

Neath Port Talbot CBC Social Services Annual Report 2010-2011

Delivering Sustainable Social Services

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Neath Port Talbot County Borough Council Social Services Annual Report 2010-2011

Delivering Sustainable Social Services

Introduction

This is the second annual report that Directors of Social Services are required to produce on the performance and plans for improvement of the whole range of social services functions. This report reflects on progress in delivering the priorities set out in the 2009-10 annual report for 2010-11, our performance for that year, and maps out the key areas for development and improvement in 2011-12.

This annual report is the culmination of the Annual Council Reporting Framework (ACRF) for social services which has replaced both the Joint Review and the annual performance evaluation processes. It will enable the Care and Social Services Inspectorate Wales (CSSIW) to set out its inspection and review plans for the Authority. The format of the report is a matter for each Council, but it must report on performance and risk and set out plan for improvement in relation to:

- Getting help
- Services provided
- The effect on people's lives
- Shaping services
- Delivering social services
- Providing direction

Social services' core function is to protect and support vulnerable children, families and adults and it is an essential part of local government's responsibilities for promoting well being, social inclusion and community safety.

The ACRF process and annual report provides us with an opportunity to reflect on what we are doing to make a difference to the lives of the most vulnerable citizens of Neath Port Talbot, and to clarify the future challenges and strategic direction we will need to take. During 2010-11 there have been a number of national developments which will be key in helping shape our response to meeting need in future years, alongside an increasingly challenging financial

context for public services. From Vision to Action produced by the Independent Commission on Social Services in Wales in November 2010 and the subsequent Welsh Government response Sustainable Social Services: A Framework for Action have set the strategic direction for social services over the next decade.

It is the intention that this will provide the basis to tackle the major resource and financial pressures that we are experiencing despite increased demand for services and more complex needs being presented. As a council we continue to be well positioned to respond to these challenges though recognising that the change agenda to modernise our services and processes will remain unrelenting.

We start from a sound base of good service quality demonstrated by our highly committed and professional staff – at all levels and all roles within the organisation. Our relationships with partners, including commissioned services, and service users and carers will continue to be paramount, and we recognise the importance of effective communication and collaboration with all those who have an interest in supporting and safeguarding vulnerable people within the County Borough.

Anthony Clements
Director of Social Services, Health and Housing



Context

Neath Port Talbot County Borough covers an area which is largely urban with two main populations of Port Talbot and Neath, and with significant rural communities in the valley areas. We have a population of over 137,000.

In 2001 99% of the County Borough's population were from a white background. Across Wales the percentage of the population from a white background was 98%. In 2009 the percentage of our population from a non-white background increased to 2.4% compared to a 4.2% increase from comparable authorities and 3.6% for Wales.

We have an above average overall level of deprivation. We have 19% of our local areas in the most 10% deprived in Wales. Similarly, 19% of our children live in areas that are amongst the top 10% most deprived in Wales, compared to 12% across Wales and 11% across comparable authorities. In contrast, we have a lower percentage of children living in overcrowded housing than both Wales and the comparable authorities.

The proportion of benefit claimants amongst people of working age is also higher in the County Borough than the proportion across comparable authorities. Despite these deprivation levels, the total rate of crime recorded is lower than the Welsh average.

32% of people report they have a long term limiting illness, compared to 27% across Wales.

In terms of demand for services, we have a higher rate of social care clients 0-17 and aged 18-64 than both the comparable authorities and Wales.

The Council's prioritisation of spend on social care provision fell from 15% in 2008-09 to 7% for 2009-10, though still higher than the comparable authorities at 4%. The rate of child social care users is, at 49.7 per 1,000 aged 0-17, higher than Wales at 39.5 and the comparable authorities rate of 39.8. For 2009-10, the number of looked after children was, following a sharp rise in 2009-10, considerably higher than both the Welsh LA average and the comparable authorities average.

We have a rate of 17 service users aged between 18 and 64, compared to the comparable authorities' rate of 14.5 and Wales at 15.3. We have 55% of our social care clients aged 65 and over, compared to 57% across the comparable authorities and 60% for Wales.

Of the 1415 adult service users in 2009-10, 91% were supported in the community, and although this was an increase on 2008-09 it compares to 94% for both the comparable authorities and Wales. Of the 3480 social care clients aged 65+ we helped 81% to continue to live independently, compared to 82% in the comparable authorities. The total number of service users in this age group receiving community based services has fallen below the Welsh average, though remains higher than the comparable authorities.

Further performance data in relation to specific service user groups is included in the relevant section.

Overview

This year has seen a number of significant service change decisions and developments which are beginning to transform services, alongside continued resource pressures.

The Council has embarked on selecting a partner to initially run its current residential and respite care homes for older people and then to undertake a replacement programme over the next four years, to both provide modern facilities and alternative sheltered and extra care provision. A fundamental review of the in-house home care service has been undertaken realising a projected recurring £1million savings. A systems review in conjunction with the Health Board is underway focussing on intermediate care and related services, so that we maximise the benefits to the service user of integrated working. The systems work within children and young people services has led to a new integrated school based model of support to children and families.

Demands upon services have continued to be challenging across both children and family services and adult services. Corporate reserves have again been required to offset these pressures though some indications of a slow down in resource demand are evident. Staffing, placement and legal cost pressures have been the most significant within children and young people services, though the rise in the looked after children population has been reduced from an unprecedented 34% increase in 2009-10 to a 4.4% increase in 10-11. Within adult services, although the out turn position was within the budget guideline this was only achieved through the stringent management of the older and disabled person placement budget as well as delivering a range of under spends elsewhere in the service. Unfortunately this has led to high delayed transfers of care for social care reasons, especially during the early winter months. Despite failing to agree any anticipated joint packages of care with the Health Board, the budget position within learning disability services improved during the year as care packages were reviewed and efficiencies achieved.

For 2011-12 further additional resources have been needed to meet both full year costs and new demands on all the placement budgets across social services, address staffing pressures in children and young people services and other related costs as a result of the high numbers of looked after children. Efficiency savings of £4.2 million have also been made, however, as part of the Forward Financial Plan targets and to particularly offset loss of Welsh Government (WG) grant income.

Other corporate transformation programme changes have and will continue to have important implications for social services. Within the Directorate, the

transfer of the housing stock to Neath Port Talbot Homes has meant an internal restructuring with a new Head of Community Care and Housing Services being established to cover both the community care responsibilities and the strategic housing, homelessness and adaptation grant and area renewal functions remaining with the Council. It will be vital that the excellent working relationships between management and frontline staff across social services and housing are maintained as NPT Homes becomes fully established as a new independent organisation.

The implementation of the workforce strategy across the Council has been a major factor in delivering the budget for 2011-12 and in demonstrating effective working relationships between Members, management, the trade unions and staff. Changes to premium rates of pay, mileage rates and a one year 2% pay reduction for most staff have all contributed to savings within social services. The implementation of the new sickness management arrangements is also making an important contribution to delivering service efficiencies and helping ensure the sustainability of key in-house services. The Home Care service piloted these arrangements within the Directorate and a 34% reduction of sickness has been achieved with an anticipated £200,000 savings for 2011-12.

At a national level, the report of the Social Services Independent Commission Vision for Action and the ensuing WG White Paper Sustainable Social Services: A Framework for Action have set the direction for social services in Wales for the next ten years. The role of the statutory Director of Social Services has been reaffirmed along with the pivotal role of social services within local government. Both documents acknowledge the positive progress made by social services across Wales though recognise that because of increasing and more complex demand that current models of service are not sustainable. It is encouraging that the findings emanating from our transformation programme and systems thinking work is in line with those being expressed in these documents. The need to focus on outcomes rather than processes, especially for social work practice, the importance of a reablement culture and the strong focus on partnership, collaboration and integration all resonate with the findings of our local transformational work.

The White Paper and other related consultative documents from WG provide a national, regional and local framework for local government action, service commissioning and delivery. Collaboration with other councils and the Health Board will continue to evolve and strengthen, though the focus on delivering change to service models at a local level will remain the most significant factor in sustaining service quality, providing the right response to the needs of service users and in responding to an increasingly challenging financial base for public services.

Progress on Priorities for 2010-11

Unlike last year, this annual report provides an opportunity to systematically assess progress against those priorities within the previous annual report:

Priority

Ensure robust and ongoing arrangements are in place to manage service budgets and that steps are taken to address areas of potential overspend as a consequence of service demand

Progress

As already indicated service and budget pressures continued into 2010-11, although increases in demand within children and young people services in particular significantly slowed. Regular monitoring and reporting of these pressures were made both through corporate senior management and senior Member arrangements, as well as the established political scrutiny processes. There was Cabinet approval of the steps undertaken within community care services to manage the pressing demands upon older and disabled people services and support to alternative ways to address the staffing cost pressures within children and young people services which was the main factor for the over spend in this service area. 2011-12 will see the appointment of a pool of peripatetic staff to cover for staff absences and vacancies instead of the current reliance on agency staff to meet these staffing shortfalls.

By the final quarter of the year put in place new service models, systems and quality assurance measures following the completion of the children and young people service systems thinking review

Cabinet have approved a new integrated service model based in key secondary schools across the County Borough, following its implementation in two schools as part of the systems review. With new service measures and processes introduced to correspond with the ethos of the team in seeking to intervene and support children and families earlier when difficulties become apparent. Work will take place throughout 2011-12 to fully establish the teams in the proposed schools once accommodation issues are resolved. Educational Welfare Officer and Health Visitor capacity across the teams has also been confirmed.

By mid-year, there will be a Safeguarding Children Board strategic business manager in post who can further progress and monitor performance across agencies in relation to children's safeguarding

The manager was appointed in November 2010 together with a new safeguarding Principal Officer. Although not yet published, it is anticipated that the recent CSSIW inspection of local safeguarding arrangements will be positive about the impact of these changes.

Agree, by the summer, the strategic service options for improving residential care services and progress a plan of implementation in accordance with agreed timescales

Council agreed in June 2010 that a new partner would be sought to initially run and then modernise the current council residential and respite care homes for older people along with a new supported housing facility in the Upper Afan Valley. An action plan to achieve this has been drawn up and implementation of the tendering process is within the timescales set out.

Agree the business case for bringing together the community integrated care and HEAT services by the end of the financial year, for implementation in 2011

Given the withdrawal by WG of key funding streams for both these service areas for 2011-12, the initial focus has been to consolidate these services in line with the funding deficits. More thorough systems thinking style of demand and flow analysis is being undertaken to ensure that integration opportunities are maximised and achieve the best benefits for service users. The recent Social Services Improvement Agency commissioned report Better Support at Lower Cost by John Bolton will also help influence the future service model as well as the current NHS Primary and Community Strategic Service Framework.

Agree the balance, capacity and scope of the in-house and independent home care services by the end of the summer as part of the TOPS services at home project, to ensure that TOPS strategic outcomes are delivered within the expectations of the forward financial plan and contribute to delayed transfers of care

Cabinet agreed the recommendations of the independently commissioned strategic business case for the in-house home care services in June 2010, whereby efficiency savings of £1 million would be sought rather than consider a further reduction in the in-house capacity or the development of a social enterprise. Work via the workforce strategy and a systems review will deliver the savings required and it will now be vital that these improvements are

sustained. New contractual arrangements with independent providers will be put in place from 2012-13 which will again deliver further efficiencies. The systems work being undertaken as part of the joint working with health will consider how hospital discharge processes and decision making can improve.

Agree with health colleagues integrated community service networks for implementation from April 2011

The networks have been agreed and implementation arrangements are in place. The main focus initially for health will be ensuring that GP engagement is embedded within the networks, with opportunities for social care and health integration following those planned for the intermediate care services via the community resource team concept.

Ensure that lessons learnt from serious case reviews published in 2010-11 are effectively delivered through partnership action plans and that public confidence in current local arrangements and practise is maximised

In September 2010 a serious case review involving two other authorities and a number of statutory partners was published which highlighted serious concerns regarding practice over a number of years. Although the issues for Neath Port Talbot were mainly historical it was vital that all steps were taken to ensure that improvements could be demonstrated since the issues indicated by the review and that there was full implementation of the recommendations contained in the review report. As a consequence, CSSIW were invited in to undertake an inspection of pertinent areas of practice and management oversight, with an action plan of this inspection's recommendations and those of the serious case review itself formulated. These action plans are being regularly reported to Members via scrutiny arrangements, and progress positively demonstrated.

