any LA maintained school, who leave compulsory education, training or work based learning without an approved external qualification.	0.10%	12%	0%		Please note this is a provisional figure. Previous provision and Careers Wales have been contacted to see if these pupils have remained in education. Figure may therefore fall.
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.	No data available	4.16	2.5	N/A	Capacity within and viability of the Domiciliary Care sector continues to remain a significant challenge and therefore has impacted negatively on Delayed Transfers of Care.
CPM/056 (SSM/018): The percentage of adult protection enquiries completed within statutory timescales.	No data available	74.09%	100%	N/A	No commentary was provided at quarter 3.
CPM/209: Number of new Telecare users.	No data available	232	281	N/A	Although we missed the target during Quarter 3 we are on track to achieve a cumulative performance of 290 by Quarter 4 that will exceed the target of 281.

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:

- Excellent progress has been in delivering the Vale's Physical Activity Plan and evidence through a variety of projects shows that the work of the Council and its partners is having a positive impact with the latest obesity data showing that the Vale has the lowest obesity levels in Wales.
- Continuing to provide play opportunities for children and young people across the Vale to help develop and encourage healthier lifestyles into adulthood and all our play schemes promote inclusive activities for children who are disabled and children and young people with adverse childhood experiences.
- 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.
- Working proactively with schools to determine their requirements to get more pupils walking and cycling to and from school had have supported them in preparing bids to access Welsh Government funding to support this to encourage pupil participation.
- 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 e.g. Fferm Goch Walkway, St Brides, Rhose Active Travel route and Ogmre By Sea footway improvements.

Safeguarding continues to be a core priority across all Council services. Some key developments during quarter 3 have included:

- Continuing to regularly monitor and report on Safer Recruitment Policy compliance. Compared with the previous quarter our compliance has continued to improve during quarter 3, compliance was 100% in October, 96% in November and 100% in December.
- Although Safer Recruitment compliance by schools continues to fluctuate, amendments have been made to the Safer Recruitment Policy that have been agreed by the Corporate Safeguarding Group and are currently under consultation with schools. Compliance with mandatory safeguarding training continues to improve following the implementation of enhance systems.
- In response to the recommendations arising from the 2017/18 safeguarding internal audit an iDev mandatory Safeguarding module was developed and rolled out to all Vale of Glamorgan employees during November 2018. Completion and compliance will continue to be monitored by the Corporate Safeguarding Group.
- A series of workshops have been undertaken to explore the 'Adult at risk' duty to report pathway with further sessions planned to refine this pathway. This work has been undertaken in anticipation of the new All Wales Safeguarding Procedures which will provide procedural support for handling individual cases.

- We have continued to embed and enhance the work of the Integrated Autism Service. During quarter 3, the Integrated Autism Service delivered a total of 15 training sessions for professionals and created links with approximately 450 staff across a variety of professions operating in the field of health and social care.

- A plan has been established to improve integrated working between Customer Relations, Telecare, Adult Services and Cardiff and Vale University Health Board (UHB) to create a unified service under the working title 'Well-being Matters'. This work will continue to progress throughout 2019.

- ICF projects continue to progress as planned, with additional bids for slippage monies being successfully brought to the Vale. Confirmation of capital funding for our Residential Care Homes has enabled planning for schemes including the provision of Dementia Friendly Homes. Additionally work with Housing colleagues has enabled some work such as the feasibility of the Penarth older person's provision of accommodation to be commissioned. We have also received confirmation that the Region has successfully been granted Transformation monies to support implementation of the recommendations of the Parliamentary Review for Health and Social Care. For example, the Head of Adult Services/Locality Manager is leading on the GP Triage Trial bringing together primary care and social prescribing through a platform that is already successfully being used within the Customer Contact Centre. The other aspects of this transformation work include the development of a short term night sitting/visiting service and the 'Get me Home' project that will assess people in their own homes for ongoing care and support instead of hospital will all commence in quarter 4.

- We have continued to progress our approach in relation to joint commissioning in line with Part 9 of the Social Services and Well-being (Wales) Act. Regional working is now fully established in relation to the Reflect Project and Adult Advocacy Service. Whilst the Fee and Contracting Group continue to meet regularly to discuss and identify joint working possibilities. The Joint Commissioning Group has also started to consider the requirements of the IPC's 'Let's Agree to Agree' toolkit for commissioners and providers in the setting of residential and nursing fees.

Positive progress continues to be made with the delivery of the leisure, sports and physical activity in the Vale of Glamorgan:

- The Sport Wales school survey highlighted that the Vale is one of the top 3 performing councils for participation levels in sport by children and young people. Combined with the Adult Sports Participation Survey the Vale of Glamorgan is currently the most physically active area of Wales.
- At the recent Vale Sport Management Board meeting, the Sports Wales representative indicated that the Vale's Sport Plan (LAPA) 6 month progress report was excellent and drew attention to the success and impact of the projects we have delivered. We have submitted our proposals to secure funding for the next financial year and are

<p>awaiting the result.</p> <ul style="list-style-type: none"> • A cross-directorate steering group has been established to consider the feasibility of transferring sports clubs to community sports clubs/groups. • The changing room refurbishments at Barry and Penarth and the electrical rewire of Barry Leisure Centre is progressing well. Legacy Leisure have also significant amount of their own funds into upgrading the fitness suite facilities available at Cowbridge Leisure Centre with the creation of a new gym area.
<p>We continue to successfully work with our partners to deliver a comprehensive play programme for children and their families. During quarter 3 the key highlights have included:</p> <ul style="list-style-type: none"> • The Families First Holiday Club has gained the Vale Quality Assurance Standard in recognition of the good quality of opportunity that it offers in relation to inclusive play for disabled children and young people. • The Vale of Glamorgan’s Senior Healthy Living Officer (Play) received a certificate of recognition at the Understanding of Disability Awards for her work in promoting positive understanding of people with a learning disability. • The Play Development team is working with Romilly, Cadoxton and Gladstone schools to develop play opportunities that are based on supporting children who have experienced trauma, Adverse Childhood Experiences (ACEs) and attachment issues.
<ul style="list-style-type: none"> • The Contact Centre and Adult Services continue to work together to provide a single point of access for community health and social care services. Quarter 3 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 undertaking a series of an engagement sessions during quarter 3 with staff from across both the council and health spectrums. An action plan containing proposals to further integrate systems, processes, services and teams has been developed for implementation into the next financial year. The proposals include the establishment of joint management teams, joint staff forums and working on joint induction and training plans. A more formal review of these proposals will be undertaken in 12 months to establish if proposals successfully contribute to achieving the recommendations outlined in the Parliamentary Review for seamless care delivery.
<ul style="list-style-type: none"> • Continued to focus on improving communications with the Mental Health Service to support effective transition of young people into Adult Mental Health Service. During the quarter we have held meeting with Cardiff and Vale University Health Board, CAMHS and Cardiff and Vale Local Authorities to discuss linking in with the developments associated with the Regional Transition Protocol. We have had discussions with the Vale’s Integrated Manager and the UHB’s PARIS Co-ordinator to assist in providing the data from PARIS of those in the transition age group.

