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AGENDA

Committee CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

Date and Time of Meeting TUESDAY, 7 APRIL 2015, 4.30 PM

Venue COMMITTEE ROOM 4 - COUNTY HALL

Membership Councillor Richard Cook (Chairperson)
Councillors Boyle, Chaundy, Gordon, Govier, Morgan, Murphy,
Dianne Rees and Lynda Thorne

Mrs P Arlotte (Roman Catholic representative), Carol Cobert (Church in Wales representative), Ms Catrin Lewis (Parent Governor Representative) and Mrs Hayley Smith (Parent Governor Representative)

Time approx.

- | | | |
|----------|---|---------|
| 1 | Apologies for Absence | 4.35 pm |
| | To receive apologies for absence. | |
| 2 | Declarations of Interest | 4.35 pm |
| | To be made at the start of the agenda item in question, in accordance with the Members' Code of Conduct. | |
| 3 | Integrated Family Support Team - Annual Report (<i>Pages 1 - 34</i>) | 4.40 pm |
| | (a) Councillor Sue Lent (Deputy Leader and Cabinet Member, Early Years, Children & Families) will be in attendance and may wish to make a statement. | |
| | (b) Jane Hoey (Operational Manager, Intake & Assessment) and Cheryl Chapman (Family Intervention Support Service / CAMHS) will introduce the report and be available to answer any Members questions. | |
| | (c) Questions from Committee Members. | |
| 4 | Children's Services - Quarter 3 Performance Monitoring (<i>Pages 35 - 68</i>) | 5.10 pm |

- (a) Councillor Sue Lent (Deputy Leader and Cabinet Member, Early Years, Children & Families) will be in attendance and may wish to make a statement.
- (b) Angela Bourge (Operational Manager, Resources) and Kim Brown (Service Manager, Policy and Performance) will introduce the report and be available to answer any questions.
- (c) Questions from Committee Members.

5 Recruitment and Retention of Social Workers - update report 6.10 pm
(Pages 69 - 76)

- (a) Councillor Sue Lent (Deputy Leader and Cabinet Member, Early Years, Children & Families) will be in attendance and may wish to make a statement.
- (b) Sarah Woelk (Operational Manager, Intake and Assessment) and Menai Griffiths (Policy & Performance Officer) will introduce the report and be available to answer any questions.
- (c) Questions from Committee Members.

6 Cabinet Responses - Child Health and Disability, Listening Event and Transitions to Independent Living 6.40 pm
(Pages 77 - 104)

- (a) Councillor Sue Lent (Deputy Leader and Cabinet Member, Early Years, Children & Families) will present the Cabinet responses on these three reports.
- (b) Questions from Committee Members.

7 Audit Committee Correspondence (Pages 105 - 112) 7.10 pm

- (a) Councillor Richard Cook to update the Committee on the correspondence from the Chairman of the Audit Committee.
- (b) Questions from Committee Members.

8 Scrutiny Improvement Project (Pages 113 - 122) 7.20 pm

- (a) Scrutiny Officer to briefly introduce the report.
- (b) Questions from Committee Members.

9 Way Forward 7.30 pm

10 Date of next meeting

Marie Rosenthal
County Clerk & Monitoring Officer

Date: Thursday, 26 March 2015
Contact: Paul Burke, 029 2087 2412, PaBurke@cardiff.gov.uk

THE CITY OF CARDIFF COUNCIL
CYNGOR DINAS CAERDYDD

AGENDA ITEM: 3

CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE

7 April 2015

INTREGATED FAMILY SUPPORT TEAM ANNUAL REPORT 2014 – 2015

Background

1. The Integrated Family Support Team (IFST) has its origins in the Wales Assembly Government (WAG)'s Vulnerable Children Strategy. The legislative framework is the Children and Families (Wales) Measure, which was introduced in the Welsh Assembly on 2 March 2009. It was underpinned by regulations, which came into effect in early 2010 on the basis of new powers devolved to WAG. The IFST is a partnership between Cardiff Council, Vale of Glamorgan Council and Cardiff and Vale University Health Board.
2. The IFST Board operates according to statutory guidance and meets on a quarterly basis (once per school term). It employs a collaborative approach, taking its membership from key statutory and non-statutory services operating across Cardiff and the Vale of Glamorgan, with the focus on promoting the "Think Family" agenda, and facilitating effective integrated working.
3. The vision of the Cardiff and Vale of Glamorgan Council IFST is to deliver a high quality service that will intervene with families where there is serious child protection concern relating to parental substance misuse. The IFST provides intensive support to families to reduce risk and need, whilst ensuring positive outcomes for children and creating opportunities for positive change wherever possible.

4. The IFST embraces the following service values:

- To provide a holistic, evidence based family centred approach to service delivery
- To ensure the needs of children are met
- To work in partnership with parents and families to meet their own identified needs where this is commensurate with the needs of children
- To provide impartial and objective consultation and advice to the wider workforce as and when required
- To provide a non-judgemental approach to service delivery
- To provide a welcoming, accessible and timely service
- To adhere to the principles of information sharing
- To offer a flexible service offering choice of approaches to potential service users
- The service shall be provided in a non discriminatory, anti-oppressive and professional manner and in a way that demonstrates courtesy and respect for service users and is sensitive to personal situation and experiences
- The service will respond positively to cultural, religious, language, gender, sexuality, disability, age and communication needs
- The views of service users will be sought to ensure that services are appropriate and responsive to changing patterns of need
- Participation of all families is voluntary
- To ensure dissemination of contemporary research and best practice concerning evidence based interventions with families
- To influence wider systems to ensure more joined up service delivery to families
- To ensure all local and national requirements regarding service evaluation and monitoring are undertaken

- To strengthen partnership working between Cardiff and Vale of Glamorgan Local Authority Adult and Children's Services and University Health Board
5. The IFST Management Board is chaired by Phillip Evans, Director of Social Services at the Vale of Glamorgan Council, and consists of representatives of the main partner agencies.

