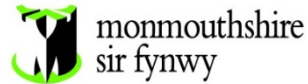


Public Document Pack



County Hall
Rhadyr
Usk
NP15 1GA

Friday, 8 June 2018

Notice of meeting

Joint Select Committee (Adults and Children and Young People Select Committees)

**Monday, 18th June, 2018 at 2.00 pm,
Council Chamber - Council Chamber**

**Please note that a pre meeting will be held 30 minutes prior to the start
of the meeting for members of the committee.**

AGENDA

Item No	Item	Pages
1.	Election of Chair	
2.	Appointment of Vice-Chair	
3.	Apologies for Absence	
4.	Declarations of Interest	
5.	Public Open Forum	
6.	Chief Officer's Annual Report	1 - 70
7.	Safeguarding Report	71 - 118
8.	Disabled Facilities Grant	119 - 132

Paul Matthews

Chief Executive / Prif Weithredwr

MONMOUTHSHIRE COUNTY COUNCIL
CYNGOR SIR FYNWY

Adults Select Committee:

County Councillors: S. Howarth
L. Brown
L. Dymock
M. Groucutt
P. Pavia
J. Pratt
R. Harris
R. Edwards
S. Woodhouse

Children and Young People Select Committee:

County Councillors:
M. Groucutt
L. Jones
L. Brown
D. Jones
M. Lane
M. Powell
T. Thomas
J. Watkins
S. Woodhouse

Added Members

**Members voting on Education Issues
Only**

Dr. A. Daly (Church in Wales)
M. Fowler (Parent Governor Representative)
Vacancy (Parent Governor Representative)
Vacancy (Catholic Church)

Added Members

Non Voting

K. Plow (Association of School Governors)
Vacancy (NAHT)
Vacancy (ASCL)
Vacancy (NUT)
Vacancy (Free Church Federal Council)
Vacancy (NASUWT)

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Welsh Language

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Aims and Values of Monmouthshire County Council

Our purpose

Building Sustainable and Resilient Communities

Objectives we are working towards

- Giving people the best possible start in life
- A thriving and connected county
- Maximise the Potential of the natural and built environment
- Lifelong well-being
- A future focused council

Our Values

Openness. We are open and honest. People have the chance to get involved in decisions that affect them, tell us what matters and do things for themselves/their communities. If we cannot do something to help, we'll say so; if it will take a while to get the answer we'll explain why; if we can't answer immediately we'll try to connect you to the people who can help – building trust and engagement is a key foundation.

Fairness. We provide fair chances, to help people and communities thrive. If something does not seem fair, we will listen and help explain why. We will always try to treat everyone fairly and consistently. We cannot always make everyone happy, but will commit to listening and explaining why we did what we did.

Flexibility. We will continue to change and be flexible to enable delivery of the most effective and efficient services. This means a genuine commitment to working with everyone to embrace new ways of working.

Teamwork. We will work with you and our partners to support and inspire everyone to get involved so we can achieve great things together. We don't see ourselves as the 'fixers' or problem-solvers, but we will make the best of the ideas, assets and resources available to make sure we do the things that most positively impact our people and places.

Monmouthshire Scrutiny Committee Guide

Role of the Pre-meeting

1. Why is the Committee scrutinising this? (background, key issues)
2. What is the Committee's role and what outcome do Members want to achieve?
3. Is there sufficient information to achieve this? If not, who could provide this?
 - Agree the order of questioning and which Members will lead
 - Agree questions for officers and questions for the Cabinet Member

Questions for the Meeting

Scrutinising Performance

1. How does performance compare with previous years? Is it better/worse? Why?
2. How does performance compare with other councils/other service providers? Is it better/worse? Why?
3. How does performance compare with set targets? Is it better/worse? Why?
4. How were performance targets set? Are they challenging enough/realistic?
5. How do service users/the public/partners view the performance of the service?
6. Have there been any recent audit and inspections? What were the findings?
7. How does the service contribute to the achievement of corporate objectives?
8. Is improvement/decline in performance linked to an increase/reduction in resource? What capacity is there to improve?

Scrutinising Policy

1. Who does the policy affect ~ directly and indirectly? Who will benefit most/least?
2. What is the view of service users/stakeholders? Do they believe it will achieve the desired outcome?
3. What is the view of the community as a whole - the 'taxpayer' perspective?
4. What methods were used to consult with stakeholders? Did the process enable all those with a stake to have their say?
5. What practice and options have been considered in developing/reviewing this policy? What evidence is there to inform what works?
6. Does this policy align to our corporate objectives, as defined in our corporate plan?
7. Have all relevant sustainable development, equalities and safeguarding implications been taken into consideration? For example, what are *the procedures that need to be in place to protect children*?
8. How much will this cost to implement and what funding source has been identified?
9. How will performance of the policy be measured and the impact evaluated.

Questions for the Committee to conclude...

Do we have the necessary information to form conclusions/make recommendations to the executive, council, other partners? If not, do we need to:

- (i) Investigate the issue in more detail?
- (ii) Obtain further information from other witnesses – Executive Member, independent expert, members of the local community, service users, regulatory bodies...
- (iii) Agree further actions to be undertaken within a timescale/future monitoring report...

General Questions....

Empowering Communities

- How are we involving local communities and empowering them to design and deliver services to suit local need?
- Do we have regular discussions with communities about service priorities and what level of service the council can afford to provide in the future?

Service Demands

- How will policy and legislative change affect how the council operates?
- Have we considered the demographics of our council and how this will impact on service delivery and funding in the future?

Financial Planning

- Do we have robust medium and long-term financial plans in place?
- Are we linking budgets to plans and outcomes and reporting effectively on these?

Making savings and generating income

- Do we have the right structures in place to ensure that our efficiency, improvement and transformational approaches are working together to maximise savings?
- How are we maximising income? Have we compared other council's policies to maximise income and fully considered the implications on service users?
- Do we have a workforce plan that takes into account capacity, costs, and skills of the actual versus desired workforce?

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Improving Outcomes, Improving Lives

Director of Social Services
Annual Report 2017



monmouthshire
sir fynwy

Contents

To be completed

Version Control

Title	Director's Annual Report 2017
Purpose	
Owner	Chief Officer, Social Care, Health and Safeguarding
Approved by	Not yet approved
Date	June 2017
Version Number	Select Meeting
Status	Draft
Review Frequency	Annual
Next review date	5 July 2018
Consultation	

Alternative formats

We can also provide this document in Welsh, Braille, large print, on tape or in electronic form. If you would like a copy in a different format please contact our Equality and Welsh Language Officer by:

Phone: 01633 644010 or 07793798920


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If you want to comment on the issues in this report, please get in touch:

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 <http://www.monmouthshire.gov.uk/socialservicesreport>

 Claire Marchant, Chief Officer Social Care, Health and Safeguarding,
Monmouthshire County Council, County Hall, Rhadyr, Usk, Monmouthshire,
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Introduction and Director's Overview

This is my third and final report as the Statutory Director of Social Services with Monmouthshire County Council. It represents my personal analysis and reflections of our strengths and the challenges and opportunities facing wellbeing, social care and health in Monmouthshire. As my final report as Statutory Director in Monmouthshire, this is also my opportunity to reflect on the progression over the three years and advise Council how far we have come, and how much further we have to go to be the very best social services in Wales.

At the heart of this report is a vision for wellbeing achieved through connecting people and communities, person centred practice, and quality services. The standard we set ourselves is that every adult and child who comes into contact with social services in Monmouthshire, or who experiences wellbeing approaches from outside of social services, feels listened to and understood, feels that what mattered them (adult, child or carer), was central at all times, even, indeed especially, in the most challenging of circumstances. In reflecting back, and looking forward, the report sets out the key issues that an incoming Director of Social Services, the Council and partners will need to focus on in supporting our most vulnerable citizens to live their own good lives and to overcome barriers to fulfil their potential.

It is a statutory requirement for every local authority in Wales to appoint a Director of Social Services, and for the Director to report to Council annually on performance and outcomes in the previous year, and highlight the direction and actions for the year ahead. The format of the report is required *for all such reports in Wales and has been developed to show* how we are meeting the requirements of the Social Services and Wellbeing (Wales) Act (2014) and the Regulation and Inspection of Social Care (Wales) Act 2016 (SSWBA).

This report celebrates excellence - the impact on the lives of our most vulnerable citizens when we get things right. It also very honestly appraises the challenges we face and the areas where we need to improve and do better. My aim as Director has been to build on strengths within the whole of Social Care and Health, across the wider Council, partnerships, within communities and within people's own lives. People with care and support needs are part of every community and have the same aspirations and goals as everyone else. One of our main leadership roles in social services is to advance social justice for all: to work effectively with people, communities and partners to reduce and remove the barriers that people experiencing disability, disadvantage and inequality encounter in accessing the opportunities and life chances available to the rest of the population. The development of a Social Justice Strategy¹ means that our most vulnerable citizens are at the heart of every aspect of policy, strategy and practice in Monmouthshire County Council

Social services is a core responsibility of local government in Wales. Success in social services is as much dependent on its centrality to the whole authority priorities and the quality of corporate leadership and support as it is of the professional leadership and accountability vested in the statutory director. In this last year the Council refreshed its corporate business plan for the next 5 years – *A Monmouthshire that works for everyone*. The synergy of the corporate plan, its title, its purpose, to *'build sustainable*

and resilient communities that support the wellbeing of current and future generations', with the purpose of social services is evident. The alignment, understanding, appropriate challenge and scrutiny and practical application of support to social services is also evident in through Council meetings, Cabinet, Select Committees and the senior leadership team. Practically, this is demonstrated through policy priorities such as social justice, safeguarding, tackling loneliness and isolation. It is demonstrated through the support afforded through budget rounds, the understanding of the service and financial challenges facing social services and the support from around the whole authority leadership table to address those challenges. The Council's corporate parenting duties are well understood by officers across the Council and considerable progress has been made in the last year areas of participation and engagement, employment and training opportunities and housing and accommodation by colleagues across the Council working with partners. A new corporate parenting strategy² is in place which sets out how the whole Council (officers and members) will work together to fulfil our role as parents to our looked after children (LAC) and care leavers. Finally, this whole authority support is demonstrated by the ownership in every part of the Council of safeguarding with Council members and officers understanding their responsibilities and demonstrating active commitment to implementing all aspects of the Corporate Safeguarding Policy and a culture of learning and review. Its hard to articulate but the culture of the Council which is to learn, support and address transparently problems when they arise, with clear accountability and strong governance but resisting a blame culture, means that Monmouthshire has the environment for social services to not only survive but thrive and contribute to a rich corporate whole.

Reporting in line with the SSWBA means the report is balanced between assessing how well we are promoting and supporting wellbeing and preventing the need for social care services as well as assessing need and securing services for people with care and support needs. Reporting on wellbeing a whole County understanding and actions to addressing the issues which determine people's health and wellbeing. Long term and sustained actions which address the root causes of deprivation, disadvantage and adverse experience which characterise the lives of many people we work with in social services. It also needs immediate, evidence based actions to mitigate the impacts of those adverse experiences. A partnership and community development team is working with community leaders and partners to understand the strengths and priorities for development of our communities. This approach to asset based community development builds on the strengths of communities and the people that live within them – complimenting the approach to understanding and building on individual's strengths in social work practice.

Supporting social services and wellbeing requires really effective partnership working outside of the Council as well as within it. People do not live their lives in the 'bubble' of social care and health services. Confident and progressive social services are outward looking in their focus. 2017/18 saw the growing maturity of a range of effective partnerships. At a regional level, the Regional Partnership Board (RPB) has developed its area plan is area plan for health and social care services in the Gwent region. The RPB effectively worked with stakeholders, citizens and providers to develop a coherent set of priorities and performance measures to meet the needs of our population identified in a comprehensive assessment. The RPB has, through its

investment of Integrated Care Fund (ICF) monies in line with those priorities, developed some innovative and creative services and approaches. These include the My Mates, a scheme initially developed in Monmouthshire to enable people with disabilities to develop friendships and relationships. ICF also supports a range of services to support people to live well and independently following a period of ill health or hospitalisation and services for care leavers.

In addition to partnerships at a regional level, beneath the Public Service Board, partnerships are driving important well-being priorities – the Ageing Well partnership is developing dementia friendly communities across the County and the Children and Families Partnership is focussed on emotional resilience and good mental health in children and young people. Finally, and most impactful, at a local community level, partnerships of community leaders, volunteers and third sector organisations are coming together around a common purpose. There are fantastic examples in all parts of the County – the Bridges in Monmouth, developing community leaders, volunteering for wellbeing throughout the County, Abergavenny Community Centre and the ACE Centre in Abergavenny, the Palmer Centre in Chepstow.

The Social Services and Wellbeing (Wales) Act (2014) (SSWBA) came into force in April 2016. The opportunity in Monmouthshire that the SSWBA presented enabled us to focus on wellbeing as well as social services – to catalyse well established partnerships and develop new connections to plan and develop practice and understand assets and opportunities within localities to develop early help and prevention and connect people and families with each other and the communities in which they live. This joined up approach is at the heart of delivering the aspirations of the social justice agenda – addressing both the root causes of inequality as well as mitigating its impact on our most vulnerable citizens. This focus is fundamental to enabling people to live the lives they want to live without the need for social care support at all, reducing the need for formal support. That is what matters to all of us – the impact of loneliness and isolation impacts on us disproportionately at the vulnerable times of our lives – as we get older, experience ill health or disability, or if we experience difficulties in our childhood.

Getting this right is also fundamental to the financial sustainability of social services in Monmouthshire, as in the rest of Wales and across the United Kingdom. The challenges we face of an older population, fewer people of working age to fulfil paid, and unpaid caring roles, rising numbers of looked after children and shortages of local foster carers, the fragility of the social care provider market and the rurality of our county are particularly acute. These significant issues all represent risks to the Council delivering our vision for social care, to our financial sustainability as we have to procure services at higher costs due to insufficient locally developed services. Most importantly, these issues present a risk to people getting the right service for them, at the right time, in the right place, and the cost of some service presents a barrier to the investment of scarce resources in preventative approaches

My approach in this annual report is to use as many sources of information and evaluations as possible to understand the quality and impact of our social services and well-being activities on people's lives. I try hard to resist the temptation to espouse opinion without evidence. We need to understand what contributes positively to wellbeing, what good practice and good quality care and support looks like, get the

basics right consistently whilst enabling bespoke and creative solutions to the complexities of individual lives and major service risks. There is a range of information in this report – some of it the performance measures reported to Welsh Government (although it is acknowledged some of these are better indicators of good performance than others. We have worked in partnership with the Institute for Public Care (IPC) as an independent academic partner to our children’s service improvement programme and benefit from the advice of an External Reference Group (ERG) of experts in children’s services and education.

Equally, the feedback from people through complaints, compliments and comments and stories which demonstrate in qualitative terms the difference that has been made are important in painting the whole picture. This year, we have been working to implement a methodology called the most significant change to understand in depth the interventions which make a difference in people’s lives so we can use this knowledge to drive the way we work.

The SSWBA is focused on people rather than adults or children’s services and this has enabled the beginnings of a common approach to practice, culture and quality of care across adults and children’s services. In Monmouthshire, transformation and improvement has been practice-led in adult and children’s services. Reflecting back, adult and children’s services were in very different places three years ago – in terms of vision, workforce, culture, practice, quality and performance. There has been significant and sustained progression in all those areas in children’s services which mean they are now well placed to move out of ‘improvement’ into excellent and transformative work. External, independent review, that at its best practice in children’s services is of the highest standards of child focused practice³, although there is also clear guidance on where we need to improve further to ensure we are consistently achieving that high standard. Adult services in Monmouthshire, were at the fore of influencing the person centred practice which is embedded legislatively in the SSWBA through the ‘what matters’ conversation, and have continued to build on these strengths through a focus on outcomes and relationships in aspects of practice and commissioning. There is some evidence through individual complaints and case reviews that person centred practice is not embedded in all parts of adult services as fully as we would like, and the actions needed in children’s and adult services to achieve consistently high quality of practice are the same.

To date, the improvement and transformation journeys in children’s and adult services have progressed in parallel; largely because of their very different starting points. The destination and vision for all people in Monmouthshire is set. The foundations for more joined up delivery of a unified social services offer are laid: through, common leadership positions, a well- developed understanding of the importance of intervening early and preventing escalation of need, positive working with through partners, person centred practice, progressive commissioning and effective safeguarding. Really seeing through the benefits of this foundation work, to be at the leading edge of the next phase of transforming practice and lives by bringing together culture and practice in adult and children’ services, is the huge opportunity for social services in Monmouthshire in the next three years.

My previous annual reports focused on the challenges and improving position of children’s services in Monmouthshire. We are entering the final year of a three year

practice led improvement programme to deliver excellence outcomes for children and young people and overall progress over the first two year has been very positive and we are where we are well placed to move from improvement to sustainable transformation and the best possible outcomes for the children, young people and families we work with. The starting point for any improvement programme is a stable, permanent workforce who understand the role they are being asked to do and have the training, support and systems to enable them to do a really good job. We are now in a position in Monmouthshire where we have that workforce. This is a truly fantastic achievement and reflects the leadership focus on everything we need to do to make Monmouthshire an employer of choice for children's social workers. Why do social workers want to work for us, and , critically, stay with us. The 'offer' when they work with Monmouthshire reflects the other areas of focus in our improvement programme:

- A model of child centred practice;
- Purposeful leadership, passionate about children's services and committed to addressing the most challenging problems and removing barriers to people in doing their jobs;
- A culture which promotes transparency, reflection, learning and review to drive continuous improvement;
- Active understanding, management and mitigation of risks, at an individual practice and service level;
- A commitment to elimination of the need for agency social workers in children's services;
- A redesigned offer for early help and prevention and improved multi-agency working including primary mental health services;
- Significant improvements in timeliness of decision making at the front door of children's services, child protection and in legal planning processes;
- Use of data and information to enable people to make decisions based on evidence and facts;
- Examples of excellent practice which now need to be modelled and embedded to ensure consistently high standards, supported by quality assurance and supervision systems.

The numbers of Looked After Children (LAC) increased slightly in the last year (whilst other Welsh authority areas have seen more significant increases) and a reduction in the numbers of children on the Child Protection register. Overall there is a clear improvement trajectory which will be evidenced through this report. Going into the third year of the improvement programme there are key priorities for improvement which will form the priorities for the service:

- Fully implementing the redesigned early help and preventions service;
- Recruiting sufficient numbers of skilled Monmouthshire foster carers to accommodate children in county,
- Continuing to improve the consistency of social work practice, systems of management oversight, supervision and quality assurance
- Working with regional partners to implement new models of residential step down provision in the Gwent area
- Continuing to deliver the court improvement plan, supporting improved standards of practice and working to support our workforce in the court arena.

- Addressing the significant financial challenges driven by the high costs of residential and independent foster agency (IFA) placements when compared to other models of provision.

The continued understanding and support of the Council is critical as we move into the next phase of our improvement programme.

Adult services in Monmouthshire has been on a transformation journey for the last six years – we have supported our workforce to have meaningful conversations to really understand what matters to people and to work with them to define their own outcomes. Relationships are at the heart of this way of working, most importantly the relationship with the person with care and support needs and their carers. The work to improve practice will never be complete and further work is needed to embed quality assurance work in adults as well as children’s services to ensure that we are getting the basics of practice right consistently.

Relationships with partners in the NHS, the rest of the Council and with providers of social care services are, of course, critical. Integrated health and social care community services delivered from resource centres in Mardy Park, Monnow Vale and Chepstow are at the centre of a locality approach in which social workers, therapists and nurses work together; organising interventions around people, not organisational or professional barriers. The further integration of older adult mental health services into locality working, Mardy Park particularly has seen considerable development in the last year, has really enabled us to develop around the needs of people and carers.

Adult and children’s disability services have come together and are now co-located in Usk, as well as starting to develop locality working. Relationships with primary care through the Neighbourhood Care Networks (NCNs) and integrated wellbeing networks have developed further. There is an opportunity to integrate further in the coming year to manage scarce primary and community resources and connect people to the community support they need more quickly.

Approaches to supporting people with disabilities to live the lives they want to live have developed from strength to strength in the last year. My Mates is supporting people with disabilities to develop friendships and even closer relationships. In the last year membership numbers have increased, more social opportunities facilitated including club nights out, a Christmas Ball, coffee shop meet ups to name but a few. My Mates has even celebrated its first engagement between two members– a real measure of success. My Mates is the latest in a series of responses to what people tell us matters to them in terms of living their own good life. My Day, My Life day opportunities has been re-energized and is supporting people to participate in the community through social and volunteering opportunities. There is a reduced reliance of paid staff and some people no longer need support at all – an active example of how doing the right thing, doing what matters, is also the most cost effective solution.

The most significant challenge facing adult social care in Monmouthshire (as in many authority areas) is securing the fragility of the social care market, particularly the market for domiciliary care. This means there can be a delays in people receiving the care they need, as quickly as they need it in the last year. Some people have been delayed in hospital, as evidenced in the numbers of delayed transfers of care. More

people have been delayed in the reablement service. Some families have had to provide additional support until care is in place. Relationships with care providers have developed really positively at a local level, but the nature of the provider market means there can be significant risks to provision if providers change their business models or experience financial difficulties.

The particular challenges in providing care in a rural county, and securing a care workforce in a county with such high employment levels means we face greater challenges than some other areas. The economic value of social care to the economy is significant – a recent report concluded that the sector is estimated to support 8% of all jobs and £2.2-£2.3 billion of all GVA. The challenge for local authorities, working with others, is to demonstrate that the social care workforce is valued in every sense in a way that reflects in the contribution it makes economically, socially and most importantly to individual's lives. The social care sector is highlighted as one of the top 5 growth areas in the Welsh Government's flagship policy 'Prosperity for All'. There is a real opportunity locally and regionally for the opportunities the small and medium enterprises which provide the majority of social care to feature more prominently in our enterprise priorities.

Over the last three years we have been 'Turning the World Upside Down' in Monmouthshire – this means we have been fundamentally challenging the way that domiciliary care is commissioned. Monmouthshire County Council's Care at Home service has been completely remodelled to provide relationship based, flexible care at home. The work with independent sector providers to redesign together the basis of care at home has advanced. This is a long term transformation programme – the last year has seen some real gains through a collaborative culture which has supported creative responses and working together by providers to meet the considerable challenges of meeting demand for care at home, particularly in the winter months. The next year will see the scaling up of a regional approach to developing a social care workforce academy, to support the promotion of the sector, clear career pathways and the registration of the workforce by 2020.

There is much to do, and risks to manage, but overall the improvement journey is well-established, well-led and sustainable. Adult social services in Monmouthshire has demonstrated it is well placed for future challenges and most importantly there is evidence when we get things right we are actively transforming lives. There are fantastic examples of innovation and transformation – particularly the development of *My Mates* and the continued excellent support to carers. The challenge for adult services is to continue to be vigilant and outward looking, to address the most significant risks at pace, to improve quality assurance systems, to achieve consistently good practice across all teams and to deliver plans to improve access to care at home.

There are real strengths to build on in both adult and children's social services in Monmouthshire. There are also things we need to improve in both parts of social services. In this report I have recognised particularly the need to improve consistency of practice and address critical issues in the availability of care (foster carers and residential provision for children and domiciliary care for adults. We have also demonstrated that when we get things right, work together with partners in the Council and outwith, that the difference that can be made to people's lives is truly at the leading edge of social services anywhere in the UK.

Throughout this report, I will try to tell the story of what good looks like, what it means for people when we get things right. For many years I have worked to the mantra in Social Services 'doing the right thing is also the most cost effective thing to do'. This seems obvious in many ways. Invest in reabling people to keep them independent and they will need less long term care; invest in in-county fostering provision and fewer children are in expensive placements away from home and thus losing connection with their local community. It is clear, however, that this axiom is being more severely tested than ever – the challenges of reducing public finances, a social care sector which needs to realign the way it works to secure the right workforce care, the demographics of an ageing population and the complexity of needs for children and families. Combined these are a real test of professional and political leadership.

The priorities set out in this report for the coming years are, therefore, focused on service and financial sustainability – doing what matters and doing it right. We need to continue to develop our wellbeing offers to prevent and reduce the need for care and support, we need to bring together transformation of adult and children's services and we need to deliver a transformed care sector. This may seem daunting, but by aligning priorities with our culture, partnerships, practice, systems and most importantly people we are well placed to continue to do the right thing.

This next year is about delivering a positive and sustainable future for Social Care and Health in Monmouthshire and with the continued support of our workforce, council, partners and communities I know my colleagues and successor are well placed to rise to the challenge.

Claire Marchant

Chief Officer Social Care and Health/ Statutory Director of Social Services

Social Services at the Heart of the Vision for Monmouthshire

Building Sustainable and Resilient Communities

Monmouthshire County Council published its Corporate Plan, *A Monmouthshire that works for everyone*⁴ setting out its goals for 2022 in March 2018. The Corporate Plan re-states the Council's purpose of building sustainable and resilient communities. Priorities for vulnerable people, families and communities, and improving outcomes and opportunity for everyone. This purpose is about linking social and economic regeneration, maximising the contribution and well-being of the people in our communities.

Each of the five priority goals include a number of programmes, twenty-two in total, to which the Council is committed between now and 2022. These are:

- The best possible start in life
- Thriving and well-connected communities
- Maximise the potential of the natural and built environment
- Lifelong well-being
- Future-focused Council

The Public Service Board well-being objectives and the Monmouthshire County goals are set out in **appendix 1** to this document.

Well-being, Social Care and Health in Monmouthshire

The purpose of well-being, social care and health in Monmouthshire is well aligned to the vision for our county: *'to maximise opportunities for all people to live the lives they want to live and the positive outcomes they identify'*.

Given the focus of our children's services improvement programme, we have expanded this purpose into the following vision:

'It is our priority to ensure that we will find safe and appropriate ways to work with families to help them meet their children's needs, including their need to be protected from harm. We will, whenever it is safe to do so, always look for ways to support children and young people to remain with their birth family or extended family and avoid the need for children and young people to become looked after.'

