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Date: 31st January 2018

Dear Sir/Madam,

A meeting of the **Health Social Care and Wellbeing Scrutiny Committee** will be held in the **Sirhowy Room, Penallta House, Tredomen, Ystrad Mynach** on **Tuesday, 6th February, 2018** at **5.30 pm** to consider the matters contained in the following agenda. You are welcome to use Welsh at the meeting, a minimum notice period of 3 working days is required should you wish to do so. A simultaneous translation will be provided if requested.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Christina Harrhy'.

Christina Harrhy
INTERIM CHIEF EXECUTIVE

AGENDA

	Pages
1 To receive apologies for absence.	
2 Declarations of Interest.	

Councillors and Officers are reminded of their personal responsibility to declare any personal and/or prejudicial interest (s) in respect of any item of business on this agenda in accordance with the Local Government Act 2000, the Council's Constitution and the Code of Conduct for both Councillors and Officers.

A greener place Man gwyrddach



To approve and sign the following minutes: -

- | | | |
|---|--|---------|
| 3 | Health Social Care and Wellbeing Scrutiny Committee held on the 5th December 2017. | 1 - 8 |
| 4 | Special Health Social Care and Wellbeing Scrutiny Committee held on the 18th December 2017. | 9 - 14 |
| 5 | Consideration of any matter referred to this Committee in accordance with the call-in procedure. | |
| 6 | To receive a verbal report by the Cabinet Member(s). | |
| 7 | Health Social Care and Wellbeing Scrutiny Committee Forward Work Programme. | 15 - 28 |
| 8 | To receive and consider the following Cabinet report*: - | |

Hafod-yr-Ynys Air Quality Action Plan.

**If a Member of the Scrutiny Committee wishes for the above Cabinet report to be brought forward for discussion at the meeting please contact Amy Dredge, Committee Services Officer, Tel no. 01443 863100 by 10.00am on Monday, 5th February 2018.*

To receive and consider the following Scrutiny reports: -

- | | | |
|----|--|-----------|
| 9 | Regional Area Plan. | 29 - 94 |
| 10 | Year End Performance Report for Social Services. | 95 - 108 |
| 11 | Budget Monitoring Report (Month 9). | 109 - 120 |

Circulation:

Councillors: A. Angel, C. Bezzina, L.J. Binding (Chair), D. Cushing, M. Evans, Miss E. Forehead, A. Gair, Ms J. Gale (Vice Chair), D.C. Harse, V. James, L. Jeremiah, B. Owen, Mrs A. Leonard, J. Simmonds, S. Skivens and C. Thomas

Users and Carers: Michelle Jones, Jill Lawton and Mr C. Luke

Aneurin Bevan Health Board: S. Millar (ABUHB)

And Appropriate Officers



HEALTH, SOCIAL CARE AND WELLBEING SCRUTINY COMMITTEE

MINUTES OF THE MEETING HELD AT PENALLTA HOUSE, TREDOMEN,
YSTRAD MYNACH ON TUESDAY, 5TH DECEMBER 2017 AT 5.30 P.M.

PRESENT:

Councillor L. Binding - Chair
Councillor Mrs J. Gale - Vice Chair

Councillors:

C. Bezzina, D. Cushing, M. Evans, Miss E. Forehead, A. Gair, D.C. Harse, V. James,
L. Jeremiah, Mrs A. Leonard, B. Owen, J. Simmonds, S. Skivens, C. Thomas.

Cabinet Members: C. Cuss (Social Services and Wellbeing), Mrs E. Stenner (Environment
and Public Protection).

Together with:

D. Street (Corporate Director Social Services), J. Williams (Assistant Director Adult Services),
G. Jenkins (Assistant Director Children's Services), R. Hartshorn (Head of Policy and Public
Protection), M. Godfrey (Team Leader, Pollution Control and Emergency Planning),
B. Manners (Solicitor), E. Sullivan (Scrutiny Officer), A. Dredge (Committee Services Officer).

Co-opted Members: Mrs M. Jones, Ms J. Lawton.

Also Present – Representatives from Aneurin Bevan University Health Board:

Ann Lloyd CBE (Chair), Judith Paget (Chief Executive), P. Robson (Vice-Chair), Glyn Jones
(Director of Finance), Alison Shakeshaft (Director of Therapies and Health Science),
Nick Wood (Chief Operating Officer).

1. APOLOGIES FOR ABSENCE

Apologies for absence had been received from Councillor A. Angel and Mr C. Luke (User and
Carer).

2. DECLARATIONS OF INTEREST

There were no declarations of interest received at the commencement or during the course of
the meeting.

3. WELCOME

The Chair welcomed Mrs M. Jones and Ms J. Lawton, the newly appointed Co-opted Members to their first Scrutiny Committee.

4. MINUTES – 24TH OCTOBER 2017

RESOLVED that the minutes of the meeting of the Health, Social Care and Wellbeing Scrutiny Committee held on 24th October 2016 (minute nos. 1 - 10) be approved and signed as a correct record.

5. CONSIDERATION OF ANY MATTER REFERRED TO THE SCRUTINY COMMITTEE IN ACCORDANCE WITH THE CALL-IN PROCEDURE

There had been no matters referred to the Scrutiny Committee in accordance with the call-in procedure.

6. REPORT OF THE CABINET MEMBERS

The Scrutiny Committee received verbal statements from Councillor C. Cuss (Cabinet Member for Social Services and Wellbeing) and Councillor E. Stenner (Cabinet Member for Environment and Public Protection).

Councillor Cuss informed the Scrutiny Committee that it was Carer's Rights Day on Friday 24th November 2017. He was pleased to launch this event at Caerphilly Castle which was an opportunity to see what support is available to them as carers in the Caerphilly Borough. Various organisations attended offering advice, information and assistance. It was also an opportunity to find out how the Local Authority can further support carers in the future. Reference was made to the 2011 census, where more than 370,000 people in Wales viewed themselves as caring for someone, with around 22,500 in Caerphilly. The number of carers in contact with the Council has doubled in 12 months with 654 additional carers on the mailing list. There is further work to do in terms of promoting the support available.

The Cabinet Member was extremely pleased to be involved in the 8th Annual Awards Ceremonies for Looked After Children and Young People recently held at the Maes Manor Hotel. The Council is currently looking after 354 children and young people and over half of those had been nominated to receive awards for an outstanding achievement. The event was thoroughly enjoyed by all who attended and it was considered to be both a humbling and uplifting experience that highlights the role Children's Services' plays in improving outcomes for the most vulnerable children and young people.

Councillor Cuss placed on record his thanks to the Officers who planned the event, supported the children and ensured the events were such a great success. This was also supported by other Members of the Scrutiny Committee that attended the events.

In concluding, Councillor Cuss reminded Members of the Special Health Social Care and Wellbeing Scrutiny Meeting that has been arranged for the 11th December 2017. The purpose of the meeting is to consider the Medium Term Financial Plan (MTFP) Savings - Social Services Directorate. All members were urged to attend this very important meeting.

Councillor Stenner addressed the Scrutiny Committee and advised that Caerphilly participated in National School Meals Week, in November. This was a celebration of all that is great about school meals. It was explained that Daniel Magee, Peripatetic Cook in Charge for Caerphilly Catering had the opportunity to work alongside the kitchen brigade at the award winning Walnut Tree Restaurant in Abergavenny. Michele Rodway, Cook in Charge at Trinant Primary and Hayley Astley, Cook in Charge at Hengoed Primary worked across various kitchens and outlets in the Senydd in Cardiff. They all represented the authority well and had the opportunity to develop their skills within the catering industry.

The Cabinet Member informed Members that on 31st October 2017, the Government published a consultation on proposals for changes to gaming machines and social responsibility requirements across the gambling industry. This includes regulatory changes to maximum stakes in Fixed Odds Betting Terminals in order to reduce the potential for large session losses. The consultation closes on the 23rd of January 2018 and the Local Authority will be submitting a response.

It was noted that the Council's Licensing Team have joined together with Gwent Police to promote 'Operation Makesafe', a child sexual exploitation awareness campaign as part of a Gwent wide initiative. Officers have conducted joint visits to taxi ranks, booking offices and local supermarkets in the Borough raising awareness amongst licensed taxi drivers of the warning signs of child sexual exploitation and how to report their concerns.

An update was provided in relation to the Licensing Team currently reviewing its policy for taxi and private hire vehicles in the Borough. A consultation exercise was undertaken and Officers have prepared a Newsletter to report the results and plan to discuss the issues in a meeting with the trade in January 2018.

In concluding, Councillor Stenner informed the Scrutiny Committee that during the last 2 weeks Trading Standards Officers have been busy executing a number of warrants and seizures in connection with some very un-festive activities. These include illicit tobacco, counterfeit goods and illegal money-lending. Legal case files will be prepared following consideration of the evidence obtained.

The Chair thanked the Cabinet Members for their informative statements.

7. HEALTH SOCIAL CARE AND WELLBEING SCRUTINY COMMITTEE FORWARD WORK PROGRAMME

The Scrutiny Officer introduced the report that informed the Committee of its Forward Work Programme including all reports that were identified at the meeting on the 24th October 2017.

Members were advised that unfortunately, there would be no interim report from the Care and Social Services Inspectorate of Wales (CSSIW) originally listed on the Forward Work Programme for this meeting and the Committee's approval was sought to remove it from the Forward Work Programme.

Following consideration and discussion, it was moved and seconded that the recommendation in the report be approved. By a show of hands this was unanimously agreed.

RESOLVED that the Forward Work Programme be updated to reflect the aforementioned changes and published to the website.

8. CABINET REPORT

The Cabinet Report listed on the agenda had not been called forward for discussion at the meeting.

REPORTS OF OFFICERS

Consideration was given to the following reports.

9. ANEURIN BEVAN UNIVERSITY HEALTH BOARD PRESENTATION

Judith Paget, Chief Executive of Aneurin Bevan University Health Board (ABUHB) delivered the briefing as part of the ongoing engagement with Caerphilly County Borough Council. The briefing highlights a number of key developments since December 2016, and in particular the work that is undertaken with Caerphilly to deliver the new statutory Wellbeing Plan and Area Plan for Health and Social Care from 2018. It also outlines information with regard to current performance across a range of services and Welsh Government targets on the current Improvement Plans. The briefing also includes updates on other areas of the Health Board's activities that include the progress made against the Integrated Medium Term Plan (IMTP) and the ongoing engagement with local communities with a series of service developments, many of which are being taken forward in partnership.

The Scrutiny Committee were advised that as part of the delivery of the new legislative framework through the Social Services and Wellbeing (Wales) Act 2014, and the Wellbeing of Future Generations (Wales) Act 2015, the Health Board are committed to ensuring effective delivery and responsive care closer to home. In doing so, as part of 'Clinical Futures Transformation Programme' a framework for an 'Integrated System of Care and Wellbeing' has been developed. This framework will drive activity through the IMTP, and reflect the contribution to the shared partnership agenda through the Greater Gwent Programme Board.

The framework, which has been discussed with Local Government colleagues identifies four key areas of activity, where significant service transformation will take place over the next five years. An overview was provided in relation to 'Keeping People Well', 'Self-care', 'Primary Care and Non-Clinical Nurse (NCN) Team' and NCN Hub with Specialist and Enhanced Services and Improving Population Health, Prevention and Early Intervention. The aim of the Health Board is to improve the health and wellbeing of the population, reduce health inequalities, and ensure the sustainability of the healthcare system.

Mrs Paget set out the specific priority areas for action during 2017/18, which included the Development of Integrated Wellbeing Networks, Living Well Living Longer Programme, Tobacco Control, Making Every Contact Count and Improving Cancer Survival Rates in Disadvantaged Areas.

An update was provided in relation to Primary and Community Services as this is an integral part of the Clinical Futures Programme. This is normally the first point of contact that patients have with the Health Board. Some of the key developments and achievements were discussed, such as 'The Care Closer to Home Strategy' that was endorsed by the Regional Partnership Board in October, and it was explained that a series of local workshops are now underway to develop the first round of 'Care Closer to Home' local action plans. Examples of work being taken forward include staff recruitment and retention challenges with emphasis on sustainability and broadening the workforce in terms of multi-functional teams.

The Scrutiny Committee were advised that some GP practices in the Borough have encountered difficulties relating to resignation, retirement and branch closures. Particular reference was made to Brynryrion Surgery that became directly managed by the Health Board on the 1st December 2017. This is on the basis that the Health Board will work with existing practice staff and recruit additional workforce, to develop a new model of primary care within the practice, with a view to returning to independent status once established. Mrs Pagett stated that there are unprecedented pressures on surgeries across Gwent and this is also a nationwide problem. Attempts have been made nationally to recruit staff.

Members expressed concerns in relation to the decision made to close Graig y Rhacca Surgery. It was explained that a patient consultation was undertaken with all relevant consultees. The results of the consultation was taken to panel where all factors were considered including transport for patients to other surgeries. The panel supported the recommendation to close the surgery. Due to the state of repair of the building, this would have been closed in any event.

Clarification was sought in relation to the targets set and achieved in relation to Child and Adolescent Mental Health Services (CAMHS). The procedure for accessing this service was set out. It was explained that good progress has been made to reduce the waiting times for access to this service. The implementation of the 'choice and partnership' model 2016/17 has improved the management of demand and capacity and provides a more sustainable model for the future. The referral to treatment target of four weeks has consistently been met in 80 per cent of cases. Members queried the target in relation to the Assessment by Local Primary Mental Health Specialist Services within 28 days of referral. The Scrutiny Committee were advised that this year the younger population have not reached the target. However, in the autumn resources were prioritised to meet the target and undertake all assessments. There will be no backlog from January 2018.

A Member queried the waiting lists for joining new dental surgery's across the Borough and was advised there are currently a number of surgery's accepting new NHS patients, 3 of which provide orthodontic services namely; Rhymney, Ystrad Mynach and Newbridge. The Health Board will continue to review and improve dental provision. Details of practices are available on the ABUHB website.

In terms of performance, it was explained that the availability of required workforce continue to be the Health Board's biggest challenge, in the context of available staff across the United Kingdom. The Health Board has undertaken a number of campaigns to attract suitably skilled staff to Gwent, with particular success in the area of nursing.

Mrs Paget provided an overview of the services available at Ysbyty Ystrad Fawr, which is regarded as a flagship Hospital. Members were also updated regarding the Specialist and Critical Care Services at The Grange University Hospital at Llanfrechra, Cwmbran. She confirmed that on the 10th November 2017, contracts between ABUHB and building contractors Laing O'Rourke were signed and mark the second and final stage of the process to enable the construction of the Grange University Hospital to begin. The Council was thanked for its continuing support for the development and the ongoing support with changes to other services associated with the implementation of the Clinical Futures Strategy.

The Chair thanked Mrs Paget and her colleagues from Aneurin Bevan University Health Board for attending the Scrutiny Committee Meeting and for responding to questions raised during the briefing.

10. HAFOD-YR-YNYS AIR QUALITY ACTION PLAN

The Head of Policy and Public Protection and Team Leader for Pollution Control and Emergency Planning introduced the report that provided an update on the development of the final draft of the Hafod-yr-ynys Air Quality Action Plan (AQAP) (appended to the report), prior to its presentation to Cabinet on the 13th December 2017.

The Scrutiny Committee were advised that all Local Authorities are required by the Environment Act 1995 to review and assess air quality within their area for present and future years. Previous reports presented to this Committee have provided information on the air quality monitoring being undertaken within Hafod-yr-ynys. The Government has established a set of national air quality objectives under the Act, for specific pollutants having regard to scientific and national evidence on the effects on health. Local Authorities are required to carry out reviews to determine whether there is compliance with these objectives and if there is not, to develop an Action Plan to improve air quality bringing it within the acceptable levels.

The national nitrogen dioxide air quality objectives are being exceeded at receptor locations on Hafod-yr-ynys Road. The Local Authority is required to designate any area failing the national air quality objectives as an Air Quality Management Area (AQMA) and produce an AQAP which details measures to bring the pollutant back within acceptable limits.

The Hafod-yr-ynys Air Quality Management Area (AQMA) was declared in November 2013 following a Detailed Assessment which confirmed that monitoring results were continuing to fail the air quality objective for nitrogen dioxide. A further assessment report was undertaken and submitted to Welsh Government in April 2015. Further air quality monitoring, modelling, and assessment has been undertaken following completion of the £1.3 million Crumlin Junction improvements.

Members were advised that an air quality steering group meeting was held with residents of Hafod-yr-ynys and key stakeholders on 9th March 2017, where officers of the Authority discussed the contents of the Draft Air Quality Action Plan (AQAP). The draft AQAP went through a public consultation process between June and August 2017 where 21 responses were received (appended to the report). The final draft AQAP has been updated in light of the responses received and although the overall content of the plan has not altered, minor amendments have been made. There were no recommendations to remove any proposed options, however the merits of the suggestion from Public Health Wales that the introduction of a low emission zone be considered are still being assessed.

The Action Plan is a living document and actions will be subject to review as and when required. It was explained that Welsh Government have recommended that the authority undertake further traffic and air quality monitoring within the area to better refine the air quality model. It is accepted that more detailed air quality and traffic data will bring a better understanding of the current exceedance situation, not only in terms of overall source apportionment, but in terms of the emission profile linked to specific vehicle classes. As monitoring and actions progress, updates will be provided to residents, key stakeholders and Welsh Government. All options will be explored.

In concluding, the Head of Policy and Public Protection informed the Scrutiny Committee that the UK Government are currently being challenged in terms of its policy regarding air quality and climate change and have recently lost Court Cases, as the policy is not considered adequate. There is a debate in the Senydd this evening regarding the current situation with the UK Government. The outcome of this may impact on Welsh Government's approach to locations such as Hafod-yr-ynys and others in Wales.

Clarification was sought as to whether the Local Authority anticipates any traffic issues when the Grange Hospital is built in Cwmbran. It was explained that from a highways perspective this junction provides a strategic corridor within the borough.

Members discussed the modelling scenarios referred to in the Action Plan, in terms of future year 2020 air quality. At this stage it is unclear if one option will be enough however there is an expectation on Local Authorities to address air quality, ensuring compliance with EU Directives.

The Chair thanked the Officers for responding to questions raised during the course of the debate.

Having fully considered the Officer's report, and considering the additional recommendation that Officers engage with Aneurin Bevan University Health Board to ask if they had considered the impact on traffic through Hafodyrynys when they chose the location of the New Hospital at Llanfrechfa, Cwmbran, it was moved and seconded that the comments of the Health Social Care and Wellbeing Scrutiny Committee be noted and recommend that the Hafod-yr-ynys Air Quality Action Plan be referred to Cabinet. By a show of hands this was unanimously agreed.

RESOLVED that subject to the foregoing, the Scrutiny Committee recommend to Cabinet that:

- (i) Caerphilly County Borough Council engage with Aneurin Bevan University Health Board to ask if they had considered the impact on the traffic through Hafodyrynys when they chose the location of the new Hospital at Llanfrechfa, Cwmbran;

- (ii) the Health Social Care and Wellbeing Scrutiny Committee support the Draft Hafod-yr-ynys Air Quality Action Plan and recommend this be referred to Cabinet for consideration.

The meeting closed at 7.15pm.

Approved as a correct record, subject to any amendments agreed and recorded in the minutes of the meeting held on 6th February 2018.

CHAIR

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SPECIAL HEALTH SOCIAL CARE AND WELL BEING SCRUTINY COMMITTEE - 18TH DECEMBER 2017

**MINUTES OF THE MEETING HELD AT PENALLTA HOUSE, YSTRAD MYNACH ON
MONDAY, 18TH DECEMBER 2017 AT 5.30 P.M.**

PRESENT:

Councillor L. Binding – Chair
Councillor Ms J. Gale – Vice Chair

Councillors:

A. Angel, Mrs C. Bezzina, Mrs D. Cushing, M. Evans, Ms A. Gair, D. Harse, V. James, J. Simmonds and S. Skivens.

Cabinet Member:

C. Cuss (Social Care and Well Being) and Mrs E. Stenner (Environment and Public Protection)

Co-opted Members:

Ms J. Lawton and Mrs M. Jones

Together with:

D. Street (Corporate Director – Social Services), R. Hartshorn (Head of Public Protection), S. Harris (Interim Head of Corporate Finance), G. Jenkins (Assistant Director – Children's Services), J. Williams (Assistant Director – Adult Services), C. Forbes-Thompson (Interim Head of Democratic Services) and C. Evans (Committee Services Officer)

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Ms E. Forehead, L. Jeremiah, B. Owen, C. Thomas and C. Luke (Co-opted Member).

2. DECLARATIONS OF INTEREST

There were no declarations of interest received at the commencement or during the course of the meeting.

REPORTS OF OFFICERS

Consideration was given to the following reports.

3. DRAFT BUDGET PROPOSALS FOR 2018/19

The report, which was presented to Cabinet on 15th November 2017, provided Members with details of draft budget proposals and draft savings proposals for the 2018/19 financial year, to allow for a period of consultation prior to a final decision in February 2018.

