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CYNGOR SIR
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ISLE OF ANGLESEY
COUNTY COUNCIL

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RHYBUDD O GYFARFOD	NOTICE OF MEETING
PWYLLGOR SGRIWTINI CORFFORAETHOL	CORPORATE SCRUTINY COMMITTEE
DYDD LLUN, 4 MEDI, 2017 am 2:00 y. p.	MONDAY, 4 SEPTEMBER 2017 at 2.00 pm.
YSTAFELL BWYLLGOR 1, SWYDDFEYDD Y CYNGOR, LLANGEFNI	COMMITTEE ROOM 1, COUNCIL OFFICES, LLANGEFNI, LLANGEFNI
Swyddog Pwyllgor	Ann Holmes 01248 752518 Committee Officer

AELODAU/MEMBERS

Cynghorydd/Councillor:

PLAID CYMRU / THE PARTY OF WALES

Trefor Lloyd Hughes, MBE, Carwyn Jones, 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*)
Shaun Redmond

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 26TH JUNE, 2017 MEETING (Pages 1 - 16)

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

- 26th June, 2017
- 11th July, 2017 (extraordinary)

3 PERFORMANCE MONITORING - CORPORATE SCORECARD Q1 2017/18
(Pages 17 - 30)

To present the Corporate Scorecard for Quarter 1 2017/18.

4 COUNCIL PLAN 2017-2022 (Pages 31 - 46)

To present the Council Plan for 2017 to 2022.

5 PROGRESS OF IMPROVEMENTS IN CHILDREN'S SERVICES (Pages 47 - 76)

- To present a report on progress against the Children's Services' Improvement Plan.
- To present a report from the Children's Services Improvement Panel.

6 FORWARD WORK PROGRAMME (Pages 77 - 80)

To present the report of the Scrutiny Manager.

7 ITEM FOR INFORMATION - ANNUAL REPORT 2016/17: LISTENING AND LEARNING FROM COMPLAINTS (Pages 81 - 100)

To present for the Committee's information, the Social Services' Complaints Procedure Annual Report for 2016/17.

CORPORATE SCRUTINY COMMITTEE

Minutes of the meeting held on 26 June, 2017

- PRESENT:** Councillor Aled M. Jones (Chair)
Councillor Dylan Rees (Vice-Chair)
- Councillors Richard Griffiths, Carwyn Jones, Alun Roberts,
J. Arwel Roberts, Shaun Redmond
- IN ATTENDANCE:** Assistant Chief Executive (Governance and Business Process Transformation)
Head of Function (Resources) and Section 151 Officer
Head of Adults' Services (for item 4)
Head of Learning (for item 3)
Programme, Business Planning and Performance Manager (for item 3)
Head of Profession (CE) (for item 3)
Service Manager (Housing, Commissioning Strategy & Policy (ELI) (for item 5)
Empty Homes Officer (GO) (for item 5)
Project Lead (HR & Payroll) (ATR)
Deputy Business Manager (Adults Services) (EJE) (for item 4)
Interim Scrutiny Manager (AGD)
Committee Officer (ATH)
- APOLOGIES:** Councillors Trefor Lloyd Hughes, MBE, Richard O. Jones, Nicola Roberts, Mr Keith Roberts (Co-opted Member)
- ALSO PRESENT:** Councillor Llinos Medi Huws (Leader & Portfolio Member for Housing & Social Services), Councillor Dafydd Rhys Thomas (Portfolio Member for Corporate Services), Chief Executive, Assistant Chief Executive (Partnerships, Community & Service Improvement), Head of Democratic Services, Mr Gwilym Bury (Wales Audit Office)

1 DECLARATION OF INTEREST

No declaration of interest was received.

2 MINUTES OF THE 10TH APRIL, 2017 MEETING

The minutes of the previous meetings of the Corporate Scrutiny Committee held on the dates noted below were presented –

- 10th April, 2017 which were accepted and noted as pertaining to the previous Council
- 31 May, 2017 which were accepted and approved

3 PERFORMANCE MONITORING – CORPORATE SCORECARD Q4 2016/17

The report of the Head of Transformation incorporating the Corporate Scorecard which portrayed the Council's position against its operational objectives at the end of Quarter 4

2016/17 in relation to Performance Management, People Management, Financial Management and Customer Service was presented for the Committee's consideration.

The Portfolio Member for Corporate Services reported that the scorecard as at Appendix A portrays a mixed picture overall at the end of 2016/17. Whilst the vast majority of indicators performed well against their targets for the year there were areas of underperformance and in the case of four indicators, the performance reflects a year on year decline. Two indicators, the one in Adults' Services and the other in Children's Services show as Amber or Red against their annual targets for the year. Details of these are set out in paragraphs 2.1.3 and 2.1.4 of the report along with an explanation in mitigation of the underperformance and an outline of proposed improvement measures. Although the majority of indicators are ragged Green or Yellow, this does not mean that the Authority's position on a national basis would improve as a result. The Authority's position relative to that of other authorities in Wales will become known once the 2016/17 national data is published by the Welsh Government.

With regard to People Management, the Authority's sickness absence rates at the end of 2016/17 has achieved the corporate target at 9.78 days sick per FTE against the target of 10 days sick per FTE and is Green on the scorecard. This is a significant improvement on the 2015/16 performance when 11.68 days sick per FTE was recorded and represents a total of 4,737 days less sickness than in 2015/16. Whilst there remains some issues with sickness absence in Children's Services and in Highways, Waste and Property Services, the sickness absence rates for 2016/17 in those services still reflect an improving picture. The Wales Audit report on absence management within the Council is positive in its tenor and finds that the Council has made significant improvements in its corporate arrangements for managing attendance, having made it a matter of priority. The report further finds that the Council is now proactive in holding schools to account for attendance management. The report makes two proposals for improvement in relation to how the Council supports schools with their attendance management arrangements.

In relation to Customer Service the percentage rate of responses made within timescale in relation both to complaints and to FOI requests has improved on the 2015/16 performance. The findings of the Mystery Shop exercise undertaken during the year confirms that the standard of customer care within Anglesey has improved since the last audit in 2015/16 but notwithstanding this, the report on the exercise recommends that there is scope for further improvement as outlined in paragraph 2.3.8 of the report.

Mr Gwilym Bury, Wales Audit Office, reported in detail on the findings of the audit of the Council's management of attendance. The review found that the Council has significantly improved its corporate arrangements to manage sickness absence by introducing more robust absence policies and procedures. Its comparative position nationally would now place it in an above average position; to be considered a good performing authority it would need to achieve 8 days sick per FTE; to be considered an excellent performing authority it would need to reach a target of 6.6 days sick per FTE. However, it is external audit's view that the Council does not need to do more currently with regard to its general staff other than to continue to implement the policies and procedures it has developed and has put in place which is what a good authority would be expected to do. This should see the sickness absence rates come down gradually to nearer 8 days sick per FTE. With regard to schools, whilst it is the responsibility of the school's governing body to have oversight of attendance management arrangements for staff in schools, the Council does have a statutory duty to promote high standards in schools, and effective resource and staff absence management plays a key role in the delivery of high standards. In promoting high standards, the Council should monitor, challenge and support its schools. Although the majority of the Island's schools have a very low rate of staff absence a minority of schools have consistently very high absence rates both among teaching and non-teaching staff which has an impact on educational standards. There needs to be the same focus and discussion on school staff

attendance as there is on pupil attendance because education is a partnership between pupils, parents and the school. The report proposes measures for further improvement including setting a pattern of regular quarterly reporting on school's attendance performance to both the Executive and to Scrutiny.

The Head of Learning confirmed that the Education Service has for many months been focussing on addressing schools' attendance management and that the improvements achieved have been significant in a small period of time. Additional resources have been channelled into discussions with every school both in the primary and secondary sectors and certain schools have been specifically targeted and these efforts have resulted in the improvements seen. Approximately 2,263 days have been gained and £250k saved by the Council in this period.

The Committee considered the information presented both in the internal report and the external audit report regarding the Council's performance at year end and highlighted the following matters -

- The Committee noted the marked improvement in sickness absence rates within the Council for 2016/17 as attested to by the Corporate Scorecard and the WAO report. It acknowledged the work and commitment at corporate and service levels that had gone into strengthening the processes to better manage attendance across the Council.
- The Committee sought clarification of the extent of the impact – if any, of the introduction of smarter working arrangements on attendance within the Council especially in terms of improving staff satisfaction and helping staff achieve a better work/life balance through measures such as enhanced flexible and home working, hot desking etc. The Programme, Business Planning and Performance Manager said no review of any potential correlation between smarter working arrangements and improved attendance figures has been undertaken. However the improvements that have come about as reported are due to the processes put in place through the Chief Executive and Human Resources.
- The Committee sought further clarification of the take-up and feedback from staff in relation to smarter working initiatives. The Head of Profession said that where it is advantageous to their work, then staff have taken advantage of the alternative and flexible ways of working which smarter working promotes; the position is a variable one with a number of staff still choosing to attend the workplace and working at home to undertake specific pieces of work. The Heads of Service – Learning, Adults' Services and Highways, Waste and Property reported on the take-up of smarter working arrangements from the perspective of their own services.
- The Committee noted with regard to Financial Management that although the trend is downwards, the expenditure on agency staff remains an area that is ragged Red. The Head of Function (Resources) and Section 151 Officer said whilst the distinction between agency and consultancy staff is an issue in terms of attributing costs, the expenditure on agency staff within the Council especially within the Finance Service has decreased significantly. Where there is a need for agency staff e.g. within Children's Services, the process for engaging agency staff is signed off by the Chief Executive.

The Committee, having noted the generally encouraging picture of the Council against its operational objectives for Quarter 4 2016/17 as portrayed by the Q4 Corporate Scorecard, and having been satisfied that underperforming areas have been identified and are prioritised and targeted, RESOLVED -

- **To note and support the areas which the Senior Leadership Team is managing to secure improvements into the future as summarised in paragraphs 1.3.1. to 1.3.4 of the report.**
- **To note and accept the mitigation measures outlined in relation to the areas set out in the aforementioned paragraphs.**

NO FURTHER ACTION ENSUING

4 ANNUAL REPORT OF THE STATUTORY DIRECTOR OF SOCIAL SERVICES

The Annual Report of the Statutory Director of Social Services for 2016/17 was presented for the Committee's consideration and comment. The report provides a review of how well social services were delivered on Anglesey in 2016/17 including the key achievements in both Adults' and Children's Services as well the challenges that need to be addressed in the coming year.

The Assistant Chief Executive (Governance and Business Process Transformation) and Statutory Director of Social Services reported that 2016/17 was a challenging year in terms of the context in which social services were delivered. The planning and delivery of services were transformed to meet the requirements of the Social Services and Wellbeing Act (Wales) 2014 (SSWB). In addition, continued austerity and pressures on budgets as well as an awareness of likely future trends and demands are necessitating a radical re-thinking of how services are provided in order to ensure they are sustainable for the future.

The Officer said in relation to Children's Services that much of the work was driven by the recommendations contained within the report by CSSIW on its inspection of Children's Services. These recommendations are being implemented through the Children's Services Improvement Plan and will be monitored by the Children's Panel reporting back on progress to the Corporate Scrutiny Committee. The focus consequent upon the CSSIW report has been on developing a workforce strategy centred on recruitment and retention; improving supervision for social workers; improving the quality of practice in relation to child protection; strengthening partnership and collaborative working both within the Council with other services and outside with partner agencies; undertaking a review of residential placements and seeking to reduce the reliance on agency staff.

Adults' Services have seen a period of stability which has enabled the service to focus on the future and to consolidate progress in relation to the development and construction of Hafan Cefni; the expansion of the capacity to care for those with dementia on the Island; re-tendering the contract for home care; developing prevention initiatives such as the Môn Enhanced Care Team and the Night Owls Service; increasing take up of Direct Payments and strengthening the Single Point of Access Service. Priorities for the year ahead will include modernising services for those with learning disabilities and developing co-production with providers on the Island.

As regards Social Services as a whole there has been an emphasis on workforce development and training and on preparing for the introduction at the Council over the next few months of a national IT system (WCCIS) which will enable the service to work more effectively. Improving engagement with service users especially in terms of listening to the views of users through having the *What Matters* conversation at the point of initial assessment, and also in having regard to their experiences in shaping services and provision continues to be a key area. There is an ongoing need across social services to develop the preventative agenda – taking preventative action will improve the lives and wellbeing of individuals and will also help the Authority to manage the increase in demand and to use its resources more efficiently and to better effect. Partnership working will remain a priority as will a renewed focus on carers and their needs.

The process of preparing the 2016/17 report has differed considerably from that of previous years and has resulted in a change of format and style. This is due to new guidance issued by the Association of Directors of Social Services Cymru which has been used as a basis for the Anglesey report in order to capture the changes made within Social Services following the implementation of the SSWA 2014.

The Portfolio Member for Housing and Social Services emphasised the progress made as well as the challenges ahead and she asked the Committee to consider whether the improvement priorities identified within the report are appropriate to the challenging environment in which Social Services are operating.

The Committee considered the Annual Report and the context in which the self-assessment had been made and it raised the following points –

- The Committee noted the improvements both planned and implemented as a result of the CSSIW inspection of Children's Services and as documented in the Annual Report. The Committee noted that CSSIW would be re-visiting the Authority to review progress against the recommendations made and sought assurance that the Authority has sufficient time to implement the programme of improvements before it is re-assessed by CSSIW. The Statutory Director of Social Services said that CSSIW intends to follow up on its inspection within 12 to 18 months subject to the demands of the regulatory programme both nationally and regionally, the resources available and subject also to the regulator being satisfied by the rate of progress at Anglesey. Whilst Social Services are working towards a revisit in March, 2018 the key consideration throughout the programme of improvement is to ensure that improvements made are sustainable in the long-term particularly as budgets continue to reduce.
- The Committee noted that in a context of limited resources, partnership and collaborative working will take on increasing significance. The Committee therefore sought clarification of the scope for the further development of shared services. The Statutory Director of Social Services said that Social Services already has a number of teams across Adults' and Children's services working on a joint basis; whilst these are predominantly with BCUHB, there are examples of joint working with Gwynedd Council (the Integrated Family Support Service Team) and the Gwynedd and Anglesey Youth Justice Service which also includes other partner organisations. The Children's Out of Hours Duty Team is also a joint service. The Authority's joint working arrangements also extend beyond its immediate neighbours particularly with regard to the development of processes and policies which are often on a regional basis. In entering into joint arrangements the Authority has to be mindful of its statutory responsibilities and it will seek to retain sole responsibility for significant elements particularly within Children's Services. There is however scope for further effective collaboration e.g. in fostering where the recruitment of foster carers can be a challenge.

It was resolved that the Committee is satisfied with regard to the following –

- **That the Annual Report has captured the Council's current position with regard to delivering its Social Services.**
- **That the Annual Report accurately reflects the improvement priorities for both Adults and Children's Services for the forthcoming year.**
- **That the Annual Report reflects the Council's accountability and responsibility with regard to its Social Services**

NO FURTHER ACTION ENSUING

5 EMPTY HOMES STRATEGY

The report of the Head of Housing Services incorporating the Empty Homes Strategy for 2017 to 2022 was presented for the Committee's consideration and comment. The Strategy set out the achievements to date as well as how resources will be targeted going forward.

The Portfolio Member for Housing and Social Services commended the Strategy as a positive document in assisting the Authority to continue with the good work begun with regard to bringing empty homes back into use thereby helping to meet the housing need on the Island.

The Committee considered the Strategy document and made the following points –

- The Committee sought clarification of the basis for the calculation that there are currently 840 homes on the Island which have been empty for six months or more. The Empty Homes Officer said that the Council Tax section holds data on empty property owners and second home owners and provides this information annually to the Empty Homes Officer; this information is used to update the empty homes database. The database is further updated every three months as empty homes come back into use and others become empty. One of the strategic objectives is to maintain and improve the accuracy of empty homes data. The reasons why homes become empty can vary from property to property.
- The Committee noted that bringing empty homes back into use is a concerted endeavour and involves co-operation between a number of services across the Council including the enforcement service. The Committee sought assurance that the Enforcement Team has sufficient capacity to be able to cope with increasing and varying demands. The Empty Homes Officer said that is her responsibility to co-ordinate the Council's approach to empty homes enforcement and this includes undertaking preparatory work in the form of collating evidence, drafting reports and outlining the steps that need to be taken. However enforcement action is not a quick fix and is always a last resort when all other options have failed to produce a satisfactory result. Homeowners on whom notice has been served have to be given time to respond and to address the issue.
- The Committee sought clarification of the process taken in seeking to bring an empty property back into use. The Empty Homes Officer said that Officers will always seek to work with the owners of empty properties in the first instance. This includes offering advice, assistance and options designed to help empty property owners as outlined in the toolkit described in section 6 of the report. Where negotiations have failed, and owners of long-term empty properties refuse or fail to return their property back into use, then firmer measures may be pursued. When such action is required, the Council undertakes to adhere to its enforcement principles which provide for fair and consistent enforcement.
- The Committee sought clarification of the impact of the proposed new nuclear power station on housing needs; the availability of housing and on the empty homes issue. The Portfolio Member for Housing and Social Services said that the matter is under consideration and that one of the many issues and potential benefits being explored in ongoing discussions with Horizon with regard to the development of Wylfa Newydd is the possibility of bringing more empty properties back into use.
- The Committee questioned whether it would be possible to extend the strategy to include disused chapel buildings which have the potential to be converted into residential dwellings e.g. flats. The Empty Homes Officer said that many chapel buildings are listed and that she understood that under the new proposed Joint LDP, it may well be more difficult for listed chapels to receive consent for conversion into residential use.

Having considered the information presented, the Committee resolved to support the Empty Homes Strategy for 2017-2022 and to recommend the strategy to the Executive for adoption.

NO FURTHER ACTION ENSUING

6 MEMBERSHIP OF PANELS AND BOARDS

The report of the Interim Scrutiny Manager seeking nomination of Scrutiny Members to serve on panels and boards was presented for the Committee's consideration. The report set out the panels, corporate programme boards and service programme boards on which representation was required, their function and their reporting arrangements.