Purpose of the Report

6. The purpose of this report is to provide the Committee with an opportunity to comment on a copy of the Integrated Family Support Team's third annual report (copy attached at **Appendix A**). The report sets out the key achievements and outcomes, challenges and issues facing the Team, as well as the priorities for the next 12 months.
7. Jane Hoey (OM Intake and Assessment) and Cheryl Chapman (Family Intervention Support Service /CAMHS) will present the Annual Report and be available to answer questions Members may have.

Way Forward

8. Members may wish to note and provide any comments to the Council's Chief Executive and IFST Board on the Annual Report.

Legal Implications

9. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those

recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

Financial Implications

10. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. These financial implications will need to be considered before any changes are implemented. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

RECOMMENDATIONS

That Members note the information contained in **Appendix A** and submit any comments or recommendations to the Council's Chief Executive and the Integrated Family Support Team Board.

Marie Rosenthal
County Clerk and Monitoring Officer
30 March 2015



**Integrated Family Support Team
Cardiff & the Vale of Glamorgan**

Annual Report

April 2014 – March 2015

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1 Introduction

- 1.1 This is the third Annual Report of the Cardiff and Vale of Glamorgan Integrated Family Support Team. The aim is to provide an account of organisational and operational matters within the Cardiff and Vale of Glamorgan area during the third year of operation and to highlight critical issues which may impact upon the successful delivery of the Integrated Family Support Service. It has been prepared in accordance with S.62 of The Children and Families (Wales) Measure 2010.
- 1.2 The Integrated Family Support Team (IFST) has its origins in the WAG Vulnerable Children Strategy. The legislative framework is the Children and Families (Wales) Measure, which was introduced in the Welsh Assembly on 2 March 2009. It was underpinned by regulations, which came into effect in early 2010 on the basis of new powers devolved to WAG. The IFST is a partnership between Cardiff Council, Vale of Glamorgan Council and Cardiff and Vale University Health Board.
- 1.3 The aim of the IFST is to provide an intensive intervention by a highly skilled, multi-disciplinary team to intervene with families referred by Children's Services from Cardiff Council and Vale of Glamorgan Council Social Workers, where there are serious child protection concerns as a result of parental/carer substance misuse in order to reduce the level of risk and ensure positive outcomes for the most vulnerable children wherever possible. This will be achieved through a sustained and system-wide focus on delivering quality services based on robust evidence of effectiveness and best practice. A primary focus of the IFST will also be to provide consultation, advice and training to the wider workforce utilising the knowledge, skills and experience of the IFST staff to provide changes in the way we work with the most vulnerable children and families.
- 1.4 The vision of the Cardiff and Vale of Glamorgan Council IFST is to deliver a high quality service that provides intensive support to families at times of crisis to reduce risk and increase safer family functioning whilst ensuring positive outcomes for children and creating opportunities for positive change wherever possible.
- 1.5 The IFST embraces the following service values:
 - To provide a holistic, evidence based family centred approach to service delivery
 - To ensure the needs of children are met
 - To work in partnership with parents and families to meet their own identified needs where this is commensurate with the needs of children
 - To provide impartial and objective consultation and advice to the wider workforce as and when required
 - To provide a non-judgemental approach to service delivery
 - To provide a welcoming, accessible and timely service
 - To adhere to the principles of information sharing
 - To offer a flexible service offering choice of approaches to potential service users

- The service shall be provided in a non discriminatory, anti-oppressive and professional manner and in a way that demonstrates courtesy and respect for service users and is sensitive to personal situation and experiences
- The service will respond positively to cultural, religious, language, gender, sexuality, disability, age and communication needs
- The views of service users will be sought to ensure that services are appropriate and responsive to changing patterns of need
- Participation of all families is voluntary
- To ensure dissemination of contemporary research and best practice concerning evidence based interventions with families
- To influence wider systems to ensure more joined up service delivery to families
- To ensure all local and national requirements regarding service evaluation and monitoring are undertaken
- To strengthen partnership working between Cardiff and Vale of Glamorgan Local Authority Adult and Children's Services and University Health Board

1.6 The IFST exists across two local authority areas and this has caused challenges to ensure that strategic planning allows for consistency wherever possible, but also takes into consideration differences in Social Care and Health systems and processes across both areas. See also Funding.

1.7 Aligned to the IFST is the Early Intervention Services which provides added value to the IFST intervention by offering Community Reinforcement and Family Training (CRAFT) for individuals who are supporting a loved one with substance misuse issues and family interventions for families with lower levels of need (Tier 2-3). The Early Intervention Service also employs Support Workers to assist both services (IFST & EIS) at Phase 2 of the intervention post-intensive phase. Support Workers work alongside the Intervention Specialist to enhance the intervention in relation to specifically preventing children and young people becoming involved in problematic substance misusing behaviours, ensuring integration for families into their community, diversionary activities with young people, engagement in education/employment and harm reduction advice and support.

2 The Integrated Family Support Services (IFSS) Board

2.1 The IFSS Board operates according to the statutory guidance and meets on a quarterly basis (once per school term). It employs a collaborative approach taking its membership from key statutory and non-statutory services operating across Cardiff and the Vale of Glamorgan with the focus on promoting the “Think Family” agenda and facilitating effective integrated working.

2.2 At a strategic level, issues that have been raised and dealt with by the IFSS Board include:

- Production of the S.58 Agreement between the two local authorities, the LHB and other key stakeholders.
- Production of an Information Sharing Protocol for the sharing of information between the two authorities, the local health board and other statutory and non-statutory partners.
- Model for achieving the Independent reviewing of IFST Family Plans.
- Model for aligning Cardiff and Vale of Glamorgan substance Misuse Family Services with the IFST.

2.3 During this third year, there continues to be no barrier to service delivery that has required intervention by the IFSS Board. However, the Board has assisted with a number of operational issues including:

- Re-grading of the Health posts in line with other IFSS across Wales. This is expected to assist with recruitment difficulties and staff retention.
- Being based in the Alps with Vale housing staff and the OM who is an active Board member has proved beneficial for IFSS staff in so much as housing advice is easily accessible.
- New funding requirements.