Members noted the headline issues in the WG Provisional 2018/19 Local Government Financial Settlement and the details of the draft budget proposals for 2018/19. The report detailed Whole Authority Cost Pressures (£8.867m), together with Inescapable Service Pressures and Other Service Commitments (£2.310m) and a 1% reduction in Welsh Government Funding equating to £2.965m for 2018/19. Additionally, the report outlined draft savings proposals for 2018/19 (£7.205m) and a proposed Council Tax Uplift of 4.52% (£2.999m) which will ensure that a balanced budget is deliverable for 2018/19. The draft budget proposals assume no growth for schools in 2018/19, and as there is no requirement in the Provisional Settlement to protect schools, they will be required to manage their own pay and non-inflationary increases in 2018/19 along with other emerging cost pressures.

The report outlined the financial pressures placed on service areas, in particular Social Services, arising from fee increases for external care providers and further demand in both Adult and Children's Services. As a result, the report proposed that a further £1.5m be allocated in the 2018/19 budget to meet these ongoing financial pressures. Members were also referred to the report appendices which summarised the savings proposals by Directorate/Service Area, together with the savings proposals that are likely to have an impact on the public. £4.682m of the proposed £7.205m savings are 'nil impact', consisting of vacancy management, budget realignment and minor changes to service provision.

Members were reminded of the Medium-Term Financial Plan presented to Council in February 2017, which showed a potential savings requirement of £22.161m for the three-year period 2019/20 to 2021/22, and assumed a cash flat position in terms of the WG Financial Settlement for each of these years. WG has now provided an all-Wales indicative reduction in Aggregate External Finance of minus 1.5% for 2019/20, which would increase the Council's savings requirement by a further £3.984m for 2019/20 alone. If this was replicated in 2020/21 and 2021/22 then further savings of £7.789m would be required. This would result in a total savings requirement of circa £34m for the three-year period 2019/20 to 2021/22 and presents further challenges moving forward in regards to the Authority's Medium-Term Financial Plan.

It was explained that the indicative reduction of 1.5% is being reviewed by WG following the Chancellor's Autumn Budget Statement and the Final 2018/19 Local Government Financial Settlement, due to be issued on the 20th December 2017, may include a revised indicative figure for 2019/20. An updated Medium-Term Financial Plan covering the period 2018/19 to 2022/23 will be presented to both Cabinet and Council in February 2018.

Having fully considered the report, Members unanimously agreed that the details of the draft budget proposals for 2018/19 be noted.

4. 2018/19 DRAFT SAVINGS PROPOSALS FOR SOCIAL SERVICES AND PUBLIC PROTECTION

Consideration was given to the report, which provided details of the 2018/19 draft savings proposals for Social Services and Public Protection and sought the views of the Scrutiny Committee prior to final 2018/19 budget proposals being presented to Cabinet and Council February 2018.

At its meeting on the 15th November 2017, Cabinet was presented with details of draft

revenue budget proposals for the 2018/19 financial year, including savings proposals across the Council amounting to £7,205k.

The Committee noted that, as in previous years, the savings proposals that are not expected to have an impact on the public have been consolidated into a single line for each service area. These 'nil impact' savings consist in the main of vacancy management, budget realignment and minor changes to service provision.

The Corporate Director- Social Services provided the Committee with an overview of the review of the Voluntary Sector Contracts, which referred to Social Services. It was noted that each of the contracts have been considered carefully in line with the implementation of the Social Services & Well-Being (Wales) Act 2014, which means that people should be sign-posted via the Council's Information, Advice & Assistance Team to promote their independence and choice and to control their own needs.

The Committee discussed the proposal to decommission the Hospital Discharge Contract, which is currently held by Age Concern to achieve a saving of £46k. It was noted that the contract is currently run jointly with Health and provides services to relatively low numbers of people receiving non-statutory services for a short period of time. The current contract comes to an end in March 2018. The impact on the public will be in relation to people being discharged from hospital would be mitigated via the provision of information, advice and assistance including literature being produced by Health. Members noted that CCBC provide a 30% funding contribution to the service, and should this be withdrawn, the Health Service may look to continue the service and retender. Following discussion, it was agreed that further information be sought on the impact of withdrawing CCBC funding for this service and the impact on current users.

Members discussed the proposal to decommission 2 Luncheon Club Contracts, to achieve a saving of £12k. The clubs currently operate in Panside and Nelson and are attended by fewer than 15 people. It is proposed that the funding be withdrawn from these clubs and the Service Users be offered the services of a community connector to look at other options in their communities. Alternatively the provider may be able to find a different funding stream. Members expressed concern for the Service Users and sought further details on the amount of notice that would be provided to the service users. Officers explained that, until a Cabinet decision has been made on savings proposals, it would not be possible to provide notice to the Services Users; however, officers assured Members that Service Users would be provided with support, guidance and information in order to find a service to meet their needs, should the proposal be implemented.

The Committee discussed the proposal regarding the Care and Repair Safety at Home Service. It was noted that the contract is due to end in March 2018 and the report proposed that the service not be recommissioned. Members noted that the contract provides minor adaptations in people's own homes, however, other options are available, which provide the same service and the Council has a separate minor adaptations budget which provides support for those most in need.

The report outlined a proposal to cease the CCBC contribution to the Stroke Association contract, realising a saving of £18k. Members noted that the Health Board let this contract to which Caerphilly CBC currently makes an £18k contribution.

The Chair invited Mr M. O'Grady and Ms A. Markel to provide further information on the Stroke Association and the services they provide.

The Committee were asked to note that the Stroke Association provide emotional and practical support for people who have suffered with a Stroke. Home visits are provided post Stroke and regular contact for up to a year, to support the client. The service received by each individual is tailored to their specific needs in order to manage their recovery. Referrals are received from Health and other services and Members were asked to note the impact on Services users should the service not be funded. Service users would be left isolated without

support and their needs wouldn't be met.

A Member sought information on the number of visiting officers provided support to residents of Caerphilly. It was confirmed that there is 1 officer for Caerphilly, providing support to 70 people in service, 58 of which are engaged referrals within Caerphilly.

A Member, in noting the cuts to the NHS and the positive impact the service has on stroke survivors, sought the rationale for the saving proposal. Officers explained that each proposal will have an impact on someone and that similar contributions are not being made to other associations. In addition, Members were asked to note that the Health Board has received funding for neurological services; therefore alternative provisions would be available in the service area.

Following consideration and discussion, it was requested the further information be sought from the Health Board to determine the impact on Service Users, should the £18k funding cease from CCBC.

The Corporate Director-Social Services and Head of Public Protection provided the Scrutiny Committee with an overview of the Savings proposals suggested for the services under Public Protection.

The Committee were asked to note that the Deletion of 1 Van Helper Post within the Meals Direct meals on wheels service area could realise a saving of £7.5k. The post is 17.5 hours per week and, as all 5 posts are currently occupied, it would be necessary to consider redeployment or a one-off severance payment. The deletion of this post could result in increased meal delivery/waiting time as a result of our reduced ability to get to homes where we need to be double staffed, but the public impact is considered to be low.

Members raised concerns for the impact on service delivery with a reduction in staff. Officers assured Members that the impact to service delivery would be minimal, as the number of meals on wheels vehicles would remain the same, the lone driver would not be sent to any properties that pose a risk, and routes are carefully planned, however there could be less flexibility due to staff absence.

The Committee were asked to consider an increase in the charge for Meals on Wheels, which would provide a proposed saving of £11k. It was noted that by increasing the price of a meal provided by the service by 20p (from £3.10 to £3.30) from April 2018, would result in an additional income of £11k. Due to the service users, Members were advised that affordability would be considered and, in addition, Members were assured that in comparison to other Local Authorities in the area, CCBC subsidised meal prices would remain amongst the lowest even with the proposed increase. Customer numbers have fallen over a period of years. A number of alternative options are available, but some customers, and their families, continue to opt for a daily visit from Meals Direct and the delivery of a freshly prepared hot meal. A further price increase may result in further loss of customers and this has been accounted for in the overall estimate of £11k additional income per year.

Members were asked to consider a proposal to introduce a Rat Treatment Fee, which would provide a proposed saving of £20k. It was noted that Rat treatments in domestic premises are currently undertaken free of charge. It is proposed to introduce a £20 (plus VAT) charge. Customers in receipt of means tested Universal Credit or Guaranteed Pension Credit would receive a 50% discount on the Council's Pest Control charges and so would pay £10 (plus VAT). At £20 the Council would still be subsidising the service. By way of comparison the Council's current charge for treating a mouse infestation is £50 (plus VAT). Experience from other local authorities has demonstrated that following the introduction of such charges there has subsequently been a significant decline in the number of service requests processed. Income from the introduction of a £20 charge is therefore estimated to be £20k per year. It was noted that there is some risk of public health implications due to infestations left untreated. Members of the public may try to undertake treatments themselves which can lead to the improper placing of rodenticides. The introduction of charging and a decline in service

uptake is likely to create some increase in the workload of environmental health officers as they have to investigate the cause of rat infestations, neighbour disputes, and to take enforcement action to remedy problems, including the service of notices and undertaking works in default. The public impact of this proposal is considered to be medium.

The Chair invited Councillor D.T. Davies to address the Committee as the Chair of Regeneration and Environment Scrutiny Committee and having an overlapping portfolio.

Councillor Davies asked the Committee to note the concerns the Regeneration and Environment Scrutiny Committee had in relation to the savings proposals relating to the introduction of Rat Treatment fees the impact on the Borough, should a charge be applied for the treatment of Rat infestations. Concerns were raised that there would be a decrease in the number of service requests and incidents reported and as a result an increase in the rat population.

Members raised concerns that the implementation of a cost to the service could result in a reduction in service requests and people choosing to use various poisons in order to treat the issue. Officers explained an equalities impact assessment was undertaken for the proposal, which was included within the report. In addition, Members were asked to note that other Local Authorities have introduced a change for some time and there has not been a significant increase in the rat population in these areas.

The report detailed a proposal to delete vacant Community Safety Warden posts, realising a proposed saving of £40k. It was noted that the current Community Safety Warden establishment is 9.3fte with 1.8fte being vacant and currently being covered by temporary staff. The Community Safety Warden service provides a uniformed patrolling presence in communities dealing with low level crime and anti-social behaviour. Each Warden is authorised by the Chief Constable of Gwent Police with powers that include traffic management and the issue of Police penalty notices. The service works very closely with the local Neighbourhood Policing Teams tackling issues in communities ranging from youth annoyance and disorder, persons under the influence of substances, environmental crime issues, defects in infrastructure, dog fouling and littering etc. As Neighbourhood Policing Teams are being depleted the service is increasingly the first line of response. As a result, it would be necessary for the Community Safety Warden Service to prioritise proactive patrols and responses to service requests as a result of any reduction in staffing establishment. It is considered that this proposal would have a medium public impact.

Councillor D.T. Davies, as Chair of the Regeneration and Environment Scrutiny Committee addressed the Committee and expressed concern at the proposal, noting the exceptional service provided by Community Safety Wardens, and asked the Committee to consider the proposal from Gwent Police to decriminalise parking, in which Community Safety Wardens would play an integral part in parking enforcement. As a result, it was suggested that the proposal to reduce the number of Community Safety Wardens be postponed until a further report can be provided on the decriminalisation of parking.

The Chair thanked Councillor Davies for his representations and discussion ensued.

Members expressed similar concerns to the Regeneration and Environment Scrutiny Committee and noted the work undertaken within their wards such as assistance with reducing Anti-Social Behaviour.

The Committee discussed the proposal to reduce Air Quality and Contaminated Land Monitoring and Contractors, which proposed a saving of £15k. It was noted that the Environmental Health service discharges statutory responsibilities in respect of Local Air Quality Management and investigation of contaminated land and also manages the Authority's closed landfill sites. The activity is supported by the use of specialist monitoring equipment, laboratory services, and environmental consultants. This includes 6 real time air quality monitoring stations, 3 of which are located within the Hafod-yr-ynys and Caerphilly Air Quality Management Areas (AQMAs). There are also 58 passive diffusion tubes which are located in

various streets and towns. This monitoring network is used to review and assess air quality across the county borough. External expert advice, modelling, and assessment is also engaged to assist in bringing forward the Air Quality Action Plans required for the 2 AQMAs and in meeting the Council's obligations for Local Air Quality Management.

The budget currently allocated for air quality is £46,857 and for contaminated land assessment is £18,562, totalling £65,419. Therefore a reduction of £15k would leave a remaining combined budget of £50,419 and environmental monitoring activity would need to be prioritised accordingly. This proposal is assessed as having medium public impact.

Members thanked the Officer for the overview and sought further information on the impact to service and increased risk. Officers assured Members that there is no increased risk to the Air Quality Management process, however, there will be a requirement to prioritise works and address situations where required.

Members thanked the Officers for the detailed report and noted that a Members' Seminar has been arranged, which will combine the outcome of the discussions from all Special Scrutiny Committee meetings on the 2018/19 draft savings proposals.

Having fully considered the report, Members noted the details of the 2018/19 draft savings proposals for Social Services and Public Protection.

The meeting closed at 7.04 p.m.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 6th February 2018, they were signed by the Chair.

CHAIR



HEALTH SOCIAL CARE & WELLBEING SCRUTINY COMMITTEE – 6TH FEBRUARY 2018

**SUBJECT: HEALTH SOCIAL CARE & WELLBEING SCRUTINY COMMITTEE
FORWARD WORK PROGRAMME**

**REPORT BY: ACTING DIRECTOR OF CORPORATE SERVICES & SECTION 151
OFFICER**

1. PURPOSE OF REPORT

1.1 To report the Health Social Care and Wellbeing Scrutiny Committee Forward Work Programme.

2. SUMMARY

2.1 Forward Work Programmes are essential to ensure that Scrutiny Committee agendas reflect the strategic issues facing the Council and other priorities raised by Members, the public or stakeholders.

3. LINKS TO STRATEGY

3.1 The operation of scrutiny is required by the Local Government Act 2000 and subsequent Assembly legislation. The Forward Work Programmes contribute to the following Well-being Goals within the Well-being of Future Generations Act (Wales) 2016 by ensuring there is an effective scrutiny function and that council policies are scrutinised against the following goals:

- A prosperous Wales
- A resilient Wales
- A healthier Wales
- A more equal Wales
- A Wales of cohesive communities
- A Wales of vibrant culture and thriving Welsh language
- A globally responsible Wales

4. THE REPORT

4.1 The Health Social Care & Wellbeing Scrutiny Committee forward work programme includes all reports that were identified at the scrutiny committee meeting on xxxxxx 2017. The work programme outlines the reports planned for the period February to June 2018.

4.2 The forward work programme is made up of reports identified by officers and members and has been prioritised into three priority areas, priority 1, 2 or 3. Members are asked to consider the work programme alongside the cabinet work programme and suggest any changes before it is published on the council website. Scrutiny committee will review this work programme at

every meeting going forward alongside any changes to the cabinet work programme or report requests.

- 4.3 The Health Social Care and Wellbeing Scrutiny Committee Forward Work Programme is attached at Appendix 1. The Cabinet Forward Work Programme is attached at Appendix 2.

5. WELL-BEING OF FUTURE GENERATIONS

- 5.1 This report contributes to the well-being goals as set out in links to strategy above. It is consistent with the five ways of working as defined within the sustainable development principle in that by ensuring the scrutiny function is effective when reviewing services and policies and ensure it considers the wellbeing goals.

6. EQUALITIES IMPLICATIONS

- 6.1 There are no specific equalities implications arising as a result of this report.

7. FINANCIAL IMPLICATIONS

- 7.1 There are no specific financial implications arising as a result of this report.

8. PERSONNEL IMPLICATIONS

- 8.1 There are no specific personnel implications arising as a result of this report.

9. CONSULTATIONS

- 9.1 There are no consultation responses that have not been included in this report.

10. RECOMMENDATIONS

- 10.1 That Members consider any changes and agree the final forward work programme prior to publication.

11. REASONS FOR THE RECOMMENDATIONS

- 11.1 To improve the operation of scrutiny.

12. STATUTORY POWER

- 12.1 The Local Government Act 2000.

Author: Catherine Forbes-Thompson Interim Head of Democratic Services

Consultees: Gail Williams, Interim Head of Legal Services and Monitoring Officer
Dave Street, Corporate Director Social Services

Appendices:

Appendix 1 Health Social Care & Wellbeing Scrutiny Committee Forward Work Programme.
Appendix 2 Cabinet Work Programme.

Health Social Care and Wellbeing Scrutiny Committee – February 2018- July 2018			
Meeting Date: 6th February 2018			
Subject	Purpose	Key Issues	Witnesses
Year-end Performance Report for Social Services & Public Protection (to include complaints)			
Budget Monitoring Report (Month 9)	To inform Members of projected revenue expenditure for the Social Services Directorate and to update Members on the progress made against the savings targets built in to the revenue budget for the Directorate	Identification of significant variances between budgeted expenditure and forecasted expenditure for the financial year based on information available at the end of December, along with causes and any mitigating action taken.	Mike Jones

Meeting Date: 20th March 2018			
Subject	Purpose	Key Issues	Witnesses
Gwent Violence Against Women, Domestic Abuse and Sexual Violence Strategy (P1)	To seek Members views on the Gwent Violence Against Women, Domestic Abuse and Sexual Violence Strategy prior to its consideration by Cabinet	In order to discharge the duties of public bodies under the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) 2015 Act.	Rob Hartshorn
How Schools Engage with the Health Schools Initiative (P2 – Members Request)	To provide an update on work done to improve outcomes for children including the Health and Sustainable Pre-School Scheme, School Cycling Programme.	Improving health outcomes for children.	Carin Quinn

Meeting Date: 1st May 2018			
Subject	Purpose	Key Issues	Witnesses

Meeting Date: 19th June 2018			
Subject	Purpose	Key Issues	Witnesses

Meeting Date: Date to be Confirmed			
Subject	Purpose	Key Issues	Witnesses

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Cabinet Forward Work Programme

31ST JANUARY 2018	Key Issues	Service Area
Caerphilly County Borough Council Strategic Equality Plan – Annual Monitoring and Improvement Report 2016-2017	<p>The Council has a statutory duty to produce an annual monitoring report on Equalities issues under current legislation. The requirements are very detailed as to what relevant information must be included in the annual monitoring and improvement report.</p> <p>The information presented is to ensure that the regulatory body involved (the Equalities and Human Rights Commission) is provided with full evidence of the Council's compliance and commitment to the statutory duty.</p>	Public Protection
Update on Reserves	To present details of the usable reserves held by the Authority and to outline proposals for the use of reserves in some areas.	Corporate Finance
<p>Land at Plasturtwyn Terrace, Bargoed</p> <p>23</p>	<p>To seek members' instructions in relation to the disposal of the land, which has been declared surplus. The options are</p> <ol style="list-style-type: none"> 1. To negotiate a disposal directly with the zoned Housing Association partner, in which case affordable housing could be up to 100% or 2. To put the site on the market with a view to achieving a capital receipt, with affordable housing limited to a maximum of 40% 	Property Services
Housing Revenue Account Charges – 2018/2019	For Members to consider and take a view on the increased Housing rent charges proposed in this report, prior to consideration by Cabinet on the 31 January 2018. The charges predominantly focus on council house rents and are intended to be effective for the Housing Revenue Account (HRA) for the 2018/19 financial year.	Housing
Disposal of land at Bargoed Development Plateau to Marstons PLC	EXEMPT - To seek approval in principle to the disposal of Council owned land at Bargoed Development Plateau to Marstons PLC to facilitate development of a pub/restaurant.	Economic Development
Amendments to Authorisation of Officers within the Public Protection Division	The report will inform Cabinet of the introduction of the Public Health (Wales) Act 2017 and ask for the authorisation of officers under the Act. The report will also seek a recommendation from Cabinet to Council that the Act be added to the Council's Constitution.	Public Protection
Land at Coronation Road, Blackwood	To seek approval to the principle of disposing of land between Coronation Road and Lilian Road, Blackwood to the Pobl Group for an affordable housing scheme having a mix of properties that addresses the needs identified within the Council's Housing Register.	Property Services

