



Improving Outcomes, Improving Lives

Director of Social Services
Annual Report 2017/18



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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 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 to 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 understand and 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 at the heart of local government in Monmouthshire

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 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.
- 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.
- Fulfilment of our corporate parenting responsibilities which are well understood by officers across the Council. Considerable progress has been made in the last year in the areas of participation and engagement, employment and training opportunities and housing and accommodation by colleagues across the Council working with partners to support our looked after children. 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).
- 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.

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.

Social services working in partnership

Reporting in line with the SSWBA means the report is balanced between assessing how well we are promoting and supporting wellbeing, which prevents the need for social care services, and how well we are assessing and meeting needs, protecting and supporting. We need to report on our progress against the long term and sustained actions which tackle the root causes of deprivation, disadvantage and adverse experiences. We also need to report on 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 which builds on the strengths of communities and the people that live within them compliments 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 with the most complex of challenges 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 (PSB), 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 and volunteering for wellbeing, Abergavenny Community Centre and the ACE Centre in Abergavenny, the Palmer Centre in Chepstow.

Delivering the Social Services and Wellbeing (Wales) Act (2014)

The Social Services and Wellbeing (Wales) Act (2014) (SSWBA) came into force in April 2016. We have used the opportunity of the legislation to sharpen our focus on wellbeing as well as social services. We have catalysed well established partnerships and develop new connections to plan and develop practice, and understand assets and opportunities within localities. It supports us 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

Using a range of information to understand how well we are doing

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 adult's or children's services and this has enabled the beginnings of a common approach to practice, culture and quality of care across adult's 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-centered practice which is embedded legislatively in the SSWBA through the 'what matters' conversation. They 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.

How well are we doing across adult and children's services

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. We now have common leadership positions, a well-developed understanding of the importance of intervening early and preventing escalation of need, positive working effectively with partners, practicing in a person-centred way, progressive commissioning and effective safeguarding. 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's 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 excellent outcomes for children and young people. Overall progress over the first two year has been very positive and 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 clearly improving trajectory which will be evidenced throughout 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 prevention 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 transformational 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 adult's 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. There has been further integration of older adult mental health services into locality working. Mardy Park in particular has seen considerable development in the last year, which 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 and 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 have been 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 remodeled 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 elsewhere that the difference that can be made to people's lives is truly at the leading edge of social services anywhere in the UK.

Sustainable social services

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 intentions for building sustainable and resilient communities. Priorities include 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 are 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.

In practice this means we need to spend time throughout 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**.

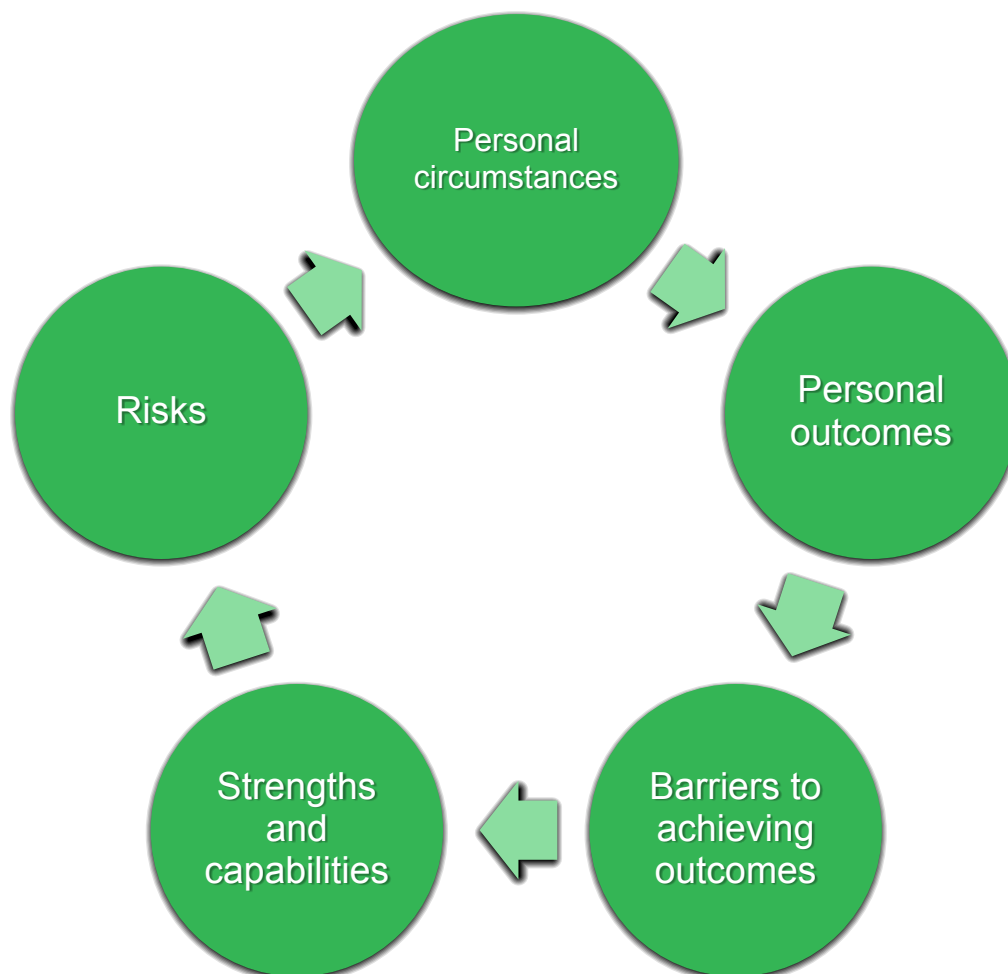


Figure 1

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.