It was resolved -

- **To nominate the following to serve on the panels and boards listed –**

Children's Services Improvement Panel (1 Member) – Councillor Richard Griffiths

Finance Scrutiny Panel (2 Members) – Councillors Aled Morris Jones and Dylan Rees

School Progress Review Scrutiny Panel (4 Members) – Councillors J. Arwel Roberts and Alun Roberts (*nomination of the remaining 2 Members to be deferred to the Committee's 11th July meeting to allow those Members not present at this meeting to express an interest*)

Corporate Parenting Panel (1 Member) – Councillor Richard Griffiths

Governance and Business Process Transformation Board (1 Member) – Councillor Aled Morris Jones with Councillor Dylan Rees acting as deputy

Adults' Transformation Programme Board (1 Member) – Councillor Alun Roberts

Libraries, Youth and Heritage Programme Board (1 Member) – Councillor J. Arwel Roberts

(Nominations to the Schools Modernisation Programme Board and the Customer Service Excellence Programme Board to be made by the Partnership and Regeneration Scrutiny Committee)

Corporate Safeguarding Board (1 Member) - Councillor Aled Morris Jones with Councillor Dylan Rees acting as deputy.

- **To note the reporting arrangements for the panels and boards listed as outlined in section 4 of the report.**

7 FORWARD WORK PROGRAMME

The report of the Interim Scrutiny Manager incorporating the Committee's draft Forward Work Programme for 2017/18 was presented for the Committee's consideration and comment.

The Interim Scrutiny Manager reported that the Forward Work Programme as presented represents a long list of potential items that were originally put forward under the previous Council. Consideration will now be given to ensuring that the work programmes of the two scrutiny committees are clearly aligned; this will be discussed in the Scrutiny Chairs and Vice-Chairs Forum. The objective is to reduce the volume of business to be considered at each meeting to enable the Committee to focus in more detail and to greater effect on key issues. The Work Programme as presented represents the current draft and will be subject to ongoing review.

It was resolved to accept and to note the Forward Work Programme as an initial draft outline of the Committee's programme of business for the coming year.

ACTION ARISING: Interim Scrutiny Manager to review the Work programme in consultation with Chair and Vice-Chair with reference to the Executive's and the Partnership and Regeneration Scrutiny Committee's respective work programmes.

**Councillor Aled Morris Jones
Chair**

DRAFT

CORPORATE SCRUTINY COMMITTEE

Minutes of the meeting held on 11 July 2017

- PRESENT:** Councillor Aled Morris Jones (Chair)
Councillor Dylan Rees (Vice-Chair)
- Councillors Richard Griffiths, Shaun James Redmond,
Alun Roberts and Nicola Roberts.
- Mr. Keith Roberts (Representing The Catholic Church),
Mrs. Anest G. Frazer (Representing The Church in Wales)
- IN ATTENDANCE:** Chief Executive,
Assistant Chief Executive (Governance and Business Process
Transformation),
Assistant Chief Executive (Partnerships, Community and Service
Improvement),
Interim Head of Children's Services (Strategic) (for item 3),
Interim Head of Children's Services (Operations) (for item 3),
Head of Learning (for item 4 & 5),
Head of Democratic Services,
Interim Scrutiny Manager (AD),
Committee Officer (MEH).
- ALSO PRESENT:** Councillors Lewis Davies, John Griffiths (Portfolio Member for
Resources), Llinos M. Huws (Leader & Portfolio Member for
Housing & Social Services), R. Meirion Jones (Portfolio Member
for Education, Youth, Libraries & Culture), Bob Parry OBE FRAGS
(Portfolio Member for Highways, Property & Wates), Dafydd R.
Thomas (Portfolio Member for Corporate).
- APOLOGIES:** Councillors Carwyn Jones, Richard Owain Jones, J A Roberts

The Chair welcomed Mrs. Anest G. Frazer, representing The Church in Wales to her first meeting of the Committee.

1 DECLARATION OF INTEREST

Councillor Dylan Rees declared a personal interest in item 4 as Chair of the Governing Body of Bodffordd Primary School.

Councillor Alun Roberts declared a personal interest in item 5 as he is a representative of the Council on the Governing Body of Beaumaris Primary School.

Councillor Nicola Roberts declared a personal interest in item 4 as she is on the Governing Body of Ysgol y Graig, Llangefni and Talwrn Primary School. She also declared that she is a parent of a child who is a pupil at Ysgol y Graig.

2 NOMINATIONS TO PANELS AND BOARDS - SCHOOLS PROGRESS REVIEW SCRUTINY PANEL

Submitted – a report by the Interim Scrutiny Manager in relation to nominations to serve on the Schools Progress Review Scrutiny Panel.

It was noted that Councillors John Arwel Roberts and Alun Roberts were nominated to serve on the Scrutiny Panel at the meeting of the Corporate Scrutiny Committee held on 26th June, 2017 but a further two elected members needed to be nominated to serve on this Panel.

Councillor Nicola Roberts said that she considered that it was not appropriate for her to put her name forward to be nominated on the Schools Progress Review Scrutiny Panel as she has a child who attends one of the schools that will be under review.

It was RESOLVED to nominate Councillors Richard Griffiths and Shaun Redmond as further two elected members from the Corporate Scrutiny Committee to serve on the Schools Progress Review Scrutiny Panel.

3 MONITORING PROGRESS - CHILDREN'S SERVICES IMPROVEMENT PLAN

Submitted – a report by the Interim Head of Children's Services (Operations) in relation to the above.

The Leader of the Council, and the Portfolio Holder for Housing & Social Services highlighted the main recommendations of the CSSIW report published on 7th March, 2017 as regard to the priorities within the Children's Services of the Authority. In response to the findings and recommendations, the authority has put in place the following arrangements:-

- A revised Service Improvement Plan, incorporating all of the recommendations of the CSSIW's Inspection Report;
- New Project Management arrangements in place, with an internal Improvement Group of Officers meeting on a monthly basis, and reporting to the Senior Management Team and to the Executive;
- Established a new Panel of Elected Members following the recent local authority elections, which will report to the Corporate Scrutiny Committee.

The Interim Head of Children's Services (Operations) said that it is encouraging that the recruitment of staff has improved over recent months with 7 out of 8 Practice Leader posts within Children's Services been successfully filled. He further noted that it is hoped that agency staff may be released by the end of the year following a hand-over to staff who are newly-qualified and new to the service. One of the goals of the service is to be able to identify problems within vulnerable families at an early stage and providing support much earlier. The Interim Head of Children's Services

added that partnership working has improved had greatly improved and in particular, as regards North Wales Police sharing of information regarding vulnerable families and children.

Having considered the report the Committee made the following points:-

- The Committee referred to the 'out of county' placement of children and the financial costs resulting from these placements. The Committee also noted that placement of a child out of county could have an added emotional pressure on the child/young person. The Interim Head of Children's Services responded that an internal Panel had been established within the Service to review each individual child/young person's placement to ensure that their needs were being met in the most appropriate setting. A review/assessment was being undertaken with the aim of bringing children/young people back onto the Island and increasing placement options.
- The Committee questioned if induction and training packages were in place for newly recruited employees. The Interim Head of Children's Services responded that the service worked closely with the Human Resources Service of the Council to develop a Workforce Strategy, to arrange recruitment following the restructuring, and arrange induction and support package to support newly recruited employees.

It was RESOLVED to accept the progress report.

4 SCHOOLS MODERNISATION - LLANGFNI AREA STATUTORY CONSULTATION

Submitted – the report of the Head of Learning in relation to the above.

The Portfolio Holder for Education outlined the recommendations of the report to the Committee and explained the differences between the two Options put forward with regard to the Llangefni Area Statutory Consultation.

The Head of Learning said that due to the pressure on the schools within the town of Llangefni it was decided to include this catchment area within Band A of the Schools Modernisation Programme. Ysgol y Graig and especially Ysgol Corn Hir have already exceeded pupil numbers. She referred to the consultation process together with numerous responses within the Llangefni catchment with school stakeholders at Ysgol Henblas, Ysgol Esceifiog, Ysgol Bodffordd, Ysgol Corn Hir, Ysgol y Graig and Ysgol Talwrn.

The Committee considered the report and raised the following matters:-

- The Committee asked whether the recent announcement by Ms. Kirsty Williams AM, Cabinet Secretary for Education, with regard to Councils having to consider all viable alternatives to closure under new rules to support rural schools would affect the Authority's schools modernisation plans. The Head of Learning clarified that the recommendations of the Cabinet Secretary had already been addressed in the guidelines of the Authority's schools modernisation process.

- The Committee also referred to responses that closure of schools can have a detrimental effect on villages and communities. Questions were raised as to whether a Community Impact Assessment had been made to identify areas within the modernisation plan. The Head of Learning responded that the Community Impact Assessment is part of the background work of the process and detailed work will need to be undertaken to gauge the changes the Cabinet Secretary for Education is suggesting within the new Code for Modernisation of Schools.
- The Committee referred to the federalisation of schools and questioned the effect on schools. The Head of Learning responded that 12 schools on Anglesey are within a federal schools category due to the difficulties in recruiting Head Teachers generally on the Island.
- The Committee questioned as to whether the modernisation of schools is driven by reducing costs for the Authority. The Head of Learning responded that Estyn challenge whether authorities are addressing empty places within schools. It is considered that a modern school environment is better for the best education opportunities for children.

Following further deliberations :-

It was RESOLVED to recommend to the Executive that :-

- **Option B be the preferred option which will incorporate :-**
 - **Option 3 – which is to build a new school to replace Ysgol Corn Hir and Ysgol Bodffordd;**
 - **Option 8 – adaptations to Ysgol Esceifiog, Gaerwen;**
 - **Option 7 – further consultation will be required on adapting Ysgol y Graig to accommodate pupils from Ysgol Talwrn, and close Ysgol Talwrn;**
 - **Option 9 – adaptations to Ysgol Heblas, Llangristiolus.**

5 SCHOOLS MODERNISATION STRATEGIC OUTLINE PROGRAMME - BAND B (2019-2024)

The Chair said that he was given to understand that an administrative error had occurred in submitting papers for discussion at this meeting. The Portfolio Holder for Education and the Officers requested that an amended report with minor amendments be considered at the meeting due to the requirement of Welsh Government for all Local Authorities to update their Band B proposals and submit their revised Strategic Outline Programme (SOP) by 31 July, 2017. Following discussions a vote was taken and it was decided that the amended report be discussed at the meeting. The Committee was afforded adequate time to read the minor amendments to the report before consideration.

Submitted – a report by the Head of Learning in relation to the above.

The Head of Learning said that the Authority's Strategic Outline Programme (SOP) was presented to the Welsh Government in December 2013. The strategic paper was divided into 4 Bands namely Band A (2013-2019), Band B (2019-2022), Band C (2022-2025) and Band D (2025-2028). Since the original SOP (2013) factors such as demographic changes and leadership capacity have changed significantly. Additionally, Welsh Government has said that Band B will be for a period of 5 years and will run from 2019-2024. It was noted that due to the two primary schools in Llangefni being full to capacity, and the requirement to make changes to Ysgol Graig, the funding within Band A will not be sufficient to address all the requirements in the Llangefni area, Welsh Government has instructed the Authority to include the Llangefni area within the SOP Band B. The Head of Learning also said that the catchment area of Amlwch, Lligwy and Seiriol have been included within the SOP of Band B.

The Chair said that Councillor Lewis Davies (who is not a member of the Scrutiny Committee) had requested to speak on this matter.

Councillor Lewis Davies said that following receipt of the second published report with regard to the SOP, this report has been of great concern to the local members for the Seiriol areas. Non-statutory consultation has been undertaken recently in the three schools in the area i.e. Beaumaris, Llandedgan and Llangoed which has been positive and at times challenging. Beaumaris Town Council have also expressed deep concerns as regard to this matter and have suggested that decisions have already been taken for closure of some schools in the area. However, officers have assured publicly that no decisions have been taken as regards which schools are to close. He expressed his deep concerns that a sensitive document had been published publicly which was suggesting that one school was to close in the Seiriol area. He expressed that he has assured the Head-teachers and Governing Bodies of the 3 primary schools in the Seiriol area that he would attend this meeting to express concerns. Councillor Lewis considered that the consultation process should be suspended in the Seiriol area. He further said that the Chief Executive has said that he would attend a public meeting in Beaumaris when the matter is discussed.

The Chief Executive responded that he would do his utmost to attend the public meeting and it was noted that the Head of Learning had also been invited to the meeting.

Councillor R. Meirion Jones said that as Portfolio Holder for Learning he was apologising that the incorrect document had been presented, in the first instance, for consideration by this meeting. He expressed that no decision has been taken to close any school in the Seiriol area at present.

The Leader of the Council said that this was a Strategic Outline Programme for which the Authority was requesting £18 million from Welsh Government towards the Band B programme and reiterated that there has been no decision in regards to school closures.

The Committee considered the report and **it was RESOLVED to recommend to the Executive to:-**

- **Consider the modernisation of primary and secondary schools, and also primary and secondary sharing the same campus or 3-16 / 3-18 through schools;**
- **Consider a Local Authority contribution of approximately £18 million towards the Band B programme;**
- **Consider the seven main options as outlined in the Economic Case of the SOP, and to expect further detailed analysis in the subsequent, detailed business cases;**
- **Continue to support the school modernisation programme's case for change and the drivers for change.**

**COUNCILLOR ALED M. JONES
CHAIR**

ISLE OF ANGLESEY COUNTY COUNCIL	
REPORT TO:	CORPORATE SCRUTINY & EXECUTIVE COMMITTEE
DATE:	SEPTEMBER 4th & 18th 2017
SUBJECT:	SCORECARD MONITORING REPORT - QUARTER 1 (2017/18)
PORTFOLIO HOLDER(S):	COUNCILLOR DAFYDD RHYS THOMAS
HEAD OF SERVICE:	SCOTT ROWLEY
REPORT AUTHOR: TEL: E-MAIL:	GETHIN MORGAN 01248 752111 GethinMorgan@anglesey.gov.uk
LOCAL MEMBERS:	n/a

A - Recommendation/s and reason/s	
1.1	This is the first 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 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 – <ul style="list-style-type: none"> 1.3.1 <i>Overall targets are re-evaluated during Q2 following the publication of comparator data with an emphasis placed on improving indicators in the lower and lower median quartiles.</i> 1.3.2 <i>Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q2.</i> 1.3.3 <i>To continue with the regular service sickness challenge panels with an associated work-plan to keep a focus on improving our sickness management figures</i> 1.3.4 <i>The Customer Service Excellence Project continue to monitor the indicators and Childrens Services are reminded to provide a written response to complaints within timescales.</i>
1.4	The Committee is asked to accept the mitigation measures outlined above.

B - What other options did you consider and why did you reject them and/or opt for this option?		
n/a		
C - Why is this a decision for the Executive?		
This matter is delegated to the Executive		
CH - Is this decision consistent with policy approved by the full Council?		
Yes		
D - Is this decision within the budget approved by the Council?		
Yes		
DD - Who did you consult?		What did they say?
1	Chief Executive / Strategic Leadership Team (SLT) (mandatory)	This was considered by the SLT at their meeting on the 29th August and their comments are reflected in the report
2	Finance / Section 151 (mandatory)	No comment
3	Legal / Monitoring Officer (mandatory)	No comment
4	Human Resources (HR)	
5	Property	
6	Information Communication Technology (ICT)	
7	Scrutiny	
8	Local Members	
9	Any external bodies / other/s	
E - Risks and any mitigation (if relevant)		
1	Economic	
2	Anti-poverty	
3	Crime and Disorder	
4	Environmental	
5	Equalities	
6	Outcome Agreements	
7	Other	
F - Appendices:		
Appendix A - Scorecard Monitoring Report – Quarter 1, 2017/18 & Scorecard		
FF - Background papers (please contact the author of the Report for any further information):		
<ul style="list-style-type: none"> 2016/17 Scorecard monitoring report - Quarter 4 (as presented to, and accepted by, the Executive Committee in June 2017). 		

SCORECARD MONITORING REPORT – QUARTER 1 (2017/18)

1. INTRODUCTION

- 1.1 One of the Council's aims under the Wales Programme for Improvement is to secure the means by which continuous improvement can be evidenced and presented across the board. To that end, on an annual basis, a performance report is drafted to be published by end of October, which demonstrates progress or not (as the case may be).
- 1.2 This scorecard was developed in parallel to identify and inform Council leaders of progress against indicators which explicitly demonstrates the successful implementation of the Council's day to day work and 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 on the 26th July, 2017 with members of the Senior Leadership Team, the Executive and Shadow Executive.
- 1.4 The scorecard (Appendix 1) portrays the current end of Q1 position and will be considered further by the Corporate Scrutiny Committee and the Executive during September.

2. CONSIDERATIONS

- 2.1 This is the fifth year of collating and reporting performance indicators in a co-ordinated manner. The Council is seeing trends establish themselves with regards to a number of those indicators and SLT / Scrutiny and Executive comments are having an impact on operational delivery.
- 2.2 It is important to note that the formulation of this year's scorecard requested –
 - 2.2.1.1 the addition of the new PAM (Public Accountability Measures) national performance indicators that are collected on a quarterly basis into the Performance Management Section;
 - 2.2.1.2 The inclusion of a Service breakdown for some of the Financial Management indicators as an attachment to this report;
 - 2.2.1.3 The People Management section now includes the breakdown for Primary and Secondary schools Sickness data as recommended in the WAO report on sickness management; and
 - 2.2.1.4 the Customer Service section on responses to complaints within timescale is now split in two, Corporate Complaints and Social Services Complaints.

2.3 PERFORMANCE MANAGEMENT

- 2.3.1 The scorecard for Performance Management shows performance against indicators outlined and requested by the Senior Leadership Team, Executive and Shadow

Executive. Targets for which however, were set at a level prior to the publication of the national comparator data being published on the 13th of September.

2.3.2 At the end of Q1 it is encouraging to note that the majority of indicators are performing well against their targets but we note that 3 indicators that are underperforming as Amber or Red against their annual target for the year.

2.3.3 One of those indicators exist within Childrens Services was Red against target –

- (i) 07) SCC/025 – the % of statutory visits to looked after children due in the year that took place in accordance with regulations Q1 – 59.93%, RED. This compares with a performance of 82.69% for the same time period of 2016/17. This indicator was also discussed in the 2016/17 Q4 Scorecard report.

This Pi has seen a steady deterioration, due to the significant increase in the numbers of looked after children. A number of visits have been late because of this increase in demand. Unfortunately staffing difficulties within the service during Q1 has affected the service's capacity to undertake the visits within the recognised timescales.

