

SOCIAL SERVICES AND WELLBEING

At quarter 4, 2017/18, the Directorate reported against 12 commitments; 7 of these are reporting as green, 4 are amber and 1 is red. The amber and red commitments are as follows:

- Continue to improve the ways in which the Council provides good information, advice and assistance to the public, including increasing the support available through local community coordinators:
- Continue to work with the Cardiff Capital Regional Skills and Employment Board and BCBC led local projects to help shape employment opportunities, including continuing to capture apprenticeship opportunities, and develop a skilled workforce to meet those needs – this relates to apprenticeships
- Enable community groups and the third sector to have more voice and control over community assets
- Support managers to lead staff through organisational change - this relates to sickness.
- Implement the planned budget reductions identified in the 2017-18 budget.

There are detailed comments against each commitment in the report below.

There are 45 performance indicators in this Q4 report: 32 (71%) of these are reporting as green, 5 (11%) are amber and 8 (18%) are red. Of the 45 indicators, 27 are National Indicators: 60% of these are reporting as green, 18% are amber and 22% are red.

There are detailed explanations in the body of the report, and plans are in place in all areas.

There are 36 PIs that can be directly compared to performance at the end of 2016/17. Of these, almost 70% (25 PIs) have improved or stayed the same and 4 of the 11 PIs that have got worse are still within target.

The new performance framework as part of the Social Services and Wellbeing (Wales) Act included an almost new set of indicators for 2016/17 with limited previous years' trend data to help set targets. These are now bedding in although we are still in discussion with Welsh Government about a few of the collection definitions.

Commitments 2017-18	RAG – current progress against commitment				All Indicators (incl. Finance and sickness PIs)		National Indicators (inc SSWB Act)					
Q3 2017-18 Directorate Commitments to delivering Corporate priorities	Total	Red	Amber	Green	Performance vs Target	Trend vs Q4 2016-17	Performance vs Target	Trend vs Q4 2016-17				
Priority One – Supporting a successful economy	1	0	1	0		<p>↑ 20</p> <p>↓ 12</p> <p>↔ 6</p>						
Priority Two – Helping people to be more self reliant	9	0	2	7								
Priority Three – Smarter use of resources	2	1	1	0								
Finance					Human Resources							
Revenue Budget <ul style="list-style-type: none"> • The net revenue budget for the Directorate for 2017/18 is £66.281m. • the actual outturn was £66.281m, following draw down of £1.128m from earmarked reserves, resulting in an over spend of £1.343m. 					Staff Number (FTE) <table border="1"> <thead> <tr> <th>2016-17</th> <th>2017-18</th> </tr> </thead> <tbody> <tr> <td>858.05</td> <td>848.16</td> </tr> </tbody> </table>				2016-17	2017-18	858.05	848.16
2016-17	2017-18											
858.05	848.16											

Capital Budget

- The revised capital budget for the Directorate for 2017/18 is **£2.189m** with a capital spend for the year of **£1.341m**, an £848k underspend for the year and slippage requested of **£823k**.

Efficiency Savings

Savings (£000)	2016-17 Outstanding	2017-18 Actual £000	%
Savings Target	841	2,283	100%
Achieved	158	1,049	45.9%
Variance	683	1,234	54.05%

Additional financial information is provided at the end of the report.

Sickness

Year	Target	Actual
16-17	11.04	18.25
17-18	11.04	17.58

Year	LTS	STS
16-17	83%	17%
17-18	80%	20%

Sickness data shows that there is an almost 4% improvement at the end of 2017/18 when compared to the end of 2016/17, although Q4 data showed a dip in performance when compared to Q3.

We continue to scrutinise the data on a case by case basis and there is robust monitoring across the services.

Implications of Financial Reductions on Service Performance and other Key Issues/challenges

The Directorate is working towards an improved financial position and have developed a new service strategy and a financial plan. The Chief Executive chairs a Monitoring Board that oversees the process. The service is required to deliver on £5.1m budget reductions by the end of 2019-20 and this is very challenging.

The recent announcement about the Health Board boundary change will mean that BCBC will now move from the Western Bay region into the Cwm Taf region and this will be a significant change for the SS & WB Directorate.

“A Healthier Wales: Our Plan for Health and Social Care” - published on the 11th June 2018 is the Welsh Government response to the Parliamentary Review of Health and Social Care and the implementation of this plan will impact on social services.

High Corporate Risks

Residual Risk	Improvement Priority	Likelihood	Impact	Overall
Supporting vulnerable children, young people and their families	2 and 3	5	4	20
Supporting adults at risk	2 and 3	4	4	16
Healthy life styles	2	4	4	16
Ineffective collaboration	All	4	4	16

ADULT SOCIAL CARE

Head of Service Comment on Performance and Issues

Throughout 2017/2018 the service aimed to consolidate the professional practice in terms of Changing the Culture in line with the principles of the Social Services and Wellbeing Act. This has meant developmental work with staff including engaging well workshops, developing action learning sets, and training our care management in using collaborative and inspirational communication skills. This has been essential as the service seeks to embed the principles of the Act in terms of strength based approaches and ensures that What Matters to individuals is core to the assessment process.

The remodelling programme for Adult Social Care continues to be the cornerstone of our service development however the management of the Adult Social Care budget has been challenging throughout 2017/2018.

A number of our performance indicators demonstrate that we are diverting people either at the front door or after a short period of service/intervention from our long term services, this indicates that our prevention and early intervention agenda are having an impact on the overall numbers of people that are supported by the service.