Our purpose drives everything we do. It shapes our culture, our practice, our systems, how we develop our people and invest our time and resources.

Underlying our purpose are four principles:

- Listen to people to understand what matters to them;
- Build on strengths, not deficits;

- Connect people to other people and their communities;
- Relationships at the heart of care and support.

This means in practice we need to spend time in the whole of social services having the right conversations so we work with people on the basis of what matters to them; recognising their strengths, capabilities and the resources available to them through their networks of family, friends and communities. This is at the heart of practice-led transformation. We aim to work with people; alongside them, not doing to them. We look to find options and solutions which best meet their version of a good life. This is illustrated in **figure 1**.

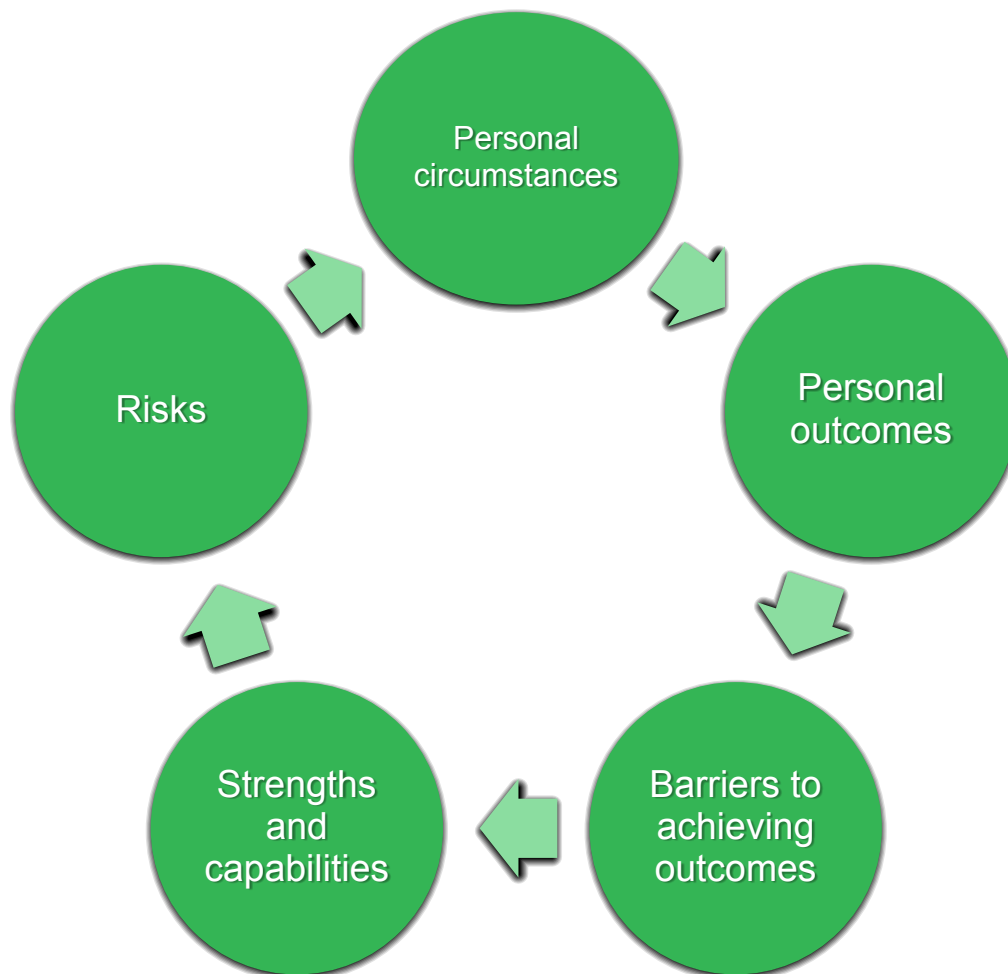


Figure 1

We work in partnership to intervene at an early stage. Our aim is to prevent the need for intensive interventions or high levels of services.. **Figure 2** illustrates a snapshot of what is available to support people's well-being within their communities. It also shows how work with partners and communities to make best use our collective resources and in so doing to help people live good lives while reducing demand for long term social care and health services.

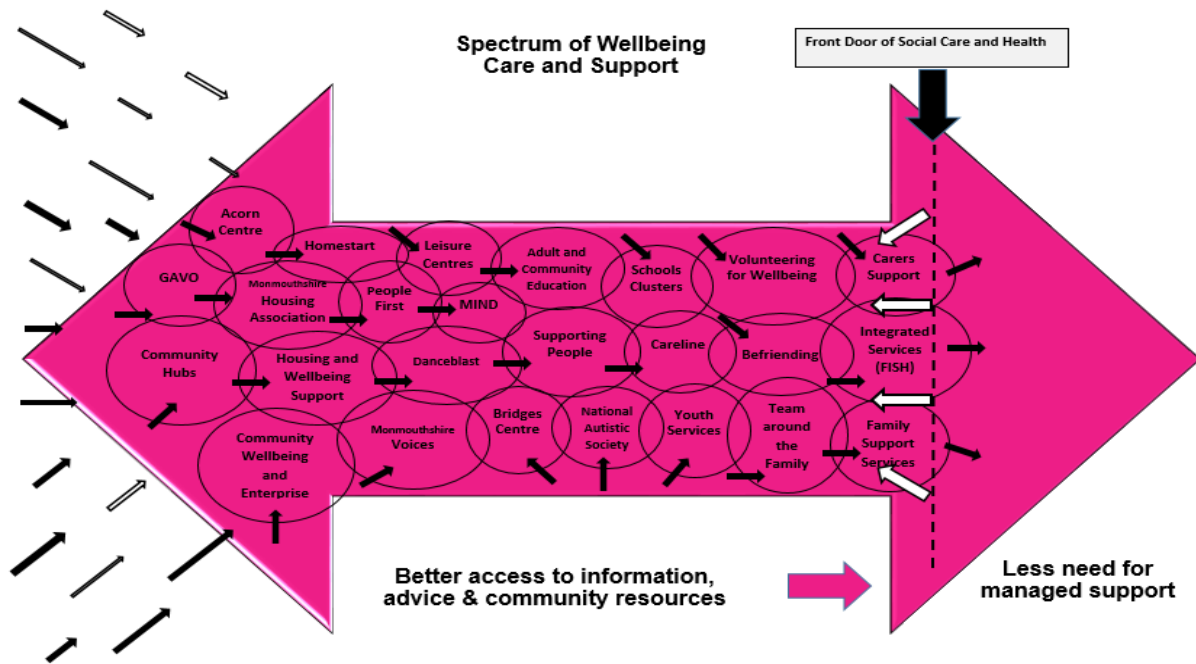


Figure 2

When people do need care and support, we need to work with them, their families and friends, to identify their own natural connections or connect them to support in their communities. People who live in our communities, their families and their friends have the greatest stake in developing those communities as places they want to live and that can meet their needs. Our role is to enable people to engage with and build things that they are passionate about, that can support them to achieve their well-being outcomes.

Monmouthshire's *County that Serves* programme is a Council run volunteering programme, created to help highlight and support volunteering opportunities available within the county. A digital volunteer management system, the volunteer Kinetic platform, has been implemented for volunteer safe recruitment, communication, capturing outcomes and publicity of opportunities. This represents a channel shift and a cultural change in the way we support volunteers in Monmouthshire. Volunteer Kinetic will improve the volunteering experience and also enhance the communication with our volunteers. In November 2017 we implemented a new proportionate and enabling volunteering policy position. We believe recognition means different things for our volunteers. Each year we partner with Gwent Association of Voluntary Organisations (GAVO) to deliver the Monmouthshire Volunteer Achievement Awards. Also on a local level we provide informal recognition and thank you events for our volunteers.

Funded through the Rural Development Plan, the 'Be.' Community Programme (formerly the Community Leadership Academy)' is designed to increase the participation and quality of community leadership. The programme provides a suite of training and personal development opportunities at low or no cost to people who give their own time to support their communities. The Academy has the dual benefit of

allowing individuals to develop their personal skill sets (with associated benefits for employment and the local economy), whilst also bringing about benefits for the wider community by enhancing the quality of community leadership.

Progress to date include:

- Partnering with Bridges Community Centre who are sharing their skills by delivering Inspiring Evaluation training.
- A community volunteer with extensive experience in Health and Safety has developed a course for volunteers leading groups. Dispelling the myths and adopting a practical approach to risk management. Another community volunteer has offered to share their skills, knowledge and experience in using social media. The course and associated information is targeted at volunteers looking to develop skills in marketing and community engagement.
- Working to link like-minded volunteers with others to increase networks, for example one area of success has been local promotion of events. By linking new ambitious groups with established and experienced individuals benefits have been evidenced on both sides.
- A focus on courses for volunteers around wellbeing, these have been well attended and been tried in new geographical areas.
- A promotion campaign through the council tax leaflet, which went out to 44,000 homes, to promote the programme and opportunities to get involved in the community.
- 87 People have accessed the online learning section of the programme, we will look to increase the content and publicity as feedback has been positive.

This approach to wellbeing through contribution and involvement is far more sustainable and supportive of people and families achieving sustainable change or the outcome they have identified than securing a service to do it for them. Our vision for locality working means supporting people to access what is available in the place they live. This is critical to combatting the scourge of loneliness and isolation which impedes people's ability to live the lives they want and their capacity to find their own solutions. Where we do need to commission or provide care and support for people, our aim is that this is flexible and supports achievement of the outcomes that people have identified for themselves.

Our purpose is clear. The remainder of this report appraises how well we are performing against that purpose – what our strengths? What do we need to do better? What are our plans to achieve improvement?

Director's Summary of Performance

How well are we performing against the purpose we have set ourselves?

In my last annual report I set out a number of priorities for improvement to focus where we invested time, effort and resources. The substance of this report reflects our achievements against those priorities, our quantitative and qualitative performance against national and local measures, supplemented with what people who have experienced wellbeing and social services in Monmouthshire have told us about that experience. As indicated in my introduction, the assessment also draws on external independent reviews, internal audits, regulatory reviews and quality assurance, case studies and stories and learning from complaints, comments and compliments.

One of the key challenges in evaluating our performance is developing the right suite of measures and mechanisms for reviewing the evidence of how well we are doing. In 2016/17 we moved to a new suite of national outcome measures for social services in Wales. The new measures are aligned to the SSWBA. Welsh Government have recognised the need to review the performance outcome framework to ensure we are measuring what matters. For this reason it is important to triangulate the information for national performance measures with other information.

Appendix 2 illustrates our performance against some of the most important measures we use. National measures in children's services are better developed and demonstrate progress over time and the positive improvement in performance against the children's measures are clear. The qualitative use of case studies, narrative and story telling is also important in demonstrating the impact of what we do.

Figure 3 illustrates the approach to quality and performance in social care and health.



Figure 3

Overall assessment of wellbeing, social care and health

Adult Services – There has been a continued focus in adult services on practice lead transformation and placing relationships at the heart of everything we do. There has been real progress in developing well-being networks so people can connect to their communities. Strength based practice has continued to embed across teams working with people and their carers, although there is evidence this is better developed in some areas than others. There is a need in provided and commissioned care and support services to focus on really good and consistent standards which are person centred and get the basics right. Quality assurance systems should address all aspects.

The evidence for this assessment is:

Practice in adult services is focused on what matters; the work to ensure this practice is fully embedded is a continuous endeavor. Quality assurance has focused on outcomes in the last year and is being used to improve the quality of conversations, analysis and care planning and the way that outcomes are recorded. There are many individual examples of excellent practice which is having a positive impact on people's lives. There are also examples that sometimes our practice is not person centred. Our culture is to be open, transparent and to work with people and carers to learn and improve when things do not go well and we have been able to use some individual experiences to support us to do this.

There has been a real focus on listening and developing relationships, working with people to identify the outcomes that will make a difference to their, and to support them

to live the lives they want to lead – feedback from adults with care and support needs reflects that this is largely their experience. Practice reviews with social workers in Continuous Professional Development (CPD) panels confirms understanding what matters is at the heart of practice. This is not always reflected fully in the way that work is recorded and this is an area for development in the next year.

We have made real progress in supporting adults with care and support needs flexibly with care and support based on long term relationships. Monmouthshire's Care at Home service is at the leading edge of flexible, relationship centred practice. People with learning disabilities are supported to have fantastic lives, actively contributing to and accessing support in their own communities and developing meaningful friendships and relationships through My Day My Life and My Mates.

Our own quality assurance, external regulatory reports and people themselves they tell us that is the case.

'The care I have had over this period of illness has been excellent. The staff are so kind and thoughtful. All of them have been faultless.'

Feedback received to domiciliary care in South Monmouthshire

Internal services have been developing innovative quality assurance frameworks which address all aspects of what good care looks like. The importance of relationships and compassion is a key driver.

*'To *** and team, Thank you all so much for caring for my mum (**) with such love and compassion, and for the kindness you showed me and my family'*

Feedback from family of Severn View resident

There is more to do to ensure all services provide consistently high standards in all aspects of care and support and that quality assurance is embedded, understood and driving quality improvement.

Not everyone in Monmouthshire gets the care they need as quickly as possible, and the standard of care can vary too much. The vast majority of people receive the care and support they need quickly. We do know some people wait too long for care, either because they are delayed in a hospital setting or in another service. This is largely because of the challenges all care providers, including the Council, face in Monmouthshire Council in recruiting people to work in care. We are working with providers and partners to promote careers in care positively and support carers to access the training and support they need. We have invested in providers so they are able to meet requirements around national living wage, but we acknowledge that until the move away from 'task and time' commissioning is completed terms and conditions of service for the independent sector workforce will vary.

We know that our approach to connecting people and communities in the places they live to support wellbeing is making a difference because we are measuring outcomes and listening to the stories of the difference this is making to their lives. We are working with Swansea University using the most significant change methodology to understand what makes the most difference in people's lives .

Children's Services - Children's services have continued to make significant progress in the last year. There is a stable leadership structure and we have succeeded in our aim of a recruiting and retaining a permanent, stable workforce. Preventative resources have been joined up and targeted through the '*Building Stronger Families*' offer which is having a positive impact. We have a clear model of practice which we are developing with partners and need to deliver consistently. The voice of children and families is central to our model of practice.

*'Thank you *** for taking time to come and assess us. Having had no previous involvement from any of the social service teams, I wasn't quite sure what to expect but she was very understanding and caring and was very thorough in gathering information.'*

Feedback from a family to Children with Disabilities Team

We have made great efforts to improve our commissioning arrangements through implementing the '*Where I am Safe*⁵ shared vision although delivery of increased numbers of local foster carers for Monmouthshire children is our highest priority. We have improved our partnership working to in delivering our collective corporate parenting responsibilities. This analysis is supported by the following evidence:

Workforce - All social work positions in children's services will be filled by permanent members of staff by August 2018. This reflects the positive reputation that we know have and the morale and positivity in the service.

Early Intervention and Prevention - There has been a real focus in the last year to implement an approach to early intervention and prevention which means children and families are getting the right support at the right time. Whilst there is no 'magic number' of children a County with the characteristics of Monmouthshire should be 'looking after', the relative stability of the number of LAC is positive, and the reduction of the number of children on the Child Protection Register (CPR) is an indication that risk is being effectively addressed earlier and that we have developed a coherent approach to 'stepping down' children to support from preventative services.

Improving Social Work Practice - We have continued to work with the Institute of Public Care (IPC) to support independent evaluation of our strengths and areas for improvement – in the last year this work has focused on our work in the court arena and with looked after children and care leavers. In summary, when we get things right our practice is children centred and of the highest standards.

'The best LAC cases had good to excellent involvement of children'

Institute of Public Care

We have seen significant improvements in key performance indicators, such as the timeliness of assessments and low numbers of children being referred onto the child protection register. LAC are supported through the right legal processes - historically, the Local Authority had been criticised for there being a delay in them instigating court proceedings - this is now less than 1 % of children. To improve further we need to address consistency of social workers, practitioners who are child-centred, skilled in direct work and practise from a psychologically informed knowledge base. We need to improve management oversight and supervision systems in all our teams to ensure

our practice, and recording of our practice, is as good as it should be for all our children.

Better Outcomes for children and young people –We have seen positive performance in terms of placement stability – 9 children out of 95 (9.47%) children have experienced more than one non transitional school move. There have been positive performance of our LAC children at key stage 2 and key stage 4. We need to continue to improve local sufficiency and value for money of placements for our children. The highest priority we have is to increase the number of Monmouthshire foster carers caring for our children. Recruiting Monmouthshire foster carers has been a particular challenge in the last year, despite investment in this area. This can mean children and young people lose connection with the local area and the resources within

Corporate Parenting and Care Leavers – In the last year we have reviewed our Corporate Parenting Strategy and improved the way we work as a whole Council to support our children to have the best opportunities in life. The improved working with youth enterprise and housing options is evidenced by improving outcomes around employment, education and training and housing for our care leavers.

How are people shaping our services?

We are committed to involving people in everything we do, working to the principle – ‘nothing about me without me’. In practice this has meant we have worked hard to effectively involve people in strategic priority setting, reviewing and commissioning services, assuring of how we provide services and day to day assessment and care planning.

Working with people to shape strategic priorities for health and social care in the Gwent Region

Effective and continuous collaboration has been at the heart of the development of the Area Plan which sets out our strategic priorities for health and social care across the Gwent region. We have a well- developed citizen panel but in addition engagement, and critically delivery of the plan is being informed by an engagement process with people of all ages and interests across the region.

We have had a couple of years now of the RPB, we have been fully involved in discussions and the work of the Board. We took our citizen panel annual report to them and spoke to it, and offered an invitation to Directors and Executive Members to come to a citizen panel meeting when it is on their patch. It is great that they have accepted this, and so far in 2018 we have had Executive Members attend a meeting in Blaenau Gwent and in Monmouthshire. It has been very good to get an insight as to the difficulties that senior people face – and they don't hold back on our account – so we appreciate the open discussions that are held at the Board'

View of Citizen Panel Member

Working with people to shape wellbeing and social services in Monmouthshire

We have set ourselves the standard that ny service review or development should include people throughout all of its stages, not just as consultees at the end of the process. Some examples of active work with people to shape services in the last 12 months:

- Development of a community development and partnership team who are supporting people and communities to develop and lead community development plans to address the needs of their own communities.
- Surveys of adults, carers and children and analysis of response
- Review and re-commissioning of services for young carers which has fully involved young carers
- Re-commissioning of services for children with disabilities which has been undertaken with the full involvement of families and children
- Development of fora for LAC and care leavers
- Involvement of people in decisions which affect them and their families (100% parents were invited to LAC reviews where it was appropriate to do so)

- Developing models of practice which are based on relationships with the people who we are working with
- Development of advocacy services for children and adults - a regional review of third sector commissioned services in 2016/17 highlighted variations in advocacy provision, and the region has worked with the Welsh Government funded Golden Thread Advocacy Project to set out a regional approach for commissioning and supporting advocacy. Agreement was reached to take a 'co-production' approach, with the aim to develop an advocacy commissioning strategy
- Development of the learning disability and mental health strategies
- My Day My Life, My Mates and My Holidays – people are driving the way in which the services evolve and develop
- Integrated services in all parts of the County are effectively engaging with the communities and supporting new approaches to wellbeing and services to meet the needs that people themselves are identifying e.g. breakfast club at Mardy Park, developing transport solutions.

Promoting and Improving the Well-being of Those we Help

Improving Practice, Improving Lives

What we must report on? – We work with people to understand and support the personal well-being outcomes they wish to achieve.

What does this mean? – Understanding what matters to people, listening to understand and supporting them to articulate and achieve what a good life means to them.

What we said we would do (2017/18 *Priorities for Improvement*)

- Early intervention and prevention – supporting people at the earliest opportunity to live the lives they want to live; preventing / delaying the need for intensive care and support
- Strengthening practice - developing our practice to understand ‘what matters’ to people so we focus care and support where it is needed on what people can do, and what they aspire to do, to overcome barriers to living the lives they want to live;
- Delivering excellence in Children’s Services – a programme to deliver practice-led transformation leading to improved outcomes for children in Monmouthshire - We will deliver year 2 of the Children’s Services Improvement Programme.

What have we done?

Early intervention and prevention for Children and Families

Previous annual reports highlighted gaps in preventative services and waiting times for families to access the right support for them at the right time. To address these deficits a comprehensive review of early intervention and prevention for children and families has been undertaken to ensure we are able to:

- Get families to the right service first time
- Better transition between pre & post statutory intervention and stream-lining pre-statutory intervention
- Create a coherent system of referral and access to pre-statutory threshold intervention
- Create a team to provide bespoke programmes of direct work for vulnerable families to build resilience & reduce their need for statutory intervention at a later stage
- Ensure that there was a robust step-up/step-down process from children’s social services
- Ensure alignment between pre and post statutory support (e.g. Face to Face and BASE)

Figure 5 below illustrates the coherent offer that is now in place.

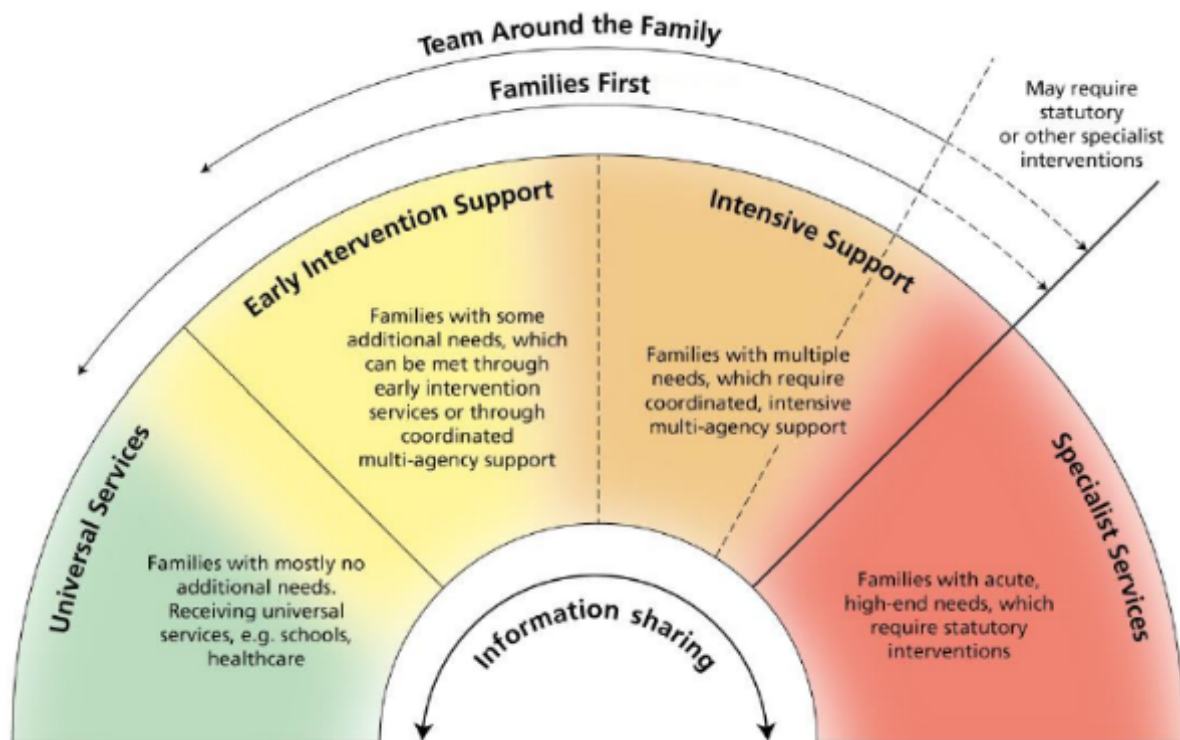


Figure 5

This is a partnership approach to supporting children and families. An early help panel has been established which brings services together the range of early help services into a single system, streamlining referral and interventions. This new way of working ensures that there removes duplication and highlights any gaps in provision that require service development Primary mental health services for children and young people are now embedded in this early help approach, supporting a joined up approach to addressing another critical need in Monmouthshire. The team around the family worker now form part of the Building Strong Families Team and are delivering greater productivity and efficiency in supporting direct work with families from skilled workers.

This approach is already delivering significant benefits. The next steps identified are:

- Fully implementing the Edge of Care resource
- Aligning & growing therapeutic resources for children who have experienced trauma
- Developing a trauma informed workforce
- Aligning pre and post statutory support so families receive support at the earliest point possible and experience a seamless transition
- Developing a coherent strategy for children who are in need of care and support
- Deploying resources to maximise the opportunities children have to experience stability & permanence

Supporting Independence and Reablement for Adults

Table 1 below shows the outcomes for people who have received a service from reablement.

Part b. Those people who are "Independent" following a period of Reablement during the year														
Location on Discharge	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	TOTAL	%
Residential Care Home	1	0	0	0	0	0	0	0	0	0	0		1	0%
Nursing Home Care	0	0	0	0	0	0	0	0	0	0	0		0	0%
Independent at Home	63	84	86	76	87	91	132	99	61	82	94		955	80%
Long Term Care at Home	10	16	16	11	11	14	15	13	6	12	14		138	12%
Hospital	3	5	3	6	2	1	2	3	3	5	5		38	3%
Other	8	8	11	7	7	4	4	4	2	7	5		67	6%
TOTAL Outcomes	85	113	116	100	107	110	153	119	72	106	118	0	1199	100%
Source : MONICCA, Flo														
% Independent at Home	74%	74%	74%	76%	81%	83%	86%	83%	85%	77%	80%			

Table 1

We have worked to maximise the number of people who are able to benefit from reablement as the outcomes, 80% of people living independently at home, are the best example of what a targeted service which prevents people escalating to a higher level of need, can achieve. Managing (potential) demand for care and support effectively has seen the numbers of people in residential placements supported by the Council fall from 236 (2011) to 210 in 2017 despite the demographic pressures we face as a County.