By the end of the financial year a care management model is in place that embraces the principles of citizen directed support and builds on the current person centred planning framework

Significant progress in this area is still required and it will be part of the Transforming Adult Social Care (TASC) programme, with an initial focus on learning disability services

The Coastal project provides the impetus to modernise day support services for people with learning disabilities and mental health problems and associated new models of service are agreed by the end of the financial year

The initial impact of the Coastal project has been encouraging and will be an important contribution to the TASC programme as it develops. Central Government changes to disability benefits and related back to work programme could, however, have serious implications for the continued development of convergence funded schemes such as Coastal. This is currently being assessed.

Plans are in place to improve the performance of the occupational therapy service and that sustainable and measurable improvement measures are taking place from August onwards

Waiting times for an assessment have reduced during the year with new management arrangement put in place to provide greater synergy with the adaptation grants process. Systems thinking work that has occurred within the service will now be accelerated to ensure improvements are sustained.

Sickness absence rates across frontline services show quarter to quarter improvements

New corporate sickness management arrangements have been introduced with the home care service showing a 34% reduction on sickness over the year. These arrangements have now been fully implemented across social services and initial findings are very encouraging.

Arrangements between health and social services for determining continuing NHS health care and joint packages reflect legal judgements and result in timely decisions and outcomes

The new Welsh guidance is in place with indications that it is reducing the numbers of individuals deemed to have continuing health care needs. Local procedures are in place though decisions regarding joint packages are limited with some evidence that difficulties remain regarding the timeliness of decisions. There continues to be a commitment locally to joint working.

Demonstrate by the end of the year more effective working between children's and community care services, particularly in responding to families in crisis and in transition working

Formal meetings have taken place to improve co-ordination in this area with benefits being realised particularly in the area of transition working, where additional capacity has been made available. It is hoped that an Integrated Family Support Service bid to WG for 2011-12 will further enhance opportunities.

The review of commissioning, planning and contracting activity and capacity enables the Directorate to deliver its key strategic goals within commissioning frameworks

This work has been completed and new structures now need to be put in place to enhance this activity. Important knowledge and skill development will be taken from the ongoing tendering of residential care services.

The social care workforce strategy is updated by October 2010 to help address issues of succession planning and recruitment, the development and retention of a well trained competent workforce

Though the strategy as such has not been updated there has been considerable workforce development included within the transformation programmes both within children and young people services and community care services. This is in conjunction with the corporate workforce strategy put in place during the year.

In summary, there has undoubtedly been progress in a number of key areas of change and development with, in many instances, timescales and goals met. The first annual report also highlighted some areas of challenge and risk and it is important to assess how effective we have been in addressing these areas and whether they remain pertinent to our plans for 2011-12.

2010-11 Challenges/Risks

The number of children needing to be looked after remains at the same level throughout 2010-11 as the previous year, placing considerable pressures on children and young people services

There was an increase in the looked after population in 2010-11 (4.4%) but nothing like the increase experienced during 2009-10 (34%). While this is encouraging it is important that the level of increase does not again rise and if possible decline from what is still a relatively high rate as compared to other authorities in Wales. The impact of the systems review work will be important to achieving this. **This will continue to be an area of challenge/risk.**

The pace and extent of the change agenda will stretch the capacity and skill mix of key staff taking forward the transformation programme

It has been possible throughout the year to review capacity as key milestones and new areas for development have emerged. **This will continue to be a challenge, particularly in driving forward the further development of the new children service model and ensuring that the TASC programme achieves some momentum.**

The confidence and support of stakeholders is undermined as the change programme progresses

Amendments have been made to the TOPS programme to ensure that health colleagues are only engaged in those work areas where their input is relevant. Significant effort continues to be put into consulting and communicating with partners at each stage of development.

Ownership of what we are doing is not held amongst staff

There is encouraging feedback from trade unions and staff that engagement has been positive and sustained within the key transformation programmes. Evidence from the recent CSSIW inspection of learning disability services, however, indicates that staff not affected by these programmes are not being fully updated and feel less involved by managers in decision making. **This is something that will need addressing in 2011-12.**

Further budget savings are required in year as a consequence of national savings requirements

This did not arise as an issue; obviously our forward financial plan continues to be reviewed as new pressures emerge and clarity is given regarding local government funding allocations.

Resource pressures amongst key partners will inhibit further opportunities to look forward to grasp opportunities for collaboration and integrated working

Local commitments remain strong as are national expectations regarding regional collaboration.

Successful succession planning and retention of other experienced staff as changes occur in senior management tiers of the Directorate

Interim strategic and operational arrangements will end when the Head of Community Care and Housing Services returns from maternity leave in September. The early retirement/voluntary redundancy scheme alongside the retirement of other senior managers has meant that some important changes, particularly at third tier, have recently taken place. There are, however, well experienced and good managers that have taken the opportunity to take on additional responsibility to sustain the quality of leadership.

Other Emerging Risks/Challenges

The most notable additional financial risk that has emerged during 2010-11 is as a consequence of what is known as the Pembrokeshire Judgement. In January 2011, a judicial review found in favour of independent residential care home providers who had disputed the fee set by Pembrokeshire Council for 2010-11.

In addressing the issues of process highlighted by the judicial review, we have adopted a medium term strategy to both provide an above inflationary increase (5.7%) for 2011-12 and a minimum increase of 4% each year for the next three years, taking into account both the overall budget position and known intelligence on the impact of the fee rates on the providers and the care provided to individual service users. The funding of this package was not built into this year's budget and will require amendments to the forward financial plan as an additional pressure.

Other important risks include:

The Health Board has included fairly significant savings to its continuing health care budget in an attempt to meet its financial targets for 2011-12. Careful monitoring of the impact of this will need to take place if a number of health patients lose their entitlement to continuing health care on reassessment and require extensive social care packages to help meet their needs.

Lessons from in-Year Inspections

During the year CSSIW have undertaken the following thematic inspections of NPT functions and services:-

- Children and young people services (on Director's request)
- Adoption and Permanency arrangements
- Safeguarding Children Board roles and responsibilities
- Adult learning disability services

It is encouraging that all the children and young people service inspections demonstrate improvement in practise, though there is no room for complacency in demonstrating the sustainability of the improvements made and in addressing those areas that still require attention.

The inspection associated with the serious case review, primarily highlighted the need to strengthen management capacity and strengthen the conference and review team. These recommendations have been promptly responded to and all recommendations are progressing well.

The findings of the Safeguarding Children Board inspection are still awaited, though again there are encouraging improvements identified in the initial feedback received, though audit and review arrangements need to improve, along with a need to more effectively communicate with children and families, and there is still a need to show how all statutory partners fully own the safeguarding agenda.

The learning disability inspection highlighted the need to improve communication with staff and partners on an ongoing basis and as service changes and developments occur, and to ensure that social work practice is of a consistently high quality. The modernisation of day services remains a priority and the decision to focus the Transforming Adult Social Care (TASC) programme initially on learning disability services will ensure there is sufficient focus on addressing the recommendations of the inspection.

Moving Forward

What all the above tells us is that the complex and multi faceted nature of meeting the needs of the most vulnerable of our citizens will always require high levels of management and staff commitment, a capacity to recognise and deliver the changes required to improve and modernise services, an outward looking profile that engages the corporate council and external partners, the ability to take time to find out what matters to service users, potential service users and carers, and demonstrate through our actions that we are listening to these views. Whatever we do, whether it is part of the regional collaborative agendas or in delivery and engaging at a local level, we must always be clear about the benefits to families and individuals concerned along with the potential to improve the resource position to sustain our efforts in meeting need.

Delivering change and keeping our eye on day to day operational demands will continue to be an important balance to maintain. Our priorities for 2011-12 reflect this balance but also recognise that the process of setting priorities is just that; determining what are the things that are most important to do and achieve and what are the things that may need to wait and be tackled later, to ensure that our capacity to manage and deliver is not compromised.

Priorities for 2011-12

- Ensure robust and ongoing arrangements are in place to manage budgets and that steps are taken to address areas of potential overspend as a consequence of service demand
- Fully implement the new way of working resulting from the children and young people service systems review by the end of the year, and demonstrate evidence of improved practice and outcomes
- Undertake audits of practice in accordance with specified action plans to ensure learning from serious case reviews is embedded and effectively translated across staff groups and within system development
- Further develop the Safeguarding Children Board to strengthen the audit and review process and engage staff, children and families to understand the work and key outcomes the Board is seeking to achieve
- Select the partner to run and develop the Council's residential and respite care services for older people and to establish these new arrangements by the end of the year
- Have in place the new technological systems in home care to deliver the systems review savings for 2012-13
- Following the demand and flow analysis, agree and have in place the intermediate care model with the Health Board by the end of the financial year
- The further review of the occupational therapy service alongside the telecare review will further enhance these services in meeting the needs of older and disabled people and demonstrate improved outcomes by the end of the year
- Utilise the integrated family support service model as the key mechanism in improving the children and adult service interface in responding to the needs of both children and their parents
- Sustain the improvements in sickness rates within the home care service and demonstrate similar improvements across the range of in-house provider services by the end of the financial year

- Commissioning strategies are updated and in place for all service areas by the end of the year
- Recruitment and retention issues within children and young people services are monitored and reported on throughout the year to ensure all factors inhibiting a stable workforce are identified and addressed
- Dialogue with the independent residential care sector is maintained to develop a payment structure that recognises investment in service quality
- Membership of the South East Wales commissioning partnership for children placements demonstrates value for money
- Explicit plans for regional collaborative working are agreed and are developed by January
- Quarterly audit exercises are completed and reported on to improve practice across all care management services
- Demonstrate by the end of the financial year that the targets for 2011-12 as set out in the Joint Carers Strategy are met
- A staff, service user and carer questionnaire is undertaken before 2012-13 that demonstrates that steps have been taken by senior managers within learning disability services to improve the negative comments received from these groups as part of the recent inspection of this service
- Areas are identified before 2012-13 to deliver the additional £1million savings within community care services for 2013-14 in accordance with the Forward Financial Plan

Each Head of Service overview report will provide the detail on these service improvement and priority areas and will highlight further operational issues which will need to be addressed during the year. These will particularly relate to any CSSIW inspection recommendations not included in the above.

How Good Are the Services?

Themes

1. Getting Help

This includes access to services; assessment of need; care management and review

We aim to ensure that people requiring help will know how to contact us and will receive a consistent, equitable and timely response to their enquiries.

Communication strategies linked to our transformation programme continue to be effective in ensuring that partners, services users and carers are aware of key developments and have an opportunity to shape these at critical stages.

Public information continues to be reviewed and developed, in print, online and in other formats. The Meddwl website within mental health services is currently being reviewed to develop it further.

The improvement priorities identified within children and young people services last year were based on awaiting the outcome of the systems review and how this would affect early intervention and access to services. The systems review has established new referral processes leading to the replacement of the referral and assessment team. In its place, a central point of contact will continue as an initial route into the service, with assessment activity being undertaken by the relevant school based team. The review has also established that to hold a threshold for children service's intervention is unhelpful, and that instead, the new way of working involves offering advice, guidance and consultation to professionals from universal services, as well as joint assessments and leading interventions where appropriate.

There was also a priority related to the establishment of an emergency duty team (EDT) strategic group and this has been put in place. Additionally a senior management support rota for the EDT service is now in place and provides greater resilience for staff requiring advice and assistance in decision making.

Additionally a new approach of working between children and adult services is in development through a Family Orientated Safeguarding programme. This approach has included work on improving the interface between the services and has assisted in developing the Integrated Family Support Service (IFSS) model bid with Swansea and Bridgend.