Performance indicators include an increase in the number of people who have been diverted from mainstream services, the percentage of people who complete a period of reablement and 6 months later have a reduced package of care is 70.64% and those people that have completed a period of reablement who have no package of care is 58.27%, although the service is recognising that sustaining these levels will become more challenging as the level of complex needs they are managing in the community is increasing .

One of the red performance indicators relates to the average age of adults entering residential care under the age of 65, this indicator relates mainly to people known to the Learning Disability and Mental Health service. Small numbers have a big impact on this PI and the target has not been achieved due to a small number of people with complex conditions needing support in residential care at a younger age including three individuals below the age of 30.

The other red indicator relates to the percentage of people reporting that they have received the right information or advice when they needed it. This data is collected via the national survey and whilst we are below target this is by approx. for 40 people. The service is currently analysing the individual responses to help inform how we provide our information and advice service at the right time for people using the service.

The % of carers who are offered an assessment in their own right is slightly above the target, the new requirements under the Act have meant a new process and system for dealing with and monitoring in this area had to be developed and implemented. This has now taken place and the performance is shown an increase in the numbers of assessment and reviews recorded in the future.

The directorate has a revised financial plan in place which is being robustly monitored

Improvement Priority Two: Helping People to become more Self Reliant

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P2.1.1	Continue to improve the ways in which the Council provides good information, advice and assistance to the public, including increasing the support available through local community coordinators.	AMBER	Phase 1a of Bridgend's MASH (Multi-Agency Safeguarding Hub) went live on the 3rd April 2018. Phase 1b will focus on the integration of Children's Safeguarding and will encompass workers from Children Social Care, South Wales Police, Education, Housing, Substance misuse Services, Probation, Wales Community Rehabilitation Company, Health & Early Help Services.	On 16th July 2018, a further 60 staff will move into Wing 1 of Ravenscourt. Phase 2 of the project will focus on the integration of Adult Social Care into the MASH. This phase is due to take place in August 2018.
P2.1.2	Continue to involve service users, carers and communities in developing and commissioning services.	GREEN	There is a commitment across Social Services to continually engage with citizens and look at co-production models of care. Some positive examples include the Remodelling Residential Care project and the development of the Carers Strategy. The carers engagement has included a full day workshop for carers, the cared for, and providers. Three Focus Groups were also held where targeted work was undertaken with these groups.	

P2.3.1	Work with partners and schools to support carers by providing the right information, advice and assistance where relevant.	GREEN	During Q4, Bridgend Carers centre has provided support to 652 Carers, 88 Adult Carers Assessments have been completed and 20 Young Carers Assessments have been completed. A commissioned provider (Action for Children) are now delivering the work in schools; during this quarter 2700 pupils participated in school assemblies, and 150 pupils participated in young carers PSE lessons.	
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Performance Indicators

PI Ref No, PI Type, PAM/ Local) link to Corp Priority	PI Description and <i>preferred outcome</i>	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
Value for Money (V)								
National Data Item A9 CP Priority 2	Number of adults who received a service provided through a social enterprise, co-operative, user led service or third sector organisation during the year. <i>Higher preferred</i>	Estimate 50-60 but establish baseline in 16-17	175	379	↑ 365	n/a	n/a	Quarterly indicator Target setting: based on 2016-17 actual Performance: Target achieved
Service user outcomes (O)								
SSWB1 CP Priority 2	Number of people who have been diverted from mainstream services, enabling them to remain independent for as long as possible. <i>Higher preferred</i>	40 Revised to 130	200	973	↑ 167	n/a	n/a	Quarterly indicator Performance: Target achieved
PM18 National perform measure Priority 2	The percentage of adult protection enquiries completed within 7 days <i>Higher preferred</i>	Establish Baseline	95%	95.92%	↑ 95.42%	n/a	n/a	Quarterly indicator Performance: This is a total of 24 cases where the Safeguarding Team are not the lead agency and we are waiting further information from partner agencies. All partners are aware of the timescales and every effort is made to chase outstanding information.
PAM025 PM19 National perform measure (SCA001) Priority 2	Rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over <i>Lower preferred</i>	<2.5	2.2	1.52	↓ 0.66	2.8	n/a?	Quarterly indicator There has been a change in indicator definition. [Previous definition: Rate of people kept in hospital while waiting for social care per 1,000 population aged 75+] New target has been met.
PM20a National perform measure CP Priority 2	The percentage of adults who completed a period of reablement and 6 months later have a reduced package of care and support <i>Higher preferred</i>	Establish Baseline	60%	70.64%	↑ 65.98%	n/a	n/a	Quarterly indicator Performance: Target achieved. The Short Term Assessment services continue to support people's choice to remain to live at home as independently as is possible. The statistics of reducing long term care placements indicate not only the success of this approach to assessment but also the complexity of need that is supported in the community.
PM20b National perform measure CP Priority 2	The percentage of adults who completed a period of reablement and 6 months later have no package of care and support. <i>Higher preferred</i>	Establish Baseline	60%	58.27%	↓ 64.22%	n/a	n/a	Quarterly indicator Performance: The service faces increasing demand. As demographics of our population change, the service is supporting more people with more than one medical condition, with advancing age comes frailty. The service continues to work hard to maximise people's independence successfully within this background of increasing frailty. The service is pro-actively looking to recruit to vacant posts.