Cabinet Forward Work Programme

Children's Burial Fees	To seek the views of Cabinet on the formal adoption of a Memorandum of Understanding (MoU) between Welsh Government and Local Government across Wales to set out a consistent approach in relation to children's burial fees.	
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14TH FEBRUARY 2018	Key Issues	Service Area
Budget Proposals 2018/19 and Medium-Term Financial Strategy 2018/2023	To seek Cabinet endorsement of the 2018/19 budget proposals contained within this report prior to final determination at Council on the 20th February 2018.	Corporate Finance
Business Improvement Programme	To provide Cabinet with an overview of the Business Improvement Portfolio Board aims and objectives; the programmes/projects which sit within its remit and associated timelines for delivery, and the programme/project management arrangements in place and interfaces with existing governance requirements	Communities
Control of Hand Arm Vibration at Work Policy	Cabinet approval is sought for the Policy which details the roles and responsibilities at all levels for the control of vibration.	Health and Safety
Electrical Safety Policy	The purpose of this report is to seek Committee Members approval for the draft policy for Electrical Safety prior to the report being referred to Cabinet for consideration.	Health and Safety
Corporate Risk Register	To provide an update of the Corporate Risk Register in accordance with the Council's Risk Management Strategy. The updated Corporate Risk Register (CRR) is presented to Audit Committee so there is opportunity for the Committee to satisfy itself that appropriate arrangements are in place for the council's risk management processes to be regularly and robustly monitored and scrutinised	Public Protection
Dying to Work Campaign		Human Resources
Cabinet Forward Programme	To seek Cabinet endorsement of the Forward Work Programme for the period February 2018 to May 2018.	Legal and Democratic Services

28TH FEBRUARY 2018	Key Issues	Service Area
CCBC Corporate Plan	The Corporate Plan sets out the Council's Priorities. The Local Government	Public

Cabinet Forward Work Programme

	Measure 2009 requires all local authorities in Wales to set and publish a set of priorities as is 'practicably possible' in the new financial year. The introduction of the Well-being of Future Generations (Wales) Act 2015 (WBFGA) also places a legal requirement for public bodies to set and publish 'Well-being Objectives' and publish by a specific date of no later than 31st March 2018.	Protection
Fixed Penalty Notices for Flytipping	To seek Cabinet approval for a fixed penalty amount for flytipping offences following the introduction of the Unauthorised Deposit of Waste (Fixed Penalties) (Wales) Regulations 2017.	Public Protection
General Data Protection Regulation (GDPR) – Statutory Role of Data Protection Officer	To inform Members of the requirement to create a new statutory role of Data Protection Officer as prescribed by the forthcoming EU General Data Protection Regulation (GDPR) and recommend a suitable allocation of the responsibility to an existing role within the Authority.	Information Technology
ERDF 4.4 Funding Opportunities The Lawn Industrial Estate Rhymney and T.D. Nelson.	The report advocates identifying the Lawn Industrial Estate and Ty Du Nelson as the Council's primary focus for ERDF Programme measure 4.4 and seeks to identify the required levels of match funding to allow the projects to progress. It also advocates agreeing in principle entering into a Joint Working/Development Agreement with Welsh Government at Ty Du based on the received draft Heads of Terms.	Economic Development
Decriminalisation of Parking – Stage 1 Report	For members of the committee to consider the outcomes from the options appraisal undertaken to date on the implications of taking on Civil Parking Enforcement Powers, and to offer views on how these findings should be developed further, in order to propose the most economical, effective and efficient service delivery model for the Council.	Engineering
Junior and Youth Forum Priorities	To inform Members of issues raised by Children & Young People via the Youth Service's Junior and Youth Fora. The report is seeking the views of Members prior to its presentation to Cabinet.	Youth Service

28TH MARCH 2018	Key Issues	Service Area
The Gwent VAWDASV Strategy	To seek Cabinet approval for the Regional Gwent Violence Against Women, Sexual Violence, & Domestic Abuse Strategy 2017-22. The purpose of this strategy is to set out the regional integrated approach to stop violence against	Public Protection

Cabinet Forward Work Programme

	women, domestic abuse and sexual violence, to improve the health and well-being of individuals and families affected by abuse and hold to account those who perpetrate such abuse.	
EAS Business Plan	To seek members views on the draft EAS Business Plan 2018-2021 and the Local Authority Annex 2018-2019	Education

25TH APRIL 2018	Key Issues	Service Area
Programme for Procurement	The Programme for Procurement sets out the Councils vision for developing and managing its third party expenditure in line with the Councils wellbeing objectives, Wales Procurement Policy and UK legislation. The Council is committed to ensuring it achieves value for money from its third party procurement expenditure – circa, £170,000,000 per annum. It also recognises the value of using procurement to support its wider Cultural, Social, Economic and Environmental objectives, in ways that offer real long-term benefits to the community it serves and the people of Wales, whilst balancing the issues of value for money	Procurement

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30TH MAY 2018	Key Issues	Service Area
Sheltered Housing Schemes – Eastern Valleys Area Remodelling	To provide members with proposals for remodelling a small number of sheltered housing schemes in the eastern valley, in order for members to consider a number of options which may include improvements, remodelling, alternative use and possibly demolition.	Housing
Affordable Homes New Build Proposals	To confirm the new build Council Housing programme, including the preferred delivery option in order for the Council to utilise the Affordable Housing Grant funding that has been allocated to CCBC.	Housing

11TH JULY 2018	Key Issues	Service Area
Corporate Risk Register	To provide an update of the Corporate Risk Register in accordance with the Council's Risk Management Strategy. The updated Corporate Risk Register	Public Protection

Cabinet Forward Work Programme

	<p>(CRR) is presented to Audit Committee so there is opportunity for the Committee to satisfy itself that appropriate arrangements are in place for the council's risk management processes to be regularly and robustly monitored and scrutinised.</p>	
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HEALTH SOCIAL CARE AND WELLBEING SCRUTINY COMMITTEE – 6TH FEBRUARY 2018

SUBJECT: REGIONAL AREA PLAN

REPORT BY: CORPORATE DIRECTOR – SOCIAL SERVICES

1. PURPOSE OF REPORT

- 1.1 To present the draft regional Area Plan required under the Social Services and Well-being Act.

2. SUMMARY

- 2.1 The Social Services and Well-being Act (2014) places a statutory duty on local authorities and health boards to prepare a regional Area Plan following the publication of the region's population needs assessment (PNA). A draft Area Plan has been jointly developed across the region (Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen) by Aneurin Bevan University Health Board and the Regional Partnership Team. The Area Plan sets out the actions to achieve the priorities identified in the PNA.

3. LINKS TO STRATEGY

Well-being Assessment (Wellbeing of Future Generations Act)
Draft Well-being Plan
Corporate Improvement Plan

4.0 THE REPORT

- 4.1 The Social Services and Well-being Act (Act), in Part 2, section 14, requires that local authorities and local health boards must jointly carry out an assessment of the needs for care and support in relation to people known to Social Services but also consider people who are supported through preventative services. The Gwent regional population needs assessment (PNA) report was agreed and published on 1st April 2017 and set out priorities over specific core themes:

- children and young people
- older people
- health / physical disabilities
- learning disability/autism
- mental health
- sensory impairment

- carers who need support; and
 - violence against women, domestic abuse and sexual violence.
- 4.2 Following the publication of the regional PNA report each local authority and health board are required to prepare and publish an Area Plan setting out the range and level of services they propose to provide in response to the PNA. Area plans must include the specific services planned in response to each core theme identified in the population assessment. As part of this, area plans must include:
- the actions partners will take in relation to the priority areas of integration for Regional Partnership Boards;
 - the instances and details of pooled funds to be established in response to the population assessment;
 - how services will be procured or arranged to be delivered, including by alternative delivery models;
 - details of the preventative services that will be provided or arranged;
 - actions being taken in relation to the provision of information, advice and assistance services; and
 - actions required to deliver services through the medium of Welsh.
- 4.3 The first area plans must be published by 1 April 2018 and there will be a need to ensure links between the Area Plan and the local authority Well-being Plans required under the Well-being of Future Generations Act to facilitate collaborative working between the 2 legislative duties and avoid duplication. Links to CCBC's Corporate Improvement Plan and ABUHB Intermediate Medium Term Plans will also need to be established, as well as alignment to the Neighbourhood Care Network plans in each of the GP cluster areas.
- 4.4 It is recognised that the PNA will need to link to the Wellbeing Assessment required under the Wellbeing of Future Generations Act. Although the definition of wellbeing is slightly different in each Act, there are synergies to gain, and duplication to avoid by linking the assessments. Local officers have been working closely to align the development of respective population assessments to avoid duplication and identify areas of synergy and joint working – see appendix 3 for draft Well-being Plan priorities.
- 4.5 The PNA was developed through extensive engagement with regional citizen panel, provider forum and the regional executive leadership group; as well as local groups such as youth forums, older people's forums, carers groups and parenting networks. Further engagement is planned during the consultation period.
- 4.6 Engagement was also supported by CCBC and PSB through the *'The Caerphilly You Want'* and groups such as the 'Shout Out Group'. A survey was developed and completed by 172 people of which over a third (37%) had a disability, long term illness or health problem. Some key points included:
- Greatest health support needs - Mental health support
 - Greatest social care needs – Integrated care services, information on what is available, support for older people (to remain independent), support in the community – facilities such as day care, support for adults and children with disabilities, support for those with mental health issues – counselling, accessible and affordable
 - Health and social care services required - Ageing population needs to be provided for – homecare, joined up approach to health and social care

4.7 Some of the wider **regional** emerging areas of interest are also set out below and further engagement is planned during the consultation period:

- An ageing population brings many opportunities, however there are also challenges for service provision and increases in the number of people living with long term conditions.
- Loneliness is a growing concern.
- Across the region there are high levels of social capital and volunteering. By taking an asset and placed based approach there is an opportunity to improving well-being.
- Increasing support is required for Looked After Children across the region
- Adverse childhood experiences have a negative impact on people's long term health and economic prospects and can be perpetuated through the generations.

4.8 The PNA will have to be signed off and agreed by individual local authority councils and the health board by March 31st 2017 and subsequently published on individual websites.

5.0 WELL-BEING OF FUTURE GENERATIONS

5.1 The Social Services and Well-being Act principles of working are similar to the sustainable principles identified under the Well-being of Future Generation Act. The development of the draft Area Plan is consistent with the five ways of working as defined within the sustainable development principle in the WFG Act in that it is:

- Long-term – It identifies issues that will affect the county borough and region over the next 3-5 years.
- Preventative – It sets out preventative action and how acting to prevent problems occurring or getting worse will improve local well-being.
- Integrated – It considers how the issues may impact upon partners and how these are interrelated.
- Collaborative – The Assessment was prepared in collaboration with partner organisations with an interest in the well-being of the area. It identifies how acting in collaboration could help improve local well-being.
- Involvement – The Assessment was prepared involving people/organisations, and ensuring that those people reflect the diversity of the area.

6.0 EQUALITIES IMPLICATIONS

6.1 Promoting equalities is a fundamental requirement of the Social Services and Well-being Act legislation and an equality impact assessment will accompany the final Area Plan.

7.0 FINANCIAL IMPLICATIONS

7.1 There are no financial implications related to this report.

8.0 PERSONNEL IMPLICATIONS

- 8.1 Officers from the Gwent Regional Partnership Team have been working closely with Council's Corporate Policy Unit who have played a key part in ensuring the alignment of both the regional Area Plan Well-being Plan required under the Social Services and Wellbeing Act and Wellbeing of Future Generations Act respectively.

9.0 CONSULTATIONS

- 9.1 This report has been sent to the Consultees listed below and all comments received are reflected in this report.

10.0 RECOMMENDATIONS

- 10.1 To consider the draft Area Plan, priorities and suggested actions and provide comments prior to the plan being submitted to Welsh Government.

11.0 REASONS FOR THE RECOMMENDATIONS

- 11.1 For CCBC to fulfil the statutory requirement on Local Authorities and Health Boards to produce a regional Area Plan following the publication of the regional PNA.
- 11.2 So that CCBC can provide formal consultation comments in relation to Welsh Government's statutory regional Area Plan required by 1st April 2018. The benefits expected are more opportunities for regional working, joint commissioning and maximising of resources.

12.0 STATUTORY POWER

- 12.1 Welsh Government

Author: Phil Diamond, Regional Partnership Team. phil.diamond@torfaen.gov.uk

Consultees: Dave Street, Corporate Director, Social Services

Appendices:

Appendix 1: Draft Regional Area Plan

Appendix 2: Area Plan questionnaire

Positive Change – A shared commitment to cross-sectoral change

- Provide leadership to facilitate organisational culture change, and shift to new ways of working, aligning corporate priorities in accordance with the Sustainable Development Principle
- Use our assets and resources more intelligently and sustainably
- Support our residents and partners to contribute fully to the Caerphilly we all want

Positive Start – Giving our future generations the best start in life

- Investigate opportunities to invest in the early years to build resilience across the life course and improve outcomes for current and future generations
- Create an ACE (Adverse Childhood Experience) informed Caerphilly county borough to enable collaborative strategic action that can reduce and prevent ACEs

Positive People – Empowering and enabling all our residents to achieve their own potential

- Facilitate a shift towards collaborative working with an emphasis on prevention to address current and future health and well being challenges.
- Develop a co-ordinated programme of volunteering, maximising it as a route to personal well-being and employment, including promoting corporate volunteering
- Establish all age apprenticeship programmes across PSB member organisations with co-ordinated points of access
- Equip our residents to manage their physical and mental health and well-being needs in partnership with services

Positive Places - Enabling our communities to be resilient and sustainable

- Support our most disadvantaged communities to be resilient, cohesive and enable them to help themselves
- Protect, enhance and promote our natural environment and foster community action on environmental issues
- Work with regional partners to create safe, confident communities and promote community cohesion.
- Increase the contribution that the environment makes to the health and well-being of our residents.
- Provide primary and community health services closer to home

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Appendix 1



Well-being Area Plan

2018/19



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FOREWORD

To be added

DRAFT

INTRODUCTION

What this draft Area Plan is and what it is not!

- This draft Area Plan sets out the high level outcomes and priorities for **regional working** across health, social care and the third sector.
- It does not contain all priorities as the plan would be too large but focuses on areas of work that are 'larger' than one partner and require **partnership working**
- It focuses on priorities that have been highlighted by **citizens**
- It is a starting point for **formalised** regional working under the Social Services and Well-being Act and aligns to the Well-being objectives in local Well-being Plans, under the Well-being of Future Generations Act
- It also sets out how the **principles of working** under the Social Services and Well-being Act will be delivered especially in relation to integration and preventative working
- It is not a huge collection of detailed actions lifted from partner's work plans as this is duplication; instead the plan will **'signpost'** to other statutory and formalised actions plans where necessary
- It sets out the **success measures** that will ensure **collective accountability and effectiveness** of partnership working under the Regional Partnership Board,
- This Area Plans sets the **framework** for all health and social care partners to work together to a common agenda for now, and in the future.

Developing an integrated system of care and well-being for Gwent

Delivering integrated services, which improve the well-being of the population of Gwent is the shared objective of the Area Plan. This plan establishes our ambition to create a unified vision for the health and social care system which includes third sector partners and is underpinned by quality, improvement and prevention.

The content of the plan is ambitious, and will be challenging in its delivery; it is structured around the 8 core themes from the Population Needs Assessment (PNA) and translates the agreed 'Outcome Priorities' into ambitious programmes of delivery.

Across Gwent, there is already a strong commitment to partnership working to deliver effective health and social care services. We want to enhance the range of integrated services provided closer to home and within the community, and we want to do this in partnership with our communities, our partners in housing and our partners in the voluntary sector. The plan articulates how we intend to do this, and deliver integrated services, which improve the well-being of the population of Gwent over the next three years; it establishes a set of outcomes, measures and milestones and appropriate governance arrangements, to provide assurance to the Regional Partnership Board and Cabinet Secretary.

Partnership Working

The new legislative framework in Wales, requires a step change in the pace of integration, partnership working and collaboration. Whilst many challenges will remain in overcoming organisational boundaries, and cultures, a set of shared working principles in addition to the principles in the Act have been developed, and which provide a foundation for the implementation of the Area Plan. By working in collaboration, with a focus on long term sustainability we will transform services, to provide more care closer to home, improving well-being, and citizen outcomes.

Principles of joint working:

- An integrated approach to planning and service development
- A shared approach to workforce development and sustainability
- Development of shared financial arrangements
- Enabling those with a care and support need to be informed and able to self-manage their care
- A seamless service pathway of care which is truly citizen centred

Strategic Context

The Plan has been written to reflect the national direction of travel established in Welsh Government's 'Prosperity for All' and to translate the requirements of the Social Services and the Well-being (Wales) Act and Well-being of Future Generations (Wales) Act into deliverable, measurable and substantive action. In line with Welsh Government's ambition outlined in 'Prosperity for All' and the new legal

framework for well-being, there is a clear expectation of service transformation, to provide more integrated, sustainable and responsive care and support services. This includes an enhanced focus on prevention, early intervention and providing more care closer to home and the Area Plan is predicated on these services areas.

The Social Services and Wellbeing (Wales) Act provides the new legal framework, for the development of a new statutory partnership landscape, in terms of planning, designing, funding and commissioning integrated services for those people with a care and support need in Gwent. It enables a stronger emphasis to be placed on the development of early intervention and prevention services, and promotes wellbeing as a priority across the public services. Underpinning the plan are the principles of working established in the Wellbeing of Future Generations (Wales) Act, to ensure that in the planning and delivery of services, we are actively considering how the wellbeing of future generations is improved. The emphasis on new models of care, on ICT and on sustainability, reflect in practice the ambitions of the Act.

As the plan has been developed, it has been done so in tandem with the development of the required Public Service Board's (PSBs) Well-being Plans, to ensure duplication is avoided but a clear shared approach to improved well-being is established, to this end we will consider a Memorandum of Understanding between the PSB's and the Regional Partnership Board for Well-being, ensuring our activity is complementary and aligned.

Critically, the plan aligns with the emerging findings from the Parliamentary review of health and social care. The review found that the case for change in the Welsh health and social care system was '*compelling*' with the system needing to adapt to the changing population needs of the future. It found that a '*unified vision for the health and social care system*' was required '*underpinned by quality, improvement and prevention*'. The review places an emphasis on the need to develop new models of care and the plan confidently articulates the intention to develop a range of new models of integrated services, e.g. '*Integrated Wellbeing Networks*', further development of the Neighbourhood Care Networks model – which is unique to Gwent – models of care for children with complex needs, '*Care Closer to Home*' and models of rehabilitation for sensory impairment and whole person model for mental health crisis. In addition, the infrastructure required to deliver the vision is a prominent commitment, with proposals to deliver new urgent care hubs, and primary care health and well-being centres including ones in Newport East and Tredegar by 2021.

Gwent

Gwent, has a varied demography which presents a unique set of challenges in delivering both a sustainable and consistent offer of care. The provision of care and support in the county is provided by one health board, Aneurin Bevan University Health Board (ABUHB), but the social care element is met by five local authorities. Each borough has its own challenges however, at a strategic level, they can be summarised as:

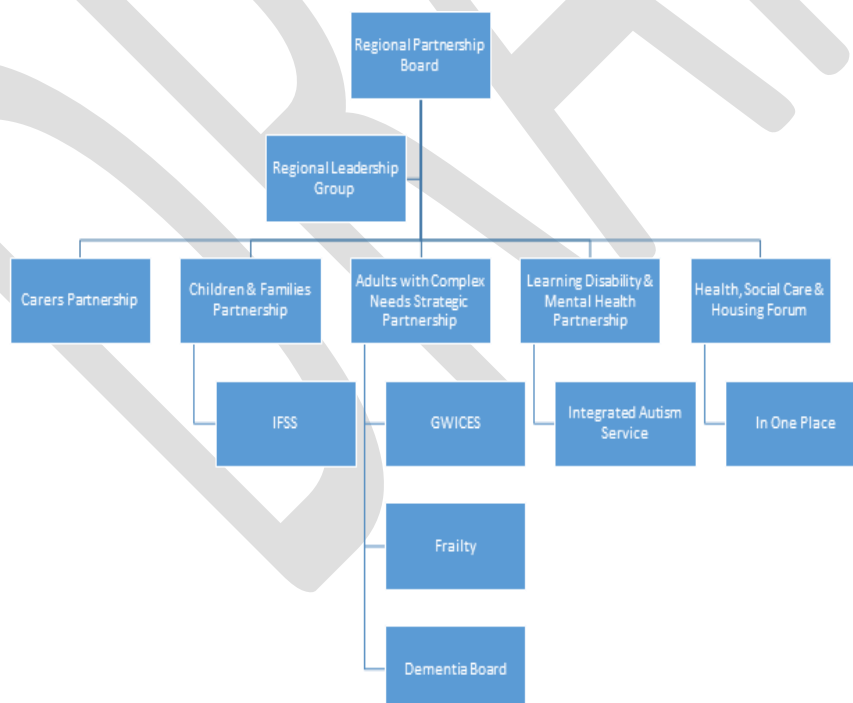
- Blaenau Gwent, Caerphilly and Torfaen – deprived areas with high levels of child poverty, poor health and unemployment

- Monmouthshire – affluent, increasing very elderly population, very rural
- Newport – pockets of deprivation, high concentration of multi-cultural citizens, high demand on public services

With a population of 601,000 by 2036, the Area Plan has focused on responding to the areas that matter most to our local population, as derived from the PNA, and which the evidence tells us will be areas of increased complexity and demand. This includes providing an integrated system of health and social care services for the over 65's population, which is predicted to increase to every 1 in four people, and for the over 85 population, where the increase is predicted to spike by 147%. In addition there are high levels of poverty and economic deprivation, which result in a particular challenge for the prevention and early intervention agenda, and a need to enhance community based universal support through the development of more integrated working with local government, and a shared emphasis on developing new models of care and support. Some transformative models are now embedding, including Neighbourhood Care Networks (NCN'S) and from 2017, the Care Closer to Home strategy.