Within adult services a demand and flow analysis has been undertaken in conjunction with health colleagues to more effectively understand the benefits of integrated working. This analysis has included the work of the contact and access team and this will help consider whether any changes to existing arrangements are necessary or provide the potential to put in place a local single point of contact. There has been positive feedback from the team in the utilisation of the recently introduced risk assessment tool to identify individuals most at risk.

The new Mental Health (Wales) Measure 2010 will be implemented in 2012 which is designed to improve access to mental health services. Joint arrangements across the Health Board area are in place to take this work forward and this will be supported by a primary care lead.

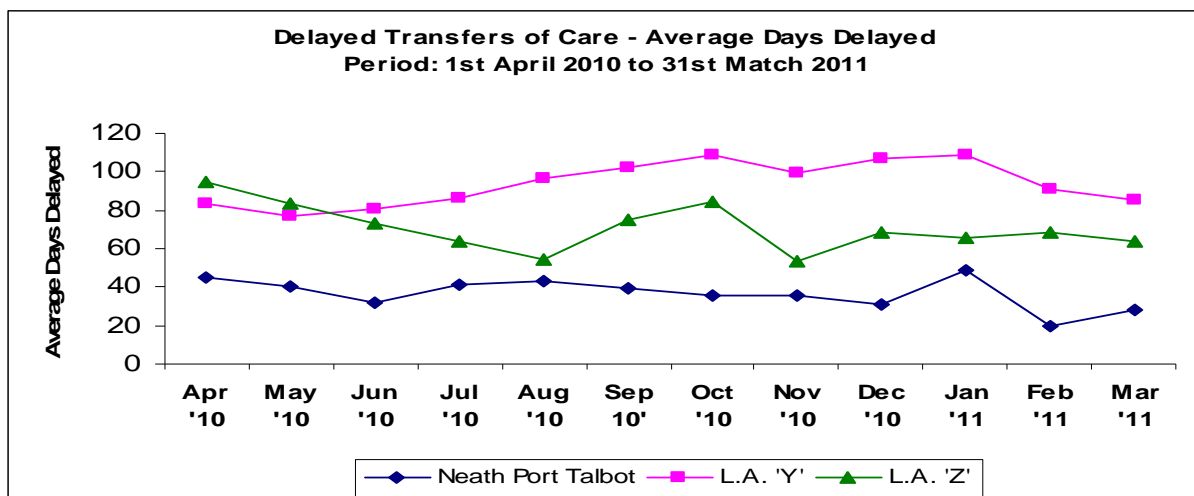
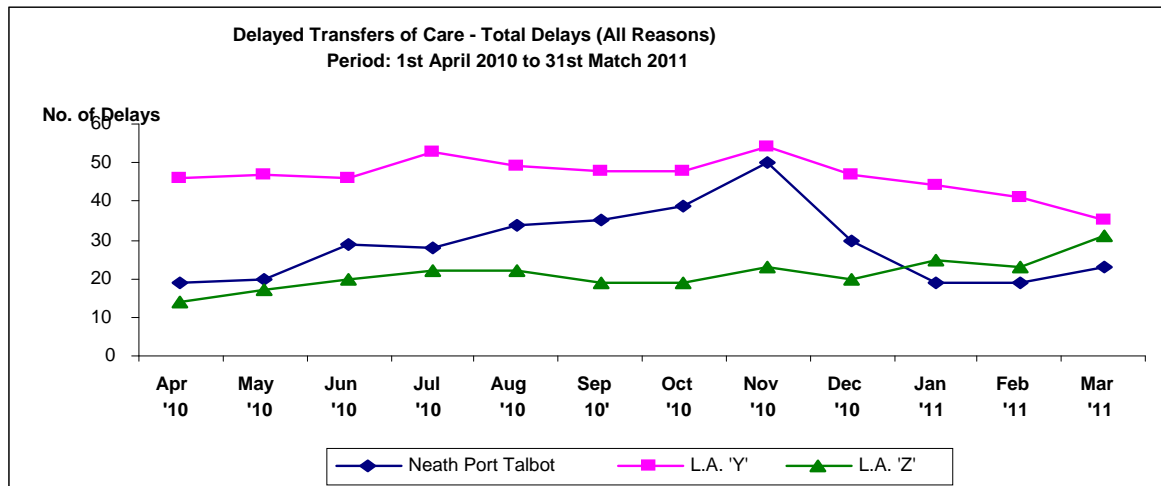
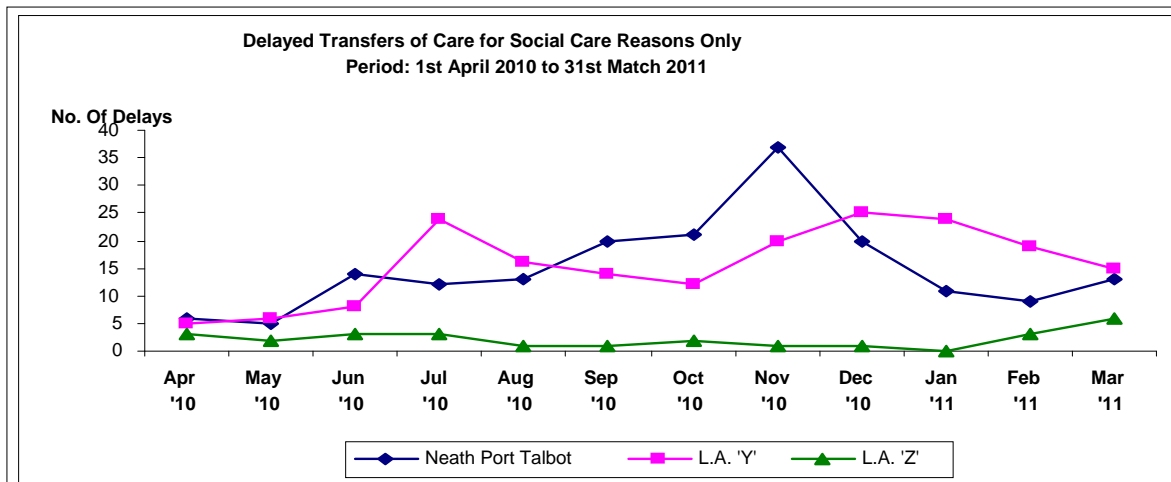
Within children and young people services there has been a slight drop in performance in decision making within one day, following sustained improvement over the previous three years. Performance for 2010-11 is 89.8% compared to 93.6% the previous years. The IT system is now being redesigned to capture and report on this indicator within the trial systems review areas.

In terms of hospital discharge arrangements in adult services, the rate of delayed transfers of care for social care reasons per 1000 aged 75 or over significantly increased, though the overall level of delays showed marked improvements over the final quarter of the year. The rate of delays for social care reasons was 14.83 from a rate of 6.63 in 2009-10. The overall rate, however, has shown a promising reduction in delays comparing favourably with the other authorities within the Health Board area. A full explanation of this is given below. Hospital discharge arrangements are being considered as part of the demand and flow analysis being undertaken with health colleagues and this should improve decision making processes.

Delayed Transfers of Care Comparison Analysis Period: 1st April 2010 to 31st March 2011

There were **181** Delayed Transfers of Care for NPT (social care reasons only) during the year (**PI SCA/001** rate per 1,000 population, aged 75 or over = **14.83**)

The following graphs show comparisons between NPT and the two other authorities within the ABMU area:



As can be seen from the above, although social care reasons were relatively high for NPT, the overall number of delays show a good relative position, especially during the final quarter. There is also consistently better performance in relation to average days delayed. The overall number of delays demonstrates the effective implementation of the joint Health Board and Council policy in resolving delays where these are for choice reasons. There is a significant variation between local authority areas in the number of health reason delays, which contribute to the overall figure, which is also worth further consideration both in terms of relative capacity and consistency in decision making processes.

Within children and young people services, the improvement priorities identified last year in relation to assessment practice and activity have been taken forward. Training has taken place in assessment, planning and recording with health assessment reporting now in place. Reporting systems are currently under development to better inform us on the level of partner agency involvement in conference and reviews and this will complement the work undertaken through the systems review on simplifying some of the processes attached to these responsibilities.

The systems review team have developed a new case management system which uses one assessment format only which provides a proportionate approach to the level of need identified. The new system also uses a multi-agency planning meeting model which aims to simplify and rationalise these procedures. Additionally the electronic record system has been simplified.

The conference and review service has been enhanced by four additional posts with strengthened management arrangements. This will support the reviews of Pathway Plans for care leavers, increase the services capacity to manage the increased number of looked after children and those on the child protection register, and will improve the quality assurance and challenge role of the service. Reviewing officers and conference chairs will now spend more time preparing and consulting with children and families.

With the increased capacity of this team and the overall introduction of the new model of working, it will be important to see better performance in a number of key indicators, which have been adversely affected during the change process, and in the overall numbers of looked after children as a consequence of the significant increase during 2009-10. New performance measures have also been introduced which will enhance our knowledge of how well we are doing in benefiting and supporting the children and families we are working with. The systems review has also developed a case progress tool which will help social workers and managers monitor the progress of a case and guard against drift in

involvement and decision making. Ongoing scrutiny of performance will be a priority during the year.

Good Practice: SYSTEMS REVIEW OF FRONTLINE SERVICES IN CHILDREN AND YOUNG PEOPLE SERVICES

The learning from this review has led to a service redesign which is community focused, breaks down thresholds for services and operates on a multi-agency basis at the frontline of service provision.

The two main approaches for this ‘new way of working’ are firstly, that social work teams will be based in schools around communities where there is the greatest demand on services for children and young people. These teams will operate as integrated multi-agency teams who can offer consultation and advice to each other, develop professional teams around individual family’s needs and in doing so, intervene early so that children’s needs do not escalate to the point that their needs require intensive and expensive service support.

Secondly that the bureaucracy attached to social services processes is reduced and that outcome measures are produced which can better measure the impact upon children and families of agency interventions, than the current set of performance indicators.

Whilst it is too soon to analyse on a statistical basis, the success of the review, over time it is anticipated that this early intervention approach will reduce the numbers of looked after children and that the improved and more rewarding new way of working will stabilise the social work workforce. This in turn will lead to economies and it is these two areas which should determine the economic success of the new approach.

Two Community Children’s Teams have been established, through the process of the trial period and it is now planned that a further three teams are established in the areas of greatest need across the authority. One of these additional three teams will have a disability focus.

Partner agencies, which are Education Welfare Services and Health Visiting Services, are currently being consulted as to the future of integrated services so as to enable the next stage of roll-in on a multi-agency basis.

Work will now progress on consulting key schools on how the new Community Children’s Teams can be accommodated.

The practice of legal surgeries has continued and this has supported both the proper preparation for care proceedings and a consultation process for staff on complex cases. A monthly file audit programme has developed which routinely audits files from the new way of working and undertakes audits on other files on a thematic basis. The outcomes of these audits are reported to scrutiny committee and will be reported to the Safeguarding Board.

Performance related to re-referrals has deteriorated and a sample audit is being undertaken to understand the reason for this. There has been a drop in performance related to initial assessments completed in 7 days though the percentage of core assessments carried out within 35 days has improved.

In adult services the timeliness of assessments continues to be good overall, with some improvement in resolving delays in assessment on the occupational therapy service being demonstrated. The percentage of high priority OT referrals being assessed within designated response times is 78% compared to 69% in 2009-10. It will be important to monitor performance in the older person with mental health needs team during 2011-12 given some reduction in capacity following the withdrawal of the independence and well being grant.

The recent learning disabilities inspection commented that the council is delivering an integrated model of assessment and care management with work needed to be done to improve the quality and consistency of the assessment and care management process.

Within the service, the Person Centred Planning approach is being adopted to develop a single assessment tool throughout transition. A Transition Co-ordinator has also been appointed who is looking at the whole transition process with a multi agency steering group overseeing these developments. This post is certainly having a positive impact on the capacity for transition work needed as highlighted within the recent learning disabilities inspection report.

Within mental health services integrated working with health is well established. The new Mental Health (Wales) Measure 2010 will have an impact on the role of the Community Mental Health Teams and will be monitored through the mental health planning group and relevant sub-groups.

