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CYNGOR SIR
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RHYBUDD O GYFARFOD	NOTICE OF MEETING
PWYLLGOR SGRIWTINI CORFFORAETHOL	CORPORATE SCRUTINY COMMITTEE
DYDD LLUN, 4 MEHEFIN, 2018 am 2:00 y. p.	MONDAY, 4 JUNE 2018 at 2.00 pm
YSTAFELL BWYLLGOR 1, SWYDDFYEDD Y CYNGOR, LLANGEFNI	COMMITTEE ROOM 1, COUNCIL OFFICES, LLANGEFNI
Swyddog Pwyllgor	Ann Holmes 01248 752518 Committee Officer

AELODAU/MEMBERS

Cynghorydd/Councillor:

PLAID CYMRU / THE PARTY OF WALES

Lewis Davies, Trefor Lloyd Hughes, MBE, Dylan Rees (*Is-Gadeirydd/Vice-Chair*), Alun Roberts, Nicola Roberts

Y GRWP ANNIBYNNOL / THE INDEPENDENT GROUP

Richard Griffiths, Richard O. Jones

PLAID LAFUR CYMRU/ WALES LABOUR PARTY

J. Arwel Roberts

ANNIBYNNWYR MÔN / ANGLESEY INDEPENDENTS

Aled Morris Jones (Democratiaid Rhyddfrydol Cymru/Welsh Liberal Democrats)(*Cadeirydd/Chair*)
Bryan Owen

AELODAU CYFETHOLEDIG (Gyda hawl pleidleisio ar faterion Addysg) / CO-OPTED MEMBERS (With voting rights when dealing with Educational matters)

Mr Keith Roberts (Yr Eglwys Gatholig / The Catholic Church)
Mrs Anest G. Frazer (Yr Eglwys yng Nghymru / The Church in Wales).

A G E N D A

1 DECLARATION OF INTEREST

To receive any declaration of interest by any Member or Officer in respect of any item of business.

2 MINUTES OF THE PREVIOUS MEETINGS (Pages 1 - 18)

To present the minutes of the previous meetings of the Corporate Scrutiny Committee held on the following dates –

- 23 April, 2018
- 15 May, 2018

3 MONITORING PERFORMANCE - CORPORATE SCORECARD QUARTER 4 2017/18 (Pages 19 - 44)

To present the report of the Head of Profession – HR and Transformation.

4 MONITORING PROGRESS - CHILDREN AND FAMILIES SERVICES IMPROVEMENT PROGRAMME (Pages 45 - 104)

- To present the report of the Head of Children and Families Services
- To present the report of the Children's Services Improvement Panel

5 MONITORING PROGRESS - FINANCE SCRUTINY PANEL (Pages 105 - 110)

To present the report of the Finance Scrutiny Panel.

6 FORWARD WORK PROGRAMME (Pages 111 - 118)

To present the Forward Work Programme 2018/19.

7 ITEM FOR INFORMATION - SCHOOL TRANSPORT (Pages 119 - 122)

To receive an update on the implementation of the Action Plan.

CORPORATE SCRUTINY COMMITTEE

Minutes of the meeting held on 23 April, 2018

- PRESENT:** Councillor Aled Morris Jones (Chair)
Councillor Dylan Rees (Vice-Chair)
- Councillors Lewis Davies, Richard Griffiths, Alun Roberts, Nicola Roberts
- Co-opted Member: Mr Keith Roberts (The Catholic Church)
- Portfolio Members**
- Councillor Llinos Medi Huws (Leader & Portfolio Member for Social Services (for items 4 and 5)
Councillor R. Meirion Jones (Portfolio Member for Education, Libraries, Youth & Culture) (for item 3)
- IN ATTENDANCE:** Assistant Chief Executive (Partnerships, Community & Service Transformation) (for item 3)
Assistant Chief Executive (Governance and Business Process Transformation & Statutory Director of Social Services (for items 4 and 5)
Head of Function (Resources) and Section 151 Officer (for item 3)
Head of Adults' Services (for items 4 and 5)
Head of Children's Services (for item 4)
Head of Democratic Services
Programme Manager (Adults' Services) (ST) (for item 4)
Committee Officer (ATH)
- APOLOGIES:** Councillors Richard Owain Jones, J. Arwel Roberts, Shaun Redmond, John Griffith (Portfolio Member for Finance)
- ALSO PRESENT:** **Portfolio Members:** Councillors Carwyn Jones (Portfolio Member for Major Projects and Economic Development) Alun Mummery (Portfolio Member for Housing and Supporting Communities)
- Local Members:** Councillors Eric Wyn Jones, Dafydd Roberts
- Others:** Rhys Parry & Helen Munroe (Ysgol Henblas); Llinos Roberts, Gareth Parry & Ellis Wyn Roberts (Ysgol Bodffordd); Dafydd Tudur Jones (Ysgol Corn Hir)

The Chair welcomed all those present to this meeting of the Corporate Scrutiny Committee including Members, Officers and representatives of Ysgol Bodffordd, Ysgol Henblas and Ysgol Corn Hir.

1 DECLARATION OF INTEREST

Councillor Richard Griffiths declared a personal but not prejudicial interest with regard to item 3 on the agenda due to his niece's children being pupils at Ysgol Henblas.

Councillor Dylan Rees declared a personal but not prejudicial interest with regard to item 3 on the agenda as the Chair of the Governing Body of Ysgol Bodffordd.

Councillor Nicola Roberts declared a personal but not prejudicial interest in item 3 on the agenda due to her niece being a pupil at Ysgol Corn Hir.

Councillor Llinos Medi Huws (not a member of the Corporate Scrutiny Committee) declared a personal interest with regard to item 3 on the agenda.

2 MINUTES OF THE PREVIOUS MEETINGS

The minutes of the previous meeting of the Corporate Scrutiny Committee held on the 12 March, 2018 were submitted and were confirmed as correct.

The Chair thanked Councillor Dylan Rees, the Vice-Chair for chairing the meeting in his absence.

3 SCHOOLS' MODERNISATION PROGRAMME – LLANGEFNI AREA

The report of the Assistant Chief Executive incorporating the report on the outcome of the Statutory Consultation on the reconfiguration of primary education provision in the Llangefni area (Ysgol Corn Hir, Ysgol Bodffordd and Ysgol Henblas) was presented for the Committee's consideration. The report set out two options for moving forwards with the modernisation process in the western area of Llangefni -

- To build a new school to replace Ysgol Bodffordd, Ysgol Henblas and Ysgol Corn Hir, or
- To build a new school to replace Ysgol Bodffordd and Ysgol Corn Hir and to maintain educational provision in Llangristiolus. This could involve maintaining Ysgol Henblas in its current form or as part of a multi-site school subject to assurances being given in a year's time that standards at Ysgol Henblas are improving, that the current pace of improvement increases and the prospects with regard to pupil numbers remain constant.

The Portfolio Member for Education, Libraries Youth & Culture reported that the schools' modernisation process involves assessing and weighing up the future of schools and the effect this will have on parents, children, teachers, school governors and a range of other stakeholders. It is often a contentious matter and is also one of the most challenging elements of the Council's business. As the Portfolio Holder he acknowledged this, and he understood the concerns of parents and stakeholders. On the other hand what is being discussed is the future of schools perhaps for the next 50 years; a schools' service that is sagging under the pressure of financial cuts; a maintenance backlog, the demands of the curriculum as well as a number of other issues. The Council must give serious consideration to making the schools system more effective so as to create an environment wherein both pupils and teachers can succeed, and also to making it more efficient so that resources are used effectively and all schools get a fair share of the budget. The Council has embarked on its modernisation programme in order to improve educational outcomes for children; in order to improve leadership standards and the quality of teaching and learning and to ensure there are leading sector schools in each area. The Portfolio Member for Education referred to the change drivers for modernisation that will influence any decision regarding the best provision for the area as set out in section 2 of the report. He also referred to the role of Elected Members in the modernisation process which encompasses both local and corporate responsibilities – requiring of them a duty to their individual communities but also a duty to provide strategic direction for the Council through firm and clear guidance. The Portfolio Member for Education said that notwithstanding there will be specific representations made on behalf of the three schools at this meeting, he trusted that the contents of the report would be scrutinised in facilitation of the process as a whole and also so as to assist the Executive

in this particular matter, and generally for the future. He thanked all those who had attended the consultation sessions and all those who had tendered their views although there had been many comments offered by individuals who had no connection with the three schools under consideration.

The Assistant Chief Executive (Partnerships, Community & Service Transformation) said that she too wished to thank everyone who had participated in the consultation process either by sending in their responses or by being present in the consultation meetings at the three schools. 264 responses were received from stakeholders of Ysgol Bodffordd with the vast majority opposed to the proposed closure of the school; 2 responses were received from the stakeholders of Ysgol Corn Hir including one by the Governing Body and a total of 118 responses were received from the stakeholders of Ysgol Henblas with the vast majority again objecting to the proposal to close the school. A petition has been submitted to the Authority opposing the closure of Ysgol Bodffordd and a petition has also been submitted in support of keeping Ysgol Henblas open. In addition, an electronic survey was conducted. Meetings were also held to obtain the views of children in each of the three schools. The Officer drew specific attention to paragraph 8.2 of the consultation response report wherein it is stated that a response was received by the Assembly Member for Anglesey in relation to Ysgol Henblas. The Officer clarified that the response of Mr Rhun ap Iorwerth had been made in his capacity as a former parent, former school governor and as a resident of the community of Llangristiolus.

The Officer said that the report provides a synopsis of the responses received by conveying the main themes in comparison with the main drivers for change in the School's Modernisation Strategy (section 2 of the report). The Authority's response to the issues raised with regard to each of the three schools is set out in section 10 of the report. With regard to **Ysgol Bodffordd and Ysgol Henblas** many of the issues raised – for example in relation to standards, pupil numbers, condition of the school building, Welsh language and community use are common to both schools and the Authority's response to them can be summarised as follows –

- Standards at both schools have been low for some time as confirmed by Estyn inspection reports in May, 2015 and May, 2017 respectively. (*School standards are elaborated on in greater detail with regard to each of the three schools in section 3 of the Statutory Consultation Document*) The pace of progress has been slow although improvements have been made recently in Ysgol Henblas under the leadership of the interim Head teacher. The school support time provided for Ysgol Bodffordd is much higher than in a significant number of other schools; for Ysgol Henblas regardless of the final decision, there remains an urgent need for the Authority, parents and the Governing Body to continue to work together over the next year to ensure the necessary improvements.
- Issues of leadership exist in both schools. In Ysgol Henblas the size of the school does not allow the appointment of a deputy and considerable work is required to reach a point where delegated leadership would be one of the strengths at the school. Consequently, developing a culture of leadership development and succession planning would be a significant challenge for the school. The Authority recognises that quality of leadership is more of a challenge for smaller schools where leaders are responsible for a class for a significant part of the week and are also responsible for all aspects of leading a school.
- The statutory consultation document notes there is a maintenance backlog of £209,000 for Ysgol Bodffordd and although many of the respondents with regard to Ysgol Henblas note that the condition of the school is good, there is a maintenance backlog of £112,000 for the school.

- The size of both schools means that classes are of mixed age. This, together with the expectation that suitable work must be prepared for the range of abilities in a class, offers a higher level of challenge for teachers in smaller schools.
- Whilst it is questionable whether the community use of Ysgol Henblas is more than that made of a number of other schools, it is recognised that significant community use is made of Ysgol Bodffordd to the extent that should the school close, there would be a need to collaborate with the community to identify a solution that would allow community activities to continue.
- There is no evidence to support comments made that the use of the Welsh Language is better at Ysgol Henblas than in other schools. The use of Welsh is one of the strengths of all three schools and is recognised as such in Ysgol Bodffordd, and is confirmed by the Language Impact Assessment.
- The cost per pupil at Ysgol Henblas (£4,778) is the highest of the three schools and is significantly higher than the Anglesey average (£3,972). The cost per pupil at Ysgol Bodffordd is also high at £4,500. The Wales average is £3,690 per pupil.
- The forecast for pupil numbers at Ysgol Henblas indicates a decrease up until 2023. Ysgol Bodffordd will be over its capacity by September, 2018 onwards. (*Pupil forecasts are elaborated upon in greater detail in the Statutory Consultation Document*)

The position in relation to **Ysgol Corn Hir** is different. As the largest school of the three under consideration, the final position will have to reflect this. Ysgol Corn Hir suffers from a lack of capacity with no room to expand on the current school site. Whilst current standards are good there is still room for improvement. There is also a maintenance backlog at Ysgol Corn Hir to the value of £239,500 (*Statutory Consultation Document*). The cost per pupil at the school is the lowest of the three schools (£3,475). This arguably results in a significantly higher financial challenge in that class sizes are large and, given that larger schools often serve areas which are more deprived, it could be argued that this does not promote equality of opportunity.

The Officer said that a number of comments were received regarding the Welsh language which questioned the linguistic status and quality of Welsh at the proposed new school, it being suggested that school size can affect the quality of the Welsh language. It was also suggested that larger schools are less effective in creating a sense of family and make it less possible for children to have opportunities to represent the school. It is further alleged that school closures lead to the decline of communities. The Authority emphasises that any new school will need to follow the Welsh language policy and it expects any school which is part of the modernisation programme to continue to be community based, Welsh speaking schools. There is no evidence that larger schools offer less opportunities for participation – there are arrangements in primary schools to ensure opportunities for all pupils to participate. Neither is it true that communities necessarily decline when the local school closes – a new school can create a wider community and there are examples of communities continuing to thrive in villages where schools have closed.

Comments were also submitted by other stakeholders including by Teachers Unions, Estyn, Llangristiolus and Cerrigceinwen Community Councils, the Welsh Language Society Education Campaign Group and by Cymdeithas yr Iaith. A number of comments make reference to the Welsh Government's **revised School Organisation Code 2017** which is expected to come into effect in September, 2018. In response to a question by the Committee about the extent of the consideration given to the revised Code in making the proposals as presented, the Officer confirmed that every consideration has been given to the Code. She highlighted however that nowhere in the draft revised Code does it say that closing small rural schools is not possible; the Code recognises that the presumption against the closure of rural schools does not mean that a rural school will never close. What the Code does state is that a decision to propose and consult on

closure is taken only after all viable options (examples of which are set out in the Code) to closure have been considered. The revised Code mentions the current system as having enabled more rapid decision making – the Officer said that the Authority in Anglesey has not rushed into decisions, on average it has taken 3 years to open a new school from the point of consultation. Discussions with regard to the primary education provision in the western area of Llangefni began in 2016; moreover the consideration of alternative options has formed part of each consultation process which the Authority has undertaken to date as part of the schools' modernisation programme. However, experience has shown that most comments made during consultation are predominantly negative opposing the proposals put forward and that few positive comments are presented in terms of offering viable alternatives. The Code refers to standards and quality of education as key factors – the Authority is in agreement and further suggests that where standards are unsatisfactory then this is unfair to children. Improving and ensuring high educational standards is one of the Authority's main drivers for change. The Code refers to the centrality of some schools to community life and activity and to the sustainability of communities especially where the school building is used to provide a community service – the Authority, whilst it seeks to work with communities and has successfully done so e.g. in Llanddona, recognises that this is an aspect that might require further work as the new Code is implemented and as the Authority refines its processes. The Code acknowledges education as the primary consideration which links into the duty of the LEA to raise and maintain education standards – the quality of children's experiences is a silver thread that runs through the Authority's Schools Modernisation Programme. The list of rural schools attached to the Code does not mean that schools designated as a rural school on the list are safe and that alternative or different solutions should not be considered. More work needs to be done on this locally and it will receive attention once the new Code comes into effect.

The Committee considered the Officer's report and the information presented in support of the proposals put forward and it made the following points -

- The Committee noted that closing Ysgol Henblas was not an option in the consultation on the modernisation of schools in the western part of Llangefni that was conducted early in 2017. The Committee sought clarification therefore of the reasons for including the closure of Ysgol Henblas as part of the latest consultation.

The Assistant Chief Executive (Partnerships, Community & Service Transformation) said that the Executive at its meeting on 18 December, 2018 decided on a pause and review period concerning the future of primary education provision in the Llangefni area. As a result of this, the options were re-assessed in light of confirmation also of the availability of substantial new finance. The Executive decided to ask Education Officers to look again at the Llangefni area. The additional finance made new proposals possible which in turn necessitated further statutory consultation meetings with parents, staff and governors. After reviewing the situation, on 5 February, 2018 the Head of Learning, in consultation with the Chief Executive and the Education Portfolio Member and in line with the Officers' delegated powers decided to re-start the consultation process in the western part of Llangefni on the proposal set out in the Statutory Consultation Document.

- The Committee noted that the new Schools Organisation Code is likely to be implemented in September, 2018. The Committee sought clarification of the Authority's approach in the event that the definitive Code differs from the draft version and whether it would be possible to reverse any decision the Executive might take with regard to the options under consideration especially as they involve the closure of two or three schools.

The Assistant Chief Executive (Partnerships, Community & Service Transformation) said that it would not be possible to go back on a decision which the Executive is scheduled to make on 30 April, when the School Organisation Code comes into effect in September, 2018.

The Head of Function (Resources) and Section 151 Officer reported on the Authority's financial position. The Officer highlighted that education and schools are the largest budgets within the Council making up £40m out of a total Council budget of £130m. The Officer said that since the beginning of the squeeze on the Council's finances in around 2012 the Council has implemented budget cuts to the value of over £17m which includes £2.5m of savings in 2018/19. Looking to the future, the situation is not expected to improve with the settlement grant projected to decrease by a further 1% in 2019/20 equating to a loss of income of £1m to the Council, and no increase is predicted for the subsequent two years. Set against a decreasing budget are the Council's costs which are steadily increasing year on year – the pay of local government administrative staff is set to rise by 3% in 2019/20; if the remainder of the Council's staff were to receive a pay increase of 2% to 3% then it is anticipated that the pay settlement for teaching staff would also be in that region thereby adding significantly to the Council's costs. The Council's Medium Term Financial Plan seeks to look ahead on the basis of various scenarios; the plan projects that further savings of between £6m and £10m will be required of the Council over the next three year period. The Council's financial position therefore needs to be taken into account when decisions on schools are made and is one of the factors in the decision making process. The Officer said that over the years the Council has sought to protect schools from the worst of the budget cuts; affording schools this protection at the expense of other services which have had to find substantial savings over the past few years is no longer possible especially if the worst case scenario is realised and the Council has to find savings of £10m over the next three years.

The Officer referred to the funding arrangements for new schools which also puts pressure on the Council's finances. Funding for a new school project or a refurbishment project is divided to 50% from Welsh Government and 50% from the Local Authority. Capital receipts from the sale of redundant school buildings can form part of the Authority's contribution thereby bringing down the amount it must spend. The remaining amount is financed by means of borrowing where the Authority meets the costs of borrowing i.e. by making a provision from the revenue budget – the Minimum Revenue Provision (2% of the loan amount) – to repay the loan at end of term and by meeting the annual interest costs, currently 2.3% to 2.5%. For every £1m the Authority borrows to fund its part of the costs of a new school, the annual costs are in the region of £50k. A loan of £5m incurs annual costs of £250k which have to be met by the Authority. The financial aspect when considering various options for schools including new schools is therefore very important. Bringing Ysgol Henblas into the equation is advantageous from a financial perspective given that certain essential contract costs e.g. contract management costs, site safety costs would remain the same regardless of the size of the new school but economies of scale can be achieved by including Ysgol Henblas in the plan. The costs of running smaller schools generally are higher thereby driving up the cost per pupil; from a revenue point the Council has to consider whether it can afford to keep small rural schools going in the long term. The Officer referred to section 11 of the consultation response report which sets out the outcome of a financial appraisal of four options including the option of keeping the status quo.

In response to questions from the Committee, the Officer confirmed that borrowing would take place over a period of 50 years. The additional school transport costs for

each of the four options are set out in section 11; these are estimates and could change dependent on which school and where parents choose to send their children.

Representations by Ysgol Henblas

Rhys Parry (Chair of the Governing Body of Ysgol Henblas) and Helen Munroe (on behalf of the parents of pupils at Ysgol Henblas) addressed the Committee with their and the community of Llangristiolus's views on the proposals to modernise the primary education provision in the western part of Llangefni. They drew attention to the very energetic and passionate campaign which the stakeholders at Ysgol Henblas had launched to keep the school open because they considered there to be a robust case for not closing the school supported by compelling educational, cultural and social reasons. They highlighted that members of the Committee as well as members of the Executive had been invited to visit Ysgol Henblas but that this had not been possible on the date offered. In making their representations to the Committee, they brought the following matters to the Members' attention –

- That Ysgol Henblas is a school of 87 children which in the stakeholders' view make it a medium sized rather than a small school. The school serves an extensive rural area taking in Llangristiolus, Capel Mawr, Cerrigceinwen and Paradwys. It is a lively, happy Welsh language school which is prospering. It is a modern school with space either side to extend if necessary.
- Since last September under the Headship of Mr Elfed Williams, the school has developed and grown in strength and, following the very recent appointment of a new, talented and enthusiastic Head Teacher who shares his predecessor's vision for the school, there is every confidence that Ysgol Henblas will continue to thrive. Educational Standards at the school are on the rise. Despite going through a challenging period prior to summer 2017, of the three schools under consideration the results of Ysgol Henblas for 2016/17 in the Foundation Phase are the second best and in KS2, they are the best and are also better than Anglesey and Wales's results. Moreover, GwE in a report issued last month confirms that the school has made progress against each of the 6 recommendations made by Estyn following the inspection in May 2017. Under the leadership of the new Head Teacher, the school is continuing to make strides with improving standards.
- That there are significant shortcomings in the consultation process – specifically - the complete and unexpected U turn from the position taken in the previous consultation early in 2017 resulting now in the proposal to close Ysgol Henblas. Also the absence of a non-statutory consultation and whilst it is accepted that this is not mandatory, it is nevertheless regarded as good practice. Thirdly, the deliberate slant both in the statutory consultation document and in the consultation response report which seeks to convey an unfavourable picture of Ysgol Henblas. For example, the Governing Body of Ysgol Henblas drafted a detailed 8 page response to the consultation which in the report has been reduced to 6 bullet points whereas in previous consultation response reports, the response by the Governing Body of an affected school has been reproduced in full. It is a curtailment of the school's voice which has been remedied by the Chair of the Governing Body dispatching the Governing Body's response directly to members of both the Scrutiny Committee and the Executive.
- The importance of ensuring choice. Should all the Authority's plans be realised, it would mean there would only be two primary schools, albeit large schools, serving what is a huge area tantamount to a quarter of the Island. Does the Authority really believe that an educational wilderness like this is desirable? Although a number of parents do choose to send their children to larger schools, many others choose rural schools such as Ysgol Henblas because for many parents their priority is that

their children receive an education of standard in a rural, community and family environment rather than in an education factory.

- A school like Ysgol Henblas is inclusive and offers all pupils opportunities to participate in school activities e.g. in the football team or the school choir; in larger schools, it is often only the best who get the chance to take part.
- Since May, 2017 there has been an increase of nearly 10% in pupil numbers at Ysgol Henblas which is testament to the confidence of the surrounding community in the school.
- Ysgol Henblas is a focal point for the village of Llangristiolus which has grown around the school there being very little other provision within the village. Should the school close then a large rural area would be deprived of its only significant resource which binds the community together, and the loss of which could lead to the demise of yet another community.
- Schools such as Ysgol Henblas are integral to promoting use of the Welsh language. The proposed new super-school will be five times the size of Ysgol Henblas meaning there could be five times the number of children from non-Welsh language households attending the school thus increasing the opportunities for children not to speak Welsh. Keeping wherever possible, centres of education in the communities where children live is key to ensuring the Welsh language develops and thrives. Educating children through the medium of Welsh is not enough of itself to sustain the language – children need to be able to choose Welsh over English and this should start in their own village and their own community and not in a school four miles down the road.

In response to questions by the Committee regarding the steps the Governing Body of Ysgol Henblas is taking to ensure that the improvement in standards continues and is sustained, Mr Rhys Parry said that the school has worked diligently to implement the post inspection action plan and a Standards Panel has been established to make sure the 6 recommendations made by Estyn are put into effect. Significant progress has already been made e.g. in reading which is confirmed by the GwE report. However, the focus on improving standards has been diverted by the need to put every effort into fighting for the future of the school. With regard to mixed age classes, in any school there are pupils of different abilities within a class which requires differentiation.

Councillor Dafydd Robert and Eric Wyn Jones both spoke as Local Members. Both said that they had confidence in the progress being made by Ysgol Henblas and both were concerned by the ramifications of any closure which would leave a large area of the Island without any educational provision thereby depriving parents of a choice. Councillor Eric Jones said that he was astonished by the proposal to close the three schools and that he considered all three to be super schools.

Representations by Ysgol Bodffordd

Gareth Parry (School Governor), Llinos Roberts (parent) and Elis Wyn Roberts (Bodffordd Community Council) addressed the Committee with their and the community of Bodffordd's views on the proposals to modernise the primary education provision in the western part of Llangefni. In making their representations, they emphasised the role of Ysgol Bodffordd as a community school which is at the heart of the community and they also brought the following matters to the Committee's attention –

- That Ysgol Bodffordd is a popular school which is full with many parents from outside the catchment choosing to send their children to the school because of its community nature and strong Welsh language ethos.
- That new buildings and academic progress are not the only factors in children's development. Governors Wales's education policies suggest that any decisions about the future of schools should be made on a broad and holistic basis taking into account the welfare of children and the feeling of belonging they have in a close community

school such as Ysgol Bodffordd. In the short-term closing the school will have an effect on less fortunate families and on children with special needs; children will not be able to walk to school. Having to travel on a bus to a large school of 450 pupils is likely to have an impact on 4 and 5 year old children when it is challenging enough for them to make the move from nursery to primary school. The future of the excellent Cylch Meithrin in Bodffordd is also in question.

- Ysgol Bodffordd has especially strong community links; parents are doubtful that the Authority has fully assessed the impact which closing the school will have on this close rural community and on the Welsh language. There has to be a very strong case made for closing the school (other than financial reasons) that can stand up to scrutiny. The stakeholders at Ysgol Bodffordd do not believe that such a case has been made because of errors in the consultation response report not least the omission of the views of Estyn which is a mandatory requirement which undermines the idea of a fair consultation reducing it to the level of a “rubber-stamp.”
- The community centre which is inextricably linked to the school is fully utilised by the community; however there has been no indication of what will happen to the centre should the school close or the impact this will have on community activities and community life. Without the school there is no parking provision for the community centre.
- The playground and field on the school site was gifted to the school to be used by it and the village children many years ago by the then landowner. If the Authority proposes to use the capital receipts from the sale of Ysgol Bodffordd as a contribution towards the new school then it will have to provide evidence of its ownership of the land and centre.
- Stakeholders of Ysgol Bodffordd believe that there is a bias against Ysgol Bodffordd in the consultation response report; to say that it is not possible to justify the future for Ysgol Bodffordd is disgraceful. Since the Estyn inspection report in 2015 the school has made a very great effort to improve standards which is not recognised in the report. As well as a presumption against smaller schools there is also a presumption in the report that larger schools are better in many ways; larger primary schools are relatively new – there is therefore insufficient evidence to date to support this presumption.
- To say that some from Ysgol Bodffordd felt there was no point in replying to the consultation is an unfair representation of the position and ignores the fact that a total of 400 to 500 responses have been made over the course of three consultations (two statutory and one non-statutory). It is no wonder therefore when such facts are ignored that some might find no point in responding – parents and governors have lost faith in the ability of the LEA’s officers to listen and to accept a different viewpoint.
- In proposing to close Ysgol Bodffordd the Authority is acting contrary to the Well-being and Future Generations Act (Wales) 2015 which amongst other things seeks to create viable, resilient and successful communities which promote equality, fairness and cohesion in which the Welsh language can prosper. The closure of schools such as Ysgol Bodffordd which can end up destroying communities can therefore not be justified.
- In proposing to close Ysgol Bodffordd the Authority is also acting contrary to its own Council Plan 2017-2022 which has as one of its objectives to ensure that the people of Anglesey can thrive and realise their long-term potential. Such an aspiration will not be realised by closing schools and destroying the foundations of communities.
- The new School Organisation Code will come into effect in September, 2018 and has the potential to render the current consultation a waste of time. Added to this is the announcement by the Welsh Government’s Education Secretary of £36m additional funding for schools in Wales to recruit teachers and to provide extra learning space in order to reduce infant class sizes. These developments will change the landscape. The statutory only consultation conducted at this time suggests that the Authority is

trying to push through a decision while there is still time. Given that the schools' modernisation process for this area began in 2016, to pause for another few months until the new Code is implemented would be a more reasonable course to take. Notwithstanding what is being emphasised by the Authority as a tight timetable, rushing to judgment is still a dangerous thing to do.

In response to points raised by the Committee in relation to the future of the current nursery provision at Ysgol Bodffordd and the arrangements for transporting nursery children to the nursery provision at the new school mindful of the fact that parents are at present able to walk to Cylch Meithrin, as well as the legal ownership of the playground and community part of the school building, the Assistant Chief Executive (Partnerships, Community & Service Transformation) said that Education Officers had explained in the consultation session with parents that consideration would have to be given to making arrangements for the Cylch Meithrin within Bodffordd itself. With regard to the question of the ownership of land and community centre, initial enquiries only have been made with Property Officers so as not to be seen as pre-empting the decision or giving the impression that the decision has been made; as with other aspects of the proposals, the detailed work will begin after the Executive has made a decision.