Governance & Assurance

The aspirations encapsulated within this plan are ambitious, and for a step change in the pace of collaboration, of partnership working and service transformation. It is therefore crucial that there is effective governance and assurance mechanisms in place through the Regional Partnership structure.



Enablers

To deliver the ambition established within this Area Plan for Gwent, there are significant areas of challenge which must be overcome, to ensure ambition can be

translated into reality. Whilst these are dealt with through the specific partnerships as overarching themes, it is prudent to identify them at the front of the plan.

A) Information Technology

There must be a strong emphasis on the ability of IT to help develop enhanced services including through the implementation of DEWIS, my health online, SMS reminder services, telehealth, telecare, the implementation of WCCIS, development of mobile working for professionals and ambulatory diagnostics. The WCCIS programme will deliver service redesign for care across health and social care. Mobility is being tested out as readiness to WCCIS, as part of patient flow evaluation and with corporate departments in the AGILE programme. A business case is being developed, this deliverable will be updated once the business case is complete. In addition Telehealth Pilots will be delivered for out of hours Care Homes, Prisons and Tele-swallowing (speech & language therapy). The pilots will provide the learning for scaling up delivery and support of telehealth solutions.

B) Integrated financial systems and incentives

The development of a statutory regional board, will enable funding decisions to be made strategically and in partnership, for health and social care services, where partnership activity is required. Continued austerity has presented challenges for both local authorities and health boards in managing demand, whilst investing in new services. In line with the spirit of the legislation pooled budget arrangements, will be a valuable tool for some services areas, where we can align financial resources with outcomes, to create value for the whole system. But this remains an area of significant challenge, with governance arrangements and different organisational boundaries. As part of the delivery of the plan work will continue to consider how across Gwent, resources can be better aligned physically, and virtually to allow for mechanisms to allow resources to flow across organisational boundaries to achieve change.

C) Workforce

Ensuring there is a strong and sustainable workforce across health and social care is imperative, and that the spirit of the Act is translated into regional shared organisational development programmes. This is why in Gwent we have established a regional workforce development Board, the Board will work in partnership with the four strategic partnerships to ensure that workforce development needs, recruitment and retention remain prevalent. Critical challenges will be around the domiciliary care workforce and the establishment of 'integrated multi-disciplinary community teams'.

D) Housing

Developing new models of care for vulnerable and older adults with complex needs is a critical need, it will ensure people are supported to remain in their homes, which are developed to accommodate the specific needs of an ageing population. The Health, social care and Housing forum, have developed a programme of work which will provide leadership and strategic direction from which to develop new service specifications, and the development of an older peoples housing needs assessment tool is a key step forward.

E) Estates Infrastructure

There is a need for appropriate, effective and modernised capital infrastructure across Gwent, in order to deliver the services described in the plan. Both primary care services and adult social care provision present significant challenges, alongside questions on future viability. Whilst Integrated Care Funding has provided resources, alongside local projects this area remains one where considerable and focused activity is required. Integrated capital planning and making better use of the public sector estate are necessary, and these are shared issues that will be taken forward in partnership with Public Service Boards.

ABUHB Clinical Futures: An integrated system of health, care and well-being (including 'Care Closer to Home' and Neighbourhood Care Networks)

ABUHB's ambition is to create a new system of primary, community care and well-being across Gwent, in partnership with local government and the third sector. They aim for people to be able to access the care they need in their own community and homes, improving independence and wellbeing, and avoiding the need for unnecessary hospital admission. To do this they will require a radical transformation of services, and the development of new models of care, based in the community. ABUHB's vision is to create a system of primary, community and well-being services, based around the Neighbourhood Care Network (NCN) footprint, where there is a consistent regional service offer, and effective locality based multi-disciplinary teams. A framework has been developed to set out a vision, with a 5 year programme plan developed from 2018/19 to deliver change. The four stages are:

1. Keeping people healthy and well
2. Self-care
3. Primary Care and NCN Team
4. NCN Hub with specialist and enhanced services

ABUHB we will draw on the findings of the Parliamentary review, recognising their expectations of a community focused, seamless service. Integrated commissioning, and a clear set of service principles will underpin the development of a consistent NCN model

- Establishing a Gwent wide unified vision for health and social care
- Increasing the pace of transformative change and integration
- Developing new models underpinned by the principles of prudent healthcare and the Social Services and wellbeing Act

The system is predicated on the shared agreement by both Health and Local Government to provide more care closer to home, to reduce a reliance on primary care services, and prevent unnecessary hospital admissions. The system will build on the existing innovation across Gwent, and use the NCN footprint, as the basis from which services will be planned and delivered, around a model of community well-being. To drive action, a set of 10 high impact actions will be adopted to drive forward change, and which are focused on partnership working, the development of more productive flows, and the creation of a standard model of multi-disciplinary teams. Taken together, these principles can be translated into high impact actions

including:

1. The development of a new model of integrated care predicated on improved wellbeing, based on an NCN/IWN footprint
2. The development of active signposting through Information Advice and Assistance (DEWIS) to empower citizens to make informed choices about their healthcare needs and actions
3. Greater partnership working to deliver a consistent specification for NCN's across organisational boundaries to provide a seamless pathway to accessible local community services
4. Developing an appropriate skills mix within a modernised and more integrated workforce, aligned to the population needs assessments
5. Enhancing self-care through social prescribing, and new consultation methods in line with the principles of prudent health care.
6. Further pathways establishing secondary care and primary care responsibilities and enhancing the leadership of Primary Care, Particularly for chronic conditions.

Proposed Outcomes for ABUHB Integrated System

- People are identified early if they need care or support and they are prevented from ill health or decline in wellbeing wherever possible
- Improved community to capacity to support improved health behaviours
- Reduced unnecessary hospital admissions through the provision of integrated community capacity, that is responsive and accessible
- A seamless pathway of care for patients, by integrating social services, health and third sector provision at a local level
- Improving the sharing of information across health and social care

What is the purpose of the plan?

The purpose of the Area Plan is to turn 'priorities into action'

Population Needs Assessment

The Social Services and Well-being (Wales) Act 2014 introduced a duty on local authorities and local health boards to prepare and publish a Population Needs Assessment (PNA) of the needs of people requiring care and support, including carers who need support. A code of practice was published to support the PNA process and set out 8 core themes for the population assessment

1. Children & Young People
2. Older People, including People with Dementia
3. Health & Physical Disabilities
4. Mental Health
5. Learning Disability & Autism
6. Sensory Loss & Impairment
7. Carers
8. Violence Against Women, Domestic Abuse & Sexual Violence

Core themes are not addressed in isolation and there is an element of cross cutting working. In addition to the above, the Regional Partnership Board identified other priority themes as cross cutting and include

- Substance misuse
- Adult protection, child protection and safeguarding
- Housing
- Autism

The PNA code of practice also sets out the statutory duty to undertake an assessment of need across the region, identification of the range and level of services required and the definition of Well-being, per the Social Services and Well-being Act. The regional PNA report also sets out, for each core theme,

- What we know - what did the population assessment tell us?
- What we are currently doing to address priorities
- How the priorities meet the principles of the Act and how this fits with well-being under the Act
- Who helped us develop the priorities
- High level key Actions

The PNA report was developed by the Regional Partnership Board and was published 1st April 2017 – a full report is included [here](#) and includes further detail in relation to above points, and the matrix used to identify the priorities under each core theme.

Area Plan guidance

This Area Plan sets out the response of the Regional Partnership Board to the findings of the regional PNA report and has been prepared to meet the requirements of the Statutory Guidance in relation to Area Plans under section 14A of the Social Services and Well-being (Wales) Act 2014. The Act requires description of the range and level of **integrated** services proposed to be provided or arranged to deliver the priorities identified under each of the core themes. As part of this, joint area plans must include:

- the actions partners will take in relation to the priority areas of integration for regional partnership boards;
- the instances and details of pooled funds to be established in response to the population assessment;
- how services will be procured or arranged to be delivered, including by alternative delivery models;
- details of the preventative services that will be provided or arranged;
- actions being taken in relation to the provision of information, advice and assistance services; and
- actions required to deliver services through the medium of Welsh.

Focussed work with minority groups

We have engaged the views of those who would otherwise be hard to reach and marginalised including those of minority groups such as homeless people and travellers. We have used existing mechanisms to engage with vulnerable groups such as those set out below

- Looked After Children and young carers
- People in secure estates and their families
- Homeless people
- Lesbian Gay Bisexual Transgender (LGBT) community
- Black Minority Ethnic groups
- Military veterans
- Asylum seekers and refugees

The Area Plan will consider how each of the above groups needs can be addressed across the core themes and will also consider separated families and role of fathers. An Equality Impact Assessment will accompany the final plan.

Who developed the plan?

This draft Area Plan has been developed by the Regional Partnership Board through engagement with citizens, partners and providers across the region (Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen). The views of citizens is

paramount to the development of the Area Plan and to ensure the actions identified will be effective, and help develop support services required going forward to help people support themselves in the future. The regional citizen panel and provider forum have also been key partners in ensuring the identified actions are focussed on the needs of citizens and partners.

This Area Plan has been overseen by the Regional Partnership Board and third sector partners. The individual core themes sections have been developed by strategic partnerships and supported by the regional Leadership Group. The following strategic groups have coordinated related core theme sections

Strategic Partnership	Core Theme
Children and Families Board	Children and Young People
Older People Strategic Partnership	Older People, Health and Physical Disabilities and Sensory Impairment
Carers Board	Carers
Mental Health & Learning Disabilities Partnership	Mental Health, Learning Disabilities and Autism
VAWDASV Partnership Board	Violence Against Women, Domestic Abuse & Sexual Violence

Other strategic partnerships such as:

- Area Planning Board,
- Safeguarding Boards and the
- Health, Social Care and Housing Partnership

will also play a lead role in ensuring cross cutting themes such as substance misuse, safeguarding and housing are aligned in this Area Plan. The Regional Partnership Board (RPB) will set the partnership framework for the above partnerships to link, align priorities and avoid duplication.

How we keep track of what we're doing

It is crucial that the RPB monitor and evaluate the core theme action plan sections to ensure effective governance. Each core theme section will set out success measures to be reported to the RPB and a performance management framework and reporting structure will accompany the Area Plan and set out

- Position statement – where we are and the curves we have turned
- Progress factors – story behind the curves
- Successes – good practice identified
- Challenges – barriers to progress
- Next steps – what the RPB are being asked to support

What is being done elsewhere in the region and how do we know it is being

addressed?

The RPB will align the performance management process with existing reporting frameworks (Area Planning Board, VAWDASV Board, Safeguarding Boards) to ensure priorities are being supported. The PRB will also explore governance arrangements and shared reporting with local Public Service Boards to ensure effective alignment across the Area Plan and 5 Well-being plans.

Performance measures

The success measures identified in the core theme sections reflect performance measures in the National Outcome Framework and Public Health Outcome Framework. The RPB will also reference and align to the performance measures in local Well-being Plans and Local Authority Improvement Plans; and consider data development through the implementation of the Area Plan as some success measures may not be currently measured.

Part 1 OUTCOMES: Regional Priorities, & Core Theme Sections

CHILDREN AND YOUNG PEOPLE

Regional Priority / Outcome:

- To improve outcomes for children and young people with complex needs through earlier intervention, community based support and placements closer to home &
- To ensure good mental health and emotional well-being for children young people through effective partnership working (priority under Mental Health core theme)

HOW WILL WE MEASURE SUCCESS?

NATIONAL OUTCOME FRAMEWORK measures

Priority 1 (below)

- Proportion of looked after children per local authority area
- Proportion of looked after children placed in different types of accommodation per 10,000 of under 18 population
- The percentage of children supported to remain living within their family
- The percentage of looked after children returned home from care during the year
- 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

Priority 2 (below)

- The percentage of re-registrations of children on local authority Child Protection Registers (CPR)
- The average length of time for all children who were on the CPR during the year
- Number of children assessments of need for care and support undertaken during the year and of those, the number that led to a care and support plan
- Number of requests for repeat assessment of need for care and support and need for support made by a child, young carer or person with parental responsibility during the year Of those, the number of repeat assessments undertaken Of those, the number of repeat assessments that led to a care and support plan or support plan

Priority 3 (below)

- Number of ACE awareness/training sessions
- Number of Information Advice and Assistance contacts
- ACE related programme measures (TBC)

QUALITATIVE QUESTIONNAIRE – below measures are currently measured using national survey but are subject to review.

- Young adults reporting they received advice, help and support to prepare them for adulthood
- Children and young people reporting that they are happy with who they live with

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
<p>Support Children and Family Partnership Board's review of local arrangements for children with complex needs and delivery of work programme with a focus on Looked After Children.</p>	<p>Children & Family Board</p>	<p>Respond to recommendations in consultant reports and implement appropriate next steps</p> <ul style="list-style-type: none"> • Cordis Bright - Research on children & young people with escalating & complex needs <ul style="list-style-type: none"> ○ Recruitment of (and potentially use of) foster carers. ○ Supporting children who are experiencing attachment and trauma based problems. ○ More in-region residential care. • Institute of Public Care – Development of accommodation and support for care leavers with complex needs and regional Integrated Implementation Plan. Considerations in relation to <ul style="list-style-type: none"> ○ Emergency, respite and crisis accommodation ○ Practical and psychological therapeutic support ○ Expand the provision of suitable move-on accommodation <p>Develop business case and appropriate service models (to include mechanism to identify cohort) where required</p> <p>Review and coordinate integration and alignment of existing programmes e.g Integrated Family Support Services</p> <p>Explore new programmes e.g. Roots of Empathy</p>	<p>April 2019</p>	<p>ICF funded projects to be confirmed</p>	<p>Working Pathway step up and step down in a planned way</p> <p>Increased investment in children's services</p>

<p>Consistent models of practice and alignment of Welsh Government's early intervention and preventative programmes including development and delivery of a regional ACE approach with a focus on earlier intervention and mental health support for children and young people through community based assets.</p>	<p>Regional Partnership Board & Public Service Boards</p>	<ul style="list-style-type: none"> • Explore consistent use of Social Services and Well-being Act assessment principles across all programmes to aid 'pass porting' of assessments across agencies and local authority boundaries • Explore joint commissioning across all programmes • Align and develop joint training across programme workforces with common language and awareness • Explore consistent resilience model across the region • Link to 'Flexible Funding' pilot sites to explore good practice in maximising funding across prevention programmes <p>Develop a regional approach for organisations to become ACE aware and aligned to national ACE hub programme and to include</p> <ul style="list-style-type: none"> • ACE awareness • ACE prevention/detection including the use of an ACE 'lens' when undertaking risk assessment included as part of assessment process • Develop and strengthen existing trauma services to ensure effective ACE intervention 	<p>April 2019</p>	<p>N/A</p>	<p>See success measures</p> <p>All PSBs commit to becoming ACE aware</p> <p>Number of ACE awareness sessions and training</p>
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OLDER PEOPLE (1)

Regional Priority / Outcome:

To improve emotional well-being for older people by reducing loneliness and social isolation with earlier intervention and community resilience

HOW WILL WE MEASURE SUCCESS?

NATIONAL OUTCOME FRAMEWORK measures

1. The percentage of unscheduled admissions of older people (aged 65 or over) to hospital who were receiving care and support services
2. The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over
3. The percentage of adults at the end of a completed period of reablement phase who:
 - a. have no package of care and support 6 months later
 - b. have no package of care and support 12 months later
4. The percentage of adults who have received advice and assistance and have not contacted social services for 6 months for the same outcome during the year
5. The percentage of people supported to remain in their own home with a home adaptation

QUALITATIVE QUESTIONNAIRE – below measures are currently measured using national survey but are subject to review.

1. I have been treated with dignity and respect (aged 10+);
2. I have received the right information, advice or assistance when I have needed it (aged 10+);
3. I have been given written information about a named team in social services (aged 10+);
4. I have been involved in decisions made about my care and support (aged 10+);
5. The care and support I have received has helped me to live in a home that is right for me (aged 10+);
6. The care and support I have received has helped me to do the things that matter to me (aged 10+);
7. The care and support I have received has helped me to feel safe (aged 10+);
8. The care and support I have received has helped me to feel like I belong to my community (aged 18+).

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Develop place based approach 'Care Closer to Home' including consistent delivery of community connectors across the region to reduce social isolation	Adult Strategic Partnership	<p>Development of a placed-based approach via Care Closer to Home Strategy which will include a focus on social isolation & include</p> <ul style="list-style-type: none"> • Develop a sustainable work force. • Links to Housing Associations • Support to carers • To develop health and well-being hubs • To identify opportunities to "shift" care from secondary services to primary care, providing care closer to home. <p>Frailty Service - The future direction is captured as part of Care Closer To Home strategy. As the Borough action plans develop, the contribution of the Frailty service will need to be incorporated as part of the range of interventions available in each Neighbourhood Care Network and Borough. This development will tackle the "stand alone" issues.</p> <p><i>Continuing Health Care and Gwent Wide Integrated Community Equipment. Services (GWICES) action plans to be aligned to Care Closer to Home</i></p>	Final CC2H draft near completion and Health Board sign-off (Sept 2017) Local Councils sign-off (Nov 2017) Links to the Regional	ICF funded projects to be confirmed	Workforce Development Partnership and the development of a regional workforce strategy and the work of Social Care Wales.

OLDER PEOPLE (2)

Regional Priority / Outcome:

- To improve outcomes for people living with dementia and their carers

HOW WILL WE MEASURE SUCCESS?

- Number of people receiving Dementia Friends awareness
- Number of Dementia Champions trained
- Number of organisations awarded Dementia Friendly Community kitemark
- Increase dementia diagnosis rate
- Number of people living with dementia and their carers supported through Dementia Support Workers and reporting positive support

*Welsh Government will be launching a new national Dementia Strategy and success measures will be updated accordingly

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Further develop 'Dementia Friendly Communities'	Dementia Board	Dementia Board coordinates delivery of work programme* and is currently reviewing to align with new national dementia strategy with a focus on <ul style="list-style-type: none"> Dementia diagnosis Training Dementia Friendly Communities Accurate information and advice Support for carers <p><i>*Dementia Board programme plan to be published alongside Area Plan to provide more details.</i></p>	TBC – awaiting WG sign off of national strategy		Dementia Board review work programme as standing agenda

OLDER PEOPLE (3)

Regional Priority / Outcome:

- **Appropriate housing and accommodation for older people**

HOW WILL WE MEASURE SUCCESS?

*Success measures will be included and reflect Health, Housing & Social Care Partnership programme of work

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(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Develop and implement Health, Housing and Social Care Partnership delivery plan	Health, Housing and Social Care Partnership (HHSC)	The Health, Housing and Social Care Partnership are updating their delivery programme in line with the regional Population Needs Assessment with the main focus of activity <ul style="list-style-type: none"> • Older Persons wellbeing and housing needs • Analysis of current older person specialist accommodation provision • Priority regional accommodation needs identified by Children & Families Partnership • Priority regional accommodation needs identified by LD & MH Partnership • Analysis and evidence base for ICF capital projects linked to the above <p><i>*HHSC programme plan to be published alongside Area Plan to provide more details.</i></p>	TBC in work programme	TBC in work programme	TBC in work programme

HEALTH & PHYSICAL DISABILITIES (1)

Regional Priority / Outcome:

- To support disabled people through an all age approach to live independently in appropriate accommodation and access community based services, including transport.

HOW WILL WE MEASURE SUCCESS?

- * Measures to be included and reflect Care Closer to Home Strategy
- ** Measures will reflect ICF projects e.g. Community Connectors
- *** To include quantitative measures from national survey where relevant

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(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Implement 'Care Closer to Home' Strategy	Adult Strategic Partnership	<i>See Older People section above.</i>			

HEALTH & PHYSICAL DISABILITIES (2)

Regional Priority / Outcome:

- **Align with 5 local Wellbeing Assessments required under Wellbeing of Future Generations Act and explore joint action planning for wider detriments to health**

HOW WILL WE MEASURE SUCCESS?

*Success measures will link to 5 Well-being Assessments and Well-being Plans required under the WFG Act – to be included following publication of draft plans

**Link to Public Health Outcome Framework

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Align with 5 local Wellbeing Assessments required under Wellbeing of Future Generations Act and explore joint action planning for wider detriments to health	Regional Partnership Board	Align this area plan with Public Service Board Well-being Plans to ensure objectives are aligned and avoid duplication <ul style="list-style-type: none"> • Map priorities across plans • Identify which board is best placed to deliver priorities • Develop common action planning and outcome framework • Develop governance and reporting framework between boards • Explore joint development/workshop sessions 	April 18	N/A	TBC

MENTAL HEALTH (1)

Regional Priority / Outcome:

- To improve emotional well-being and mental health for adults and children through early intervention and community support.