Mitigation - to improve these standards for Q2 all Social Work teams have now been asked to undertake these visits.

2.3.4 One indicator within Adult Services shows an underperformance –

- (i) 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 is AMBER on the scorecard with a performance of 88.6% compared to a target of 93%. This performance is however an improvement on the performance of Q1 2016/17 which was 81.6%

The Carers Team is a small team of 2. Support from the overall social work team ensured good performance to the end of year 2016/17. Whilst performance has deteriorated slightly in Q1 2017/18 additional support from the wider team will be implemented over the year as priorities allow.

Mitigation – to improve the issues during 17/18 the service will –

- Continue to ensure support to Carers Team as appropriate. The service would wish to note that performance will vary slightly dependent on seasonal factors. i.e. unscheduled care pressure etc.

2.3.5 One new indicator within the Housing Service is Red on the scorecard for Q1 –

- (i) 28) PAM/015 - The average number of calendar days taken to deliver a Disabled Facilities Grant (DFG), RED, 221.7 Days against a target of 200.

This indicator has already seen an improvement on the outturn for 2016/17 which was 238.8 days to deliver a DFG.

Mitigation – The Service will review the collection of this indicator during Q2 to understand how best to improve on the current performance. The Service ensures all DFG applications are monitored as described in the

national guidance. The DFG process revolves around the needs of the individual and in many cases, this takes time to agree the most appropriate solutions, whilst also ensuring value for money. There are so many different parties involved in each DFG application, from the Occupational Therapist, Technical Services, Care and Repair, supplier of adaptations and contractors. All of which may cause a delay in the time taken from the initial contact with the Council, until the day the work has been signed off as complete. Both Housing and Social Services acknowledge that the DFG process requires a review of processes, with a view of reducing the time taken to deliver a DFG.

- 2.3.6** Whilst the remaining indicators reported for Q1 are all ragged **GREEN** or **YELLOW** within the performance management section it should be noted that this does not mean that our position on a national basis has improved across all areas.
- 2.3.7** Analysis of the overall performance can be gained through the Annual Performance Report to be published before the end of October and reported to the Scrutiny and Executive Committee's during September 2017.
- 2.3.8** As was discussed in the Q4 Scorecard Report for 2016/17, a large amount of the indicators hit their targets for 2016/17, which was encouraging. If we are to progress and improve our standing as an achieving Council, ***the SLT recommends –***
- 2.3.8.1** Targets are re-evaluated during Q2 following the publication of the national comparator data with an emphasis placed on improving indicators in the lower and lower median quartiles.
- 2.3.8.2** *Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q2.*
- 2.3.9** No update on the progress of programmes/projects is included during this quarter due to the re-establishment of the boards for 2017/18. This information will be included in the Scorecard report in all remaining reports for 2017/18.

2.4 PEOPLE MANAGEMENT

- 2.4.1** 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 Q1 of 2.23 shows a further improvement when compared with the same period for 2016/17 of 2.69. This indicates that the projected end of year sickness level (if trends continue as indicated over the past two years) would equate to 10.18 days per FTE.

Sickness absence - average working days/shifts lost

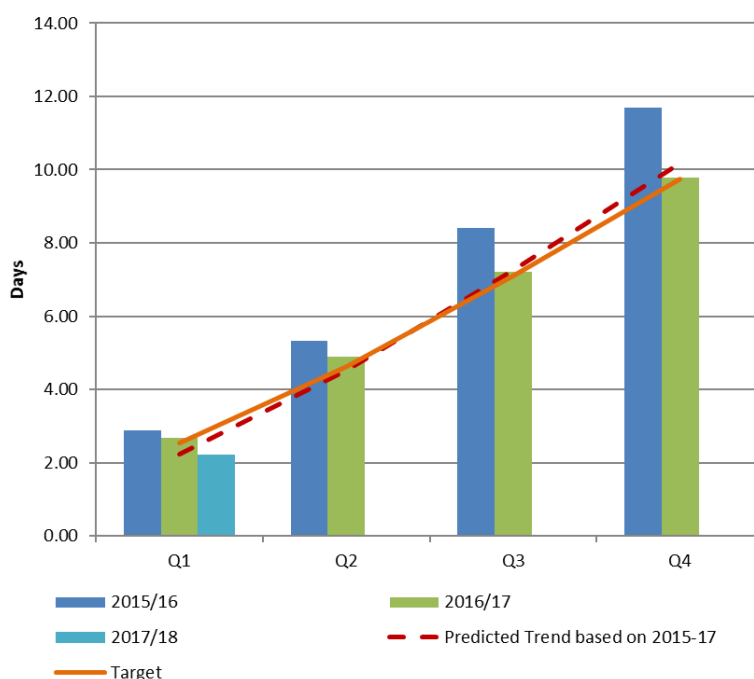


Table 1

2.4.2 As discussed in the Q4 report, Service targets have been identified for the forthcoming year based on the trends of 2016/17. These can again be seen in Table 2 below:

Service	2017/18 Target
Adult Services	12.5
Children Services	12.5
Council Business	8
Highways, Property and Waste	10
Housing	10
Learning	9.5
Regulation and Economic Development	7
Resources	7
Senior Management	7
Transformation	7

Table 2

2.4.3 Point to Note - If all service targets are met above, the Council will meet its sickness absence target of 9.75 days per FTE.

2.4.4 Service Performance against these targets for Q1 indicate that only 1 Service is RED or AMBER compared to their targets for the quarter:

2.4.4.1 Regulation & Economic Development – RED - 2.78 Days Sick per FTE (Target 1.34). The main reason for the decline in the service sickness for Q1 is due to a number of long term sickness cases in Leisure, resulting

in a total of 218 Days lost to sickness in the period compared to the service total of 298 Days lost to sickness, or 46% of the Service total sickness levels for the period.

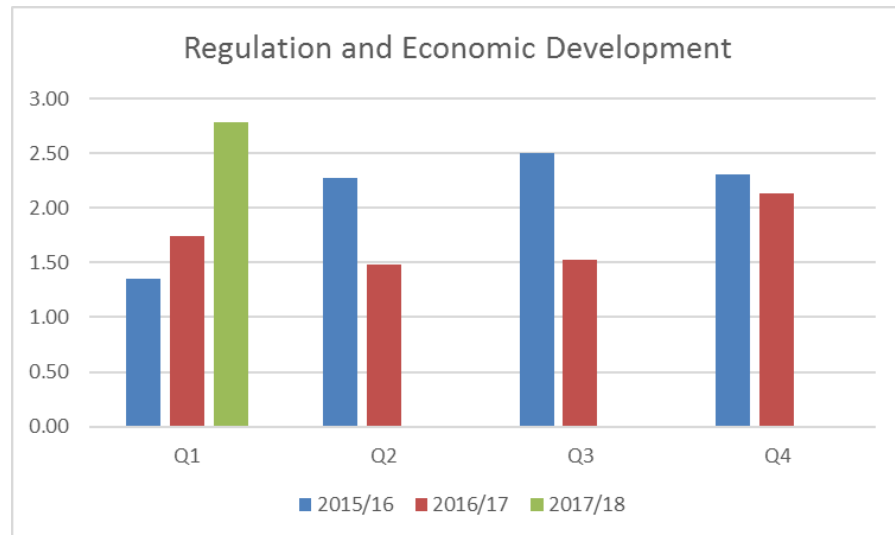


Table 3

- 2.4.5** Further information on the sickness levels within both Primary and Secondary Schools are now included in the Scorecard (items 4a to 5c) and both are currently GREEN.
- 2.4.6** Associated with sickness rates is the 'management' of sickness. An integral part of the management process within the Council is staff's compliance with corporate sickness policies which includes the undertaking of return to work interviews and Attendance Review Meetings (*indicators 7 & 8 on scorecard*).
- 2.4.7** The Council continues to embed this working practice across its services but during Q1 the Return to Work (RTW) interviews within timescale (67%) has dropped significantly below the target of 80% and is now RED (Table 4). The total RTW interviews held is also low at 85% compared to a target of 95%.
- 2.4.8** During Q1 the services which failed to hit the Corporate Target of 80% within timescale were Childrens Services 33%, Resources 63%, Learning 64%, Highways, Waste and Property 72%, and Adult Services 74%.
- 2.4.9** The only service that was Red on the total % RTW interviews held (within and out of timescale) was Learning with 79% completed. The remaining services are within 5% of the targets.

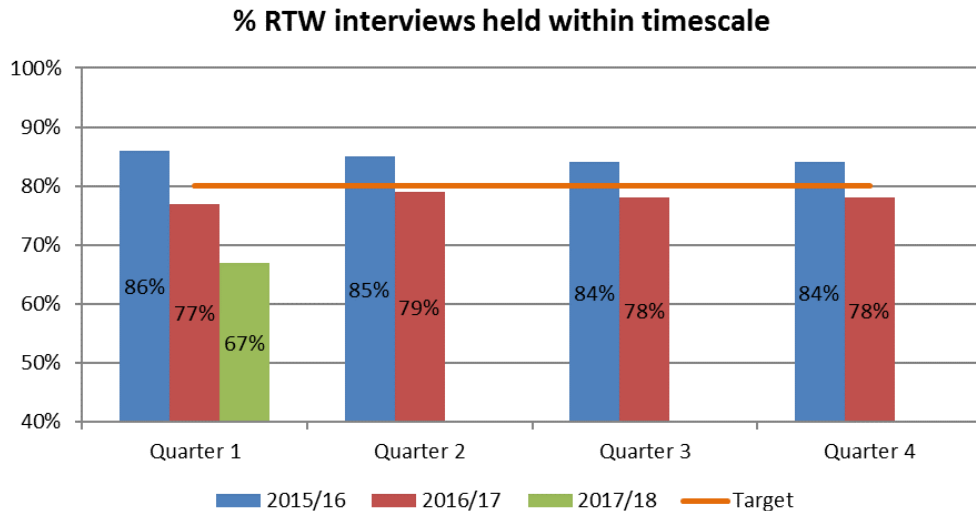


Table 4

2.4.10 The ARM figures for Q1 at 78%, have improved significantly on performance from Q4 16/17 which was 57% (these figures do not include Schools). Human Resources have noted that the quality of the ARMs coming through from services continue to be greatly improved. Services have been reminded of the need to undertake ARMs and this will be an area for particular attention in the challenge panels of 2017/18.

2.4.11 The SLT therefore recommends –

2.4.11.1 To continue with the regular service sickness challenge panels with an associated work plan to keep a focus on improving our sickness management figures.

2.5 CUSTOMER SERVICE

2.5.1 This year sees the same indicators as 2016/17 the data has however been split this into two sections, the first section looking at indicators relating to the Customer Service Charter and the second section looking at the Digital Services Shift.

2.5.2 During Q1, users used AppMôn technology to submit 567 reports up (including fly tipping, faulty street lighting, compliments or complaints, broken pavements, sports club database forms and ordering recycling bins). 85% of these reports have come through the website, a similar level to Q4 16/17 where 87% of reports were submitted via the website. The belief is these reports will continue to increase as more forms are added to the website. Unfortunately, we continue to be unable to provide the amount of downloads of AppMôn from the supplier.

2.5.3 The remaining indicators within the Digital Services Section focus on the website and on our social media presence. We had an increase of 33k unique visits during Q1 compared to the same period last year (166k for 17/18 and 134k for 16/17). Our social media presence has also resulted in a total of 21k social media accounts following us on Facebook (9k followers) and Twitter (12k followers).

2.5.4 Regarding Customer Complaints Management, by the end of Q1 20 Complaints were received. All of the complaints requiring a response by the end of Q1 (13

complaints) have received a response within timescale. Of these complaints 5 were upheld in full (Highways, Waste & Property [2], and Resources [2]) whilst the remaining 12 were not upheld.

2.5.5 There were 2 Stage 2 Complaints in Social Services (Childrens Services [2]) and 17 Stage 1 Complaints (Childrens Services [15], Adult Services [2]) received during Q1. A total of 53% of the complaints have been responded to within timescale with 9 late responses (Childrens Services [8] and Adult Services [1]). Although Childrens Services failed to send written responses within timescale for 8 of the 15 Stage 1 complaints, 12 of the 15 (80%) had held a discussion with the complainant within timescales.

2.5.6 The % of FOI requests responded to within timescale performed at 80% at the end of Q1 compared to 77% at the end of 2016/17. In total there was 220 FOI requests in Q1 with 34 late responses. The majority of the late responses came from Social Services which equated to 27% of the late responses (21% of the 42 received by the service), Regulation & Economic Development with 21% (19% of the 37 received by the service), and Resources with 15% (14% of the 37 received by the service).

2.5.7 The Mystery Shop (Items 11-14 on the scorecard) has once again been pencilled in to take place in Q3. The Mystery Shop will again be undertaken by the Tenants Advisory Group. Findings and recommendations of their report will be reported here in the Q4 report.

2.5.8 *The SLT therefore recommends –*

2.5.8.1 *The Customer Service Excellence Project continue to monitor the indicators and Childrens Services are reminded to provide a written response to complaints within timescales.*

2.6 FINANCIAL MANAGEMENT

2.6.1 A total overspend of £2.16m is projected for the year-ending 31 March 2018. £3.090m of this is on service budgets, though it must be highlighted that this is made up of a number of over and underspends (Appendix B). The Services that are still experiencing significant budgetary pressures are similar to 2016/17 (Children and Families Service and Learning). The Heads of Service are aware of the issues and are working to reduce the level of overspending at the year-end. Corporate Finance is expected to underspend by £0.235m and Council Tax which includes the Council Tax Premium is forecast to collect a surplus of £0.695m. The overall overspend is therefore reduced to £2.160m. The projected level of overspend is 1.71% of the Council's net budget. There is concern about the impact of this level of overspend on general balances should the overspend materialise. An alternative to part, or fully, fund this would be to review and release any earmarked reserves which are no longer needed or a priority. Some earmarked reserves, however, have to be used for their specific purpose.

2.6.2 It should be noted that quarter 1 is early in the financial year and items such as the impact of winter maintenance and the new Highways maintenance contract have not been included in the forecast as there is no information available. Forecasts are subject to change as new information becomes available. However, with regular

scrutiny from SLT and if remedial action is taken by Heads of Services these will help the services manage within the budgets they can control.

- 2.6.3** Further information on financial management can be seen in the 'Revenue Budget Monitoring Report for Q1' which will be discussed in The Executive meeting on the 18th September and the Finance Scrutiny Panel on the 29th September.

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** Overall targets are re-evaluated during Q2 following the publication of comparator data with an emphasis placed on improving indicators in the lower and lower median quartiles.
- 3.1.2** Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q2.
- 3.1.3** To continue with the regular service sickness challenge panels with an associated work-plan to keep a focus on improving our sickness management figures
- 3.1.4** The Customer Service Excellence Project continue to monitor the indicators and Childrens Services are reminded to provide a written response to complaints within timescales.
- 3.2** The Committee is asked to accept the mitigation measures outlined above.

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q1 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)	Melyn / Yellow	↓	20	18	71	59	
02) No of Stage 2 Complaints received for Social Services	-	↓	2	-	5	5	
03) Total number of complaints upheld / partially upheld	-	⇒	7	-	25	21	
04a) Total % of written responses to complaints within 20 days (Corporate)	Gwyrdd / Green	↑	100%	80%	93%	64%	
04b) Total % of written responses to complaints within 20 days (Social Services)	Coch / Red	↓	53%	80%	63%	-	
05) Number of concerns (excluding Social Services)	-	↑	37	-	191	261	
06) Number of Stage 1 Complaints for Social Services	-	↓	17	-	54	53	
07) Number of Compliments	-	↑	160	-	566	712	
08) % of FOI requests responded to within timescale	Gwyrdd / Green	↑	80%	80%	77%	67%	
09) Number of FOI requests received	-	-	220	-	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)	Gwyrdd / Green	-	78%	-	67%	-	
12) % of written responses in the customers language of choice (Mystery Shop)	Gwyrdd / Green	-	100%	-	100%	-	
13) % of telephone calls answered bilingually (Mystery Shop)	Gwyrdd / Green	-	83%	-	77%	-	
14) % of staff that took responsibility for the customer query (Mystery Shop)	Melyn / Yellow	-	87%	-	90%	-	
Newid Cyfrwng Digidol / Digital Service Shift							
15) No of AppMôn users (annual)	-	-	-	-	-	-	
16) No of reports received by AppMôn	-	↑	567	-	1k	-	
17) No of web payments	-	↑	4k	-	10k	-	
18) No of 'followers' of IOACC Social Media	Gwyrdd / Green	⇒	21k	21k	21k	-	
19) No of visitors to the Council Website	Gwyrdd / Green	↑	167k	541k	541k	-	
Rheoli Pobl / People Management							
01) Number of staff authority wide, including teachers and school based staff (FTE)	-	-	2295	-	2258	2310	
02) Number of staff authority wide, excluding teachers and school based staff(FTE)	-	-	1268	-	1250	1303	
03a) Sickness absence - average working days/shifts lost	Gwyrdd / Green	↑	2.23	2.45	9.78	11.68	
03b) Short Term sickness - average working days/shifts lost per FTE	-	-	0.94	-	4.72	4.89	
03c) Long Term sickness - average working days/shifts lost per FTE	-	-	1.29	-	5.06	6.79	
04a) Primary Schools - Sickness absence - average working days/shifts lost	Gwyrdd / Green	-	2.47	2.5	-	-	
04b) Primary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	1.16	-	-	-	
04c) Primary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	1.31	-	-	-	
05a) Secondary Schools - Sickness absence - average working days/shifts lost	Gwyrdd / Green	-	1.92	2.5	-	-	
05b) Secondary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	1.04	-	-	-	
05c) Secondary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	0.88	-	-	-	
06) % of RTW interview held within timescale	Coch / Red	↓	67%	80%	78%	84%	
07) % of RTW interview held	Ambr / Amber	↓	85%	95%	91%	-	
08) % of Attendance Review Meetings held	Melyn / Yellow	↑	78%	80%	57%	-	
09) Local Authority employees leaving (%) (Turnover) (Annual)	-	-	-	-	10%	-	
10) % of PDR's completed within timeframe	-	-	-	80%	80%	-	
11) % of staff with DBS Certificate (if required within their role)	-	-	-	-	91.40%	98%	
12) No. of Agency Staff	-	↓	18	-	15	26	
Rheolaeth Ariannol / Financial Management							
01) Budget v Actuals	Coch / Red	-	£33,103,030	-	-	£34,252,570	-29.64%
02) Forecasted end of year outturn (Revenue)	Coch / Red	-	£126,157,000	-	-	£128,317,000	1.71%
03) Forecasted end of year outturn (Capital)	Coch / Red	-	£33,381,000	-	-	£23,064,000	-30.91%
04) Achievement against efficiencies	Ambr / Amber	-	£2,444,000	-	-	£1,719,500	-29.64%
05) Income v Targets (excluding grants)	Gwyrdd / Green	-	-£5,312,900	-£5,546,790	4.40%	-	-
06) Amount borrowed	-	-	£8,089,000	-	-	£9,094,000	12.42%
07) Cost of borrowing	-	-	£4,257,000	-	-	£4,095,000	-3.81%
08) % invoices paid within 30 days	Gwyrdd / Green	-	-	81.82%	-	-	-
09) % of Council Tax collected (for last 3 years)	Melyn/Yellow	-	-	98.60%	-	-	-
10) % of Business Rates collected (for last 3 years)	Melyn/Yellow	-	-	98.50%	-	-	-
11) % of Sundry Debtors collected (for last 3 years)	Ambr / Amber	-	-	96.40%	-	-	-
12) % Housing Rent collected (for the last 3 years)	-	-	-	100.98%	-	-	-
13) % Housing Rent collected excl benefit payments (for the last 3 years)	-	-	-	-	-	-	-