Strengthening Practice in Children's Services

Excellent social work practice, in which the child's voice is central is at the heart of the children's services improvement programme. **Figure 6** illustrates the relationship between the safeguarding and protection, understanding managing and mitigating risk and supporting good practice. The child's voice is paramount.

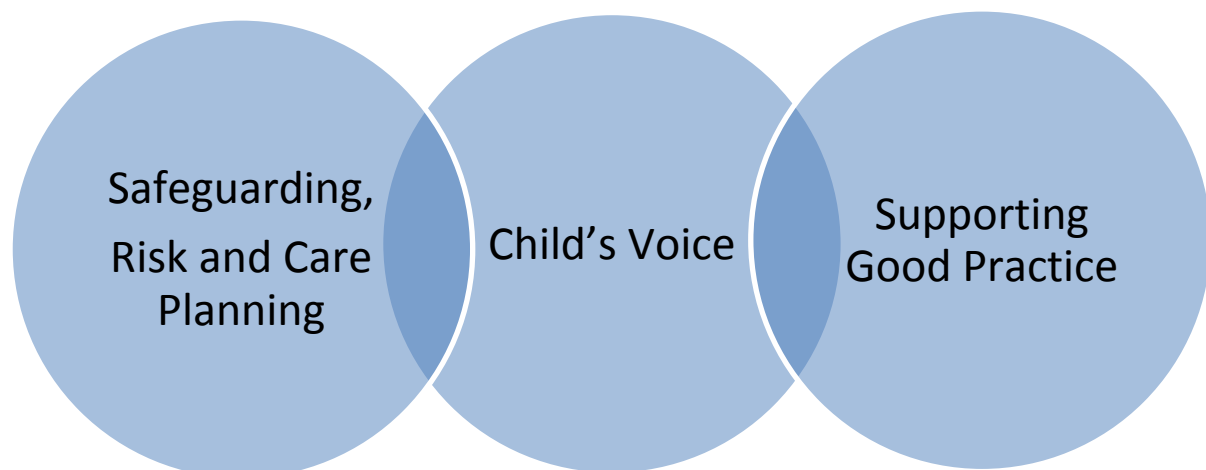


Figure 6

Practice improvement work has focussed on aligning purpose, policies, systems and practice, underpinned by quality assurance around a vision of the child's journey in Monmouthshire. The key areas of work have been:

- Policy, systems and processes – Operational procedures
- Assessment and managing risk – Conceptual frameworks and tools
- Oversight and decision-making – Resource panel, legal planning, complex care
- Performance management – data dashboards, performance management

Improving Outcomes, Transforming Lives – Practice Lead Transformation in Adult Services

Strength based practice, based on working with individuals to identify their personal outcomes, their strengths, their networks and assets, has resulted in care and support packages being delivered in more targeted ways to positively influence quality of life around those things that really matter to the person. This helps people to manage without the need for formally commissioned care and support or a reduced need. This model of practice which is based on understanding people's strengths, and the resources available to them in their own lives, is at the heart of the way adult services works with people with care and support needs and their carers. In this last year adult services have continued to develop practice in this area and gain a greater understanding of how well this is embedded across all teams. Mentoring to support excellent practice and strength based approaches has been developed focussing on the quality of outcomes. There are well established mechanisms – senior practitioner's forums, practice lead leadership group (Oliver) and regular whole service meetings (DIBDOB) are in place to support the continuous focus needed on strength based practice. Practice is highlighting the need for new models of service provision and to commission services in a different way.

Improving practice across all age disability services

Children and adult social workers who work with people with disabilities and their families have come together to develop a common approach to understanding what matters, and developing their practice to enable people across the age range to live their own lives. The aim of this work is to ensure a seamless transition between adult and children's services through a common model of practice which is based on long term relationships. Services are organised around what support is needed. In some cases the most appropriate person from either the Children with Disability Team or Adults with Disability Team has worked with the young person and their families regardless of the age of the individual. This provides continuity for the young person at this critical time in their life. We are using budgets more flexibly across adult and children's services to support what matters to people.

Responsibilities for well-being and social services in the secure estate

2017-18 has been the final year of the implementation phase of our work in the secure estate, under the SSWBA. During the last year our approach to working in HMP Usk and HMP Prescoed has also been closely scrutinised through an HMIP inspection and a 'Health & Social Care Needs Assessment' undertaken by Public Health Wales. Both of the subsequent reports were extremely positive about the contribution of the Monmouth Integrated Services to the well-being of prisoners and the fostering of

strong relationships with National OMS, Prison Health Service and voluntary sector partners provides a solid foundation for our ongoing involvement. The ageing demographic of the prison population locally and the needs of disabled prisoners have informed collaborative work around the adaption of the environment to promote safety, mobility and independence. This has in turn enabled a programme of daily activities to be created co-productively with service-users and trained 'buddies' and utilising skills present within that community, ensured the principles of 'voice, choice and control' enshrined in the legislation, extend to all corners of Monmouthshire. Moving forward, the partnerships are focused on the further development of practice around the care and support of older prisoners and an appropriate 'pathway' for service-users experiencing life limiting conditions.

How well have we done?

What have people told us about their experience?

- 78.6% adults, 78.6% carers and 69.6%% children report they felt involved in decisions about their care and support

What are complaints, compliments and comments telling us about how well we are doing?

- Table 2 provides a summary of complaints and compliments received in the last year

	2017/18
Number of complaints received in the whole of Social Care	62
Number of comments received in Social Care	75
Number of compliments received in Social Care	146

Table 2

Most complaints are resolved at the informal stage of the complaints process, with the team involved. 10 complainants took their complaints to stage 2 of the process during the last year. The 10 independent investigations considered evidence in respect of 59 individual complaints. 18 complaints were upheld. 16 were partially upheld (or were inconclusive or the investigator was unable to reach a finding). 25 complaints were not upheld. The Public Services Ombudsman has not upheld any complaints against Monmouthshire social services in 2017/18.

Whilst each complaint is individual there were some themes which provide the basis for learning: the need to improve communication, concerns about being listened to, treating people with respect, alleged lack of care and funding for transport. A system is in place at a service manager level and within services to ensure actions are taken to address individual issues but also that wider lessons are learned, and learning is shared on a wider basis.

The compliments received reflect the impact on people's lives, often at a time of crisis, when we get things right, listen and support solutions in really difficult circumstances:

*'Dear *** and Team, I am writing on behalf of myself, my brother and my parents, *** and *** to thank you and your team for all the help and advice over the last few difficult months. Your professionalism, kindness, efficiency and high standards are exemplary. Thanks, ****

Family to Chepstow Integrated Team

*'During an end of Care Proceedings handover between *** and Guardian *** regarding ***, she was extremely complimentary about *** work with *** and regarding the quality of the care plan and statements provided. She specifically reported that she was "thankful" to *** for this.'*

Email to Family Support and Protection Team

.What does our performance against national outcome measures tell us about how well we are supporting children and young people to achieve positive outcomes?

- 78.29% adults who received support from the information, advice and assistance service (IAA) have not contacted the service again during the year.
- 87.31% assessments for children were completed within statutory timescales.

What other evidence is important in understanding how well we are doing?

- *The impact of practice change in adult services* – understanding what matters to people and intervening earlier has meant, over time, a reduction in the number of adults receiving traditional care and support services in Monmouthshire. Despite the significant increase in numbers of over 65s and over 85s spite a demographic indicating we would need to be making more care home placements and commissioning more domiciliary care (figure 7).

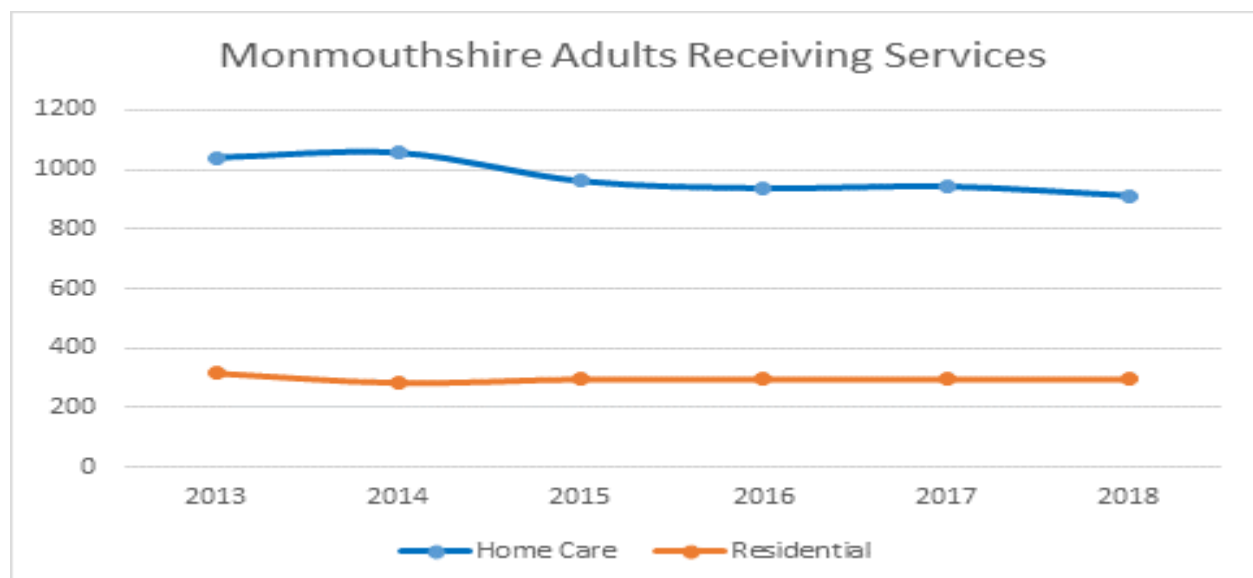


Figure 7

- *The effectiveness of the practice in children's service*

There is evidence through improving performance measures and internal and independent external analysis that practice in children's services is continuing to improve. The timeliness of assessments is improving (87.31% were completed in statutory timescales compared to 74.69% in 2016/17). More children are being

supported to remain living with their families (245 compared to 213 in 2016/17). Decision making in child protection processes is effective with a low number (6) and percentage (5.26%) of children being re-registered. This is evidence that that children on the child protection register are being actively supported. The average length of time for children to be on the register is 227 days.

IPC identified that at our best, social workers in Monmouthshire are *“visibly engaged with children and their carers. Their energy and commitment to the children was evident from the records”* (Institute of Public Care). There is also evidence of the need to improve consistency of practice, supervision and management oversight and quality assurance.

Working with people and partners to protect and promote people's physical and mental health and emotional well-being,
 Encouraging and supporting people to learn, develop and participate in society,
 Supporting people to safely develop and maintain healthy domestic, family and personal relationships
 Working with and supporting people to achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs

What does this mean? - This means working with people to support them to achieve the goals they have identified themselves which together constitute a good life. These are called people's 'personal well-being goals'. The SSWBA details the different elements of wellbeing (**figure 10**). People may need support in any of these areas to live the life they want to live.

Elements of wellbeing



Figure 8

In working with people to achieve their personal wellbeing outcomes, there are three building blocks which form the foundation for wellbeing, care and support:

- **Information, Advice and Assistance (IAA)** – each local authority (with support of their local health board) must secure the provision of an information and advice service relating to care and support in its area (including support for carers) and (where appropriate) assistance in accessing these.
- **Integrated wellbeing networks** – being able to access your own community to make meaningful contributions and feel connected. This connection is critical in reducing loneliness and isolation and accessing natural support as early as possible to have a good quality of life. In so doing this reduces or delays the need for longer term care and support
- **Care and support** – We assess people’s needs if we know or think they have care and support needs or a carer needs support. Care plans describe the care and support that have been identified to enable someone to meet their wellbeing outcomes. This will include support from informal carers, friends and families, and support available in the community, as well as social care services.

What did we say we would do? (2017/18 *Priorities for Improvement*)

IAA

- Evaluate and determine if the current front door systems in adult and children’s service support delivery of IAA comprehensively enough.

Integrated Wellbeing Networks

- Work with colleagues across the council, with our partners and with communities to embed the principle that well-being and prevention is everyone’s business and every service area can make a considerable contribution to well-being.
- Continue to work with a wide range of partners to develop locality approaches to wellbeing. This includes working with Public Health Wales to develop a social prescribing approach
- Work with school clusters and partners to develop a targeted, evidence-based model of early intervention and prevention in children’s services for families that are showing signs of distress to ensure they can access early and appropriate support. This will aim to prevent families reaching a point where it is necessary for children’s social services to intervene, less still for them to break down to the stage where their children are taken into care.
- Work with all partners to review current investment from all funding streams, e.g. core funding, Families First, Supporting People etc. to ensure the right range of targeted support is in place.

Care and Support

- We will commission intelligently, informed by a clear evidence base and analysis of the needs we need to meet. Commissioning and innovative redesign of traditional services will be based on positive, long term relationships with providers. Links between practice and commissioning will be strengthened by using information from assessments and care plans as well as population level assessments.

What have we done?

IAA

- We have continued to develop the approach to, and availability of, IAA across the county. IAA is available from a range of places in the County (community hubs, leisure centres, social care resource centres, primary care), for all citizens and includes a variety of activity e.g. signposting to support, information about what is going on in communities, managing debt, and access to food banks. People can self-refer to most IAA services. We have seen an increase in the last year in the number of adults accessing IAA – 1,773 compared to 547 last year. Of those 1388 people (78.29%) did not contact us again.
- The Supporting People 'Gateway' provides information, advice and facilitates access to assistance for housing related support services, including financial advice, connection to community support and support in maintaining a tenancy. The IAA provided via the gateway has been expanded to support wellbeing outcomes to meet the preventative goals, financial inclusion and tenancy support. In the last year. 943 people accessed support via the gateway in the last year.
- An important development has been the roll out of the Dewis citizen portal, an information source for professionals and citizens in Wales about wellbeing resources in their area. Local launch events were undertaken (see picture below at the Usk show) to raise awareness with citizens and service providers.



- FISH (Finding Individual Solutions Here) and the 'Early Help' team in Children's Services have been reviewed to make sure they are offering IAA in the most effective way.

Integrated Well-being Networks

- We are working with a range of partners to facilitate 'joining up' what is available in 'integrated wellbeing networks' (figure xx) which are based on the 'natural' communities within which people live and within which they connect. The wellbeing network approach recognises the different elements of 'wellbeing' and facilitates

local communities and partners to map assets, understand where their gaps may be and develop services to address those gaps.

- We have facilitated locality working through networks of partners collaborating to meet the needs of the communities they serve. These networks ensure people have a greater sense of control over what they need, making decisions about their support as an equal partner.
- In Monmouthshire we work with two Neighbourhood Care Networks (NCNs), comprising primary care, community health and social care, public health professionals and third sector. This year has seen the development of the NCN well-being workforce including pharmacists, physiotherapists and support workers. There are many examples of positive work between NCNs and wellbeing workforce to make a real difference including the exercise referral scheme and development of a dementia road map. Primary care and community health and social care services working well together has a really positive impact on people's lives.

'The Communication between Tudor Gaze Surgery and social services is always fast and helpful'

Daughter of person supported by Abergavenny Integrated Team

Integrated Wellbeing Network

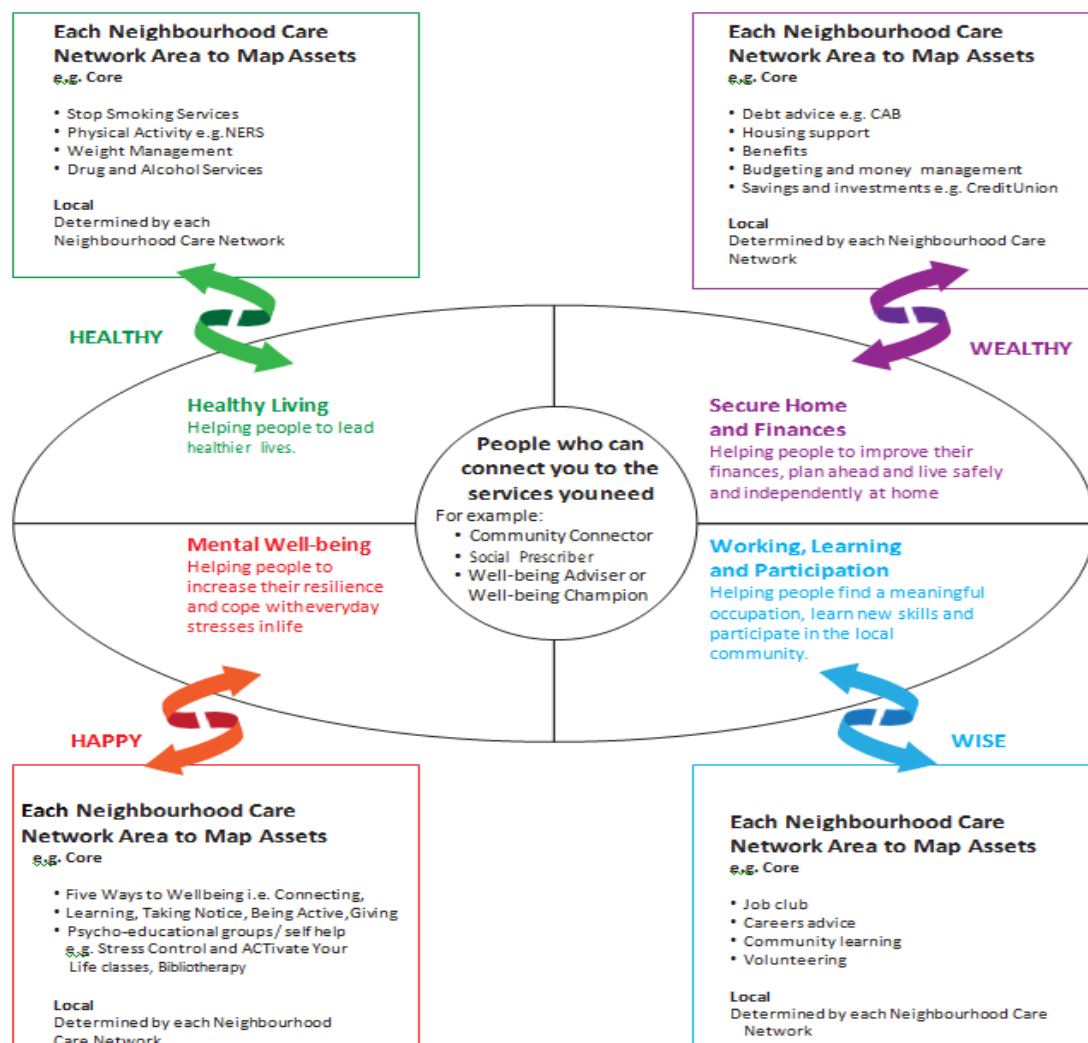


Figure 9

- The integrated wellbeing network approach recognises the importance of harnessing community assets – be they individual people, groups, business, third sector organisations or statutory organisations, understanding what they all offer and how they can meet population needs.
- The focus is to understand community strengths and develop the wellbeing workforce to link people to the support they need. We have worked with partners to develop a framework for the wellbeing workforce (figure 10) which will ensure people have the right conversation with the right person at the right time:


Figure 11

- To support the development of these roles we have reviewed, with partners, how we invest resources available to us through supporting people, families first and other resources focused on early intervention and prevention.
- We have invested Supporting People and Integrated Care Fund resources into wellbeing workers and social inclusion workers who are working with people who may be isolated and vulnerable. They assist them to build natural networks and find community support that assists them to work through the issues they face and to prevent them accessing statutory services.

Care and Support Services for Adults

Care at Home Services

- Services that provide care and support are commissioned or provided on the basis of relationships – both between the person with care and support needs and between the Council as commissioner and service providers.
- Council care at home services have been remodelled and are providing flexible, relationship based care across the County. We have been working with independent sector providers for the last 2 years to commission care at home very differently through the 'Turning the World Upside Down' programme. We have worked with providers to develop 'patches of provision which will inform a future pricing model. We have developed an information sharing protocol and are piloting this with one provider. Independent sector providers are working very closely with

our integrated teams which has enabled real gains through creative and pragmatic responses by providers to service demand issues.

- We are not always able to access long term care at home for people as quickly as they need it. Some people have been delayed in their own homes whilst supported by reablement services, others have been delayed in a hospital bed. There has been a significant increase in the number of people delayed in hospital in the last year , 43 people compared with 22 in the previous year. The trend over the last 5 years is set out in figure12 below:

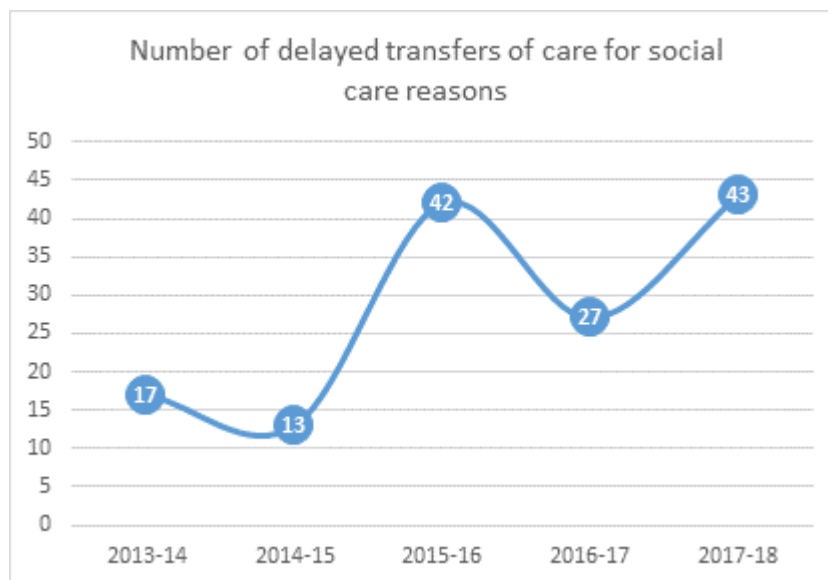


Figure 12

Whilst it is important to note that this is a small proportion of the discharges we support as a Council, every delay in a transfer of care means someone is not getting the right care for them. The 43 delays relate to 38 people, as some people were delayed for more than one period. Table 3 below shows where people are delayed. This shows clearly that small numbers of people are not delayed in acute hospitals but there is a significant issue in our community hospitals. We have an effective discharge model enabling people to move through the acute hospital sites generally without delay. The delays in community hospitals happen where people are requiring more intensive support or life changing decisions are needed. These may require further complex assessment in particular around capacity, we have a much older population often with multiple complex medical conditions which may require complex problem solving hence where delays can occur. Another contributory factor is the ability to secure the timely levels of support at home , this is often more difficult in the rural areas but has been a feature throughout the county this year.

Hospital	Delays
Chepstow Community Hospital	13
Monnow Vale Health & Social Care Facility	22

Nevill Hall Hospital	6
Royal Gwent Hospital	1
Ysbyty Aneurin Bevan	1

Table 3

Care Homes

- In the last year, the Council's inhouse care home, Severn View, has worked to improve the quality of care provided, putting in place arrangements to improve the way people's needs are understood before they come into the care home. The care at Severn View is very effective at supporting people to build relationships with people with dementia.
- We have worked with other local authorities in Gwent and Aneurin Bevan University Health Board to implement pooled budget arrangements for care home commissioning. We have developed a common contract across the region, working collaboratively with care home providers.

Support for Adults to Learn, Develop and Participate in Society

- My Day, My Life, is a person centred approach to support for people with learning disabilities. In the last year, this approach has been expanded through My Mates, a scheme to help people with disabilities develop friendships, wider networks and personal relationships.
The impact of these relationship based approaches is most vividly evidenced through the stories of individuals:

Support for Children to Learn, Develop and Participate in Society

- Children's services have also strengthened working arrangements with youth enterprise to improve opportunities for care leavers not in education, employment or training. Educational outcomes for our LAC children in education was in the top quartile in Wales.
- There are close working relationships with education colleagues to support our LAC to achieve educational outcomes. The pupil deprivation grant for LAC pupils is now administered regionally by the Educational Achievement Service (EAS) and clusters of schools are able to bid for additional funding for LAC pupils to provide additional support to raise standards. Personal education plans are written in partnership between schools and social workers to identify areas of strength and areas for development. Appropriate information is shared so that any issues which may be impacting on performance can be addressed.
- If there are cases which require further discussion then these are brought to the Local Authority's multi-agency *Stable Life and Brighter Futures Panel* and appropriate actions are agreed to address any issues which may impact upon a young person's educational placement.
- More care leavers are in education, training and employment compared to previous years, and outcomes for Monmouthshire care leavers compare well with the rest of Wales.

- There are two fulltime Personal Advisors whose key role is to support care leavers with a pathway plan, on their journey towards independence. There is a care leavers' group that supports young people via organised activities.

Services for Children with Care and Support Needs

There has been extensive activity to review a range of commissioned and provided services for children and families. Commissioning activities have involved fully, and been driven by, the views of children and families:

- A review of services for young carers services resulted in the recommissioning of the service. Young carers were involved in the procurement process including asking model questions, answers and weightings.
- A review of services for children and families with disabilities is being undertaken workshops have been held with children, young people and their families across Monmouthshire (Abergavenny, Monmouth, Caldicot, Chepstow), where they were asked what worked well with the current Disability Support Service, what didn't work so well with the current Disability Support Service, and how can we improve this service. A survey has also been undertaken which has informed the service review.
- A review of family group conferencing has been undertaken with a view to integrate it better with children's services.
- Commissioning arrangements have been strengthened, addressing weaknesses identified in an internal audit report into children's services placements.
- A multi-agency resource hub is being developed, funded by Integrated Care Fund, to provide multi-disciplinary support in situations where placements are at risk of breaking down or short term residential provision is needed, reducing the need for out of area placements at a time of crisis.
- Regional advocacy services have been commissioned from National Youth Advocacy Service which is supporting delivery of the 'active offer' of advocacy to children and young people.

Accommodation and Support for Looked After Children

Table 4 below shows how we are caring for the children for whom the Council is corporate parent.

