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CYNGOR SIR
YNYS MÔN
ISLE OF ANGLESEY
COUNTY COUNCIL

Dr Gwynne Jones.
Prif Weithredwr – Chief Executive

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RHYBUDD O GYFARFOD	NOTICE OF MEETING
PWYLLGOR GWAITH	THE EXECUTIVE
DYDD LLUN 18 MEHEFIN 2018 10.00 o'r gloch	MONDAY 18 JUNE 2018 10.00 am
SIAMBR Y CYNGOR SWYDDFEYDD Y CYNGOR LLANGFNI	COUNCIL CHAMBER COUNCIL OFFICES LLANGFNI
Swyddog Pwyllgor	Ann Holmes 01248 752518 Committee Officer

AELODAU/MEMBERS

Plaid Cymru/Party of Wales

Llinos Medi Huws, Carwyn Jones, R Meirion Jones, Alun W Mummery, Robert G Parry, OBE, FRAGS, Robin Wyn Williams

Annibynnol/Independent

Richard Dew, Dafydd Rhys Thomas, Ieuan Williams

COPI ER GWYBODAETH / COPY FOR INFORMATION

I Aelodau'r Cyngor Sir / To the Members of the County Council

Bydd aelod sydd ddim ar y Pwyllgor Gwaith yn cael gwahoddiad i'r cyfarfod i siarad (ond nid i bleidleisio) os ydy o/hi wedi gofyn am gael rhoddi eitem ar y rhaglen dan Reolau Gweithdrefn y Pwyllgor Gwaith. Efallai bydd y Pwyllgor Gwaith yn ystyried ceisiadau gan aelodau sydd ddim ar y Pwyllgor Gwaith i siarad ar faterion eraill.

A non-Executive member will be invited to the meeting and may speak (but not vote) during the meeting, if he/she has requested the item to be placed on the agenda under the Executive Procedure Rules. Requests by non-Executive members to speak on other matters may be considered at the discretion of The Executive.

Please note that meetings of the Committee are filmed for live and subsequent broadcast on the Council's website. The Authority is a Data Controller under the Data Protection Act and data collected during this webcast will be retained in accordance with the Authority's published policy.

A G E N D A

1 DECLARATION OF INTEREST

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

2 URGENT MATTERS CERTIFIED BY THE CHIEF EXECUTIVE OR HIS APPOINTED OFFICER

No urgent matters at the time of dispatch of this agenda.

3 MINUTES (Pages 1 - 10)

To submit for confirmation, the draft minutes of the meeting of the Executive held on 21st May, 2018.

4 THE EXECUTIVE'S FORWARD WORK PROGRAMME (Pages 11 - 22)

To submit a report by the Head of Democratic Services.

5 CHILDREN AND FAMILIES SERVICES PROGRESS REPORT (Pages 23 - 76)

To submit a report by the Head of Children's Services.

6 SCORECARD MONITORING REPORT - QUARTER 4, 2017/18 (Pages 77 - 102)

To submit a report by the Head of Corporate Transformation.

7 ANNUAL DELIVERY DOCUMENT 2018/19 (Pages 103 - 112)

To submit a report by the Head of Corporate Transformation.

8 CAPITAL OUTTURN REPORT 2017/18 (Pages 113 - 124)

To submit a report by the Head of Function (Resources)/Section 151 Officer.

9 MODERNISING SCHOOLS ON ANGLESEY - MOVING THE STATUTORY NOTICE IMPLEMENTATION DATE FOR YSGOL SANTES DWYNWEN, YSGOL PARC Y BONT AND YSGOL BRYNSIENCYN (Pages 125 - 128)

To submit a report by the Head of Learning.

10 REGIONAL HOMELESS STRATEGY (Pages 129 - 140)

To submit a report by the Head of Housing Services.

11 EXCLUSION OF THE PRESS AND PUBLIC (Pages 141 - 144)

To consider adoption of the following:-

"Under Section 100(A)(4) of the Local Government Act 1972, to exclude the press

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and public from the meeting during discussion on the following item on the grounds that it may involve the disclosure of exempt information as defined in Schedule 12A of the said Act and in the attached Public Interest Test”.

12 SYRIAN REFUGEE RESETTLEMENT PROGRAMME (Pages 145 - 148)

To submit a report by the Head of Housing Services.

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THE EXECUTIVE

Minutes of the meeting held on 21 May, 2018

- PRESENT:** Councillor Llinos Medi Huws (Chair)
Councillor Ieuan Williams (Vice-Chair)
- Councillors Richard Dew, Carwyn Jones, R. Meirion Jones, Alun Mummery, R.G. Parry, OBE, FRAGS, Dafydd Rhys Thomas, Robin Williams
- IN ATTENDANCE:** Chief Executive
Assistant Chief Executive (Partnership, Community & Service Improvement)
Assistant Chief Executive (Governance and Business Process Transformation)
Head of Function (Resources) & Section 151 Officer
Head of Function (Council Business)/Monitoring Officer
Head of Democratic Services (for item 4)
Principal Development Officer (Regulation & Economic) (THJ) (for item 10)
Committee Officer (ATH)
- APOLOGIES:** None
- ALSO PRESENT:** Councillors Aled M. Jones, Eric Jones, Glyn Haynes, Kenneth Hughes, Dylan Rees, John Arwel Roberts.
-

The Chair welcomed all those present to this meeting of the Executive and she extended a particular welcome to Councillor Robin Williams to his first meeting of the Executive as the Portfolio Member for Finance.

1. DECLARATION OF INTEREST

No declaration of interest was received by any Member of the Executive.

Councillor Dylan Rees (not a member of the Executive) declared a personal but not prejudicial interest in item 10 on the agenda and proceeded to speak on the business under item 10 in the capacity of a Local Member.

2. URGENT MATTERS CERTIFIED BY THE CHIEF EXECUTIVE OR HIS APPOINTED OFFICER

None to report.

3. MINUTES

The minutes of the previous meeting of the Executive held on 30 April, 2018 were presented for the Executive's confirmation.

It was resolved that the minutes of the previous meeting of the Executive held on the 30 April 2018 be approved as a correct record.

4. THE EXECUTIVE'S FORWARD WORK PROGRAMME

The report of the Head of Democratic Services incorporating the Executive's Forward Work Programme for the period from June, 2018 to January, 2019 was presented for the Executive's approval.

The Head of Democratic Services reported as follows –

Items new to the Forward Work Programme

Item 17 – Protocol of the Statutory Director of Social Services scheduled to be considered by the Executive at its 16 July, 2018 meeting

Item 34 – Gambling Policy scheduled to be considered by the Executive at its 26 November, 2018 meeting

Items which have been re-scheduled from their original date

Item 4 – 2017/18 Capital Budget Monitoring Report Quarter 4 re-scheduled from the Executive's 21 May, 2018 meeting to its 18 June, 2018 meeting.

Item 8 - CIW Inspection of Children's Services in Anglesey: Improvement Plan Quarterly Progress Report re-scheduled from the Executive's 21 May, 2018 meeting to its 18 June, 2018 meeting.

Item 24 – Transformation of Education and Anglesey Schools' Modernisation Strategy re-scheduled from the Executive's 18 June, 2018 meeting to its 17 September, 2018 meeting.

The Officer further reported that in addition to the above, and since the publication of the Forward Work Programme, the Transformation Service has requested that the Annual Delivery Document (Improvement Plan) 2018/19 be incorporated on the Forward Work Programme for the Executive's 18 June, 2018 meeting.

The Chair referred to the Scrutiny Chairs and Vice-Chairs Forum with which she as Leader has meetings in order to discuss the Forward Work Programme, and she suggested that it would be useful if a reference could be made to this Forum within the Work Programme in recognition of its contribution to the shaping of the programme.

It was resolved to confirm the Executive's updated Forward Work Programme for the period from June, 2018 to January, 2019 subject to the additional change outlined at the meeting.

5. ADOPTION OF POWERS BY COUNCIL AND DELEGATION TO OFFICER

The report of the Head of Function (Council Business)/Monitoring Officer seeking the Executive's endorsement of proposed changes to the Council's Constitution prior to their submission for final approval by the Full Council was presented for consideration. The changes consisted of at Enclosure 1 Section A additional legislation to be added to the Scheme of Delegation to the Head of Service (Regulation and Economic Development) and at Section B legislation to be removed from the Scheme of Delegation to the Head of Service (Regulation and Economic Development). Additionally, the report contained a recommendation that some constitutional changes arising from new, amended or revoked legislation be delegated to the Head of Function (Council Business)/Monitoring Officer without recourse to the Executive and Full Council.

The Portfolio Member for Planning and Public Protection reported that adopting and delegating the powers At Section A of Enclosure 1 will enable the Council to operate a wider range of solutions whilst removing the legislation in Section B of Enclosure 1 is a good

housekeeping exercise. At present, any changes to the Constitution require Executive and Full Council approval. It is requested that some constitutional changes such as that set out in the report be delegated to the Head of Function (Council Business)/ Monitoring Officer. The Portfolio Member said that it will remain that politically significant and local choice changes to the Constitution will be a matter for the Full Council, but that constitutional changes due to new, amended or revoked legislation will be delegated to the Head of Function (Council Business)/Monitoring Officer and this will include adding or removing reference to that legislation to or from the relevant Head of Service's list of delegated matters. This would assist workloads for both Officers and the Executive/Full Council. Such reference is known to be included in the constitutions of other councils for the purpose of streamlining processes and ensuring that technical changes are implemented as smoothly and as quickly as possible.

It was resolved to recommend to the Full Council that –

- **The powers listed in Section A of Enclosure 1 to the report be adopted.**
- **The Scheme of Delegation in the Constitution be amended to delegate the exercise of the powers noted in Section A of Enclosure 1 to the report to the Head of Service (Regulation and Economic Development).**
- **The powers listed in Section B of Enclosure 1 to the report be removed from the Scheme of Delegation in the Constitution which delegates these powers to the Head of Service (Regulation and Economic Development).**
- **The Council's Head of Function (Council Business)/Monitoring Officer be authorised to make the necessary changes to the Scheme of Delegation, and any consequential amendments, to reflect the adoption, delegation and removal of the said powers.**
- **The Council's Head of Function (Council Business)/Monitoring Officer be authorised to make any future changes to the Constitution without requiring Executive or Full Council approval where those changes are as a result of legislative changes where additional/revised delegation to Officers is required in order to execute additional powers or rights granted to the Council by amended or new legislation.**
- **The Scheme of Delegation in the Constitution be amended to delegate to the Head of Function (Council Business)/Monitoring Officer the authority – “To review and update the Council's Constitution from time to time, to include any changes arising from amended, substituted or new legislation; any restructure of the organisation already authorised as required and to include new delegations to Officers, namely the Head of Service with responsibility for the relevant service, to have full delegated authority to discharge the function on the Council's behalf unless it is a matter reserved to the Council, Executive or a Committee.”**

6. REQUEST APPROVAL TO RECRUIT ADDITIONAL AGENCY STAFF IN CHILDREN AND FAMILIES' SERVICES

The report of the Head of Children's Services seeking the Executive's approval to recruit additional agency staff in Children and Families' Services was presented for consideration.

The Portfolio Member for Social Services reported on the context to the request by saying that a crucial element of the Children's Services Improvement Plan which was formulated in response to the CIW's inspection of Children and Families Services in 2016 is the recruitment and retention of committed and qualified social work staff. Although much has already been achieved as documented within the report, the service continues to be on a journey of improvement and as part of this journey the service is now looking to appoint 7

Newly Qualified Social Workers (3 have already been appointed); 3 agency Social Workers and a Practice Leader to form a Practice Group to review legacy cases along with additional legal capacity to meet the demand arising from this review in terms of cases that may proceed to Public Law Outline or into care proceedings.

The Assistant Chief Executive (Governance and Business Process Transformation) and Statutory Director of Social Services said that the number of children coming into care has doubled in the last four years thereby leading to a significant increase in the work required to support these placements. Although the number of children in the Authority's care has since stabilised and levelled out it remains a matter of being aware of the continuing pressure on the service because of this increase and consequently of the number of staff that is required to provide appropriate support for these children and young people. The Officer referred to the request being made as having three elements to it namely –

- To retain the 7 Agency Social Workers who are currently filling 7 vacant posts within the department for a further period until the end of October when 3 Newly Qualified Social Workers (NQSWs) will be able to take caseloads **(Cost £56,658)**.
- To appoint 7 NQSW to the Fieldwork Teams in October, 2018 (3 of whom have already been appointed as referred to above) and to support these by going over establishment of 4 agency workers for 12 months. **(Cost £123,686)**. The service continues to advertise for permanent social workers and has had some success in this endeavour although the appointments made have not been numerous. However, during its latest round of recruitment the service did appoint the 3 Social Work students to which reference has been made who will qualify in October, 2018 as NQSWs. There were four other candidates who were appointable during that process but they will not qualify for a further six months. Given the current social work recruitment difficulties throughout England and Wales it is unlikely the service will be able to recruit enough experienced social workers to fill the existing vacancies. The service will therefore seek to nurture and develop its own social workers but as NQSWs their caseloads will be limited initially and they will not be able to take responsibility for and lead on serious cases hence the need to retain agency social workers to provide support and guidance until the NQSWs gain experience.
- The Head of Service has recently been made aware of historical cases some dating back a number of years which for the reasons stated in the report, could have been dealt with differently and more appropriately; these are being referred to as Legacy cases. These cases will have to be re-assessed and it is proposed to recruit 3 agency Social Workers and 1 Practice Leader over establishment to form a temporary Practice Team to be managed directly by the Head of Service in order to audit, assess and progress these cases to the correct plan or to the Courts **(Cost £177,874)**. As it is difficult to provide an accurate figure for the amount of cases which will proceed to the Public Law Outline or into care proceedings, the Service would need to estimate and provide additional capacity within its legal service (over and above the 1.5 FTE Solicitors that currently support the Children and Families Services) to meet this demand. It is proposed that the additional capacity is extended to 2.5 FTE for a period of 12 months at a cost of **£54,527**.
- Taking into account the reserve of £144,737 within the Service for staffing costs the total additional funding requested is **£268,008**.

With reference to supplementing the legal capacity within the Service, the Head of Function (Council Business)/Monitoring Officer advised that having discussed the matter of additional legal capacity with the Head of Children and Families Services the estimated costs of making this provision as set out in the report are accurate in the event that the service is successful in recruiting a professional to work internally in this field for a period of 12 months. However, experience suggests that this is unlikely

given the historical difficulties in recruiting for a temporary period to a specialised area. The alternative is to engage an agency solicitor for this purpose but at a significantly higher cost. The cost of a previous agency appointment to an area of similar specialism was £130k per annum which is considerably more expensive than the figure quoted in the report.

The Head of Function (Resources)/Section 151 Officer said that the additional costs incurred from meeting the request outlined above will fall to the Council's General Reserves; these have reduced to £6.232m as at March, 2018 having been drawn upon to balance the 2017/18 Revenue Budget which was overspent by £1.7m. Further utilisation of the General Reserves to provide the additional funding requested by the Children and Families Services will take them below £6m which is the minimum level of general reserves which the Section 151 Officer has assessed the Council needs to hold in light of the financial context. The Officer said that however, the Council's usable reserves are there for situations such as this when a sum of money is required to meet an unplanned for need.

The Executive noted the information presented and raised the following points –

- The Executive noted that the Council has in the past supported traineeship schemes in a number of service areas. The Executive noted that establishing a solicitors' traineeship scheme might be an idea worthy of further consideration in view of the difficulty of recruiting a professional for a fixed period and the high costs of procuring additional legal capacity when that is required from an agency source.
- The Executive noted that historical cases have emerged within Children's Services that are deemed to require audit and review to ensure there have been no oversights in their conduct and management. The Executive further noted that a strategic plan is proposed to reassess these legacy cases. The Executive was agreed in stating that it would be helpful if the service was able to clarify a timeframe for addressing and resolving legacy cases and the issues involved.
- The Executive noted that the 2018/19 Budget Book shows that the income in the form of grants and other contributions to Children's Service is £1.26m (now approaching £1.5m if the request above is acceded to). In light of this and also in view of the ongoing pressures on the Looked After Children's budget although not unique to Anglesey, the Executive sought clarification of whether the assumptions in the Medium Term Financial Plan (MTFP) should be revised to factor in this additional expenditure and the likelihood of reoccurrence in future years, and whether the £8.224 standstill budget for Children's Services for 2018/19 is a realistic and true reflection of the actual position.

The Head of Function (Resources)/Section 151 Officer said that the MTFP contains 3 scenarios for Children's Services, namely no additional funding for Children's Services; 10% additional funding and 20% additional funding. So when the MTFP makes reference to a possible savings requirement of £10m, additional funding for Children's Services has been accounted for within that sum.

It was resolved to approve the following –

- **For the Children and Families Services to recruit 7 NQSW to the fieldwork teams from October, 2018 (3 already appointed) and for these to be supported by going over establishment by 4 agency social workers for 12 months.**
- **For the Service to extend the legal capacity within the service by 2.5 FTE for a period of 12 months.**

- **For £268,008 additional funding to be released from the Council's reserves to fund the additional requirements outlined in the report.**

7. REVENUE BUDGET MONITORING REPORT – QUARTER 4 2017/18

The report of the Head of Function (Resources) and Section 151 Officer setting out the provisional outturn for the Revenue Budget for the 2017/18 financial year was presented for the Executive's consideration.

The Portfolio Member for Finance reported that it was disappointing to report that the outturn for 2017/18 is an overspend of £1.762k against a budget of £126.647m (1.39% of the Council's net budget). This is despite the Authority delivering savings of £1.55m over the same period and means therefore that £1.77m has been taken out of the General Reserves in order to balance the budget thereby taking the level of usable reserves down close to the £6m threshold recommended by the Section 151 Officer and approved by the Council. Should the overspend be repeated in 2018/19 then that could lead to a further depletion of the Council's general reserves. The most significant service demand pressures have been seen in Education and Children's Services as has been reported throughout the year. An increase in demand in specific budgets within Adult Social Care over the final quarter has led to a higher overspend at outturn in Adults' Services than was forecasted at the end of Quarter 3. Council Business is also £181k overspent at outturn which is an improvement on the end of the Quarter 3 prediction and which is due mainly to agency fees owing to maternity cover and long-term sickness absence. The Portfolio Member said that additionally he wished to draw attention to the summary of contingency budgets under Appendix C and specifically to the overspend on the salary and grading contingency budget as a result of meeting voluntary redundancies agreements; however these will lead to long-term savings for the Council.

The Head of Function (Resources) and Section 151 Officer said that the main pressure areas where the overspends are the highest are known and have been well documented throughout the year. Other emerging risk areas in Quarter 4 which could carry on into 2018/19 are increasing homelessness costs and the Leisure section which is having difficulties achieving income targets. In mitigation, Corporate Finance has underspent by £655k for the year; this includes an underspend of £258k on the Council Tax Reduction Scheme and an underspend of £449k on capital financing costs. With regard to the Council's general reserves, the Officer said that the point is approaching where consideration will have to be given to developing a strategy as part of the MTFP to restoring the reserves to the £6m level; depending on if and by how much the Authority overspends in 2018/19, and how far below the £6m threshold the Council's general reserves dip as a consequence it will need to consider over what length of time it proposes to build the reserves back up to an acceptable level and then factor this into subsequent budgets. The Council's approach in previous years of setting aside reserves to cope with unplanned for financial pressures has helped it in 2017/18 and will likely do so again in 2018/19.

The Executive's Portfolio Members summarised the end of year position with regard to their individual portfolio areas, including any variances and, where the outcome had been an overspend they outlined how the pressures on their services are being mitigated. A particular focus was put on Children and Families Services as the highest overspending area where the financial pressures are most acute and are ongoing. The Leader and Portfolio Member for Social Services said that the 72% increase in the number of children being looked after illustrates the extent of the challenge both locally and nationally – the Executive as part of the 2018/19 budget proposals did propose that part of the Council Tax increase be earmarked to meet budget pressures in Social Services where both Children's and Adults' Services are overspending. The Finance Scrutiny Panel is closely monitoring the position

and in particular the Children's Services' plans to alleviate over expenditure within the service. The Portfolio Member said that increasing attention will have to be given to transforming how services are delivered and, in light of the 2017/18 budget overspend and the continuing financial challenges which the Authority faces, service transformation has to happen expeditiously. The Authority is having to operate in a climate of financial austerity whilst still seeking to protect services for the vulnerable and those in need. Much has been made of the Authority's expenditure on agency staff – most of these costs are due to Children's Services where agency cover has been required to fill existing vacancies and sickness absence where ensuring the continuation of the service is essential. Where agency staff have been engaged by other services it is in order to fill a gap due to staff absences to maintain a service. The Leader said that the end of year overspend was disappointing but could be taken to indicate that the Authority is nearing a tipping point under the pressure of the Government's squeeze on local government funding.

With reference to Children and Families Services, the Assistant Chief Executive (Governance and Business Process Transformation) and Statutory Director of Social Services highlighted that the service has improved significantly over the course of the past two years and can evidence successes in recruiting, in reducing sickness absence and in providing a wider range of support for children, young people and their families. The overspend in the service is directly related to the increase in the number of children and young people requiring immediate and ongoing support – the service does have plans to source more cost-effective and more appropriate placements but this will take time. Whilst the service's deployment of agency staff is a temporary but not necessarily short-term measure, they do have an important contribution to make in mentoring, supporting and strengthening staff in their day to day work. The service although it has made significant progress continues to be on an improvement journey.

It was resolved –

- **To note the position set out in Appendices A and B to the report in respect of the Authority's financial performance for 2017/18.**
- **To note the summary of Contingency budgets for 2017/18 detailed in Appendix C to the report.**
- **To note the position of the Invest to Save programme in Appendix CH to the report.**
- **To note the position of the efficiency savings for 2017/18 set out in Appendix D to the report.**
- **To note the monitoring of agency and consultancy costs for 2017/18 set out in Appendices DD and E.**
- **To note that the outturn reported in the document remains provisional until the completion of the statutory audit.**

8. HRA BUDGET MONITORING – QUARTER 4 2017/18

The report of the Head of Function (Resources) and Section 151 Officer setting out the performance of the Housing Revenue Account for the period from 1 April, 2017 to 31 March, 2018 was presented for the Executive's consideration.