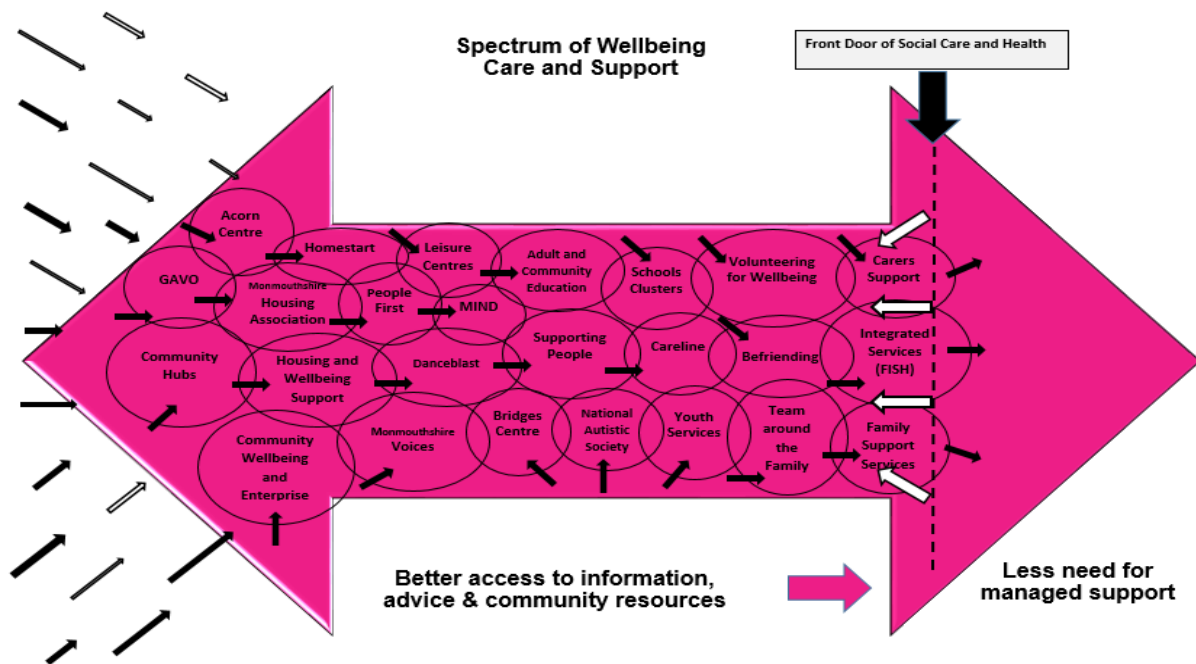


Figure 2

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 who lead 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, which 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 are 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 3 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 are 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, 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 fulfilled 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 a 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 recruiting people. 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 the 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 too 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. 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 re-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. for our children. We have seen positive improvements in supporting care leavers into education, employment and training. The highest priority we have is to increase the number of Monmouthshire foster carers. 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 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 in 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 any 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 them
- Re-commissioning of services for children with disabilities, which has been undertaken with the full involvement of families and children
- Development of forums 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
- develop better transition between pre- & post-statutory intervention and streamlining 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.