PI Ref No, PI Type, PAM/ Local) link to Corp Priority	PI Description and <i>preferred outcome</i>	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
PM21 National perform measure CP Priority 2	The average length of time older people (aged 65 or over) are supported in residential care homes. <i>Lower preferred</i>	1055 days	1000 days	861.49 days	↑ 899 days	n/a	n/a	Quarterly indicator Performance: Target achieved
PM22 National perform measure Priority 2	Average age of adults entering residential care homes <i>Higher preferred</i>	84	84	82.9	↑ 81.56	n/a	n/a	Quarterly indicator Target setting: This indicator includes people over 65 and under 65 years of age. These two groups are broken down individually in indicators PM22a and PM22b. Performance: The overall target has been slightly missed and this is due to people with complex conditions needing support in residential care at a younger age (i.e. under 65).
PM22a Local Priority 2	Average age of adults entering residential care homes over the age of 65. <i>Higher preferred</i>	Establish baseline	85	85.4	n/a	n/a	n/a	Quarterly indicator Performance: target achieved
PM22b Local Priority 2	Average age of adults entering residential care homes under the age of 65. <i>Higher preferred</i>	Establish baseline	58	48.26	n/a	n/a	n/a	Quarterly indicator Performance: This indicator relates mainly to people known to the Learning Disability and Mental Health service. Small numbers have a big impact on this PI. The target has not been achieved due to a small number of people with complex conditions needing support in residential care at a younger age including three individuals below the age of 30.
PM23 National perform measure Priority 2	The percentage of adults who have received advice and assistance from the advice and assistance service and have not contacted the service for 6 months. <i>Higher preferred</i>	Establish baseline in 16-17	70%	89.38%	↓ 91.73%	n/a	n/a	Annual indicator Performance: The 2017-18 performance is within target but has dipped compared to last year. It should be noted that last year's figure was based on a 6 month period not 12 months, following the implementation of the SSWB Act.
SCA018a (SSWB 10) CP Local Priority 2	Percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year <i>Higher preferred</i>	94%	96%	97.46%	↑ 90.02	n/a	n/a	Quarterly indicator All carers contacting the common access point for advice and information are routinely offered an assessment as are people in managed care and support services. We have now ensured that in WCCIS there is a carers section on the review form, which has to be updated or the review cannot be completed. Any identified carers are routinely invited (if the individual agrees) to review meetings in order to participate. As a result of these actions we have seen an improvement in performance and the target has been met
PAM/024 CP Priority 2	The percentage of adults 18+ who are satisfied with the care and support they received. <i>Higher preferred</i>	n/a	65.00%	85.97%	n/a	n/a	n/a	New Annual Indicator Performance: target met
PAM/026 SSWBNS15 Priority 2	The percentage of carers reporting that they feel supported to continue in their caring role. <i>Higher preferred</i>	n/a	65.00%	81.1%	n/a	n/a?	n/a	New Annual Indicator Performance: target met
SSWB19 CP Priority 2	The percentage of adults who received advice and assistance from the information, advice and assistance service during the year <i>Higher preferred</i>	n/a	30%	63.67%	n/a	n/a	n/a	Quarterly indicator Performance above target

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SSWBNS7 National perform measure Priority 2	The percentage of people reporting that they have received the right information or advice when they needed it. <i>Higher preferred</i>	n/a	85%	75.5%	↓ 80.8%	n/a	n/a	Annual indicator We are below target by approximately 40 people. The service is currently analysing the individual responses to help inform how we provide our information and advice service at the right time for people using the service.
SSWBNS12 National perform measure Priority 2	The percentage of people reporting that they felt involved in any decisions made about their care and support. <i>Higher preferred</i>	70%	80%	80.66%	↑ 80.2%	n/a	n/a	Annual indicator Performance: Target met

CHILDREN'S SOCIAL CARE

Head of Service Comment on Performance and Issues

Our long term strategy is to develop new approaches to assist with the continued safe reduction of looked after children numbers and less use of independent fostering/residential agency placements out of county.

Our remodelling programme is making good progress:

- Our new specialist residential provision for children with disabilities (Harwood House) opened in October 2017 and feedback from Social Workers and families has been positive in relation to the experience of the children living there;
- The proposed remodelling of our general residential provision was agreed by Cabinet in February 2018 with plans for implementation now underway
- Phase 1 of the MASH has commenced with the service being located in Ravenscourt. Both phase 1 and 2 (children and adults) will be fully implemented by September 2018
- The transition team is in place and the operation model is being trialled
- We are continuing to safely reduce the number of children we looked after. Our year end (2017/18) figure was 384 compared to 390 at year end 2016/17

Of the 20 children's PIs in this report, when comparing year end data 2016/17, 10 show an improvement or sustained performance of 100%, 5 do not have comparative data from last year/data is awaited from Welsh Government and 5 show a dip in performance. Of these 5, only 2 are red.

Arrangements are in place for robust oversight in respect of performance in these particular areas and more context is detailed in the report below.

With regard to the current budget projected overspend, Children's Social Care has contributed to the directorate's revised financial plan which will be robustly monitored.

