

Health and Care Scrutiny Committee

Meeting Venue
**Council Chamber - County Hall,
Llandrindod Wells, Powys**

Meeting Date
Friday, 22 February 2019

Meeting Time
10.00 am

For further information please contact
Lisa Richards
lisa.richards@powys.gov.uk



County Hall
Llandrindod Wells
Powys
LD1 5LG

15 February 2019

The use of Welsh by participants is welcomed. If you wish to use Welsh please inform us by noon, two working days before the meeting

AGENDA

1.	APOLOGIES
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To receive apologies for absence.

2.	DECLARATIONS OF INTEREST
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To receive declarations of interest from Members.

3.	DISCLOSURE OF PARTY WHIPS
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To receive disclosures of prohibited party whips which a Member has been given in relation to the meeting in accordance with Section 78(3) of the Local Government Measure 2011.

(NB: Members are reminded that, under Section 78, Members having been given a prohibited party whip cannot vote on a matter before the Committee.)

4.	ELECTION OF VICE CHAIR
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To elect a Vice Chair for the period to the AGM in May 2019.

5.	MINUTES
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To authorise the Chair to sign the minutes of the last meeting of the Health, Care and Housing Committee on 4 February 2019 as a correct record.

(To Follow)

6.	PERFORMANCE REPORTS
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6.1. Children's Services

To consider the Performance report as at 31 December 2018 for Children's Services.

(Pages 5 - 28)

6.2. Adult Services

To consider the Performance report as a 31 December 2019 for Adult Services.

(Pages 29 - 54)

7.	ACCESS TO INFORMATION
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The Monitoring Officer has determined that category 3 of the Access to Information Procedure Rules applies to the following items. His view on the public interest test (having taken account of the provisions of Rule 14.8 of the Council's Access to Information Rules) was that to make this information public would disclose information relating to the financial or business affairs of any particular person (including the authority holding that information).

These factors in his view outweigh the public interest in disclosing this information. Members are asked to consider these factors when determining the public interest test, which they must decide when considering excluding the public from this part of the meeting.

8.	MANAGEMENT OF POWYS OWNED RESIDENTIAL HOMES
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To receive an oral progress report by the Head of Transformation.

9.	WORK PROGRAMME
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To note the scrutiny forward work programme.

(Pages 55 - 62)

10.	CORRESPONDENCE
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To consider any items of correspondence which, in the opinion of the Chair, are of sufficient urgency to warrant consideration.

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Children's Performance Report

December 2018

Page 5



6a



Yn agored a blaengar - Open and enterprising


Powys



What's working well?

Top 5 Indicators – December demonstrates sustained improved performance.

1. Percentage of assessments completed in timescale is at 94%. Following the clearance of the backlog of overdue assessments during November performance has improved as anticipated.
2. Children with 3 or more placements has reduced to 11% (26 children). 7 of the 26 children have moved into permanent homes.
3. Percentage of children looked after statutory visits completed in timescale has exceeded target for the third month. This demonstrates sustained improved performance.
4. Percentage of child protection visits undertaken in timescale has decreased due to staffing issues in one particular team which have now been addressed. Some teams have achieved 100% of CP stat visits within timescales. Overall performance has been impacted by specific issues within a small number of teams.
5. Staff receiving monthly supervision is reported as 91% however. There are a number of staff recorded as not having had supervision however they are not currently in work so supervision cannot be completed or supervisions have been done and recorded but are not reflected in the figures. The actual figure is 95%.

The support provided by the Data Quality Clerks to Team Managers is now having an impact on performance. The expectations being set at SMT and OMT by the new HOS is having an impact and is reflected within the performance figures.

Provision of advice at PPD has increased for a second month despite the reduced number of contacts overall into the service (488 Nov compared to 411 in Dec).

We have undertaken fewer strategy discussions and commenced a lower number of Section 47 assessments which demonstrates that our threshold is being more effectively applied at the front door.

Average days to complete assessment have gone to 26 days which is a significant continued improvement.

42% assessments in December led to care and support plans – this is an increase and means that thresholds at the front door are being applied more effectively.

The backlog of assessment has been cleared so we know that all assessments being undertaken are on target for completion within timescale and that our performance target can be reached moving forward.

We completed 2 more Section 47 Assessments in Dec than Nov and 98% have been completed within timescale during December. This demonstrates a significant improvement.



What are we worried about?

We are still referring a significant number of children and families through to Assessment Teams which are closed with no progression to care and support (58%).

We still have 24 children on placement orders waiting to be adopted.

High numbers of staff leaving and difficulties in securing agency staff.

We are unclear as to the re assessment rate due to the way in which the data is recorded on the system and then reported. Measure 8 counts assessments with previous contacts not previous assessments. This has been highlighted with BI and is being revised. The revised report should inform managers of which children have been re-referred through for assessment having already been assessed in the previous 12 months.

Referrals from PPD to TAF have reduced. However there are fewer contacts during Dec and more contacts closed with the outcome of provision of advice or assistance which will impact on the number of referrals to TAF.

We are still referring a significant number of children and families through to Assessment Teams. These assessments (58%) are closed with no further action by children's statutory services. This is an improvement from last month and demonstrates continued positive change in practice.

We are still undertaking too many assessments as a result of insufficient early help provision. This is being addressed.

We are unclear as to the re assessment rate due to the way in which the data is recorded on the system and then reported. Measure 8 counts assessments with previous contacts not previous assessments. This has been highlighted with BI and is being revised. The revised report should inform managers of which children have been re-referred through for assessment having already been assessed in the previous 12 months.

Only 83% of CP statutory visits are recorded as being undertaken within timescale.

Due to 3 agency members of staff leaving one team due to poor performance this has impacted on the capacity of the team to record all of the visits that have been undertaken. The delay in this recording results in the 60% performance for this team making the overall performance for the service below target. Performance is anticipated to improve however this may be reflected until February's data.

14 children are reported as not having a care plan in place. These children do have care plans however these are not signed off and closed on the system. Senior managers have been tasked with reviewing all 14 children to address the issues with sign off.

High numbers of staff leaving and difficulties in securing agency staff.



What do we need to do?

Stabilise the workforce, implement the new structure and reduce the dependency on agency workers. April 2019

Quickly recruit the senior management team.

Ensure that staff receiving monthly supervision performance is maintained

Work to ensure that the percentage of child protection visits undertaken in timescale reaches target in January.

Develop Early Help Hub as part of the Children's Services restructure so as to increase the level of support which can be provided through early intervention. April 19

The revised report (measure 8) should inform managers of which children have been re-referred through for assessment having already been assessed in the previous 12 months.

Amend the Children's Services Performance Report to take out figures which do not really tell us anything about the impact on children and replace with more meaningful data.

Make changes to systems to ensure managers have access to accurate live data to assist in practice management.

Continue to expect high performance from the teams and maintain the standards being set.

A very experienced team manager has been appointed to manage the team currently struggling. The workers who have left have been replaced with very experienced senior social workers which give increased experience and skill set to deal with the complex cases and mentor and support the team members.

Further merge the resource and MAAP panels. Use this panel to shift practice to a more innovative approach which facilitates the deployment of resources to stabilise existing arrangements and prevent escalation to more costly arrangements. Work has commenced.

During January 2019 complete a review of arrangements for all children placed at home, subject to care orders. 11 children currently.

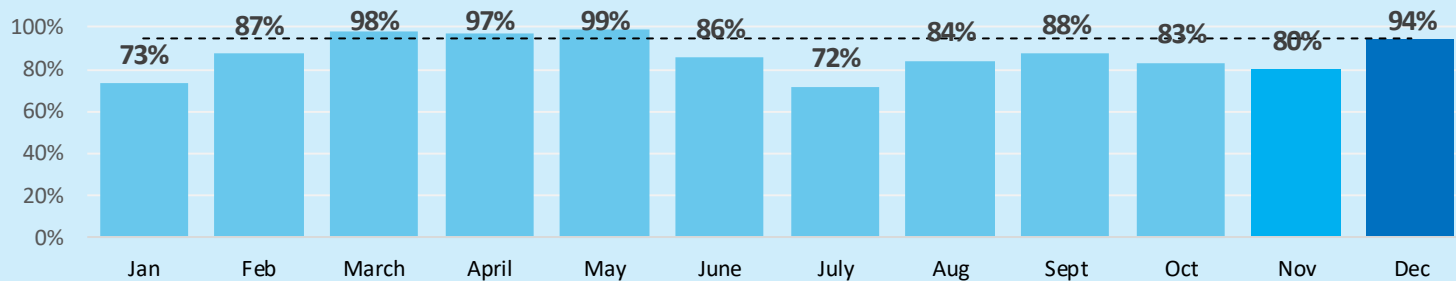
Panel to continue to review arrangements for each child placed out of county. First four children where repatriation will meet their needs identified. Three to return home with support, and one child is moving to foster care placement. Next cohort of children identified and arrangements currently under review.

All IFA placements will be reviewed during January and February 2019.



Top 5 indicators

% of assessments completed for children within statutory timescales

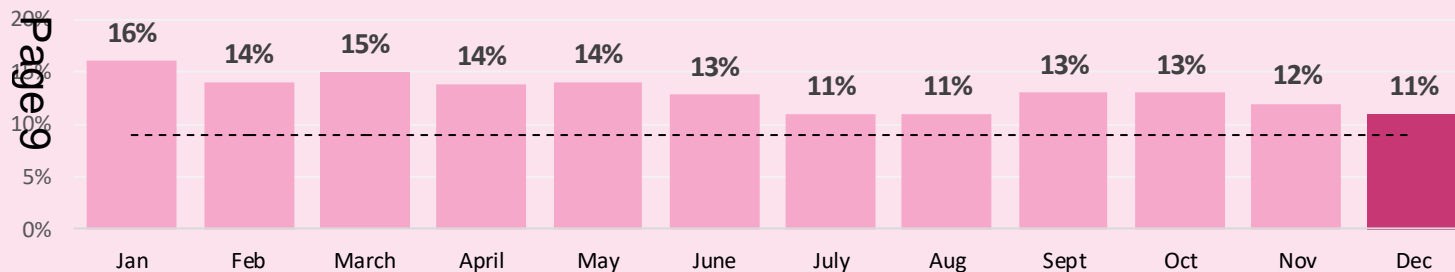


Trend

 Target
 95%

Welsh average
 91%
 YTD
 86%
 RED

% of children looked after who have had three or more placements during the year

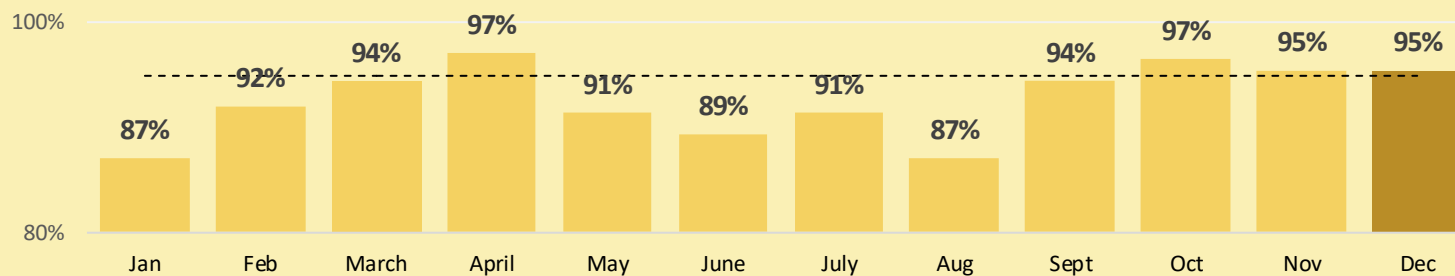


Trend

 Target
 9%

Welsh average
 10%
 YTD
 11%
 RED

% of Statutory Visits for children looked after carried out on time

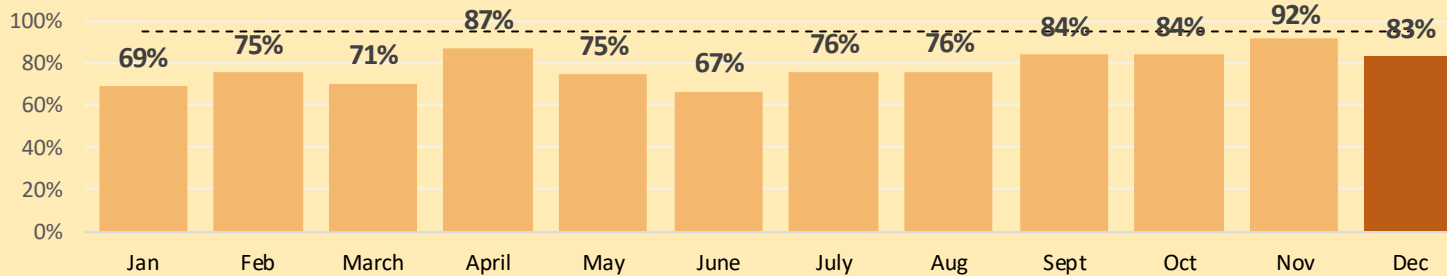


Trend

 Target
 95%
 Met Target

Welsh average
 N/A
 YTD
 95%
 GREEN

% of Child Protection Statutory Visits carried out on time

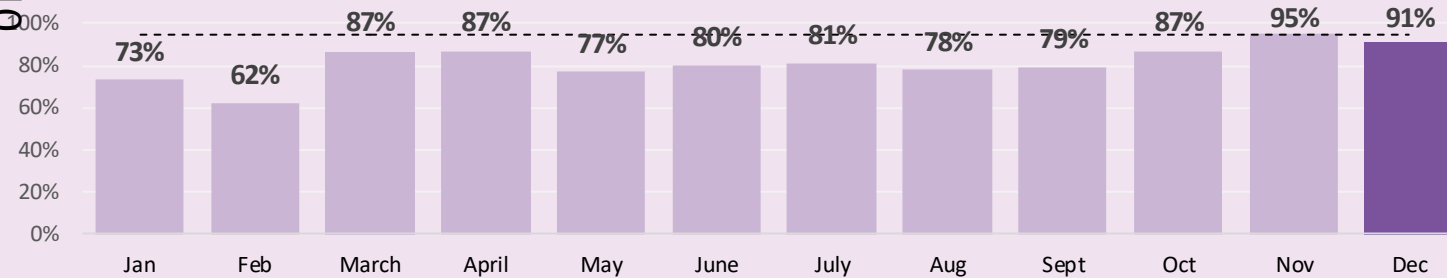


Trend

 Target

 95%
 Welsh average
 N/A
 YTD
 77%
 RED

% of Operational staff who have had Case Supervision on a monthly basis



Trend

 Target

 95%
 Welsh average
 N/A
 YTD
 84%
 RED



1. **1,001** No. of cases open to Children's Services

Of which:

1a. **235** No. Children Looked After

1b. **117** No. of Children on the Child Protection Register

1c. **728** No. of Children with Care and Support Plans (Including CLA and CP)

1d. **14** No. of CLA and CP Children without a Care Plan

1e. **115** No. of Children currently undergoing an Assessment

1f. **65** No. of Current open cases with no Care and Support Plan

Arrows in this report show performance trends/numbers from previous to current month.



Performance improved/ numbers increased



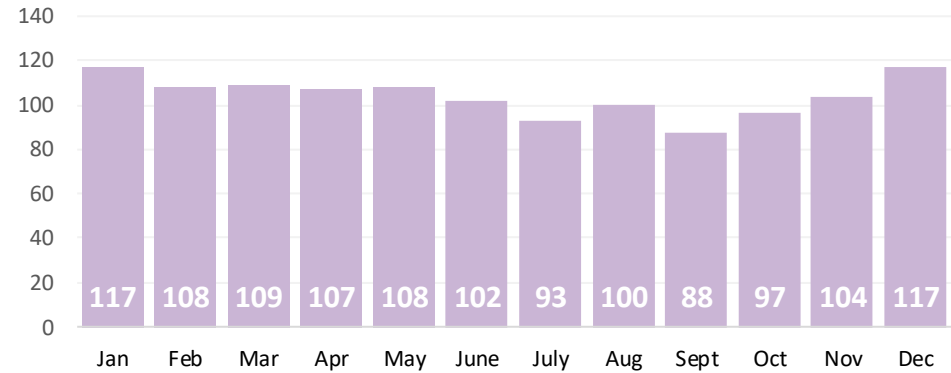
Performance unchanged/ numbers the same



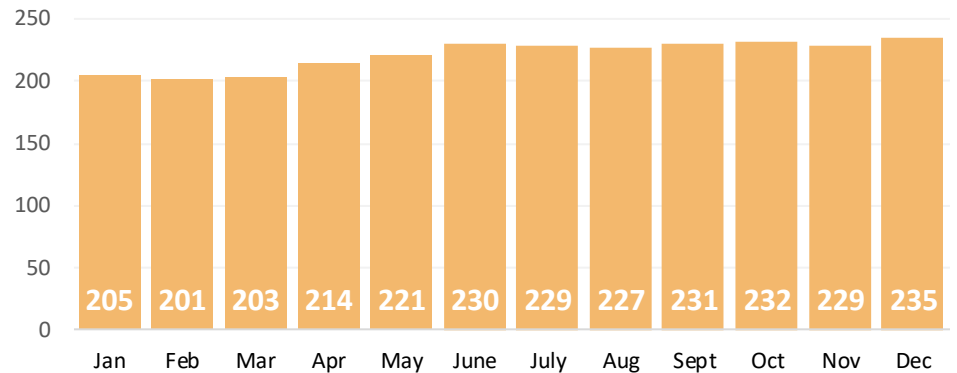
Performance declined/ numbers decreased

Year to date (YTD) totals with a target will be shown as a coloured figure and text to indicate if we are on or off target. On target = Green Off target = Red

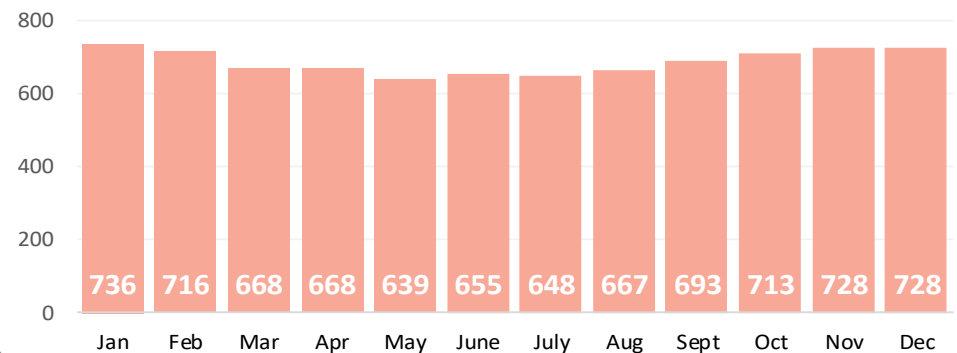
No. of Children on Register since January '17

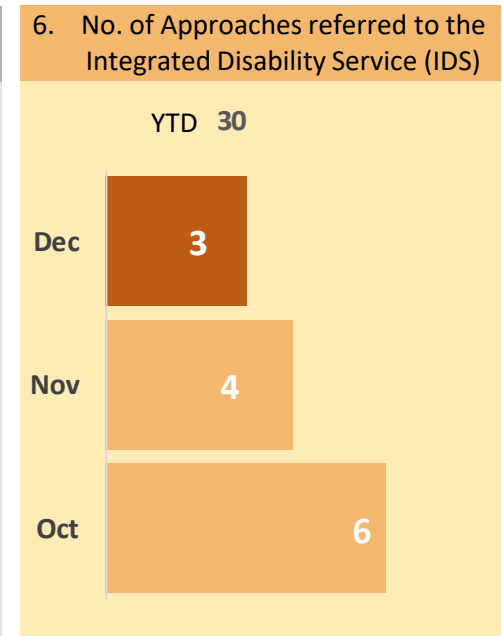
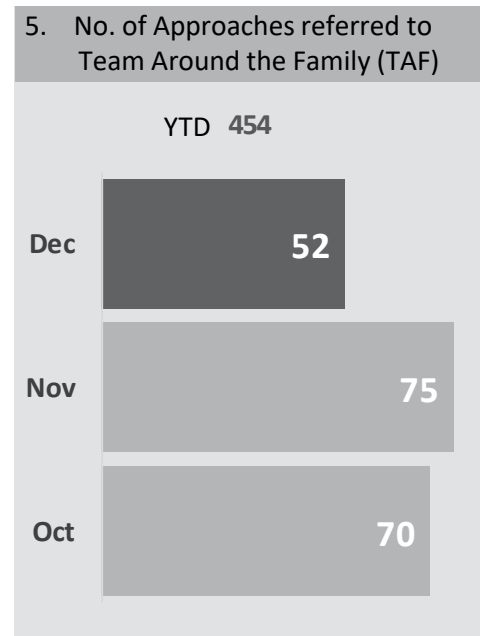
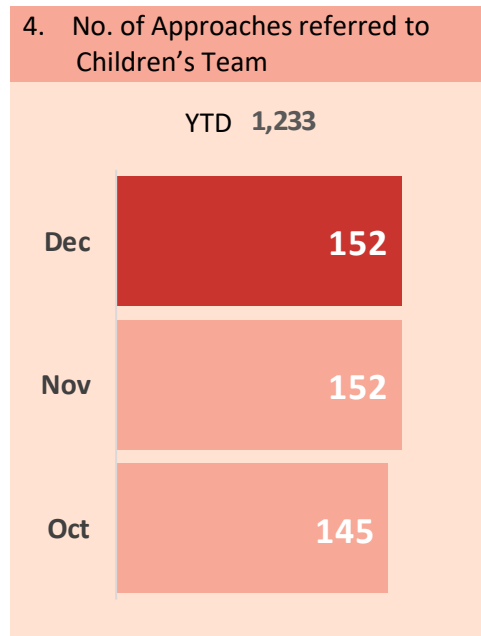
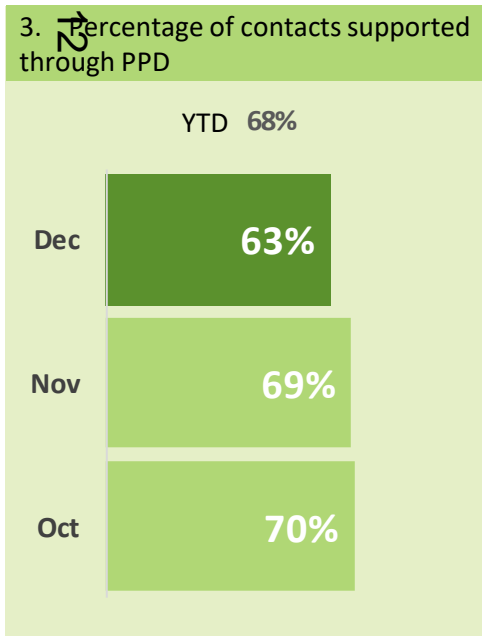
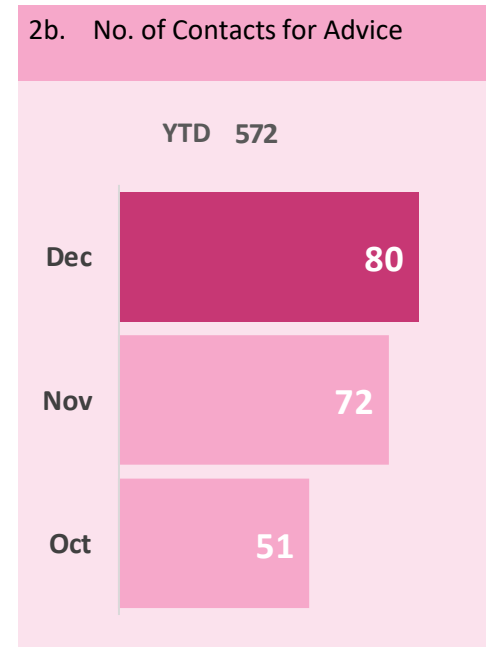
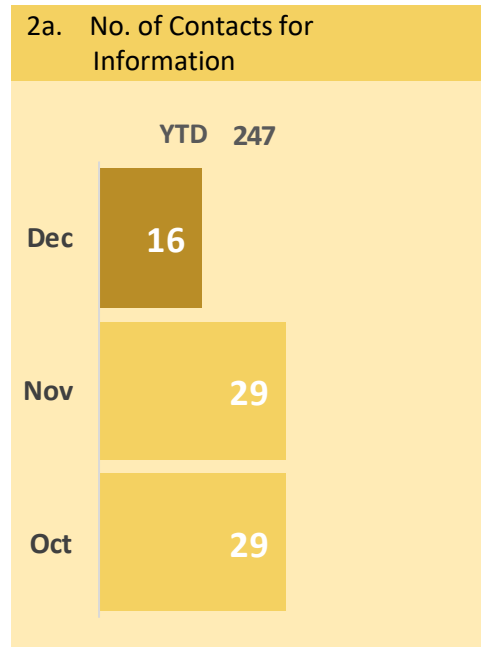
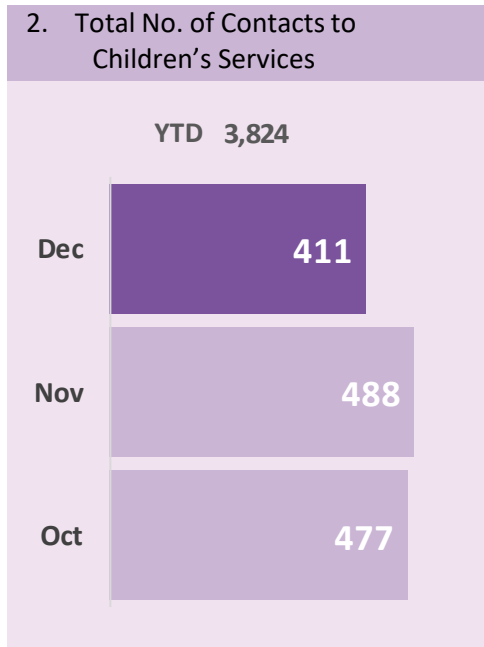


