Complete Agenda THE CABINET

GWYNEDD COUNCIL

DATE	Tuesday, 25th September, 2018
TIME	1.00 pm
LOCATION	Siambr Hywel Dda, Council Offices, Caernarfon, Gwynedd, LL55
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GWYNEDD COUNCIL CABINET MEMBERS

Members
Dyfrig L. Siencyn
Dafydd Meurig
Craig ab lago
Gareth Wyn Griffith
Nia Wyn Jeffreys
Peredur Jenkins
Feledul Jelikilis
Dilwyn Morgan
W. Gareth Roberts
Gareth Thomas
loan Thomas

AGENDA

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Agenda Item 5 **GWYNEDD COUNCIL CABINET**

Date of meeting:	25 September, 2018
Cabinet Member:	Councillor Gareth Roberts
Contact Officer:	Morwena Edwards, Corporate Director
Contact Telephone Number:	01286 679 468
Title of Item:	Performance Report of the Adults, Health and Well- being Department

Report to the Cabinet

1. INTRODUCTION

- 1.1 The purpose of this report is to update my fellow members on what has happened in the areas within my remit as Cabinet Member for Adults, Health and Well-being. This includes outlining the latest developments against pledges within the Strategic Plan; where we have reached with the performance measures; and the latest in terms of plans for savings and cuts.
- 1.2 I would remind you that all matters have already been the subject of discussions and have been scrutinised at meetings of the Departmental Management Team.
- 1.3 On the whole, I am comfortable with the performance of the Adults, Health and Well-being Department in relation to the services under my responsibilities.



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2. THE DECISION SOUGHT

2.1 To accept and note the information in the report.

3. THE REASON FOR THE NEED FOR A DECISION

3.1 In order to ensure effective performance management.

4. **APPRAISAL OF THE DEPARTMENT'S PERFORMANCE**

- 4.1 We are on an ambitious and challenging journey, however, the successes of recent years demonstrate the ability we have to develop health and care services which are suitable for the future. By now, 'did we do what matters' is a message that filters through all of the Department's services.
- 4.2 We can see that the 'What Matters' measure is performing well but as these measures are new, it is not easy to compare performance against past years. Nevertheless, we have been focusing on understanding the reasons that have prevented us from achieving what matters to individuals, and attempting to remove these obstacles where possible. I can see a marked change in the desire and eagerness within teams and managers to remove these obstacles that prevent us from achieving what matters to people. Consequently, we look at performance from the perspective of the people.

5. **THE DEPARTMENT'S PRIORITIES**

- 5.1 The Members will be aware that the Council has prioritised improvement plans within the Council's Plan. The Adults, Health and Well-being Department is leading on three projects, namely:-
 - Re-designing Care Services
 - Community Resilience
 - The Workforce and Recruitment within the Care Field
- 5.2 Detailed action plans will be prepared over the coming months and I will be in a position to inform you of proposed milestones for each project in my next report.
- 5.3 The purpose of the **Re-designing Care Services Project** is to ensure that we work in a way that focuses on what matters to people who receive health and care services by trialling new and innovative ways of working.
- 5.4 You will be aware that the five Area Teams have been established and the Department is now reporting that the Teams are experiencing stability and have begun identifying specific priorities within each area. These teams use the measure 'Did we do What Matters' when visiting individuals for the first time and then throughout their journey through the care and health system. Although this measure is reporting that **100% of people are reporting that we are achieving what matters to them**, there is a need to exercise caution as this measure is in a developmental stage and the managers wish to do more work on it. The data being collected is not yet complete, and it does not reflect the obstacles that are being seen. A Task Group has been established to carry out the work of ensuring

that the data is more complete and that we are reporting correctly. I will review this measure with the department on a regular basis.

