



# City and County of Swansea

## Annual Report Director of Social Services



2015/16 version 5

# A City that Cares

The people of Swansea are our first priority.

They make our city unique.

We nurture our young, safeguard the vulnerable and lend support to the frail because it's the right thing and the moral thing to do.

We are part of the Healthy Cities network promoting good health and addressing health inequality in our communities.

Our city is hard-working, caring, cosmopolitan and ambitious.

Our communities speak more than 100 languages and we're proud of our cultural diversity and community cohesion.

We are proud to embrace those from around the world who today see our city as a beacon of hope and a haven from hate or persecution.

Together with our communities we are challenging poverty, promoting learning and supporting all our residents to make the most of their talents so they can live independent lives, happy, healthy and safe.

**Also** Swansea Council is the first in Britain to sign up to the United Nations Rights of the Child and we are the first Welsh City of Sanctuary.

**Taken from The Swansea Story** – a story developed by senior officers and Cabinet Members to give a simple and clear view of the city and what the Council is aiming to achieve.

# Social Services Annual Report 2015-16

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# 1. Welcome to City and County of Swansea

## Annual Report of the Director of Social Services

This Annual Report is a report on how Social Services has performed during the period April 2015 – March 2016, and how well prepared the Council is to implement the Social Services and Well-being (Wales) Act by 6<sup>th</sup> April 2016.

The Annual report gives the citizens of City and County of Swansea information about how well the Council has been performing in meeting its social care responsibilities, and the difference these social services have made to the quality of life for the people we support. It also outlines areas in which we are making further improvements. **There is a Summary of Progress in 2015/16 in Section 2.** All our efforts are geared towards the implementation of the new Act which came into force in 6<sup>th</sup> April 2016. **Section 3 looks in detail at Swansea's Readiness for the Social Services and Well-being (Wales) Act 2014**

This Act introduces a new legal framework, such as increased rights for carers, a duty to provide preventative services and new duties to provide extended information and advocacy services. Most importantly it introduces a national eligibility framework for assessing whether people meet the threshold for managed care and support. Swansea is well prepared to meet these new requirements, keeping citizens informed of changes that might affect them.

During this period of change, it is particularly important to have a stable and effective management team. We have now achieved this during the year. Julie Thomas has been confirmed as Head of Child and Family Services, and together with her senior management team, has done a tremendous job of leading further improvements in Children Services. It remains the case that the single most important measure of our success is the quality of practice that takes place each time we knock on someone's door. I continue to receive numerous examples of compliments received by staff in Children Services recounting stories of social work practice, working with the most vulnerable children and their families, which are absolutely inspiring. The **Report by Head of Child and Family Services Section 4** looks back on some of these achievements and then sets out the priorities for the year ahead.

There are plans to continue to drive forward change in how Children Services, working with partners from prevention and early intervention, health,

education, police and the third sector, can further improve our collective support to families. **Tackling domestic abuse** has been identified by the new Public Services Board, as a strategic priority locally. Swansea has a 3yr Domestic Abuse Delivery Plan (2014 – 2017) together with Annual Action Plans which details the steps we are taking in partnership to combat domestic abuse and the wider issues of violence against women locally. Prevention and Early Intervention (PEI) is a priority area with Child & Family services and PEI teams to develop appropriate timely intervention responses. We aim to build on our existing work in schools, youth clubs etc to enable all children and young people to receive sessions on healthy relationships and respect. The new Violence Against Women, Domestic Abuse and Sexual Violence Act will have some duties placed on education which will enhance our work.

In relation to Adult Services, Alex Williams is completing her first year as our Head of Adult Services, and working with the service to reflect on their own journey and to use this feedback in shaping a new vision for change, the **Adult Services Improvement Programme** to support this agenda.

This programme will be vital in changing how citizens and communities can access care and support, and Alex is busy finalising a management team to deliver this scale of change. I am confident that the new management structure will leave us well placed deliver better outcomes, to support staff to continue delivering excellent social work and social care practice, and to meet the aspirations of the Social Services and Well Being Act. **The report of Head of Adult Services can be found in Section 5.**

In these challenging economic times, our priority remains ensuring that our most vulnerable citizens are safe and supported, and that carers have access to the best possible support. We have to manage our resources effectively. Part of our response to the challenges we face has been an increased focus on how we can work most effectively with the range of Health partners in primary and secondary care. Arrangements are well developed in Swansea for increased joint working within the local GP community network areas to improve communication and sharing of information across health and social care.

Since April 2013, we have been working closely with our ABMUHB colleagues on plans for an integrated model of health and social care. The aim is to develop a fully integrated approach to care provision, one which will improve the experience of people. In short, health and social care will be co-ordinated, and work together in the best interest of our citizens

The Act also brings welcome changes to services for looked after children, and takes our social workers into new places such as secure estates, for example prisons, to assess the social care and support needs of prisoners awaiting release. Through the Western Bay Partnership Board, and locally, we will continue to work through the many implications of the Social Services Act and to make sure we are following through on the new requirements.

Safeguarding, coproduction, recognising strengths, building resilience, working within supportive families and communities, promoting safe independence and well-being for citizens and carers are all key concepts threading through the improvement programmes in social services. Under the leadership of a People Directorate, Swansea has established a Future Generations Board to ensure that all service delivery holds the same public service values, and is focused on well-being goals to achieve a better and lasting quality of life for all.

We have to stay firmly on course on the journey of safeguarding those most vulnerable people, of working closely with the families of children and young people, of integrating care and support pathways with partners to make effective use of early help and preventative support all of which is targeted work aimed at building resilience.

We will carry on building on the significant service changes already put in place through our improvements plans and by testing out innovative ways of working. The main aim is to improve our performance, to achieve better outcomes for people and safely managing the increasing demand arising out of a demographic trend of an ageing population often with multiple, complex needs. **The Latest Performance and Activity Tables are available in Section 6.**

We will continue to reduce our service costs where possible through effective commissioning, whilst at the same time ensuring that services are positively experienced by those who use and visit them, and delivered to the highest possible standards. I aim to visit as many services and teams as possible during the year, and to listen to these experiences first hand.

Clearly the transformation of social services is a crucial part of the Sustainable Swansea- Fit for the Future programme, and we are working more closely than ever to drive change within core functions such as financial assessments, charging, business process change, procurement and commissioning.

Finally I would like to take the opportunity to thank all social services staff, our corporate management team, cabinet members, and elected members for their engagement, commitment and particularly the support that social services has continued to receive over the past year, which is vital in helping to continue to improve and deliver our services in the face of increasing demand and pressures.

There has been a lot of work and positive change to report over the last 12 months, and this progress will continue next year and beyond. We hope you find this Annual Report both interesting and informative.

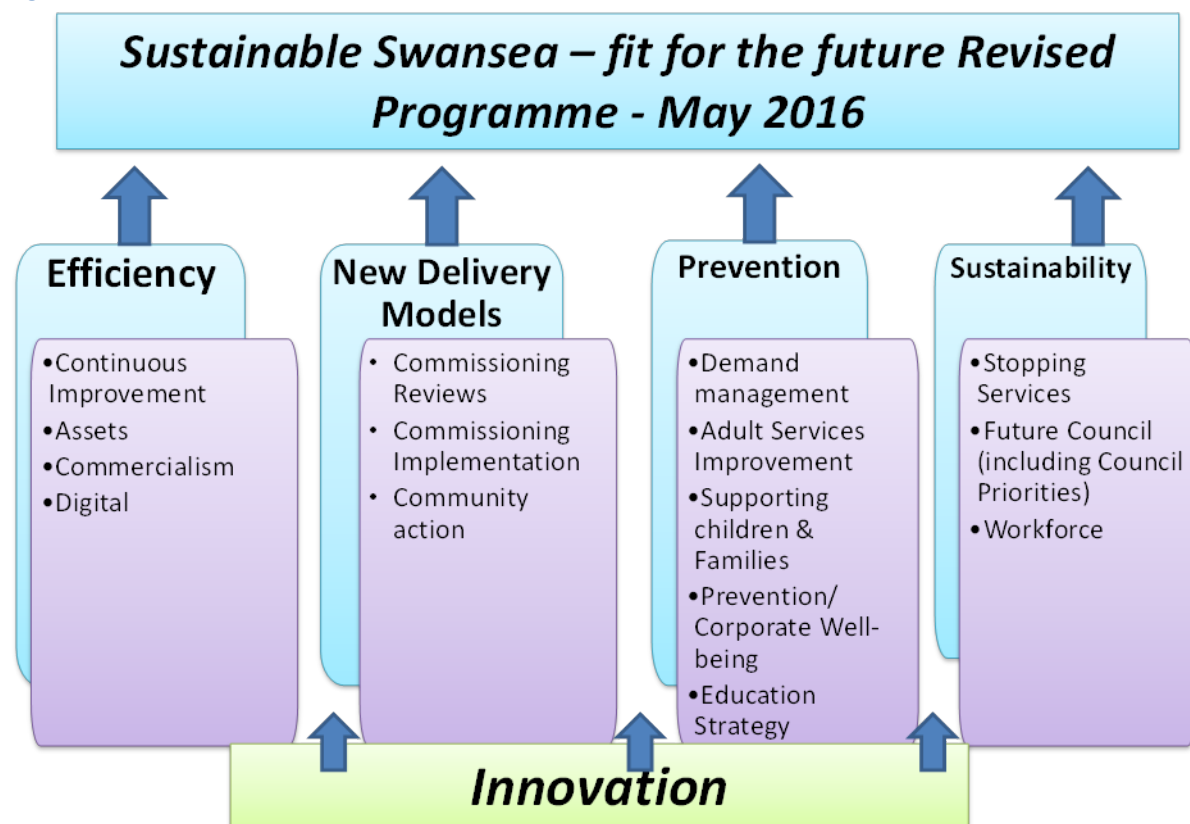
**David Howes,**  
**Chief Social Services Officer**  
**July 2016**

## 2. Readiness for the Social Services and Well-being (Wales) Act

This section sets out the key priorities for change in Swansea, and how these are supporting the requirements of the Social Services and Well-being (Wales) Act, which comes into effect on 6th April 2016.

### 2a) City and County of Swansea's Transformation Sustainable Swansea – fit for the future programme

Figure 1. Sustainable Swansea



The Top 5 City and County of Swansea Corporate Priorities (taken from **Corporate Plan 2015-17**) are:

1. **Safeguarding Vulnerable People**
2. **Improving Pupil Attainment**
3. **Creating a vibrant and viable city centre**
4. **Tackling Poverty**
5. **Building Sustainable Communities**



Sustainable Swansea –Fit for the Future is a whole council approach, an agile transformation programme that aims to ensure we are well placed to meet current and future changes. The main objectives of the programme are to:

- transform services
- deliver better outcomes for citizens
- achieve financial sustainability

Within this programme, social services are fully engaged across all four pillars, and within many of the work-streams, such as prevention and well-being. Welsh Government has a national picture and approach to prevention through new legislation within the Social Services and Wellbeing Act and the Future Generations Act. The strategic priorities for Sustainable Swansea’s corporate approach to prevention, set as outcomes, and taken from **Swansea Council’s Prevention Strategy June 2016 (draft)** are:

- Every child has the best start in life, and is ready for school
- Every adult is able to maintain their independence for as long as possible
- Every young person reaches their full potential in education, learning and employment
- Ensuring every child and young person can maximise their speech and language skills
- Ensuring children, young people and their families are supported based on need, in the right way, at the right time, by the right person.
- 

This ‘whole Council’ approach aims to improving people’s wellbeing, and promote access to universal services in order to stop or delay more complex services being needed. It also emphasises a localised approach to prevention and early intervention, through a tiered approach. The **Swansea model** is illustrated on **Page 33**.

#### **Swansea’s Focus on Prevention & Early Intervention**

An example of this is the expansion of **Local Area Co-ordination**.

Swansea is working closely with local communities to ensure that people can be supported in their own homes at an earlier stage, to be less isolated, gain access to a wider range of support services, and to remain as independent for as long as possible.