1.6 OUR CHALLENGES

<p>Staff capacity has had an impact on delivery on the exercise referral scheme. During quarter 3, only 67.19% of clients reported an increase in their leisure minutes at 16 weeks and 56.63% of clients continued to participate in an exercise programme after 16 weeks. Although this is a slight improvement on the same period in the previous year, the performance has still been impacted by the staffing numbers. As a result of depleted staff numbers, there was insufficient staff available to provide support needed by clients to maintain their momentum and encourage them to increase their activity rates. Despite the staffing pressures we endeavour to seek ways to further engage and motivate clients to complete the programme.</p>
<ul style="list-style-type: none"> • 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.
<ul style="list-style-type: none"> • 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.
<ul style="list-style-type: none"> • Although significant strides forward have been made in strengthening our approach to Safer Recruitment across the authority, compliance by schools continues to fluctuate. To address this, amendments to the Safer Recruitment

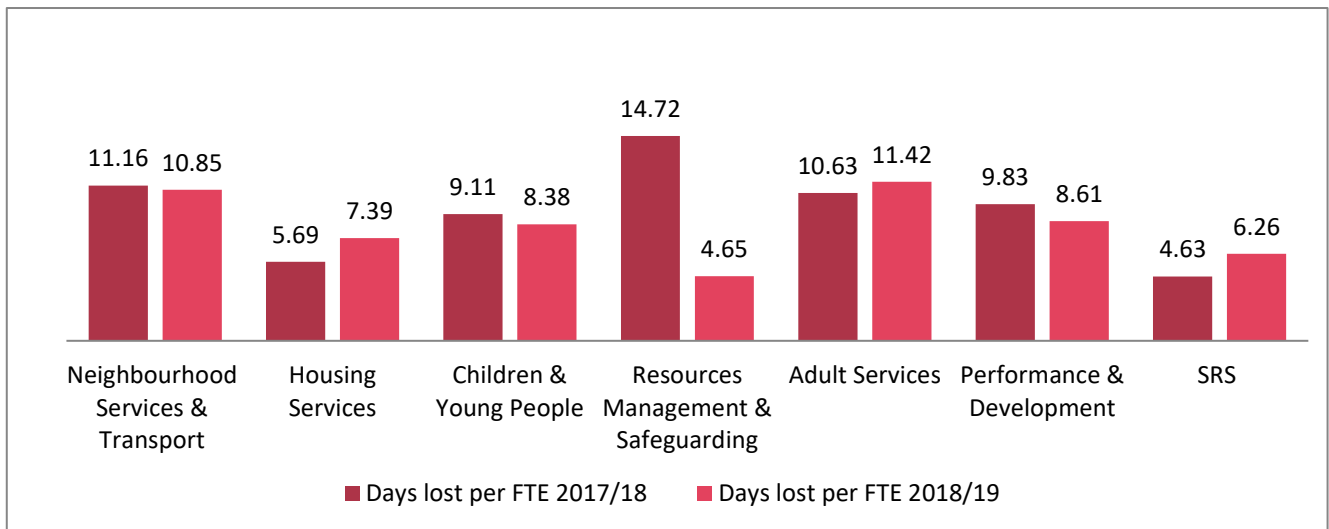
<p>Policy have been agreed by the Corporate Safeguarding Group and are currently out for consultation with schools.</p>
<ul style="list-style-type: none"> • Our performance in relation to Delayed Transfers of Care continues to be a challenge going into the winter months. For example, during quarter 3 the rate Delayed Transfers of Care was 3.74 per 1,000 population has missed the target of 2.5 per 1,000 population. This down turn in performance is to be expected, as we enter the winter months where the pressure on hospital beds continues to increase.
<ul style="list-style-type: none"> • The Deprivation of Liberty Safeguards (DoLS) Team continue to experience an inordinate demand for DoLS assessments which in turn places 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.
<ul style="list-style-type: none"> • Business Continuity and resilience issues continue to affect the implementation of the Welsh Community Care Information System. Particular vulnerability in relation to staffing resilience remains problematic. Although further staff training was delivered during quarter 3. 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. The longer term challenge is the readiness of our partners to adopt and implement the system. At the national level, the challenge is how we achieve a full roll out of the system on a regional footprint when the functionality of the system has also been problematic with local authorities.
<ul style="list-style-type: none"> • Although we continue to perform solidly in relation to visit to local authority sports and leisure facilities with 6,915.5 per 1,000 population our performance has dropped when compared to the same period in the previous year where there were 8,565.63 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.
<ul style="list-style-type: none"> • Although we continue to focus on providing a comprehensive and inclusive play programme across the Vale, demand for our Holiday Club provision, particularly the Families First operated club, exceeds the availability of places. Due to limitations on our resources and capacity we are unable to further expand this provision to more children.
<ul style="list-style-type: none"> • Equally, despite our progressive approach to working with partners, collaboration in relation to developing alternative models of service delivery remains an ongoing challenge in how we respond to the changing climate of diminishing resources. Linked to this is the availability of grant funding streams e.g. Integrated Care Fund impacting on our ability to continue to develop and commission services that focus on innovation and creating capacity whilst still meeting our statutory requirements to deliver core services. Reduction in grant funding streams and issues and delays at the regional level can also impact on our ability to further progress the integration of adult health and social care services and transform them in a timely way. A significant amount of investment will be required to facilitate further integration of services. There is also the danger that regional working has the potential to dilute service delivery at the local level affecting our ability to meet the needs of our citizens and improve their sense of well-being.
<ul style="list-style-type: none"> • Monitoring the quality assurance of our externally commissioned service providers is increasingly more challenging due to insufficient capacity and resources to undertake this work which is further compounded by the volatility of the external markets. This creates a situation where the quality of provision becomes difficult to monitor and manage to ensure that service can operate sustainably and continue to meet the needs of our citizens.