- 5.5 Of course, the information behind the measure is the most important element and the Department is striving to collect the stories where we have not succeeded to achieve 'what matters'.
- 5.6 The greatest obstacles being reported to the Area Teams is the lack of provision to achieve what matters to those with very intensive conditions. The role of the community connectors are central to this and they are a very important resource so that the team can identify what is available within communities. I trust that this obstacle will become less apparent as the teams further develop their understanding of what is available within communities and as the specialist roles, such as community connectors, develop.
- 5.7 What we are able to achieve within the scope of this project is very limited without the necessary collaboration that needs to happen with the Health Board. On the ground, the Older People Area Teams and the Learning Disabilities Services are reporting on very close collaboration with Health and this is very encouraging. The introduction of the Care and Health Integrated Group (West) just established under the governing arrangements of the Public Services Board is a huge step forward and is an opportunity for us to build on the relationship on every level but also an opportunity to jointly identify and resolve obstacles. It appears that an element of frustration is being experienced in the ability of some managers to make decisions, without receiving high level permission within their organisation and this will be discussed soon with the Area Director in an attempt to ascertain how we can improve staff's ability to easily progress matters.
- 5.8 The Learning Disabilities Service is continuing with their modernisation programme. The main vision of the service is to create opportunities for disabled people to live full lives and enjoy opportunities and relationships within their communities. The service has managed to attract investment from Welsh Government to develop three additional hubs that offer opportunities and activities to our users.
- 5.9 Although Gwynedd Council is leading and is the catalyst of the commencement of the hubs, the Department is eager for our community partners and the third sector to develop the hubs and take ownership of arranging what happens within their own communities.
- 5.10 The Learning Disabilities Service continues to measure 'What matters' with the **performance of the year at 98%.** The service has been working on adapting this measure in order to ensure that we report comprehensively. We now better review outcomes and focus on knowing the story behind what matters to individuals.
- 5.11 The purpose of the Community Resilience project is to build on the strengths within our communities and attempt to co-produce a full range of preventative support to make it easier for people to continue living independently in their communities.
- 5.12 The culture change required to ensure that we focus our efforts on the preventative interventions that exist within our communities is one of the greatest challenges associated with this project and the role of the Information, Advice and Support service is essential to move forward and challenge the culture. One of the service's greatest challenges is to ensure that Information, Advice and Support is a part of the Teams' day-to-day work and that it is not a service that is only provided by the 'front door'.

- 5.13 The main obstacle to enabling this is the capacity within our teams, our understanding of what is available within our communities and of course, the way that we ourselves act. Obviously, there is an obvious correlation between the success of this project and the success of the Department's other projects, and although the Adults, Health and Well-being Department is leading this project, the contribution of all Council departments, our partners and the third sector all play a core role. Initial conversations have taken place to take joint-ownership in order to move this project forward.
- 5.14 I will discuss the measure of **The rate of delayed transfers of care for social care** reasons per 1,000 population aged 75 or over (PMA/19) in the context of this project.

FinancialYr	QtrFinYr	SCA001_YM	SCA001_Gwynedd	SCA001_Conwy	SCA001_Dinbych	SCA001_Fflint	SCA001_Wrexham	SCA001_Wales▼	SCA001_BCUHB
2017-2018	Qtr4 2017-2018	1.99	1.03		0.20	0.47	1.64	1.02	0.79
	Qtr3 2017-2018	1.72	1.35	0.14		0.55	0.27	0.97	0.61
	Qtr2 2017-2018	1.59	1.90	0.14	0.20	0.32	0.73	0.86	0.76
	Qtr1 2017-2018	1.33	0.71	0.07	0.10	0.63	0.73	0.78	0.54
	Total	6.63	4.99	0.34	0.50	1.97	3.36	3.62	2.70
2018-2019	Qtr1 2018-2019	2.39	1.74	0.14	0.20	0.71	2.45	1.17	1.17
	Qtr2 2018-2019	1.06	0.87	0.07	0.10	0.24	0.55	0.41	0.44
	Total	3.45	2.62	0.20	0.30	0.95	3.00	1.58	1.61
Total		10.08	7.61	0.54	0.80	2.92	6.36	5.20	4.31
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- 5.15 You will see that the performance has deteriorated although some work is continuing to ensure the accuracy of the background data of the measure. Nevertheless, a part of this project (Community Resilience) is to ensure that sufficient preventative services are available within our communities in an attempt to prevent people, e.g. from being admitted to hospital in the first place. Although we do not wish to see a drop in the performance against the measure, we have to be careful that we do not move away from achieving what matters to the individual, by being driven to achieve against this measure in isolation. Our aim should be to prevent people from being admitted to hospital in the first place, and to maintain people within our communities and create resilient communities. Of course, this is a part of the huge culture change that is needed and is in progress.
- 5.16 Work is also taking place to improve people's experience when transferring from hospital back into the community. Our vision for the future is to strengthen our community teams in order to improve our ability to respond and give support as people transfer from hospital to the community.
- 5.17 The purpose of the Workforce and Recruitment within the Care Field project is to ensure that we genuinely understand the recruitment problem in the care field in Gwynedd.
- 5.18 A lot is happening within the project with various plans attempting to address different aspects in an attempt to better understand the problem. You will be aware of the Domiciliary Care project that has been operational in Bethesda which is attempting to address the problem within the domiciliary care field.
- 5.19 A piece of work has also been commissioned to improve our understanding and identify main messages in terms of the older people field and a session has been arranged in September to improve members' understanding of the recruitment challenges that exist and ascertain their views and opinion on future opportunities.
- 5.20 In addition, the Area Teams are conducting a joint-exercise with our partners to gather information about cases in one specific area. The team will scrutinise cases