The Portfolio Member for Finance reported that the revenue position for 2017/18 shows an underspend of £933k mainly due to lower capital financing costs. The capital outturn expenditure was £3,607k below the budget mainly due to unforeseen delays in the council house development programme. Any underspend is available to be spent in 2018/19. The

Housing Revenue Account is ring-fenced and its reserves cannot be transferred to the General Fund.

It was resolved –

- **To note the position set out in respect of the financial performance of the Housing Revenue Account (HRA) for Quarter 4 2017/18 and,**
- **To note also that the outturn is subject to the usual year end audit process meaning the figures are provisional at this stage.**

9. EXCLUSION OF THE PRESS AND PUBLIC

It was resolved under Section 100(A)(4) of the Local Government Act 1972, to exclude the press and the public from the meeting during the discussion on the following item on the grounds that it involved the disclosure of exempt information as defined in Schedule 12A of the said Act and in the Public Interest Test presented.

10. LLANGEFNI GOLF COURSE AGREEMENT

The report of the Chief Executive with regard to the Llangefni Golf Course and Driving Range was presented for the Executive's consideration. The report referred to the current position with regard to the running and management arrangements of the Golf Course; it summarised the outcome of an options appraisal exercise in relation to the future of the Golf Course and set out recommendations for a resulting course of action.

Councillor Dylan Rees spoke on the matter as a Local Member and made representations to the effect that any plans for the area should have regard to the regeneration needs of the town of Llangefni.

It was resolved to proceed in accordance with the recommendations of the report.

**Councillor Llinos Medi Huws
Chair**

ISLE OF ANGLESEY COUNTY COUNCIL	
Report to:	The Executive
Date:	18 June 2018
Subject:	The Executive's Forward Work Programme
Portfolio Holder(s):	Cllr Llinos Medi
Head of Service:	Lynn Ball Head of Function – Council Business / Monitoring Officer
Report Author: Tel: E-mail:	Huw Jones, Head of Democratic Services 01248 752108 JHuwJones@anglesey.gov.uk
Local Members:	Not applicable

A –Recommendation/s and reason/s
<p>In accordance with its Constitution, the Council is required to publish a forward work programme and to update it regularly. The Executive Forward Work Programme is published each month to enable both members of the Council and the public to see what key decisions are likely to be taken over the coming months.</p> <p>The Executive is requested to:</p> <p>confirm the attached updated work programme which covers July 2018 – February 2019;</p> <p>identify any matters for specific input and consultation with the Council's Scrutiny Committees and confirm the need for Scrutiny Committees to develop their work programmes further to support the Executive's work programme;</p> <p>note that the forward work programme is updated monthly and submitted as a standing monthly item to the Executive.</p>

* Key:
Strategic – key corporate plans or initiatives
Operational – service delivery
For information

B – What other options did you consider and why did you reject them and/or opt for this option?

-

C – Why is this a decision for the Executive?

The approval of the Executive is sought before each update is published to strengthen accountability and forward planning arrangements.

D – Is this decision consistent with policy approved by the full Council?

Yes.

DD – Is this decision within the budget approved by the Council?

Not applicable.

E – Who did you consult?		What did they say?
1	Chief Executive / Strategic Leadership Team (SLT) (mandatory)	The forward work programme is discussed at Heads of Service meetings ('Penaethiaid') on a monthly basis (standing agenda item). It is also circulated regularly to Heads of Services for updates.
2	Finance / Section 151 (mandatory)	
3	Legal / Monitoring Officer (mandatory)	
5	Human Resources (HR)	
6	Property	
7	Information Communication Technology (ICT)	
8	Scrutiny	
9	Local Members	Not applicable.
10	Any external bodies / other/s	Not applicable.

* Key:

Strategic – key corporate plans or initiatives

Operational – service delivery

For information

2

F – Risks and any mitigation (if relevant)	
1	Economic
2	Anti-poverty
3	Crime and Disorder
4	Environmental
5	Equalities
6	Outcome Agreements
7	Other
FF - Appendices:	
The Executive's Forward Work Programme: July 2018 – February 2019.	

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

* Key:
 Strategic – key corporate plans or initiatives
 Operational – service delivery
 For information

THE EXECUTIVE'S FORWARD WORK PROGRAMME

Period: July 2018 – February 2019

Updated: 8 June 2018



The Executive's forward work programme enables both Members of the Council and the public to see what key decisions are likely to be taken by the Executive over the coming months.

Executive decisions may be taken by the Executive acting as a collective body or by individual members of the Executive acting under delegated powers. The forward work programme includes information on the decisions sought, who will make the decisions and who the lead Officers and Portfolio Holders are for each item.

It should be noted, however, that the work programme is a flexible document as not all items requiring a decision will be known that far in advance and some timescales may need to be altered to reflect new priorities etc. The list of items included is therefore reviewed regularly.

Page 14 Reports will need to be submitted from time to time regarding specific property transactions, in accordance with the Asset Management Policy and Procedures. Due to the influence of the external market, it is not possible to determine the timing of reports in advance.

The Executive's draft Forward Work Programme for the period **July 2018 – February 2019** is outlined on the following pages.

* Key:

S = Strategic – key corporate plans or initiatives

O = Operational – service delivery

FI = For information

THE EXECUTIVE'S FORWARD WORK PROGRAMME

Period: July 2018 – February 2019

Updated: 8 June 2018

Subject & *category and what decision is sought	Decision by which Portfolio Holder or, if a collective decision, why	Lead Service	Responsible Officer/ Lead Member & contact for representation	Pre-decision / Scrutiny (if applicable)	Date to Executive or, if delegated, date of publication	Date to Full Council (if applicable)
July 2018						
1	The Executive's Forward Work Programme (S) Approval of monthly update.	Council Business	Huw Jones Head of Democratic Services Cllr Llinos Medi		The Executive 16 July 2018	
2	Draft Final Accounts 2017/18	Resources	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams		The Executive 16 July 2018	
3	Anti-Poverty Strategy Approval of the document following the consultation period.	Housing	Ned Michael Head of Housing Services Cllr Alun W Mummery	Partnership and Regeneration Scrutiny Cttee June/July 2018	The Executive 16 July 2018 (To be confirmed)	
4	Schools' Modernisation – Llangefni Area (Ysgol y Graig and Ysgol Talwrn) To consider a report on the new statutory consultation.	Learning	Dr Gwynne Jones Chief Executive / Annwen Morgan Assistant Chief Executive – Improving Partnerships, Communities and Services Cllr R Meirion Jones	Corporate Scrutiny Committee 5 July 2018	The Executive 16 July 2018	

* Key:

S = Strategic – key corporate plans or initiatives

O = Operational – service delivery

FI = For information

THE EXECUTIVE'S FORWARD WORK PROGRAMME

Period: July 2018 – February 2019

Updated: 8 June 2018

Subject & *category and what decision is sought	Decision by which Portfolio Holder or, if a collective decision, why	Lead Service	Responsible Officer/ Lead Member & contact for representation	Pre-decision / Scrutiny (if applicable)	Date to Executive or, if delegated, date of publication	Date to Full Council (if applicable)
5 Annual Report of the Statutory Director of Social Services 2017/18(S) Endorsement of report for submission to Council.		Social Services	Caroline Turner Assistant Chief Executive – Governance and Business Process Transformation Cllr Llinos Medi	Corporate Scrutiny Committee 5 July 2018	The Executive 16 July 2018	25 September 2018
September 2018						
6 Schools' Modernisation – Seiriol Area To consider a report on the new statutory consultation.		Learning	Dr Gwynne Jones Chief Executive / Annwen Morgan Assistant Chief Executive – Improving Partnerships, Communities and Services Cllr R Meirion Jones	Corporate Scrutiny Committee 13 July 2018	The Executive 18 July 2018	
7 The Executive's Forward Work Programme (S) Approval of monthly update.	The approval of the full Executive is sought to strengthen forward planning and accountability.	Council Business	Huw Jones Head of Democratic Services Cllr Llinos Medi		The Executive 17 September 2018	

* Key:

S = Strategic – key corporate plans or initiatives

O = Operational – service delivery

FI = For information

THE EXECUTIVE'S FORWARD WORK PROGRAMME

Period: July 2018 – February 2019

Updated: 8 June 2018

Subject & *category and what decision is sought	Decision by which Portfolio Holder or, if a collective decision, why	Lead Service	Responsible Officer/ Lead Member & contact for representation	Pre-decision / Scrutiny (if applicable)	Date to Executive or, if delegated, date of publication	Date to Full Council (if applicable)
8 Corporate Scorecard – Quarter 1, 2018/19 (S) Quarterly performance monitoring report.	This is a matter for the full Executive as it provides assurance of current performance across the Council.	Corporate Transformation	Carys Edwards Head of Corporate Transformation Cllr Dafydd Rhys Thomas	Corporate Scrutiny Committee 3 September 2018	The Executive 17 September 2018	
9 2018/19 Revenue and Capital Budget Monitoring Report – Quarter 1 (S) Quarterly financial monitoring report.	This is a matter for the full Executive as it provides assurance of current financial position across the Council.	Resources	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams	Finance Scrutiny Panel 3 September 2018	The Executive 17 September 2018	
10 Review of the Treasury Management Strategy 2017/18	This is a matter for the Executive as it falls within the Council's Budget Framework.	Resources	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams		The Executive 17 September 2018	
11 Medium Term Financial Strategy	This is a matter for the Executive as it falls within the Council's Budget Framework.	Resources	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams		The Executive 17 September 2018	

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12	Transformation of Education and Anglesey Schools Modernisation Strategy		Learning	Arwyn Williams Head of Learning Cllr R Meirion Jones	Corporate Scrutiny Committee 3 September 2018	The Executive 17 September 2018	
13	CIW Inspection of Children's Services in Anglesey – Improvement Plan – Quarterly Progress Report		Children's Services	Fôn Roberts Head of Children's Services Cllr Llinos Medi	Corporate Scrutiny Committee 3 September 2018	The Executive 17 September 2018	
14	Welsh Housing Quality Standard – Acceptable Fails		Housing	Ned Michael Head of Housing Services Cllr Alun W Mummery		The Executive 17 September 2018	
15	Housing Maintenance Work and Standards Policy		Housing	Ned Michael Head of Housing Services Cllr Alun W Mummery		The Executive 17 September 2018	

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16	Protocol of the Statutory Director of Social Services	Social Services	Caroline Turner Assistant Chief Executive – Governance and Business Process Transformation Cllr Llinos Medi		The Executive 17 September 2018	25 September 2018
October 2018						
17	The Executive's Forward Work Programme (S) Approval of monthly update.	Council Business	Huw Jones Head of Democratic Services Cllr Llinos Medi		The Executive 29 October 2018	
18	Annual Performance Report (Improvement Plan) 2017/18) Approval of report and recommendation to full Council.	Corporate Transformation	Carys Edwards Head of Corporate Transformation Cllr Dafydd Rhys Thomas		The Executive 29 October 2018	30 October 2018
19	Capital Budget Strategic Plan 2019/20	Resources	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams		The Executive 29 October 2018	

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November 2018						
20	2019/20 Budget (S) To finalise the Executive's initial draft budget proposals for consultation.	Council Business	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams	Corporate Scrutiny Committee 24 October 2018	The Executive 12 November 2018	
21	The Executive's Forward Work Programme (S) Approval of monthly update.	Council Business	Huw Jones Head of Democratic Services Cllr Llinos Medi		The Executive 26 November 2018	
22	Corporate Scorecard – Quarter 2, 2018/19 (S) Quarterly performance monitoring report.	Corporate Transformation	Carys Edwards Head of Corporate Transformation Cllr Dafydd Rhys Thomas	Corporate Scrutiny Committee - Date to be confirmed	The Executive 26 November 2018	
23	2018/19 Revenue and Capital Budget Monitoring Report – Quarter 2 (S) Quarterly financial monitoring report.	Resources	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams	Finance Scrutiny Panel – Date to be confirmed	The Executive 26 November 2018	

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24	Gambling Policy To recommend to full Council that the policy is approved.	Regulation and Economic Development	Dylan Williams Head of Regulation and Economic Development Cllr Richard Dew		The Executive 26 November 2018	11 December 2018
December 2018						
25	The Executive's Forward Work Programme (S) Approval of monthly update.	Council Business	Huw Jones Head of Democratic Services Cllr Llinos Medi		The Executive 17 December 2018	
26	Homelessness Strategy Approval of the document following the consultation period.	Housing	Ned Michael Head of Housing Services Cllr Alun W Mummery	Corporate Scrutiny Committee 5 November 2018	The Executive 17 December 2018	
January 2019						
27	The Executive's Forward Work Programme (S) Approval of monthly update.	Council Business	Huw Jones Head of Democratic Services Cllr Llinos Medi		The Executive 28 January 2019	

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THE EXECUTIVE'S FORWARD WORK PROGRAMME

Period: July 2018 – February 2019

Updated: 8 June 2018

Subject & *category and what decision is sought	Decision by which Portfolio Holder or, if a collective decision, why	Lead Service	Responsible Officer/ Lead Member & contact for representation	Pre-decision / Scrutiny (if applicable)	Date to Executive or, if delegated, date of publication	Date to Full Council (if applicable)	
February 2019							
28	2019/20 Budget (S) Adoption of final proposals for recommendation to the County Council.	This is a matter for the Executive as it falls within the Council's Budget Framework.	Resources	Marc Jones Head of Function – Resources / Section 151 Officer Cllr Robin Wyn Williams	Corporate Scrutiny Committee 4 February 2019	The Executive 18 February 2019	27 February 2019
29	The Executive's Forward Work Programme (S) Approval of monthly update.	The approval of the full Executive is sought to strengthen forward planning and accountability.	Council Business	Huw Jones Head of Democratic Services Cllr Llinos Medi		The Executive 18 February 2019	

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ISLE OF ANGLESEY COUNTY COUNCIL	
Report to:	The Executive
Date:	18 June 2018
Subject:	Children and Families Services Progress Report
Portfolio Holder(s):	Councillor Llinos Medi
Head of Service:	Fôn Roberts, Head of Children and Families Services
Report Author:	Fôn Roberts, Head of Children and Families Services
Tel:	01248 752708
E-mail:	FonRoberts@ynysmon.gov.uk
Local Members:	Relevant to all Members

A –Recommendation/s and reason/s
<p><u>Background</u></p> <p>Over the period since the inspection we have been significantly involved in putting in place a series of important changes which we consider will better deliver in line with the legislation. In particular we would highlight the following:-</p> <p>Restructuring the service so that it focusses its energy on the early intervention and prevention, and intensive intervention with service managers leading each of these service areas and holding the resources relevant to that service area i.e. fieldwork and service provision. It has substantially increased the level of supervisory resources, management oversight, case direction, improved care planning with small practice groups led by practice leaders, who are focused on improving the quality of professional practice. We have been particularly successful in attracting experienced social workers to take on this role. The model also puts the Information Advice and Assistance hub, namely Teulu Môn, at the centre of the Early Intervention and Prevention service. The full complement of practice leaders came into position during September and the focus at this stage is to develop their understanding of their role and to begin the process of implementing new ways of working across all our services. This will require significant cultural change and will take time and energy to bring this about across all our services.</p> <p>We have developed a prevention strategy focused on deescalating need at all levels, and reducing the need for intensive involvement, we are currently consulting on its content with relevant stakeholders. We are using Families First resources to enhance our Teulu Môn and TAF responses and to ensure other Families First investment is coherent with that objective. The council has invested resources to establish an intensive intervention resilient families’ team so that we are able to respond proactively to children with high</p>

level/edge of care needs. The resilient families' team is also having an impact in working with the allocated social worker to assist in returning children and young people out of care either to friends or family or closer to home. These initiatives are now all operational and starting to deliver in line with these expectations, we are in the process of increasing the resourcing to further enhance this provision.

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

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

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

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

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

Recruitment and Retention

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

NQSW's throughout their 1st three year in Practice framework, which is a statutory framework.

Service Improvement Plan

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Financial Implications

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

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

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

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

Recommendations

- To confirm if the Executive is satisfied with the steps taken to progress implementation of the Service Improvement Plan and the pace of progress.
- To confirm if the Executive is satisfied with the pace of progress and improvements made to date within Children and Families Services.

B – What other options did you consider and why did you reject them and/or opt for this option?

Not applicable.

C – Why is this a decision for the Executive?

The Service needs confirmation by the Executive that they are satisfied with the steps taken to progress implementation of the Service Improvement Plan and improvements made to date within Children and Families Services.

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 / Senior Leadership Team (SLT) (mandatory)	This was approved by the SLT on the 29 th May 2018.
2	Finance / Section 151 (mandatory)	As above.
3	Legal / Monitoring Officer (mandatory)	N/A
4	Human Resources (HR)	N/A
5	Property	N/A
6	Information Communication Technology (ICT)	N/A
7	Procurement	N/A
8	Scrutiny	<p>This was presented to the Corporate Scrutiny Committee on the 4th June 2018:</p> <p>1. <u>Children’s Services Quarterly Progress Report</u></p> <p>Having considered the information provided and the assurances received, the Committee resolved to confirm that it is satisfied with the steps taken to date to progress the implementation of the Children’s Services Improvement Plan and the pace of progress.</p> <p>Additional Action Proposed: The Scrutiny Manager to source and to circulate to the Committee’s Members information in relation to the number of children’s social work staff that have left the service in the past two years; the reduction in the number of agency social workers over the past two years and the number currently engaged by the service, whether there has been a change in trend following the re-evaluation of Children’s Social Worker posts as part of</p>

		<p>the Job Evaluation process and the availability of benchmarking data against other authorities.</p> <p>2. <u>Progress Report on the work of the Children's Services Improvement Panel</u></p> <p>Having considered the information presented, the Committee resolved to note:</p> <ul style="list-style-type: none"> • The 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 and that this was reported to the Local Authority by Care Inspectorate Wales (CIW) following its assessment of the Council's self-evaluation to date • The ongoing development programme for Panel Members much of which is delivered in-house • That the Panel has escalated for its attention the fact that although good progress has been made on implementing the revised staffing structure, some posts remain filled by agency workers. The Committee further notes that this is being addressed by developing experienced home grown social workers by supporting experienced support workers to quality and by recruiting newly qualified social workers.
9	Local Members	N/A
10	Any external bodies / other/s	N/A

E – Risks and any mitigation (if relevant)		
1	Economic	N/A
2	Anti-poverty	N/A
3	Crime and Disorder	N/A
4	Environmental	N/A
5	Equalities	N/A

6	Outcome Agreements	N/A
7	Other	N/A

F - Appendices:	
Appendix 1 – Service Improvement Plan	
FF - Background papers (please contact the author of the Report for any further information):	

CIW recommendations in red - high priority

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

Children Services Improvement Plan Version 7.0 February - March 2018

CIW recommendations in red - high priority

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE	LEAD OFFICER	START	END
Page 32		<ul style="list-style-type: none"> • Service Induction programme produced for new staff • Workforce Action plan being progressed to monitor progress against the short-term actions up until December 2017. <p>June/July 2017</p> <ul style="list-style-type: none"> • Workforce Strategy completed. • Action Plan in preparation <p>May 2017</p> <ul style="list-style-type: none"> • Draft Workforce Strategy produced in collaboration with HR that includes relevant sections on recruitment, retention and support, induction arrangements, buddying, coaching and mentoring, shadowing, enhanced post qualification training and development opportunities, first year in practice guidance. • Strategy shared with staff for comments. • Induction expectations on Managers highlighted – this linked to advantages of new structure and increased number of practice leads. • HR related issues – weekly meetings established to address all related issues including recruitment. • 4 bilingual, newly qualified Social Workers recruited. • All social worker posts filled with temporary/permanent staff/recruitment in place. • Open advert for experienced social workers. • Session for induction guidance for Managers happened in March. • First year in practice guidance being reviewed by Practice Learning Co-ordinator 					
1.2	<p>Resolve Staffing matters to include:</p> <ul style="list-style-type: none"> • Recruit to permanent posts • Exit strategy for agency staff 	<p>November 2017 – January 2018</p> <ul style="list-style-type: none"> • One permanent Social Worker appointed early January • Fön Roberts has been in post as Head of Service since early December. • We continue to reduce the number of Agency staff, 7 Agency staff are currently employed on a temporary basis covering 5 empty Social Worker Posts. One Agency Staff if funded through the Edge of Care Grant. • 2 members of staff have started their Traineeship. • A new recruitment initiative was put in place in November to try to attract permanent experienced Social Workers. Rolling adverts are included in the Guardian for a year. • 4 x additional Support Workers recruited within TAF funded from Families First 	<ul style="list-style-type: none"> • Reduce the number of Agency staff. • 3 Newly Qualified Social Workers will commence in the Service late September bringing the number of vacant permanent Social Worker posts down to 3. • The rolling advert to attract experienced permanent Social Worker will be advertised 3 times during the next 6 months. 	<p>Yet to be done</p> <p>A stable and permanent workforce which results in:</p> <ul style="list-style-type: none"> • Consistency of practice across the service. • Improved quality of support to children and families. • Better relationships established between families and social workers leading to improved outcomes for children and families. <p>Partners report an improvement in joint working with Children Services due to reduction in staff turnover.</p>	Senior Management Team and HR	Nov 2016	Ongoing

CIW recommendations in red - high priority

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE	LEAD OFFICER	START	END
Page 33		<ul style="list-style-type: none"> Additional Personal Advisor recruited funded with St. David's Day Welsh Government Grant to provide practical and emotional support to young people who leave care when they are 18years old. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> Head of Service has been appointed and will commence in post at the beginning of December. We have recruited 8 new Social Workers over the last few months, all of whom are local and apart from one social worker are fluent Welsh speakers. This will ensure that we are able to meet the linguistic needs of children and families coming into contact with the service. 7 Agency staff are currently employed on a temporary basis covering empty Social Work and Team Manager Posts. We have developed Social Work Traineeship arrangements internally and 2 of our staff will now train to become qualified Social Workers over the next 2 years. We have failed to appoint to the post of Quality Assurance Manager which has slowed our progress in relation to delivering on the Quality Assurance Framework. <p><u>August 2017</u></p> <ul style="list-style-type: none"> Meetings are being held every two weeks between HR and Children's Services senior managers to ensure that recruitment and workforce development issues move on at pace. This to include regular updates on staffing levels, staffing chart and caseload. Appointed the Resilient Families Team Appointed 2.5 Engagement Officer in Teulu Môn 8 Practice Leaders now appointed commencing on the 4th of September Discussions to be held around extending Agency Staff contracts to be extended until end of December <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> Agency staff contracts extended until end of September 2017 to ensure workforce of sufficient numbers and experience. Aim to 					