The Portfolio Member for Education clarified that the timetable is prescribed by the timing of the Band A and Band B phases of the Welsh Government's Twenty-First Century Schools Programme. With regard to the recently announced additional money by Welsh Government to reduce infant class sizes, the Portfolio Member in referring to the fact that the money is intended for new teachers to help create smaller infant classes so "a school which currently has two infant classes of 29 or more pupils could instead have three smaller more manageable infant classes" highlighted that very few schools in Anglesey fit this description to which the funding criteria would apply.

The Head of Function (Resources) and Section 151 Officer clarified that the capital receipts from the sale of a school although helpful in reducing the overall spend is not essential in the context of a total budget of £8m for the proposed new school. Any funding gap will be bridged by borrowing.

Councillor Dylan Rees as Chair of the Governing Body of Ysgol Bodffordd said that he thought the assessment of Ysgol Bodffordd with regard to standards reads unfairly. Much is made of the Estyn inspection which goes back to 2015; since then the school has made steady progress. It is only recently that he and the Head Teacher appeared before the Council's Schools Progress Review Scrutiny Panel where the school was complimented on the progress that had taken place with the support of GwE – there is confidence that with continued progress the school will move out of the amber classification in relation to performance and into the yellow classification by September, 2018. None of this is reflected in the report. As a Local Member, Councillor Dylan Rees referred to the current School Organisation Code 2013 which states that a school may be the focal point of community activity with closure having an effect beyond the educational. In such cases proposals should show that the impact on communities has been assessed through a Community Impact Assessment. Although the report acknowledges that a solution will need to be found to allow community activities to continue the Authority's approach seems to be one of "we'll cross that bridge when we get to it."

The Assistant Chief Executive (Partnerships, Community & Service Transformation) confirmed that all necessary assessments including a Community Impact Assessment had been undertaken in accordance with the requirements of the Code. In relation to standards at Ysgol Bodffordd the Officer said that there have been challenges in the early part of 2018 including staff changes leading to a further period of adaptation and restructuring. There is a need therefore to provide continuing intense support to the school and it was recommended that the school remains in the amber category.

Representations by Ysgol Corn Hir

Mr Dafydd Tudur Jones (School Governor) addressed the Committee from the perspective of the views of Ysgol Corn Hir on the proposals to modernise the primary education provision in the western part of Llangefni. In making his representations to the Committee, he drew attention to the following matters –

- That Ysgol Corn Hir is over capacity and has a shortage of funding.
- That although the school's admission number is 29, from next year onwards the reception class will have 31 children, Year 1 will have 35 children, Year 2 will have 35 children and Year 3 will have 35 children, Year 4 will have 31 children, Year 5 will have 27 children and Year 6 will have 34 children.
- That an arrangement was made with the LEA four years ago to increase the admission number to 35 following on from which the school received funding to create an additional classroom to ensure the school conforms to infant class size requirements.
- However, next year for the first time, Year 3 will have 35 pupils which brings with it a number of challenges. The need to make savings has prevented the school from engaging an additional teacher for the infant classes which it had hoped to do.
- That Ysgol Corn Hir suffers from a lack of space – the school building is small and the classrooms are small which when coupled with the large number of children at the school makes it increasingly difficult for the school to cope going forwards. Added to this are financial pressures which make cutting back on teaching staff a possibility.
- That any delay in coming to a decision on the future of Ysgol Corn Hir will have a significant effect on the school. The ongoing uncertainty makes it difficult to plan ahead with the consequent risk that standards at the school which have been consistently high, will eventually suffer; there are also health and safety risks associated with lack of space and a large number of children. The Executive needs to understand these risks in coming to its decision.

Councillor Nicola Roberts, also a Local Member, said that having both large and small primary schools in her ward and serving as a governor on one and the other she had seen the differentials in terms of school budgets/cost per head and was worried by the inequality which this can lead to. In light of the issues with standards that have existed in some of the schools she was particularly concerned that standards might be further eroded by any delay (she referenced Option 2) in implementing the modernisation programme in this area of Llangefni.

The Committee in considering all the information presented both orally and in writing, made the following points –

- The Committee noted that unlike in previous consultations, an informal or non-statutory consultation was not held with regard to the proposal in question. The Committee noted that although it is not a requirement, prior informal consultation is looked upon as good practice and could have given an opportunity to clarify a number of issues beforehand, to provide more information as well identifying alternative ideas and/or proposals. The impression created therefore is that the decision making process is being carried out with more haste this time.

The Portfolio Member for Education said that additional finance which the Welsh Government made available as part of the Twenty First Century Schools Programme as announced in January, 2018 enabled the Authority to look again at options for the Llangefni area and the size of the proposed new school for the western part of Llangefni. There are however time limitations in relation to the funding linked to the Band A phase of the programme. He emphasised that the Authority does not make decisions in advance but that consultation must be based on an idea of what is possible and/or desirable for the area in question. He emphasised that a range of

factors are taken into account but that the Authority does not have a magic money tree that would allow it to meet the wishes of all stakeholders for their schools. The Authority is faced with having to make difficult decisions but is keen to ensure they are the right ones.

- The Committee noted that Ysgol Henblas and Ysgol Bodffordd are seen as central to their communities and to community life, and that the closure of the schools could potentially have a devastating impact on both communities. The Committee noted that the School Organisation Code states that the impact of closure on the community needs to have been assessed. The Committee further noted that the outcome of such an assessment is not clear in the documentation presented and in the case of Ysgol Bodffordd where the community use of the school is recognised as significant it is only briefly referred to.
- The Committee further noted with regard to the community use of Ysgol Bodffordd that the ownership of land and community building associated with the school is uncertain. The Committee emphasised that the legal ownership of the land and building is a matter that should be clarified before any decision is made with regard to the school.
- The Committee noted that although pupil numbers are predicted to reduce in Ysgol Henblas over a period of time, surplus places are not an immediate issue in relation to either Ysgol Henblas or Ysgol Bodffordd.
- The Committee acknowledged that ensuring high standards of education is important. Whilst it accepted that both Ysgol Henblas and Ysgol Bodffordd have had to address issues in relation to standards, the Committee noted from the testimony provided that both schools are making progress in improving standards.
- The Committee noted that lack of space and over capacity are issues affecting Ysgol Corn Hir.
- The Committee noted that under the Joint Local Development Plan, 600 new homes are planned for Llangefni which is likely to bring in new families and children to the area. The Committee noted that any decisions on the primary education provision in the Llangefni area should take account of and plan on the basis of this eventuality ensuring that there is sufficient education capacity in the Llangefni area to meet this expansion.

The Assistant Chief Executive (Partnerships, Community & Service Transformation) said that the JDLP refers to the building of 600 new homes in Llangefni in the period from 2011 to 2026. 60 of those homes have been completed and 13 have planning consent. Officers have assessed the effect of new houses by using a formula to predict the numbers of pupils in each of the catchment areas of the three schools. For this formal consultation the number of houses is 237 in the catchment area of the three schools; this would therefore mean 40 additional pupils.

- The Committee noted that larger schools do not necessarily address every problem and are not the right solution for every area. Testimony provided to the Schools Performance Review Panel indicates that some of the same problems still remain in the new schools already built as part of the school's modernisation programme in Anglesey. The Committee noted that there is no specific evidence to show that larger schools provide better education.

The Assistant Chief Executive (Partnerships, Community & Service Transformation) said that testimony regarding the advantages of the new schools was also provided to the Schools Performance Review Panel.

- The Committee noted that the final definitive version of the draft revised School Organisation Code is expected to be come into effect in September, 2018. The Committee noted that the final Code may be different to the draft version. The Committee further noted that there will be no turning back on a decision implemented by the Executive with regard to the three schools in question by the time the final Code is issued regardless of what it may contain.
- The Committee noted that Option 2 provides for the possibility of maintaining Ysgol Henblas subject to monitoring standards for improvement for a year. The Committee sought clarification of the differentiation between Ysgol Henblas and Ysgol Bodffordd on this basis and why no such option is offered for Ysgol Bodffordd

The Assistant Chief Executive (Partnerships, Community & Service Transformation) said that the support provided to Ysgol Henblas over the past three years has been substantial. The support for Ysgol Bodffordd over 3 years has also been high. Feedback confirms that the pace of improvement at Ysgol Henblas has accelerated; the school's results for last year were the best of the three schools for KS2 being in the first quartile although the results for the Foundation Phase was in the third quartile. In the previous two years, results for the Foundation Phase were in the fourth quartile and for KS2 they were in the fourth and third quartiles Test results for the Foundation Phase have been in the fourth quartile for Ysgol Bodffordd for both the past two years and for KS2 results were in the first quartile in 2015/16 but have fallen back to the third quartile in 2016/17. The Assistant Chief Executive said that Estyn looks at schools' performance over a period of three years.

*The Chair highlighted at this juncture that as the Committee had now been in session for three hours, under the provisions of paragraph 4.1.10 of the Council's Constitution, a resolution was required by the majority of those Members of the Committee present to agree to continue with the meeting. **It was resolved that the meeting should continue.***

Councillor Lewis Davies proposed the following amendments to the Officer's recommendations as set out in the written report –

- That a decision on any school is deferred until the Welsh Government's Cabinet Secretary for Education issues a statement on small rural schools.
- That Ysgol Henblas and Ysgol Bodffordd remain open due to the implications of the building of a large number of houses in the Llangefni area which is likely to lead to a significant increase in the number of children in future.

The Chair proposed and it was agreed that wording to reflect the Committee's concern over the uncertainty in relation to the ownership of land and community building in relation to Ysgol Bodffordd be added to the amendment.

The Head of Function (Resources) and Section 151 Officer advised that moving forwards on the basis of a new school to replace Ysgol Corn Hir only (as opposed to a new school to replace all three schools or a new school to replace Ysgol Corn Hir and Ysgol Bodffordd) would be problematic financially as it will not generate the same level of savings, and the costs will be higher. No plan has been made for such a proposal on the grounds that the business case for it is likely to be rejected by Welsh Government as not providing the level of savings which the Twenty First Century Schools' Programme requires and expects.

In the ensuing vote on the matter the majority of the Committee's Members supported the amendments as put forward.

Having considered all the information presented and the representations made, it was

RESOLVED to recommend to the Executive –

- **That a decision on any school is deferred until the Welsh Government's Cabinet Secretary for Education issues a statement on small rural schools.**
- **That Ysgol Henblas and Ysgol Bodffordd remain open due to the implications of the building of a large number of houses in the Llangefni area which is likely to lead to a significant increase in the number of children in future, and also -**
- **That the Corporate Scrutiny Committee has concerns regarding the uncertainty over the ownership of land and community building linked to Ysgol Bodffordd.**

4 SOCIAL SERVICES' PERFORMANCE – PROGRESS ON PRIORITY AREAS

The report of the Statutory Director of Social Services outlining the progress made to date against the Action Plan in response to the Annual Performance Review Letter of the Care and Social Services Inspectorate Wales (CSSIW) was presented for the Committee's consideration. The updated Action Plan was provided at Appendix 2 to the report.

The Statutory Director of Social Services reported that the CSSIW which since January, 2018 has been known as the Care Inspectorate Wales (CIW) published its Annual Review Letter in June 2017. The letter summarised progress on key areas for improvements over the previous year and included feedback on annual engagement themes (Safeguarding and Carers); progress on recommendations arising out of CSSIW inspections as well as areas requiring additional focus. An Action Plan was formed to respond to each issue raised with a timeframe for completion and this was presented to the Corporate Scrutiny Committee in October, 2017. It was agreed at that time that an updated plan would be shared with the Committee's members within 6 months in order to review the progress made.

The Committee noted the information. The Committee sought clarification of whether there are any implications to the restructuring process which Care Inspectorate Wales (CIW) has undergone. The Statutory Director of Social Services said that as a result of the restructuring, CIW will now be working on a national rather than regional basis with the aim of securing consistency throughout Wales in its approach across the range of its responsibilities. The inspections programme will continue and CIW remains in regular monitoring contact with Anglesey's Children's Services and is satisfied with the Authority's progress to date. It is expected that the Authority's Children's Services will be re-inspected by the end of the year. CIW has begun a programme of national thematic inspections including one in relation to Children in Care to which all authorities have responded. Anglesey is not among the six local authorities in which CIW will conduct more detailed fieldwork as part of this thematic inspection.

It was resolved –

- **To note that Care and Social Services Inspectorate Wales (CSSIW) has changed its name to Care Inspectorate Wales (CIW) as from 15 January, 2018.**
- **To approve the April 2018 updated Action Plan as presented.**
- **To note that CIW has confirmed in correspondence dated 23 February, 2018 that following evaluation, it will not be issuing an annual performance letter in 2018.**

NO FURTHER ACTION WAS PROPOSED

5 TRANSFORMATION OF LEARNING DISABILITY SERVICES

The report of the Head of Adults' Services which provided an update on developments in the Learning Disability Service with particular reference to the Service's Transformation Programme was presented for the Committee's consideration. The report provided at

Appendix 1 details of each of the five ongoing projects within the Transformation Programme including the current status of each project, impact on stakeholders, activity to date and next quarter's planned activity.

The Committee noted the information and made the following points –

- The Committee noted the importance of informing existing tenants at Llawr y Dref of the purpose of the Llawr y Dref Move On project and what it involves i.e. providing 3 individuals with a learning disability the opportunity to be assessed for a period of 3 to 18 months for independent living.
- The Committee sought clarification of whether the In-House Day Services project has implication for the future of existing day centres. The Head of Adults' Services said that the Learning Disability in-house day services in their entirety are being reviewed to assess whether they are capable of meeting the needs of users into the future, whether they are modelled in the right way and are in the right place and whether they provide appropriate support to enable individuals to be independent.

The Leader and Portfolio Member for Social Services said that Members were briefed a few months ago on the planned review of in-house day services.

The Chair said that it would be appropriate and that he was requesting that reports in relation to the review of in-house day services to be presented to Scrutiny in advance of any Executive decision on the matter.

It was resolved –

- **To accept the report as position statement on the Learning Disability Service**
- **To support the planned developments to the service.**

ADDITIONAL ACTION PROPOSED: Reports in relation to the review of Learning Disability in-house day services to be presented to Scrutiny in advance of any Executive decision on the matter.

6 NOMINATION TO THE SCHOOLS' PROGRESS REVIEW SCRUTINY PANEL

The report of the Scrutiny Officer seeking the Committee's nomination for a replacement member for Councillor Shaun Redmond on the School Progress Review Scrutiny Panel was presented. The report included at Appendix 1 the Panel's terms of reference and meeting and reporting arrangements as supporting information.

It was resolved to nominate Mr Keith Roberts (The Catholic Church) to serve on the Schools' Progress Review Scrutiny Panel.

7 FORWARD WORK PROGRAMME

The Committee's Forward Work Programme for 2017/18 to 2018/19 was presented for comment and review.

The Chair informed the Committee that two additional meetings of the Committee to consider educational matters are expected to be scheduled into the Work Programme for July, 2018.

It was resolved to accept the Work Programme as presented, subject to noting the inclusion of two additional meetings for July, 2018.

NO ADDITIONAL ACTION WAS PROPOSED

**Councillor Aled Morris Jones
Chair**

DRAFT

CORPORATE SCRUTINY COMMITTEE

Minutes of the meeting held on 15 May 2018

- PRESENT:** Councillors Lewis Davies, Richard Griffiths, T LI Hughes MBE, Aled M Jones, Richard Owain Jones, Bryan Owen, Dylan Rees, Alun Roberts, J A Roberts.
- IN ATTENDANCE:** Chief Executive,
Head of Function (Council Business/Monitoring Officer,
Head of Democratic Services,
Committee Officer (MEH).
- ALSO PRESENT:** Councillor Dylan Rees – Chair of the County Council
- APOLOGIES:** Councillor Nicola Roberts
-

1 DECLARATION OF INTEREST

None received.

2 ELECTION OF CHAIRPERSON

Councillor Aled Morris Jones was elected Chairperson for the Corporate Scrutiny Committee.

3 ELECTION OF VICE-CHAIRPERSON

Councillor Dylan Rees was elected Vice-Chairperson of the Corporate Scrutiny Committee.

**COUNCILLOR DYLAN REES
AS CHAIR OF THE COUNTY COUNCIL**

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ISLE OF ANGLESEY COUNTY COUNCIL Scrutiny Report Template	
Committee:	CORPORATE SCRUTINY
Date:	4 JUNE 2018
Subject:	SCORECARD MONITORING REPORT - QUARTER 4 (2017/18)
Purpose of Report:	TO CHALLENGE PERFORMANCE
Scrutiny Chair:	COUNCILLOR ALED M JONES
Portfolio Holder(s):	COUNCILLOR DAFYDD RHYS THOMAS
Head of Service:	CARYS EDWARDS
Report Author:	GETHIN MORGAN
Tel:	01248 752111
Email:	GethinMorgan@anglesey.gov.uk
Local Members:	n/a

1 - Recommendation/s	
1.1	This is the final scorecard of the financial year 2017/18.
1.2	It portrays the position of the Council against its operational objectives as outlined and agreed collaboratively between the Senior Leadership Team / Executive and in consultation with the Shadow Executive.
1.3	The Committee is requested to scrutinise the scorecard and note the areas which the Senior Leadership Team are managing to secure improvements into the future. These can be summarised as follows –
1.4	Underperformance is recognised and managed with mitigation measures completed to aide improvement –
1.4.1	Children and Families Service to continue to prioritize the improvements noted with particular emphasis placed on improving the timely assessments undertaken within regulations (PM24 / SCC/025).
1.4.2	Adults Services will improve the issues during the forthcoming year by – <ul style="list-style-type: none"> • Awarding a new and revised Home Care Contract to providers by the end of Quarter 1 18/19 with the transfer of the contract expected to be completed during Quarter 2 18/19. As a result, improvements should be tracked as 2018/19 progresses. • Increasing the capacity of Garreglwyd to take individuals with severe dementia problems and to release individuals from hospitals in a timely manner.
1.4.3	The Learning Service will improve by:

- monitoring underperforming schools performance in the School Progress Panel and the BAS (County Quality Board) fortnightly
- Work on reducing the gap between forecasts and actual performance
- Continue to seek better consistency across the 5 schools in sharing best practice, harmonizing and ensuring accurate assessments, and use of assessments to plan appropriate intervention / teaching.
- Continue to provide support to teachers in order to improve Teacher Assessments in the Foundation Phase
- Continue to improve target setting processes

1.4.4 Sickness data is continually used to prioritise and target resource to undertake service sickness challenge panels during 2018/19, which continues to be instrumental in the management of sickness and that a corporate target of 9.75 days sickness per FTE for 2018/19 is adopted once again.

1.4.5 Social Services (Adults and Children and Families) are encouraged to improve the way by which complaints are dealt with and that they ensure that written response to Stage 1 complaints are completed within timescales. This should be operationalised through changing current working practices.

1.5 The Committee is asked to recommend the mitigation measures outlined above.

2 – Link to Council Plan / Other Corporate Priorities

Used as part of the monitoring of the Council Plan

3 – Guiding Principles for Scrutiny Members

To assist Members when scrutinising the topic:-

3.1 Impact the matter has on individuals and communities [**focus on customer/citizen**]

3.2 A look at the efficiency & effectiveness of any proposed change – both financially and in terms of quality [**focus on value**]

3.3 A look at any risks [**focus on risk**]

3.4 Scrutiny taking a performance monitoring or quality assurance role [**focus on performance & quality**]

3.5 Looking at plans and proposals from a perspective of:

- Long term
- Prevention
- Integration
- Collaboration
- Involvement

[**focus on wellbeing**]

4 - Key Scrutiny Questions

1. This Quarter 4 performance monitoring report gives further consideration to performance issues in Children and Families Services. What additional role should the Children's Services Improvement Panel play in constructive scrutiny and monitoring improvements?
2. The report discusses pupil performance at Foundation Phase and Key Stage 4. What additional contribution should the Schools' Progress Review Scrutiny Panel make to constructively challenge and monitoring of improvements in schools?
3. Financial management data in the scorecard estimates shows a significant overspend by the year end. What measures have been introduced to bring these budget pressures under control? What additional contribution should the Finance Scrutiny Panel make in constructive challenge and monitoring of financial performance?

5 – Background / Context

- 1.1 One of the Council Aims Under the Wales Programme for Improvement is the way by which the Council secures and realises continuous improvement across its services can be evidenced and is presented on an annual basis, by a performance report which is published by end of October. Last year's publication noted that as a Council we have improved in a number of areas and that our progress can now be confidently compared to other like-minded Council's across Wales.
- 1.2 This scorecard was developed in parallel to the annual report to identify and inform Council leaders of progress against indicators on a quarterly basis which explicitly demonstrates the successful implementation of the Council's day to day work. It also assists in providing the evidential base from which the performance report is drafted.
- 1.3 The scorecard continues to develop and embed, reflecting those changes that have been undertaken to traditional systems and practices within the Council. This year's indicators included within the scorecard (similar to previous years) have been decided via a workshop held during the second quarter of, 2017/18 with members of the Senior Leadership Team, the Executive and Shadow Executive.

6 – Equality Impact Assessment [including impacts on the Welsh Language]

n/a

7 – Financial Implications

The end of year financial position is noted in the report. The financial position will be confirmed when the end of year closing process has been completed.

8 – Appendices:

Appendix A - Scorecard Quarter 4
Appendix B – Programmes and Projects Performance Dashboard – Quarter 4
Appendix C – Revenue Out-turn Forecast for the Financial Year ending 31 March 2018 – Quarter 4

9 - Background papers (please contact the author of the Report for any further information):

- 2017/18 Scorecard Monitoring Report - Quarter 3 (as presented to, and accepted by, the Executive Committee in March 2018).

SCORECARD MONITORING REPORT – QUARTER 4 (2017/18)

1. INTRODUCTION

- 1.1 This is the final quarter scorecard for the financial year ending 31st March, 2018. It portrays the achievements of the Council in its business as usual activities with specific pointers noted towards other transformational activities which have been completed during this time period.
- 1.2 This scorecard report and scorecard (Appendix A) will be considered further by the Corporate Scrutiny Committee and the Executive during June, 2018.

2. CONSIDERATIONS

- 2.1 It is important to note in line with 1.1 above that this year's scorecard includes –
- 2.1.1.1 The new PAM (Public Accountability Measures) national performance indicators that are collected on a quarterly basis in the Performance Management Section;
 - 2.1.1.2 The inclusion of a Service breakdown for some of the Financial Management indicators as an attachment to this report (Appendix D);
 - 2.1.1.3 The People Management section which demonstrates the breakdown for Primary and Secondary schools' Sickness data as recommended in the WAO report on sickness management; and
 - 2.1.1.4 The Customer Service section provides assurances re: complaints within timescale and these are now split in two, Corporate Complaints and Social Services Complaints.

2.2 PERFORMANCE MANAGEMENT

- 2.2.1 The Performance Management section of the scorecard shows performance against indicators outlined and prioritised by the Senior Leadership Team, Executive and Shadow Executive.
- 2.2.2 At the end of another challenging year for the public sector, it is encouraging to note that the majority of indicators performed well against their targets and that these achievements should be celebrated in the drafting of the Annual Performance Report which will be scrutinised during the autumn. In the light of a continuous improvement mind set embedded within Council services however, it is deemed necessary to provide some narrative about the 8 indicators which have underperformed as Amber or Red against their annual targets for the year.
- 2.2.3 One indicator within Adult Services which was RED for the year against its target was –
- (i) 04) – PM19 - The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over was RED on the scorecard with a performance of 6.58 compared to a target of 1.5. This performance is a decline on Q3 figures of 4.61, however it is a similar performance to that of 2016/17 which was 6.05.

The mitigation measures stated at the end of Q3 included the following which were expected have a positive impact on the performance of this indicator:

- work towards a new Domiciliary Care contract to be in place in the next 6 months.
- work to move clients from hospital to spaces available in Garreglwyd at the earliest opportunity.

Work has been ongoing with regards to the revised commissioning of our Home Care Provision but whilst this was not completed within 2017/18, we are in a position to complete this process in Quarter 1 of 2018/19. Improvements to the performance of this indicator therefore should be seen during the forthcoming year

Mitigation – to clarify therefore, the following mitigation actions will assist us to improve on this performance during 2018/19:

- A new and revised Home Care Contract to be awarded to providers by the end of Quarter 1 18/19 with the transfer of the contract expected to be completed during Quarter 2 18/19. As a result, improvements should be tracked as 2018/19 progresses.
- Increase the capacity of Garreglwyd to take individuals with severe dementia problems and to release individuals from hospitals in a timely manner.

2.2.4 Five indicators within Children & Families Service have not met the original targets identified on the scorecard. However, 4 of these 5 have shown an improvement during the latter half of the financial year following the restructuring of the service and improvements in policies and processes –

- (i) 07) SCC/025: The % of statutory visits to looked after children due in the year that took place in accordance with regulations is RED on the Scorecard with an achievement of 63.32% compared to a target of 85%. This indicator will be monitored within the service during the forthcoming year.

Similarly as explained in quarter 3 report there was a cohort of children that were seen but outside of statutory timescales. For example in February 90% of children were seen but some were seen late.

The detail is as follows -

- 74% within Timescale,
- 13% out of timescale (late but completed within 14 days)
- Late 3% (more than 14 days late),
- 10% which were due but not completed

The performance for the year has been affected by the Q1 & 2 performance which happened prior to the restructuring of the Service. We are currently improving the way the service is using WCCIS, introduced during 2017/18 in order to support staff to improve this PI performance into 2018/19.

- (ii) 08) PM24 - The percentage of assessments completed for children within statutory timescales (42 working days) which is RED with a performance of

68% against a target of 90% for the year. This is a significant drop from the 89% reported during 2016/17.

Considerable work has been completed in quarter 4 related to the working practices associated to the achievements against this target. Improvements have been seen to achieve a quarter 4 performance of 91% compared to the performance of 71% during quarter 3. However, the underperformance in the first three quarters impacts on the end of year cumulative figure of 68%.

Therefore, the revised working practices identified and realised during Q4 should provide a strong basis to realise improved performance against this indicator during the forthcoming year.

- (iii) 09) – PM32 - 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, which is RED with performance of 32.39% compared to a target of 15%. This is significantly higher than the 17.53% reported for 2016/17.

It was necessary to have 3 children moved from their original schools in quarter 4 due to varying reasons. This is a considerable reduction against performance of this indicator in quarter 2 where 17 children were moved. This has had a negative impact on the cumulative score but with the addition of new leadership and revised working practices which are improving performance as identified in Q4, we envisage further improvements over the forthcoming year.

- (iv) 10) PM33 – The percentage of looked after children on 31 March who have had three or more placements during the year, which is AMBER on the Scorecard with 9% compared to a target of 5%. This is a decline on the performance of 5.04% seen during 2016/17.

The 9% reported relates to 13 children.

It is important to note here that we as a Council only move children from placement when absolutely required due to the complex needs of some children. For some of these children and young people, some may need to be moved to a bridging placement whilst identifying a suitable placement to suit their needs. This is accomplished as often as possible in a planned way in consultation with the child and family.

This need was evidenced during 2017/18 and the placement move was as a result deemed essential.

- (v) 11) PM28 - The average length of time for all children who were on the CPR during the year, and who were de-registered during the year (days), which is RED with a performance of 326.5 Days against a target of 250 Days. This is an improvement on the Q3 figure of 375.5 days.

This PI refers to children who have been deregistered only and it does not refer to the total number of children on the register. Therefore caution must be exercised when analysing the data.

This year and in particular this quarter has seen the Council undertaking some considerable work with service partners which has led to a significant reduction of children who are deemed necessary to be placed on the Child Protection Register.

We have seen a period where some children who had been on the register for 4 years were deregistered. This is to be welcomed in that their circumstances are deemed to have improved enough so that their names have now been removed.

This meant however, that those children de-registered during that time took with them approximately 1200 days each against this indicator and as a result, skews the figure for the year. Improvements to this figure on a quarterly basis sees a decrease in the number of days from 376 to 326.

Mitigation for all 5 of the above PIs - to improve the issues into 2018/19, the Council will continue with the measures identified at end of Q3 and –

- Children and Families Service to continue to prioritise the improvements noted with particular emphasis placed on improving the timely assessments undertaken within regulations (PM24 / SCC/025).

2.2.5 There were two indicators from the Learning Service which did not achieve their targets for the year. Both indicators have previously been discussed in the Q3 Scorecard report and a specific narrative was provided against each indicator. The mitigation measures noted in the Q3 report will continue to improve performance over the forthcoming year and those measures are noted below -

- Monitor underperforming schools performance in the School Progress Panel and the BAS (County Quality Board) fortnightly
- Continue work on reducing the gap between forecasts and actual performance
- Continue to seek better consistency across the 5 schools in sharing best practice, harmonizing and ensuring accurate assessments, and use of assessments to plan appropriate intervention / teaching.
- Continue to provide support to teachers in order to improve Teacher Assessments in the Foundation Phase
- Continue to improve target setting processes

2.2.6 The remaining indicators are all ragged as GREEN or YELLOW within the performance management section which is encouraging to note. For comparative purposes and **based on 16/17 quartile results**, our end of year performance would achieve an improved change in quartile for 4 of our indicators (only 7 indicators can currently be compared nationally) –

The 4 of which would improve on their 16/17 quartile result are noted as follows,

- a) PAM/015 – Average number of calendar days taken to deliver a Disabled Facilities Grant (DFG) which was improved to 177 Days during the year.