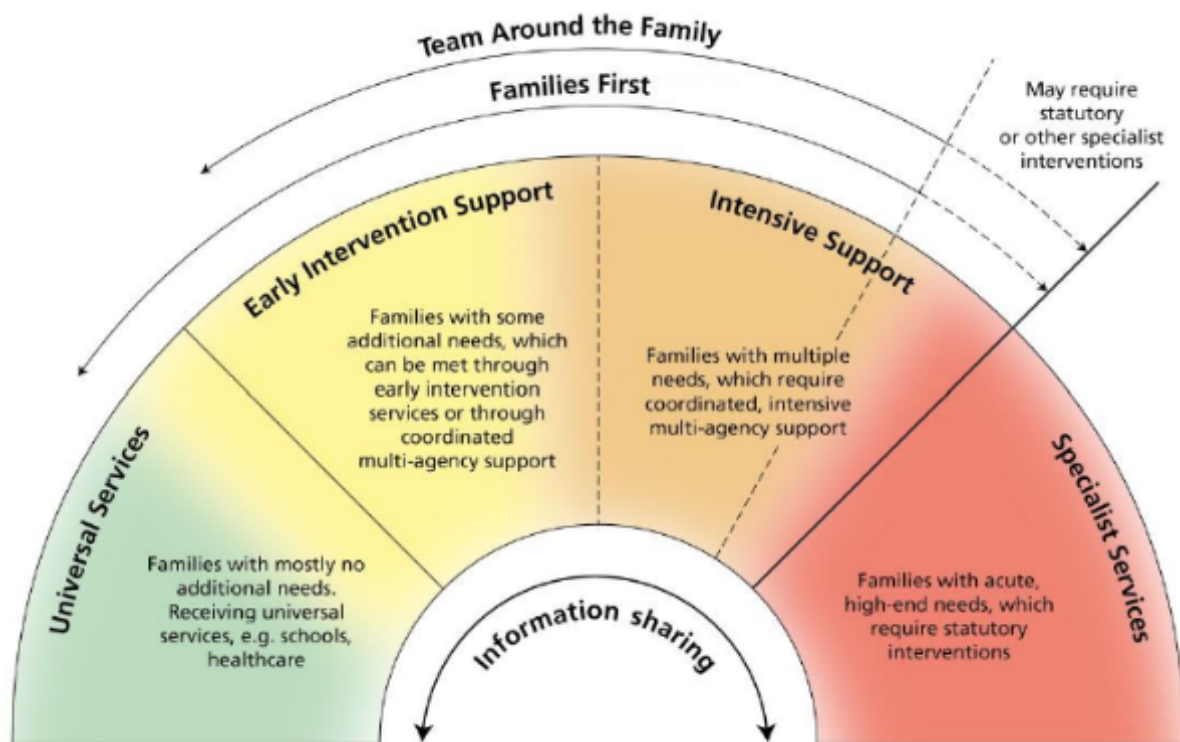


Figure 5

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 workers 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 a result 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 demand 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.

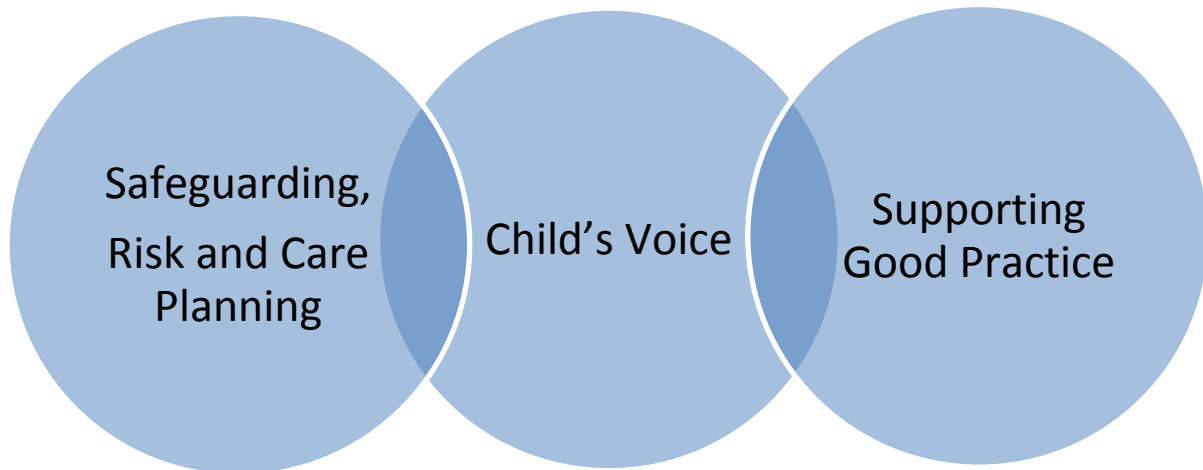


Figure 6

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 influence positively the 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 who have 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 have been developed focussing on the quality of outcomes. There are well established mechanisms – senior practitioner's forums, practice lead leadership group and regular whole service meetings 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 which 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 adaptation 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, extends 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?

- 81.4% adults, 78.6% carers and 62.1% 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 during the last year.

The 10 independent investigations considered evidence in respect of 59 individual complaints. 18 were upheld. 16 were partially upheld (or were inconclusive or the investigator was unable to reach a finding). 25 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. This is despite the significant increase in numbers of over 65s and over 85s, a demographic indicating we would need to be making more care home placements and commissioning more domiciliary care if practice had not developed (figure 7).