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CIW recommendations in red - high priority

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT AND EVIDENCE	LEAD OFFICER	START	END
Page 34		<p>reduce agency social workers during September.</p> <ul style="list-style-type: none"> • 1 qualified and 3 student social workers appointed to posts. 1 qualified and 1 student commencing in July. 5 vacant posts being advertised on a rolling basis • 7 Practice Leaders appointed. Further vacant post being advertised. • Appointed to vacant IRO post with commencement date of 10th of July. • Service Manager Early Intervention and Prevention appointed. Commencement middle of August. • Service Manager Intensive Intervention appointed. Agency Service Manager covering on a temporary basis. • Retaining permanent and temporary social workers continues to be a challenge for the service. • Providing sufficient support and guidance to staff remains a high priority. <p>May 2017</p> <ul style="list-style-type: none"> • Weekly meetings established between HR and Children’s Services senior managers to ensure that recruitment and workforce development issues move on at pace. This to include regular updates on staffing levels, staffing chart and caseload. • We continue to advertise for experienced social work posts on a rolling basis • HR recruitment briefings have been held for Managers. • HR to provide regular updates regarding recruitment and retention rates for the Service. • Continued guidance from Finance on cost implications of agency staff. • Exit strategy is in place for agency staff where posts have been filled by permanent workers. 					
1.3	<p>Review of Supervision Policy. This will include following:</p> <ul style="list-style-type: none"> • Code of Practice • Formal and informal or ad-hoc Supervision • Purpose of Supervision • Benefits of Supervision 	<p>February – March 2018</p> <ul style="list-style-type: none"> • Senior managers observed supervision sessions across the service: these individual audit tools are yet to be analysed: so that we can report on the findings. This will be done once all individual audits are presented. <p>November – January 2018</p>		<p>Commenced Staff positively report that the quality of their assessments and plans have improved through regular and quality supervision. The Supervision Survey responses indicate a lack of consensus across the service on this: and the impact of supervision on the quality of practice needs further work. :</p>	Senior Management Team	Dec 2016	<p>Ongoing tracking and auditing</p> <p>QA June 2017</p>

CIW recommendations in red - high priority

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Page 35	<ul style="list-style-type: none"> Roles and Responsibilities Minimum Frequencies and Cancellation Planning for a Supervision Session Recording of Supervision Disputes Confidentiality and Access Links with Other Policies and Procedures <p>Links to CIW Recommendation 7: Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality.</p>	<ul style="list-style-type: none"> An Audit of supervision arrangements commenced in October 2017 across Children’s Services. This audit has not progressed as planned – as the relevant managers have not completed the work of auditing supervision records across teams. They have been asked to provide the reasons for this. Anecdotal evidence would suggest that this is an issue around recording of the supervision records. A staff survey has been completed: and this shows some positive results. Mentoring for managers on outcome-focused supervision workshops designed to develop reflective practice held in December for Practice Leaders. On-going advice and guidance provided to individual social workers on completing assessments, recording and assessing risk. <p>September & October 2017</p> <ul style="list-style-type: none"> A feedback form has been developed by colleagues in Training to ask what staff have learnt from the training they have received, have they put what they’ve learnt into practice, what would they change about the course if anything. Staff completed these forms during the Staff Conference in October. We are currently analysing the information. A planning workshop was held for Senior Management Team with Rhonwyn Dobbie in preparation for the 3 outcome focused supervision workshops. We have continued to remind staff that supervision is a priority and that all staff need to have regular supervision in line with the Policy. Supervision continues to be tracked by the Head of Service to ensure compliance. Managers/Practice Leaders will be held accountable for non-compliance. Audit of supervision arrangements commenced in October 2017 across Children’s Services, including staff perception of supervision through questionnaires and focus groups. Initial feedback from the auditor is that progress with the work is slow as managers are unable to provide all the records of supervision that were to have happened in the nominated period. It is unlikely that this review will provide evidence of systematic and consistent compliance with the policy. Practice Leaders are very new in post and have only been supervising their staff since the beginning of October. We will undertake a repeat audit in February 2018. 		<p>The response to the impact of the new structure on the capacity to provide professional leadership to support the workforce through regular and quality supervision shows that this is still work in progress.</p> <p>Clear guidance on standards and good practice clearly communicated and available to all through regular Supervision. 67% of responders agreed that supervision helped them better understand what they need to be doing. This needs building on.</p> <p>Managers complying with the Supervision Policy and Risk Model incorporated into Supervision sessions with staff. 83% agreed or strongly agreed that they were able to do this. This will be tested further during an evaluation of the recent coaching/mentoring of the Risk Model</p> <p>Regular audits across Children and Adult Services showing good quality and consistent Supervision. Regular audits are showing that improvement in management oversight and supervision remains inconsistent.</p> <p>Assurance mechanism established centrally to ensure compliance with Supervision policy.</p> <p>Staff report that they are effectively supported to carry out their duties. – Circa 75% agreed or strongly agreed in the supervision survey that they are effectively supported to carry out their duties. 79% agreed or strongly agreed that they receiving supervision often enough.</p> <p>Managers’ report that they are enabled to support staff to the required standards. – 83% agreed or strongly agreed that they were able to do this.</p>			<p>The Supervision Policy has been completed but too early to evidence outcome.</p>

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Page 36		<ul style="list-style-type: none"> Mentoring by Bruce Thornton has started to work with each practice lead in terms of how they embed the Risk Model in their work including during supervision. <p>August 2017</p> <ul style="list-style-type: none"> Arrangements made with Rhonwyn Dobbing on undertaking outcome focused supervision training for Practice Leaders. Three workshops will be held and the purpose is to support supervisors in examining their role in outcome-focused supervision and to consider the value of outcome focused supervision for service users, workers, social work practice and for the organisation. It should also strengthen the role of supervisor, consider core skills and challenges for different practice groups. <p>June/July 2017</p> <ul style="list-style-type: none"> Training on the Supervision policy held and training on the risk model held in June. On-going tracking and monitoring of supervision arrangements to ensure compliance of the Policy. <p>May 2017</p> <ul style="list-style-type: none"> Supervision policy revised and shared with staff Tracking arrangements in place to monitor strict compliance with Supervision policy Supervision policy completed Training on the Risk Model and its link with staff Supervision has been provided to all staff in June. Supervision training provided to all staff and Managers. 					
1.4	<p>Provide developmental opportunities for Practice Leaders to support the workforce in carrying out their duties. Areas of focus:-</p> <ul style="list-style-type: none"> Principles for making correct and safe case management decisions (management oversight of decision making) Improving and managing practice and performance including providing constructive challenge and direction to staff 	<p>February-March 2018</p> <ul style="list-style-type: none"> Service Manager Intensive Intervention holds monthly meetings with Practice Leaders to focus on the quality of Social Work practice and improvement required. Arrangements for PL are regularly reviewed to ensure they have capacity to supervise and support their staff. <p>November – January 2018</p> <ul style="list-style-type: none"> The office re-organisation has happened with Practice Leaders located with their Practice Groups. <p>September & October 2017</p> <ul style="list-style-type: none"> The Service Induction Programme is continuing (see below) 	<ul style="list-style-type: none"> HR to provide regular updates regarding recruitment and retention rates for the Service. (This could be part of what is discussed in the 6-8 weekly meetings with HR). 	<p>Commenced</p> <p>Managers' report enhanced confidence in their skills in making correct and safe case management decisions. 83% of staff who completed the Staff Questionnaire in November 2017 agreed.</p> <p>Staff report that they feel better supported by their line managers in carrying out their responsibilities leading to a reduction in staff turnover, improve staff retention and providing stability in the workforce. 74% of staff who completed the Staff Questionnaire in November 2017 strongly agreed or agreed.</p>	Senior Management Team	Jan 2017	<p>March 2018</p> <p>Too early to evidence outcome , developmental opportunities for Practice Leaders have</p>

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Page 37	<ul style="list-style-type: none"> • Managing difficult conversations • Providing regular and quality Supervision • Developing Practice leaders in coaching and mentoring skills <p>Links to CIW Recommendation 6: Arrangements for team managers and senior practitioners should be reviewed to ensure capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; a leadership and development programme should be made available to build resilience.</p>	<ul style="list-style-type: none"> • Practice Leaders took on responsibility of their Practice Groups at the beginning of October. Most had a 3 week induction period with no management responsibility for staff. <p>August 2017</p> <ul style="list-style-type: none"> • A repeat audit was undertaken in May/June 2017 confirmed positive progress was being made in relation to referrals that proceeded to Strategy and Conference: Quality of Strategy Discussions/Meetings Quality of Assessment. <p>Key Themes are as follows:</p> <ul style="list-style-type: none"> • Attendance and recording at Strategy Meetings has improved • Increased use of Risk 2 tool • Strategy meetings timely • Increased use of Chronologies evident • Improved quality of assessments evident. • Consistency of forms still a problem (S.W.report /Core/Risk2/ Care and Support Assessment and Eligibility tool all in use). • Conceptual shift from filtering risk to identifying strengths not fully embedded • An Away Morning was held on the 28th of July for Senior Staff Members to agree arrangements for the restructure of the service and to start discussing arrangements for Practice Leaders. • 8 Practice Leaders successfully appointed • Service induction programme is in place for September to include training sessions on: <ul style="list-style-type: none"> • Vision for the Service, overarching organisation, SIP • Managing sickness absence & Return to Work Interviews • Complaints and Flexi • Collaborative Communication • Supervision Workshops -3 x full days workshops on Outcome focused supervision • PLO and Court work • Time Management & Diary Management, Prioritising Work and Expectations • Delivering ACE Parental Groupwork Sessions • Performance • Capability • Management Style Course • Quality Assurance and Audits 		<p>Increased confidence in workforce and organisational reputation in feedback from partners.</p> <p>Regular case file audits showing an improvement in the quality of assessments and care and support plans.</p> <p>Regular audits across the Service showing correct and safe management decisions being made by Managers.</p>			<p>been given</p>

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Page 38		<ul style="list-style-type: none"> • Thresholds & Correct decision making and staff carrying out actions • Care planning & Reviewing C & S, CP & LAC • Case recording • Assessments and Risk Model • Caseload Management – Allocation of cases, Step down to TAF and not closing cases to Children’s Services, reduced caseload for newly qualified – maximum 12 cases • Family Group Conferencing, Participation and Parenting Development Work • North Wales Police Public Protection Unit • CAF/CASS • Motivational Interviewing <p>June/July 2017</p> <ul style="list-style-type: none"> • Audits started for Quarter 1: Case file audits, multi-agency audits, thematic audits, analysis available end of July • Training held for Managers on Managing difficult conversations • 7 Practice Leaders appointed, 4 internal staff and 3 external. • Training provided to Managers on Providing regular and quality Supervision • 4 Managers currently undertaking accredited Leadership and Development training. • Service restructure and establishing smaller operational Teams is proceeding and will ensure increased capacity for Managers to provide consistent guidance, supervision and support to staff. • Arrangements have been made for Adults Services Managers to support Children’s Services Managers in their professional development. 					
1.5	<p>CIW Recommendation 4: Continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s services to assure themselves, partners, staff and communities that their responsibilities are discharged to maximum effect.</p> <p>CIW Recommendation 8:</p>	<p>February – March 2018</p> <ul style="list-style-type: none"> • Laming visits have happened <p>November – January 2018</p> <ul style="list-style-type: none"> • The Members Panel continues to meet on a monthly basis. Seven meetings have been held to date. • 3 Laming visits have happened since October 2017, with visits to the Early Intervention Service, Resilient Families Team and Specialist Children’s Services <p>September & October 2017</p>	<ul style="list-style-type: none"> • Continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s services. 	<p>Yet to be done Senior leaders’ and elected members’ report that their involvement in the Social Services panel has developed their understanding of the key underlying issues and risks associated with the service and their ability to scrutinise the effectiveness of the service.</p> <p>Senior managers within the service report that the support and challenge provided by senior leaders and elected members have continued to improve.</p>	Chief Executive Director of Social Services	January 2017	On-going Number of Councillors attended the Inclusion

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Page 39	<p>Strong political and corporate support for children’s services must continue to ensure the service improvements needed are prioritised and the pace of improvement accelerated and sustained.</p>	<ul style="list-style-type: none"> • The Members Panel has continued to focus on monitoring and challenging the implementation of Children’s Services Service Improvement Plan, holding the Director of Social Services and Head of Service to account. Four meetings have been held since the Local elections in May. • The purpose of Laming visits has been reviewed and the questions asked during visits are and will be linked to relevant outcomes in the SIP. • Laming visits for Members have been scheduled until May 2018. A recent Laming visit was undertaken to the Child Placement Team on 27.10.17 by the Assistant Chief Executive, Scrutiny Chair and an elected member of the Panel. • The Leader of the Council, is also the Portfolio Holder for Children’s Services and she is very supportive and closely involved with the monitoring of the Service Improvement Plan through monthly meetings with the Head of Service to discuss progress and developments. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • A schedule of monthly Laming visits between July 2017 and May 2018 has been presented and agreed by the Children Services Improvement Panel on 21/08/17. Laming visits have commenced. • Initial discussion held with Andrew Bennett, Public Health Research, Training and Consultancy about the possibility of running a session available for all Members/Senior Leaders around Adverse Childhood Experiences. • The Second Members Panel was held on the 21st of August and a tracking document has been produced for the work of the panel. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • The new Council Leader/Director of Social Services the Interim Head of Children’s Services and Interim Scrutiny Manager have reviewed the role of the SS&WB Member panel in the creation of the ToR for the Children’s Panel • Elected members and Senior Leaders to continue with regular Laming visits. • Children’s Improvement Group held on a monthly basis chaired by the Director of Social Services to drive improvement and changes required. 		<p>Professional partners and communities report that the Council are effectively discharging their responsibilities in line with SS&WB Act.</p> <p>Commenced Senior leaders and elected members report that the Service Improvement Plan is delivered on time and to the required quality.</p>			n Festival

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

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

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<p>2.1</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 40</p>	<p>Improvement in the quality of practice.</p> <p>Areas of focus:</p> <ol style="list-style-type: none"> Child protection, child protection and LAC social work visits Risk Model – improve analysis of risk Assessment - What matters, 5 areas of assessment. Outcomes focused plans Complete Care and Support plans under the SS&WB Act Establish and maintain high quality relationships with children, young people and their families. Record keeping Collaborative Communications’ course on strengths based conversations. <p>Recommendation 10: The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.</p>	<p>February – March 2018</p> <p>The Q3 analysis of practice quality was completed. Previous reports showed that the process of monthly casefile audits was taking root within the service, with sufficient returns upon which to draw out thematic conclusions. In Q3, the level of returns was not sufficient to form a firm base for analysis. The nature of the other evaluations was mainly case specific and included two management reviews which included some earlier periods of practice. As a result, drawing service wide matters from audit was limited for this quarter. This was partly mitigated by the:</p> <ul style="list-style-type: none"> Thematic analysis of practice by the independent safeguarding officers Quarterly overview and oversight feedback by the independent safeguarding officers Analysis of the Q3 complaints and compliments <p>The findings showed that the</p> <ul style="list-style-type: none"> Quality of assessments was Inconsistent. Quality of care and support plans including the pace for completing assessments and implementing work accelerated and sustained was poor. Supervision supporting improved practice and improved decision making and management overview was inconsistent. Quality and consistency of record keeping 	<p>The service needs to focus on</p> <ul style="list-style-type: none"> Working to achieve Manageable Caseloads– Practice Leads must work with their practitioners to step down cases whether this is possible Focus on improving assessments – small group learning sessions on developing assessment practice: and how to use the eligibility tool. Improved preparation for Statutory Reviews and Review Case Conferences Corrective action in terms of Placement with Parents’ cases Lac Care Plans or LAC Care and Support Plans must be put in place on relevant cases within the next month Practice Leads and Manager must make sure that their management oversight is recorded Acute focus on Permanency Planning for Looked after children to reduce the numbers of children being looked after – Complete the cases that require revocation: and identify all cases where an SGO might be appropriate and focus on progressing those cases. 	<p>Yet to be done</p> <p>Review the thresholds for a child becoming looked after as a consequence of evaluations that thresholds for CP registration and Part 4 meetings have been identified as poor practice</p> <p>Evidence in ‘prevention’ and ‘supporting’ with more children remaining at home.</p> <p>Regular audits are happening however they are not able to report consistent improvements in the quality of practice, assessing risk and record keeping.</p> <p>Regular audits are happening however they are not able to report consistent improvement in the quality and consistency of record keeping and they are up to date and are systematically stored.</p> <p>Increase in positive feedback from service users on the progress they have achieved with the support of Children’s Services. There were less complaints in Q3. However this needs to be tracked on a longer basis.</p> <p>Commenced</p> <p>Action plan being progressed with a pace in terms of improving the child protection conference process</p>	<p>Senior Management Team</p> <p>Training</p>	<p>Jan 2017</p>	<p>March 2018</p>

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Page 41		<p>was inconsistent, but with evidence of improvement.</p> <ul style="list-style-type: none"> Quality, consistency and timeliness of child protection enquiries and improvement in the level of understanding and application of thresholds for referrals, assessments and child protection was inconsistent. <p>A thematic audit on Placement with Parents showed that the cases were not meeting the statutory requirements.</p> <p>Following an earlier audit which identified that not all cases had child protection plans – a return audit showed that these were now in place with only a couple of individual cases remaining. The same work was carried out for LAC children – however limited progress has been made in ensuring that each LAC child has an up to date plan</p> <p>Positively the analysis of the December casefile audit (which was only completed in February) showed some very good work, both in a number of the cases (6 rated ‘good’) and also in the work of the auditors, many of whom have provided helpful and insightful comments. The audit focused on practice since October 2017. The audit found good practice in the following areas</p> <ul style="list-style-type: none"> Case recording was mostly up to date. Management decisions in response to referrals were being made within 24-hours, were clear, and were being responded to appropriately. Where strategy discussions were needed, it appeared that these were also being held in a timely way and were resulting in clear decision making which was succinctly recorded. This appears to be true of management decisions in general throughout this audit. Many of the cases audited this month were at quite an early stage, but auditors generally praised the standard of assessment and analysis, including clear decision making in one case regarding case closure. In the vast majority of relevant cases (8 out of 11), statutory responsibilities were being met – such as holding strategy discussions, completing assessments and S47 investigations within timescales. 	<ul style="list-style-type: none"> Continue to develop the new skills and knowledge to deliver a new way of working Review the Case Conference Process – to focus on review of practical arrangements, reporting, child protection plans and role of core group. Genograms and especially chronologies still remain an area for improvement, particularly as a tool to help assessment, or if there have been a number of previous referrals. Attention to detail in basic information records on WCCIS – especially school, GP and parental information / PR. Management supervision. Although management oversight of cases appeared to be generally good, and decision making was clear, there was little evidence of recent formal, reflective supervision in this sample of cases. Purposeful case recording which provides a clear overview of the case and an understanding of why certain actions were taken. Understanding the significance of unexplained bruising in immobile babies Further embedding of the Gwynedd/Thornton Risk Model <ul style="list-style-type: none"> The Q1 2017/18 practice quality report – The Service must concentrate and ensure compliance with the basic requirements to improve performance data. The priority for the next reporting period is to improve assessing practice. Training is provided by Bruce Thornton on using the Risk Model in assessments. We will work with staff to define standards for assessments. Reflective Practice in Social Work <ol style="list-style-type: none"> Child protection 	<p>Completed</p> <p>Regional templates for ‘assessment’ / ‘care and support planning’ which clearly records needs, risks, strengths, outcomes, accountabilities for actions and their associated timescales are available for use within the service</p>			

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Page 42		<ul style="list-style-type: none"> In 7 out of 10 relevant cases the work done around case transfer and case closure was judged to be 'good'; there was generally evidence on file that case closure was being discussed with children, parents and partner agencies and that their views were being sought, and there were some good summaries of reasons for closure on file. <p>Motivational Interviewing and Brief Solution Focused Therapy training delivered in Q4. It is too early to see how this has impacted on practice.</p> <ul style="list-style-type: none"> There is a clear expectation that care and support assessment need to be current with an analysis in relation to risk of significant harm. Social Work staff have been provided with clear guidance that there needs to be care plans in place for all children on CP register, Looked After and care leavers and that social work visits should be undertaken in accordance with statutory timescales. There has been a continued reduction in children on CP register where multi agency Conference has assessed that the risk of significant harm has reduced sufficiently. At the end of March 2018 there were 46 children on the register compared with 48 at the end of December 2017. The number of looked after children has remained stable during this period with 144 looked after in March 2018 compared with 139 in December 2017. <p>November – January 2018</p> <ul style="list-style-type: none"> The Q3 analysis of practice quality has not yet been completed. A number of practice evaluations were held during the period – and the learning has been disseminated to the practice leads/managers. A summary conclusion is that practice remains inconsistent in many areas: and some of the basic requirements are not being met e.g. child protection plans, Care and Support Plans. Audits have shown that there are improvements in the standard of recording; however it is to the staffs credit that this is being maintained despite difficulties in familiarising themselves with a new system. There are some examples of Practice Leads seeking to work in a different way – to embed new ways of working: but this is not consistently applied across the service. 	<ol style="list-style-type: none"> How to establish and maintain high quality relationships with children, young people and their families. Record keeping. Guidance to be developed on good practice around record keeping. Bruce Thornton commissioned to establish an operational model within the new system -WCCIS. Practice guidance to be developed around CP and LAC social work visits. 				