No. of Children Looked After since January '17

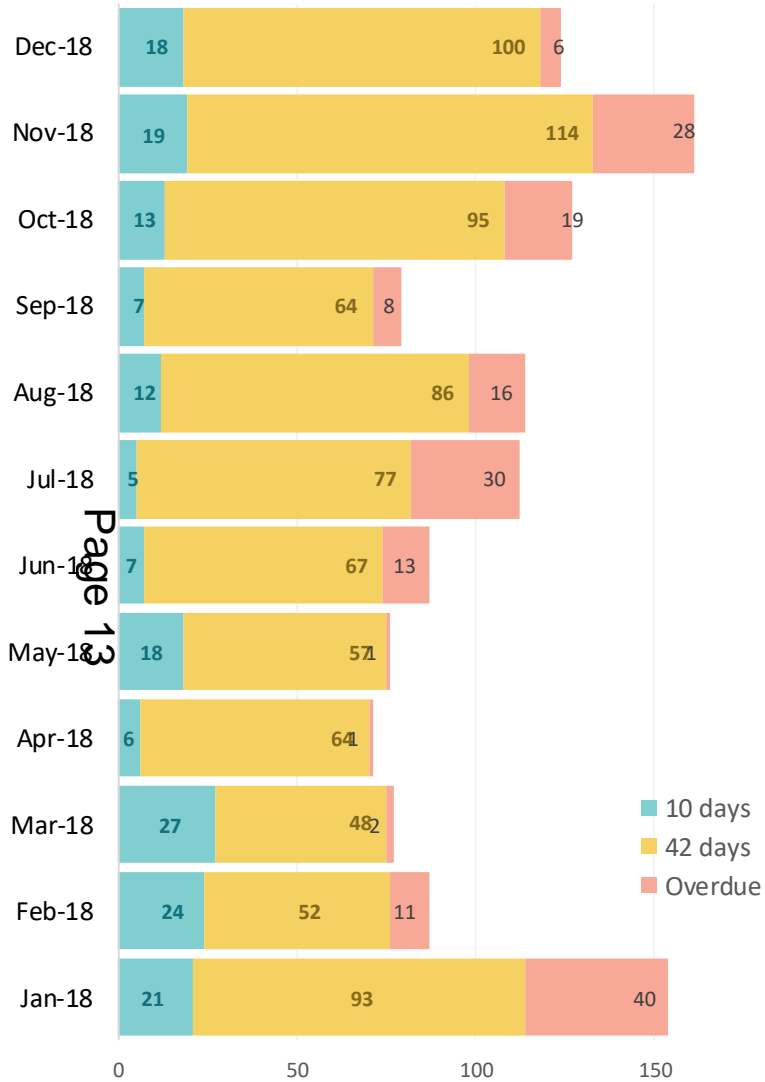


No. of Children with a Care & Support Plan since January '17

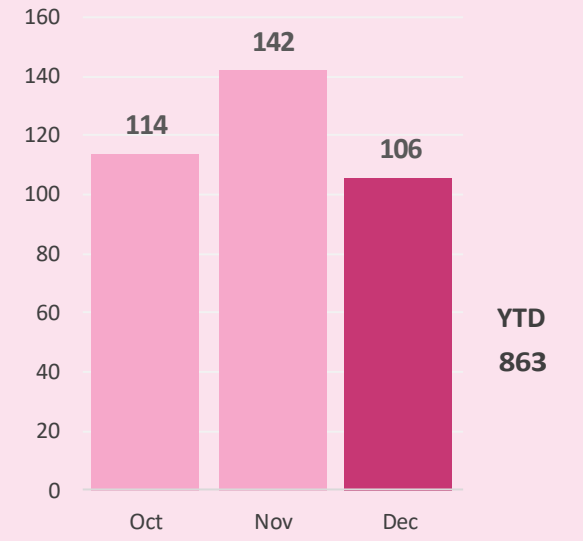




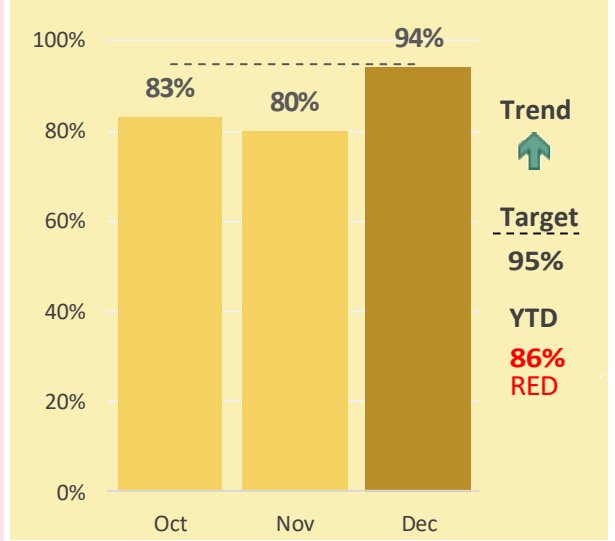
No. of Assessments within timescale since January 2018



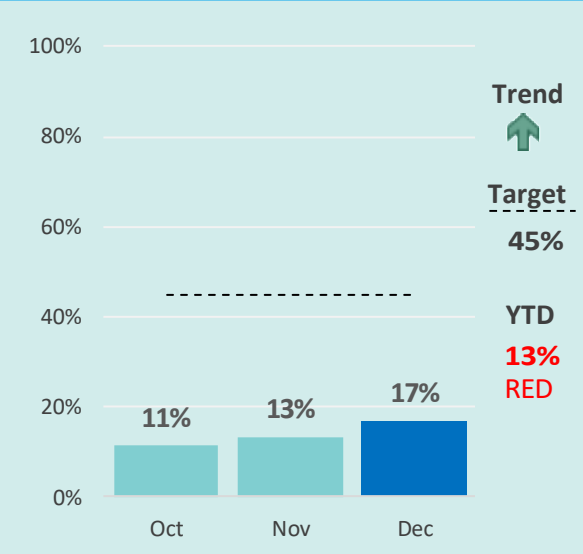
7. No. of Care and Wellbeing Assessments completed



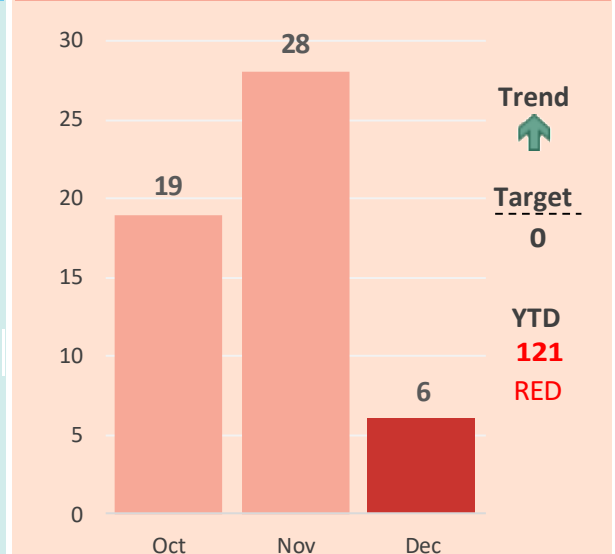
7a. Percentage of Care and Wellbeing Assessments completed within 42 days



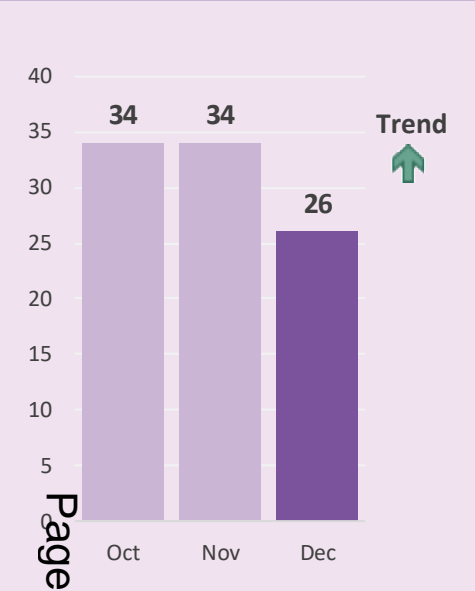
7b. Of which, Percentage completed within 10 days



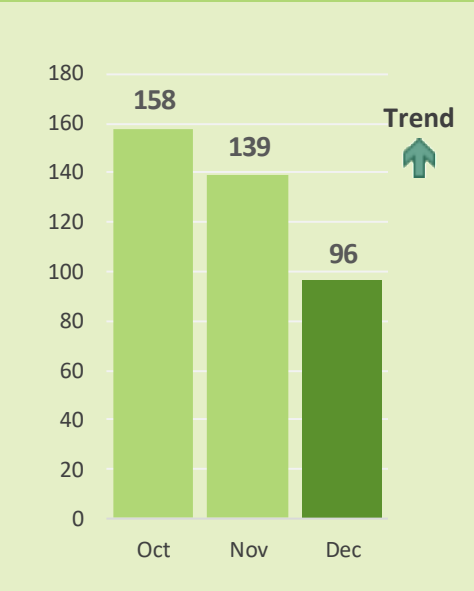
7c. No. of Care and Wellbeing Assessments completed out of timescale



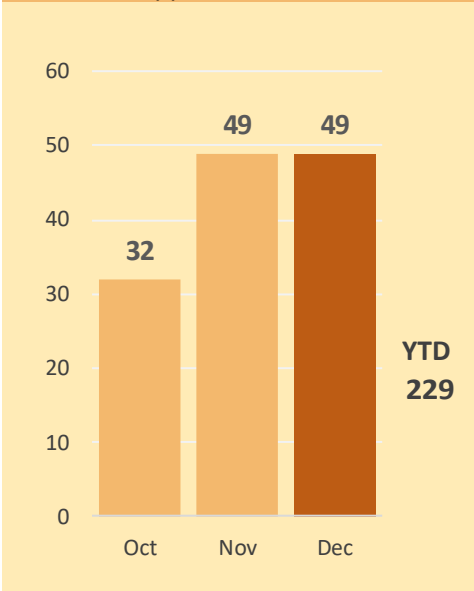
7d. Of these, Average number of days taken to complete



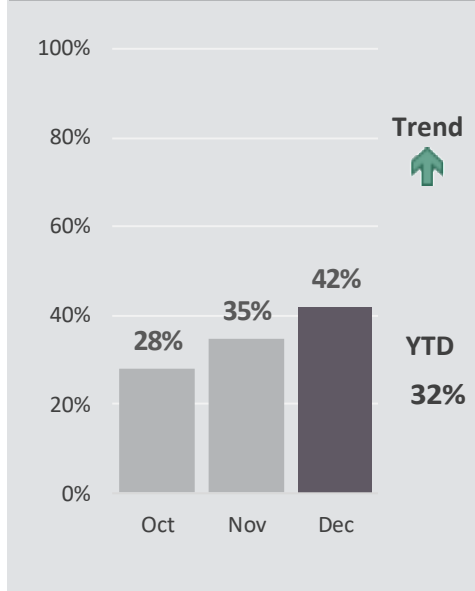
7e. Of these, maximum no. of days taken to complete



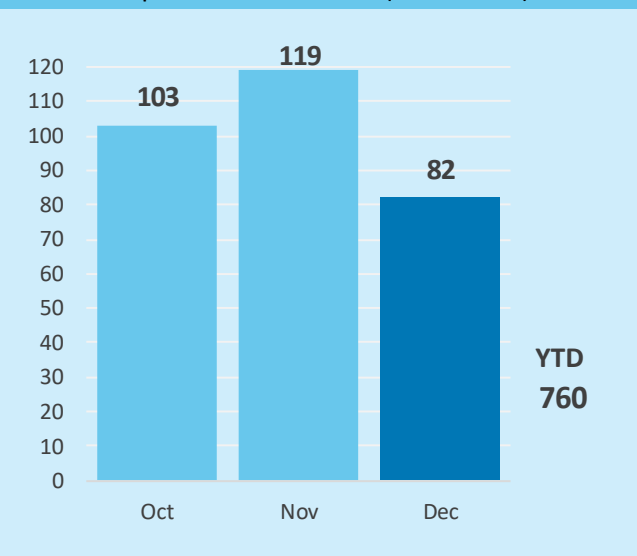
7f. No. of Assessments that lead to a Care and Support Plan



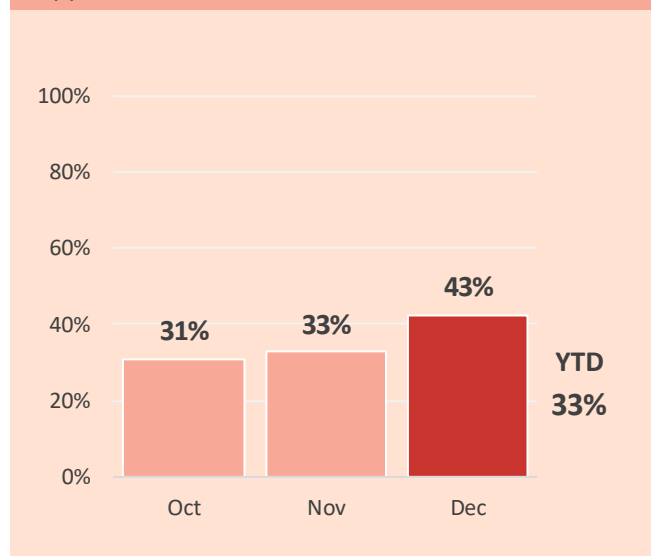
7g. Percentage of Assessments that lead to a Care and Support Plan



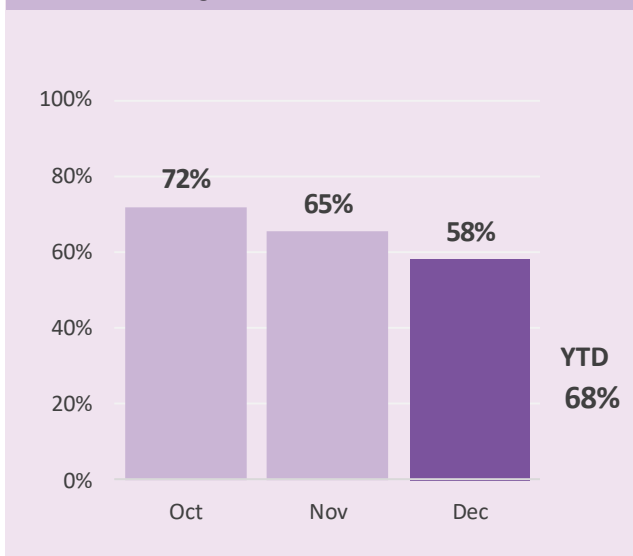
8. No. of Children Assessed that had been Assessed within the previous 12 months (New Cases)



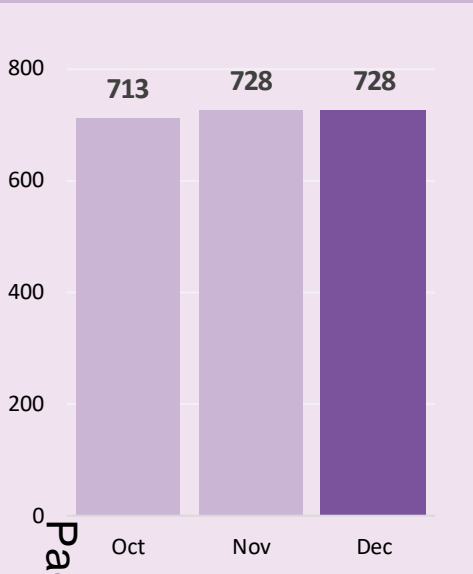
8a. Of these, Percentage that lead to a Care and Support Plan



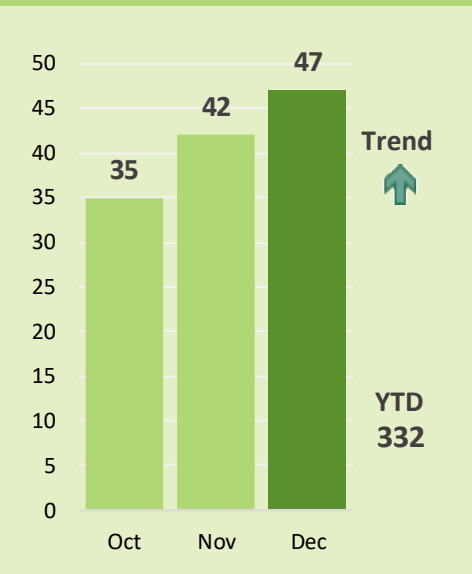
9. Percentage of Approaches to Children's Teams closed following Assessment



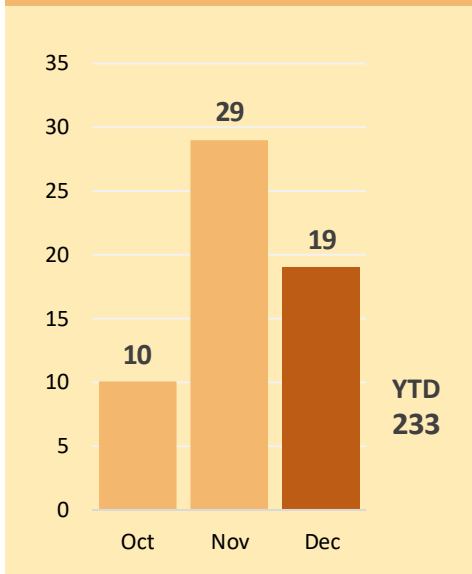
10. No. of Children with Care and Support Plans



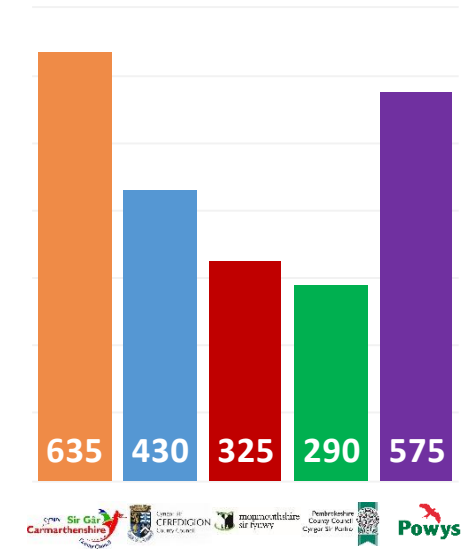
11. No. of New Care and Support Plans completed during the period



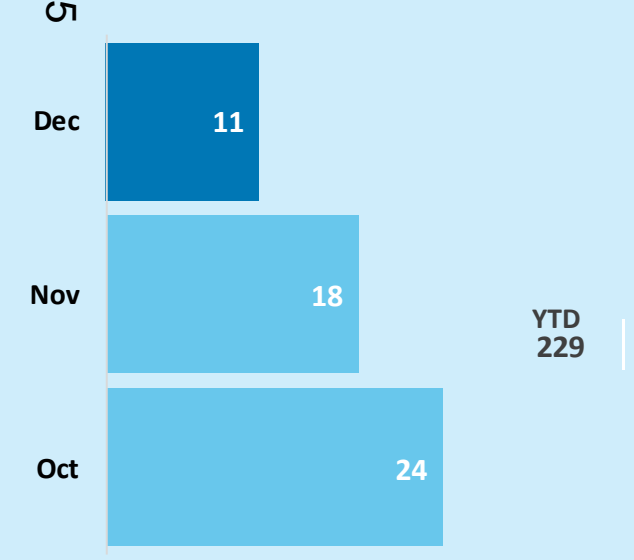
12. No. of cases closed where the child had a Care and Support Plan



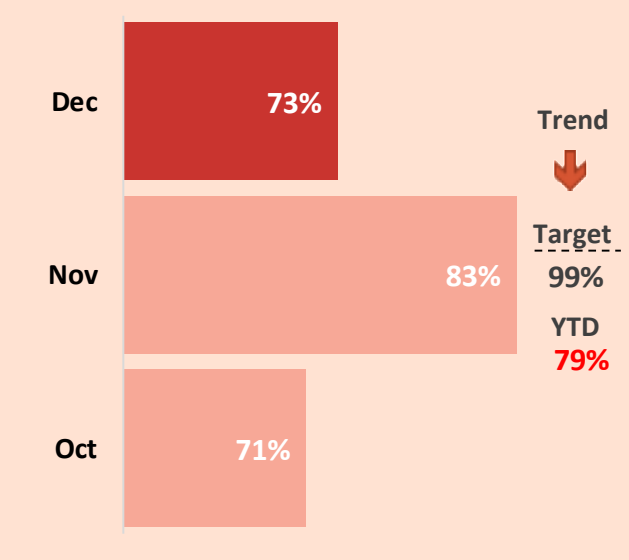
No. of Children with Care and Support Plan as at 31/03/2017



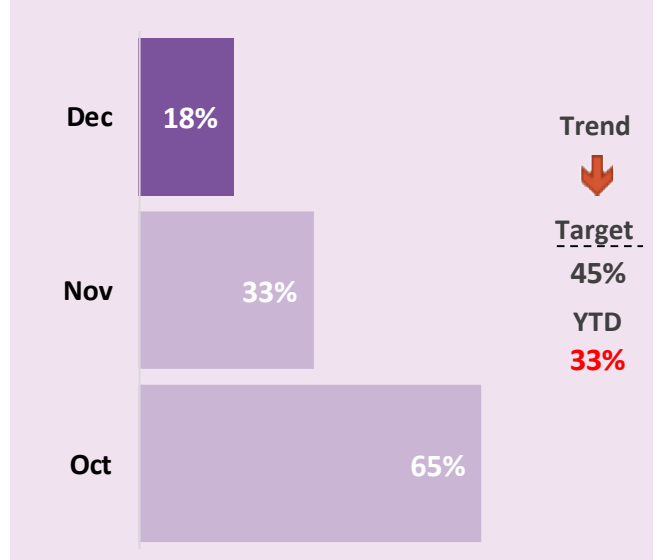
13. No. of Re-assessments completed during the period



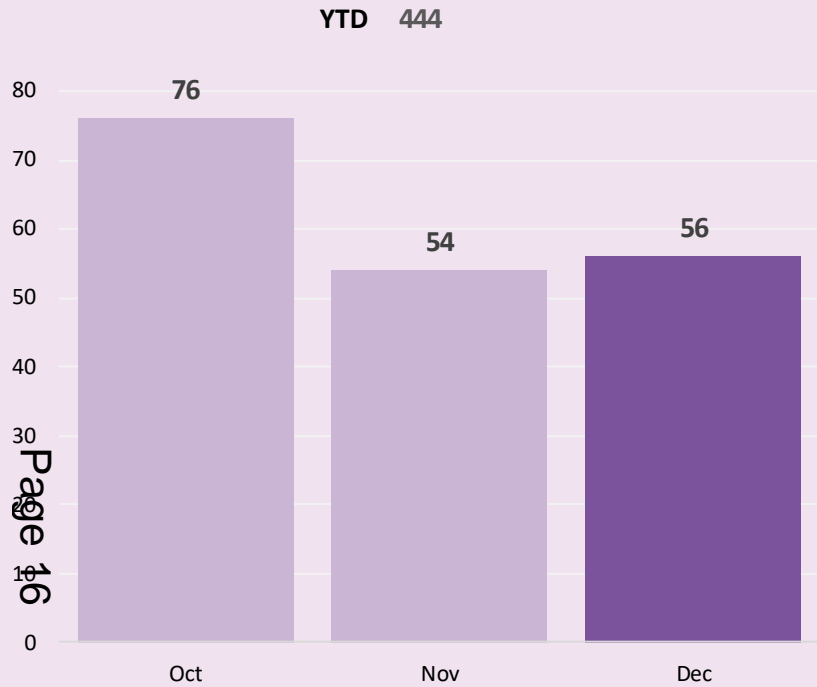
13a. % of Re-assessments completed within 42 days