in detail in order to better understand the need within one small area. Then, conclusions can be reached on possible solutions.

6. **PERFORMANCE**

- 6.1 As I have already noted, I am comfortable with the Department's performance measures, although some work is still needed to ensure that the measures of a developmental nature are complete and correct.
- 6.2 You will be aware that Penisarwaun Residential Home recently closed at shortnotice. The Council worked closely with residents and their families and the Health Board to relocate residents and support them within the new settings. 20 residents were located in new homes and the Department's workers attended daily to support the new Homes. Employment was offered in nearby homes to the employees of Penisarwaun Home. Obviously, the closure of this home now means that there are fewer residential beds available in Gwynedd and this will certainly prove an additional challenge in the future. In addition, our efforts to recruit for the new provision at Llys Cadfan have not been successful and we are continuing to hold discussions and work with the Health Board in order to respond to the situation.
- 6.3 Work has taken place to develop the Department's Safeguarding measures. The Safeguarding Hub is now operational and its aim is to promote the safeguarding status of adults. The Hub's measures are suggesting a robust performance with the **percentage of the adult safeguarding referrals completed during the year, where the risk has been controlled at 100%**. During the period, three individuals have refused intervention and so **the percentage of child protection reviews to be held within the statutory timetable during the year is 96%**. To those who refuse intervention, the Department continues to offer support to the individuals and their families.
- 6.4 The safeguarding unit reports that the nature of referrals have changed and that more referrals relate to risks associated with drugs and alcohol, as well as Domestic Violence. During the performance challenging meeting, we discussed that the Unit needs to do more work to identify whether or not the correct interventions are available to respond to this change and identify any gaps and future needs. I will update you on the findings.
- 6.5 The Measures of the National Questionnaire have been published and I am of the opinion that Gwynedd's performance compares well against the performance of Wales. We sent out 1500 questionnaires and approximately 500 people responded. The findings give us an idea as to whether or not we are on the right path but I feel that the use of face-to-face contact is much more effective if we are to ascertain the views of our residents.
- 6.6 Work is ongoing to implement the 'Together for Mental Health' strategy jointly with our key partners. Very good progress has been made, and Gwynedd is a full partner in the discussions to transform Mental Health services for the future, in order to ensure improved access to preventative services and place more emphasis on mental well-being for people of all ages.

7. FINANCIAL/SAVINGS SITUATION

7.1 Although it was not possible to confirm that various individual plans have been realised in accordance with whet had been anticipated in April as part of the

process of closing the 2017/18 accounts, the Department has made progress and is showing that it is moving the challenging agenda forward. This report has been prepared before a review of the budgets of the first five months of the 2018/19 financial year has been completed to confirm the situation.

- 7.2 It is also too early in the year to be able to confirm the expected progress towards realising these years' plans but the Department is continues to be confident that the work to realise them on time is in progress, mainly due to the expansion of modern arrangements of responding to the needs of Gwynedd's residents.
- 7.3 Although the department has been relatively successful over the past years in managing its budget, maybe there is a need to bear in mind that we have received external funding above what had been anticipated which has undoubtedly been of assistance. Considering the increasing demand on the service, it is obvious that there is a need to continue the effort of transformation across the Department to ensure that the remaining savings in the different fields are realised in accordance with what was anticipated.