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Canlyniad 15/16 Result	Chwarter 16/17 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	↑	20.22	22	20.51	20.3	-
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	Ambr / Amber	↑	88.6	93	94.4	90.8	-
03) PM18 - The percentage of adult protection enquiries completed within statutory timescales	Gwyrdd / Green	↑	92.16	90	90.48	-	-
04) PM19 - The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	Gwyrdd / Green	↑	1.32	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	↓	40	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	↑	62.64	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	↓	59.93	I'w gadarnhau / TBC	79.35	82.79	-
08) PM24 - The percentage of assessments completed for children within statutory timescales (42 working days)	-	-	88	I'w gadarnhau / TBC	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	-	-	5.68	I'w gadarnhau / TBC	17.53	-	-
10) PM33 - The percentage of looked after children on 31 March who have had three or more placements during the year	Gwyrdd / Green	↑	0	8	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)	-	↓	287	I'w gadarnhau / TBC	266	-	-
12) Attendance - Primary (%)	-	↓	94.8	-	94.8	95.1	-
13) Attendance - Secondary (%)	-	↑	94.6	-	94.6	94.5	-
14) No. of days lost to temp exclusion - Primary	-	-	-	-	-	-	-
15) No. of days lost to temp exclusion - Secondary	-	-	-	-	-	-	-
16) KS4 - % 15 year olds achieving L2+ (Q3)	-	-	-	-	58.8	56.9	-
17) KS3 - % pupils achieving CSI (Q3)	-	↑	88.9	90.1	87.6	84.5	-
18) KS2 - % pupils achieving CSI (Q3)	-	↑	91.4	91	89.4	91.8	-
19) FPh - % pupils achieving CSI/FPI (Q3)	-	↑	85.8	88.4	84.7	86.2	-
20) LCL/001b: The no. of visits to public libraries during the year	Gwyrdd / Green	-	68.5k	68k	288k	289k	-
21) LCL/004: The no. of library materials issued, during the year	Gwyrdd / Green	-	68k	65k	272k	284k	-
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	-	89.58	92	90.2	89.5	-
24) Productivity of workforce- % time which is classified as productive	Gwyrdd / Green	-	81.77	80	80.1	74.6	-
25) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Gwyrdd / Green	-	19.3	23	28	33.7	-
26) PAM/013 - Number of empty private properties brought back into use	-	-	16	-	-	-	-
27) PAM/014 - Number of new homes created as a result of bringing empty properties back into use	-	-	0	n/a	-	-	-
28) PAM/015 - Average number of calendar days taken to deliver a Disabled Facilities Grant (DFG)	Coch / Red	-	221.7	200	-	-	-
29) STS/005b: The percentage of highways inspected of a high or acceptable standard of cleanliness	Gwyrdd / Green	-	95.79	94	93.4	95.1	-
30) STS/006: The percentage of reported fly tipping incidents cleared within 5 working days	Gwyrdd / Green	-	100	100	97.31	98.5	-
31) WMT/009b: The percentage of municipal waste collected by local authorities and prepared for reuse and/or recycled	Gwyrdd / Green	-	75.74	67	65.79	59.5	-
32) WMT/004b: The percentage of municipal waste sent to landfill	Gwyrdd / Green	-	0.5	5	6.6	16.9	-
33) THS/011c: The % of non-principal (C) roads that are in an overall poor condition (annual)	-	-	-	10	10.1	13.5	-
34) No. of attendances (young people) at sports development / outreach activity programmes	Gwyrdd / Green	-	26k	26k	113k	132k	-
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	-	116k	103k	464k	458k	-
36) PAM/023 - Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	-	98	80	98	-	-

APPENDIX B

Projected Revenue Outturn for the Financial Year Ending 31 March 2018 – Quarter 1

Service/Function	2017/18 Annual Budget	Q1 2017/18 - Budget Year to Date	Q1 Actual & Committed spend 2017/18	Q1 2017/18 Variance	Q1 Estimated Expenditure to 31 March 2018	Q1 Estimated Outturn 31 March 2018	2017/18 Projected Over/(Under) spend as a % of Total Budget
	£	£	£	£	£	£	%
Lifelong Learning							
Delegated Schools Budget	43,581,400	11,845,407	11,845,407	0	43,581,400	0	0.00%
Central Education	3,188,490	1,005,109	1,042,743	37,634	3,806,490	618,000	19.38%
Culture	1,312,790	450,131	505,847	55,716	1,373,790	61,000	4.65%
Adult Services	22,497,160	6,029,748	6,131,097	101,349	22,796,176	299,016	1.33%
Children's Services	8,001,240	2,127,977	2,554,008	426,031	10,107,240	2,106,000	26.32%
Housing	1,026,820	479,465	436,735	(42,730)	1,026,820	0	0.00%
Highways, Waste & Property							
Highways	6,420,800	1,905,334	1,978,341	73,007	6,423,800	3,000	0.05%
Property	1,025,340	(388,554)	(416,478)	(27,924)	992,340	(33,000)	-3.22%
Waste	6,303,040	1,634,256	1,597,039	(37,217)	6,333,040	30,000	0.48%
Regulation & Economic Development							
Economic Development	1,958,800	740,607	581,505	(159,102)	2,038,800	80,000	4.08%
Planning and Public Protection	2,141,750	472,667	470,796	(1,871)	2,127,750	(14,000)	-0.65%
Transformation							
Human Resources	1,221,570	274,271	315,866	41,595	1,221,570	0	0.00%
ICT	1,689,790	491,205	960,595	469,390	1,789,790	100,000	5.92%
Corporate Transformation	861,250	156,270	159,945	3,675	861,250	0	0.00%
Resources	2,755,760	773,455	989,850	216,395	2,787,760	32,000	1.16%
Council Business	1,517,480	330,800	380,609	49,809	1,567,480	50,000	3.29%
Corporate & Democratic costs	1,665,860	612,732	561,741	(50,991)	1,524,860	(141,000)	-8.46%
Corporate Management	1,009,250	255,899	192,971	(62,928)	908,250	(101,000)	-10.01%
Total Service Budgets	108,178,590	29,196,779	30,288,617	1,091,838	111,268,606	3,090,016	2.86%

Service/Function	2017/18 Annual Budget	Q1 2017/18 - Budget Year to Date	Q1 Actual & Committed spend 2017/18	Q1 2017/18 Variance	Q1 Estimated Expenditure to 31 March 2018	Q1 Estimated Outturn 31 March 2018	2017/18 Projected Over/(Under) spend as a % of Total Budget
	£	£	£	£	£	£	%
Corporate Finance							
Levies	3,334,733	831,392	831,392	0	3,334,733	0	0.00%
Capital Financing	8,149,332	2,029,586	2,029,586	0	7,913,846	(235,486)	-2.89%
General & Other Contingencies	1,667,135	416,784	416,784	0	1,667,135	0	0.00%
Corporate Savings	(232,710)	(58,177)	0	58,177	(82,710)	150,000	
Support Services contribution HRA	(621,950)	0	0	0	(621,950)	0	0.00%
Benefits Granted	5,681,870	686,637	686,155	(482)	5,532,870	(149,000)	-2.62%
Total Corporate Finance	17,978,410	3,906,222	3,963,917	57,695	17,743,924	(234,486)	-1.30%
Total Budget 2017/18	126,157,000	33,103,001	34,252,534	1,149,533	129,012,530	2,855,530	0
Funding							
NDR	(23,002,000)				(23,002,000)	0	0.00%
Council Tax	(32,941,000)				(33,288,879)	(347,879)	1.06%
Council Tax Premium	(564,000)				(911,480)	(347,480)	61.61%
Revenue Support Grant	(69,650,000)				(69,650,000)	0	0.00%
Total Funding 2017/18	(126,157,000)				(126,852,359)	(695,359)	0.55%
Total outturn including impact of funding	0	33,103,001	34,252,534	1,149,533	2,160,172	2,160,172	1.71%

ISLE OF ANGLESEY COUNTY COUNCIL	
Report to	Corporate Scrutiny
Date	4.9.17
Subject	Council Plan 2017-2022
Portfolio Holder	Dafydd Rhys Thomas
Lead Officer(s)	Scott Rowley
Contact Officer	Gethin Morgan
<p>Nature and reason for reporting -</p> <p>To enable the Executive to formally recommend the Isle of Anglesey Council Plan 2017-2022 to Full Council for endorsement and adoption</p>	

A – Introduction / Background / Issues
<p>Ensuring that as a County Council we have a robust and meaningful Council Plan is paramount to the successful implementation of our continued agenda and our vision to develop a sustainable Anglesey where individuals are independent living within strong families in healthy, thriving, prosperous and resilient communities.</p> <p>The plan itself has been developed and shaped by:-</p> <p>The continuing views of local people – We are continuing on our drive to become an even better listening Council and have improved further our consultation and</p>

engagement practices with our citizens and communities under the guidance and direction of the Corporate Engagement and Consultation Board. An extensive and comprehensive citizen engagement process was undertaken during 2017 to identify and indeed confirm a number of priorities and outcomes which our citizens see as important for them during the term of this plan.

The views of our partners – Almost no service we provide is delivered without the input and involvement of our local partners. In developing this document we have considered the Island wide agenda being developed with partners and focused on those areas where we can make a difference by taking the lead.

How well our Services are currently performing – We are continually improving how we monitor our performance through the associated Performance Management Framework, to ensure we are on track and making continual improvements. If we are not performing at a good enough level, then action is to be taken to put things right. Our priorities reflect a number of areas where improvement is required to build our sustainable future.

Political Priorities – Elected Councillors as representatives of their local communities have also highlighted issues through traditional modes of engagement, briefing sessions and programme boards. These have also been reflected in this document.

Welsh Government’s Future Generations & Wellbeing Act – The Welsh Government’s priorities as highlighted in their Taking Wales Forward Programme in alignment with the new legislation also reflects our local priorities with particular emphasis on supporting the most vulnerable, ensuring opportunities for progression exist and the wellbeing of our citizens are at the heart of what we do.

B – Considerations

Previously, the Council’s Corporate Plan (2013-2017) as adopted by full Council during 2013/ 14 provides the base from which this Council Plan has been developed.

The new plan will be central to continually moving the council forward culturally at a time of continual change and ever decreasing resources. It will also enable us to become a Council where others seek to benchmark themselves against. This means that by 2022 the Isle of Anglesey Council will have;

- an understanding of and be proactively managing the performance of our services, targeting improvement actions where and when this is needed
- areas of innovation, good practice and service excellence that other organisations seek to benchmark themselves against.
- elected members, managers and staff who make a difference and grow in capability as a result.
- Further developed the respect within the local government family in Wales, locally, regionally and nationally.
- productive, transparent and trusting relationships with our partners.
- satisfied our auditors in terms of leadership, governance and organisational capacity.

In developing our Council there are **6 key themes** that will underpin the way in which we will work. These key themes developed by staff are as follows;

Theme 1- Professional and Well Run

Theme 2 - Innovative, Ambitious and Outward Looking

Theme 3 - Customer, Citizen and Community Focused

Theme 4 - Valuing and Developing our People

Theme 5 - Committed to Partnership

Theme 6 – Achieving

The engagement and consultation exercise in developing this plan has been robust and detailed. The voice of our citizen has been listened to from the very beginning of this process which included –

Press and media coverage of the consultation exercise

Engagement with public via Corporate Facebook and Twitter accounts

Community engagement and consultation workshops throughout the County

Workshops, briefing sessions and discussions with Heads of Service / Senior Leaders & Members

1.3 The key elements of the Plan are as follows –

Aim – “we will be working towards an Anglesey, where we have independent individuals living within strong families in healthy, thriving, prosperous and resilient communities”

During the engagement and consultation exercises since 2013, citizens have been asked their views about what’s important to them. Across demographics, geographies and different consultation mechanisms the overwhelming and consistent priorities are:

- Supporting the most vulnerable
- developing the economy and ensuring our wellbeing
- Raising the standards of and modernising our schools

These priorities therefore form the basis of the focus areas in this corporate plan: –

- Ensure opportunities exist for people to thrive and realise their long-term potential
- Support vulnerable adults and families to keep them safe, healthy and as independent as possible
- Ensure that our communities can cope effectively with change and developments whilst protecting our natural island environment

It is identified within the plan that we will take a ‘One Council’ approach to service delivery by supporting the delivery of a modern, flexible workforce, equipped to deliver the Council’s goals. The role of our workforce will change as the plan is delivered. Our evolving role will be to commission services and where it delivers the best outcome be the provider of these services.

Ensuring this plan will be delivered will be key. In doing so, we will –

- Establish robust arrangements for dealing with our severe financial challenges, ensuring priority areas are protected whilst service transformation and innovative delivery will be at the heart of what we do.
- Re-emphasise our integrated performance management framework, linking our priorities to that of the MTFP
- Collect data and use information to monitor our performance through publicly available quarterly reports
- Build on the strength of our engagement with and involvement of Anglesey citizens in the way Council makes its decisions

C – Implications and Impacts

1	Finance / Section 151	The costs associated with the implementation of the Council's priorities are aligned to the development of the Medium Term Financial Plan.
2	Legal / Monitoring Officer	
3	Human Resources	
4	Property Services (see notes – separate document)	
5	Information and Communications Technology (ICT)	

6	Equality (see notes – separate document)	
7	Anti-poverty and Social (see notes – separate document)	
8	Communication (see notes – separate document)	
9	Consultation (see notes – separate document)	
10	Economic	
11	Environmental (see notes – separate document)	
12	Crime and Disorder (see notes – separate document)	
CH – Summary		
Ensuring that as a County Council we have a robust and meaningful Council Plan is paramount to the continued improvement journey and developing agenda at a time of		

change and ever decreasing resources. It provides a tangible, strategic direction for the organisation, one which Members and Officers can be accountable for its delivery. It contains the Council's aim, focus areas and outcomes which we as an organisation will be working towards in order to make a difference to the lives of our citizens over the next five years.

D – Recommendation

Recommended to -

Relevant Issues/Questions

In light of the above, the Corporate Scrutiny Committee should consider the following questions/issues.....

1. What is the relationship between the proposed new Council Plan and the Medium Term Financial Plan (MTFP)?
2. How does this Plan reflect the Authority's own self assessment?
3. To what extent are the workstreams in the Scheme achievable? Are there any likely risks on the horizon?
4. What is the relationship between the previous plan and the document for 2017/2022?

How does the proposed plan align with national priorities and priorities and comments from our key partners?

Name of author of report – Gethin Morgan

Job Title – Business Planning, Programme & Performance Manager

Date - 8.8.17

Appendices:

Council Plan 2017-2022

Background papers

Council Corporate Plan 2013-2017

Isle of Anglesey County Council

2017–2022 Plan

The Council's key ambition is that we “will be working towards an Anglesey that is healthy, thriving and prosperous”.

The key theme running through the plan is our ambition to work with the people of Anglesey, our communities and partners to ensure high quality services that will improve the quality of life for everyone on the Island.

In recent discussions with our communities, staff and elected members the following priorities have been identified.

- Creating the conditions for everyone to achieve their long-term potential.
- Support vulnerable adults and families and keep them safe, healthy and as independent as possible.
- Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment.

In a period of austerity this plan will influence the way we shape our budget.

Key facts about Anglesey

Anglesey is just over 700km square in size and is mostly made up of small towns, villages and farm land. The 200km of beautiful coastline, made up of a mixture of sandy beaches and rocky coves, attracts a large number of tourists, especially during the summer.

The A55 road connects the island to the rest of Wales and is a main route to and from Holyhead Port.

Almost 70,000 people live on Anglesey. 61% are of working age and 76.5% of these are in work – this is higher than the Welsh average. The number of working-age population that are either managers, directors or senior officials is higher than the Welsh average and we have one of the highest rates of self-employment in the country – mostly small and sole trader businesses.

All of Anglesey's towns and villages can be reached within half an hour from the Council's main offices in Llangefni.

Our Welsh heritage and culture is important. More than three-quarters of our children and more than half the adults can speak Welsh. Safeguarding the language is a high priority for the Council.

Anglesey is amongst the happiest places to live in Wales. In a recent Annual Population Survey undertaken by the Office for National Statistics, Anglesey was ranked 1st in Wales in relation to overall Life Satisfaction. In terms of happiness Anglesey was ranked 2nd in Wales. Anglesey is also amongst the safest of places to live in Wales.

The island is a truly great place to live and delivering efficient and effective Council services to ensure this continues will be our main priority over the next five years.

The Island is split in to 11 wards, each being served by more than one County Councillor. There are 30 County Councillors in total.

Key purpose of this 5-year plan....

This document sets out the Council's Aims and Objectives for the next five years. It will be the reference point for the decision-making process at all levels. It will also:

- set the framework we use to plan and drive the implementation of our priorities;
- direct the way we shape our spending in the context of substantial funding reduction;
- be used to monitor the progress of the priorities noted.

What we want to do over the next 5 years?