Carers continue to be offered an assessment 100% of the time though the numbers taking up this offer and receiving a service have fallen (down from 15.9 to 10.6 and 47.6 to 24.5 respectively). Awareness raising of the importance of carers' assessments amongst care managers continues to be a priority and the recent learning disability inspection highlighted the need to maintain a focus on this area.

During 2010-11, there were four additional carers' assessment training sessions, including one for social work students and others including third sector and health service staff as well as social workers. Our Carers' Development Officer attended all care management teams during the year to raise the profile of carer's assessments and produced a quarterly e-mail bulletin to staff to ensure they were aware of any new relevant developments. There is evidence of a growing positive relationship between care management teams and the NPT Carers' Service in terms of reciprocal referrals depending on the needs of the carer concerned. It has been agreed to explore with the Carers' Service the potential role of the service in undertaking carer's assessments.

In updating the Carers' Strategy a positive outcome has been feedback from carers that services have improved as a consequence of the initial strategy that was put in place. The updated strategy provides clear objectives for the next three years which partners are confident can be achieved during a period of reducing financial resources. There is a strong emphasis on improving the uptake of carer's assessments and work being explored with the Carers' Service could prove a key element in achieving this. The progress in meeting the objectives of the strategy will be overseen by the Health, Social Care and Wellbeing Executive Board. The Carers' Strategic group itself continues to have strong partner and carer engagement.

The strategy will also be a key component in delivering the requirements of the Carers' Measure in having a joint strategic service plan for the Health Board area.

The percentage of clients who had their needs reviewed during the year has fallen from 73% to 69% though like last year most other reviews are completed within a short period of time after the target. There is variation, however, between services in undertaking reviews on time. Within older people services 71% were reviewed on time, within mental health services 90% and in learning disability services 53.5%. The reduction within learning disability services was attributable to a period of staff shortages which has now been addressed.

In addition to care management reviews through supervision, a quality assurance and case file audit system has been implemented to monitor the quality of, and put in place systems for continuous improvement of care plans.

There has been a Person Centred Planning development programme that has enhanced the involvement of service users and carers in care management. This needs to be expanded and developed with further models to be explored.

Progress is now underway in working towards an integrated model of assessment and care management within the older people with mental health needs service, which in part has been assisted by the relocation of Port Talbot staff to the new Primary Care Resource Centre. A new Care Programme Approach model is being piloted in the Swansea Valley which is proving successful in ensuring more joined up arrangement between social service and health colleagues.

Children and Young People Services

Strengths	Improvement Priorities
➤ System reviewed and clear messages on improvement needs informing new approach	➤ Resolve EDT pay pressures
➤ Emergency Duty Team supported by a senior management rota	➤ Electronic information on accessing the EDT service
➤ New way of working results in need being met earlier	➤ Full implementation of Team Around the Child and Team Around the Family approaches
➤ Academic evaluation of new way of working commissioned	➤ Work on evaluating children's experiences of social services interventions, to be developed
➤ Legal Surgeries	➤ Training in recording of children's views
➤ Establishment of new systems	➤ Implementation and embedding of new systems
➤ Development of new outcome measures	➤ Performance in some key PIs, e.g. visits to looked after children
➤ Establishment of enhanced Conference & Review Service	➤ Implement reviews of pathway plans
➤ Establishment of Peripatetic group of staff	➤ Recruitment and retention of staff
➤ Monthly file audit programme in place	➤ Further develop work related to adults needs

➤ Procedures updated	➤ Complete actions related to the focused inspection and permanency inspection
	➤ Complete work on ensuring there is a systematic supervision process for all cases
	➤ Development of I.F.S.S.

Adult Services

Strengths	Improvement Priorities
➤ Clear and Understood referral routes into the service	➤ Continued improvement of performance within the OT service
➤ Clear eligibility criteria and application	➤ To improve the uptake of carers assessment and explore the potential of these being undertaken by the Carers Service
➤ Timely responses in most service areas	➤ Act on the analysis of demand being undertaken with health to improve referral pathways and integrate services further
➤ Embedded assessment and care management systems with health colleagues	➤ Need to develop consistency of care management practice within learning disability services
➤ Proactive communication strategies to promote change agenda and new services	➤ Development of the same risk assessment tools across all adult services
➤ Websites that promote inclusive communication within learning disability and mental health services	➤ Demonstrate improved outcomes for young adults going through the transition process
➤ Comprehensive analysis of demand placed on points of entry into social care and aspects of the health service is being undertaken jointly	➤ Ensure effective co-operation between service areas where eligibility is questioned or requires clarification

<ul style="list-style-type: none"> ➤ Effective systems of caseload management across teams 	<ul style="list-style-type: none"> ➤ Ensure that the PCP process is reviewed and becomes an integral part of care management
<ul style="list-style-type: none"> ➤ Risk assessment being utilised to support decision making regarding the need for emergency assessment and response 	<ul style="list-style-type: none"> ➤ Further embed quality assurance mechanisms with systematic use of case file audits across all service areas
<ul style="list-style-type: none"> ➤ Positive working with health regarding joint discharge processes 	<ul style="list-style-type: none"> ➤ Further integrate assessment and care management arrangements for older people with mental health needs
<ul style="list-style-type: none"> ➤ Person centred planning is being more generally utilised 	<ul style="list-style-type: none"> ➤ The new Mental Health (Wales) Measure 2010 to be implemented
<ul style="list-style-type: none"> ➤ Increased use of direct payments within mental health services 	<ul style="list-style-type: none"> ➤ The Care Management manual to be updated
<ul style="list-style-type: none"> ➤ Good engagement of service users and carers in care management processes 	<ul style="list-style-type: none"> ➤ Develop robust systems of evaluating and supporting the role of approved mental health professionals
<ul style="list-style-type: none"> ➤ Evidence of good integrated multidisciplinary working within learning disability services, which is also reflected in mental health services 	<ul style="list-style-type: none"> ➤ Demonstrate that targets for 2011-12 as set out in the Joint Carers Strategy are met
<ul style="list-style-type: none"> ➤ Better multidisciplinary working within older person with mental health needs teams with co-location and the piloting of new assessment tools and arrangements 	

2. The Services Provided

This includes both the range of services provided and the quality of those services

Range and Quality of Services

We aim to ensure that there is a range of appropriate and quality services available to meet assessed needs and promote choice.

Within children and young people services, last year's improvement priorities included the need for work to be undertaken to resolve medical advisory commitment to the adoption panel; completion of the review of family support services; completion of the Accommodation Strategy for looked after children; driving forward the regional agenda; to resolve the gap in contracting; to complete the review of advocacy services and to create an exit strategy for Joint Working Grant posts.

The issue of medical advice to adoption panel was raised at Local Service Board and the ABMU are now investigating the matter. The review of Family Support Services has been completed and this has resulted in a redesigned set of services some of which are now commissioned through Cymorth funds and the remainder are primarily supported by children and young people services. A Family Action Support Team (FAST) has been established, provided by Action for Children, which can provide parenting and family support without delay. The trial phase of this service was a success and continuation of this project has been agreed with the Children and Young Peoples Partnership (CYPP).

The Accommodation Strategy for looked after children has completed all but one of its work streams. The in house service continues to grow successfully but has not been able to keep pace with the growth in numbers of looked after children. It has however, been established that there would be no financial benefit to the establishment of an in house residential facility for looked after children. The one remaining work stream will focus on the viability of the expertise on challenging behaviour within Hillside, supporting a small group of foster carers who care for more challenging children and young people.

Late announcement of the new foster carer fees framework has further disrupted progress, with plans now needing to militate against the impact of this framework, both in the budget provision and upon carers' perceptions of the benefits and disadvantages of this framework.

The Head of Business Strategy is currently formulating a redesign of support services in order to accommodate additional resilience in the contracting section for children services.

Advocacy Services have been reviewed through the CYPP and a draft report presented. Further work is now required and it anticipated to be completed early in the coming financial year.

The CAMHS social work post funded by the Joint Working Grant has been deleted. Work has been ongoing related to the review of family support services however, to bolster general emotional health and wellbeing services in the area. Following a previous review of Emotional Health and Wellbeing Services, the model that was recommended has been developed in separate elements as the whole model is unaffordable at the current time. This includes improving contracts with service providers as well as a dedicated budget to access these services.

In relation to other developments, the contact service has been brought in house and two members of staff are dedicated to the co-ordination and management of this service.

The permanency inspection recommended a number of actions for the Adoption Service which on the whole is functioning well. The South Wales Adoption Consortium is currently considering operating through a revised model.

The Fostering Strategy has progressed as described above and the service functions well as evidenced through the annual inspection process.

The Autistic Spectrum Disorder (ASD) stakeholders group has continued to meet regularly and has used the annual funding effectively supporting an 'Early Bird' scheme for children recently diagnosed, as well as a range of other training and equipment services. Parent representation on this group is strong.

The development plans for the in-county short stay respite service are ongoing with a site identified and a tender out for the building contract. The next phase will involve parents in some of the internal design and potential fund raising for additional play and sensory equipment.

Hillside Secure Unit has expanded its provision with the assistance of a WG capital grant. However the use of the additional beds may be compromised by the proposed YJB/MOJ cuts.

In relation to future improvements and developments, the Safeguarding Children Board has prioritised substance and alcohol misuse and emotional health and wellbeing services and has jointly agreed these as priorities with the CYPP. Consequently a report was presented to the Local Service Board (LSB) in March 2011, requesting that the LSB champion and dedicates a resource to drawing together a collective strategy to improve these services in NPT. A convergence fund bid has been submitted which if successful will provide important development capacity to take this work forward. It will also be important to learn from related initiatives led by the police within Swansea.

Contract and Service Level agreements need further development with private and voluntary sector providers of services, and joining the South East Wales Children Service Commissioning Programme will enhance this work.

A Home to School transport review is ongoing and this includes a review of transport of looked after children to and from school and contact.

The fostering support work through Hillside staff needs further exploration.

Strengths	Improvement Priorities
➤ Redesigned family support service	➤ Emotional Health and Wellbeing Services to be further developed
➤ Redesigned contact service	➤ Substance misuse strategies to be further developed
➤ Expanded provision at Hillside	➤ Foster support work through Hillside needs further exploration
➤ Positive inspection results from Fostering Service and from Hillside	➤ Home to school transport review to be concluded
➤ Highly experienced adoption service	➤ Contract and Service Level agreements need further development
➤ Strong ASD group	➤ Regional and collaborative services to be explored and developed further (including SWAAC)

	➤ Foster carer fees framework to be implemented
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Within adult services there continues to be a good range of services in place for all service user groups, with inspection reports in directly provided services consistently highlighting the excellent quality of provision. The learning disability inspection commented that good professional standards of care were evident in the two day centres visited, though they currently operate on a traditional service model.

Services for older and disabled people have a philosophy of promoting independence and reducing dependence, with the development of the community integrated intermediate care service (CIIS) and the home care enabling service (HEAT) demonstrating success in reducing the need for long term intervention. The systems work that is ongoing in analysing demand and referral and activity pathways within these services will now provide the clarity required to maximise the effectiveness of these services and the best way to achieve integration. As part of this work on intermediate care, the needs of people with dementia is being scoped in to ensure that focus is not just on physical frailty but provides for older people with mental health needs too.

This work will also help revise the current care management and service access processes taking into account the good practice service models outlined by John Bolton in **Better Support at Lower Cost**. This will incorporate an analysis of the role of equipment, adaptations, telecare and intermediate care in reducing the need for ongoing support, as well as considering where these interventions sit within the assessment and care management process and eligibility considerations.

In July 2010, as part of the strategic business case for Services in the Home, Cabinet authorised the Director of Social Services, Health and Housing to explore ways in which the in-house service could become more cost effective. In March 2011, Cabinet subsequently approved a detailed improvement programme which will see proven technologies employed in the service, consequently streamlining business operations, commission alternative approaches to meeting the need of service users who need care out of hours, address problems experienced with medicine management which emanate from community pharmacies, improve the issue and recovery of specialist equipment, and improve the way in which assessments of charging and collection of income is arranged. Coupled with the effect of the Corporate Workforce Strategy the cost of the service will reduce by just under £1million per annum

along with the desired improvements in service delivery. An implementation team was established in May 2011 to take forward the improvement programme with a degree of urgency.