This performance would see the indicator placed in the top quartile during 2016/17.

- b) WMT/009b – the % of waste collected by LA's and prepared for reuse and / or recycled which improved once again this year to 72.2%. This performance would have seen the indicator placed 1st in Wales and in the top quartile during 2016/17.
- c) WMT/004b – the % of municipal waste sent to landfill which once again improved this year to 0.5%. This performance would have seen the indicator in the top quartile during 2016/17.
- d) LCS/002b – The number of visits to LA sport and leisure centres during the year where the visitor will be participating in physical activity which improved to 508k visits from 464k visits in 2016/17. This performance would have seen the indicator improve and being in the upper median quartile for 2016/17.

2.2.7 The Social Services indicators (01-11) PI results for 2016/17 were released late by the Welsh Government during Q3. Because of the inconsistencies of the statistics provided by Authorities across Wales, this release has now been released as experimental statistics and not for comparator purpose. Therefore our Social Services data will not be able to be compared at a national level for the time being.

2.2.8 We can however state that all of the 5 indicators measured from Children Services have declined year on year, whilst Adult Services improved performance year on year with 4 out of the 6 indicators measured.

2.2.9 Year on Year trends for all comparable indicators show that 55% have either improved or maintained performance whilst the other 45% of indicators have declined year on year.

2.2.10 Whilst this is a mixed story overall, we will not officially know how we have performed in comparison with others until the results for 17/18 are published by Data Cymru in September. The overall picture will be discussed in the Annual Performance Report (as noted in 2.3.2), to be considered by the Corporate Scrutiny Committee and The Executive prior to adoption by the Council in the autumn.

2.2.11 *In order to progress and improve our standing as an achieving council, the SLT recommends –*

2.2.11.1 *Underperformance is recognised and managed with mitigation measures completed to aide improvement during 2018/19.*

2.2.11.2 *Children & Families Service to continue to prioritise the improvements noted with particular emphasis placed on improving the timely assessments undertaken within regulations (PM24 / SCC/025).*

2.2.11.3 *To hold a workshop with the SLT, Executive and Shadow Executive during Q2 to confirm relevant indicators for inclusion on the 2018/19 scorecard.*

2.2.11.4 *To revise the 18/19 targets to ensure they are challenging yet achievable and where targets are not met in the year that a year on year improvement is the minimum expectation.*

2.2.12 Appendix B shows the whole programme of work which the two Corporate Transformation Programme Boards are overseeing. Whilst some of the programmes / projects are ragged as RED it is important to state that the issues highlighted are being managed and tracked accordingly via the Boards.

2.2.13 2017/18 has seen significant achievements for the Council with regards to its transformation programme. For example (non-exhaustive list) we have –

2.2.13.1 Completed and opened 2 new primary schools in Ysgol Cybi / Ysgol Rhyd y Llan

2.2.13.2 Commenced the building of the new Ysgol Santes Dwynwen in Newborough and completed the updating of Ysgol Parc y Bont, Llanddaniel

2.2.13.3 Completed the transformation of our Youth Service and realised financial savings as a result

2.2.13.4 Achieved national success with our Smarter Working programme and gained UK recognition for the project

2.2.13.5 Progressed the new build of our first extra care provision - Hafan Cefni to a point where it is nearing completion

2.2.13.6 Embedded Cyswllt Môn as our front of house provision

2.3 PEOPLE MANAGEMENT

2.3.1 With regard to People Management, it is noted that the performance of the Council's sickness rates (*indicator 3 on scorecard under people management*) at the end of 2017/18 has narrowly missed the corporate target of 9.75 days sick per FTE at **9.96** Days Sick per FTE. This performance is ragged as **YELLOW** on the scorecard and is a result of a peak in our sickness rate during Q4, which was also seen nationally.

Q4 performed at 3.08 Days sickness per FTE. This was a 0.51 day decline on the 2016/17 Q4 performance which if achieved would have resulted in a 2017/18 performance of 9.45 days sickness per FTE.

Table 1 demonstrates the performance over the last 3 years and emphasises the peak witnessed during Q4 of 2017/18.

Sickness absence - average working days/shifts lost

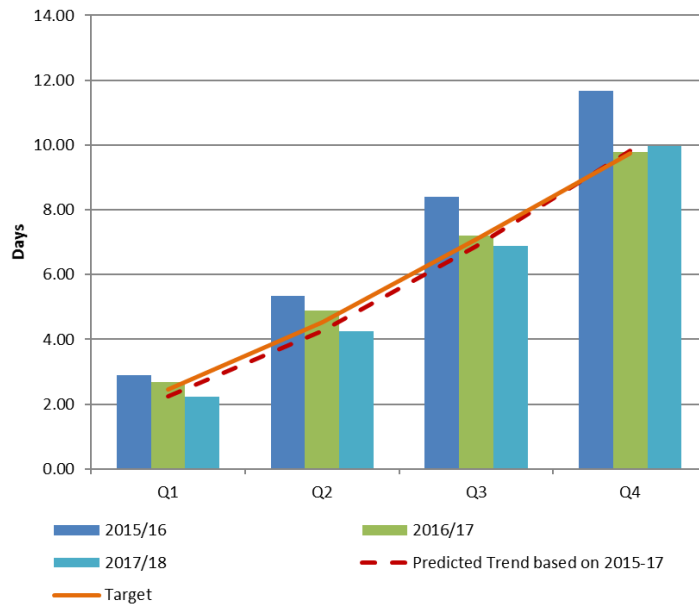


Table 1

- 2.3.2** The higher than normal sickness rates during Q4 impacted on 6 of the 9 Council Services which effectively meant that the Corporate Target of 9.75 Days sick per FTE was not achieved.
- 2.3.3** Keeping in mind our performance in Q's 1,2 & 3 of 2017/18 were ahead of target and the best we have seen over the past 3 years, the peak attributed to Q4 impacted on our end of year performance. As a result, it is envisaged that our overall end of year performance should still see our national ranking continue in the Upper Median Quartile when compared to the 2016/17 results. This is encouraging and shows the efforts made to manage sickness rates within the Council is impacting successfully on our performance.
- 2.3.4** In order to improve performance of our sickness rates further during 2018/19, service targets have been identified for the forthcoming year based on the 2017/18 trends.
- 2.3.5** The Council continues to embed this working practice across its services and by the end of 2017/18, 2558 of the Return to Work (RTW) interviews were held within timescale (73%) and is AMBER on the Scorecard for the year (Table 4). This is a decline on the performance of 78% seen during 2016/17. This decline can be attributed to the poor Q1 performance which has had an impact on the cumulative annual performance. The total RTW interviews held (within and out of timescale) was also low at 85% (2982 RTW interviews) compared to a target of 95%.

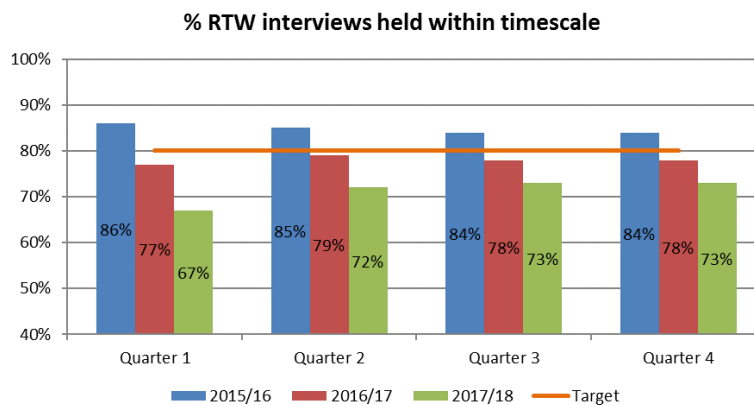


Table 4

2.3.6 However, it is proposed that the correlation between RTW and sickness rates cannot be guaranteed. Table 4 above demonstrates that our performance against this indicator is declining when our sickness rates (all be it bar Q4 during 2017/18) are improving, therefore perhaps there is a question of whether this should continue as an indicator on our scorecard into the future.

2.3.7 The ARM figures for Q4 at 69% (88 of the 128 ARMs due) have declined on the 83% seen in Q3 and is now RED on the Scorecard (point to note - these figures do not include Schools).

2.3.8 The SLT therefore recommends –

2.3.8.1 Sickness data is continually used to prioritise and target resource to undertake service sickness challenge panels during 2018/19, which continues to be instrumental in the management of sickness and that a corporate target of 9.75 days sickness per FTE for 2018/19 is adopted once again.

2.4 CUSTOMER SERVICE

2.4.1 During the year, users used AppMôn technology to submit 2k reports (including fly tipping, faulty street lighting, compliments or complaints, broken pavements, sports club database forms and ordering recycling bins). 81% of these reports have come through the website.

2.4.2 The remaining indicators within the Digital Services Section focus on the website and on our social media presence. We had an increase of 80k unique visits for the year compared last year (621k for 17/18 and 541k for 16/17). Our social media presence increased during the year by 5k to have a total of 26k social media accounts following us on Facebook (12k followers) and Twitter (14k followers). The Council now have a presence on Instagram where 670 people currently follow the page up from the 332 followers in Q3. These modes of communication are continuing to increase and the flow of information distributed and received via these channels it is envisaged will only increase.

2.4.3 Regarding Customer Complaints Management, by the end of the year 71 Complaints were received (compared to 71 in 16/17) and 9 Stage 2 complaints in

Social Services (compared to 5 in 15/16). All of the complaints have received a response and of these complaints 18 were upheld in full (Resources [7], Highways, Waste and Property [6], Housing [2], Regulation & Economic Development [1], Transformation [1] and Social Services [1]), 5 were partially upheld (Housing [3], Resources [1] and Regulation & Economic Development / Highways [1]) whilst the remaining 48 were not upheld. These indicators are reported to and tracked by the Customer Service Excellence Board.

2.4.4 There were 9 Stage 2 Complaints in Social Services (Children and Families Service [5] and Adult Services [4]) and 51 Stage 1 Complaints (Childrens Services [38], Adult Services [13]) received during the year.

2.4.4.1 Of the 51 Stage 1 complaints for the year, a total of 49%, which is a slight improvement to the 47% reported in the Q3 report, have been responded to in writing within timescale. There were 26 late written responses in total during 2017/18 with 17 in Children and Families Service and 9 in Adult Services.

2.4.4.2 Performance was better for Stage 1 discussions, with a discussion being offered to the complainant within timescale for 31 of the 38 complaints to Children and Family Service, and 8 of the 13 complaints to Adult Services during 2017/18.

2.4.4.3 The complaints to Adult Services included 2 complaints that were joint complaints with the Health Board, and these were discussed in the Q3 report where two of the discussions had yet to be held and at the end of Q3 and were overdue. These complaints have now been concluded and 1 of the 2 complaints were provided with a written response within 5 days of the discussion taking place.

2.4.4.4 Underperformance within Children and Family Service is in relation to sending written responses within timescale (45%, or 17 of the 38 received, were late). This emphasises that the Q1&2 performance impacted on the annual result and an improvement was seen with 8 out of the 13 complaints received in the second half of the year provided with a written response within timescale. It should also be noted that the volume of complaints dropped in the second half of the year with 25 complaints in the first half of the year which decreased to 13 in the second half.

2.4.4.5 Underperformance in Adult Services is in relation to failure to provide a written response to 7 of the 8 complainants between October and March within timescale. The service responded to 31% of complaints within timescale (4 of the 13 received).

2.4.4.6 For 39 of the 51 (77%) complaints received by Adult and Children and Families Services had held a discussion with the complainant was offered within timescales.

2.4.5 The % of FOI requests responded to within timescale performed at 78% at the end of 2017/18 compared to 77% at the end of 2016/17. Although not hitting the Corporate Target of 80% this is encouraging as the Council has dealt with 7527 questions during 2017/18 up from 5700 questions during 2016/17.

2.4.6 In total there was 919 FOI requests with 204 late responses in 2017/18. The majority of the late responses came from Learning which equated to 32% of the late responses (43% of the 150 received by the service), Social Services with 19% (39% of the 101 received by the service), Regulation & Economic with 16% (21% of the 157 received by the service), Transformation with 9% (26% of the 70

received by the service) and Resources with 8% (13% of the 129 received by the service). Our response to FOIs is important and the SLT and Heads of Service continue to monitor the performance of FOIs closely.

2.4.7 The SLT therefore recommends –

2.4.7.1 Social Services (Adults and Children and Families) are encouraged to improve the way by which complaints are dealt with and that they ensure that written response to Stage 1 complaints are completed within timescales. This should be operationalised through changing current working practices.

2.5 FINANCIAL MANAGEMENT

2.5.1 There is an overspend of £1.704m for the year-ending 31 March 2018. This is in line with the expectation and reports made throughout the year.

2.5.2 £2.351m of this is on service budgets, which are made up of a number of over and underspends. The Services which experienced significant budgetary pressures during 17/18 were similar to those of 2016/17 (Children & Families Service and Learning). The Heads of Service are aware of the issues and are working to reduce the level of overspending which is within their control. Corporate Finance was underspent by £0.655m in part due to a change in the method of calculation for Minimum Revenue Provision (MRP). The Council overspend is 1.35% of the net budget. It is of concern that it was not possible for the Council's revenue expenditure to remain within budget for 2017/18 but the Council's success in remaining within budget and building up general reserves in previous years has allowed the Council to fund the overspend whilst still maintaining an acceptable level of General Balances.

2.5.3 However, if services cannot address some of the financial difficulties they face during 2018/19 there is a significant risk that a further overspend will occur in 2018/19 which will erode the Council's general balances to an unacceptable level which will have to be addressed in future budgets in order that reserves are increased back to the required level.

2.5.4 This provisional out-turn is subject to change as new information becomes available between now and when the final Statement of Accounts is reported on in September.

2.5.5 Further information on financial management can be seen in the 'Revenue Budget Monitoring Report for Q4' which has been discussed in The Executive meeting on the 21st May.

3. RECOMMENDATIONS

3.1 The Committee is requested to scrutinise the scorecard and note the areas which the Senior Leadership Team are managing to secure improvements into the future. These can be summarised as follows –

3.1.1 *Underperformance is recognised and managed with mitigation measures completed to aide improvement -*

- 3.1.1.1** Children and Families Service to continue to prioritise the improvements noted with particular emphasis placed on improving the timely assessments undertaken within regulations (PM24 / SCC/025).
- 3.1.1.2** Adults Services will improve the issues during the forthcoming year by –
 - 3.1.1.2.1** Awarding a new and revised Home Care Contract to providers by the end of Quarter 1 18/19 with the transfer of the contract expected to be completed during Quarter 2 18/19. As a result, improvements should be tracked as 2018/19 progresses.
 - 3.1.1.2.2** Increasing the capacity of Garreglwyd to take individuals with severe dementia problems and to release individuals from hospitals in a timely manner.
- 3.1.1.3** The Learning Service will improve by:
 - 3.1.1.3.1** monitoring underperforming schools performance in the School Progress Panel and the BAS (County Quality Board) fortnightly
 - 3.1.1.3.2** continue to work on reducing the gap between forecasts and actual performance
 - 3.1.1.3.3** Continue to seek better consistency across the 5 secondary schools in sharing best practice, harmonizing and ensuring accurate assessments, and use of assessments to plan appropriate intervention / teaching.
 - 3.1.1.3.4** Continue to provide support to teachers in order to improve Teacher Assessments in the Foundation Phase
 - 3.1.1.3.5** Continue to improve target setting processes
- 3.1.2** Sickness data is continually used to prioritise and target resource to undertake service sickness challenge panels during 2018/19, which continues to be instrumental in the management of sickness and that a corporate target of 9.75 days sickness per FTE for 2018/19 is adopted once again.
- 3.1.3** *Social Services (Adults and Children and Families) are encouraged to improve the way by which complaints are dealt with and that they ensure that written response to Stage 1 complaints are completed within timescales. This should be operationalised through changing current working practices.*
- 3.2** The Committee is asked to recommend the mitigation measures outlined above.

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q4 2017/18

Gofal Cwsmer / Customer Service	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Canlyniad 15/16 Result
Siarter Gofal Cwsmer / Customer Service Charter						
01) No of Complaints received (excluding Social Services)	Gwyrdd / Green		71	71	71	59
02) No of Stage 2 Complaints received for Social Services	-		9	-	5	5
03) Total number of complaints upheld / partially upheld	-		28	-	25	21
04a) Total % of written responses to complaints within 20 days (Corporate)	Gwyrdd / Green		92%	80%	93%	64%
05) Number of concerns (excluding Social Services)	-		112	-	191	261
06) Number of Stage 1 Complaints for Social Services	-		51	-	54	53
07) Number of Compliments	-		753	-	566	712
08) % of FOI requests responded to within timescale	Melyn / Yellow		78%	80%	77%	67%
09) Number of FOI requests received	-		919	-	1037	854
10) % of telephone calls not answered	Gwyrdd / Green		12%	15%	13%	12%
11) % of written communication replied to within 15 working days of receipt (Mystery Shop)	-		N/A	-	78%	67%
12) % of written responses in the customers language of choice (Mystery Shop)	-		N/A	-	100%	100%
13) % of telephone calls answered bilingually (Mystery Shop)	-		N/A	-	83%	77%
14) % of staff that took responsibility for the customer query (Mystery Shop)	-		N/A	-	87%	90%
Newid Cyfrwng Digidol / Digital Service Shift						
15) No of AppMôn users (annual)	-		-	-	-	-
16) No of reports received by AppMôn	-		2k	-	1k	-
17) No of web and telephone payments	-		16k	-	10k	-
18) No of 'followers' of IOACC Social Media	Gwyrdd / Green		25k	21k	21k	-
19) No of visitors to the Council Website	-		621k	-	541k	-

Rheoli Pobl / People Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Canlyniad 15/16 Result
01) Number of staff authority wide, including teachers and school based staff (FTE)	-		2252	-	2258	2310
02) Number of staff authority wide, excluding teachers and school based staff(FTE)	-		1244	-	1250	1303
03a) Sickness absence - average working days/shifts lost	Melyn / Yellow		9.96	9.75	9.78	11.68
03b) Short Term sickness - average working days/shifts lost per FTE	-		4.63	-	4.72	11.68
03c) Long Term sickness - average working days/shifts lost per FTE	-		5.32	-	5.06	6.79
04a) Primary Schools - Sickness absence - average working days/shifts lost	Ambr / Amber		10.39	9.5	-	-
04b) Primary Schools - Short Term sickness - average working days/shifts lost per FTE	-		4.85	-	-	-
04c) Primary Schools - Long Term sickness - average working days/shifts lost per FTE	-		5.55	-	-	-
05a) Secondary Schools - Sickness absence - average working days/shifts lost	Melyn / Yellow		9.67	9.5	-	-
05b) Secondary Schools - Short Term sickness - average working days/shifts lost per FTE	-		5.32	-	-	-
05c) Secondary Schools - Long Term sickness - average working days/shifts lost per FTE	-		4.35	-	-	-
06) % of RTW interview held within timescale	Ambr / Amber		73%	80%	78%	84%
07) % of RTW interview held	Coch / Red		85%	95%	91%	-
08) % of Attendance Review Meetings held	Coch / Red		69%	80%	57%	-
09) Local Authority employees leaving (%) (Turnover) (Annual)	-		11%	-	10%	-
10) % of PDR's completed within timeframe (Q4)	Gwyrdd / Green		90.50%	80%	80%	-
11) % of staff with DBS Certificate (if required within their role)	-		-	-	91.40%	98%
12) No. of Agency Staff	-		12	-	15	26

Rheolaeth Ariannol / Financial Management	CAG / RAG	Tuedd / Trend	Cyllideb / Budget	Canlyniad / Actual	Amrywiad / Variance (%)	Rhagolygon o'r Gwariant / Forecasted Actual	Amrywiad a Ragwelir / Forecasted Variance (%)
01) Budget v Actuals	Coch / Red		£126,157,000	£127,860,940	1.35%	-	-
02) Forecasted end of year outturn (Revenue)	Coch / Red		£126,157,000	£127,860,940	1.35%	-	-
03) Forecasted end of year outturn (Capital)	-		£39,759,000	£20,064,000	-49.54%	-	-
04) Achievement against efficiencies	Ambr / Amber		£1,954,000	£1,555,000	-20.40%	-	-
05) Income v Targets (excluding grants)	Gwyrdd / Green		£25,556,650	£29,050,430	13.67%	-	-
06) Amount borrowed	-		£12,377,000	£6,445,000	-47.93%	-	-
07) Cost of borrowing	-		£4,257,000	£4,004,650	-5.93%	-	-
08) % invoices paid within 30 days	-		-	82.28%	-	-	-
09) % of Council Tax collected (for last 3 years)	Gwyrdd / Green		-	99.00%	-	-	-
10) % of Business Rates collected (for last 3 years)	Gwyrdd / Green		-	98.80%	-	-	-
11) % of Sundry Debtors collected (for last 3 years)	Melyn/Yellow		-	97.40%	-	-	-
12) % Housing Rent collected (for the last 3 years)	Melyn/Yellow		-	100.50%	-	-	-
13) % Housing Rent collected excl benefit payments (for the last 3 years)	-		-	101.15%	-	-	-

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Tuedd Bl i Fl Yr on Yr Trend	Chwarterf 17/18** Quartile
01) SCA/002b: The rate of older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March	Gwyrdd / Green	↑	17.44	22	20.51	↑	-
02) LI/18b The percentage of carers of adults who requested an assessment or review that had an assessment or review in their own right during the year	Gwyrdd / Green	↑	96	93	94.4	↑	-
03) PM18 - The percentage of adult protection enquiries completed within statutory timescales	Gwyrdd / Green	↑	93.25	90	90.48	↑	-
04) PM19 - The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	Coch / Red	↓	6.58	1.5	6.05	↓	-
05) PM20a - The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	Gwyrdd / Green	→	59.26	40	62.6	↓	-
06) PM20b - The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	Gwyrdd / Green	↓	62.65	62	33.3	↑	-
07) SCC/025: The % of statutory visits to looked after children due in the year that took place in accordance with regulations	Coch / Red	↑	63.32	85	79.35	↓	-
08) PM24 - The percentage of assessments completed for children within statutory timescales (42 working days)	Coch / Red	↓	67.57	90	89.17	↓	-
09) PM32 - 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	Coch / Red	↓	32.39	15	17.53	↓	-
10) PM33 - The percentage of looked after children on 31 March who have had three or more placements during the year	Ambr / Amber	↓	9	5	5.04	↓	-
11) PM28 - The average length of time for all children who were on the CPR during the year, and who were de-registered during the year (days)	Coch / Red	→	326.5	250	266	↓	-
12) Attendance - Primary (%)	Melyn / Yellow	↓	94.6	94.8	94.8	n/a	-
13) Attendance - Secondary (%)	Ambr / Amber	-	93.3	94.6	94.6	n/a	-
14) No. of days lost to temp exclusion - Primary	-	-	49	-	-	n/a	-
15) No. of days lost to temp exclusion - Secondary	-	-	73	-	-	n/a	-
16) KS4 - % 15 year olds achieving L2+ (Q3)	Coch / Red	↓	50.5	63.4*	58.8*	↓	Canolrif Isaf / Lower Median
17) KS3 - % pupils achieving CSI (Q3)	Melyn / Yellow	↑	88.9	90.1	87.6	↑	Canrif Uchaf / Upper Median
18) KS2 - % pupils achieving CSI (Q3)	Gwyrdd / Green	-	91.4	91	89.4	-	Uchaf / Upper
19) FPh - % pupils achieving CSI/FPI (Q3)	Ambr / Amber	-	85.8	88.4	84.7	-	Isaf / Lower
20) LCL/001b: The no. of visits to public libraries during the year	Gwyrdd / Green	-	286k	285k	288k	-	Uchaf / Upper
21) LCL/004: The no. of library materials issued, during the year	Gwyrdd / Green	-	259k	260k	272k	-	-
22) The number of applicants with dependent children who the Council secured non-self contained bed and breakfast accommodation	Gwyrdd / Green	→	0	0	0	→	-
23) % tenants satisfied with responsive repairs	Melyn / Yellow	-	89%	92	90.2	-	-
24) Productivity of workforce- % time which is classified as productive	Melyn / Yellow	-	79%	80	80.1	-	-
25) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Gwyrdd / Green	↓	22.4	23	28	↑	-
26) PAM/013 - Number of empty private properties brought back into use	Gwyrdd / Green	-	75	70	-	n/a	-
27) PAM/014 - Number of new homes created as a result of bringing empty properties back into use	-	-	4	-	-	n/a	-
28) PAM/015 - Average number of calendar days taken to deliver a Disabled Facilities Grant (DFG)	Gwyrdd / Green	↑	177	200	238.8	↑	Uchaf / Upper
29) STS/005b: The percentage of highways inspected of a high or acceptable standard of cleanliness	-	-	-	94	93.4	-	-
30) STS/006: The percentage of reported fly tipping incidents cleared within 5 working days	Gwyrdd / Green	↓	98.29	100	97.31	↑	Uchaf / Upper
31) WMT/009b: The percentage of municipal waste collected by local authorities and prepared for reuse and/or recycled	Gwyrdd / Green	↓	72.21	67	65.79	↑	Uchaf / Upper
32) WMT/004b: The percentage of municipal waste sent to landfill	Gwyrdd / Green	→	0.5	5	6.6	↑	Uchaf / Upper
33) THS/011c: The % of non-principal (C) roads that are in an overall poor condition (annual)	Gwyrdd / Green	↑	8.9	10	10.1	↑	-
34) No. of attendances (young people) at sports development / outreach activity programmes	Gwyrdd / Green	↑	43.5k	30k	113k	↓	-
35) LCS/002b: The number of visits to local authority sport and leisure centres during the year where the visitor will be participating in physical activity	Gwyrdd / Green	↑	508k	474k	464k	↑	Canolrif Uchaf / Upper Median
36) PAM/023 - Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	→	98	80	98	→	Uchaf / Upper

* based on the old curriculum, ** when compared with 16/17 results

Attachment B

This document is contained within the quarterly scorecard monitoring report which is presented to the Corporate Scrutiny Committee and The Executive every quarter to provide a brief high-level update as to the status of work which is applicable and reports to both the -

- ***Partnerships, Communities & Service Improvement Transformation Programme Board and the;***
- ***Governance & Business Process Transformation Programme Board***

The key ragging for the said document is as follows –

RAG:

Completed

Project has been completed

On Track

Project is developing as expected and is on track

Behind Schedule

The Project needs key decisions / support

Late

The project is late and is falling behind expected timelines

White

The Project has not started to date

Partnerships, Communities & Service Improvement Transformation Programme Board		
Programme/Project	Related Projects	RAYG and brief Update
School Modernisation	Bro Rhosyr a Bro Aberffraw	The timeline for building Ysgol Santes Dwynwen at Newborough is March 2019. Preparatory work has started during Easter at Ysgol Brynsiencyn ready for adaptations in the Summer
	Llangefni Area	The executive decided to approve Option 2 namely to build a new school for Bodffordd and Corn Hir schools and to continue to maintain educational provision in Llangristiolus either by maintaining Ysgol Henblas in its current form or as a multi-site school [i.e merge Ysgol Henblas with the new school and create one school on two sites]. This decision to be linked to assurance in a year's time [i.e. by the end of the 2018/19 school year] that standards at Ysgol Henblas are improving, that the current pace of improvement increases and that prospects with regard to pupil numbers remain constant or increase. A Statutory Consultation for Ysgol Y Graig and Ysgol Talwrn is now open.
	Seiriol + South East	The formal consultation process is currently being undertaken
Adult Social Care -	Llangefni Extra Care	Good progress is being made with the construction work and the builders are confident that they adhere to the timetable and the work be completed by June 2018.
	Amlwch Extra Care	An assessment is being undertaken by the Housing Service to look at housing needs more widely within the area that includes considering Extra Care
	South of the Island Extra Care	The Executive agreed that the Beaumaris School site is used to develop an Extra Care Housing scheme within the Seiriol area. Dependent on the results of the consultation regarding the future of Beaumaris School, the development should be built either behind the school as part of an integrated development with the school remaining open, or should be built utilising parts of the school building should a decision be made to close the school.
	Housing with Internal Support	The new aim of the project is to retain the service internally within the Council but to re-model in order to achieve financial savings. Examples of how we intend to re-model the service include:

		<ul style="list-style-type: none"> • restructure of the staffing cohort • review of care over 24 hours • confirmation that the number of hours support provided, supported independence • more use of telecare equipment.
	Housing with External Support	<p>The aim of the project is to:</p> <ul style="list-style-type: none"> • re-model and redesign the services in close consultation with the requirements of the Supporting People Programme. • Ensure that the service continues to be financially sustainable in the long term. • Make financial savings of at least £225k
	Re-tendering of Home Care Services	The tender is now closed and the evaluation has started. New contracts to be in place by end Q1 2018/19
	In house day Services	Proposed Project considered by the Executive during in April.
Transformation of Libraries, Youth Services, Museums, Culture and Market Hall	Transformation of Museums and Culture	<p>New timetable agreed by the Project Board in Q4.</p> <p>Melin Llynonn and Roundhouses – Agreement to advertise the business in a specialist magazine in June 2018 to try and attract a commercial bid for the site.</p> <p>Beaumaris Court and Goal – Work in partnership with Beaumaris Town Council to transfer the assets by October 2018</p>
	Remodelling of Library Service	<p>The process for restructuring the workforce to be in place by Q2</p> <p>Work is continuing with transferring the community libraries to Beaumaris and Rhosneigr by Q2</p> <p>Work has started with the closing of Cemaes, Moelfre and Newborough Libraries</p>
	Review of Youth Services	New structure in place and operational during Q4. Project Closure report accepted by the board on the 26 th March 2018.
	Market Hall	Project is behind schedule and will now complete in December 2018. Financial matters relating to ERDF funding has delayed the project.
Leisure		
Energy Island		*A number of Members' Briefings have been held with regards to Wylfa Newydd and a number in the

		process of being organised with regards to National Grid
Gypsy Traveller sites		The Gypsy Traveller board are to review the timeline for the project in Q1 18/19. Planning application for Star site have been submitted
Prevention Strategy	Early Intervention	
	Implementing Tackling Poverty Strategy	
Increase levels of recycling		Please see Scorecard KPIs 31 + 32 for Q4 achievement
Flood alleviation work		The recent major flood event of the 22/11/2017 has highlighted the need to persevere with such schemes, with problems at Beaumaris, Menai Bridge, Llanfairpwll, Llangefni, Dwyran and numerous other places. FLWMA Reports are being prepared for all areas where properties have been affected. It is hoped that funding will be received from WG to resolve some of these issues.