Improvement Priority Two: Helping People to become more Self Reliant

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P2.2.1	Implement a new 52-week residential service model for disabled children and young people.	GREEN	Harwood House opened in October 2017. The two children placed there are doing well	

P2.2.2	Establish a new model of residential provision for looked after children and young people.	GREEN	Cabinet has approved the proposed new model and implementation is on target. The placement and assessment hub will be operational in Autumn 2018
P2.2.3	Finalise a transition service model to help disabled children move smoothly into adulthood.	GREEN	A performance management framework/governance agreement and suite of performance indicators/baseline targets has been produced and incorporated into this framework. Staffing structure has been developed and staff appointed to deliver the provision. Transition planning tool has been developed and has been put on WCCIS , with cases transferred over. Operational model has been put in place. Engagement has taken place with staff and service users prior to the pilot and the outcomes of this incorporated into the pilot. Terms of reference of the Transition Panel has been reviewed ready for sign off. The pilot will be continuing for another 12 months following the internal appointment of new staff to allow for the team to embed and monitor realisation of benefits.he Transition Pilot Project commenced in October 2017 and is due to report in March 2018. The pilot is being evaluated against a Performance Framework.
P2.3.2	Recruit and retain carers across the range of fostering services.	GREEN	As at 31/03/18 there were 111 approved foster households providing 249 placements. This consists of 7 households and 10 placements approved during the year and a termination of 6 households equating to a reduction of 11 placements. We continue to pro-actively campaign for more carers and a new campaign "Bridge the Gap" was launched and is being promoted as part of Fostering Fortnight.

Performance Indicators

PI Ref No, PI Type, (PAM/ Local) link to Corp Priority	PI Description and <i>preferred outcome</i>	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
Service user outcomes (O)								
SSWB20 CP Priority 2	The percentage of children who received advice and assistance from the information, advice and assistance service during the year <i>Higher preferred</i>	n/a	60%	71.35%	n/a	n/a	n/a	New Quarterly Indicator Performance: above target
SSWB21 CP Priority 2	The percentage of identified young carers with an up to date care and support plan in place <i>Higher preferred</i>	n/a	90%	94.83%	n/a	n/a	n/a	New Monthly Indicator Performance: Target met
PAM/027 CP Priority 2	The percentage of children aged 7-17 years who are satisfied with the care and support they received. <i>Higher preferred</i>	n/a	65%	84.09%	n/a	n/a		New Annual Indicator Performance: Target has been achieved.
PAM/028 PM24 National perform measure Priority 2	The percentage of assessments completed for children within statutory timescales <i>Higher preferred</i>	80%	85%	86.15%	↑ 85.4%	90.8%		Quarterly indicator Performance is above target and is an improvement on last year's figure

PI Ref No, PI Type, (PAM/ Local) link to Corp Priority	PI Description and <i>preferred outcome</i>	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
PM25 National perform measure CP Priority 2	The percentage of children supported to remain living within their family. <i>Higher preferred</i>	65%	65%	61.64%	↓ 75.6%	69.2%		Quarterly indicator Children's Social Care work with cases in tiers 3 and 4 (complex and acute needs) and their care and support cases would only be those in the higher end of tier 3. Over the last 18 months analysis of thresholds and caseloads has resulted in a high number of care and support cases being closed or stepped down to Early Help. This has resulted in social workers having more acceptable workloads. When this target was set, the project was not concluded and we had not anticipated the high number of care and support cases that would require closure whilst LAC remained stable. The effect of these 2 factors means our performance is below target and lower than last year.
PM26 National perform measure Priority 2	The percentage of looked after children returned home from care during the year <i>Higher preferred</i>	9%	10%	6.56%	↓ 9.01%	13.6%		Quarterly indicator Target Setting: Improved target for 2017/18 based on end of year 2016/17 Performance: improved during Q4, although has not reached year end target. This has not been due to our overall proportion of discharges decreasing but applies only to those who have returned to family members under no order/SGO etc. Cases are being continually reviewed within the Permanence Team to ensure we are aware of any barriers. This is being closely monitored.
PM 31 National perform measure Priority 2	The percentage of placements started during the year where the child is registered with a provider of general medical services within 10 working days of the start of the placement. <i>Higher preferred</i>	100%	100%	100%	↔ 100%	91.7%		Quarterly indicator Performance: target met
PM32 National perform measure (SCC002) Priority 2	The percentage of looked after children who have experienced one or more changes of school during a period or periods of being looked after, which were not due to transitional arrangements, in the 12 months to 31 March <i>Lower preferred</i>	<14%	10%	6.54%	↑ 15.74%	12.7%		Quarterly indicator (annual until 2017/18) Performance: target met
PM33 (SCC004) National Performance Measure PAM/029 CP Priority 2	The percentage of looked after children on 31st March who have had three or more placements during the year. <i>Lower preferred</i>	12%	12%	10.94%	↑ 13.08%	9.8%		Quarterly indicator Performance: target met
PM34a National perform measure Priority 2	The percentage of all care leavers who are in education, training or employment at: a)12 months after leaving care <i>Higher preferred</i>	70%	70%	60.53%	↑ 45.2%			Quarterly indicator Performance: There has been a significant improvement on last year's performance (45.16%) despite this year's figure being below target. During the year, 23 out of 38 young people were in education, training or employment during the 12th month after leaving care. The reasons for NEET include being young parents, job seeking, having illnesses or disabilities which render them unfit for work, and those over the age of 18 who are unwilling to engage in any education, training or employment opportunities. The 16+ Team continue to work closely with young people and partner services/agencies to actively engage young people in appropriate learning opportunities. The team is now co-located with the Youth Development Team which will work to strengthen referral pathways to both the preventative 'Inspire to Achieve' project and the 'Inspire to Work' project, which targets those already NEET. In recognition of the need for early intervention, Inspire to Work practitioners will be invited to attend every looked after child's LAC/Pathway review from the age of 15½ years onwards to consider progression routes. It is also envisaged that the ongoing