Further work is ongoing with external home care providers to improve the capacity available, strengthen contractual arrangements and ensure services remain flexible to need.

Following the review of residential care provision which was the subject of a three month consultation period between January and April 2010, a procurement process was initiated in November 2010 to select a partner that meets the criteria set out by the Council in June 2010. The invitation to tender was issued in May 2011 with bids returned by end of July 2011. The Council expects to select a preferred partner in September 2011 and to transfer the service to the new provider in February 2012. Throughout the procurement process there has been significant effort to keep all stakeholders engaged. Engagement activities have included: monthly face to face meetings with staff representatives; road shows to meet residents and families face to face; regular updates to partners through the TOPS Programme Board; seminars for all members and specific report to Scrutiny and Cabinet Committees; briefings to WG Members and Members of Parliament; all of these supported by regular newsletters and information resources on the Council website.

A strategic review of day services also commenced during 2010/11 and a baseline of existing service users' needs and service provision have been produced. Work to remodel the service will commence toward the end of 2011/12 to ensure that management of change capacity is not too thinly stretched given the level of resource commitment needed to take forward other priority projects within the TOPS programme. In the short term, management responsibility for the day service provision and social centre provision is to transfer from the Operational Manager Residential Care to the Operational Manager Home Care, to pave the way for the transfer of the residential care service to the selected partner.

The learning disability inspection stated that significant work has been undertaken to improve and standardise practice across learning disability services, with outcome measures now needing to be implemented. Person centred planning (PCP) operates within the services and further work through the TASC programme will be undertaken to review the current PCP process to make it fit for purpose as an integral part of care management. As previously indicated Coastal continues to provide the potential for the development of further options within both learning disability and mental health services.

Mental health services offer a range of in-house support, combined with support from the health service and key third sector providers such as Hafal and Gofal. The work to ‘repatriate’ service users who had been placed out of county alongside the development of local alternatives is proving successful, with the lowering of demand for new placements and reduced cost pressures.

Strengths	Improvement Priorities
<ul style="list-style-type: none"> ➤ A good range of services across adult care 	<ul style="list-style-type: none"> ➤ Further develop the range of non traditional services especially to meet the needs of young people going through the transition process and beyond
<ul style="list-style-type: none"> ➤ Consistently excellent CSSIW reports regarding in-house services 	<ul style="list-style-type: none"> ➤ Complete the systems thinking work being undertaken with health to finalise an integrated intermediate care service
<ul style="list-style-type: none"> ➤ Effective integrated intermediate care services (CIIS) with health and the HEAT services which maximise independence and reduce the need for ongoing care 	<ul style="list-style-type: none"> ➤ Finalise the systems thinking work within home care service to achieve the efficiencies and service improvements identified
<ul style="list-style-type: none"> ➤ An innovative approach to integrated extra care housing and care support, particularly in the valley communities 	<ul style="list-style-type: none"> ➤ Finalise the tendering process to determine the partner to run and develop the in-house residential care provision
<ul style="list-style-type: none"> ➤ The TOPS programme is a corporate initiative which is fundamentally transforming older people services 	<ul style="list-style-type: none"> ➤ Undertake an analysis of possible pressure points within learning disability day services in order to address capacity issues
<ul style="list-style-type: none"> ➤ The systems review of the in-house home care service identified significant efficiency savings and will lead to better outcomes for service users 	<ul style="list-style-type: none"> ➤ Improve joint working between care management and day service staff within learning disability services

<ul style="list-style-type: none"> ➤ Wide range of in-house and externally commissioned services and health interventions that can be accessed for adults with mental health needs via the CMHTs 	<ul style="list-style-type: none"> ➤ Ensure that carers are fully involved in the ongoing review of day and respite services
<ul style="list-style-type: none"> ➤ Work undertaken to improve and develop the standards and quality assurance mechanisms across learning disability day services 	<ul style="list-style-type: none"> ➤ Consider the capacity of learning disability day services to deliver complex packages of care without undue compromise to other individual activity programmes
<ul style="list-style-type: none"> ➤ Evidence that service plans are detailed with good risk analysis 	<ul style="list-style-type: none"> ➤ Ensure that all service staff are involved and kept up to date of change proposals and developments

3. The Effect on people’s Lives – Independence and Quality of Life

This covers both the arrangements to safeguard and protect vulnerable children and adults and how we promote independence and social inclusion. We aim to ensure that we maximise the safety of vulnerable adults and children through everything we do.

In terms of safeguarding children and young people, the improvement priorities for last year included the need to further develop the functions of the Safeguarding Children Board (SCB); to roll out learning from serious case reviews and to improve quality assurance mechanisms.

The SCB has now appointed a Business Manager and children and young people services have a new Safeguarding Manager in post. Together they are progressing the outstanding business of the SCB at a satisfactory pace. Additionally the SCB received an inspection during February, 2011 which acknowledged the self assessed areas for development. These include a need to improve the functions of the Audit and Review Group, to develop and implement the communications strategy and to further develop work in relation to the participation and involvement of children, young people and their families.

The Inspection also wanted to see further evidence that the SCB and its partner agencies are learning from its quality assurance mechanisms, including the audit and review work, serious case reviews, the performance management framework and feedback from the Conference and Review Service.

The SCB has taken positive action to update its self assessment tool and to engage with other partnerships in developing a joint set of priorities. It is additionally positive that the SCB has a Performance Management Framework albeit that this framework needs further development. The SCB is currently funded by an agreed arrangement between the statutory agencies.

The SCB has developed a business plan and a full analysis of progress and areas for improvement are contained within that plan.

The numbers of children placed on the child protection register has begun to grow again towards the end of this year and whilst the rapidity of growth of the numbers of looked after children has slowed down, growth is still evident. It is anticipated that the early intervention model introduced through the systems review will in time, impact upon a reduction in numbers of children at risk and needing to be looked after.

The high profile serious case review published in September, 2010 contains 51 recommendations which are being progressed by the range of responsible agencies. NPT have offered to maintain the updated action plan on behalf of all three of the involved SCBs and are using SSIA funds to further enhance learning from this review.

The CYPS Quality Assurance framework has been enhanced through a monthly file audit programme overseen by the Safeguarding Manager. The file audit programme includes a focus on files worked in the new way following the systems review, so as to ensure further learning is translated into future developments. Additionally file audits are regularly presented to the sub Scrutiny Committee.

As described earlier, the conference and review service has been significantly expanded in order to ensure that the quality assurance functions related to safeguarding are enhanced. The conference and review service also regularly attend the Children's Services Management Group to discuss and make challenges to management on areas for development.

Performance related child protection conferences held within 15 days of the strategy meeting has dropped this year and this is attributable to the pressures in the conference and review service which have now been resolved.

Additionally, core groups held within 10 working days have dropped slightly and mostly reflect only minor delays in the core groups taking place.

In relation to the forthcoming year, recommendations from the inspection of the SCB will need to be implemented, alongside the planned actions for the forthcoming year.

Recommendations from all serious case reviews need to be implemented and the SCB will want to be assured that learning from the reviews have been effective.

The conference and review service will need to establish and demonstrate the effectiveness of its additional capacity.

Strengths	Improvement Priorities
➤ Safeguarding Children Board working well with other partnerships	➤ Recommendations from SCB inspection
➤ Safeguarding Children Board funded by partners	➤ Drive forward SCB Business Plan
➤ Enhanced Conference and Review service	➤ Ensure effective learning from Serious Case Reviews
➤ Monthly file audits in place	➤ Embed new Conference and Review Service
	➤ Embed changes to Audit and Review Group

In adult services, the new risk assessment tools have been embedded and prompt and efficient responses to adult protection referrals and multi-agency working continue to be apparent. The learning disabilities inspection, commented that there was evidence of improvement since the national inspection of adult protection undertaken in 2009. Inspectors found that processes for assessing and managing risk were evidenced, and that staff were clear about the referral route and the co-ordination role of the adult protection team. The lack of POVA documentation on the files examined has been addressed since the inspection.

The coming together of the POVA and Deprivation of Liberty safeguards (DoLS) capacity is proving beneficial in co-ordinating responses from these related functions, and the overall capacity as demand increases will be kept under review. There has been a significant increase in demand for the POVA service and following the introduction of new thresholds and risk assessment tools, a demand analysis is going to be carried out in September 2011 to establish the effectiveness of the new model.

Operational performance and trends inform the strategic direction for adult safeguarding, which is co-ordinated by the Area Adult Protection Committee (AAPC). There is a POVA business plan developed by the AAPC and a recent follow up visit by CSSIW indicated good progress in its implementation. Further work is required to ensure the auditing of case files is effectively monitored.

The percentage of adult protection referrals completed where the risk has been managed is 93% for 2010-11, with a small number of service users with capacity declining further investigation or intervention where concerns exist but there is no opportunity for the statutory agencies to actively manage the risk, especially where these concerns are community rather than service based.

There is a strong focus within the Council on maximising independence and social inclusion, and this is reflected throughout social services. This is a key element of the Council's community and other strategic plans with the main strategic initiatives in relation to systems reviews and the tier one transformation programmes aspiring to achieve these objectives.

Within children and young people services, last year's improvement priorities included the need for a revision of the young single homelessness protocol; the review of advocacy services; the contribution to the NEETS (Not in Education, Employment or Training) group; the development of the Coastal project; further work to develop and expand accommodation provisions for young people and a review to be undertaken of the transition to adulthood protocol.

The development of the homelessness protocol and housing provisions has been superseded by the need to respond to the Southwark precedent. Work is ongoing alongside the Council's housing department and in line with the newly formed NPT Homes organisation to develop a full response to the messages from the Southwark precedent.

The review of advocacy services has progressed well and is commented upon earlier in this report. The Coastal project has commenced and links into the leaving care service, although the new Department of Work and Pensions

(DWP) work programmes are likely to supersede the need for the Coastal service, over time, current links with the project need to be strengthened to ensure young people leaving care are offered opportunities to access work or training.

Significant work has been undertaken relating to transition to adulthood, including the development of a strategic group, a strategic mapping exercise across social service, health and education, and the appointment of a transition co-ordinator, however a revised protocol is yet to be developed.

Significant consultation and participation work is undertaken through care leavers who are involved with various advocacy and rights groups. Messages from some of this work are filtered through to the Safeguarding Children Board, on specific topics, e.g. self harm issues.

Consultation groups are active at Hillside including one that is attended by officers of the Children's Commissioner. Additionally Hillside has expanded its vocational training facilities.

A protocol has been developed between Route 16 and NPT College to facilitate the levels of support care leavers may require in further and higher education.

The welfare rights service is accessed by children and young people service users.

The leaving care team (Route 16) has had a vacant social work post converted into two Young Persons Advisor (YPA) posts to ensure a better ratio of service delivery within the team between social workers and YPAs which in turn should impact positively on this area of performance.

Further work in 2011-12 includes the need to make, a full response to the Southwark judgement which should include sufficient housing provision for care leavers.

Further work can be undertaken to ensure that feedback from consultation events is provided to the Children's Services Management Group and to the SCB, where relevant.

Continued promotion of support available through children and young people services to be undertaken related to young carers.

Children and Young People Services

Strengths	Improvement Priorities
➤ Consultation work undertaken	➤ Consultation work to be fed into management and SCB
➤ Protocol between Route 16 and NPT College	➤ Response to Southwark judgement
➤ Transition to adulthood work has progressed	➤ Transition to adulthood protocol to be updated
➤ Coastal project commenced	➤ Promotion of young carers services

Within adult services a range of services are in place and being developed to maximise independence and promote well being. A number of these have been described in the range and quality of service section, particularly in relation to CIIS, Heat, telecare and supported housing developments.

The use of Direct Payments (DP) has continued to show a gradual increase in numbers, with more service users with mental health needs now accessing a direct payment. A review of the current DP policy and practice guideline has been undertaken to encourage the development of creative and innovative approaches to meeting assessed need through DPs; and to ensure that people are appropriately supported to access and use them.