8. NEXT STEPS AND TIMETABLE

8.1 None to note

9. ANY CONSULTATIONS UNDERTAKEN PRIOR TO RECOMMENDING THE DECISION

9.1 **Views of the Statutory Officers:**

i. Monitoring Officer:

No Comments in terms of propriety.

ii. Head of Finance Department:

The Cabinet is already aware of the expectation that the work being undertaken within the Adults, Health and Well-being Department to transform services will contribute to meeting the savings required in 2018/19 as well as any savings plans that have slipped from previous years. Whilst the report states that it is too early at this stage to be able to quantify progress, I can assure the Cabinet that the Cabinet Member for Finance will present detailed updates on the revenue and capital budgets as well as an overview of savings to the Cabinet meeting on 16 October.

9.2. Views of the Local Member:

9.2.1 Not a local matter.

9.3. **Results of Any Consultation**:

9.3.1 None to note.

Appendix 1 Performance Measures

National Performance Indicator

Summary of national performance indicator with trends over time

Date	Indicator	Worth	Status	Target	Wales	Against Wales	Trends
31/08/2018	The percentage of safeguarding adults referrals that have been made during the year where the risk has been managed	100.0	+2.04%	98.0			$\bigwedge \bigvee \bigwedge$
31/08/2018	The percentage of safeguarding adults referrals that have been made during the year where the risk has been managed – excluding those that declined	100.0	+1.01%	99.0			
31/08/2018	The percentage of adult protection enquiries completed within statutory timescales	96.0	+2.13%	94.0	80.00	+20.00%	
31/07/2018 T	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	51.5			67.70	-23.86%	
හි1/07/2018 ල	The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	7.8	+57.27	5.0	4.74	+65.57%	
ठ्ठो/07/2018	The average length of time older people (aged 65 or over) are supported in residential care homes	856.0			800.80	+6.89%	\sim
31/07/2018	Average age of adults entering residential care homes	85.2			82.80	+2.91%	
31/07/2018	The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	55.7			82.80	32.72%	
31/07/2018	The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	19.0			28.00	-32.27%	

Questionaire Indicators

Date	Metric Name	Current Value	Trends since last year	Gwerth Blaenorol	Wales	Second KPI Status	Sparklines
31/03/2018	Carers reporting they feel supported to continue in their caring role	70.49	-20.71%	88.90	88.90	-20.71%	
31/03/2018	Carers reporting they felt involved in designing the care and support plan for the person that they care for	71.23	-21.14%	90.32	80.40	-11.41%	
31/03/2018	People happy with the care and support they received	88.84	2.86%	91.46	85.20	+4.27%	
31/03/2018	People confirming "I could communicate in my chosen language"	94.50	-1.26%	95.71	95.90	-1.46%	
31/03/2018	People reporting they knew who to contact in regards to their care and support	86.50	+1.78%	84.99	83.20	+3.97%	
31/03/2018 D	People reporting they have received the right information or advice when they needed it	83.84	+0.79%	83.18	80.20	+4.54%	
ເອັ້າ/03/2018 ອີ	People reporting that they live in a home that supports their best interests	90.10	+1.18%	89.05	85.90	+4.89%	
-34/03/2018 - 1	People reporting they chose to live in a residential care home	69.39	-2.34%	71.05	71.80	-3.36%	
31/03/2018	People reporting that they are happy with their support from family, friends and neighbours	88.13	-0.14%	88.25	85.20	+3.44%	
31/03/2018	People reporting that they have taken active part in	79.87	-3.15%	82.47	79.70	+0.21%	
31/03/2018	People reporting that they feel safe	84.57	+9.61%	77.10	78.10	+8.21%	
31/03/2018	People reporting they were treated with dignity and respect	95.29	-0.16%	95.44	93.30	+2.13%	
31/03/2018	People reporting they can do what matters to them	58.15	+7.09%	54.30	51.40	+13.13%	
31/03/2018	People reporting that they feel a part of their community	65.75	+2.26%	64.30	58.30	+12.78%	