2.4 Changes to Board Membership

There have been no changes to Board.

2.5 Terms of Reference

Section 53 of the Children and Families (Wales) Measure places a duty on the Local Authority to establish an Integrated Family Support Board for IFST.

- **Purpose**
To provide strategic direction to the implementation and delivery of the Integrated Family Support Service across Cardiff and the Vale of Glamorgan.
- **Functions**
The Children and Families (Wales) Measure sets out the statutory functions of the Board, these are:-
 - o ensure the effectiveness of what is done by the Integrated Family Support Services to which they relate.

- - o promote good practice by the local authorities and Local Health Boards participating in the teams in respect of the functions assigned to the teams.
- - o ensure that Integrated Family Support teams have sufficient resources to carry out their functions.
- - o ensure that the Local Authorities and Local Health Boards co-operate with the Integrated Family Support teams in discharging the teams' functions.

Furthermore:

- To provide overall direction, management and scrutiny to the IFS teams, both when the service is running and during its implementation phase.
 - To ensure compliance with the grant and that all grant monitoring procedures set up within IFST meet organisational audit needs.
 - To ensure the service provided is sustainable beyond the designated 3 years and is integrated into local service provision.
 - To ensure a communications strategy is implemented and necessary resources provided to disseminate information to all partners and service users and to promote the success of the IFST.
 - To provide the WAG IFST Implementation Team with necessary updates on project progress (incl. risks and lessons learnt) on a monthly basis.
 - To support and progress workforce development within IFS teams and the transfer of skills to the wider workforce.
 - Interface between the Local Health Board, Members of the Local Authority Executive/Management Committees and Local Safeguarding Childrens Board.
 - Deal with complaints and disputes about the exercise of functions by the IFST. Manage any complaints/disputes about the exercise of functions by the IFST.
 - Facilitate the sharing of information between Local Authorities, Local Health Boards, Integrated Family Support Teams and Boards.
 - Be responsible for the accounts and audit in respect of functions assigned to integrated family support teams.
 - Act as the IFST interface with the existing children and adult service and wider services.
 - Agree the Objectives for the IFS teams based upon local needs and circumstances.
- **Agenda**

The Board will take up risks and issues arising and support the Service Manager to ensure the effective and efficient running of the service.
 - **Voting**

The members representing each area will have delegated powers to act on the authority of their respective areas. In decision making the Board will

strive for unanimity, but where this cannot be achieved, a majority decision will be agreed.

- **Scheduling of Meetings**

Following the establishment of the service, meetings have changed to once per term lasting no more than two hours.

2.6 Board Membership

Name	Position
Philip Evans	Director, Social Services, Vale of Glamorgan Council
Rachel Evans	Head of Children and Young People Services, Vale of Glamorgan Council
Tony Young	Director, Social Services, Cardiff Council
Jane Hoey	Operational Manager, Children's Services, Cardiff Council
Cheryl Chapman	Service Manager, IFST, Cardiff & Vale of Glamorgan
Brigitte Gater	Action for Children
Allan Evans	Operational Manager (Finance) Cardiff Council
Gail Reed	Asst. Chief Executive, Welsh Probation Service
Avril Hooper	Operational Manager, Flying Start Programme
Mike Ingram	Operational Manager, Housing, Vale of Glamorgan Council
Rose Whittle	Head of Operations and Delivery in Community Health, Cardiff & Vale Health Board
Jackie Vining	Assistant Director, Barnardo's Cymru
Nick Batchelor	Director for Education, Cardiff Council
Ingrid Masmeyer	Operational Manager, Youth Offending Services
Carolyn Michael	Senior Group Accountant, Vale of Glamorgan
Beverly Noon	Operational Manager, Corporate Policy & Communications, Vale of Glamorgan
Belinda Davies	Chief Superintendent, South Wales Police

3. Service Delivery

- 3.1 At the start of the third year of operation the team comprises the following members:
- IFST Service Manager
 - Administrative Assistant
 - 4 Social Care Intervention Specialists
 - 1 Health Intervention Specialist (Health Visiting)
 - 2 Consultant Social Workers
 - 1 CPN Health Intervention Specialist
- 3.2 The IFST has enjoyed some stability in the staff group throughout its third year, although there was some difficulty in recruiting a new member of the Health team (CPN) mainly due to the grading. This has since been resolved. Another position took time to fill because it was a temporary post pending the return of a permanent member of staff from maternity leave.
- 3.3 An Independent Reviewing Officer (IRO) post has been created to undertake IFST Reviews that do not fall into the statutory reviewing process within the Child Protection and Looked after Children systems. This post sits within the IRO and Safeguarding Service in Cardiff and covers both Cardiff and Vale of Glamorgan cases. Additional IROs will be trained in the IFSS model in order to ensure consistency of approach to IFST families and to strengthen the sustainability of this arrangement so that there is adequate cover within the team to maintain service continuity through periods of staff absence.
- 3.5 The business support processes have resulted in an efficient and effective system which, wherever possible, seeks to blend with existing statutory reviews. Outcomes are measured and reported using the Results Based Accountability (RBA) methodology (See section 8 for details of the RBA approach and the annual outcome statistics).
- 3.6 There have been no official complaints made against the IFST since it has been operational. Positive feedback has been given to IFSS Board members regarding the experience of families and practitioners when working with the IFST.
- 3.7 The focus of any future research carried out by Consultant Social Workers (CSW) will be relevant to IFSS practice and/or development. Initial ideas in this regard relate to the development of the CSW role both within IFSS and the wider workforce and the nature and extent of substance misuse. Mental health and domestic abuse among families receiving IFST interventions will also be considered. Other topics for research will be specifically related to the data development agenda linked to the Results Based Accountability report cards.
- 3.8 All founder members of the team have completed their accreditation up to level 6 in the IFSS model and new members are working towards accreditation.
- 3.9 Members of staff have attended the following training modules:-