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Page 43		<p>However practice remains inconsistent: and that the service is yet to realise a number of its improvement objectives in terms of the quality of practice, assessment, analysis, risk management and care and support planning</p> <ul style="list-style-type: none"> • An Interim Manager has been appointed to help drive practice improvements via coaching/mentoring, development of processes and procedures and establishing practice standards. This work is ongoing. The coaching and mentoring by Bruce Thornton on the Gwynedd/Thornton Risk Model is continuing and an evaluation is underway. Anecdotal evidence is that this is helpful. • There has been less complaints to the service in Q3 compared to Q2, - 12 down to 3, and the positive comments increased from 24 to 31. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Collaborative Communications course held on the 28th and 29th of September and the shift to working under the SSWBA is still ongoing. • The summary of quarter 2 performance does evidence a range of evaluation sources – management reviews, complaints, thematic audits, regular casefile audits. Main findings is that the practice remains inconsistent: and that the service is yet to realise a number of its improvement objectives in terms of the quality of practice, assessment, analysis, risk management and care and support planning. There are signs of some improvement in initial decision making and recording. • Targeted interventions continue to be undertaken with individual Social Workers who have not improved the quality of their practice • A Court Action Plan has been developed to focus on improving the quality and analysis of all assessments undertaken to inform our decision making and will support arrangements for ‘front loading’ public law cases. Practice Leader’s now have oversight of the Court timeframe for cases within their Practice Groups and will support and guide Social Worker’s to ensure better preparation for Court and that documents are filed on time. • Children’s Services have adopted the Thornton/Gwynedd Risk Model to continue 					

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Page 44		<p>supporting social workers to work proactively with families to manage risk - spending much more time working alongside them helping them to change so that the family is a safe place for their children.</p> <ul style="list-style-type: none"> • Bruce Thornton co-author of the model is undertaking a Practice Coach/Mentoring Development role for a period of 7 months to focus on: <ul style="list-style-type: none"> • Providing coaching and mentoring to help develop the skills, knowledge and competence of practitioners and practice leaders. • Support Service Managers to implement, process, systems and procedures to ensure that the Risk Model is implemented within service processes • Support the development of the Risk Model within critical and reflective supervision. • Despite the inconsistency in practice, we have positive evidence of the workforce working directly with families leading to improved outcomes. We have seen a significant reduction in the children on the Child Protection Register from 102 in March 2017 to 56 on the register on 31st of August, 2017 a 55% decrease. • The number of Looked After Children has remained consistent during the last 8 months because we are trying to support children to remain living at home when it is safe to do so. • Ongoing discussions regarding the requirements for Performance Monitoring Reports from the new Social Care System – WCCIS which was rolled out in August. We were only able to report on 4 out of the 6 corporate scorecard indicators due to further work being required to establish an accurate picture to current performance. This work has been ongoing and the Service has an action plan in place to improve the position and provide accurate and up to date data for consideration. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • Audits – both case file and thematic – on a service and multi-agency basis - held during the month. Caseloads for frontline team remain higher than the service management team would wish for, evidence from audits suggests that practice remains inconsistent. 					

CIW recommendations in red - high priority

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Page 45		<ul style="list-style-type: none"> • Draft Framework for Improving Quality of Practice developed for consultation • SMT considering findings of the Q1 quality report – recommend prioritising improvements in assessment practice • Challenged and supported individual workers to improve their practice • Practice evaluation Report Q1 2017/18 doc Case file auditing completed on the following practice areas: LAC step down audit, Report for placement panel, planned monthly case file audits by Team Managers, Responsive auditing (Stage 2 complaints) and Initial decision making, screening, strategy discussions and meetings and simple assessment. Service User views and evaluation of previously conducted management reviews. This report shows that practice remains inconsistent however; there are examples of good practice that have been confirmed by CIW as achieving the required outcome for the child/ren and their families. • CIW tracked two cases – ‘Case files were read, social workers, managers and families interviewed. The cases provided evidence of good outcomes for families. A good range of services were effectively used. The social workers interviewed were very motivated and committed to providing a high quality service. They achieved a very high level of engagement with the families. The families were motivated and supported to address and change deeply engrained patterns of behaviour related to substance misuse and domestic violence. Social workers were well supported although not always through formal supervision.’ Case 2 provided evidence of : ‘Good use of systems and services. A good range of services - LAC, Domestic Violence, FGC in planning, specialist service therapeutic assessment. Children’s and family’s needs have been met. Social worker was skilled able to maintain her relationship with mother and children and do direct work with children. From the discussions and file she had made a significant contribution in moving the mother’s expectations, thanking and behaviour.’ • A repeat audit was undertaken in May/June 2017 on the referrals that proceeded to Strategy and 					

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Page 46		<p>Conference: Quality of Strategy Discussions/Meetings Quality of Assessment. Key Themes are as follows:</p> <ul style="list-style-type: none"> • Attendance and recording at Strategy Meetings has improved • Increased use of Risk 2 tool • Strategy meetings timely • Increased use of Chronologies evident • Improved quality of assessments evident. • Consistency of forms still a problem (S.W.report /Core/Risk2/ Care and Support Assessment and Eligibility tool all in use). • Conceptual shift from filtering risk to identifying strengths not fully embedded • Teulu Môn practice guidance being developed by the Early Intervention Service Manager • Bruce Thornton has been commissioned to produce Guidance on Record Keeping and Decision Making • The quality of practice continues to be inconsistent. • Draft Multi Agency practice guidance have been completed to be ratified at the next Local Delivery Safeguarding Group in October, areas covered are <ul style="list-style-type: none"> • Multi Agency Child Protection Practice Guidance Investigation Thresholds • Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups • Multi Agency Child Protection Practice Guidance- Registration Thresholds. • Part 4 AWCP2008 • Making Referrals • A draft document has been produced setting out the way of working for the service (Collaborative communication, co- production and assessment of risk). In preparing this document the service has considered the need to improve practice in relation to forming good quality assessments and respond to the requirements within the Social Services and Wellbeing Act (Wales) 2014 to work collaboratively with children and families. This document sets out the service’s vision in how we will assess risk, co-produce and conduct collaborative communication with children and families in Anglesey. <p>June/July 2017</p>					

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Page 47		<ul style="list-style-type: none"> • Audits started for Quarter 1: Case file audits, multi-agency audits, thematic audits, analysis available end of July. • Challenged and supported individual workers to improve their practice • The quality of practice continues to be inconsistent. • Staff session held for Social Workers to discuss practice standards and ask staff for ideas on what would help to improve the way of working <p>May 2017</p> <ul style="list-style-type: none"> • Training Unit have arranged training for all social care staff on: <ul style="list-style-type: none"> • Assessing Carers in the Long-term • Implementing the Induction Framework for Foster Carers • Changing Culture and Measuring Performance in line with Social Services and Well-being Act • Collaborative Communication / Outcome focused conversations • Regional Templates – Including Assessment, What matters, 5 areas of assessment, Care and Support plans which are Outcome focused • Making the Most of Supervision – for Managers • Providing Constructive Feedback and Managing difficult conversations • Making the Most of Supervision – for staff • IFSS Resilient Families training (including Brief Solution Focused Therapy and Motivational Interviewing) • Collaborative Communication - follow-up • General Safeguarding for Social Workers • Risk Model • Child Sexual Exploitation and Return Home Interviews • Motivational Interviewing 					
2.2	<p>CIW recommendation 3: Senior leaders in social services and the police will work together to ensure improvements to the:</p> <ol style="list-style-type: none"> 1. quality, 2. consistency and 3. timeliness <p>of child protection enquiries.</p>	<p>February – March 2018 See 2.1</p> <ul style="list-style-type: none"> • The Multi agency guidance were not approved by the Gwynedd and Mon LDG and therefore can only be used as an IOACC document. They have been translated and they will be launched during q1 2018/19. The guidance in terms of thresholds for investigation has been sent to the North wales Children Safeguarding Board Policy and Procedures Group. There has been no formal adoption to date. 	<p>Audits would show that we need to improve our arrangements for:</p> <ul style="list-style-type: none"> - Recording of Strategy Meetings/Discussions - Ensure that all relevant agencies are part of the Strategy Meetings/Discussions - Ensure improved oversight of s47 investigations 	<p>Yet to be done Regular audits are happening however they are not able to report consistent improvement in the quality, consistency and timeliness of child protection enquiries leading to improved outcomes for children and young people.</p> <p>Staff report clearer guidance and improved understanding of roles and responsibilities through the implementation of the Practice Guidance.</p>	Service Mangers	Jan 2017	Ongoing

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Page 48	<p>Practice Guidance to be developed between Police and Children services around child protection referrals, strategy discussion/meetings and enquiries.</p>	<ul style="list-style-type: none"> • We have worked with a subgroup of the NWSCB to develop a regional approach to JIT training. • The North Wales Policy and Protocol Sub Group will be discussing the joint protocol between the Police and Children Services at the end of April to decide if it will be approved across the region. • Training arrangements will now be arranged on a multi agency basis. • Both Service Managers for Early and Intensive Intervention have established a positive working relationship with the Police which allows open and frank discussions to be held to resolve any operational matters. <p><u>November – January 2018</u></p> <ul style="list-style-type: none"> • Following analysis of CID 16 referrals work is ongoing between the Police and Children’s Services. • Discussion around piloting arrangements in relation range of measures to improve the flow and quality of information shared between both agencies. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Regular audits show that there is conflicting evidence in terms of the improvement in the quality, consistency and timeliness of child protection enquiries. A distance travelled audit concluded that attendance and recording at Strategy Meetings had improved and that the strategy meetings were timely. However the Case File Audit (July) and a management review concludes that in several cases auditors expressed concern about strategy discussions or meetings: <ul style="list-style-type: none"> • Not always being held in a timely manner – e.g. one was not till 3 weeks after decision made to hold one • Minutes of discussions are insufficient – i.e. to brief • References are made for need for follow up strategy meetings and then there is no evidence that they have been held. • This is reflected in the Thematic Audit Part 4, and a review of Children subject to Child Protection Plans 	<ul style="list-style-type: none"> - Ensure improved understanding of what a s47 investigation entails - Provide training and a revised report template which incorporates the Gwynedd/Thornton Risk Model 				

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Page 49		<p>–decision making, delays, and lack of clear plans and follow through being issues identified.</p> <ul style="list-style-type: none"> • High level discussions have been held between North Wales Police and Children’s Service around piloting a Multi-Agency Information Advice and Assistant hub. This will progress further in November. • The Police are making progress with their analysis of CID 16’s, and is suggesting that the next step will be for both teams to meet to compare their conclusions. • Draft Multi Agency practice guidance have been completed including: <ul style="list-style-type: none"> • Multi Agency Child Protection Practice Guidance Investigation Thresholds • Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups • Multi Agency Child Protection Practice Guidance- Registration Thresholds. • Part 4 AWCPP2008 • Making Referrals • The Multi Agency guidance will be ratified by the Corporate Safeguarding Board in December, and will be used by Housing, Education and Partner Agencies in relation to the Safeguarding process. The guidance will also be discussed in the Regional Policies and Procedures Sub Group for them to be used regionally. A training plan will be developed to ensure arrangements are in place for staff to use the Practice Guidance. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • We have met the IAA hub equivalent in both Conwy and Flintshire County Councils in order to explore options and share their experiences. The visit with both Conwy and Flintshire has assisted us in forming clearer mission for our own IAA. • Developed scope of work with the police on joint audit and improvement in terms of referrals, Strategy meetings and s47 investigations. • An audit was carried out on all 81 referrals which were received by Children’s Services from the Public Protection Unit in the form of CID 16’s between 1st and 14th of June 2017. 20 of the referrals were deemed to be not clear in the reason for sharing the information. Of the 81 only seven stated what the anticipated outcome for the referral would be. Only 					

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Page 50		<p>15 referrals contained the voice of the child.</p> <p>The Public Protection Unit must ensure that they are more specific in why they are referring the information and must not refer simply because there are children linked to the adults involved.</p> <ul style="list-style-type: none"> • CSE and Return Home Interviews for looked after children, work is being done to improve performance in these areas taking place with partners - Police and the 6 North Wales Local Authorities. • A repeat audit was undertaken in May/June 2017 on the referrals that proceeded to Strategy and Conference: Quality of Strategy and Discussions/Meetings Quality of Assessment. See 2.1 <p>June/July 2017</p> <ul style="list-style-type: none"> • Protocols currently drafted for: <ul style="list-style-type: none"> • Multi Agency Child Protection Practice Guidance Investigation Thresholds • Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups • Multi Agency Child Protection Practice Guidance- Registration Thresholds. <p>Set of protocols likely to be ready for October.</p> <ul style="list-style-type: none"> • 2 week analysis started 10/07/17 in relation to all CID16's that are received at Teulu Môn in order to ensure that appropriate referrals are made to the Council and understand the data and to explore information sharing. A meeting was held on the 26th of June. • Monthly meetings arranged between Children Services and NWP to address operational matters and to develop a Practice Guidance around child protection referrals, strategy discussion/meetings and enquiries. • HOS is made aware of any on-going operational difficulties in relation to joint working with the Police to ensure they are urgently addressed and that children are not left in vulnerable positions. • Audit to be undertaken to monitor the quality, consistency and timeliness of child protection enquiries. 					

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		<p>May 2017</p> <ul style="list-style-type: none"> • Positive discussion held with the Police regarding cooperation. 					
<p>2.3</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 51</p>	<p>CIW recommendation 9: Multi-agency arrangements should be established to strengthen operational plans to support effective co-ordination of statutory partners' completion of Joint Assessment Frameworks. – Service no longer using JAF</p> <p>Practice Guidance to be developed between Children Services, Health, Police and Education to ensure clarity in relation to operational arrangements – agreed referral threshold, improvement in the quality of referrals, attendance at strategy meetings, core group meetings and information sharing.</p>	<p>February-March 2018</p> <ul style="list-style-type: none"> • Multi agency meetings continue to be held between Children Services, Police, Education, Health and CAMHS to agree on operational matters. Action Plan to improve Child Protection Conference arrangements were discussed in March and agreement was made on how this will be progressed. <p>November – January 2018</p> <ul style="list-style-type: none"> • We have received permission from Welsh Government to amalgamate the current Joint Assessment Framework (JAF) to the care and support assessment form. Work on including the measures that the JAF collects has commenced. The Care and Support Assessment and Plan will be used instead of the JAF. • Multi Agency operational meetings with Police, Health Board, CAMHS, Paediatrician and Education are taking place monthly to discuss joint working arrangements to improve and strengthen current arrangements e.g. the quality of referrals received by Children and Families Services. <p>September & October 2017</p> <ul style="list-style-type: none"> • Work progressed on improving the quality and our understanding of the care and support assessments (Part 1,2,3) this includes the core data set, the what matters conversation and care and support assessment. • We have been working to improve our understanding of the national eligibility criteria and gain consistency in recording the eligibility criteria in our assessments. We have identified suitable methods of communication, prompts and tools to improve the quality of the what matters conversation, decision making process and recording. <p>August 2017</p> <ul style="list-style-type: none"> • Practice guidance completed see 2.2 • Meetings held with CAMHS and CAF/CASS 		<p>Commenced Improved multi agency safeguarding arrangements leading to improved outcomes and experiences for children and young people.</p> <p>Completed A multi-agency Practice Guidance clearly defines local roles and responsibilities and safeguarding arrangements.</p>	<p>Early Intervention Service Manager</p>	<p>Jan 2017</p>	<p>Ongoing multi agency arrangements</p>

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

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

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

CIW recommendations in red - high priority

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

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

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

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

CIW recommendations in red - high priority

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

CIW recommendations in red - high priority

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

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CIW recommendations in red - high priority

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	<ul style="list-style-type: none"> Assessment Quarterly Assurance reports to be discussed at Children Services Management meeting and a Practice Improvement Group to be established to take forward practice improvements. Managers to provide monthly highlight reports to Service Managers and HoS on the quality of workers' performance to ensure there is sufficient capacity for them to engage effectively with children and their families. 						
<p>3.3</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 59</p>	<p>Develop the performance framework for Children and Adult Services to include:</p> <ol style="list-style-type: none"> Outline Performance indicators split into National, Corporate and Service performance. Governance arrangements to include reporting, accountability and mechanism in driving improvement. Continues improvement embedded within the framework. Framework to provide evidence on the quality of practice and experiences of service users Improvement required in priority areas of performance that is outside tolerance and targets: <ul style="list-style-type: none"> Assessment Lac Reviews LAC visits CP visits Core group meetings Pathway Plans These will be brought back into target 	<p>February-March 2018</p> <ul style="list-style-type: none"> Service Manager and Practice Leader from Intensive Intervention Service meet on a monthly basis with Performance data officer to ensure correct data in relation to CP and LAC visits and Core Group. Regular Practice Group meetings and monthly Service Meetings continue to be held with staff to advise them of the need to ensure all open cases have a: <ul style="list-style-type: none"> Care and Support plan, CP Plan, LAC Care Plan, Pathway Plan and current assessments <p>November – January 2018</p> <ul style="list-style-type: none"> Action plan continues to be in place as an interim measure to capture information and report on PI's. We are still writing the scripts to access reports from WCCIS – this is a problem for most of the local authorities that have gone live on the new system, and we're working with Ceredigion Council in particular to enable us to do this. There appears to be a national issue in relation to the consistency of interpretation and reporting for all Local Authorities against the new Performance Indicator's introduced by the Social Services and Well Being Act (Wales) 2014. A letter dated 25th of October was received from Glyn Jones, Chief Statistician, Welsh Government. This letter highlighted the temporary suspension of National Statistics designation for Social Service publications due to concerns about the quality of the data being reported following the introduction of the new Welsh Community Care Information System (WCCIS). 	<ul style="list-style-type: none"> External Project Manager will commence work with the Service to scope what is required from the System and look at the long term goals in terms of best use of technology for example. A Project Board will be set up. 	<p>Yet to be done</p> <p>Overall, a continuous improvement in performance and outcomes for children/young people.</p> <p>Improvement in staff's level of understanding of performance indicators and the clear link with the quality and timeliness of practice. This leading to a continuous improvement in performance and outcomes for children/young people – one indicator being a reduction in looked after children.</p> <p>Commenced</p> <p>Strengthening the reporting and monitoring arrangements in relation to Performance information.</p> <p>Performance information showing an improvement in performance and brought back into target:</p> <ul style="list-style-type: none"> Assessment Lac Reviews LAC visits CP visits Core group meetings Pathway Plans 	<p>Interim Head of Children Services</p>	<p>March 2017</p>	<p>Oct 2017</p> <p>Because of the Performance Indicators and issues with reporting from WCCIS</p>

CIW recommendations in red - high priority

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

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CIW recommendations in red - high priority

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

CIW recommendations in red - high priority

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

CIW recommendations in red - high priority

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

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CIW recommendations in red - high priority

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	<p>May 2017 Agreement provided by partners to develop and support/prioritise:</p> <ul style="list-style-type: none"> • Multi agency quality assurance systems • Training for Children Services staff and partners on thresholds for assessment and partners roles and responsibilities. • Development of a multi-agency child protection threshold • Practice Guidance to be developed between Children Services, Health, Police and Education to cover all the areas were development work is required. 						
<p>3.5</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 64</p>	<p>CIW Recommendation 11: The quality and consistency of record keeping should be improved; all staff and managers should ensure that their records are of good quality, are up to date and are systematically stored.</p> <p>Training to be provided to staff on expected standards of record keeping.</p> <p>Record keeping Practice guidance to be developed to ensure consistency and quality.</p>	<p>November – January 2018</p> <ul style="list-style-type: none"> • This work has been redefined into a project to look at development of WCCIS • Record Keeping Standards will be agreed as part of the work of agreeing practice standards. A draft is available in terms of recording. Has been submitted for agenda at SMT <p>September & October 2017</p> <ul style="list-style-type: none"> • This work has been developed into creating a Operational model within WCCIS (MP Project lead). We do have some useful products – glossary of terms, jargon free session, draft standards which could be developed • Recording performance from Q2- The overall evaluation shows that recording practice remains inconsistent although there is evidence of improvements in some audits. <p>August 2017</p> <ul style="list-style-type: none"> • As part of the registration as Social Workers; staff have the responsibility to ensure good quality timely recording. • Regular case file audit to be undertaken to monitor the quality and timeliness of record keeping on individual cases. <p>June/July 2017</p> <ul style="list-style-type: none"> • Record keeping continues to be inconsistent • Repeat audit of case files in progress to establish if there is improvement in the quality of recording. 	<ul style="list-style-type: none"> • Training to be provided for staff around best practice in record keeping and the Practice Guidance. 	<p>Commenced Case file audits by Managers shows an improvement in the quality and consistency of record keeping.</p> <p>Support and guidance is being provided to staff through regular and quality supervision on how to improve the quality of record keeping.</p>	<p>Safeguarding Quality Assurance Manager and Service Managers</p>	<p>January 2017</p>	<p>September 2017 Need consistency of where staff are recording</p>

CIW recommendations in red - high priority

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

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

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CIW recommendations in red - high priority

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 66</p>	<p>4.2 Review the current service structure to address the need for improved preventative and intensive interventions.</p> <p>Establishing smaller Teams with Practice Leaders to provide effective support and supervision to staff.</p>	<p><u>November – January 2018</u></p> <ul style="list-style-type: none"> The new structure is in place with Practice Leaders located with their Practice Groups. Early indication is that this is working well, staff report that they feel supported in the smaller groups. Continued development of the support and embedding of this structure will continue. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> The new Service structure was implemented on the 4th of October were the 8 new Practice Leader’s took responsibility for their Practice Groups. There is further work to be undertaken to complete the restructure, including reviewing the arrangements for the Child Placement Team, making the best use of Support Workers to support families, as well as ensuring that administrative support is appropriate for Practice Groups to effectively carry out their statutory responsibilities. <p><u>August 2017</u></p> <ul style="list-style-type: none"> Two Senior Managers (Early Intervention and Intensive Intervention) in post <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> New service structure implemented. We continue to appoint to posts to establish smaller teams with practice leads. We have continued to review our prevention and early intervention services around the Families First programme. <p><u>May 2017</u></p> <ul style="list-style-type: none"> Staff consultation period comes to an end on 24.2.17. Analysis of comments and feedback and report provided by IHOS with recommendations. Final decision and timescales to be agreed and shared in staff Conference on 27.3.17. 	<ul style="list-style-type: none"> Review of Placement Team will commence in February in consultation with staff. 	<p>Yet to be done</p> <p>The new service structure will support and significantly strengthen the delivery of preventative services and intensive interventions an example being a reduction in children becoming looked after.</p> <p>Manager’s report that the new service structure increases their capacity to provide professional leadership to support the workforce through regular and quality supervision.</p> <p>Staff report they are adequately supported and supervised by their Managers in carrying out their responsibilities.</p> <p>Case file audit shows a marked improvement in practice quality as result of clear pathways and systems within the Service and through regular supervision.</p>	<p>Senior Management Team</p>	<p>Jan 2017</p>	<p>May 2017</p>
<p>4.3</p>	<p>Implementation of an Information, Advice and Assistance (IAA) model for Anglesey</p>	<p><u>November – January 2018</u></p> <ul style="list-style-type: none"> A Full Time Engagement Officer commenced with Teulu Môn in January, which has strengthened its capacity to 3.5 workers FTE in that team. Teulu Môn were visited on 29.01.18 by Jackie Drysdale of Social Care Wales in order to observe the team and consider he need for a Wales wide competency framework. Jackie was impressed by what she saw on commented that “the team was committed”; “showed great resilience against some of the frustrations”. Work will continue to develop that team in terms of skills and IT support. 		<p>Yet to be done</p> <p>Service users report ‘ease of access to services’ and good customer care.</p> <p>Improved coordination of services and strategies for early intervention and prevention is shown in a reduction in children being looked after.</p> <p>There is a reduction in duplication of effort through the current running of multiple ‘front doors’</p>	<p>Service Manager</p>	<p>Dec 2016</p>	<p>April 2017</p>