Governance & Business Process Transformation Programme Board		
Programme/Project	Related Projects	RAYG and brief Update
Resource Plan – Northgate		Web Recruitment - All the configuration in TEST was deleted/overridden due to essential upgrade. Pilot has been suspended until further notice because of this. Mileage and Expenses - piloting in Q1, this will be a phased roll out Phase 1 completion date has been pushed back to December 2018 as a result.
	Cyswllt Môn Expansion Programme / Face to Face Contact	Two pilot schemes have been agreed. Delays in library service re-structure has resulted in delays starting the pilots. The Market Hall opening delay will allow for a more rounded pilot to take place in Amlwch later in the summer.
Customer Service Excellence	Customer contact Centre	Discussions underway to merge existing call centres – has been put on hold for 18 months
	Telephone Contact and Channel Shift	Each Contact Centre has gone live successfully without disruption to the public. There is an evidenced improvement in the number of missed calls in those services who have gone live (up to 80% reduction in dropped calls. Only one contact

		centre is outstanding (Benefits), which is currently being tested by the users.
	CRM	The Waste and Recycling Module has been implemented. Delays in getting the AD link and Telephony integration mean that the project is Red, plans are in place to remedy these delays.
	Improving Business Processes	Group have decided to concentrate efforts on the VOIDS element of the housing service. The VOIDS Service Manager has scoped current process for scrutiny by group at forthcoming meeting which has been delayed twice and now due to take place in Q1 18/19
	Compliance and Satisfaction	
Energy Efficiency		<p>Bid for Invest to Save Capital fund successful with allocation of £250,000 to go towards Refit programme and other in house projects. Refit Cymru Client Support Agreement and Local Partnerships Access Agreement submitted to Legal Department for initial approval.</p> <p>Draft list of initial projects created and to be agreed by Land and assets Group in April meeting. Presentation to be presented to Board in April / May 2018</p>
Implementation of ICT Strategy		The Digital IT Strategy – ‘Digital Island’ has been approved and covers 2016-2020. Strategy being revised following new Council Plan.
Scrutiny Improvement Plan		On track
Communication Strategy		Revised Communication Strategy delayed until December 2018

Projected Revenue Outturn for the Financial Year Ending 31 March 2018 – Quarter 4

Service/Function	Annual Budget 2017/18	Provisional Outturn	Provisional Total Outturn Variance	Provisional Uncontrollable Variance (Exceptions)	Propvisional Controllable Variance (Non-Exceptions)
	£	£	£,000	£,000	£,000
Delegated Schools Budget	44,064	44,064	0	0	0
Central Education	2,809	3,722	913	-23	890
Culture	1,364	1,227	-137	-7	-144
Adult Services	22,541	22,687	146	68	215
Children's Services	8,293	10,075	1,782	-5	1,777
Housing	1,034	1,087	53	-45	7
Highways	6,633	6,572	-61	-39	-100
Property	1,172	1,277	105	-50	55
Waste	6,294	6,083	-211	148	-63
Economic	2,006	2,069	63	-46	17
Planning and Public Protection	2,269	2,260	-9	-9	-18

Service/Function	Annual Budget	Provisional Outturn	Provisional Total Outturn Variance	Provisional Uncontrollable Variance (Exceptions)	Propvisional Controllable Variance (Non-Exceptions)
	£	£	£,000	£,000	£,000
Transformation					
Human Resources	1,214	1,140	-74	12	-62
ICT	1,817	1,861	44	1	45
Corporate Transformation	901	744	-158	0	-158
Resources	2,933	3,096	163	-166	-3
Council Business	1,571	1,752	181	0	181
Corporate & Democratic costs	2,212	2,005	-207	1	-206
Corporate Management	737	656	-81	0	-81
Total Service Budgets	109,864	112,377	2,514	-160	2,351
Capital Financing	8,060	7,611	-449	0	-449
Corporate adjustment for depreciation	0	0	0	0	0
Discretionary Rate Relief	0	0	0	0	0
General & Other Contingencies	-106	0	106	0	106
Funding and use of Reserves	0	0	0	0	0
HRA Central Support Services Contribution	-678	-760	-82	82	0
Benefits Granted	5,682	5,372	-310	0	-310

Service/Function	Annual Budget	Provisional Outturn	Provisional Total Outturn Variance	Provisional Uncontrollable Variance (Exceptions)	Propvisional Controllable Variance (Non-Exceptions)
	£000	£000	£000	£000	£000
Total Budget 2017/18	126,157	127,933	1,775	-80	1,696
NDR	-23,002	-23,002	-0	0	-0
Council Tax	-33,505	-33,577	-72	138	66
Revenue Support Grant	-69,650	-69,650	-0	0	-0
Total Funding 2017/18	-126,157	-126,229	-72	138	66

NOTE : the figures have been rounded up to the nearest thousand.

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ISLE OF ANGLESEY COUNTY COUNCIL

Scrutiny Report Template

Committee:	Corporate Scrutiny Committee
Date:	04.06.18
Subject:	Children and Families Services Progress Report
Purpose of Report:	Report on progress in implementing the Service Improvement Plan
Scrutiny Chair:	Councillor Aled Morris Jones
Portfolio Holder(s):	Councillor Llinos Medi Huws
Head of Service:	Fôn Roberts, Head of Children and Families Services
Report Author:	Fôn Roberts
Tel:	01248 752708
Email:	fonroberts@ynysmon.gov.uk
Local Members:	Relevant to all Members

1 - Recommendation/s

The Committee is requested to

- 1.1 confirm if they are satisfied with the steps taken to progress implementation of the Service Improvement Plan and that the pace of progress

2 – Link to Council Plan / Other Corporate Priorities

There are clear links from the Service Improvement Plan within Children's Services and the Isle of Anglesey Plan 2017/2022. The objectives are:

1. Ensure that the people of Anglesey can thrive and realize their long-term potential.
2. Support vulnerable adults and families to keep them safe, healthy and as independent as possible.
3. Work in partnership to ensure that they can cope effectively with change and developments whilst protecting our natural environment.

3 – Guiding Principles for Scrutiny Members

The following set of guiding principles will assist Members to scrutinise this subject matter:

- 3.1 The customer/citizen [looking at plans and proposals from the point of view of local people]
- 3.2 Value [looking at whether plans and proposals are economic, efficient & effective. Also, looking at the wider requirements of community benefits]
- 3.3 Risk [Look at plans & proposals from the point of view of resilience and service transformation. It is about the transition from a traditional service to a transformed one, and about the robustness of the transformed service once it is in place]
- 3.4 Focus on the system (including organisational development) [Ensuring that the Council & its partners have the systems in place to ensure that they can implement transformation smoothly, efficiently and without having a negative effect on service delivery]
- 3.5 Focus on performance and quality [Scrutiny undertaking a performance monitoring or quality assurance role, on an exception basis]

3.6 Focus on Wellbeing [Looking at plans and proposals from the perspective of the Wellbeing of Future Generations requirements]

4 - Key Scrutiny Questions

1. Is the Committee satisfied with the pace of progress and improvements made to date within Children and Families Services?

5 – Background / Context

Over the period since the inspection we have been significantly involved in putting in place a series of important changes which we consider will better deliver in line with the legislation. In particular we would highlight the following:-

Restructuring the service so that it focusses its energy on the early intervention and prevention, and intensive intervention with service managers leading each of these service areas and holding the resources relevant to that service area i.e. fieldwork and service provision. It has substantially increased the level of supervisory resources, management oversight, case direction, improved care planning with small practice groups led by practice leaders, who are focused on improving the quality of professional practice. We have been particularly successful in attracting experienced social workers to take on this role. The model also puts the Information Advice and Assistance hub, namely Teulu Môn, at the centre of the Early Intervention and Prevention service. The full complement of practice leaders came into position during September and the focus at this stage is to develop their understanding of their role and to begin the process of implementing new ways of working across all our services. This will require significant cultural change and will take time and energy to bring this about across all our services.

We have developed a prevention strategy focused on deescalating need at all levels, and reducing the need for intensive involvement, we are currently consulting on its content with relevant stakeholders. We are using Families First resources to enhance our Teulu Môn and TAF responses and to ensure other Families First investment is coherent with that objective. The council has invested resources to establish an intensive intervention resilient families' team so that we are able to respond proactively to children with high level/edge of care needs. The resilient families' team is also having an impact in working with the allocated social worker to assist in returning children and young people out of care either to friends or family or closer to home. These initiatives are now all operational and starting to deliver in line with these expectations, we are in the process of increasing the resourcing to further enhance this provision.

We have been paying significant attention to the systems in place to support intensive intervention outside of the professional aspects using intelligence to ensure the right cases are being dealt with at this level, and that our processes are as effective as possible. We will over coming months be revisiting our strategic approach to looked after children to ensure that it is focused on delivering permanence, enhancing local provision and facilitating children only remaining looked after for the right period of time.

We recognise that the quality and consistency of practice has to be at the centre of what we do and have taken steps to improve the quality assurance/ improvement function. Fresh processes and guidance have been developed and additional resources have been committed to the function. This involves developing a close working relationship between the quality assurance and improvement manager and the three service managers with operational responsibility and direct and regular interaction between them will aim to ensure that there is immediately available information about how services are performing. Additionally, this will enable us to focus on identifying and implementing the improvement in practice that have been identified as necessary. All of these new structural arrangements and will be developed further over coming months.

We recognise that the steps taken are recent in their implementation, most coming to fruition since the inspection report was published in March 2017 and are dependent on the successful implementation of the practice leader role, this will take time to achieve what is expected of it and the benefits of doing so effectively will be seen in good quality of practice which is achieved across all our services.

The Head of Service will focus his attention on ensuring that the drive to improve practice remains the top priority for the service.

Since the last report the focus of the work has been:

Recruitment and Retention

The service is currently advertising for “Experience Social Workers”, however, given the national shortage of such workers the service has to be realistic in terms of its ability to recruit to these posts. Given this the service has a contingency plan, which is to recruit Newly Qualified Social Workers (NQSW) into these posts and then employ for experienced agency social workers “over capacity” for a period of 1 year. This is to support the NQSW’s throughout their 1st three year in Practice framework, which is a statutory framework.

Service Improvement Plan

The Service Improvement Plan (SIP) was created following the CIW inspection in October and November 2016. The SIP has been structured to cover the following areas:

- ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS
- ACTIONS TAKEN TO ACHIEVE IMPROVEMENT
- ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT
- EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE
- LEAD OFFICER
- START (date)
- RAG RATING

There are 21 “action to be taken and links to CIW recommendations” and they are listed in the attached SIP.

The SIP is maintained and updated by the Children and Families Service. It is monitored and scrutinised by the Children's Services Improvement Panel, the Scrutiny Committee and the Executive Committee.

The Children's Services Improvement Panel continues to meet monthly, and considers the SIP at each meeting. Whilst there is an agreed agenda, the contents and focus each month varies in relation to the "Theme" picked and also in relation to the issue which is to be explored in detail during that month.

Attendance at the meeting has been consistent and strong with the knowledge of elected members developing month on month. The SIP remains a standing item on the agenda and this allows members to question, challenge and understand the issues raised within the service. It is important to remember that this service is a statutory service and deals every day with children and families with complex and additional needs and are some of the most vulnerable families on Ynys Môn. Therefore the subject matter is not only difficult at times in terms of its complexity, but also in terms of legislation, guidance, statutory powers, the law, practice and performance.

The Children and Families Service have recently, following over 12 months of working on the SIP, RAG rated it in terms of its work (allocating a status of Red, Amber, Yellow and Green to each activity/element).

The following table provides the Services view as to the progress of the SIP:

RAG	
COCH/RED	0
AMBR/AMBER	5
MELYN/YELLOW	10
WYRDD/GREEN	6

The service progressed with all 21 areas listed on the SIP at equal place, which is unusual given the commitment and drive each area requires, however, as the above table shows, 6 areas have been developed, 10 areas are almost complete and the 5 areas in amber are ongoing pieces of work which in the main relate to Social Work practice. There are no areas which the Service have not progressed with.

The improvement pace within the Service has been significant, especially with regards to re-structure, recruitment throughout the service, training and quality assurance.

The Service is prioritising the elements rated as Amber RAG throughout 2018. The 5 areas listed below have all had considerable work done on them; however, the Service was not able to RAG these as Yellow since they will take longer to complete, and to be embedded in Social Work practice.

1. Improvement in the quality of practice.
2. Senior leaders in social services and the police will work together to ensure improvements to the, quality, consistency and timeliness of child protection enquiries.
3. Review all children who are looked after to ensure outcome based care and support plans are in place in securing permanence.
4. Develop the performance framework for Children and Families Services.
5. Establish multi-agency quality assurance systems and training arrangements to ensure that thresholds for assessment to statutory children's services are understood by staff and partners and are consistently applied.

The work continues to bring with it challenges and complexities, however, with a stable workforce and the strong commitment and drive from the Councils Senior Management Team and the Elected Members, the journey of improvement is well under way in Ynys Mon.

6 – Equality Impact Assessment [including impacts on the Welsh Language]

Not applicable

7 – Financial Implications

The increase in the number of children who are Looked After over the past four years has created an increased financial cost of Children's Services in terms of both staffing and the need to arrange placements with Foster Carers or Residential Placements.

The budget for Children's Services in 2016/17 (adjusted for transfers, grants and pay and price inflation i.e. to bring it to 2018/19 prices) was £7.625m compared to the 2018/19 budget of £8.668m. Over the three years an additional £803k of permanent funding has been added to the budget with a further £240k (2 year funding) for an early intervention team.

The Executive have also approved in May 2018 a further one off sum of £268k to fund agency staffing costs to fill existing vacancies, to support newly qualified Social Workers and to deal with "Legacy Cases" where the Authority may not have responded appropriately to historic cases. The review of these Legacy Cases may also result in additional legal costs, and a sum has been allowed for in the £268k additional funding.

In 2017/18 the Service overspent its budget by £1.78m, mainly due to an increase in the number of Looked After Children where individual placements can be a significant cost. The Service is looking to reduce the number of children reaching this stage, through the work of the Early Intervention Team and the Resilient Families Team and is looking to increase placement options on the Island in order to reduce these costs but there is still a significant risk that the Service will overspend again in 2018/19. This may require an additional increase to the permanent budget in 2019/20.

8 – Appendices:

Annex 1 – Service Improvement Plan

Annex 2 - Children Services Improvement Panel – Terms of Reference

9 - Background papers (please contact the author of the Report for any further information):

CIW recommendations in red - high priority

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE	LEAD OFFICER	START	END
1.	A confident and competent workforce with sufficient capacity to provide a consistent and effective service						
1.1	<p>Develop the Workforce Strategy to include:</p> <ul style="list-style-type: none"> Recruitment good practice Retention and support Clear induction arrangements Buddying Coaching and mentoring Shadowing Enhanced post qualification training and development opportunities First year in practice guidance (this is not needed as we are following the First Three Years in Practice Guidance produced by the Care Council for Wales). <p>Links to CIW Recommendation 5: A robust workforce strategy should urgently be developed to include short, medium and long term aims for recruitment and retention of social workers.</p>	<p>November 2017 – January 2018</p> <ul style="list-style-type: none"> There are examples of Practice Leaders coaching/mentoring newly qualified Social Workers. Enhanced post qualification training and development opportunities – these needs will be identified in Appraisals and Supervision. Two trainee Social Workers have commenced in their roles. Continued to progress work in the Workforce Action Plan. Observation of practice – the Good Practice Group have been discussing how best to implement this. Social Care Ambassadors Denu Talent – we are progressing with this, an email has been issued to the Heads of Services asking for work experience opportunities <p>September & October 2017</p> <ul style="list-style-type: none"> 2 members of staff have successfully gained a 2 year traineeship to train to become qualified Social Workers, the aim of this strategy is that we ‘Grow our Own’ ensuring we have qualified Social Workers who will be working for the Service for at least 2 year after they qualify. Workforce Action plan being progressed to monitor progress against the short-term actions up until December 2017. Meetings held every 6-8weeks to monitor progress. Service re-structure was implemented on the 4th of October. The 8 Practice Leaders took responsibility for their Practice Groups, managing smaller groups across Early Intervention and Intensive Intervention with each Practice Leader responsible for 3 or 4 Social Workers. This will mean that the Social Workers will have more access to their Practice Leaders, enabling them to have early advice on dealing with individual cases and adequate support and supervision. <p>August 2017</p> <ul style="list-style-type: none"> A traineeship plan has been developed jointly with HR offering the opportunity for one member of staff to train to be a Social Worker over two years through the Bangor University with the possibility of securing a permanent post in the service post qualification. 	<ul style="list-style-type: none"> Corporate Induction session available on a monthly basis for new staff. Ensure progress with the Action plan, Meetings will be held every 6-8weeks to monitor progress plus to monitor other workforce issues. Further work to be undertaken to complete the restructuring, including reviewing the arrangements for the Child Placement Team, making the best use of Support Workers to support families, as well as ensuring that administrative support is appropriate for Practice Groups to effectively carry out their responsibilities. Review the Workforce Strategy late Summer 2018. 	<p>Yet to be done Newly qualified social workers report they have received clear guidance and expectations, support, and constructive feedback regarding their practice and on the quality of their work.</p> <p>Staff report positive satisfaction in the workplace and feel supported in carrying out their responsibilities.</p> <p>Commenced Audit of work providing evidence of a confident and competent workforce.</p> <p>Clear improvement in recruitment and retention rates with more staff recruited to permanent posts and reduction in staff leaving.</p> <p>Induction - all new staff receive a comprehensive induction and are fully aware of their roles and responsibilities.</p> <p>Evidence that induction meetings are being held and that new staff of the opinion that they are useful in relation to guidance and expectations, support, informing their practice and quality of work.</p>	Melanie Jones & Margaret Peters	Jan 2017	Ongoing

Children Services Improvement Plan Version 7.0 February - March 2018

CIW recommendations in red - high priority

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE	LEAD OFFICER	START	END
Page 36		<ul style="list-style-type: none"> • Service Induction programme produced for new staff • Workforce Action plan being progressed to monitor progress against the short-term actions up until December 2017. <p>June/July 2017</p> <ul style="list-style-type: none"> • Workforce Strategy completed. • Action Plan in preparation <p>May 2017</p> <ul style="list-style-type: none"> • Draft Workforce Strategy produced in collaboration with HR that includes relevant sections on recruitment, retention and support, induction arrangements, buddying, coaching and mentoring, shadowing, enhanced post qualification training and development opportunities, first year in practice guidance. • Strategy shared with staff for comments. • Induction expectations on Managers highlighted – this linked to advantages of new structure and increased number of practice leads. • HR related issues – weekly meetings established to address all related issues including recruitment. • 4 bilingual, newly qualified Social Workers recruited. • All social worker posts filled with temporary/permanent staff/recruitment in place. • Open advert for experienced social workers. • Session for induction guidance for Managers happened in March. • First year in practice guidance being reviewed by Practice Learning Co-ordinator 					
1.2	<p>Resolve Staffing matters to include:</p> <ul style="list-style-type: none"> • Recruit to permanent posts • Exit strategy for agency staff 	<p>November 2017 – January 2018</p> <ul style="list-style-type: none"> • One permanent Social Worker appointed early January • Fön Roberts has been in post as Head of Service since early December. • We continue to reduce the number of Agency staff, 7 Agency staff are currently employed on a temporary basis covering 5 empty Social Worker Posts. One Agency Staff if funded through the Edge of Care Grant. • 2 members of staff have started their Traineeship. • A new recruitment initiative was put in place in November to try to attract permanent experienced Social Workers. Rolling adverts are included in the Guardian for a year. • 4 x additional Support Workers recruited within TAF funded from Families First 	<ul style="list-style-type: none"> • Reduce the number of Agency staff. • 3 Newly Qualified Social Workers will commence in the Service late September bringing the number of vacant permanent Social Worker posts down to 3. • The rolling advert to attract experienced permanent Social Worker will be advertised 3 times during the next 6 months. 	<p>Yet to be done</p> <p>A stable and permanent workforce which results in:</p> <ul style="list-style-type: none"> • Consistency of practice across the service. • Improved quality of support to children and families. • Better relationships established between families and social workers leading to improved outcomes for children and families. <p>Partners report an improvement in joint working with Children Services due to reduction in staff turnover.</p>	Senior Management Team and HR	Nov 2016	Ongoing

CIW recommendations in red - high priority

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE	LEAD OFFICER	START	END
Page 37		<ul style="list-style-type: none"> • Additional Personal Advisor recruited funded with St. David’s Day Welsh Government Grant to provide practical and emotional support to young people who leave care when they are 18years old. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Head of Service has been appointed and will commence in post at the beginning of December. • We have recruited 8 new Social Workers over the last few months, all of whom are local and apart from one social worker are fluent Welsh speakers. This will ensure that we are able to meet the linguistic needs of children and families coming into contact with the service. • 7 Agency staff are currently employed on a temporary basis covering empty Social Work and Team Manager Posts. • We have developed Social Work Traineeship arrangements internally and 2 of our staff will now train to become qualified Social Workers over the next 2 years. • We have failed to appoint to the post of Quality Assurance Manager which has slowed our progress in relation to delivering on the Quality Assurance Framework. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • Meetings are being held every two weeks between HR and Children’s Services senior managers to ensure that recruitment and workforce development issues move on at pace. This to include regular updates on staffing levels, staffing chart and caseload. • Appointed the Resilient Families Team • Appointed 2.5 Engagement Officer in Teulu Môn • 8 Practice Leaders now appointed commencing on the 4th of September • Discussions to be held around extending Agency Staff contracts to be extended until end of December <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • Agency staff contracts extended until end of September 2017 to ensure workforce of sufficient numbers and experience. Aim to 					

Children Services Improvement Plan Version 7.0 February - March 2018

CIW recommendations in red - high priority

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE	LEAD OFFICER	START	END
Page 38		<p>reduce agency social workers during September.</p> <ul style="list-style-type: none"> • 1 qualified and 3 student social workers appointed to posts. 1 qualified and 1 student commencing in July. 5 vacant posts being advertised on a rolling basis • 7 Practice Leaders appointed. Further vacant post being advertised. • Appointed to vacant IRO post with commencement date of 10th of July. • Service Manager Early Intervention and Prevention appointed. Commencement middle of August. • Service Manager Intensive Intervention appointed. Agency Service Manager covering on a temporary basis. • Retaining permanent and temporary social workers continues to be a challenge for the service. • Providing sufficient support and guidance to staff remains a high priority. <p>May 2017</p> <ul style="list-style-type: none"> • Weekly meetings established between HR and Children’s Services senior managers to ensure that recruitment and workforce development issues move on at pace. This to include regular updates on staffing levels, staffing chart and caseload. • We continue to advertise for experienced social work posts on a rolling basis • HR recruitment briefings have been held for Managers. • HR to provide regular updates regarding recruitment and retention rates for the Service. • Continued guidance from Finance on cost implications of agency staff. • Exit strategy is in place for agency staff where posts have been filled by permanent workers. 					
1.3	<p>Review of Supervision Policy. This will include following:</p> <ul style="list-style-type: none"> • Code of Practice • Formal and informal or ad-hoc Supervision • Purpose of Supervision • Benefits of Supervision 	<p>February – March 2018</p> <ul style="list-style-type: none"> • Senior managers observed supervision sessions across the service: these individual audit tools are yet to be analysed: so that we can report on the findings. This will be done once all individual audits are presented. <p>November – January 2018</p>		<p>Commenced Staff positively report that the quality of their assessments and plans have improved through regular and quality supervision. The Supervision Survey responses indicate a lack of consensus across the service on this: and the impact of supervision on the quality of practice needs further work. :</p>	Senior Management Team	Dec 2016	<p>Ongoing tracking and auditing QA June 2017</p>

CIW recommendations in red - high priority

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Page 39	<ul style="list-style-type: none"> • Roles and Responsibilities • Minimum Frequencies and Cancellation • Planning for a Supervision Session • Recording of Supervision • Disputes • Confidentiality and Access • Links with Other Policies and Procedures <p style="color: red; margin-top: 10px;">Links to CIW Recommendation 7: Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality.</p>	<ul style="list-style-type: none"> • An Audit of supervision arrangements commenced in October 2017 across Children’s Services. This audit has not progressed as planned – as the relevant managers have not completed the work of auditing supervision records across teams. They have been asked to provide the reasons for this. Anecdotal evidence would suggest that this is an issue around recording of the supervision records. A staff survey has been completed: and this shows some positive results. • Mentoring for managers on outcome-focused supervision workshops designed to develop reflective practice held in December for Practice Leaders. • On-going advice and guidance provided to individual social workers on completing assessments, recording and assessing risk. <p style="margin-top: 10px;">September & October 2017</p> <ul style="list-style-type: none"> • A feedback form has been developed by colleagues in Training to ask what staff have learnt from the training they have received, have they put what they’ve learnt into practice, what would they change about the course if anything. Staff completed these forms during the Staff Conference in October. We are currently analysing the information. • A planning workshop was held for Senior Management Team with Rhonwyn Dobbie in preparation for the 3 outcome focused supervision workshops. • We have continued to remind staff that supervision is a priority and that all staff need to have regular supervision in line with the Policy. Supervision continues to be tracked by the Head of Service to ensure compliance. Managers/Practice Leaders will be held accountable for non-compliance. • Audit of supervision arrangements commenced in October 2017 across Children’s Services, including staff perception of supervision through questionnaires and focus groups. Initial feedback from the auditor is that progress with the work is slow as managers are unable to provide all the records of supervision that were to have happened in the nominated period. It is unlikely that this review will provide evidence of systematic and consistent compliance with the policy. • Practice Leaders are very new in post and have only been supervising their staff since the beginning of October. We will undertake a repeat audit in February 2018. 		<p>The response to the impact of the new structure on the capacity to provide professional leadership to support the workforce through regular and quality supervision shows that this is still work in progress.</p> <p>Clear guidance on standards and good practice clearly communicated and available to all through regular Supervision. 67% of responders agreed that supervision helped them better understand what they need to be doing. This needs building on.</p> <p>Managers complying with the Supervision Policy and Risk Model incorporated into Supervision sessions with staff. 83% agreed or strongly agreed that they were able to do this. This will be tested further during an evaluation of the recent coaching/mentoring of the Risk Model</p> <p>Regular audits across Children and Adult Services showing good quality and consistent Supervision. Regular audits are showing that improvement in management oversight and supervision remains inconsistent.</p> <p>Assurance mechanism established centrally to ensure compliance with Supervision policy.</p> <p>Staff report that they are effectively supported to carry out their duties. – Circa 75% agreed or strongly agreed in the supervision survey that they are effectively supported to carry out their duties. 79% agreed or strongly agreed that they receiving supervision often enough.</p> <p>Managers’ report that they are enabled to support staff to the required standards. – 83% agreed or strongly agreed that they were able to do this.</p>			<p>The Supervision Policy has been completed but too early to evidence outcome.</p>

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Page 40		<ul style="list-style-type: none"> Mentoring by Bruce Thornton has started to work with each practice lead in terms of how they embed the Risk Model in their work including during supervision. <p>August 2017</p> <ul style="list-style-type: none"> Arrangements made with Rhonwyn Dobbing on undertaking outcome focused supervision training for Practice Leaders. Three workshops will be held and the purpose is to support supervisors in examining their role in outcome-focused supervision and to consider the value of outcome focused supervision for service users, workers, social work practice and for the organisation. It should also strengthen the role of supervisor, consider core skills and challenges for different practice groups. <p>June/July 2017</p> <ul style="list-style-type: none"> Training on the Supervision policy held and training on the risk model held in June. On-going tracking and monitoring of supervision arrangements to ensure compliance of the Policy. <p>May 2017</p> <ul style="list-style-type: none"> Supervision policy revised and shared with staff Tracking arrangements in place to monitor strict compliance with Supervision policy Supervision policy completed Training on the Risk Model and its link with staff Supervision has been provided to all staff in June. Supervision training provided to all staff and Managers. 					
1.4	<p>Provide developmental opportunities for Practice Leaders to support the workforce in carrying out their duties. Areas of focus:-</p> <ul style="list-style-type: none"> Principles for making correct and safe case management decisions (management oversight of decision making) Improving and managing practice and performance including providing constructive challenge and direction to staff 	<p>February-March 2018</p> <ul style="list-style-type: none"> Service Manager Intensive Intervention holds monthly meetings with Practice Leaders to focus on the quality of Social Work practice and improvement required. Arrangements for PL are regularly reviewed to ensure they have capacity to supervise and support their staff. <p>November – January 2018</p> <ul style="list-style-type: none"> The office re-organisation has happened with Practice Leaders located with their Practice Groups. <p>September & October 2017</p> <ul style="list-style-type: none"> The Service Induction Programme is continuing (see below) 	<ul style="list-style-type: none"> HR to provide regular updates regarding recruitment and retention rates for the Service. (This could be part of what is discussed in the 6-8 weekly meetings with HR). 	<p>Commenced</p> <p>Managers' report enhanced confidence in their skills in making correct and safe case management decisions. 83% of staff who completed the Staff Questionnaire in November 2017 agreed.</p> <p>Staff report that they feel better supported by their line managers in carrying out their responsibilities leading to a reduction in staff turnover, improve staff retention and providing stability in the workforce. 74% of staff who completed the Staff Questionnaire in November 2017 strongly agreed or agreed.</p>	Senior Management Team	Jan 2017	<p>March 2018</p> <p>Too early to evidence outcome , developmental opportunities for Practice Leaders have</p>