Additional Local Area Co-ordinators have been recruited and trained, with aim being for this work to take place across all Swansea’s Wards/Locality areas.

Also as part of the Council's Sustainable Swansea program, there are currently five commissioning reviews being undertaken within Social Services. These important reviews cover domiciliary care, older people's day services, all other day services, residential care and family support services.

## 2b) Safeguarding vulnerable people in Swansea

The challenges facing social services are mirrored locally in safeguarding our most vulnerable people, which is why the City and County of Swansea has this as the number one corporate priority.

Where there are significant financial pressures, welfare reforms and organisations changing rapidly in striving to 'do more with less', there is the potential for increased risks of abuse and harm.

The main focus, rightly, of the Regional Safeguarding Boards' attention over the past year has been preparing for the implementation of the Social Services and Well-being (Wales) Act 2014, which from 6<sup>th</sup> April 2016 placed the Regional Board onto a statutory footing for the first time.

Western Bay has built strong partnerships within the Councils, Health, Police, Probation and the Third Sector amongst others, as each Regional Board ensures that there are robust arrangements in place to address the increasing number of complex issues our communities face, e.g. human trafficking, child sexual exploitation, domestic abuse

In looking to the future, the Western Bay Safeguarding Boards have been reviewing their leadership, structures, funding arrangements, membership and terms of reference, and setting the priorities for work programmes.

There has already been much progress, with auditing and monitoring of safeguarding cases/outcomes to improve practice, providing more training for health and social care staff in the areas of Safeguarding, Mental Capacity and Deprivation of Liberty Standards, raising the awareness of safeguarding issues to improve prevention

City and County of Swansea has been busy strengthening its corporate safeguarding governance and policy to support the "everybody's business" approach we adopted some years ago. This area of work ensures that all the

Council's public facing services and Council representatives have safeguarding in the forefront when interacting with citizens and in our communities. There are safeguarding leads/ champions in each Council service area who can help staff deal with issues they encounter and direct these to expert help when necessary.

Looking ahead to our priorities in 2016/17, many are highlighted in the Heads of Service reports. I would personally note:

- increased user and carer engagement in the safeguarding processes
- developing Quality Assurance and improved Performance information to support safeguarding activities
- strengthening arrangements across partner agencies to learn the lessons from cases, complaints and practice reviews

I would like to take this opportunity to acknowledge the hard work and commitment of the members of the Regional Safeguarding Board, the Corporate Safeguarding Group, the support of our partner agencies and the hard work of our staff in meeting these challenges on a daily basis.

## 2c) What Swansea citizens are telling us?

Swansea is developing and implementing a fully 'citizen centred', sustainable model of social care. This approach is about people having choice and control over the support they need to live their life as independently as possible. It is likely to take a number of years to fully embed a citizen-centred approach, but already the changes are apparent and achieving positive outcomes. These are significant changes for social services staff, providers, service users, carers and families as they are placed at the centre of their care and support planning. Feedback from the children, young people older adults, carers and families who are the recipients of social work is central to how we work and we use this experience, the stories of achievements and also where things haven't gone so well to focus learning and to continuously improve practice.

To ensure people have a strong voice and control, we have carried out a lot of engagement work with citizens and communities throughout Swansea. We are currently mapping out the range and products of this work in readiness for next year's population assessment. An important example of how we work is Swansea's use of Local Area Coordination, in which local communities are empowered to work on shared issues and to determine their own response.

Citizen volunteers have been fully involved in the recruitment of the LAC Coordinators for each of the first three areas of the project, which has now been extended to six areas of the city.

The Older People's Commissioner set out a Framework for Action to improve the quality of life and care of older people living in care homes in Wales. These improvement priorities are at the heart of Swansea's adult service improvement programme, the commissioning review and within the Council's focus on safeguarding as the number one priority that is "everybody's business".

## 2d) Western Bay Regional Partnership Board

Social Services, Health and other key partners such as the Third Sector are expected to work in partnership to improve individual and population well-being. In order to do this, local authorities must promote co-operation' across its services and with, 'relevant partners.' A new Regional Partnership Board has been established to improve outcomes and well-being of people, as well as improving the commissioning of services to meet future needs. Amongst the key aims of the board will be to facilitate cooperation, partnership with third sector and integration of health and social care.

Western Bay Regional Partnership Board, though a steering group will oversee the production of a population assessment that will identify the extent to which there are citizens and carers who need care and/or support and future trends. This assessment will identify the extent to which needs across target groups are not being met both locally and regionally, and the range and level of services required to meet their needs in the future, to develop the range of preventive services and how more services can be delivered in the Welsh language.

**Youth Offending Service (YOS)** There is now a Western Bay Youth Justice and Early Intervention Service (WBYJ&EIS) and Management Board, and all local management arrangements have ceased. There is an expectation that YOS can reduce the number of children and young people entering the youth justice system year on year. The Western Bay Service achieved this in year, reducing the number across the region by 36.6% compared with a South Wales average reduction of 19% and Welsh average of 31%. There are two areas of local

improvement: young people accessing education training and employment (ETE) and tackling the new emotional and mental health measures.

**Western Bay Regional Adoption Service** aims to increase the recruitment of local adopters by 100% on a phased approach given the high number of looked after children across the Western Bay region. This can then significantly reduce the time that children spend waiting for an adoptive placement. Despite staffing issues having placed pressures on the service since it became operational, there are positive trends across the service's effectiveness measures. The service is also making a positive impact in reducing the time it takes to place children from the Placement Order being granted to placement date.

## 2e) Social Services and Well-being (Wales) Act Implementation plan

The Social Services and Well-being Act 2014 is a once-in-a-lifetime opportunity to move away from traditional models of delivering social care services to one which 'promotes the wellbeing of citizens and carers who need care and/or support.' Act guidance states that 'where intervention is needed, it should always be proportionate and timely' and that 'local authorities must consider personal outcomes and co-produce solutions with people themselves.' Under the act, social workers must see the people we serve as the greatest resource, to identify their strengths as assets and work with them to find the solutions that help them to achieve 'what matters to them'. We must ensure people have greater voice and control over the care and/or support they receive. Where people are socially isolated or lack capacity we must consider the offer of an independent advocate to help agree the care and support they need.

There is no doubt that implementation of the Act is a challenge for City and County of Swansea, and one that requires changes in culture, and in how we operate. We are making important changes locally, and the reports by Heads of Service in this Annual Report will look at how each service area is getting ready for the making the changes needed. At the same time implementation of the Act is taking place on a regional basis through a Regional Partnership Board.

## **2f) Meeting the support needs of Carers**

The new Act promotes the well-being and support needs of carers and young carers, all of whom make a vital contribution to Swansea's sustainable model of social care. Our social work staff, who work within local communities, and the range of partners, including commissioned services such as Swansea Carers Centre and Crossroads, identify and support carers on a daily basis.

We take time out during each year to draw carers together to share their experiences and requests for change. Carers' Rights Day and Carers' Week are used as opportunities for engagement and Swansea has been successfully facilitating events for a number of years. As well as promoting preventative opportunities for carers, indirect assistance is available to promote well-being and to access support. Carers can expect to be offered an assessment of need if they appear to have support needs in their own right regardless of whether they live with the cared for person.

## **2g) Delivering the Active Offer/ Mwy Na Geiriau**

The Welsh Language (Wales) Measure 2011 established a legal framework to impose duties on certain organisations to comply with certain standards in relation to the Welsh language and the "Active Offer" to citizens.

Based on the 2011 census, 11.4% of Swansea's population, around 27,000 people, are Welsh speakers.

As a whole Council, Swansea is fully aware of the requirements of the Welsh Language (Wales) Measure 2011, and staff are endeavouring to put into place systems are in place systems to ensure compliance. Health and Social Care services are also subject to Mwy na Geiriau (More than Just Words), the follow-on strategy. Social Services are focused on the importance of language need and delivering the active offer, as part of Information, Advice and Assistance, through the assessment of need and within services. Senior managers have placed a strong emphasis on supporting staff to be able to meet the requirements of both Mwy na Geiriau and the Welsh Language Standards.

Whilst some of the requirements of the Welsh Language Measure and Mwy na Geiriau framework are already being carried out, we need to ensure

consistency. The biggest challenges and priorities are to ensure compliance with all of the standards across all services in the prescribed timescales within the resources we have available.

Swansea has a corporate lead for Equalities and the Welsh Language, and works in conjunction with a Social Services Welsh Champion on an implementation plan to progress this work.

Some key issues are likely to remain as challenges for some time:

- The reasonableness and proportionality of some of the proposed standards in the context of fewer resources
- The limited number of Welsh speakers currently employed by the Council
- How staff are deployed to match potential demand for take up of the active offer.
- A particular shortage of Welsh speakers in key front line roles; though we do have systems in place to mitigate this, e.g. front door and duty teams have agreed to share access to a named Welsh speaker.

Swansea's difficulties in attracting appropriately fluent Welsh speaking officers to key posts will have to be addressed through regional and corporate workforce development strategies.

## h) Workforce Development

A Regional Workforce Development Steering Group has now been established, comprising of existing partners from local SCWDP partnerships across Western Bay, together with project leads from within the Western Bay Programme. A launch event 'Workforce Learning & Development Strategy – Setting the Direction for Western Bay to Deliver on the Social Services and Well-being (Wales) Act' took place in September to engage with the wider regional partnership and encourage continued membership from and extend wider membership within Health partners and providers.

The Western Bay Partnership Board is fully committed to the aims and objectives of the Social Care Workforce Development Plan and the way in

which structured development and training can support strategic objectives and delivery of high quality social services. A training programme, to make sure frontline staff are fully engaged in duties under the Social Services and Well-being (Wales) Act 2014, and to ensure they will be competent to operate under the new framework, has begun and will continue throughout 2016-17. Signs of Safety (SoS) and Solution Focussed Thinking (SFT) continue to be implemented and embedded in practice as part of the Looked After Children's Reduction Strategy in Swansea and the tools are incorporated into all training delivered to staff working in Child and Family Services.

Swansea has become the first authority in Wales to be able to deliver accredited Positive Behaviour Management (PBM) training to staff working with specific client groups such as people with learning disabilities and dementia who have expressive behaviours that challenge services. Approximately 200 staff have now been trained in the theory and practical elements.

We aim to work together across the health and social care sector to ensure that as many staff as possible take advantage of the many learning opportunities available to them. We also continue to work in partnership with ABMU in relation to the delivery of PBM across learning disability services, with the opportunity to train an additional PBM Trainer later this year.

**Swansea Workforce Data**

|                  | <b>Adult Services</b> | <b>Children &amp; Young People Services</b> | <b>Other staff</b> |
|------------------|-----------------------|---|--------------------|
| No. of employees | 1257                  | 361   | 162                |



## 3. Summary of progress in 2015/16

This section sets out the main areas of progress within social services during the past year.

Between 2014 and 2015, Swansea's population increased by approx. 1,100 (+0.45%) to 242,400. This is higher than the average increase across Wales (+0.23%) and the fifth highest annual growth rate (%) of Wales' 22 authorities. Swansea remains the second most populated local authority in Wales with the latest level of growth (2014-15) behind only Cardiff. The supporting data released with the estimates suggests that Swansea's population growth during the year to June 2015 was driven by net international in-migration (+1,100).

### 3a) Summary of Achievements

Much of the performance across Children and Adult Services has been really strong this year. Whilst national performance indicators play only a small part in how we measure improvement, it is still significant that our end of year performance has been the best ever in many of the areas that Welsh Government count, and that our activity levels remain high.

Managers, together with our performance team and a number of business support colleagues, have been working extremely hard to develop a performance framework for Adult Services that matches what has worked well in Child and Family Services for a number of years, and which properly reflects all of the hard work that is taking place and will allow us to make sure we target our resources to best effect.