OED23 – WE DID WHAT MATTERED – ADULTS

Date	2017-18	2018-19	Total
GW – Adult Team Alltwen (Central)	100.0%	100.0%	100.0%
GW – Adult Team Bangor	100.0%	100.0%	100.0%
GW – Adult Tim Caernarfon	100.0%	100.0%	100.0%
GW – Adult Team South Meirionnydd	100.0%	100.0%	100.0%
GW – Adult Team Llyn	97.6%	100%	97.9%
Total	99.0%	100%	99.3%

OED24 – WE DID WHAT MATTERED – LEARNING DISABILITY

Date	2017-18	2018-19	Total
Learning Disability	97%	98.4%	97.5%
Total	97%	98.4%	97.5%

SAFEGUARDING AND QUALITY INDICATORS

Date	Indicator	Worth	Status	Target	Previous Period	Comparison to the previous	Trends
31/08/2018	The percentage of safeguarding adults referrals that have been made during the year where the risk has been managed	100.0	+2.04%	98.0	90.32	+10.72	
31/08/2018	The percentage of safeguarding adults referrals that have been made during the year where the risk has been managed – excluding those that declined	100.0	+1.01%	99.0	93.30	+7.18%	
31/08/2018	The percentage of adult protection enquiries completed within statutory timescales	96.0	+2.13%	94.0	100.00	-4.00%	

Agenda Item 6

GWYNEDD COUNCIL

Report to the Cabinet

Date of Meeting:	25 September, 2018
Cabinet Member:	Councillor Dilwyn Morgan Cabinet Member for Children and Young People
Contact Officer:	Morwena Edwards, Corporate Director
Contact Telephone Number:	01286 679468
Title of Item:	Children and Supporting Families Performance Report

1. INTRODUCTION

- 1.1. The purpose of this report is to update you on the performance of the field I am responsible for as the Cabinet Member for Children and Young People. This will include outlining the latest with the pledges in the Strategic Plan; where the performance measures have reached; and the latest in terms of the savings and cuts schemes.
- 1.2 I will remind you that all matters have already been the subject of discussions and have been scrutinised at meetings of the relevant management team, which also included a representation from the scrutiny committee.
- 1.3 On the whole, I am satisfied with the performance of most projects and measures for which I am responsible.



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2. THE DECISION SOUGHT

2.1. To accept and note the information in the report.

3. REASONS FOR RECOMMENDING THE DECISION

3.1. In order to ensure effective performance management and that we respond proactively to the need to achieve efficiency savings as expected.

4. APPRAISAL OF THE DEPARTMENT'S PERFORMANCE

- 4.1. I can confirm that general practice and performance in the field of Children is on the whole, robust. This was confirmed in a Full Inspection Report by the Care Inspectorate Wales on 28 August 2018. The Inspector noted that 'the Gwynedd children's services had significant strengths and they had a committed and strong workforce'.
- 4.2 The Inspectorate identified four areas for further development, and these areas are in-keeping with the priorities that are already within the Council's improvement Plan, and they have been identified within performance reports that I have submitted to the Cabinet in the past.
- 4.3 In addition, the Department's Performance Measures at the end of Quarter one demonstrates that practice continues to be strong and no performance issues require urgent attention.
- 4.4 In terms of matters that need further attention, work has been undertaken to review the 'end to end' scheme. The number of residential placements have reduced in accordance with the original expectations; nevertheless, the inspection had not taken the substantial increase in placement costs into consideration. The outlook for the financial situation to the end of the 2018/19 financial year suggests that the Department will overspend substantially. I can confirm that this increasing cost of providing placements contribute substantially to the overspend.

5. THE DEPARTMENT'S PRIORITIES

5.1 As I have already noted, the fields for development that the Inspectorate identified are in-keeping with three improvement plans within the Council Plan 2018-23. The Cabinet is aware that the three projects led by the Children and Supporting Families is the Supporting Families Strategy, Tackling Poverty and Corporate Parenting.