	31.03.13	31.03.14	31.03.15	31.03.16	31.03.17	31.03.18
Monmouthshire Foster Carers	36	35	34	32	26	26
Monmouthshire Family and Friends Carers	28	19	16	29	23	27
Independent Fostering	25	25	37	32	42	42

Independent Living	2	2	1	1	5	4
Pre-adoption	0	7	2	9	7	1
Placed with Parent	4	9	9	16	20	26
Residential Education Placement	6	5	8	10	8	9
Mother and Baby Placement	0	0	0	0	1	3
Secure Unit	0	1	1	1	1	1
Child in Hospital	0	0	0	0	0	0
TOTAL	101	103	108	130	133*	139

*The numbers include 4 unaccompanied asylum seekers

Table 4

This shows the increasing numbers of LAC children who are accommodation with their parents or with kinship foster carers who are members of their own families. The number of children in independent foster agency placements and inhouse fostering remains and residential placements remain static, although the children in these placements will differ year on year. The last analysis from the Independent Reviewing Officer⁶ highlights the challenges this increase presents in respect of complexity of needs and levels of risk to be understood and managed.

Children's services have worked creatively to secure housing and accommodation support through bespoke packages for LAC and care leavers with very complex needs, working with support providers, health, education and registered social landlords.

A major focus in the last year has been to increase sufficiency of local foster care and other placements. We lack local sufficiency of Monmouthshire foster placements and are over reliant on Independent Foster Agency placements The LA supported a corporate approach with support particularly from our communications team. We have run successful campaigns resulting in 60 inquiries in 2017/18 (5 fold increase) with 2 new carers approved and 9 carers. Currently in assessment. The in house foster placements remain too low in comparison with IFAs and this remains a key focus in the coming year.

Supporting Employment and Training Outcomes for LAC and Care Leavers

2017/18 saw enhanced working across the Council to fulfil our collective responsibilities as corporate parents. The revised Corporate Parenting Strategy highlights the following achievements:

- Members 'Introduction to Corporate Parents' was updated and carried out as part of the induction programme for the new administration
- Consideration of Corporate Parenting responsibilities is now required in all reports for Cabinet or Council.

- There is a good understanding and awareness of Corporate Parenting by colleagues across the Council and the contribution all officers can make to improving the lives of our LAC children.
- The Council has evaluated initial apprenticeship programmes and has strengthened the operational leadership of this. There is a post created with youth enterprise to support 16 – 18 year old care leavers with education, training and employment.
- We have a team of dedicated and committed foster carers in Monmouthshire, who have a good network of support.
- Looked after children's educational outcomes and achievements are reported on a cohort basis (e.g. mainstream, Additional Learning Needs, Unaccompanied Asylum Seekers and Looked After Children attending the Pupil Referral Unit) which allows greater analysis of the educational progress of looked after children.
- A Special Guardianship Officer (SGO) support worker is in place to support carers and the impact of this is being evaluated.
- Tourism Leisure Culture and Youth provide extra curriculum activities to our Looked After Children, young people.
- The Fostering Project is in place to support the recruitment and retention of Monmouthshire foster carers.

This focus on corporate parenting has improved performance with more care leavers, and a higher proportion of care leavers, in education, training and employment 12 months and 24 months after leaving care. As at February 2018, 72.73% (8 out of 11) of care leavers engaged in education, training or employment during the 12th month after they left care

As at February 2018, 70% (7 out of 10) of care leavers engaged in education, training or employment during the 24th month after they left care.

Youth enterprise supports LAC and care leavers to overcome the barriers they face in achieving their ambitions. 3 LAC have been engaged in Inspire2Achieve programme for 11-16 years most at risk not being in education, employment or training. In terms of outcomes, 1 will achieve BTEC level 2 award in Personal, Social Development in July, 2 are accessing pastoral support.

In terms of care leavers:

- 1 Care leaver secured full time employment will now exit our work based learning programme
- 1 Care leaver engaged on our work based learning programme
- 1 Care leaver is an apprentice Teaching Assistant in a local primary school
- 1 Care Leaver has an apprenticeship in joinery due to start in September
- 2 care leavers will be undertaking the construction skills certification scheme and on completion supported to gain apprenticeships.

Securing Accommodation for Young People at Risk of Homelessness

We have invested in the last year in a young person's accommodation officer based within housing options. She has supported 27 young people in the last year and has

achieved positive outcomes for 18 young people, with outcomes pending for another 4. 5 out of 53 care leavers experienced homelessness in the last year.

Promoting and Improving the Well-being of Carers

We have continued to deliver outcome focussed support for carers as prioritised by carers themselves in developing *Monmouthshire Carers Strategy 2017-19*. The strategy has focussed on how the carers team supports carers and partners in delivering well-being outcomes. In respect of achievements this year:

- The carers team has stronger working relationships with GP practices, which in turn has raised carer awareness and support within GP surgeries such as yearly health checks.
- The team has worked with carers and service providers to review service level agreements so that carers receive personal outcome focussed support that suits their well-being needs.
- 300 carers have accessed training and events. During carers week events included pamper sessions, geocaching and planning for the future. Carers Rights Day were updated and fed back on the success of the Monmouthshire Carers Strategy, we also held a Christmas market trip. Carers tell us they look forward to these events, because they are different, it gives them something to look forward to and everyone is so friendly.
- We have used Welsh Government ringfenced investment to plan new, innovative and flexible forms of respite support for carers, collaboratively with third sector partners and internal partners. The feedback from families has been very positive:

“if it wasn’t for building bridges my son’s life wouldn’t be as full and happy as it is. As his siblings are much young than him it has meant that he can do activities with friends of his own age and I know he is happy and safe. I can then spend time with the younger kids and they get a break from him being grumpy round the house.”

Mother of child with a disability

Actively Working with People in their Language of Choice, Welsh Language – More Than Words

Within Monmouthshire we have a designated Welsh Language Officer and a Social Care Lead. We have carried out an audit on the Welsh language skill levels of the front line workforce within social care via a self assessment process. This also included updating the data on skills in other languages so we have a greater picture of skills at all levels.

All social care staff and private providers are able to avail themselves of the corporate Welsh Language training programme provided by Coleg Gwent.

There is a Welsh language resource on our intranet which gives links to two free Welsh Language resources – Say Something in Welsh and Duo Lingo.

Within we have developed a plan over three years to set up a 'Welsh speakers group'. This group will enable us to ensure the frontline team know who can support us with the 'active offer' in Welsh.

Within Monmouthshire the largest clusters of Welsh speakers are in both Abergavenny and Caldicot (these are also the homes of our 2 junior schools that are based in Monmouthshire -Ysgol Y Fenni and Ysgol Y Ffin). There are smaller clusters in Usk, Chepstow and Monmouth but all in all the Census of 2011 recorded 8,256 Welsh speakers aged 3 years and over living in the County.

We have a total of 42 Welsh speakers within our Council social care workforce with varying degrees of Welsh language skills.

Every request to fill a post across the council completes a Welsh Language Skills assessment prior to advertising. This ensures that every recruiting manager has to assess the need for Welsh language skills when advertising a vacancy.

We are auditing the Welsh language skills of commissioned services and the number of service users who speak Welsh so we can raise awareness of the providers regarding the "More Than Words" strategy.

As above in previous sections; we are constantly updating our comprehensive Welsh Language skills audit that details language skills, location and service across the workforce and highlights gaps that may require a different recruitment strategy, in particular some areas may require the recruitment of staff with specific Welsh language skills.

How well have we done (What does the evidence tell us?)

What people have told us about their experience?

- 84% adults, 75.6% carers and 77.6% children report they received the right information and advice when they needed it
- 93% adults, 100% carers and 79.4% children report they were treated with dignity and respect
- 84.4% adults, 87.8% carers and 75% children report they know who to contact about my care and support
- 85.7% adults, 73.2% carers and 84.1% children were satisfied with the care and support they received.
- 54.1% adults and 35.7% carers reporting that they can do what is important to them; 59.7% children report that they do the things they like to do
- 52.8% adults, 41.5% carers report they feel part of their community, 83.6% children are happy with their friends and neighbours
- 79.4% children and young people are happy with whom they live
- 97.5% adults, 100% carers and 93.9% children have received care and support through their language of choice
- 62.5% 16 and 17 year olds report they had advice, help and support that will prepare them for adulthood
- 66.7% people report they chose to live in a residential care home

What does our performance against national outcome measures tell us about how well we are supporting adults to achieve positive outcomes?

Care and Support

- Too many people experience a delay in their transfer of care which means they are not getting the support they need at the right time
- 71.26% of people (243 people) have no package of care six months after a period of reablement. This is really positive performance,
- Due to people being delayed in reablement whilst waiting for long term care, not everyone who would benefit from the reablement service is able to access support to maximise their independence.

What does our performance against national outcome measures tell us about how well we are supporting children and young people to achieve positive outcomes?

- 75.86% children are reported as seen by a registered dentist within three months of becoming looked after
- 100% LAC are registered with a GP
- 68.75% LAC are achieving the core stage indicator at stage 2 and 29.41% at key stage 4
- 9.47% LAC who, during the year to 31st March have experienced one or more changes in school during periods of being looked after that were not due to transitional arrangements
- 69.2% of children supported to remain living with their family
- 72.73% care leavers are in education, training or employment at 12 months and 50% at 24 months after leaving care
- 9.4% of care leavers have experienced homelessness during the year

These performance measures reflect sustained improvements when compared to 2016/17.

Taking steps to protect and safeguard people from abuse, neglect or harm

What we said we would do (*Priority for Improvement*)

Safeguarding children and adults at risk is our very highest priority

What have we done?

Regional Safeguarding Arrangements

- The arrangements for safeguarding across the region are led through the South East Wales Safeguarding Children Board (SEWSCB) and South East Wales Safeguarding Adult Board (SEWSAB) which have a range of sub-groups that deliver safeguarding in its practical form. Monmouthshire's Learning & Review Group improves the quality of inter-agency safeguarding arrangements and practice at a local level, promoting a direct link between the SEWSCB, its sub-groups and front-line practice across the region. The group promotes a culture of multi-agency learning and increased accountability with local authority areas supported by the boards' business unit.

Whole Authority Safeguarding Arrangements

- Council approved a corporate safeguarding policy in July 2017 which for the first time comprehensively sets Council policy for safeguarding children and adults at risk. The policy sets out very clearly roles and responsibilities with regard safeguarding for everyone who works in the Council.
- There is strong officer governance through the Whole Authority Safeguarding Co-ordinating Group which provides leadership, direction, oversight, support and challenge to safeguarding in all parts of the Council.
- A self-evaluation tool (SAFE) for use across settings in Monmouthshire which support children and adults at risk has been completed by all directorates and all directorates have action plans.
- A Safeguarding Learning and Development Strategy the training required by every Councillor and Officer in the Council.
- We have developed and implemented a system to address any significant issues in which is overseen by the Whole Authority Safeguarding Group.
- A comprehensive Volunteering Policy has been approved by Council which provides a clear policy position on safeguarding and the volunteer workforce. A volunteer data management system has been implemented which provides accurate information on the safe recruitment of every Monmouthshire County Council volunteer.

Protecting Children and Adults at risk

Adult Safeguarding has been undergoing a period of transition, with longstanding staff retiring and a significant increase in the number of referrals as awareness of the statutory duty to report is more widely understood. We have successfully recruited to new posts and are developing an operating model and quality assurance mechanisms. 84.73% adult protection enquires were completed within 7 days. This is a slight

decrease in performance compared to the previous year but has been achieved in a period which has seen an increase of 43% in the number of referrals received.

Mental Health and Deprivation of Liberty Safeguards (DoLs)

- We have successfully implemented a new Mental Health Act code of practice which has placed additional responsibilities on approved mental health practitioners (AMHPs) and the local authority.
- Monmouthshire has worked with other Gwent authorities to effectively support people who are deprived of their liberties in registered care settings.
- We have understood and are implementing the DoLs safeguards for young people aged 16-18.
- We are currently working with a number of young people aged 14-18 who have been identified with mental health issues. The past year has seen greater cooperation between children's services and adult mental health care services to ensure a better and more timely "transition" between services.
- We have identified those individuals under the team who are potentially deprived of their liberty and have made recommendations to provider services. We have also made applications to the Court of Protection for people who are deprived of their liberty in the community.
- People in mental health crisis have been safeguarded and supported throughout this episode and provided with relevant and necessary aftercare to maintain wellbeing, good mental health and continued safeguards
- We have provided a first class Approved Mental Health Professional service to safeguard people at times when they are most vulnerable from their mental health presentation
- People in mental health crisis have been safeguarded and supported throughout this episode and provided with relevant and necessary aftercare to maintain wellbeing, good mental health and continued safeguards

How well have we done (*What does the evidence tell us?*)

What does our performance against national outcome measures tell us?

Protecting adults at risk

- 455/537 (84.73%) adult protection referrals were responded to within 7 days
- There has been a significant increase in the number of adult protection referrals from 309 to 537 indicating that people understand their statutory duty to report concerns under the SSWBA.

Protecting Children

- 87.31% assessments for children were completed within statutory timescales. This is a significant improvement when compared with performance of 74.69% in the previous year.
- The last year has seen the steep increase in LAC has level off and also the gap between LAC and child protection numbers has reduced. The rate of LAC per 10,000 population has increased slightly. Figure 13 below shows the trend over the last 21/2 years.

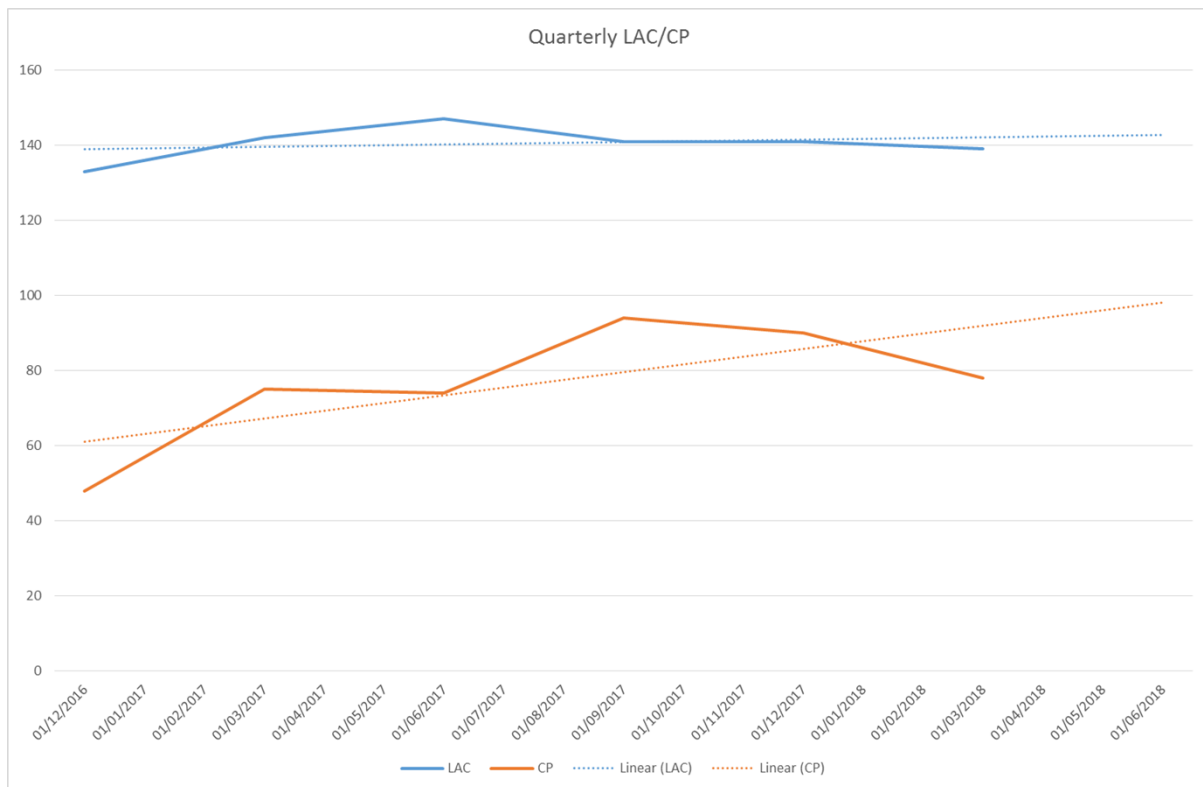


Figure 13

- There is an increase in the number of our LAC children who are placed with their own parents and also who are care for by kinship foster carers. This presents particular challenges and our service needs to focus on how we best support these children and families.
- 5.26% (6) children on the child protection register were re-registered during the year. A low level of re-registrations indicates that we are not making inappropriate decisions to deregister children.
- The average length of time for all children who were on the child protection register during the year was 227 days— this is an improving position, indicating that cases are being actively managed.

What other evidence is important in understanding how well we are doing?

- There was a joint review of corporate safeguarding in January 2018 by Wales Audit Office, Care Inspectorate Wales and Estyn. A draft of that report is still awaited but the indepth self-evaluation undertaken for the review highlighted considerable strengths in governance, safe workforce (employed and volunteer) and robust protection. Areas for improvement were identified in how we commission services and clear standards were developed for implementation across the whole authority. Review against these standards will be undertaken by internal audit in 2018/19.
- The child protection co-ordinator develops a 6 monthly report on children on the child protection register. The latest audit highlights some issues with regard length of time on the child protection register and multi-agency supervision which are important in terms of quality of outcomes for children and families.

How we do what we do

What we must report on - Our workforce and how we support their professional roles

What we said we would do (*Priority for Improvement*)

We will support and develop the whole social care workforce so they have high levels of confidence, competence and training, underpinned by person-centred values, behaviours and attitudes.

What have we done?

Leadership in Social Care and Health

There has been stability at a leadership level in Social Care and Health for the last 2 years. The leadership structure, and roles and responsibilities we fulfil, reflects the strengths within the team. The Head of Adults and Head of Children's Services have responsibilities across social care and health in the areas of commissioning, safeguarding and disability services. This recognises the strengths in different parts of the directorate and supports development of a single culture and ways of working. The last year has seen new service managers and team managers in children's services join from other organisations. Getting the right people into leadership positions to drive sustainable improvement has been a huge priority for the service and to have successfully completed this work means the service is well placed for the future. There has been some change at service manager level in adult services which has been managed smoothly.

The leadership structures and role profiles reflect the need to be outward looking, to form positive and productive relationships with colleagues across the council and with key partners and to really drive quality improvement. This is critical to achieving the best outcomes for people with care and support needs in Monmouthshire.

Training, Learning & Development

The Skills Audit carried out in 16/17 has been used to identify learning needs and has informed the learning and development plan for 2017/18 and beyond. A comprehensive training plan for the whole of children's services was delivered in 2017/18. There was an increased take up in attendance with improved booking and communication in place. A skills audit for adult services was undertaken in October 2017 to reflect changes in personnel.

The Social Care Workforce Development Unit continue to contribute to national and regional priorities working collaboratively with other statutory and voluntary agencies in Greater Gwent. We have established a new role within the team, Workforce Development Officer for the direct care workforce, to support the requirements of the

new registration and qualification regime as a consequence of the Regulation and Inspection of Care (Wales) Act (2016). In terms of achievements:

- 37 staff from direct care services registered for QCF Levels 2 and 3
- 1 direct care manager registered for the Level 5 qualification
- 1 senior in direct care services completed the Step up to Management programme.
- 1 member of staff from children services is undertaking the Social Service Practitioner Award
- As part of our continued partnership arrangements with the University of South Wales and Cardiff University, we hosted 23 social work student placements during 2017/18.
- We are supporting 2 newly qualified Social Workers in the team at the moment and have recruited 3 more newly qualified Social Workers who will start when they have completed their registration. Newly Qualified Social workers also require the relevant learning opportunities, reduced caseload, suitable support & mentoring particularly within the first 2 years practice.
- We have 1 children's services secondee who is being sponsored by us to the Open University Social Worker Degree Programme and one secondee from Adults who entered the second year of the programme in 17/18.
- In terms of post qualification development, 2 candidates registered for Middle Manager Development Programme, 3 candidates for the Practice Teaching Award (Enabling Practice), 1 for practice consolidation and 2 for the Experienced Practitioner Programme
- Our foster carers are accessing a programme of core and specialist training for foster carers including the Big Lottery Funded Confidence in Care Programme administered by the Children's Social Care Research and Development Centre at Cardiff University.

Attraction, Recruitment, Selection & Retention

At the start of 2016/17 there were 17 agency workers across children's' services. This presented a significant risk to the quality and sustainable improvement of children's social services. The numbers of agency workers have been steadily reducing over the last 2 years. By May 2018, the year there were three agency workers within the service, one covering an absence and three with end dates agreed as new recruits have been offered and accepted the post. **By August 2018, there will be no agency workers in children's social services** which is a massive achievement.

Retention rates in children's services compare very favourably with other Welsh local authorities. The turnover rate in children's services for 2017/18 was 11.81%, compared with a 22% rate in the latest available all Wales figures (2015/16).

Dare to Care – Supporting Care Workers in Monmouthshire

The most critical issue facing adult social services in Monmouthshire is the ability to secure a care workforce. Dare to Care in Monmouthshire is a campaign to promote care as a career, linked to a wider strategy to develop career pathways, fair terms and

conditions, training and development and standards. Delivering against plans to address this issue is a major priority in 2017/18.

Regulation and Inspection of Social Care (Wales) Act 2016

Raising awareness of the Regulation and Inspection of Social Care (Wales) Act 2016 is a key priority of the Social Care Wales Workforce Development Programme (2017/18 – 2018/19). Providers have been attending awareness raising events across the region in March and April 2018. They were aimed at responsible individuals, registered managers and local authority commissioners. Monmouthshire social care providers were well-represented at the events.

The next stage of engagement and awareness raising will take place locally.

- A project board has been set up to support the role out for Monmouthshire. This is made up of all key stakeholders.
- On the 20th June 2018, the workforce development team will host an awareness-raising event for Monmouthshire service providers and commissioners.
- In July and August, Social Care Wales will deliver in-house workshops to introduce and troubleshoot the online registration process for domiciliary care workers.
- The Workforce Development Team will work with managers to raise awareness of the registration process amongst frontline staff.
- The Workforce Development Team will develop programme of training to meet the requirements of the All Wales Induction Framework
- A team of Registration 'Champions' will be trained to help support managers and domiciliary care staff with the registration process

What we said we would do (*Priority for Improvement*)

We will achieve a balanced budget within adult and children's services
We will align our business systems to support delivery of our priorities

How well have we done?

Appendix 3 is visual representation of how the overall social care and health budget (including public protection) is divided between different service areas and individual budgets. As the illustration shows, whilst the budget of nearly £45.5 million is the largest in the Council, outside of schools, the overall budget is made of up of many smaller budgets, each of which is fully (indeed over) committed supporting individuals with care and support needs.

2017/18 was a very challenging year financially for social services in Monmouthshire. The outturn position was an overspend of £587,000. The overall outturn for 2017/18 is an overspend of £587,000 which includes a £24,000 overspend in the Youth Offending Service to be met from its reserve, and £58,000 of corporate safeguarding costs.

Children's Services continues to operate under extreme pressures, which is not just a local issue but typical across Wales and England. Progress has been made in latter months with reduction in agency workforce. There was an underspend of £959,000. The healthy outturn position has been due to the continuation of the practice change agenda that has produced savings for a number of years, additional investment from Welsh Government to support winter pressures grant, property sales and increased income from client contributions.

The Challenge of Financial Sustainability

The challenge to Monmouthshire County Council, and indeed all councils across the UK, is meeting the costs of social care services against the backdrop of reducing budgets and increasing demand for care and support. Demographic changes, increasing levels of age-related disability and the need to invest in the care sector is very well documented. A major study by the Health Foundation⁷ into the financial viability of the NHS in Wales highlighted the financial, and consequentially service, pressures facing adult social care in Wales which are severe:

"Pressures for adult social care are projected to rise faster than for the NHS, by an average of 4.1% a year. With funding unlikely to rise at the same rate, there is a real risk that the level of unmet need for care services could rise in Wales"

Figure 14 illustrates the gap between current funding levels.

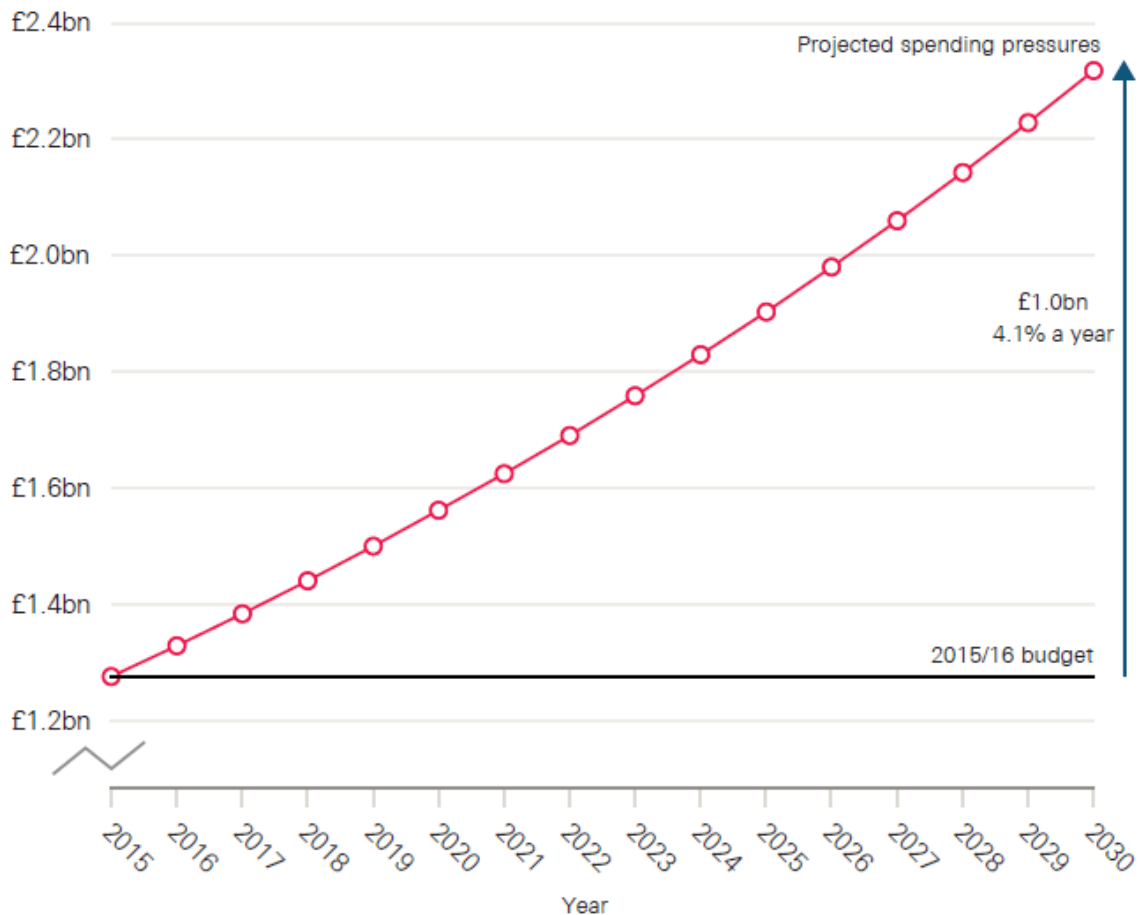


Figure 14

What does this mean in Monmouthshire?