2.0 CORPORATE HEALTH: MANAGING OUR RESOURCES

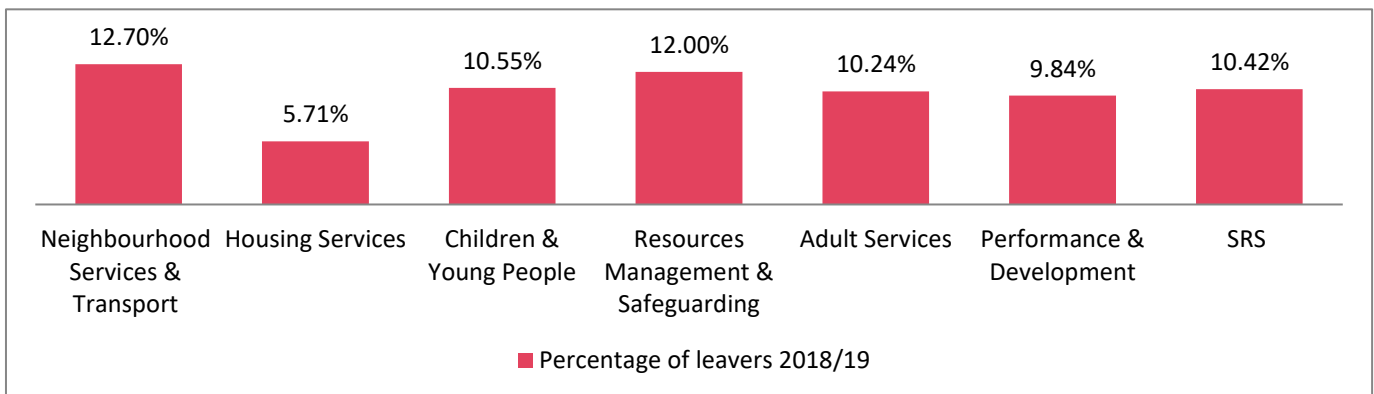


2.1 PEOPLE

Attendance management remains a corporate priority and we continue to closely monitor progress to help improve performance corporately. Between Quarter 3 2017/18 and Quarter 3 2018/19 the number of days lost per full time equivalent (FTE) due to sickness decreased by 0.86 days. Sickness absence decreased from 7.18 working days lost in Quarter 3 in 2017/18 to 6.32 days in Quarter 3 2018/19. The graph below shows sickness absence data for services contributing to this Well-being Outcome at quarter 3 for the past 2 years.



The total percentage turnover for services contributing to this Well-being Outcome during quarter 3 2018/19 can be seen in the chart below.



2.1 PEOPLE

The [sickness absence report](#) provides a review of attendance management across all council services during up to the Quarter 3 period 2018/19.

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 Quarter 3 include:

- The new Resources Managements, Safeguarding and Performance Division is bedding in and a number of vacant posts having now been filled. This restructure has added further resilience and capacity for the service. Further recruitment drives will continue into the early part of 2019.
- To address our business critical posts we continue to support the delivery of a bespoke recruitment campaign for our Social Work posts.
- There continues to be a focus on succession planning, for example within the Resource, Management and Safeguarding Division a number of posts have been recruited to and a Team Development Day was delivered. There is the plan to provide shadowing opportunities for a number of different roles early in 2019.
- Work continues to progress to secure a suitable premises for the merger of Training Teams for form the Regional Workforce Unit. Although the team is not yet co-located, relationships between the Team members continue to be built with joint booking and recording systems under development. The provision of Social Work Student Placements and Post Qualification opportunities via CPEL have been streamlined and are working effectively across the region. The Regional Training Team has been revising the Social Services Induction Programme to strengthen its linkages with the Corporate Induction Programme.

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 available in January 2019, 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 (Green status), Direct Payments (Green status), Charging and income generation (Green status), Reshaping Services Tranche 3-procurement (Green status for all social Services divisions and Youth Offending Service), Reshaping Establishment Review (Green status), residential care services (Green status), maximising reablement (Amber status), physical learning disability day service (Red status), review of older person's day centres (Red status). No RAG status was applicable for one project, in relation to 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 1st April – 30th November 2018 shows that Social Services currently has a balanced budget for 2018/19. Although Social Services are 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, whose budget is incorporated as part of the Neighbourhood Services and Transport Division. This Division's budgets are also projected to outturn on budget. With regard to Regulatory Services, the allocation 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 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. However, 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.

The Welsh Government continues to provide funding via grants such as the Intermediate Care Fund (ICF) and the Transformational Fund to support regional working; however the level of funding is not guaranteed on an ongoing basis. During December the Council also received notification from the Welsh Government of a one off in-year grant for 2018/19 to support Sustainable Social Services. The value of grant acquired by the Council was £513k and will be used to help address the workforce challenges and mitigate the pressure on Social Services (particularly in relation to Children's Services) as well as use the monies to enable us to better plan and manage demands on our resources as a result of the winter pressures.

2.3 ASSETS

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

- Ty Jenner continues to be developed as a hub for health and social care staff with additional staff due to be co-located at this premises by quarter 4. Work has also progressed with Barry Hospital to further support colocation of health and social care staff. The Locality Team continues to consider all assets to identify opportunities for further integration of services across the locality to support the wider agenda for developing seamless health and social care services.
- Good progress has been made in relation to reviewing the compliance of our Social Service assets (buildings) as well as those of Third Party providers with statutory requirements. All Baseline Property Assessments have been completed, so that we have a clear picture for all the properties that we own (within Social Services) who uses the property, and where the responsibility lies for compliance, which has enabled us to determine baseline requirements. These requirements 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 basis through bi-monthly compliance meetings. The next stage involves gaining clarity in relation to responsibility for co-location sites and for tenanted properties in order to identify any gaps in compliance. During quarter 4, contact will be made with all providers in these buildings to progress this work.
- 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. The electrical rewire of Barry Leisure Centre is progressing and Legacy Leisure has invested funds in a major upgrading of the fitness offer at Cowbridge Leisure Centre with the creation of a new gym area in the small hall.

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:

- Good progress has been made with the implementation of WCCIS with additional support has been secured from other Local Authorities and the Regional WCCIS Team in order to develop the finance functionality of the system. In addition, another ICF bid has been submitted in order to fund future developments. We have continued to focus on building resilience through the roll out of further staff training which commenced during quarter 3.
- 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.
- 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 3, the new Dewis Project Manager and Dewis Project Support Assistance are leading on the promotion of the resource directory across the region. They have been promoting Dewis at local events and are in the process of establishing a regional work stream to engage other Directorates to use Dewis as a resource for information provision, advice and access to preventative services. In the last year, we have seen an increase in the total number of registered users from 805 to 1,158 and in total number of resources available via Dewis has increased from 973 to 1,515.

However, limited progress has been noted in relation to some Adult Services-related ICT projects during the quarter. Slippage was in relation to the agile working technology within Adult Services, Adult Services contribution to the Digital Place strand as part of the Digital Strategy and in relation to updating the content and accessibility of our web-pages. These projects are dependent on other services within the Council outside of Adult Services to progress.

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 is continuing to progress well. We have written to a group of people identified through the qualitative performance measures work and we are now planning the first regional session with them to introduce them to the Annual Council Reporting Framework (ACRF) challenge process at the end of January. We are also working with Tempo who is 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. During quarter 3, engagement sessions were run with a cross-section of staff from the Council and the Cardiff and Vale University Health Board to identify proposals for new ways of working going forward. Proposals include the establishment of a joint management approach, integrated staff forum and joint training/ induction plan. New business opportunities are also being considered with the UHB for delivery via the Day Time Services element of our integrated Communications Hub at the Contact Centre.



