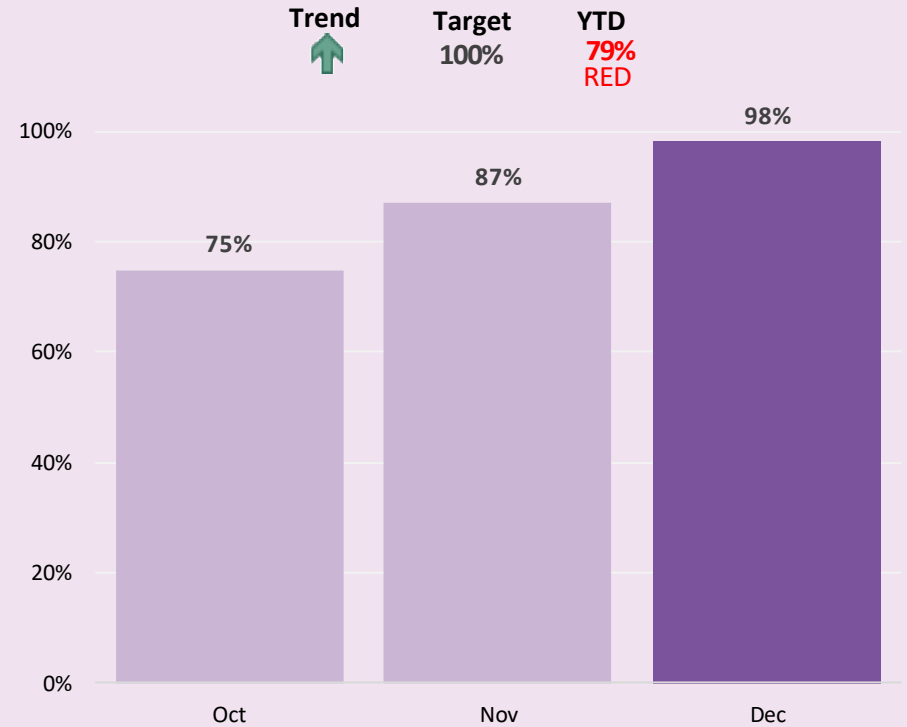
13b. Of which, Percentage completed within 10 days



14. No. of Section 47 Assessments Completed

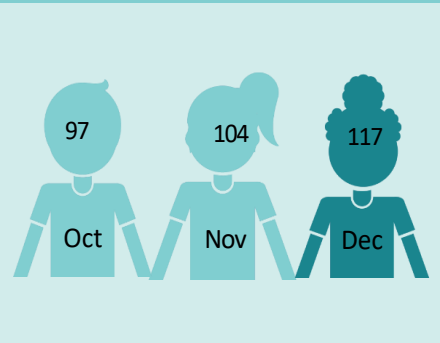


14a. Percentage Section 47 Assessments Completed in Timescale

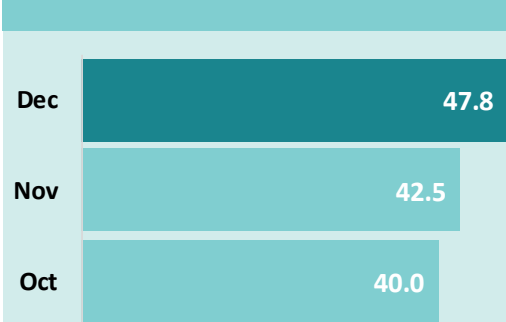


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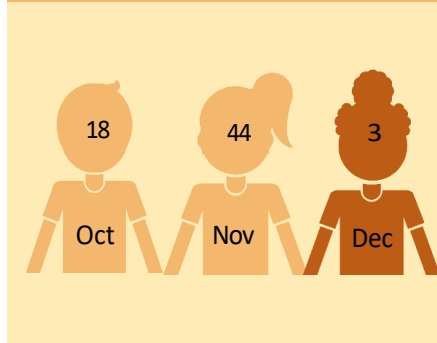
15. No. of Children on the Child Protection Register (CPR)



15a. CPR Rate per 10,000 Population



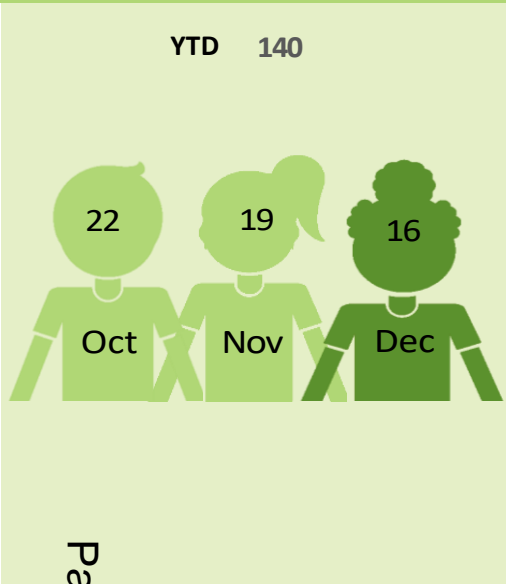
16. Number of Children Removed from the CPR



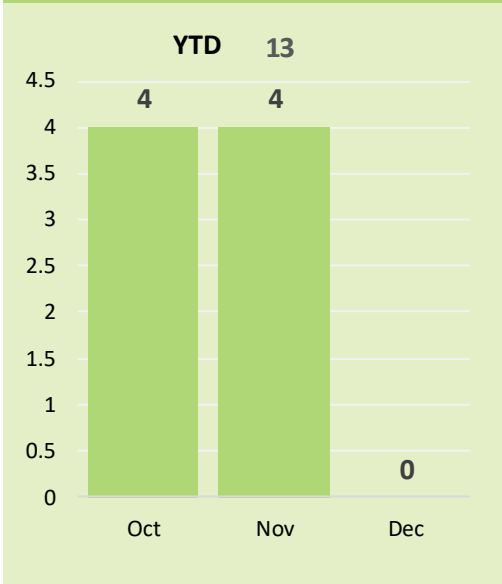
16a. The average length of time on the CPR for those removed (days)



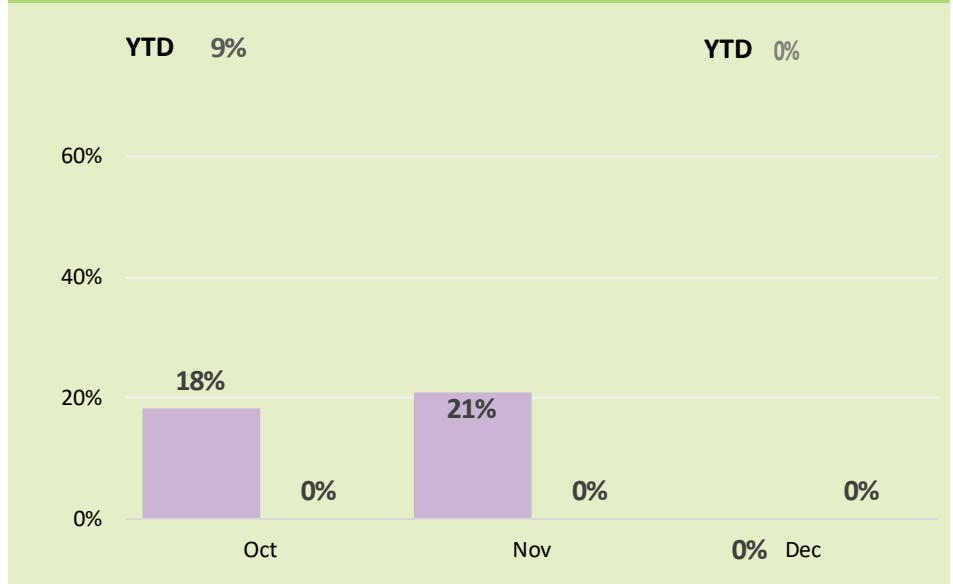
17. No. of Children Registered at Conference



17a. No. of Re-Registrations on the CPR

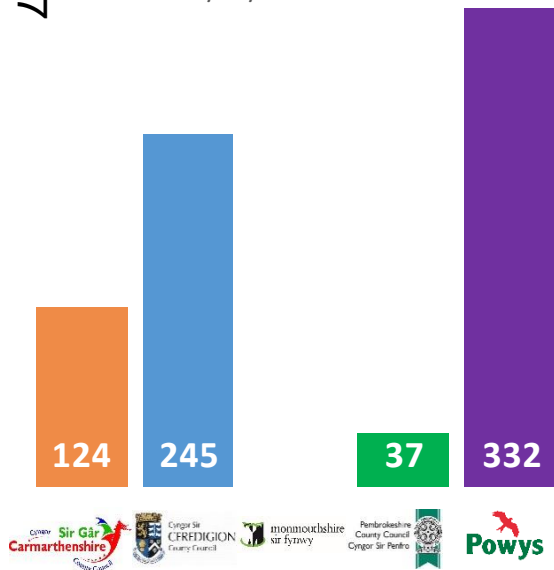


17b. The % of Re-Registrations of all Registrations during the Year
17c. Of which, % Re-Registrations within 12 months of previous De-Registration

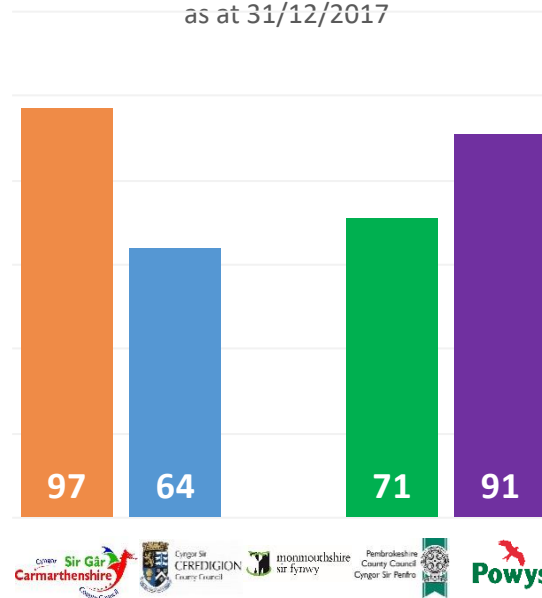


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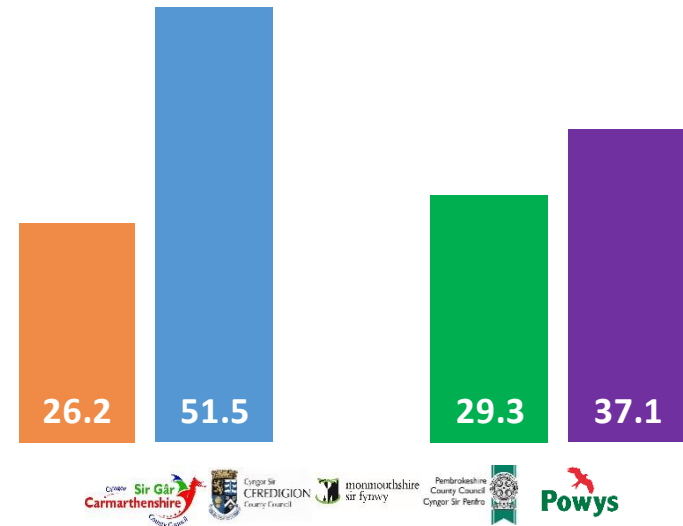
No. Section 47 Completed as at Assessments 31/12/2017



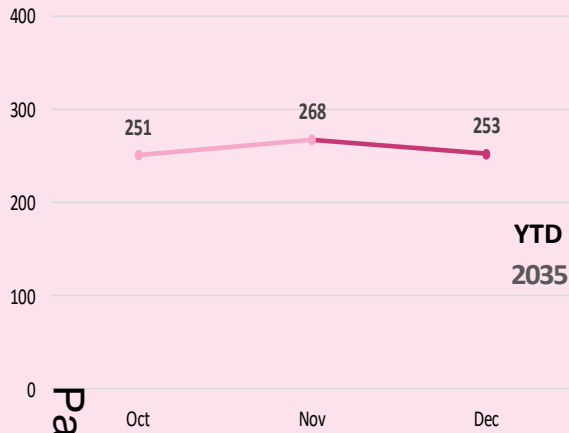
No. of Children on the CPR as at 31/12/2017



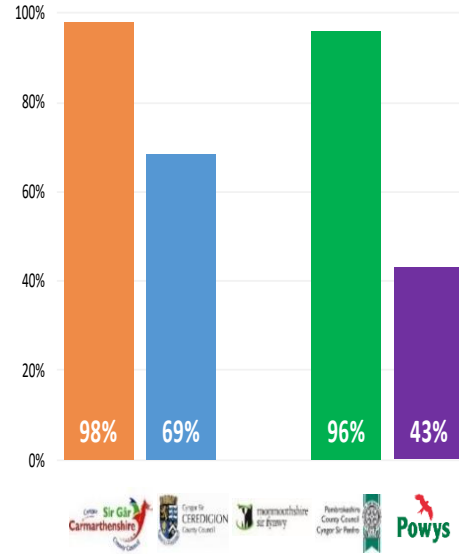
CPR Rate per 10,000 Population as at 31/12/2017



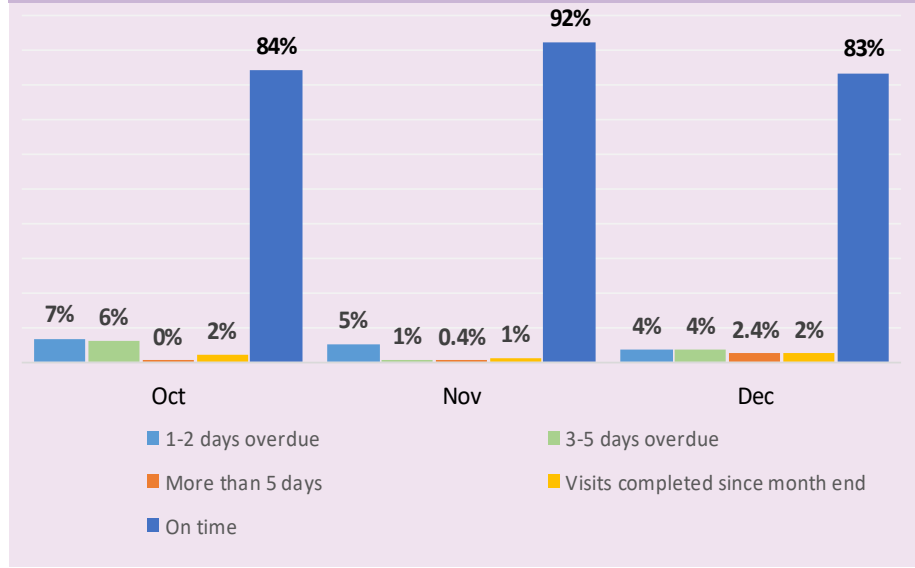
18. No. of Child Protection Monitoring Visits taken place



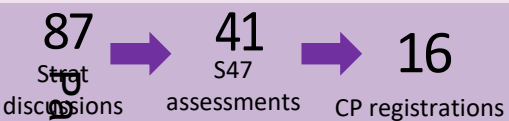
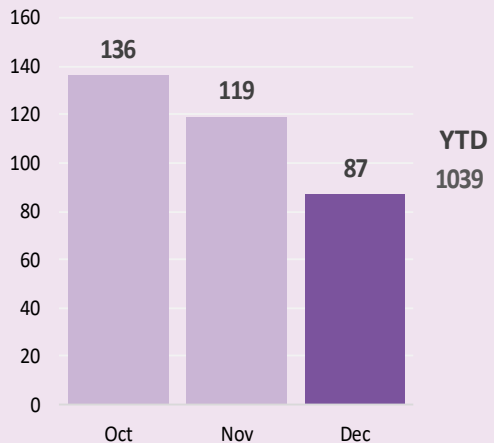
No. of Initial Case Conferences as at 31/12/2017



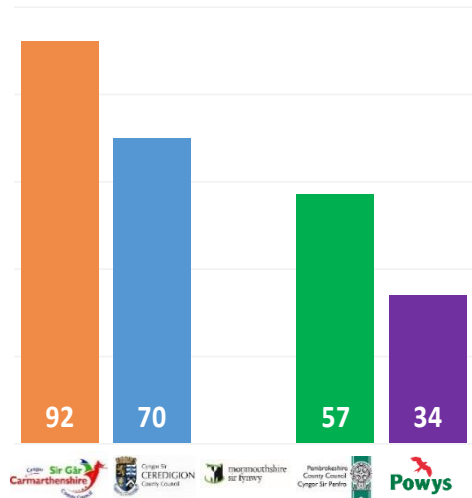
18a. Percentage of CP Statutory Visits on time



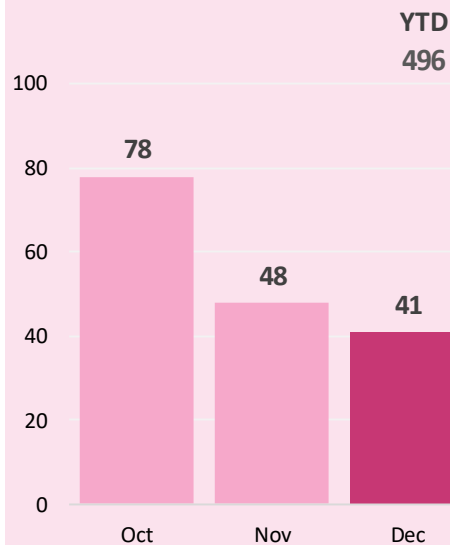
19. No. of Strategy Discussions held



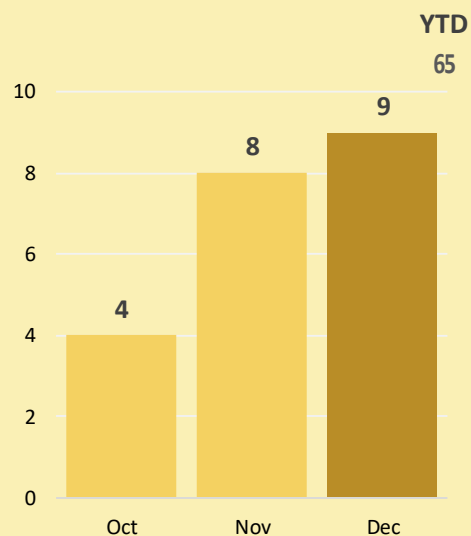
No. of Initial Case Conferences as at 31/12/2017



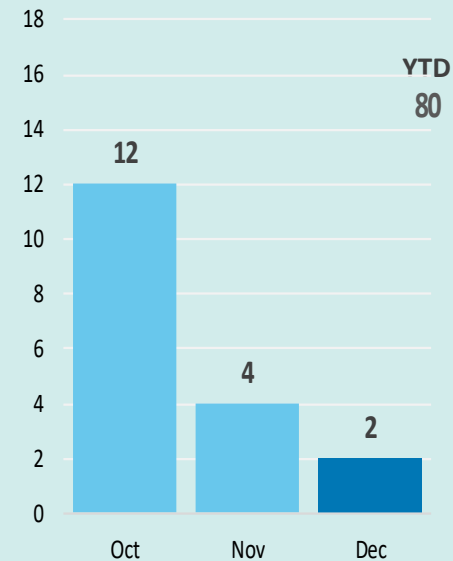
19a. No. of Section 47 Assessments Commenced



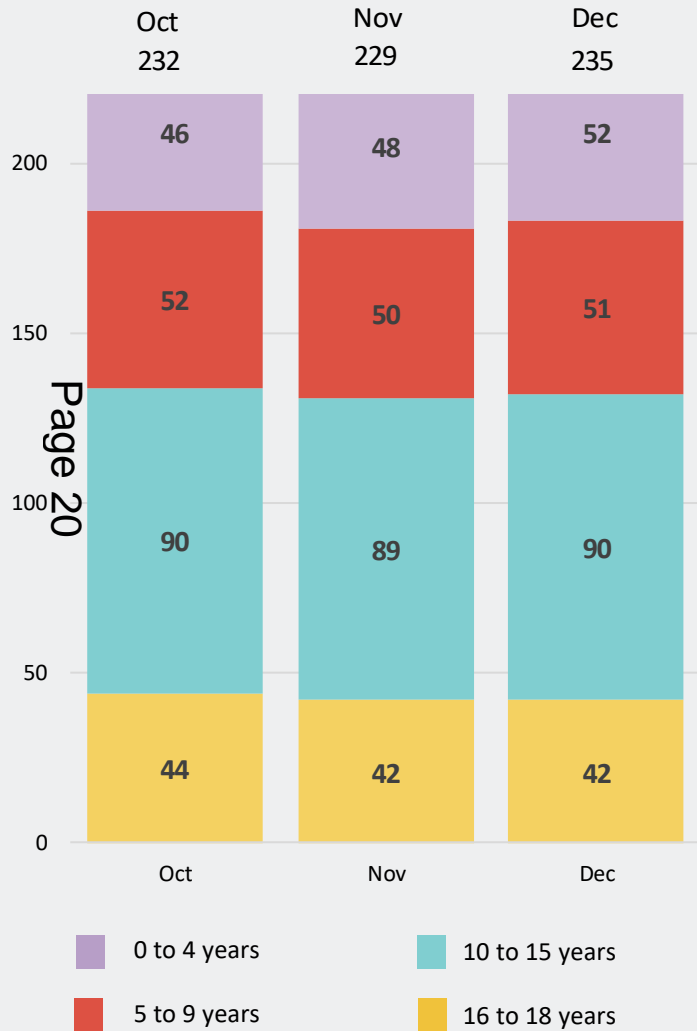
19b. No. of Strategy Meetings Held



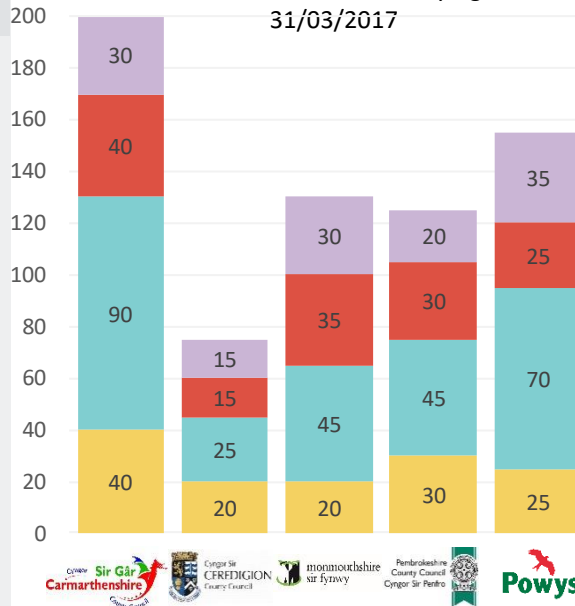
19c. No. of Initial Case Conferences



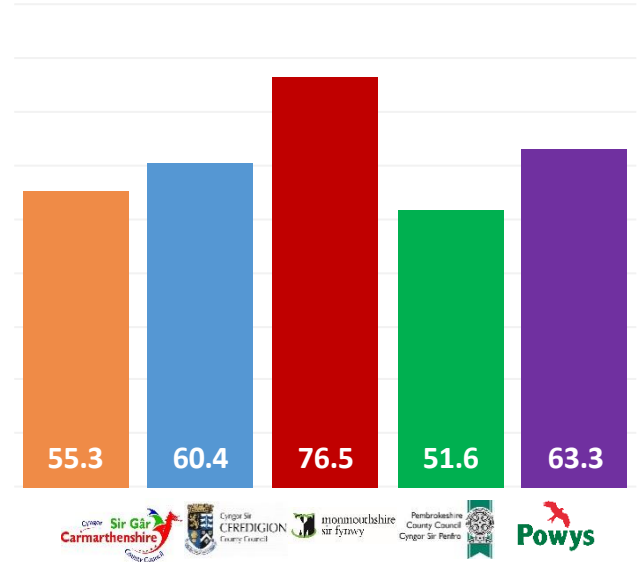
22. No. of Children looked after by Age



No. of Children looked after by Age as at 31/03/2017

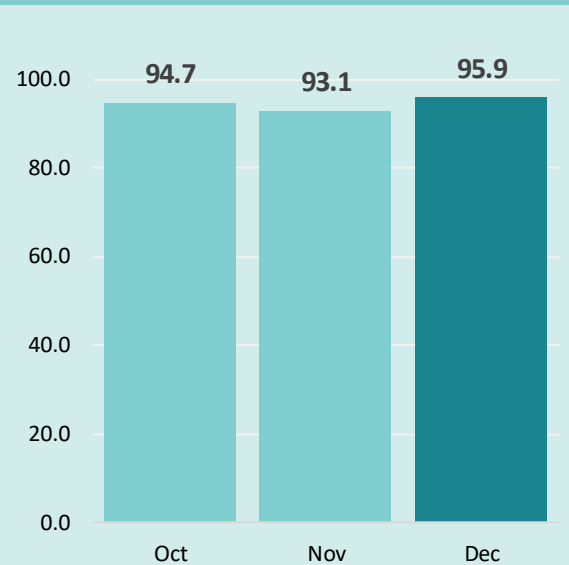


LAC Rate per 10,000 Population as at 31/03/2017

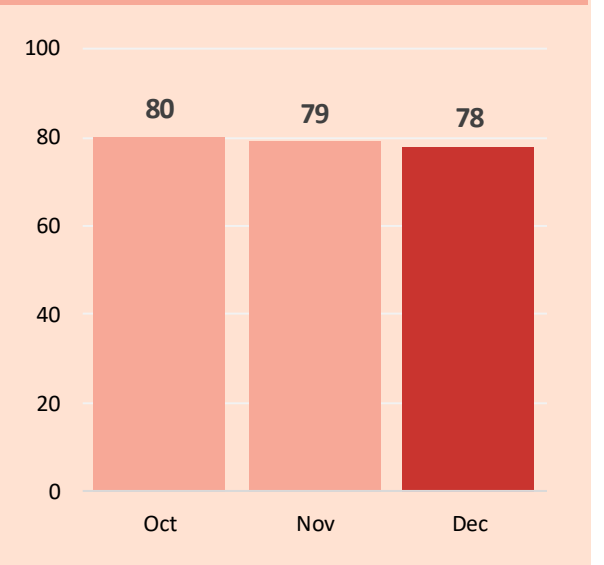


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22e. CLA Rate per 10,000 Population