PI Ref No, PI Type, (PAM/ Local) link to Corp Priority	PI Description and <i>preferred outcome</i>	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
								work to develop apprenticeships will lead to reductions in NEETs in the future.
PM34b National perform measure Priority 2	The percentage of all care leavers who are in education, training or employment at: b) 24 months after leaving care <i>Higher preferred</i>	70%	55%	46.67%	↓ 50%			Quarterly indicator Performance: The 2017-18 performance is slightly down on last year's figure (50%) and below target. During the year, 14 out of 30 young people were in education , training or employment during the 24th month after leaving care. The reasons for NEET include being young parents, job seeking, having illnesses or disabilities which render them unfit for work, and those over the age of 18 who are unwilling to engage in any education, training or employment opportunities. The 16+ Team continue to work closely with young people and partner services/agencies to actively engage young people in appropriate learning opportunities. The team is now co-located with the Youth Development Team which will work to strengthen referral pathways to both the preventative 'Inspire to Achieve' project and the 'Inspire to Work' project, which targets those already NEET. In recognition of the need for early intervention, Inspire to Work practitioners will be invited to attend every looked after child's LAC/Pathway review from the age of 15½ years onwards to consider progression routes. It is also envisaged that the ongoing work to develop apprenticeships will lead to reductions in NEETs in the future.
SSWB7 CP Priority 2	Percentage of individuals discussed at Transition Panel that have a transition plan in place by aged 17 <i>Higher preferred</i>	100%	100%	100%	↔ 100%	n/a		Quarterly indicator Performance: target met
PM35 CP National Performance Measure Priority 2	The percentage of care leavers who have experienced homelessness during the year <i>Lower preferred</i>	Establish Baseline	15%	13.79%	↓ 7.6%			Quarterly indicator Performance: As part of the Children's Residential Remodelling Project, a joint workstream has been convened involving colleagues from Housing and Supporting People, which is developing a new model of accommodation services, including a 'move-on' supported living option – which can be accessed by care leavers and will enable a step-down towards independent living.
SSWB 9 Local Priority 2	The percentage of cases subject to an initial CSE strategy meeting where the plan was reviewed within three months. <i>Higher preferred</i>	100%	100%	100%	↑ 78.3%	n/a		Quarterly indicator Performance; target met
SSWB 8 Local other	The percentage of children and young people subject to CSE protocol with an up to date SERAF assessment (Sexual Exploitation Risk Assessment Framework) <i>Higher preferred</i>	100%	100%	100%	↔ 100%	n/a		Quarterly indicator Performance; target met
PM27 National performance measure other	The percentage of re-registrations of children on local authority Child Protection Registers (CPR) <i>Lower preferred</i>	6.5%	5%	3.32%	↓ 1.6%	6.3%		Quarterly indicator Performance: The 2017-18 performance is within target but is slightly higher than last year's figure. The re-registrations involved 8 children from within 4 families. Three of the children were re-registered as a result of moving across LA borders, the remaining children were all re-registered as a result of new concerns rather than historical concerns that had not been addressed.
PM28 National performance measure other	The average length of time for all children who were on the CPR during the year <i>Lower preferred</i>	265 days	265 days	265.75 days	↑ 270 days	254.1 days		Quarterly indicator Performance: End of year performance has marginally missed the target, however, it is an improving picture compared to the previous year.

PI Ref No, PI Type, (PAM/ Local) link to Corp Priority	PI Description and preferred outcome	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
PM29a National performance measure Priority 2	Percentage of children achieving the core subject indicator children achieving the core subject indicator at key stage 2 <i>Higher preferred</i>	n/a	55%	66.22%	↑ 55.32%	56.5%		Annual indicator Performance: Late data from Welsh Government –awaiting comment
PM29b National performance measure Priority 2	Percentage of children achieving the core subject indicator at key stage 4 <i>Higher preferred</i>	n/a	17%	8.45%	↓ 17.91%	14.2%		Annual indicator Performance: Late data from Welsh Government –awaiting comment
PM30 National performance measure Priority 2	The percentage of children seen by a registered dentist within 3 months of becoming looked after <i>Higher preferred</i>	Establish baseline	65%	82.14%	↑ 55.56%	59.4%		Quarterly Performance: Target met

CORPORATE DIRECTOR

Improvement Priority One: Supporting a successful economy

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P1.1.1	Continue to work with the Cardiff Capital Regional Skills and Employment Board and BCBC led local projects to help shape employment opportunities, including continuing to capture apprenticeship opportunities, and develop a skilled workforce to meet those needs.	AMBER	During 2017/18, 17 looked after children were identified for a 1 or 2 week placement. Of these, 15 placements are in BCBC and 2 are external. These placements are aligned to employability and "apprenticeship-ready".	Work experience placements to prepare young people who are looked after for apprenticeships will start after exams at the end of June 2018. Workshops to support supervisors are arranged and this will include an e-learning programme