This is a period of major change in social care in Wales. The Social Services and Wellbeing (Wales) Act 2014, implemented on 6th April 2016, introduces significant changes to legislation at the same time as we face budget challenges, higher service demand due to economic demographic changes, improved survival rates and higher expectations, funding and capacity issues in the third sector, and increasingly complex pathways between agencies supporting children and families. Swansea is well placed to meet these challenges, having demonstrated improvements over recent years alongside efforts to transform services with partners to meet future requirements.

We have recently received hugely positive feedback from inspection of our commissioning arrangements for domiciliary care and supporting people, our flexible support team, our fostering service and our care planning arrangements.

The Youth Offending and the Adoption Services, both now delivered within the Western Bay Partnership, have both recently reported strong and improving performance post regionalisation.

Our arrangements to develop a post-16 service through a genuine collaboration between children services, the third sector and other partners are well advanced and expected to leave us well placed to start genuinely innovative support to some of the most vulnerable young people in Swansea.

Social Services have received numerous compliments in relation to the work of staff and services across Children Services in relation to their expert practice with children and families; within adult services compliments include work taking place in residential care, day services, the assessment and care management teams, intake and other services.

Our commissioning team and the integrated community hubs did a fantastic job in safely managing the transfer of care packages following the recent failure of a local domiciliary care provider. We are working with providers and partners to build up resilience, early warning and quality monitoring within the local and regional social care market.

Following the unanticipated ending of the regional arrangements for commissioning a direct payments service, staff from across the Council have worked to a really challenging deadline to establish an in-house direct payments service. These new arrangements will provide a great opportunity to be creative in supporting more people to use direct payments as a better alternative to more traditional packages of care.

Colleagues from Swansea and the region presented a workshop showcasing Local Area Coordination at the national Association of Directors of Social Services Annual Conference. There continues to be wide interest in these developments, which could change how communities access care and support.

Swansea has a strong presence on the International Signs of Safety stage, and staff are regularly attending the Gatherings (learning events) to present and

share on how we are applying the Signs of Safety methodology to ensure children and families are genuinely at the centre of planning during case conferences and looked after children reviews.

### 3b) How well did we perform in 2015/2016?

Overall, the performance for Adult Services is improving:

- Although for **SCA001 Delayed Transfers of care**, Swansea has met the target range, this is an area of performance we still aim to improve, as people continue to experience lengthy waits in hospital for services to become available. We continue to work with colleagues in the hospitals to try and expedite discharges where possible and minimise those individuals delayed in hospital once medically fit due to social care reasons.
- In relation to **AS4 Percentage of clients returning home following reablement**, although overall performance for the year is below target, performance in the latter part of the year it has considerably improved. New management arrangements have led to a keener focus on reablement and ensuring the focus is on people returning home rather than entering long term care.
- Whilst **SCA002a Older People supported in the community** has fallen this year, our performance in terms of the rate of older people supported is expected to be broadly in line with the Welsh average. The **SCA002b Rate of older people in care homes per 1,000 population** is decreasing and consequently going in the right direction.
- Significant progress has been made in relation to **SCA007 Care Plans reviewed in timescale** which can give us confidence that the people we support are receiving the appropriate level of care and their support needs are being met.
- **SCA / 018a Percentage of carers who were offered an assessment** of their needs in their own right, remains high (this year = **95%**; last year = 95%).

Within Child and Family Services there has been another good year of sustained performance in key areas:

- There is a further reduction in children placed in residential settings. Despite the increase in the **number of children becoming looked after** (LAC), the overall **LAC population** has declined, indicating that children are achieving permanence quickly.
- Performance in social work assessment activity is high, and improving, with a significant upward trend in **SCC011 Child being seen / seen alone as part of assessment**. This level of performance, which has exceeded target, is a good indicator of how the Signs of Safety framework is more and more embedded within the service.
- Where performance has not reached target, generally this is by a very small percentage and due to pressures within that area of the service, for example the service performance and quality unit, which have been resolved.
- **SCC033c Formerly looked after children in education, employment or training** is a Council priority, and this will be addressed via local partnerships and supported by the newly commissioned 16+ service which will be co-located in “Info-nation”.

**Detail on Activity and Performance during 2015/16 is available in Section 6.**

### 3c) Improvement actions set for 2015/16

Clearly there are important challenges for social services in the year ahead facing increasing numbers of people, with higher levels of social care needs with fewer resources at our disposal. The Social Services and Well-being Act comes into force, and this provides a new statutory framework within which we have to operate. Our work in readiness for the many requirements is detailed in the next section.

In Adult Services, a Service Improvement Plan is under development with the emphasis on putting into place the management structures, staffing and resources to take forward a big change agenda. Important changes include focusing on improving the integrated services delivered jointly by health and social care to provide better services for frail older people and reducing demand across the range of services.

Intermediate Care can help prevent the need for long term care or hospital admission, whilst improving domiciliary care to focus on the care and support needed by those most frail people and those with complex long term needs. Anticipatory care can help target support to those people that GPs, nurses and social workers are most worried about. A review of assistive technology can help us identify new and innovative ways of managing needs in people's own homes, whilst many people are helped to remain at home through use of the Joint Community Equipment service and by carrying out appropriate adaptations.

City and County of Swansea has to provide support to citizens to enhance their well-being and to help prevent needs from escalating. Adult Services will continue to work with partners, both within and outside the Council, to promote these opportunities for prevention and early intervention, and to safeguard those most vulnerable in our communities. Over the next year we are expecting commissioning reviews to be taken forward in a way that supports a new Adult Services model, with options for changes in how we provide residential care, day services and domiciliary care being considered and consulted upon. We will clearly need to invest in the development of a skilled and motivated social care workforce as we transform services.

Within Child and Family Services, as identified within the service plan, the focus will also be on safely managing demand and the high volume of work held within the service, reducing demand at the front door and the CINCS (children in need of care and support) population, through close collaboration with early intervention and prevention services, supporting early identification of complex needs, and reducing emergency placements which also impacts on placement stability.

## 4. Report by Head of Child and Family Services

It is very pleasing to be able to reflect and report back on a year of continued improvement in Child & Family Services during 2015/16.

Child and Family Services continues on a journey of change, and remains focused on achieving best possible outcomes for children in need of care and support, and their families.

In Child and Family Services, our journey takes in the following:

- Best outcomes are best achieved when children are supported through safe, stable and supportive relationships, be that with their birth, foster, adoptive families or through kinship care.
- Excellence in social work practice (reclaiming social work) not only by social workers but by senior practitioners, team leaders and those in leadership roles, and within the framework for Continuing Professional Education and Learning (CPEL).
- Further embedding of Signs of Safety, solution-focused models of practice that empower social workers in their direct work with children, families and partners to deliver better outcomes for children and families.
- Improved and seamless access to intensive and skilful support for families and children on the 'edge of care'
- Achievement of a sustainable Child and Family Services over the next 3-5 years, through a model that can meet future challenges and opportunities, and to deliver on financial commitments
- A collaborative/regional approach to commissioning of child placements to ensure best possible quality, accessibility and value is achieved
- Partnership working within the local authority and with other public service agencies including health, education and police to promote child protection, safeguarding and corporate parenting

Child and Family Services are well underway in rolling out a programme of transformation required to deliver a Sustainable Social Services and meet the requirements of the Social Services & Well-being Act. Our whole service implementation of Signs of Safety and Solutions Focused Thinking is central to the changes as the basis of all work with families to build resilience into their lives and with children in need of managed care and support to help them achieve the best possible outcomes.

## 4a) Improving outcomes for children and families

Swansea has a population of over **241,000**, which is increasing number since the 2011 census (239,000). Around 20% of the total local population (**47,130**) are children aged from 0 to 17.

Child and Family Services provided direct support to **3248** Swansea children in 2015/6.

Of this number of children who needed managed care, there were:

- Children who needed to be protected (CPR) in year = **526**
- Children who were looked after during the year= **697**

In Swansea the rate of child social care users, at **43 per 1,000** population aged 0-17, is higher than an All Wales rate of 39, though similar to those within comparable authorities (M4 corridor rate, also 43). Between 2002-03 and 2014-15, the rate of child social care clients per 1,000 population aged 0-17 **increased by 17%** in Swansea. This compares with a 21.4% increase across Wales.

We recognise that these numbers of children needing statutory services are likely to be too high, certainly for the local authority and communities to sustain, and in looking forward to the well-being of future generations. Swansea has for the past three years, implemented a 'Safe Looked After Children (LAC) Reduction Strategy' to help to focus our efforts on rebalancing the system towards prevention and early intervention. This has proved challenging at a time of austerity and welfare reforms, though Swansea's end of year LAC population, around **500**, is the lowest for several years.

Our Senior Management Team is reviewing the drivers within Swansea's Safe LAC Reduction Strategy to ensure that more children are getting the care and support they need both earlier, with the quicker impact toward the best outcomes.

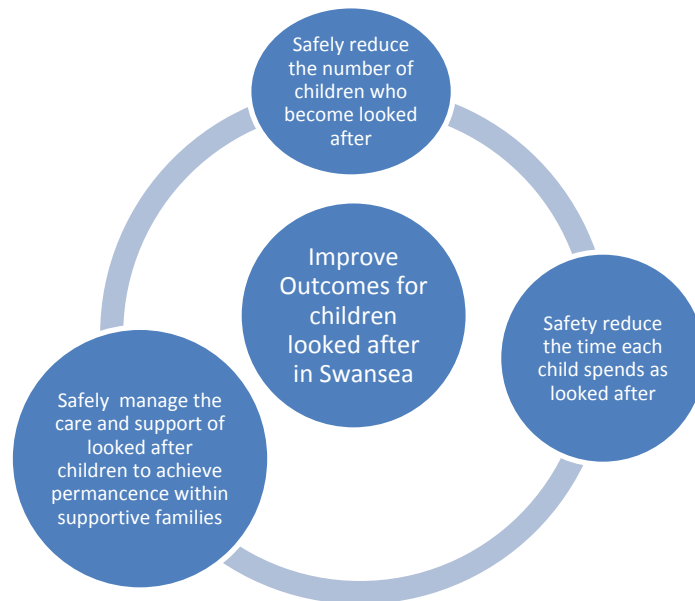


Figure 2. Safe LAC Reduction

In line with the All Wales Child Protection Procedures 2008 and taking some learning out of the Munro review of Child protection 2011 (in England), Swansea believes that high quality social work practice can make a profound and direct difference within the lives of children, young people and to families

Child and Family Services in Swansea has, for some years, implemented a whole service practice framework 'Signs of Safety' supported by other approaches such as 'appreciative inquiry', 'motivational interviewing' and 'solutions focused thinking'. 'Signs of Safety' places a high value on relationship building between children, their social workers and families. This practice framework is embraced and embedded at every level of the service, and Swansea has been attracting interest from services across the UK and is respected on a worldwide basis for our implementation of the approach. We cannot stand still with this approach, and Swansea is continually looking to learn and improve practice.

A particularly positive feature of the service offered is the routine way in which social workers see children, see them alone and build robust, lasting relationships with them, so that they know them extremely well. Our performance in these areas has improved in 2015/16. This relationship forms the basis of a highly effective 'reclaiming social work' agenda in City and County of Swansea, with a range of evidence-based interventions to help protect children from risk of harm. Good social work flourishes across a range of locality-based and specialist teams. Child and Family Services still needs to



progress along an improvement journey, and is considering whether there is benefit from reviewing its team arrangements to ensure that there is greater resilience in managing the care and support of children, and which can protect children out of hours.

Early Intervention and Protection services to help and protect children and families are particularly vital, and the importance of working together is now well understood by multi-agency partnerships.

Children at risk and their families are accessing effective early help via the family support 'continuum' of services, whilst professionals can receive support from qualified social workers at the Child and Family Service front door (CCARA).