The financial pressures facing Monmouthshire County Council are hugely challenging over the next 4 years. The Council has consistently supported pressures in adult and children's social care to the tune of £5 million over the last 4 years. Over the same period adult social services has delivered savings of £2.3 million. 2016/17 was the first year that adult social care was not able to deliver on mandated budget savings (£600,000). Overall, adult social care services have successfully managed the impact of increasing numbers of older people by transforming the way we support wellbeing, care and support.

Children's services have required significant investment to safeguard children as LAC numbers and child protection registrations have increased. In agreeing budget saving priorities for 2018/19, there are a number of important considerations linked to the service issues set out in this report. Critically, it is imperative that the focus of the service continues to be improving practice and outcomes for children. In so doing, improvements such as recruiting more local foster carers and supporting children to remain with their own families and new models of residential provision will need corporate focus and attention.

In adult services, the Health Foundation work illustrates the overall pressures meeting the needs of an ageing population across the UK. Monmouthshire has the highest percentage of people aged over 85 in Wales so these pressures are compounded. In

Monmouthshire, commissioning domiciliary care in a different way will, in time, prove more cost effective. We have already invested with providers in meeting the national living wage. We recognise that to support the standards of our future domiciliary care workforce, that we will need to understand the true costs of delivering quality care in a rural county with limited available workforce.

In both adults and children's services doing the right thing for people has proved, and will continue to prove, more cost effective and it is crucial this principle informs the incredibly difficult budget decisions.

Our partnership working, political and corporate leadership, governance and accountability

What we said we would do (*Priority for Improvement*)

To effectively communicate with people, partners, elected members and council colleagues the important changes as a consequence of the SSWBA.
To realise the benefits for people from the statutory partnership arrangements and priorities for integration.

What have we done?

The Greater Gwent Health, Social Care and Well-being Partnership Board is a key partnership body; established to lead and guide the implementation of the Social Services and Well Being (Wales) Act 2014 in the Greater Gwent area (covering the areas of Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen), sitting within the footprint of the Aneurin Bevan University Health Board area'

Following on from review of the integrated arrangements under the RPB, a review of the RPB terms of reference is expected in mid-2018 to ensure that objectives are updated and there is clear oversight of the Area Plan.

The long term priorities of the RPB are:

- To improve health and wellbeing outcomes and reduce inequalities in the region
- To improve care, treatment and support, ensuring people have more say and greater control
- To provide information and advice, to help people sustain good health & well-being
- To provide co-ordinated, person centred care, treatment and support
- To make more effective use of resources, skills and expertise
- To align or integrate functions and resources, where integration adds value to citizens

Governance structure and Partnership arrangements

Significant work has been undertaken with Board members to establish a robust governance framework to direct work and translate it into effective operational delivery at a locality level. A new model of governance has been established to provide shared leadership, and the Area Plan is appropriately aligned with both local authority and health board corporate plans, and with the wellbeing objectives of the Public Service Board Plans.

A delivery framework has been developed, to underpin the area plan and ensure change is achieved in line with the agreed outcomes measures set out in the plan. The Area Plan, will be delivered through the five thematic partnerships, and translated into local operational delivery by the 'Integrated Partnership Boards' and NCN model.

Significant emphasis has been placed on developing a delivery framework, which is predicated on shared leadership from health and social services, and enables regional consistency alongside local flexibility, in recognising the uniqueness of the five local authorities in Gwent.

The population needs assessment and area plan have been developed. The Gwent Area Plan sets out the vision for an integrated system of health, care and wellbeing across Gwent. Collaborative leadership from Health, Local Government, and Third sector colleagues has driven the development of the plan. It is ambitious, and it sets a clear route map for the delivery of an integrated model of health care and wellbeing across Gwent. The Regional Partnership Board will provide leadership and oversight on the delivery of the plan, supported by appropriate governance and performance management systems.

The Plan is structured around the statutory core themes and priority population groups, where a step change in the pace of transformation is required, these are **older adults, children and young people, carers**; and people with **mental health and learning disabilities**. Underpinning these strategic groups are work streams on **housing, workforce, finance and assistive technology**. The plan will be delivered through a new structure comprised of **regional activity** (strategic partnerships) **local delivery** (through integrating primary, community health and social care and wellbeing in localities (Neighbourhood Care Networks)). The Gwent Area Plan sets out the intention to remodel services to reduce unnecessary complexity and deliver a more integrated, inter-professional way of working across health and social care.

The plan has been co-produced with citizens through substantive engagement and communication process, with the Gwent citizen's panel, specific issue groups, patients, families and carers. By working together collectively we intend to transform services providing more care closer to home. We will put people at the centre of everything we do, co-producing their care and support packages, and making patients and their families feel supported, listened to and safe in our care.

The Regional Partnership Board has reviewed existing partnerships and integrated arrangements across health and social services and has agreed a number of partnerships under the board as follows:

- Children and Families Partnership
- Adult Strategic Partnership
- Mental Health and Learning Disability Partnership
- Carers Partnership
- Health, Social Care and Housing Forum

All integrated pieces of work will come under one or other of these partnerships and Monmouthshire is well represented on all partnerships, and leads the Children and Families Partnership.

At a local level, the Monmouthshire Integrated Services Partnership Board is well established and provides leadership to integrated working between primary, community health, social care and wellbeing services. The board also provides governance to the formal partnership agreements and pooled budgets between the health board and Monmouthshire County Council. Arrangements have been reviewed in the last year to ensure they are fit for the future and meet the aspirations for further integrated working supported by effective professional, financial and operational governance going forward.

Our Priorities for Improving

What are the priorities for next year and why?

The 2015/16 annual report set out a comprehensive set of 13 improvement priorities which were designed to be delivered over a 3 year period. We will be continuing to progress those priorities, and progress against them all has been noted in this report. They have been 'themed' into 12 priorities and supporting actions for the next 3 years to align them with the SSWBA and the reporting framework within this report.

Overarching this priority, we will, in the next year, work with people, communities and partners to develop a strategic vision for wellbeing, social care and health in Monmouthshire.

The priorities are:

- 1. Involving people in everything we do – 'nothing about me without me'*
- 2. Advancing social justice and wellbeing through an asset based community development approach – building everything we do around the communities in which people live their lives:*
- 3. Early intervention and prevention – supporting people at the earliest opportunity to live the lives they want to live; preventing / delaying the need for intensive care and support*
- 4. Strengthening practice - developing our practice in adult and children's services to understand 'what matters', what the risks to them and barriers that need to be overcome are, so we focus care and support where it is needed on what people can do, and what they aspire to do, to overcome barriers to living the lives they want to live;*
- 5. Delivering excellence in Children's Services – a programme to deliver practice-led transformation leading to improved outcomes for children in Monmouthshire – we will move from an improvement programme to working in partnership to deliver the whole system transformational change needed to deliver the best possible outcomes for children and young people in Monmouthshire.*
- 6. Improving Outcomes – supporting delivery of personal outcomes so people can live the lives they want to live*
- 7. Effective safeguarding - the very highest standards of safeguarding, understanding how we can prevent abuse and protect those who are experiencing or at risk of abuse or neglect*
- 8. Improving outcomes through partnership working – positive productive partnerships which deliver: with people, communities, across Monmouthshire and the Gwent region.*
- 9. Quality of care - being passionate about the quality of care; care which is based on relationships and deep exploration over time of what matters to the people we work; developing our quality assurance mechanisms to really understand the impact and outcomes from practice and service delivery*

10. Workforce development - Developing our workforce – in the Council and across the social care sector – to have the capability and capacity to achieve the standards we set ourselves

11. Regulation and Inspection of Care Act – establish a programme of work within the Council and with all providers to effectively implement the requirements of the act in respect of regulated services and workforce.

12. Financial sustainability – service and financial sustainability plans for the whole of social care and health

13. Intelligent commissioning - Using data and evidence to inform decisions about how we commission and develop the service officers to deliver outcomes

Newly Qualified Social workers also require the relevant learning opportunities, reduced caseload, suitable support & mentoring particularly within the first 2 years practice.

Further Information and Supporting Documents

¹ Monmouthshire County Council, *Strategy for Social Justice*, May 2018

² Monmouthshire County Council, *Corporate Parenting Strategy 2018 – 2021*, June 2021

³ Institute of Public Care, *Analysis of practice and improvement in the long-term childcare team*, 2018.

⁴ Monmouthshire County Council, *A Monmouthshire that works for everyone*, March 2018

⁵ Monmouthshire County Council, 'Where I am safe',

⁶ Independent Reviewing Officer 6 monthly review, September – April 2017/18

⁷ 'The path to sustainability: Funding projections for the NHS in Wales to 2019/20 and 2030/31', Toby Watt and Adam Roberts

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Building Sustainable and Resilient Communities

PUBLIC SERVICE BOARD WELL-BEING OBJECTIVES

MONMOUTHSHIRE COUNTY COUNCIL GOALS

Provide children and young people with the best start in life



The best possible start in life

Respond to the challenges associated with demographic change



Lifelong well-being

Protect and enhance the resilience of our natural environment whilst mitigating and adapting to the impact of climate change



Maximise the potential of the natural and built environment

Develop opportunities for communities and businesses to be part of an economically thriving and well-connected county



Thriving and well-connected county



Future focused council

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Quantitative Performance Measures - Adult Services:

Performance Indicators	2016/17 Actual	2017/18 Year End	2017/18 Target	Performance Against Target	Performance Trend	2016/17 Wales Av	2016/17 Quartile
18: The percentage of adult protection enquiries completed within 7 days	88.67% 274/309	84.73% 455/537	90%	✘	↓	80.06%	Middle
19: The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	2.24 22/9,821	4.28 43/10,050	2.19	✘	↓	2.85	Middle
20: The percentage of adults (existing service users) who completed a period of reablement	21.43%	23.08%	25%	✓	↑	27.99%	Middle
a) and have a reduced package of care and support 6 months later	3/14	6/26					
20: The percentage of adults who completed a period of reablement	73.33%	71.26%	50%	✓	↓	72.34%	Middle
b) have no package of care and support 6 months later	187/255	243/341					
21: The average length of time adults (aged 65 or over) are supported in residential care homes	833.55 122,532/ 147	807.85 131,680/163	N/A	N/A	N/A	800.79	N/A
22: Average age of adults entering residential care homes	79.21 8,238/104	83.78 7,792/93	N/A	N/A	↑	82.83	Bottom
23: The percentage of adults who have received advice and assistance from the information, advice and assistance service and have not contacted the service for 6 months	76.60% 419/547	78.29% 1,388/1,773	77%	✓	↑	67.67%	N/A

Qualitative Measures – Adults and Carers

2017/18 adults responses are based on 595/1922 questionnaire responses (31% response rate):

Adults Questionnaire	2016/17 Actual	2017/18 Year End	Trend	2016/17 Wales Av	2016/17 Quartile
I live in a home that best supports my well-being	87.4%	86.4%	↓	86.9%	Upper middle
I can do the things that are important to me	52.8%	54.1%	↑	51.4%	Upper middle
I feel I am part of my community	52.7%	52.8%	↑	58.3%	Lower middle
I am happy with the support from my family, friends and neighbours	84.4%	88.3%	↑	85.2%	Lower middle
I feel safe	77.1%	79.1%	↑	78.1%	Lower middle
I know who to contact about my care and support	86.0%	84.4%	↓	83.2%	Top
I have had the right information or advice when I needed it	87.1%	84.0%	↓	80.2%	Top
I have been actively involved in decisions about how my care and support was provided	78.6%	81.4%	↑	79.7%	Lower middle
I was able to communicate in my preferred language	96.9%	97.5%	↑	95.9%	Top
I was treated with dignity and respect	93.6%	93.0%	↓	93.3%	Upper middle
I am happy with the care and support I have had	85.4%	85.7%	↑	85.2%	Lower middle
<i>If you live in a residential care home : It was my choice to live in a residential care home</i>	61.5%	66.7%	↑	71.8%	Bottom

2017/18 carers responses are based on 43/82 responses (52% response rate):

Carers Questionnaire	2016/17 Actual	2017/18 Year End	Trend	2016/17 Wales Av	2016/17 Quartile
I live in a home that best supports my well-being	83.7%	82.5%	↓	82.5%	Upper middle
I can do the things that are important to me	36.4%	35.7%	↓	44.6%	Bottom
I feel I am part of my community	38.6%	41.5%	↑	53.8%	Bottom
I am happy with the support from my family, friends and neighbours	61.4%	68.4%	↑	70.5%	Bottom
I feel safe	86.0%	90%	↑	81.2%	Upper middle

I know who to contact about my care and support	79.5%	87.8%	↑	74.6%	Upper middle
I have had the right information or advice when I needed it	75.0%	75.6%	↑	66.1%	Upper middle
I have been actively involved in decisions about how my care and support was provided	86.0%	78.6%	↓	76.7%	Upper middle
I have been actively involved in decisions about how the care and support was provided for the person I care for	86.0%	78.6%	↓	80.4%	Top
I was able to communicate in my preferred language	97.7%	100%	↑	97.2%	Upper middle
I was treated with dignity and respect	93.0%	100%	↑	90.8%	Upper middle
I feel supported to continue in my caring role	63.6%	76.9%	↑	67.8%	Lower middle
I am happy with the care and support I have had	68.2%	73.2%	↑	68.9%	Lower middle

Provision

Quantitative Performance Measures – Children’s Services:

Performance Indicators	2016/17 Actual	2017/18 Year End	2017/18 Target	Performance Against Target	Performance Trend from 2016/17	2016/17 Wales Av	2016/17 Quartile
Number of Looked After Children	133	139	Not applicable	Not applicable	↑	Not applicable	Not applicable
Number of Children on the Child Protection Register	91	73	Not applicable	Not applicable	↓	Not applicable	Not applicable
24: The percentage of assessments completed for children within statutory timescales	74.69% 611/818	87.31% 688/788	90%	✘	↑	90.76%	Bottom
25: The percentage of children supported to remain living within their family	61.56% 213/346	63.80% 245/384	70%	✘	↑	69.24%	Bottom
26: The percentage of looked after children returned home from care during the year	14.44% 26/180	Not Available	Not applicable	Not applicable	Not available	13.56%	Middle
27: The percentage of re-registrations of children on local authority Child Protection Registers (CPR)	2.38% *	5.26% 6/114	<10%	✓	↓	6%	Top
28: The average length of time for all children who were on the CPR during the year	230 15,660/68	227 29,946/132	<365 days	✓	↑	245	Middle
29a: Percentage of children achieving the core subject indicator at key stage 2	68.75% 11/16	68.75% 11/16	Not applicable	Not applicable	-	56.48%	Top
29b: Percentage of children achieving the core subject indicator at key stage 4	29.41% 5/17	6.67% 1/15	Not applicable	Not applicable	↓	14.21%	Top
30: The percentage of children seen by a registered dentist within 3 months of becoming looked after	56.52% 13/23	75.86% 22/29	60%	✓	↑	59.45%	Middle

Performance Indicators	2016/17 Actual	2017/18 Year End	2017/18 Target	Performance Against Target	Performance Trend	2016/17 Wales Av	2016/17 Quartile
31: The percentage of children looked after at 31 March who were registered with a GP within 10 working days of the start of their placement	98.33% 59/60	100% 56/56	100%	✓	↑	91.66%	Middle
32: The percentage of looked after children who have experienced 1 or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March	8.14% 7/86	9.47% 9/95	14%	✓	↓	12.70%	Top
33: The percentage of looked after children on 31 March who have had three or more placements during the year	5.26% 7/133	Not available	Not Available	Not available	Not available	9.80%	Top
34: The percentage of all care leavers who are in education, training or employment at: a) 12 months after leaving care	63.64% 7/11	69.2% 9/13	75%	✗	↑	52.42%	Top
34: The percentage of all care leavers who are in education, training or employment at: b) 24 months after leaving care	50.00% *	72.73 8/11	75%	✗	↑	47.12%	Middle
35: The percentage of care leavers who have experienced homelessness during the year	5.45%	9.4% 5/53	0%	✗	↓	10.59%	Top

Qualitative Measures – Children and Parents

2017/18 children's responses are based on 67/237 questionnaire responses (29% response rate)

Children's Questionnaire	2016/17 Actual	2017/18 Year End	Trend	2016/17 Wales Av	2016/17 Quartile
I live in a home where I am happy	80.4%	77.3%	↓	81.3%	Bottom
I am happy with the people that I live with	80.0%	79.4%	↓	87.9%	Bottom
I can do the things I like to do	60.0%	59.7%	↓	67.7%	Bottom
I feel I belong in the area where I live	71.4%	69.4%	↓	82.2%	Bottom
I am happy with my family, friends and neighbours	79.6%	83.6%	↑	87.1%	Bottom
I feel safe	90.2%	87.7%	↓	90.4%	Upper Middle
I know who to contact about my care and support	89.4%	75%	↓	90.3%	Lower Middle
I have had the right information or advice when I needed it	77.3%	77.6%	↑	81.2%	Lower Middle
My views about my care and support have been listened to	69.6%	62.1%	↓	79.2%	Bottom
I have been able to use my everyday language	98.0%	93.8%	↓	95.5%	Upper Middle
I was treated with respect	87.8%	79.4%	↓	89.2%	Lower Middle
I am happy with the care and support I have had	79.2%	84.1%	↑	87.8%	Bottom
If you are aged 16 or 17 years old: I have had advice, help and support that will prepare me for adulthood	57.0%	62.5%	↑	N/A	

2017/18 parent's responses are based on 41/204 responses (20% response rate).

Parents Questionnaire	2016/17 Actual	2017/18 Year End	Trend	2016/17 Wales Av	2016/17 Quartile
I have been actively involved in all decisions about how my child's/children's care and support was provided	63.9%	75%	↑	66.0%	Lower middle

Social Care, Safeguarding and Health Budget for 2017/18
£45,586,584

Direct Care
£7,166,928

Day Centres
 £1,038,214

Management
 £652,486

Residential
 £2,198,216

Direct Services
 £3,104,133

Grant schemes
 £173,879

Children's Services
£11,597,055

Management & Support
 £317,938

Youth Offending
 £366,449

Adoption
 £250,000

Children with Disabilities
 £530,720

Children and Family Support
 £812,427

Staff Teams
 £4,181,862

Younger People's Accommodation
 £301,079

Child Placement
 £1,167,238

External Placements
 £3,669,342

Commissioning
£1,630,967

Grant Schemes
 £45,973

Commissioning Team
 £518,116

Strategy
 £1,066,878

Community Care
£23,039,436

Mental Health
 £4,456,601

Adults with Disability
 £6,759,892

Abergavenny
 £2,807,602

Chepstow
 £3,249,591

Monmouth
 £2,466,562

Frailty
 £1,416,297

Aids & Equipment
 £301,896

Monnow Vale
 £478,680

Users & Carers
 £532,854

Other services
 £569,461

Public Protection
£1,476,068

Public Health
 £986,795

Trading Standards
 £339,681

Resources
£676,130

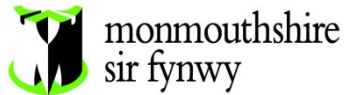
Strategy
 £84,015

Systems
 £41,520

Transport
 £129,909

Finance
 £420,686

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SUBJECT: SAFEGUARDING EVALUATIVE REPORT APRIL – OCTOBER 2017

MEETING: Joint Select Committee

DATE: 18th June 2018

DIVISION/WARDS AFFECTED: ALL

1. PURPOSE:

This purpose of this report is:

- To evaluate the progress of Monmouthshire County Council's key safeguarding priorities during 2017/18, using identified measures to highlight progress, identify risks and set out clear improvement actions and priorities for further development.
- To inform Members about the effectiveness of safeguarding in Monmouthshire and the work that is in progress to support the Council's aims in protecting children and adults at risk from harm and abuse.
- To inform Members about the progress made towards meeting the standards in the Council's Corporate Safeguarding Policy approved by Council in July 2017.

2. RECOMMENDATIONS:

Members are requested to:

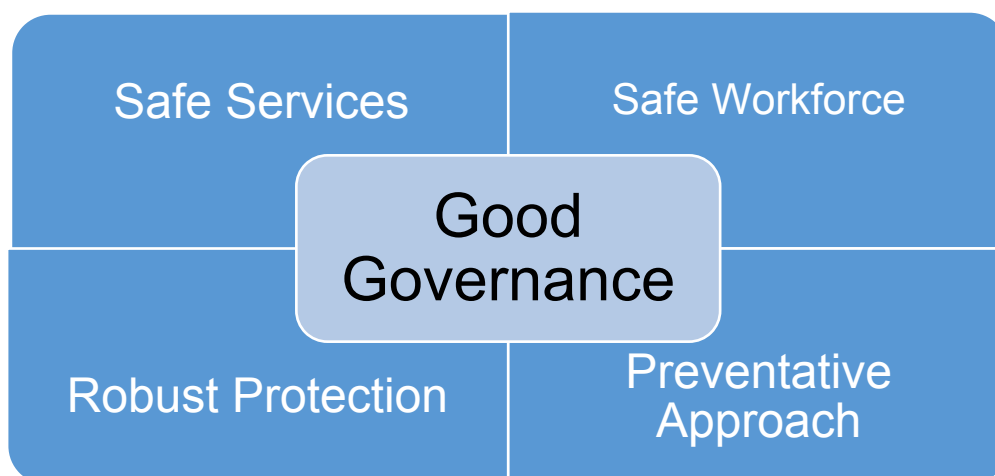
- Jointly scrutinise the Safeguarding Evaluation Report in its current draft format.
- Make recommendations in respect of its further development in preparation for presentation at full council.
- Note the key safeguarding risks and approve the priority improvement actions identified to date.

3. KEY ISSUES:

- 3.1 This safeguarding evaluation is based on activity and information from October 2017 – March 2018, and where relevant considers the whole year perspective. It builds upon the previous progress review reported in relation to the period March 2017 – October 2017. The timing of this report reflects a biannual reporting cycle to Select Committees and Council.

3.2 The report is developed within the context of the approved Monmouthshire County Council's Corporate Safeguarding Policy which covers duties for both children and adults at risk in line with the Social Services and Well Being (Wales) Act (2014). The analysis within the report reflects progress against priority areas set out within the policy and draws on data and information concerning both groups. The 5 cornerstones of safeguarding within the Corporate Safeguarding Policy are set out below (Table 1).

Table 1: The Cornerstones of a safeguarding in Monmouthshire



3.3 Embedding and sustaining the highest standards of safeguarding is a continuous endeavor. This Evaluative Report forms an integral part of the improvement of safeguarding practice across the Council. It asks critical questions about what are we trying to achieve, how well we are doing, what is the evidence to support our analysis, do we understand, manage and mitigate risks and how can we improve and develop. This is fundamental to an open and transparent approach to the evaluative task. The report tries, wherever possible, to balance qualitative and quantitative data as well as drawing in other sources of information to support triangulation of the assertions around progress.

3.4 The provisional self-assessment score has been developed by the Whole Authority Safeguarding Group (WASG) on the basis of evidence reviewed to date and critical challenge. It uses the corporate scoring framework (Appendix 1) to provide an overall judgement of effectiveness. The current self-assessment is at Table 2.

Table 2: Self-assessment scores as at March 2018

<u>Cornerstone of Safeguarding</u>	<u>April 17 -Sept 17</u>	<u>Oct 17- March 18</u>	
Good Governance	4	5	
Safe Workforce	3	4	
Preventative Approach	3	4	
Robust Protection	4	4	
Safe Services	2	3	

3.5 The key risks arising from the Evaluative Report have been extracted and incorporated into the Safeguarding Risk Register (Appendix 2). The most significant risks also feature in the Council’s Corporate Risk Register.

3.6 Priority improvement actions arising from the Evaluative Report form the basis of the Safeguarding Action Plan which is implanted and monitored through the Whole Authority Safeguarding Group. This is attached at Appendix 3.

4. OPTIONS APPRAISAL

Not applicable to this report

5. EVALUATION CRITERIA

Each ‘cornerstone’ section of the report opens with descriptors of ‘what good looks like’. These descriptors provide the basis of how we measure the standard over time using both qualitative and quantitative sources. The case studies at Appendix 2 of the Evaluative Report provides an additional qualitative ‘feel’ for how safeguarding is working in practice.

Safeguarding progress is reported on a 6 monthly basis to CYP and Adult Select Committees and Council.