Improvement Priority Two: Helping People to become more Self Reliant

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P2.4.1	Work with partners and the third sector to identify the best way of providing services within local communities.	GREEN	Joint working group meeting regularly including third sector stakeholder group who have contributed to the progression of the third sector project and related development plan. Positive progress in relation to prevention and wellbeing agenda with second stakeholder workshop for BCBC and external stakeholders being developed on asset based community development. Developing a One Council approach to prevention and wellbeing is a feature of the 2018/19 business plan.	
p2.4.2	Enable community groups and the third sector to have more voice and control over community assets	AMBER	During 2017-18 the CAT Officer has supported 36 community organisations progress a total of 39 community asset transfer projects through the process, ranging from informal / formal expression of interest, development of sustainable business cases to finalising long-term leases. In addition to the day-to-day support proved by the CAT Officer a total of 13 community organisations have been provided with formal advice and guidance under the CAT Business Support contract in respect of business planning, legal structures, accounting for VAT and building and structural surveys.	The CAT Officer will continue to work with community organisations during 2018/19. The CAT Officer will ensure that community organisations continue to receive on-going business support during 2018/19

Improvement Priority Three: Smarter Use of Resources

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P3.1.1	Implement the planned budget reductions identified in the 2017-18 budget.	RED	New Financial Plan is in place and being robustly monitored.	Governance Group led by the Chief Executive overseeing actions and progress.
P3.4.1	Support managers to lead staff through organisational change.	AMBER	The overall RAG is amber due to the directorate sickness PI being above target. However, the directorate has seen an improvement of 3.7% in FTE days lost to sickness absence compared to the previous year.	In terms of health and safety, the directorate group works very closely with the corporate group and there are representatives from across the services. The health and safety risk register is monitored regularly.

Performance Indicators

I Ref No	PI Description	Annual target 17-18 £'000	Performance as at Year End						Comments
			Red		Amber		Green		
			£'000	%	£'000	%	£'000	%	
DWB6.1.1iii (SSWB12) Priority 3 CP feeder	Value of planned budget reductions achieved	2283	260	11.4%	974	42.6%	1049	46%	The Directorate is working towards an improved financial position and have developed a new service strategy and a financial plan.

Performance Indicators

PI Ref No, PI Type, (PAM/ Local) link to Corp Priority	PI Description and <i>preferred outcome</i>	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
Value for Money (V)								
SSWB 2 Local Priority 2	The percentage of domiciliary care contracts reviewed <i>Higher preferred</i>	100%	100%	100%	↔ 100%	n/a	n/a	Annual indicator Performance: target met
SSWB 4 DWB4.2.3.3 Local Priority 2	The percentage of adult social care third sector contracts reviewed <i>Higher preferred</i>	100%	100%	100%	↔ 100%	n/a	n/a	Annual indicator Performance: target met
SSWB15 Local Priority 3	Number of individual injury incidences <i>Lower preferred</i>	13	7	6	↑ 7	n/a	n/a	Annual indicator Performance: Target has been achieved but performance has dipped compared to last year. This is closely monitored by the service
Service user outcomes (O)								
PAM/016 (LCL001b) Other	Number of visits to public libraries during the year, per 1,000 population <i>Higher preferred</i>	4400	4444	3942	↓ 4275	5480	17	Annual indicator Performance: The visits recorded for 2017-18 are calculated on a survey based methodology and amount to 565,246. The physical visits, after a number of years of decline, have stabilised and have shown a small increase this year. The overall drop is down to the migration from the BCBC website to Awen's own website. As the Awen website is still in its infancy we anticipate that numbers will increase further over the coming years. This indicator will be replaced by Welsh Government in 2018-19 and a new national indicator that focuses on meeting welsh public library standards will be introduced.
PAM/017 (LCS002b) Priority 2	Number of visits to local authority sport and leisure facilities during the year per 1,000 population where the visitor will be participating in physical activity <i>Higher preferred</i>	9450	9450	9447	↓ 9600	8387	5	Annual indicator Performance: The target has been slightly missed (by 3 people only). We recognise impacts on performance include population increase, new models of working regarding playing field use, increasing competition in the leisure market, and adverse winter weather conditions. There is notable growth in visits to dual use facilities. The progression of community asset transfer may impact on performance against this indicator in future years.
SSWB3 DWB4.1.4.1 Local Priority 2	The percentage of our providers receiving a quality payment <i>Higher preferred</i>	90%	90%	100%	↔ 100%	n/a	n/a	Quarterly indicator Performance: target achieved
Organisational Capacity (C)								
CHR002iii PAM feeder SSWB 13 Priority 3 CP feeder	Number of working days per full time equivalent lost due to sickness absence <i>Lower preferred</i>	11.04 days	11.04 days	17.58 days	↑ 18.25 days			Quarterly indicator Performance: 2017-18 saw an increase in sickness days lost per FTE, however, compared to 2016/17, the directorate has shown an overall improvement of 3.7%.