### How we Support Children and Families in Swansea

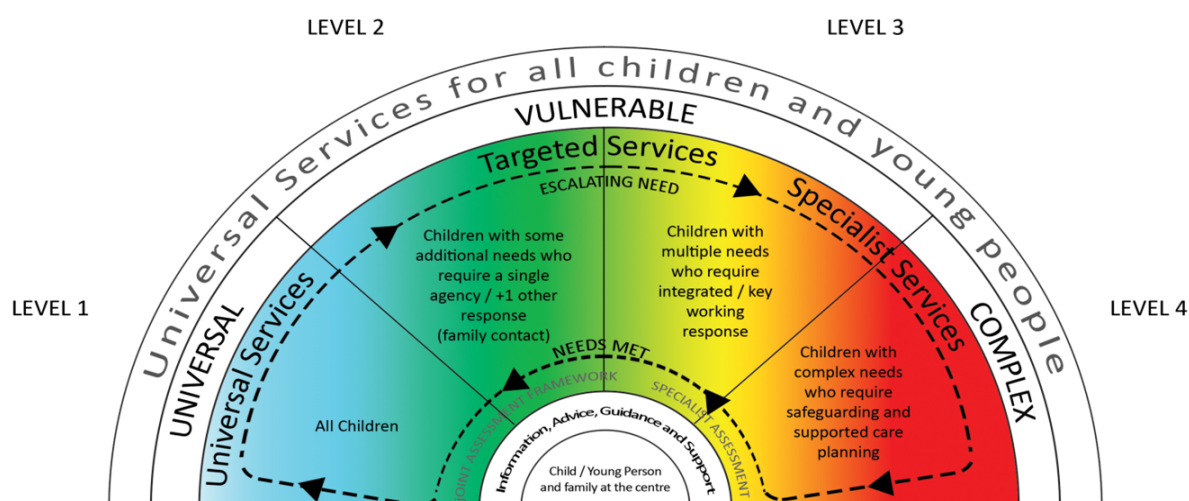


Figure 3. Swansea Model

Positive characteristics of the wide range of services available include consistently comprehensive and analytical assessments of need and safety plans that capture a child-centred view of safety and then turning these into robust interventions to protect the child from harm and abuse. Detailed care and support plans which derive from direct work are helping children and their families to achieve positive change. There is robust management oversight of all cases through our "Siarad", in which social worker can receive feedback on their care and support plans and placement options.

A key challenge in achieving the best possible outcomes for children and young people is ensuring consistency of leadership, sustaining excellence in professional practice and retaining management oversight across the whole system. For example, we are looking to improve the consistent application of thresholds to ensure appropriate and proportionate management of children at risk.

Excellence in practice is also supported by careful management of social workers' caseloads, social workers remaining with children throughout their journey across all stages of social care intervention, clinicians embedded within social work teams, and the clear, positive leadership of the Child and Family Services senior management team (SMT).

A very high standard of care is offered to children at risk, of whom an increasing number are children who arrive in this country accompanied by an adult seeking asylum. Further work is taking place to ensure that there is a follow up to children who go missing, and to help prevent future occurrences.

Excellent relationships are evident between children looked after and their social workers, who are tenacious and unstinting in their pursuit of the best possible outcomes for these children from their journey through care. Highly effective planning for permanence is now a major strength of the organisation. Outstanding services are provided to children looked after for whom permanence is to be achieved through adoption, now managed via Western Bay Regional Partnership Board. An exciting new local service is planned for young people leaving or about to leave care, in partnership with BAYS/ Barnardo's - the LAC 16+ Team

Services for children looked after are characterised by robust arrangements in place for reviewing care plans by a dedicated team of independent reviewing officers (IROs) based in the Service Quality Unit.

Working with colleagues in ABMUHB, there is a thorough assessment and monitoring of the health of children looked after via the LAC Health Team, with attention paid to the smaller number of children who are placed out of county, We are constantly striving to drive up the educational attainment of looked after children, supported by the efforts of the LAC Education Steering group and LAC Education Team.

Dedicated business support ensures that social workers can focus on their direct work with families, and there is expertise of the highest quality available to support functions such as workforce development, finance and performance management. A talented and highly capable commissioning & contracting team ensures that the resources available are effectively brokered through the 4Cs Consortium to provide additionality to the wide range of existing services to children and their families. Some economies of scale are achieved through shared services, such as Youth Offending and Adoption, within the Western Bay Regional Partnership arrangements.

We will continue to ensure children in Swansea are safe and healthy, now and in the future. We have a skilled, experienced and resourceful workforce and senior management team in Child and Family Services who, with support from across the Council, have continued to improve performance and outcomes in the priority area.

## 4b) How well are Child and Family Services performing?

Good performance comes from strong and clear leadership which encourages, develops and sustains a workforce, with confidence, skills, and focus on the needs of each child, young person and family we support.

Swansea continues to work closely with other agencies and professionals to ensure a timely, effective and proportionate response to any contact about a potential child at risk, and that any referral ensures that the child is kept safe, and focuses on a return to well-being in the family, where possible.

A long-term focus on improving the front door to Child and Family Services has resulted in a more stable number of contacts and referrals each month. Importantly the percentage number of repeat referrals is the lowest ever (**14.2%**, Last Year = 16.7%).

Timeliness remains an important component of a high quality service but good management oversight is needed to ensure it is not achieved at the price of gathering the right information and applying rigorous professional analysis. These factors are vital for safeguarding and protecting our most vulnerable children.

Children and young people's voices and experiences are at the heart of how we work. There has been an improvement in child seen (**88%**, Last Year = 80%) and child seen alone as part of an initial assessment (**50%**, Last Year = 38%) measures.

We know the most important factors that help children and young people to have good outcomes are good relationships in a stable and safe place to live. Swansea is developing a new monthly performance report, with some new measures, which we hope will tell us more about:

- who are the children looked after in Swansea (population profile);
- how good are we in making decisions about where children and young people are going to live permanently;
- how quickly do we take child cases through the court process;
- how settled are children and young people are in the place they live;
- whether those young adults moving on from placements are well prepared

Young people who are preparing to leave care can expect to have effective pathway plans in place. (**96%**, Last Year = 98%)

We know from performance reports this year that care leavers could be better supported as they move to independence to stay in touch (**81%**, Last Year = 90%); have access to suitable housing (**97%**, Last Year = 100%) and to participate in education, employment and training (**44%**, Last Year = 68%).

Child and Family Services had a 2015/16 Budget **£38,247k**, and mainly due to measures linked to the safe LAC reduction strategy measures managed to save around **£3.42m** total spend to achieve a total spend of **£34,828k**.

The sustainable measures that helped contribute to this massive achievement, based on excellent social work and business support, are:

- Repatriating children out of costly Out of Area residential placements back to Swansea either home or to foster placements
- Close monitoring of decisions on new placements of this type and specialist placements e.g. mother and baby
- Ensuring there is no drift in cases and reviews are undertaken in which placement outcomes are considered
- Good commissioning arrangements and regional collaboration via 4C's consortium and Western Bay to access value for money placements by driving down independent provider costs and promoting quality

- Review of Foster Swansea and a successful recruitment campaign to ensure a supply of trained, skilled and supported foster carers
- Reviewing arrangements for direct payments
- Monitoring and review of specialist foster placements and Special Guardianship Orders where enhanced payments to prevent drift
- Development of an in-house therapeutic team to ensure quality of interventions and provide better value than externally commissioning or spot purchasing.

The target for 2016/17 is to contain spend for Child and Family Services to **£35m**, though it will be a challenge to maintain spend at the current level, given there are significant increases to staffing costs and the costs of commissioned services.

## 4c) Social Services and Well-being (Wales) Act

The Act requires effective cooperation and joint working with our partner agencies on the whole system of child and family services, safeguarding, care and support across the county.

A strong and effective shared response requires clarity on the thresholds for different types of child and family support, and a continuum of services offering early help and preventative work in tandem across all agencies.

In recent months we have focused on improving the way we do things including getting assessments done in a timely way and by aiming to ensure we have clear care and support plans, developed with families and partners to make a difference in their lives. We have made some progress by being clear about our systems and processes as well as putting in place monitoring systems to track who provides ongoing support to families when there is no longer a need for social care support (step-down arrangements).

Our next focus is to further improve the way we organise our work to support the next stage of implementation of Signs of Safety and to continue to improve our service to children and young people most at risk of harm and their families. Through these arrangements we can be better placed to provide the right level of care support and protection at the right time and ensure agreed outcomes are reviewed in a timely way.

We have to ensure that there are robust systems to identify children at risk of sexual exploitation in Swansea, and that there suitable training and support so that an appropriately skilled workforce can identify, assess and intervene effectively with children at risk of child sexual exploitation (CSE). We have recently appointed a CSE/Missing Persons worker to strengthen arrangements for the monitoring and quality assurance of CSE protection plans. Swansea now has even safer systems of reporting and following on children at risk who go missing. With partners in housing services, we have addressed the issue of some hard to place care leavers in temporary B&B. As Head of Service, I meet quarterly with police colleagues, to address issues like CSE, and other initiatives such as a 'PACE' scheme which is ensuring that vulnerable children are not being detained in custody overnight.

Council leaders, elected members and partner agencies in Swansea are strongly committed to being corporate parents, with a revised structure, terms of reference and work programme. Together we promote the in rights of children in Swansea, in line with the United Nation Rights of Children (UNRC), to increase access to advocacy and to promote improvement in the full range of services to looked after children and young people. For example there is a new Children's Commissioning Consortium Cymru (4Cs) framework, and this can build on progress already made on placement availability, support and stability. Our participation work is also undergoing changes with more independent focus through a Children and Young People Participation Unit. Swansea is also ensuring that more looked after children are chairing and attending their own reviews. These developments are overseen effectively by the Corporate Parenting Board.

Improvements must be sustained and additional work must now be progressed to meet new Act requirements for looked after children

## 4d) Conclusions/ Future Challenges

Our central service direction remains clear: promoting better outcomes for children, placing the voice of the child at the centre of what we do, and aiming to reduce the number of children with complex needs having to live outside of Swansea. We need to ensure that each of the vulnerable children we support, at all times during the year, can be assured of the best possible services to enhance their wellbeing. Through Sustainable Swansea we are carrying out a large scale commissioning review of Family Support which has three important strands:

- Child Disability, taking forward our child disability strategy
- Domestic Violence - to improve multi agency arrangements
- Family Support services

Whilst the regional arrangements for Youth Offending and Adoption are working well, we are looking forward in how these services can be improved and aligned to support our aims, for example how YOS can deliver regional strategic support and local responses to link with early intervention and prevention, and how adoption opportunities can be safely speeded up.

We are updating the drivers working to achieve better outcomes within Safe LAC reduction strategy; to increase the range and scope of interventions as well as the impact. Alongside this central service strategy, is the revised Child and Family Services Improvement Programme, which will support our strategy and deliver on the requirements of the new Act.

The key challenges for Child and Family Services in Swansea during 2016/17 are:

- Putting children's and young people's voices and experiences at the heart of how we plan and improve our service
- Placing each child at risk at the centre of everything we do; with a focus on their safety and wellbeing outcomes
- Effective and timely safeguarding, protection and quality of service to the most vulnerable children in Swansea
- Achieving excellence in social work through a skilled, trained and professional social care workforce and effective organisational structures
- Working collaboratively in partnership with families, other professionals, and carers
- Reducing the number of looked after children by achieving permanence at the earliest opportunity
- Continuing to deliver on budget savings strategy and performance targets
- Implementation of Social Services and Well-being (Wales) Act

**Report by Julie Thomas, Head of Child and Family Services**

## 5. Report by Head of Adult Services

2015/16 has been a period of considerable change within Adult Services. I (Alex Williams) was appointed as Head of Adult Services in August last year, taking over from Bozena Allen who acted as Interim Head for the previous six months. There has, during the last two years, been a number of changes within the Adult Services Senior Management Team, and this report reflects on the progress being made to bring a new leadership team together, ready to meet the challenges of delivering on a corporate transformation programme, at the same time as being fully prepared to implement the Social Services and Well-being (Wales) Act 2014 (the Act).