Our AIM is that we will be working towards an Anglesey that is healthy and prosperous where families can thrive.

We will also do our very best to ensure that our work aligns with the goals and the principle of sustainable development embodied in the Wellbeing of Future Generations [WBFG] Act.

What we want to do – Objective 1

Ensure that the people of Anglesey can thrive and realise their long-term potential.

Why do we want to do this?

To enable residents to reach their full potential requires the successful combination of a number of factors like good employment opportunities, the correct mix of skills and training; the availability of quality and affordable housing and access to a high quality natural and built environment. We will improve the conditions for residents to reach their full potential, improve the quality of their lives and their wellbeing.

Although Anglesey has long suffered from a declining economy with significant pockets of socio-economic deprivation the median weekly wage on the Island is higher (by 8%) than the Wales average. The percentage of people in employment is similar to the national figure. More of our working-age population are either managers, directors or senior officials than the Welsh average. We have one of the highest rates of self-employment in the country – we are innovative and dynamic as an island and we'd like to see this develop further.

How will we achieve this objective?

Jobs and work opportunities

We will make every effort to improve employment opportunities, skills and training.

1. We will promote Anglesey to encourage major developers to invest in the Island and use this as a catalyst for business development and jobs on the Island.
2. Work with the other North Wales Councils to attract investment to ensure that key projects that offer local employment opportunities go ahead.
3. Do our very best to create the conditions for local businesses to develop and create good quality jobs in Anglesey. This will include ensuring that Council spending supports local businesses.
4. Promote apprenticeships arising from new developments and ensure that young people and adults have the right skills and expertise for work. We will also create opportunities within the Council to develop our own staff.

Education and skills

We will continue to raise standards in education and ensure that our young people have the correct skills for employment and training.

5. Continue with our school modernisation programme by publishing a revised strategy that will address the long term sustainability of primary and secondary education across the Island. This will include the possibility of 3–18 learning campuses in specific locations.
6. Complete the work on Ysgol Santes Dwynwen, Newborough, the Seiriol and Llangefni areas.
7. Increase the number applying for leadership roles in primary and secondary schools by delivering an in-house programme that will identify and develop future school leaders.
8. Work with partners to offer the best opportunities in education and skills for our young people.

Health and Wellbeing

We will create the conditions for individuals to improve their health and wellbeing.

9. Encourage individuals to improve their own health and wellbeing by promoting active lifestyles amongst children, young people and adults.
10. Use our own resources, and those of external partners, to increase the number of affordable and council owned homes and bring empty houses back into use.
11. Work with external partners to ensure that all parts of the island can access fast and reliable broadband service to promote flexible methods of working and allow residents to do their council business on-line.

What do we want to do – Objective 2

Support vulnerable adults and families to keep them safe, healthy and as independent as possible.

Why do we want to do this?

The Council faces many social care challenges – a rising elderly population, increasing numbers of patients with chronic conditions and rising obesity rates. Social care costs are increasing continuously while budgets are being cut.

Over the last thirty years the number of people over the age of 65 has grown to around 17,000 [an increase of 12%]; the corresponding increase for over 85 years

old is 16%. Predictions suggest that this trend will continue over the period of the plan and this will increase the pressure on Health and Social care. As a result, the Council will need to work closer with the Health Board and the Third Sector to promote good health through preventative action and early intervention. In this context, priority will be given to developing community based hubs to deliver preventative services that respond to local care and support needs which in turn will lead to greater independence amongst our adults.

The number of looked after children and applications for suitable housing, often to avoid homelessness, have also increased over the last two years. As a result, the Council will need to prioritise support for families to ensure that all children have the best start in life and that preventative support services are timely and successful in keeping children at home. The Council will also need to ensure that it has the correct type of housing in the right places to meet local needs and that suitable support is available for those families who find it difficult to respond to Welfare reform changes.

How will we achieve this objective?

Support for older and vulnerable adults

Support for individuals to remain independent

1. Agree on plans to provide extra care housing provision in the centre, north and south-east of the Island.
2. Develop flexible models of accommodation and support for individuals with learning disabilities and mental health problems in order to promote independent living within our communities.
3. Ensure that the Council, Health Board and the Third Sector work together to provide 24/7 support to allow individuals to remain at home or return home from hospital.
4. Ensure that community hubs are available across the Island to support older adults to remain independent, reduce isolation, stay active and improve personal wellbeing.
5. Improve provision for adults with dementia.

Support for families and children

Preventative services and support for families.

6. Provide robust early intervention and prevention services to ensure that children are safe and supported in order to minimise harmful childhood experiences.

7. Ensure that Council services designed to tackle poverty are coordinated and effective.
8. Ensure suitable housing provision is available to prevent homelessness.
9. Address the impacts of Welfare Reform by ensuring that suitable support is available for families most at risk.
10. Promote our Teulu Mon service to all families on Anglesey.

What we want to do – Objective 3

Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment.

Why do we want to do this?

The island's natural and built environments are vital to the tourism sector. These unique features need to be safeguarded and enhanced and their value as socio-economic resources maximised. In this context, the need to balance the effects of proposed major developments on the local environment will need to be minimised and mitigated.

The Council's own developments will be guided by financial responsibility and longer-term sustainability. The current difficult financial environment is likely to continue and will drive the case for change. As a result, the Council will need to consider whether it can continue providing some services in their current form. The involvement of our stakeholders and our willingness to listen will be crucial in this context.

Safeguarding and developing the use of the Welsh language and its contribution to the island's cultural identity and heritage will be given priority.

How will we achieve this objective?

Development and Promotion

Develop the Island sensitively whilst safeguarding its natural assets.

1. Promote the Island as a popular tourist destination and advertise what it has to offer both nationally and internationally.
2. Make sure that Planning decisions support the aims and objectives of this Plan.
3. Increase recycling rates to 70% and reduce the amount of landfill waste.
4. Reduce flooding risk in areas of concern.
5. Become more energy efficient and decrease our carbon emissions by concentrating on Leisure Centres, Schools and street lighting.

Transformation

Work with others to enable innovative change to happen.

6. Work with communities to keep important assets open.
7. Increase the use of the Welsh Language in the Council and promote its use across communities and local organisations.
8. Change the way we deliver services by working with others to find alternative models.
9. Use IT to transform the way Council services are delivered to ensure that they remain cost effective and efficient.

Alignment with the WCFG Act

The actions listed above highlight the fact that decisions taken today will improve the lives and opportunities for future generations.

- School modernisation will lead to improved standards and more sustainable teaching environments which will benefit the children of our future.
- Early intervention and preventative services will enable vulnerable adults to be more independent and reduce adverse childhood experiences;
- Increasing the availability of suitable housing in specific locations will create the conditions for families to succeed;
- Encouraging our citizens to use our natural environment can lead to improved health.

How can you get involved?

The Council will need to work with citizens, communities and partners to realise the aims and objectives outlined in this plan. This will create the partnership required to:

- address the demands placed on services during this period of financial austerity;
- encourage communities to take ownership of specific assets;
- agree on alternative models to deliver specific services.

The following examples highlight how citizens, communities and partners can provide the necessary support.

- Ensure that children attend school and provide the support so that they make the most of the opportunities offered whilst in school.
- Volunteer to be part of the change especially in relation to helping older people in your community to live independently.

- Encourage the use of Welsh Language in your community and take part in community, cultural and heritage activities.
- Encourage friends and family to recycle and be more energy efficient.
- Grasp the opportunity to contact the Council and services in different ways.
- Use the natural resources on the Island for activities to improve personal wellbeing.
- Promote opportunities to offer apprenticeships, work placements and volunteering opportunities.
- Encourage local businesses to work together to apply for larger Council contracts.

How will we deliver?

A 'One Council' approach to service delivery has been developed. We will continue to modernise and change delivery models to ensure high quality services are available in a cost-effective manner. The services will be provided in the language choice of the citizen.

The Council's work will continue to be underpinned by a set of values which outline expectations and behaviours at all levels across the organisation.

- Professional and Well Run
- Innovative, Ambitious and Outward Looking
- Customer, Citizen and Community Focused
- Valuing and Developing our People
- Committed to Partnership
- Achieving

How will we ensure that the plan is realised?

The Council will:

- establish robust arrangements to address the severe financial challenges, ensuring priority areas are protected whilst recognising that service transformation and innovative delivery will be integral to ensure the Council's long term viability;
- use our integrated performance management framework to link priorities to the Medium Term Financial Strategy (MTFS);
- collect data and information to monitor performance against our plans – performance reports will be published on our website;
- continue to engage with and involve Anglesey citizens in the way it makes its decisions.

ISLE OF ANGLESEY COUNTY COUNCIL	
Committee:	Corporate Scrutiny Committee
Date:	4.09.17
Subject:	Children's Services progress report
Purpose of Report:	To report the progress of the Service Improvement Plan
Scrutiny Chair:	Councillor Aled Morris Jones
Portfolio Holder(s):	Councillor Llinos Medi Huws
Head of Service:	Llyr Bryn Roberts - Interim Head of Children's Services (Operations) 01248 752 765 llyrbrynroberts@YnysMon.gov.uk
Report Author: Tel: Email:	Margaret Peters, Transformation Programme Manager, Children's Services 01248 751812 MargaretPeters@ynysmon.gov.uk
Local Members:	Relevant to all Members

1 - Recommendation/s

1.1 Members to confirm if they are satisfied with the steps and pace undertaken by Children's Services in relation to the progress made in relation to the Service Improvement Plan.

2 – Connection to Corporate Plan / Other Corporate Priorities

Improvements within Children and Families' Services is an integral element of Objective 2 of the draft Corporate Plan for 2017-22.

3 – Guiding Principles for Scrutiny

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. Are you satisfied with the pace of progress and improvements made to date within Children's Services?

5 – Background /Context

- 5.1 Ynys Mon Children's Services were inspected by CCSIW during October and November 2016. [The inspection](#) focused on how children and families are empowered to access help and care & support services and on the quality of outcomes achieved for children in need of help, care & support and/or protection, including children who have recently become looked after by the local authority. The inspection also evaluated the quality of leadership, management and governance arrangements in place to develop and support service delivery. The Final CSSIW report was published on 7th March 2017. The report had 14 recommendations, seven recommendations as a priority and seven to be implemented by March 2018 (see Annex 1).
- 5.2 In response to the findings and recommendations, the authority has put the following arrangements in place:
- A revised Service Improvement Plan (SIP), incorporating all of the Recommendations made in CSSIW's Inspection Report against the 5 themes (see Annex 2)
 - Put new Project Management arrangements in place, with an internal Improvement Group of officials meeting on a monthly basis, and reporting to the Senior Management Team and to the Executive.
 - Establish a new Panel of Elected Members following the recent local authority elections, which will report to the Corporate Scrutiny Committee.
- 5.3 In addition to this, the Chief Executive is holding weekly meetings with the Director of Social Services, the Head of Children's Services and the Head of Human Resources, to oversee the development and implementation of the Workforce Strategy, and to ensure that there is appropriate pace in making key appointments to the posts of Service Manager and Practice Leaders.

Focus of the work

- 5.4 Being able to recruit and retain good staff who are committed to making a difference to the lives of children and young people in Anglesey is crucial if we are to deliver on the obligations placed upon us by legislation. An unstable workforce in recent years, combined with a significant increase in the number of children and young people who are Looked After and who are on the Child Protection Register, has placed significant strain on our services. (SIP 1.1, CSSIW 5)

- 5.5 Addressing this is a key element of our Service Improvement Plan, and we've focused on the following elements in recent months:
Structure –key to the new structure is eight smaller Practice Groups across Early Intervention and Intensive Intervention, with each Practice Leader responsible for three or four Social Workers, and a much smaller number of cases than in the past. This will mean that each Social Worker will have more access to their manager, enabling them to have early advice on dealing with individual cases and good quality support and supervision. Arrangements to appoint the new Head of Service will begin in the autumn, two Service Managers have been appointed for Early Intervention and Intensive Intervention and we have appointed eight Practice Leaders who will be starting at the beginning of September. The new service structure will be implemented on the 4th of September, 2017. SIP 1.3; (CSSIW 7)
- 5.6 **Supervision** - we launched a new Supervision Policy in March 2017, following consultation with staff. This is now being used to review cases on a monthly basis, and take early action if any change in decision-making is necessary. The frequency of supervision is being monitored so that managers are assured that the policy is being implemented.
- 5.7 **Workforce Strategy** – whilst the new structure and Supervision Policy are important elements of the Workforce Strategy, this document, shared with staff in June 2017, also focuses on ensuring that staff have the skills, training and support to enable them to do their jobs effectively, and provide the support that children, young people and families in Anglesey need. An action plan is currently being developed. (SIP 1.1, CSSIW 5)
- 5.8 **Staff Retention** – Anglesey has suffered from a fragile workforce for many years, leading to lack of continuity in the support available to our families. Over the past few years we've filled gaps by bringing in Agency staff; we're now moving forward to stabilising the workforce on a longer-term basis. Key to this is stabilising the management levels within Children's Services, and creating a supportive culture, challenging poor performance by providing a clear direction, regular supervision, and developmental support to enable all of our employees to perform effectively. Our aim is to gradually reduce our dependency on Agency Social Workers over the next year or two as we recruit new staff, develop existing staff, and provide a safe working environment for all, combined with opportunities for developing new skills and progressing. (SIP 1.1, CSSIW 5)
- 5.9 **Recruitment** - We've been recruiting to Service Manager and Practice Leader roles over the summer, and have attracted good applicants from outside the organisation, as well as identified experienced practitioners who are ready for promotion. We aim to develop Traineeships internally enabling our staff to train to become qualified Social Workers 'Grow your own'. The new structure becomes operational in September as new members of staff join us. (SIP 1.2)
- 5.10 There is further work to be undertaken to complete the restructuring, including reviewing the best use of Support Workers, as well as ensuring that administrative support is appropriate.
- 5.11 **Quality Assurance**
The Quality Assurance Framework has been strengthened and embedded within the Service (SIP 3.2; CSSIW 13 & 14). The Safeguarding and Quality Assurance Unit has been strengthened. Additional administrative support and re-establishing

the post of Quality Assurance Manager will strengthen support to the operational Teams to implement and sustain the improvement needed in practice (SIP 3.2).

Managers will continue to focus on improving the quality of Social Work practice in relation to case recording, assessment, analysis of risk, Lac Reviews, LAC visits, CP visits, Core group meetings and Pathway Plans (SIP 3.3). Currently performance remains inconsistent. A further audit of files has taken place in July, and targeted interventions have been undertaken with individual Social Workers who have not improved the quality of their practice since the Inspection and the Audit undertaken in February 2017.

5.12 Working with Partners

- 5.13 The findings of CSSIW's Inspection Report was discussed in the North Wales Safeguarding Children Board in March 2017, ensuring a collective understanding of the issues, and a commitment by partners to work with the Isle of Anglesey County Council to improve services for children.
- 5.14 Meetings have been held with key partners including North Wales Police, Betsi Cadwaladr University Health Board and the Education Service. Commitment to improved co-operation was secured, and a commitment to on-going dialogue at a strategic level to create better conditions for operational co-ordination. In discussion we have identified a range of multi-agency case auditing; with the selection of themes for audit being guided by the CSSIW Inspection report. The remit can and will be expanded as we embed the multi-agency approach into our assurance plans (SIP 3.4; CSSIW 2).
- 5.15 The CSSIW's report has been discussed at the Gwynedd and Anglesey Local Delivery Group; it has been agreed that the Terms of Reference of the Group's Quality Assurance sub-group will be reviewed to ensure the work of the group is driven by a need to improve current multi agency safeguarding practice (SIP 3.4; CSSIW 2).
- 5.16 Children's Services are leading a Gwynedd and Ynys Mon Task and Finish Group under the Local Delivery Safeguarding Group to create a local Child protection multi agency Practice Guidance with the focus on improving practice and safeguarding arrangements. A draft document will be ready by October (SIP 2.2; CSSIW 3).
- 5.17 **Improved services for Children, young people and families**
- 5.18 Preventative Services are being reviewed, and a new strategy developed jointly with partners, to ensure more effective services and commissioning, to reduce the number of children and young people who need to be placed on the Child Protection Register and who need to be Looked After (SIP 4.4; CSSIW 12).
- 5.19 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 (SIP 2.1). This is the work the Resilient Families Team will be

undertaking in September to support children living at home: both preventing the need for accommodation and supporting return home plans (SIP 5.2).

5.20 **Elected Members and Senior Leaders**

5.21 The agenda for the Panel's meeting will focus on monitoring and challenging the implementation of the Service Improvement Plan, holding the Director and Service to account. Two meetings have been held so far and the terms of reference have been agreed for the Panel. This will be complemented by training and visits to support senior leaders and members to improve their knowledge and understanding of the complexities and risks involved in delivering children's services (SIP 1.5; CSSIW 4). Laming visits for Members will be initially scheduled until May 2018 and presentations/training sessions will be provided e.g. Integrated Family Support Service (IFSS) model, Adverse Childhood Experiences (ACEs).

5.22 The Protocol for the Director of Social Services will be reviewed to ensure that corporate arrangements are effective (SIP 6.1).

5.23 **Specialist Children's Support Services**

5.24 Bryn Hwfa in Llangefni is a Council run facility which provides structured day care for disabled children in Anglesey. CSSIW recently undertook its first inspection of the facility since it was registered. The overall assessment was positive, noting that children are happy, and that the activities and the environment are appropriate.

6 – Equality Impact Assessment

Not applicable

7 – Financial Implications

This report provides an update on the implementation of the Children's Services Service Improvement Plan. Whilst there are no immediate financial implications from this paper, the Committee may wish to note that there are continued financial pressures on this Service, which have arisen in part due to the significant increase in the number of children who are Looked After over the past three years:

- a high turn-over of staff has necessitated the employment of agency Social Workers over the past two years; these arrangements will continue for a further period whilst the Service completes its restructuring and continues to recruit
- the increased cost of placements for children who are Looked After have increased significantly, and are currently being reviewed.