We have negotiated with SHAW Trust, who provides the independent living support service, to explore and set up a pool of personal assistants for direct payment recipients to have access to, and this work will be the next step in their current matching service which greatly assisted DP recipients in accessing PAs particularly at short notice.

As a means of addressing the low take up of people with mental health needs and prior to the new DP guidance which enables people without capacity to access a direct payment, we set up indirect payments. The payment is used to meet the client's needs but instead of being controlled by the Council or the service user, it is managed in the interest of the service user by another person, and therefore the flexibility of a direct payment is available to those service users without capacity.

Training has been provided to care management staff particularly within mental health services as well as regular input into the Alzheimer's Society to raise awareness of the possibilities of direct payments.

Further work includes exploring the use of pre loaded cards to load direct payment' recipients agreed direct payment onto, and increased opportunities to access direct payments for more flexible respite support. We are using the Resource Allocation System to assist with this and plan to implement more flexible direct payments for respite care by the end of the calendar year.

The development of Coastal is an important element of assisting vulnerable adults of working age develop their independent living skills, prepare them for work and seek sustainable employment opportunities. Over 350 individuals are engaged with the project, with nearly 300 of these being able to demonstrate positive outcomes. Two pilot social enterprise projects with the Enfys Foundation are planned to start in October 2011, which will provide job opportunities in a bike re-use scheme and a cafeteria. The proposed development of the Swansea University campus near Fabian Way will provide an important impetus to both these projects. It is envisaged that these projects will offer opportunities for between 20-30 service users currently accessing the Vocational Skills centre.

The Coastal scheme has also been working closely with the existing learning disability and mental health day services across the Borough to assist in developing their provision towards more outcome focused evidenced work. This includes implementing the Workstar assessment and action planning tool, and designing an independent skills training framework as well as accredited training programmes.

The adult placement scheme within learning disability services has been remodelled away from a residential care model to a supported living model. This enables service users to access the rights and flexibilities afforded to tenants. Opportunities are now being explored to develop cross boundary working with Swansea, Carmarthen and Bridgend; opening up the service to all working age adults; and to offer adult placement respite care.

There have been a number of important developments to support particular service user and need groupings. A neurological alliance group has been established across the ABMU area, as well as a local brain injury group which was initiated by one of our social workers, who recognised through his and colleagues caseloads the need for such a group. A Tinnitus group has been established in partnership with the Audiology Department at NPT Hospital and supported with speakers and information, and this has now become independent

with its own committee. Visual impairment self help groups remain supported by our Sensory Support team and are well established and attended.

Further work initiated by or involving our Sensory Support Team includes the creation of credit card sized laminate photo registration cards in response to the NPT deaf and visually impairment communities request for an ‘identity card’ which not only provided proof of registration but also as a communication aid at times of an accident or emergency.

A group partnership has been established with Visual Impairment West Glamorgan and their partner Cardiff Vale and the Valleys to access on a monthly basis the Sensory Support Team’s equipment and assessment room and Shaw Trust’s IT facility. The target is newly registered blind people so that information, advice and resources are made available on an ongoing and regular basis.

Other developments include promoting the establishment of a local Macular degeneration support group, exploring the potential take up of an Eye Clinical Liaison Officer at NPT Hospital, established close links with the Wales Low Vision Service and refocusing the Communication Guide scheme with Sense Cymru to allow spot purchasing of support as and when required. The sensory support team recently had a formal commendation of good practice from Sense Cymru.

2010-11 has been another busy year for all agencies involved in working with those who misuse both alcohol and drugs. The Council works in partnership with three main agencies, West Glamorgan Council on Alcohol and Drug Abuse (WGCADA); The Community Drug and Alcohol Team (CDAT); and Group 4 Services (G4S).

NPT has produced a vision and framework for the service, in consultation with all key stakeholders, allowing for integrated services, including a joint training event between CDAT & WGCADA.

Increases in WG monies had an emphasis upon young people. Activity has centred on working with young offenders and closer working with Education in relation to young people suspended from school and children with parents who misuse substances.

2010-11 saw the opening of the ‘12 café’, a social enterprise where clients gain work experience, as well as qualifications. Additionally, integrated services with Health saw the opening of a new detox ward in NPT Hospital, aided by capital grant monies from WG.

There are a number of very positive examples of effective working between social services and housing colleagues in reducing the need for ongoing support and intervention, and in resolving crises in service users' lives. A supported housing move on panel has been established to co-ordinate the work of all local housing agencies to consider the needs of vulnerable adults to move-on to more independent accommodation with the necessary ongoing support and ensure that agencies prioritise their stock to assist with this. A single point of access to housing related support services has also been set up via the Supporting People Team to access a peripatetic service to vulnerable homeless adults or who are potentially homeless or struggling to maintain their accommodation.

Other areas of good practice include the work being undertaken between the children and young people service, the Supporting People Team and Housing Options to co-ordinate the response to 16 and 17 year olds who present as or are facing homelessness (see earlier comments regarding the Southwark Judgement).

In relation to relevant performance indicators the rate of older people helped to live at home has dropped slightly from 92.36 per 1000 aged over 65 to 90.49. Although this is encouraging in terms of maximising independence, the actual reason for this appears to be eliminating any double counting from external providers' information rather than a real drop in numbers. The rate of older people supported in residential forms of care has dropped, however, in real terms from 26.24 per 1000 to 25.38 which is again encouraging.

Similarly the percentage of adults aged 18-64 and those 65 plus supported in the community dropped slightly to 88.4% and 77.9% respectively from 90.5% and 80.8% though both higher than the percentage in 2008-09.

Adult Services

Strengths	Improvement Priorities
<ul style="list-style-type: none"> ➤ Good multi agency arrangements and robust adult protection procedures 	<ul style="list-style-type: none"> ➤ Fully implement the new Adult Safeguarding policies and procedures
<ul style="list-style-type: none"> ➤ There is effective integration of POVA and care management alongside strong relationship between contracting and adult protection 	<ul style="list-style-type: none"> ➤ Continue to strengthen the role of the AAPC as the strategic lead for adult safeguarding in Neath Port Talbot

<ul style="list-style-type: none"> ➤ Our POVA and DoLS capacity works effectively together as one team 	<ul style="list-style-type: none"> ➤ Ensure that there is consistent practice in the recording and storing of POVA documentation by care management teams
<ul style="list-style-type: none"> ➤ There is an experienced and stable workforce who are confident and well trained in managing the POVA process 	<ul style="list-style-type: none"> ➤ Monitoring of referral levels from within in-house services to ensure that any issues are appropriately raised through POVA
<ul style="list-style-type: none"> ➤ Robust documentation systems within the POVA team 	<ul style="list-style-type: none"> ➤ Maximise opportunities via Coastal and TASC to modernise learning disability day services
<ul style="list-style-type: none"> ➤ Evidence of risk assessment and the effective introduction of a risk analysis tool throughout the POVA process 	<ul style="list-style-type: none"> ➤ Continue to ensure that PCP is fit for purpose and is used as a vehicle to help develop community based options in order to improve outcomes for service users
<ul style="list-style-type: none"> ➤ There is a good range of services which help promote independence 	<ul style="list-style-type: none"> ➤ Complete the systems work with health in relation to intermediate care services so that we ensure the benefits from these services are fully realised
<ul style="list-style-type: none"> ➤ Our direct payments policy has been revised alongside further training to increase its flexible use across all service areas 	<ul style="list-style-type: none"> ➤ Ensure the needs of people with dementia are properly taken into account in the further development of intermediate care services
<ul style="list-style-type: none"> ➤ Coastal has continued to develop during the year and can evidence positive outcomes for a number of recipients 	<ul style="list-style-type: none"> ➤ The further remodelling of mental health services maintains its focus on independent living
<ul style="list-style-type: none"> ➤ There are a number of positive initiatives within sensory and disability services to support specific service user groups 	<ul style="list-style-type: none"> ➤ Complete the integration of local substance misuse services

<p>➤ Our Adult Placement Scheme has been redesigned within a supported housing model</p>	
<p>➤ Our welfare rights service continues to be very effective in maximising the income of a number of vulnerable families and adults</p>	
<p>➤ Positive development within substance misuse services to have an integrated service model</p>	

4. Shaping Services

This includes our planning and partnership work, commissioning and contracting and resource management

Planning and Contracting

We continue to be committed to keeping the service users at the heart of our planning and care management processes and we continue to work with our partners to meet the needs of the local population. There have been some changes to our strategic planning mechanisms which reflect the growing collaborative agenda and considerations regarding planning and development capacity following the withdrawal of the Joint Special Grant.

New ABMU-wide planning and commissioning groups have been established within mental health and learning disability services which are proving extremely important in determining future service models and commissioning requirements. The Council has also made a commitment to join the South East Wales Children’s Commissioning Board from September 2011, with the group being reconstituted with a South Wales-wide brief. This will be particularly important in not only ensuring that independent sector fees and rates are appropriate to need but in also shaping the future market and model for meeting the needs of children at risk of being looked after.

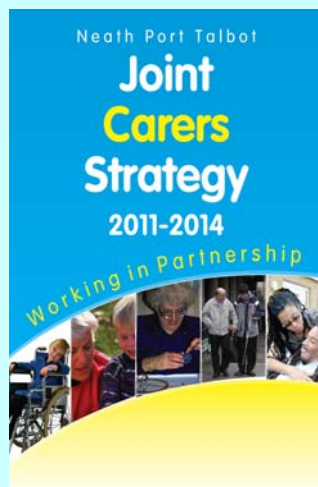
The Council has made a firm commitment to engage with the other authorities across the Mid and West Wales collaborative to develop a regional commissioning hub which will assist in sub regional and local commissioning plans and activity.

There is still recognition that local mechanisms are needed for engaging with partners and service users and carers in service development and planning. The recent learning disability inspection highlighted some concerns for local partners and services users regarding the demise of the local planning group, and this has now been re-established to ensure there is an effective local as well as regional dialogue as plans are considered and new developments put in place.

The TOPS programme and structure provides an excellent example of how commissioning intentions are translated into real service change and how mechanisms are put in place to ensure that all stakeholders are effectively involved. The joint older person plan/commissioning strategy with health for 2010-13 has been translated into a joint policy for older person services approved in December 2009 and the TOPS programme is the vehicle for delivering the objectives and specific changes reflected in the plan and policy. This will continue to be a dynamic process keeping under review the direction of travel as WG requirements unfold and the implications of developments such as the Pembrokeshire Judgement and the Southern Cross predicament are understood.

The Carers' Strategic Group continues to be an effective multi-agency process effectively involving carers and carer service representatives. The production of the new Carers' Strategic Plan 2011-14 reflects the very important work that will now be driven forward by all partners, and will have a significant influence on the ABMU-wide joint carers plan to meet the requirements of the new Carers Measure.

Good Practice: CARERS STRATEGY



The Joint Carers Strategy 2011-14 is the second strategy for unpaid carers of all ages within Neath Port Talbot. The aim of this strategy is to:

- Improve the quality of life for carers and the people they care for
- Promote inclusion by providing support to Carers to ensuring they are not denied the life chances available to other residents of Neath Port Talbot.

Unpaid Carers have been integral to developing this updated strategy with Carer representatives on the Carers Strategy group; in addition the views of carers have been gathered through specific events and a Carer's focus group meeting. A range of organisations including NPT CBC, AMBU, CVS, NPT Carers' Service, The Pensions Service, Job Centre plus and others have agreed to take steps to achieve the actions stated in the action plan.

Feedback from carers indicate that they have seen improvements in the 3 years since the launch of the first joint Carers' strategy 2007-2010 in the areas of information, recognition and support for carers. Specific achievements during this period include; development of a bilingual Carers' Handbook, greater number of information events for carers; the development of a multi agency protocol to identify, assess and support young carers and their families.

Overarching all of this, the Health, Social Care and Well Being Strategy continues to have the crucial role in securing wider improvements in health and well being and in articulating our agreed priorities with partners for service change. The delivery of the new strategy is overseen by the Local Service Board as the key partnership forum within the County Borough, with a Health, Social Care and Well Being Executive Board responsible for reporting to the LSB and co-ordinating the various work streams.