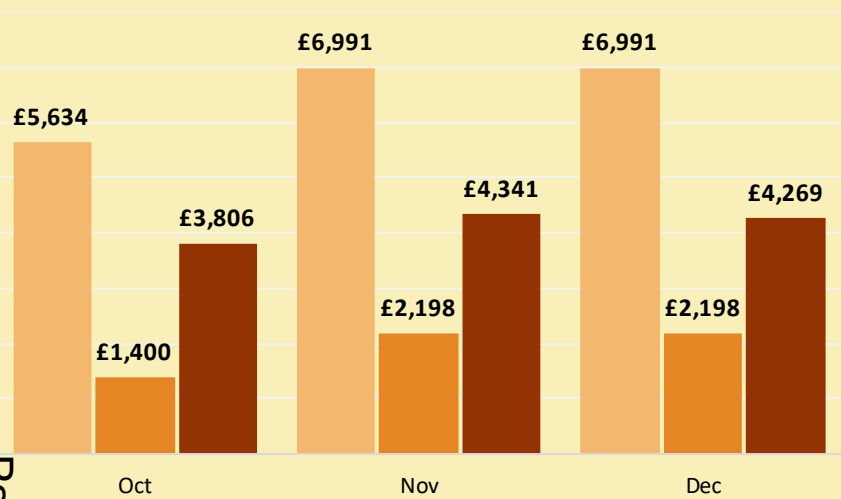


22f. No. placed out of county



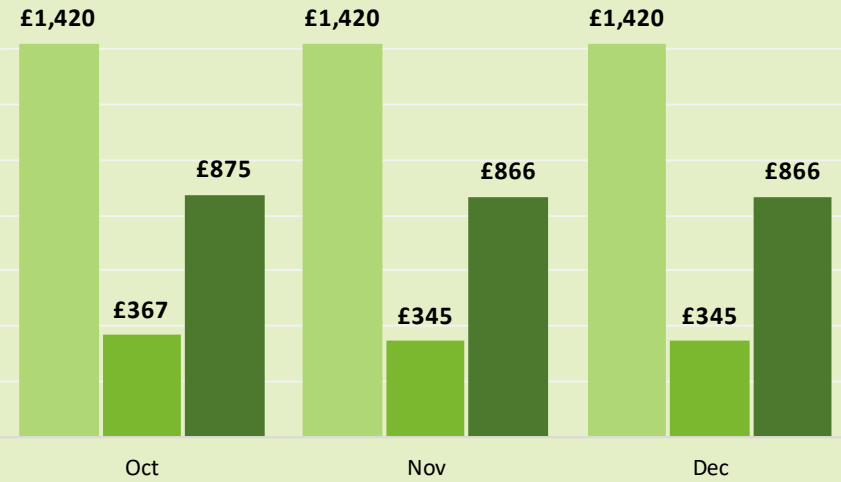
Residential Placement costs (per week)

23. Highest 24. Lowest 25. Average



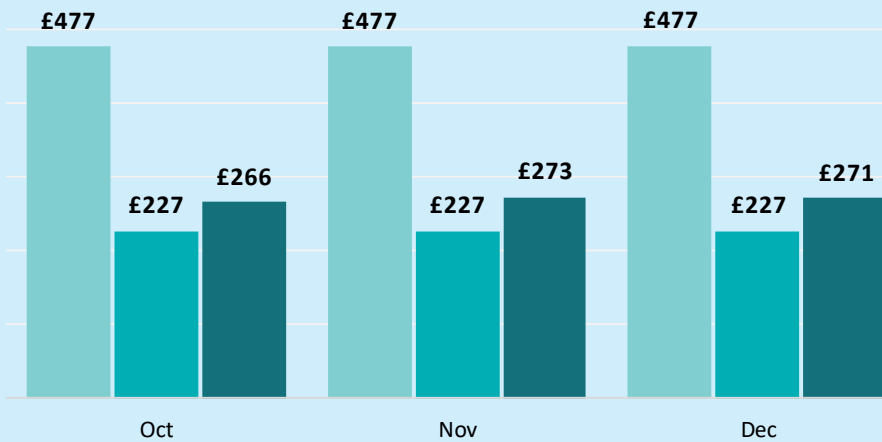
IFA Placement costs (per week)

26. Highest 27. Lowest 28. Average



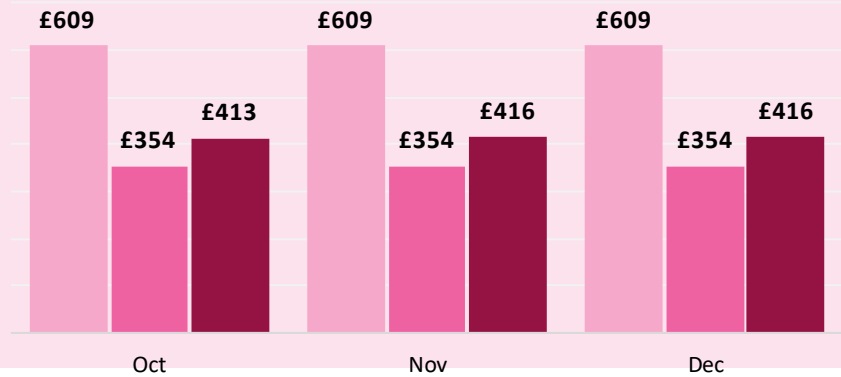
Kinship Placement costs (per week)

29. Highest 30. Lowest 31. Average



In-house Placement costs (per week)

32. Highest 33. Lowest 34. Average



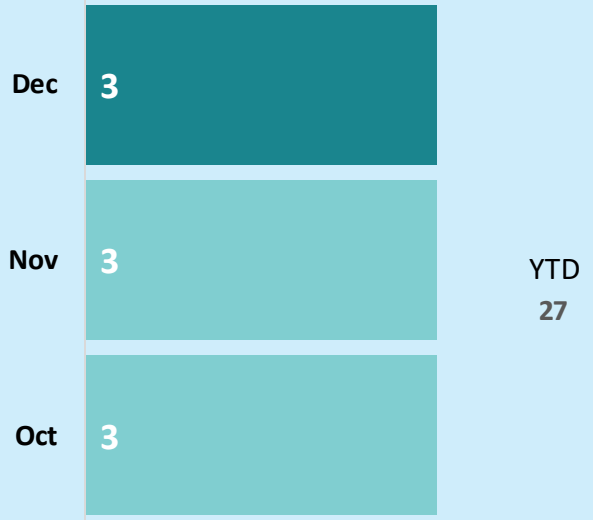
35. Total cost of placements

YTD total **£11,060,795**

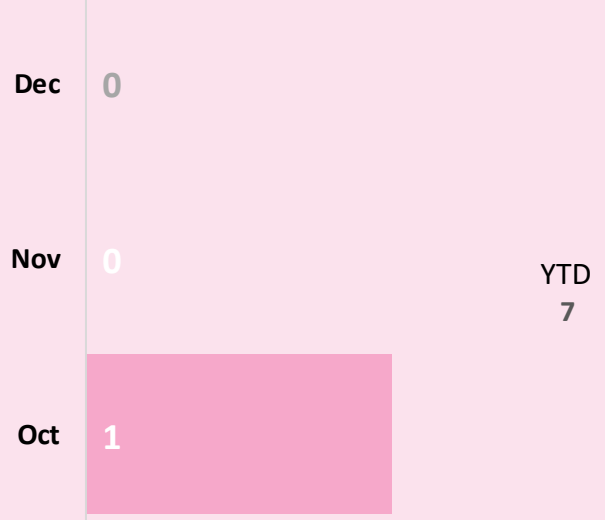
36.No. of Children becoming Looked After



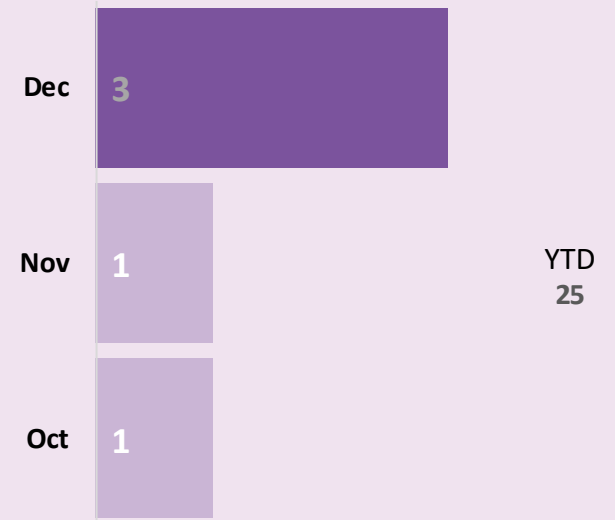
36a. Single Period of Accommodation under Section 76 (Previously Section 20)



36b. Police Protection Order / Emergency Protection Order

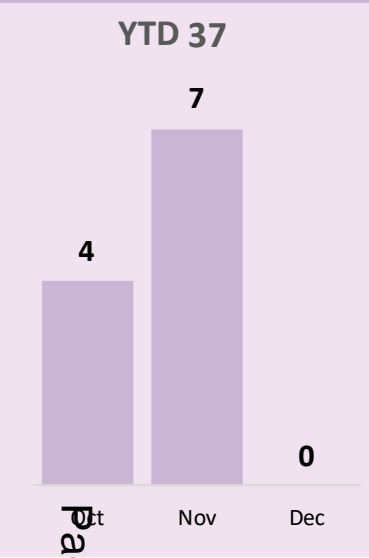


36c. Interim Care Order

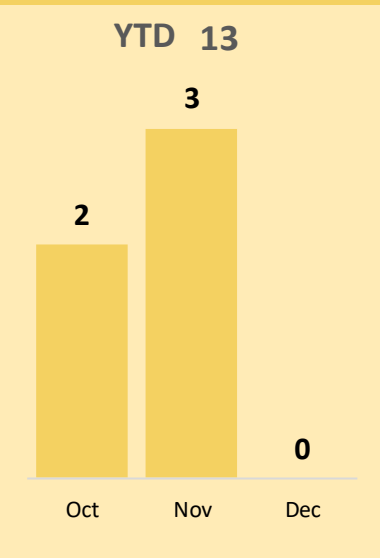


Ceased to be Looked After Reason:

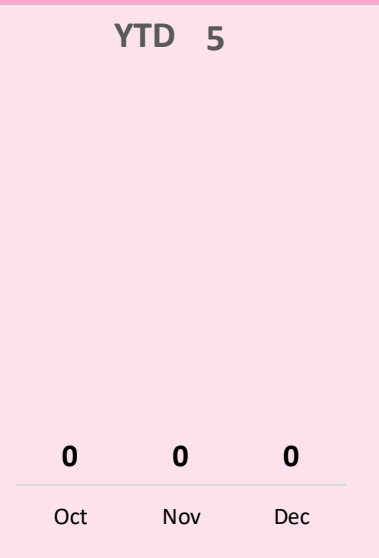
37. No. of Children Ceasing to be Looked After



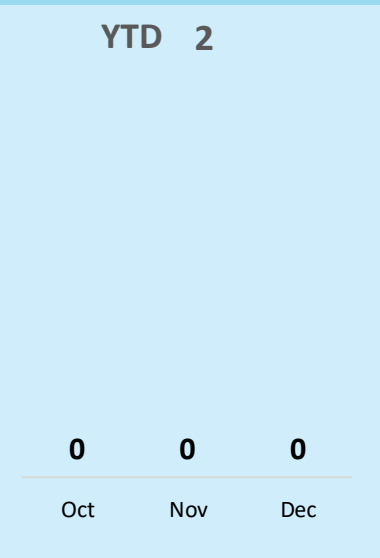
37a. Returned Home to Live with Parents



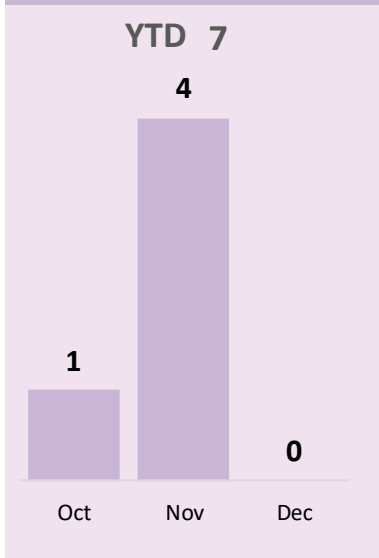
37b. Adopted



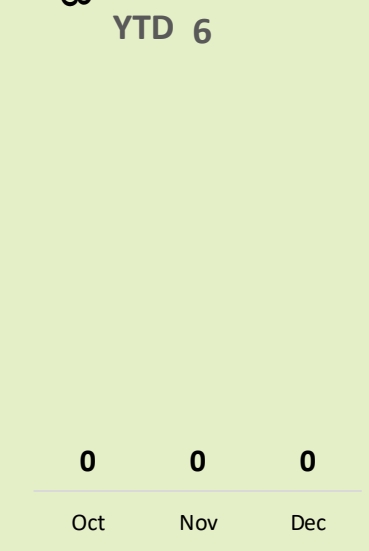
37c. Turned 18



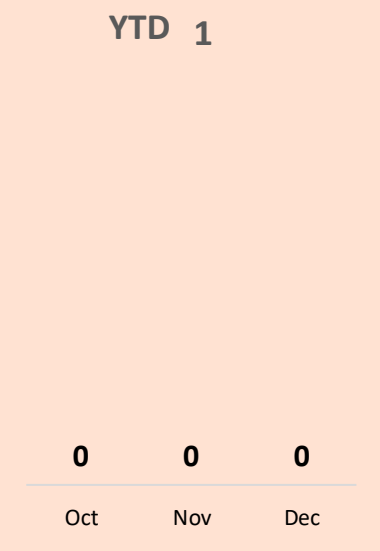
37d. Special Guardianship



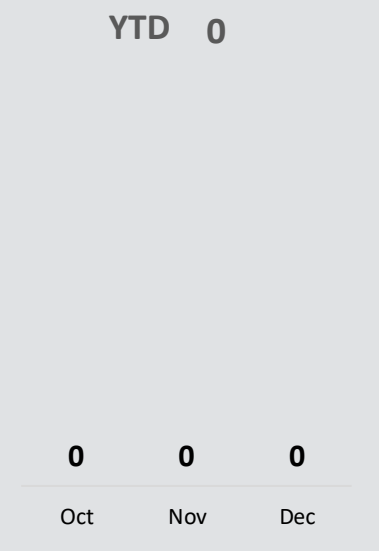
37e. Independent Living



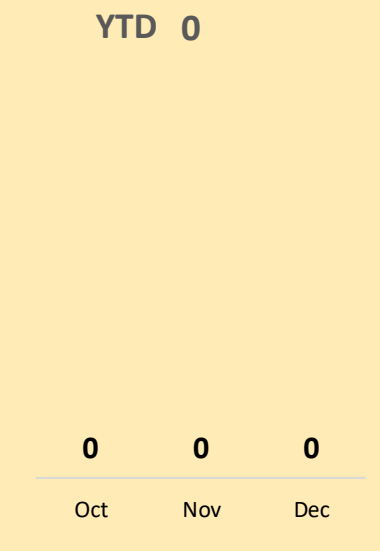
37f. Transferred to Adult Services



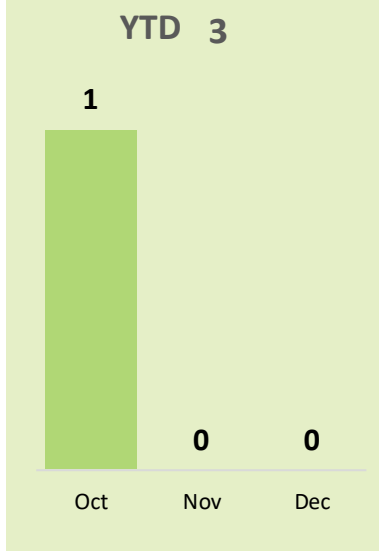
37g. Care taken over by another LA



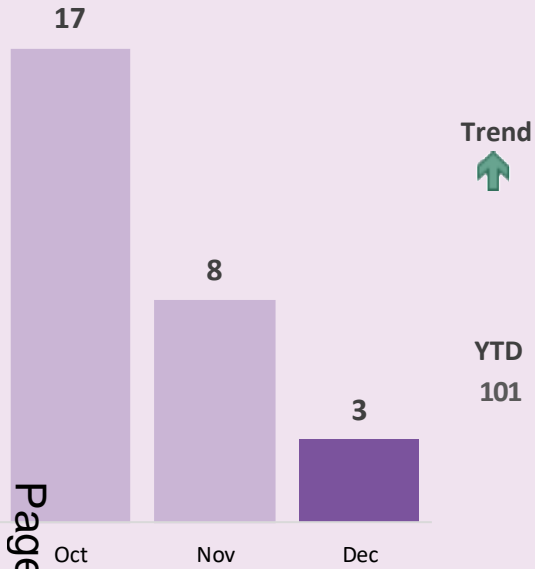
37h. Sentenced to Custody



37i. Ceased for any other reason



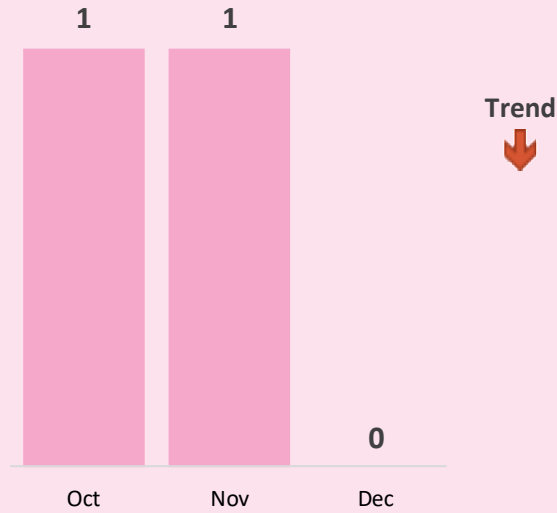
38. Number of Placement Moves



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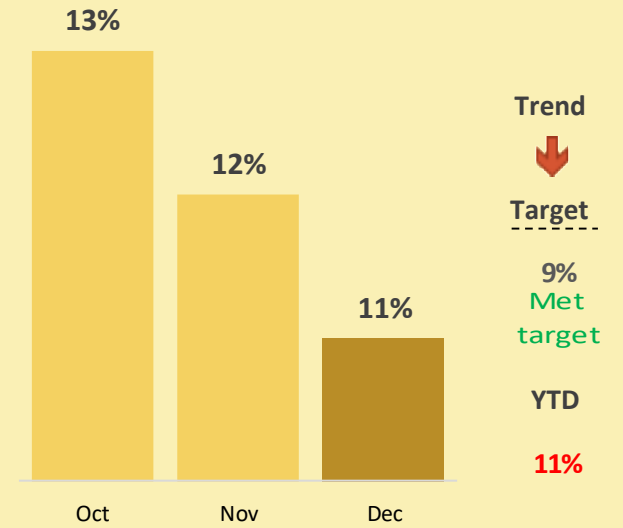
Number of Placement moves as 31/03/2017

39. No. 3 Plus Placement Moves (12 months)

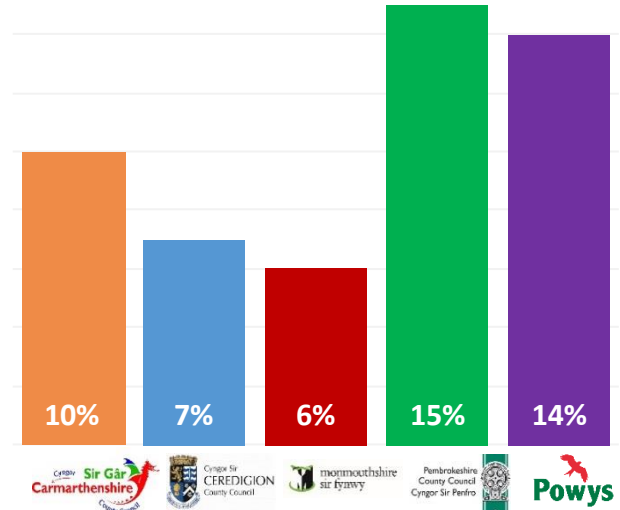
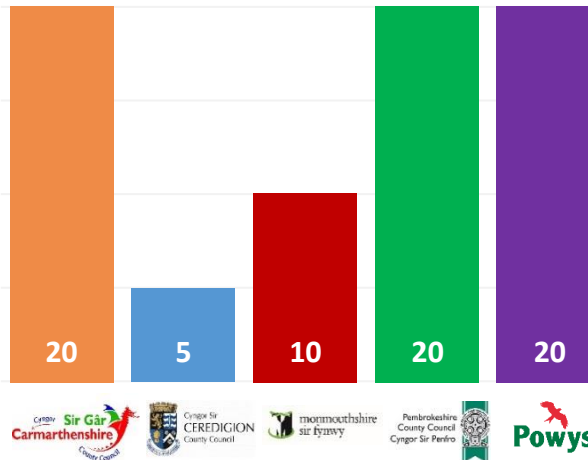
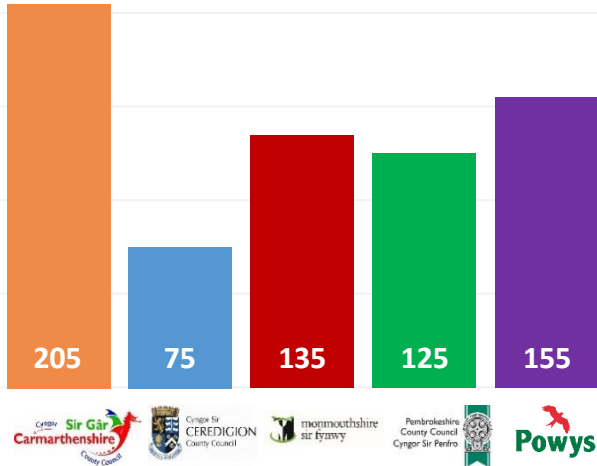


No. 3 Plus Placement Moves (12 months) as at 31/03/2017

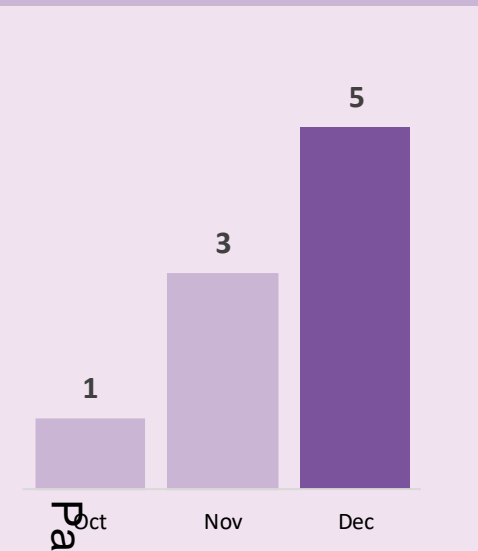
39a. Percentage 3 Plus Placement Moves (12 months)



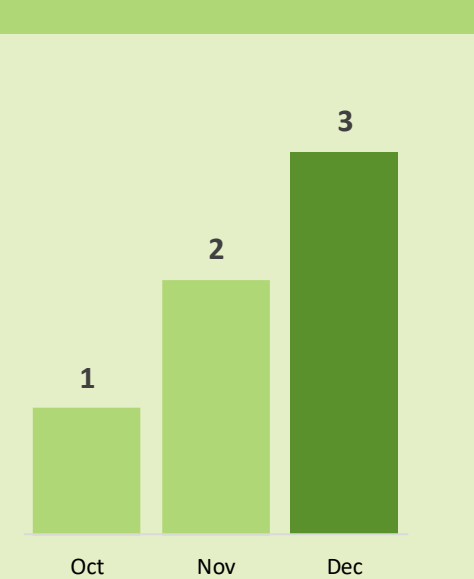
% 3 Plus Placement Moves (12 months) as at 31/03/2017