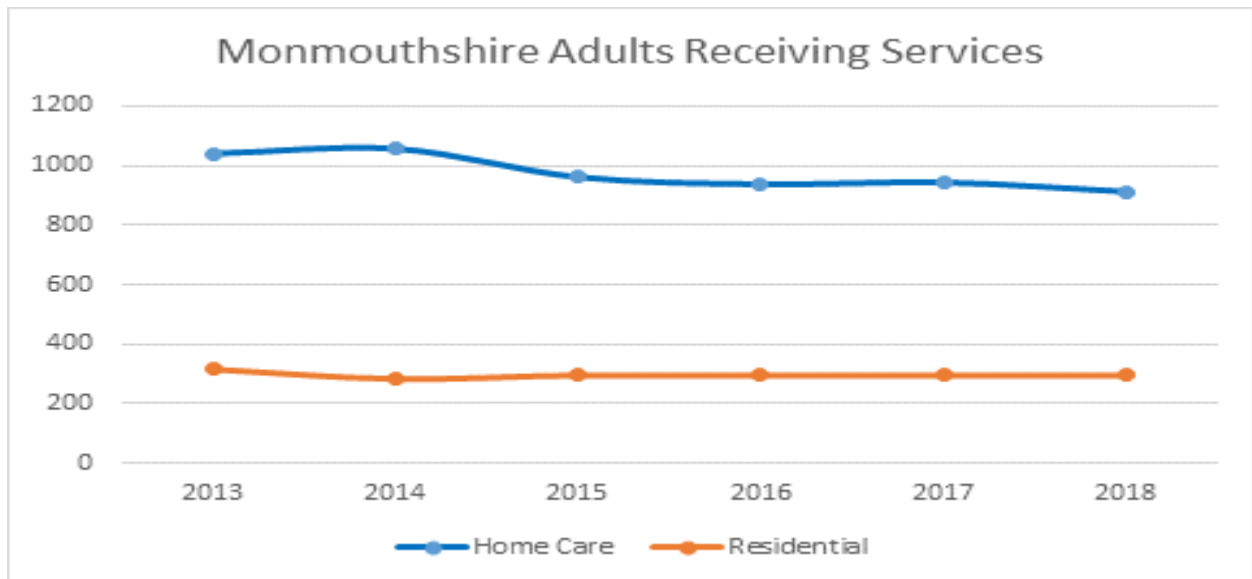


Figure 7

- *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.

The 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 in achieving 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. Of the 1388 people accessing IAA, (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 Wellbeing Networks

- We are working with a range of partners to facilitate 'joining up' what is available in 'integrated wellbeing networks' (figure9) 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 wellbeing 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 have a really positive impact on people's lives.

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

Daughter of person supported by Abergavenny Integrated Team

Integrated Wellbeing Network

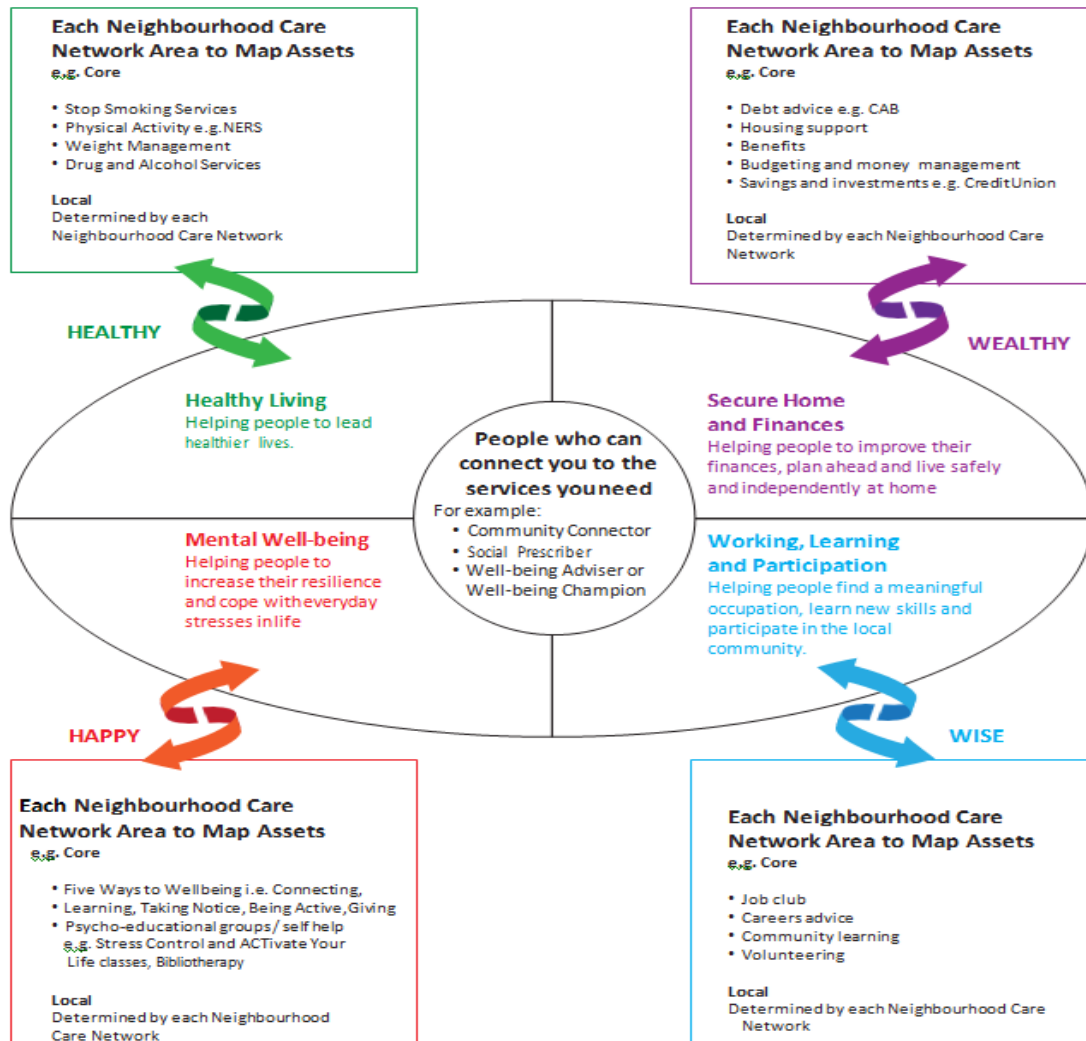


Figure 9

- 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 10

- 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 funding streams and 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 aged over 75 delayed in hospital in the last year , 43 people compared with 22 in the previous year. The trend for all ages over the last 5 years is set out in figure12 below:

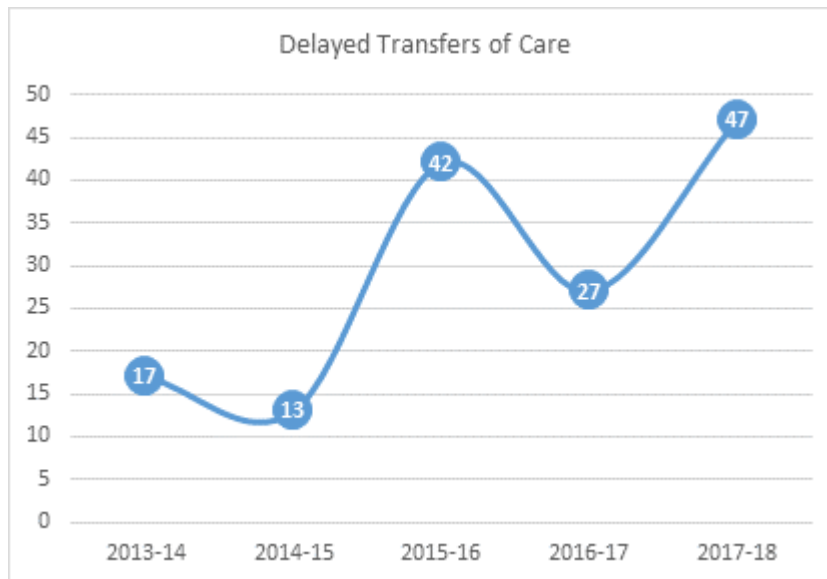


Figure 11

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. Of the 43 delays for people aged over 75, these 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 in 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, 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 (NEETS). 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 in Abergavenny, Monmouth, Caldicot and Chepstow, where they were asked what worked well with the current Disability Support Service, what didn't work so well, 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 the 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 the 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 in-house 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 local authority supported a corporate approach with help from our communications team. We have run successful campaigns resulting in 60 inquiries in 2017/18 (a 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:

- =Councillors 'Introduction to Corporate Parents' was updated and training 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.
- The Tourism, Leisure, Culture and Youth Service provides extra curriculum activities to our Looked After Children and 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 March 2018, 69.23% (9 out of 13) of care leavers engaged in education, training or employment during the 12th month after they left care

As at March 2018, 72.73% (8 out of 11) 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 Wellbeing of Carers

We have continued to deliver outcome focussed support for carers as prioritised by carers themselves in developing the 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 ring-fenced 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 younger 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 gave 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 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 in the County.

We have a total of 42 Welsh speakers within our 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 audit 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.

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 a 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
- 63.8% 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 clear roles and responsibilities with regard to 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 establishes the training required by every councillor and officer in the council.
- We have developed and implemented a system to address any significant issues overseen by the Whole Authority Safeguarding Group.
- A comprehensive Volunteering Policy has been approved by the 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. Of the adult protection enquires, 84.73% 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.

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 years.
- 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 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 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 2 1/2 years.