Name of course	Date	No of Attendees
IFST Model	August 2014	3
IFST Model	November 2014	3
IFST Model	February 2015	2
WG Academia Foundation for Success	June 2014	1
Medical Union of South Carolina – CPT Web	August 2014	1
ILM Level 7 Leadership & Management Training	Ongoing	2
Mindfulness	October 2014	2
SERAF	December 2014	1
Forced Marriage Awareness	January 2015	1
Assessing Neglect	December 2014	1
Referrals and S.47 Enquiries	February 2015	1
Pre-natal alcohol exposure	December 2014	1

3.10 Members of staff are also undertaking or have completed training in:-

Accreditation Level 3
Accreditation Level 5
Accreditation Level 6
Train the Trainers programme

3.11 To ensure the effectiveness of the Team in delivering 'Family Support Functions' it has been recognised that there may be instances when the IFST needs to 'spot purchase' a service that, for whatever reason, is not immediately accessible by the IFST within the timeframe to be effective for the family, or is not available under the list of agreed services within the 'Family Support Functions' and is not available outside the IFST, either in the Local Authorities or the UHB. A small budget has been set aside for this purpose. The commissioning of services has to date been used to access psychological assessment for parents, childcare services and secure nursery placements for a pre-school child, which has ensured a robust plan for the families.

4 Development of Processes and Protocols

- 4.1 The referral pathway continues to be fit for purpose ensuring that appropriate families receive an intervention. This is shown in more depth in 5 – An appropriate referral.
- 4.2 Information Sharing Protocol has now been approved by the WASPI team and uploaded to the WASPI website as a model of good practice.

Information Sharing Partner Organisations	Responsible Manager
Cardiff County Council <ul style="list-style-type: none"> • Children Services • Adults Services • Housing • Youth Offending Services 	Head of Children Services Head of Adults Services Housing Officer Youth Offending Team Manager
Vale of Glamorgan County Council <ul style="list-style-type: none"> • Children Services • Adults Services • Housing • Youth Offending Services 	Head of Children Services Head of Adults Services Housing Officer Youth Offending Team Manager
South Wales Police	Manager Central Referral Unit
University of Wales Health Board <ul style="list-style-type: none"> • CAU • Midwifery • Mental Health • Health Visitors 	Health Project Manager Senior Nurse (Mental Health Specialist Services)
Wales Probation Trust	Assistant Chief Officer
Barnardo's Cymru	Children's Services Manager
Action for Children	Team Manager

5 Aligned Services

5.1 The Early Intervention Service, incorporating CRAFT and family support for Tier 2/3 Child in Need cases continues to work alongside and enhance the work of the IFST. Funding has been agreed for three years with the Substance Misuse Area Planning Board.

5.2 More recently the Strengthening Families Programme has become aligned to the IFST managed by the Service Manager. Funding for this has been received through the Cardiff and Vale University Health Board Families First programme. This ensures that we can meet the needs of families where there are children aged between 10-14 in the transitional period between primary and secondary schools and further enhances the work of the IFST.

5.3 CRAFT

Community Reinforcement and Family Training (CRAFT) is an evidenced based intervention for people who are affected by a close relative or friend with a drug or alcohol problem (Concerned Significant Other). CRAFT supports the CSO to help the person they care for (Identified Patient). Individual sessions are roughly one hour long and continue over a period of 8-10 sessions. Facilitated group sessions are usually two hours long. In individual sessions they will meet one to one with a therapist. In group sessions they will meet with a small number of other CSO's in a similar situation. The service is universal and provided free of charge to any resident in Cardiff and the Vale of Glamorgan. Following the successful launch of the service in November 2014 the Commissioning team have held it up as an '*area of good practice involving a co-production model*', and are looking to build on the model in other areas of service delivery i.e. adult services mental health and dementia care.

CRAFT has been widely evaluated and shown to help family members improve their own lives, help their loved one reduce or stop their drinking/drug use and to help get a loved one into treatment. Families who go through CRAFT report happier relationships and more family cohesion. They report significantly less family conflict, anger and depression.

CRAFT has proved to be effective in increasing the robustness of the IFST intervention as we are able to offer a 'wrap around' service which enables the CSO to support the IP in their goals regarding reduction of alcohol or drugs and/or abstinence.

5.4 Early Intervention Service

The Early Intervention Service is aligned to the Integrated Family Support Team. The service includes the provision of up to eight week interventions for families where there are child care concerns (Tier 2/3 Child in Need) as a result of parental substance misuse and/or mental health concerns of a parent or carer.

5.5 Strengthening Families Programme

The Strengthening Families Programme is a universal, evidenced based, highly structured DVD and manual led intervention delivered over a seven week curriculum where parents and youths aged 10-14 to attend together. The programme is delivered within parent, youth and family sessions using narrated DVDs and other learning materials and portrays typical youth and parent situations.

The programme is very accessible in terms of literacy levels. Sessions are highly interactive and include role-playing, discussions and learning games. The whole family attend together and the project allows for younger children to attend as there is funding for play provision. There is also funding available to provide families with transport where needed.

The programme has been successfully implemented in Cardiff since 2005 with excellent outcomes reported. This work is led by a full-time coordinator with the support of a part-time coordinator and a part time administrator. The programme is delivered together with colleagues from a broad range of agencies working together to adopt a whole family approach.

The Strengthening Families Programme is designed to be of universal appeal as it is based upon a broad range of risk and protective factors associated with adolescent substance misuse and other problem behaviours. However, the programme is far from problem focused. Instead it acknowledges that any family, regardless of its circumstances, structure, or socio-economic standing faces challenges during this period of transition. Having a strength based approach reduces risk factors and increases protective factors beneficial to any family during and beyond the teenage years.

5.6 Support Working

The provision of Support Workers has been invaluable to the Phase 2 stage of the IFST intervention. Support Worker posts are funded through the Early Intervention Service grant with the provision that they support family members to maintain their goals during Phase 2 of the intervention, primarily during the period three to six months. Another important aspect of their work is to look at diversionary activities for parents and children away from drug and alcohol use and focussing their attention towards employment and education.