8 – Appendices:

Annex 1 – CSSIW Recommendations and link to the Service Improvement Plan
Annex 2 – Service Improvement Plan

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

CSSIW Report Recommendations – Children’s Services [March, 2017]

As a priority:

1. The authority should progress its commitment to developing 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. SIP 4.4
2. Effective, multi-agency quality assurance systems and training arrangements should be established to ensure that thresholds for assessment to statutory children’s services are understood by staff and partners and are consistently applied; this should include the development of a multi-agency child protection thresholds protocol incorporating recent Welsh Government guidance. SIP 3.4
3. Senior leaders in social services and the police should continue to work proactively together to ensure improvements to the quality, consistency and timeliness of child protection enquiries. SIP 2.2
4. The council should 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. SIP 1.5
5. A robust workforce strategy should urgently be developed to include short, medium and long term aims for recruitment and retention of social workers. SIP 1.1
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. SIP 1.4
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. SIP 1.3

Over the next 12 months:

8. 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. SIP 1.5
9. Multi-agency arrangements should be established to strengthen operational plans to support effective co-ordination of statutory partners’ completion of Joint Assessment Frameworks. SIP 2.3
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. SIP 2.1
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. SIP 2.1
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. SIP 4.4
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 do their jobs effectively and to deliver improvements. SIP 3.2
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. SIP 3.2

CSSIW recommendations in red - high priority

APPENDIX 2

ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE: ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	E N D
1. A confident and competent workforce with sufficient capacity to provide a consistent and effective service					
<p>1.1 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 <p>Links to CSSIW 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>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 works 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 <p>Future</p> <ul style="list-style-type: none"> • Corporate Induction session available on a monthly basis for new staff. • First year in practice guidance being reviewed by Practice Learning Co-ordinator. 	<p>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 Induction - all new staff receive a comprehensive induction and are fully aware of their roles and responsibilities.</p> <p>Newly qualified social worker's 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>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	Jan 2017	April 2017
<p>1.2 Resolve Staffing matters to include:</p> <ul style="list-style-type: none"> • Recruit to permanent posts • Exit strategy for agency staff 	<p>June/July 2017</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 reduce agency social workers during September. • 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. 	<p>A stable and permanent workforce which results:</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. 	Interim Heads of Children Services	Nov 2016	Dec 2017

CSSIW recommendations in red - high priority

APPENDIX 2

ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE: ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	E N D
	<ul style="list-style-type: none"> • 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. 	<p>Partners report an improvement in joint working with Children Services due to reduction in staff turnover.</p>			
<p>1.3 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 • 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>Links to CSSIW Recommendation 7: Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism</p>	<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. <p>Future</p> <ul style="list-style-type: none"> ▪ Mentoring for managers on outcome focused supervision designed to develop reflective practice. ▪ Audit of supervision will commence Sept 2017 across Adults and Children’s Services, including 	<p>Staff report that they are effectively supported to carry out their duties.</p> <p>Staff positively report that the quality of their assessments and plans have improved through regular and quality supervision.</p> <p>Managers’ report that they are enabled to support staff to the required standards.</p> <p>Clear guidance on standards and good practice clearly communicated and available to all through regular Supervision.</p> <p>Managers complying with the Supervision Policy and Risk Model incorporated into Supervision sessions with staff.</p>	<p>Interim Head of Children Services</p>	<p>Dec 2016</p>	<p>March 2017</p> <p>QA June 2017</p>

CSSIW recommendations in red - high priority

APPENDIX 2

ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE: ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	E N D
<p>must be implemented to ensure compliance and quality.</p>	<p>staff perception of supervision through questionnaires and focus groups to be established.</p> <ul style="list-style-type: none"> ▪ On-going advice and guidance provided to individual social workers on completing assessments, recording and assessing risk. ▪ Audit of Supervision to be undertaken by Service Managers 4 times a year and dip sampling. 	<p>Regular audits across Children and Adult Services showing good quality and consistent Supervision.</p> <p>Assurance mechanism established centrally to ensure compliance with Supervision policy.</p>			
<p>1.4 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 • Managing difficult conversations • Providing regular and quality Supervision • Developing Practice leaders in coaching and mentoring skills <p>Links to CSSIW 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>	<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. • HR to provide regular updates regarding recruitment and retention rates for the Service. <p>Future</p> <ul style="list-style-type: none"> ▪ Agree arrangements for Practice Leaders – away day for Senior Staff Members in July 2017 	<p>Managers’ report enhanced confidence in their skills in making correct and safe case management decisions.</p> <p>Regular audits across the Service showing correct and safe management decisions being made by Managers.</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.</p> <p>Regular case file audits showing an improvement in the quality of assessments and care and support plans.</p> <p>Increased confidence in workforce and organisational reputation in feedback from partners.</p>	<p>Interim Head of Children Services</p>	<p>Jan 2017</p>	<p>March 2018</p>
<p>1.5 CSSIW 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>CSSIW Recommendation 8: Strong political and corporate support for children’s services must continue to ensure</p>	<p>June/July 2017</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>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 leaders and elected members report that the Service Improvement</p>	<p>Chief Executive Director of Social Services</p>	<p>January 2017</p>	<p>On-going</p>

CSSIW recommendations in red - high priority

APPENDIX 2

ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE: ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	E N D
<p>the service improvements needed are prioritised and the pace of improvement accelerated and sustained.</p>	<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 <p>Future</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>Plan is delivered on time and to the required quality.</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> <p>Professional partners and communities report that the Council are effectively discharging their responsibilities in line with SS&WB Act.</p>			

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

	ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE: ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	END
2.1	<p>Improvement in the quality of practice.</p> <p><u>Areas of focus:</u></p> <ol style="list-style-type: none"> 1. Child protection, child protection and LAC social work visits 2. Risk Model – improve analysis of risk 3. Assessment - What matters, 5 areas of assessment. 4. Outcomes focused plans 5. Complete Care and Support plans under the SS&WB Act 6. Establish and maintain high quality relationships with children, young people and their families. 7. Record keeping 8. 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</p>	<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. ▪ 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 ▪ Guidance to be developed on good practice around record keeping. – Bruce Thornton commissioned to establish an operational model within the new system -WCCIS. <p>May 2017 Training Unit have arranged training for all social care staff on:</p> <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 	<p>An improvement in outcomes for children and young people with a reduction in children on CPR and looked after</p> <p>Evidence in ‘prevention’ and ‘supporting’ with more children remaining at home.</p> <p>Regular audits undertaken confirming improvements in the quality of practice, assessing risk and record keeping.</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> <p>Regular audits showing an improvement in the quality and consistency of record keeping and</p>	Interim Heads of Children Services	Jan 2017	March 2018

CSSIW recommendations in red - high priority

APPENDIX 2

ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE:ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	END
<p>and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.</p>	<ul style="list-style-type: none"> • 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 <p>Future Reflective Practice in Social Work</p> <ol style="list-style-type: none"> 1. Child protection 2. How to establish and maintain high quality relationships with children, young people and their families. 3. Record keeping. 4. Guidance to be developed on good practice around record keeping. 5. Practice guidance to be developed around CP and LAC social work visits. 	<p>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</p>			
<p>2.2 CSSIW 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>Practice Guidance to be developed between Police and Children services around child protection referrals, strategy discussion/meetings and enquiries.</p>	<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. 	<p>Regular audits show an 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>	Interim Head of Children Services	Jan 2017	Oct 2017

CSSIW recommendations in red - high priority

APPENDIX 2

	ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE:ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	END
		<ul style="list-style-type: none"> 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. <p>May 2017</p> <ul style="list-style-type: none"> Positive discussion held with the Police regarding cooperation. <p>Future</p> <ul style="list-style-type: none"> We have arranged to meet the IAA hub equivalent in both Conwy and Flintshire County Councils in order to explore options and share their experiences. 				
2.3	<p>CSSIW 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.</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>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) 	<p>A multi-agency Practice Guidance clearly defines local roles and responsibilities and safeguarding arrangements.</p> <p>Improved multi agency safeguarding arrangements leading to improved outcomes and experiences for children and young people.</p>	Interim Head of Children Services	Jan 2017	Oct 2017

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

	ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE:ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	END
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>June/July 2017</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 	Intensive work with those looked after children and young people who need 'step down' arrangements are successful leading to improved outcomes.	Huw Owen, Team Manager	Jan 2017	March 2018

CSSIW recommendations in red - high priority

APPENDIX 2

ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE:ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	END
<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>recommendations are actioned and to ensure value for money.</p> <ul style="list-style-type: none"> • 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. <p>May 2017</p> <ul style="list-style-type: none"> • Team Managers to confirm by May 2017 2017 which children/young people will have 'step down' care and support plans. • Agreement reached by May 2017 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 2017. • Care planning for looked after children to be strengthened through development of additional Practice Guidance. • Permanency policy ratified 	<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. LAC Review recommendations are prioritised by Social Workers and the pace for completing assessments and outstanding work is accelerated and sustained.</p> <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 as a result of 'step down' arrangements for children and young people.</p> <p>Case file audit showing that care planning by Social Worker's for looked after children is significantly improved through implementation of the Practice Guidance.</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>			
<p>3.2 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 	<p>June/July 2017</p> <ul style="list-style-type: none"> ▪ Quality Assurance Framework will be revised and approved by Children Services starting in the autumn, timescale slipped because of the decision made by Senior Leaders to delay recruiting to the Quality Assurance Manager post because of internal recruitment to the Practice Leaders posts. ▪ Quality assurance work in Quarter one has included: <ul style="list-style-type: none"> 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. 	<p>Quality assurance reports and case file audits showing evidence of improvement in the quality of practice and learning and of safe decision making at all levels.</p> <p>Regular and timely qualitative reports are submitted without delay to the leadership team, including members.</p> <p>The organisation is demonstrating more structured governance and scrutiny arrangements through regular case file audits.</p>	Quality assurance Service Manager	Jan 2017	March 2018

CSSIW recommendations in red - high priority

APPENDIX 2

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<ul style="list-style-type: none"> Quality, consistency and timeliness of child protection enquiries <p>Caseloads and reports regarding the quality of workers' performance to be continuously monitored.</p> <p>CSSIW 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 do their jobs effectively and to deliver improvements.</p> <p>CSSIW 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>	<ul style="list-style-type: none"> 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>May 2017</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: Supervision Recording 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>Future</p> <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>IRO/CPC have an improved quality assurance role leading to learning and improvement in the quality of practice</p> <p>WCCIS is supporting performance management and caseload management through easily accessible 'reporting' features made available to Managers.</p> <p>Managers 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> <p>Workers have sufficient capacity to engage effectively with children and their families through Manager's implementation of the caseload Guidance.</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>Quality, consistency and timeliness of child protection enquiries</p>			
<p>3.3 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 	<p>June/July 2017</p> <ul style="list-style-type: none"> Challenged and supported individual workers to improve their practice Practice Guidance currently drafted for: 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 have are being developed to ensure good practice in relation to key performance that is outside tolerance and targets. <p>May 2017</p>	<p>Improvement in staff's level of understanding of performance indicators and the clear link with the quality and timeliness of practice.</p> <p>This leading to a continuous improvement in performance and outcomes for children/young people – one indicator being a reduction in looked after children. Strengthening the reporting and monitoring arrangements in relation to Performance information.</p>	Interim Head of Children Services	March 2017	Oct 2017

CSSIW recommendations in red - high priority

APPENDIX 2

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	<ul style="list-style-type: none"> • Lac Reviews • LAC visits • CP visits • Core group meetings • Pathway Plans <p>These will be brought back into target</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>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>Overall, a continuous improvement in performance and outcomes for children/young people.</p>			
3.4	<p>CSSIW Recommendation 2:</p> <p>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>June/July 2017</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. <p>Taken 2 evidence points out</p> <ul style="list-style-type: none"> ▪ 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> <p>May 2017</p> <p>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>Agreed multi-agency quality assurance system in place showing an improvement in the quality and timeliness of practice.</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>	Interim Head of Children Services	Dec 2016	Dec 2017

CSSIW recommendations in red - high priority

APPENDIX 2

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3.5	<p>CSSIW 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><u>June/July 2017</u></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. <p><u>May 2017</u></p> <p>Future</p> <ul style="list-style-type: none"> Record keeping Practice guidance to be developed to ensure consistency and quality. Training to be provided for staff around best practice in record keeping and the Practice Guidance. Regular case file audit to be undertaken to monitor the quality and timeliness of record keeping on individual cases. 	<p>Case file audits by Managers shows an improvement in the quality and consistency of record keeping.</p> <p>Support and guidance to staff through regular and quality supervision has led to an improvement in the quality of record keeping.</p>	<p>Anwen Huws, Quality Assurance Service Manager</p> <p>Supported by Dawn Owen, Team Managers</p> <p>Llyr Ap Rhisiart, IFSS</p> <p>Gemma Williams, Team Manager</p> <p>Social Workers Support Workers</p>	January 2017	September 2017

CSSIW recommendations in red - high priority

APPENDIX 2

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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4.1	<p>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.</p> <p>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>June/July 2017</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>May 2017</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>Future</p> <ul style="list-style-type: none"> ▪ Feedback/learning on the changes that have happened in Social Work practice following the training sessions. 	<p>Staff report that they feel they have the skills and knowledge and are able to undertake more direct interventions with families.</p> <p>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> <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>Interim Head of Children Services</p> <p>Supported by Non Meleri Hughes, Training officer</p> <p>Ann Postle, Practice Learning Co-ordinator</p> <p>Service Managers</p> <p>Practice Leaders</p> <p>All staff</p>	March 2017	March 2018
4.2	<p>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>June/July 2017</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>May 2017</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. 	<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 Manager's 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>Dr Caroline Turner, Director Social Services</p> <p>Supported by: Interim Heads of Children Services</p> <p>Service Managers</p>	Jan 2017	May 2017 2017
4.3	<p>Implementation of an Information, Advice and Assistance (IAA) model for Anglesey</p>	<p>June/July 2017</p> <ul style="list-style-type: none"> ▪ Interim Engagement Manager in post 	<p>Service users report 'ease of access to services' and good customer care.</p>	<p>Leighton Rees, Interim Head of Children Services</p>	Dec 2016	April 2017

CSSIW recommendations in red - high priority

APPENDIX 2

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		<ul style="list-style-type: none"> ▪ 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. <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>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>			
4.4	<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>June/July 2017</p> <ul style="list-style-type: none"> ▪ 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. 	<p>We consulted with service users and citizens about the types of services they require.</p> <p>The Local Authority has a clear vision for early intervention and prevention services for Anglesey.</p>	<p>Dr Caroline Turner, Director of Social Services</p> <p>Interim Heads of Children Services</p> <p>Alwyn Jones,</p>	Jan 2017	Oct 2017

CSSIW recommendations in red - high priority

APPENDIX 2

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<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>CSSIW 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>CSSIW 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"> 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. <p>May 2017</p> <ul style="list-style-type: none"> 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 <p>Future</p> <ul style="list-style-type: none"> Meaningful engagement and consultation with families, children, young people and service users. 	<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>'Teulu Mon' the new IAA service for Anglesey is operational and is a key part of the early intervention / prevention service.</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>Head of Adult Services</p> <p>Dafydd Bulman, Strategic Transformation and Business Manager</p> <p>Melanie Jones, Service Manager</p> <p>Llyr Ap Rhisiart, IFSS</p>		

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

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<p>5.1 Review Children Support Services to focus on:</p> <ol style="list-style-type: none"> Supervised contact Freeing up capacity to undertake preventative work Role of Parenting Officer 	<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. 	<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. More children being supported to live at home.</p> <p>Reduction in the number of children becoming looked after.</p>	<p>Alex Kaitell, Service Manager</p>	<p>Jan 2017</p>	<p>May 2017 2017</p>

CSSIW recommendations in red - high priority

APPENDIX 2

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5.2	Implement Resilient Families Team	<p>June/July 2017</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>May 2017</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 <p>Future</p> <ul style="list-style-type: none"> ▪ Training and skills development programme to be formulated for the new Team. ▪ Additional grant funding by WG will be provided to further support the establishment of the resilient families' team. 	<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> <p>The team can evidence focused intervention based on prevention and de-escalation through quarterly reports.</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>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>	Alex Kaitell, Service Manager	January 2017	May 2017 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' • 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>June/July 2017</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 ▪ 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 	<p>Clear Pathway planning does 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> <p>Children who are looked after report they feel they have influence on how services are provided for them.</p> <p>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>	Alex Kaitell, Service Manager	January 2017	March 2018

CSSIW recommendations in red - high priority

APPENDIX 2

	ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	EVIDENCE:ACTION TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT	LEAD OFFICER	START	END
		<ul style="list-style-type: none"> ▪ 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. <p>Future</p> <ul style="list-style-type: none"> ▪ Decision needs to made regarding additional WG grant funding around work experience and apprenticeships 				
5.4	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><u>June/July 2017</u></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><u>May 2017</u></p> <ul style="list-style-type: none"> • Review of internal protocol in relation to the overarching role of Director notes that <ul style="list-style-type: none"> A B C • Work will commence on strengthening the role of Director of Social Services following the May 2017 local elections. 	Strengthening the role of Director of Social Services within the Local Authority.	Director of Social Services	May 2017 2017	September 2017

ISLE OF ANGLESEY COUNTY COUNCIL	
COMMITTEE:	Corporate Scrutiny Committee
DATE:	4 September, 2017
PURPOSE OF REPORT:	Progress report on the Children's Services Improvement Panel
SCRUTINY CHAIR(S):	Councillor Aled Morris Jones
PORTFOLIO MEMBER(S):	Councillor Llinos Medi Huws (Social Services)
HEAD OF SERVICE:	Not Relevant
REPORT AUTHOR Tel No: Email:	Anwen G Davies (Scrutiny Manager) 01248 752578 AnwenDavies@ynysmon.gov.uk

1.0 RECOMMENDATION

R1: The Corporate Scrutiny Committee is requested to note:

- Progress made to date with the work of the Children's Services Improvement Panel
- That all work-streams pertaining to the Service Improvement Plan appear to be on target thus far
- There are no matters at this point that need to be escalated by the Panel for consideration by the parent committee.

2.0 BACKGROUND

2.1 Members will be aware that consideration was given at recent meetings of the Corporate Scrutiny Committee¹ to the need to establish 3 scrutiny panels namely:

- Finance Scrutiny Panel
- Schools Review Scrutiny Panel
- **Children's Services Improvement Panel**

Arrangements are now in place to convene the first meetings of the 3 panels.

This report summarises the progress made as regards the Children's Services Improvement Panel.