5.2 Supporting Families Strategy The purpose of the Strategy is to develop services within the Council and with partners that are far more integrated, focusing our interventions on the early identification of needs, targeting families correctly, and providing services that reduce the need for more serious interventions.

5.3 I can confirm that the Department has an initial work programme in place. Over the initial period of the project, the Department has collaborated to update needs assessments, and analyse them to local levels for the Gwynedd population assessment. Further work has taken place to identify the demand for support for families across the Council departments and our partners' services, in addition to mapping out which provisions are already available to support Families across Gwynedd. This work will improve our understanding of the current situation.

- 5.4 In terms of the next steps, the Department, jointly with other departments across the Council, will hold a workshop to come to an agreement on what the 'Gwynedd Supporting Families Strategy' means and to set basic principles for the strategy. Once we have this agreement, we will discuss further with our key partners such as the police, health and the third sector, by presenting the vision to the Public Services Board.
- 5.5 I am confident that the initial discussion within the Council will have taken place with our key partners by the next reporting cycle.

5.6 **Tackling Poverty**

The purpose of this project is to review our arrangements in the field of Poverty in order to ensure that we are targeting our efforts where it will make the most difference.

- 5.7 This project is an extension to a project that existed within the previous Council Plan. As the timetable for introducing Universal Credit in the County has slipped, it was determined to keep this project live up to the end of March 2019 in order to continue to support people to cope with changes in the field of welfare and benefits.
- 5.8 During this period, work has continued to train the front line workforce and elected members in order to improve the awareness and preparation for the Universal Credit changes. 'Pennywise' events have been held with our partners in order to raise awareness of financial inclusion with service users. Universal Credit will become active in Gwynedd in December 2018.
- 5.9 The main successes of this project in its entirety is that the number of families that have raised their income levels has increased, and that interventions to respond to people's poverty needs have become mainstream interventions provided by front line staff.
- 5.10 During the next period, there will be a need to come to an agreement on the way forward with this project. There is a clear correlation between this project and the supporting families strategy, and a decision will be required on whether two separate projects are required, or to combine elements of both. I will hold discussions with my fellow members.

5.11 The Corporate Parenting Strategy The purpose of this project is to improve the opportunities for looked after children in all aspects of their lives.

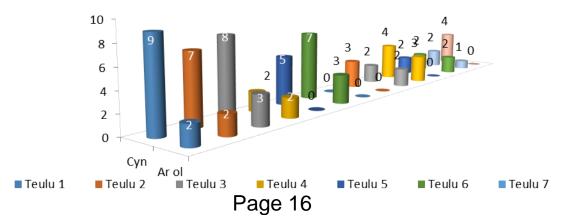
- 5.12 It was encouraging to see that the Care Inspectorate Wales described the Corporate Parent Panel as 'ambitious for the looked after children'. Considerable work has taken place during the period to attempt to identify where we need to improve and identify good practice through the task groups that have already been established.
- 5.13 Five Task Groups have been established to look at different aspects of a looked after child's life, including health and welfare, education, safeguarding, becoming

an adult and making a positive contribution. All of the task groups have scrutinised their contribution to the fields in detail in order to ascertain whether we make a positive difference to those in our care.

- 5.14 A report of recommendations will be submitted at the next meeting of the Corporate Parent Panel and I will be in a position to report further on this in my next report. I am aware that some task groups, such as Education and Health, will develop more meaningful measures, and I look forward to presenting some to you.
- 5.15 For example, the Children and Supporting Families Department and the Education Department have a collective agreement to remove the measure of SCC/024 Percentage of looked after children during the year who have a Personal Education Plan within 20 school days of being admitted to care or joining a new school during the year ending 31 March and to develop a measure that the children and school services see as valuable and which focuses on quality rather than following a process. I look forward to giving you an update.