PI Ref No, PI Type, (PAM/ Local) link to Corp Priority	PI Description and <i>preferred outcome</i>	Annual Target 16 -17	Annual Target 17-18	Year end 17-18 Cumulative & RAG	Trend Year End 17-18 vs 16-17	Wales Average 16 - 17 PAMs	BCBC Rank 16-17 PAMs	Comments
DWB5.6.8.5 (SSWB14) Local Priority 3	Number of working days per full time equivalent lost due to industrial injury <i>Lower preferred</i>	0.039	0.20	0.0941	↑ 0.2021	n/a	n/a	Quarterly indicator Performance: target achieved
SSWB17 Local CP feeder Priority 1	Number of apprenticeships in the directorate throughout the year (SS & Wellbeing) <i>Higher preferred</i>	4	4	7	↑ 4	n/a	n/a	Annual indicator Performance: target achieved
SSWB18 local CP Priority 1	The rate (%) of apprenticeships taken by looked after children <i>Higher preferred</i>	n/a	Establish baseline	0%	n/a	n/a	n/a	New Annual Indicator Performance: Work experience placements will start after exams in June 2018 to help looked after children become 'apprenticeship ready'

Additional Financial Information – Main Revenue Budget Variances

The net budget for the Directorate for 2017-18 was £64.938 million and the actual outturn was £66.281 million, following draw down of £1.128 million from earmarked reserves, resulting in an over spend of £1.343 million. The Directorate received additional grant funding of £420,000 from Welsh Government at the end of the financial year to support social services winter pressures. It was also successful in bidding for Supporting People grant slippage of approximately £240,000. Without this additional grant funding the over spend would have been almost £2 million. This funding is non-recurring and will therefore be a cost pressure for the Directorate in 2018-19. The most significant variances are:

SOCIAL SERVICES AND WELLBEING DIRECTORATE	Net Budget £'000	Final Outturn £'000	Final Variance Over / (Under) Budget £'000	% Variance
Services to Older People (excl. OP Assessment & Care Management)	17,469	17,295	(174)	-1.0%
Adult Social Care - Assessment and Care Management	4,713	4,145	(568)	-12.1%
Learning Disabilities Residential Care	1,347	1,534	187	13.9%
Care at Home for Learning Disabilities	7,385	8,162	777	10.5%
Services to Adults with Learning Disabilities	(166)	139	305	-183.7%
Looked after Children - LAC	10,690	11,873	1,183	11.1%
Other Child & Family Services	1,173	979	(194)	-16.5%

Services to Older People

- There is an under spend of £174,000 (excluding assessment & care management) against older person services in total. The main reason for this is a higher level of income actually received from clients compared to the level estimated at the beginning of the year. It is very difficult to estimate income to be received as it depends very much on individuals' financial circumstances and can change year on year.

Adult Social Care - Assessment and Care Management

- There is an under spend of £568,000 across assessment and care management in adult social care, including £192,000 on assessment and care management for older people and £195,000 on services for people with physical disabilities, arising mainly from staff vacancies and vacancy management throughout the year. The Directorate has managed these vacancies in order to generate savings in-year.

Learning Disabilities Residential Care

- There is an over spend of £187,000 as a result of the higher complexity of needs within the learning disability residential service together with the demand for residential respite services. The cost for learning difficulties care and support can be very high with the average cost of a learning difficulty residential care placement reaching up to £1,360 per week or £71,000 per annum.

Care at Home for Adults with Learning Disabilities

- There is an over spend of £777,000 as a result of higher spend on domiciliary care and supported living schemes. Due to the complex nature of care and support within learning difficulties, the costs of packages of care for domiciliary care and other support are particularly high.

Services to Adults with Learning Disabilities

- There is an over spend of £305,000 due to MTFs budget reduction targets being applied to the budget but actual savings being unrealised to date. The Directorate has undertaken a full financial review and formulated a service delivery plan to identify alternative cost reduction opportunities.

Looked After Children (LAC)

- There is an over spend of £1.183 million on the Looked After Children budget. MTFs budget reductions have resulted in the budget being reduced by around £1 million over the last three years, including a reduction of £260,000 in 2017-18. However, compared to the outturn position in 2016-17 of a £1.4 million over spend, the current financial projection represents a significant improvement, which reflects the service's strategy to place more children into more cost effective placements.
- Whilst the average number of LAC has increased to 387 compared to 385 in 2016-17, there has been a substantial change in the type of placements, which is driving the reduction in expenditure per child.

Other Child & Family Services

- There is an under spend of £194,000 against other child and family services. This is mainly due to a year end repayment of £196,000 to Bridgend Council from the Western Bay Adoption Service, in line with the partnership agreement, where the joint service costs are apportioned to partners based on the number of adoptions placed by each authority. It is very difficult to estimate the actual contribution required each year so an adjustment is made at year end to reflect the actual requirement.

Additional Financial Information – Outstanding Budget Reduction Variances 2016 -17

Budget Reduction Proposal	Original 2016-17 £000	Amount of saving likely to be achieved £000	Mitigating Actions
Develop a Delivery Model for the Bridgend Resource Centre	108	8	Budget reduction of £100k not achieved in 2017-18. This is contributing to the current over spend within Social Services. The directorate has developed a Service Plan to address budget shortfalls in 2018-19 onward.
Reduction in Safeguarding LAC numbers and related reduction in costs	357	0	The early intervention and safeguarding board are working to reduce the number of looked after children and related costs. This proposal is unable to generate this level of budget savings and the directorate has developed a Service Plan to address the budget shortfalls in 2018-19 onward.
Management, Admin and Training Implement measures to achieve 7% and 5% across the 2 years	76	50	The shortfall was offset from under spends across the service in 2016-17. Staffing budgets are being reviewed as they become vacant and staff savings have been identified as part of the new Service Plan.
Changes in Workforce	100	0	The shortfall was offset from under spends across the service in 2016-17. Staffing budgets are being reviewed as they become vacant and staff savings have been identified as part of the new Service Plan.
Remodelling of Children's Respite and Residential Care	200	100	Remodelling underway. £100k achieved to date. Further remodelling will hopefully result in further savings against out of county cost,s contributing to this proposal. Savings proposals have been revised in line with new Service Plan in 2018-19.