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Page 41	<ul style="list-style-type: none"> • Managing difficult conversations • Providing regular and quality Supervision • Developing Practice leaders in coaching and mentoring skills <p>Links to CIW Recommendation 6: Arrangements for team managers and senior practitioners should be reviewed to ensure capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; a leadership and development programme should be made available to build resilience.</p>	<ul style="list-style-type: none"> • Practice Leaders took on responsibility of their Practice Groups at the beginning of October. Most had a 3 week induction period with no management responsibility for staff. <p>August 2017</p> <ul style="list-style-type: none"> • A repeat audit was undertaken in May/June 2017 confirmed positive progress was being made in relation to referrals that proceeded to Strategy and Conference: Quality of Strategy Discussions/Meetings Quality of Assessment. <p>Key Themes are as follows:</p> <ul style="list-style-type: none"> • Attendance and recording at Strategy Meetings has improved • Increased use of Risk 2 tool • Strategy meetings timely • Increased use of Chronologies evident • Improved quality of assessments evident. • Consistency of forms still a problem (S.W.report /Core/Risk2/ Care and Support Assessment and Eligibility tool all in use). • Conceptual shift from filtering risk to identifying strengths not fully embedded • An Away Morning was held on the 28th of July for Senior Staff Members to agree arrangements for the restructure of the service and to start discussing arrangements for Practice Leaders. • 8 Practice Leaders successfully appointed • Service induction programme is in place for September to include training sessions on: <ul style="list-style-type: none"> • Vision for the Service, overarching organisation, SIP • Managing sickness absence & Return to Work Interviews • Complaints and Flexi • Collaborative Communication • Supervision Workshops -3 x full days workshops on Outcome focused supervision • PLO and Court work • Time Management & Diary Management, Prioritising Work and Expectations • Delivering ACE Parental Groupwork Sessions • Performance • Capability • Management Style Course • Quality Assurance and Audits 		<p>Increased confidence in workforce and organisational reputation in feedback from partners.</p> <p>Regular case file audits showing an improvement in the quality of assessments and care and support plans.</p> <p>Regular audits across the Service showing correct and safe management decisions being made by Managers.</p>			been given

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Page 42		<ul style="list-style-type: none"> • Thresholds & Correct decision making and staff carrying out actions • Care planning & Reviewing C & S, CP & LAC • Case recording • Assessments and Risk Model • Caseload Management – Allocation of cases, Step down to TAF and not closing cases to Children’s Services, reduced caseload for newly qualified – maximum 12 cases • Family Group Conferencing, Participation and Parenting Development Work • North Wales Police Public Protection Unit • CAF/CASS • Motivational Interviewing <p>June/July 2017</p> <ul style="list-style-type: none"> • Audits started for Quarter 1: Case file audits, multi-agency audits, thematic audits, analysis available end of July • Training held for Managers on Managing difficult conversations • 7 Practice Leaders appointed, 4 internal staff and 3 external. • Training provided to Managers on Providing regular and quality Supervision • 4 Managers currently undertaking accredited Leadership and Development training. • Service restructure and establishing smaller operational Teams is proceeding and will ensure increased capacity for Managers to provide consistent guidance, supervision and support to staff. • Arrangements have been made for Adults Services Managers to support Children’s Services Managers in their professional development. 					
1.5	<p>CIW Recommendation 4: Continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s services to assure themselves, partners, staff and communities that their responsibilities are discharged to maximum effect.</p> <p>CIW Recommendation 8:</p>	<p>February – March 2018</p> <ul style="list-style-type: none"> • Laming visits have happened <p>November – January 2018</p> <ul style="list-style-type: none"> • The Members Panel continues to meet on a monthly basis. Seven meetings have been held to date. • 3 Laming visits have happened since October 2017, with visits to the Early Intervention Service, Resilient Families Team and Specialist Children’s Services <p>September & October 2017</p>	<ul style="list-style-type: none"> • Continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s services. 	<p>Yet to be done Senior leaders’ and elected members’ report that their involvement in the Social Services panel has developed their understanding of the key underlying issues and risks associated with the service and their ability to scrutinise the effectiveness of the service.</p> <p>Senior managers within the service report that the support and challenge provided by senior leaders and elected members have continued to improve.</p>	Chief Executive Director of Social Services	January 2017	On-going Number of Councillors attended the Inclusion

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Page 43	<p>Strong political and corporate support for children’s services must continue to ensure the service improvements needed are prioritised and the pace of improvement accelerated and sustained.</p>	<ul style="list-style-type: none"> • The Members Panel has continued to focus on monitoring and challenging the implementation of Children’s Services Service Improvement Plan, holding the Director of Social Services and Head of Service to account. Four meetings have been held since the Local elections in May. • The purpose of Laming visits has been reviewed and the questions asked during visits are and will be linked to relevant outcomes in the SIP. • Laming visits for Members have been scheduled until May 2018. A recent Laming visit was undertaken to the Child Placement Team on 27.10.17 by the Assistant Chief Executive, Scrutiny Chair and an elected member of the Panel. • The Leader of the Council, is also the Portfolio Holder for Children’s Services and she is very supportive and closely involved with the monitoring of the Service Improvement Plan through monthly meetings with the Head of Service to discuss progress and developments. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • A schedule of monthly Laming visits between July 2017 and May 2018 has been presented and agreed by the Children Services Improvement Panel on 21/08/17. Laming visits have commenced. • Initial discussion held with Andrew Bennett, Public Health Research, Training and Consultancy about the possibility of running a session available for all Members/Senior Leaders around Adverse Childhood Experiences. • The Second Members Panel was held on the 21st of August and a tracking document has been produced for the work of the panel. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • The new Council Leader/Director of Social Services the Interim Head of Children’s Services and Interim Scrutiny Manager have reviewed the role of the SS&WB Member panel in the creation of the ToR for the Children’s Panel • Elected members and Senior Leaders to continue with regular Laming visits. • Children’s Improvement Group held on a monthly basis chaired by the Director of Social Services to drive improvement and changes required. 		<p>Professional partners and communities report that the Council are effectively discharging their responsibilities in line with SS&WB Act.</p> <p>Commenced Senior leaders and elected members report that the Service Improvement Plan is delivered on time and to the required quality.</p>			<p>n Festival</p>

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		<p>May 2017</p> <ul style="list-style-type: none"> SS&WB Member panel to continue to monitor the completion of the Service Improvement Plan. Elected members and Senior Leaders to continue with regular Laming visits. Corporate Parenting work to be further developed (see.5.3). Additional resources required to provide more insight regarding the complexities of Children Services 					

2. Quality and timely assessments, interventions and decision making to protect, support and manage the risks for children: good quality chronologies, record keeping & research evidence and tools

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<p>2.1</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 44</p>	<p>Improvement in the quality of practice.</p> <p>Areas of focus:</p> <ol style="list-style-type: none"> Child protection, child protection and LAC social work visits Risk Model – improve analysis of risk Assessment - What matters, 5 areas of assessment. Outcomes focused plans Complete Care and Support plans under the SS&WB Act Establish and maintain high quality relationships with children, young people and their families. Record keeping Collaborative Communications’ course on strengths based conversations. <p>Recommendation 10: The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.</p>	<p>February – March 2018</p> <p>The Q3 analysis of practice quality was completed. Previous reports showed that the process of monthly casefile audits was taking root within the service, with sufficient returns upon which to draw out thematic conclusions. In Q3, the level of returns was not sufficient to form a firm base for analysis. The nature of the other evaluations was mainly case specific and included two management reviews which included some earlier periods of practice. As a result, drawing service wide matters from audit was limited for this quarter. This was partly mitigated by the:</p> <ul style="list-style-type: none"> Thematic analysis of practice by the independent safeguarding officers Quarterly overview and oversight feedback by the independent safeguarding officers Analysis of the Q3 complaints and compliments <p>The findings showed that the</p> <ul style="list-style-type: none"> Quality of assessments was Inconsistent. Quality of care and support plans including the pace for completing assessments and implementing work accelerated and sustained was poor. Supervision supporting improved practice and improved decision making and management overview was inconsistent. Quality and consistency of record keeping 	<p>The service needs to focus on</p> <ul style="list-style-type: none"> Working to achieve Manageable Caseloads– Practice Leads must work with their practitioners to step down cases whether this is possible Focus on improving assessments – small group learning sessions on developing assessment practice: and how to use the eligibility tool. Improved preparation for Statutory Reviews and Review Case Conferences Corrective action in terms of Placement with Parents’ cases Lac Care Plans or LAC Care and Support Plans must be put in place on relevant cases within the next month Practice Leads and Manager must make sure that their management oversight is recorded Acute focus on Permanency Planning for Looked after children to reduce the numbers of children being looked after – Complete the cases that require revocation: and identify all cases where an SGO might be appropriate and focus on progressing those cases. 	<p>Yet to be done</p> <p>Review the thresholds for a child becoming looked after as a consequence of evaluations that thresholds for CP registration and Part 4 meetings have been identified as poor practice</p> <p>Evidence in ‘prevention’ and ‘supporting’ with more children remaining at home.</p> <p>Regular audits are happening however they are not able to report consistent improvements in the quality of practice, assessing risk and record keeping.</p> <p>Regular audits are happening however they are not able to report consistent improvement in the quality and consistency of record keeping and they are up to date and are systematically stored.</p> <p>Increase in positive feedback from service users on the progress they have achieved with the support of Children’s Services. There were less complaints in Q3. However this needs to be tracked on a longer basis.</p> <p>Commenced</p> <p>Action plan being progressed with a pace in terms of improving the child protection conference process</p>	<p>Senior Management Team</p> <p>Training</p>	<p>Jan 2017</p>	<p>March 2018</p>

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Page 45		<p>was inconsistent, but with evidence of improvement.</p> <ul style="list-style-type: none"> Quality, consistency and timeliness of child protection enquiries and improvement in the level of understanding and application of thresholds for referrals, assessments and child protection was inconsistent. <p>A thematic audit on Placement with Parents showed that the cases were not meeting the statutory requirements.</p> <p>Following an earlier audit which identified that not all cases had child protection plans – a return audit showed that these were now in place with only a couple of individual cases remaining. The same work was carried out for LAC children – however limited progress has been made in ensuring that each LAC child has an up to date plan</p> <p>Positively the analysis of the December casefile audit (which was only completed in February) showed some very good work, both in a number of the cases (6 rated ‘good’) and also in the work of the auditors, many of whom have provided helpful and insightful comments. The audit focused on practice since October 2017. The audit found good practice in the following areas</p> <ul style="list-style-type: none"> Case recording was mostly up to date. Management decisions in response to referrals were being made within 24-hours, were clear, and were being responded to appropriately. Where strategy discussions were needed, it appeared that these were also being held in a timely way and were resulting in clear decision making which was succinctly recorded. This appears to be true of management decisions in general throughout this audit. Many of the cases audited this month were at quite an early stage, but auditors generally praised the standard of assessment and analysis, including clear decision making in one case regarding case closure. In the vast majority of relevant cases (8 out of 11), statutory responsibilities were being met – such as holding strategy discussions, completing assessments and S47 investigations within timescales. 	<ul style="list-style-type: none"> Continue to develop the new skills and knowledge to deliver a new way of working Review the Case Conference Process – to focus on review of practical arrangements, reporting, child protection plans and role of core group. Genograms and especially chronologies still remain an area for improvement, particularly as a tool to help assessment, or if there have been a number of previous referrals. Attention to detail in basic information records on WCCIS – especially school, GP and parental information / PR. Management supervision. Although management oversight of cases appeared to be generally good, and decision making was clear, there was little evidence of recent formal, reflective supervision in this sample of cases. Purposeful case recording which provides a clear overview of the case and an understanding of why certain actions were taken. Understanding the significance of unexplained bruising in immobile babies Further embedding of the Gwynedd/Thornton Risk Model <ul style="list-style-type: none"> The Q1 2017/18 practice quality report – The Service must concentrate and ensure compliance with the basic requirements to improve performance data. The priority for the next reporting period is to improve assessing practice. Training is provided by Bruce Thornton on using the Risk Model in assessments. We will work with staff to define standards for assessments. Reflective Practice in Social Work <ol style="list-style-type: none"> Child protection 	<p>Completed</p> <p>Regional templates for ‘assessment’ / ‘care and support planning’ which clearly records needs, risks, strengths, outcomes, accountabilities for actions and their associated timescales are available for use within the service</p>			

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Page 46		<ul style="list-style-type: none"> In 7 out of 10 relevant cases the work done around case transfer and case closure was judged to be 'good'; there was generally evidence on file that case closure was being discussed with children, parents and partner agencies and that their views were being sought, and there were some good summaries of reasons for closure on file. <p>Motivational Interviewing and Brief Solution Focused Therapy training delivered in Q4. It is too early to see how this has impacted on practice.</p> <ul style="list-style-type: none"> There is a clear expectation that care and support assessment need to be current with an analysis in relation to risk of significant harm. Social Work staff have been provided with clear guidance that there needs to be care plans in place for all children on CP register, Looked After and care leavers and that social work visits should be undertaken in accordance with statutory timescales. There has been a continued reduction in children on CP register where multi agency Conference has assessed that the risk of significant harm has reduced sufficiently. At the end of March 2018 there were 46 children on the register compared with 48 at the end of December 2017. The number of looked after children has remained stable during this period with 144 looked after in March 2018 compared with 139 in December 2017. <p>November – January 2018</p> <ul style="list-style-type: none"> The Q3 analysis of practice quality has not yet been completed. A number of practice evaluations were held during the period – and the learning has been disseminated to the practice leads/managers. A summary conclusion is that practice remains inconsistent in many areas: and some of the basic requirements are not being met e.g. child protection plans, Care and Support Plans. Audits have shown that there are improvements in the standard of recording; however it is to the staffs credit that this is being maintained despite difficulties in familiarising themselves with a new system. There are some examples of Practice Leads seeking to work in a different way – to embed new ways of working: but this is not consistently applied across the service. 	<ol style="list-style-type: none"> How to establish and maintain high quality relationships with children, young people and their families. Record keeping. Guidance to be developed on good practice around record keeping. Bruce Thornton commissioned to establish an operational model within the new system -WCCIS. Practice guidance to be developed around CP and LAC social work visits. 				

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Page 47		<p>However practice remains inconsistent: and that the service is yet to realise a number of its improvement objectives in terms of the quality of practice, assessment, analysis, risk management and care and support planning</p> <ul style="list-style-type: none"> • An Interim Manager has been appointed to help drive practice improvements via coaching/mentoring, development of processes and procedures and establishing practice standards. This work is ongoing. The coaching and mentoring by Bruce Thornton on the Gwynedd/Thornton Risk Model is continuing and an evaluation is underway. Anecdotal evidence is that this is helpful. • There has been less complaints to the service in Q3 compared to Q2, - 12 down to 3, and the positive comments increased from 24 to 31. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Collaborative Communications course held on the 28th and 29th of September and the shift to working under the SSWBA is still ongoing. • The summary of quarter 2 performance does evidence a range of evaluation sources – management reviews, complaints, thematic audits, regular casefile audits. Main findings is that the practice remains inconsistent: and that the service is yet to realise a number of its improvement objectives in terms of the quality of practice, assessment, analysis, risk management and care and support planning. There are signs of some improvement in initial decision making and recording. • Targeted interventions continue to be undertaken with individual Social Workers who have not improved the quality of their practice • A Court Action Plan has been developed to focus on improving the quality and analysis of all assessments undertaken to inform our decision making and will support arrangements for ‘front loading’ public law cases. Practice Leader’s now have oversight of the Court timeframe for cases within their Practice Groups and will support and guide Social Worker’s to ensure better preparation for Court and that documents are filed on time. • Children’s Services have adopted the Thornton/Gwynedd Risk Model to continue 					

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Page 48		<p>supporting social workers to work proactively with families to manage risk - spending much more time working alongside them helping them to change so that the family is a safe place for their children.</p> <ul style="list-style-type: none"> • Bruce Thornton co-author of the model is undertaking a Practice Coach/Mentoring Development role for a period of 7 months to focus on: <ul style="list-style-type: none"> • Providing coaching and mentoring to help develop the skills, knowledge and competence of practitioners and practice leaders. • Support Service Managers to implement, process, systems and procedures to ensure that the Risk Model is implemented within service processes • Support the development of the Risk Model within critical and reflective supervision. • Despite the inconsistency in practice, we have positive evidence of the workforce working directly with families leading to improved outcomes. We have seen a significant reduction in the children on the Child Protection Register from 102 in March 2017 to 56 on the register on 31st of August, 2017 a 55% decrease. • The number of Looked After Children has remained consistent during the last 8 months because we are trying to support children to remain living at home when it is safe to do so. • Ongoing discussions regarding the requirements for Performance Monitoring Reports from the new Social Care System – WCCIS which was rolled out in August. We were only able to report on 4 out of the 6 corporate scorecard indicators due to further work being required to establish an accurate picture to current performance. This work has been ongoing and the Service has an action plan in place to improve the position and provide accurate and up to date data for consideration. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • Audits – both case file and thematic – on a service and multi-agency basis - held during the month. Caseloads for frontline team remain higher than the service management team would wish for, evidence from audits suggests that practice remains inconsistent. 					

CIW recommendations in red - high priority

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Page 49		<ul style="list-style-type: none"> • Draft Framework for Improving Quality of Practice developed for consultation • SMT considering findings of the Q1 quality report – recommend prioritising improvements in assessment practice • Challenged and supported individual workers to improve their practice • Practice evaluation Report Q1 2017/18 doc Case file auditing completed on the following practice areas: LAC step down audit, Report for placement panel, planned monthly case file audits by Team Managers, Responsive auditing (Stage 2 complaints) and Initial decision making, screening, strategy discussions and meetings and simple assessment. Service User views and evaluation of previously conducted management reviews. This report shows that practice remains inconsistent however; there are examples of good practice that have been confirmed by CIW as achieving the required outcome for the child/ren and their families. • CIW tracked two cases – ‘Case files were read, social workers, managers and families interviewed. The cases provided evidence of good outcomes for families. A good range of services were effectively used. The social workers interviewed were very motivated and committed to providing a high quality service. They achieved a very high level of engagement with the families. The families were motivated and supported to address and change deeply engrained patterns of behaviour related to substance misuse and domestic violence. Social workers were well supported although not always through formal supervision.’ Case 2 provided evidence of : ‘Good use of systems and services. A good range of services - LAC, Domestic Violence, FGC in planning, specialist service therapeutic assessment. Children’s and family’s needs have been met. Social worker was skilled able to maintain her relationship with mother and children and do direct work with children. From the discussions and file she had made a significant contribution in moving the mother’s expectations, thanking and behaviour.’ • A repeat audit was undertaken in May/June 2017 on the referrals that proceeded to Strategy and 					

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Page 50		<p>Conference: Quality of Strategy Discussions/Meetings Quality of Assessment. Key Themes are as follows:</p> <ul style="list-style-type: none"> • Attendance and recording at Strategy Meetings has improved • Increased use of Risk 2 tool • Strategy meetings timely • Increased use of Chronologies evident • Improved quality of assessments evident. • Consistency of forms still a problem (S.W.report /Core/Risk2/ Care and Support Assessment and Eligibility tool all in use). • Conceptual shift from filtering risk to identifying strengths not fully embedded • Teulu Môn practice guidance being developed by the Early Intervention Service Manager • Bruce Thornton has been commissioned to produce Guidance on Record Keeping and Decision Making • The quality of practice continues to be inconsistent. • Draft Multi Agency practice guidance have been completed to be ratified at the next Local Delivery Safeguarding Group in October, areas covered are <ul style="list-style-type: none"> • Multi Agency Child Protection Practice Guidance Investigation Thresholds • Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups • Multi Agency Child Protection Practice Guidance- Registration Thresholds. • Part 4 AWCP2008 • Making Referrals • A draft document has been produced setting out the way of working for the service (Collaborative communication, co- production and assessment of risk). In preparing this document the service has considered the need to improve practice in relation to forming good quality assessments and respond to the requirements within the Social Services and Wellbeing Act (Wales) 2014 to work collaboratively with children and families. This document sets out the service’s vision in how we will assess risk, co-produce and conduct collaborative communication with children and families in Anglesey. <p>June/July 2017</p>					

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Page 51		<ul style="list-style-type: none"> • Audits started for Quarter 1: Case file audits, multi-agency audits, thematic audits, analysis available end of July. • Challenged and supported individual workers to improve their practice • The quality of practice continues to be inconsistent. • Staff session held for Social Workers to discuss practice standards and ask staff for ideas on what would help to improve the way of working <p>May 2017</p> <ul style="list-style-type: none"> • Training Unit have arranged training for all social care staff on: <ul style="list-style-type: none"> • Assessing Carers in the Long-term • Implementing the Induction Framework for Foster Carers • Changing Culture and Measuring Performance in line with Social Services and Well-being Act • Collaborative Communication / Outcome focused conversations • Regional Templates – Including Assessment, What matters, 5 areas of assessment, Care and Support plans which are Outcome focused • Making the Most of Supervision – for Managers • Providing Constructive Feedback and Managing difficult conversations • Making the Most of Supervision – for staff • IFSS Resilient Families training (including Brief Solution Focused Therapy and Motivational Interviewing) • Collaborative Communication - follow-up • General Safeguarding for Social Workers • Risk Model • Child Sexual Exploitation and Return Home Interviews • Motivational Interviewing 					
2.2	<p>CIW recommendation 3: Senior leaders in social services and the police will work together to ensure improvements to the:</p> <ol style="list-style-type: none"> 1. quality, 2. consistency and 3. timeliness <p>of child protection enquiries.</p>	<p>February – March 2018 See 2.1</p> <ul style="list-style-type: none"> • The Multi agency guidance were not approved by the Gwynedd and Mon LDG and therefore can only be used as an IOACC document. They have been translated and they will be launched during q1 2018/19. The guidance in terms of thresholds for investigation has been sent to the North wales Children Safeguarding Board Policy and Procedures Group. There has been no formal adoption to date. 	<p>Audits would show that we need to improve our arrangements for:</p> <ul style="list-style-type: none"> - Recording of Strategy Meetings/Discussions - Ensure that all relevant agencies are part of the Strategy Meetings/Discussions - Ensure improved oversight of s47 investigations 	<p>Yet to be done Regular audits are happening however they are not able to report consistent improvement in the quality, consistency and timeliness of child protection enquiries leading to improved outcomes for children and young people.</p> <p>Staff report clearer guidance and improved understanding of roles and responsibilities through the implementation of the Practice Guidance.</p>	Service Mangers	Jan 2017	Ongoing

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Page 52	<p>Practice Guidance to be developed between Police and Children services around child protection referrals, strategy discussion/meetings and enquiries.</p>	<ul style="list-style-type: none"> • We have worked with a subgroup of the NWSCB to develop a regional approach to JIT training. • The North Wales Policy and Protocol Sub Group will be discussing the joint protocol between the Police and Children Services at the end of April to decide if it will be approved across the region. • Training arrangements will now be arranged on a multi agency basis. • Both Service Managers for Early and Intensive Intervention have established a positive working relationship with the Police which allows open and frank discussions to be held to resolve any operational matters. <p><u>November – January 2018</u></p> <ul style="list-style-type: none"> • Following analysis of CID 16 referrals work is ongoing between the Police and Children’s Services. • Discussion around piloting arrangements in relation range of measures to improve the flow and quality of information shared between both agencies. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Regular audits show that there is conflicting evidence in terms of the improvement in the quality, consistency and timeliness of child protection enquiries. A distance travelled audit concluded that attendance and recording at Strategy Meetings had improved and that the strategy meetings were timely. However the Case File Audit (July) and a management review concludes that in several cases auditors expressed concern about strategy discussions or meetings: <ul style="list-style-type: none"> • Not always being held in a timely manner – e.g. one was not till 3 weeks after decision made to hold one • Minutes of discussions are insufficient – i.e. to brief • References are made for need for follow up strategy meetings and then there is no evidence that they have been held. • This is reflected in the Thematic Audit Part 4, and a review of Children subject to Child Protection Plans 	<ul style="list-style-type: none"> - Ensure improved understanding of what a s47 investigation entails - Provide training and a revised report template which incorporates the Gwynedd/Thornton Risk Model 				

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Page 53		<p>–decision making, delays, and lack of clear plans and follow through being issues identified.</p> <ul style="list-style-type: none"> • High level discussions have been held between North Wales Police and Children’s Service around piloting a Multi-Agency Information Advice and Assistant hub. This will progress further in November. • The Police are making progress with their analysis of CID 16’s, and is suggesting that the next step will be for both teams to meet to compare their conclusions. • Draft Multi Agency practice guidance have been completed including: <ul style="list-style-type: none"> • Multi Agency Child Protection Practice Guidance Investigation Thresholds • Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups • Multi Agency Child Protection Practice Guidance- Registration Thresholds. • Part 4 AWCPP2008 • Making Referrals • The Multi Agency guidance will be ratified by the Corporate Safeguarding Board in December, and will be used by Housing, Education and Partner Agencies in relation to the Safeguarding process. The guidance will also be discussed in the Regional Policies and Procedures Sub Group for them to be used regionally. A training plan will be developed to ensure arrangements are in place for staff to use the Practice Guidance. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • We have met the IAA hub equivalent in both Conwy and Flintshire County Councils in order to explore options and share their experiences. The visit with both Conwy and Flintshire has assisted us in forming clearer mission for our own IAA. • Developed scope of work with the police on joint audit and improvement in terms of referrals, Strategy meetings and s47 investigations. • An audit was carried out on all 81 referrals which were received by Children’s Services from the Public Protection Unit in the form of CID 16’s between 1st and 14th of June 2017. 20 of the referrals were deemed to be not clear in the reason for sharing the information. Of the 81 only seven stated what the anticipated outcome for the referral would be. Only 					

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Page 54		<p>15 referrals contained the voice of the child.</p> <p>The Public Protection Unit must ensure that they are more specific in why they are referring the information and must not refer simply because there are children linked to the adults involved.</p> <ul style="list-style-type: none"> • CSE and Return Home Interviews for looked after children, work is being done to improve performance in these areas taking place with partners - Police and the 6 North Wales Local Authorities. • A repeat audit was undertaken in May/June 2017 on the referrals that proceeded to Strategy and Conference: Quality of Strategy and Discussions/Meetings Quality of Assessment. See 2.1 <p>June/July 2017</p> <ul style="list-style-type: none"> • Protocols currently drafted for: <ul style="list-style-type: none"> • Multi Agency Child Protection Practice Guidance Investigation Thresholds • Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups • Multi Agency Child Protection Practice Guidance- Registration Thresholds. <p>Set of protocols likely to be ready for October.</p> <ul style="list-style-type: none"> • 2 week analysis started 10/07/17 in relation to all CID16's that are received at Teulu Môn in order to ensure that appropriate referrals are made to the Council and understand the data and to explore information sharing. A meeting was held on the 26th of June. • Monthly meetings arranged between Children Services and NWP to address operational matters and to develop a Practice Guidance around child protection referrals, strategy discussion/meetings and enquiries. • HOS is made aware of any on-going operational difficulties in relation to joint working with the Police to ensure they are urgently addressed and that children are not left in vulnerable positions. • Audit to be undertaken to monitor the quality, consistency and timeliness of child protection enquiries. 					