CIW recommendations in red - high priority

September & October 2017

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

August 2017

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

June/July 2017

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

CIW recommendations in red - high priority

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

CIW recommendations in red - high priority

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

Page

June/July 2017

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

May 2017

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

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

	ACTION TO BE TAKEN AND LINKS TO CIW RECOMMENDATIONS	ACTIONS TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT & EVIDENCE	LEAD OFFICER	START	END
5.1	Review Children Support Services to focus on: <ol style="list-style-type: none"> 1. Supervised contact 2. Freeing up capacity to undertake preventative work 3. Role of Parenting Officer 	<p>February-March 2018</p> <ul style="list-style-type: none"> • We are currently reviewing the: Children Support Services Placements Team and Children Specialist Service • Staff will be consulted on the proposals being put forward and they will be provided with advice from HR on any changes that could have an impact on their current roles and responsibilities. <p>November – January 2018</p> <ul style="list-style-type: none"> • Due to competing demands on Senior managers this review has been put back, however, it is envisaged that this review will be completed by end of March 2018. <p>September & October 2017</p> <ul style="list-style-type: none"> • Reviewing Support Services has commenced making the best use of Support Workers to support families. 	We will be reviewing Children Support Services in Feb 2018 to focus on: <ul style="list-style-type: none"> • Supervised contact • Freeing up capacity to undertake preventative work • Role of Parenting Officer • Work will start on this 	<p>Yet to be done</p> <p>The service is making better use of its resources and focusing on supporting children to remain living within their families.</p> <p>Provide 1:1 or/and Group parenting support to parents to strengthen the standard of care their children receive.</p> <p>More children being supported to live at home.</p> <p>Reduction in the number of children becoming looked after.</p>	Intensive Intervention Service Manager	Jan 2017	March 2018

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CIW recommendations in red - high priority

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

CIW recommendations in red - high priority

Page 72		<p>parents' room. Progress was so dramatic it was decided the family did not require ongoing 'Stage 2' support as the ongoing support from the Specialist Children's Service was sufficient to sustain the changes.</p> <p>Family Story 2: 3 children who live with their mother. The parents separated; both parents had properties in which their hoarding behaviours made the households unsafe. The children had been exposed to domestic abuse when their parents had lived together. This affected the children's behaviours; one child became an emotional carer for the mother, another child became withdrawn, and another became aggressive and emotionally dysregulated for hours at a time. The children were placed on the Child Protection Register, and legal proceedings through Court began, with the plan being that the children be placed in foster care. The Resilient Families Team worked with the family (mum and dad separately) during an intensive 8 week period (Stage 1). The hoarding in the children's home no longer occurs. Mum says she feels more confident in helping the children understand and manage their emotions; resulting in less times of parent-child conflict and of the children feeling distressed. The children say they feel happier and enjoyed the help received. Whilst dad was not able to make those same changes to his hoarding behaviours (meaning the children cannot currently stay with him overnight), he does now manage to maintain regular positive unsupervised contact with his children through the ongoing support and prompts of the Resilient Families Team. The family now receive Stage 2 support (ongoing for up to a year) to help them consolidate and sustain the changes made.</p> <p>November – January 2018</p> <ul style="list-style-type: none"> The Resilient Families Team is now operational and are currently working with 9 individual children from 8 families. <p>The team are working with parents to support them in able to care for their children and avoid them potentially coming into care; but are also working with young people who are in care and a plan of intensive rehabilitation is in place for those young people. We are hoping to produce a report in May 2018 to highlight some of the work completed by this team.</p>				
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CIW recommendations in red - high priority

Page 73		<p><u>September & October 2017</u></p> <ul style="list-style-type: none"> The Resilient Families Team is now fully staffed and currently working with 8 families to prevent family breakdown and to support children living at home. Team has three core aims: <ul style="list-style-type: none"> Prevent - preventing children becoming Looked After Reduce - reduction in the nature of care accommodation provided from residential care to foster care Reunify - reunifying looked after children with their families. The Practice Leader for this Team has recently won a national award by the British Association of Social Worker's (BASW) on her work in developing support for care leavers and arrangements to support foster carers to prevent placement breakdown. <p><u>August 2017</u></p> <ul style="list-style-type: none"> Resilient Families Team appointed and all will be in post by the beginning of September. Additional grant funding of £96,000 by WG has been provided to further support the establishment of the resilient families' team. Further guidance sought from WG in relation to how this grant can be used. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> Recruitment to practice leader, Social Work and Support Worker posts have been advertised, interviews will be held by the end of July. As part of the restructuring of the service initial 'Resilient Families' work has started to reduce the need of supervised contact by support workers this does free up capacity to undertake more intense work with children and families to ensure the children are being supported to live at home. <p><u>May 2017</u></p> <ul style="list-style-type: none"> Work has commenced on identifying the children and young people where intensive work can be undertaken to enable them to return home safely. New Job Descriptions have been created, with recruitment to posts starting late March 2017. 				
5.3	<p>Improve the local authority's responsibility as a Corporate Parent for looked after children. Areas of focus:</p> <ul style="list-style-type: none"> Review the leaving care (after care) service Creation of a 'Supported Lodgings Policy' 	<p><u>February-March 2018</u></p> <ul style="list-style-type: none"> LAC strategy is currently being developed and will be available for consultation towards the end of April. <p><u>November – January 2018</u></p> <ul style="list-style-type: none"> One Corporate Parenting Panel meeting on the 11th of December has taken place since the agenda of the panel 	<ul style="list-style-type: none"> Decision needs to be made regarding additional WG grant funding around work experience and apprenticeships 	<p>Yet to be done</p> <p>Clear Pathway planning does not provide goals on the plan into adulthood for the young person.</p> <p>Care leavers reporting that they feel they were listened to and supported by the authority in their transition to leaving care.</p>	Intensive Intervention Service Manager	Jan 2017
						March 2018

CIW recommendations in red - high priority

<p>Page 74</p>	<ul style="list-style-type: none"> • Agreement of a 'Leaving Care Financial Policy' • Work experience and apprentice arrangements within the Council and Health Board • Free/Discounted entry to leisure services and library services • Appoint a Local Member as a Looked after Children Champion 	<p>has been re-structured. This gives panel members the time to scrutiny data provided and have a meaningful discussion in relation to corporate panel issues.</p> <ul style="list-style-type: none"> • The Children Looked After and Care Leaver Strategy continues to be work in progress and it is hoped a draft Strategy can be produced to go out to consultation during April 2018. <p><u>September & October 2017</u></p> <ul style="list-style-type: none"> • Corporate Parenting Panel in September approved the action plan to develop a "Children Looked After and Care Leavers Strategy" for a three year period 2018 - 2020. This strategy would provide the framework to ensure we fulfil our duties and responsibilities, as corporate parents of Children Looked After. • By March 2018 we aim to re-launch the Isle of Anglesey County Councils vision in relation to Corporate Parenting. • Recruiting for an additional Personal Adviser post for Looked after Children that is funded by the St David's Day fund and the Support for Care Leavers grant. This will strengthen our service to provide timely support for care leavers to help them achieve their ambitions and make a successful transition to adulthood and independent living. • Children's Services will be involved in a new initiative within the Council to offer paid work experience to young people to prepare them for work; up to a 12 week paid period with the Council. Looked after young people will be prioritized with an opportunity for them to attend a formal induction, attend relevant in house courses and work on a specific projects within the service. <p><u>August 2017</u></p> <ul style="list-style-type: none"> • Service Manager for Intensive Intervention has prepared a report for the corporate parenting panel with options on how to strengthen the role of the corporate parenting panel. • WG's St David's Day grant and the Support for Care Leavers grant received for £31,000. Work has progressed with HR colleagues to identify work placements opportunities within the Local Authority. Aftercare project group will drive this work forward. <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> • Corporate Parenting Panel met on 10/07/17, the membership, agenda and ToR to be reviewed and to be inclusive of young people. • Corporate Parenting Event for local members and senior officers planned for 20/07/17 		<p>Children who are looked after report they feel they have influence on how services are provided for them.</p> <p>Commenced Clear guidance in place for Children Services staff and key partners through policies, procedures and training in relation to improving outcomes for looked after children.</p>		
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CIW recommendations in red - high priority

		<ul style="list-style-type: none"> • Appointment of a local Member as a Looked After Children Champion. • Work ongoing in preparation for the STARS Awards Ceremony in November for looked after children to celebrate their successes. <p>May 2017</p> <ul style="list-style-type: none"> • Aftercare project group established with an agreed action plan. • Aftercare and housing protocol approved in February 2017 • Discussions with HR and Leisure have taken place regarding work experience and leisure services. • Early draft of the Aftercare financial policy. • Consideration in having a Corporate Parenting Event for local members and senior officers to agree on strengthening current arrangements. • Consultation group established with looked after children were they are able to provide their views on the development work required. 					
5.4 Page 75	Develop and implement the Role of Director of Social Services Protocol reflecting on the Social Services and Well-Being Act 2014 - Part 8 Role of the Director of Social Services.	<p>November – January 2018</p> <ul style="list-style-type: none"> • The protocol has been reviewed and a draft version will be presented to the Director of Social Services mid February. <p>September & October 2017</p> <ul style="list-style-type: none"> • Review of internal protocol in relation to the overarching role of Director hasn't progressed due to capacity issues. <p>June/July 2017</p> <ul style="list-style-type: none"> • Review of internal protocol in relation to the overarching role of Director hasn't progressed due to capacity issues. <p>May 2017</p> <ul style="list-style-type: none"> • Review of internal protocol in relation to the overarching role of Director. • Work will commence on strengthening the role of Director of Social Services following the May 2017 local elections. 		Yet to be done Strengthening the role of Director of Social Services within the Local Authority.	Director of Social Services Dafydd Bulman, Strategic Transformation and Business Manager	Oct 2017	Feb 2018

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ISLE OF ANGLESEY COUNTY COUNCIL	
REPORT TO:	EXECUTIVE COMMITTEE
DATE:	JUNE 18th 2018
SUBJECT:	SCORECARD MONITORING REPORT - QUARTER 4 (2017/18)
PORTFOLIO HOLDER(S):	COUNCILLOR DAFYDD RHYS THOMAS
HEAD OF SERVICE:	CARYS EDWARDS
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 final scorecard of the financial year 2017/18.
1.2	It portrays the position of the Council against its operational objectives as outlined and agreed collaboratively between the Senior Leadership Team / Executive and in consultation with the Shadow Executive.
1.3	The Committee is requested to scrutinise the scorecard and note the areas which the Senior Leadership Team are managing to secure improvements into the future. These can be summarised as follows –
1.4	Underperformance is recognised and managed with mitigation measures completed to aide improvement –
1.4.1	Children and Families Service to continue to prioritize the improvements noted with particular emphasis placed on improving the timely assessments undertaken within regulations (PM24 / SCC/025).
1.4.2	Adults Services will improve the issues during the forthcoming year by – <ul style="list-style-type: none"> • Awarding a new and revised Home Care Contract to providers by the end of Quarter 1 18/19 with the transfer of the contract expected to be completed during Quarter 2 18/19. As a result, improvements should be tracked as 2018/19 progresses. • Increasing the capacity of Garreglwyd to take individuals with severe dementia problems and to release individuals from hospitals in a timely manner.

1.4.3 The Learning Service will improve by:

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

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

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

1.5 The Committee is asked to 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? say?

What did they say?

1	Chief Executive / Strategic Leadership Team (SLT) (mandatory)	This was considered by the SLT at their meeting on the 29 th May 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	Having scrutinised the Quarter 4 Scorecard and having been assured by the information presented and the explanations provided both within the report and by officers at the meeting, the Committee resolved to note the areas which the Senior Leadership Team is managing in order to secure improvements into the future as summarised in paragraphs 1.4.1 to 1.4.5 of the report and to accept and to recommend the mitigation measured outlined in the report.
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 Quarter 4 Appendix B – Programmes and Projects Performance Dashboard – Quarter 4 Appendix C – Revenue Outturn for the Financial Year Ending 31 March 2018 – Quarter 4		
FF - Background papers (please contact the author of the Report for any further information):		
<ul style="list-style-type: none"> 2017/18 Scorecard monitoring report - Quarter 3 (as presented to, and accepted by, the Executive Committee in March 2018). 		

SCORECARD MONITORING REPORT – QUARTER 4 (2017/18)

1. INTRODUCTION

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

2. CONSIDERATIONS

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

2.2 PERFORMANCE MANAGEMENT

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

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

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

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

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

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

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

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

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

The detail is as follows -

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

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

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

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

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

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

- (iii) 09) – PM32 - The percentage (%) of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, which is RED with performance of 32.39% compared to a target of 15%. This is significantly higher than the 17.53% reported for 2016/17.

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

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

The 9% reported relates to 13 children.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

2.2.13.6 Embedded Cyswllt Môn as our front of house provision

2.3 PEOPLE MANAGEMENT

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

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

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

Sickness absence - average working days/shifts lost

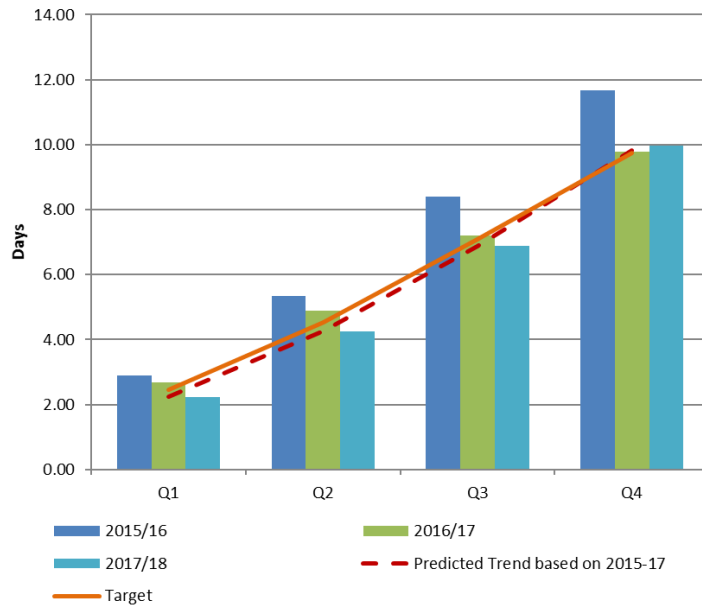


Table 1

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

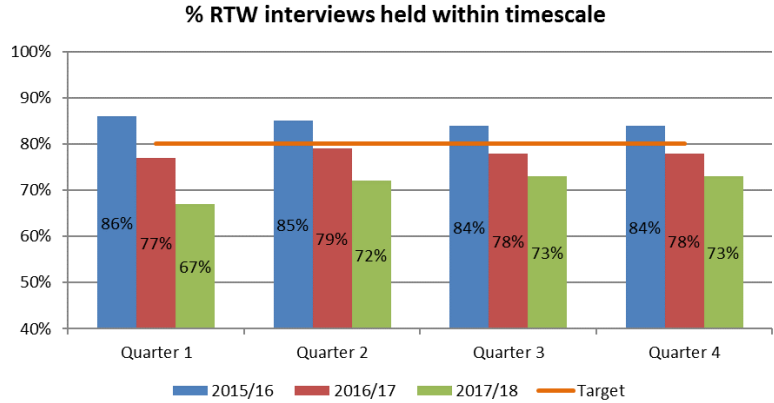


Table 4

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

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

2.3.8 The SLT therefore recommends –

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

2.4 CUSTOMER SERVICE

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

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

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

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

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

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

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

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

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

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

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

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

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

of the 157 received by the service), Transformation with 9% (26% of the 70 received by the service) and Resources with 8% (13% of the 129 received by the service). Our response to FOIs is important and the SLT and Heads of Service continue to monitor the performance of FOIs closely.

2.4.7 The SLT therefore recommends –

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

2.5 FINANCIAL MANAGEMENT

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

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

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

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

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

3. RECOMMENDATIONS

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

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

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

3.1.1.2 Adults Services will improve the issues during the forthcoming year by –

3.1.1.2.1 Awarding a new and revised Home Care Contract to providers by the end of Quarter 1 18/19 with the transfer of the contract expected to be completed during Quarter 2 18/19. As a result, improvements should be tracked as 2018/19 progresses.

3.1.1.2.2 Increasing the capacity of Garreglwyd to take individuals with severe dementia problems and to release individuals from hospitals in a timely manner.

3.1.1.3 The Learning Service will improve by:

3.1.1.3.1 monitoring underperforming schools performance in the School Progress Panel and the BAS (County Quality Board) fortnightly

3.1.1.3.2 Continue to work on reducing the gap between forecasts and actual performance

3.1.1.3.3 Continue to seek better consistency across the 5 secondary schools in sharing best practice, harmonizing and ensuring accurate assessments, and use of assessments to plan appropriate intervention / teaching.

3.1.1.3.4 Continue to provide support to teachers in order to improve Teacher Assessments in the Foundation Phase

3.1.1.3.5 Continue to improve target setting processes

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

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

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

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

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

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

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

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Tuedd B I F / Yr on Yr Trend	Chwarterel 17/18** Quartile
01) SCA/002b: The rate of older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March	Gwyrdd / Green	↑	17.44	22	20.51	↑	-
02) LI/18b The percentage of carers of adults who requested an assessment or review that had an assessment or review in their own right during the year	Gwyrdd / Green	↑	96	93	94.4	↑	-
03) PM18 - The percentage of adult protection enquiries completed within statutory timescales	Gwyrdd / Green	↑	93.25	90	90.48	↑	-
04) PM19 - The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	Coch / Red	↓	6.58	1.5	6.05	↓	-
05) PM20a - The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	Gwyrdd / Green	⇒	59.26	40	62.6	↓	-
06) PM20b - The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	Gwyrdd / Green	↓	62.65	62	33.3	↑	-
07) SCC/025: The % of statutory visits to looked after children due in the year that took place in accordance with regulations	Coch / Red	↑	63.32	85	79.35	↓	-
08) PM24 - The percentage of assessments completed for children within statutory timescales (42 working days)	Coch / Red	↓	67.57	90	89.17	↓	-
09) PM32 - The percentage of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March	Coch / Red	↓	32.39	15	17.53	↓	-
10) PM33 - The percentage of looked after children on 31 March who have had three or more placements during the year	Ambr / Amber	↓	9	5	5.04	↓	-
11) PM28 - The average length of time for all children who were on the CPR during the year, and who were de-registered during the year (days)	Coch / Red	⇒	326.5	250	266	↓	-
12) Attendance - Primary (%)	Melyn / Yellow	↓	94.6	94.8	94.8	n/a	-
13) Attendance - Secondary (%)	Ambr / Amber	↓	93.3	94.6	94.6	n/a	-
14) No. of days lost to temp exclusion - Primary	-	-	49	-	-	n/a	-
15) No. of days lost to temp exclusion - Secondary	-	-	73	-	-	n/a	-
16) KS4 - % 15 year olds achieving L2+ (Q3)	Coch / Red	↓	50.5	63.4*	58.8*	↓	Canolrif Isaf / Lower Median
17) KS3 - % pupils achieving CSI (Q3)	Melyn / Yellow	↑	88.9	90.1	87.6	↑	Canrif Uchaf / Upper Median
18) KS2 - % pupils achieving CSI (Q3)	Gwyrdd / Green	↑	91.4	91	89.4	↑	Uchaf / Upper
19) FPh - % pupils achieving CSI/FPI (Q3)	Ambr / Amber	↑	85.8	88.4	84.7	↑	Isaf / Lower
20) LCL/001b: The no. of visits to public libraries during the year	Gwyrdd / Green	↑	286k	285k	288k	↓	Uchaf / Upper
21) LCL/004: The no. of library materials issued, during the year	Gwyrdd / Green		259k	260k	272k	↓	-
22) The number of applicants with dependent children who the Council secured non-self contained bed and breakfast accommodation	Gwyrdd / Green	⇒	0	0	0	⇒	-
23) % tenants satisfied with responsive repairs	Melyn / Yellow	⇒	89%	92	90.2	↓	-
24) Productivity of workforce- % time which is classified as productive	Melyn / Yellow	↓	79%	80	80.1	↓	-
25) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Gwyrdd / Green	↓	22.4	23	28	↑	-
26) PAM/013 - Number of empty private properties brought back into use	Gwyrdd / Green	↑	75	70	-	n/a	-
27) PAM/014 - Number of new homes created as a result of bringing empty properties back into use	-	-	4	-	-	n/a	-
28) PAM/015 - Average number of calendar days taken to deliver a Disabled Facilities Grant (DFG)	Gwyrdd / Green	↑	177	200	238.8	↑	Uchaf / Upper
29) STS/005b: The percentage of highways inspected of a high or acceptable standard of cleanliness	-	-	-	94	93.4	-	-
30) STS/006: The percentage of reported fly tipping incidents cleared within 5 working days	Gwyrdd / Green	↓	98.29	100	97.31	↑	Uchaf / Upper
31) WMT/009b: The percentage of municipal waste collected by local authorities and prepared for reuse and/or recycled	Gwyrdd / Green	↓	72.21	67	65.79	↑	Uchaf / Upper
32) WMT/004b: The percentage of municipal waste sent to landfill	Gwyrdd / Green	⇒	0.5	5	6.6	↑	Uchaf / Upper
33) THS/011c: The % of non-principal (C) roads that are in an overall poor condition (annual)	Gwyrdd / Green	↑	8.9	10	10.1	↑	-
34) No. of attendances (young people) at sports development / outreach activity programmes	Gwyrdd / Green	↑	43.5k	30k	113k	↓	-
35) LCS/002b: The number of visits to local authority sport and leisure centres during the year where the visitor will be participating in physical activity	Gwyrdd / Green	↑	508k	474k	464k	↑	Canolrif Uchaf / Upper Median
36) PAM/023 - Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	⇒	98	80	98	⇒	Uchaf / Upper

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

Attachment B

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

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

The key ragging for the said document is as follows –

RAG:

Completed

Project has been completed

On Track

Project is developing as expected and is on track

Behind Schedule

The Project needs key decisions / support

Late

The project is late and is falling behind expected timelines

White

The Project has not started to date

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

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

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

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

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

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ISLE OF ANGLESEY COUNTY COUNCIL	
Report to:	The Executive
Date:	18.6.18
Subject:	Annual Delivery Document 18/19
Portfolio Holder(s):	Dafydd Rhys Thomas
Head of Service:	Carys Edwards
Report Author: Tel: E-mail:	Gethin Morgan 752111 GethinMorgan@anglesey.gov.uk
Local Members:	Not applicable

A –Recommendation/s and reason/s
<p>The Executive is asked to authorize Officers through the Portfolio Holder to undertake the task of completing the final draft and recommend for adoption the Annual Delivery Document for 18/19 by full Council at their meeting on the 16th of July, 2018.</p> <p>The Executive is also asked to confirm the deliverability of the said document as a plan which identifies the work of the Council aligned to the priorities of the Council’s Plan scheduled for delivery during 2017/18.</p> <p>For the purposes of clarity - the Annual Delivery Document is otherwise known as the Improvement Plan (outlined in the Constitution).</p>

B – What other options did you consider and why did you reject them and/or opt for this option?
<p>No other options were considered as it is part of the Policy Framework which identifies the need for such a document to be adopted by Full Council.</p>

C – Why is this a decision for the Executive?