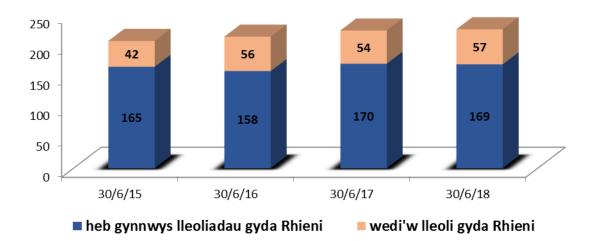
6. **PERFORMANCE**

- 6.1 In terms of the Department's Performance, the measures suggest a strong performance in practice and safeguarding. The measures demonstrating some deterioration since the previous quarter have been scrutinised in detail by the Department's Management Team, and during the Department's performance challenge meeting. I can confirm that there is a reasonable explanation for any deterioration.
- 6.2 Welsh Government no longer collects the SOGS Measure for **Flying Start** and we are awaiting further guidance to ascertain which measure will be used in future. Nevertheless, I would like to see the Unit developing a more local measure.
- 6.3 The **Team Around the Family** went through a recommissioning process at the end of the financial year, and have reformed. There are now three Area Teams within Gwynedd. The measure continues to demonstrate a satisfactory performance by the Team.
- 6.4 There is now a performance pattern of nearly three years for the **Edge of Care Team** which demonstrates a realistic, but also a very positive, performance. At the end of Quarter 1, a **74% reduction was seen in the obvious factors prior to intervention**. This demonstrates that the team's intervention has a positive impact on reducing risk factors that existed at the beginning of the intervention.



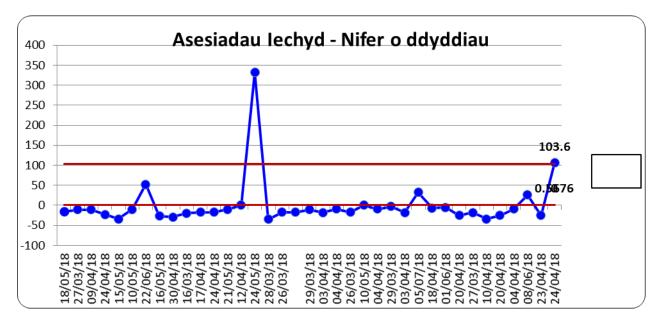
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- 6.5 The **Referrals Team** still responds promptly to referrals, although the team is going through a period of change, with **93% of assessments being completed within the statutory timetable.** Since April 2018, the service has developed one front door for receiving statutory and preventative referrals. The information, advice and support service is now operational within the department, and an officer from the Team around the Family has joined the service and responds to referrals and mapping fields of need, and referring people to preventative services in the community.
- 6.6 More work is needed in order to develop the information, advice and support service, and the department has a work programme in place to respond to the Inspection's recommendations. The availability of preventative services and effective referrals to organisations in the third sector is a field that is being developed, and it will be addressed as part of our Supporting Families Strategy.
- 6.7 The performance measures involving the Statutory Teams demonstrate strong performance. The measure of SCC/015 Percentage of initial core group meetings that should have been held during the year that were held within 10 working days of the child protection conference show some deterioration (73%). Nevertheless, the circumstances have been scrutinised in detail and the explanation, in the opinion of the Head of Department and I, is reasonable.
- 6.8 639 children (0-18 years old) were open to the Arfon, Dwyfor, Meirionnydd, 16+ and Derwen children teams at the end of June. Of these, 92 children were on the child protection register and 226 were looked after children. Of the 226, 57 children were placed with their parents. In 2015, 20% of looked after children had been placed with their parents. At the end of the same period in 2018, 25% were placed with their parents.



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6.9 Performance against the measure of SCC39, the percentage of health assessments for Looked After Children undertaken during the year is 65%. This means that 15 children had not received their assessment within the timetable. Work has been undertaken to identify the barriers that exist in the system, and the Health Task Group of the Corporate Parent Panel has been addressing this issue.



7. FINANCIAL/SAVINGS SITUATION

- 7.1 As you are aware, a report was submitted to the Cabinet entitled "Improving Benefits by Transforming Children Services" in January 2014. This report anticipated that as much as £3m could be saved by reducing the number of looked after children and reviewing the residential provision.
- 7.2 Work has been undertaken to review the situation in line with the requirement. This work, which is coming to an end, has confirmed that the number of nights the children are being looked after has reduced during the period, more or less in accordance with the projections. However, the cost per unit has increased. It is important that I note that this increase was not considered within the original projections for the cost per unit, or the change in profile and the complexity of cases.
- 7.3 A report will be submitted to the Cabinet soon to explain in detail what has really happened compared to what had been anticipated, and the implications of this on the profile of future savings.
- 7.4 The timing of this meeting has meant that it is premature to be able to confirm the outlook of the financial situation up to the end of the 2018/19 financial year. However, based on the work that has been carried out so far, on the review for the first five months of the year, it is anticipated that the Department will overspend substantially. Expensive placements and the increasing demand has contributed towards this overspend.