6. REASONS:

- 6.1 This evaluation report is completed within the context of Monmouthshire County Council's recent background and history in respect of safeguarding as set out in brief below and represents a further opportunity for Members to consider the distance travelled by the Local Authority in improving safeguarding performance.
- 6.2 Council Members will be aware that in November 2012 the Local Authority was found to have inadequate safeguarding arrangements in place. Shortcomings was clearly articulated by Estyn and included a lack of safeguarding policy and procedures as well as operational weaknesses particularly within a schools based context.
- 6.3 The Safeguarding and Quality Assurance Unit was established within Children's Services in 2012 and quickly extended its role in supporting the Authority's improvement journey around child's safeguarding.
- 6.4 In February 2014 an Estyn monitoring visit recognised that the council had appropriately prioritised safeguarding and 'set the foundations well for recovery' particularly at service and practitioner. However, the authority still did not have 'effective enough management information systems and processes to enable it to receive appropriate and evaluative management information about safeguarding'. This criticism was echoed by a subsequent Welsh Audit Office review of safeguarding in March 2014.
- 6.5 In response to this the council established the Whole Authority Safeguarding Group (WASG) initially chaired by the Chief Executive with a focus specifically on children. The inaugural meeting took place in July 2014.
- 6.6 The Local Authority came out of Special Measures in November 2015 when strong progress in safeguarding was recognised.
- 6.7 A recommendation was subsequently made to Cabinet and endorsed in July 2016 allowing the work of the WASG to incorporate safeguarding for adults at risk, so that good practice and learning could be mutually shared and also to recognise the statutory basis of safeguarding adults at risk as a consequence of the Social Services and Wellbeing (Wales) Act 2014. The focus of WASG reflected developments in the national legislative framework and guidance around integration and all-age citizen / family centred approaches.
- 6.8 Members will also be aware that Wales Audit Office issued statutory recommendations in respect of safeguarding in respect of the Council's Kerbcraft service in January 2017. This was followed by a Wales Audit Office led inspection which took place in January 2018. The report resulting from this inspection has not yet been received.
- 6.9 The Council's Corporate Safeguarding Policy was approved by Council in July 2017.

7. RESOURCE IMPLICATIONS:

There are no resource implications to this report.

8. WELLBEING OF FUTURE GENERATIONS IMPLICATIONS (INCORPORATING EQUALITIES, SUSTAINABILITY, SAFEGUARDING AND CORPORATE PARENTING):

This report is critically concerned with the effectiveness of safeguarding in Monmouthshire County Council.

9. CONSULTEES:

The report is in draft form. To date the report has been authored through consultation with the Whole Authority Safeguarding Group with the evaluative scores proposed based on a process of self-review and critical challenge.

Consultation feedback from the Joint Select Committee will be built in to the report as it is completed ready for full Council.

10. BACKGROUND PAPERS:

[Corporate Safeguarding Policy July 2017](#)

11. AUTHOR:

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Appendix 1

The Corporate Evaluation Framework

The evaluation score from 1-6	The evaluative context
Level 6 Excellent	Excellent or outstanding
Level 5 Very Good	Good Major strengths
Level 4 Good	Important strengths with some areas for improvement
Level 3 Adequate	Strengths just outweigh weaknesses
Level 2 Weak	Important weaknesses
Level 1 Unsatisfactory	Major weakness

Appendix 2

Ref	Risk	Reason why identified	Risk Level (Pre – mitigation)				Mitigating actions	Timescale and responsibility holder	Mitigation action progress	Risk Level (Post – mitigation)				Risk owner & Cabinet member responsible
			Year	Likelihood	Impact	Risk Level				Year	Likelihood	Impact	Risk Level	
1a	Potential for significant harm to vulnerable children or adults due to factors outside our control.(escalated to corporate register)	- The likelihood of this occurring in a given year is low. However the significant harm that can occur due to factors that are outside our control mean that this will always be a risk.	2017/18	Poss	Major	Med	<ul style="list-style-type: none"> Continually monitor and evaluate process and practice and review accountability for safeguarding 	Claire Marchant Chief Officer, SCH	Latest evaluation is being presented to Cabinet in December 2017	2017/18	Possible	Major	Med	Will Mclean & Claire Marchant. Cllr Penny Jones & Cllr Richard John
1b	Potential for significant harm to vulnerable children or adults due to failure of services and/or partners to act accountably for safeguarding (escalated to corporate register)	- Volunteering is increasingly part of meeting community needs and it is important to have consistency across the LA in the use of volunteers particularly in respect of HR practices and training.	2018/19	Poss	Major	Med	<ul style="list-style-type: none"> Ensure that robust systems are in place within the authority to respond to any concerns arising from allegations or organised abuse 	Claire Marchant Chief Officer, SCH		2018/19	Possible	Major	Med	
			2019/20	Possible	Major	Med								
			<ul style="list-style-type: none"> Continue to implement the Children's services improvement programme and related Workforce and Practice Development Action Plan and Commissioning strategy for Children, Young People and their Families 	<ul style="list-style-type: none"> Ensure safeguarding is reflected in all council service improvement plans and in roles / responsibilities as appropriate 										

2	Potential that the Council does not make sufficient progress in areas of weakness in safeguarding identified by regulators leading to under-performance (escalated to corporate register)	In February 2017 Wales Audit Office issued Statutory recommendations for improvement in the Safeguarding arrangements – Kerbcraft scheme report	2017/18 2018/19 2019/20	Possible Possible Unlikely	Substantial Substantial Substantial	Med Med Low	<ul style="list-style-type: none"> To implement the Action Plan established in response to the Safeguarding arrangements – Kerbcraft scheme report approved by Council in March 2017 	Roger Hoggins, Head of Operations	Audit Committee received a report on the implementation of the Action Plan (Nov 2017). A further report on implementation of the Action Plan will be presented to CYP Select Committee along with the performance data which will thereafter form the basis of annual performance reports to the committee	2017/18 2018/19 2019/20	Possible Unlikely Unlikely	Substantial Substantial Substantial	Med Low Low	Roger Hoggins Cllr Bryan Jones
3	Potential that staff and volunteers are not recruited safely and begin their appointment without DBS checks having been completed resulted in increased risk of harm to vulnerable people	Within a large organisation with devolved responsibility for recruitment and selection there is opportunity for deviation from agreed processes	2017/18 2018/19 2019/20	Likely Likely Likely	Moderate Moderate Moderate	Med Med Med	<ul style="list-style-type: none"> Ensure that all managers receive SAFE recruitment training. Ensure the SBAR system of significant event analysis is understood and being used positively In the event of any deviation from process ensure that an SBAR is completed and analysed by the next meeting of the Whole Authority Safeguarding Group 	Peter Davies. Chief Officer, Resources Claire Marchant Chief Officer Social Care & Health	To date 4 SBAR forms have been received in 2017-18.	2017/18 2018/19 2019/20	Likely Unlikely Unlikely	Moderate Moderate Moderate	Med Low Low	Peter Davies. Cllr Phil Murphy Claire Marchant. Cllr Penny Jones

4	Potential that the workforce may not be aware of their duty to report concerns due to do not have up-to-date safeguarding training reducing the opportunities for successful preventative work and early intervention across the whole authority	The National Study of Safeguarding published by WAO in 2015 reported that 84 per cent of employees nationally had not received safeguarding training	2017/18 2018/19 2019/20	Likely Likely Likely	Moderate Moderate Moderate	Med Med Med	<ul style="list-style-type: none"> • Ensure robust information systems in place to support accurate reporting of whole workforce training levels • Safeguarding is a standard item on the council's induction programme for all new starters • Full implementation of volunteering policy • Implement the safeguarding training plan to address any gaps in safeguarding training for children and adults at risk through the SAFE self-evaluations 	Peter Davies, Chief Officer, Resources Claire Marchant Chief Officer, Social Care and Health	Data is in place for the majority of teams providing up-to-date information about safeguarding training	2017/18 2018/19 2019/20	Likely Unlikely Unlikely	Moderate Moderate Moderate	Med Low Low	Peter Davies Cllr Phil Murphy Claire Marchant.
5	Potential that the council and its partners are not doing everything they can to keep vulnerable people safe	Improved outcomes for vulnerable people children can only be achieved and sustained when people and organisations work together to design and deliver more integrated services around people's needs	2017/18 2018/19 2019/20	Possible Possible Possible	Substantial Substantial Substantial	Med Med Med	<ul style="list-style-type: none"> • Wide range of services represented on the whole authority safeguarding group to ensure it is seen as everyone's responsibility and give appropriate priority • Increase the connections and partners who are working as part of place-based working together 	Claire Marchant. Chief Officer Social Care and Health		2017/18 2018/19 2019/20	Possible Unlikely Unlikely	Substantial Substantial Substantial	Med Low Low	Cllr Penny Jones

Appendix 3

1). Good Governance			
Standard	Evidence	RAG Rate	Further Actions Required
Strengthen and evidence links between the work of the national and regional Safeguarding Boards and practice within Monmouthshire.	Current strong involvement in all areas of National and Regional Safeguarding Boards		Clear pathways of implementation in Monmouthshire
Reviewing the quality of SAFE self- evaluation across all directorates to ensure that resulting action plans address the critical safeguarding issues for each service area and priority actions are reflected in SIPs;	6 monthly Directorate self-review taken place, and Safeguarding Action Plan built into Business Support Plans		<ul style="list-style-type: none"> • Identification if further areas for SAFE audit to be completed; • QA of compliance and effectiveness of use of SAFE
ensuring the SBAR system of significant event analysis is understood, being used positively and risks highlighted are reflected in risk registers at directorate level as well as whole authority and WASG	Currently reviewed by WASG for ongoing use, effectiveness, and timeliness of action plans		<ul style="list-style-type: none"> • Completion of Risk Register
testing out the effectiveness of arrangements in the 2018/19 internal audit work programme.	?????		

2). Safe Workforce			
Standard	Evidence	Rag Rate	Further Actions
<ul style="list-style-type: none"> • Implementation of safeguarding training plan to address the gaps in safeguarding training for children and adults at risk 	Initial Implementation of Safeguarding Training underway. Basic Level Safeguarding Video in place Significant levels of SG training identified competing with VAWDV and obligation to Regional Safeguarding Training		Review of the no. of staff still needing training Review of the Training progress in light of co-ordinator on Mat Leave
<ul style="list-style-type: none"> • Full implementation of volunteering policy 			
<ul style="list-style-type: none"> • Implementation of information systems to support accurate monitoring of whole 	Training Database developed Reporting systems appear problematic at this point		<ul style="list-style-type: none"> • Continued development of system • Reporting Systems to be reviewed

workforce training status			
<ul style="list-style-type: none"> Test out understanding of duty to report across the workforce 	Whilst it is current training there has been no significant progress		
<ul style="list-style-type: none"> Alignment of professional allegations processes to align across adult and children's services. 	Regional Task and Finish Group undertaking this work Internal Review of Adult Safeguarding management of Professional Concerns in Business Improvement Plan		<ul style="list-style-type: none"> Internal Review is part of Business Support Plan Membership on Task and Finish Group to support development of internal practice and process

3). Preventative Approach			
Standard	Evidence	Rag Rate	Further Actions
Implement fully the early support and referral pathway	Implemented post Dec 17		???
Continue to build on the strengths of place based working by increasing the connections and partners who are working together to support individual and community well-being.			
Develop evaluative measures that enable better reporting of the impact of preventative work.			

4). Robust Protection			
Standard	Evidence	Rag Rate	Further Actions
Children and adult Safeguarding and Quality Assurance Unit to develop an operating model which builds on strengths in both parts of the service			
Continue to improve outcomes in children's services through the children's services improvement programme, including improving systems, processes and practice which contribute to timescales for completion of assessments.			
Implementation, and quality assurance of, risk framework in children's services.			
Further develop quality assurance mechanisms, and data analysis, in adult protection, to support improvement.	Significant development of data reporting mechanisms undertaken		<ul style="list-style-type: none"> • Analysis of this information and it's impact of service provision • Development of Qualitative information and measurable outcome indicators

5). Safe Services			
Standard	Evidence	Rag Rate	Further Actions
Internal audit to undertake review to baseline position across the authority in terms of commissioning and partnership			
Social Care and Health Commissioning Service to implement operating model covering adult and children's services			
Implement internal audit action plans for children's services placements.			

Evaluative Progress Report October 17 – March 2018

This report evaluates the progress of Monmouthshire County Council's against its safeguarding priorities. The priorities reflect the cornerstones for keeping people safe in Monmouthshire set out in the Council's Corporate Safeguarding Policy approved by Council in July 2017. The evaluative report uses quantitative and qualitative measures, and case studies where appropriate, to highlight progress, areas for improvement and further development. It is based on our commitment that adults at risk and children will be supported, and protected from harm and abuse. The report acknowledges that safeguarding is always 'work in progress'. Constant vigilance is needed at all levels of leadership and operational delivery to ensure the right culture, policy, practice and measurement systems are in place to keep people safe.

The cornerstones for keeping people safe in Monmouthshire are set out in **Figure 1**:

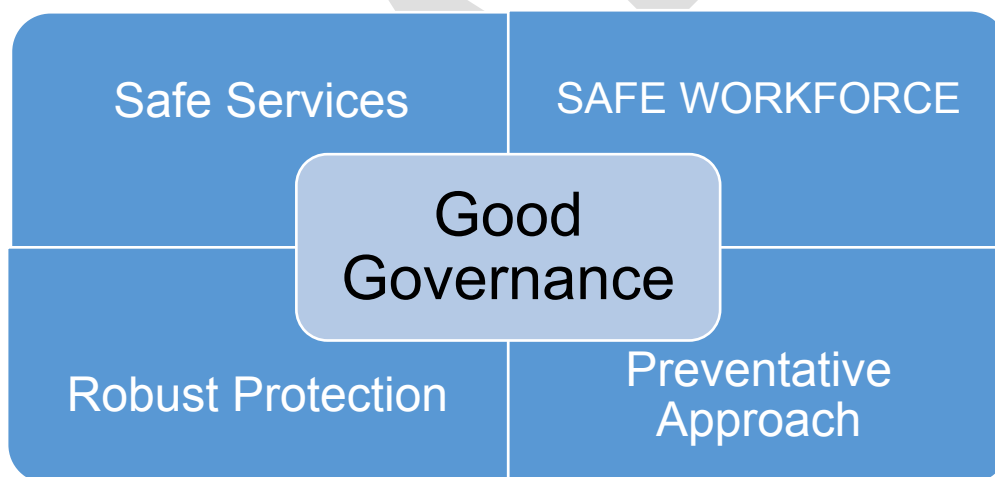


Figure 1

These cornerstones form the basis of Monmouthshire County Council's Safeguarding Policy. The judgement on performance against measures has been agreed by the Whole Authority Safeguarding Group (WASG). WASG has considered analysis of evidence drawn from a range of sources set out in **Table 1** which together enable a view to be formed as to the effectiveness of the Council's safeguarding arrangements.

Table 1

External Regulatory Reports	Quality Assurance & Internal Audit Reports	Engagement and Stakeholder Feedback
<ul style="list-style-type: none"> *CSSIW - Review of Front Door of Children's Services (2016) * CSSIW Annual Performance Letter (2017) * Estyn Monitoring Visits (Quarterly) * Estyn Inspections of Individual Schools * Wales Audit Office Review of Corporate Safeguarding in Monmouthshire (2015) * Wales Audit Office Review of Safeguarding Arrangements in the Kerbcraft Scheme (2017) 	<ul style="list-style-type: none"> *Safeguarding Assurance Framework Evaluations (SAFEs) *Performance Management Information *Case Review and Audit Reports undertaken in accordance with the Social Services Quality Improvement and Performance Framework *Internal Audit Reports of Safeguarding (2016) Volunteering (2017) and Children's Service Placements (2017) * Institute of Public Care reports into Children's Social Services Improvement Programme (2016 and 2017) 	<ul style="list-style-type: none"> *Young People's Safeguarding Survey (2016) * Regional Safeguarding Board meetings and sub-groups *Monmouthshire safeguarding network * Complaints and compliments * Formal and informal feedback from people who experience Monmouthshire's safeguarding services *Stakeholder events into Children's Service Improvement Programmes

Self-Assessed Score Against Measures

	<u>April 17 - Sept 17</u>	<u>Oct 17- March 18</u>				
<u>Good Governance</u>	4	5				
<u>Safe Workforce</u>	3	4				
<u>Preventative Approach</u>	3	4				
<u>Robust Protection</u>	4	4				
<u>Safe Services</u>	2	3				

1). Good Governance

What does good look like? In Monmouthshire County Council we ensure that safeguarding for children and adults at risk is understood as “everyone’s responsibility”. We work effectively with regional structures including the South East Wales Safeguarding Adults Board and the South East Wales Safeguarding Children’s Board. There is continuous focus – and aligned systems and activities – to ensure safeguarding is being culturally embedded across the Council at a “hearts and minds” level. Safeguarding is supported by policies and operating procedures which are embedded within all settings and services.

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
Is there a strategic steer for the whole authority Safeguarding Adults and Children Policy?	Policy approved by Council in July 2017	The policy, reflecting legislative changes, and reflecting the statutory basis of safeguarding adults at risk and children, was approved by Council in July 2017. The policy is reviewed on a 3 year basis unless there is a significant change required or changes to legislation.
Is there clarity of roles and responsibility for safeguarding?	Policy approved by Council in July 2017	The policy approved by Council sets out the responsibilities for key officers and Members. It also articulates the roles of Designated Lead Managers, all Managers for safeguarding within each directorate. The policy also clarifies the relationship between the Safeguarding and Quality Assurance Unit (policy, advice, guidance, supporting self-evaluation) and internal audit (independent review and specific investigations when indicated).
Is there senior management representation on the Whole Authority Safeguarding Group (WASG) to ensure clear accountability lines for safeguarding?	The role of WASG is set out in the Council’s Safeguarding Policy	WASG is held monthly and is chaired by the Statutory Director of Social Services. Membership of WASG is at a senior level from each directorate. Each directorate representative is required to ensure effective reporting lines with their Directorate Management Team.
Are the risks associated with safeguarding considered at a corporate and service level in developing and agreeing risk management plans across the Council?	Safeguarding is reflected in the Corporate Risk Management Policy	Safeguarding is a whole authority risk reflected in the Corporate Risk Management Plan. This is reflected within the individual departments Service Business Plans WASG continue to oversee the Safeguarding Assessment Framework for Evaluation (SAFE) and significant event analyses

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
Are all directorates monitoring and reporting on safeguarding using the SAFE process?	A 6 monthly review of progress was commenced in April 2018	<p>The drafting of Business Improvement Plans 2018-2021 is currently underway and identified actions from the SAFE audits will be reflected in the BIP</p> <p>Directorate Leads to report to WASG for oversight</p>
Is there an effective system of significant event analysis to ensure there is management and mitigation of risks and learning and review arising from breaches in compliance with safeguarding policy and procedure?	A system of significant event analysis using the SBAR (Situation Background Analysis Review) is in place and is being overseen by WASG.	Within this period 1 SBAR has been closed and 1 SBAR remains open complete actions identified
Are safeguarding implications set out in all reports to Cabinet and Council?	Continuous Progress	Safeguarding implications is a standard consideration in all reports.
Is safeguarding reported in Chief Officer annual reports?	Continuous Progress	Safeguarding is a key element in the annual report of the Chief Officer for Social Care and Health and the Chief Officer for Children, Young People and Education.
Is Monmouthshire effectively contributing to regional partnerships to promote robust safeguarding practices and drive forward regional work streams, particularly the South East Wales Safeguarding Children Board and the Gwent Wide Adult Safeguarding Board?	Continuous Progress	<p>There continues to be full representation at all levels of the work of the Regional Adult and Children and VAWDSV Safeguarding Boards as per Appendix 3.</p> <p>At a strategic and operational level there is also strong engagement in Multi-Agency Sexual Exploitation meeting (MASE) Child Sex Exploitation (CSE), Violence Against Women Domestic Abuse and Sexual Violence (VAWDASV) and Contest (PREVENT anti radicalisation).</p> <p>Developing understanding of the links between CSE, Criminal Exploitation, Trafficking, Modern Day Slavery between Safeguarding Boards, Partnership/ Safer Mon/ Whole Authority Safeguarding to inform Safeguarding policy and practice</p> <p>Local Safeguarding Networks were held in November 17, Jan & March 18 with increased attendance from statutory and 3rd sector involvement</p>

Analysis

The last 6 months has seen the imbedding of the Corporate Safeguarding Policy into the wider working of the Local Authority and a continued development of a Safeguarding Culture across the council. The role and vision of the Whole Authority Safeguarding Group continues to review current progress in risk management strategies, respond and direct work regarding new and hot topics which affect the people in Monmouthshire, and acts as an effective conduit between Directorates, Chief Officers and the Council.

The use of SBAR and Action plans to address Safeguarding issues as they arise is developing and is allowing more transparent discussion about what constitutes risk and the most open and effective management of risk. This continues to be overseen by WASG to ensure risk is appropriately responded to and mitigated without unnecessary delay.

There has been a directorate 6 monthly review of the SAFE Action Plans and these will be embedded into the developing Business Service Plans to ensure continued understanding and improvement. The priority for this area is to develop robust Quality Assurance of the SAFE and ensure all areas which may benefit from Safeguarding Audits are included

There continues to be a strong Monmouthshire engagement with regional safeguarding boards and involvement in the Strategic and Operational Safeguarding groups. Priorities for this area will be understanding and response to the wider issues of exploitation of vulnerable, and the implementation of National and Regional Safeguarding Policy when issued by WAG

There is further work needed to really embed risk management for safeguarding through strengthening the relationships between risk registers at every level and priority improvements.

Self-Assessed Score Against

5

 Measures:

2). Safe Workforce:

What does good look like? We ensure that safe recruitment and human resource practices operate effectively and embedded across the Council- for the whole workforce (on pay roll and volunteer). We ensure that the workforce working with children and adults at risk are suitable for the role they are employed to do and are focused on outcomes for people. The whole workforce is clear about their duty to report concerns and to keep children and adults at risk safe.

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
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<p>Is the workforce safely recruited?</p>	<p>As per the Council's Safeguarding Policy work continues to meet the Safe Recruitment standards for both Volunteer and Paid Staff</p>	<p>Further 4 managers undertook Safe Recruitment Training (Training Dept) this is a rolling program with new managers and to be added to corporate induction programme</p> <p>100% staff with DBS in this time period (Employee Service).</p> <p>100% of volunteers undergone Safe Recruitment process 3 DBS awaited with Volunteer Workers – not started 184 volunteers undertook Safeguarding Training in this period.</p> <p>No current SBAR regarding Volunteer or Paid Staff recruitment.</p> <p>In terms of level of compliance in priority areas:</p> <ul style="list-style-type: none"> - 32 HR Business Partner school visits have been undertaken to check safe recruitment compliance. These are reporting 100% compliance - Every Leisure Centre has appropriately trained Safeguarding Leads - 100% Compliance <ul style="list-style-type: none"> • The Passenger Transport Unit reports 100% workforce compliant with safeguarding induction and 100% of those who require level 1 training are up to date with that training. • Safeguarding Training L1 100% (PTU) <p>(See Action Plan)</p>
<p>Is the whole workforce aware of their duty to report safeguarding concerns and trained to the appropriate level for their post?</p>	<p>The Corporate Training Plan is the driver for the safeguarding training of all staff at the correct identified level for their role – significant programme of Safeguarding training has commenced</p> <p>A central information system to record training</p>	<p>Year-end figures – 1747 staff members 48.21% of workforce identified</p> <p>Increase to 38 trainers within the council are trained to deliver Level 1 Safeguarding within their service areas.</p> <p>Combined adult at risk and children's safeguarding training was undertaken for Council Members in Dec 17 ?????? (FIGURES STILL WAITING)</p>

	status via the Council's My View system is being piloted with a full implementation date of January 2018.	100% of schools have up to date whole school Safeguarding training plans in place Governor specific safeguarding training is delivered each term as necessary
Are we working to national guidance in managing addresses professional allegations and concerns?	National and Regional Policy is followed in managing Professional Concerns	The Safeguarding and Quality Assurance Unit has managed the following professional allegations between April and October 2017: <ul style="list-style-type: none"> • 6 new referrals for Professional Strategy Meeting (PSM). • 63of these are ongoing • 10 cases were concluded in this period with 2 cases having more than one conclusion. • 6 were concluded and substantiated • 4 were concluded and unsubstantiated 22 meetings were held in total

Analysis

Safe recruitment under the Corporate Safeguarding Policy continues to be a priority. Processes to ensure that as paid and unpaid members of staff are recruited they meet all requirements prior to full employment are in place. Whilst there are risk management strategies (SBAR -Risk Assessments) there are no current SBAR's relating to issues of failure to comply.

The Safeguarding Training plan has responded to the significant number of staff identified via the SAFE who need training at different levels, with significant training of staff undertaken in this period. However, a review of the delivery schedule needs to be undertaken to ensure that all new members of staff are correctly identified, and the training plan is robust and resilient.

Monmouthshire is fully compliant with the management of Professional Concerns Guidance within Children and Adult Services. However a review and improvement plan of both Adult and Children Safeguarding is part of the Business Support Plan (2017-2018) and will respond to new work being undertaken by the Regional Protocol and Procedures group of the Adult and Children Safeguarding Boards.

Self-Assessed Score Against

4

Measures:

3). Preventative Approach:

What does good look like - We are well-informed about the social issues that compromise the safety and welfare of children and adults at risk and /or potentially expose them to harm through abuse and neglect. We are working to demonstrate how we are responding to these issues and reducing risks through early intervention and preventative approaches.

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
Do our workforce understand emerging practice issues?	<p>Training plans are in place to ensure the right levels of training in VAWDASV and PREVENT</p> <p>PREVENT and VAWDASV training is part of Staff Induction plan</p> <p>Child Sexual Exploitation is delivered as a Level 3 training, included in Level 2 training and training and included in Level 1 integrated Safeguarding training</p> <p>Local Safeguarding Network Practitioner Event held Feb 2017</p>	<p>2 PREVENT training Sessions in this period 17 further staff members trained</p> <p>PREVENT awareness raising has been delivered in all Monmouthshire Schools</p> <p>A further 20 Internal staff trained in CSE issues</p> <p>32 staff members in Level 2 Safeguarding Training</p> <p>Year end figures for VAWDASV – 1857 staff members trained in Level 1 60% of workforce</p> <p>Increase to 7 (4) referrals for New CSE Strategy Meetings 9 children subject to Operation Quartz - specialist Police risk management</p> <p>49 members of 3rd Sector and Universal services attended Practitioner Event</p>
Does Monmouthshire demonstrate clear and creative working together with other agencies to intervene early?	Integrated and creative working between public protection and safeguarding is embedded and a real	Child Protection Co-ordinator attends monthly meetings with licencing to discuss arising regulation and community safeguarding issues.