This is a decision for the Executive as it outlines the main areas for improvement and delivering the council's priorities during 2018-19 which discharges our duty for continuous improvement under the Local Government Measure – Wales and the 'Wales Programme for Improvement'.(2009, 2011)

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)	Agreed in principle with operational direction for 18/19. Advised of need to consult further and edit for publication purpose.
2	Finance / Section 151 (mandatory)	No further comment
3	Legal / Monitoring Officer (mandatory)	No further comment
4	Human Resources (HR)	
5	Property	
6	Information Communication Technology (ICT)	
7	Scrutiny	
8	Local Members	Not applicable
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:
Annual Delivery Document 2018/19

FF - Background papers (please contact the author of the Report for any further information):
Council Plan 2017-22 as adopted by full Council in September 2017

DRAFT

ANGLESEY COUNTY COUNCIL

ANNUAL DELIVERY PLAN - 2018/19

DRAFT

V4 - 6.6.18

INTRODUCTION

I am privileged to present our annual delivery document which focuses on the work we are undertaking to accomplish the ambitious aspirations set in the County Council's Plan for 2017-22.

The Plan sets targets that we can work towards and is ambitious but realistic. Our plan was developed and formed based on the opinion of local people, our partners as well as local and national political priorities such as the welfare agenda. These priorities are the core of the Council Plan and are central to driving our expectations and day to day strategic work until 2022.

As a result of the feedback received, the Council has adopted its main aim, i.e. that we will "work towards an Anglesey that is healthy, thriving and prosperous" and the key theme that runs through all our day to day work is the need to ensure services of a high standard that will improve the quality of life for everyone on the Island.

In order to achieve this aim, the Council has decided on appropriate objectives for the next few years, which are:

- Ensure that the people of Anglesey can thrive and realise their long-term potential.
 - Jobs and Work Opportunities
 - Education and Skills
 - Health and Well-being
- Support vulnerable adults and families to keep them safe, healthy and as independent as possible.
 - Support for older and vulnerable adults
 - Support for families and children
- Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment.
 - Development and Promotion
 - Transformation

This is the first year during the term of the current Council that we have produced an Annual Delivery Plan. The document (which is also referred to as an Improvement Plan) shows how we will achieve our key priorities over the next twelve months and highlights our motivation to ensure continuous improvement in the services as expected by Welsh Government. We will also make the improvements while always bearing in mind the principles of sustainability and equality at a time of extreme financial austerity. It is important to note that this Annual Delivery document sets out a number of work initiatives which will be undertaken during the forthcoming year. These initiatives and their associated funding has been assessed and can either be delivered from –

- resources provided for in the Council's revenue budget or from
- funds which have been identified in the Council's capital programme.

Any projects or work initiatives which will require funding beyond 2018/19 have been taken into account in the Council's Medium Term Financial Plan or the Council's rolling capital programme.

Listening to what you as residents and local businesses in Anglesey had to say has been an essential part of this process. This kind of consultation will continue to be a key part of the way we work.

We look forward to delivering with your co-operation.

Llinos Medi (Council Leader)

OBJECTIVE 1

ENSURE THAT THE PEOPLE OF ANGLESEY CAN THRIVE AND REALISE THEIR LONG-TERM POTENTIAL.

JOBS AND WORK OPPORTUNITIES

- As part of the North Wales Growth Bid we will work with others to ensure investment from the UK Government and Welsh Government to ensure that powers are devolved to North Wales so that 5,000 jobs can be created, to support the local economy and to improve transport links and communication.
- We will support the local economy by building a total of 15 new business units in
 - Llangefni and
 - Holyhead

by also extending the Anglesey Business Centre in Bryn Cefni in order to expand the space which is available for local businesses.

- We will complete the Llangefni Link Road to enable a better link between the A55 and Coleg Menai which, as a result, will create the opportunity for skills development and further training while also opening new industrial land.
- We will complete the work of regenerating the Market Hall in Holyhead for the purpose of housing local businesses and re-locating the current library.

EDUCATION AND SKILLS

- We will draft, consult and adopt the new school modernisation strategy which will highlight the importance of developing new learning environments in order to improve the provision and raise standards and the achievement of our children over the coming years with the early focus on creating an educational model in the Amlwch catchment area.
- We will work on completing the new school in Newborough – Ysgol Santes Dwynwen, so that it is a sustainable resource for the future.
- We will make decisions on the future of the primary schools in Llangefni and the surrounding area, ensuring that we work with Welsh Government to realise and start on the building work.
- We will also decide on the future of education in the Seiriol area by considering the future of Llandegfan, Beaumaris and Llangoed Schools.
- We will continue to work with new Head Teachers in the County (13) by offering them regular support and also by developing temporary Head Teachers (3) and recognise the Heads of the future and support them by offering them experiences and opportunities to develop.
- We will be launching the new **Denu Talent Môn** (Attracting Anglesey Talent) this year which will be an opportunity for 9 or 10 people 16 years old and over to have up to 12 weeks of paid work experience with the Council over the Summer. This will be a valuable opportunity for them to get a flavour of the work of a modern local authority by completing specific projects and tasks.

HEALTH AND WELL-BEING

- We will work to increase the contribution made by our residents (with the emphasis on young people) in sport and leisure activities.

- We will work with others and use capital funds to establish the first 3G pitch at Plas Arthur Leisure Centre in Llangefni and will also invest in new fitness equipment at Holyhead Leisure Centre.
- We will work with others to bring 75 new houses back into use and will increase the number of affordable homes that are built.

OBJECTIVE 2 - SUPPORT VULNERABLE ADULTS AND FAMILIES TO KEEP THEM SAFE, HEALTHY AND AS INDEPENDENT AS POSSIBLE.

SUPPORT FOR OLDER AND VULNERABLE ADULTS

- We will complete the development of extra care housing in Llangefni – Hafan Cefni, which will enable 63 people to live independently within a supportive environment.
- We will begin the work of planning for extra care housing in the Seiriol area – Beaumaris.
- We will work with the Health Board at Garreglwyd to provide better dementia care with the aim of preventing non-essential transfers to alternative and unsuitable care locations e.g. hospitals or out of county residential care
- We will complete the work of re-tendering the home care contract, in partnership with the Health Board, into smaller areas so that there is a better provision.
- Increase the number of community hubs across the Island in areas such as
 - Amlwch,
 - Llangefni,
 - Cemaes,
 - Menai Bridge,
 - Newborough and
 - Benllech

which will help the preventative agenda and keep individuals active and busy within their communities.

- Revise and change the day care arrangements which are provided by the Council and other providers so that more emphasis is placed on achieving personal aspirations.
- Complete the Llawr y Dref development in Llangefni which will provide the opportunity for those with learning difficulties to move to temporary flats so that they can be assessed and supported in preparation for independent living.

SUPPORT FOR FAMILIES AND CHILDREN

- We will look at ways of strengthening our preventative and wellbeing services for children, young people and vulnerable people in society, with the aim of developing the resilience of individuals, families and communities.
- We will work with others to build approximately 60 new social houses on the Island this year in the following areas –
 - Llanddeusant
 - Cemaes
 - Holyhead
 - Dwyran
 - Penysarn
 - Newborough

- We will continue with the work of promoting Teulu Môn so that all families on Anglesey have a specific place where they can access information, advice and support in relation to children and families who have children between 0 and 25 years old.
- We will continue to safeguard the children and young people of the Island
- We will trial a wider choice of placements for some of our looked after children either by offering more services, increasing the available foster placements or by providing care in a different (alternative) way.

OBJECTIVE 3 - WORK IN PARTNERSHIP WITH OUR COMMUNITIES TO ENSURE THAT THEY CAN COPE EFFECTIVELY WITH CHANGE AND DEVELOPMENTS WHILST PROTECTING OUR NATURAL ENVIRONMENT.

DEVELOPMENT AND PROMOTION

We will -

- Realise the destination management plan by mainly concentrating on marketing the Island in collaboration with the annual Visit Wales campaign – ‘Year of the Sea’
- Welcome 52 cruise ships and over 32,000 visitors to Holyhead and encourage visitors to visit local tourist attractions and to receive a typical Welsh welcome.
- Continue with our intention and achievement of ensuring that over 70% of all household waste is recycled which in turn, prevents waste from going to landfill sites
- Invest £250,000 in a number of energy efficiency projects across the Council estate, concentrating on our schools and leisure centres.
- Also, complete the work of researching into those areas of the estate where further investment can create more energy efficiency savings and prepare plans for future years.
- Co-ordinate the Energy Island programme to mitigate the effects and improve the benefits which result from large energy projects.
- Ensure that the County Council influences the DCO processes and the Horizon Nuclear Power and National Grid plans.
- Concentrate on developing flood defence plans at Pentraeth, Beaumaris and Bodffordd this year and research options for funding applications for plans in Menai Bridge and Llanfairpwll in 2019/20 (in order to defend them in future from the effects of various environmental issues)

TRANSFORMATION

- Continue to work with communities regarding the shaping of place with the aim of enabling them to take more responsibility and ownership for their own communities
- Work with Beaumaris Town Council to outsource the management of the Court and Gaol for the purpose of maintaining a historical tourist attraction in the town.
- Pilot an extension of our Cyswllt Môn service in the community in libraries in order promote access to information, advice and support more extensively.
- Motivate and support the Public Protection and Leisure departments to increase the use of Welsh amongst the workforce by working intensely and proactively on successful interventions.
- Re-design the corporate website to make it easier for the residents of the Island to be able to receive / search for and provide essential information in a new and meaningful way.

For more information on any element of this document or if you have any comments, please contact:

Human Resources and Transformation

Anglesey County Council

Council Offices

Llangefni, Anglesey

LL77 7TW

Phone - 01248 752111

E-mail:-

CarysEdwards@ynysmon.gov.uk

GethinMorgan@ynysmon.gov.uk

This document is available on tape, in braille and on the Council website:

www.ynysmon.gov.uk/cynlluncorfforaethol

More information is also available as follows:

Policies, plans and strategies published by the Council can be seen at www.ynysmon.gov.uk

The Annual Improvement Plan is available on the Council website by clicking on the following link:

www.ynysmon.gov.uk

The Audit and Inspection Reports produced by the Council Regulators are available on their individual websites as follows:

- Wales Audit Office:

www.wao.gov.uk

- Care and Social Services Inspectorate for Wales:

www.cssiw.org.uk

- Estyn:

www.estyn.gov.uk

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ISLE OF ANGLESEY COUNTY COUNCIL		
REPORT TO:	EXECUTIVE COMMITTEE	
DATE:	18 JUNE 2018	
SUBJECT:	CAPITAL OUTTURN REPORT 2017/18	
PORTFOLIO HOLDER:	COUNCILLOR R WILLIAMS	
HEAD OF SERVICE:	MARC JONES (EXT. 2601)	
REPORT AUTHOR:	GARETH ROBERTS	
TEL:	01248 752675	
E-MAIL:	GarethRoberts@ynys mon.gov.uk	
LOCAL MEMBERS:	n/a	
A - Recommendation/s and reason/s		
<ul style="list-style-type: none"> To note the draft outturn position of the Capital Programme 2017/18 that is subject to Audit; and To approve the carry-forward of £9.348m to 2018/19 for the underspend on the programme due to slippage. The funding for this will also carry-forward to 2018/19 (Appendix A – paragraph 4.2). 		
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?		
<ul style="list-style-type: none"> This report sets out the financial performance of the Capital Budget for the 2017/18 financial year, that is subject to Audit; Budget monitoring is a designated Executive function. 		
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)	No comment
2	Finance / Section 151 (mandatory)	n/a – this is the Section 151 Officer's report
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 - Capital Outturn Report – 2017/18 Appendix B – Summary of the Capital Expenditure against the Capital Budget and the slippage into 2018/19	
FF - Background papers (please contact the author of the Report for any further information):	
<ul style="list-style-type: none"> • 2017/18 Capital Budget, as recommended by the County Council on 28 February 2017; • 2017/18 Capital Monitoring report for the first quarter 2017/18 presented to this committee on 18 September 2017; • 2017/18 Capital Monitoring report for the second quarter 2017/18 presented to this committee on 27 November 2017; • 2017/18 Capital Monitoring report for the third quarter 2017/18 presented to this committee on 19 February 2018. 	

1. INTRODUCTION

- 1.1 This is the Capital Outturn report for the financial year 2017/18 which allows Members to note the progress of Capital Expenditure and Capital Receipts against the Capital Budget. The figures in this report are subject to Audit.
- 1.2 In February 2017, the Council approved a Capital Programme for non-housing services of £30.614m for 2017/18, and a Capital Programme for the HRA of £9.889m. There was £6.435m Capital Commitments brought forward from 2016/17, of which £1.758m related to the 21st Century Schools and £2.984m relating to the HRA. There were other Capital schemes added during the year, as can be seen in table 1.4 below, which amounted to £5.734m, including a Capitalisation Direction for Equal Pay of £2.566m. This brings the total Capital budget for 2017/18 to £52.672m.
- 1.3 The table below shows the breakdown of the Approved Capital Programme for 2017/18 and the brought forward commitments from 2016/17:-

<u>Approved Capital Programme for 2017/18</u>		<u>Slippage brought forward from 2016/17</u>	
	£		£
General Fund		General Fund	
21st Century Schools - Holyhead	502,000.00	Disabled Facility Grant	208,283.00
21st Century Schools - Llannau	1,545,000.00	Affordable Housing Scheme	30,647.00
21st Century Schools - Brynsiencyn	217,000.00	Disabled Access in Education Building	174,618.00
New Highway to Wylfa Newydd Vehicles	4,097,000.00	Planning System Invest To Save	84,750.00
Disabled Facility Grant	150,000.00	Salix Funding LED Lights	5,194.00
21st Century Schools - Parc Y Bont	750,000.00	Car Parks	12,920.00
CCIS Implementation	169,000.00	Canolfan Byron	150,000.00
21st Century Schools - Bro Rhosyr / Bro Aberffraw	65,000.00	Vehicles	196,395.00
21st Century Schools - Bro Seiriol	3,591,000.00	Purchase Telehandler & Weighbridge	97,000.00
21st Century Schools - Llangefni New Build	166,000.00	EDMS Invest to Save	57,860.00
Beaumaris Flood Alleviation	675,000.00	CRM System Invest to Save	105,777.00
Development of residential site for Gypsies and Travellers	800,000.00	Market Hall	410,669.00
County Prudential Borrowing Initiative (Road Surfacing)	1,301,000.00	IT Citrix	90,782.00
Llangefni Link Road	761,000.00	Haulfre refurbishment	68,273.00
Holyhead Strategic Infrastructure	3,414,000.00	21st Century Schools	
Invest to Save - Energy Efficiency in Leisure Centres	5,001,000.00	21st Century Schools - Holyhead	656,000.00
Invest to Save - Sewarege Treatment	111,000.00	21st Century Schools - Llannau	957,000.00
Llangefni Strategic Infrastructure	75,000.00	21st Century Schools - Parc Y Bont	145,000.00
Desktop Refresh	2,523,000.00		
Disabled Access in Education Buildings	100,000.00	HRA	
Refurbish Education Buildings	300,000.00	Re-modelling of Llawr y Dref, Llangefni	443,120.00
Refurbish Non-Education Buildings	500,000.00	WHQS Internal Works	270,279.00
Garreglwyd Care Home	200,000.00	Environmental Works	102,584.00
Compulsory Purchase Scheme	250,000.00	Fire Risk Management	167,624.00
Core Infrastructure	200,000.00	Acquisition of Existing Properties	2,000,000.00
Pentraeth Flood Alleviation	150,000.00		<u>6,434,775.00</u>
Legacy System Migration	800,000.00		
MS Licensing	50,000.00		
Seiriol Extra Care Home	101,000.00		
Holy Island Visitor Gateway	1,000,000.00		
	<u>1,050,000.00</u>		
	30,614,000.00		
HRA			
HMU Transformation - 5 Vehicles	144,000.00		
Planned Refurbishment	4,635,000.00		
Development of additional Council Housing	2,800,000.00		
Re-modelling of Llawr y Dref, Llangefni	250,000.00		
Central Heating Contract	600,000.00		
WHQS Internal Works	600,000.00		
Environmental Works	400,000.00		
Public Sector Adaptations	350,000.00		
Premesis	110,000.00		
	<u>9,889,000.00</u>		

1.4 The table below shows the breakdown of the additional schemes that were added during the year to the Capital Programme for 2017/18 and their funding:-

Additional Schemes Added to the 2017/18 Capital Programme

General Fund	Funded By:	
Empty Homes Grant	10,000.00	Capital Grant 1,774,022.00
Employment & Training Hub Mon Communities First	295,000.00	Reserves 86,377.00
Enable Grant	86,790.00	Loan 1,001,240.00
Flying Start Capital Grant	18,622.00	Capital Receipts 307,000.00
Breakwater Park	17,050.00	Unsupported Borrowing 2,566,000.00
Ynys Mon MALD Grant	115,370.00	<u>5,734,639.00</u>
New Vehicles NRW	7,400.00	
Active Travel	4,000.00	
Road Safety Grant	163,000.00	
A454 Beaumaris Road	75,000.00	
Salix Funding - Street Lights	365,000.00	
Salix Funding - Street Lights Phase 2	636,240.00	
Holyhead Breakwater	40,000.00	
Smallholdings	307,000.00	
Completion of Cemetary works	10,985.00	
Retention Smarter Working	18,342.00	
Equal Pay	2,566,000.00	
THI Phase	5,670.00	
Heritage Lottery Fund	138,839.00	
Market Hall	571,331.00	
Garreglwyd - Extra Works	40,000.00	
Intermediate Care Fund Grant	243,000.00	
	<u>5,734,639.00</u>	

2. **CAPITAL EXPENDITURE 2017/18**

2.1 Summary Table of the spending to 31 March 2018:-

Service	Annual Budget £'000	Total Expenditure £'000	(Under) / Overspend (£'000)	% Annual Budget Spent
Housing General Fund	2,882	1,224	(1,658)	42
Housing HRA	12,873	9,291	(3,582)	72
Lifelong Learning	9,616	6,318	(3,298)	66
Economic and Regeneration	8,907	788	(8,119)	9
Highways	11,522	6,004	(5,518)	52
Waste Management	172	66	(106)	39
Property	518	786	268	152
Transformation	674	587	(87)	87
Resources	2,566	2,566	0	100
Planning	1,126	1,031	(95)	92
Adult Services	1,816	694	(1,122)	38
Total	52,672	29,355	(23,317)	56
Funded By:				
Capital Grant	24,818	12,959	(11,859)	52
Capital Receipts	2,866	2,456	(410)	86
Supported Borrowing	3,509	402	(3,107)	11
Unsupported Borrowing	8,868	6,043	(2,825)	68
Revenue Contribution	10,207	6,600	(3,607)	65
Reserves	809	-	(809)	-
Loan	1,031	895	(136)	87
Underspend from 2016/17	564	-	(564)	-
Total Funding	52,672	29,355	(23,317)	56

- 2.2** The Budget for the General Fund was £39.800m with Expenditure of only £20.064m incurred at 31 March 2018, which equated to 50% of the budget. The main reason for the underspend was the large underspend against these seven projects:- the Holyhead Strategic Infrastructure, Llangefni Strategic Infrastructure, New Highway to Wylfa Newydd, Ysgol Santes Dwynwen, Residential Site for Gypsies and Travellers, Tourism Gateway and the Extra Care in Seiriol. The Holyhead Strategic Infrastructure only spent £0.012m of its £5.001m budget, and will now carry forward into 2018/19, Llangefni Strategic Infrastructure only spent £0.623m of its £2.523m budget and the New Highway to Wylfa Newydd not spending any of its £4.097m budget. The reason for this can be seen in paragraph 3.1.13. Ysgol Santes Dwynwen only spent £1.540m of its £3.591m budget, Residential Site for Gypsies and Travellers spending £0.119m of its planned £1.301m expenditure and Tourism Gateway's expenditure only being £0.005m against a budget of £1.050m. Extra Care Seiriol did not spend any of its £1.000m budget, and all these Capital schemes will carry forward to 2018/19, along with their funding. A full list of the capital schemes' expenditure against the budget can be seen in Appendix B of this report.
- 2.3** The Housing Revenue Account has spent 72% of its total budget. The main reason that the total budget was not spent is due to the underspend in the Acquisition of Existing Properties, where only £1.771m of its £4.800m budget was spent (37%), due to less than anticipated Council dwellings being purchased. With the exception of this scheme, 93% of the remaining HRA budget was fully spent.
- 2.4** The smallholdings programme of improvements, financed from the ring-fenced capital receipts from the sale of smallholdings and rental income, has been extended for an additional year. A surplus of £0.307m was brought forward from 2016/17, capital receipts to the end of the financial year amounted to £0.197m, with expenditure of £0.582m incurred to 31 March 2018. As a result, there is now a deficit of £0.078m. This overspend will be funded from the sale of a smallholding. This sale was completed on 20 April 2018.
- 2.5** As can be seen from table 2.1 (above), there is a significant difference in funding for Capital Grants, Supported Borrowing, Unsupported Borrowing and the Revenue Contributions. The main reason for the underspend in grants is mentioned in paragraph 2.2, where large Capital Grants projects in Holyhead Strategic Infrastructure, Llangefni Strategic Infrastructure and New Highway to Wylfa Newydd have underspent significantly. The main reason for the variance in the Unsupported Borrowing is the underspend in the 21st Century Schools programme. This is also a reason for the variance in Supported Borrowing, along with the underspend in Extra Care Seiriol and the underspend on the Residential sites for Gypsies and Travellers. As mentioned in paragraph 3.1.16, the Authority received extra grant funding for highways which replaced local funding in 2017/18, and this is the reason that no reserves were used to fund the 2017/18 capital programme. Finally, the variance in Revenue Contribution is down to the underspend in the HRA, which is mainly funded by revenue contributions.