Additional Financial Information – Outstanding Budget Reduction Variances 2017 -18

Budget Reduction Proposal	Original 2017-18 £'000	Amount of saving achieved £000	Mitigating Actions
Managed Service Reductions Residential & Respite Care	414	200	New Service Plan identifying alternative savings has been developed for 2018-19 onward
Reduction in Safeguarding LAC numbers and related reduction in costs	260	0	New Service Plan identifying alternative savings has been developed for 2018-19 onward
Transfer of directly operated centres and review of grant support to voluntary organisations	39	20	Shortfall met from under spends in other service areas.
Develop income stream for specialist Mental Health placements at Glyn Cynffig	73	0	New Service Plan identifying alternative savings has been developed for 2018-19 onward
Impact of the Prevention and Wellbeing agenda	668	0	New Service Plan identifying alternative savings has been developed for 2018-19 onward

Sickness broken down by Service Area

Unit	FTE 31.03.2018	QTR4 2016/17			QTR4 2017/18			Cumulative Days per FTE 2017/18	Cumulative Days per FTE 2016/17	Target 2017/18
		Number of FTE days lost	No. of Absences	Days per FTE	Number of FTE days lost	No. of Absences	Days per FTE			
Adult Social Care	607.99	2833.70	305	4.54	3491.78	348	5.74	18.86	19.43	11.04
Children's Social Care	165.02	604.49	48	3.82	810.44	79	4.91	17.57	18.09	
Prevention and Wellbeing	16.07	1.69	1	0.11	16.00	3	1.00	4.10	0.15	
Business Support - SS&W	58.08	217.65	18	3.69	173.49	27	2.99	8.45	11.04	
Social Services and Wellbeing Total	848.16	3657.53	372	4.26	4491.71	457	5.30	17.58	18.25	

Number of FTE days lost by absence reason - Cumulative 2017/18

Absence Reason	Social Services & Wellbeing	
	Total Number of FTE Days Lost	% of Cumulative days lost
Cancer	106.46	0.71%
Chest & Respiratory	859.59	5.71%
Eye/Ear/Throat/Nose/Mouth/Dental	285.01	1.89%
Genitourinary / Gynaecological / Pregnancy	53.23	0.35%
Heart / Blood Pressure / Circulation	532.74	3.54%
Infections	1434.83	9.53%
Injury	176.49	1.17%
MSD including Back & Neck	2588.58	17.19%
Neurological	236.13	1.57%
N1H1 Virus	5.00	0.03%
Other / Medical Certificate	0.00	0.00%
Pregnancy related	181.79	1.21%
Return to Work Form Not Received	370.85	2.46%
Stomach / Liver / Kidney / Digestion	976.66	6.49%
Stress / Anxiety / Depression / Mental Health	5637.98	37.44%
Tests / Treatment / Operation	1612.27	10.71%
TOTALS	15057.60	

KEY:

Commitments		Action	
Red	<p>A RED status usually means one or more of the following:</p> <ul style="list-style-type: none"> • A significant negative variance against the budget or savings of more than 10%. • Delays against key milestone/s of more than 10% of the total length of the planned action. • Problems with quality that lead to significant additional costs/work. • Significant lack of resources which cannot be resolved by the directorate. • Pls identified to measure success of the commitment are mostly red. • Dissatisfaction or resistance from stakeholders that mean acceptance may be delayed all the benefits not achieved. 	CPA/Scrutiny committee should ask the pertinent chief officer/s to provide an explanation or conduct a review to identify the root causes of the red status and put in place an action plan to prevent further deterioration and minimise the damage caused to the overall organisation.	
		Performance Indicators (RAG)	
		Red (alert)	Performance is worse than target by 10% or more
Amber	<p>An AMBER status usually means one or more of the following:</p> <ul style="list-style-type: none"> • A negative variance against the budget or savings of less than 10%. • Delays against critical milestones less than 10% of the total length of the planned action. • Problems with quality but not causing delay. • Lack of resources which can be resolved by the pertinent chief officer/s (e.g. via virement within the budget or managing vacancies). • Pls identified to measure success of the commitment are a mixture of red, amber and green. • Dissatisfaction or resistance from stakeholders addressed by the pertinent chief officer/s. 	Action	
		CPA/Scrutiny Committee should maintain a watching brief over Amber projects/commitments but not necessarily intervening. They may ask chief officers to provide mitigation actions to prevent amber from moving into the red.	
		Performance Indicators (RAG)	
		Amber (caution)	Performance is worse than target by under 10%
Green	<p>A GREEN status usually means one or more of the following:</p> <ul style="list-style-type: none"> • The forecast expenditure is on budget. • Milestone/s on track to complete on time. • Quality at expected levels. • No resource problems. • Pls identified to measure success of the commitment are mostly green. • Stakeholders satisfied with the outcome. 	Action	
		CPA/Scrutiny Committee can let officers progress with the delivery of the planned actions. Assurance from the underlying data should indicate that the milestone is truly green.	
		Performance Indicators (RAG)	
		Green (clear)	Performance is equal to or better than target
Performance Indicators (Trend)		Performance Indicator types	
↑	Performance improved vs same quarter of previous year	CP	Corporate Plan indicator
↔	No change in performance vs same quarter of previous year	PAM	Public Accountability Measure (National Indicator)
↓	Performance declined vs same quarter of previous year	PM/SSWBNS	Social Services and Wellbeing Act