Support Worker Achievements

Work done	Hrs
Substance Reduction	324.20
Finance	160.45
Housing	448.65
Crime	149.75
Employment / Education	247.65
Routines	600.50
Medical	232.05
Cardiff	23
Vale	9

6 IFST Budget and Finances

6.1 Changes to the IFST Grant

From April 2015 the IFSS Grant will be transferred to the Regional Support Grant (“RSG”) with a 50/50 split between Cardiff and the Vale of Glamorgan. This could potentially present a significant challenge to delivery of the Service, as historically we have delivered on a 70/30 split in line with the demographics of each area.

6.2 IFST Budget

The IFST budget remains at £550,000 plus an additional £18,000 to cover provision for training. This sum is the allocated portion available to Cardiff and Vale of Glamorgan IFST to support the Central Training Unit based at Bridgend. If the Central Training Unit ceases to be supported in Bridgend, the funds will be available to be utilised locally for training. It has not, at the time of writing, been decided how this will be paid, although the likelihood is that it will be apportioned as part of the RSG.

This means that there will be an additional amount paid in April to both Cardiff Council and Vale of Glamorgan Council of £284,000 each which can only be used for the provision of the Integrated Family Support Service. The question of how this will be paid by each Local Authority has yet to be agreed. The funding of £568,000 will be utilised as follows:

Staff / Recruitment

Salaries – Manager, 2x CSW, 4 x IS, Administration	£440,000	80%
Management costs	£ 10,000	2%
Insurance premiums	£ 1,000	0%

Logistics / Office Accommodation

Staff travel	£ 12,000	2%
Office rent to Vale of Glamorgan Council (The Alps)	£ 9,000	2%
Stationery, Catering, Computing, CIN	£ 12,000	2%

Service Delivery

IRO	£ 46,000	8%
Commissioning Services	£ 10,000	2%

Training

In-house training	£ 5,000	1%
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Stakeholder Engagement

Conference costs	£ 5,000	1%
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Total	£550,000	100%
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To support central training unit	£ 18,000	
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The largest element of the budget (80%) is salaries and it is therefore important that each Local Authority ensures that there are processes in place to ensure that appropriate referrals are made to the service. There will undoubtedly be anomalies to the equal division of funding as each Local Authority will have a different level of requirement for this service.

6.3 Actual expenditure 2014-2015

Actual year end figures will fall below budget. This is due to some positions within the team being unfilled for part of the year.

	Actual expenditure for Quarter April – June 2014	Actual expenditure for Quarter July – Sept 2014	Actual expenditure for Quarter Oct – Dec 2014	Actual expenditure for Quarter Jan – Apr 2015	Total expenditure to March 2015
Staff/Recruitment <i>(please provide specific information)</i>	£79,635	£75,556	£111,145	£	£386,300
Logistics/Office Accommodation <i>(please provide specific information)</i>	£4,809	£6,052	£11,914	£	£34,609
Service Delivery <i>(please provide specific information)</i>	£0	£171	£0	£	£96,670
Training and Professional Development <i>(please provide specific information)</i>	£66-	£545	£3,206	£	£3,906
Stakeholder Engagement / Communications <i>(please provide specific information)</i>	£0	£0	£1,291	£	£6,291
Other <i>(please provide specific information)</i>	£0	£0	£0	£0	£0
TOTALS	£84,378	£82,324	£127,556	£	£527,775

6.4 **Cost Benefits**

The Welsh Government, through the Department of Education, has produced a tool which can measure the cost of an individual's/family's behaviour to the community. This application allows the input of behaviours pre and post interventions and works out cost savings based on the information provided. It is acknowledged that this is not an absolute science and that there could be savings made that we are not aware of, as well as savings shown that may have been made regardless of the intervention. However, the CBA tool is recognised by the WG. It is planned to provide information on all families worked with since the beginning of the financial year. It is very important for a service funded by the public purse to be able to demonstrate, wherever possible, that it is contributing to savings in other areas of the community.

Using the tool the IFST has evidenced substantial savings each year since inception.

7 Key Achievements – outcomes

7.1 IFST monitoring systems are underpinned by RBA methodology. A performance management framework has been developed that complies with the requirements set out in section 63 & 64 of the Children’s and Families (Wales) Measure 2010. The framework identifies mechanisms for reporting on the performance of the IFST to the IFSS Board and the Welsh Government on a quarterly and annual basis, using an RBA report card approach that detail:

- The level of service provided (**How much?**)
- The quality of the service provided (**How well?**)
- The outcomes achieved for children and families (**What difference did it make?**)

A selection of the outcomes of the RBA report cards covering the annual performance of the IFST can be found below. However, the Welsh Government has indicated that it would welcome a standard set of RBAs to agree common outcomes and measurements for all IFS teams throughout the country. As part of this process the Business Support Officers from Cardiff and the Vale and Newport IFSTs have been working together to develop these.

7.2 Referrals

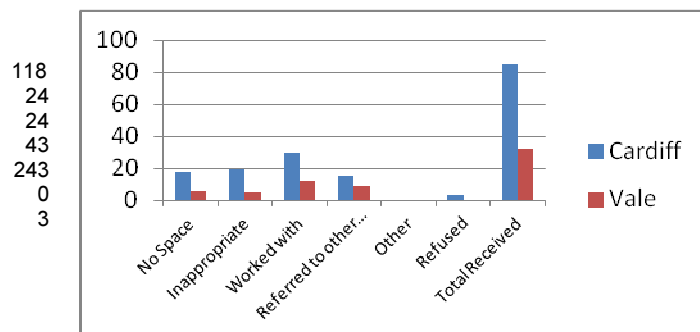
The initial service level agreement required the team to work with 100 families throughout the year. However, given that an Intervention Specialist (IS) can work with 10 families per year and a Consultant Social Worker (CSW) will work with a minimum of 5 it was felt that a pro rata target of 70 families was again the most appropriate measure in this third year of operation, as it took into account the timescales for filling the empty posts.