3. FUNDING

3.1 Capital Grants

- 3.1.1** There are a number of Capital Grant schemes in the Capital Programme for 2017/18. There are some annual schemes that were completed during the year, such as the Road Safety Capital, Enable Grant and the Intermediate Care Fund. There are some schemes that are ongoing and will carry on into 2018/19, such as the 21st Century Schools and the Llangefni Link Road. There were also new Capital Grants schemes awarded during the year, including the Holyhead Strategic Infrastructure and the Llangefni Strategic Infrastructure.

- 3.1.2 Market Hall, Holyhead** - A value engineering exercise successfully reduced costs to a more manageable level, with a slight overall uplift in project costs required. This has been met by a combination of additional Welsh Government grant input being matched by the Council's own financial contribution. Subject to the confirmation of the ERDF grant funding, the Council will be in a position to commit to the Phase II contract in the very near future, which has a focus on transforming the building from a repaired shell to useable structure.
- 3.1.3 Llangefni Link Road** - Work on Section 3 continued during quarter 4. The initial site clearance works were completed and work commenced on the main construction. Completion is planned for January 2019.
- 3.1.4 Llangefni Strategic Infrastructure** – The scheme involves the construction of new industrial units on the old Môn Training site and office extension at the Business Centre for letting. Work began on both sites during the latter part of the year, with contractors currently on site. £0.623m of expenditure was incurred during 2017/18, which will be funded through the European Regional Development Fund.
- 3.1.5 Holyhead Breakwater** - The work on the initial commission was completed in the Autumn and the funding for the consultancy phase this year was provided by Stena Port. Discussions are currently ongoing with Welsh Government regarding the next phase of the scheme.
- 3.1.6 21st Century Schools** - The funding for Ysgol Cybi and Ysgol Rhyd y Llan was fully drawn down as part of the 21st century schools programme in 2016/17. Therefore, the remaining works completed on both schools during 2017/18 was funded through borrowing and the Council's resources as part of the Council's 50% contribution towards the project. Work has continued on the new build for Ysgol Santes Dwynwen during the year, and the refurbishment works on Ysgol Parc y Bont was completed. The works at Ysgol Brynsiencyn is scheduled to complete in September 2018. Welsh Government re-profiled the funding to ensure that the Authority could meet the required level of expenditure by 31 March 2018 following delays on Ysgol Santes Dwynwen. The Authority's match funding for the South West Primary Schools was carried forward to 2018/19 and £2.275m 21st Century Schools Grant was drawn down in full.
- 3.1.7 Road Safety Capital** – This scheme involved capital works on the B5110 road from Llangefni to Marianglas. Work was completed during the financial year with the Capital Grant fully drawn down.
- 3.1.8 Oriel Ynys Môn MALD Grant** - Works on toilet refurbishment, lighting, front door and new flooring was completed by the end of March. In addition, landscape work was due to commence and complete during Quarter 4, however, ongoing works will continue into 2018/19. The grant was fully claimed by the 9th March 2018. A proportion of the MALD grant has been used as match funding to secure an additional grant from the Tourism and Amenity Investment Scheme for further works on the Oriel, improvements to the Dingle and the Lôn Las 566 path.

- 3.1.9 Beaumaris Flood Alleviation** – Welsh Government has allocated funding for the Beaumaris Flood Alleviation scheme within their programme for 2018/19 financial year. However, a formal offer is subject to an application being made by the Authority once all consents and tender prices are in place to begin works. Currently, it is anticipated these will be in place by September and, with approval of funding, it is hoped works can commence in October. These will run into the next financial year, with completion anticipated in May 2019.
- 3.1.10 Pentraeth Flood Alleviation** - Welsh Government has allocated funding for the Nant y Felin, Pentraeth Flood Alleviation scheme within their programme for 2018/19 financial year. However, a formal offer is subject to an application being made by the Authority once all consents and tender prices are in place to begin works. Currently it is anticipated these will be in place by September and, with approval of funding, it is hoped works can commence in October. It is currently anticipated that works may be completed by March 2019.
- 3.1.11 Holyhead Strategic Infrastructure** – This scheme is to construct new industrial units at Penrhos, Holyhead, with the view for works to start on site during 2018/19. European Regional Development Funding has been secured and a Joint Venture has been entered into with Welsh Government, which will provide the match funding for the scheme.
- 3.1.12 Tourism Gateway** – A bid for European Regional Development Funding was approved during Quarter 4. The project will involve investment in Holyhead Port Facilities including the Railway, improvements to Saint Cybi's church site and the Roman fort and improving the visitor experience in iconic visitor destinations such as Holyhead Mountain. Work will commence in 2018/19.
- 3.1.13 New Highway to Wylfa Newydd** – No work took place during this financial year. The online works will still go ahead but is not likely to start until Quarter 3 2018/19 at the earliest, and could be delayed until Quarter 1 2019/20, depending on the progress to complete the necessary Compulsory Purchase Orders.
- 3.1.14 Residential site for Gypsies & Travellers** - The Housing Service did not anticipate any site construction related expenditure during the current financial year. Following a further report to the Executive during October 2017, it was resolved that formal Planning Applications would be submitted for a Temporary Stopping Site at Star and a Permanent Site at Penhesgyn. Capital expenditure during 2017/18 was restricted to professional fees in connection with site design, the commission of specialist site suitability reports and the submission of planning applications and associated fees.
- 3.1.15 Regeneration Funding** – £0.424m of additional Regeneration Funding was approved by Welsh Government in December 2017. The funding was allocated to the Market Hall Phase II contract additional costs, Môn Communities First Employment and Training Hub and the Empty Homes Initiative. £0.417m was spent and claimed by the end of March 2018.

3.1.16 Additional Highways Grant – In late February, the Authority was awarded £0.910m of additional grant funding for improvements to the island’s roads. As this was awarded late in the financial year, no expenditure was incurred before 31 March 2018, with the works to be completed in 2018/19. The grant funding was used to fund other capital schemes in 2017/18, replacing funding from the Authority’s own resources. The funding saved by the Authority from this grant will now be used to fund the additional highways refurbishment in 2018/19.

3.1.17 A545 Beaumaris - Following November’s floods, the Authority received an extra £0.075m of grant funding through the Local Transport Fund to carry out works on the A545 in Beaumaris. This funding was spent and claimed in full.

3.2 Capital Receipts

3.2.1 The Capital Receipts for the 2017/18 Financial Year was:-

	Budget 2017/18 £'000	Received to 31-Mar-18 £'000	Variance (Under) / Over budget £'000
Council Fund:			
Smallholdings	530	197	333
General	2,925	2,477	448
Industrial	275	105	170
Schools	640	0	640
Repaid Improvement Grants	0	0	0
Total	4,370	2,779	1,591

3.2.2 The Capital Receipts for 2017/18 was £2.779m against the forecast of £4.370m, which is 64% of the budget. The main reason that not all the Capital Receipts were received in the year was that an asset in Llangefni for £0.500m, two schools totalling £0.640m and a smallholding for £0.260m did not complete before 31 March 2018. It is expected that all of these assets will be sold during 2018/19. Overall, it was a fairly successful financial year with regards to Capital Receipts with £2.779m being received, which included the sales of Parc Mount (£0.350m) and the former Ysgol y Graig site (£1.672m).

3.2.3 As can be seen in Appendix B, some Capital schemes will be completed in the next financial year, with the funding for these schemes also being forwarded to 2018/19. In total, there were £0.715m of General Fund assets that did not complete in the year, therefore, this funding will be used to fund some of the Capital slippage into 2018/19. £0.640m of schools which is ring-fenced for Education will now be sold in 2018/19, again with this funding slipping into 2018/19. There is also the sale of a smallholding that did not complete before 31 March 2018, and this will be used to fund the overspend as mentioned in paragraph 2.4 and further works to smallholdings in 2018/19. Any surplus capital receipts, after funding the overspend and the further works, will be transferred to the General Fund Capital Receipts.

4. FUTURE YEARS

- 4.1** The Capital Budget Report for 2018/19 was considered and approved by the full Council on 28 February 2018. The total capital programme for 2018/19 (including 21st Century Schools and Housing Revenue Account) totals £49.434m. This can be broken down to Existing Commitment from the 2017/18 Capital Programme (£23.399m), Investing in Existing Assets (£2.518m), Invest To Save (£0.258m), Highways Resurfacing (£1.592m), Leisure Schemes (£0.400m), 21st Century Schools (£8.850m) and the HRA (£12.417m). The proposed funding will be £30.324m (61%) from external funding sources such as Capital Grants and £19.110m (39%) from internal sources. This includes £3.471m of supported borrowing, £4.084m of unsupported borrowing, with the remaining £11.555m being funded from Capital Receipts and the Council's own reserves.
- 4.2** As can be seen in Appendix B, it is proposed that £9.348m will be carried forward into 2018/19 as slippage for capital schemes that did not complete by the end of March 2018. In total, there are 18 schemes in the General Fund totalling £5.767m and 6 HRA schemes for £3.581m. The funding for these schemes will also slip into 2018/19 and, for the General Fund, this comprises £1.035m Capital Receipts, £0.105m Loan, £2.689m of Capital Grants, Supported Borrowing £1.762m and £0.175m from Reserves, with the HRA element made of Revenue Contribution from HRA. As can be seen in table 2.1 and paragraph 2.5 of this report, there is sufficient underspending against these funding streams that can be carried forward to 2018/19.
- 4.3** If the slippage in Appendix B to this report is approved by this Committee, the total Capital Programme for 2018/19 will be £58.782m, of which £42.784m will be General Fund and £15.998m HRA. Additional schemes may be added onto the Capital Programme during 2018/19 if additional grant funding becomes available.

5. IMPACT ON THE TREASURY MANAGEMENT STRATEGY

- 5.1** The Capital Finance Requirement at 31 March 2018 is £135.971m, which is the underlying need for the Authority to borrow to be able to fund its Capital Programme. The External borrowing currently stands at £117.029m, meaning the Authority essentially needs to borrow £18.942m, either internally or externally, to fund the current Capital Programme. If this borrowing is undertaken externally, the Authority will still be within its authorised borrowing limits as per the 2017/18 Treasury Management Strategy Statement (Appendix 11 of that statement).

6. CONCLUSION

- 6.1** Although the level of underspending is significant (44% of the funding available), the majority of the underspending relates to large projects, where the timing of the work has not followed the planned timetable (21st Century schools, Gypsy and Traveller sites, Infrastructure projects and Flood Alleviation Works) or the programming of the work is outside the Council's control (Wylfa road improvements). With large capital projects, unexpected delays do normally occur and it is not unusual to see expenditure on these types of projects slipping. In all cases, the funding for the projects has been secured and will be carried forward to 2018/19, with no loss of resources for the Council.

Summary of the Capital Expenditure against the Capital Budget and the slippage into 2018/19

Service	Annual Budget (£)	Total Expenditure (£)	Total (Under) / Overspend (£)	% Annual Budget Spent	% Variance	Underspend to be carried forward to 2018/19 (£'000)	Comments
Housing General Fund							
Disabled Facilities Grants	958,280	701,490	(256,790)	73	27	256,790	Slippage funded by Capital Receipt & Supported Borrowing
Residential Site for Gypsies and Travellers	1,301,000	119,465	(1,181,535)	9	91	1,181,535	Slippage funded by Capital Grants, Supported Borrowing & Capital Receipts
Compulsory Purchase Scheme	200,000	905	(199,095)	0	100	199,095	Slippage funded by Capital Receipts
Empty Homes Grant	10,000	20,000	10,000	200	(100)		Overspend funded by External Grants
Employment & Training Hub Mon Communities First	295,000	295,000	0	100	0		
Enable Grant	86,790	87,109	319	100	0		
Affordable Housing brought forward	30,650	0	(30,650)	0	100	30,650	Slippage funded by Supported Borrowing
Total	2,881,720	1,223,968	(1,657,752)	42	58	1,668,071	
Housing HRA							
Central Heating Contract	600,000	557,828	(42,172)	93	7	42,172	Slippage funded by HRA Revenue Contributions
Planned Maintenance Contract	4,635,000	4,820,819	185,819	104	(4)		The Overspend is funded by HRA Revenue contribution. The amount of HRA slippage on other schemes has been reduced by this overspend amount.
HMU Vehicles 2017/18	144,000	157,607	13,607	109	(9)		The Overspend is funded by HRA Revenue contribution. The amount of HRA slippage on other schemes has been reduced by this overspend amount.
Environmental Works	502,580	32,752	(469,828)	7	93	228,104	Slippage funded by HRA Revenue Contributions
Remodelling of Existing Stock	693,120	697,362	4,242	101	-1		The Overspend is funded by HRA Revenue contribution. The amount of HRA slippage on other schemes has been reduced by this overspend amount.
Acquisition of Existing Properties	4,800,000	1,771,219	(3,028,781)	37	63	3,028,781	Slippage funded by HRA Revenue Contributions
Public Sector Adaptations	350,000	344,433	(5,567)	98	2	5,567	Slippage funded by HRA Revenue Contributions
Fire Risk	167,620	53,791	(113,829)	32	68	113,829	Slippage funded by HRA Revenue Contributions
WHQS	870,280	707,457	(162,823)	81	19	162,823	Slippage funded by HRA Revenue Contributions
Premises	110,000	148,056	38,056	135	-35		The Overspend is funded by HRA Revenue contribution. The amount of HRA slippage on other schemes has been reduced by this overspend amount.
Total	12,872,600	9,291,323	(3,581,277)	72	28	3,581,277	
Lifelong Learning							
Disabled Access in Education Building	474,620	377,289	(97,331)	79	21	97,331	Slippage funded by Supported Borrowing & Capital Receipts
Refurbish Education Building	500,000	456,051	(43,949)	91	9	43,949	Slippage funded by Supported Borrowing
21st Century Schools - Holyhead	1,158,000	977,882	(180,118)	84	16		Capital project completed in 2017/18, no slippage required
21st Century Schools - Llannau	2,502,000	2,160,814	(341,186)	86	14		Capital project completed in 2017/18, no slippage required
21st Century Schools - Parc Y Bont	314,000	550,218	236,218	175	(75)		New Capital budget in 2018/19, no slippage required
21st Century Schools - Bro Rhosyr / Bro Aberffraw	3,591,000	1,540,451	(2,050,549)	43	57		New Capital budget in 2018/19, no slippage required
21st Century Schools - Bro Seiriol	166,000	0	(166,000)	0	100		New Capital budget in 2018/19, no slippage required
21st Century Schools - Brynsiencyn	217,000	228,755	11,755	105	(5)		New Capital budget in 2018/19, no slippage required
21st Century Schools - Llangefni	675,000	3,789	(671,211)	1	99		New Capital budget in 2018/19, no slippage required
Flying Start Jesse Hughes Capital Grant	18,622	22,534	3,912	121	(21)		
Total	9,616,242	6,317,783	(3,298,459)	66	34	141,280	

Service	Annual Budget (£)	Total Expenditure (£)	Total (Under) / Overspend (£)	% Annual Budget Spent	% Variance	Underspend to be carried forward to 2018/19 (£'000)	Comments
<u>Economic and Regeneration</u>							
Tourism Gateway	1,050,000	5,022	(1,044,978)	0	100	1,044,978	Slippage funded by external grants
Holyhead Strategic Infrastructure	5,001,000	11,917	(4,989,083)	0	100		New Capital budget in 2018/19, no slippage required
Llangefni Strategic Infrastructure	2,523,000	622,974	(1,900,026)	25	75		New Capital budget in 2018/19, no slippage required
Breakwater Park	17,050	17,050	0	100	0		
Planning System Invest to Save	84,750	15,404	(69,346)	18	82	69,346	Slippage funded by Reserves
Salix Funding LED Lights	5,190	0	(5,190)	0	100		
Invest to Save - Energy Efficiencies at Leisure Centres	111,000	0	(111,000)	0	100		
Oriel Ynys Môn MALD Grant 2017/18	115,370	115,667	297	100	(0)		
Total	8,907,360	788,034	(8,119,326)	9	91	1,114,324	
<u>Highways and Transportation</u>							
Car Parks	12,920	0	(12,920)	0	100	12,920	Slippage Funded by Capital Receipts
Vehicles	346,400	348,186	1,786	101	(1)		
Vehicles - NRW	7,400	7,400	0	100	0		
County Prudential Borrowing Initiative	761,000	820,237	59,237	108	(8)		Overspend funded from Additional Grant
Beaumaris Flood Alleviation Works (WG)	800,000	45,712	(754,288)	6	94	754,288	Slippage Funded by External Grant and Supported Borrowing
Pentraeth Flood Alleviation Works (WG)	800,000	0	(800,000)	0	100	800,000	Slippage Funded by External Grant and Supported Borrowing
New Highway to Wylfa Newydd	4,097,000	0	(4,097,000)	0	100		New Capital budget in 2018/19, no slippage required
Llangefni Link Road	3,414,000	3,604,171	190,171	106	(6)		
Active Travel	4,000	1,440	(2,560)	36	64		
Road Safety Grant	163,000	163,000	0	100	0		
A454 Beaumaris Road	75,000	75,000	0	100	0		
Salix Funding - Street Lights	365,000	364,320	(680)	100	0		
Salix Funding - Street Lights Phase 2	636,240	531,113	(105,127)	83	17	105,127	Slippage Funded by Loan
Holyhead Breakwater	40,000	43,089	3,089	108	(8)		
Total	11,521,960	6,003,667	(5,518,293)	52	48	1,672,335	
<u>Waste Management</u>							
Telehandler & Weighbridge	97,000	66,410	(30,590)	68	32	30,590	Slippage Funded by Capital Receipts
Invest to Save - Traeth Coch	75,000	0	(75,000)	0	100		
Total	172,000	66,410	(105,590)	39	61	30,590	
<u>Property</u>							
Refurbish Existing Assets	200,000	193,066	(6,934)	97	3	6,934	Slippage Funded by Capital Receipts
Cemetary works	10,985	10,986	1	100	(0)		
Smallholdings	307,000	581,875	274,875	190	(90)		Overspend funded by Capital Receipts
Total	517,985	785,926	267,941	152	(52)	6,934	

Service	Annual Budget (£)	Total Expenditure (£)	Total (Under) / Overspend (£)	% Annual Budget Spent	% Variance	Underspend to be carried forward to 2018/19 (£'000)	Comments
Transformation							
Smarter Working	18,342	18,342	0	100	(0)		
ICT Projects	90,790	105,186	14,396	116	(16)		
ICT- Core Infrastructure	150,000	141,189	(8,811)	94	6		
ICT - Desktop Refresh	100,000	99,792	(208)	100	0		
ICT - Legacy System Migration	50,000	18,575	(31,425)	37	63	11,701	This is the total net underspend for ICT. Slippage Funded by Capital Receipts
ICT - MS Licensing	101,000	115,348	14,348	114	(14)		
CRM System Invest to Save	105,770	127	(105,643)	0	100	105,643	Slippage Funded by Reserve
EDMS Invest to Save	57,860	88,704	30,844	153	(53)		
Total	673,762	587,263	(86,499)	87	13	117,344	
Resources							
Equal Pay	2,566,000	2,566,000	0	100	0		
Total	2,566,000	2,566,000	0	100	0		
Planning							
THI Phase 2	5,670	5,670	0	100	(0)		
HLF REFCUS	1,029	1,030	1	100	(0)		
HLF	137,810	137,810	0	100	0		
Holyhead Market Hall Hub Project	982,000	886,543	(95,457)	90	10		New Capital budget in 2018/19, no slippage required
Total	1,126,509	1,031,053	(95,456)	92	8	0	
Adult Services							
CCIS Implementation	65,000	30,427	(34,573)	47	53		
Canolfan Byron	150,000	151,750	1,750	101	(1)		
Haulfre Refurbishment	68,270	0	(68,270)	0	100		
Seiriol	1,000,000	0	(1,000,000)	0	100	1,000,000	Slippage funded by Supported Borrowing
Garreglwyd	290,000	274,576	(15,424)	95	5	15,424	Overspend funded by Capital Receipts
ICF Maes William Williams	218,400	219,979	1,579	101	(1)		
ICF Rectory	24,600	17,149	(7,451)	70	30		
Total	1,816,270	693,880	(1,122,390)	38	62	1,015,424	
Total	52,672,408	29,355,307	(23,317,101)	56	44	9,347,580	

ISLE OF ANGLESEY COUNTY COUNCIL	
Report to:	Executive Committee
Date:	18 June 2018
Subject:	Modernising Schools on Anglesey - Moving the statutory notice implementation date for Ysgol Santes Dwynwen, Ysgol Parc y Bont and Ysgol Brynsiencyn
Portfolio Holder(s):	Councillor R. Meirion Jones
Head of Service:	Arwyn Williams
Report Author: Tel: E-mail:	Emrys Bebb
Local Members:	Councillor Dafydd Roberts Councillor Eric W. Jones Councillor Peter Rogers Councillor Bryan Owen

A –Recommendation/s and reason/s
<p>Reasons</p> <p>In order to comply with the School Standards and Organization (Wales) Act 2013 and the School Organisation Code, the Authority and the Diocese of Bangor (Church in Wales) published two Statutory Notices of their intention to:</p> <ol style="list-style-type: none"> 1. Combine four schools - Ysgol Bodorgan, Ysgol Dwyran, Ysgol Llangaffo and Ysgol Niwbwrch - into one new school on a site in Newborough and for the new school to be under the voluntary control of the Church in Wales. 2. Not to support Ysgol Parc y Bont as a Church in Wales voluntary controlled school and to establish a new Welsh-medium community primary school to be maintained by the Isle of Anglesey County Council for 3-11 year old boys and girls and to federate Ysgol Brynsiencyn with another school. <p>The Statutory Notices were published on 17 June 2016 and a period of 28 days to oppose the proposals followed and the objection period ended on July 15, 2016. One objection was received to proposal 1 above to build a new primary school under the voluntary control of the proposals. Church in Wales. A report on the objection was prepared and the Executive resolved at its meeting on 19 September 2016 to approve the original proposal. Since then, the Shadow Governing Body of the new primary school named it as Ysgol Santes Dwynwen.</p> <p>However, the implementation date of the proposals was 1 September 2018. A number of factors have pushed the start date of both proposals for the following reasons:</p> <ol style="list-style-type: none"> a. The land purchase process has been longer than expected b. The process of obtaining planning permission was also longer than expected and planning permission was not received until 5 July 2017. c. The Isle of Anglesey County Council Election on 4 May 2017 added 6 weeks to the process because of the pre-election period ch. The General Election on 8 June 2017 added another 6 weeks to the process because of the pre-election period d. The Authority has also learned from its experiences when opening Ysgol Rhyd Y Llan e.g. that More time was needed between the builders finishing on site and staff moving into the new School.