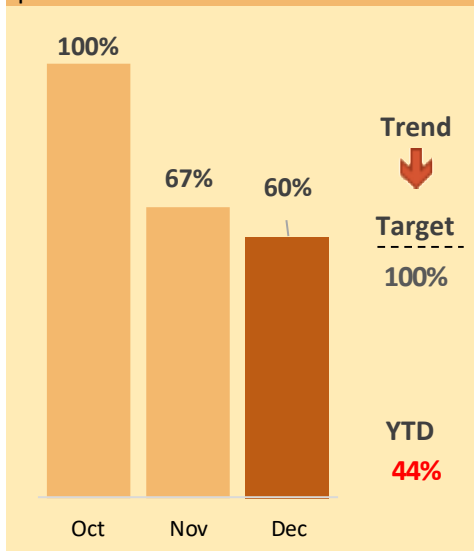
40. No. of Children who should have had a care plan within 10 days of placement



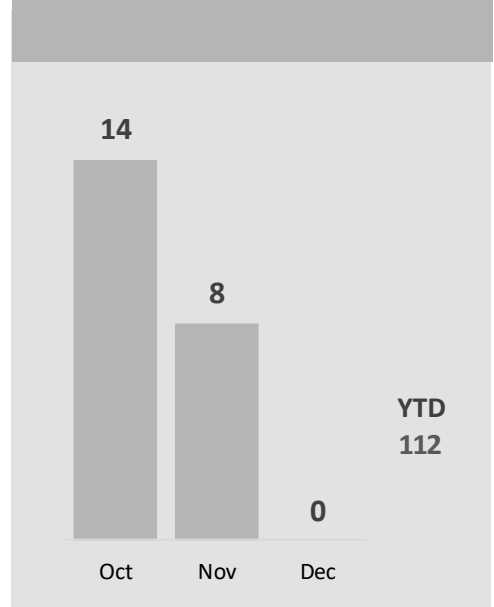
40a. No. of Children who had a care plan within 10 days of placement



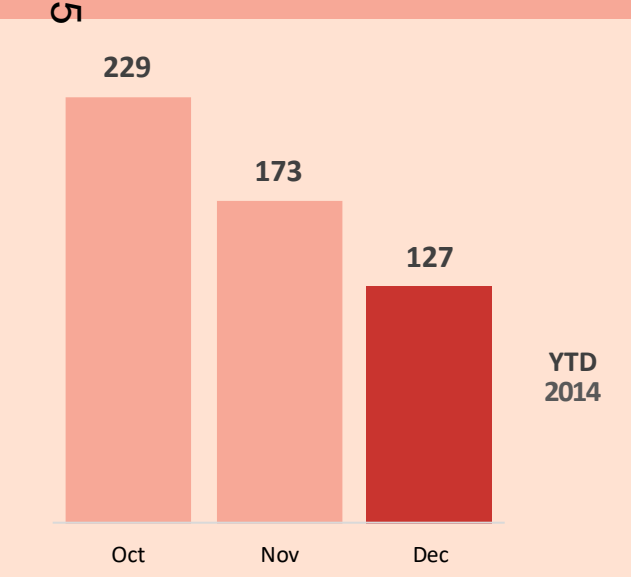
40b. Percentage of children who had one in place within 10 day of placement



41. No. of CLA Reviews Completed

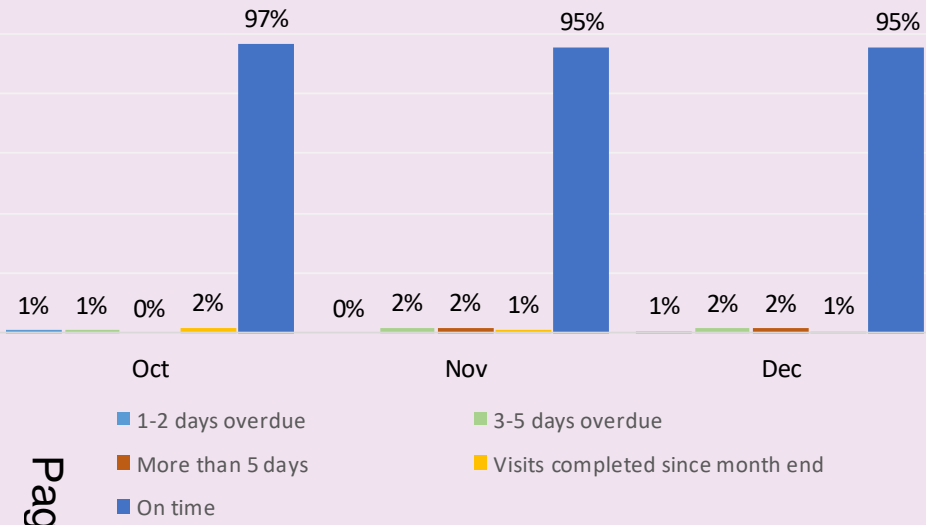


42. No. of CLA Statutory Visits Taken Place

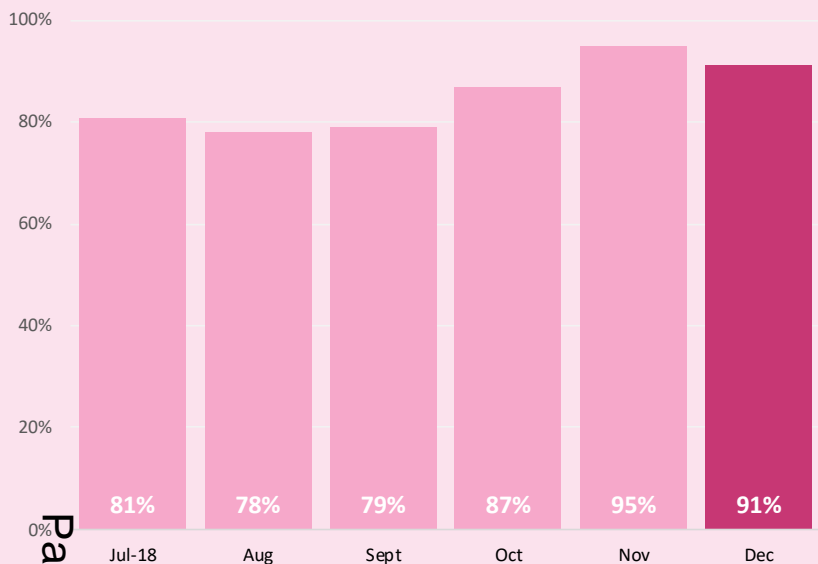


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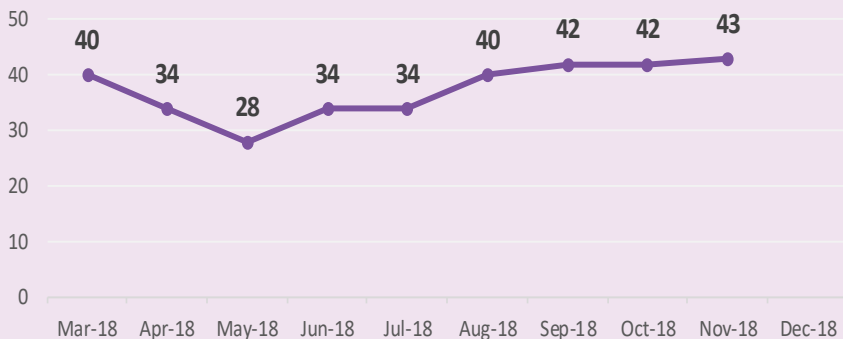
42a. Percentage of CLA statutory visits on time



43. Percentage of staff supervisions undertaken per Month

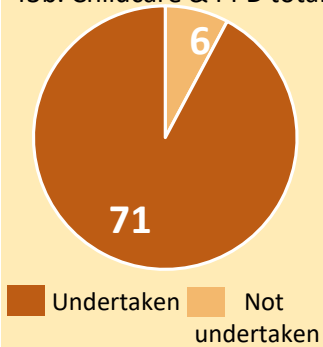


44. The Number of Agency Workers in Childrens Services per Month

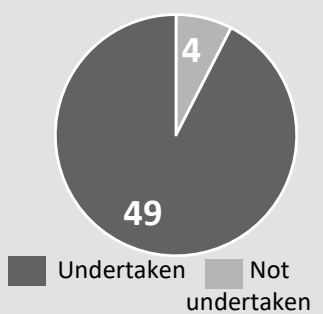


Staff supervision by team per month

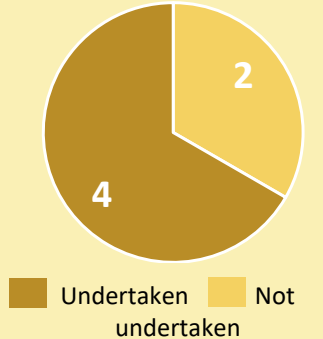
43b. Childcare & PPD total



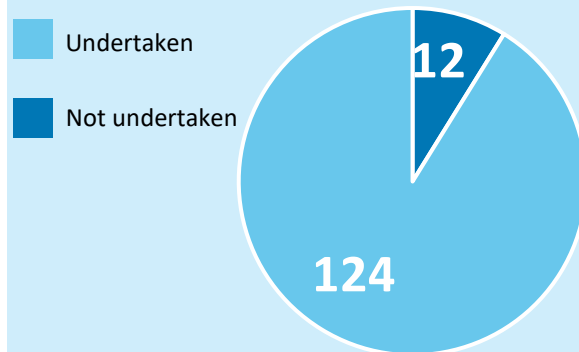
43c. Fostering, Adoption, CWD & FST



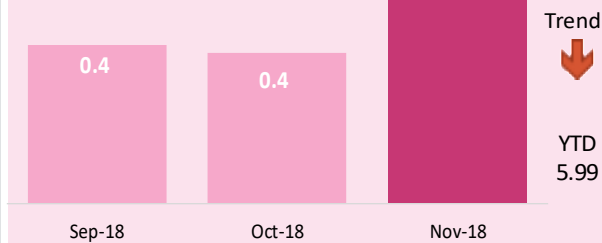
43d. Safeguarding Children's Services



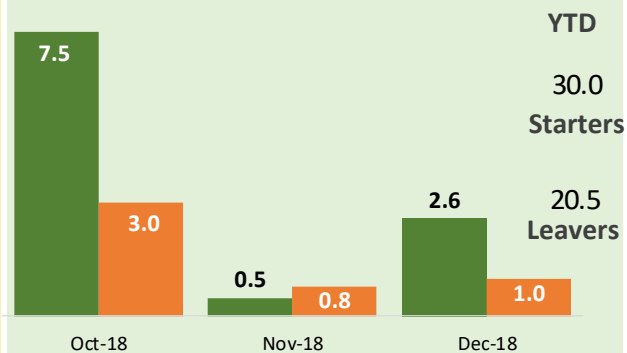
43a. Total supervisions by all Teams per month



45. Average days sickness absence per FTE

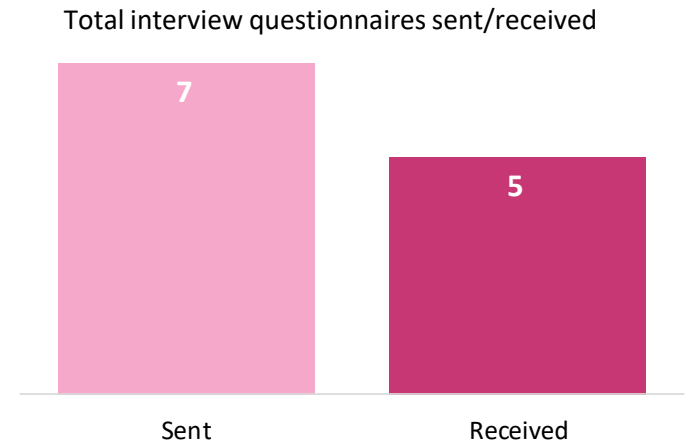


46. Starters and Leavers





Job title	External (Agency)	Internal	Sent	Received
Newly Qualified Social Worker		1	1	1
Social Worker		1	1	1
Consultant (agency)	1		1	
Social Worker (agency)	4		4	3
Totals	5	2	7	5



Adults Performance Report

December 2018

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gb



Yn agored a blaengar - Open and enterprising





Executive Summary



What's working well?

- The percentage of safeguarding enquiries responded to within the statutory timescales continues to be above 90%.
- Whilst the percentage of supervisions undertaken has reduced slightly due to the Christmas period and practitioners' annual leave, it remains high.
- The percentage of contacts to PPD which become referrals to the service has been reducing over the past 4 months.
- The percentage of carers identified who are offered an assessment remains over 90%.
- 92% of all calls to PPD were answered.
- 89% of all calls to PPD where people received IAA resulted in the individuals not contacting the service again within 6 months.
- The new assessment and care and support plan has gone live. Positive feedback has been received from staff.
- Positive response received to the Dynamic Purchasing System from providers, with the potential of new domiciliary care providers entering the Powys market.
- The evaluation of early help and support through the Home Based Support pilots is demonstrating effective outcomes.
- A reduction in the number of people being placed in residential and nursing care.
- Technology Enabled Care is becoming embedded in service planning.

It is also worth noting that the service senior manager capacity is becoming more stable with:

- Permanent Director in post (Alison Bulman).
- Permanent appointment to Head of Adult Services made - (starting on 23rd April 2019 – Michael Gray).
- Interim Head of Adult Services in place (Jennifer Jeffreys).
- Permanent appointment to senior manager older people services made – in post (Adam Greenow).
- Permanent appointment to senior manager disabilities and mental health – in post (Rachel Williams).
- Permanent Head of Commissioning for Social Services post created - (starting on 1st March 2019 - Dylan Owen).



What are we worried about?

- There is a significant lack of domiciliary care capacity. The numbers of people waiting for care hours is 35 (as at 16 January 2019) and the total number of care hours required for these is 1,000. Of these people 11 do not have any care provision (300 hours) in place. Work is being undertaken with providers, additional capacity through agencies (with accommodation provided), and through introduction of DPS. Increased hours through the in-house service have been provided.
- The lack of domiciliary care capacity is causing additional pressures:
 - Increased use of residential care for step-down beds is reducing capacity for respite and residential care home beds.
 - Increased numbers of people in hospital who are awaiting transfer home.
 - Increased risks for individuals in the community awaiting care packages.
 - Increased failure-demand caused by repeated requests from the public, councillor queries, complaints, and pressure from partner agencies.
- The financial savings required for 2019/20 may result in no inflationary uplifts to service providers and will reduce service provision.
- Ability to spend the ICF Capital available to the Council due to the money being made available in October for significant projects.
- Ongoing work to meet the challenges identified by the Older Person's Commissioner around the quality and standards of care in homes.
- Ensure the current system has robust reporting is in place in terms of safeguarding strategy meetings/case conferences.

- Work is ongoing with the Dynamic Purchasing System and support of domiciliary care agencies.
- Work is ongoing with the tendering process for the Powys owned residential care.
- Work is ongoing with the review and reduction in day services for older people.
- Further embed motivational interviewing and strengths-based practice by social workers and occupational therapists.
- Closer working with community connectors and 3rd sector colleagues.
- Ensure that ICF funds are used for transforming social care through innovative projects, including Technology Enabled Care, Home Based Support, Ask Sara, virtual house and Tribe digital first projects.
- Consultation process is underway in respect of the PPD redesign. Phase 1 will be complete by 31st January 2019.
- The adult safeguarding form is live. Work is continuing to ensure that reporting is robust.
- The “poor practice” service referral form in line with Safeguarding Threshold document will be going live on 1st February 2019.
- Work with Housing to develop extra care services across the county.
- Further develop the pooled fund for residential care and the Section 33.
- Undertake further work to embed the active offer to increase the percentage of Welsh speaking service users receiving assessments in Welsh.
- Undertake a review of reablement services in order to ensure effectiveness.
- Work with the health board to support the North Powys Rural Regional Resource Centre development.
- Invest further into the Shared Lives service to increase the capacity and options available to individuals.
- Work with the Council to ensure that the service is Brexit-ready and that care providers are supported to undertake all preparedness work.
- Work with the Health Board to develop the Caban project in order to bid for Transformation Funding.



What's working well?

- 1a - The average speed of calls answered in PPD is 51 seconds. With 92% of the calls being answered. This is an increase to the number in November 2018.
- In addition, 843 contacts were made to the Social Services line.
- 1b - The percentage of contact to referrals has remains static indicating that screening is consistently being applied.
- 3 - 96% compliance within timescales. We can now evidence this is business as usual. Daily referral meeting provides evidence of robust management.
- 5 – 39 audits completed (out of 45) compliance rate has remained static with November’s performance of 87%.
- 5 – Peer and group audits continue to be undertaken and feedback from workers is that this has enhanced learning.
- 5 – Direct observation of practice rolled out in Older People North and to be extended to Disabilities and Mental Health North. OTs have been undertaking direct observation of practice across the county.



What are we worried about?

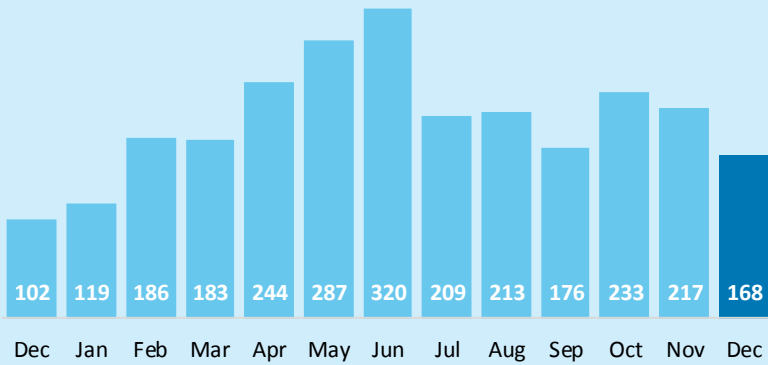
- 1a – On 17th December 2018 there was an issue with the phones. 22 calls were abandoned after 22 seconds due to a technical error. Officers were unable to answer. This issue was escalated and rectified, but it will have an impact on the data.
- 2 - As we are in winter pressures there has been delays within the system due to limited capacity.
- 4 – The percentage of supervisions decreased but this attributed to a high level of sickness and annual leave, particularly in the South of the County.



What do we need to do?

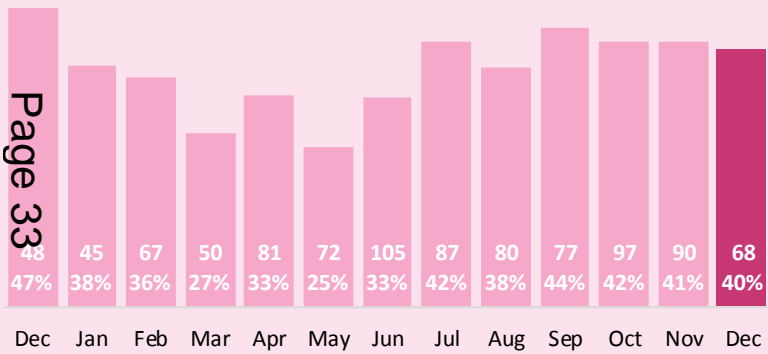
- 1a – The management oversight changes which are proposed with PPD will ensure that codes are embedded in practice on an ongoing basis.
- 2 - All teams are focused on reducing these delays which is slowly coming to fruition. To agree a robust process with the Health board around reporting.
- 5 – Direct observation of practice to be rolled out in the South of the County. Early indications show that this is having a positive impact.

1a. Number of Contacts to Powys People Direct

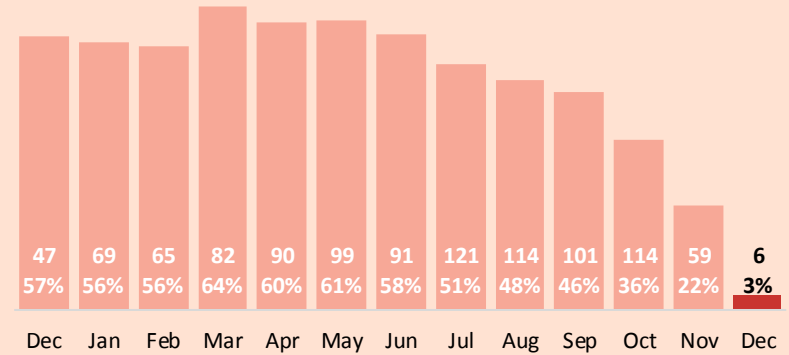


Note: Measure 1c/1d - This data will always remain variable, depending on the delay in service being commissioned; the stat cannot be calculated retrospectively.

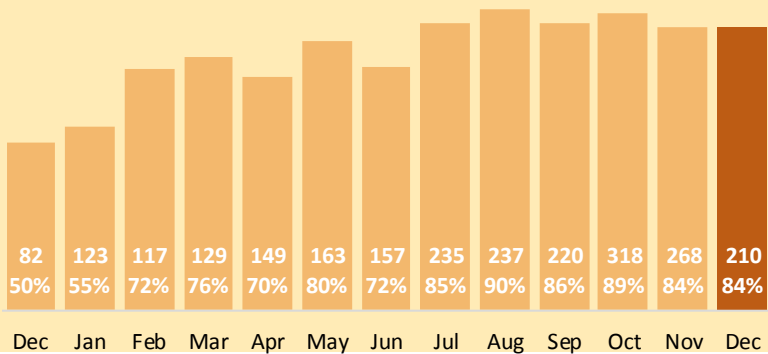
1b. % contacts to referrals



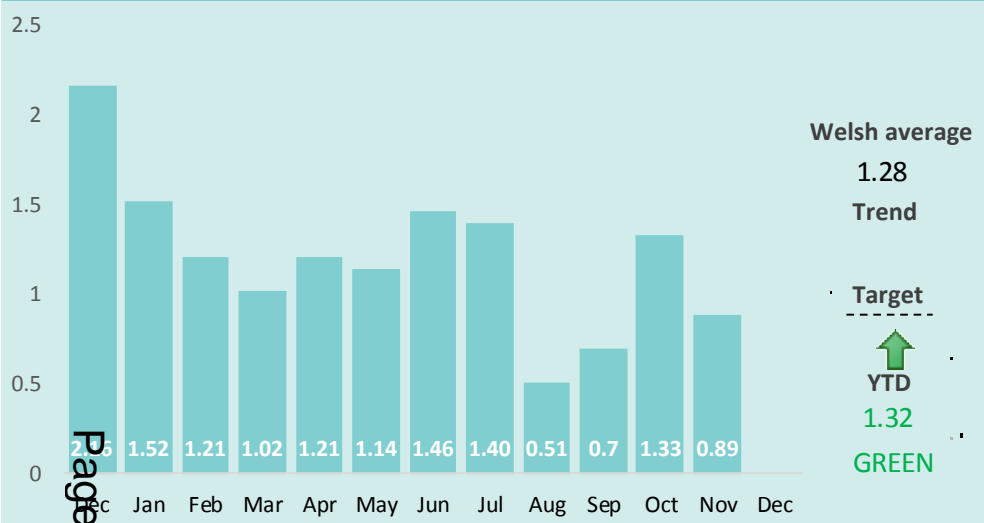
1d. % of assessments to service



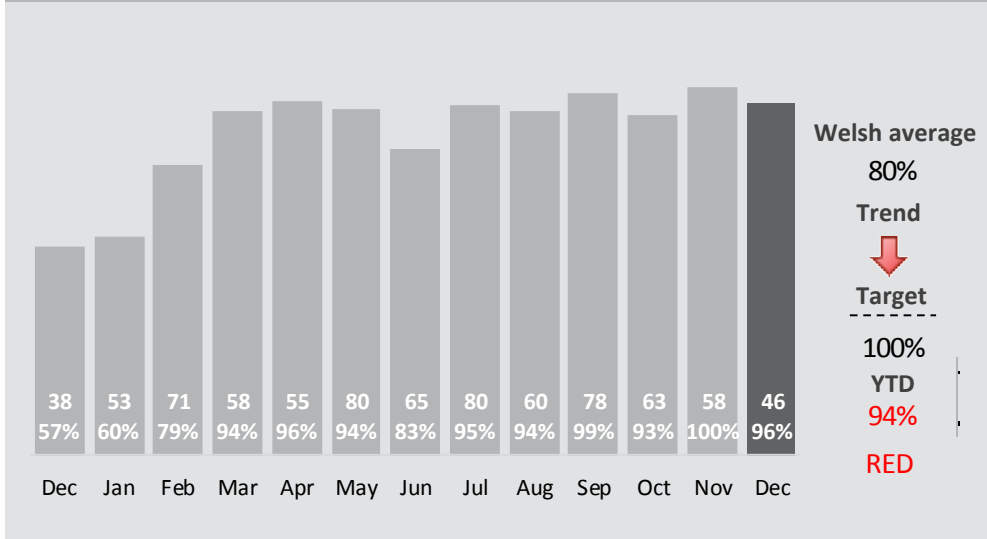
1c. % referrals to assessment



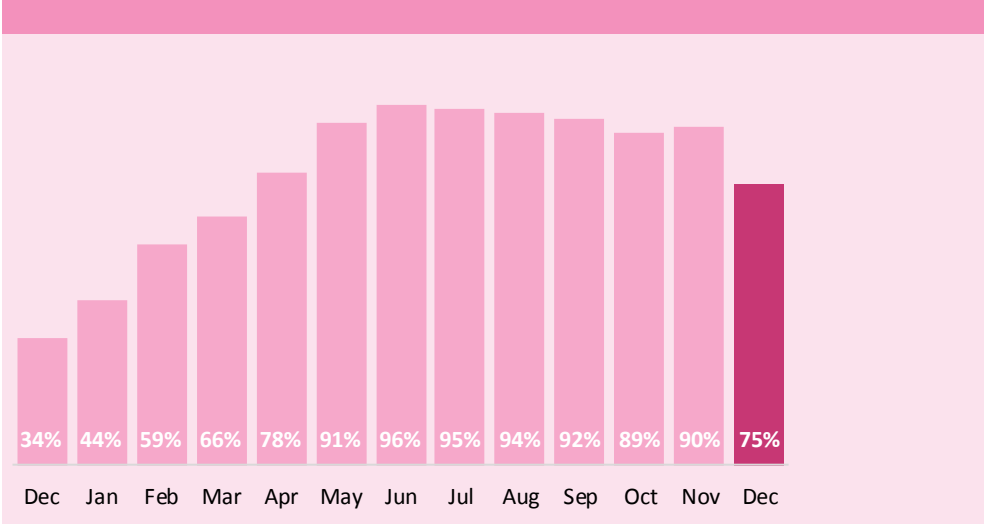
2. No. of persons (per 1000 population) aged 75 and over who experience a delay in returning to their own home or social care setting following hospital treatment



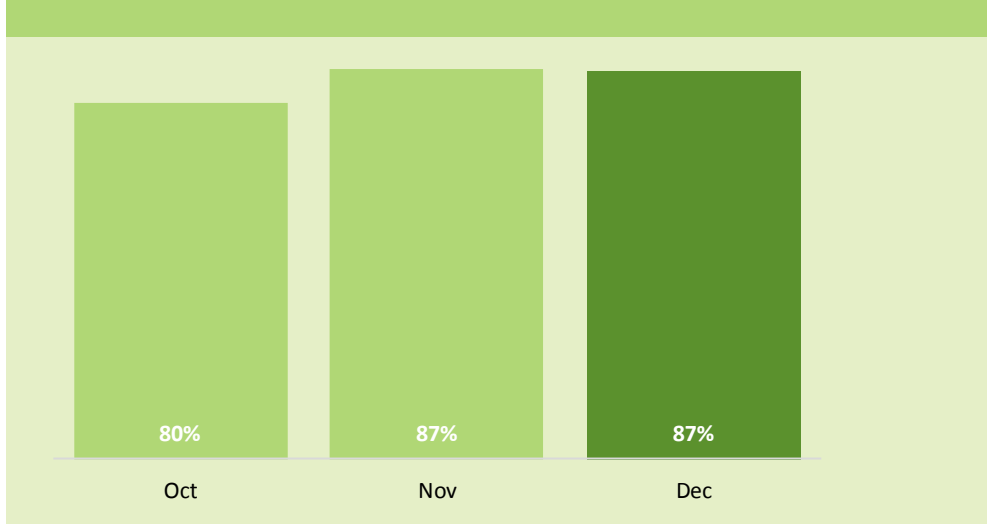
3. Measure 18 – The Percentage of adult safeguarding enquiries completed within statutory timescales



4. % of case supervisions held



5. Compliance against QA Policy



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What's working well?