2.2 Panel Governance Arrangements

The Panel has been established as a permanent panel and sub-group of this Committee. It is the intention to endeavour to convene monthly meetings of the Panel, in accordance with the

¹ Corporate Scrutiny Committee convened on 10th April, 2017 and 26th June, 2017

timeline for the submission of monitoring reports to the Corporate Scrutiny Committee and the Care Inspectorate². There is now a process in place for quarterly reporting to this Committee. Councillor Richard Griffiths, as the Scrutiny Committee representative on the Panel, will present the reports on the work of the Panel.

3.0 FOCUS OF GWAITH OF THE CHILDREN'S SERVICES IMPROVEMENT PANEL

3.1 The Children's Services Improvement Panel has now met on two occasions, namely:

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

Attached is the decisions matrix for the first meeting of the Panel³ (**APPENDIX 1**).

3.2 Hitherto, the Panel has concentrated on the following matters:

- Adopting a terms of reference and confirming clear governance arrangements for the Panel
- Overview of the Service Improvement Plan on two occasions
- Detailed consideration to Theme 1 of the Improvement Plan – Service Workforce and Structure
- Putting a work programme in place as the basis for the work of the Panel over the coming months
- Further strengthening the governance framework supporting Laming Visits – eg ensuring a rolling programme of visits; including Panel members on the visits rota; Members accountable to the Panel for visits and introducing a reporting procedure.

4.0 MATTERS TO BE ESCALATED FOR CONSIDERATION BY THE PARENT COMMITTEE

Hitherto, there are no matters that need to be escalated for consideration by to the Corporate Scrutiny Committee.

APPENDIX
Decisions Matrix – Children's Services Improvement Panel, 17/07/17

Cllr Richard Griffiths

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

Date: 17/08/17

² Care and Social Services Inspectorate for Wales

³ Children's Services Improvement Panel convened on 17th July, 2017

APPENDIX 1

CHILDREN SERVICES IMPROVEMENT PANEL, 17.07.17

Present: Cllrs Llinos Medi Huws; Peter Rogers; R Meirion Jones; Gwilym O Jones
Gwynne Jones; Caroline Turner; Llyr Roberts Hill; Leighton Rees; Carys Edwards (item 5 only); Margaret Peters; Anwen Davies

Item	Key Points	Action Points	Action by Whom / When?	Status
1. Election of Chair		AP1 Cllr Llinos Medi Huws was elected		
2. Terms of Reference and Context Page 73	<ul style="list-style-type: none"> • Scrutiny of Children's Services - when reporting on poor results from an inspection, the CSSIW [1] often cites poor scrutiny practice along with other failings in other aspects of the system. Ensuring meaningful and robust scrutiny of the policies, support and services available to protect vulnerable children and young people is therefore a key element of the leadership role of Scrutiny members • CSSIW recommendations - 14 recommendations were made by the Care Inspectorate following its recent inspection and 2 of those recommendations related specifically to political support for children's services, namely: <ul style="list-style-type: none"> i.R4 -The council should 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 	AP2 Summarize the work of the Panel and report every ¼ to the Corporate Scrutiny Committee	Head of Service in conjunction with the Scrutiny Manager [Ongoing]	
		AP3 Hold monthly meetings of the Panel	Scrutiny Manager [Ongoing]	
		AP4 Offer individual briefings to Members who were unable to attend today	Assistant Chief Executive / Scrutiny Manager [21/08/17]	

Item	Key Points	Action Points	Action by Whom / When?	Status
	<p>communities that their responsibilities are discharged to maximum effect."</p> <p>ii.R8 - 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>			
<p>3. Setting the Context of the Journey</p> <p>Page 74</p>	<ul style="list-style-type: none"> • CSSIW will return to monitor progress at some point from March → September 2018. No information received yet regarding the form of the follow-up work • Vital that some training is provided for Panel members e.g. through case studies, to help Members to appreciate the complexities of Service • The Social Services and Wellbeing Act is a key context of the improvement journey - challenges and new expectations • A significant increase in the number of children on the LAC register over the past 3 years • Several indications in the system over the last 18 months of concerns about the Children's Services • First Improvement Plan in place during 2016. A new Improvement Plan in place following the CSSIW report (March, 2017) • The role and contribution of this Panel are key elements of the governance arrangements in the improvement journey 	<p>AP5 Organize Training sessions for Members as part of the Panel's work programme</p>	<p>Assistant Chief Executive / Head of Service / Scrutiny Manager [August 2017 → April 2018]</p>	

Item	Key Points	Action Points	Action by Whom / When?	Status
4. Service Improvement Plan	<ul style="list-style-type: none"> 6 main headings in the new Improvement Plan - Workforce; Quality Assessment, Interventions and Decisions; Quality Assurance; Working with Families; Improving Services for Families and Review Protocols The current version of the Improvement Plan laid a foundation and was a starting point. The next step would be for the Panel to contribute to the work of measuring the impact of the improvements and interventions. 	<p>AP6 The scrutiny work of the Panel to include monitoring the impact of the improvements and interventions on outcomes for children and young people</p> <p>AP7 Members to continue to undertake regular Laming visits</p>	<p>Assistant Chief Executive / Head of Service / Scrutiny Manager [ongoing]</p> <p>Service Manager (Safeguarding and Quality) / Business Support Team Manager</p>	
5. Theme 1: Workforce and Service Structure	<ul style="list-style-type: none"> Restructure underway - 7 of the 8 Practice Leaders now appointed Initial Workforce strategy is now in place and needs to be reviewed after a period of implementation Monitoring the impact of the workforce strategy on practice and outcomes for service users is a key element of the improvement journey e.g. questioning staff, feedback from children and young people. 	<p>AP8 The work of the Panel also to include a review of the impact of the workforce strategy on practice and outcomes for children and young people (the material available to the Panel to include evidence of impacts)</p>	<p>Head of Service / Project Manager / Human Resources [Jan → March 2018]</p>	
6. Panel Work Programme: July - December 2017	<ul style="list-style-type: none"> Vital to ensure a robust work programme to support the Panel's contribution to the improvement journey 	<p>AP9 Establish a work programme for the Panel starting with the period August 2017 → June 2018</p>	<p>Scrutiny Manager</p>	
7. Date of Next Meeting	<ul style="list-style-type: none"> Scheduling dates for monthly meetings of the Panel, up to December, 2017 	<p>AP10 Next Panel meeting to be held on August 21, 2017 @ 2.00pm</p>	<p>Scrutiny Manager [31/07/17]</p>	

Item	Key Points	Action Points	Action by Whom / When?	Status
	<ul style="list-style-type: none"> Panel to focus on a single theme of the Service Improvement Plan in individual meetings. 	AP11 Schedule themes of the Improvement Plan to be considered at individual meetings of the Panel	Assistant Chief Executive / Head of Service / Scrutiny Manager	

Please see below a link to CSSIW's website for easy access to the CSSIW's recent report on the children's services:
<http://cssiw.org.uk/docs/cssiw/report/170307angleseyen.pdf>

ACTION STATUS			
No Action Point(s) to be implemented	On track to implement the Action Point (s) by the next meeting	Anticipated delay in completing the Action Point (s) by the next meeting, but will be implemented.	Behind Schedule and a significant risk of not being actioned
	Green (G)	Amber (A)	Red (C)

[1] Care Inspection and Social Services; Care Quality Commission (England)



CYNGOR SIR
YNYS MÔN
ISLE OF ANGLESEY
COUNTY COUNCIL



CORPORATE SCRUTINY COMMITTEE WORK PROGRAMME- 2017/2018

Chair: Councillor Aled Morris Jones

Vice- Chair: Councillor Dylan Rees

The table below is the Corporate Scrutiny Committee Work Programme from May 2017 to May 2018. The Work Programme will be submitted to each meeting of the Scrutiny Committee for the purpose of reviewing its content, consideration of new items or adjournment / withdrawal of items.

Contact: Anwen Davies (Scrutiny Manager)

Tel: 01248 752578 E-mail: AnwenDavies@ynysmon.gov.uk

Date of Meeting	Item	Purpose	Location /Start Time
31 May 2017	Election of Chair of the Committee	To appoint Chairperson	Committee Room 1 / 3.30pm
	Election of Vice-Chair for the Committee	To appoint Vice-Chairperson	
26 June 2017	Corporate Scorecard Q4, 2016-2017- Report on Sickness by WAO included as appendix	Performance monitoring	Committee Room 1 / 2pm
	Statutory Director of Social Services Annual Report, 2016-2017	Performance monitoring	
	Empty Homes Strategy	Policy development	
	Membership of Panels and Boards	Nominate Members	
11 July 2017	School Modernisation -Llangefni Area Consultation	Pre-decision scrutiny	Committee Room 1 / 2pm
	Outline Strategic Programme of Anglesey Schools Modernisation Band B (2019-2014)	Transformation	
	Monitoring of the Children's Services Improvement Plan	Performance monitoring	
	Membership of Panels and Boards	Nominate Members	
4 September 2017	Corporate Scorecard [Q1] 2017-2018	Performance monitoring	Committee Room 1 / 2pm
	Council Plan 2017/2022	Pre-decision scrutiny	
	Progress on the Children's Services Improvement Plan	Performance monitoring	
	Forward Work Programme	-	

Date of Meeting	Item	Purpose	Location /Start Time
	Item for Information: Social Services Annual Complaints Report (2016/2017)	For Information	
2 October 2017	Social Services Annual Performance 2016/17 (CSSIW)	Performance monitoring	Committee Room 1 / 10am
	Annual Performance Report (Improvement Plan) 2016/17	Performance monitoring	
	Budget Monitoring [Q1] /Finance Panel	Performance monitoring	
	Extra Care Housing – Seiriol Area	Pre-decision scrutiny	
	Schools Modernisation Programme – Seiriol Area	Pre-decision scrutiny	
	Item for Information: Welsh Public Library Standards – Annual Report (2016/2017)	For Information	
17 October 2017	Budget Proposals 2018-2019	Pre-decision scrutiny	Committee Room 1 / 2pm
	Children Services- Monitoring of Improvement Plan and progress by Children’s Panel	Performance monitoring	
13 November 2017	Corporate Scorecard Q2 2017-2018	Performance monitoring	Committee Room 1 / 2pm
	Transformation of Library Services	Transformation	
	Homelessness Strategy(to be confirmed)	Policy development	
	Children Services- Monitoring of Improvement Plan and progress by Children’s Panel	Performance monitoring	
	Modernisation of Non-Statutory Leisure Service (3 year period) (to be confirmed)	Transformation	
	Progress report – use of the Welsh Language as part of the internal administration of the Council (to be confirmed)	Performance monitoring	

Page 79

Date of Meeting	Item	Purpose	Location /Start Time
	Monitoring Revenue and Capital Budgets Q2 2017-2018 (Scrutiny Panel)	Budget Monitoring	
5 February 2018	Draft Budget 2018-2019	Pre-decision scrutiny	Committee Room 1/ 2pm
	Housing Revenue Account – Revenue Plan (to be confirmed)	Budget monitoring	
	Children Services- Monitoring of Improvement Plan	Performance monitoring	
12 March 2018	Corporate Scorecard Q3 2017-2018	Performance monitoring	Committee Room 1/ 2pm
	Children Services- Monitoring of Improvement Plan and progress by Children's Panel	Performance monitoring	
	Monitoring Revenue and Capital Budgets Q3 2017-2018 (Scrutiny Panel)	Budget Monitoring	
9 April 2018	Children Services- Monitoring of Improvement Plan and progress by Children's Panel	Performance monitoring	Committee Room 1/ 2pm

Additional proposed Items for inclusion:

- Item for Information: Progress Report – Small Holdings Improvement Programme (to be confirmed)

ISLE OF ANGLESEY COUNTY COUNCIL	
REPORT TO :	Corporate Scrutiny Committee
DATE:	4/09/2017
SUBJECT :	Annual Report – ‘Listening and Learning from Complaints’
PORTFOLIO HOLDER(S):	Cllr Llinos Medi
HEADS OF SERVICE:	Children’s Services: Llyr Bryn Roberts (Interim) Adult Services: Alwyn Jones
REPORT AUTHOR: Tel: E-mail:	Sophie Shanahan 01248 752717 slsss@ynysmon.gov.uk

1.0 RECOMMENDATIONS

R1- To note the views of service users received during 2016/17 regarding the services provided by Social Services.

R2- To note the performance of Social Services in implementing the Representations and Complaints Procedure and dealing with complaints.

R3- To note the Action Plan for developing the arrangements for dealing effectively with representations and complaints received from service users and their representatives.

2.0 REASONS

2.1 Social Services operate a statutory Representations and Complaints Procedure in Wales, under the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014. There is an obligation to produce an Annual Report on the operation of the Representations and Complaints Procedure and present it to the relevant Local Authority Scrutiny Committee to monitor the arrangements for dealing effectively with complaints received from service users and their representatives.

2.2 It is considered important that a record is kept of comments and complaints in order for Social Services to learn lessons from them, as part of improving service delivery. It is considered good practice to share the annual complaints report with council members to ensure transparency.

Author: Sophie Shanahan

Job Title: Customer Care Development and Designated Complaints Officer,
Social Services
Date: June 2017

APPENDIX 1- Annual Report: 'Listening and Learning from Complaints'

APPENDIX 2- Action Plan 2017/18

Mae'r ddogfen hon ar gael yn y Gymraeg / This document is available in
Welsh



Social Services – Children and Adults

‘Listening and Learning from Complaints’

SOCIAL SERVICES REPRESENTATIONS AND COMPLAINTS PROCEDURE

ANNUAL REPORT - 2016/17

1. INTRODUCTION

- 1.1 This report refers to the way the Social Services Representations and Complaints Procedure was implemented within Children's and Adult Services during the period from April 2016 until the end of March 2017.
- 1.2 The Customer Care Development and Designated Complaints Officer works within the Social Services Safeguarding and Quality Assurance Team and was responsible for the administration of the Representations and Complaints Procedure during this reporting period. The Complaints Officer is accountable to the Director of Social Services (Assistant Chief Executive) and is managed on her behalf by the Service Manager for Safeguarding and Quality Assurance.
- 1.3 The Complaints Officer is responsible for:
- Co-ordinating the service arrangements in order to comply with the Representations and Complaints Procedure;
 - Recording complaints and positive and negative comments from service users and their representatives;
 - Monitoring the response to complaints within timescales specified in the Welsh Government regulations for dealing with complaints under Stage 1;
 - Co-ordinating investigations by independent investigators into formal complaints under Stage 2 of the procedure;
 - Ensuring that a formal written response together with a copy of the independent investigation report is sent to the complainant within the timescale of 25 working days under Stage 2 of the procedure, keeping the complainant informed if any delay is anticipated;
 - Co-ordinating responses by Social Services to inquiries held by the Office of the Public Services Ombudsman for Wales into complaints in relation to Social Services matters;
 - Monitoring Action Plans to ensure that lessons are learnt from the process of investigating complaints in order to improve the quality of the services;
 - Developing the internal Representations and Complaints Procedure;
 - Ensuring that information is available in order to facilitate access to the Representations and Complaints Procedure for service users and their representatives;
 - Providing training and support to promote better understanding of the function of the Representations and Complaints Procedure amongst Social Services staff.
- 1.4 The main objectives of these arrangements are to:
- Record any comments, be they negative or positive, about the services provided;
 - Attempt to resolve concerns and complaints as near as possible to the point of delivery in order to avoid escalation;
 - Provide an opportunity for service users and other eligible people to present formal complaints under Stage 2 of the procedure.

2. Representations – Positive and Negative Comments

2.1 Positive Comments

2.1.1 A total of 202 positive comments were recorded during the year (46 for Children’s Services and 156 for Adult Services) – a slight increase on the previous year’s total of 197. Of the 46 positive comments received by Children’s Services in 2016/17, 26 were from other professionals, while 20 were from service users, their representatives or family members, or foster carers. Of the 156 positive comments received by Adult Services, 4 were from other professionals, while 152 were from service users or their family members. The positive comments were categorised as follows:

Table 1

POSITIVE COMMENTS			
Children’s Services		Adult Services	
Looked After Children Team	8	Residential Care	107
Family Intervention Team	15	Môn Care	29
Duty Team	7	Adults North Team	2
Child Placement Team	4	Adults Duty Team	3
Community Support Service	5	Physical and Sensory Disabilities Team	4
Specialist Children’s Services	1	Learning Disabilities Team	2
Integrated Family Support Service	1	Client Finance Team	1
North Wales Adoption Service (Anglesey-based staff)	1	Management	1
Positive comments regarding more than one team	4	Transformation Team	1
		Adults South Team	1

		Business Support Team	1
		Community Mental Health Team (comment about Local Authority employee)	1
		Positive comments regarding more than one team	3
	Total	46	Total
			156

2.1.2 Examples of positive comments received are as follows:

“Sincere gratitude for all the guidance and support. It has been an absolute pleasure to meet with you all.” – **Looked After Children Team**

“Genuinely cares about our views and the placement. Very dedicated... very knowledgeable when it comes to Attachment issues. He is very approachable and willing to discuss contentious issues with us and helps to negotiate ways in which these issues can be resolved. We just wanted to let you know what a professional but also friendly and caring person he is.” – **Looked After Children Team**

“The social worker has been of great assistance. I am confident that if I needed any guidance or assistance, I could pick up the phone.” – **Integrated Family Support Service**

“Thank you for a course like this, we have learned a lot from it and will try and use all you have taught us at every opportunity we get.” – **Community Support Service, Children’s Services**

“Thanks for the very efficient and caring service. All the personnel were extremely courteous and well-informed. We feel our needs were promptly identified and efficiently met.” – **Physical and Sensory Disabilities Team**

“You have all shown such warmth, such skill, such professionalism. Put simply, you are first class people.” – **Residential Care**

“Truly excellent standards of care. The ladies concerned were not only professional but also sympathetic and understanding.” – **Môn Care**

“The work done has been nothing below excellent. She has established a good therapeutic relationship. She demonstrates professionalism to the highest standard and is an asset to your support team.” – **Community Mental Health Service**

In summary, the positive comments received suggest that individuals value services that are delivered by individual practitioners / staff, and value guidance, support, care, dedication, accessibility and warmth shown by staff.

2.2 Negative Comments

2.2.1 A total of 27 negative comments / concerns were received by the Complaints Officer during the year.* 13 of these were for Children’s Services and 14 for Adult Services. Sometimes it is possible to resolve a concern within 24 hours, in which case it does not need to be logged under Stage 1 of the procedure; or the service user may state that they do not wish to make an official complaint under Stage 1 or Stage 2 of the Social Services Representations and Complaints Procedure. Sometimes concerns are received which relate to historical matters, and therefore are not eligible for investigation under the complaints procedure, though a response of some kind may still be made if appropriate. The 27 negative comments are categorised in Table 2 below.