Section 6 of the School Organisation Code 2013 states: "When proposals have been approved by the local authority ... the proposers may decide to defer a motion, carry forward or stop its operating date. Such an application for an agreement must be made in writing noting the reasons of the proposer clearly. Relevant parties must be notified ... of any decision to defer a motion ... before seven days from the date of that decision."

The Executive agreed that the original implementation date of the statutory notice was 1 September 2018 but due to the reasons listed above, the Executive is requested to extend the period for 8 months to 1 April 2019. Accordingly, there is a need for the Isle of Anglesey County Council's Executive, as the proposer of the intention in the statutory notice, to defer the implementation date of the proposal to 1 April 2019.

It is recommended that the Executive:

- i. Approves the delay of the implementation date of a proposal to complete Santes Dwynwen School to 1 April 2019.
- ii. Approves the delay of implementing a proposal 2 to change the status of Parc y Bont School to 1 April 2019.

Subject to i. above, officers will notify the "relevant parties" of the decision to defer the implementation date of the proposals for Ysgol Santes Dwynwen School, Ysgl Parc y Bont and Ysgol Brynsiencyn.

Background:

At its meeting on October 19 2015, the Executive decided to:

"Approve option B4a as the preferred option for the provision of primary education in the Bro Rhosyr and Bro Aberffraw areas as outlined in the report, namely

- New Church in Wales VC school for Bodorgan, Newborough, Dwyran, Llangaffo
- Parc y Bont to become a community school a

Federate Ysgol Brynsiencyn School another school.

B – What other options did you consider and why did you reject them and/or opt for this option?

No other option is being considered because adhering to the original timetable laid down by the Executive is not possible due to the reasons outlined in part A above.

C – Why is this a decision for the Executive?

The Executive agreed to the original timetable and so it is only the Executive that can change the timetable.

D – Is this decision consistent with policy approved by the full Council?

Yes

DD – Is this decision within the budget approved by the Council?

Yes – It is one of the plans in the Strategic Outline Programme that was approved by the Executive Committee on January 13, 2014.

E – Who did you consult?		What did they say?
1	Chief Executive / Strategic Leadership Team (SLT) (mandatory)	Their comments have been incorporated into the report.
2	Finance / Section 151 (mandatory)	Their comments have been incorporated into the report.
3	Legal / Monitoring Officer (mandatory)	Their comments have been incorporated into the report.
5	Human Resources (HR)	No comment received
6	Property (Planning)	Their comments have been incorporated into the report.
7	Information Communication Technology (ICT)	No comment received
8	Scrutiny	Ddim yn berthnasol
9	Local Members	The local Elected Members are aware of the delay
10	Any external bodies / other/s	The Shadow Governing Body of Ysgol Santes Dwynwen are aware of the delay.

F – Risks and any mitigation (if relevant)		
1	Economic	Not relevant
2	Anti-poverty	Not relevant
3	Crime and Disorder	Not relevant
4	Environmental	Not relevant
5	Equalities	An equalities impact assessment was completed as part of the statutory consultation process
6	Outcome Agreements	Not relevant
7	Other	Not relevant

FF - Appendices:

G - Background papers (please contact the author of the Report for any further information):
<ol style="list-style-type: none"> 1. Minutes of the Executive's meeting for 10 December 2012, 11 February 2013 and 3 November 2014. 2. Statutory consultation documents 3. Strategic Outline Programme (SOP) presented to Welsh Government in December 2013. 4. Letter from Welsh Government dated January 31 2014. 5. Options Appraisals for a new Area Primary School in the Bro Rhosyr area. 6. School Organisation Code 2013. 7. Report to the Executive dated 19 September 2016 on the objection to the Statutory Proposal

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ISLE OF ANGLESEY COUNTY COUNCIL	
Report to:	The Executive
Date:	18.6.2018
Subject:	Regional Homeless Strategy
Portfolio Holder(s):	Cllr Alun Mummery
Head of Service:	Ned Michael
Report Author: Tel: E-mail:	Jodie Davies 01248 752171 Jodiedavies@ynysmon.gov.uk
Local Members:	n/a

A –Recommendation/s and reason/s
<p>Recommend that the Executive:</p> <p>R1 approve the approach taken in developing the draft Homeless Strategy and that an outcomes approach is taken in developing the action plan at a regional and local level, part 2 and 3 of this report</p> <p>R2 approve the communication methods for developing the action plan with partners leading up to the consultation period and final approval</p> <p>1.0 Background</p> <p>1.1 National context</p> <p>Part II of the Housing (Wales) Act 2014 provides a new legal framework for homelessness services in Wales. The 2014 Act states that all Local Authorities must adopt a Homeless Strategy in 2018 in order to achieve the following objectives:</p> <ul style="list-style-type: none"> • Prevention of homelessness • Suitable accommodation is provided for people who are or may become homeless; • Satisfactory support is available for people who are or may become homeless. <p>Prior to producing the strategy Local Authorities are required to undertake a local review in line with section 51 of the Welsh Government’s Code of Guidance on the Allocation of Accommodation and Homelessness as set out below.</p> <p>Identify:-</p> <p>(a) <i>The levels, and likely future levels, of homelessness in the local housing authority’s area;</i></p> <p>(b) <i>The activities which are carried out in the local housing authority’s area for the achievement of the objectives as set out above.</i></p>

(c) *The resources available to the authority (including the resources available in exercise of functions other than its functions as local housing authority), other public authorities, voluntary organisations and other persons for such activities.*

1.2 Regional approach

It was agreed by the North Wales Heads of Service to produce a Regional Homeless Strategy.

Establishing a collective understanding and regional approach towards preventing homelessness will have the following benefits:

1. Increase the opportunity for the development of more effective working with key partner organisations, such as the Health Service, who operate on a regional basis to tackle some of the underlying causes of homeless.
2. There will be a consistent approach among local authorities with their interpretation and implementation of the homelessness legislation and in the delivery of homelessness services across the North Wales locality. This will help to reduce the potential for variation in the availability and delivery of services across the region.
3. There will be more opportunities for authorities to share their resources, expertise and specialist services.

The Regional Strategy will include an overarching regional document and a 12 month Regional and Local Action Plan.

The six Local Authorities include: Anglesey, Gwynedd, Conwy, Wrexham, Denbigh and Flint.

The programme to develop a regional strategy is described below and is being facilitated by the Chief Executive Officer (CEO) from the Chartered Institute of Housing (CIH).

The timetable for achieving this is detailed below:



Based on the above flowchart the narrative below shows progress to date.

Stage 1: Local Review has been completed

Project Development Workshop Ltd (PDW) consultancy was commissioned to carry out a local review for Anglesey.

The review took place between March and May 2018 and followed the Code of Guidance and Equal Ground Standard. In addition PDW looked at the following:

- Are services fit for purpose?
- How are contracts and relationships managed?
- How well is the homelessness service delivered with partners?
- Is the capacity within teams appropriate and are team functions achieving their goals and expected outcomes?

Approach

As an independent review of homelessness services the assessment was undertaken inclusively, working with staff and key stakeholders to help identify areas for improvement and to acknowledge the strengths of the services.

The following areas of service delivery were assessed:

- Homeless prevention and homelessness
- Use of emergency and temporary accommodation including bed and breakfast
- How the service works alongside and with the Private Rented Sector

- How prevention funds are used including how rent deposits and bonds are managed

Method used:

- A desktop review of key documents
- A mystery shop of services.
- Interviews with managers, staff and partner organisations who support the Council to prevent and discharge their homelessness duties.
- Focus groups with staff groups, partners and customers
- Observing meetings and wider field work to assess the impact of homelessness services on Anglesey.

2.0 Outcomes

Strengths and areas for improvement as identified in the review, are set out in the table below under the key themes of the regional strategy:

	<u>Strengths</u>	<u>Areas for improvement</u>
1. People		
<i>Youth Homelessness</i>	<ul style="list-style-type: none"> • Regular engagement with young people who are/ have been/ or at risk of homeless – needs are understood and young people support continuous service improvements. • Specific services are available for young people through the Supporting People programme. 	<ul style="list-style-type: none"> • Raise awareness of benefits in 16 – 25 year olds • Innovative solution to overcome barrier of Local Housing Allowance lower than PRS. • Review 16-17 year old joint protocol between Social Services and Housing Options • Unmet need for shared accommodation
<i>Rough Sleepers</i>	<ul style="list-style-type: none"> • Rough sleeper packs are available in Holyhead and Llangefni (main towns). • SPoA is capturing possible hidden homelessness in the form of sofa surfing. • Digartref provide a night stop service offering emergency accommodation for young people. • Cold weather policy in 	<ul style="list-style-type: none"> • Review cold weather protocol to assess what worked well and make any improvements. • Use details from SPoA to map need and identify likely rough sleeping demand.

	<p>place.</p> <ul style="list-style-type: none"> • Housing related support for homeless people over 25 including rough sleepers and people who experience repeat homelessness is a commissioning priority for Supporting People. 	
Complex needs		<ul style="list-style-type: none"> • No data captured on complex cases, needs to be gathered in the future and used to plan services and develop interventions.
Prison leavers	<ul style="list-style-type: none"> • Prisoner Pathway Officer in post <ul style="list-style-type: none"> ○ Well established communication links with the relevant partners. ○ Close effective partnership working arrangements. 	<ul style="list-style-type: none"> • Continue to fund the prisoner pathway <ul style="list-style-type: none"> ○ Early intervention, assessment and intervention to maximise housing solutions.
2. Homes		
Housing First	<ul style="list-style-type: none"> • The Wallich run a successful Housing First project in Llangefni. 	<ul style="list-style-type: none"> •
Improved access to accommodation	<p>Social Housing</p> <ul style="list-style-type: none"> • Under 35s accommodation scheme being developed (self-contained units) in partnership with young people. <p>Private sector</p> <ul style="list-style-type: none"> • Private Landlord Liaison Officer in post <ul style="list-style-type: none"> ○ Point of contact for the private landlords. • Landlord Forum meets regularly: 	<p>Social Housing</p> <ul style="list-style-type: none"> • Unmet need for under 35 shared accommodation and larger properties (4 bedroom+) • Need to reduce the housing market gap with: <ul style="list-style-type: none"> ○ Intermediate accommodation ○ Shared equity schemes • Need to develop and agree a section 95 'duty to cooperate' protocol with RSLs to support rehousing of homeless applicants across the social rented stock on a

	<ul style="list-style-type: none"> ○ Opportunity to share relevant information with private landlords. ○ Offers a support network. ● Rent Smart Wales. <ul style="list-style-type: none"> ○ Proactively encouraging landlords to register & taking enforcement action. ● Syrian Resettlement project <ul style="list-style-type: none"> ○ 3 families have been supported for resettlement. ● Housing Options team have a strong record in sourcing accommodation. ● Empty Homes Strategy has helped to bring empty properties back into use in the private and social housing sector. 	<p>more equitable basis.</p> <p>Private sector</p> <ul style="list-style-type: none"> ● Landlord incentive scheme such as: <ul style="list-style-type: none"> ○ Deposit schemes ○ Financial Assistance for minor improvements ○ Guaranteed rent for empty properties while suitable tenants are found. ● Private landlord support services such as: <ul style="list-style-type: none"> ○ Finding tenants ○ Management Service ○ Dedicated Housing Benefit Office to provide advice/ assistance for benefit enquiries ● Tenant support <ul style="list-style-type: none"> ○ Negotiation/ advocacy to remain in the PRS. ● Syrian resettlement project needs more accommodation in the PRS.
<p>Temporary Accommodation</p>		<ul style="list-style-type: none"> ● Improve risk assessment process (B&B). ● Support for customers in B&B needs to ensure they move on to settled accommodation asap. ● Innovative solution to increase the availability of temporary accommodation. ● Monitoring of B&B use including trends.

3. Services		
<i>Prevention</i>	<p>Access to services</p> <ul style="list-style-type: none"> • Kiosks within the community provide digital access. • Home visits offered by the O Toole staff who provide early intervention services and support. • The Housing Options Team will be piloting a 'triage' system from May 2018. • Partners offer occasional financial assistance to help people in rural areas access services. • Successful use of mediation. 	<p>Access to services</p> <ul style="list-style-type: none"> • Website <ul style="list-style-type: none"> ○ Self-assessment online ○ Map out other providers who offer homelessness prevention services and provide this information. • Waiting time for first contact appointment. • Communication and contact during service. • Monitoring demands on the service • Kiosks <ul style="list-style-type: none"> ○ Limited in their use (access to word, USB point) • Promote services available to support people who may be threatened with homelessness. • Rural barriers such as cost of transport impacting on people's ability to access services.
<i>Mitigation of the impact of Welfare Reform</i>	<ul style="list-style-type: none"> • Improved relationship between Housing Services and Housing Benefit. • Performance on new Housing Benefit claims. • Universal Credit hub set up by DWP to manage the introduction of Universal Credit in the area. 	<ul style="list-style-type: none"> • Welfare Reform project manager • Digital access. • Support to maximise income • Manage the impact of WR • Early intervention <ul style="list-style-type: none"> ○ Debt and financial advice ○ Resolving housing and welfare benefit problems ○ Identify vulnerable tenants before they are in arrears.

<p>Continued collaboration</p>	<ul style="list-style-type: none"> • Homeless Prevention Forum monitor the impact of Wylfa (influx of workers). • There are elements of mainstreaming the homeless service and activities throughout the Housing Services' team. • Work has been carried out to assess the need for a mental health pathway. • Partners organisations are strong in preventing homelessness • SPoA in place. <ul style="list-style-type: none"> ○ Directs referrals to the appropriate provider. 	<ul style="list-style-type: none"> • Equal grounds standard • Service Level Agreement between Housing and Housing Benefits • Develop shared first point of contact form and personal housing plans with partners to demonstrate reasonable steps • Continuation of the Reviewing Officer role. • Hospital pathway • Develop the Mental Health pathway <ul style="list-style-type: none"> ○ Help to access services and sustain tenancy. • Pre-eviction protocol with social housing providers.
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3.0 Regional Planning

Based on the individual reviews from each LA key themes have been identified which form the basis of the regional strategy and will be developed into a local action plan for further consultation with local partners and key stakeholders.

Key themes of the Regional Strategy are:

(1) People

- Youth Homelessness
- Rough Sleepers
- Complex needs
- Prison leavers

(2) Homes

- Housing First
- Improved access to accommodation
- Temporary accommodation

(3) Services

- Prevention
- Mitigation of WR
- Health
- Continued collaboration
- Communication/ raising profile

Based on the Outcomes identified in section 2.0 above the Local Action Plan will look at the following areas:

- Services to help people who are homeless or threatened with homelessness
- Helping to prevent and relieve homelessness
- Supply of accommodation and support services
- Resources
- Performance management and managing plans
- Private rented sector
- Welfare reform and Universal Credit
- Impact of Wylfa Newydd Power Station on the housing market
- Homeless Forum

Stage 4: Consult local partners and key stakeholders

Each Local Authority is required to consult their local partners and key stakeholders on the outcome of the Regional and Local issues identified.

4.0 Communication Plan

The aim of the consultation is to seek feedback on homelessness strategy and identify how this can be achieved with partners with the objective of:

- Preventing homelessness
- Ensuring suitable accommodation is provided for people who are or may become homeless
- Ensuring satisfactory support is available for people who are or may become homeless

Target Audience:

- a) The Homeless Prevention Forum which, made up of the following partners who deliver homeless prevention services:
 - Housing Benefit
 - Shelter Cymru
 - RSLs; North Wales Housing, Pennaf and Grwp Cynefin
 - Supporting People providers; the Wallich, Digartref Ynys Môn, CAIS
 - Citizen Advice Bureau
 - Betsi Cadwaladar Health Board
 - Community Mental Health
 - North Wales Police
- b) The Service User Homeless Prevention Forum which, is made up of customers who have been or are affected by homelessness and accessed homeless prevention services.

- c) Customer who are likely to be affected by homelessness
- d) Results from results of questionnaire from customers conducted during Homeless Review
- e) Elected Members
- f) Council Officers including Senior Management

Engagement:

	Description	Method	Date
1.	Report to the Executive Committee.	Agree information provided within this report & communication plan.	June
2.	Hold a workshop with the Homeless Prevention Forum (See below) including Service Users.	One off event. Interactive session to gather the views of partners on the purposed action plan.	June
3.	Final draft public consultation	Available online Paper copies available in 'Contact Mon', JE O'toole Centre, Libraries. 4 drop in sessions within the community. Partners will be asked to encourage customers to take part.	August – September
4.	Final draft for to be scrutinsied by Corporate Scrutiny Committee following consultation.		October
5.	Approval by Executive Committee		December

--

B – What other options did you consider and why did you reject them and/or opt for this option?
--

Housing Act, 2014 requires LAs to produce review of its homeless service and subsequent strategy
--

C – Why is this a decision for the Executive?
--

Approval of Strategy is required within the Housing Act, 2014

D – Is this decision consistent with policy approved by the full Council?
--

--

DD – Is this decision within the budget approved by the Council?

yes

E – Who did you consult?		What did they say?
1	Chief Executive / Strategic Leadership Team (SLT) (mandatory)	Approved 29/5
2	Finance / Section 151 (mandatory)	Approved 29/5
3	Legal / Monitoring Officer (mandatory)	Approved 29/5
4	Human Resources (HR)	
5	Property	
6	Information Communication Technology (ICT)	
7	Scrutiny	
8	Local Members	
9	Any external bodies / other/s	

F – Risks and any mitigation (if relevant)

1	Economic	
2	Anti-poverty	
3	Crime and Disorder	
4	Environmental	

5	Equalities	
6	Outcome Agreements	
7	Other	

FF - Appendices:

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

PRAWF BUDD Y CYHOEDD PUBLIC INTEREST TEST

Rhaglen Ailsefydlu Ffoaduriaid Syria

Nid yw Paragraff(au) i gael eu cyhoeddi'n unol â pharagraffau 12, 13 & 14 rhan 1

Atodlen 12A Deddf Llywodraeth Leol 1972 / Paragraph(s) Not for publication by reason of paragraph 12,13 & 14 of part 1 of Schedule 12A of the Local Government Act 1972:

12. Gwybodaeth ynghylch unigolyn penodol / Information relating to a particular individual

Prawf Budd y Cyhoedd yn berthnasol (gweler isod) / Public Interest Test applies (see below)

13. Gwybodaeth sy'n debygol o ddatgelu pwy yw unigolyn / Information which is likely to reveal the identity of an individual

Prawf Budd y Cyhoedd yn berthnasol (gweler isod) / Public Interest Test applies (see below)

14. Gwybodaeth sy'n ymwneud â materion ariannol neu fusnes unrhyw berson penodol (gan gynnwys yr awdurdod sy'n dal y wybodaeth) / Information relating to the financial or business affairs of any particular person (including the authority holding that information)

Nid yw gwybodaeth sydd dan baragraff 14 yn wybodaeth eithriadig dan y paragraff hwnnw os oes angen ei chofrestru dan:- / Information falling within paragraph 14 is not exempt information by virtue of that paragraph if it is required to be registered under:-
Deddf Cwmnïau 1985 / the Companies Act 1985 Deddf Cymdeithasau Llesiant 1974 / the Friendly Societies Act 1974 Deddf Cymdeithasau Llesiant 1992 / the Friendly Societies Act 1992 Deddfau Cymdeithasau Diwydiannol a Darbodus 1965 i 1978 / the Industrial and Provident Societies Acts 1965 to 1978 Deddf Cymdeithasau Adeiladu 1986 / the Building Societies Act 1986; neu / or Deddf Elusennau 1993 / the Charities Act 1993

Prawf Budd y Cyhoedd yn berthnasol (gweler isod) / Public Interest Test applies (see below)

Y PRAWF – THE TEST

Mae yna fudd y cyhoedd wrth ddatgelu oherwydd / There is a public interest in disclosure as:-

Bod y cyhoedd yn ymwybodol bod ffoaduriaid wedi eu cartrefu yno.

Y budd y cyhoedd with beidio datgelu yw / The public interest in not disclosing is:-

Llai o debygolrwydd i'r ffoaduriaid gael eu hadnabod a wynebu casineb neu thrais.

Argymhellad 9032 Mae budd y cyhoedd wrth gadw'r eithriad o bwys mwy na budd y cyhoedd wrth ddatgelu'r wybodaeth.

Recommendation - The public interest in maintaining the exemption outweighs the public interest in disclosing the information.

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