There are effective and strong links between the wider CYPP, the SCB and the tier one children services programme. Jointly agreed safeguarding priorities

between the Health, Social Care and Well Being strategic process and the CYPP have been reflected in both strategies. The CYPP continues to play the vital role in the development of preventative service and in analysing and seeking broad based solutions to the growing demands placed on children services. The chairperson of the SCB now attends the Local Service Board in his safeguarding capacity.

It is our intention to update our commissioning plans for older people services and for physical and sensory disability services by the end of the financial year, and to revise our plans for children, learning disability and mental health services. The WG Commissioning Guidance produced in August 2010 will provide the framework for the plans with implementation continuing through the TOPS and TASC mechanisms and the children service tier one programme.

The need to transform services for younger adults (TASC) has been included in the Council's Corporate Plan within its improvement objectives. Work to scope the initial areas for review will take place in the autumn of 2011 and will be driven forward by the Head of Community Care and Housing Services on her return from maternity leave.

Robust contract monitoring arrangements led by care management services have been put in place in learning disability services which have sought to build productive relationships with both internal and external providers, and to continue to develop services to meet the identified needs of service users. Individual Service Agreements have been revised and are being used by care managers within the Community Support Team to begin to incorporate person centred planning and focus on outcomes.

Whilst every effort is made to engage service users in shaping services, it was agreed during 2010 that representation at the Learning Disability Forum was not an appropriate forum for service users to attend. Consequently, the contracting team comprised a directory of all service user contact details with a view to circulating a service user questionnaire. The results of the questionnaire will be circulated during 2011-12.

A process for monitoring the Adult Family Placement Scheme was established and is now in place and active.

Joint monitoring visits for all placements funded partially or fully with the Health Board are in place with the exception of learning disability services.

NPT continues to host the regional consortium for procurement of learning disability and mental health placements. With the support of the Welsh Local

Government Association and via the contribution of Mid and West Wales partner authorities, a co-ordinator post has been funded for a year based at NPT which will consider the future development of this project.

During 2010/11 a decision was taken to modernise the in house residential care service by replacing the Council's existing homes with 4 newly built homes and to seek a non statutory partner to develop, construct and operate the new homes whilst taking over the running of the Council's existing homes in the interim. A work programme was developed and implemented in 2010/11 with two key objectives. Firstly, to maintain and ensure continuation of services in the existing homes in the transition period and secondly to progress a European Procurement Process for obtaining a partner(s) for the redevelopment project. The project is well advanced with all targets achieved in 2010/11 with a transfer date of February 2012. (See Shaping Services for more detail).

Ongoing dialogue with external providers of residential care continued throughout 2010/11, and specific meetings were held to develop a more robust, open book approach to the settling of fees. In March 2011, the Council approved a 4 year strategy for increasing fees to providers of older people residential care.

Robust contract monitoring arrangements have ensured that all external providers of domiciliary care services have met quality standards and are complying with the terms and conditions of the contract. Regular performance reports evidence that the Authority continues to achieve value for money and that the tender process has achieved the aim of addressing capacity issues in outlying communities within the County Borough.

Following the settlement of the 2011-12 budget, the Council approved a recommendation to reduce funding for learning disability, mental health and children services placements by 2.5% based on the evidence from the regional procurement work. A 1.7% reduction was also agreed with third sector providers for 2011-12. Meetings were held with all providers to discuss/confirm reduction in funding. Further work will continue with third sector providers to ensure value for money and set in place contractual arrangements offering greater sustainability of the service. Work is also ongoing to involve scrutiny Members more directly in the role of performance monitoring.

Good Practice: Champions of Dementia Care

Our Older Person Services Training and Development Officer (TDO) is working with partner independent care providers to train and develop staff in delivering a person centred approach. The Council has established a ‘Dementia Residential Service Standard’ expectation which we anticipate, over time, will be met by all care providers. The focus is on making a real difference through changing culture and helping staff begin to look at their role with a fresh perspective. They feel valued, have more self esteem and are then in a position to provide care that they would want for themselves. The training and participation ensures that this culture can grow and develop with managers and owners being actively involved.

One independent care home has now completed the whole training agenda of ‘Champions of Dementia Care’ with the TDO, and this has introduced a huge change of culture and clearly demonstrates well being can be achieved which can be seen and felt when visiting the home. The home owners received a gold level award in March 2011 for reaching the Dementia Service standard, with other providers receiving silver and bronze awards. Monitoring, support and appraisal will be ongoing to sustain the real benefits achieved.

A key priority in 2011/12 will be to realign procurement, contract monitoring and performance management functions within the Directorate to ensure availability of the required contracting capacity and management information, which measures quality, outcomes and cost effectiveness to inform commissioning strategies.

Strengths	Improvement Priorities
➤ Robust contract monitoring arrangements	➤ Evaluate tender documentation from potential bidders for residential care contract.
➤ Coordination of regional procurement project (Learning Disability Services)	➤ Establish monitoring arrangements post contract award/transfer
➤ Bi monthly provider and accommodation group meeting well established	➤ Establish ‘open book’ dialogue with external residential care providers

➤ Development of Web Page in Learning Disability Services	➤ Re negotiate/re tender contract for Domiciliary Care Services 2012/13
➤ All commissioning/contracting staff undertaking NVQ levels 3-5. (Commissioning, Procurement – Contracting)	➤ Realign structures to strengthen procurement, performance management and contract monitoring
➤ Strong engagement of stakeholders and people who use the service and their carers in the key strategic change programmes	➤ Sustain the momentum of the TOPS programme in order to deliver the necessary change
➤ Development of regional planning and commissioning arrangements within the Health Board footprint	➤ Develop robust commissioning plans for all service areas
➤ Comprehensive and robust analysis of need underpinning strategic initiatives	➤ Develop involvement and consultation with all stakeholders as the TASC programme is initiated and developed
➤ Strong commitment to partnership working and a growing evidence of collaborative services/projects	➤ Ensure dialogue with partners and service users and their carers is maintained at a local as well as regional level as the collaborative agenda develops

Financial Stability - Resource

Ongoing financial monitoring and reporting arrangement continue to be robust, especially important given the continued demand pressures experienced throughout 2010-11. The anticipated level of general reserves required to meet these pressures was not as significant as initially thought during the revised budget process, and this along with savings elsewhere in the Directorate, has meant that a reasonable social services reserve has been established for 2011-12 to meet anticipated demands which will include the decision to increase independent residential care fees by 5.7% for 2011-12 after the budget had been finalised.

To meet the financial pressures placed on the Council it has a five year financial plan in place which is updated annually.

In 2010-11, the Council approved a Workforce Agreement which included revised terms and conditions to be implemented from April 2011. The revised terms and conditions have resulted in the following savings being made to the Directorate's budget:-

- Reduction in premium rates - £554k
- Car allowances - £256k
- One year pay contribution of 2% - £1249k
- Early retirement/voluntary redundancy - £917k
- Revised sickness policy, 'Maximising Attendance at Work' - £104k

In 2010-11, the revised sickness absence policy 'maximising attendance at work' was piloted in the in-house homecare service. The pilot saw a marked reduction in sickness absence rates across the service with an overall reduction of 34% in 2010-11.

Work commenced in 2010-11 to review the efficiency of the in house home care service. A 'systems review' approach was adopted and initial findings demonstrated significant potential savings in processes, back office functions and the further utilisation of technologies. (See Shaping Services for more detail).

During this year, work is ongoing to determine whether independent domiciliary care block contracts are renegotiated, they are due to expire in March 2012, or another tendering process activated. It is envisaged that this will lead to increased flexibility in contracts particularly in relation to call times and duration of calls.

Implementation of the ER/VR scheme has resulted in 39 staff leaving the Directorate, with savings contributing to helping resolve 2012-13 budget pressures in particular. The majority of these staff relate to the need to close the lower house at the Caewern respite complex given Swansea's withdrawal from purchasing a number of the beds. The majority of other posts are within business support functions, and ongoing monitoring will take place to ensure the resilience and business continuity of key services.

A consistent feature of the TOPS programme savings profile is anticipated reductions in Directorate and corporate support costs. Work will continue to both accurately identify these savings as the TOPS programme develops and to ensure that these savings are actually realised.

Planning applications in respect of the re provision of Ty Hapus/Ty Laura are being submitted with a view to the tender being awarded for the construction of the building to be made available for occupation during 2012. Tender

documentation is also being finalised in order to secure a provider to commence operation of the service once the building is ready. Revenue implications of the new development will be confirmed during 2011-12, when tender for provision of the service has been awarded.

In relation to the proposed replacement of Rhodes House and Beaconsview, our current respite services for adults with a learning disability, the model site and design have now been agreed and this is progressing through the planning process.

The systems review of children’s services is due to be completed during 2011-12. A savings target of £354k is included in the FFP, to be achieved following the implementation of the outcome of the systems review.

Strengths	Improvement Areas
➤ Forward Financial Plan	➤ Corporate review of procurement, H.R. Finance & IT
➤ Corporate Budget Setting process with clear focus on priorities and service pressures	➤ Embed option and financial appraisal techniques into service development and commissioning processes
➤ Provision of regular financial management information and monitoring reports	➤ Strengthen procurement, commissioning and contracting arrangements with the Directorate
➤ Competent finance team who work closely with SMT and service managers	➤ Review internal support services to reflect changing nature of services required following transfer of residential care services to external provider
➤ Spend to save fund available to enable transformational change e.g. homecare technology	➤ Renegotiate domiciliary care contracts with providers
➤ SMT ½ day sessions dedicated to budget monitoring	➤ Review structure post implementation ER/VR scheme
➤ Implemented Council’s Workforce Agreement	➤ Evaluate tender documentation from potential bidders for re provision of residential care

<p>➤ Successfully negotiated reduction in funding to providers of commissioned services, voluntary and third sector organisations</p>	<p>➤ Prepare tender documentation for re provision of Ty Laura/Ty Hapus disabled respite facility – Children’s Services</p>
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5. Delivering Social Services

This includes workforce management and development, performance management and business planning

In relation to workforce development, the improvement priorities identified last year included a package of inter-dependent priority actions aimed at assisting the Council deliver its five year Forward Financial Plan (FFP) and to prevent where possible the need for compulsory redundancies. As already mentioned, the implementation of an early retirement/voluntary redundancy scheme (ER/VR) has had a significant bearing on reducing any threat of compulsory redundancies.

As highlighted elsewhere, the fundamental review of sickness absence arrangements across the Council and the revised ‘Maximising Attendance at Work Policy’, has had a similar impact on sickness absence levels.

In children’s services, a series of inspections resulted in the strengthening of the management team and the establishment of four additional Independent Reviewing Officer posts. Initial findings from the systems review of children and young people’s services has led to a redesign in service which has seen the trial of school based integrated multi agency teams providing early intervention to individual child and family needs.

The Council’s Tier 1 Transformation Programme provides a framework for fundamentally reviewing and modernising services. The Transforming Older People’s Services (TOPS) programme has made a commitment to modernising older people’s services so that they provide greater choice around both accommodation and home based services. (See earlier). A communication strategy is in place to ensure that staff, residents and their families, Trade Unions and elected Members are kept fully informed of issues throughout the process.

The strong relationship between management and trade unions has been maintained with quarterly Joint Consultative Group (JCG) meetings with the Senior Management Team (SMT) and Head of Service Divisional Teams fully embedded. Corporate representation from HR, Training & Development and Health & Safety Teams are also in attendance at SMT and Divisional Team meetings on a regular basis.

The Directorate SMT held a series of Accountable Manager meetings throughout the year to ensure that the Directorate workforce was kept fully briefed on developments within the Directorate and wider Council. These meetings took the form of workshop sessions to ensure that key staff were involved in decision making and planning.

In 2010, NPTCBC's Centre for Professional Development launched the first National Vocational Qualification (NVQ) for the Commissioning Workforce within the care sector. This is the only centre in South Wales to be offering Level 3/4/5 NVQ in Commissioning, Procurement and Contracting (CPC) for social care and has been commissioned to deliver these awards to 14 local authorities across South Wales.