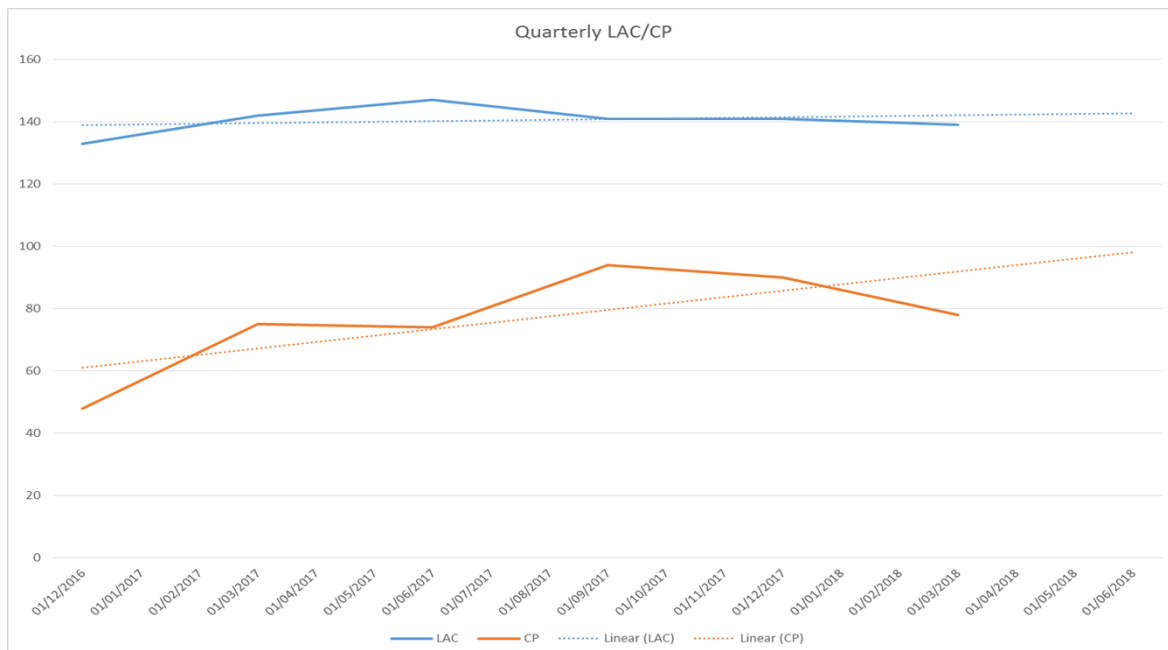


Figure 13

- There is an increase in the number of our LAC children who are placed with their own parents and also those who are cared for by kinship foster carers. This presents particular challenges and our service needs to focus on how we best support these children and families.
- Of the children on the child protection register, 5.26% 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 the Wales Audit Office, Care Inspectorate Wales and Estyn. A draft of that report is still awaited, but the in-depth 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 to the 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 Adult's 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 2016/17 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 The Workforce Development Officer is responsible for the direct care of the 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 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 and mentoring, particularly within the first 2 years practice.
- We have one 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 June 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 positive 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 2 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 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 out-turn 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 the reduction in agency workers. 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 the 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. Monmouthshire's demographics are particularly challenging in that both numbers of older people and their proportion in the overall population are projected to increase significantly.

The latest independent analysis from the Institute for Fiscal Studies⁷ is that adult social care spending needs to increase by 3.9% to meet the needs of an ageing population and increasing number of younger adults living with disabilities. Financial pressures in children's social services are being experienced even more acutely now across the UK. The Care Crisis Review⁸ published in June 2018 accepts the call from the Association of Directors of Children's Services and the Local Government Association in England and similar pleas from the Welsh Local Government Association and the All Wales Heads of Children's Services to make up the shortfall in children's services budgets stating '*money and resources for families and services matter*'.

What does this mean in Monmouthshire?

The financial pressures facing Monmouthshire County Council are hugely challenging over the next 4 years. It 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, 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 and wellbeing
- 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 the following partnerships under the board:

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

All integrated work will come under one or other of these partnerships and Monmouthshire is well represented on all partnerships, leading 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 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. The priorities and supporting actions are aligned with the SSWBA and the reporting framework within this report.

Overarching this priority, we will continue 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 or 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 are the risks to them and the barriers that need to be overcome, We can then 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, with a programme to deliver practice-led transformation that leads 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 by supporting the delivery of personal outcomes so people can live the lives they want to live.
7. Effective safeguarding with the very highest standards, and understanding how we can prevent abuse and protect those who are experiencing, or at risk of experiencing, abuse or neglect.
8. Improving outcomes through positive, productive partnerships which deliver: to people and communities, across Monmouthshire and the Gwent region.

9. 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. Establishing a programme of work within the council and with all providers to effectively implement the requirements of the Regulation and Inspection of Care Act in respect of regulated services and workforce.
12. Service and financial sustainability which plan for the whole of social care and health
13. Intelligent commissioning which - Using data and evidence to inform decisions about how we commission and develop the service officers to deliver outcomes

Appendix 1 - The Public Service Board well-being objectives and the Monmouthshire County Council goals