A number of consultations in relation to Social Services clients have been progressed to engage and consult with service users in relation to 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, young people and parent regarding the transition in relation to Child Health and Disability services and the preparations associated with the Welsh Government's qualitative measures work. 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 3 there were six corporate risks that are aligned to this Well-being Outcome, one was attributed a high risk rating (Deprivation of Liberty Safeguards), one was attributed a medium/high risk status (WCCIS), 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). The scores remain unchanged since the last update.




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 WCCIS where it is forecast that these risks will continue to reduce over time.

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 ²	Forecast Direction of Travel ³	
		Likelihood	Impact	Total			
CR10	Public Buildings Compliance	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			
CR14	Contract Management	1	3	3 M/L			
CR15	Welsh Community Care Information System (WCCIS)	2	4	8 M/H			

² **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.









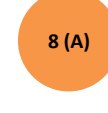

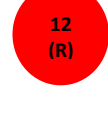

³ **Forecast direction of travel** anticipates the future direction of the risk by taking into account factors that are likely to impact on it.

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

2.7 SERVICE PLANS RISKS



There are a total of 24 service risks that are aligned to this Well-being Outcome. Of these, the direction of travel of one service risk is anticipated to increase over the coming months in relation to Capacity of Approved Mental Health Professionals (AMPs) to undertake reviews in line with the requirements of the Mental Health Act. 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.

A current status of Service Plan risks that have a bearing on this outcome are summarised below 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 /Low		
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		
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		

Risk Description	Service Area	Status		Direction	Forecast Direction
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)	↔	↔
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)	↔	↔

Risk Description	Service Area	Status		Direction	Forecast Direction
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	High	12 (R)	↑	↑
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)	↔	↔
Failure to obtain Waste and Transport Revenue and any necessary Capital Funding from Welsh Government including Leisure.	Neighbourhood Services and Transport	Medium	4 (Y)	↔	↔

Risk Description	Service Area	Status	Direction	Forecast Direction
Implementation of new legislation may create additional demands on service delivery.	Shared Regulatory Services	Medium /low		

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

Well-being Outcome Overall Status: Provides an overall RAG health check showing our performance status against the Well-being Outcome. The RAG status is taken as a combined performance of all actions and performance measures aligned to the Outcome.





Measures and Actions (RAG)		Direction of Travel (DOT)		Overall (RAG) Status Outcome	
	Green: Combined total of 85% or more Green actions and measures		Performance has improved and has increased in a RAG status when compared to the last quarter		Green: indicates that we are well on track to deliver the key outcomes and PIs relating to the Objectives as set out in the Corporate Plan.
	Amber: Combined total of 50% - 84% Green actions and measures		Performance has remained the same RAG status when compared to the last quarter		Amber: indicates that at this stage, we are on target to deliver the Objectives but some aspects need to be addressed in order to ensure we remain on track to fully achieve the Outcome.
	Red: Combined total of less than 50% Green actions and measures		Performance has slipped and has decreased in a RAG status when compared to the last quarter		Red: indicates that at this stage, we are not on target to deliver key outcomes and PIs relating to the Objectives as set out in the Corporate Plan.









Well-being Outcome Performance Snapshot Status: Provides an overall RAG health check showing our performance status against the Well-being Outcome for actions and performance measures. The RAG status for each is taken as a combined performance of all actions or performance measures aligned to the Outcome.

Measures			Actions	Direction of Travel (DOT)		Overall (RAG) Status for Actions or Measures	
	Green: Combined total of 85% or more Green measures		Green: Combined total of 85% or more Green measures		Performance has improved and has increased in a RAG status when compared to the last quarter		Green: indicates that we are well on track to deliver the key outcomes and PIs relating to the Objectives as set out in the Corporate Plan.
	Amber: Combined total of 50% - 84% Green measures		Amber: Combined total of 50% - 84% Green measures		Performance has remained the same RAG status when compared to the last quarter		Amber: indicates that at this stage, we are on target to deliver the Objectives but some aspects need to be addressed in order to ensure we remain on track to fully achieve the Outcome.
	Red: Combined total of less than 50% Green measures		Red: Combined total of less than 50% Green measures		Performance has slipped and has decreased in a RAG status when compared to the last quarter		Red: indicates that at this stage, we are not on target to deliver key outcomes and PIs relating to the Objectives as set out in the Corporate Plan.

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.

	Amber: Performance is within 10% of target		Performance has remained the same as the same quarter last year	 Amber: Minor delay but action is being taken to bring action back on track.		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.
	Red: Performance missed target by more than 10%		Performance has declined compared to the same quarter last year	 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.		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
Likelihood/Probability of Risk Occurring					

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 increased at last review
	Risk level decreased at last review
	Risk level unchanged 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
AH001				
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	75	Green	The recent school sport survey undertaken by Sport Wales has again highlighted the Vale as a top 3 performing Council in terms of participation levels. Combined with the adult sports participation survey the Vale of Glamorgan is currently the most physically active area of Wales.
NS/A035: Continue to invest in Leisure Centres including electrical installations and changing facilities at Penarth and Barry.	31/03/2019	75	Green	Work is progressing on Changing room refurbishments at Barry and Penarth. The electrical rewire of Barry Leisure Centre is also progressing. In addition Legacy Leisure have invested their own funds in a major upgrading of the fitness offer at Cowbridge Leisure Centre with the creation of a new gym area in the small hall.
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	75	Green	Sites that do not have the benefit of safe push button controlled pedestrian crossing services continue to benefit from a School Crossing Patrol service to ensure that children are able to walk safely to and from school.
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	75	Green	Transport: A number of S106 schemes have been designed (St Brides bus layby, Fferm Goch walkway to community centre) and are due to be constructed in the new year and a number are already in the construction phase (including Rhose Active Travel route, Ogmere by Sea footway improvements) and others are being designed (At Athan Active Travel, Maendy sustainable transport). In addition the Council has obtained £118k from Welsh Government Local Transport Fund to carry out additional WelTAG studies on the J34 of the M4 link to Cardiff Airport.
NS/A038 (VS/A039): Continue to assist Sports Clubs and other suitable organisations with potential Community Asset Transfers where	31/03/2019	75	Green	A cross directorate steering group has now been formed to look exclusively at the transfer of sports clubs. Meetings have continued with a number of clubs and priorities are being