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		<p>May 2017</p> <ul style="list-style-type: none"> • Positive discussion held with the Police regarding cooperation. 					
2.3	<p>CIW recommendation 9: Multi-agency arrangements should be established to strengthen operational plans to support effective co-ordination of statutory partners' completion of Joint Assessment Frameworks. – Service no longer using JAF</p> <p>Practice Guidance to be developed between Children Services, Health, Police and Education to ensure clarity in relation to operational arrangements – agreed referral threshold, improvement in the quality of referrals, attendance at strategy meetings, core group meetings and information sharing.</p>	<p>February-March 2018</p> <ul style="list-style-type: none"> • Multi agency meetings continue to be held between Children Services, Police, Education, Health and CAMHS to agree on operational matters. Action Plan to improve Child Protection Conference arrangements were discussed in March and agreement was made on how this will be progressed. <p>November – January 2018</p> <ul style="list-style-type: none"> • We have received permission from Welsh Government to amalgamate the current Joint Assessment Framework (JAF) to the care and support assessment form. Work on including the measures that the JAF collects has commenced. The Care and Support Assessment and Plan will be used instead of the JAF. • Multi Agency operational meetings with Police, Health Board, CAMHS, Paediatrician and Education are taking place monthly to discuss joint working arrangements to improve and strengthen current arrangements e.g. the quality of referrals received by Children and Families Services. <p>September & October 2017</p> <ul style="list-style-type: none"> • Work progressed on improving the quality and our understanding of the care and support assessments (Part 1,2,3) this includes the core data set, the what matters conversation and care and support assessment. • We have been working to improve our understanding of the national eligibility criteria and gain consistency in recording the eligibility criteria in our assessments. We have identified suitable methods of communication, prompts and tools to improve the quality of the what matters conversation, decision making process and recording. <p>August 2017</p> <ul style="list-style-type: none"> • Practice guidance completed see 2.2 • Meetings held with CAMHS and CAF/CASS 		<p>Commenced Improved multi agency safeguarding arrangements leading to improved outcomes and experiences for children and young people.</p> <p>Completed A multi-agency Practice Guidance clearly defines local roles and responsibilities and safeguarding arrangements.</p>	Early Intervention Service Manager	Jan 2017	Ongoing multi agency arrangements

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		<p>June/July 2017</p> <ul style="list-style-type: none"> • Arrangements have been made to hold a multi-agency task and finish group under the local delivery safeguarding group to develop the practice guidance. <p>May 2017</p> <ul style="list-style-type: none"> • Local Delivery Safeguarding Group agreed on 16.2.17 that a Gwynedd and Ynys Mon multi-agency meeting should be held to discuss current working arrangements and difficulties and to bring them to the attention of the RSCB. • Practice Guidance to be developed between Children Services, Health, Police and Education to ensure clarity in relation to operational arrangements – agreed referral threshold, improvement in the quality of referrals, attendance at strategy meetings, core group meetings and information sharing, see. 3.3(4) 					

3. Quality assurance and performance framework that supports the local authority in effectively managing its responsibilities towards children

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3.1	<p>Review all children who are looked after to ensure outcome based care and support plans are in place in securing permanence.</p> <p>A service and corporate understanding of the profile of looked after children and children on the CPR.</p> <p>Review all cases where the child's name has been on the CPR for 12months + to decide if cases should be discussed in Legal Gatekeeping Panel (care proceedings)</p>	<p>February – March 2018</p> <p>There is evidence that in a number of cases we do not have up to date LAC plans for Looked after children; and that these have not been put in place following an earlier audit and corrective action instruction.</p> <ul style="list-style-type: none"> • Foster placement Scrutiny Panel has been established by the Service Manager, Intensive Intervention to monitor step down arrangements, that the placements are meeting the needs of looked after children and that LAC review recommendations are prioritised. • A Panel to discuss children on the CP register after their 2nd Review (10 months) has been established by the Service Manager, Intensive Intervention to decide on the need to discuss families in pre care proceedings meeting (Legal Gatekeeping Panel). <p>November – January 2018</p> <ul style="list-style-type: none"> • A review of residential placements is underway. 	<p>Ensure that each LAC has an up to date plan</p> <p>LAC Review recommendations are prioritised by Social Workers and the pace for completing assessments and outstanding work is accelerated and sustained.</p> <ul style="list-style-type: none"> • Aim to reduce the number of Children becoming Looked After by: Engaging family, friends and community earlier Being creative – additional support/provision Completing in-depth Care & Support Assessments Engaging the child/young person in the Assessment process Listening to children and Young People SMART Care & Support planning Resilient Families intervention 	<p>Not yet done</p> <p>Case file audit showing that care planning by Social Workers for looked after children is significantly improved through implementation of the Practice Guidance.</p> <p>Commenced</p> <p>Intensive work with those looked after children and young people who need 'step down' arrangements are successful leading to improved outcomes.</p> <p>Council is assured that placements are meeting the needs of looked after children and young people. Children rehabilitated safely home through placement with parents/discharge of Care Orders.</p> <p>LAC Review recommendations are prioritised by Social Workers and the pace for completing assessments and outstanding work is accelerated and sustained.</p>		Jan 2017	March 2018

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	<ul style="list-style-type: none"> A monthly meeting is held by a Service Manager to discuss the children on the CPR who have been on the register for at least 10 months with Practice Leaders to decide on any actions required for example discuss case in Legal Gatekeeping. The service is looking at developing local care provision to meet the growing demands of Looked After Children, such as: <ol style="list-style-type: none"> Small Group Homes. Salaried foster Carers and a Overall of the Current fostering offer <p>This is favoured by the elected members not only in relation to cost but more importantly so we can keep Anglesey children within their locality, albeit not living with their birth family.</p> <p>The Services completed the Looked After Self-Assessment for Care Inspectorate Wales on the 26th January 2018. The Challenge Meeting is due to take place on 27th of March 2018.</p> <p>The Service also completed the Adoption Review on 25th January 2018 with Care Inspectorate Wales.</p> <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> We are seeing evidence of the workforce working directly with families leading to improved outcomes – as we have seen a significant reduction in the children on the CP register from 102 in March 2017 to 56 on the register on 31st of August, 2017, 55% decrease. Work has continued in relation to stepping down arrangements from residential care, 3 young people have been identified to either return home or move to alternative care arrangements. Further work has been undertaken by the Resilient Families Team to ensure there is progression in preventing children becoming looked after and progressing with the stepping down arrangements for the 3 young people mentioned above. Recruitment to Social Work post to revoke care orders has commenced. <p><u>August 2017</u></p> <ul style="list-style-type: none"> Review undertaken of Case Conference minutes for 34 children – indicated that in a significant number of cases there was no evidence to justify the judgement of further significant harm. A Practice 	<ul style="list-style-type: none"> Need to move away from thinking the needs of Children and Young People can be best met by bringing them into care. When parents request for their child(ren) to be brought into care they must be told that the steps mentioned above* must be worked through. 	<p>Reduction in the number of children in residential placements by the end of March 2018 due to intensive work undertaken to move them to ‘step down’ arrangements.</p> <p>Costs and expenditure on costly placements have reduced significantly because of ‘step down’ arrangements for children and young people.</p> <p>Review of looked after children and children on the CPR provides detailed information and understanding of their needs. This will assist with the prevention strategy and the work of the Resilient Families Team.</p>			

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	<p>Leader is now reviewing the same minutes in an attempt to verify the findings.</p> <ul style="list-style-type: none"> • One case referred for management attention as the children had been on the register for 4 years. This was positive and led to clearer decision making, direction and action. • The profile of children on the CP register has been completed, work has progressed to reduce the number of children on the register. The number of children on the register on the 31st of August 2017 was 56 compared to 102 at the end of March 2017, 55% decrease. Practice Leader identified to focus on improvements around the quality of work in relation to CP conferences and reducing the length of time that children remain on the register. • Work started to understand and challenge “notice periods” given by care providers. • Work started to challenge Quality of placements offered. • Resilient Families team appointed and we have started to work under the Resilient Families model with families. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • A review all children who are looked after has happened and children who need to be ‘Stepped Down’ have been identified. • Head of Service chairs a group – Internal review panel for residential placements: • Ensure that care and support plans meet their wellbeing outcomes to ensure that the LAC review recommendations are actioned and to ensure value for money. • Resilient Families Team posts have now closed. • Care planning for looked after children to be strengthened through development of additional Practice Guidance. • Permanency policy currently under review • We have started to practice differently and more intensively with a small number of families following a similar model to the work of the Intensive Family Support Services. This is the work the Resilient Families Team will be undertaking to support children living at home: both preventing the need for accommodation and supporting return home plans. 					

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	<p>May 2017</p> <ul style="list-style-type: none"> • Team Managers to confirm by May 2017 which children/young people will have 'step down' care and support plans. • Agreement reached by May 2017 over the tasks required to achieve permanence and the intensive work required with looked after children /young people and their families to ensure 'step down' arrangements are successful. • Posts within Resilient Families Team and appointments made by May 2017. • Care planning for looked after children to be strengthened through development of additional Practice Guidance. 					
<p>3.2</p> <p>Strengthen and embed the Quality Assurance Framework within the Service, through:</p> <ol style="list-style-type: none"> 1. IRO and CPC to report quarterly on their assessment of the operational performance through conference and review. 2. IRO and CPC to draw out, on a thematic basis, issues regarding quality and learning for the Service. 3. Managers to undertake regular audits on focused areas: <ul style="list-style-type: none"> • Supervision • Recording • Assessment • Quality, consistency and timeliness of child protection enquiries <p>Caseloads and reports regarding the quality of workers' performance to be continuously monitored.</p> <p>CIW Recommendation 13: Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the quality of practice, needs to be embedded so that managers at all levels have timely, relevant and accurate performance and quality assurance information to enable them to</p>	<p>February – March 2018</p> <ul style="list-style-type: none"> • Systematic and planned audits have continued: and we are able to show how these lead of corrective action and improvement work. • Other elements of the QI framework have been implemented – Practice and Meeting Observation • Continued provision of Risk Model Coaching and Mentoring • Completed the Practice Standards • Appointed to a Key post – Quality and Practice Improvement Officer which will enhance the unit's ability to take forward with greater pace the learning and improvement work – learning circles, lunchtime professional meetings, action learning sets etc • IRO/CPC have an improved quality assurance role leading to learning and improvement in the quality of practice • Reviewed the Children Services Procedures which showed that they need to be rewritten in many areas <p>November – January 2018</p> <ul style="list-style-type: none"> • There is less compliance by managers and Practice Leads with the requirements to complete audits on a planned way. • The Safeguarding Unit have worked together on two thematic reports during this period – which will be fed into the Q3 report. This strengthens the oversight and overview of the independent officers and puts in place another element of the IQ Framework. • An implementation plan for the remaining elements of the IQF has been developed in collaboration with 	<ul style="list-style-type: none"> • Review Audit Plan in line with Service Improvement Plan 2018/19 • Provide Tools, support and training to staff to implement the framework • Take forward with greater pace the learning and improvement work – learning circles, lunchtime professional meetings, action learning sets etc • Appoint to the vacant posts 1.5 in the unit • Complete the IRO/CPC standards • Agree how we review/rewrite the Procedures including whether working with Procedures on Line may be a way forward to ensure access and up-to-date amendments on an ongoing basis. <ul style="list-style-type: none"> • Guidance to be developed around caseload management to ensure there is sufficient capacity for workers to engage effectively with children and their families – 	<p>Yet to be done</p> <p>WCCIS is supporting performance management and caseload management through easily accessible 'reporting' features made available to Managers.</p> <p>Workers have sufficient capacity to engage effectively with children and their families through Manager's implementation of the caseload Guidance.</p> <p>Commenced</p> <p>Quality assurance reports and case file audits are happening and is showing that the direction of travel for practice is one of improvement: albeit inconsistently.</p> <p>Progress made in ensuring that the IRO/CPC have an improved quality assurance role leading to learning and improvement in the quality of practice.</p> <p>QA and Safeguarding Unit to drive improvement and changes to practice across the Service through learning from thematic and qualitative reports.</p> <p>In Place</p> <p>Regular and timely qualitative reports are submitted without delay to the leadership team, including members. We are able to show how these lead of corrective action and improvement work.</p> <p>Framework and tools for structured governance and scrutiny arrangements through regular case file audits.</p>	<p>Safeguarding and Quality assurance Service Manager</p>	<p>Jan 2017</p>	<p>March 2018</p>

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<p>do their jobs effectively and to deliver improvements.</p> <p>CIW Recommendation 14: Caseloads and reports regarding the quality of workers' performance should be continuously monitored to ensure there is sufficient capacity for workers to engage effectively with children and their families.</p>	<p>managers and practice leads: and this will need approval by the SMT in its next meeting.</p> <ul style="list-style-type: none"> • An interim manager has been brought in as additional capacity to continue in the development of the improvement in a planned and systemic way. The substantive Quality Assurance post currently advertised. • All cases that have been judged as inadequate in previous audits will be reviewed by the interim manager. • Guideline to support Practice Observation developed: currently with Practice Leaders for consultation. • Continued provision of Risk Model Coaching and Mentoring • Good Practice Group established to take forward the drive improvement and changes to practice across the Service through learning from thematic and qualitative reports/This needs time to embed and make an impact. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Quality Improvement Framework approved by the Service Management Team following a period of development, consultation and collaboration. The aim of the framework is to the approach that Children's Services will take to ensure that it is <ul style="list-style-type: none"> • Providing safe professional practice • Supporting the right children/adults, in the right way, at the right time • Evaluating whether it is making a difference to practice improvement • Providing a professional context that supports learning, reflection, openness and supportive challenge • Taking the improvement agenda beyond compliance with procedure to a commitment to improve the quality of the social work practice delivered to children, their families and carers. • A number of the key elements of the framework are in place – <ul style="list-style-type: none"> • Communication and ensuring a shared dialog about quality 		<p>Completed the Practice Standards</p>			

CIW recommendations in red - high priority

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	<ul style="list-style-type: none"> • Practice improvement group: sharing disseminating: shared dialogue • Coproduce standards • Provide training and development opportunities • Provide practice guidance and procedures • Recruit and retain the right people • Supervision Expectations • Management Overview Expectations <ul style="list-style-type: none"> • The process of casefile audits & Multi Agency Audits are taking root within the service. • The Head of Service has decided to set up a scrutiny panel within the service to maintain an overview in relation to permanency planning. • The Improving Quality Framework recommends setting up an IRO recommendations and challenge log. Audits have shown that in the cases where delay in progressing a child’s care and support plan (under part 6) the IRO had been recommending steps to achieve permanency. Those recommendations had not been progressed. • Priority for the next reporting period is Social Work assessments: integrating the risk model into practice and ensuring that the assessment becomes the “currency” within the service. • Bruce Thornton has been commissioned to provide a mentoring/coaching role within the service to ensure that the Risk Model is embedded into practice. • Successful workshop held with staff committing to the vision in the Quality Assurance framework and beginning to work together to provide a different approach. Staff Morale was good and they found the new approach refreshing. The focus is on the officers to report quarterly on their assessment of the operational performance through conference and review, drawing out on a thematic basis, issues regarding quality and learning for the Service. They are currently working on a report on the lack of preparation, reports and plans for reviews and conferences. They will also suggest improvement actions. 					

CIW recommendations in red - high priority

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	<p><u>August 2017</u></p> <ul style="list-style-type: none"> • Business Support Officer for Statutory Reviews and Case Conferences appointed • Improving Practice Co-ordinator post advertised previously titled 'Quality Assurance Manager' • Managers have been undertaking regular audits of the focused areas to monitor the quality of workers performance. • Repeat audits on decision making shows improvement in practice. See 2.1 • Audits – both case file and thematic – on a service and multi-agency basis - held during the month • Draft Framework for Improving Quality of Practice developed for consultation • SMT considering findings of the Q1 quality report – recommend prioritising improvements in assessment practice • Challenged and supported individual workers to improve their practice <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • Quality assurance work in Quarter one has included: LAC profile analysis Case file audit Caseload analysis • Recruitment to the business support for Statutory Reviews and Case Conferences to happen by the end of July. • Appointments to vacant IRO post commenced in July. • Further developments have been made with regards to multi agency quality assurance audits with Education and the Health Board to improve on the quality of referrals and information shared with partner agencies. • Additional funding was agreed for re-establishing the Quality Assurance Manager, post was advertised however we failed to appoint. • Audit of PLO cases completed <p><u>May 2017</u></p> <ul style="list-style-type: none"> • Quality Assurance Framework has been revised and approved by Children Services. • Quality Assurance Action Plan agreed for the next 12 months focusing on regular audits on focused areas: <ul style="list-style-type: none"> • Supervision • Recording 					

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CIW recommendations in red - high priority

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	<ul style="list-style-type: none"> Assessment Quarterly Assurance reports to be discussed at Children Services Management meeting and a Practice Improvement Group to be established to take forward practice improvements. Managers to provide monthly highlight reports to Service Managers and HoS on the quality of workers' performance to ensure there is sufficient capacity for them to engage effectively with children and their families. 						
<p>3.3</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 63</p>	<p>Develop the performance framework for Children and Adult Services to include:</p> <ol style="list-style-type: none"> Outline Performance indicators split into National, Corporate and Service performance. Governance arrangements to include reporting, accountability and mechanism in driving improvement. Continues improvement embedded within the framework. Framework to provide evidence on the quality of practice and experiences of service users Improvement required in priority areas of performance that is outside tolerance and targets: <ul style="list-style-type: none"> Assessment Lac Reviews LAC visits CP visits Core group meetings Pathway Plans These will be brought back into target 	<p>February-March 2018</p> <ul style="list-style-type: none"> Service Manager and Practice Leader from Intensive Intervention Service meet on a monthly basis with Performance data officer to ensure correct data in relation to CP and LAC visits and Core Group. Regular Practice Group meetings and monthly Service Meetings continue to be held with staff to advise them of the need to ensure all open cases have a: <ul style="list-style-type: none"> Care and Support plan, CP Plan, LAC Care Plan, Pathway Plan and current assessments <p>November – January 2018</p> <ul style="list-style-type: none"> Action plan continues to be in place as an interim measure to capture information and report on PI's. We are still writing the scripts to access reports from WCCIS – this is a problem for most of the local authorities that have gone live on the new system, and we're working with Ceredigion Council in particular to enable us to do this. There appears to be a national issue in relation to the consistency of interpretation and reporting for all Local Authorities against the new Performance Indicator's introduced by the Social Services and Well Being Act (Wales) 2014. A letter dated 25th of October was received from Glyn Jones, Chief Statistician, Welsh Government. This letter highlighted the temporary suspension of National Statistics designation for Social Service publications due to concerns about the quality of the data being reported following the introduction of the new Welsh Community Care Information System (WCCIS). 	<ul style="list-style-type: none"> External Project Manager will commence work with the Service to scope what is required from the System and look at the long term goals in terms of best use of technology for example. A Project Board will be set up. 	<p>Yet to be done</p> <p>Overall, a continuous improvement in performance and outcomes for children/young people.</p> <p>Improvement in staff's level of understanding of performance indicators and the clear link with the quality and timeliness of practice. This leading to a continuous improvement in performance and outcomes for children/young people – one indicator being a reduction in looked after children.</p> <p>Commenced</p> <p>Strengthening the reporting and monitoring arrangements in relation to Performance information.</p> <p>Performance information showing an improvement in performance and brought back into target:</p> <ul style="list-style-type: none"> Assessment Lac Reviews LAC visits CP visits Core group meetings Pathway Plans 	<p>Interim Head of Children Services</p>	<p>March 2017</p>	<p>Oct 2017</p> <p>Because of the Performance Indicators and issues with reporting from WCCIS</p>

CIW recommendations in red - high priority

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	<p><u>September & October 2017</u></p> <ul style="list-style-type: none"> Action Plan in place as an interim measure to report against Performance Indicators until these reports can be extracted from the WCCIS system. We have worked closely with the Corporate Transformation Team on this matter in relation to strengthening the reporting and monitoring arrangements. We are writing the scripts to access reports from WCCIS – this is a problem for most of the local authorities that have gone live on the new system, and we’re working with Ceredigion Council in particular to enable us to do this. We have looked in detail at one of the indicators, % of looked after children seen within statutory time-scales, and suspect that our data collection and analysis may not have been correct, leading to performance that appear worse than they are in reality. Work is progressing to address these issues. <p><u>August 2017</u></p> <ul style="list-style-type: none"> We continue to challenge and support individual workers to improve their practice A significant improvement has been made in relation to LAC review visits for August after reviewing how the indicators were being measured. 86% of visits being held within timescale. We are now prioritising indicators relating to Lac Reviews, LAC visits, CP visits, Core group meetings. We will focus on Timescales, Purpose, Recording and Performance. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> Challenged and supported individual workers to improve their practice Practice Guidance currently drafted for: <ul style="list-style-type: none"> Multi Agency Child Protection Practice Guidance Investigation Thresholds Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups Multi Agency Child Protection Practice Guidance- Registration Thresholds. Service standards are being developed to ensure good practice in relation to key performance that is outside tolerance and targets. 					

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CIW recommendations in red - high priority

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	<p>May 2017</p> <ul style="list-style-type: none"> Commissioning external expertise in May 2017/June to develop the performance framework across both Children and Adult Services An enhanced tracker system will be developed, based on Best Practice elsewhere; combined with a new structure for Children's Services, this will enable Team Managers/Practice Leaders to ensure visits are completed when staff are absent from work (whether on annual leave or absent due to sickness absences). 					
<p>3.4 CIW Recommendation 2: Establish multi-agency quality assurance systems and training arrangements to ensure that thresholds for assessment to statutory children's services are understood by staff and partners and are consistently applied.</p> <p>Development of a multi-agency child protection thresholds protocol incorporating recent Welsh Government guidance.</p> <p>Practice Guidance to be developed between Children Services, Health, Police and Education to ensure clarity in relation to operational arrangements – agreed referral threshold, assessment threshold, improvement in the quality of referrals, attendance at strategy meetings, core group meetings and information sharing.</p>	<p>February – March 2018 See also 2.1 & 2.2</p> <ul style="list-style-type: none"> We have agreed to chair the Gwynedd and Mon Audit and Assurance group (NWSCB) to ensure that this work is taken forward within the relevant governance/partnership arrangements Agreed to increase the capacity of the unit which will support the progress of undertaking multi agency evaluations Present MAPF 1 & 2 to the LDG – evidencing transparency and willingness to learn from each other NWSCB is developing a regional approach to JIT training: we have been part of this work <p>Multi agency meetings continue to be held between Children Services, Police, Education, Health and CAMHS to agree on operational matters. Action Plan to improve Child Protection Conference arrangements were discussed in March and agreement was made on how this will be progressed.</p> <p>November – January 2018</p> <ul style="list-style-type: none"> Service Manager has provided a paper to the Local Delivery Group of the North Wales Safeguarding Children's Board (NWSCB) – in terms of how it can develop its arrangements to establish multi-agency quality assurance systems. It is crucial that developments around this action happens within the governance of the board Undertaken 2 MAPF in the period – which has identified useful lessons learnt on a multi-agency basis. These will be presented to the Local Delivery Group of the NWSCB in this Quarter. 	<p>Next steps</p> <ul style="list-style-type: none"> Develop the Gwynedd and Mon Audit and Assurance group to the new TOR which will ensure we have a multi-agency quality assurance system in place showing an improvement in the quality and timeliness of practice. Referral to the service must be improved 	<p>Yet to be done</p> <p>All staff and key partners have undertaken the identified training and there is evidence of improvement in the level of understanding and application of thresholds for referrals, assessments and child protection. This is as a result of the Practice Guidance being implemented.</p> <p>Information/referrals from Police to Children Services are scrutinised beforehand including a summary providing reason for the referral and the action requested. This will lead to an improvement in the quality of referrals and decision making and significantly reduce the volume of referrals received by Children Services at the front door.-</p> <p>The quality of referrals received by Children Services is vastly improved due to the improvement in the quality of information provided by partners. This will allow staff to focus on establishing positive relationships with families and provide quality interventions.</p> <p>Commenced</p> <p>Multi-agency quality assurance system in place showing an improvement in the quality and timeliness of practice.</p>	Safeguarding and Quality assurance Service Manager	Dec 2016	Dec 2017

CIW recommendations in red - high priority

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	<ul style="list-style-type: none"> • Practice Guidance has been developed – but not approved by the Local Delivery Group of the NWSCB. They have been approved for use within IOACC. • Audit CID 16 with Police – show matters that need to be resolved in terms of the difference between sharing information/safeguarding checks/ making a referral. Report with Police to agree before it is presented to SMT • Multi Agency Practice Guidance approved by the Corporate Safeguarding Board on the 8th of December, 2017. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Progressing with partners (Police, Health and Education) to implement the multi-agency quality assurance system referred to below. • Summary of Q2 report provided above – shows Regular audits show that there is conflicting evidence in terms of the improvement in the quality, consistency and timeliness of child protection enquiries. A distance travelled audit concluded that attendance and recording at Strategy Meetings had improved and that the strategy meetings were timely. However the Case File Audit (July) and a management review concludes that in several cases auditors expressed concern about strategy discussions or meetings: <ul style="list-style-type: none"> • Not always being held in a timely manner – e.g. one was not till 3 weeks after decision made to hold one • Minutes of discussions are insufficient – i.e. too brief • References are made for need for follow up strategy meetings and then there is no evidence that they have been held. • This is reflected in the Thematic Audit Part 4, and a review of Children subject to Child Protection Plans –decision making, delays, and lack of clear plans and follow through being issues identified. • Work underway with Police and Health - multi agency professional forum regarding two management reviews of cases where review of practice was best done on a multi-agency basis – one completed: one in progress. The completed review shows poor information sharing: lack of focus on risk 					

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	<p>and missed opportunities to intervene at an earlier stage.</p> <ul style="list-style-type: none"> • We have undertaken a critical friend review of a case on the CPR register with Gwynedd Council. The completed review shows lack of focus on risk, poor child protection plans and missed opportunities to intervene at an earlier stage to assess risk, engage the family and create change. • A Regional Referral Form has been approved and discussion will occur in the Safeguarding Children's Board around North Wales Police also completing the referral form. • Practice Guidance referrals developed, there will be Regional Training to ensure that thresholds for assessments to statutory children's services are understood by staff and partners and are consistently applied. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • Practice evaluation Report Q1 2017/18 doc Case file auditing completed on the following practice areas: LAC step down audit, Report for placement panel, planned monthly case file audits by Team Managers, Responsive auditing (Stage 2 complaints) and Initial decision making, screening, strategy discussions and meetings and simple assessment. Service User views and evaluation of previously conducted management reviews. Quarter 1 results have been analysed see 2.1 • Progressing with partners (Police, Health and Education) to implement the multi-agency quality assurance system referred to below. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • A multi-agency quality assurance framework has been developed for approval between the Service and the Police, Service and the Health Board and the Service and Education. • The results of the audits undertaken in Quarter 1 will be analysed in quarter 1 and will be presented to the Local Delivery Group for quality assurance. • Guidance currently drafted for: <ul style="list-style-type: none"> • Multi Agency Child Protection Practice Guidance Investigation Thresholds • Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups • Multi Agency Child Protection Practice Guidance- Registration Thresholds. <p>Set of guidance likely to be ready for October.</p>					

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CIW recommendations in red - high priority

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	<p>May 2017 Agreement provided by partners to develop and support/prioritise:</p> <ul style="list-style-type: none"> • Multi agency quality assurance systems • Training for Children Services staff and partners on thresholds for assessment and partners roles and responsibilities. • Development of a multi-agency child protection threshold • Practice Guidance to be developed between Children Services, Health, Police and Education to cover all the areas were development work is required. 					
<p>3.5</p> <p>CIW Recommendation 11: The quality and consistency of record keeping should be improved; all staff and managers should ensure that their records are of good quality, are up to date and are systematically stored.</p> <p>Training to be provided to staff on expected standards of record keeping.</p> <p>Record keeping Practice guidance to be developed to ensure consistency and quality.</p>	<p>November – January 2018</p> <ul style="list-style-type: none"> • This work has been redefined into a project to look at development of WCCIS • Record Keeping Standards will be agreed as part of the work of agreeing practice standards. A draft is available in terms of recording. Has been submitted for agenda at SMT <p>September & October 2017</p> <ul style="list-style-type: none"> • This work has been developed into creating a Operational model within WCCIS (MP Project lead). We do have some useful products – glossary of terms, jargon free session, draft standards which could be developed • Recording performance from Q2- The overall evaluation shows that recording practice remains inconsistent although there is evidence of improvements in some audits. <p>August 2017</p> <ul style="list-style-type: none"> • As part of the registration as Social Workers; staff have the responsibility to ensure good quality timely recording. • Regular case file audit to be undertaken to monitor the quality and timeliness of record keeping on individual cases. <p>June/July 2017</p> <ul style="list-style-type: none"> • Record keeping continues to be inconsistent • Repeat audit of case files in progress to establish if there is improvement in the quality of recording. 	<ul style="list-style-type: none"> • Training to be provided for staff around best practice in record keeping and the Practice Guidance. 	<p>Commenced Case file audits by Managers shows an improvement in the quality and consistency of record keeping.</p> <p>Support and guidance is being provided to staff through regular and quality supervision on how to improve the quality of record keeping.</p>	<p>Safeguarding Quality Assurance Manager and Service Managers</p>	<p>January 2017</p>	<p>September 2017 Need consistency of where staff are recording</p>

CIW recommendations in red - high priority

4. Social workers working proactively with families to manage risk- spending much more time working alongside families helping them to change so that the family is a safe place for their children.