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

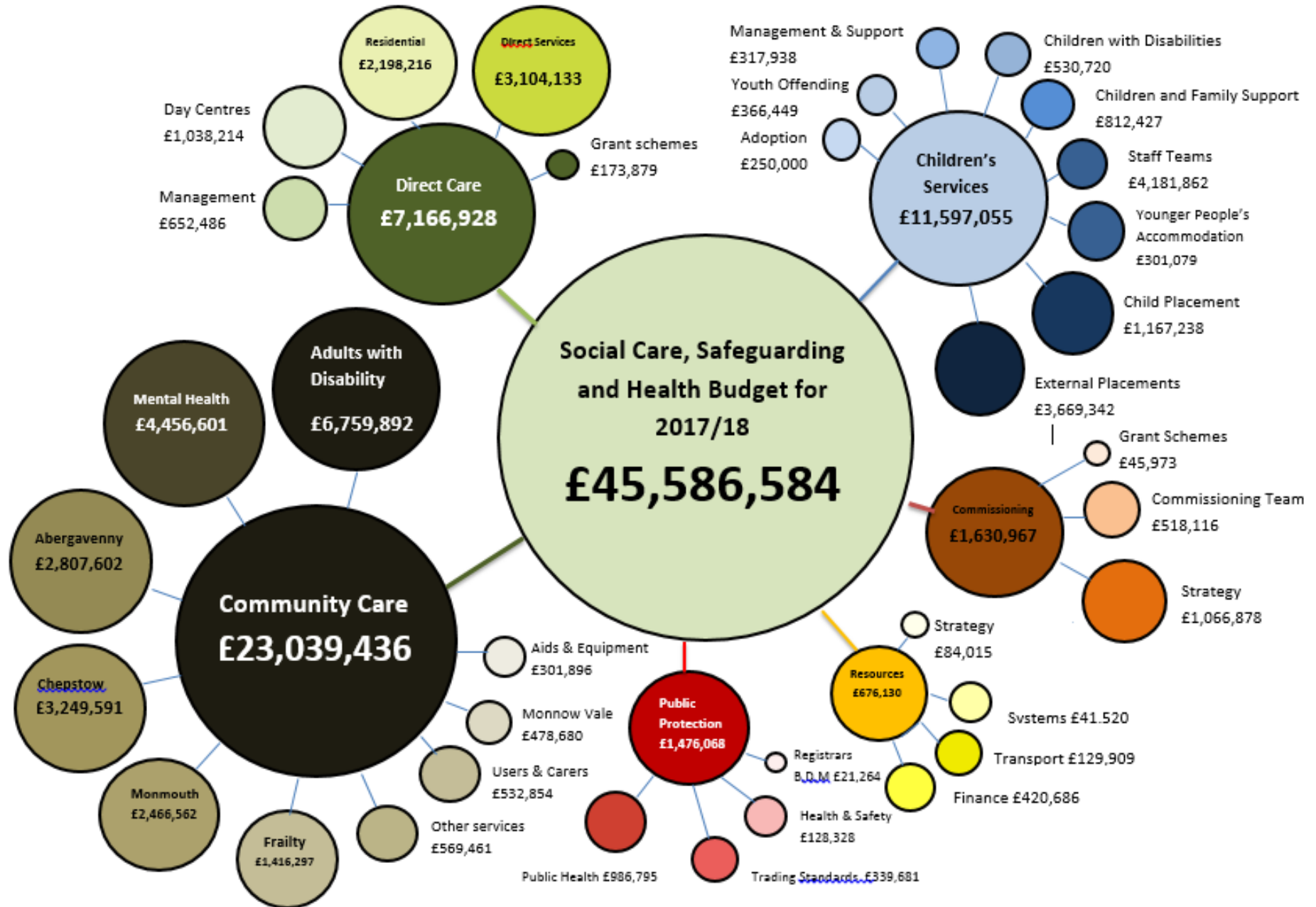


Thriving and well-connected county



Future focused council

Appendix 2 - visual representation overall social care and health budget (including public protection)



Appendix 3 – National Performance measures

Quantitative Performance Measures - Adult Services:

Performance Indicators	2016/17 Actual	2017/18 Actual	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%	84.73%					
<i>Numerator: The number of adult protection enquiries completed within seven working days</i>	274	455	90%	x	↓	80.06%	Middle
<i>Denominator: Total number of adult protection enquiries completed in the year</i>	309	537					
19: The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	2.24	4.28					
<i>Numerator: The number of delayed transfers of care for social care reasons</i>	22	43	2.19	x	↓	2.85	Middle
<i>Denominator: Monmouthshire population aged 75 or over</i>	9,821	10,050					
20: The percentage of adults (existing service users) who completed a period of reablement	21.43%	23.08%					
a) and have a reduced package of care and support 6 months later							
<i>Numerator: The number of existing service users completing reablement who had a reduced package of care and support 6 months later</i>	*	6	25%	✓	↑	27.99%	Middle
<i>Denominator: The number of existing service users completing reablement</i>	*	26					
20: The percentage of adults who completed a period of reablement	73.33%	71.26%					
b) have no package of care and support 6 months later							
<i>Numerator: The total number of people completing reablement who had no package of care and support 6 months later</i>	187	243	50%	✓	↓	72.34%	Middle
<i>Denominator: The total number of people completing reablement</i>	255	341					

Performance Indicators	2016/17 Actual	2017/18 Actual	2017/18 Target	Performance Against Target	Performance Trend	2016/17 Wales Av	2016/17 Quartile
21: The average length of time adults (aged 65 or over) are supported in residential care homes	833.55	807.85					
<i>Numerator: The total number of days from the admission date to a residential care home, to the end of the period</i>	122,532	131,680	N/A	N/A	N/A	800.79	N/A
<i>Denominator: The number of people who were placed in a residential care home on or after their 65th birthday</i>	147	163					
22: Average age of adults entering residential care homes	79.21	83.78					
<i>Numerator: The sum of the ages of each adult entering a residential care home during the year</i>	8,238	7,792	N/A	N/A	↑	82.83	Bottom
<i>Denominator: The total number of adults entering residential care homes during the year</i>	104	93					
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%	78.29%					
<i>Numerator: Number of adults who received advice and assistance from the information, advice and assistance service and did not contact the service again for 6 months</i>	419	1,388	77%	✓	↑	67.67%	N/A
<i>Denominator: Number of adults who received advice and assistance from the information, advice and assistance service</i>	547	1,773					

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	81.7%	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

Quantitative Performance Measures – Children’s Services:

Performance Indicators	2016/17 Actual	2017/18 Actual	2017/18 Target	Performance Against Target	Performance Trend from 2016/17	2016/17 Wales Av	2016/17 Quartile
24: The percentage of assessments completed for children within statutory timescales	74.69%	87.31%					
<i>Numerator: Number of assessments for children completed within statutory timescales</i>	611	688	90%	✘	↑	90.76%	Bottom
<i>Denominator: Number of assessments for children completed during the year</i>	818	788					
25: The percentage of children supported to remain living within their family	61.56%	63.80%					
<i>Numerator: The number of children supported to remain living within their family</i>	213	245	70%	✘	↑	69.24%	Bottom
<i>Denominator: The number of children supported at 31 March</i>	346	384					
26: The percentage of looked after children returned home from care during the year	14.44%						
<i>Numerator: Number of looked after children who return home from care during the year</i>	26	Not Available	Not applicable	Not applicable	Not available	13.56%	Middle
<i>Denominator: Number of looked after children during the year</i>	180						
27: The percentage of re-registrations of children on local authority Child Protection Registers (CPR)	2.38%	5.26%					
<i>Numerator: Number of re-registrations of children on the CPR during the year</i>	*	6	<10%	✓	↓	6%	Top
<i>Denominator: Total number of registrations on CPR during the year</i>	*	114					
28: The average length of time for all children who were on the CPR during the year	230	227					
<i>Numerator: The total number of days each child had been on the CPR if they were removed from the CPR during the year</i>	15,660	29,946	<365 days	✓	↑	245	Middle
<i>Denominator: Number of children who were removed from the CPR during the year</i>	68	132					

Performance Indicators	2016/17 Actual	2017/18 Actual	2017/18 Target	Performance Against Target	Performance Trend from 2016/17	2016/17 Wales Av	2016/17 Quartile
29a: Percentage of children achieving the core subject indicator at key stage 2	68.75%	68.75%					
<i>Numerator: The number of children who achieved the core subject indicator at key stage 2</i>	11	11	Not applicable	Not applicable	-	56.48%	Top
<i>Denominator: The number of children who need care and support and are in the final year of key stage 2</i>	16	16					
29b: Percentage of children achieving the core subject indicator at key stage 4	29.41%	6.67%					
<i>Numerator: The number of children who achieved the core subject indicator at key stage 4</i>	5	*	Not applicable	Not applicable	↓	14.21%	Top
<i>Denominator: The number of children who need care and support and are in the final year of key stage 4</i>	17	*					
30: The percentage of children seen by a registered dentist within 3 months of becoming looked after	56.52%	75.86%					
<i>Numerator: The number of children who became looked after during the year who have been seen by a dentist within 3 months</i>	13	22	60%	✓	↑	59.45%	Middle
<i>Denominator: The number of children who became looked after during the year who should have been seen by a dentist within 3 months</i>	23	29					
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%	100%					
<i>Numerator: Number of children looked after at 31 March who were registered with a GP within 10 working days of the start of their placement</i>	59	56	100%	✓	↑	91.66%	Middle
<i>Denominator: Number of looked after children at 31 March who had a placement start during the year</i>	60	56					

Performance Indicators	2016/17 Actual	2017/18 Actual	2017/18 Target	Performance Against Target	Performan ce Trend from 2016/17	2016/17 Wales Av	2016/17 Quartile
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%	9.47%	14%	✓	↓	12.70%	Top
<i>Numerator: The number of children of compulsory school age looked after at 31 March who have had one or more changes of school, which were not due to transitional arrangements</i>	7	9					
<i>Denominator: The number of children of compulsory school age looked after at 31 March</i>	86	95					
33: The percentage of looked after children on 31 March who have had three or more placements during the year	5.26%	Not Available	6.5%	Not available	Not available	9.80%	Top
<i>Numerator: The number of children looked after at 31 March who had three or more separate placements during the year</i>	7						
<i>Denominator: The total number of children who were looked after at 31 March</i>	133						
34: The percentage of all care leavers who are in education, training or employment at: a)12 months after leaving care	63.64%	69.2%	75%	✘	↑	52.42%	Top
<i>Numerator: Number of care leavers who were engaged in education, training or employment 12 months after they left care</i>	7	9					
<i>Denominator: The number of young people who became care leavers during 2016-17</i>	11	13					
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%	75%	✘	↑	47.12%	Middle
<i>Number of care leavers who were engaged in education, training or employment 24 months after they left care</i>	*	8					
<i>Denominator: The number of young people who became care leavers during 2015-16</i>	*	11					

Performance Indicators	2016/17 Actual	2017/18 Actual	2017/18 Target	Performance Against Target	Performance Trend from 2016/17	2016/17 Wales Av	2016/17 Quartile
35: The percentage of care leavers who have experienced homelessness during the year	5.45%	9.4%					
<i>Numerator: The number of care leavers who have experienced homelessness during the year</i>	*	5	0%	x	↓	10.59%	Top
<i>Denominator: The number of care leavers aged 16 to 24 on 31 March</i>	*	53					

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	61.5%	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

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 Institute for Fiscal Studies, '*Securing the future: funding health and social care to the 2030s*' May 2018

⁸ Family Rights Group '*Care Crisis Review: options for change*', 2018