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
there is a clear financial and community benefit for both the applicant and the Council.				established for transfers.
NS/A039: Implement the 2018/19 Local Authority Partnership Agreement (LAPA) resulting in increased physical activity opportunities.	31/03/2019	75	Green	At the recent Vale Sport Management Board, the Sport Wales representative indicated that the 6 month progress report was excellent, highlighting the successful progress and impact of the projects being delivered. Staff leaving the Healthy Living team/the time taken to recruit, and staff sickness has impacted on the delivery of some of the projects within the plan, however these are still progressing as existing staff are assisting with this by taking on additional work, but capacity is an issue within a small team. The proposal to secure funding for next financial year has been submitted and awaiting result.
NS/A048: Finalise and implement a Leisure Strategy for the Vale of Glamorgan.	31/03/2019	75	Green	The strategy was presented to Scrutiny Committee who have made recommendations back to Cabinet.
AH002				
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	75	Green	Guidance is still awaited in relation to a new Commissioning Strategy.
AH003				
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	75	Green	The Families First Holiday Club ran for 3 days during October half term, feedback was very positive. The club has gained the Vale Quality Assurance Standard highlighting the good quality of opportunity offered at the club. The demand for spaces at the provision is higher than availability of places. Requests have been received from parents of disabled children from Cardiff whose children attend Ysgol Y Deri special school (based in the Vale) who want their children to attend the Families First Holiday Club. As demand from Vale children currently outstrips availability we are not in a position to expand the provision to Cardiff children as well, unless Cardiff Council link into the project. They have been approached about this but are not currently interested in joint working on

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				<p>this project. Joanne Jones, the Vale's Senior Healthy Living Officer (Play) has recently received a certificate of recognition at the Understanding Disability Awards for her work in promoting a positive understanding of people with a learning disability. The Families First Holiday Club is receiving a high number of referrals for children with autism. Joanne Jones is currently undertaking a course which raises levels of understanding about autism amongst parents and professionals, and highlights strategies/coping mechanisms to support the inclusion of autistic children into the play provision. This information will be filtered down to the playworkers. The Play service is working with Romilly, Cadoxton & Gladstone schools to develop play opportunities, based around supporting children who have experienced trauma, Adverse Childhood Experiences (ACE's) and attachment issues. Play opportunities have been delivered by the Healthy Living Team at events in conjunction with partners including the Family Information Service at the Christmas Family Fun Day and the Events Team at the Halloween Event.</p>
AH004				
<p>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.</p>				
AH005				
<p>RM/A002: Contribute to the local Public Health Wales agenda by promoting and encouraging healthy eating and healthier lifestyles within our services.</p>	<p>31/03/2019</p>	<p>75</p>	<p>Green</p>	<p>We continue to make good progress in supporting the local Public Health Wales agenda for encouraging healthy eating and healthier lifestyles. Key highlights of progress made this quarter include: Excellent progress has been made in delivering the Vale Physical Activity Plan and evidence (through a variety of projects) shows that the work of the Council and its partners is having a positive impact with latest obesity data showing the Vale as having the lowest obesity levels in Wales. In addition, the recent school sport survey has also highlighted the Vale as the a top 3 performing council in</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				<p>terms of pupil participation levels, and combined with the adult survey makes the Vale of Glamorgan the most physically active area in Wales; We continue to provide play opportunities for children and young people across the Vale to help develop and encourage healthier lifestyles into adulthood and all our play schemes promote activities for all, including disabled, autistic spectrum disorders and children and young people with adverse childhood experiences. In fact demand for spaces is much higher than availability and we are exploring opportunities to expand provision for the future, funding permitting; 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 remain compliant with the nutritional regulations and all secondary schools remain compliant with food based standards from the regulations; We have continued working with local communities to maximise existing assets including improving access to green spaces, local playing facilities and community centres enabling them to offer increased opportunities to participate in leisure and physical activity; We proactively promote the 'availability of healthy options' awards (via Shared Regulatory Service) to food businesses in Cardiff and the Vale to encourage healthier lifestyles; Active Travel improvements including walkways and cycleways continue to be delivered across the Vale and these are being proactively being promoted to encourage more active travel lifestyles. In addition, we are also progressing a number of active travel and leisure schemes from S106 contributions and these will further contribute towards improved walking and cycling infrastructure within the Vale and encourage active lifestyles e.g. Fferm Goch walkway, St Brides, Rhoose Active Travel route, and Ogmore by Sea footway improvements; During the quarter, we have also worked proactively with schools to determine their requirements to get more pupils walking and</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				cycling to and from school and have supported them in preparing bids to access Welsh Government funding to support this in increasing pupil participation. The Head of Adult Service is engaged in the development of the well-being agenda and working with Public Health to ensure they are included in discussions regarding access and the development of Preventative Services.
SRS/A023: Work in partnership to increase activity in relation to Cardiff and Vale Tobacco Control Action Plan (underage tobacco sales).	31/03/2019	100	Green	Both investigations discussed in quarter 2 have now been concluded.
AH006				
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
AH007				
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	75	Green	An engagement piece exploring the roles of staff and teams within the Contact centre has taken place with a series of workshops and presentations taking place during Qtr3. Staff were advised of the findings of the engagement exercise and a plan to further integrate services and teams through joint management teams, joint staff forums and working on joint induction and training plans. Additionally, the project steering group is considering how the Contact Centre can move to a consistent name for all teams and services operating within the contact centre to help with identity and improve the customer and staff experience, meanwhile also supporting the

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				implementation of the recommendations of the Parliamentary review of health and social care for provision of seamless care for residents.
AS/A022: Promote the use of Dewis Cymru for the provision of information, advice and assistance for preventative services for adults.	31/03/2019	75	Green	The new Dewis Project Manager and Dewis Project Support Assistant are leading on the promotion of the resource directory across the region. They have been promoting Dewis at local events and are in the process of establishing a regional workstream to engage other directorates to use Dewis as a resource for information provision, advice and access to preventative services. In the past year we have seen an increase in the total number of registered users from 805, to 1,158, and in the total number of published resources from 973, to 1,515. Dewis can be accessed at https://www.dewis.wales/home
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	75	Green	The draft policy is currently out for consultation and implementation remains on track for April 2019.
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	75	Green	Challenges persist locally, regionally and nationally in securing sufficient placements to meet need. The Vale has contributed to the work of 4Cs in retendering its residential contract with the intention of attracting a greater number of providers into the market and improving capacity and choice. The NFF regional work programme in respect of fostering remains a priority for both Cardiff and the Vale. Applicants have been received in respect of the new Vale Marketing and Recruitment Officer post and interviews are taking place in January.
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	31/03/2019	75	Green	Work is underway during quarter 3 in regard to the review of the Pooled Budget Agreement (April 2019). This quarter has seen Legal Services advise in relation to the Cabinet report in respect of the discretionary charging elements which is going to