HOW WILL WE MEASURE SUCCESS?

There are a number of measures included in the national strategy 'Together for Mental Health Delivery Plan 2016/19' and the Mental Health & Learning Disability Partnership will identify key measures to be included in the Area Plan including qualitative measures.

Public Health Outcome Framework

- Mental well-being among adults
- Mental well-being among children and young people - Not currently available
- The gap in life expectancy at birth between the most and least deprived - Not currently available
- The gap in healthy life expectancy at birth between the most and least deprived - Not currently available
- Gap in mental well-being among children and young people - Not currently available
- The gap in mental well-being between the most and least deprived among adults - Not currently available

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(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Review and align regional strategies to Together for Mental Health Delivery plan	Mental Health & Learning Disability Partnership	The MH&LD Partnership are currently reviewing the regional Mental Health Strategy and will set out how priorities in <ul style="list-style-type: none"> • 'Together for Mental Health' • 'Talk 2 Me' and • 'Together for Children and Young People' 	April 18	TBC	To be identified in new regional strategy

Coordination of consistent community based services such as community connectors/social prescribers	Heads of Adult Services, ABUHB officers	Respond to recommendations from Integrated Care Funding (ICF) evaluation of community connector projects across the region. To align with 'Frind I Mi' befriending programme	April 2018	TBC	TBC Number of Befrienders trained Number of people supported by befriender
Multi-agency place based models which include wider partners such as Housing Associations, employment support and community programmes	ABUHB/ Integrated Partnership Boards/ Neighbourhood Care Networks/Housing Social Care Network	Development of a placed-based approach via Care Closer to Home Strategy which will include a focus on social isolation & include <ul style="list-style-type: none"> • Develop a sustainable work force • Links to Housing Associations • Support to carers • To develop health and well-being hubs • To identify opportunities to "shift" care from secondary services to primary care, providing care closer to home. 	Final draft near completion and Health Board sign-off (Sept 2017) Local Councils sign-off (Nov 2017)	TBC	To be identified

MENTAL HEALTH (2)

Regional Priority / Outcome:

- Increased understanding and awareness of mental health amongst the public to reduce stigma and help people to seek support earlier.

HOW WILL WE MEASURE SUCCESS?

There are a number of measures included in the national strategy 'Together for Mental Health Delivery Plan 2016/19' and the Mental Health & Learning Disability Partnership will identify key measures to be included in the Area Plan.

NATIONAL OUTCOME FRAMEWORK Relevant performance indicators

- 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

QUALITATIVE QUESTIONNAIRE – below measures are currently measured using national survey but are subject to review. Success measures to include quality measures

- People reporting they have received the right information or advice when they needed it
- People reporting they have received care and support through their language of choice
- People reporting they were treated with dignity and respect

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Accurate Information, Advice and Assistance through DEWIS and Five Ways to Wellbeing	DEWIS regional group & GAVO & TVA Public Service Boards	<ul style="list-style-type: none"> • DEWIS regional group will continue to coordinate accurate IAA with a focus on mental health • Continue to deliver 5 ways to well-being and consider roll-out in schools • Consider a communication campaign to raise awareness of mental health amongst public and in schools 	TBC	TBC	Number of DEWIS website hits Number of people accessing 5 Ways to Well- being

PEOPLE WITH LEARNING DISABILITIES

Regional Priority / Outcome:

- To support people with learning disabilities to live independently with access to early intervention services in the community; and greater public awareness and understanding of people with learning disabilities needs

HOW WILL WE MEASURE SUCCESS?

To be identified through review of regional Mental Health & Learning Disability strategy.

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Support Mental Health and Learning Disability Partnership Board review Gwent Strategy for Adults with a Learning Disability 2012/17 and set out key regional commissioning, integration actions	Mental Health & Learning Disability Partnership	The MH&LD Partnership are currently reviewing the regional Learning Disability Strategy and will identify key actions and progress measures.	April 18	TBC	To be identified in new regional strategy

SENSORY IMPAIRMENT

Regional Priority / Outcome:

- **Ensure people are supported through access to accurate information, assistance and ‘rehabilitation’ where required and to include the need to Improve emotional well-being especially through peer to peer support**

HOW WILL WE MEASURE SUCCESS?

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 (National Outcome Framework)

QUALITATIVE QUESTIONNAIRE – below measures are currently measured using national survey but are subject to review.

1. People reporting that they live in the right home for them
2. People reporting they can do what matters to them
3. People reporting that they feel safe
4. People reporting that they feel a part of their community
5. People reporting they feel satisfied with their social networks
6. People reporting they have received the right information or advice when they needed it
7. People reporting they were treated with dignity and respect
8. Young adults reporting they received advice, help and support to prepare them for adulthood
9. People with a care and support plan reporting that they have been given written information of their named worker in social services
10. People reporting they felt involved in any decisions made about their care and support
11. People who are satisfied with care and support that they received
12. Parents reporting that they felt involved in any decisions made about their child’s care and support

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Use good practice and effective pathways to develop regional commissioning principles	Integrated Eye Care Collaborative Board	Deliver Integrated Eye Care Collaborative Board regional programme Link to regional commissioning group	TBC	TBC	TBC
Ensure accurate, accessible and timely Information, Advice and Assistance through DEWIS and other means	DEWIS regional group & GAVO & TVA	<ul style="list-style-type: none"> DEWIS regional group will continue to coordinate accurate IAA with a focus on sensory impairment 	TBC	TBC	Number of DEWIS website hits
Work in partnership with third sector to identify new models to support rehabilitation process and supply of low vision tools.	GAVO/TVA	TBC	TBC	TBC	TBC

CARERS

Regional Priority / Outcome:

- Support carers to care through flexible respite, access to accurate information, peer to peer support and effective care planning
- Improve well-being of young carers and young adult carers through an increased public understanding (this is a priority highlighted in Together For Mental Health)

HOW WILL WE MEASURE SUCCESS

NATIONAL OUTCOME FRAMEWORK Relevant performance indicators:

- The percentage of adults who have received advice and assistance and have not contacted social services for 6 months for the same outcome during the year
- Number of assessments of need for support for carers undertaken during the year
 - a. Of those, the number that led to a support plan
 - b. Number of carers who refused an assessment during the year

QUALITATIVE QUESTIONNAIRE – below measures are currently measured using national survey but are subject to review.

Success measures to include quality measures

- I have been treated with dignity and respect (aged 10+);
- I have received the right information, advice or assistance when I have needed it (aged 10+);
- The care and support I have received has helped me to do the things that matter to me (aged 10+);
- Carers reporting they feel supported to continue in their caring role
- Carers reporting they felt involved in designing the care and support plan for the person that they care for
- Further quantitative measures to be identified by Carer's Reference Group

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Coordination of consistent community based services such as community connectors/social prescribers to identify and support carers	Lead Partner: Heads of Adult Services, ABUHB officers	<ul style="list-style-type: none"> Respond to recommendations from Integrated Care Funding (ICF) evaluation of community connector projects across the region. 	April 2018	ICF	<ul style="list-style-type: none"> Number or people supported through community connectors Qualitative measures TBC
Accurate Information, Advice and Assistance through DEWIS and Five Ways to Wellbeing	DEWIS regional group & GAVO & TVA Public Service Boards	<ul style="list-style-type: none"> DEWIS regional group will continue to coordinate accurate IAA with a focus on carers Continue to deliver 5 ways to well-being and consider roll-out in schools to target young carers Consider a communication campaign to raise awareness of carers amongst public and in schools to identify young carers Review local authority IAA 'front doors' performance management information and identify good practice and lessons learnt 1 year on. 	Ongoing	TBC through consultation exercise	<ul style="list-style-type: none"> Number of DEWIS website hits Number of people accessing 5 Ways to Well-being
Ensure that the implementation of the care closer to home strategy increases the community level support for carers	ABUHB/ Integrated Partnership Boards/ Neighbourhood Care Networks/Housing Social Care	<p>Development of a placed-based approach via Care Closer to Home Strategy which will include a focus on social isolation & include</p> <ul style="list-style-type: none"> Develop a sustainable work force Links to Housing Associations Support to carers To develop health and well-being hubs To identify opportunities to "shift" care from secondary services to primary care, providing 	Final CC2H draft near completion and Health Board sign-off (Sept 2017) Local Councils sign-off (Nov 2017)	TBC through consultation exercise	To be identified

	Network	care closer to home.			
Review of and align third sector commissioning principles to support befriending for carers requiring support	ABUHB & Regional Commissioning Group	<p>Work with Third Sector Partner</p> <ul style="list-style-type: none"> • Carers Trust South East Wales (cross region survey of young adult carers and development of a sustainable model for supporting young carers in school); • Barnardos Cymru (scoping a regional Young Carers ID Card Scheme); • Dewis Centre for Independent Living (developing an evidence base for a regional advocacy for carers service model). <p>Befriending</p> <ul style="list-style-type: none"> • Support ABUHB rollout 'Ffrind I Mi' befriending programme across partners and consider inclusion through wider regional commissioning priorities. 	April 2018	TBC through consultation exercise	<ul style="list-style-type: none"> • No of people supported by befriender • No of Befrienders trained
Consistent commissioning across health and social care to ensure equitable, region wide and effective models of carer support including	Regional Commissioning Group	<ul style="list-style-type: none"> • Welsh Government will be reviewing respite at a national level through new Dementia Strategy • Respond to national recommendations • Develop regional task and finish group • <i>Rollout of small grants scheme</i> 	TBC through consultation exercise	TBC through consultation exercise	TBC through consultation exercise
		<ul style="list-style-type: none"> • Sustaining staff awareness raising and training of staff • Consider bronze level Investors in Carers (IiC) scheme across GP 			
<ul style="list-style-type: none"> • flexible respite • Training and awareness • Support to Young Carers • Advocacy provision 					<ul style="list-style-type: none"> • No of staff trained

		<ul style="list-style-type: none"> • <i>Rollout of Young Carers in Schools Award Scheme and Young Carers ID Card Scheme</i> 			
		<p>Advocacy for Carers</p> <ul style="list-style-type: none"> • Develop a regional advocacy service model and service specification linked to Independent Professional Advocacy (IPA) for adults and 'Golden Thread of Advocacy' national model service specification for advocacy. • 			
Review of medical prompting to better support carers	Carers Board	<ul style="list-style-type: none"> • Develop task and finish group to develop scope • Consider development of new models and assisted technology to support carers in the community 	TBC through consultation exercise	TBC through consultation exercise	<ul style="list-style-type: none"> • T&F group established with Terms of Reference • Scoping report

PEOPLE WITH AUTISM SPECTRUM DISORDERS

Regional Priority / Outcome:

- To provide more timely diagnosis of Autistic Spectrum Disorder and access to support services and information and advice

HOW WILL WE MEASURE SUCCESS

TBC through new regional strategy but will consider

- Reduction in waiting time for adult diagnostic assessment
- Adults with autism who do not have a learning disability and/or moderate – severe mental health difficulty access to multi-disciplinary health interventions
- Children with a diagnosis have access to support and interventions
- Adults with a diagnosis of ASD (who do not have an LD and/or moderate – severe mental health difficulty) access to post diagnostic support & interventions
- Individuals with autism and their families have direct access to specialist support through a self-referral model
- Increasing awareness of service (number of referrals)
- Parents, carers and families of individuals with autism access advice, information and support.

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures

<p>Local implementation of Welsh Strategic Action Plan including development of new Integrated Autism Service.</p>	<p>New Regional ASD Strategy Group</p>	<p>The development of the Integrated Autism Service is the main delivery objective of the refreshed ASD Strategic Action Plan which will include</p> <ul style="list-style-type: none"> • development of a Regional Strategy Group • post diagnostic support & interventions for children/parents of children with autism • training program for parents/carers of children with autism. • Analysis of regional data 	<p>TBC</p>	<p>TBC</p>	<p>TBC</p>
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LINKS WITH OTHER PARTNERSHIPS

Violence Against Women Domestic Abuse and Sexual Violence (VAWDASV) Board.

The Violence against Women, Domestic Abuse & Sexual Violence (Wales) Act 2015 focusses on the prevention of issues, the protection of victims and support for those affected by such issues. Welsh Ministers are required to prepare and publish a National Strategy in relation to these matters and appoint a National Adviser on Violence against Women and other forms of Gender-based Violence, Domestic Abuse and Sexual Violence. Relevant authorities are required to prepare and publish strategies to contribute to the pursuit of the purpose of the Act. A South East Wales VAWDASV Board has been established and supported by a VAWDASV regional team. The board has identified a number of emerging regional priorities and the RPB will support the work of the VAWDASV Board in achieving the required outcomes.

- **Strategic Priority 1:** Increase awareness and challenge attitudes of violence against women, domestic abuse and sexual violence across Gwent.
- **Strategic Priority 2:** Increase awareness in children and young people of the importance of safe, equal and healthy relationships and that abusive behaviour is always wrong
- **Strategic Priority 3:** Increase focus on holding perpetrators to account and provide opportunities to change their behaviour based around victim safety
- **Strategic Priority 4:** Make early intervention and prevention a priority
- **Strategic Priority 5:** Relevant professionals are trained to provide effective, timely and appropriate responses to victims and survivors
- **Strategic Priority 6:** Provide victims with equal access to appropriately resourced, high quality, needs led, strength based, gender responsive services throughout the region.

Area Planning Board

The substance misuse Gwent Area Planning Board Board works across the Gwent region to reduce substance misuse through a combination of education, prevention, treatment and rehabilitation. The current priorities the board are working to address are below and the RPB will work in partnership to avoid duplication and create a synergism across partners.

Priorities

- Improving emergency service substance misuse training and Naloxone roll out
- Increasing alcohol provision both in terms of treatment and education
- Improved primary prevention
- Co-occurring mental health and substance misuse
- Improved housing options
- Securing capital estates funding (impact to service delivery if reduced)

Safeguarding Boards

As of the 6th April 2016, the Gwent-wide Adult Safeguarding Board and South east Wales Safeguarding Children Board became statutory boards as set out in the Social Services and Well-Being (Wales) Act 2014. The boards were formed in 2011 covering the local authority areas of Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen. Both boards have developed work programmes which ensuring the continued effectiveness of safeguarding practice during the implementation and transition of the Social Services and Well-being (Wales) Act 2014. The individual priorities are set out below and the RPB will support the delivery of priorities through joint working.

Adult Board Priorities

- Targeting Interventions towards adults who are at risk of specific types of abuse
- Improving the Quality of Care across the region
- Improving the effectiveness of the Regional Adult Safeguarding Board

Children Board Priorities

- Reducing the effects of compromised parenting on children's well-being
- Improving our work with adolescents who exhibit risky behaviours
- Improving the effectiveness of the Regional Safeguarding Children Board

Part 2 PROCESS: Principles of working

Links with Public Service Boards under the Well-being of Future Generations Act

The Social Services and Well-being Act (the Act) shares similar principles with a number of national strategies and legislation. However, the Act shares almost identical principles with the Well-being of Future Generations Act with the main difference between the acts being the time frame: the Area Plan under the Act reflects the Population Needs Assessment and covers a 3-5 year period based on electoral cycle and the Well-being Assessment under the Well-being of Future Generations Act covers a suggested period of 20-30 years.

Social Services and Well-being Act Principles	Sustainable Principles: Well-being of Future Generations
Services will promote the prevention of escalating need and the right help is available at the right time	Prevention: How acting to prevent problems occurring or getting worse
Partnership and co-operation drives service delivery	<p>Collaboration: how acting in collaboration with any other person or any other part of an organisation could help meet wellbeing objectives</p> <p>Integration: Consider how the proposals will impact on wellbeing objectives, wellbeing goals, other objectives or those of other public bodies</p>
People are at the heart of the new system by giving them an equal say in the support they receive	Involvement: The importance of involving people with an interest in achieving the wellbeing goals, and ensuring that those people reflect the diversity of local communities.
The Act supports people who have care and support needs to achieve well-being	Long term: the importance of balancing short- term needs with the need to safeguard the ability to also meet long – term needs

A strategic network of PSB managers and partners has been established to ensure good practice is shared when developing individual Well-being Plans and an opportunity for PSBs to undertake joint planning against regional priorities. The Gwent Strategic Well-being Assessment Group (GSWAG) includes wider partners from Gwent Police, Public Health Wales, Welsh government and South Wales Fire Service. The Regional Partnership Team is also represented on the group and promoting a consistent approach to the plans where they can easily be read and

referenced in tandem to promote alignment. Appendix 1 sets out a mapping of Well-being Plan priorities against the Area Plan and a common definition of terms used across the plans – which could be the basis of a Memorandum of Understanding. Going forward an alignment of success measures will be required with the ultimate aim to avoid duplication across the plans and apportion priorities across the RPB and PSBs.

Integration: Why we are taking an integrated approach?

The Well-being of Future Generations Act sets out integration as one of five sustainable development principles however there is no set definition for ‘Integration’ under the Social Services and Well-being Act or supporting codes of practice. Under Part 9 of the Act Regional Partnership Boards (RPB) are required to prioritise the integration of services in relation to:

- Older people with complex needs and long term conditions, including dementia.
- People with learning disabilities.
- Carers, including young carers.
- Integrated Family Support Services.
- Children with complex needs due to disability or illness.

For the purpose of this Area Plan the Regional Partnership Board will adopt a principle of integration based on the following areas of working

- ***Joint commissioning of services and pooled budgets***
- ***Joint workforce development and training***
- ***Consistent and portable assessment processes including outcome and distance travelled toolkits***
- ***Co-located teams***
- ***Sharing of resources***
- ***Similar understanding of information provision and consistent key messages to citizens***

The above definition of integration will be adopted when implementing the Area Plan and there is an expectation that the strategic partnerships charged with implementing the Area Plan will consider the above areas of work when delivering actions to achieve the identified outcomes.