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
	<p>strength in preventing abuse and harm.</p> <p>Growing development of Gwent response to the exploitation of Vulnerable adults and children -</p> <p>Partnership working is well developed between key partners through community well-being networks which align resources to safeguard and prevent the need for statutory interventions.</p>	<p>Child Protection Co-ordinator chairs fortnightly Monmouthshire MASE (Multi Agency Sexual Exploitation meetings) with Police re: locations and perpetrator identification</p> <p>Development of a multiagency Child Exploitation group developed with SSD, Health, Education, Police, and 3rd Sector participation to begin exploring wider exploitation issues and to share good practice, rising themes, implementation of new policy</p> <p>Strengthened links made between Safer Mon and Children and Adult Safeguarding</p> <p>Collaborative Working between Licencing and the Gwent Missing Children’s team and Police in regard to Operation Makesafe - CSE in Hotels, Pubs, Taxi’s</p> <p>The Collaborative “Place Based Working” approach is integrating public, voluntary third sectors and communities by the development of integrated “Place based wellbeing teams”. An Information Sharing Protocol for Place Based Well-Being Support in Monmouthshire -accredited by Wales Accord for the Sharing of Personal Information (WASPI). An approach to measuring progress called ‘most significant change’ has been developed which enables partners to collectively identify the interventions which have prevented escalation of need for protection.</p>
Does the Information Advice and Assistance (IAA) approach at the front door of adult and children’s social services	Continuous progress	The Information/ Advice and Assistance (IAA) facility at the front door of Children’s and Adults (FISH) services - processes monitored and reviewed.

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
ensure that families and concerned citizens can access information and advice easily and effectively?		<p>Increase from 1515 to 1911 Adults received IAA Sept -March</p> <p>703 Children/families received IAA Sept-March</p>
Is there a Multi-Agency Early Support and Family Support Referral Pathway to support vulnerable families?	<p>Cabinet agreed changes to ES services December 17</p> <p>Implementation of the realigned early support offer is a priority for improvement in the next period.</p>	<ul style="list-style-type: none"> • Immediate Implementation of the strategy and agreed Referral Pathway. • Weekly Multiagency Panel meetings to channel work appropriately commenced Jan 18; • TAF restructured as agreed to Building Strong Families team and key posts recruited to; • Temp realigned service management to prioritise a similar alignment of post statutory support
Are we analysing and responding to risk and vulnerability in communities?	<p>There has been a significant focus on individual and community well-being over a number of years. The focus on locality and place based approaches which develop resilience in individuals, families and communities.</p> <p>See progress re: MASE , Exploitation Group, LSN in previous column</p>	<p>Development of the Community Wellbeing Hubs at Mardy Park, Monnow Vale, and Caldicot Library and the support of people to access community based support opportunities</p> <p>Families’ First services provide a range of preventative interventions for children and families.</p> <p>Community Wellbeing Development Officers based in the North and the South of the County who help identify gaps in community provision, support the development of community-based groups, and assist in the location of funding streams.</p> <p>The Community Development and Partnership Team will be working across the County using the asset based community development methodology to understand the strengths of communities and work with communities and partners to address those strengths.</p>

Analysis

Continued progress to align increased and more robust preventative strategies on limited resources has been positive with the implementation of the Early Support Referral Pathway, the reshaping of service provision to be more targeted and robust in the provision of Preventative Services. The further temporary realignment of Management also will mean that the aligning of post statutory support to preventing children entering the Child Protection arena will now be a priority.

The Local Authority continue to demonstrate creative and responsive strategic and operational actions to address current issues raised by the Safeguarding Boards, Strategic and Operational Partners. The developing work in regard to Exploitation evidence this. Better reporting mechanisms mean that the increased activity within IAA and Adult Safeguarding must be monitored and analysed in order to ensure effective and protective service provision.

Self-Assessed Score Against Measures:

4). Robust Protection:

What does good look like - We operate best practice in protecting children and adults at risk and ensure that:

- All concerns about possible abuse or neglect are recognised and responded to appropriately;
- Multi-agency plans and interventions reduce risks and needs for children and vulnerable adults including those at risk of significant harm.

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
Are referrals or concerns assessed and initial decisions taken within 24 hours of referral to children’s social services?	Continuous Progress	98.3% of referrals within Children Services meet this standard
Are Adult Protection enquires undertaken in a compliant and safe timescale?	There has been an increase in the percentage of enquiries completed in time scale -	87.31 % (80.0%) of Adult Protection enquires were completed within 7 days Factors: Significant increase in Duty to Report form

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
	Review of thresholds and Service Improvement Plan as part of Business Support Plans 2018-2021	Retirement of Manager – recruited to post
Are assessments in children’s services completed within statutory timescales (42 days)?	This is a priority for improvement which is being addressed within the children’s services improvement plan.	<p>83.3% of assessments in children’s services were completed within statutory timescales</p> <p>Implementation Plan for Risk Assessment Framework is underway and will be reflected in next reporting period.</p> <p>Key Part of the Children Services Business Improvement Plan</p>
Is there is a Quality Assurance Framework in place which practice improvement?	Social Care and Health Quality Performance Framework is in place. Service managers report into a DMT level group on the quality assurance undertaken in their service area.	<p>A range of mechanisms exist to drive improvement through quality assurance processes. These include:</p> <ul style="list-style-type: none"> • Managers monitor through live dashboards in Children’s Services; • In children services 1 in 10 case records are randomly selected to assure decision making. If there are any concerns the ratio can be increased and reviewed. • Weekly Performance Management Oversight Group in Children’s Services (PMOG) • Children’s Services Leadership Team (CSLT) • Senior Management Quality Improvement Program (QUIP) • Adult Social Services practice improvement meeting (Oliver) <p>This accords with service level quality assurance work undertaken by the Child Protection Coordinator.</p> <p>Quality Assurance is key feature of Safeguarding Business plan 2018-2021 for both Children Services and Safeguarding Unit</p>

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
Is an analysis of trends, exceptions, pressures and practice standards undertaken in protective services?	<p>The Children’s Services Improvement Programme is driven by analysis of the data and trends which inform the operational and strategic improvement actions.</p> <p>Recommendations in relation to the Analysis of Data and themes in Adult Safeguarding has been supported by the further development of FLO</p>	<ul style="list-style-type: none"> • After a period of rises in the Looked After and CP population there has been stabilisation in LA children and a fall in CP population (91-75) • The IRO /CPC 6 monthly reports relate the fall to the Legal Planning Process and CP Conference Panel which resulted from trends and pressure analysis <p>More accurate and compliant return to WAG re: Safeguarding Activity in Monmouthshire</p>
Is Care Planning compliant with all-Wales procedures and does it reflect clear multi-agency working to manage and reduce risk?	<p>Adult and child protection practitioners work to all-Wales guidance and are participating actively in the reviews of national guidance.</p> <p>Practitioners in adult and children’s services work with multi-agency partners in domestic abuse.</p>	<p>Quality assurance and independent reviews test out compliance with All Wales Children’s Services.</p> <p>Implementation Plan for Risk Assessment Framework to commence June 2018</p> <p>Sept-Mar 25 women, and 31 children in Monmouthshire were the subject of Multi Agency Risk Assessment Conference (MARAC) risk reduction plans.</p>

Analysis

Stabilising the Workforce in Children’s Services and being less reliant on transitory agency workers has now offered the opportunity of maximising the implementation of the Risk Management Strategy in Children Services in the next reporting period. The development of Data Dashboards and reporting mechanisms need now to be matched with sustained practice development and improvements. Quality Assurance frameworks to gather and analyse qualitative information are part of the Business Support Plan 2017-2021.

Adult Safeguarding has had a period when key staff have retired but these posts are either recruited to or successfully covered. This at a period when new reporting mechanisms for Adult Safeguarding

demonstrate increased “Duty to Report” activity at this “front door”. The key priorities for this area must be the ensuring that the service remains compliant during this transition period, and the Quality Assurance program which is also part of the Business Service Plan.

Self-Assessed Score Against 4 Measures:

5). Safe Services – delivered through commissioning arrangements, grants, partnerships and volunteering

What does good look like - We use our influence to ensure that services operating in Monmouthshire, both commissioned and those outside the direct control of the Council, do so in ways which promote the welfare and safety of children and adults at risk.

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
Do we ensure that commissioned services meet Monmouthshire’s safeguarding services standards as laid down in the Corporate Safeguarding Policy?	MCC Accreditation Process for commissioned social care services is the responsibility of embedded in Social Care and Health Commissioning Team. The service manager had responsibility for adult and children’s services from January 2017 and has been developing the operating model to ensure it covers all social care services.	<p>The Corporate Safeguarding Policy 2017 clarifies the position regarding commissioned services meeting Monmouthshire’s safeguarding standards.</p> <p>A new Contracts Manager has been in place since August 2017 and has developed a contract monitoring programme to cover all providers. In county providers receive an annual monitoring visit and a min of two relationship visits from a commissioning officer.</p>

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
	<p>There has been an accreditation and contract management process in operation for all commissioned adult and children’s services since April 2017.</p>	<p>Out of County providers are periodically considered via a desk top monitoring approach and in person visits carried out as needed</p> <p>Monitoring visits during the period 1st April 2017 – 1st April 2018:</p> <p>Annual Monitoring Adults Services (44 providers – 39 with MCC placements during the period):</p> <ul style="list-style-type: none"> • 38 annual monitoring visits undertaken (1 postponed due to high levels of support via relationship visits in latter part of year) • 100% of providers with MCC placements have received relationship visits in the last year. <p>Annual Monitoring Children’s Services – in county (4 current placements):</p> <ul style="list-style-type: none"> • 3 annual monitoring visits (1 monitored by SP) <p>Annual Monitoring Children’s Services – out of county:</p> <ul style="list-style-type: none"> • 4 visits undertaken – desk top monitoring of all other providers completed and indicated no reason for a visit. <p>No. Escalating Concerns - initiated/closed 0</p> <p>No. Provider Performance Issues (Stage 3) 1 (closed during the year)</p>

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
	<p>Action Plan in response to IA report (Oct 17)re: consistent adherence to accreditation programme and process for C/S placement - COMPLETE</p> <p>The majority of children’s independent foster agency (IFA) and residential placements are identified via the Children’s Commissioning Consortium Cymru Framework (the 4Cs) - The providers are subject to a stringent framework of checks.</p> <p>Contracts tendered by other Directorates for example CYP /schools and PTU for services for children and adults at risk appropriately reflect safeguarding requirements.</p>	<p>No. Provider Performance Issues (Stage 2) 3 No of Provider issues ongoing (Stage 2) 2</p> <p>Children’s placements and welfare are mandatorily reviewed by social workers in line with national and regional policy. Between April – October 2017 206 reviews were held in this period. 100% held within statutory timescale</p> <ul style="list-style-type: none"> • Clarified interface between contracting , Commissioning and Social Care; • Process developed to check accreditation and monitor providers on ongoing basis • IA report due end May 18 • 4’C continue to monitor the framework provider. <p>Extract from Cleaning Contract Awarded by MCC School. (From old report not sure if there is a newer example?)</p>

Contributing Areas of Activity and Questions for Self – Assessment	Progress	Evidence
Do we ensure that parts of the Council have robust arrangements in place for services they commission/licence?	There are well developed arrangements in public protection: - safeguarding training is a requirement for licenced taxi /hackney and private hire. - Voluntary safeguarding training offered to alcohol/ entertainment and late night refreshment licensees.	Monmouthshire Letting and Hiring process requires evidence of the hirer’s Safeguarding processes as mandatory prior to letting council property. This is set out in the Taxi and Private Hire Policy & Conditions 2016. During the reporting period we saw: - 100% compliance new licences - 100% previous licences - 100% renewed licence
Do we ensure the safe recruitment, training, and management of volunteers in commissioned services?	The Corporate Safeguarding Policy and Volunteering Policy set out clear guidelines and expectations for volunteers in commissioned services. This is reflected in individual service contracts.	Corporate Safeguarding Policy Volunteering Policy

Analysis

This is the first time information regarding commissioned services has been reported and there is an emphasis on social services commissioning in this report. Social care commissioning capacity in Monmouthshire had for many years been focussed on adult commissioning. The Social Care and Health Commissioning Team is developing its operating model to provide a comprehensive approach for all social care commissioning for children and adults. This is the first time information regarding commissioned services has been reported and there is an emphasis on social services commissioning in this report. Social care commissioning capacity in Monmouthshire had for many years been focussed on adult commissioning. The Social Care and Health Commissioning Team is developing its operating model to provide a comprehensive approach for all social care commissioning for children and adults. A Commissioning Lead is in place and has developed productive relationships with commissioned providers have been addressed alongside the social worker review of placements which have met all statutory timescales. A robust, risk-based, contract management and quality assurance process across all providers from January 2018.

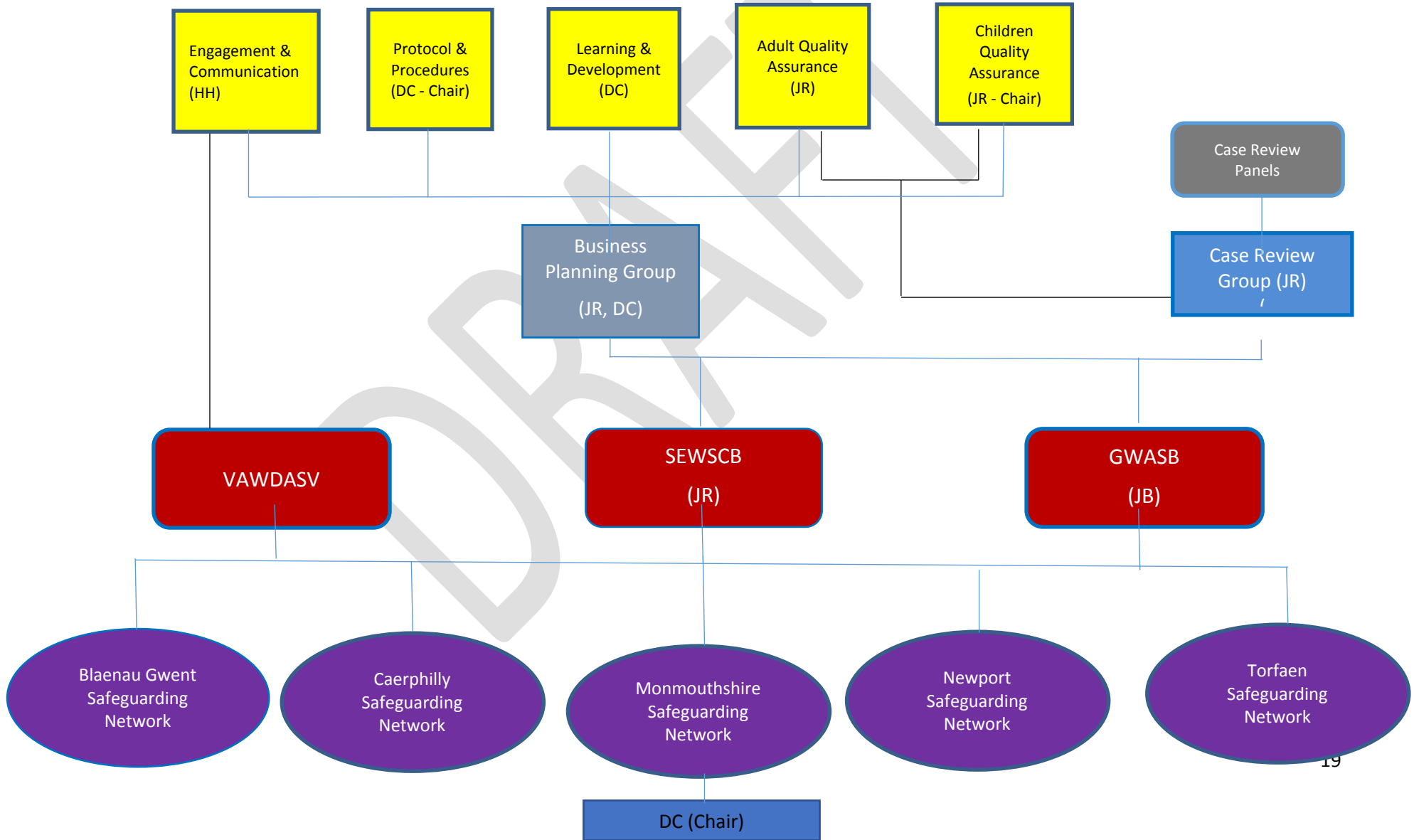
Initial review of the evidence from schools, and other parts of the Council that contract for services for children/ adults at risk indicate there are robust arrangements in place (individual school contracts, transport, leisure services). However, the evaluative score recognises the need for an in-depth understanding of the baseline position across the whole of the Council in respect of commissioning. It has been agreed that internal audit will undertake work in this area during their 2017/18 audit programme. A robust and proportionate contract management and quality assurance process across all providers from January 2018.

Initial review of the evidence from schools, and other parts of the Council that contract for services for children/ adults at risk indicate there are robust arrangements in place (individual school contracts, transport, leisure services). However, the evaluative score recognises the need for an in-depth understanding of the baseline position across the whole of the Council in respect of commissioning. It has been agreed that internal audit will undertake work in this area during their 2017/18 audit programme.

Self-Assessed **Score** **Against** **Measures:**

3

Regional Strategic Safeguarding Structure



Appendix 2 : Case Studies

1). Good Governance

Case Study: Tourism Leisure Culture & Youth (TLCY) managers had different levels of focus, training, recruitment and competency regarding safeguarding responsibilities. The SAFE process and safeguarding policy was used positively to give more formal structure and ability of services to monitor and evaluate progress of all areas of their business. This has resulted in review of governance, structure and roles and responsibilities within the senior team of TLCY. A dedicated safeguarding lead officer ensures there is a true 'real-time' overview of all service areas. This also enables central monitoring and challenge with support provided when appropriate. TLCY have an action plan for Safeguarding that is monitored regularly for progress indicators; discussed at Directorate Management Team and team meetings and shared with the safeguarding team directorate lead. Safeguarding frameworks are embedded across TLCY and will be firmly engaged in any future planned service delivery.

The work has dovetailed into further work which is underway to consider options for delivering these services as an Alternative Delivery Model (ADM). Safeguarding frameworks are now embedded and will be monitored and reviewed as the ADM continues to be developed. Consideration of ability to sustain safeguarding performance will be a key issue in taking a final decision on whether to progress to an ADM.

TLYC provides a model for effective use of the SAFE self-evaluation to operationally and strategically improve safeguarding practice and evaluate future options for service delivery.

2). Safe Workforce

Case Study – This is a model case study which illustrates the way in which professional allegations are managed. It highlights the multi-agency nature of management of allegations, the role of the Authority in safeguarding children who are placed in Monmouthshire from other areas, and the roles and responsibilities of different partners. Duty of care to all concerned and timely conclusions in light of all relevant information is paramount.

In this case, concerns are raised by a child's social worker from an English Authority who is living in a residential care home in Monmouthshire. The concern is of a potential physical assault on the child by a member of staff. In line with the All Wales Child Protection Procedures a Professional Strategy Meeting is convened in Monmouthshire as the place the alleged assault took place, also Gwent Police had the jurisdiction to undertake any potential criminal investigation.

Discussion takes place with the child's social worker, the residential home, employee services and any relevant partner agencies to ensure the child's welfare had been secured and any medical assistance had been given. Further to this the worker is advised by their employer that a concern has been raised and a risk assessment undertaken to determine whether they should be placed on suspension without prejudice by their employer. A strategy

discussion takes place between Monmouthshire Children's Services and the police to share information, to agree the need for a child protection investigation and to arrange a professional strategy meeting.

In attendance at the professional strategy meeting are all relevant partners including: employing agency, the police, Monmouthshire social worker (who is part of the Child Protection Investigation Team), and the social worker from the English authority who had placed the child in Monmouthshire. All relevant information is shared in the meeting both around the child and the member of staff. The meeting's remit is to ensure the welfare of the child and the welfare of the employee had been appropriately addressed.

The meeting discusses the information shared and arrives at a conclusion against the original allegation. It could have been either **Substantiated, Unsubstantiated, Unfounded, Demonstrably False, or Malicious**. If the meeting agrees that further information is required to enable a conclusion to be reached, the meeting will be reconvened at an appropriate time.

An Action Plan is recorded and dependant on outcome this could involve notification to Disclosure and Barring Service, Care and Social Services Inspectorate for Wales (CSSIW) or any other regulatory body, referring back to the employer to undertake an internal investigation or disciplinary process, training needs, or other appropriate action. The meeting also agrees how the child and the employee are to be informed of the outcome.

3). Preventative Approach

Case Study – A health visitor spoke with a mother of three children who was struggling to manage the behaviour of her children and home conditions. She was aware that her concerns related to ability to parent three lively children with limited financial resources and few friendship and family networks. The family did not meet the threshold of statutory intervention. She was also aware that without support the needs could escalate and in time result in a referral to children's social services. With the consent of the mother she made a referral to Acorns nursery provision for the Incredible Years Parenting support programme and for a volunteer support worker to address home conditions and mother's social isolation through linking her with other mothers and free/low cost opportunities for her children to participate in football and athletics clubs. Through the Housing Gateway she was able to access financial advice to maximise her income and address repair issues with her landlord. The mother agreed to include the older children's school in this support network. Soon natural friendships were developing and the volunteer could reduce her contact. The Health Visitor remains involved in the health needs of the youngest child. This case study shows how creative multi agency working at an early stage can positively work with vulnerable families preventatively.

4. Robust Protection

Case Study – This is a model case study which highlights multi-agency work in the area of domestic abuse. A Duty to Report form is received by adult safeguarding with regard to a woman who has been subject to a serious domestic assault. Initial enquiries indicated that the woman is not known to adult services, does not have children, and does not have a specific care and support need. It is clear, however, from the information received that the woman

has been a victim of domestic abuse in the past and that the risks to her seem significant. Police make a referral for a MARAC. An adult safeguarding co-ordinator attends the MARAC meeting with the police, representatives from Women’s Aid, housing, tenancy support and health. The meeting determines the risks posed to the woman and a multi-agency plan is agreed which addresses risks identified by a number of possible options which include: support from the police, marking the property for urgent response; home security and alarms where necessary, community policing aware of perpetrator, independent domestic violence advocate support, refuge accommodation, housing and tenancy support, health assessment support, and referral to other support agencies as appropriate is made available. The information from is stored on the MARAC SharePoint system so that tracking can take place, information can be analysed as to trends and numbers of cases, and outcomes checked.

5). Good Governance

The terms and conditions of the Home to School Transport Contract (adopted 2014), there had been no specific/statutory requirement for staff to undertake Safeguarding (L1) training. However, as Local Authority commitments to safeguarding have progressed significantly over the years, the Passenger Transport Unit (PTU) have referred to the paragraph below in order to provide (or enforce as required) the need for safeguarding training.

4.3.37	The Supplier shall ensure all staff are trained as appropriate to provide the standards of service required. In addition contractor’s staff may be required to attend any Council provided training as and where appropriate. If such a request is made by the Council, the Contractor must make available the relevant staff member(s).
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The PTU have since revised the terms and conditions in readiness for the contract retender (with effect from September2018), now reflecting the requirement for staff to undertake Safeguarding (L1) training.

6.13	The Supplier shall ensure all staff are trained as appropriate to provide the standards of service required and staff must have undertaken a minimum level 1 in safeguarding course provided by the Council (the costs of which may be chargeable). In addition contractors staff may be required to attend any Council provided training as and where appropriate. If such a request is made by the Council, the Contractor must make available the relevant staff member(s).
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The PTU (Operations) team are now suitably trained for the delivery of Safeguarding (L1) in order to assist with any training needs of providers.

Appendix 3 WASG Action Plan – Priority Actions

1).Good Governance			
Standard	Evidence	RAG Rate	Further Actions Required
Strengthen and evidence links between the work of the national and regional Safeguarding Boards and practice within Monmouthshire.	Current strong involvement in all areas of National and Regional Safeguarding Boards		Clear pathways of implementation in Monmouthshire
Reviewing the quality of SAFE self-evaluation across all directorates to ensure that resulting action plans address the critical safeguarding issues for each service area and priority actions are reflected in SIPs;	6 monthly Directorate self-review taken place, and Safeguarding Action Plan built into Business Support Plans		<ul style="list-style-type: none"> • Identification if further areas for SAFE audit to be completed; • QA of compliance and effectiveness of use of SAFE
ensuring the SBAR system of significant event analysis is understood, being used positively and risks highlighted are reflected in risk registers at directorate level as well as whole authority and WASG	Currently reviewed by WASG for ongoing use, effectiveness, and timeliness of action plans		<ul style="list-style-type: none"> • Completion of Risk Register
testing out the effectiveness of arrangements in the 2018/19 internal audit work programme.	?????		