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
<p>with a particular focus on the priority work streams of:</p> <ul style="list-style-type: none"> - Provision of information - Advice and assistance services - Eligibility/assessment of need - Planning and promotion of preventative services - Workforce - Performance measures - Charging (debt recovery) - Direct Payments provision – WG regulations awaited - Pooled Funds. 				<p>Cabinet in February 2019. In addition, ongoing legal advice in respect of the implementation of the changes in legislation policy and practice under the SSWBW Act 2014 has been provided in regard to safeguarding, direct payments and deferred payments.</p>
<p>RM/A003: Contribute to the development and implementation of the Regional Partnership Board Annual Plan.</p>	31/03/2019	100	Green	<p>A report regarding the development and implementation of Regional Partnership was presented in January 2019 to the Regional Partnership board.</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	75	Green	<p>Development workshops have taken place to consider the adult at risk duty to report pathway. Further sessions are due to take place which will develop this pathway further. This is being undertaken in anticipation of the new Wales Safeguarding Procedures. Which will provide the procedural element of handling individual cases</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	100	Green	<p>Panel has met and agreed funding for a number of small 3rd sector community groups funded via DTG. Highlight report will be submitted to Regional Steering Group after April 2019.</p>
<p>RM/A006: Deliver the Citizens' Panel work stream and establish a Citizens' Panel that complies with requirements of the Social Services and Well-being</p>	31/03/2019	75	Green	<p>The regional work stream continues to meet. We have written to the group of people identified through the qualitative performance measures and are now planning the first regional session with them to introduce them to the ACRF Challenge</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
(Wales) Act.				Process at the end of January.
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	75	Green	The Regional Steering Group continues to work well. There have been a number of recent changes in membership across the region and the group is forming new relationships to ensure the regional work continues to deliver going forward. The commitment to regional working remains, with a focus of continual service improvement and development across the region. Colleagues from across the region continue to work together in the workstreams, ensuring that key actions are delivered.
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	75	Green	The region continues to support Welsh Government in the development of a new Performance and Review Framework. Representatives from across the region recently attended the Welsh Government Business Intelligence group, which brought together key people from across Wales to consider the content and impact of the new Performance and Improvement Framework. The Regional Coordinator for Sustainable Social Services continues to represent 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	75	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. The Joint Commissioning Group continues to meet on a monthly basis. The group has begun to consider the requirements of the IPC's 'Let's Agree to Agree' toolkit for commissioners and providers in the setting of residential and nursing fees.
AH008				
AS/A005: Continue to develop the Customer Contact Centre as the single point of access for community health and social care services through expanding	31/03/2019	75	Green	Quarter 3 has seen the Engagement sessions take place for health and council services staff. The feedback sessions took place at the end of the quarter with proposals being worked into an action plan for implementation in the new calendar

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
the range of services which it coordinates and enables.				year. Proposals include a joint management approach, integrated staff forum and joint training/induction plan - review in 12 months to see if more formal proposals need to be considered to achieve the recommendations of the Parliamentary Review for seamless care delivery at the front door. New business opportunities are being considered within the UHB for delivery via the Day Time Services element of our integrated communications Hub at C1V.
AS/A014: Undertake further expansion of the Adult Placement Scheme.	31/03/2019	75	Green	At quarter 3 3 new referrals have been received. 33 people are in long-term placements and 48 people receive short-term/respite support. Discussions are taking place regarding regional collaborations with neighbouring local authorities.
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	75	Green	Draft Strategy has been presented to Scrutiny in the Vale. Waiting for Cardiff to provide date for presentation at their Scrutiny. Launch planned for April 2019 - LDPG workstream overseeing this.
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	75	Green	A plan has been established to improve integrated working between Customer Relations, Telecare, Adult Services and Cardiff and Vale University Health Board (UHB) and create a unified service under the working title "Wellbeing Matters". This work will continue through 2019.
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	75	Green	Engagement process completed Health, Social Care and Customer Relations staff. Work commencing in Q4 to address identified barriers to greater integrated working around lack of knowledge of roles within different teams, creation of joint induction and training, creation of joint staff forums to progress ideas and issues and the implementation of integrated management forums. Provision self-service opportunities via the council website is being inhibited by system integration issues however these will hopefully be resolved in Q4. The

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
				council will be adopting the new improved Department for Transport Blue Car Badge online application from February 2019.
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	75	Green	Engagement process completed Health, Social Care and Customer Relations staff. Work commencing in Q4 to address identified barriers to greater integrated working around lack of knowledge of roles within different teams, creation of joint induction and training, creation of joint staff forums to progress ideas and issues and the implementation of integrated management forums. Customer Relations is supporting the implementation of a GP Triage service delivered via the single point of access for Vale of Glamorgan residents.
AH009				
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	75	Green	ICF Projects continue to progress as planned, with additional bids for slippage monies being successfully brought to the Vale. Confirmation of the Capital funding for our Residential Care Homes has enabled planning for Schemes including provision of dementia friendly homes. Additionally work with Housing colleagues has enabled some work re feasibility of Penarth Older Person's provision of accommodation to be commissioned. We have also received confirmation that the Region has successfully been granted Transformation monies to support implementation of the Parliamentary review for Health and Social care recommendations.
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	75	Green	Meetings held between Cardiff and Vale University Health Board, CAMHS and Cardiff and the Vale Local Authority to discuss linking in with developments around the regional Transition Protocol and to clarify process. Discussions have taken place between the Vale Integrated Manager and the Paris co-ordinator to assist in providing data from Paris of those in the Transition age group. This quarter there were nine Health to Health referrals of people between 17-19 and 4 referrals via TRIG.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
AS/A026: Work with partners to develop locality models further in response to the recommendations of the Parliamentary Review.	31/03/2019	75	Green	Welsh Government confirmed the Region's bid for Transformation monies was successful. The Integrated post Head of Adults/Locality Manager will lead on the GP triage trial bringing together primary care and social prescribing through the platform already proven to be successful within C1V. Other transformation projects involving Adults services include development of a short term night sitting/visiting service and assessing people in their own homes for ongoing care and support rather than in hospital - 'Get Me Home'. These projects will commence in quarter 4.
AS/A027: Implement the new Community Mental Health Teams Integrated model to support working age adults with mental health needs.	31/03/2019	100	Green	All community teams now moved into Barry Hospital. Vale Locality Mental Health Team formed and operational.
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	75	Green	Senior managers are linked into the Dementia Action Groups as appropriate. Head of Adults Services attends the Welsh Government Steering Group - Dementia Oversight and Implementation Group on behalf of all Heads of Adults Services across Wales. The ICF Dementia project continues to progress with roll out planned for quarter 4.
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	75	Green	The Integrated Autism Service (IAS) continues to consolidate its work across Cardiff and Vale. A total of 15 training sessions for professionals between July 2018 and October 2019 are booked. This will provide specialist training and creating links with approximately 450 staff across a variety of professions in health and social care. Adults receiving a diagnosis are enrolled on a post diagnostic course run jointly with a 3rd sector organisation. The materials for this course have been printed and are available for other IAS teams across Wales.
AH010				
RM/A009: Continue full implementation of the Welsh Community Care Information System (WCCIS) for the Directorate with a focus on developing	31/03/2019	75	Green	Further progress has been made to identify data issues within the system. Additional support has been secured via the Regional Project Team and training sessions for staff have commenced.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
the financial aspects of the system.				
AH011				
AA/A014: Work in conjunction with the Corporate Safeguarding Group to identify, develop and implement current priorities relating to education services.	31/03/2019	75	Green	<p>The Safeguarding Officer continues to attend quarterly CSG meetings on behalf of Learning and Skills and contribute to the identification, development and implementation of priorities relating to education services.</p> <p>Schools compliance with safer recruitment continues to fluctuate but recommendations for amendments to the Safer Recruitment Policy agreed by CSG are currently out for consultation with schools.</p> <p>Compliance with mandatory safeguarding training continues to improve following implementation of improved systems.</p> <p>Learning and Skills continues to participate in Corporate safeguarding developments initiated by CSG.</p>
HR/A002: Continue to support and monitor the application of the Council's Safer Recruitment Policy.	31/03/2019	75	Green	<p>Regular reports and updates are provided regarding the application of the safer recruitment policy. Compliance is as follows for quarter 3 - October 100%, November 96% and December 100%. Regular monitoring will continue. A Safer Recruitment Audit was completed in quarter 3 where it was recommended that Learning and Skills recommend to schools that Risk Assessments should only be used in exceptional circumstances. Schools will be communicated with during quarter 4.</p>
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	75	Green	<p>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.</p>