REGIONAL JOINT COMMISSIONING PRIORITIES

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Implement Regional Joint Commissioning Group (RJCG) action plan to deliver joint commissioning arrangements for identified priorities for Act Part 9 requirements.	Regional Joint Commissioning Group	Regional group developed and Governance, Terms of Reference and outline Project Plan agreed. Regional Partnership Board appraised. Member briefing drafted Task & finish Groups and their briefs established - Finance Modelling and alignment of commissioning functions. Stakeholder engagement. Section 33 Agreement and appointment of Pooled Fund Manager. Final Section 33 Arrangement for Care Homes for Older People selected and agreed by RPB	Completed September 2017 December 2017 April 2018 April 2018		Completed Completed April 2018 January RPB will recommend decision to Councils and Health Board
Develop domiciliary care joint commissioning process with National Commissioning Board and linked to Care Standards Social Improvement Wales 'Above and Beyond' Report and the 'Care and Support at Home' Strategic Plan currently being developed by Social Care Council for Wales.		Develop regional approaches where it makes sense to do so: Medication and Falls policies, feasibility of developing a local social care academy, workforce challenges and alignment of contact management functions	Initial review report completed. Work streams being progressed by end of 2017 Interim report due early 2018		

Continue to link with National Commissioning Board to progress national work priorities and proposals across the region	National Commissioning Board	To consider recommendations from NCB and respond as a region	TBC	TBC	TBC
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Prevention and Early Intervention

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Explore a single prevention agenda across the region with PSBs and linked to Wellbeing of Future Generations and SSWB Acts which also includes Housing Associations.	RPB and PSB Health Housing and Social Care Partnership	Develop a task and finish group to identify common principles of prevention	Sept 2018	N/A	Report submitted to RPB, PSBs and G7 group
Align anti-poverty programmes across the region to set out a single preventative model based on consistent assessment principles, joint workforce and joint commissioning	See Children and Young People section				
Through the implementation of the 'Care Closer to Home' strategy ensure that prevention and early	See Older People section				

intervention is supported and enabled in a consistent manner across the region					
Delivery of Regional Joint Commissioning Group (RJCG) work plan with third sector to maximise and align activity to prevent escalation of need and build on existing models of good practice such as befriending, social prescribing etc. and to promulgate the development of social enterprises and co-operatives where possible.	RPB GAVO and TVA	*Work has started but will need to be revisited within year 2 of the Area Plan as limited capacity amongst partners	TBC		
Support Early Years Pathfinder pilot and use key messages to shape early intervention models	Early Years Pathfinder group	<ul style="list-style-type: none"> Identify key messages and good practice from pathfinder project and share with RPB and PSBs Incorporate good practices across the region Respond to recommendations from national EYP board 	April 18		

Information, Advice and Assistance

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Further support and develop DEWIS website so it becomes the 'go to' place for information on	Dewis regional group	Deliver the regional Dewis action plan and review progress annually	April 18	TBC	Number of hits on website Number of pages

support, advice and assistance.					populated Number of DEWIS authors trained
Continue to support consistent information dissemination and stakeholder engagement through regional communications group	Regional Communication Group	Regular newsletters	April 18	TBC	
Use IAA performance management data to inform design of services	Local Authorities	Annual review of IAA data and development of annual report	April 18	TBC	
To support further initiatives across the region that supports consistency of approach to IAA e.g. self-assessment exercises, peer reviews	Citizen Panel	<ul style="list-style-type: none"> Citizen Panel to review IAA across region once per year and identify recommendations for RPB Develop RPB website 	April 18 and annually	TBC	
To work with regional workforce managers and Social Care Wales to ensure that cultural change programmes are embedded and on-going	Workforce Development Board & Social Care Wales	Deliver and review WFD board regional plan	April 18	TBC	

New models, user led services and third sector working

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Work with Wales	Wales Cooperative				

Cooperative Centre to increase and support number of voluntary led services in local communities through 'Care to Co-operate'.	Centre & Provider Forum				
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Workforce Development

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
Integration of care and support provision to key client groups as set out in Part 9 of the Act and emphasised through RPBs Statements of Strategic Intent for older people, children with complex needs and carers, as well as strategy statements for Mental Health and Learning Disability (including Autism)	Workforce Development Regional Board	Deliver WFD programme plan and review progress annually -breakdown of priorities to be added	April 18	TBC	TBC

Advocacy

(WHAT we are doing) Action	(WHO) Partner Agencies	(HOW) will we deliver	(WHEN) Timescales / Milestones	Resources (including ICF projects)	Progress measures
<p>Work with the Golden Thread Advocacy Programme across the region through regional provider forum with focus on</p> <ul style="list-style-type: none"> • Alignment of advocacy provision to identified priorities across partner agencies • Joint approach to advocacy provision with third sector partners especially in promotion of independent advocacy 	<p>Golden Thread Advocacy Programme (GTAP) & Regional Provider Forum</p>	<p>Deliver regional Advocacy programme with GTAP</p> <ol style="list-style-type: none"> 1. Establishing a Gwent Advocacy Commissioners' Group. 2. Establishing a Gwent Advocacy Providers' Forum. 3. Progressing towards a regional approach to advocacy commissioning. 4. Adopting a co-productive approach to advocacy commissioning, including a multi-stakeholder workshop in early 2018. 5. Developing a strategic plan for advocacy commissioning in the region in 2019-2024, covering both IPA and wider forms of advocacy 	<p>April 2018</p>	<p>TBC</p>	<p>TBC</p>
<p>Support Children's Services joint commissioning of a single advocacy service</p>	<p>HOCS NYAS</p>	<p>Develop new service and review annually</p>	<p>April 2018</p>	<p>TBC</p>	

Annexe 1 : Mapping of draft Area Plan priorities against draft local Well-being Plan priorities

CORE THEME	Outcome Priority	Actions to be progressed through regional Area Plan	Lead Partner (ship)	BG 31/01/18	Caer 18/12/17	Mon 15/01/18	Newp 14/02/18	Torf 7/1/18
Page 85 Children & Young People	<ul style="list-style-type: none"> To improve outcomes for children and young people with complex needs through earlier intervention, community based support and placements closer to home To ensure good mental health and emotional well-being for children young people through effective partnership working 	<ul style="list-style-type: none"> Support Children and Family Partnership Board's review of local arrangements for children with complex needs and delivery of work programme with a focus on Looked After Children. Consistent models of practice and alignment of Welsh Government's early intervention and preventative programmes Develop and deliver a regional ACE action plan with a focus on earlier intervention and mental health support for children and young people through community based assets. 	Children and Families Board	Best Start in Life	Positive Start Early years	Best possible start in life	Best possible start in life.	Best Start Early years
					ACEs	ACEs Childhood Obesity Well-being resilience		ACEs Childhood obesity Parenting
Older People	<ul style="list-style-type: none"> To improve emotional well-being for older people by reducing 	<ul style="list-style-type: none"> Develop place based approach '<i>Care Closer to Home</i>' including 	Adult Strategic Partnership	Age friendly communiti	<u>Positive People</u>		People have access to stable homes	Limit the impact of chronic

	<p>loneliness and social isolation with earlier intervention and community resilience</p> <ul style="list-style-type: none"> To improve outcomes for people living with dementia and their carers Appropriate housing and accommodation for older people 	<p>consistent delivery of community connectors across the region to reduce social isolation</p> <ul style="list-style-type: none"> Further develop 'Dementia Friendly Communities' Develop domiciliary care joint commissioning process with National Commissioning Board and linked to Care Standards Social Improvement Wales 'Above and Beyond' Report and the 'Care and Support at Home' Strategic Plan currently being developed by Care Council for Wales 		es	<p>prevention to address current and future health and well-being challenges</p> <p>Care Closer to Home</p>	<p>Respond to the challenges associated with demographic change</p> <p>Housing Intergenerational living</p> <p>Volunteering</p> <p>Community support</p> <p>Social prescribing</p>	<p>in a sustainable supportive community</p> <p>Long and healthy lives for all</p> <p>Ensuring people feel safe in their communities</p> <p>People feel part of their community and have a sense of belonging</p>	<p>health conditions through supporting healthy lifestyles and enabling people to age well.</p> <p>Care Closer to Home</p>
Health & physical disabled people	<ul style="list-style-type: none"> To support disabled people through an all age approach to live independently in appropriate accommodation and access community based services, including transport. To help people reduce the risk of poor health and well-being 	<ul style="list-style-type: none"> Implement 'Care Closer to Home' Strategy Align with 5 local Well-being Assessments required under Wellbeing of Future Generations Act and explore joint action planning for wider detriments to health 	Adult Strategic Partnership	Healthy Lifestyle Choices	<p><u>Positive People</u> physical and mental health and well-being needs</p> <p>programme volunteering maximising route to</p>		<p>Long and healthy lives for all equalise up health life expectancy and life expectancy and health inequalities).</p>	<p>Limit the impact of chronic health conditions through supporting healthy lifestyles and enabling people to age well.</p>

	through earlier intervention and community support				well-being prevention to address current and future well-being challenges			
People with Learning Disabilities and Autism Spectrum Disorders	<ul style="list-style-type: none"> To support people with learning disabilities to live independently with access to early intervention services in the community; and greater public awareness and understanding of people with learning disabilities needs To provide more timely diagnosis of Autistic Spectrum Disorder and access to support services and information and advice 	<ul style="list-style-type: none"> Support Mental Health and Learning Disability Partnership Board review Gwent Strategy for Adults with a Learning Disability 2012/17 and set out key regional commissioning, integration actions Local implementation of Welsh Strategic Action Plan including development of new Integrated Autism Service. 	Mental Health & Learning Disabilities Partnership					
Mental Health	<ul style="list-style-type: none"> Increased understanding and awareness of mental health amongst the public to reduce stigma and help people to seek support earlier. 	<ul style="list-style-type: none"> Review and align regional strategies to Together for Mental Health Delivery plan Coordination of consistent community based services such as 	Mental Health & Learning Disabilities Partnership		<u>Positive People</u> physical and mental health and well-being	Emotional well-being for children and young people	Participation in sports and physical activity is important for people's physical and	

	<ul style="list-style-type: none"> To improve emotional well-being and mental health for adults and children through early intervention and community support. 	<p>community connectors/social prescribers</p> <ul style="list-style-type: none"> Multi-agency place based models which include wider partners such as Housing Associations, employment support and community programmes Accurate Information, Advice and Assistance through DEWIS and Five Ways to Wellbeing 			needs		mental well-being and resilience.	
<p>Sensory impairment</p> <p>88 88 88 88</p>	<ul style="list-style-type: none"> Ensure people are supported through access to accurate information, assistance and 'rehabilitation' where required Improve emotional well-being especially through peer to peer support 	<ul style="list-style-type: none"> Use good practice and effective pathways to develop regional commissioning principles Ensure accurate, accessible and timely Information, Advice and Assistance through DEWIS and other means Work in partnership with third sector to identify new models to support rehabilitation process and supply of low vision tools. 	Adult Strategic Partnership					
Carers who need support	<ul style="list-style-type: none"> Support carers to care through flexible res- 	<ul style="list-style-type: none"> Coordination of consistent community 	Carers Board					

	<p>pite, access to accurate information, peer to peer support and effective care planning</p> <ul style="list-style-type: none"> • Improve well-being of young carers and young adult carers through an increased public understanding 	<p>based services such as community connectors/social prescribers to identify and support carers</p> <ul style="list-style-type: none"> ▪ Review of medical prompting to better support carers ▪ Accurate Information, Advice and Assistance through DEWIS and Five Ways to Wellbeing ▪ Review of and align third sector commissioning principles to support befriending for carers requiring support ▪ Ensure that the implementation of the care closer to home strategy increases the community level support for carers ▪ Consistent commissioning across health and social care to ensure equitable, region wide and effective models of carer support including flexible respite. 						
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<p>Violence against women domestic abuse and sexual violence</p>	<ul style="list-style-type: none"> • Provide earlier intervention and safeguarding arrangements to potential victims through 'Ask and Act' • Safeguard victims, including men, through effective partnership support 	<ul style="list-style-type: none"> ▪ Implementation of 'Ask and Act' as part of Welsh Government pilot. ▪ Strategic alignment with VAWDASV Board, needs assessment and strategic plan. 	<p>VAWDASV Board</p>	<p>Safe communities</p>	<p><u>Positive Places</u></p> <p>Support our most disadvantaged communities to be resilient, cohesive and enable them to help themselves</p>		<p>Ensuring people feel safe in their communities</p>	<p>Create safe, confident communities and promote community cohesion.</p>
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Common Term	Area Plan	Well-being Plan(s)				
		Blaenau Gwent	Caerphilly	Monmouthshire	Newport	Torfaen
National	Core Themes	Well-being Goals	Well-being Goals	Well-being Goals	Well-being Goals	Well-being Goals
Outcome Priority expressed in public speak	Outcomes Priority	<u>Well-being Objectives</u> Best Start Safe Communities Healthy lifestyles	<u>Well-being Objectives</u> Positive Start, People and Place	<u>Well-being Objectives</u> Best Start Demographic challenges	<u>Well-being Objectives</u> Good place to live Skills for work Empowered well-being Healthy/safe/resilient environments & Emerging Priorities	<u>Well-being Objectives</u> Best Start Healthy Lifestyles Mitigate poverty
Primary Action	High Level Action	What do we need to do next	High Level Action	Delivering the solution	What steps will we take (S,M, L)	What we will do short, medium and long term
Secondary Action	The HOW actions	What activity could look like				
Indicators	Success Measures				How will we measure success	

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Regional Area Plan Consultation Questionnaire

Social Services and Well-being Act

The regional Area Plan is required under the Social Services and Well-being Act and sets out the joint priorities and actions for health, social care and the third sector for the next 3-5 years. The priorities were identified through the regional Population Needs Assessment and sets out how partners needs to work together to improve outcomes for the population of 'Gwent'. The draft Area Plan does not contain all the actions required, as it will simply be too large, but focuses on priorities identified by citizens that require partnership working.

1. **Does the plan adequately reflect the shared ambition to create an integrated system of health, care and wellbeing across Gwent?**

YES

NO

Comment

2. **Does the plan deal with the challenges of integrating services, aligning financial planning arrangements and placing people at the heart of everything we do?**

YES

NO

Comment

3. **Are the measures of success clear?**

YES

NO

Comment

4. **What do you think the main challenges around delivery are?**

YES

NO

Comment

5. **What role will your organisation play in delivering the Plan and ensuring it remains a visible priority?**

YES

NO

Comment

6. **Does the Area Plan include reference to sufficient legislation, national strategies and support a vision of service delivery under the SSWB Act?**



Greater Gwent Health, Social Care &
Well-being Partnership
Partneriaeth Lles, Iechyd a Gofal
Cymdeithasol Gwent Fwyaf

YES

NO

Comment

7. Do you have any comments on the look of the document?

YES

NO

Comment

8. Do you have any further comments on the Area Plan?

YES

NO

Comment

Please return questionnaire to claire.selmer@torfaen.gov.uk by Friday 9th February.



HEALTH SOCIAL CARE & WELL-BEING SCRUTINY COMMITTEE - 6TH FEBRUARY 2018

SUBJECT: YEAR END PERFORMANCE REPORT FOR SOCIAL SERVICES

REPORT BY: CORPORATE DIRECTOR, SOCIAL SERVICES

1. PURPOSE OF REPORT

- 1.1 To provide Members with a performance update for Social Services. This involves taking a look back over the last twelve months of our performance highlighting the exceptions and then looking forward i.e. future challenges, setting out our key objectives/priorities for the next twelve months, identifying areas for improvement.

2. SUMMARY

- 2.1 Overall 2016/17 offered a positive year in terms of service performance. However, a number of future challenges have been identified, the greatest being the need to balance increasing demands and rising public expectations against reducing budgets. Whilst challenging, the service area is relatively well placed to respond to them.

3. LINKS TO STRATEGY

- 3.1 Statutory Guidance on the Role and Accountabilities of the Director of Social Services (Welsh Government, June 2009).
- 3.2 The Well-Being of Future Generations (Wales) Act 2015 places a number of legal duties on public bodies in Wales to meet the legally binding 'common purpose' for 7 national Well-being goals.

4. THE REPORT

- 4.1 A summary is provided for each service area of Social Services below.

4.2 Adult Services

4.2.1 Overview

The following table provides a summary of the key performance measures for Adult Services:-

Key PIs	2016/17		Comments
	Target	Result	
The percentage of adult protection enquiries completed within 7 days	90	92.46	Good performance
The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	6	2.86	Good performance maintained, this remains a priority
The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	28% Welsh average	25.42	It is not appropriate to set a target, as this is data linked to individual outcomes. Caerphilly's reablement is not a targeted model, we would look to maximise independence in all cases
The percentage of adults who completed a period of reablement and have NO package of care and support 6 months later	72.3% Welsh average	75.48	As above
The average length of time adults (aged 65 or over) are supported in residential care homes	800 days Welsh average	125.50	This is data, WG were unable to decide what good looked like. We would view this as positive in terms of keeping people in their own homes for as long as possible.
Average age of adults entering residential care homes	82.8 Welsh average	83.77	This is fact not a PI admission depends on individual assessment
The percentage of adults who have received advice and assistance from the information, advice and assistance service and have not contacted the service for 6 months	67.7% Welsh average	94.74	WG cannot advise what good looks like hence no target set, figure could be viewed positively or negatively in terms of people were given right advise and didn't return or returned because they knew where to come and actually come back with a different issue. Also this only records people who contact us by telephone and we are trying to increase use of web site etc.

4.2.2 What Went Well

- a) All registered services have been inspected by CSSIW, inspections were all unannounced.

All the reports for the above inspections were positive and although they identified areas for further development as opposed to areas of non-compliance, they all recognised the good progress being made across service areas. All reports are available to view on the Inspectorate web site <http://cssiw.org.uk/our-reports/?lang=en>

In addition Dementia Care Matters have audited two of our care homes in respect of Butterfly status which has been maintained.

CSSIW visited to find out more about our Adult safeguarding arrangements and concluded them to be robust.

A joint Inspection was undertaken between CSSIW and Health Inspectorate Wales (HIW) of Community Mental Health Services, overall feedback was positive and recognised we continue to work with our health colleagues to develop the services we provide to promote people's mental health and emotional well-being.

- b) During 2016/17, the Directorate received 193 Stage 1 complaints. 76 (39%) related to Adult Services The Directorate received 1 request for Adult Services to progress a complaint to Stage 2 formal investigation. The complaint consisted of 6 elements, 2 of which were upheld and 4 were not.
- c) Within Adult Services, where people require a face to face assessment from our Assessment Care Management Teams, we look to keep the person at the centre, developing outcome focused care plans which service providers can use to develop personal plans which reflect the individuals choices and preferences moving away from time and task based activities.

In our residential homes we have been working on individual service plans called "This is me". These plans are developed over time as staff get to know the residents and reflect the individual person.

- d) We continue to make use of our assessment beds which are located in Ty Clyd and Ty Iscoed residential homes. These beds help to prevent people going to hospital unnecessarily and enable them to be discharged in a timely manner.
- e) During the year we have focused on identifying and developing services for carers to support them in their caring role. We held a series of events during carers week, we listened to what carers told us, developed social media sites and focused on day events.
- f) We have increased the number of people who see themselves as carers by over 50% from 360 to 546 and we undertook an additional 82 carers assessments in 2016/17.
- g) We recognise that people don't want to be in hospital for any longer than necessary. We have therefore increased the number of domiciliary care providers on our framework to enable us to arrange more packages of care so people can be discharged home as soon as they are well enough.

The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over in the borough was 2.86% per 1000 population.

- h) The Council has 6 in house residential care homes all of which have adopted the Dementia Care Matters approach.

Two of our homes, Brodawel and Ty Iscoed, have achieved 'butterfly status' which is the nationally recognised mark of good practice.

All our homes are registered with CSSIW. All participated in a garden and Christmas decoration competitions and are championing the 'Pimp Up My Zimmer' campaign to reduce the number of falls that occur in long term care One home participated in the WAST pilot using the I stumble tool when people fall to determine if they need a paramedic. This was very successful and will be rolled out to all our homes in April 2018.

- i) In 2016/17, the Community Connectors received 322 referrals, 84% of which were resolved for people in terms of them being able to do “what matters to them”.

The Community Connectors have developed a database of activities taking place in local areas so they are able to signpost or take people to clubs and activities that interest them, such as ‘knit and natter’, art classes, craft groups, men’s sheds and luncheon clubs.

- j) Within Adult Services, we continued to recruit more carers to our Shared Lives Scheme to enable us to offer more choice and increase the number of placements we are able to offer in family homes to all client groups. We also made funding available to allow adaptations to people’s homes, such as ramps and showers to allow people to remain independent.
- k) We have been working with our partners to refresh of the Learning Disabilities Strategy as a result people clearly told us where they lived was very important to them. They wanted independence with some support. Taking on board this message we started the development of a series of flats in Ashfield Road which will enable people to have their own front door but with targeted support when needed. We hope people will be moving in in the new year.

4.2.3 Future Challenges/Risks & Areas for improvement

- a) Managing demand in terms of demographics and the increase in population particularly children coming through transition, increased number of older people and carers who are themselves older people. This will challenge us in terms of managing budgets for domiciliary care and long term placements.
- b) The increase in complexity of peoples needs means development of more bespoke services to meet outcomes whilst ensuring we embed the what matters conversation.
- c) Welsh Government drivers of integration and pooled budgets will require partnership working across Local Authorities and the Health Board to achieve good outcomes for the citizens of Caerphilly.
- d) Lack of capacity in the domiciliary care market is a key risk in terms of us being able to provide packages of care in a timely manner to meet people’s outcomes.
- e) WCCIS the new integrated care system needs to be embedded and developed to enable us to share information, and report accurately on performance.
- f) Given the pressure of the health services maintaining good performance in relation to discharging people safely from hospital remains a challenge and a priority in this time of austerity.