What are we worried about?

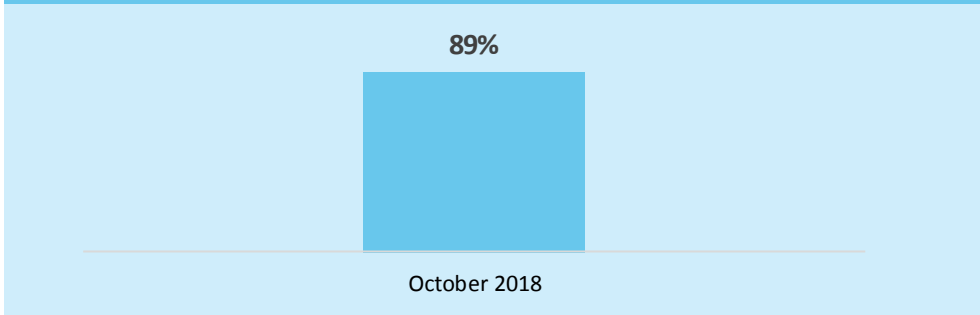
- 6 – 6d – there is a delay in the forms being built in WCCIS.



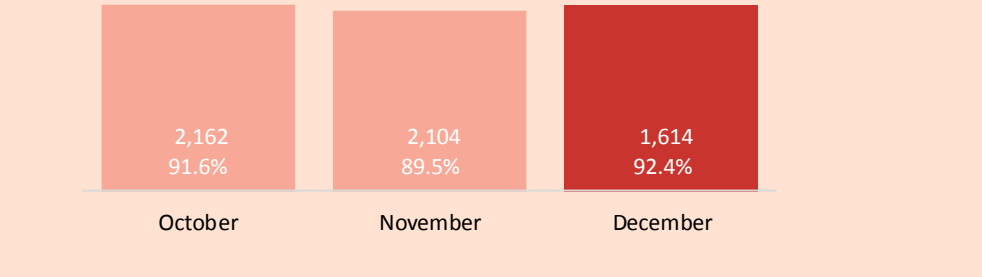
What do we need to do?

- 6 – 6d – this has been escalated to the appropriate Head of Service to get this resolved.

6. Measure 23: % of adults who have received support from the IAA service and have not contacted the service again for 6 months (Reported biannually)



6.a. Percentage of calls answered





What's working well?

- 7 – New integrated assessment and care and support plan now live in WCCIS with largely positive feedback from staff.
- 7- Work completed by OTs during October to December 2018 on double handed packages has resulted in a saving of £22,500 by changing equipment and providing training on how to use this.
- 7a - This is proportionate in line with the assessments which have been undertaken.
- 11 - Carers Assessment with WCCIS for building.
- 13 - During December 85% of individuals completed a period of Reablement and have no package of care and support 6 months later.
- 14 – Discharge summary outcomes evidence the use of third sector and assistive technology.



What are we worried about?

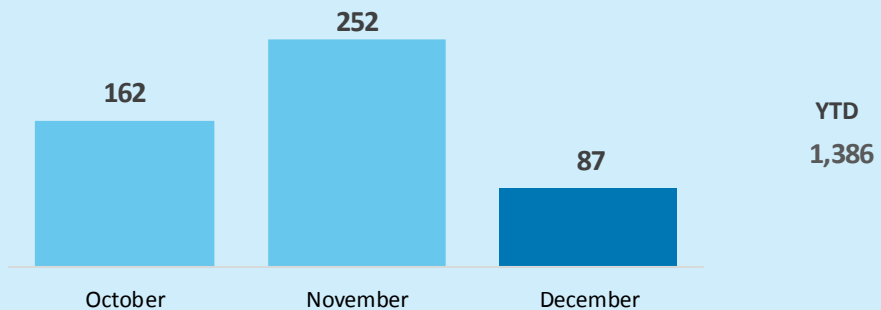
- 7 - It is acknowledged that there is a reduction in the numbers of assessment undertaken in December. This was a combination of annual leave, end of leave year, sickness within the teams. It is also noted that this is considerably lower than November's figures - this was due to a data cleansing exercise undertaken in November to close open assessments.
- 14 – Enabling the flow within reablement to longer term care.



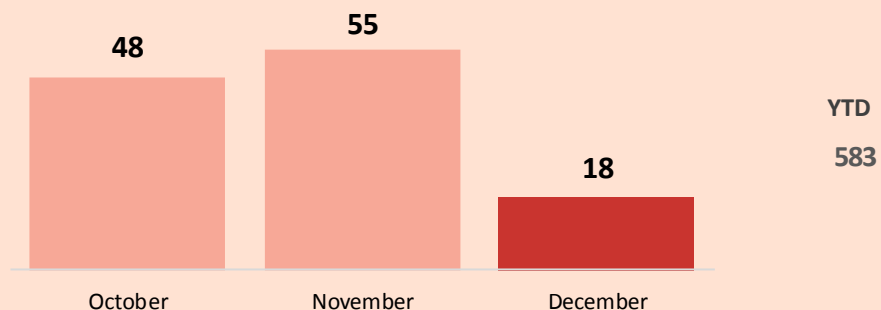
What do we need to do?

- 7 - To ensure that all outstanding forms are built within WCCIS.
- 8a - Work needs to continue with teams to explore the rationale behind the low take up of support in the carers own right.
- 11 - To develop Carers support plan and review document.
- 14 – a review of the reablement service is being undertaken, to ensure the service focuses on the most appropriate individuals.

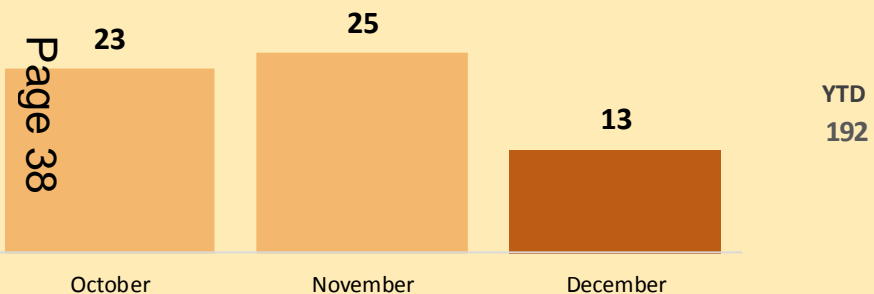
7. No. of assessments of need for care and support undertaken



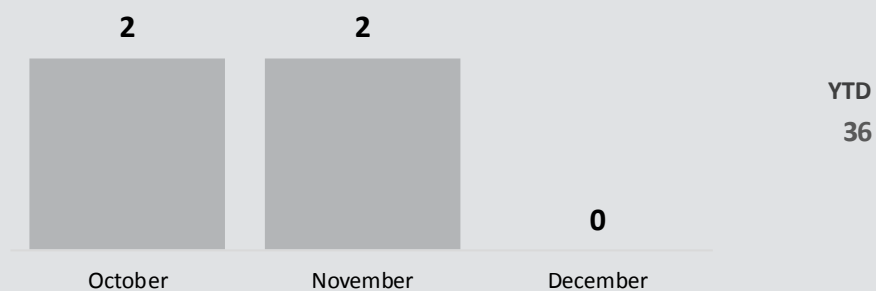
7a. Of these, no. of assessments that led to a care and support plan

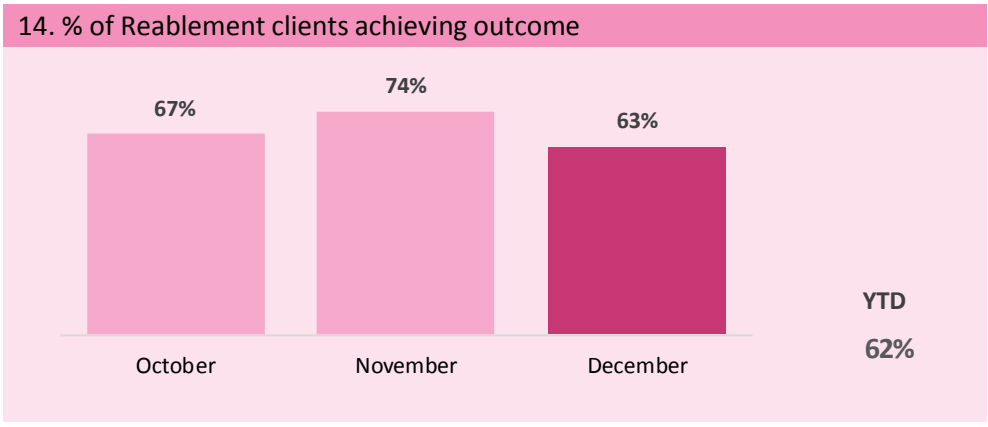
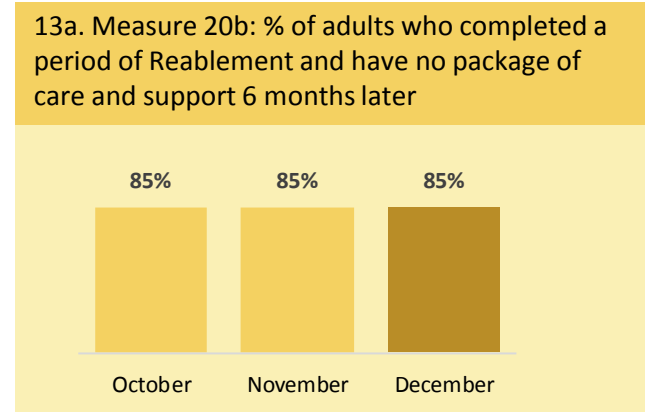
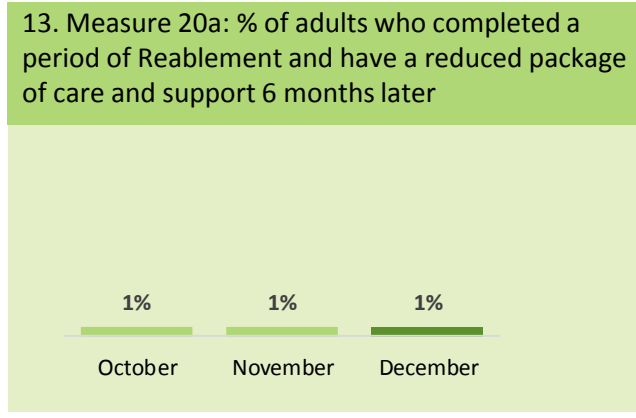
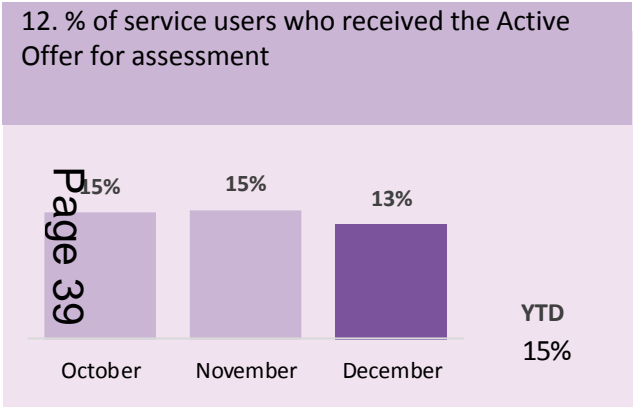
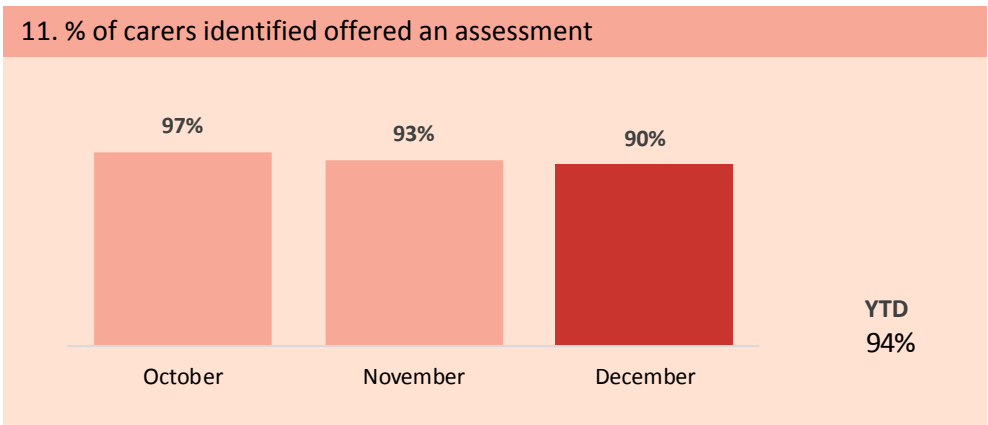


8. No. of assessments of need for carers undertaken



8a. Of these, no. of assessments which led to a care and support plan





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What's working well?



What are we worried about?

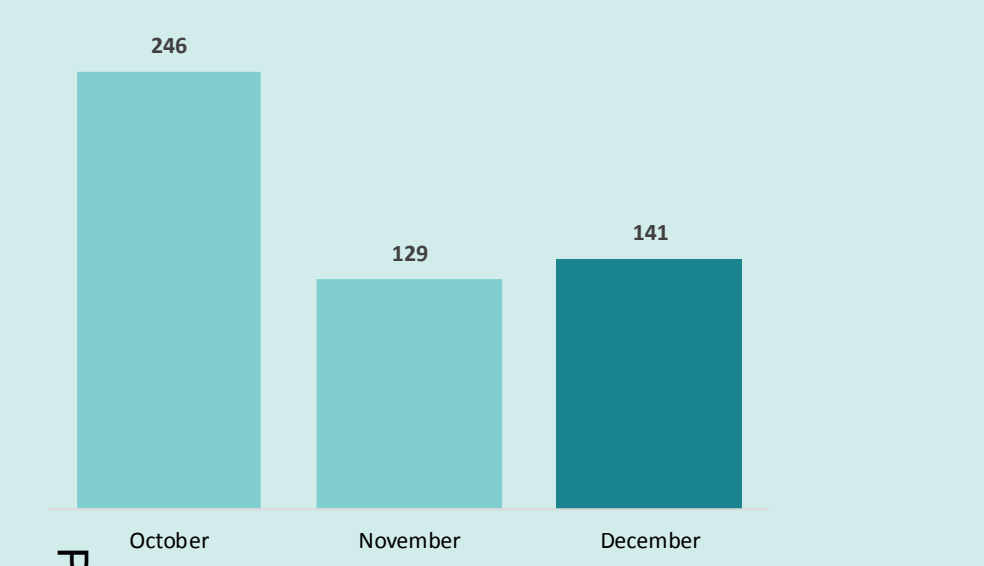


What do we need to do?

- 15 - Backlog of reviews continues to be worked on, as at 16th January 2019, the numbers equate to 662, 438 of which relate to older people:
 - Brecon Wellbeing Team –2
 - Older People Brecon –163
 - Older People Radnor –112
 - Older People North –94
 - Older People North –
 - Reviewing Team –65
 - Ystradgynlais Integrated Team –2
 - Mental Health –21
 - Disabilities –196
 - Sensory Loss –7
 - OT –2
- OT Assessments –snapshot -there are considerable delays in assessments being undertaken in the South of the county with the longest wait being 22 weeks (171). In the North, the longest wait is 9 weeks (18).
- Sensory Impairment waiting lists for Hearing Impairment – 64
- Visual Impairment -102

- 15 – The introduction of the new care and support plan will ensure that all outcomes for the individual are pulled through from the assessment with further work being undertaken by mentors encouraging and facilitating a focus on strengths based outcome focused approach.
- To ensure that all waiting lists are managed appropriately, priorities and contact made with individuals.
- Phase 2 of the whole system redesign will identify new ways of working.

15. Review dates that are blank and referral open over 6 weeks





What's working well?

- 18 – 96% compliance with timescales. We can now evidence this is business as usual. Daily referral meeting provides evidence of robust management.

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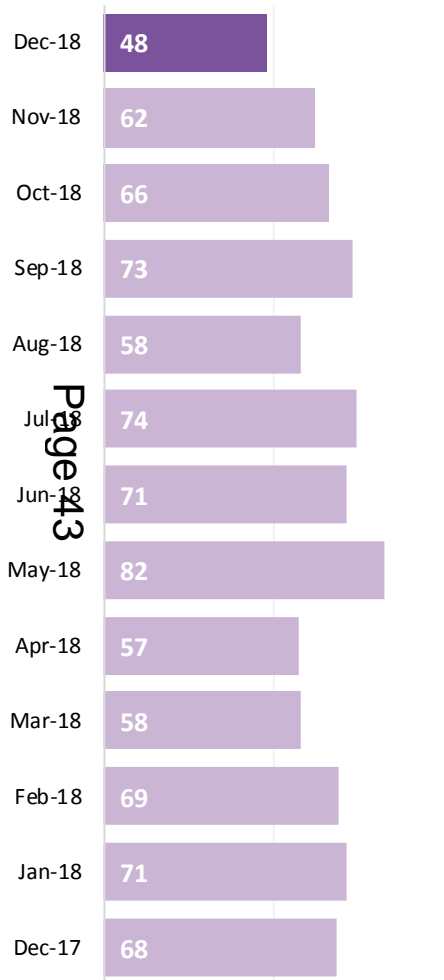
What are we worried about?



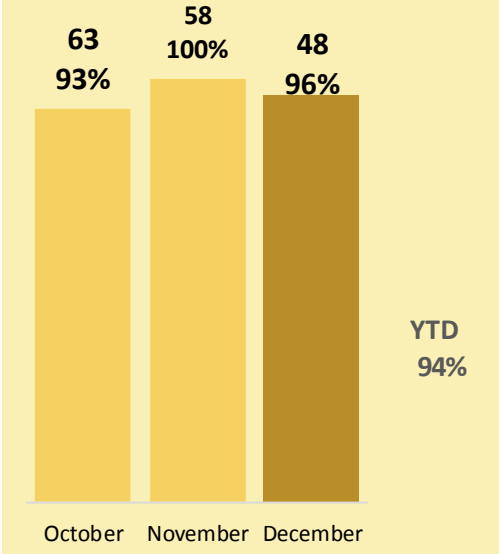
What do we need to do?

20 – This figure includes information and advice post referral / pre enquiry. Therefore this figure will be higher than measure 19a.