* In creating this statistic, cases where individuals have made more than one negative comment about the same situation/case have been counted as one negative comment, due to the difficulty of quantifying the amount of negative comments in situations where a large amount of contacts are received about one case.

Table 2

NEGATIVE COMMENTS			
Children’s Services		Adults’ Services	
Duty Team	3	Physical and Sensory Disabilities Team	2
Specialist Children’s Services / Occupational Therapy for Children	1	Learning Disabilities Team	2
Family Intervention Team	5	Residential Care	3
LAC Team	3	Adults North Team	1
Community Support Service	1	Adults South Team	1
		Community Mental Health Team	2
		Môn Care	1

		Negative comments about more than one team	2
Total	13	Total	14

A comparison with the figures in Table 1 shows that the total number of positive comments outweighs that of the negative comments received.

3. Stage 1 Complaints – Local Resolution

3.1 Table 3 below summarises the number of complaints received over the last eight years concerning Adult and Children’s Services under Stage 1 and Stage 2 of the Representations and Complaints Procedure.

Table 3

Year	Stage 1 Adults	Stage 1 Children	Stage 1 Total	Stage 2 Adults	Stage 2 Children	Stage 2 Total
2008/09	45	13	58	2	0	2
2009/10	29	23	52	4	1	5
2010/11	37	20	57	1	2	3
2011/12	25	40	65	3	4	7
2012/13	32	24	56	2	4	6
2013/14	24	26	50	5	6	11
2014/15	17	20	37	2	5	7
2015/16	24	29	53	4	1	5
2016/17	8	46	54	2	3*	5

*of which 1 was withdrawn after the Independent Investigator was appointed.

3.2 Table 3 shows that the number of complaints recorded under Stage 1 of the procedure has increased compared with previous years for Children’s Services, but has decreased for Adult Services. Despite the higher number of Stage 1 complaints received by Children’s Services, the comparatively low proportion of these which were escalated to Stage 2 indicates a focus on customer care and resolution when Stage 1 complaints were received.

3.3 Of the 54 Stage 1 complaints received, 50 of them received an acknowledgement within 2 working days (the timescale within which an acknowledgement should be sent under the regulations).

3.4 The table below illustrates the services’ performance in relation to responding to Stage 1 Complaints within statutory timescales. Complainants are offered meetings / telephone discussions within 10 working days of the complaint

being acknowledged, followed by a response letter to confirm the terms of the resolution of their complaint within 5 working days of the discussion.

Table 4

	Children's Services		Adult Services	
	Discussion	Written response	Discussion	Written response
Percentage within timescale	74%	65%	75%	38%

3.5 The above percentages show a slight decrease in the proportion of discussions held within timescale for Children's Services (compared to 77% the previous year), but an increase in the proportion of written responses sent within timescale (compared to 55% the previous year). For Adult Services, the proportion of discussions held within timescale was the same as for the previous year, while the proportion of written responses sent within timescale decreased (from 62% the previous year). It can be challenging to complete a written response within 5 working days of the discussion with the complainant, particularly if the complaint is very complex, the complainant has raised new matters during the discussion, or full investigation requires that we seek information from other agencies. However, the proportion of responses provided within timescale is an area for improvement, particularly in relation to the written responses. Where information is required from other agencies, an interim written response could be sent.

3.6 Table 5 illustrates a breakdown of the service areas for complaints received under Stage 1 of the Social Services Complaints and Representations Procedure in Children's and Adult Services.

Table 5

STAGE 1 COMPLAINTS			
Children's Services		Adult Services	
Duty Team	14	Physical Disabilities Team	1
Community Support Service	1	Out of Hours Team (Anglesey based staff)	1
Family Intervention Team	17	Adults South Team	4
LAC Team	7	Adults North Team	2
Child Placement Team	4		
Specialist Children's	1		

Services			
Quality Assurance and Safeguarding Team	1		
Complaints relating to more than one team	1		
Total	46	Total	8

3.7 An analysis of the nature of the complaints to Children’s Services shows that some themes found in the Stage 1 complaints were:

- Communication matters / information from Children’s Services practitioners
- Insufficient support or intervention
- Numerous changes in social worker
- Delays in necessary or agreed actions being carried out

3.8 Within Adult Services, some themes found in the Stage 1 complaints were:

- Delays in relation to arranging services
- Unclear, insensitive or inadequate communication

These need to be seen as themes arising from a very small number of complaints, and as such caution must be exercised in concluding these to be significant issues. However, they are issues that impacted on individuals and attention to achieving consistency is required.

4. Stage 2 Complaints

4.1 Overview of Stage 2 Complaints

4.1.1 Stage 2 of the Procedure involves an investigation by an Independent Investigator. Although we aim to resolve complaints at Stage 1, there are occasions when this cannot be achieved. Examples are in cases of more complex complaints or when the complainant has insisted on going straight to Stage 2. Complainants have the right to bypass Stage 1 and request to proceed directly to Stage 2 should they so wish.

4.1.2 During the year, a total of 5 complaints were registered under Stage 2, one of which was withdrawn before the investigation was completed; this is the same total as the previous year. One of the Stage 2 complaints to Adult Services had already received a Stage 1 response, while one went straight to Stage 2 at the complainant’s request. Of the three Stage 2 complaints to Children’s Services, two had received a Stage 1 response, while one went directly to Stage 2. Reasons given for wishing to escalated to Stage 2 included:

- that dissatisfaction had been acknowledged but not dealt with;
- dissatisfaction that Stage 1 had not delivered the desired outcome;
- feeling that the case had not been thoroughly investigated at Stage 1;
- feeling that discussions with the Service were not moving matters forward.

4.1.3 One of the Stage 2 investigations regarding Adult Services was completed within the statutory 25 days timescale. One Stage 2 investigation did not progress to the point of response as it was withdrawn, while the other three Stage 2 responses were sent outside of the timescale. The reasons for the delay in sending out these responses were the availability of staff and independent investigators. In cases where there have been delays, complainants have been updated and kept informed of the expected date for a response to be sent.

4.1.4 Action Plans are created following Stage 2 investigations if there are recommendations in the Independent Investigator’s report. Stage 2 investigations into complaints to Children’s Services involve discussion with the Independent Person regarding the contents of the Action Plans. The Action Plans are signed off by the Head of Service and are then monitored on a monthly basis until all the actions are completed.

4.2 Stage 2 Complaints to Children’s Services

4.2.1 During 2016/17, three complaints to Children’s Services were registered under Stage 2 of the Procedure. Table 6 examines these complaints in more detail:

Table 6

NUMBER	NATURE OF COMPLAINT	LESSONS LEARNED
CS021	<p>Complaint:</p> <ul style="list-style-type: none"> • Delay in being informed of the outcome of assessment • Correspondence not responded to • Incorrect / unfounded information included in letter • Assessment flawed in relation to money counted • Complainant’s expenses not mentioned in letter • Same questions repeated on different visits • Documentation alleged to 	<ul style="list-style-type: none"> • All Children’s Services staff to be aware that if they do not receive a timely response to a request for legal advice, this should be discussed with internal legal services to see if an acceptable timescale for providing the advice can be agreed. If internal legal services do not have the capacity to provide advice within an acceptable timescale, advice should be sought

	<p>have been lost then found</p> <p>COMPLAINT WAS WITHDRAWN BEFORE STAGE 2 INVESTIGATION COULD BE COMPLETED.</p>	<p>from an external legal advisor.</p>
CS023	<p>Complaint:</p> <ul style="list-style-type: none"> • Inconsistent messages given • Contact by North Wales Adoption Service never took place • “Concerns” were never explained • Social worker did not know the child well enough to give an opinion • Local Authority made inaccurate statement • Opinions of Health professionals ignored • LAC Nurse not consulted • Mishandling of case not conducted in best interests of the child • Financial costs unnecessarily incurred due to poor handling of the case <p>Outcome: Four points of complaint upheld. Four points of complaint not upheld. One point of complaint partially upheld.</p>	<ul style="list-style-type: none"> • When foster carers express a wish to adopt a child in their care, a full adoption assessment should be carried out. • Placement team to ensure assessment of suitability to foster and a copy of the latest foster care review is available prior to any placement. • Social workers to read the assessment of suitability to foster and latest foster care review document before any placement. • Service to explore completing end of placement reports when fostering placements end. • Need to record issues that influence decision making, recording their source and evidencing information.
CS024	<p>Complaint:</p> <ul style="list-style-type: none"> • Failure to act in good time to address the behaviours that a child presented with, before the placement was finally sourced. <p>Outcome: 1 point of complaint partially upheld</p>	<ul style="list-style-type: none"> • Where there is a need for a respite placement, this should be provided in a timely manner. • There is a need for sufficient available placements for children with a range of behavioural needs.

4.3 Stage 2 Complaints to Adult Services

4.3.1 During 2016/17, two complaints were received under Stage 2 of the Procedure. Table 7 below examines the two complaints in more detail:

Table 7

NUMBER	NATURE OF COMPLAINT	LESSONS LEARNED
OP009	<p>Complaint:</p> <ul style="list-style-type: none"> • Welsh Government guidance not followed with regards deprivation of assets in completing a financial assessment • Date of commencement of the Council's contributions to the service user's care not as it should be • Welsh Government guidance not followed regarding top-ups • Financial contribution to costs of service user's care not acceptable <p>Outcome: 4 points of complaint not upheld.</p>	<ul style="list-style-type: none"> • Local Authority to make more detailed enquires at the outset to determine a fuller picture of the financial position.
OP010	<p>Complaint:</p> <ul style="list-style-type: none"> • Insufficient enquiries made regarding why service user's physical condition had deteriorated • Authorities and family not alerted to the fact that service user's condition had deteriorated • Medical professionals not contacted when appropriate <p>Outcome: Two points of complaint upheld. One point of complaint partially upheld.</p>	<ul style="list-style-type: none"> • Social workers to agree proportionate and clearly documented actions as part of all care reviews.

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5. Independent Investigators List

- 5.1 Social Services for the 6 counties across North Wales maintain a list of Independent Investigators to investigate Stage 2 complaints. Continuous attempts are made to identify and recruit qualified and experienced staff for this panel. In the light of the Welsh Language Standards, the Local Authority is anxious to recruit individuals who have skills in both Welsh and English.
- 5.2 Independent Persons have to be appointed to supervise investigations into Stage 2 complaints about the discharge of specific functions under the Children Act 1989 and the Adoption and Children Act 2002. An Independent Person was appointed for two of the Stage 2 investigations into complaints to Children's Services during 2016/17.

6. Public Services Ombudsman for Wales

- 6.1 The Ombudsman did not conduct any investigations into either Children's or Adult Services complaint in 2016/17. One complaint was referred to the Ombudsman, but the Ombudsman did not investigate it as the complaint had not yet been made to the Local Authority.

7. Professional Advocacy Services

- 7.1 Independent advocacy services for children are provided by Tros Gynnal Plant as part of a regional advocacy service. All children who make complaints to Social Services are asked if they would like an advocate to support them with making their complaint, and a referral is made to the advocacy service if they consent to this. In 2017/18, the active offer will be introduced. Monitoring reports from the provider show that positive use is being made of professional advocacy for children, with 96 young people referred by Isle of Anglesey County Council in 2016/17.
- 7.2 Social Services has a service level agreement with the North Wales Advice and Advocacy Service to provide advocacy for service users with learning disabilities. People accessing primary or secondary mental health services can receive advocacy support through the Gwynedd and Môn Mental Health Advocacy Service, which is funded via BCUHB but is available to all mental health service users, including older people with dementia. People detained under the Mental Health Act and those receiving hospital in-patient care and treatment can access the IMHA (Independent Mental Health Advocacy) service, and those detained under the Mental Health Act can also access free legal representation. Other adults may be signposted to 3rd sector organisations such as Citizens Advice Bureau or Age Cymru. Adult Services have reviewed their procurement of advocacy services in 2016/17. During

2017/18, the way Adult Services commissions advocacy services will change based on the findings of this review.

8. Complaints in relation to services provided jointly with the Health Board

8.1 A joint complaints protocol, the 'North Wales Multi-agency Protocol on the Handling of Complaints between Health and Social Services', was approved by Betsi Cadwaladr University Health Board and the six North Wales Local Authorities in 2017. It is intended that this will improve co-ordination when complaints are made which involve both the Health Board and the Local Authority.

9. Information Strategy

9.1 An information leaflet for children regarding the Representations and Complaints Procedure should be given to all children who receive a service from Children's Services, and a leaflet for adults also given to their family. Relevant staff have recently been reminded of the importance of this. A complaints leaflet is also given to children when they become Looked After Children. Adult Services are currently reviewing the provision of information to service users at the point of commencing care and support assessments, and this will include information about the complaints procedure. Service users are reminded of their right to make a complaint when they have their Annual Reviews. They are also given a copy of the complaints leaflet when they go into a residential or nursing home. Service users and their family members are sent a copy of the complaints leaflet when complaints from them are received, along with the written acknowledgement for their complaint, within two working days of the complaint being received.

9.2 Information regarding the Representations and Complaints Procedure is published on Isle of Anglesey County Council's website.

10. 2016-17 Expenditure

10.1 In maintaining and implementing the Social Services Representations and Complaints Procedure under the statutory guidance, the main costs to the Service (other than staffing costs) are:

- Costs of work undertaken by Independent Investigators on Stage 2 investigations;
- Costs of work undertaken by Independent Persons on Stage 2 investigations;
- Costs of attending meetings and/or training;
- Costs relating to publicity and publishing information leaflets.

10.2 Table 8 below shows expenditure on work by Independent Investigators and Independent Persons during the period 01 April 2016 – 31 March 2017

(excluding costs for investigations not invoiced 2017/2018, but including costs for investigations from 2015/2016 which were invoiced in 2016/17). These costs are lower than they were the previous year, due partly to some of the investigations not being invoiced until the following financial year.

Table 8

Children's Services	
Nature of Spend	£
Independent Investigator	£90
Total	£90
Adult Services	
Nature of Spend	£
Independent Investigator	£1494.71
Independent Investigator	£839.10
Total	£2,333.81

11. Monitoring and evaluating the operation of the Complaints and Representations Procedure

- 11.1 Quarterly monitoring reports are presented to the Adult Services Senior Management Team and Children's Services Quality Assurance Panel, which evaluate the number of complaints and compliments received against each service under each stage of the procedure and the lessons learnt from complaints. We also monitor how effective Social Services is in dealing with complaints within the required timescales.
- 11.2 Discussion has taken place regarding how the Service evidences implementation of learning from Stage 1 complaints (which, unlike Stage 2 complaints, do not usually involve the creation of formal Action Plans). A new template has been created for Stage 1 response letters, which includes a section on actions taken to address any issues which have come to light as a result of the complaint. Within Children's Services, it has been agreed that these actions will be discussed once a quarter at the Children's Services Operational Management Team meeting in order to ensure that the actions have been carried out. Such actions include, for example, sharing learning points with relevant staff, along with reminders of the importance of carrying out certain actions.

11.3 During the year, the North Wales Complaints Officers' Group met on a quarterly basis and discussed arrangements for implementing the Complaints and Representations Procedure.

12. Training

12.1 The Designated Complaints Officer delivers training for Social Services staff in order to raise awareness of the Complaints and Representations Procedure, as well as customer care issues. One such training session was held in 2016/17.

12.2 The Designated Complaints Officer now meets with staff as part of their inductions to raise staff awareness of the Complaints and Representations Procedure, Customer Care Standards and the Welsh Language Standards.

12.3 The Designated Complaints Officer also did a presentation on key messages from complaints, customer care issues, the Welsh Language Standards and More Than Just Words at a Children's Services Staff Conference in February 2017.

12.4 A conference, 'How to Turn Public Sector Complaints into Services Improvements', was attended by the Designated Complaints Officer in 2016.

12.5 Written guidance is provided by the Designated Complaints Officer to managers regarding Stage 1 response letters and meetings. The Designated Complaints Officer circulates internal protocols to new managers, as necessary.

**Sophie Shanahan,
Customer Care Development and Designated Complaints Officer**

Date: June 2017

Action Plan 2017/18

Area	Action	Steps by Whom	By when
1. Strengthen the operation of the Representations and Complaints Procedure	i) Continuously ensure that all Social Services staff follow the Guidance and record positive and negative comments and complaints so that the Complaints Officer can keep accurate statistics.	Heads of Service / Service Managers / Team Managers	Ongoing
2. Deal with complaints in an effective and timely manner under Stage 1 and Stage 2 of the Procedure	i) Conduct a thorough investigation of complaints at Stage 1 of the Procedure to ensure a comprehensive response in an effort to allay dissatisfaction and avoid escalation to Stage 2	Heads of Service / Service Managers / Team Managers	Ongoing
	ii) Ensure timely responses to complaints within the set timescale of 10 working days to hold a discussion with the complainant and 5 days from the discussion to send out the written response.	Heads of Service / Service Managers / Team Managers	Ongoing
	iii) Ensure timely responses to complaints within the set timescale of 25 working days under Stage 2 of the	Designated Complaints Officer	

	Procedure.		
3. Learn lessons from investigations into complaints	i) Form action plans in response to recommendations in Stage 2 investigation reports into complaints	Heads of Service / Service Managers / Designated Complaints Officer	Within 20 working days of providing the complainant with a formal written response and a copy of the investigation report
	Clearly record in Stage 1 responses any actions to be taken in response to learning points identified	Service Managers / Team Managers	Ongoing
4. Provide information regarding the operation of the Representations and Complaints Procedure	i) Ensure that the information regarding the Representations and Complaints Procedure is circulated to every child who receives a service from the Service	Children's Services Team Managers	Ongoing
	ii) Provide information to Adult Services service users about the Representations and Complaints Procedure at the point of commencement of care and support assessments; remind service users of complaints procedure at Annual Reviews	Adult Services Team Managers	Ongoing
5. Raising awareness of the Representations and Complaints Procedure	Raise awareness of the Representations and Complaints Procedure as part of the staff induction process	Designated Complaints Officer	Ongoing
	Circulate reminders of the need to forward complaints, negative comments and compliments to the Designated Complaints Officer	Designated Complaints Officer	Every 6 months

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