4.3 Children’s Services

4.3.1 Overview

The following table provides a summary of the key performance measures for Children’s Services: -

Key PIs	2016/17		Comments
	Target	Result	
The percentage of assessments completed for children within statutory timescales	90.8% Welsh average	95.12%	Above average performance
The percentage of children supported to remain living within their family at 31 March	69.2% Welsh average	72.90%	Above average performance and particularly significant in the context of the overall increase in demand
The percentage of looked after children returned home from care during the year	13.6% Welsh average	12.88%	
The percentage of re-registration of children on local authority Child Protection Registers (CPR)	6.3% Welsh average	5.05%	Reduction in the number of children's names placed on the child protection register
The average length of time for all children who were on the CPR during the year (days)	245 Welsh average	291.09	Individual case circumstances impact on this indicator and mean it is difficult to use comparators
Percentage of children achieving the core subject indicator at Key Stage 2	56.50% Welsh average	58.90%	Improved performance reported
Percentage of children achieving the core subject indicator at Key Stage 4	14.2% Welsh average	15.49%	Improved performance reported
The percentage of children seen by a registered dentist within 3 months of becoming looked after	59.4% Welsh average	43.86%	Negotiations with the Health Board are ongoing in relation to the commissioning of adequate dental services
The percentage of children looked after at 31 March who were registered with a GP within 10 working days of the start of their placement	91.7% Welsh average	100%	
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	12.7% Welsh average	11.11%	Increase in number of children moving schools in line with their care plan and educational needs and there has been an increase in the number of school age children Looked After.
The percentage of looked after children on 31 March who have had three or more placements during the year	9.8% Welsh average	12.60%	This reflects a small cohort of children and young people with extremely challenging behaviours resulting in multiple placement breakdowns.
The percentage of all care leavers who are in education, training or employment at 12 months after leaving care	52.4% Welsh average	65.96%	Above average performance
The percentage of all care leavers who are in education, training or employment at 24 months after leaving care	47.1% Welsh average	51.35%	Above average performance

The percentage of care leavers who have experienced homelessness during the year	10.6% Welsh average	11.30%	The reliance on the use of B&B accommodation and the overall number of nights has reduced significantly
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4.3.2 What Went Well

- a) Inspections undertaken by CSSIW in Children's Services during 2016/17 included:
- The National Review of Care Planning for Children and Young People subject to Public Law Outline Pre-proceedings. The fieldwork was completed in July 2016 and the National Report was published in December 2016.
 - Unannounced Inspection of Ty Ni completed in December 2016 and reported in January 2017.
All the reports for the above inspections were positive and although they identify areas for further development as opposed to areas of non compliance, they all recognise the good progress being made across the service areas. All reports are available on the Inspectorate web site
- b) During 2016/17, the Directorate received 193 Stage 1 complaints. 110 or 57% related to Children's Services. Of these, 2 complaints progressed to Stage 2. One was a historical complaint and was found to be upheld and the second was not upheld.
- c) A Gwent wide Attachment Trauma Service has been established in conjunction with ABUHB, offering advice, consultation and training to social work teams with the aim of supporting children and young people to remain living at home or remain in stable foster placements.
- d) Through the use of Welsh Government grant funding, a Clinical Psychologist has been appointed to the Team Around the Family (TAF) service called Supporting Family Change. Additional Welsh Government grant funding was announced during the year to expand 'edge of care' services and building on the already successful Immediate Response Team plans are in place to increase the team to include Senior Practitioners and a Clinical Psychologist.
- e) In addition, the Council approved an invest to save proposal to develop an Intensive Therapeutic Fostering Service in Caerphilly using the MIST model developed in Torfaen. The contract tender process was concluded in the spring and the service became fully operational from September. Caerphilly MIST is supporting the most challenging Looked After Children and young people to prevent placement breakdown and prevent the need for children to be placed in high cost residential provision outside the County Borough.
- f) Within the Council, responsibility for children's, adults and education safeguarding all lie within Children's Services. Although discrete service areas, they are all managed by one Service Manager and capacity and resilience has been improved as a result. Decisions are made on all referrals within 24 hours ensuring full compliance with statutory procedures.
- g) Child Sexual Exploitation (CSE), highlighted nationally through the Independent Inquiry into CSE in Rotherham (1997-2013), has continued to be a priority across Children's Services. We have established a lead role within the Independent Reviewing Officer's Team. This lead officer chairs all the strategy meetings in relation to CSE and oversees the completion of the SERAF assessments undertaken on children and young people deemed to be at risk of CSE.

- h) During 2016/17, a new trainee scheme called Progress has been implemented across the Council. Working in partnership with local Training Providers the scheme offers Looked After children and young people Leaving Care work experience opportunities which can lead to formal apprenticeships. Caerphilly has a proven track record of supporting young people into further and higher education and a number of Care Leavers have gained Degree's and a few have been supported to achieve Doctorates.
- i) A key priority for the Division is the recruitment of foster carers in order to meet the needs of children and young people. A radio recruitment campaign was commissioned earlier in the year which has already resulted in 8 additional assessments being undertaken.
- j) The workloads in Children's Services have increased significantly during 2016/17 particularly in cases involved in court proceedings resulting in increasing numbers of children becoming Looked After. This has put additional pressure on budgets and although we are working hard to prevent children coming into care we have to acknowledge the relationship between levels of poverty within the Borough and deprivation, abuse and neglect.
- k) Other key performance information includes the following:
 - 99% of initial Child Protection Conferences were carried out within statutory timescales
 - 99% of all Child Protection Reviews were carried out in timescale
 - 100% of children on the Child Protection Register have an allocated Social Worker
 - 100% of Looked After Children have an allocated Social Worker
 - Attendance levels for LAC in primary and secondary school are 96% and 92% respectively, well above the target set by the Council.
 - 100% of Looked After Children have a plan for permanence in place by the time of their second LAC Review (within 4 months of becoming Looked After).
 - 100% of young people Leaving Care have an allocated worker to support them and we keep in touch with 100% of our Care Leavers up to the age of 21 years.

4.3.3 Future Challenges/Risks & Areas for improvement

- a) Managing the increasing demand on services is a significant challenge. The number of Looked After Children in Caerphilly has increased by over 100 and the resultant placement costs means Children's Services are overspending. One individual court ordered placement has an annual cost of £858k alone.
- b) The increase of 100 LAC equates to the caseloads of at least four Social Workers and one Independent Reviewing Officer. Reports will be going to CMT and Cabinet in due course.
- c) Caerphilly's salary scales for Qualified Social Workers and Senior Practitioners are the lowest in the Gwent region and as a result Children's Services is struggling to recruit staff to an increasing number of vacancies particularly in the frontline Locality Teams. This position will need to be addressed in 2018.
- d) Similarly, the remuneration rates for Foster Carers in Caerphilly are the lowest in the region, and in the bottom quartile for Wales. Foster Carer Fees are being reviewed and a report will need to be presented to Cabinet in 2018. Foster Carer recruitment is a key priority for the Service but can be hampered by the level of remuneration.
- e) In response to one particularly challenging young person and the need for a highly specialised placement we are developing a bespoke provision within the Borough and this will become fully operational early in 2018/19.

- f) In response to consultation with young people Leaving Care, we propose to seek Cabinet and Council approval to exempt Care Leavers from Council Tax up to the age of 24 years in order to support them to achieve independence.

4.4 Public Protection

4.4.1 Overview

The following table provides a summary of the key performance measures for Public Protection: -

Key Pls	2016/17		Q2 2017/18	Comments
	Target	Result	Result	
Overall client satisfaction receipt of a very good survey result for Registrars	95.00%	96%	*	*Annual survey
Number of under age test purchases undertaken for Alcohol Purchases	50.00	35	15	Test purchase operations rely on a number of factors, notably authorisation under the Regulation of Investigatory Powers Act. The process is heavily controlled and must be supported by intelligence that the premises being tested has sold alcohol to children in the past. Approval is required from the Head of Service, scrutiny from Legal Services, and finally, approval from the Courts.
The percentage of high risk businesses that were liable to a programmed inspection that were inspected for Food Hygiene	100%	100%	93%	
The percentage of food establishments which are broadly compliant with food hygiene standards	85%	95%	94%	
The percentage of high risk businesses that were liable to a programmed inspection that were inspected for Health and Safety	100%	100%	91%	
The percentage of businesses that were liable to a programmed inspection that were inspected for the Pollution Prevention and Control Act 1999.	100%	100%	100%	

The percentage of high risk businesses that were liable to a programmed inspection or alternative inspection activity that were inspected or subject to alternative enforcement activity for Trading Standards.	100%	100%	100%	
The percentage of significant breaches that were rectified by intervention for Trading Standards.	100%	86%	73%	
The percentage of high risk businesses that were liable to a programmed inspection or alternative inspection activity that were inspected or subject to alternative enforcement activity for Animal Health	100%	86%	100%	
The percentage of significant breaches that were rectified by intervention for Animal Health.	100%	74%	91%	
Primary Free Meals Uptake %	70%	73%	70%	APSE bench marking data only exists for all meal uptake which includes free and paid meals the UK average is 49%. Combining Caerphilly results in these areas indicate we are performing at 52% uptake.
Primary Paid Meals Uptake %	32%	36%	32%	
Secondary Free Meals Uptake %	64%	65%	64%	The UK average for secondary free meal uptake is currently 66%.
Secondary Paid Meal Uptake %	45%	46%	45%	The UK average for secondary paid meal uptake is currently 44%.
Response rates to Pest and Straying Animal Control service requests.	99%	99.1%	95.8%	
Number of fixed penalty notices issued for litter.	No target	174	79	
Number of fixed penalty notices issued for Dog Fouling	No target.	48	13	
Number of prosecutions for fly tipping.	No target	7	2	
Total Number of Community Safety Wardens visits to hotspot locations within Caerphilly County Borough.	4400	6094	2296	

ASB Drop-off rate between strike 1 and 4 intervention stage of the ASB process	99%	99.71%	98.00%	Throughout 2016/17 the following number of interventions were carried out: Strike 1 – 354 Strike 2 – 96 Strike 3 – 41 Strike 4 – 1
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4.4.2 What Went Well

- a) The Caerphilly Registration Service is meeting statutory standards. Following the Caerphilly 2016/17 Annual Performance Report the Home Office Compliance Officer wrote:

“It is pleasing to note the high level of service achieved by the local authority during the past year. In particular, I note that you are exceeding the national targets for appointment waiting times and in the timely registration of births and deaths. Overall, this is an excellent achievement.”
- b) The CCTV service has maintained its National Security Inspectorate accreditation Silver Award and the Surveillance Camera Commissioner accreditation. Stakeholder feedback is obtained via the annual Privacy Impact Assessments and a public survey was carried out in summer 2016 in the main town centre areas of the county borough when 98% were in favour of monitoring continuing in their area.
- c) Our Catering Service benchmarking data highlights that we are above the National average for primary and secondary school meal uptake. We have achieved the Silver Investors In People award for Excellence and Estyn, WLGA and EHO inspection have highlighted good service levels achieved across all sectors.
- d) In 2016/17 the Street Trading Policy and Fitness Criteria for licensed drivers policies were reviewed and a new overarching policy for licensed drivers was introduced bringing all requirements into one specific document. The Licensing Service also worked in partnership with Gwent Police Safeguarding specialists offering free training to the taxi trade. This is now being expanded to cover licensed premises, late night takeaways, hotels and street traders. The customer satisfaction survey in 2016/17 concluded that 94 % of licensees were very or fairly satisfied with the overall level of service provided by Licensing and 90% felt that the officer that dealt with them was courteous, helpful and had good communication skills.
- e) During 2016/17 Trading Standards concluded investigations into illegal activities resulting in 21 cases being brought to Court. A total of £23,500 fines were imposed, costs awarded of £20,000 and, importantly, offenders were ordered to pay £10,000 compensation to their victims. In the more serious cases defendants were ordered to carry out 400 hours of unpaid work, had penalty points on their driving licences, and in one case, received a driving ban. Three other offenders narrowly escaped going to prison, between them getting a total of 18 months suspended prison sentences. Officers also assisted residents of the borough with consumer complaints about goods and services they had purchased to a value of £1.5 million. 97.5% of customers of the consumer advice and intervention service were either very or fairly satisfied with the service provided.
- f) In 2016/17 100% of inspections of high risk premises for Food Hygiene and for Food Standards were completed. There is only one national performance indicator for Food Hygiene and this is the percentage of broadly compliant premises; 95% of Caerphilly food businesses were broadly compliant in 2016/17, with Caerphilly sitting 8th in Wales. The Food Standards Agency audited the Caerphilly Food Law Enforcement

Services in January 2016, reporting in January 2017. The report identified six key strengths and four areas for improvement. An action plan was developed to address the areas for improvement which were actioned.

- g) We have expectations in respect of equalities and Welsh Language across our services. We are taking steps to establish language preference of our service users. Information packs and leaflets are also available in different languages. We have developed guidance leaflets in 7 languages to support Food Business Operators to comply with the law, for example. We have Welsh speakers available for all aspects of the Registration service as well as a British Sign Language support officer for hearing or speech impaired people. The Licensing service has engaged with the taxi trade via the new Taxi Newsletter on equality related issues highlighting wheel chair accessible vehicle requirements and providing advice on the transportation of assistance Dogs. A number of prosecutions have also been taken by Trading Standards against drivers that refused to take assistance dogs.
- h) As part of the ongoing initiative to raise awareness in areas identified as being of significant flood risk in the Council's Flood Risk Management Strategy and Plan, in collaboration with our partners in the Natural Resources Wales, Emergency Planning has undertaken a campaign of raising flood awareness in communities across the County Borough Area. The process involves making the public aware of the flood risk in their locality to enable them to understand the nature of the risk and for them to take personal ownership for their actions during a flood event. This work has already proved beneficial with Community Flood Groups established and plans produced for the communities of Ynysddu, Llanbradach and the Nant Twynyrharris area of Ystrad Mynach.

4.4.3 Future Challenges/Risks & Areas for improvement

- a) Inevitably financial pressures will feature in any consideration of future challenges impacting on staffing levels and diminishing resilience across the service. Priorities will need to be re-evaluated to determine our core purpose and stakeholder expectations carefully managed.
- b) A number of areas for improvement have been identified in relation to our use of ICT and digital solutions. A process is on-going to update the database in use across Public Protection which would greatly improve data collation, recording, sharing and analysis and communication across the Service, and enhance our mobile working capabilities. We are also commencing a pilot to introduce IT systems into our school kitchen sites. The CCTV service will be expanding use of the Public Sector Broadband Aggregation network in two further areas in order to save money on line rentals in future years. The CCTV service also intends introducing call recording into the control room for calls in 2018 which enables staff training and provides a record in cases of disputes and complaints.
- c) Other digital solutions are also being explored such as the digitalisation of or on line access to the Disclosure and Barring Service (DBS) checks undertaken by the Licensing Authority for the taxi and private hire trade. The speed at which the On-line process can be undertaken can significantly curtail processing time for applications, which will result in benefits for the licensing team but also importantly the licensed trade.
- d) It is important that officers and Members of the Licensing Committees who may have to investigate, hear and determine cases where there are Safeguarding and Child Sexual Exploitation concerns are equipped to protect public safety and further training is planned in relation to this. In the summer of 2017 the taxi trade were consulted on an overarching Vehicle Policy and vehicle conditions. The trade have been informed of the results in a taxi newsletter and a meeting will be arranged with them to discuss

the way forward early in 2018. Welsh Government are also consulting on future changes to "Taxi" licensing controls. The service needs to be aware of changes under consideration and likely timescales for implementation when considering changes to our existing conditions and policies.

- e) In terms of workforce planning our analysis has identified some issues in recruiting into some posts in the Catering Service and succession planning in the Trading Standards Service also requires consideration. Our ability to maintain sufficient staff coverage for the CCTV Control Room functions especially in times of staff sickness is also being reviewed.
- f) Delivering satisfactory air quality across the county borough will continue to be a challenge. In particular progressing the Air Quality Action Plan at Hafodyrynys is a priority and it is expected that Welsh Government will formalise their requirements for complying with the EU Air Quality Directive at this location.
- g) The Food Standards Agency's 'Regulating our Future' programme proposes fundamental changes to the way the food industry is regulated. Officers are currently actively engaged in stakeholder events and workstreams in an attempt to influence the way the regulatory landscape will look to ensure that the needs of Welsh consumers are a priority.

5. WELL-BEING OF FUTURE GENERATIONS

- 5.1 The Directorate makes a contribution across the 7 Well-being Goals in the Well-Being of Future Generations (Wales) Act 2015. Performance management is one of 7 core activities that are common to the corporate governance of public bodies where it is considered that applying the requirements of the Act is likely to most effectively secure the type of change required. The role of performance management is to enable progress to be tracked, analysed, and communicated. Applying the five ways of working (the sustainable development principle) contained within the Act we have begun to take a longer term approach in our business planning. We have moved to a 5 year service planning template recognising the need to balance dealing with short term pressures in the context of our priorities for the long term. In seeking and using service user feedback we aim to involve customers in service delivery.

6. EQUALITIES IMPLICATIONS

- 6.1 An Equalities Impact Assessment is not required as the report is for information.

7. FINANCIAL IMPLICATIONS

- 7.1 There are no financial implications to this report.

8. PERSONNEL IMPLICATIONS

- 8.1 There are no personnel implications to this report.

9. CONSULTATIONS

- 9.1 This report has been sent to the consultees listed below and all comments received are reflected in this report.

10. RECOMMENDATIONS

- 10.1 The Committee is asked to consider the content of the report and where appropriate question and challenge the performance presented.

11. REASONS FOR THE RECOMMENDATIONS

- 11.1 Performance Management Scrutiny affords members the opportunity to challenge, inform and shape the future performance of services.

12. STATUTORY POWER

- 12.1 Local Government Measure 2009.

Author: Dave Street, Corporate Director, Social Services
Jo Williams, Assistant Director, Adult Services
Gareth Jenkins, Assistant Director, Childrens Services
Rob Hartshorn, Head of Policy and Public Protection

Consultees: Cllr C. Cuss, Cabinet Member for Social Services
Cllr E. Stenner, Cabinet Member for Environment & Public Protection
Ros Roberts, Performance Manager

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HEALTH, SOCIAL CARE AND WELL BEING SCRUTINY COMMITTEE - 6TH FEBRUARY 2018

SUBJECT: BUDGET MONITORING REPORT (MONTH 9)

REPORT BY: CORPORATE DIRECTOR SOCIAL SERVICES

1. PURPOSE OF REPORT

- 1.1 To inform Members of projected revenue expenditure for the Social Services Directorate for the 2017/18 financial year.

2. SUMMARY

- 2.1 The report summarises the projected financial position for the Social Services Directorate for the 2017/18 financial year based on information available as at month 9 (December 2017). It identifies budget pressures relating to the delivery of frontline services particularly within Children's Services and highlights some potential issues that could lead to increased costs within Adult Services. Full details are attached at Appendix 1.

3. LINKS TO STRATEGY

- 3.1 The expenditure of the Directorate is linked directly to its ability to shape and deliver its strategic objectives, which in turn assists the achievement of the Authority's stated aims and well-being goals.
- 3.2 Effective financial planning and financial control contribute to the following Well-being Goals within the Well-being of Future Generations Act (Wales) 2015: -
- A prosperous Wales.
 - A resilient Wales.
 - A healthier Wales.
 - A more equal Wales.
 - A Wales of cohesive communities.
 - A Wales of vibrant culture and thriving Welsh Language.
 - A globally responsible Wales.

4. THE REPORT

4.1 Summarised Position

- 4.1.1 Since the month 5 position was reported to Members on 24th October 2017 the budget for the Education Safeguarding Team has been vired in to the Social Services budget to reflect a change in management responsibilities that took effect earlier in the year, with the Team now falling within the remit of the Assistant Director for Children's Services. A further budget

virement from Adult Services into Children Services has also been undertaken to enable a contribution to be made from the Children's Services budget towards the cost of autism services incurred within the Education Directorate. These virements have had the net effect of increasing the Directorate's budget by £124k as follows:-

Division	Original Budget (£000's)	Education Safe-guarding Team (£000's)	Autism Services (£000's)	Revised Budget (£000's)
Children's Services	21,318	124	15	21,457
Adult Services	57,087		(15)	57,072
Service Strategy & Business Support	2,594			2,594
Totals: -	80,999	139	0	81,123

4.1.2 The 2017/18 month 9 position is a projected Directorate overspend of £2.045m. This equates to an increase of £525k since month 5. While there have been a number movements in projected costs across the Directorate since month 5, it is the continuing increase in child care placement costs that is responsible for the overall increase. The position is summarised in the table below: -

Division	Revised Budget (£000's)	Projection/ Commitment (£000's)	Over/(Under) Spend (£000's)
Children's Services	21,457	24,371	2,914
Adult Services	57,072	56,323	(749)
Service Strategy & Business Support	2,594	2,474	(120)
Totals: -	81,123	83,168	2,045

4.2 Children's Services

4.2.1 The Children's Services Division is currently projected to overspend its budget by £2,914k as summarised in the following table: -

	Revised Budget (£000's)	Projection/ Commitment (£000's)	Over/(Under) Spend (£000's)
Management, Fieldwork & Administration	9,163	8,688	(474)
External Residential Care	2,398	5,337	2,939
Fostering & Adoption	7,293	7,776	483
Youth Offending	395	395	0
Families First	75	0	(75)
After Care Support	726	785	59
Other Costs	1,407	1,390	(17)
Totals: -	21,457	24,371	2,914

Management, Fieldwork and Administration

4.2.2 In response to the anticipated reductions in Welsh Government funding over the forthcoming financial years, a prudent approach to vacancy management has been adopted. This has led to a projected underspend of £474k against Management, Fieldwork and Administration posts within the Division. This underspend has increased by around £224k since month 5 largely through the maximisation of a specific grant aimed at edge of care services.

Child Care Placement Costs

4.2.3 An overall overspend of £3,422m is projected in respect of residential placements, fostering and adoption support. Members will be familiar with the circumstances that led to the projected overspend of £2,754 that was reported to the Health, Social Care and Wellbeing Scrutiny Committee on 24th October 2017. Since then, financial support for 4 children has ended but 12 new placements have been made with independent care providers resulting in a net increase in cost of £115k. A further increase of £197k has been experienced since month 5 as a result of the escalating needs of the cohort of children that were in placements when the month 5 position was reported to Members. A lack of suitable places has meant that it has not been possible to move certain individuals on to more cost effective placements as planned which has added a further £297k to the projected costs. The remaining increase in placement costs since month 5 can largely be attributed to one off costs incurred in adapting premises to make them suitable for foster care. Members will be aware from the report entitled “Looked after Children – Services Pressures” that was presented to the Scrutiny Committee on 24th October that similar pressures are being experienced across most Welsh local authorities.