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<p>4.1 Ensuring social work intervention is aligned with the different way of working with families under the new Act be focused on what matters, building on people’s strengths and enabling their involvement in developing ways to address need and achieving outcomes. Training being provided focusing on:</p> <ol style="list-style-type: none"> 1. Collaborative Communications’ course on strengths based conversations. 2. IFSS interventions 3. Culture change 4. Measuring performance 5. Motivational interviewing 	<p><u>November – January 2018</u></p> <ul style="list-style-type: none"> • Feedback/learning received on the changes that have happened in Social Work practice following the training staff have had during the year (see 1.4 for a list of training courses held). The feedback received shows that staff are putting what they’ve learnt into practice in their day to day work. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Collaborative Communications mop up course to be held on the 28th and 29th of September. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • We have continued to support staff to work with families focusing on their strengths, having a ‘What matter conversation’, advocacy requirements and co-production. • We are seeing evidence of the workforce working directly with families leading to improved outcomes – as we have seen a significant reduction in the children on the CP register from 102 in March 2017 to 56 on the register on 31st of August, 2017, 55% decrease. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • The training sessions below have been held. • We continue to focus on Social Work intervention being aligned with the different way of working with families under the new Act such as: What matter conversation, advocacy requirements and co-production, all of which continues to be a challenge for children’s services as families are reluctant to engage. <p><u>May 2017</u></p> <ul style="list-style-type: none"> • Delivery of Motivational interviewing training and Resilient Families approaches currently happening. • Collaborative communications training being held in March for all Managers. • IFSS interventions training provided on an annual basis. • Culture change measuring performance training for Managers being held in March 		<p>Yet to be done Staff report that they feel they have the skills and knowledge and are able to undertake more direct interventions with families.</p> <p>Information that more children being supported to continue living at home with their families.</p> <p>Positive feedback from service users regarding the quality of intervention making a difference to their lives.</p> <p>Commenced Evidence that the workforce is skilled in working directly with families leading to improved outcomes - an example being a reduction in the children on the CP register.</p>	Senior Management Team	Ongoing	March 2018

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CIW recommendations in red - high priority

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 70</p>	<p>4.2 Review the current service structure to address the need for improved preventative and intensive interventions.</p> <p>Establishing smaller Teams with Practice Leaders to provide effective support and supervision to staff.</p>	<p><u>November – January 2018</u></p> <ul style="list-style-type: none"> The new structure is in place with Practice Leaders located with their Practice Groups. Early indication is that this is working well, staff report that they feel supported in the smaller groups. Continued development of the support and embedding of this structure will continue. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> The new Service structure was implemented on the 4th of October were the 8 new Practice Leader’s took responsibility for their Practice Groups. There is further work to be undertaken to complete the restructure, including reviewing the arrangements for the Child Placement Team, making the best use of Support Workers to support families, as well as ensuring that administrative support is appropriate for Practice Groups to effectively carry out their statutory responsibilities. <p><u>August 2017</u></p> <ul style="list-style-type: none"> Two Senior Managers (Early Intervention and Intensive Intervention) in post <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> New service structure implemented. We continue to appoint to posts to establish smaller teams with practice leads. We have continued to review our prevention and early intervention services around the Families First programme. <p><u>May 2017</u></p> <ul style="list-style-type: none"> Staff consultation period comes to an end on 24.2.17. Analysis of comments and feedback and report provided by IHOS with recommendations. Final decision and timescales to be agreed and shared in staff Conference on 27.3.17. 	<ul style="list-style-type: none"> Review of Placement Team will commence in February in consultation with staff. 	<p>Yet to be done</p> <p>The new service structure will support and significantly strengthen the delivery of preventative services and intensive interventions an example being a reduction in children becoming looked after.</p> <p>Manager’s report that the new service structure increases their capacity to provide professional leadership to support the workforce through regular and quality supervision.</p> <p>Staff report they are adequately supported and supervised by their Managers in carrying out their responsibilities.</p> <p>Case file audit shows a marked improvement in practice quality as result of clear pathways and systems within the Service and through regular supervision.</p>	<p>Senior Management Team</p>	<p>Jan 2017</p>	<p>May 2017</p>
	<p>4.3 Implementation of an Information, Advice and Assistance (IAA) model for Anglesey</p>	<p><u>November – January 2018</u></p> <ul style="list-style-type: none"> A Full Time Engagement Officer commenced with Teulu Môn in January, which has strengthened its capacity to 3.5 workers FTE in that team. Teulu Môn were visited on 29.01.18 by Jackie Drysdale of Social Care Wales in order to observe the team and consider he need for a Wales wide competency framework. Jackie was impressed by what she saw on commented that “the team was committed”; “showed great resilience against some of the frustrations”. Work will continue to develop that team in terms of skills and IT support. 		<p>Yet to be done</p> <p>Service users report ‘ease of access to services’ and good customer care.</p> <p>Improved coordination of services and strategies for early intervention and prevention is shown in a reduction in children being looked after.</p> <p>There is a reduction in duplication of effort through the current running of multiple ‘front doors’</p>	<p>Service Manager</p>	<p>Dec 2016</p>	<p>April 2017</p>

CIW recommendations in red - high priority

September & October 2017

- IAA service, known as Teulu Môn, is now managed since the beginning of October, by 3 Practice Leaders and a Service Manager for Early Intervention and Prevention.
- Teulu Môn engagement officers are now able to provide an enhanced first point of contact – with the opportunity for a more structured conversation to support families to access solutions within their own circle of resources/community resources.
- Funding from Families First will strengthen our IAA services with recruitment for additional 1.5 Engagement Officers post
- Continued to support our staff to ensure they consistently have good quality conversations as some officers have more confidence and skills in this approach.
- Arrangements for internal workshops for staff to practice the ‘What Matters’ with Jackie Drysdale, Improvement Development Manager for Social Care Wales.

August 2017

- Engagement Officers commenced in post
- Permanent Early Intervention and Prevention Service Manager in post

June/July 2017

- Interim Engagement Manager in post
- Adverts out for the Engagement Officers, closing date of 12/07/17
- Promotional materials signed off
- A number of information sharing events have been scheduled such as the Eisteddfod, Sioe Môn and a number of other community based fun days/carnivals etc.
- Multi agency audits (Health, Education and Police) in relation to the quality of referrals received at Teulu Môn
- Continued work with partner agencies in relation to information sharing and joint working with Teulu Môn
- 2 week analysis started 10/07/17 in relation to all CID16’s that are received at Teulu Môn in order to ensure that appropriate referrals are made to the Council and to explore information sharing.
- Work will commence to establish an Information Sharing Protocol.

CIW recommendations in red - high priority

		<p>May 2017</p> <ul style="list-style-type: none"> • Creation, sign off and translation of all policies, protocols, thresholds and their associate templates required for service delivery. • Agreement of measures of success • Scoping of ICT needs • Agreement of training requirements. • Team name ‘Teulu Mon’ Social Media, telephone number agreed. • Training of staff commenced • FIS due to move over to HQ late January • Logo for the new service in design. • Project board meeting monthly • Marketing task and finish group meeting and developing marketing outputs for the service. • New team embarking on a period of ‘team building’ • Children Services staff and key partners are provided with regular updates on the changes within the Service and through Information Sessions. • Consultation on revised structure completed. • A single point of access for all child and family related enquiries established and live by 03.04.17 				
<p>4.4</p>	<p>Development of a Corporate Prevention Strategy; the LA must provide a range and level of preventative services across Children and Adult Services.</p> <p>Deliver an integrated service and provide early help and support that effectively delays the need for care and support.</p> <p>The population assessment will assist the local authority to identify preventative services required.</p> <p>Strengthen the commissioning function within Children and Adult Services to support us to deliver this agenda.</p> <p>CIW recommendation 1. Develop a framework for the provision of preventive work with children and families that will deliver an integrated service and provide early help and support that effectively delays the need for care and support.</p>	<p>November – January 2018</p> <ul style="list-style-type: none"> • The Assistant Chief Executive is responsible for driving work forward in terms of the Corporate Prevention Strategy. • The Resilient Families Team are working with eight families • Following the Population Needs Assessment, the Regional Plans will be available from April 2018 identifying what range of services will need to be provided. <p>September & October 2017</p> <ul style="list-style-type: none"> • Local Authority’s Corporate Prevention Strategy group led by the Director for Social Services meets on a regular basis. The Group presented a paper to the Senior Leadership Team outlining what is required to ensure the successful delivery of a prevention strategy and work is continuing to move this forward. • The Local Authority has prioritized the development of corporate preventative services and support for families as part of its Plan for 2017 – 2022 in <i>‘Providing robust early intervention and prevention services to ensure that children are safe and supported in order to minimize harmful childhood experiences.’</i> 	<ul style="list-style-type: none"> • Meaningful engagement and consultation with families, children, young people and service users. • We will consult with service users and citizens about the types of services they require. 	<p>Yet to be done We consulted with service users and citizens about the types of services they require.</p> <p>Re-commissioning of Services in line with WG guidance by using local data, views of service users and the Population Needs / Local Area Plans leads to improving outcomes for children and young people and their families (reduction in looked after children).</p> <p>Reduction in the number of children starting to become looked after and an increase in children being supported to live at home with their families.</p> <p>Commenced The Local Authority has a clear vision for early intervention and prevention services for Anglesey.</p> <p>‘Teulu Mon’ the new IAA service for Anglesey is operational and is a key part of the early intervention / prevention service.</p>	<p>Dr Caroline Turner, Director of Social Services</p> <p>Interim Heads of Children Services</p> <p>Alwyn Jones, Head of Adult Services</p> <p>Dafydd Bulman, Strategic Transformation and Business Manager</p> <p>Melanie Jones, Service Manager</p>	<p>Jan 2017</p> <p>Oct 2017</p>

CIW recommendations in red - high priority

<p>CIW Recommendation 12: The local authority and partners should work together to develop a cohesive approach to the collection and analysis of information about the needs of communities, that includes the voices of children and families. This should be used to inform the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance services, the preventive sector and statutory services.</p>	<ul style="list-style-type: none"> • A clear vision established for early intervention and prevention services and a draft strategy has been developed and shared with CIW. • Consultation with staff and partner agencies has occurred and we have arranged further consultation sessions with community groups and with families, children and young people who will have insight into what has and what has not worked in the past and what preventative services should be developed in the future. <p>August 2017</p> <ul style="list-style-type: none"> • Draft Service Prevention Strategy in place • Agreement given by WG to fund additional 3 family support staff within TAF and an additional 1.5 Engagement Officers for Teulu Môn. This will strengthen the preventative services to delay the need for care and support. • The Local Authority has a clear vision for early intervention and prevention services for Anglesey. A brief for consultation with the children and families and partner agencies community groups of Anglesey has been drafted. A draft strategy has been formed. This has been formed with the knowledge that we have knowledge around the needs of the families of Anglesey through the Local needs assessment, our own data and previously commissioned research by Cordis Bright. Work is being done on forming links with community groups such as Caru Amlwch. Discussions have taken place with current providers around how they may provide services in a different way in the future. The department's strategy for prevention will feed into the process of the wider prevention strategy for the Local Authority. Identifying ACE's will form a part of our strategy. Links have been made with Andrew Bennet (Public Health Research, Training and Consultancy) who has been commissioned by public health Wales to introduce ACE's aware practice in G.P surgeries on the island. Discussions have been held to include this field within schools in the hope that we can develop ACE aware schools in Anglesey. Links have been made with community groups who are interested in using ACE's in their approach. • Audit of TAF cases has commenced. This has been done to improve our understanding of the families we are working with. We need to ensure that the correct families are accessing the service. At this early stage of the audit it looks as if cases can be closed in TAF and sign posted for families to access specific targeted services. 			<p>Llyr Ap Rhisiart, IFSS</p>		
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CIW recommendations in red - high priority

Page 4

June/July 2017

- All commissioned services under the Families First programme are being reviewed
- Consultation with staff and partner agencies in relation to identifying the gap in service provision.
- Application for redistribution of funding for Families First services sent to WG.
- Application for additional Families First Parenting Grant submitted by 14/07/17.
- Funding approved for a corporate Prevention Manager to ensure the prevention strategy is implemented across the Local Authority.

May 2017

- A review of current preventative service funded by the Welsh Government will be undertaken in early 2017.
- Re-commissioning of Services in line with WG guidance by using local data and Population Needs Assessment leading to quality early intervention outcomes.
- Families' First grant, commissioning, coordination and monitoring officer has transferred to Children Services by April 2017.
- Review and redesign of 'Short Breaks' offered through the Specialist Children's Service to support families

5 Enhancing family support services targeted towards providing intensive and speedy support at point of family breakdown aimed at keeping the family together.

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT & EVIDENCE	LEAD OFFICER	START	END
5.1	Review Children Support Services to focus on: <ol style="list-style-type: none"> Supervised contact Freeing up capacity to undertake preventative work Role of Parenting Officer 	<p>February-March 2018</p> <ul style="list-style-type: none"> We are currently reviewing the: Children Support Services Placements Team and Children Specialist Service Staff will be consulted on the proposals being put forward and they will be provided with advice from HR on any changes that could have an impact on their current roles and responsibilities. <p>November – January 2018</p> <ul style="list-style-type: none"> Due to competing demands on Senior managers this review has been put back, however, it is envisaged that this review will be completed by end of March 2018. <p>September & October 2017</p> <ul style="list-style-type: none"> Reviewing Support Services has commenced making the best use of Support Workers to support families. 	We will be reviewing Children Support Services in Feb 2018 to focus on: <ul style="list-style-type: none"> Supervised contact Freeing up capacity to undertake preventative work Role of Parenting Officer Work will start on this 	<p>Yet to be done</p> <p>The service is making better use of its resources and focusing on supporting children to remain living within their families.</p> <p>Provide 1:1 or/and Group parenting support to parents to strengthen the standard of care their children receive.</p> <p>More children being supported to live at home.</p> <p>Reduction in the number of children becoming looked after.</p>	Intensive Intervention Service Manager	Jan 2017	March 2018

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CIW recommendations in red - high priority

		<p>June/July 2017</p> <ul style="list-style-type: none"> As part of the restructuring of the service initial 'Resilient Families' work has started to reduce the need of supervised contact by support workers this does free up capacity to undertake more intense work with children and families to ensure the children are being supported to live at home. <p>May 2017</p> <ul style="list-style-type: none"> Work has commenced on reviewing the cases where contact does not need to be supervised by the local authority. This will enable us to understand the available capacity that could be transferred to the Resilient Families Team. 					
5.2	Implement Resilient Families Team	<p>February-March 2018</p> <ul style="list-style-type: none"> The Team is making positive progress in supporting children to remain with their families (anonymised): <p>Family Story 1: Tom is a primary school aged boy who lives with his family. Tom and his family receive support from the Specialist Children's Service due to his and his parents' complex learning difficulty needs. There were concerns held by the Local Authority about the effect of Tom's parents' arguments on him. The arguments would be to the extent that Police would be called to attend the property by neighbours. Additionally, there were occasions when Tom would return home from school or sessions with his support worker but no appropriate adult would be home to care for him. These matters caused Tom to experience a mixture of aggressive behaviours and separation anxiety; in turn making it harder for his parents to understand his needs and how to respond to them (because of their own level of understanding and capacity to parent).</p> <p>Consideration was being given to Tom being placed on the Child Protection Register with the likelihood that unless changes were made the matter would very quickly be progressed to Public Law Outline stages. However, it was also recognised that there may be the need for Tom to be removed from his parents' care in an acute crisis. The Resilient Families Team worked with the family during an intensive 8 week period (Stage 1). As a result, Tom remains at home with his parents, there have been a reduction in the number of occasions when the family or neighbours report incidents of conflict, no further police reports during the period of involvement, and Tom displays less aggression and anxiety in the home; now feeling able to sleep in his own bed rather than his</p>	<ul style="list-style-type: none"> Training and skills development programme to be formulated for the new Team. Work to be done to establish how the Resilient Families grant will be used. 	<p>Yet to be done</p> <p>Performance information shows there is a direct link between the intervention of this team and the number of children and young people successfully re-habilitated back home.</p> <p>Performance information shows a direct link between the work of the team and the reduction of need for costly foster/residential placements.</p> <p>The team can evidence focused intervention based on prevention and de-escalation through quarterly reports.</p> <p>Case file audits shows that the services provided are tailored around the individual family's needs, leading to positive outcomes for children and young people.</p> <p>Commenced</p> <p>The new team is operational and providing intensive support to children, young people and their families in order to remain living with their families.</p>	Alex Kaitell, Service Manager	Jan 2017	May 2017

CIW recommendations in red - high priority

Page 76		<p>parents' room. Progress was so dramatic it was decided the family did not require ongoing 'Stage 2' support as the ongoing support from the Specialist Children's Service was sufficient to sustain the changes.</p> <p>Family Story 2: 3 children who live with their mother. The parents separated; both parents had properties in which their hoarding behaviours made the households unsafe. The children had been exposed to domestic abuse when their parents had lived together. This affected the children's behaviours; one child became an emotional carer for the mother, another child became withdrawn, and another became aggressive and emotionally dysregulated for hours at a time. The children were placed on the Child Protection Register, and legal proceedings through Court began, with the plan being that the children be placed in foster care. The Resilient Families Team worked with the family (mum and dad separately) during an intensive 8 week period (Stage 1). The hoarding in the children's home no longer occurs. Mum says she feels more confident in helping the children understand and manage their emotions; resulting in less times of parent-child conflict and of the children feeling distressed. The children say they feel happier and enjoyed the help received. Whilst dad was not able to make those same changes to his hoarding behaviours (meaning the children cannot currently stay with him overnight), he does now manage to maintain regular positive unsupervised contact with his children through the ongoing support and prompts of the Resilient Families Team. The family now receive Stage 2 support (ongoing for up to a year) to help them consolidate and sustain the changes made.</p> <p>November – January 2018</p> <ul style="list-style-type: none"> The Resilient Families Team is now operational and are currently working with 9 individual children from 8 families. <p>The team are working with parents to support them in able to care for their children and avoid them potentially coming into care; but are also working with young people who are in care and a plan of intensive rehabilitation is in place for those young people. We are hoping to produce a report in May 2018 to highlight some of the work completed by this team.</p>				
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CIW recommendations in red - high priority

Page 77		<p><u>September & October 2017</u></p> <ul style="list-style-type: none"> The Resilient Families Team is now fully staffed and currently working with 8 families to prevent family breakdown and to support children living at home. Team has three core aims: <ul style="list-style-type: none"> Prevent - preventing children becoming Looked After Reduce - reduction in the nature of care accommodation provided from residential care to foster care Reunify - reunifying looked after children with their families. The Practice Leader for this Team has recently won a national award by the British Association of Social Worker's (BASW) on her work in developing support for care leavers and arrangements to support foster carers to prevent placement breakdown. <p><u>August 2017</u></p> <ul style="list-style-type: none"> Resilient Families Team appointed and all will be in post by the beginning of September. Additional grant funding of £96,000 by WG has been provided to further support the establishment of the resilient families' team. Further guidance sought from WG in relation to how this grant can be used. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> Recruitment to practice leader, Social Work and Support Worker posts have been advertised, interviews will be held by the end of July. As part of the restructuring of the service initial 'Resilient Families' work has started to reduce the need of supervised contact by support workers this does free up capacity to undertake more intense work with children and families to ensure the children are being supported to live at home. <p><u>May 2017</u></p> <ul style="list-style-type: none"> Work has commenced on identifying the children and young people where intensive work can be undertaken to enable them to return home safely. New Job Descriptions have been created, with recruitment to posts starting late March 2017. 					
5.3	<p>Improve the local authority's responsibility as a Corporate Parent for looked after children. Areas of focus:</p> <ul style="list-style-type: none"> Review the leaving care (after care) service Creation of a 'Supported Lodgings Policy' 	<p><u>February-March 2018</u></p> <ul style="list-style-type: none"> LAC strategy is currently being developed and will be available for consultation towards the end of April. <p><u>November – January 2018</u></p> <ul style="list-style-type: none"> One Corporate Parenting Panel meeting on the 11th of December has taken place since the agenda of the panel 	<ul style="list-style-type: none"> Decision needs to be made regarding additional WG grant funding around work experience and apprenticeships 	<p>Yet to be done</p> <p>Clear Pathway planning does not provide goals on the plan into adulthood for the young person.</p> <p>Care leavers reporting that they feel they were listened to and supported by the authority in their transition to leaving care.</p>	Intensive Intervention Service Manager	Jan 2017	March 2018

CIW recommendations in red - high priority

Page 78	<ul style="list-style-type: none"> • Agreement of a 'Leaving Care Financial Policy' • Work experience and apprentice arrangements within the Council and Health Board • Free/Discounted entry to leisure services and library services • Appoint a Local Member as a Looked after Children Champion 	<p>has been re-structured. This gives panel members the time to scrutiny data provided and have a meaningful discussion in relation to corporate panel issues.</p> <ul style="list-style-type: none"> • The Children Looked After and Care Leaver Strategy continues to be work in progress and it is hoped a draft Strategy can be produced to go out to consultation during April 2018. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Corporate Parenting Panel in September approved the action plan to develop a "Children Looked After and Care Leavers Strategy" for a three year period 2018 - 2020. This strategy would provide the framework to ensure we fulfil our duties and responsibilities, as corporate parents of Children Looked After. • By March 2018 we aim to re-launch the Isle of Anglesey County Councils vision in relation to Corporate Parenting. • Recruiting for an additional Personal Adviser post for Looked after Children that is funded by the St David's Day fund and the Support for Care Leavers grant. This will strengthen our service to provide timely support for care leavers to help them achieve their ambitions and make a successful transition to adulthood and independent living. • Children's Services will be involved in a new initiative within the Council to offer paid work experience to young people to prepare them for work; up to a 12 week paid period with the Council. Looked after young people will be prioritized with an opportunity for them to attend a formal induction, attend relevant in house courses and work on a specific projects within the service. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • Service Manager for Intensive Intervention has prepared a report for the corporate parenting panel with options on how to strengthen the role of the corporate parenting panel. • WG's St David's Day grant and the Support for Care Leavers grant received for £31,000. Work has progressed with HR colleagues to identify work placements opportunities within the Local Authority. Aftercare project group will drive this work forward. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • Corporate Parenting Panel met on 10/07/17, the membership, agenda and ToR to be reviewed and to be inclusive of young people. • Corporate Parenting Event for local members and senior officers planned for 20/07/17 		<p>Children who are looked after report they feel they have influence on how services are provided for them.</p> <p>Commenced Clear guidance in place for Children Services staff and key partners through policies, procedures and training in relation to improving outcomes for looked after children.</p>		
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Children Services Improvement Plan Version 7.0 February - March 2018

CIW recommendations in red - high priority

		<ul style="list-style-type: none"> • Appointment of a local Member as a Looked After Children Champion. • Work ongoing in preparation for the STARS Awards Ceremony in November for looked after children to celebrate their successes. <p>May 2017</p> <ul style="list-style-type: none"> • Aftercare project group established with an agreed action plan. • Aftercare and housing protocol approved in February 2017 • Discussions with HR and Leisure have taken place regarding work experience and leisure services. • Early draft of the Aftercare financial policy. • Consideration in having a Corporate Parenting Event for local members and senior officers to agree on strengthening current arrangements. • Consultation group established with looked after children were they are able to provide their views on the development work required. 					
5.4 Page 79	Develop and implement the Role of Director of Social Services Protocol reflecting on the Social Services and Well-Being Act 2014 - Part 8 Role of the Director of Social Services.	<p>November – January 2018</p> <ul style="list-style-type: none"> • The protocol has been reviewed and a draft version will be presented to the Director of Social Services mid February. <p>September & October 2017</p> <ul style="list-style-type: none"> • Review of internal protocol in relation to the overarching role of Director hasn't progressed due to capacity issues. <p>June/July 2017</p> <ul style="list-style-type: none"> • Review of internal protocol in relation to the overarching role of Director hasn't progressed due to capacity issues. <p>May 2017</p> <ul style="list-style-type: none"> • Review of internal protocol in relation to the overarching role of Director. • Work will commence on strengthening the role of Director of Social Services following the May 2017 local elections. 		Yet to be done Strengthening the role of Director of Social Services within the Local Authority.	Director of Social Services Dafydd Bulman, Strategic Transformation and Business Manager	Oct 2017	Feb 2018

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ISLE OF ANGLESEY COUNTY COUNCIL Scrutiny Report Template

Committee:	Corporate Scrutiny Committee
Date:	4 th June, 2018
Subject:	Children's Services Improvement Panel
Purpose of Report:	Progress update on the work of the Children's Services Improvement Panel
Scrutiny Chair:	Cllr Aled Morris Jones
Portfolio Holder(s):	Cllr Llinos Medi Huws
Head of Service:	Caroline Turner, Assistant Chief Executive / Fon Roberts, Head of Children's Services
Report Author:	Anwen Davies, Scrutiny Manager
Tel:	01248 752578
Email:	AnwenDavies@ynysmon.gov.uk
Local Members:	Not applicable

1 - Recommendation/s

R1 The Corporate Scrutiny Committee is requested to note:

- Progress made to date with the work of the Children's Services Improvement Panel both in terms of achieving its work programme and preparation work taken to measure impact and added value
- That all work-streams pertaining to the Service Improvement Plan appear to be on target thus far. This was recently reported to the Local Authority by Care Inspectorate Wales (CIW)¹ following their assessment of the Council's self-evaluation of progress to date
- The ongoing development programme for Panel members much of which is delivered in-house

R2 Escalate the following matter for the Corporate Scrutiny Committee to be aware:

- Although good progress has been made on implementing the revised staffing structure, some social worker posts remain filled by agency workers. This is being addressed by developing our own experienced social workers by supporting experienced support workers to qualify and by recruiting newly qualified social workers. The actions taken to address this should be noted.

2 – Link to Council Plan / Other Corporate Priorities

Direct link with the Council Plan / transformation priorities. The Panel's consideration of the service improvement plan for children's services will provide assurance to the Executive that the Council are responding in a robust manner to the recommendations of the recent CIW report on children's services (dated March, 2017) and that steps are in place to mitigate any risks.

¹ Correspondence dated 11/01/18 from Care Inspectorate Wales: Review of Progress in implementation of Children's Services Improvement Plan

3 – Guiding Principles for Scrutiny Members

To assist Members when scrutinising the topic:-

3.1 Impact the matter has on individuals and communities [**focus on customer/citizen**]

3.2 A look at the efficiency & effectiveness of any proposed change – both financially and in terms of quality [**focus on value**]

3.3 A look at any risks [**focus on risk**]

3.4 Scrutiny taking a performance monitoring or quality assurance role [**focus on performance & quality**]

3.5 Looking at plans and proposals from a perspective of:

- Long term
- Prevention
- Integration
- Collaboration
- Involvement

[**focus on wellbeing**]

4 - Key Scrutiny Questions

At the request of the Panel:

1. Does the Committee have any views on the priority of the work streams included in the Panel work forward programme?
2. Are the actions of the Panel thus far sufficiently robust and at pace?

5 – Background / Context

1. BACKGROUND

1.1 Members will already be aware that scrutiny has developed over the past few months through the work of 3 scrutiny panels namely - Finance Scrutiny Panel, Schools Review Scrutiny Panel and the Children's Services Improvement Panel. This report summarises progress made to date as regards the **Children's Services Improvement Panel**.

1.2 Panel Governance Arrangements

As previously reported to this Committee², robust governance arrangements are in place to underpin the work of the Panel and it is the intention to endeavour to continue to convene monthly Panel meetings during 2018. A process is in place for quarterly progress reporting by Councillor Richard Griffiths, as the Corporate Scrutiny Committee representative on the Panel.

2. FOCUS OF WORK OF THE CHILDREN'S SERVICES IMPROVEMENT PANEL

2.1 The Children's Services Improvement Panel has now met on 10 occasions, namely –

- 17th July, 2017
- 21st August, 2017
- 25th September, 2017

² Corporate Scrutiny Committee convened on 4th September and 13th November, 2017



- 26th October, 2017
- 28th November, 2017
- 19th December, 2017
- 23rd January, 2018
- 26th February, 2018
- 20th March, 2018
- 25th April, 2018

2.2 This report focuses on the work of the Panel for the period February – April, 2018:

- **Service Improvement Plan (SIP)** – an overview of the Service Improvement Plan at each meeting of the Panel to ensure that the entire programme remains on target. Also, to enable the Panel to identify any early indication of slippage or lack of progress. The Panel requested progress reports on the following aspects as part of its ongoing monitoring of the SIP:
 - i. Part 4 Complaints: professional workers
 - ii. Staff supervision arrangements
 - iii. Staffing structure / workforce issues and impact of improvements on practice
 - iv. Discussions with North Wales Police
 - v. Practice Improvement Plan and Standards

Good progress reported. Also, it was noted that some social worker posts continued to be filled by agency staff and which needed to be filled on a permanent basis.

Detailed consideration was given by the Panel to 2 themes in the Service Improvement Plan:

-  **Theme 4³ (SIP)** – social workers working proactively with families to manage risk – spending much more time working alongside families helping them to change so that the family is a safe place for their children
-  **Theme 5⁴ (SIP)** – enhancing family support services targeted towards providing intensive and speedy support at point of family breakdown aimed at keeping the family together.
- **External evaluation** – it was noted that the Independent Support Team would be reporting back to the Panel in July⁵ on the findings of their review of progress in implementing the Service Improvement Plan (SIP).
- **Laming Visits** – a robust reporting process now in place for Laming Visits with the objective of bringing the Panel closer to cases, creating the conditions for Members to appreciate the complexity and challenges of the responsibilities of the Service eg by meeting front line staff to discuss casework in general. Panel Members reported back on the January and February Laming Visits under the strengthened governance framework. These Visits focused on:
 - i. Safeguarding and Quality Assurance Team (23/01/18) – Team role, with particular focus on the Team contribution to Theme 2 of the Service Improvement Plan (quality assurance of practice and case recording)

³ Meeting of the Children's Services Improvement Panel convened on 25th April, 2018

⁴ Meeting of the Children's Services Improvement Panel convened on 20th March, 2018

⁵ Meeting of the Children's Services Improvement Panel to be convened on 4th July, 2018

- ii. Respite facility for children with disabilities (Bryn Hwfa) (16/02/18) - site visit, contribution of the facility in supporting children and young people with significant care needs.

In the April meeting, the Panel undertook a review of arrangements and examined the impact of Laming Visits during 2018/19. The rota for monthly Visits during 2018/19 was confirmed. During its deliberations, the Panel noted that Laming Visits had 2 main purposes, namely:

- ✚ Opportunity for Members to understand Children's Services in order to be able to effectively scrutinise and hold officers to account
- ✚ Opportunity for staff to gain access to Elected Members and express their opinions.