### 5a) Context

Adult Services is at the start of a new journey of major improvement. An important period of reflection within and drawing people together has allowed the service, service users, staff and managers to take stock of where we are, and where we need to be. These reflective discussions are seen as very much the start of an open and honest conversation that continues to be held with citizens, carers, managers, staff, elected members and partners, to identify what is working well and what areas we need to improve on during the journey ahead. We now are clearly focused on meeting a new set of statutory requirements, prepared to deliver on corporate priorities, and ready to address future challenges.

Adult Services are well under way in setting out a shared vision and the programme of transformation delivering on the requirements of the Social Services & Well-being Act. We are building a stronger management structure, operating within a business-like, solution-focused culture. We are developing our whole service model to act as a framework within which to guide the work we are doing, and the decisions we have to take within the four commissioning reviews, as part of the Sustainable Swansea - Fit for the Future programme.

Our groundwork has highlighted some key areas for future improvement plans in areas such as safeguarding, financial management, consistency in meeting standards, performance management and commissioning. There are examples in this report, where changes are already taking place in the areas of prevention, positive social work practice and new models of service. Also the



service is supported by a strong committed workforce, backed by development plans and training opportunities to continue their professional growth.

Our central service direction remains clear, that is promoting safe independence for those most vulnerable adults with care and support needs. At the centre of our service model has to be greater voice and control of citizens and carers, placed at the centre of everything we do.

Our vision for health, care and wellbeing in the future is that:

“People in Swansea will have access to modern health and social care services which enable them to lead fulfilled lives with a sense of wellbeing within supportive families and resilient communities. We will help people to keep safe and protected from harm and give opportunities for them to feel empowered to exercise voice, choice and control in all aspects of their lives. Our services will focus on prevention, early intervention and enablement and we will deliver better support for people making best use of the resources available supported by our highly skilled and valued workforce”.

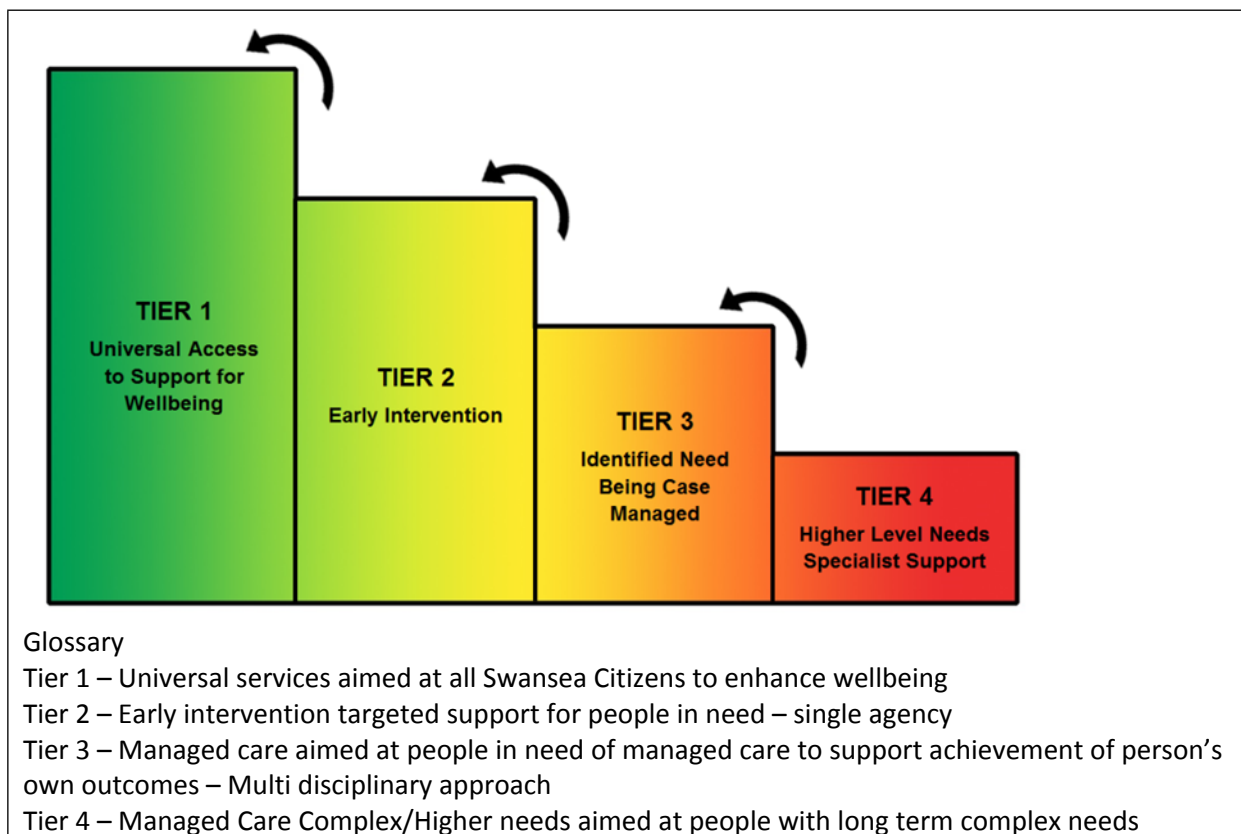
### **What does this mean for people who approach us for help with their social care needs?**

- Public services in Swansea should each have a greater emphasis on improving the wellbeing of citizens whether physical or emotional
- People are given the right level of support when they first contact social services, whether they require information, advice or direct assistance
- We are changing the way people are helped and supported, building on a ‘what matters to you’ conversation, and using a strengths-focused approach and focusing on prevention and early intervention
- People who need immediate assistance, or care and support, can get this from the most appropriate person, whether that’s an occupational therapist, a social worker or a district nurse
- We are changing how people access care and support ‘at home’ through working more closely with our Health colleagues via 3 integrated hubs, to achieve relationship based care
- We expect practitioners to spend their time working directly with people, with more time in communities and less time at desks
- We are now measuring our performance in terms of the impact we have had on people’s lives, how they experience their support and the outcomes they achieve

- We are developing new models of service delivery and reviewing our longer term commissioning plans
- We are working with carers, and with carers' organisations such as Swansea Carers Centre, recognising that carers are vital to our approach and we will continue to have a co-produced approach to shaping their support
- In taking forward Local Area Coordination, we aim to see more people supported within their own communities with support from family, friends and natural support networks.

Adult Services has developed a service model which summarises our vision, approaches and how best to deliver on the key changes described above by working with our partner agencies, locally and regionally.

The **Swansea model** can be illustrated diagrammatically below:



## 5b) How well are Adult Services performing?

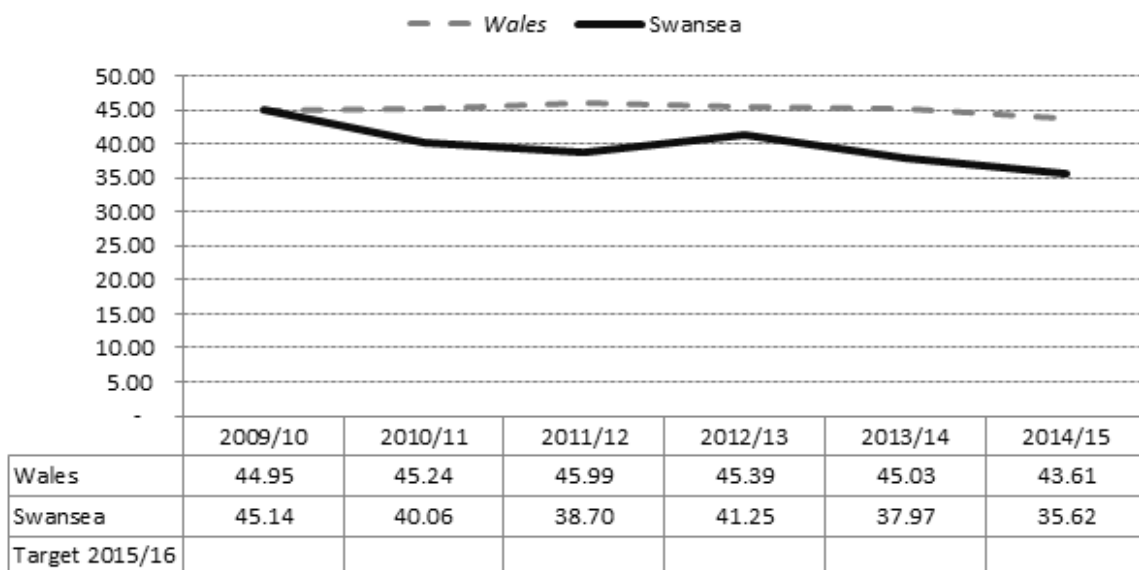
Between 2014 and 2015, Swansea's population increased by approx. 1,100 (+0.45%) to 242,400. Swansea now has an adult population of **200,700**,

including **46,800** people (19.3%) over 65 (Mid-year 2015). The number of people aged 70-74 has increased by **+300 (3%)** and **12,900** people in Swansea are aged 80 and over, **5.3%** of the Swansea total. This 3% rise per year within the aging population is expected to continue in Swansea leading to a population increase of a third by 2025.

According to the All Wales Daffodil research and population projection tool (<http://www.daffodilcymru.org.uk/>), in 2015, **4653** of Swansea’s adult population have a learning disability; of this number **969 (0.5%)** have a moderate or severe learning disability. Using the latest research estimates, around **32,200** people **aged 16 or over** in Swansea may have **one** Common Mental Disorder e.g. anxiety depression and OCD. Nearly half this number, (14,573) have two or more conditions, along with those experiencing borderline personality disorder (913), antisocial personality disorder (703) and those experiencing psychosis (811).

Adult Services provided managed care and support to 6027 people during 2015/16 (last year = 5616). This care and support is provided at home, in the community or within residential or nursing care. Services range from providing a small amount of practical support (such as a piece of equipment to support everyday living), to meeting high level needs of people with complex needs, sometimes requiring 24 hour care.

### Adults 18+ supported during the year per 1,000 adults aged 18+



| Number | 2009/10 | 2010/11 | 2011/12 | 2012/13 | 2013/14 | 2014/15 |
|--------|---------|---------|---------|---------|---------|---------|
|--------|---------|---------|---------|---------|---------|---------|

|                             |      |      |      |      |      |      |
|-----------------------------|------|------|------|------|------|------|
| Adults Supported Whole Year |      |      |      |      |      |      |
| Swansea                     | 8518 | 7635 | 7427 | 7957 | 7340 | 6920 |
| As % of Wales               | 7.9% | 7.0% | 6.6% | 7.2% | 6.6% | 6.4% |

Of the **6027** people supported last year, around **62%** were older people, 13% had physical disabilities, 12% had mental health needs and 12% had a learning disability. The profile of people who required managed care and support from a range of services is expected to change under the Act.

At year end, **3105, 67%** (last year =73%) people aged 65 or over, were supported to live in their own home, with **891, 19%** supported in care homes.

The number of people whose discharge from hospital was delayed due to social care reasons was **122** (last year = 112), **5.74%** per 10,000 of the population (last year = 5.33%).

In 2015/16, Swansea's Adult Services received over **19000** enquiries/ referrals, of which **2879** related to people not previously known to us.

Adult Services completed **5426 assessments of need**. Of this number, **2038** assessments were undertaken of people not previously known to the service in 2015/16. Also, of the total number of service users, **3754**, 86% were reviewed through the year.

Supporting carers well is a vital, sustainable approach to getting the most out of health and social care resources. It is essential to take a partnership approach to supporting carers to maintain and improve their own well-being, as this will help them maintain their caring role within their family.

Of the **1643** carers known in Swansea, **554** received an assessment of their own needs (last year = 647), and of this number **295** carers received support from Adult Services.

We are keen to improve on this take up though, as well as assessing and supporting the needs of carers, an integrated approach to carers being able to access good quality information, advice and practical support is just as important, and Swansea is working hard to promote this approach. Many carers are able to directly access our commissioned providers such as Swansea

Carers Centre and Alzheimer's Society for the information, advice and support they require, at the time they most need it. We are working with Swansea Carers Centre on a pilot project in which carers can be assessed for the support they need to enhance their well-being by training professionals based in Swansea Carers Centre.