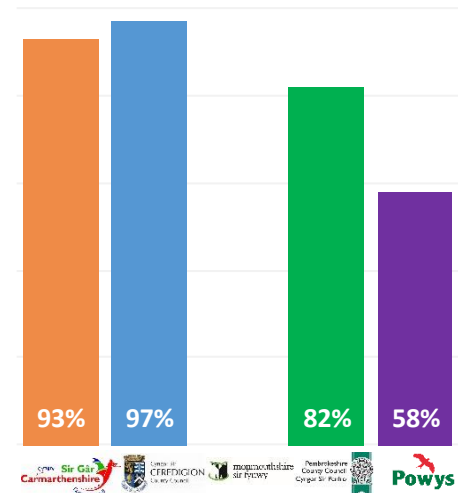
17. No. of clients referred to the adults safeguarding team 17/18



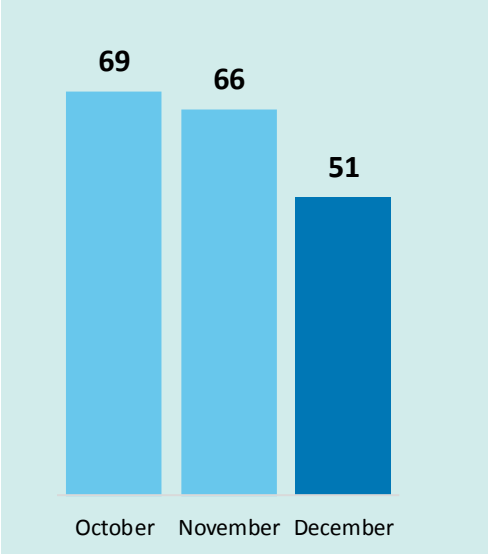
18. Measure 18 - % of adult safeguarding enquiries completed within statutory timescales



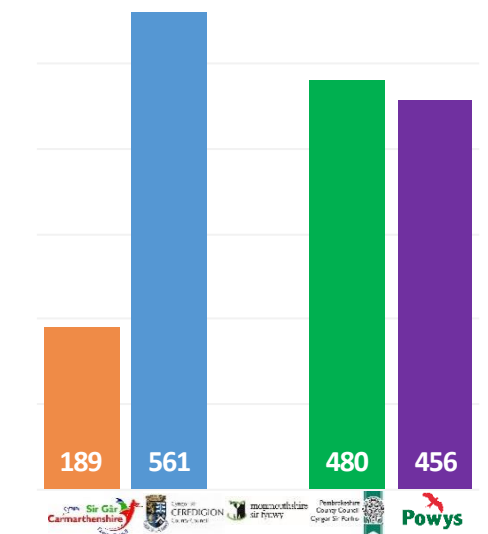
% of adult safeguarding enquiries completed within statutory timescales Apr - Sept 17



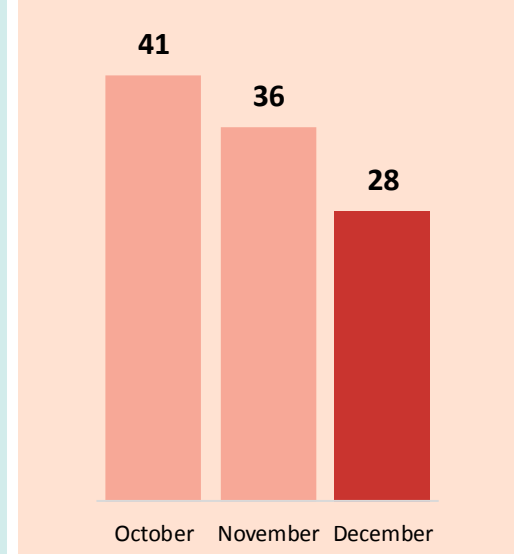
19. No. of referrals made to adult safeguarding during the year



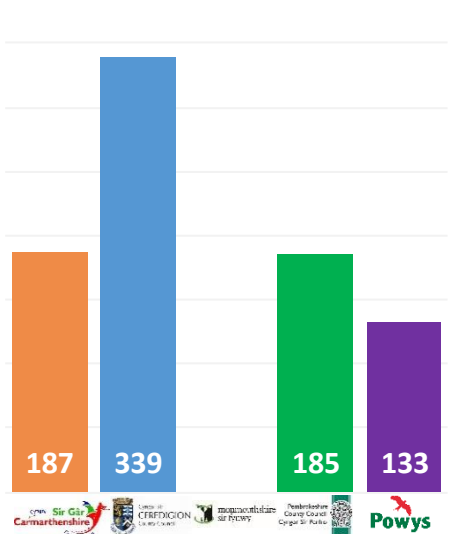
No. of referrals made to adult safeguarding during the year April - Sept 17



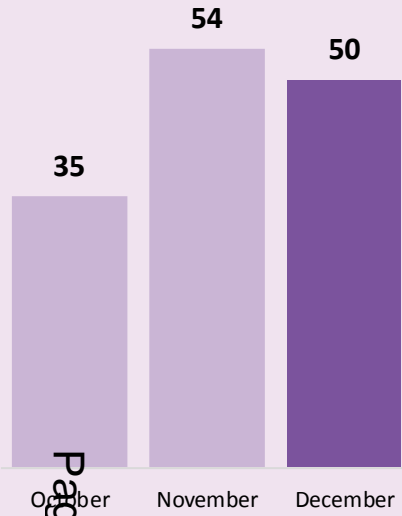
19a. Of these, how many led to an enquiry



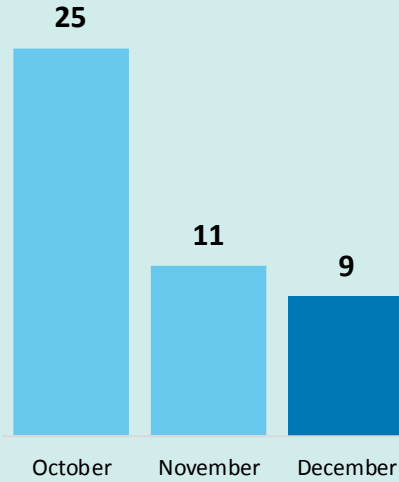
Of these, how many led to an enquiry April - Sept 17



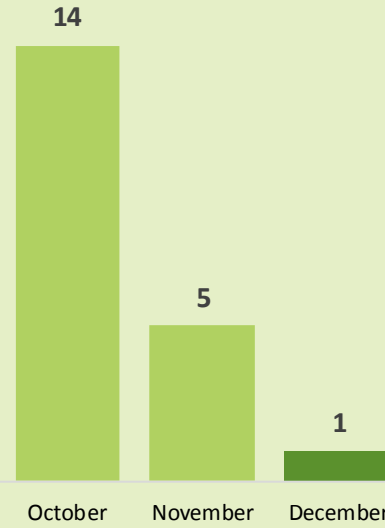
20. No. of enquiries which concluded that action was required



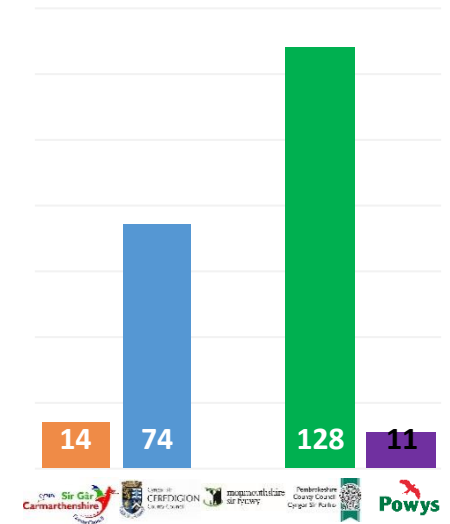
21. No. of non-criminal investigations concluded during the year



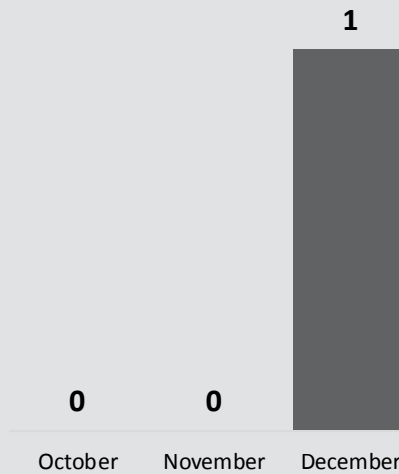
22. No. of strategy meeting which have taken place



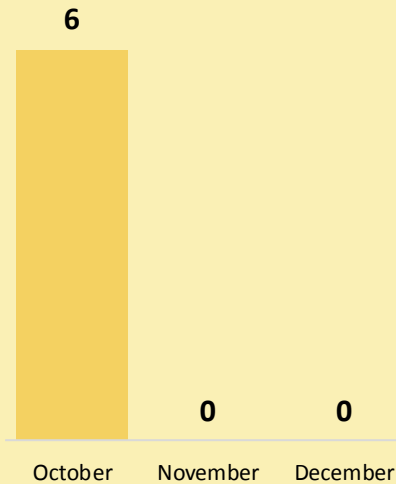
No. of strategy meeting which have taken place as at 31/03/17



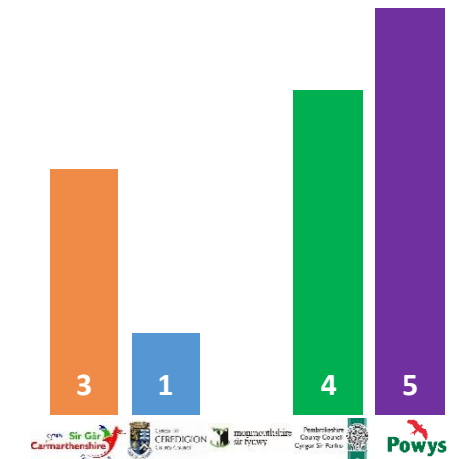
23. No. of case conferences completed



24. No. of Adult safeguarding plans complete



No. of case conferences completed as at 31/03/17





What's working well?

- 25 & 25a – Reduction in numbers of people both in residential and nursing care, and new residents.
- 25 & 25a – Reduction in numbers of people both in residential and nursing care, and new residents.
- 27 – At the end of December 2018 we have supported 400 individuals with technology enabled care. We have supplied 862 items of technology via 508 prescriptions. The full business case for the funding of the Technology Enabled Care Service in 2019/2020 has been approved.
- 28a - All team members have been trained within the outcomes based training which has enhanced practice and enabled the staff to understand in more detail the outcomes required on a individual case by case basis.
- 30 – The agency Occupational Therapist, who is right sizing domiciliary care packages, in order to increase independence and create market capacity, identified, in Quarter 3 (Oct-Dec 18), 120 hours that could be reduced through the provision of appropriate equipment. This will deliver a weekly saving of around £2,000.
- 30 – The Dynamic Purchasing System (DPS) pilot, Contract Notice was published on 22 November 2018, with a closing date for applications of 20 December 2018. Qualification and technical evaluations will be completed by 14 January 2019. Pilot to commence shortly after. The new domiciliary care specification focuses on co-production between people who use the service and professionals and includes improved performance and contract monitoring arrangements.



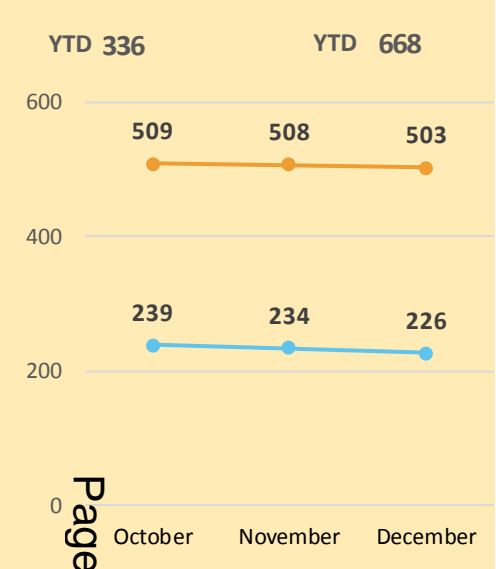
What are we worried about?



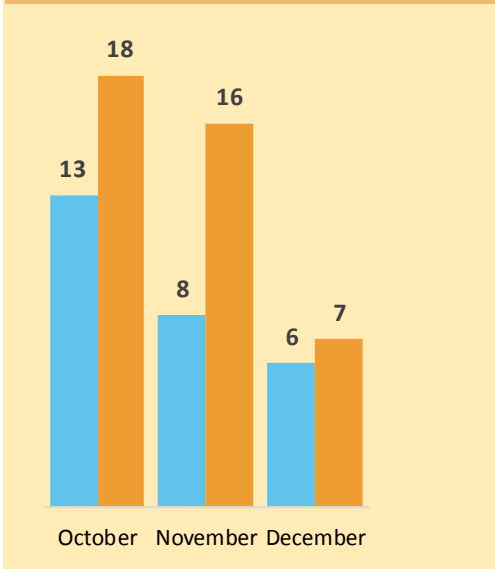
What do we need to do?

- 27 – Recruit 2 WTE Assistive Technology Officers.
- Long term plan in place in terms of individuals returning to placement in county.
- 28b - Team are actively looking at individual who can return on a case by case basis.
- 30 – Domiciliary care capacity, a contract has been put in place for additional agency domiciliary care workers, commencing 14 January to 31 March 2019. Agency staff will be managed by the Council's in-house team.

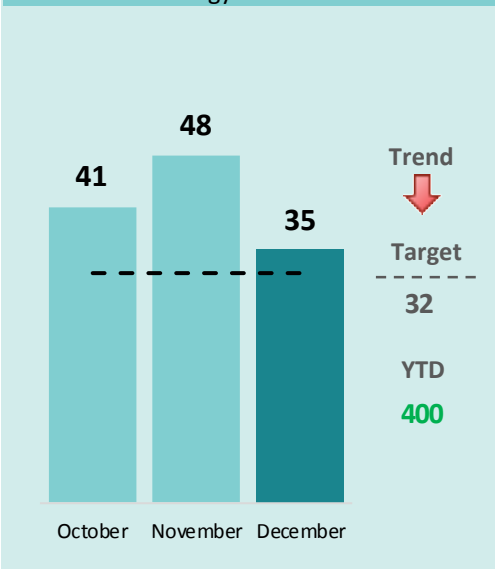
Service provision volumes
 25. Nursing Homes 26. Residential care



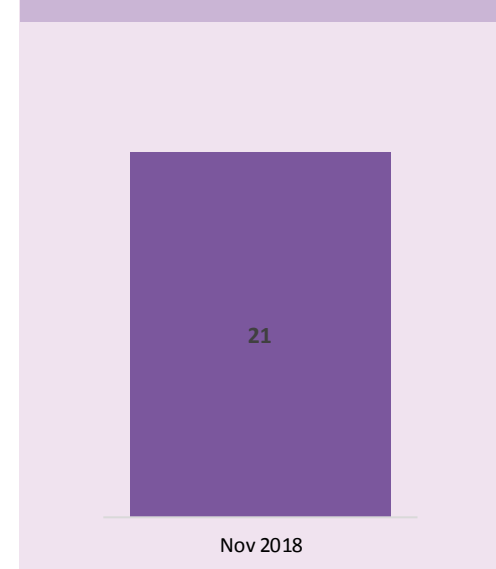
New Service provision volumes
 25a. Nursing Homes 26a. Residential care



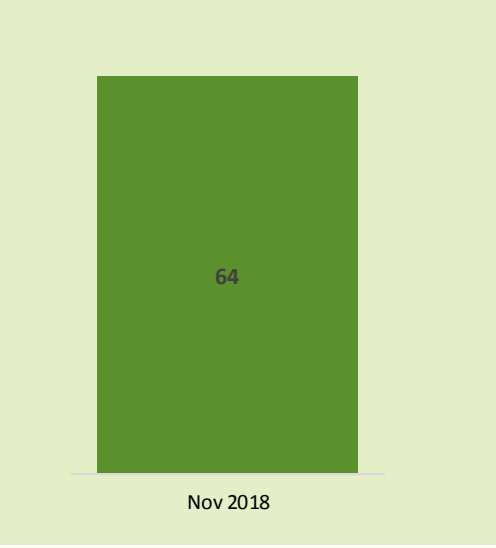
27. Local measure: No. of adult clients supported in their own home through assistive technology will increase



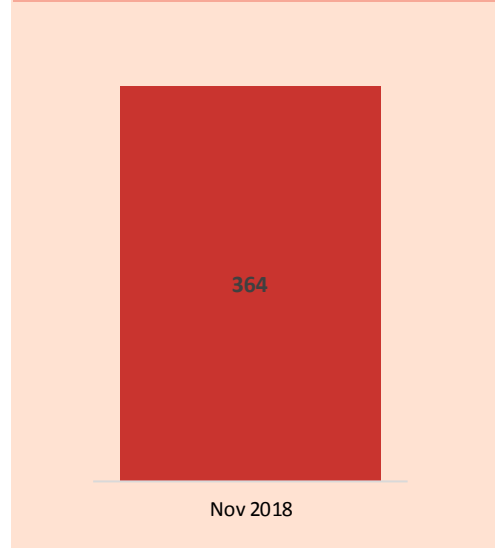
28a. Number of individuals with a learning disability in a residential care setting "in county"



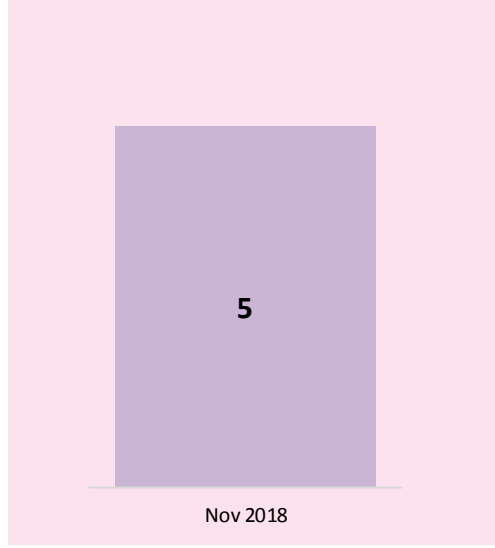
28b. Number of individuals with a learning disability in a residential care setting "out of county"



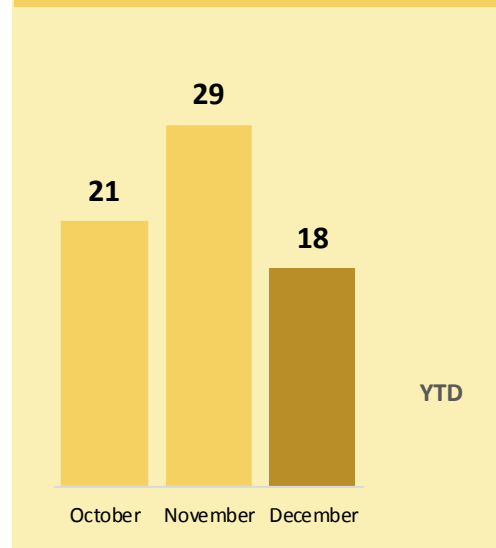
28c. Number of individuals with a learning disability in a non-residential care setting "in county"



28b. Number of individuals with a learning disability in a non-residential care setting "out of county"

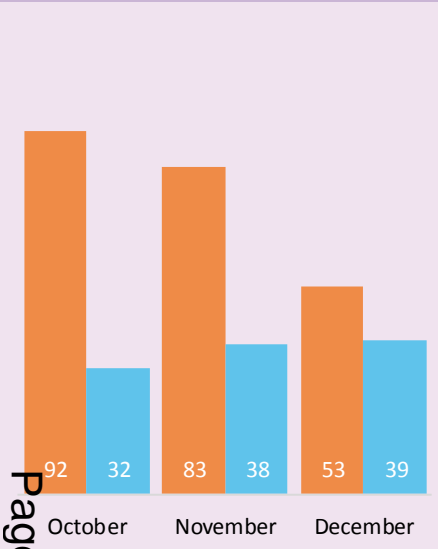


29. The average length of time taken (in days) to procure service provision for domiciliary care



30. Number of individuals receiving a service

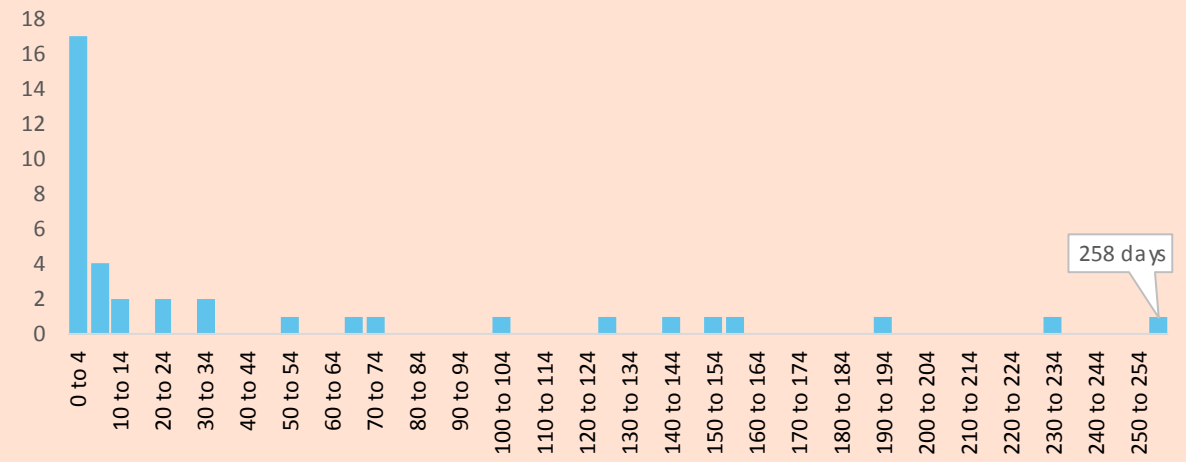
Domiciliary Care Nursing/Residential (North)



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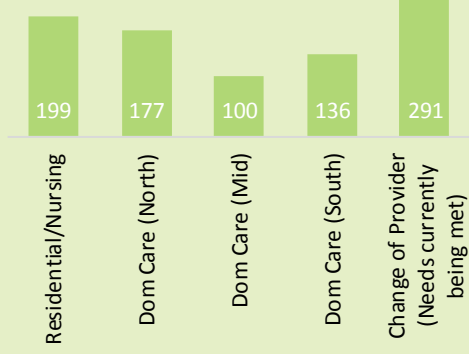
31/32. Shortest/Longest length of time to broker a service by service type (days)

Domiciliary Care Nursing/Residential (North)



30a. Longest current wait for service (days)

November 2018 data





What's working well?



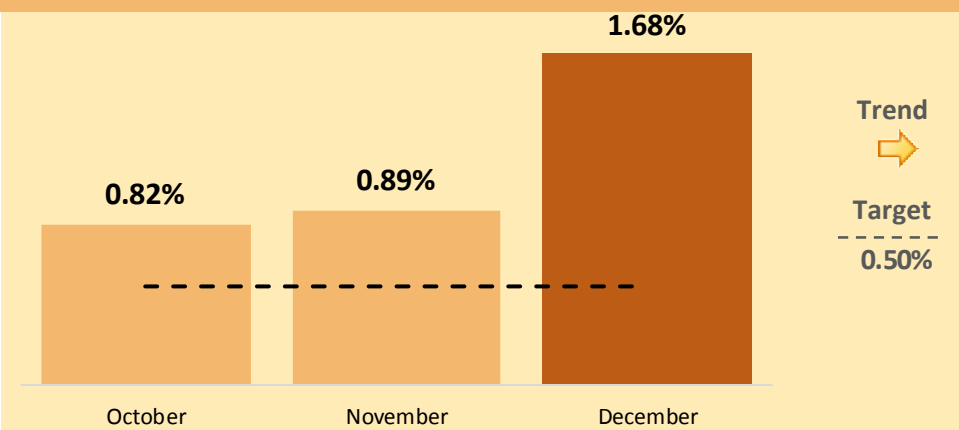
What are we worried about?



What do we need to do?

- 33 - Continue to work through pressures, including those not forecasted and future planning, e.g. mitigation, savings, cost avoidance and debt recovery.

33. Service delivered with 0.5% variation revenue





What's working well?

- 34 – 1.20 cumulative average days lost per FTE for November 2018. December information not available.
- 36 – There were no leavers during the month of December 2018.
- 37a – 6 staff commenced in post during December 2018.
- 38 – There have been no leavers from the frontline social worker teams during the month of December 2018. Exit interviews continue to be undertaken for all staff leaving from frontline social worker teams.

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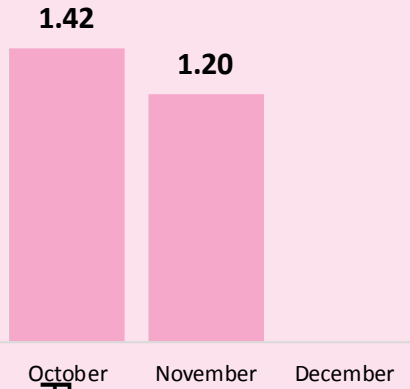
What are we worried about?

- 40 – Lack of pace on integrating teams with some concern about the integration plans and developments in Ystradgynlais.

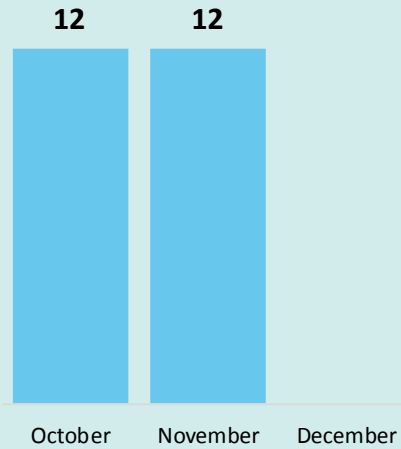


What do we need to do?

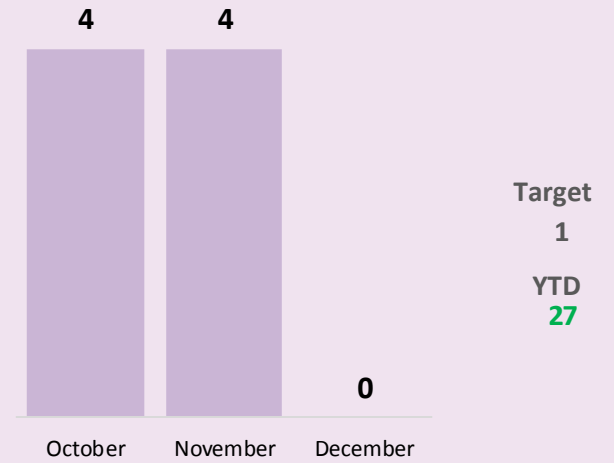
34. Average days sickness absence per FTE



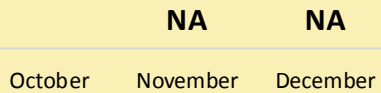
35. No. of agency social workers in post



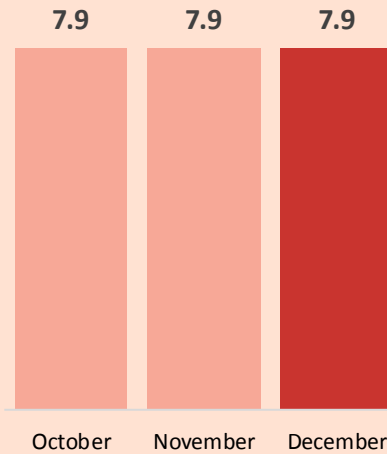
36. No. of leavers



38. The percentage of leavers who receive an exit interview



40. Number of FTE staff providing Integrated Social Care & Health services





What's working well?