8. NEXT STEPS AND TIMETABLE

- 8.1. None to note.
- 9. ANY CONSULTATIONS UNDERTAKEN PRIOR TO RECOMMENDING THE DECISION

9.1. Views of the Statutory Officers:

i. Monitoring Officer:

No Comments in terms of propriety

ii. Head of Finance Department:

I can confirm that the financial aspects described in the report by the Cabinet Member for Children and Young People is an accurate reflection of the situation. The Children and Family Support Department continues to face significant financial challenges, and these matters will receive detailed and appropriate attention when the Cabinet Member for Finance presents his budgetary reviews to the Cabinet in due course.

9.2. Views of the Local Member:

Not a local matter.

9.3. Results of Any Consultation:

None to note.

Appendices:

Appendix 1 Performance Measures

Ref.	Achievement Measure	2014-15	2015-16	2016-17	2017-18	Quarter 1
Children and S	Supporting Families Department					
TTG01	The percentage of cases that have shown an increase in line with the purpose of the intervention	-	-	65%	68%	78%
TTG02	The percentage of cases where a reduction is shown in the obvious factors prior to the team's intervention	-	-	79%	70%	74%
SCC/024	The percentage of looked after children during the year who have a Personal Education Plan within 20 school days of entering care or joining a new school during the year	82.1%	37.9%	64%	17.5%	-
SCC/025	The percentage of statutory visits to looked after children that were supposed to be held during the year that were held in accordance with the regulations.	89%	86.9%	90%	91%	93%
SCC/041 (a)	The percentage of eligible, relevant and previously relevant children that have pathway plans as required	100%	100%	100%		99%
SCC/039	The percentage of health assessments for Looked After Children undertaken during the year	56%	60%	68%	65%	65%
SCC/041(b)	The percentage of eligible, relevant and previously relevant children that have been allocated a personal advisor	100%	100%	100%		100%
SCC021	The percentage of reviews of looked after children held within the statutory timetable during the year.	93.8%	90.8%	91%	89%	85%
Lles PMG 2	Clear pathway plan has been agreed for looked after children	100%	100%	100%		99%
PMG 11	The percentage of looked after children, discussed at a review, where the Independent Review Officer was of the opinion that they did not continue to be at risk of significant harm at their current location	-	89%	91%	95%	96%
PMG 12	The percentage of looked after children, discussed at a review, where the Independent Review Officer was of the opinion that the current location had ensured stability for the child	-	90%	95%	95%	99%
PMG 13	The percentage of looked after children, which was discussed in a review where the Independent Review Officer was of the opinion that the health and well-being of the child has received appropriate attention in the Care Plan	-	90%	94%	95%	99%
PMG 14	The percentage of looked after children, discussed at a review, where the Independent Review Officer was of the opinion that the child's Care Plan was ambitious for the child (as though he/she were our own child)	-	91%	94%	94%	94%
Diogelu 1	The rate of children who were discussed in supervision, where significant harm had been considered	100%	100%	100%	100%	100%

APPENDIX 1 – Children and Supporting Families Measures

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Diogelu 2	The percentage of risk assessments submitted to a Case Conference which were considered as exhibiting quality in decision making	98%	97%	94%	96%	99%
CSP - local	The percentage of families who have reported 'progress' after receiving a service from the TAF (Team Around the Family)	-	25.3%	95%	92%	83%
SCC021	The percentage of reviews of looked after children held within the statutory timetable during the year.	93.8%	90.8%	91%	89%	85%
PMC32	The percentage of looked after children on 31 March, who have experienced moving school once or more during their period or periods of receiving care and if that move was not because of transition arrangements in the 12 months up to 31 March.	16.10%	18.1%	17.7%		60%