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
RM/A011: Develop and implement training workshops for staff in respect of safeguarding enquiries relating to Adults at Risk.	31/03/2019	75	Green	These will be aligned to the roll out of the new Wales Safeguarding Procedures later this year (2019).
RM/A012: Support the completion of the review of the All Wales Child and Adult Protection Procedures.	31/03/2019	75	Green	Work is underway regarding the All Wales Safeguarding procedures led by the Cardiff and Vale Regional Safeguarding Board. This work is on track to be completed by October 2019.
RM/A013: Implement agreed recommendations arising from the 2017/18 Safeguarding Internal audit work.	31/03/2019	100	Green	The idex mandatory module for Safeguarding was rolled out to all Vale of Glamorgan employees in November 2017. Completion and compliance will be monitored through the Corporate Safeguarding Group.
AH012				
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.				
AH013				
During quarter 2 this year the Accommodation with Care Strategy which was developed through working with our partners regionally to promote independent living was completed and presented to Scrutiny. The Housing, Health and Social Care Board has been established to take forward the recommendations.				
AH014				
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	75	Green	The audit of Child Sexual Exploitation (CSE) cases using the Critical Enquiry Framework is being undertaken by the audit sub group and reported to the Regional Safeguarding Children's Board (RSCB). Locally we are developing a monthly performance management suite that includes the CSE information in relation to activity and outcomes.
AH015				
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.				
AH016				
SRS/A012: Launch a 'Buy with Confidence' (responsible trader) scheme across the region to provide residents with peace of mind when shopping or	31/03/2019	50	Red	Work on preparation for the scheme has begun again however the launch has been rescheduled for later in the year following the hiatus in progress caused by the staff consultation on Trading Standards budget savings which was underway.

Service Plan Actions	In Year Completion Date	% Complete	RAG Status	Progress & Outcomes Description
choosing a tradesperson whilst supporting reputable businesses with a 'Trading Standards approved' endorsement.				
SRS/A015a: Undertake monitoring of outbreaks of communicable disease in schools.	31/03/2019	75	Green	In quarter 3, 24 outbreaks were investigated. 5 in Bridgend, 16 in Cardiff and 3 in Vale of Glamorgan. There were 8 outbreaks in care homes, 13 in schools, 2 in preschool/nursery settings and 1 in a restaurant. 4 were confirmed as Norovirus, 20 were suspected Norovirus. 100% of confirmed cases of communicable disease were investigated within the target response time by either a telephone call, letter or face to face visit.
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	75	Green	<p>The food team are currently carrying out the required interventions in accordance with the plan. Details of current numbers are provided below.</p> <p>Bridgend</p> <p>Qtr. 3 A B A & B C D E</p> <p>Numerator 6 53 59 212 22 45</p> <p>Denominator 10 64 74 380 97 69</p> <p>% 60.00% 82.81% 79.73% 55.79% 22.68% 65.22%</p> <p>Cardiff</p> <p>Qtr.3 A B A & B C D E</p> <p>Numerator 15 161 176 442 42 36</p> <p>Denominator 24 204 228 837 231 85</p> <p>% 62.50% 78.92% 77.19% 52.81% 18.18% 42.35%</p> <p>Vale</p> <p>Qtr. 3 A B A & B C D E</p> <p>Numerator 5 53 58 188 15 41</p> <p>Denominator 9 67 76 300 100 82</p> <p>% 55.56% 79.10% 76.32% 62.67% 15.00% 50.00%</p>

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	0	Red	Due to a number of vacancies within the Trading Standards team this action has been moved to quarter 4.

APPENDIX 2: Performance Indicators

Objective 7: Encouraging and promoting active and healthy lifestyles

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
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	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
What difference have we made?						
CPM/187: Percentage of clients accessing substance misuse services who reported an improvement in their quality of life.	84%	No data reported	67%	N/A	N/A	Awaiting external information.
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. Awaiting external information.
How well have we performed?						
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. Awaiting external information.
CPM/249: Percentage of substance misuse treatment commencements within 20 working days.	N/A	No data reported	80%	N/A	N/A	Establishing baseline. Awaiting external information.
How much have we done?						
CPM/028: Number of sports clubs which offer either inclusive or specific disability opportunities.	50	55	52	Green	↑	The Disability Sport Officer has been working with Barry Kyokushinkai Karate club who are able to offer opportunities to disabled participants.

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
CPM/197: Number of Green Flag Parks.	7	10	9	Green	↑	In total 8 Urban parks have been entered for and successfully awarded Green Flag status (Environment & Housing Directorate) plus 2 Country parks (via Regeneration & Planning Directorate): Urban Parks ; Romilly Park, Barry Island, Central Park, Victoria Park, Knap Gardens, Alexandra Park, Belle Vue Park, Gladstone Park, Country Parks; Cosmeston, Porthkerry. This is 3 awards higher than that achieved in 2017. 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

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 and 3 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 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	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
CPM/060 (SSM/027): The percentage of re-registrations of children on local authority Child Protection Registers (CPR).	No data available	15%	10%	Red	N/A	Cleansing of data within WCCIS continues at pace throughout Q3. Confidence is improving in the performance figures being seen. An accurate performance figure will be provided at Q4.