**For further information see Section 6: Performance and Activity tables**

Our strategy is to encourage more preventative approaches that enable people to directly access the support they need to achieve their well-being outcomes, and these new approaches, including information, advice and assistance, are an important duty under the Act.

We need to ensure we promote services for carers to help and support them in this invaluable role.

Adult Services had an agreed 2015/16 Budget of **£66.5m**. Adult Services last year overspent by **£2.3m**, largely due to demands on domiciliary care and the costs of commissioning residential placements for people with mental health and learning disability, within a context of agreed budget saving targets. Overall this position was significantly better than was anticipated at the beginning of 2016, and social services as a whole were able to achieve a balanced budget in 2015/16.

Challenging saving targets have been set in 2016/17 and 2017/18, and tough decisions will have to be made in relation to the savings strategy as a whole. A number of financial risks have already been identified as requiring close attention this period. Adult Services are reviewing systems for reviewing and consulting upon charges for services to ensure compliance with the Regulations and Codes of Practice related to Part 4: Meeting Needs and Part 5: Charging and Financial Assessment, under the Social Services and Well-being (Wales) Act, and to help citizens make informed choices about what is available.

We remain committed to making sure that any money spent on Adult Services helps people to have high quality, locally managed care and support that improves their lives, always provides good value for money and enhances their wellbeing. We can make this happen by ensuring voice and control of people remains at the heart of what we do.

Overall, there is a consistent picture of performance and improvement in Adult Services over the last five years. We can expect to see a more defined, clear picture in relation to changing needs, reshaping demand for care and support services and achieving performance against measured outcomes. Many of these areas will be a focus of the first population assessment to be completed by March 2017.

## 5c) Social Services and Well-being (Wales) Act

Adult Services recognises the necessity for a fundamental transformation in our approach to adult health and social care in order to achieve the implementation of the Social Services and Well-being (Wales) Act.

To achieve the changes needed across the whole Authority, Swansea has a **Sustainable Swansea- Fit for the Future programme**, as well as the Western Bay Regional Partnership Board. As well as promoting the well-being of citizens and meeting the needs of an increasing and aging population experiencing high levels of complex needs, the Local Authority has financial challenges linked to national austerity. Within the Sustainable Swansea - Fit for the Future programme, there are a number of vital commissioning reviews currently underway:

### **Older People**

- Residential services
- Domiciliary Care
- Day Services

### **Adults**

- Accommodation related support and day services for people with a learning disability, physical disability or mental health concerns.
- At the same time, there is a Sustainable Swansea review of business support across the Council as well as a review of all senior staffing.

**Sustainable Swansea** will enable us to achieve “better quality care and support at a lower cost” designed in a way to ensure we continue improving outcomes for adults in Swansea. We plan to work with partners in a collaborative way to maximise the contributions of all agencies to this new commissioning approach including:

- Abertawe Bro Morgannwg University Health Board.
- Public Health Wales.

- Independent sector organisations including the third sector, not-for-profit organisations and private businesses.
- Other sections of the Council such as Housing, Leisure, Education and Poverty and Prevention

Adult Services is also working with Institute of Public Care (IPC) on the development of an overall practice framework to support a whole service change. This practice framework will build on what is already working well in adult social work, and draw together approaches that are known to be most effective in helping people who need managed care and support achieve their outcomes. Our work has to become more focused on building resilience in individuals, families and communities, on prevention and ensuring there are robust arrangements to ensure the safety of our most vulnerable adults.

This practice framework recognises a person's strengths and the assets already present in their lives and communities. Social workers can focus their direct work with people on agreeing care and support plans based on creative solutions and use of support networks. This will become the foundations of all work with adults and carers aiming to achieve their individual outcomes and to promote their independence.

As we meet these challenges, move towards implementing the new Act, and support the Council in its new duty to promote the well-being of citizens and carers, Adult Services is taking forward a new programme of improvement.

The **key elements** of the Adult Services Improvement Plan are:

- i. Intermediate Care
- ii. Demand Management
- iii. Commissioning
- iv. Learning Disabilities and Mental Health Commissioning
- v. Prevention
- vi. Workforce Development
- vii. Safeguarding and Deprivation of Liberty Safeguards
- viii. Direct Payments
- ix. Cross cutting e.g. Population Assessment

### **i) Intermediate Care**

Through the Intermediate Care fund, Swansea has taken big strides towards an integrated model of care and support. There is now an increased capacity to deliver skilled, targeted interventions to focus on meeting the short to medium term care and support needs of people who have experienced a crisis or who have an illness or disability, for example, after a fall or a stroke, following an accident or onset of illness.

Adult Services has reconfigured the Hospital Social Work Team and established three Integrated Care and Support Hubs (North, West and Central) which are making a real difference to patient flow in hospitals, supporting people to remain at home and minimising discharge delays.

We will try to minimise the effect of physical disability, sensory impairment or deterioration for people with ongoing health conditions, complex needs or caring responsibilities. Our future work will include building on the range of skilled interventions such as reablement, rehabilitation, and recovery from illness or mental health difficulties. We will work together with the person, their family networks and communities, health and housing colleagues to ensure people experience the best outcomes through the most cost effective support.

#### **Story 1.**

To get ready for her discharge from hospital, following a fall at home, Mary, 89, was seen by Andy, a hospital social worker, almost as soon as she arrived on the ward. She was a little confused about what was happening but was reassured when talking to Andy as the most important thing in the world to her was to go back home and to get things back to normal. Andy went through Swansea's Falls Prevention Guide with her family, and this helped them to come up with a safety plan. Andy was given permission by Mary and her family to carry out a risk assessment of her home, and to arrange for some equipment to be made available.

Mary was returned home, with help from her family and a reablement team who could monitor and help her confidence and skills in carrying out the day to day tasks needed to look after herself.

We have almost completed a review of our front door to integrated care arrangements. Again, we plan to consult with staff shortly and to give some certainty for the future.



## ii) Demand Management

This project looks at how Adult Services can put robust arrangements in place to effectively manage demand. Demand management is not about stopping services, but about ensuring that citizens receive the right services in the right place at the right time. Managing demand effectively and not defaulting to always trying to 'fix' a problem by providing a service is critical to reducing spend across Adult Services as well as achieving better outcomes for people. A review of overall front door arrangements (Common Access Point and Hospital Social Work Team): will be extended to include a better range of services to citizens: providing social care information, advice or assistance to the citizen or carer directly via DEWIS Cymru and promoting a greater range of telecare to provide safe care and support at a distance using information and communication technology via telephone or computer such as "Just Checking".

We are systematically reviewing each and every package of domiciliary care provided both by the Local Authority and the independent sector to ensure that individuals are receiving the right level of care. This work will put mechanisms in place to ensure that robust annual reviews as well as early reviews for new packages are taking place. Also many service users, who are supported via managed care, are eligible for funding support from the Health Board, whilst some packages are jointly funded between the Local Authority and the Health Board.

The outcome of this work will be to create a front door in both the community and hospital setting which tightly manages demand and which signposts them to other support or provides appropriate advice, information and assistance in line with the requirements of the Social Services and Well-being Act. Where the person can access an assessment of their needs to agree their personal outcomes, and a care and support plan agreed in their best interests.

### **Story 2.**

Fred, 76, has recently been to see his doctor with concerns about his memory loss, and some confusion. He now finds it more difficult to do the things he used to do on his own such as meeting up with friends at his allotment, growing his own vegetables or doing his weekly shopping. His wife passed away a few years ago and his son Peter, who lives in London, visits once a month. Peter phoned social services for help, as he was becoming more concerned about leaving his father following a visit. He wanted to know what help could be available to help him to keep living independently at home.

He was put through to Adult Services Intake Team who went through his immediate and most pressing concerns. Peter was given information about a range of services that could help, and told that he could expect a call from a person who works for the 'third sector' to assist him in getting in touch and in setting things up. Within a few days, his father had arranged to meet a volunteer befriender who could call 2 or 3 times a week and they could call down to Fred's allotment. A local day service was contacted to see if they could help clear his ground ready for planting. Also they have managed to go online to set up a weekly shopping delivery from the local supermarket.

### **iii) Commissioning**

Wherever possible we will work with people to provide the right help at the right time; help which is suitable to meet their personal well-being outcomes. People who need our help, will have been fairly assessed by a trained social worker, or social care professional, as eligible for a managed care and support plan, which will have to be supported by the resources available to the Local Authority. We aim to identify those people most at risk of needing support in the future and to intervene earlier if possible to help them to stay well and prevent further need for services where possible.

Citizens who require local authority managed care and support will have defined their own personal outcomes, and the assessment will explore what is available to someone within their family and community. A direct payment is offered in the first instance as a way of placing the person more firmly in control of their care and support.

Swansea's four commissioning reviews are at a critical stage in their development. During the early part of 2016/17, we are holding stakeholder workshops to get feedback on the emerging options for the reviews relating to domiciliary care, residential care for older people and day services for older people. We have agreed to take a slightly different approach to the fourth review relating to services for learning disabilities, physical disabilities and mental health. We will now develop Commissioning Plans to improve outcomes within the three client groups, and expect to do this by early autumn. Following consultation on these, we will start to review services and look at the future options.

#### **iv) Learning Disabilities and Mental Health Commissioning**

Some important work has already been undertaken by a project team to put measures in place to address the commissioning processes in relation to Learning Disability and Mental Health placements and this learning will benefit citizens, and reduce risks of further overspending.

A commissioning manual for care and support which includes a description of the process, roles and responsibilities of decision making in relation to meeting needs set out in care and support plans is being implemented in this service area.

#### **v) Prevention**

As part of a Council-wide prevention strategy, Swansea is developing our strategic approach in relation to prevention. In order to develop and expand our preventative approach across the Council, the optimal model is to be included and understood within the context of service reviews. The optimal model is a mechanism for change that encompasses the following elements:

1. A population assessment – providing trend data for each tier and future predictions
2. Services map their activities onto the continuum of need – what is already in place and what is spent?
3. Audit/Gap analysis across the tiers against outcomes – Is there over or under provision in some areas?
4. Clear focus on outcomes to begin, then leading to options for services
5. Clear unit costs and budget
6. Strong and effectively managed commissioning of services across all tiers
7. A culture where all services are acting at every point to de-escalate need and build on strengths
8. Holistic universal and early intervention services – can one targeted service do more?
9. Building independence, social capital and social networks
10. Delivery partners have confidence in the approach
11. Learning about ‘what works’ becomes fundamental to future improvements.

Therefore prevention is a key activity in terms of promoting well-being as well as demand management across the whole Council. We are progressing well, investing in a range of prevention and early intervention services and these will impact in the medium to longer term on the demand for social care services. We expect that an increasing number of older people and younger adults with complex needs will be a part of Swansea’s local population.

We need to ensure that we anticipate future care and support needs that can enhance their well-being, by working in partnerships and by commissioning high quality and cost effective preventative services.

This year we have piloted a range of preventative services, such as facilitating befriending, social groups, minor works within housing, awareness of targeted scams - in all a range of interventions which can help prevent needs from escalating. Some other important examples of preventative services are:

- Local Area Coordination
- Adult Family Group Conferencing
- Volunteering and Befriending
- Third Sector Brokerage

### **Story 3.**

Margaret, 57 has experienced periods of depression and sometimes feels lonely and isolated. She has some family and friends though at times when she feels vulnerable or unwell, she tends to withdraw.

She is aware of this behaviour and how it can cause lasting problems and wants to try to break this negative cycle. She contacts her nearest mental health service (CMHT) who put her in touch with a Local Area Coordinator called Rita, similar age. They arrange to meet up for a chat, and Rita is surprised that Margaret is living in an local area which is richly populated with support networks and services, yet has not been aware of them.

Together they draw up a plan about how to confront negative thinking and to overcome fears. They make arrangements to meet up with a local mental health survivors group for a coffee and cake session, and to attend her local Health Centre to request some free counselling sessions.