- **Partnership working** – a detailed discussion with the Head of Learning on the contribution of the Learning Service to the children's services improvement programme. Reference was made to the need to further strengthen partnership working with children's services particularly around the following areas:
 - i. Budgetary pressures in both children's services and the learning service concerning children and young people in out of county residential placements
 - ii. Contract management in order to ensure value for money
 - iii. Benefits of working arrangements based on school catchment areas
 - iv. Fully realising the potential of the Additional Needs and Inclusion Service in supporting children and young people with complex needs
- **Performance Management** – the Panel also considered a number of performance related matters:
 - i. Looked After Children data – providing detailed analysis of the LAC population and impacts for service planning/modelling and provision to meet future care and support needs of children and young people
 - ii. Financial performance and the input of the Finance Scrutiny Panel
 - iii. Performance against key performance indicators (KPIs) – including corporate scorecard KPIs for children's services, staff absence levels due to sickness and complaints management

It is the intention of the Panel to ensure ongoing consideration to performance related matters in order to challenge and seek assurance that service improvements have an impact on performance.

- **Training / awareness raising sessions** – incorporated into the Panel work programme, these sessions are convened at the beginning of each Panel meeting. Topics covered over the last few months included – Intensive Intervention Service (all aspects of the service including protocols, processes, scope of work of the 4 teams - Resilient Families Team; Child Placements; After Care, Support Services); Protocol for the role of the statutory Director of Social Services (requirements, scope and local arrangements).

3. MEASURING OUTCOMES AND IMPACT OF THE PANEL

3.1 Context

Capturing and assessing the impact of Scrutiny is a challenge to achieve as the outcomes of scrutiny activities are not always tangible and often do not lend themselves to being measured in a systematic way. Also, it is not easy to measure the effectiveness of Scrutiny's ability to influence decision makers through discussion and debate. The journey of the Children's Services Improvement

Panel is however an example of where the input of scrutiny has added value and influenced the way in which proposals have been implemented by the Council.

3.2 Children's Services Improvement Panel

Scrutiny of the improvement journey in children's services has matured over the past year, through the input of the Children's Services Improvement Panel. Care Inspectorate Wales have commended this development journey:

"....We recognise the continued corporate commitment provided to ensure that children's services improve and the willingness to reach a shared understanding of the challenges being faced. Similarly, the increased scrutiny and challenge from elected members has been a positive development...."

This work-stream has thus far resulted in the following positive outcomes:

- A team of Members , drawn from across the political parties and groups, who have developed a high level of knowledge about the complexities of children's services and a level of expertise in the service area
- Development of a model of working that focuses on a smaller group, encouraging good attendance and teamwork
- Creating conditions that are conducive to effective Scrutiny eg there has been a tangible improvement in the level and depth of questioning by the Panel
- Scrutiny activity is well planned, efficient and objective and based on evidence from a range of sources.

Panel Members will undertake a self-evaluation at the next meeting of the Panel⁶ in order to:

- i. measure the impact of the Panel on the improvement programme in Children and Families' Services
- ii. enable Panel Members to grade the RAG status of Theme 1.5 of the Service Improvement Plan for children's services. This is concerned with progress to date against 2 recommendations of the recent Care Inspectorate report⁷ which directly relate to the role of Members.

The outcome of this self-evaluation exercise will be reported to the Scrutiny Committee in due course.

4. MATTERS TO BE ESCALATED FOR CONSIDERATION BY THE PARENT COMMITTEE

The following matters be escalated for consideration by the Corporate Scrutiny Committee:

- 4.1 Although good progress has been made on implementing the revised staffing structure, some posts remain filled by agency workers. This is being addressed by developing our own experienced social workers by supporting experienced support workers to qualify and by recruiting newly qualified social workers. The actions taken to address this should be noted.
- 4.2 The Corporate Scrutiny Committee is requested to come to a view about the robustness of the Panel's monitoring thus far.

⁶ Meeting of the Children's Services Improvement Panel to be convened on 24th May, 2018

⁷Inspection of Children's Services: Isle of Anglesey County Council (March, 2017)

6 – Equality Impact Assessment [including impacts on the Welsh Language]

N/A

7 – Financial Implications

N/a

8 – Appendices:**9 - Background papers (please contact the author of the Report for any further information):**

Anwen Davies, Scrutiny Manager, Isle of Anglesey County Council, Council Offices,
Llangefni. LL77 7TW

Cllr Richard Griffiths

**Corporate Scrutiny Committee representative on the Children's Services Improvement
Panel / Children in Care Champion**

Date: 23/05/18

ISLE OF ANGLESEY COUNTY COUNCIL Scrutiny Report Template	
Committee:	Corporate Scrutiny Committee
Date:	4 th June, 2018
Subject:	Finance Scrutiny Panel
Purpose of Report:	Progress update on the work of the Finance Scrutiny Panel
Scrutiny Chair:	Cllr Aled Morris Jones
Portfolio Holder(s):	Cllr John Griffith (until 15/05/18) / Cllr Robin Wyn Williams (from 16/05/18)
Head of Service:	Marc Jones, Head of Resources / Section 151 Officer
Report Author:	Anwen Davies, Scrutiny Manager
Tel:	01248 752578
Email:	AnwenDavies@ynysmon.gov.uk
Local Members:	Not applicable

1 - Recommendation/s
<p>R1 The Corporate Scrutiny Committee is requested to note:</p> <ul style="list-style-type: none"> • Progress made to date with the work of the Finance Scrutiny Panel, both in terms of achieving its work programme and measuring impact and added value • That processes pertaining to budget monitoring for 2017/18 appeared to be fit for purpose and on track • The ongoing financial scrutiny development programme for Panel members and which is being delivered by CIPFA Wales <p>R2 Escalate the following matter for consideration by the Corporate Scrutiny Committee:</p> <ul style="list-style-type: none"> • Express continued concern regarding budget pressures in children’s services and the learning service. Also, to note that the Panel continues to closely monitor the situation and has arrangements in place to ensure regular dialogue with the Assistant Chief Executive and Heads of Service to provide an explanation of the financial situation in both services and the impact of mitigation measures in place to control overspends. The Panel will continue to report back to this Committee on its findings as the situation evolves.

2 – Link to Council Plan / Other Corporate Priorities
Direct link between the Council Plan / transformation priorities and the Medium Term Financial Plan. The Panel’s consideration of budgetary matters will provide assurance to the Executive that the Council are responding in a robust manner on financial matters and that steps are in place to mitigate any risks.

3 – Guiding Principles for Scrutiny Members
To assist Members when scrutinising the topic:-

3.1 Impact the matter has on individuals and communities [**focus on customer/citizen**]

3.2 A look at the efficiency & effectiveness of any proposed change – both financially and in terms of quality [**focus on value**]

3.3 A look at any risks [**focus on risk**]

3.4 Scrutiny taking a performance monitoring or quality assurance role [**focus on performance & quality**]

3.5 Looking at plans and proposals from a perspective of:

- Long term
- Prevention
- Integration
- Collaboration
- Involvement

[**focus on wellbeing**]

4 - Key Scrutiny Questions

At the request of the Panel:

1. Does the Committee have any views on the priority of the work streams in the Panel work programme?
2. Are the actions of the Panel thus far sufficiently robust?
3. Does the Committee have a view on the pace or quality of recent developments in financial scrutiny led by the Panel?

5 – Background / Context

BACKGROUND

1.1 Members will already be aware that scrutiny has developed over the past few months through the work of 3 scrutiny panels namely – Finance Scrutiny Panel, Schools Review Scrutiny Panel and the Children’s Services Improvement Panel. This report summarises progress made to date as regards the **Finance Scrutiny Panel**.

1.2 Panel Governance Arrangements

As reported to a previous meeting of this Committee¹, robust governance arrangements have been established to underpin the work of the Panel and it is the intention to endeavor to continue to convene regular meetings of the Panel, in accordance with the timeline for budget monitoring by the Executive and also the Authority’s budget setting process. A process has been in place for regular, quarterly reporting to this Committee by Councillors Dafydd Roberts and Robin Wyn Williams, as Scrutiny Committee representatives on the Panel. The Panel will however need to review the detail of this arrangement in light of Councillor Robin Williams’ appointment as Portfolio Holder for Resources.

2. FOCUS OF WORK OF THE FINANCE SCRUTINY PANEL

2.1 The Finance Scrutiny Panel has now met on eight occasions, namely:

- 17th August, 2017

¹ Corporate Scrutiny Committee convened on 31st October, 2017

- 29th September, 2017
- 25th October, 2017
- 1st December, 2017
- 5th January, 2018
- 2nd February, 2018
- 14th March, 2018
- 26th April, 2018.

2.2 This report focuses on the work of the Panel in March and April, 2018:

- **Governance matters** – clear governance arrangements are in place (including a terms of reference) and a work programme providing a robust framework for the work of the Panel. This view has been endorsed by CIPFA Wales. The detail of these arrangements are currently being revisited as part of a broader review of our Scrutiny procedures and documentation.
- **External, expert input** – at the request of Panel members, external, specialist input has been facilitated by CIPFA Wales spanning 4 meetings of the Panel² in order to assist us to evaluate and evidence the impact and added value of the Panel's work. The input of CIPFA Wales has also included bespoke member development and mentoring inputs on financial scrutiny at each meeting. CIPFA will return to the Authority in September in order to assist the Panel to measure distance travelled in developing Member led finance scrutiny in the Council. The Panel have also agreed to share the outcomes of this work-stream in order to develop good practice at a national level.

This expert input into the work of the Panel has provided a robust foundation to enable and support the development of effective financial scrutiny in the Authority, building resilience into our scrutiny practice and processes.

- **Training & development / information sessions** – incorporated into the Panel work programme, these sessions are convened at the beginning of each Panel meeting. Topics covered over the last couple of months included the Housing Revenue Account (HRA) Business Plan – a look at the financial regulations of the HRA and the financial aspects of the business plan. In March, the Panel considered the Council's capital budget (principles, assumptions, priorities and process).
- Detailed consideration to **Theme 1 – Budget Monitoring (Quarter 3)** - with the Panel taking a view that its function should concentrate on scrutinising the response of the Executive to budget monitoring (revenue, capital and HRA³) (rather than pre-decision scrutiny). It was anticipated that this approach could support the Executive to make better decisions.

The Panel scrutinised the response of the Executive to the Qtr3 report on revenue budget performance at its meeting of 14/03/18. The Portfolio Holder for Resources was in attendance for this discussion in order to provide additional information to Panel members.

² Meetings of the Finance Scrutiny Panel convened on 1st December, 2017; 5th January, 2018; 2nd February, 2018; 14th March, 2018

³ Housing Revenue Account

- **2017/18 financial pressures** – scrutiny of the financial pressures in Children’s Services and the Learning Service continue to be a key priority for the Panel and further information has been commissioned from both Heads of Service for consideration at the next meeting of the Panel⁴. The outcome of this work will be reported to the Scrutiny Committee in due course.
- At the last meeting⁵, the Panel gave consideration to **Theme 3 - Annual budget setting process** for 2019/10. A review of the Panel’s work programme has been a catalyst for agreement on the role of the Panel in the budget setting process for next year:
 - i. Representative of the Panel to participate in budget setting steering group meetings (first meeting convened on 30/04/18 to consider the outcomes of a recent review of the 2018/19 budget setting process)
 - ii. Finance Scrutiny Panel to take a detailed look at the initial efficiency proposals for 2019/20 prior to the Member budget workshops to be held early October, 2018. Scrutiny focus → scrutiny of achievability, barriers and risks. This work to include discussions with Heads of Service
 - iii. Panel members to present the findings of their scrutiny work on the 2019/20 initial proposals to the Member budget workshops.
- **Council’s Efficiencies Strategy** – the Panel⁶ gave detailed consideration to performance against each of the efficiency proposals implemented during 2017/18, service by service in order to:
 - i. form a view on the percentage of efficiencies fully realised
 - ii. identify barriers and risks that emerged during 2017/18 and any learning in moving forward.

The Panel concluded that implementation of the 2017/18 efficiencies strategy (totaling £1.954k) fell short by £399k, representing 20.4% of the total efficiencies. This shortfall related to 3 specific projects:

- ✚ 2 projects (cleaning; Garreglwyd) to be delivered later than anticipated with the efficiencies being fully realised during 2018/19
- ✚ The third related to additional, unplanned expenditure as a result of the recent floods.

As regards 2018/19 and beyond, there would appear to be risks associated with reliance on income generation as a means of achieving efficiencies.

- **Work programme and impact of scrutiny** – the Panel have introduced routine self-evaluation of performance at the end of each meeting, facilitated by CIPFA. Early indications suggest that this practice is having a positive impact on the quality and effectiveness of financial scrutiny by the Panel. As a first outcome, the Panel recognised the need to ensure greater alignment between the Council’s budgetary cycles and the Panel forward work programme. This alignment now underpins the Panel’s work programme.

⁴ Meeting of the Finance Scrutiny Committee to be convened on 28th June, 2018

⁵ Finance Scrutiny Panel at its meeting convened on 26th April, 2018

⁶ Meeting of the Finance Scrutiny Panel convened on 26th April, 2018

3. MEASURING OUTCOMES AND IMPACT OF THE PANEL

3.1 Context

Capturing and assessing the impact of Scrutiny is a challenge to achieve as the outcomes of scrutiny activities are not always tangible and often do not lend themselves to being measured in a systematic way. Also, it is not easy to measure the effectiveness of Scrutiny's ability to influence decision makers through discussion and debate. The journey of the Finance Scrutiny Panel is however an example of where the input of scrutiny has added value and influenced the way in which proposals have been implemented by the Council.

3.2 Finance Scrutiny Panel

Financial scrutiny has developed significantly from a low base, during the past year with external expert input and guidance from CIPFA Wales. The Panel has taken a strategic approach to scrutiny of financial matters and developed an effective questioning strategy to underpin their work. For example, interventions by the Panel in response to some significant budget pressures have triggered some positive mitigation measures by Children's Services and the Learning Service. CIPFA Wales have commended this development journey:

"During the time we worked with the Panel there has been a distinct change in the way the Panel operates. Members now have clarity on their role, and those of officers in attendance. This has resulted in an effective use of time, improved structure and management of the agenda and a rigour in questions. Members are considering issues from an informed and broader financial base which is evident by the quality and nature of the questions posed. Questions and their approach demonstrates an improvement in confidence and also a resilience and determination to obtain satisfactory responses in a balanced and assertive manner. The development of a forward work programme to include items from the financial calendar, emerging issues and a programme of topics will result in the Panel adding value to the scrutiny process over time. Being independent of thought and proactive in developing the work programme is a major development for the Panel".

This work has provided a robust foundation upon which to continue with our development programme.

4. MATTERS TO BE ESCALATED FOR CONSIDERATION BY THE PARENT COMMITTEE

The following matter be escalated for consideration by the Corporate Scrutiny Committee:

4.1 Current budget pressures in children's services and the learning service. The Corporate Scrutiny Committee is requested to come to a view about the robustness of the Panel's actions thus far.

6 – Equality Impact Assessment [including impacts on the Welsh Language]

N/a

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7 – Financial Implications

This report discusses the following elements of the work of the Finance Scrutiny Panel:

- i. 2017/18 revenue budget performance monitoring
- ii. Budget setting process for 2019/20
- iii. Governance arrangements and scrutiny focus in preparation for the 2019/20 budget setting process
- iv. Measuring outcomes and impact

8 – Appendices:**9 - Background papers (please contact the author of the Report for any further information):**

Anwen Davies, Scrutiny Manager, Isle of Anglesey County Council, Council Offices, Llangefni. LL77 7HF

Cllrs Dafydd Roberts & Robin Wyn Williams
Scrutiny Members on the Finance Scrutiny Panel
Date: 23/05/18



CYNGOR SIR
YNYS MÔN
ISLE OF ANGLESEY
COUNTY COUNCIL



CORPORATE SCRUTINY COMMITTEE FORWARD WORK PROGRAMME: 2017/2018 **→ 2018/19**

Chair: Councillor Aled Morris Jones
Vice-Chair: Councillor Dylan Wyn Rees

This document summarises the forward work programme of the Corporate Scrutiny Committee Work Programme for the period May 2017 onwards, as a rolling programme and purposeful Scrutiny planning tool. The forward work programme will be submitted to each ordinary meeting of the Scrutiny Committee for the purpose of reviewing its content, consideration of new items or adjournment / withdrawal of items. Its purpose is also to ensure alignment with the forward work programmes of the Executive and Senior Leadership Team.

Contact: Anwen Davies (Scrutiny Manager)
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Date of Meeting	Item	Purpose
May, 2017		
31 May 2017	Election of Chair of the Committee	Effective governance arrangements
Committee Room 1 / 3.30pm	Election of Vice-Chair for the Committee	Effective governance arrangements
June, 2017		
26 June 2017 [Qtr 4: 2016/17]	Corporate Scorecard [Q4] 2016/17 Report on Sickness by WAO included as appendix	Performance monitoring
Committee Room 1 / 2pm	Annual Report of the Statutory Director of Social Services 2016/17	Performance monitoring
	Empty Homes Strategy 2017/2022	Policy development
	Membership of Panels and Boards	Nominate Members
	Forward Work Programme - review	Effective forward planning / alignment with corporate priorities
July, 2017		
11 July 2017 [Extraordinary meeting]	Schools' Modernisation – Llangefni area Statutory Consultation	Pre-decision scrutiny
Committee Room 1 / 2pm	Schools' Modernisation – Strategic Outline Programme - Band B (2019/24)	Transformation
	Monitoring Progress – Children's Services Improvement Plan	Performance monitoring
	Membership of Panels and Boards – Nomination to the Schools Progress Review Scrutiny Panel	Nominate Members
September, 2017		
4 September 2017 [Qtr 1: 2017/18]	Corporate Scorecard [Q1] 2017/18	Performance monitoring
Committee Room 1 / 2pm	Council Plan 2017/2022	Pre-decision scrutiny
	Monitor progress - Children's Services Improvement Plan Progress report - Children's Services Improvement Panel	Performance monitoring

Date of Meeting	Item	Purpose
	Forward Work Programme - review	Effective forward planning / alignment with corporate priorities
	Item for Information: Social Services Annual Complaints Report (2016/17)	For Information / performance monitoring
October, 2017		
2 October 2017 [Extraordinary meeting] Committee Room 1 / 10am	Social Services Annual Performance 2016/17 (CSSIW)	Performance monitoring
	Annual Performance Report (Improvement Plan) 2016/17	Performance monitoring
	Extra Care Housing – Seiriol Area	Pre-decision scrutiny
	Schools Modernisation Programme – Seiriol Area	Pre-decision scrutiny
31 October 2017 [Budget] Committee Room 1 / 10am	2018/19 Initial Budget Proposals	Pre-decision scrutiny
	2018/19 Budget Consultation Plan	Pre-decision scrutiny
	Progress Report – Finance Scrutiny Panel	Performance monitoring
	Forward Work Programme – review	Effective forward planning / alignment with corporate priorities
November, 2017		
13 November 2017 [Qtr 2: 2017/18] Committee Room 1 / 2pm	Corporate Scorecard [Q2] 2017/18	Performance monitoring
	Transformation of Library Services	Transformation
	Asset Management Strategy – Council Housing	Policy development
	Monitor progress – Children’s Services Improvement Plan Progress report – Children’s Services Improvement Panel	Performance monitoring
	Forward work programme – review	Effective forward planning / alignment with corporate priorities
December, 2017		
14 December, 2017 [Extraordinary meeting]	Transformation of Culture Service – Beaumaris Goal & Courthouse	Call in of decision by the Executive on 27/11/17 (called in by Cllrs Aled Morris Jones, Eric Wyn Jones, Kenneth Hughes, Bryan Owen & Peter Rogers)

Date of Meeting	Item	Purpose
January, 2018		
31 January, 2018 [Extraordinary meeting] Committee Room 1 / 1pm	Extra Care Housing – Seiriol Area (summary of feedback from engagement process)	Transformation
	Monitor progress – Children’s Services Improvement Plan Progress report – Children’s Services Improvement Panel	Performance Monitoring
	School transport	Referral from Audit and Governance Committee / Performance monitoring
	Small Holdings Improvement Programme	Notice of Motion from the Full Council
	Welsh Public Library Standards – Annual Report (2016/2017)	Performance monitoring – for information
February, 2018		
5 February 2018 [Budget] Committee Room 1/ 2pm	2018/19 Draft Budget	Pre-decision scrutiny
	Progress Report – Finance Scrutiny Panel	Performance monitoring
	Forward work programme – review	Effective forward planning / alignment with corporate priorities
	Housing Revenue Account Business Plan (Finance Scrutiny Panel)	Pre-decision scrutiny
March, 2018		
12 March 2018 [Qtr 3: 2017/18] Committee Room 1/ 2pm	Corporate Scorecard [Q3] 2017/18	Performance monitoring
	Schools Modernisation Programme – Seiriol Area	Transformation
	Schools Modernisation Programme – Llangefni Area (Y Graig & Talwrn)	Transformation
	Play sufficiency Assessment	Pre-decision scrutiny
	Forward work programme - review	Effective forward planning / alignment with corporate priorities
April, 2018		

Date of Meeting	Item	Purpose
23 April 2018 Committee Room 1/ 2pm	Schools Modernisation Programme – Llangefni Area (Corn Hir, Bodffordd & Henblas)	Transformation
	Social Services Performance – progress on priority actions	Performance monitoring [Scrutiny Committee resolution, 02/10/17]
	Transformation of Learning Disabilities Services	Transformation
	Forward work programme – review	Effective forward planning / alignment with corporate priorities
June, 2018		
4 June, 2018 [Qtr4: 2017/18] Committee Room 1/ 2pm	Corporate Scorecard [Q4] 2017/18	Performance monitoring
	School transport – progress report on implementation of action plan (for information)	Performance monitoring [Scrutiny Committee resolution, 31/01/18]
	Monitor progress - Children’s Services Improvement Plan	Performance monitoring
	Progress report - Children’s Services Improvement Panel	Performance monitoring
	Progress Report – Finance Scrutiny Panel Forward Work Programme – review	Performance monitoring Effective forward planning / alignment with corporate priorities
July, 2018		
5 July, 2018 [Extraordinary meeting] Committee Room 1 / 10am	Schools’ Modernisation Programme – Llangefni Area (Y Graig & Y Talwrn)	Transformation
	Annual Report of the Statutory Director of Social Services	Performance monitoring
13th July, 2018 [Extraordinary meeting] Committee Room 1 / 10am	Schools’ Modernisation Programme – Seiriol Area	Transformation
September, 2018		
3 September, 2018 [Qtr1: 2018/19] Committee Room 1/ 2pm	Corporate Scorecard [Q1] 2018/19	Performance monitoring
	Transformation of Education and Anglesey Schools Modernisation Strategy – update (to be confirmed)	Transformation

Date of Meeting	Item	Purpose
	Monitor progress - Children's Services Improvement Plan Progress report - Children's Services Improvement Panel	Performance monitoring
	Progress Report – Finance Scrutiny Panel	Performance monitoring
	Forward Work Programme – review	Effective forward planning / alignment with corporate priorities
October, 2018		
24 October, 2018 [Budget] Committee Room 1/ 2pm	2019/20 Initial Budget Proposals	Pre-decision scrutiny
	2019/20 Budget Consultation Plan	Pre-decision scrutiny
	Annual Performance Report (Improvement Plan)	Performance monitoring
	Forward Work Programme – review	Effective forward planning / alignment with corporate priorities
November, 2018		
5 November, 2018 [Qtr 2: 2018/19] Committee Room 1/ 2pm	Corporate Scorecard [Q2] 2018/19	Performance monitoring
	Homelessness Strategy (to be confirmed)	Policy development
	Forward Work Programme – review	Effective forward planning / alignment with corporate priorities
February, 2019		
4 February, 2019 [Budget] Committee Room 1/ 2pm	2019/20 Draft Budget	Pre-decision scrutiny
	Progress Report – Finance Scrutiny Panel	Performance monitoring
	Monitor progress – Children's Services Improvement Plan	Performance monitoring
	Progress report – Children's Services Improvement Panel	
	Forward Work Programme - review	Effective forward planning / alignment with corporate priorities

Date of Meeting	Item	Purpose
March, 2019		
11 March, 2019 [Qtr 3: 2018/19] Committee Room 1/ 2pm	Corporate Scorecard [Q3]: 2018/19	Performance monitoring
	Forward Work Programme – review	Effective forward planning / alignment with corporate priorities
April, 2019		
8 April, 2019 Committee Room 1/ 2pm		
	Forward Work Programme – review	Effective forward planning / alignment with corporate priorities
TOPICS TO BE SCHEDULED		
TBC	Modernisation of Non-Statutory Leisure Service (3 year period)	Transformation
TBC (June, 2018)	Corporate Scorecard [Q4]: 2018/19	Performance monitoring
TBC	Energy Management	Performance monitoring (Scrutiny Committee resolution, 31/10/17)
TBC	Fuel Poverty – plans to support households	Performance monitoring (Scrutiny Committee resolution, 13/11/17)
TBC	Impacts of Welfare Reform	Performance monitoring
TBC (Sept/October, 2018)	Review of progress – the Council Plan (at the end of the 12 months)	Performance monitoring

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ISLE OF ANGLESEY COUNTY COUNCIL	
Committee:	Corporate Scrutiny
Date:	4 June 2018
Subject:	Schools Transport
Purpose of Report:	Submit an update on actions following an Audit Report.
Scrutiny Chair:	Cllr Aled Morris Jones
Portfolio Holder(s):	Cllr R G Parry OBE Frgs Cllr R Meirion Jones
Head of Service:	Arwyn Williams & Dewi R Williams
Report Author:	Trevor Francis
Tel:	01248 752351
Email:	TrevorFrancis@ynysmon.gov.uk
Local Members:	Not applicable

1 - Recommendation/s

The Corporate Scrutiny Committee is requested to note:-

- 1.1 The significant progress in reducing the risks identified in the Audit report of September 2017
- 1.2 The Audit Committee’s decision on 24 April 2018 to note that good progress has been made and that no further steps are required.

2 – Link to Council Plan / Other Corporate Priorities

Education is fundamental to the development of all children and ensuring their attendance at school aligns with the Council’s objective to “Ensure that the people of Anglesey can thrive and realise their long term potential” (Council Plan 2017/2022).

3 – Guiding Principles for Scrutiny Members

To assist Members when scrutinising the topic:-

- 3.1 Impact the matter has on individuals and communities **[focus on customer/citizen]**
- 3.2 A look at the efficiency & effectiveness of any proposed change – both financially and in terms of quality **[focus on value]**
- 3.3 A look at any risks **[focus on risk]**
- 3.4 Scrutiny taking a performance monitoring or quality assurance role **[focus on performance & quality]**
- 3.5 Looking at plans and proposals from a perspective of:

- Long term
- Prevention
- Integration
- Collaboration
- Involvement

[focus on wellbeing]

4 - Key Scrutiny Questions

5 – Background / Context

A progress report was submitted to this Committee in January 2018. The committee resolved to accept the report and to request an update for this meeting.

Since January the Head of Audit and Risk have undertaken a follow-up Audit and reported as follows to the Audit and Governance Committee on 24 April 2018:-

“School Transport

	Original Issues / Risks		Outstanding Issues / Risks
	Report Date	September 2017	April 2018
Good Progress	Assurance	Limited	Reasonable
	Catastrophic	0	0
	Major	7	0
	Moderate	7	3
	Minor	2	2

1. Our review confirms that significant progress has been made towards improving School Transport arrangements and addressing the Issues/Risks raised in our report.
2. Eleven of the risks identified from our audit report have been fully addressed. Three risks are partially implemented or are in the progress of being addressed; these are subject to the issuing of identification badges to all school bus drivers in September 2018, the Capita ONE system to be in operation and the review of the school taxis' eligibility criteria together with the review of the school taxis' budget.
3. Two risks remains outstanding, which are centred around the next procurement process when the Transport Section will be reviewing its current contractors terms and conditions.
4. Out of the outstanding actions (including actions that have been partially implemented), two are still within the target date of implementation. However, all target dates have been revised and extended based on updates reported. Where necessary, priority ratings

have been re-assessed to take into account the actions taken to date and new target dates have been agreed for implementation.

*The Council has demonstrated ‘**Good Progress**’ in addressing the Issues / Risks and as a result the assurance rating has increased to ‘**Reasonable Assurance**’”*

The Committee **resolved** to note the situation and no further action was recommended.

6 – Equality Impact Assessment [including impacts on the Welsh Language]

Any change to school transport will have an effect on children who attend school but there are no negative effects from implementing the Plan to date. The effects will need to be reassessed when the schools transport policy is reviewed. The new arrangements between the Learning and Highways Services have strengthened the Safeguarding assurance within the schools and learning environment and it can therefore be seen as having a positive effect. There are no negative effects on the Welsh language and it could have a positive impact when the specifications for the new contracts are written.

7 – Financial Implications

The current budget for school taxi provision in 2018-19 remains the same as 2017-18. During the financial year Capita One will be used to manage school transport and give access to route optimisation. An extension will be given to current taxi contracts during the 2018 Autumn Term, and new contracts will be awarded during the Spring Term in 2019. The Learning Service believe that reviewing the current policy and arrangements, together with the Transport One system will enable the financial implications to be assessed at that time.

8 – Appendices:

9 - Background papers (please contact the author of the Report for any further information):

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