As not every referral will necessarily be appropriate or the IFST will not have capacity to offer a service, the team aimed to receive at least 84 referrals over the year (7 per month).

By monitoring the number of referrals, the IFST can maintain momentum to ensure that as many families as possible can receive an intervention.

Numbers of Referrals Received

Total received	118
No space	24
Inappropriate	24
Worked with	43
Referred to other services	243
Other	0
Refused	3



Included in the detail is the number of 'no space' referrals and the number of inappropriate referrals. This will provide information on staffing levels to ensure that appropriate families are monitored so that they receive an intervention as soon as possible and also monitor inappropriate referrals to ensure that teams are aware of the IFSS referral criteria. For further monitoring, the source of the referral is also noted, differentiating between the Vale of Glamorgan and Cardiff Councils.

A 'No space' referral is a referral that has been received and is deemed to be appropriate but, because all IS and CSW workers are working with families, it has to be closed. It is useful to maintain information on these families and then monitor them for appropriateness as soon as a space becomes available.

Total 'No Space' Cardiff: 18
Total 'No Space' Vale: 6

7.3 Families who received a service

For further analysis, also provided are the ethnicity of families, the number of children and the types of substances used. An indication of how well the service has done is collated using feedback from child care social workers and families worked with indicating whether they had received a positive experience.

Families worked with

ETHNICITY OF INDIVIDUALS WORKED WITH:

White Welsh: 28 Mixed White/Black Caribbean: 0 Other: 4

SUBSTANCE USE: Male 9 Female 32

SUBSTANCES USED:

Alcohol	19	Cannabis	12	Heroin	11	Ketamine	0
Methadone	4	Amphetamines	4	MKat	2	CRACK	1
Cocaine	8	Prescribed	5				

NUMBER OF FAMILIES AND CHILDREN:

No of Families worked with: 36 Number of children: 69

WHERE ARE OUR FAMILIES?

Cardiff: 26 Vale of Glamorgan: 10

Breakdown of children by age group

Pre-birth	5
0-3 years	12
3-6 years	15
7-10 years	18
11-14 years	21
14-16 years	9

Parental breakdown

1 parent Female	18
1 parent Male	3
2 parent	21
Mum and partner	1
Mum and GP	0

7.4 Referring to other services

A measure of how much better off the families are is shown by measuring the number of individuals accessing services as a result of the intervention. Many of the families referred to the IFST are families generally considered to be hard to engage. It is an expectation that at the end of the intensive phase of the IFST intervention, families will 'invite' other appropriate services to support them in their endeavours to meet their goals, thus sustaining the changes made to ensure the wellbeing of their family.

Since the IFST first started working with families, we can see the services that were accessed before the interventions (81) compared to those accessed after the interventions (334) – a healthy 411% increase.

Services Accessed prior to Intervention		Services Accessed as a result of Intervention	
The following services have been regularly accessed by individuals prior to receiving an intervention:		The following services have been regularly accessed by individuals after receiving an intervention	
Health	36	Health	110
Local Authority	6	Local Authority	30
Counselling / Interventions	17	Counselling / Interventions	96
Tenant Support / Housing	5	Tenant Support / Housing	37
Debt Advice	0	Debt Advice	4
Employment	0	Employment	8
Legal / Crime	5	Legal / Crime	16
Education advice	5	Education advice	10
Young Carers	2	Young Carers	6
Parenting	4	Parenting	14
Domestic Violence	1	Domestic Violence	10

7.5 Happiness Scale

In recognition that, for some families attaining and maintaining the goals set during the IFST intervention (although this evidences necessary behaviour change), is not always representative of greater family cohesion regarding 'happiness', Cardiff and the Vale IFST has sourced a tool to 'drill deeper' into how families feel about themselves and the quality of their lives before and after the intervention. From written feedback families say that they feel happier, more hopeful and more positive about the future at the end of the intervention.

Having identified this as an important area to explore, the IFST adopted the Warwick-Edinburgh Mental Wellbeing Scale as an appropriate tool that fulfilled the following criteria:

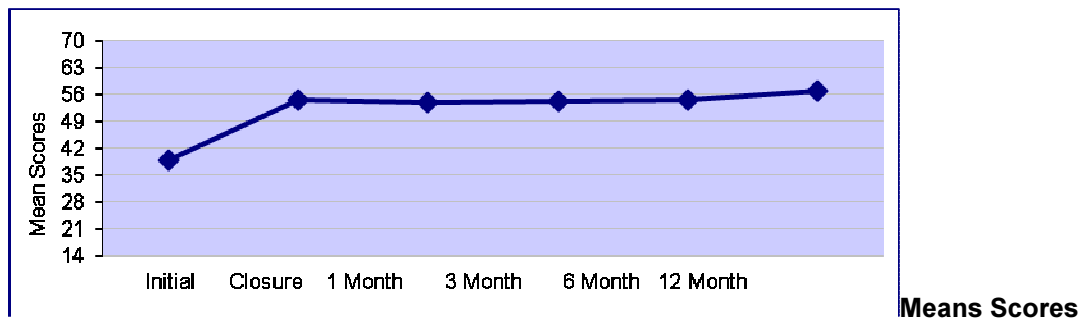
- quick and easy for both practitioners and individuals in families
- useful and have meaning for both adults and young people
- positively phrased

- able to be used before and after an intervention
- a respected tool with a valid population sample
- meaningful and relevant
- it also needed to have a low impact

The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) is based on scores to 14 questions given to a client asking them how they are feeling. This is ongoing research in which IFSS interventions are included. The scores (1 (Low - None of the time) – 5 (High – All of the time)) are totalled and plotted on a graph. The graph indicates the mean score at each follow-up point.

This was piloted in Cardiff and the Vale of Glamorgan Family Services and information to date suggests that this method of collecting data necessary to establish family and individual wellbeing is relevant and useful in enabling us to ensure we are providing the right service at the right time to the appropriate families. The questionnaire is filled in by family members as close to the beginning of the intervention as possible, then at closure and again at the follow ups. All the scores go into a spreadsheet which measures their general happiness before and up to 12 months after the intervention.