We will also continue to work with our local authority colleagues and partners to prevent people needing our managed care and support. We will do this by providing information, advice and assistance so that people can benefit from universal services, community support or locally available resources which improve their wellbeing. This open front door response might not be focused on particular health or support needs - but is available for the whole population – for example, within shared spaces, libraries, adult learning, places of worship, community centres, leisure centres, and information and advice services.

## **vi) Workforce Development**

Adult Services has taken time to evaluate the structure, and skill mix, with the senior management team, and, as Head of Service, I am in the process of restructuring the senior management team to ensure that we have the necessary range of skills and experience to drive the strategic change required to allow the service to operate in a performance and business-like culture. At the same time, I expect managers to work together in ways that reflect the principles of the Act - using positive communication, building on strengths, looking for solutions and involving people in change.

## **vii) Safeguarding and Deprivation of Liberty Safeguards**

Over the past two years, Swansea has moved away from a historical Adult Safeguarding Team, and towards an “Everybody’s Business” approach. This has been a difficult journey at times, as it impacts on several roles, including team managers, senior practitioners and care managers. All safeguarding referrals are being received via the Intake Team. We now have an established designated lead managers’ (DLM) role to oversee safeguarding procedures, Adult Services has a new duty system to ensure a timely and proportionate response, and we are currently moving towards a new “Ownership” model to ensure that services respond to concerns within their area.

Swansea Council has a strong Corporate Safeguarding group, together with a corporate policy framework and designated safeguarding champions in all areas. The number of safeguarding enquiries in Swansea relating to neglect of vulnerable adults within social care provision is still a concern, and local audit and monitoring arrangements are being strengthened to take forward improvements, whether identified locally or regionally by the Western Bay Safeguarding Adults Board.

Around 25% of enquiries at Intake relate to safeguarding concerns (new or existing) or to Deprivation of Liberty Safeguards (DoLS) referrals (2015/16). Since the Cheshire West Judgement in March 2014 all Local Authorities and Health Boards in Wales have seen a significant increase in the volume of DoLS applications received. A DoLS needs to be put in place when an individual resides in a residential care setting, but lacks mental capacity to consent to that placement. City and County of Swansea has seen the number of applications increase from 33 two years ago to in excess of 1,000 annually.

We are working closely with local social care providers and regulators to ensure there is monitoring capacity to support providers to achieve care

standards (CSSIW). We would like to see monitoring capacity to work with providers to support preventative approaches across the social care market. On a positive note the Deprivation of Liberty Standards can involve more visits to care homes and more engagement on quality of care.

For example, our Care Homes Quality Team regularly undertakes visits to review quality of care to residents.

#### **viii) Direct Payments**

It is a statutory duty for Local Authorities to offer direct payments. A direct payment is a monetary payment made directly to individuals who have been assessed as having eligible care and support needs, and carers with support needs. The benefit of a direct payment to an individual is that it offers them greater voice and control over how their care needs are met.

A support service for service users who use direct payments is currently commissioned externally. This contract comes to an end shortly and the service will transfer in-house at the beginning of July. This provides an opportunity to look at how this service should develop going forward to ensure that service users are better supported.

#### **ix) Cross cutting**

There are also a number of workstreams that cut across all parts of Adult Services and are critical to the development of an effective system. e.g. Act Implementation, Population Assessment, CCIS Implementation, Charging Policy, Performance Management, Transport and Accommodation.

Clearly the regional population assessment, under Part 2 of the Act is an important piece of work that has to be completed by the end of March 2017. This can help ensure that the future work of Adult Services can be more targeted at people most likely to develop a care and support need, and towards working to prevent their issues from getting worse.

For example, we might seek to extend our work with those who have just been diagnosed with dementia, or lost a loved-one, people at risk of isolation, low-level mental health problems, and carers.

A commissioning plan on a core theme can then be developed to agree locally on the outcomes that will be achieved and the means by which they can be best realised.

Table 1 Adult Services Improvement Plan Summary Table:

| Key Improvement                                       | What we have achieved already?  | What still needs to be done?   |
|---|---|--|
| 1. Intermediate Care                                  | Integration of services around 3 locality Hubs;<br>Anticipatory care pilot with plans for further roll out;                               | Ensure best model for integrated services is available for older people and younger adults in Swansea development of assistive technology and equipment services |
| 2. Demand Management                                  | Review of front door arrangements;<br>Initial right sizing of care packages   | Ensuring the citizen receives the right care and support at the right time   |
| 3. Commissioning                                      | Development of service model for Adult Services; commissioning reviews underway;<br>Review of commissioning function                      | Making best use of resources and achieving high quality through effective integrated commissioning cycle   |
| 4. Learning Disabilities and Mental Health            | Specialist focus needed on commissioning for people with mental health problems and people with a learning disability                     | Making best use of resources and achieving high quality through partnership and within integrated commissioning cycle  |
| 5. Prevention   | Implementing Local Area Coordination within an overall approach to prevention in Adult Services   | Extend range of preventative services available and improve the offer of information, advice and assistance  |
| 6. Workforce Development                              | Regional approach to workforce development strategy and local training plan in place.   | A skilled, effective and motivated workforce to support the delivery of high quality Adult Services  |
| 7. Safeguarding and Deprivation of Liberty Safeguards | There is an 'everybody's business approach to safeguarding' which is the number one corporate priority.                                   | To ensure robust processes in place to effectively manage safeguarding concerns to ensure those most vulnerable are kept safe                                    |
| 8. Direct Payments                                    | Increasing use of direct payments and recommissioning of support services to users.   | To extend the offer of direct payments for people who need care and support and to carers who need support   |
| 9. Other . crosscutting                               | <ul style="list-style-type: none"> <li>- Business support review</li> <li>- Charging Policy;</li> <li>- Performance framework.</li> </ul> | <ul style="list-style-type: none"> <li>- Welsh Language standards,</li> <li>- Transport,</li> <li>- Costs</li> <li>- ICT systems</li> </ul>                      |

## 5d) Concluding statement/ future challenges

Adult Services will benefit in the year ahead from greater stability in leadership within the department and within the service. There will be stronger strategic leadership and direction over what is needed and how best to achieve the changes.

Overall, Adult Services reached a stronger position in readiness to meet the challenges ahead. In relation to the Act, the fast paced change agenda is now business as usual. As the table above shows, a huge amount has been already been achieved in a very short space of time, with the support of everyone involved. Important next milestones are the corporate sign off of this improvement plan within our corporate management team, and putting into place the new management structures to take the plan forward, and bring together all the different pieces of the jigsaw.

### **Key challenges for Adult Services in Swansea during 2016/17 are:**

- Implementation of Social Services and Wellbeing (Wales) Act Ensuring that each person at risk and carers are at the centre of everything we do; with a real voice and control in shaping their care and support to focus on their own safety and well-being outcomes
- Effective and timely safeguarding, managed care and integrated, high quality services to the most vulnerable adults
- Managing our resources effectively, within budget and in partnership, both regionally and locally
- Continuing to deliver on our budget savings strategy and performance targets
- Best possible outcomes are achieved within Adult Services, through a skilled, trained and professional social care workforce who are working to the highest possible standards of supported care planning

**Alex Williams, Head of Adult Services, City and County of Swansea**



## 6. Latest Activity and Performance Tables

| a) Child and Family Services Activity                    | 2010/<br>11 | 2011/<br>12 | 2012/<br>13 | 2013/<br>14 | 2014/<br>15 | 2015/16     | Change<br>(since last<br>Year) |
|--|-------------|-------------|-------------|-------------|-------------|-------------|--------------------------------|
| Children supported during the year                       | 3001        | 3407        | 3720        | 3494        | 3471        | <b>3248</b> | <b>-6%</b>                     |
| Referrals  | 2762        | 3538        | 2634        | 1598        | 1804        | <b>1501</b> | <b>-17%</b>                    |
| Re-referrals   | 961         | 1094        | 733         | 313         | 301         | <b>211</b>  | <b>-30%</b>                    |
| Initial Assessments                                      | 1317        | 1737*       | 1756        | 1313        | 1507        | <b>1294</b> | <b>-14%</b>                    |
| Core Assessments   | 1068        | 1143*       | 1297        | 1153        | 1473        | <b>1153</b> | <b>-22%</b>                    |
| Strategy (SD) Discussions held                           | 812         | 1022        | 1170        | 1072        | 1157        | <b>1182</b> | <b>2%</b>                      |
| Section 47 resulting (from SD)                           | 550         | 708         | 813         | 803         | 786         | <b>752</b>  | <b>-4%</b>                     |
| Child Protection Registrations                           | 286         | 296         | 317         | 295         | 338         | <b>333</b>  | <b>-1%</b>                     |
| Child Protection Re-registration                         |             |             |             |             | 14          | <b>9</b>    | <b>-36%</b>                    |
| Child Protection Re-registrations after 12months or more |             |             |             |             | 27          | <b>32</b>   | <b>19%</b>                     |
| Child Protection De-registrations                        | 273         | 326         | 304         | 302         | 362         | <b>322</b>  | <b>-11%</b>                    |
| Initial Child Protection Conferences                     | 204         | 260         | 372         | 336         | 394         | <b>380</b>  | <b>-4%</b>                     |
| Child Protection Reviews                                 | 634         | 710         | 651         | 591         | 711         | <b>603</b>  | <b>-15%</b>                    |
| Looked After children at Year end (open)                 | 580         | 554         | 588         | 539         | 511         | <b>509</b>  | <b>0%</b>                      |
| LAC Placements Started                                   | 193         | 161         | 227         | 190         | 213         | <b>202</b>  | <b>-5%</b>                     |
| Statutory visits carried out                             | 2724        | 3034        | 2660        | 3288        | 3573        | <b>3683</b> | <b>3%</b>                      |
| LAC Reviews in year                                      | 1500        | 1385        | 1276        | 1284        | 1328        | <b>1296</b> | <b>-2%</b>                     |
| LAC Reviews carried out in timescale                     | 1281        | 1218        | 1062        | 1260        | 1304        | <b>1232</b> | <b>-6%</b>                     |
| Young Carers known to service                            | 41          | 42          | 29          | 49          | 87          | <b>29</b>   | <b>-67%</b>                    |

| <b>b) Adult Services Activity</b>                           | <b>2010/<br/>11</b> | <b>2011/<br/>12</b> | <b>2012/<br/>13</b> | <b>2013/<br/>14</b> | <b>2014/<br/>15</b> | <b>2015/16</b> | <b>Change<br/>(since last<br/>Year)</b> |
|---|---------------------|---------------------|---------------------|---------------------|---------------------|----------------|---|
| Referrals   | 10814               | 10,829              | 10258               | 11734               | 11,055              | <b>11,055</b>  | <b>51%</b>                              |
| Assessments   | 8483                | 8940                | 8912                | 6961                | 5028                | <b>10882</b>   | <b>-5%</b>                              |
| CPA Assessments (MH)  |                     |                     |                     | 3503                | 3855                | <b>3457</b>    | <b>-10%</b>                             |
| OT Assessments  | 4316                | 4278                | 2358                | 2021                | 1969                | <b>3855</b>    | <b>-10%</b>                             |
| Carers Assessments  |                     |                     |                     |                     | 664                 | <b>588</b>     | <b>-11%</b>                             |
| Reviews (unique clients)                                    | 4862                | 4762                | 5328                | 4580                | 4398                | <b>3754</b>    | <b>-15%</b>                             |
| Direct Payments   | 179                 | 180                 | 183                 | 211                 | 308                 | <b>310</b>     | <b>29%</b>                              |
| Carers known  | 2053                | 2924                | 2046                | 1854                | 1623                | <b>1643</b>    | <b>1%</b>                               |
| No. of people delayed in hospital (for social care reasons) | 186                 | 150                 | 44                  | 60                  | 100                 | <b>135</b>     | <b>35%</b>                              |
| <b>Adults receiving services at year end</b>                |                     |                     |                     |                     | 5616                | <b>6027</b>    | <b>7%</b>                               |
| - people receiving residential support                      |                     |                     |                     |                     | 1043                | <b>1008</b>    | <b>-3%</b>                              |
| - people receiving reablement                               |                     |                     |                     |                     | 246                 | <b>291</b>     | <b>18%</b>                              |
| - people receiving Day Care                                 |                     |                     |                     |                     | 1257                | <b>910</b>     | <b>-28%</b>                             |
| - people receiving community support (Day Care)             |                     |                     |                     |                     | 341                 | <b>298</b>     | <b>-13%</b>                             |
| - people receiving respite                                  |                     |                     |                     |                     | 392                 | <b>465</b>     | <b>19%</b>                              |
| - people receiving equipment                                |                     |                     |                     |                     | 1312                | <b>1096</b>    | <b>-4%</b>                              |
| - people receiving adaptations                              |                     |                     |                     |                     | 943                 | <b>960</b>     | <b>2%</b>                               |
| -people receiving meals                                     |                     |                     |                     |                     | 231                 | <b>0</b>       | <b>-100%</b>                            |
| - people receiving home care                                |                     |                     |                     |                     | 1995                | <b>2068</b>    | <b>4%</b>                               |

|  |         |         |         |         |         |                |             |
|--|---------|---------|---------|---------|---------|----------------|-------------|
| Total hrs of Home Care (Internal & Commissioned) | 749,764 | 710,931 | 623,010 | 624,723 | 842,681 | <b>943,496</b> | <b>12%</b>  |
| Safeguarding referrals                           |         |         | 956     | 1406    | 1023    | <b>1146</b>    | <b>19%</b>  |
| Safeguarding referrals completed                 |         |         | 375     | 432     | 380     | <b>276</b>     | <b>-27%</b> |