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
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.
What difference have we made?						
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 or work based learning without an approved external qualification.	0.10%	12%	0%	Red	↓	Please note this is a provisional figure. Previous provision and Careers Wales have been contacted to see if these pupils have remained in education. Figure may therefore fall.
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.	No data available	4.16	2.5	Red	N/A	Capacity within and viability of the domiciliary sector continues to remain a significant challenge and therefore has impacted negatively on delayed transfers of care.
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.	No data available	No data available	10%	N/A	N/A	Progress has been made in this area; with future reporting utilising data from Web Rosta & WCCIS. Performance data for this measure will be available at Q4.
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.	No data available	No data available	75%	N/A	N/A	Progress has been made in this area; with future reporting utilising data from Web Rosta & WCCIS. Performance data for this measure will be available at Q4.
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.

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
How well have we performed?						
CPM/056 (SSM/018): The percentage of adult protection enquiries completed within statutory timescales.	No data available	74.09%	100%	Red	N/A	Cleansing of data within WCCIS continues at pace; with uncleaned performance figures available for the first time at Q3. Work is ongoing with the Adult Safeguarding team to ensure accurate performance figures are ready for Q4.
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.	N/A	N/A	N/A	N/A	N/A	Annual performance indicator. To be reported at quarter 4.
CPM/207: Percentage of care and support plans for adults that were reviewed within agreed timescales (WG interim data set).	No data available	No data available	85%	N/A	N/A	Adults Services have recently seen the first reports about reviews; which teams are now starting to check the accuracy of recorded data and update WCCIS with where appropriate.
CPM/208: Percentage of care and support plans for children that were reviewed within agreed timescales (WG interim data set).	No data available	No data available	91%	N/A	N/A	No data was available at quarter 3; work will shortly start to monitor performance in this area.
How much have we done?						
CPM/209: Number of new Telecare users.	No data available	232	281	Red	N/A	Although we missed the target during Quarter 3 we are on track to achieve a cumulative performance of 290 by Quarter 4 that will exceed the target of 281.

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

Objective 7: Encouraging and promoting active and healthy lifestyles

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
There are currently no additional national measures reported under this section.						
What difference have we made?						
PAM/042: Percentage of National Exercise Referral Scheme (NERS) clients who reported an increase in leisure minutes at 16 weeks.	N/A	67.19%	90%	Red	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.
How well have we performed?						
PAM/041: Percentage of National Exercise Referral Scheme (NERS) clients who continued to participate in the exercise programme at 16 weeks.	31.12	56.63%	46%	Green	↑	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.
How much have we done?						
PAM/017: Number of visits to local authority sport and leisure facilities during the year where the visitor will be participating in physical activity per 1,000 population.	8,565.63	6,915.5	7,125	Amber	↓	Quarter 3 total usage was 262,984. Quarter 3 also included additional usage for quarter 1 & 2. We awaiting for a lot of information from the schools which will be added to quarter 4 although we are currently at 97% of target for this point in the financial year.

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

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
Population Indicator						
There are currently no additional national measures reported under this section.						
What difference have we made?						
SSM/025: The percentage of children supported to remain living within their family.	No data available	76.75%	N/A	N/A	N/A	Cleansing of data within WCCIS continues at pace; to provide accurate performance figures at Q4. Pro-active work with the children's teams is ongoing.
SSM/034a: The percentage of all care leavers who are in education, training or employment at 12 months after leaving care.	No data available	No data available	45%	N/A	N/A	Cleansing of data within WCCIS continues at pace. Pro-active work with the Fifteen Plus team has started to prepare for Q4.
SSM/034b: The percentage of all care leavers who are in education, training or employment at 24 months after leaving care.	No data available	No data available	53%	N/A	N/A	Cleansing of data within WCCIS continues at pace. Pro-active work with the Fifteen Plus team has started to prepare for Q4.
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 that they feel a part of their community.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be 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.

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
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.	No data available	74.45%	91%	N/A	N/A	Performance for this measure has significantly increased from Q2 to Q3. Cleansing of data within WCCIS continues at pace; Q4 performance will fully reflect the work of children's services in this area.
SSM/026: The percentage of looked after children returned home from care during the year.	No data available	No data available	6%	N/A	N/A	Cleansing of data within WCCIS continues at pace. Work is ongoing with the Children's teams to ensure accurate performance figures are ready at Q4.
SSM/030: The percentage of children seen by a registered dentist within 3 months of becoming looked after.	No data available	No data available	60%	N/A	N/A	Cleansing of data within WCCIS continues at pace. Work is ongoing with the Children's teams to ensure accurate performance figures are ready at Q4.
SSM/021: The average length of time older people (aged 65 or over) are supported in residential care homes.	No data available	867.97 days	N/A	N/A	N/A	Cleansing of data within WCCIS is on track to provide accurate performance figures at Q4 for this measure.
SSM/022: Average age of adults entering residential care homes.	No data available	85.25 years	N/A	N/A	N/A	Cleansing of data within WCCIS is on track to provide accurate performance figures at Q4 for this measure.
SSM/028: The average length of time for all children who were on the Child Protection Register during the year.	No data available	385.99 days	N/A	N/A	N/A	Consistency of recording data in this area has significantly improved in this area. Accurate performance figures for this measure will be ready at Q4.
SSM/029a: Percentage of children achieving the core subject indicator at key	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
stage 2.						
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.	No data available	4.06%	12%	Green	N/A	Cleansing and checking of data from the LAC Education team and WCCIS is on track to provide accurate performance figures at Q4 for this measure.
SSM/031: The percentage of looked after children registered with a GP.	No data available	67.06%	99%	Red	N/A	The Performance Team are proactively to work with and support the Children's teams to ensure that WCCIS is both accurate and up to date; for this measure to be reported at Q4.
SSM/033 (PAM/029): The percentage of looked after children on 31 March who have had three or more placements during the year.	No data available	4.78%	9%	Green	N/A	Further work to check the quality of recorded placement change data within WCCIS continues. The accuracy of WCCIS data is seen to be improving adding greater confidence to the reported performance figure at Q4.
SSM/035: The percentage of care leavers who have experienced homelessness during the year.	No data available	No data available	12%	N/A	N/A	Cleansing of data within WCCIS continues at pace. Pro-active work with the Fifteen Plus team has started to prepare for Q4; where figures were not previously available.
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.

Performance Indicator	Q3 2017/18	Q3 2018/19	Q3 Target 2018/19	RAG Status	Direction of Travel	Commentary
SSM/008: Percentage of people reporting they have received care and support through their language of choice.	N/A	N/A	N/A	N/A	N/A	Annual national performance indicator. To be reported at quarter 4.
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.
How much have we done?						
There are currently no additional national measures reported under this section.						