Happiness Scale (Warwick-Edinburgh Mental Well-being Scale)



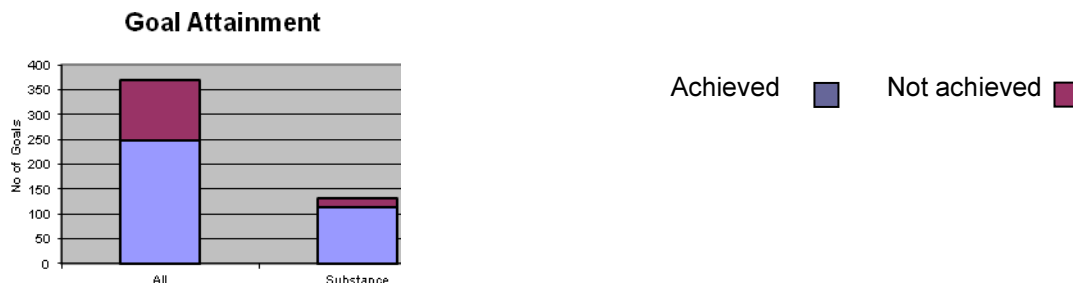
7.6 Goal Measurement

The IFST works with families to create clear, measurable and attainable goals in line with the referring social worker’s expectation for outcomes of the intervention to ensure the children’s safety. Families will generally work towards an average of two goals of which at least one will focus on reducing/stopping problematic substance misuse. The aim is to achieve a success rate of 75% of goals achieving a score of ‘0’ or higher.

An important measure of family success will be through goal measurement. The IFST has now had the opportunity to employ a number of Support Workers to assist families during phase 2 of the intervention. In this respect, it is expected that an improvement should be seen in the goal achievement shown in 8.8 (Distance travelled) although this will take some time to evidence.

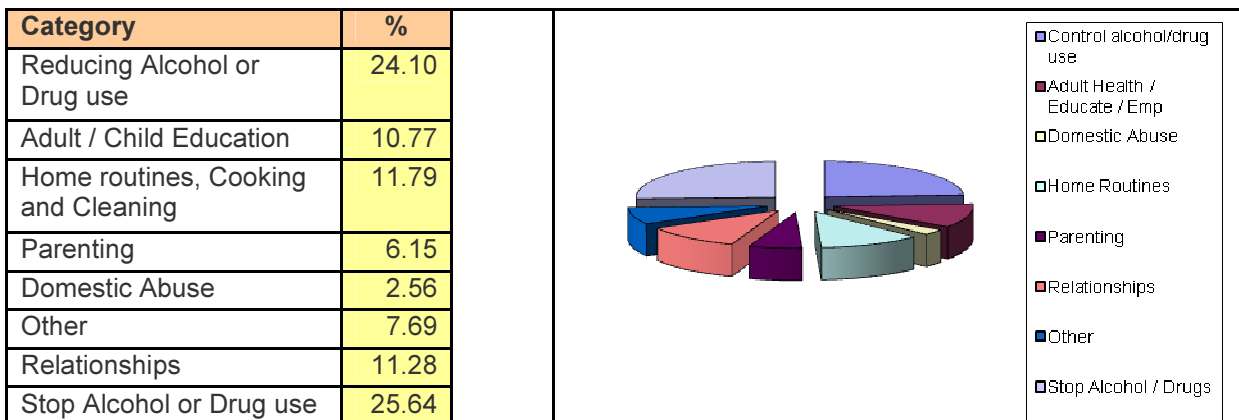
Goal Attainment

Goals	All	Substance
No of goals maintained	248	112
No of goals not achieved	122	20
Total No of goals	370	132
Percentages	67%	85%



7.7 Goal Categories

The goals families set are generally based on the particular behaviours the families have around the child protection concerns of Social Workers. At least one of these goals will be substance related or the behaviour which precipitates that substance use. For example, a goal around relationships and communication could be highlighted because of parental domestic abuse resulting in increased alcohol/drug use.



7.8 Child and Family Outcomes

Child and family outcomes are measured by the number of children on the Child Protection Register who are de-registered and families closed to Children's Services as a result of the intervention. The measurement of children accommodated does not represent a failure of the intervention. It is a statement that the IFST intervention has assisted the social work assessment by making a timely decision in the best interest of the child/children.

Family and Children's outcomes

No. of families accessing other services

The majority of families referred to the service had been difficult to engage with services and more specifically substance misuse services prior to the intensive part of the intervention.

Following the intensive intervention engagement with other services increases and families continue to sustain and build on the substance misuse changes they have made.

No. of family members accessing services prior to the intervention:	26
No. of family members accessing services after the intervention:	64
%age of family members accessing services prior to the intervention:	27%
%age of family members accessing services after to the intervention:	65%

No of children de-registered:	30	23%
No of families closed to Social services:	18	26%
No of children returned home	1	1%
No of children placed with wider family:	5	4%
No of children placed on the CPR:	2	2%

7.9 Engagement of fathers and male carers

Following research commissioned by Cardiff Social Services regarding engagement of fathers and male carers in the child protection system, the IFST created a new outcome measure to measure the effect that the intervention has on fathers and male carers and ensure that they are seen as equal in importance in the family as the mother where appropriate. See item 7 above.

To appropriately capture this information a new measurement designed to look at how many male members of families are engaged in the intervention has been set via a RBA report card. Initially we are looking at numbers of male carers and their position in the family and access to other services before and after the intervention. We are also comparing how males and females score in goal attainment. Initial figures show that although we assumed that the team were engaging male family members, we have not done this as well as we thought. As a result we have used the model in engaging fathers and the team is now ensuring that fathers take a more active role in the intervention wherever possible – this includes non resident fathers.