NB. Changes to national data reporting requirements this year 2015/16- people receiving services during the year based on sample weeks removed from list.

| <b>c) Directorate Activity</b> | 2010/<br>11 | 2011/<br>12 | 2012/<br>13 | 2013/<br>14 | 2014/<br>15 | 2015/16     | Change<br>(since last<br>Year) |
|--------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------------------------|
| Financial Assessments          | 3481        | 3961        | 3742-       | 3229        | 3412        | <b>6460</b> | <b>89%</b>                     |

| d) Child and Family Services KPIs |  |                                      |                                      |                                      |                                      |                                      |                                    |                                       |                                   |               |
|-----------------------------------|--|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|------------------------------------|---------------------------------------|-----------------------------------|---------------|
| Ref.                              | Key Performance Indicator  | Swansea<br>End of<br>Year<br>2011/12 | Swansea<br>End of<br>Year<br>2012/13 | Swansea<br>End of<br>Year<br>2013/14 | Swansea<br>End of<br>Year<br>2014/15 | Swansea<br>End of<br>Year<br>2015/16 | Wales<br>Ave<br>2014/15<br>(13/14) | Swansea<br>Prov.<br>Target<br>2015/16 | Desired<br>Direction<br>of Travel | RAG<br>Status |
| <b>SCC/002</b><br>NSI             | Looked after children experiencing one or more changes of school | 14.7                                 | 16.3                                 | 17                                   | 15.7                                 | <b>14.3</b>                          | 13.5<br>(13.85)                    | <12%                                  | ↑                                 | A             |
| <b>SCC/004</b><br>NSI             | Looked after children with 3 or more placements in year          | 6.86                                 | 7.7                                  | 8                                    | 10.8                                 | <b>10.6</b>                          | 9.03<br>(8.27)                     | 7                                     | ↓                                 | A             |
| SCC/010<br>SID                    | % of referrals that are repeat referral within 12 months         | 30.9                                 | 27.8                                 | 19.6                                 | 16.7                                 | <b>14.2%</b>                         | NA<br>(18.8)                       | <15%                                  | ↓                                 | G             |
| <b>SCC/0011a</b><br>SID           | % initial assessments where evidence that children seen          | 74.4                                 | 83.2                                 | 83.2                                 | 80.1                                 | <b>88</b>                            | 76.11<br>(78.9)                    | 89                                    | ↑                                 | G             |
| <b>SCC/0011b</b><br>NSI           | % initial assessments where evidence that children seen alone    | 32.5                                 | 34.7                                 | 42.7                                 | 38.0                                 | <b>50</b>                            | 45.22<br>(37.5)                    | 55                                    | ↑                                 | G             |
| <b>SCC/033d</b><br>NSI            | Young people formerly looked after still in touch at 19          | 89.7                                 | 94.1                                 | 81.1                                 | 89.74                                | <b>81</b>                            | 93.32<br>(93.4)                    | 95                                    | ↑                                 | A             |
| <b>SCC/033e</b><br>NSI            | Young people formerly looked in suitable accommodation           | 92.3                                 | 93.8                                 | 96.7                                 | 100                                  | <b>97.1</b>                          | 93.09<br>(92.7)                    | 100                                   | ↑                                 | G             |

| d) Child and Family Services KPIs |  |                                      |                                      |                                      |                                      |                                      |                                    |                                       |                                   |               |
|-----------------------------------|--|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|------------------------------------|---------------------------------------|-----------------------------------|---------------|
| Ref.                              | Key Performance Indicator  | Swansea<br>End of<br>Year<br>2011/12 | Swansea<br>End of<br>Year<br>2012/13 | Swansea<br>End of<br>Year<br>2013/14 | Swansea<br>End of<br>Year<br>2014/15 | Swansea<br>End of<br>Year<br>2015/16 | Wales<br>Ave<br>2014/15<br>(13/14) | Swansea<br>Prov.<br>Target<br>2015/16 | Desired<br>Direction<br>of Travel | RAG<br>Status |
| <b>SCC/033c<br/>NSI</b>           | Young people formerly LAC engaged in education, training, employment at 19 | 57.7                                 | 56.3                                 | 46.7                                 | 67.71                                | <b>44.1</b>                          | 59.51<br>(54.8)                    | 60                                    | ↑                                 | <b>R</b>      |
| SCC/034<br>SID                    | % of CPR reviews within statutory timescales                               | 94.2                                 | 92.4                                 | 98.1                                 | 96.2                                 | <b>94.4</b>                          | NA<br>(98.07)                      | 98                                    | ↑                                 | A             |
| <b>SCC/037<br/>NSI</b>            | Ave. external qualifications points for 16 yr old LAC                      | 185                                  | 330                                  | 249                                  | 282                                  | <b>426</b>                           | 281<br>(262)                       | 325                                   | ↑                                 | G             |
| SCC/039<br>SID                    | Health Assessments for looked after children undertaken                    | 92.4                                 | 93.7                                 | 98.1                                 | 96.0                                 | <b>94.8</b>                          | NA<br>(81.03)                      | 98                                    | ↑                                 | A             |
| <b>SCC/041a<br/>NSI</b>           | Eligible children with pathway plans                                       | 98.2                                 | 97.5                                 | 93.5                                 | 98.2                                 | <b>95.9</b>                          | 97.7<br>(89.2)                     | 95                                    | ↑                                 | A             |
| SCC/042a<br>SID                   | % Initial Assessments completed within 7 working days                      | 77.8                                 | 84.4                                 | 91.5                                 | 89.94                                | <b>95.2</b>                          | NA<br>(71.8)                       | NA                                    | ↑                                 | G             |
| SCC/042b<br>SID                   | Ave time taken for those initial assessments that more than 7 days         | 16                                   | 14                                   | 12                                   | 12                                   | <b>10</b>                            | 19.47<br>(20)                      | NA                                    | ↓                                 | G             |

| d) Child and Family Services KPIs   |  |                                      |                                      |                                      |                                      |                                      |                                    |                                       |                                   |               |
|---|--|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|------------------------------------|---------------------------------------|-----------------------------------|---------------|
| Ref.  | Key Performance Indicator  | Swansea<br>End of<br>Year<br>2011/12 | Swansea<br>End of<br>Year<br>2012/13 | Swansea<br>End of<br>Year<br>2013/14 | Swansea<br>End of<br>Year<br>2014/15 | Swansea<br>End of<br>Year<br>2015/16 | Wales<br>Ave<br>2014/15<br>(13/14) | Swansea<br>Prov.<br>Target<br>2015/16 | Desired<br>Direction<br>of Travel | RAG<br>Status |
| SCC/043a<br>SID   | % Core Assessments completed within 35 working days                | 68.9                                 | 69.6                                 | 81.5                                 | 70.1                                 | <b>79.1</b>                          | 81.23<br>(76.6)                    | NA                                    | ↑                                 | G             |
| SCC/043b<br>SID   | Ave time taken for those core assessments that more than 35days    | 65                                   | 69                                   | 60                                   | 59                                   | <b>52</b>                            | 57.6<br>(65)                       | NA                                    | ↓                                 | G             |
| SCC/044a<br>SID   | % children looked after who were permanently excluded from school  | 0                                    | 0                                    | 0                                    | 0                                    | <b>0</b>                             | 0.27<br>(0)                        | 0                                     | ↓                                 | G             |
| SCC/045<br><b>PAM</b>   | % of reviews Children LAC, CPR and CiN within statutory timescales | 75.8                                 | 74.6                                 | 88.6                                 | 85.7                                 | <b>81</b>                            | 89.6<br>(86.4)                     | 90                                    | ↑                                 | A             |
| <b>Key: NSI refers to National Strategic Indicator; PAM refers to Public Accountability Measure; SID refers to Service Improvement Data Measure</b> |  |                                      |                                      |                                      |                                      |                                      |                                    |                                       |                                   |               |

| e) Adult Services KPIs        |   | Swansea                | Swansea                | Swansea                | Swansea                | Swansea                | Wales                     | Swansea                                 | Desired                |               |
|-------------------------------|---|------------------------|------------------------|------------------------|------------------------|------------------------|---------------------------|---|------------------------|---------------|
| Ref.                          | Key Performance Indicator                               | End of Year<br>2011/12 | End of Year<br>2012/13 | End of Year<br>2013/14 | End of Year<br>2014/15 | End of Year<br>2015/16 | Ave<br>2014/15<br>(13/14) | Swansea<br>a Prov.<br>Target<br>2015/16 | Direction<br>of Travel | RAG<br>Status |
| <b>SCA/001</b><br><b>NSI</b>  | Delayed Transfers of Care                               | 7.18                   | 2.12                   | 2.47                   | 4.7                    | <b>5.74</b>            | 4.83<br>(4.68)            | 4 to 6                                  | ↓                      | G             |
| <b>SCA/002a</b><br><b>NSI</b> | Older People Supported in Community at end of year      | 67.59                  | 77.22                  | 73.51                  | 70.28                  | <b>67.11</b>           | 67.3<br>(74.48)           | 97.5                                    | ↑                      | <b>R</b>      |
| <b>SCA/002b</b><br><b>NSI</b> | Older People Supported in Care Homes at end of year     | 22.84                  | 22.91                  | 21.5                   | 20.35                  | <b>19.26</b>           | 18.85<br>(19.84)          | 19.5                                    | ↓                      | G             |
| <b>SCA/019</b><br><b>NSI</b>  | Adult Protection referrals completed where risk managed | 90.41                  | 92.65                  | 93.3                   | 92.63                  | <b>93.48</b>           | 95.6<br>(94.5)            | 97.5                                    | ↑                      | A             |
| <b>SCA/007</b><br><b>PAM</b>  | Care Plans reviewed in timescale                        | 76.9                   | 83.2                   | 81.1                   | 71.6                   | <b>76.9</b>            | 79.97<br>(81.1)           | 80                                      | ↑                      | A             |
| <b>SCA/018a</b><br><b>PAM</b> | Carers offered an assessment of their needs             | 97.2                   | 96.6                   | 97.3                   | 95.0                   | <b>95.0</b>            | 88.34<br>(85.8)           | 100                                     | ↑                      | A             |

## 7. Contact Us

If you have any comments on social services, this annual report, or further questions about the information it contains, you are welcome to use the contact details below:

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