Families First

4.2.4 The £75k underspend in respect of Families First is due to additional Welsh Government funding being made available to fund the core staff team.

Aftercare

4.2.5 An overspend of £59k is projected in respect of Aftercare Services and reflects the numbers of 16 to 18 year olds currently in receipt of leaving care services. However, there may be scope to fund this potential overspend from specific grant funding streams should further slippage against the grant aided schemes be identified in the remainder of the financial year.

Other Costs

4.2.6 The projected £17k underspend for ‘Other Costs’ is largely the result of a reduction in the numbers/cost of unaccompanied asylum seeking children supported by the Directorate.

4.3 **Adult Services**

4.3.1 The Adult Services Division is currently projected to underspend its revised budget by £749k as summarised in the following table: -

	Revised Budget (£000's)	Projection/ Commitment (£000's)	Over/(Under) Spend (£000's)
Management, Fieldwork & Administration	7,622	7,067	(555)
Own Residential Care and Supported Living	5,923	5,530	(393)
Own Day Care	4,344	4,151	(193)
Supported Employment	71	68	(3)
Aid and Adaptations	783	654	(129)
Gwent Frailty Programme	2,274	2,166	(108)
Supporting People	0	556	556
Care Packages	35,342	35,547	205
Other Costs	713	584	(129)
Totals: -	57,072	56,323	(749)

Management, Fieldwork and Administration

4.3.2 The £555k underspend in Management, Fieldwork and Administration can be attributed to a prudent approach to vacancy management.

Own Residential Care and Supported Living

- 4.3.3 The £393k underspend in this area includes around £85k in respect of Clos Tir y Pwll Supported Living Home. This home is currently under occupied and staffing levels have been adjusted as a result. A Further £101k of this underspend can be attributable to staffing vacancies at Min y Mynydd and Beatrice Webb Residential Homes for Older People. A review of staff rotas has enabled these vacancies to be held for an extended period with no detriment to service provision and will help the Division meet its Medium Term Financial Plan savings targets. The remainder of this underspend is due to increased contributions from residents towards the cost of their care at residential homes for older people.

Own Day Care

- 4.3.4 Around £81k of the underspend of £193k within our own day care services is due to temporary staffing vacancies within the Mental Health Community Support Team. The remainder of this underspend can be attributed to a prudent approach to vacancy management which will help the Division meet its Medium Term Financial Plan savings targets.

Aids and Adaptations

- 4.3.5 The £129k underspend is due to a repayment from the Gwent Wide Integrated Community Equipment Service (GWICES) in respect of unspent funding from 2016/17.

Gwent Frailty Programme

- 4.3.6 Underspending across the Gwent Frailty Programme largely resulting from short term vacancies is likely to result in a £108k reduction in the contribution required from Caerphilly Social Services.

Supporting People

- 4.3.7 Demand for services linked to homelessness, mental health issues, substance misuse and floating support arrangements has continued to grow throughout the financial year while Welsh Government grant funding has remained at the 2016/17 level. This has contributed to a potential overspend of £556k. In response to this, the Supporting People Team has commenced a review of the financial support provided to service users in supported living accommodation. Currently, financial support is awarded on a two tier system but it is felt that a move to individual assessments of support needs for these service users could result in significant savings against the Supporting People budget and eradicate the overspend for future years. The initial impact of this will be to shift the financial burden to the wider adult services budget for care packages. However, it is felt that this burden can be reduced by a review of the care provided in these supported living settings to reflect the changing needs of the service users on their journey to greater independence.

Costs of Care Packages

- 4.3.8 An overall overspend of £205k is projected for 2017/18 in respect of packages of care commissioned through the independent sector or through the in-house Home Assistance and Reablement Team as demonstrated in the table below:-

	Revised Budget (£000's)	Projection/ Commitment (£000's)	Over/(Under) Spend (£000's)
External Residential Care	13,567	13,489	(78)
External Day Care	1,163	1,245	82
Home Assistance and Reablement (excl. Frailty)	10,981	11,196	215
Other Domiciliary Care	11,224	11,538	314
Additional Social Care Workforce Costs	0	239	239
Social Care Workforce Grant	(573)	(1,140)	(567)
Resettlement Grant	(1,020)	(1,020)	0
Totals: -	35,342	35,547	205

4.3.9 The gross cost of care packages for adults has increased by £1,865k since the budget was set. Of this, increase, £567k is due to the measures agreed in response to the release of a second tranche of Welsh Government Social Care Workforce Grant targeted at tackling workforce issues. The remaining increase in the gross cost of care packages of £1,298k can be attributed to the increasing demand for services experienced throughout 2017/18.

4.3.10 The increase in gross costs has been further offset by an increase of £1,093k in contributions from service users towards the cost of their care, resulting in a projected net overspend of £205k in respect of care packages for adults. Approximately £600k of this increase in contributions can be attributed to the increased demand for services and a further £180k is due to increases in the average assessed charge payable by individual service users. While, these increases can be anticipated to continue in future financial years, the remaining £313k of the additional contributions forecast in 2017/18 mostly relates to unusual levels of deferred property debt settled in 2017/18 which cannot be relied upon in future years. It should be noted that there has been a significant increase in the number of placements made to long term care for 17/18 the cost of which has been off set by the income from deferred property sales.

Other Costs

4.3.11 An underspend of £129k is predicted against other Adult Services budgets. Around £88k of this can be attributed to the maximisation of specific grant funding with the remainder largely due to a review of voluntary sector contracts which will help the Division meet its Medium Term Financial Plan savings targets.

4.4 Service Strategy & Business Support

4.4.1 This service area is currently projected to underspend by £120k as summarised in the following table: -

	Revised Budget (£000's)	Projection/ Commitment (£000's)	Over/(Under) Spend (£000's)
Management and Administration	1,178	1,085	(93)
Office Accommodation	467	430	(37)
Office Expenses	169	169	0
Other Costs	780	790	10
Totals: -	2,594	2,474	(120)

4.4.2 The underspend of £93k in respect of management and administration includes a £58k underspend resulting from vacancy savings and salary spinal point savings and a further £35k underspend resulting from the dissolution of the South East Wales Shared IT Service. Until October 2017, this service had provided IT support to the 5 local authorities in South East Wales that were using the SWIFT database for recording social care activity. These local authorities are in the process of migrating to the Welsh Community Care Information System (WCCIS) so support for the SWIFT database is no longer required.

4.4.3 The relocation of a number of teams within the directorate has added a further underspend of around £37k.

4.4.4 These underspends have been partially offset by a number of one off costs associated with preparing for the implementation of WCCIS resulting in a net underspend of £120k for Service Strategy and Business Support.

5. WELL-BEING OF FUTURE GENERATIONS

- 5.1 Effective financial management is a key element in ensuring that the Well-being Goals within the Well-being of Future Generations Act (Wales) 2015 are met.

6. EQUALITIES IMPLICATIONS

- 6.1 This report is for information purposes, so the Council's Equalities Impact Assessment process does not need to be applied.

7. FINANCIAL IMPLICATIONS

- 7.1 As detailed throughout the report.

8. PERSONNEL IMPLICATIONS

- 8.1 There are no direct personnel implications arising from this report.

9. CONSULTATIONS

- 9.1 There are no consultation responses that have not been reflected in this report.

10. RECOMMENDATIONS

- 10.1 Members are asked to note the reasons for the projected overspend of £2,045k against the Directorate's budget for 2017/18.

11. REASONS FOR THE RECOMMENDATIONS

- 11.1 To ensure Members are apprised of the latest financial position of the Directorate.

12. STATUTORY POWER

- 12.1 Local Government Act 1972 and 2000.

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Stephen Harris (Interim Head of Corporate Finance)

Appendices:
Appendix 1 - Social Services 2017/18 Budget Monitoring Report (Month 9)

APPENDIX 1 – Social Services 2017/18 Budget Monitoring Report (Month 5)

	Revised Budget 2017/18 £	Projection £	Over/(Under) Spend £
SUMMARY			
CHILDREN'S SERVICES	21,457,151	24,371,796	2,914,645
ADULT SERVICES	57,072,510	56,323,016	(749,494)
RESOURCING AND PERFORMANCE	2,593,436	2,473,753	(119,683)
SOCIAL SERVICES TOTAL	81,123,097	83,168,566	2,045,469
CHILDREN'S SERVICES			
Management, Fieldwork and Administration			
Children's Management, Fieldwork and Administration	9,313,762	8,822,971	(490,791)
Intermediate Care Fund Contribution	(150,842)	(134,825)	16,017
Sub Total	9,162,920	8,688,145	(474,775)
External Residential Care Including Secure Accommodation			
Gross Cost of Placements	2,538,598	5,550,718	3,012,120
Contributions from Education	(139,961)	(213,682)	(73,721)
Contributions from Health	0	0	0
Sub Total	2,398,637	5,337,036	2,938,399
Fostering and Adoption			
Gross Cost of Placements	6,296,803	6,750,652	453,849
Other Fostering Costs	109,361	130,529	21,168
Adoption Allowances	141,349	121,288	(20,061)
Other Adoption Costs	352,348	352,348	0
Professional Fees Inc. Legal Fees	392,891	421,116	28,225
Sub Total	7,292,752	7,775,933	483,181
Youth Offending			
Youth Offending Team	395,152	395,152	0
Sub Total	395,152	395,152	0
Families First			
Families First Team	237,365	185,584	(51,781)
Other Families First Contracts	2,584,694	2,561,613	(23,081)
Grant Income	(2,747,197)	(2,747,197)	0
Sub Total	74,862	0	(74,862)
Other Costs			
Equipment and Adaptations	32,129	42,862	10,733
Preventative and Support - (Section 17 & Childminding)	72,536	72,538	2
Local Safeguarding Children Board	70,000	70,000	0
Appropriation from Specific Reserve	(70,000)	(70,000)	0
Aftercare	726,124	785,102	58,978
Respite Care	223,425	209,639	(13,786)
Agreements with Voluntary Organisations	1,086,116	1,087,741	1,625
Other	(7,502)	(22,351)	(14,849)
Sub Total	2,132,828	2,175,530	42,702
TOTAL CHILDREN'S SERVICES	21,457,151	24,371,796	2,914,645

	Revised Budget 2017/18 £	Projection £	Over/(Under) Spend £
ADULT SERVICES			
Management, Fieldwork and Administration			
Management	122,175	130,185	8,010
Protection of Vulnerable Adults	187,782	212,411	24,629
OLA and Client Income from Client Finances	(190,314)	(277,268)	(86,954)
Commissioning	620,962	624,360	3,398
Section 28a Income Joint Commissioning Post	(17,175)	(17,175)	0
Older People	2,396,896	2,168,725	(228,171)
Practice Based Social Work	0	481,371	481,371
ICF Funding	0	(253,069)	(253,069)
Contribution from ABUHB	0	(150,000)	(150,000)
Less Wanless Income	(44,747)	(44,747)	0
Physical Disabilities	1,563,101	1,642,008	78,907
Provider Services	379,515	392,424	12,909
ICF Funding	0	(132,275)	(132,275)
Learning Disabilities	770,893	726,409	(44,484)
Contribution from Health and Other Partners	(39,928)	(40,311)	(383)
Mental Health	1,341,698	1,256,090	(85,608)
Section 28a Income Assertive Outreach	(94,769)	(94,769)	0
Drug & Alcohol Services	343,020	366,450	23,430
Further Vacancy Savings	0	(172,552)	(172,552)
Additional Leave accrued from additional hours	22,515	0	(22,515)
Emergency Duty Team	260,113	248,848	(11,265)
Sub Total	7,621,737	7,067,116	(554,621)
Own Residential Care			
Residential Homes for the Elderly	6,380,656	6,209,123	(171,533)
Intermediate Care Fund Contribution	(97,387)	(105,109)	(7,722)
-Less Client Contributions	(2,158,311)	(2,358,663)	(200,352)
-Less Section 28a Income (Ty Iscoed)	(115,350)	(115,350)	0
-Less Inter-Authority Income	(40,000)	(10,020)	29,980
Net Cost	3,969,608	3,619,980	(349,628)
Accommodation for People with Learning Disabilities	2,326,048	2,282,197	(43,851)
-Less Client Contributions	(63,437)	(63,437)	0
-Less Contribution from Supporting People	(79,386)	(79,386)	0
-Less Inter-Authority Income	(230,000)	(230,000)	0
Net Cost	1,953,225	1,909,374	(43,851)
Sub Total	5,922,833	5,529,355	(393,478)
External Residential Care			
Long Term Placements			
Older People	9,156,223	9,184,890	28,667
Less Wanless Income	(303,428)	(303,428)	0
Less Section 28a Income - Allt yr yn	(151,063)	(151,063)	0
Physically Disabled	510,608	387,075	(123,533)
Learning Disabilities	3,141,902	3,105,893	(36,009)
Mental Health	851,894	904,591	52,697
Substance Misuse Placements	57,747	57,747	0
Net Cost	13,263,883	13,185,705	(78,178)

	Revised Budget 2017/18 £	Projection £	Over/(Under) Spend £
Short Term Placements			
Older People	207,404	207,404	0
Carers Respite Arrangements	0	180,005	180,005
Carers Respite Grant	0	(180,005)	(180,005)
Physical Disabilities	40,342	40,342	0
Learning Disabilities	15,945	15,945	0
Mental Health	39,562	39,562	0
Net Cost	303,253	303,253	0
Sub Total	13,567,136	13,488,958	(78,178)
Own Day Care			
Older People	885,531	808,982	(76,549)
-Less Attendance Contributions	(16,869)	(30,000)	(13,131)
Learning Disabilities	2,954,253	2,915,638	(38,615)
-Less Attendance Contributions	(20,691)	(20,691)	0
-Less Inter-Authority Income	(45,523)	(30,395)	15,128
Mental Health	668,960	588,361	(80,599)
-Less Section 28a Income (Pentrebane Street)	(81,366)	(81,366)	0
Sub Total	4,344,295	4,150,530	(193,765)
External Day Care			
Elderly	5,245	1,281	(3,964)
Physically Disabled	203,811	160,250	(43,561)
Learning Disabilities	959,423	1,119,566	160,143
Section 28a Income	(72,659)	(72,659)	0
Mental Health	66,854	36,320	(30,534)
Sub Total	1,162,674	1,244,758	82,084
Supported Employment			
Mental Health	71,672	68,088	(3,584)
Sub Total	71,672	68,088	(3,584)
Aids and Adaptations			
Disability Living Equipment	531,241	405,644	(125,597)
Adaptations	241,342	241,342	0
Chronically Sick and Disabled Telephones	10,214	6,998	(3,216)
Sub Total	782,797	653,984	(128,813)
Home Assistance and Reablement			
Home Assistance and Reablement Team			
Home Assistance and Reablement Team (H.A.R.T.)	3,280,011	3,702,018	422,007
Wanless Funding	(67,959)	(67,959)	0
Independent Sector Domiciliary Care			
Elderly	6,212,593	6,177,643	(34,950)
Physical Disabilities	972,734	794,965	(177,769)
Learning Disabilities (excluding Resettlement)	287,420	315,921	28,501
Community Living	0	(205)	(205)
Mental Health	296,163	273,337	(22,826)
Gwent Frailty Programme	2,273,886	2,165,993	(107,893)
Sub Total	13,254,848	13,361,713	106,865

	Revised Budget 2017/18 £	Projection £	Over/(Under) Spend £
Other Domiciliary Care			
Supported Living			
Adult Placement Scheme	992,971	994,058	1,087
-Less Contribution from Supporting People	(132,252)	(136,284)	(4,032)
Net Cost	860,719	857,774	(2,945)
Supported Living			
Older People	49,853	49,048	(805)
-Less Contribution from Supporting People	0	0	0
Physical Disabilities	1,039,535	1,408,905	369,370
-Less Contribution from Supporting People	(53,447)	(47,450)	5,997
Learning Disabilities	7,348,699	7,869,765	521,066
Less Section 28a Income Joint Tenancy	(28,987)	(28,987)	0
-Less Contribution from Supporting People	(769,870)	(762,147)	7,723
Mental Health	2,408,208	1,898,147	(510,061)
-Less Contribution from Supporting People	(27,219)	(27,219)	0
Net Cost	9,966,772	10,360,062	393,290
Direct Payment			
Elderly People	123,633	175,050	51,417
Physical Disabilities	546,695	558,452	11,757
Learning Disabilities	481,821	504,652	22,831
Section 28a Income Learning Disabilities	(20,808)	(20,808)	0
Mental Health	3,633	1,995	(1,638)
Net Cost	1,134,974	1,219,342	84,368
Other			
Sitting Service	322,391	287,536	(34,855)
Extra Care Sheltered Housing	563,751	526,964	(36,787)
-Less Contribution from Supporting People	(13,842)	(13,265)	577
Net Cost	872,300	801,235	(71,065)
Total Home Care Client Contributions	(1,610,092)	(1,699,858)	(89,766)
Sub Total	11,224,673	11,538,554	313,881
Resettlement			
External Funding			
Section 28a Income	(1,020,410)	(1,020,410)	0
Sub Total	(1,020,410)	(1,020,410)	0

	Revised Budget 2017/18 £	Projection £	Over/(Under) Spend £
Supporting People (including transfers to Housing)			
People Over 55 Years of Age	820,759	887,877	67,118
People with Physical and/or Sensory Disabilities	55,731	64,993	9,262
People with Learning Disabilities	107,036	152,440	45,404
People with Mental Health issues	781,730	895,671	113,941
Families Supported People	501,952	533,562	31,610
Generic Floating support to prevent homelessness	852,638	931,265	78,627
Young People with support needs (16-24)	902,781	973,441	70,660
Single people with Support Needs (25-54)	377,556	420,141	42,585
Women experiencing Domestic Abuse	434,953	452,768	17,815
People with Substance Misuse Issues	265,908	296,145	30,237
Alarm Services (including in sheltered/extra care)	2,703	2,280	(423)
People with Criminal Offending History	39,551	39,281	(270)
Contribution to Independent Sector Supported Living	698,088	673,699	(24,389)
Contribution to In-House Supported Living	79,386	79,386	0
Contribution to Resettlement	152,448	163,117	10,669
Contribution to Adult Placement	132,252	136,284	4,032
Contribution to Extra Care	13,842	13,265	(577)
Contribution to Telecare	83,476	83,476	0
Newport CC funding transfer	(70,000)	(70,000)	0
Less supporting people grant	(6,232,790)	(6,172,790)	60,000
Sub Total	0	556,302	556,302
Other Costs			
Telecare Gross Cost	577,348	596,160	18,812
Less Client and Agency Income	(353,985)	(353,985)	0
-Less Contribution from Supporting People	(83,476)	(83,476)	(0)
Agreements with Voluntary Organisations			
Elderly	230,462	230,462	0
Physically Disabled	13,414	12,433	(981)
Learning Difficulties	113,067	60,904	(52,163)
Section 28a Income	(52,020)	(52,020)	0
Mental Health & Substance Misuse	138,364	136,149	(2,215)
MH Capacity Act / Deprivation of Libert Safeguards	72,809	73,064	255
Other	52,797	52,797	0
Wales Independent Living Expenditure	0	921,802	921,802
Wales Independent Living Grant	0	(1,009,909)	(1,009,909)
Gwent Enhanced Dementia Care Expenditure	284,167	279,692	(4,475)
Gwent Enhanced Dementia Care Grant	(209,692)	(210,506)	(814)
Intermediate Care Fund Contribution	(70,000)	(69,186)	814
Sub Total	713,255	584,381	(128,874)
Social Care Pressures			
Balance of Workforce Grant	0	239,718	239,718
Welsh Government Grant	(573,000)	(1,140,030)	(567,030)
Sub Total	(573,000)	(900,312)	(327,312)
TOTAL ADULT SERVICES	57,072,510	56,323,016	(749,494)

	Revised Budget 2017/18 £	Projection £	Over/(Under) Spend £
<u>SERVICE STRATEGY AND BUSINESS SUPPORT</u>			
Management and Administration			
Policy Development and Strategy	193,026	193,415	389
Business Support	914,605	856,542	(58,063)
Performance Management Consortium	70,659	34,805	(35,854)
Sub Total	1,178,290	1,084,762	(93,528)
Office Accommodation			
All Offices	562,962	521,415	(41,547)
Less Office Accommodation Recharge to HRA	(95,613)	(90,899)	4,715
Sub Total	467,349	430,517	(36,832)
Office Expenses			
All Offices	168,383	168,738	355
Sub Total	168,383	168,738	355
Other Costs			
Training	254,450	297,271	42,821
Publicity/Marketing/Complaints	23,217	23,217	0
Staff Support/Protection	59,295	5,788	(53,507)
Information Technology	10,967	36,232	25,265
Management Fees for Consortia	(55,558)	(55,558)	0
Insurances	252,510	248,254	(4,256)
Other Costs	234,533	234,533	0
Sub Total	779,414	789,737	10,323
TOTAL RESOURCING AND PERFORMANCE	2,593,436	2,473,753	(119,683)