There is also good local take up of the team manager development initiative developed by the Social Services Improvement Agency (SSIA). This programme is fulfilling a previously identified need for team manager professional development and is proving particularly beneficial to seven of our frontline team managers within children and young people services, community care services and Hillside.

An award ceremony to recognise outstanding care provision in NPT is held bi-annually and last year the Wales and West Utilities Golden Hearts Awards in association with the South Wales Evening Post were held on Friday, 11th February 2011. The event has been hailed as the local social care highlight of the year and celebrated the dedication, high standards and hard work displayed by committed caring people living in the community and those employed by the sector. Thirteen awards were presented to teams, organisations and individuals and the proven success of the event will enable the partnership to take this event forward in future.

Service pressures in children's frontline services have been recognised with additional investment in social work staff. The redesign emanating from the systems review will require staff to work in community focused, multi agency teams at the frontline of service provision. The need to ensure that staff are supported and appropriately trained during transition from 'old' world to 'new' is critical to the success of the system review.

Whilst the systems review of children and young people services is seeking to reduce the bureaucracy attached to social services processes, the increase in the LAC population and rising number of child protection registrations is placing pressure on the business support service (Conference, Review, Adoption & Fostering teams) to meet statutory deadlines. Addressing workforce capacity in these teams is a key priority for 2011-12.

An action research bid has also been submitted to the Creative Councils Programme to draw on lessons learnt from the systems review and to consider what future operating conditions will prevail for the authority over the next 10-15 years and to determine our workforce capacity and development needs.

Strengths	Improvement Priorities
➤ Implementation of Children’s SW Workforce arrangements	➤ Roll out training for maximising Attendance at Work Policy across all areas
➤ Piloting of new Maximising Attendance at Work policy	➤ Update and further develop workforce strategy across the Directorate
➤ Local pay review completed and implemented	➤ Strengthen Business Support capacity in Conference – Reviewing Teams
➤ High levels of staff satisfaction	➤ Develop procurement expertise within the Directorate
➤ Good relationships with trade unions	➤ Realign procurement, contracting, and performance management functions within the Directorate via ‘Management of Change’ process
➤ Investment in social work capacity and career structure with consequential success in tackling recruitment difficulties	
➤ Continued strong policy framework with emphasis on work-life balance	

<ul style="list-style-type: none"> ➤ Commitment to staff development, including management and leadership initiatives 	
<ul style="list-style-type: none"> ➤ IiP Accreditation 	
<ul style="list-style-type: none"> ➤ Continued strong vetting arrangements in place for SS staff 	

We continue to have good processes and systems in place for performance management, which accurately report performance to a number of key stakeholders, of which internal quarterly scrutiny committees, Welsh Government and Care & Social Services Inspectorate Wales – ‘Narrowing the Gap’ are three such examples. Performance reports include local and statutory performance indicators, personnel issues, sickness absence, budget monitoring, case file audits. Additionally, within the last year, there has been a greater emphasis on analysis of needs which underpins and supports the Transformation of Older People’s Services (TOPS).

We continue to encourage interaction with service users and staff through consultation events, periodic survey reports and staff appraisal/supervision. Feedback acquired from these forums assist the Directorate, when shaping future services to facilitate continuous improvement. Recent examples include surveys of the mental health re-hab service, Community Intermediate Integrated Care Service (CIIS) and TOPS ‘What Matters’ event.

The Directorate has made good progress in developing new areas of performance management, analysis, reporting and training. Performance management information systems and processes have been strengthened through systems interventions from which ‘measures’ are being trialled. Examples of this include children & young people’s system and a review of homecare. In addition, the performance management team have more stringent systems in place to regularly collect, collate, analyse and report key performance activity within agreed timescales.

We have developed frameworks and dashboards in Ffynnon to allow us to share electronic information including statutory performance information with our corporate colleagues, other Local Authorities and WG Data Unit.

We have strengthened our processes to examine robustness of reporting performance information for audits and inspections. For example, we have developed a case file audit tool which will be implemented during 2011/12.

We have an ambitious five year work programme to support the implementation of the WG Performance Management Strategy for social services in Wales. This programme seeks to achieve continuous improvements in the delivery of services that are managed, monitored and measured according to modern principles of performance management.

The Directorate’s Performance Management Oversight Groups (PMOG) for community care services has been re-established to challenge existing processes/ information and improve these where necessary.

Within children’s services, a Senior Leaders Meeting (emanating from the recent Systems Review) frequently meets; performance management and the processes that underpin this, are regularly discussed.

We will continue to regularly review processes and systems for providing managers and staff with accurate, coherent and timely key performance information e.g. monthly performance bulletins and further use of Ffynnon. In addition, we will also strengthen performance management and data analysis within the directorate by re-structuring the performance management, procurement and contracting teams. This will allow us to develop electronic links with the third sector and private organisations.

We will continue to support the Council’s comprehensive transformation programme by providing accurate performance information and detailed analysis. We will develop outcome measures which in some cases may replace current prescribed performance indicators.

Strengths	Improvement Priorities
➤ Systems Thinking approach to securing continuous improvement	➤ Fully utilise Systems Thinking approach
➤ Active participant in the WAG lead ‘Narrowing the Gap’ project.	➤ Support the Council’s comprehensive transformation programme

➤ Robust performance reporting processes and systems for monitoring to key stakeholders	➤ Further embrace/develop use of Ffynnon
➤ Supervision & appraisals embedded	➤ Fully contribute to development of Corporate IT Strategy
➤ Scrutiny/Audit – Regular reporting of Performance Management to Scrutiny	➤ Utilise audit and inspection to examine robustness of reporting performance information.
➤ Developed performance measures through systems interventions.	➤ Resurrect Performance Management Oversight Groups
	➤ Re-structure the performance management, procurement and contracting teams.
	➤ Develop links to the voluntary sector, third sector and private organisations.

6. Providing Direction

This includes both the leadership and culture within the Directorate and the strength of the corporate and political engagement and support

During 2010-11 there were a number of changes within the Directorate following the Head of Community Care and Housing’s temporary period of maternity leave and the retirement of some Principal Officers within Adult and Children’s Services. Interim strategic and operational arrangements will end when the Head of Community Care and Housing Services returns from maternity leave in September 2011. Well experienced and good managers have taken the opportunity during this period of change to take on additional responsibility to sustain the quality of leadership.

The Senior Management Team (SMT) continued to encourage employees to improve and shape their services and a series of planned ‘time out’ workshop

style sessions were held to discuss and debate key issues affecting the Directorate.

We continued to support employees who aspire to management positions and during 2010-11 three additional Director employees participated in the Council's Leadership Programme. Additionally, investment in training and development continued across all service areas.

Good Practice: LEADERSHIP PROGRAMME

The Authority has been running a Leadership programme which leads to an Advanced Diploma in Local Government Leadership and there have been three cohorts over the last three years. The purpose of the course is to provide key managers in the authority with the necessary skills and knowledge to become pro active leaders who are able to challenge and test existing models of current service delivery and create innovative alternatives. This has involved interactive sessions with speakers and senior managers in the authority.

The award culminates in an assessment process matched against key elements and as part of this, a presentation to a panel made up of the Chief Executive, The Leader, a Director and a Head of Service is delivered and must have a definitive impact with measurable outcomes. One of the Principal Officers from Community Care has undertaken this programme and recently presented a transformational model of social care to the panel.

This model challenges existing methods of social work and service delivery and proposes a community based model of social work which explores the option of generic social/community work that works within communities and across Directorates within the authority.

The intention is to pilot this in a specific locality in NPT in partnership with authority community based projects and with community leaders and networks.

There is an established formal structure from Chief Executive/Corporate Directors to SMT and divisional management structures to ensure connections are maintained between strategy and operational practice. During 2010-11, formal performance targets were established from Directors, Heads of Service and Accountable managers to be reviewed at annual appraisal meeting.

There is effective two way communication between Committee Section (Democratic Services) and the Directorate to promote the political interface and support the social care and housing agenda. The Social Services Health and Housing Directorate, supported by the Council's Transformation and Innovation Team, continued to lead on a number of key strategic priorities for the Council e.g. TOPS Programme, Systems Review of Children's Frontline Services, and further leading and chairing the regional and local Social Care Workforce Development Partnership and the Regional Commissioning Forum.

In 2010-11, Members actively involved via the scrutiny process in the TOPS programme, the development of the Health, Social Care and Well Being Strategy (particularly in relation to considering the issues of alcohol misuse), the progress in meeting the recommendations of serious case reviews and inspection and in the development of this annual report. The Cabinet Member for Social Care, Health & Housing visited and met with residents, their carers and staff of the residential care homes during the TOPS development. The Cabinet Member for Children has met on a regular basis with children and young people service team members.

A review of the Directorate's communication plan will be required to reflect changes in structure(s) and working process.

The Chief Executive with the support of his Corporate Directors has undertaken an ongoing dialogue with staff from across the council to explain the development of the workforce strategy and to take account of any issues raised. This had a significant bearing on the strategy being supported by the workforce through a trade union ballot, as did the very effective relationship between members and the trade unions.

There is a strong and consistent support for social services across the Council with a good understanding of the issues and pressures facing the Directorate. There are good links between the corporate aims of the Council and those for social services, and the revised Community Plan strengthens the focus on maximising independence and safeguarding and protecting vulnerable children, adults and families. Priorities within the Community Plan, the Health, Social Care and Well Being Strategy and business plans are consistent. The Local Service Board is increasing its importance in ensuring the key partners sign up to and are engaged in the transformation work. This is particularly exemplified through involvement in the children and young people service systems review.

There are good relationships between the Lead Director for the Children Act, the Director of Education, Leisure and Lifelong Learning and the Director of Social Services. There is a clear link between the children and young people planning process, the SCB and the tier one children and young people services transformation programme. The Director of Social Services sits on the children and young people strategic planning group chaired by the Director of Education, and likewise the Director of Education is a member of the SCB chaired by the Director of Social Services.

Cabinet leads for Social Care, Health and Housing, and Children and Young People Services are very involved in the issues within their areas of responsibility and continue to show a real commitment to building upon the quality of services provided. The Cabinet Member for Social Care, Health & Housing has played a key leadership role in taking forward the transforming older people services programme.

There is regular engagement with the Leader of the Council, other Cabinet Members, the Chief Executive and Corporate Directors on significant issues and developments affecting social services. Conversely the Director of Social Services has ongoing opportunities to influence broader strategic policies of the Council such as the Local Development Plan, economic development and community safety. There is also a strong recognition within the Council of the well being and prevention agenda with corporate sign up to the NPT health challenge process. Scrutiny arrangements have been further strengthened over the past year and this was recognised at a recent national awards ceremony. This work will continue to develop.

Strengths	Improved Priorities
<ul style="list-style-type: none"> ➤ Management development programme established; a number of Social Services, Health and Housing Directorate attending Leadership Programme 	<ul style="list-style-type: none"> ➤ Review Directorate's Communication Plan
<ul style="list-style-type: none"> ➤ Staff empowered to bring about change 	<ul style="list-style-type: none"> ➤ Succession Management Planning and review of management structures post systems review of Homecare, Children's Services

➤ Recognition of effective leadership and culture via inspections, appraisals, change agenda. (FFP, Workforce Agreement, TOPS)	➤ Evaluation of effectiveness and accessibility of information provided to elected Members
➤ Regular meetings of SMT, Heads of Service/Divisional Teams	➤ Arrange opportunities for Members to experience services
➤ Political priorities aligned to Social Services	➤ Further strengthen scrutiny function
➤ Forward work programme for Elected Members, with opportunity for scrutiny of policy & monitoring services	
➤ Social Services well represented at a corporate level within the Council and seen as a priority area of Council	
➤ Good links between corporate aims of the Council and Social Services	
➤ Lead Cabinet Members demonstrate real commitment to service to build upon the quality of services provided	

To request this document in an alternative format (e.g. Welsh, Braille, audio tape, CD, large print, electronic or another language) please contact:

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