2). Safe Workforce			
Standard	Evidence	Rag Rate	Further Actions
<ul style="list-style-type: none"> Implementation of safeguarding training plan to address the gaps in safeguarding training for children and adults at risk 	<p>Initial Implementation of Safeguarding Training underway.</p> <p>Basic Level Safeguarding Video in place</p> <p>Significant levels of SG training identified competing with VAWDV and obligation to Regional Safeguarding Training</p>		<ul style="list-style-type: none"> Review of the no. of staff still needing training Review of the Training progress in light of co-ordinator on Mat Leave
<ul style="list-style-type: none"> Full implementation of volunteering policy 			
<ul style="list-style-type: none"> Implementation of information systems to support accurate monitoring of whole workforce training status 	<p>Training Database developed</p> <p>Reporting systems appear problematic at this point</p>		<ul style="list-style-type: none"> Continued development of system Reporting Systems to be reviewed
<ul style="list-style-type: none"> Test out understanding of duty to report across the workforce 	<p>Whilst it is current training there has been no significant progress</p>		
<ul style="list-style-type: none"> Alignment of professional allegations processes to align across adult and children's services. 	<p>Regional Task and Finish Group undertaking this work</p> <p>Internal Review of Adult Safeguarding management of Professional Concerns in Business Improvement Plan</p>		<ul style="list-style-type: none"> Internal Review is part of Business Support Plan Membership on Task and Finish Group to support development of internal practice and process

3). Preventative Approach			
Standard	Evidence	Rag Rate	Further Actions
Implement fully the early support and referral pathway	Implemented post Dec 17		???
Continue to build on the strengths of place based working by increasing the connections and partners who are working together to support individual and community well-being.			
Develop evaluative measures that enable better reporting of the impact of preventative work.			

4). Robust Protection			
Standard	Evidence	Rag Rate	Further Actions
Children and adult Safeguarding and Quality Assurance Unit to develop an operating model which builds on strengths in both parts of the service			
Continue to improve outcomes in children's services through the children's services improvement programme, including improving			

systems, processes and practice which contribute to timescales for completion of assessments.			
Implementation, and quality assurance of, risk framework in children's services.			
Further develop quality assurance mechanisms, and data analysis, in adult protection, to support improvement.	Significant development of data reporting mechanisms undertaken		<ul style="list-style-type: none"> • Analysis of this information and it's impact of service provision • Development of Qualitative information and measurable outcome indicators

5). Safe Services			
Standard	Evidence	Rag Rate	Further Actions
Internal audit to undertake review to baseline position across the authority in terms of commissioning and partnership			
Social Care and Health Commissioning Service to implement operating model covering adult and children's services			
Implement internal audit action plans for children's services placements.			



Future Generations Evaluation (includes Equalities and Sustainability Impact Assessments)

<p>Name of the Officer completing the evaluation Claire Marchant</p> <p>Phone no: E-mail: clairemarchant@monmouthshire.gov.uk</p>	<p>Please give a brief description of the aims of the proposal</p> <p>This is not a proposal, it is a statement of progress for Scrutiny</p>
<p>Name of Service: Safeguarding – Social Care and Health</p>	<p>Date Future Generations Evaluation form completed</p> <p>June 2018</p>

NB. Key strategies and documents that may help you identify your contribution to the wellbeing goals and sustainable development principles include: Single Integrated Plan, Continuance Agreement, Improvement Plan, Local Development Plan, People Strategy, Asset Management Plan, Green Infrastructure SPG, Welsh Language Standards, etc

Page 1




Does your proposal deliver any of the well-being goals below? Please explain the impact (positive and negative) you expect, together with suggestions of how to mitigate negative impacts or better contribute to the goal.



Well Being Goal	Does the proposal contribute to this goal? Describe the positive and negative impacts.	What actions have been/will be taken to mitigate any negative impacts or better contribute to positive impacts?
<p>A prosperous Wales Efficient use of resources, skilled, educated people, generates wealth, provides jobs</p>	<p>A Neutral Contribution</p>	
<p>A resilient Wales Maintain and enhance biodiversity and ecosystems that support resilience and can adapt to change (e.g. climate change)</p>	<p>A Neutral Contribution</p>	

Well Being Goal	Does the proposal contribute to this goal? Describe the positive and negative impacts.	What actions have been/will be taken to mitigate any negative impacts or better contribute to positive impacts?
A healthier Wales People's physical and mental wellbeing is maximized and health impacts are understood	A Neutral Contribution	
A Wales of cohesive communities Communities are attractive, viable, safe and well connected	Safeguarding, is central to cohesive communities, in so much the Council must ensure appropriate services and processes in place to protect people as much as possible	
A globally responsible Wales Taking account of impact on global well-being when considering local social, economic and environmental wellbeing	Safeguarding is recognised regionally and Nationally as a key component to wellbeing and this report demonstrates the progress made against National, Regional and Local Policies	
A Wales of vibrant culture and thriving Welsh language Culture, heritage and Welsh language are promoted and protected. People are encouraged to do sport, art and recreation	A Neutral Contribution	
A more equal Wales People can fulfil their potential no matter what their background or circumstances	Safeguarding is a key part of Wellbeing and is at the centre A Neutral Contribution e of the service the Authority provide and commission. Safe Services and A preventative agenda	

2. How has your proposal embedded and prioritised the sustainable governance principles in its development?

Sustainable Development Principle	Does your proposal demonstrate you have met this principle? If yes, describe how. If not explain why.	Are there any additional actions to be taken to mitigate any negative impacts or better contribute to positive impacts?

Sustainable Development Principle	Does your proposal demonstrate you have met this principle? If yes, describe how. If not explain why.	Are there any additional actions to be taken to mitigate any negative impacts or better contribute to positive impacts?
 <p>Long Term</p> <p>Balancing short term need with long term and planning for the future</p>	<p>This report is based on the 5 Safeguarding Priorities of the Council and demonstrates progress made within Governance, Safe Workforce, Preventative Agenda, Robust Protection and Safe Services. It details how services work in partnership with agencies from different sectors, considers involvement and collaboration with communities and details the progress made in relation to Safeguarding in Monmouthshire.</p>	
 <p>Collaboration</p> <p>Working together with other partners to deliver objectives</p>	<p>As Above</p>	
 <p>Involvement</p> <p>Involving those with an interest and seeking their views</p>	<p>As Above</p>	

Sustainable Development Principle	Does your proposal demonstrate you have met this principle? If yes, describe how. If not explain why.	Are there any additional actions to be taken to mitigate any negative impacts or better contribute to positive impacts?
 <p>Prevention</p> <p>Putting resources into preventing problems occurring or getting worse</p>	As Above	
 <p>Integration</p> <p>Considering impact on all wellbeing goals together and on other bodies</p>	As Above	

3. Are your proposals going to affect any people or groups of people with protected characteristics? Please explain the impact, the evidence you have used and any action you are taking below. For more detailed information on the protected characteristics, the Equality Act 2010 and the Welsh Language Standards that apply to Monmouthshire Council please follow this link: <http://hub/corporatedocs/Equalities/Forms/AllItems.aspx> or contact Alan Burkitt on 01633 644010 or alanburkitt@monmouthshire.gov.uk

Protected Characteristics	Describe any positive impacts your proposal has on the protected characteristic	Describe any negative impacts your proposal has on the protected characteristic	What has been/will be done to mitigate any negative impacts or better contribute to positive impacts?
Age	Development of Safeguarding Practice and Safer Services	None	

Protected Characteristics	Describe any positive impacts your proposal has on the protected characteristic	Describe any negative impacts your proposal has on the protected characteristic	What has been/will be done to mitigate any negative impacts or better contribute to positive impacts?
Disability	Development of Safeguarding Practice and Safer Services	None	
Gender reassignment	Development of Safeguarding Practice and Safer Services	None	
Marriage or civil partnership	Development of Safeguarding Practice and Safer Services	None	
Pregnancy or maternity	Development of Safeguarding Practice and Safer Services	None	
Race	Development of Safeguarding Practice and Safer Services	None	
Religion or Belief	Development of Safeguarding Practice and Safer Services	None	
Sex	Development of Safeguarding Practice and Safer Services	None	
Sexual Orientation	Development of Safeguarding Practice and Safer Services	None	
Welsh Language	Development of Safeguarding Practice and Safer Services	None	

4. Council has agreed the need to consider the impact its decisions has on important responsibilities of Corporate Parenting and safeguarding. Are your proposals going to affect either of these responsibilities? For more information please see the guidance

<http://hub/corporatedocs/Democratic%20Services/Safeguarding%20Guidance.docx> and for more on Monmouthshire's Corporate Parenting Strategy see <http://hub/corporatedocs/SitePages/Corporate%20Parenting%20Strategy.aspx>

	Describe any positive impacts your proposal has on safeguarding and corporate parenting	Describe any negative impacts your proposal has on safeguarding and corporate parenting	What will you do/ have you done to mitigate any negative impacts or better contribute to positive impacts?
Safeguarding	This report is about the development of Safeguarding Practice in Monmouthshire	None	
Corporate Parenting	None	None	

5. What evidence and data has informed the development of your proposal?

Both Quantitative and Qualitative evidence presented throughout the report

6. SUMMARY: As a result of completing this form, what are the main positive and negative impacts of your proposal, how have they informed/changed the development of the proposal so far and what will you be doing in future?

The Main benefit is sharing information, receiving feedback and development of the process of assuring Safeguarding Process in Monmouthshire

7. ACTIONS: As a result of completing this form are there any further actions you will be undertaking? Please detail them below, if applicable.

What are you going to do	When are you going to do it?	Who is responsible	Progress
CYP & Adult Scrutiny	June 2018		
Council			

8. MONITORING: The impacts of this proposal will need to be monitored and reviewed. Please specify the date at which you will evaluate the impact, and where you will report the results of the review.

The impacts of this proposal will be evaluated on:	Quarterly
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9. VERSION CONTROL: The Future Generations Evaluation should be used at the earliest stages of decision making, and then honed and refined throughout the decision making process. It is important to keep a record of this process so that we can demonstrate how we have considered and built in sustainable development wherever possible.

Version No.	Decision making stage	Date considered	Brief description of any amendments made following consideration

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SUBJECT:	CAPITAL FUNDING - DISABLED FACILITIES & SAFETY AT HOME GRANTS
MEETING:	JOINT ADULTS AND CHILDRENS & YOUNG PEOPLE'S SELECT COMMITTEE
DATE:	18th June 2018
DIVISION/WARDS AFFECTED:	ALL

1. PURPOSE:

1.1 To provide an update on the provision of disabled facilities grants (DFGs) and Safety at Home (SaH) grants and the outcomes achieved for both service users Social Care. The report also seeks to assure members that service is aligned with the Council's safeguarding policy.

2. RECOMMENDATIONS:

2.1 The Committee consider how the disabled adaptation programme is supporting residents to remain living safely and independently at home, reflect on performance and make recommendations as appropriate.

3. KEY ISSUES:

3.1 The Council has a statutory duty to provide DFG's within six months of receiving an application. Failure to do so lays it open to legal challenge. It also has discretion to provide SaHs. All DFGs are capped at £36,000 and while the average adult award is about £6,000 each year a number of larger, complex grants are provided to meet the needs of both adults and children with complex disabilities. Children's DFG's aren't capped and, therefore, can utilise a disproportionate amount of the budget.

3.3 SaHs are intended for smaller works such as handrails, half steps and minor alterations, often costing less than £250 but which make a dwelling safer for a disabled resident. SaH's often facilitate hospital discharge or reduce the risk of falls and injuries, which might necessitate hospitalisation and are administered on behalf of the Council by Care & Repair alongside Rapid Response Adaptations.

3.4 In recent years, an annual shortage of funding for adaptations has impacted upon the time some clients have needed to wait for DFG's. On occasions it has been necessary to prioritise SaH. The increased funding for 2017/18 significantly improved the situation.

3.5 The average time to complete a DFG was reduced from 386 days in 2016/17 to 193 days in 2017/18. In addition, the Council has delivered more adaptations and, therefore, assisted more applicants. Not only has this improved the quality of life for more applicants, carers and their families, it will have provided business benefits to Social Care. The success is also applicable to the SaH minor adaptation programme and it wasn't necessary to prioritise work towards the end of the financial year. The success was achieved through:

- The additional £300,000 capital funding for DFG's (but also SaH); reviewing contractor quotation arrangements; re-introducing 'lean' processing (which streamlines means-testing) and managing the budget based on actual expenditure rather than committed expenditure.

- 3.6 A more detailed overview of performance is detailed in **Appendix 1**.
- 3.7 Alternatives to DFGs and SAHs do exist, including annual ENABLE funding from Welsh Government, which offers a fully flexible option with simplified approvals (eg no means testing or necessity for an Occupational Therapist to assess). Welsh Government encourages use through a partnership approach. The Council, however, strictly can't replace DFG funding with ENABLE funding. Other options to fund adaptations are available but are significantly less utilised. Nevertheless some potential applicants do opt to proceed with the necessary works at their own cost. Please see **Appendix 2** for other options.
- 4. REASONS:**
- 4.1 The Council has a duty to consider all applications for Mandatory Disabled Facilities Grants (DFG) which are administered under the Housing Grants, Construction and Regeneration Act 1996 (as amended).
- 5. RESOURCE IMPLICATIONS:**
- 5.1. Until last year, the annual capital budget has been £600,000, but in 2017/18 the Council agreed to increase to £900,000. This has been maintained for 2018/19. Broadly, the budget is £800,000 for DFGs and £100,000 for SaHs.
- 6. SUSTAINABLE DEVELOPMENT AND EQUALITY IMPLICATIONS:**
- 6.1 DFG's and SAH grants are predominantly awarded to older people, who are a protected group under the Equalities legislation, as are disabled children. See **Appendix 3**.
- 7. SAFEGUARDING AND CORPORATE PARENTING IMPLICATIONS**
- 7.1 While the majority of grant recipients are adults, a small number are children, often with profound and complex disabilities. The adaptations that are carried out not only improve the lives and wellbeing of the disabled child, they often make significant improvements to the wellbeing and safety of the whole family. However, prior to an adaptation being completed, Social Care ensure any risks to adults or children are managed and mitigated against through routine processes.
- 7.2 It is a priority for the Council to DBS check contractors who are sign-posted to install adaptations, in line with the Council's Safeguarding Policy, although clients can utilise any contractor of their choice. This is currently in progress.
- 8. CONSULTEES:**
Cabinet Member for Enterprise; Cabinet Member for Social Care, Public Health & Safeguarding; Chief Officer Social Care; Head of Childrens Services; Head of Adult Services; Head of Planning, Housing & Place Shaping; Chief Officer Enterprise; Monmouthshire CAIR.
- 9. BACKGROUND PAPERS:** None
- 10. AUTHOR:** Ian Bakewell, Housing & Communities Manager
- 11. CONTACT DETAILS:** Ian Bakewell, Tel: 01633 644479 **E-mail:** ianbakewell@monmouthshire.gov.uk

Appendix 1

Overview of Disabled Adaptation Service Activity & Case Studies

Activity	Target	2016/17	2017/18
No. of DFG Referrals		137	170
No. of Children's Referrals		Not collected	6
No. of DFG Approvals		63	91
No. of Children's Approvals		Not collected	5
No. of DFG Completions		49	85
No. of Childrens DFG Completions		Not collected	3
No. of outstanding approved Adult DFG's		Not collected – to follow	12
No of outstanding approved Children DFG's		Not collected – to follow	4
Average DFG Completion time*	180 days	356 days	193 days
Average Childrens DFG Completion time*		310 days	258 days
No. of SaH grants		416	516
No. of ENABLE Grants		23	19

* In order to produce a reportable Key Performance Indicator for the Welsh Government the time taken to process DFGs is recorded from the first point of contact a client has with the Occupational Therapy service within Social Care, to the certified date of completion of the works.

Housing and Community Services has direct control of the process for only a part of the overall time with the remainder being with the OT, the client and the contractor(s). In addition some of the more complex DFGs which involve building extensions requiring time with the Planning Department and Welsh Water all of which add to the overall processing time.

Several factors can cause the average processing time to increase and these include:-

- Time with the OT for assessment
- Time with the client while legal and financial information is produced. Other factors as illness of clients or relatives or bereavement of family.
- Time to undertake surveys and draft schedules of work
- Client choice for timing of works (any time within 12 months)
- The need for planning permission
- The need for Welsh Water to give building over sewers permission
- Availability of bespoke equipment
- Availability of specialist contractors
- Lack of capital funding

Case Study

Child A is a very independent 10 year old boy with significant physical and emotional challenges.

Child A was diagnosed with a degenerative condition at three months old and spent several weeks in intensive care. As a consequence of this, A suffered extensive damage to the growth plates in A's legs and arms. A had surgery in 2011, 2013 and more recently in August and October 2015. Following this A was wheelchair dependent and wearing an external fixator for approximately 9 months. A's consultant has confirmed that A will require several more

operations for complex limb reconstruction into adulthood. This will necessitate spending extended periods of time in a wheelchair or using a walking frame and long term physiotherapy. A is currently several months into a second operation to lengthen A's leg and is once again wheelchair dependent.

A lives with parents and brother in a three bedroom house. There is a living room and kitchen / diner on the ground floor, with bedrooms and family bathroom on the first floor. The property is small and it was extremely difficult for A and the family during the time when dependent on a wheelchair and a walker. Access to basic amenities was problematic (initially his father carried him up and down the stairs) and has placed considerable physical pressure on parents when assisting A. There were no ground floor toileting facilities but also no private space to use a commode which meant that everyone had to leave the living room so that A could use it.

Several joint visits by the OT, Grants Surveyor and architect for discussions with parents were necessary due to the complexity and extent of the proposal in order to reach a workable long term solution. The garage to the rear of the property was converted into a wheelchair accessible bedroom and ensuite bathroom. The building was extended to link it to the existing house – this created external wheelchair access and also allowed space for an internal wheelchair lift to accommodate the change in levels between the house and new bedroom.

The work was completed before the last surgery! A and the family are all amazed at the difference it has made to their everyday lives. A has privacy and dignity, is able to be as independent as possible – go to A's room when independently, access the bathroom without telling anyone or asking them to vacate the living room. Friends can easily come over and not be embarrassed about the help A has needed as this is massively reduced. This also extends to A's brother, who has also not wanted to have friends over due to the difficult and personal nature of A's difficulties. A's parents no longer have to lift A and only provide minimal assistance with transfers – mainly to access the shower / toilet. Mum has stated that she is now able to do this easily on her own whereas they used to have to wait for dad to come home from work. The physical and emotional stress of having to watch A go through these operations is significantly less now that the environment works for them all. Consequently, A is happier and finds it much easier to cope with the post op recovery.

Appendix 2

Alternative Options to Disabled Facilities Grants

Alternative options which can be pursued include:-

- **Interest free Home Improvement Loans** – a Welsh Government funded scheme is available through Housing & Communities. Although interest free, attracts an administrative fee.
- **Moving house to suitable accommodation** – an option which may in any case be necessary if a resident's present home is not suitable for adaptation. Moves can also be supported through DFG's. Experience is that most applicants are reluctant to move. In the case of private rented properties many landlords will not permit significant adaptations to be carried out as this may affect the value and marketability of the property.
- **Application for social housing** – this option is open to anyone but the shortage of RSL properties to rent, particularly bungalows and in the desired location, is a major obstacle.
- **Housing Options advice** - if in the absolute situation staying isn't an option the Council's Housing Options Service can consider an application under the homeless related duties to assist a resident to find more suitable accommodation. This, however, would be challenging and possible landlord resistance to adaptations can be problematic.
- **Equity release** – while the Council no longer offers such a scheme, various private sector providers are available. Experience is that this is regarded as a very unattractive option.
- **Care & Repair Monmouthshire** – may be able to assist in a number of ways including making an application for benevolent funding from various charities.
- **RSL purchase of existing home and subsequent adaptation** – in very limited circumstances privately owned properties may be purchased by RSLs to address a bespoke need. This option is reliant on the RSL being able to fund the purchase and/or the availability of Social Housing Grant.
- **Self or family funding** the most common way (other than DFG/SAH) of funding necessary adaptations, and, in the case of large projects exceeding £36,000 the resident would in any case have to fund the balance.
- **Different use of existing accommodation** – eg a ground floor living room being used as a bedroom.

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<p>Name of the Officer completing the evaluation Ian Bakewell</p> <p>Phone no: 01633 644479 E-mail: ianbakewell@monmouthshire.gov.uk</p>	<p>Please give a brief description of the aims of the proposal</p> <p>The provision of disabled adaptations to support older and disabled people to remain living at home independently and safely. This extends to helping prevent or hospital admissions or facilitate hospital discharge</p>
<p>Name of Service</p> <p>Housing & Community Services</p>	<p>Date Future Generations Evaluation form completed</p> <p>8th May 2018</p>

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Does your proposal deliver any of the well-being goals below? Please explain the impact (positive and negative) you expect, together with suggestions of how to mitigate negative impacts or better contribute to the goal.


Well Being Goal	How does the proposal contribute to this goal? (positive and negative)	What actions have been/will be taken to mitigate any negative impacts or better contribute to positive impacts?
<p>A prosperous Wales Efficient use of resources, skilled, educated people, generates wealth, provides jobs</p>	<p>Positively contributes to housing options as a more sustainable alternative for more reactive type interventions. For example the provision of social care or hospital admission/treatment</p>	<p>An annual disabled adaptation programme is place to meet statutory duties</p>
<p>A resilient Wales Maintain and enhance biodiversity and ecosystems that support resilience and can adapt to change (e.g. climate change)</p>	<p>N/A</p>	<p>N/A</p>

Well Being Goal	How does the proposal contribute to this goal? (positive and negative)	What actions have been/will be taken to mitigate any negative impacts or better contribute to positive impacts?
A healthier Wales People's physical and mental wellbeing is maximized and health impacts are understood	Positively contributes to the health of disabled persons through the provision of good adaptations	This approach is already supporting health – annual disabled adaptation programme.
A Wales of cohesive communities Communities are attractive, viable, safe and well connected	Positively contributes by helping applicants remain in their community	Ditto
A globally responsible Wales Taking account of impact on global well-being when considering local social, economic and environmental wellbeing	N/A	N/A
A Wales of vibrant culture and thriving Welsh language Culture, heritage and Welsh language are promoted and protected. People are encouraged to do sport, art and recreation	N/A	N/A

2. How has your proposal embedded and prioritised the sustainable governance principles in its development?

Sustainable Development Principle	How does your proposal demonstrate you have met this principle?	What has been done to better to meet this principle?
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Sustainable Development Principle	How does your proposal demonstrate you have met this principle?	What has been done to better to meet this principle?
 <p>Long-term Balancing short term need with long term and planning for the future</p>	<p>The service seeks to provide interventions that provide short-term solutions that provide safety and independence and longer-term benefits and avoid or reduce the need for other more disruptive and costly interventions such as moving home, medical treatment, more intensive care provision etc</p>	<p>The current disabled adaptation programme contributes to this</p>
 <p>Collaboration Working together with other partners to deliver objectives</p>	<p>This proposal is all about working with social care and health services. Also Care & Repair support Safety at Home</p>	<p>Partnerships currently exist with social care, health and Care & Repair</p>
 <p>Involvement Involving those with an interest and seeking their views</p>	<p>The programme is delivered in consultation with Social Care</p>	<p>The programme is delivered in consultation with Social Care</p>
 <p>Prevention Putting resources into preventing problems occurring or getting worse</p>	<p>The on-going adaptation programme is specifically designed to prevent problems for older and disabled applicants getting worse</p>	<p>The on-going adaptation programme is specifically designed to prevent problems for older and disabled applicants getting worse</p>

Sustainable Development Principle	How does your proposal demonstrate you have met this principle?	What has been done to better to meet this principle?
 <p data-bbox="145 343 313 375">Integration</p> <p data-bbox="324 215 526 438">Positively impacting on people, economy and environment and trying to benefit all three</p>	<p data-bbox="542 215 1330 279">The service particularly positively impacts on older people, disabled children and carers.</p> <p data-bbox="542 311 1330 375">The service contributes to the local economy by providing work for contractors</p>	<p data-bbox="1348 215 1411 247">N/A</p>

3. **Are your proposals going to affect any people or groups of people with protected characteristics?** Please explain the impact, the evidence you have used and any action you are taking below.

Protected Characteristics	Describe any positive impacts your proposal has on the protected characteristic	Describe any negative impacts your proposal has on the protected characteristic	What has been/will be done to mitigate any negative impacts or better contribute to positive impacts?
Age	Older people can access the service,	None	
Disability	Disabled people can access the service	None.	
Gender reassignment	neutral	None	
Marriage or civil partnership	neutral	None	
Race	neutral	None	
Religion or Belief	neutral	None	
Sex	neutral	None	
Sexual Orientation	neutral	None	
Welsh Language	neutral	None	

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4. Council has agreed the need to consider the impact its decisions has on important responsibilities of Corporate Parenting and safeguarding. Are your proposals going to affect either of these responsibilities? For more information please see the guidance note <http://hub/corporatedocs/Democratic%20Services/Equality%20impact%20assessment%20and%20safeguarding.docx> and for more on Monmouthshire's Corporate Parenting Strategy see <http://hub/corporatedocs/SitePages/Corporate%20Parenting%20Strategy.aspx>

	Describe any positive impacts your proposal has on safeguarding and corporate parenting	Describe any negative impacts your proposal has on safeguarding and corporate parenting	What will you do/ have you done to mitigate any negative impacts or better contribute to positive impacts?
Safeguarding	The service contributes positively	No negative impacts	
Corporate Parenting	The service contributes positively	No negative impacts	

5. What evidence and data has informed the development of your proposal?

Disabled adaptation statistics

Case information from Social Care

6. SUMMARY: As a result of completing this form, what are the main positive and negative impacts of your proposal, how have they informed/changed the development of the proposal so far and what will you be doing in future?

The main positive benefits of this proposal are:

- To support people living independently at home
- To make homes safer
- To prevent hospital admission
- To facilitate hospital discharge
- Reduce or eliminate care provision
- Improves quality of life and health for individuals
- Improves peoples dignity

7 Actions. As a result of completing this form are there any further actions you will be undertaking? Please detail them below, if applicable.

What are you going to do	When are you going to do it?	Who is responsible	Progress
Review planning arrangements in relation to liaison with contractors	By March 17	John Parfitt	Discussions have started with contractors

8. Monitoring: The impacts of this proposal will need to be monitored and reviewed. Please specify the date at which you will evaluate the impact, and where you will report the results of the review.

The impacts of this proposal will be evaluated on:

On a quarterly basis through existing performance management arrangements