- 41 – 39 out of 45 audits completed in December which equates to 87% compliance.
- 41 – The Quality Assurance Panel meets monthly and audit reports are discussed in detail to inform learning.
- 41 – Peer auditing has continued and feedback from workers has been positive regarding this approach to shared learning.
- 41 – 86% (6) of cases audited achieved good to excellent standard of referral information in comparison to 69% in November's report.
- 41 - 87% (20) of cases demonstrated a good to excellent standard of early intervention and prevention. This represents a 5% increase in performance since last month is the second consecutive month that case audited showed improvement in this area of practice.
- 41 - 73% (22) of cases demonstrated good to excellent practice in identifying people's communication needs and promoting effective communication. This is the fourth consecutive month that improvements have been seen with 69% of cases achieving this standard in November, 68% October and 67% in September.
- 41 - 68% (15) demonstrated Good to excellent feedback from the person and/or their Carer's in comparison to 78% last month.
- Examples of positive compliments received: -
 - "Whoever I have had, has worked hard for me. The OT has done a lot for me – got different types of equipment and slings for me and worked hard to get everything right".
 - "I have no qualms in saying they (OT and SW) have been excellent".
 - "I know if I am in trouble, I know who to call and they will get back to me".
 - Person described Social Services as "Excellent" said "could not fault" the workers and felt "supported" by them.
 - "Fabulous, very, very helpful and professional".



What are we worried about?

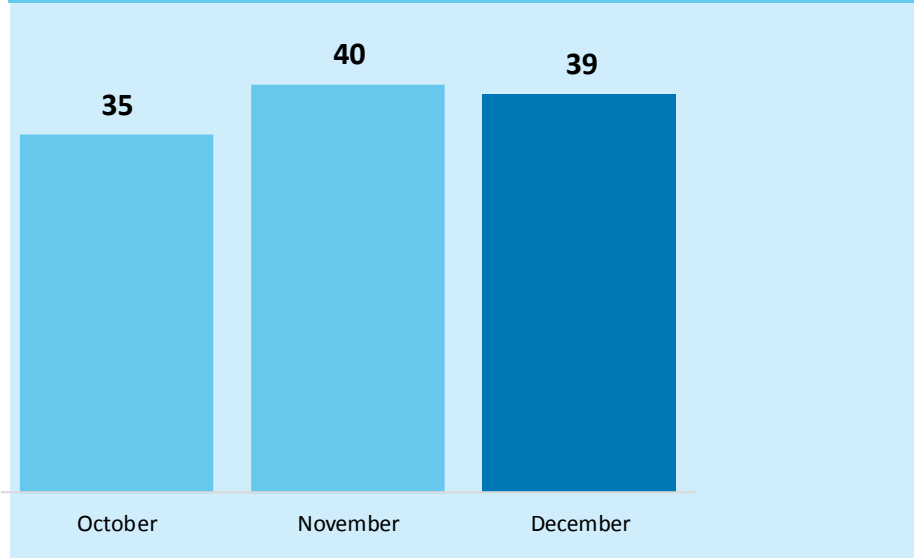
- 41 – 50% (16) of cases were found to show good to excellent standard of outcome focussed care planning. This is a decline on performance in comparison to November where 54% achieved this level of practice. Auditors found that care and support/treatment plans were not always strengths based or outcome focussed.
- 41 - 59% (19) of cases evidenced a good to excellent practice in regard to application of the principles of the Mental Capacity Act. This is the third consecutive month that there has been a drop-in performance with 73% achieving this standard in November 74% in October and 87% in September.
- 41 - 76% (25) of cases reached a good to excellent level of practice in identifying people's support networks and where appropriate involving them in the assessment process. This is the second consecutive month there has been a decline in practice with 83% achieving this standard in November and 86% in October.
- 41 - 61% (19) of cases were deemed to show good to excellent practice in capturing what is important to the person. This is a significant decline on November's performance of 72%.
- 41 - 61% (19) of cases reached a good to excellent standard in terms of proportionate assessments that supported people's eligibility for services. This is a significant decline of 9% on November's performance of 61%.
- 41 - 69% (22) of cases audited demonstrated good to excellent multidisciplinary working. This is a significant decline in performance of 13% in comparison to November when 82% of cases reached this standard.
- 41 - 46% (14) of cases demonstrated good to excellent in regards to risk management. This is the second consecutive month we have seen a significant decline in practice in comparison to 67% achieving this standard of risk management in November and 86% in October.
- 41 - This month we saw the third consecutive decline in practice with 71% (14) of cases reaching a good to excellent liaison with providers in comparison 77% in November, 78% in October and 95% in September. In some cases there was little or no evidence of contact with providers.
- 41 - This month we saw the third consecutive decline in practice with 58% (18) cases reaching good to excellent practice in regard to monitoring and review in comparison to 65% in November, 67% in October and 79% in September. The examples that were considered to require improvement or unsatisfactory included cases where reviews were overdue or where it was unclear if identified actions had been completed.
- 41 - 45% (14) of cases audited demonstrated good to excellent management oversight. This is a significant decline in performance in comparison to November where 53% achieved this standard.
- 41 - Performance remained static between November and December with 66% (21) of cases audited demonstrated good to excellent standard of case recording.



What do we need to do?

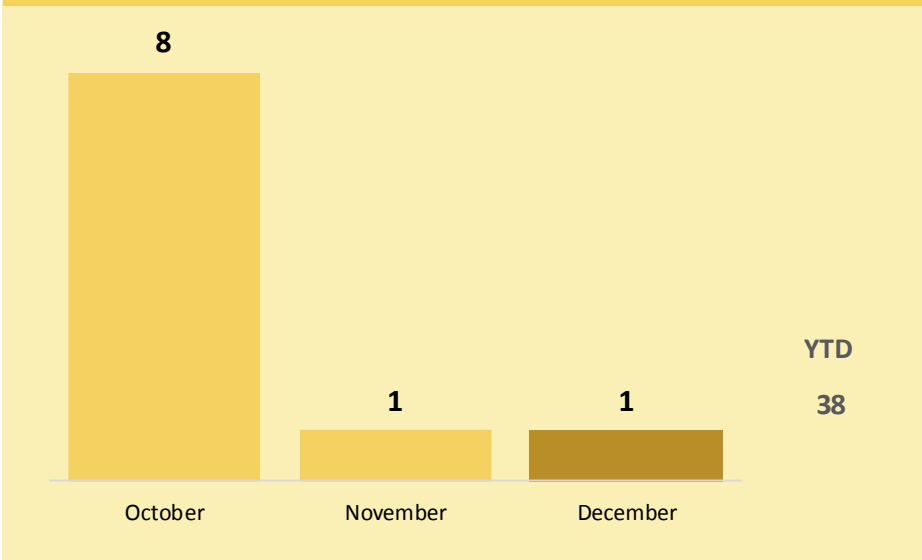
- 41- Meeting taken place in December to discuss concerns around the quality of care planning and lack of management oversight and the corrective action required to make required improvements.
- 41- Collaborative training undertaken in December 2018 and further training to take place in February 2019.
- 41 – Mentors to support staff in embedding a strengths based and outcome focussed approach.
- 41- Team Managers, Assistant Team Managers and senior practitioners to return assessments and care and support/treatments plans that do not represent a strengths based and outcome focussed approach.
- 41 Embed reflective practice discussions across all teams.
- 41–Deep dive themed audits to be undertaken on Care Planning and Reviews in February when new forms have been embedded in WCCIS.
- 41- Managers/Senior practitioners to ensure that workers identify people's support network and record what is important to people as far as possible in their own words.
- 41 –Workers need to be reminded by Managers in team meetings and 1:1s of training undertaken and the requirement to fully record all relevant information.
- 41 – Mental Capacity Training scheduled for January 2019. Best interest Assessors to mentor other staff in the completion of good quality Mental Capacity Assessments to ensure people's rights are protected.
- 41 – Managers/Senior practitioners to ensure worker's make explicit reference to eligibility in both their assessment and panel applications.
- 41 – Managers/Senior practitioners to ensure that workers record risks and measure taken to reduce these.
- 41 – Managers/senior practitioners to ensure that workers record evidence of multidisciplinary working.

41. No. of case review quality audits undertaken

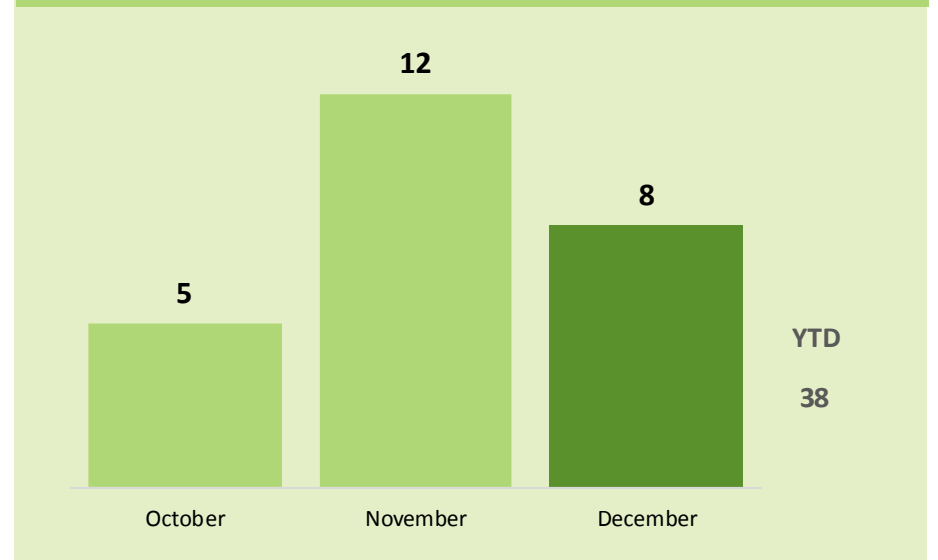


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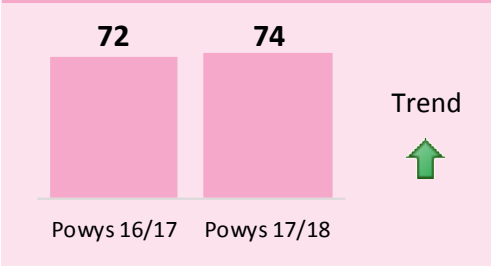
42. Volume of complaints received



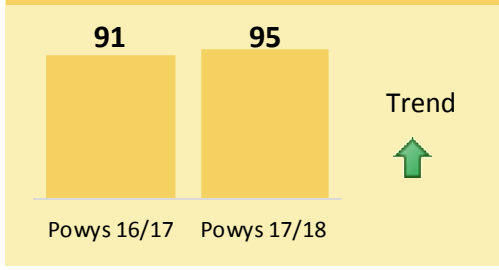
43. Volume of compliments received



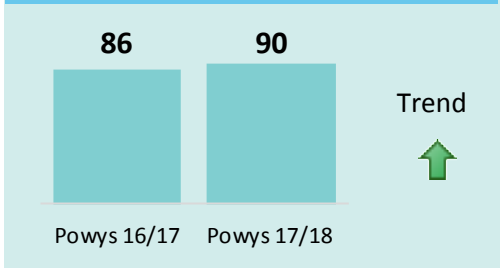
44. SSWB measure 7: People reporting they have received the right information or advice when they needed it



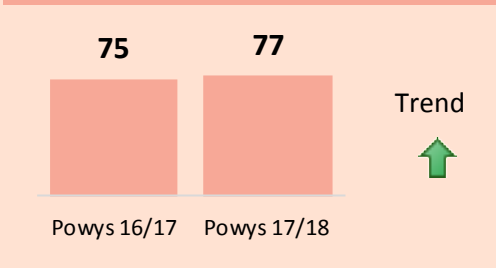
45. SSWB measure 8: People reporting they have received care and support through their language of choice



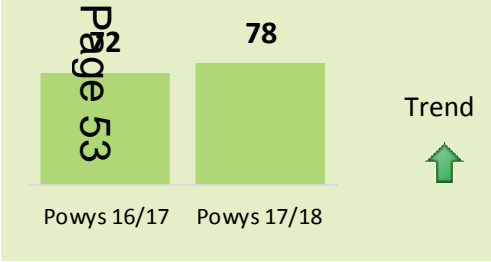
46. SSWB measure 9: People reporting they were treated with dignity and respect



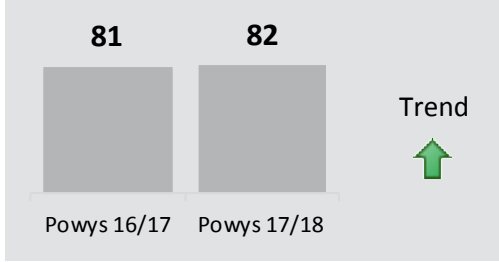
47. SSWB measure 11: People with a care and support plan reporting that they have been given written information of their named worker in social services



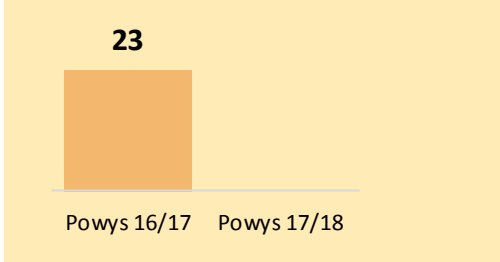
48. SSWB measure 12: People reporting they felt involved in any decisions made about their care and support



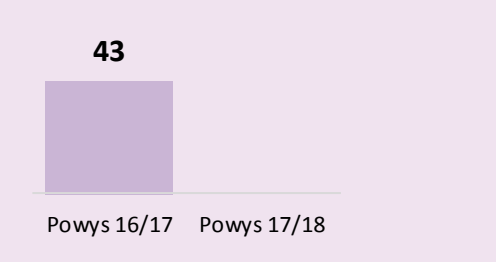
49. SSWB measure 13: People who are satisfied with care and support that they received



50. SSWB measure 15: Carers reporting they feel supported to continue in their caring role



51. SSWB measure 16: Carers reporting they felt involved in designing the care and support plan for the person that they care for



Trend arrows on this page show performance from year to year



What's working well?

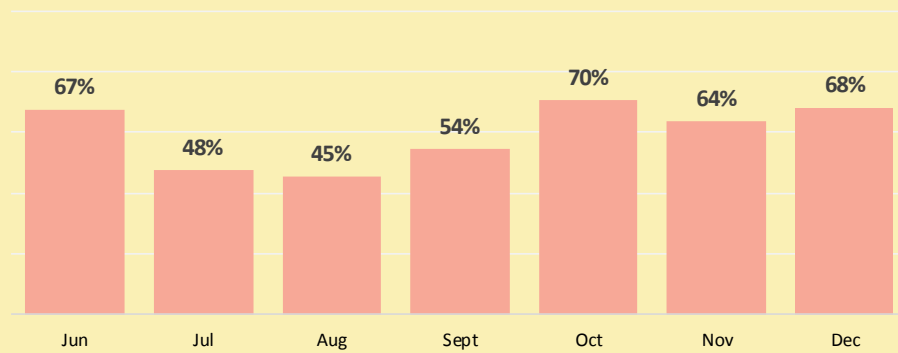


What are we worried about?

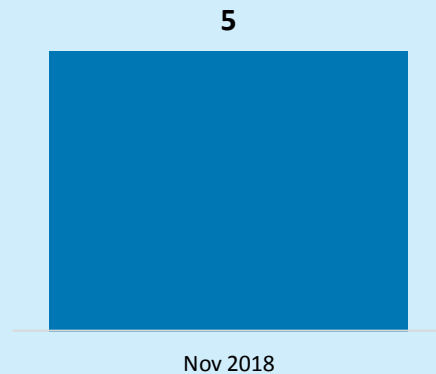


What do we need to do?

52. Scrutiny – Attendance at Health, Care and Housing Scrutiny Committee



53. Equalities - Increase the number of LD users in paid employment above 16 hours or more by 5%



Scrutiny date	Scrutiny Committee	Item	New Cttee?	Cab/Mgmt Team Date	Cab Date
2019					
Mon 04/02/19	HCH	CIW update on Inspection - Children's Services TBC Leaving the Care Service TBC	HC		
		Review of progress on foster carers strategy TBC	HC		
TBC	FSP				
FEBRUARY 2019					
Mon 11/02/19 am	LS	School Budgets	LSC		
		School Major Improvements from 180119 to include capacity verification	LSC	29/01/2019	12/02/2019
Mon 11/02/19 pm	LS briefing	School Improvement Workshop briefing			
Thurs 14/02/19 pm	Audit	Business Continuity WAO Training Session			
Mon 18/02/19	ERCG	Corporate Support Services remodel Workforce Strategy and Plan Feasibility Study	ERCC ERCC	19/02/2019	05/03/2019
Fri 22/02/19	HC	Early Help/Edge of Care Participation and Voice Update on BUPA?	HC HC		
28/08/19 - 01/03/19	LS WG 22/02/19	Home to School Transport, post 16 and Welsh Medium Post 16 Review Youth Structure Review ?	LSC LSC LSC	12/03/2019 12/03/2019	26/03/2019 26/03/2019
MARCH 2019					
Fri 01/03/19 move to 220219	LS				
04/03/19 - 08/03/19	HC AND ERCG WG				
11/03/19 - 15/03/19	LS WG				
18/03/19 - 22/03/19	HC AND ERCG WG				
Mon 25/03/19 am	ERCG	DRAFT of Vision 2025: Our CIP (UPDATE 2019/20 – Proposed changes to CIP for 2019/20) Gender Pay Report Check progress against removing barriers to employment	ERCC ERCC ERCC	19/02/2019 09/04/2019	26/03/2019 30/04/2019

Thurs 28/03/19	LS	Support for children and families - early years	LSC		
		BESD and PRU provision tbc	LSC	09/04/2019	30/04/2019
		Specialist centre provision tbc	LSC	09/04/2019	30/04/2019
		Stds, attendance and exclusion verified moved from 080219			
TBC	FP				
APRIL 2019					
Fri 05/04/19	HC	Children Looked After Permanence	HC		
		Health & Care Strategy – Statements of Intent	HC	07/05/2019	21/05/2019
08/04/19 - 12/04/19	LS AND ERCG WG				
15/04/19 - 18/04/19	HC WG				
23/04/19 - 26/04/19	ERCG WG				
26/04/2019	LS WG	Schools causing concern			
		Categorisation - from 010319			
29/04/19 - 03/05/19	HC WG				
Mon 29/04/19	PSB	Developing integrated commissioning with PTHB - care homes	HC??		
		Annual Report - Powys Wellbeing Plan - Towards 2040 - draft?			
TBC	FP				
??	Joint WG - ERCC and HC?	Improve housing choice availability incl extra care	ERCC		
	Joint WG - ERCC and HC?	Supported housing (email round update to Members)	ERCC		
	ERCG	Impact of Roll Out of Universal Credit on HRA	ERCC	07/05/2019	21/05/2019
		Proportion of revenue spend increase 2% 18/19	ERCC		
		Review marketing opportunities and programme	ERCC		
		Housing Association Development	ERCC	09/04/2019	30/04/2019
		Public Toilets Strategy	ERCC	07/05/2019	21/05/2019
		Engagement and Communications Strategy	ERCC		
MAY 2019					
Thurs 09/05/19	Audit	TM Q4			
Mon 13/05/19 am	ERCG	Final Vision 2025: Our CIP 2019/20 Update and Annual Report 2018/19	ERCC	04/06/2019	18/06/2019
		Annual Employment Monitoring Report	ERCC	07/05/2019	21/05/2019
		Local Housing Market Assessment	ERCC	25/06/2019	09/07/2019
Mon 13/05/2019 pm	LS		LSC		
Tues 14/05/19	HC	Community Hubs	HC		

24/05/2019	LS WG	School balances	LSC		
27/05/19 - 31/05/19	ERCG AND HC WG				
TBC	FP				
JUNE 2019					
03/06/19 - 07/06/19	LS WG				
Mon 10/06/19	Audit (seminar)	Draft Statement of Accounts Annual Governance Statement	Audit Audit		
10/06/19 - 14/06/19	ERCG AND HC WG				
17/06/19 - 21/06/19	LS WG				
Mon 24/06/19	ERCG	HRA New Build Programme Strategic Equality Plan - End of Year Crime and Disorder	ERCC ERCC	25/06/2019 25/06/2019	09/07/2019 09/07/2019
Thurs 27/06/2019	HC	Closer to Home Community Transport service - progress Placement Sufficiency	HC HC HC		
TBC	FP	MTFS	FSP		
JULY 2019					
Mon 08/07/2019 pm	LS				
08/07/19 - 12/07/19	ERCG AND HC WG				
15/07/19 - 19/07/19	LS WG				
Thurs 18/07/2019	PSB	Annual Report Wellbeing Plan	PSB	04/06/2019	18/06/2019
TBC	FP				
AUGUST 2019					
Mon 19/08/2019 am	HC				
Mon 19/08/2019 pm	LS		LSC		
Tues 20/08/19	ERCG	Tenants Satisfaction Survey	ERCC	03/09/2019	17/09/2019
		Vision 2025: Our CIP Quarter 4 2018-19 Performance Report	ERCC		18/06/2019

Fri 30/08/2018	Audit Seminar	SoA	Audit		
TBC	FP				
SEPTEMBER 2019					
02/09/19 - 06/09/19	LS WG				
Fri 06/09/2019	Audit Committee	Final Statement of Accounts Annual Governance Statement TM Review and Q1	Audit Audit Audit		
09/09/19 - 13/09/19	ERCG AND HC WG				
16/09/19 - 20/09/19	LS WG				
23/09/19 - 27/09/19	ERCG AND HC WG				
TBC	FP				
OCTOBER 2019					
Tues 01/10/2019	PSB				
Mon 07/10/2019 pm	LS	School Balances Standards (provisional) and Inspection Outcomes Early Years standards and provision	LSC		
Mon 14/10/19	ERCG	HRA Asset Management Strategy	ERCC	22/10/2019	05/11/2019
Fri 18/10/2019	HC				
21/10/19 - 25/10/19	LS WG				
28/10/19 - 01/11/19	ERCG AND HC WG				
TBC	FP				
NOVEMBER 2019					
04/11/19 - 08/11/19	LS WG				
11/11/19 - 15/11/19	ERCG AND HC WG				

Mon 18/11/2019	LS				
Mon 25/11/19	ERCG	Crime and Disorder			
Fri 29/11/2019 pm	HC				
TBC	FP				
DECEMBER 2019					
02/12/19 - 06/12/19	LS WG				
09/12/19 - 13/12/19	ERCG AND HC WG				
Thurs 19/12/2019	Audit				
TBC	FP				
2020					
JANUARY 2020					
13/01/20 - 17/01/20	Committees				
21/01/20 - 24/01/20	Committees				
27/01/20 - 31/01/20	Working Groups				
FEBRUARY 2020					
03/02/20 - 07/02/20	Committees				
10/02/20 - 14/02/20	Committees				
17/02/20 - 21/02/20	Working Groups				
24/02/20 - 28/02/20	Working Groups				
MARCH 2020					
02/03/20 - 06/03/20	Committees				
09/03/20 - 13/03/20	Working Groups				
16/03/20 - 20/03/20	Working Groups				
23/03/20 - 27/03/20	Working Groups				
30/03/20 - 03/04/20	Working Groups				
APRIL 2020					
06/04/20 - 09/04/20	Committees				
14/04/20 - 17/04/20	Committees				
20/04/20 - 24/04/20	Working Groups				
27/04/20 - 01/05/20	Working Groups				
MAY 2020					
05/05/20 - 08/05/20	Working Groups				

11/05/20 - 15/05/20	Working Groups			
18/05/20 - 22/05/20	Committees			
26/05/20 - 29/05/20	Committees			
JUNE 2020				
01/06/20 - 05/06/20	Working Groups			
08/06/20 - 12/06/20	Working Groups			
15/06/20 - 19/06/20	Working Groups			
22/06/20 - 26/06/20	Working Groups			
29/06/20 - 03/07/20	Committees			
Q1 2020				
	ERCG	Proportion of revenue spend increase 2% 19/20	ERCC	
		Assess effectiveness of marketing programme	ERCC	
		Check inward investment strategy and action plan	ERCC	
	HC			
	Audit			
	LS			
JULY 2020				
06/07/20 - 10/07/20	Committees			
13/07/20 - 17/07/20	Working Groups			
27/07/20 - 31/07/20	Working Groups			
AUGUST 2020				
17/08/20 - 21/08/20	Working Groups			
24/08/20 - 28/08/20	Working Groups			
31/08/20 - 04/09/20	Committees			
SEPTEMBER 2020				
07/09/20 - 11/09/20	Committees			
14/09/20 - 18/09/20	Working Groups			
21/09/20 - 25/09/20	Working Groups			
28/09/20 - 02/10/20	Working Groups			
Q2 2020				
	LS	Increase % of pupils assessed in Welsh in Year 2	LSC	
	HC			
	ERCG			

	Audit				
	FP				
OCTOBER 2020					
05/10/20 - 09/10/20	Working Groups				
12/10/20 - 16/10/20	Committees				
19/10/20 - 23/10/20	Committees				
26/10/20 - 30/10/20	Working Groups				
NOVEMBER 2020					
02/11/20 - 06/11/20	Working Groups				
09/11/20 - 13/11/20	Working Groups				
16/11/20 - 20/11/20	Working Groups				
23/11/20 - 27/11/20	Committees				
30/11/20 - 04/12/20	Committees				
DECEMBER 2020					
07/12/20 - 11/12/20	Working Groups				
14/12/20 - 18/12/20	Working Groups				
Q3 2020					
	LS				
	HC				
	ERCG				
	Audit				
	FP				

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