Numbers of families where there is a male presence recorded (cumulative figures)

	Both Parents	Non Res Dads	Lone Fathers	Partners (Not dads)
Numbers	70	16	9	8
Male User	46	4	8	5
Female User	60	16	1	8
Access Before No of services	7 16	0 0	2 3	0 0
Access After No of services	17 41	3 9	3 10	0 0

**How well are we doing?
Comparison of male / female goal attainment**

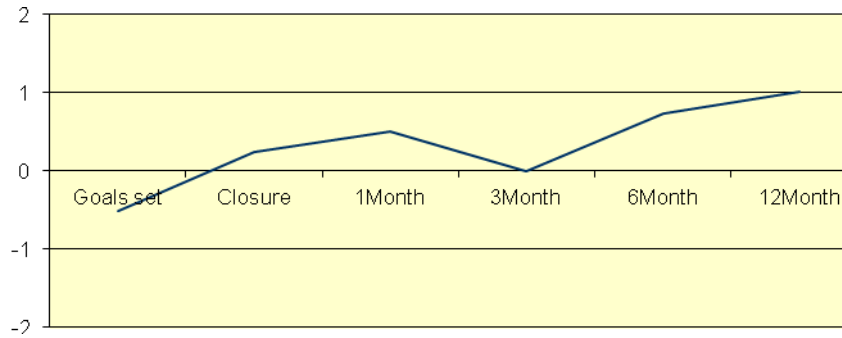
Goals measured	2012	%age	2013	%age	2014	%age
Male goals (All)	8/13	61.53%	49/80	61.25	53/87	60.9%
Male goals (Sub)	3/8	37.50%	35/44	79.54	35/44	79.5%
Female goals (All)	138/163	84.66%	181/210	86.19	160/239	66.9%
Female goals (Sub)	63/74	85.14%	91/105	86.67	64/74	86.4%

These measurements clearly indicate that male carers are less involved than female carers in the changes families need to make even though 98 of the 126 families measured have a male presence.

7.10 Distance Travelled

Goals are clear, measurable and attainable and set by the families in line with Social Worker requirements to ensure the safety and wellbeing of the children. They are measured by statements that will establish how well they are doing, with -1 and -2 being not achieved and 0 being the level at which it is considered safe enough for the children to remain at home. +1 and +2 exceed

expectations. A graph detailing the average scores of goals measured when they are set and then throughout the intervention to the 12 month follow up shows whether families are better off after the intervention.



7.11 Feedback

Another method of measuring 'distance travelled' by families is the feedback received from referring social workers and the families at the end of the intensive phase. It is, however, a difficult method to measure with any meaning because it continues to be difficult to obtain Social Worker and family responses. All feedback received has been positive, although measurement is from seven families and seven Social Workers.

8 Training

8.1 Training Evaluation

With regard to training delivered to the wider workforce, the total number of people receiving training through the IFST during 2014/15 is 98. The training calendar for 2014/15 can be found at [Appendix 1](#). One Intervention Specialist together with one Consultant Social Worker has co-facilitated three 4-days IFSS Model training with support from the WG Central Resource Team, including one with the new Western Bay consortium. Other attendees included managers and practitioners from Adult and Children's Services, the midwifery service and voluntary sector including substance misuse agencies from across Cardiff and the Vale of Glamorgan.

Five Intervention Specialists and two Consultant Social Workers have co-facilitated nine one day training courses between April 2014 and March 2015 in Enhancing Motivation, Lowering Resistance and Goal Setting, again with support from the WG Central resource team. Attendees have included Children's and Adult Social Workers and Managers, Health Visitors, School Nurses and a wide variety of practitioners from the health and social care sectors.

Participants completed the evaluation form as well as describing verbally how they experienced the training. Amongst the verbal feedback was a description of how participants would utilise the training in their workplace. All of the participants would recommend the training to their colleagues.

All additional comments from participants were particularly positive and included:-

"Very useful. Got me thinking of my practice. Lots of tips"

"Gained a lot of knowledge and different approaches to apply to my day to day job. I found all of the activities very powerful in accessing my development of my MI"

"Delivered at a very steady pace, very clear. All main points understood with plenty of opportunities to participate and ask questions"

"Good, clear, easy to understand, trainers who were knowledgeable"

"Useful, though provoking and group work/role play helped me reflect on how I am communicating in identifying care and treatment goals with my client"

"I found all of the activities very powerful in assisting my development of MI"

9 Partnership Working

- 9.1 Creation of pathways to other services is ongoing and meetings with managers of services continue to ensure that the interface between services is seamless and benefits families worked with. With the Families First Commissioning process complete and tenders awarded, work will be ongoing to ensure discussions and presentations are in place to enable clear referral routes for families in phase 2 of the IFST intervention. It is anticipated that the IFST will be instrumental in delivering training to providers early in 2014/15 to ensure a shared set of principles and values underpin all work with families which will create a firm foundation for services to build their model on.
- 9.2 The Service Manager for the IFST is instrumental in working with partner agencies to develop a Workforce Development plan in line with the Welsh Government transformational change agenda. These services include Families First, Team around the Family, Sure Start and Barnardo's to ensure families across Cardiff and the Vale of Glamorgan receive a consistent approach in service delivery.
- 9.3 With the expansion of Flying Start and the implementation of Families First and IFSS it is necessary to ensure that there exists a robust mechanism for promoting joint-working between these key initiatives and other providers of support to families across both counties. The IFST Service Manager is a member of the Early Intervention and Prevention Steering Group in both Cardiff and the Vale of Glamorgan with the purpose of addressing matters that relate specifically to the interface issues that are likely to arise, closing gaps and reducing duplication. These groups will support the 'Think Family' agenda to ensure that families receive seamless support that meet their needs.

10 Challenges and Issues

- 10.1 The main challenge for 2014/15 will be regarding the transference of the Grant to the RSG across two local authorities. It is understood that a letter of expectation will be sent out for the RSG funding for 2015/16 and the regulations will be updated for 2016/17 to note and strengthen requirement for pooled budgets. However, there remains a concern that the fidelity of the model might be undermined, and there's a lack of clarity about what LA's will be held to account to deliver (as currently this is set out in the grant terms and conditions). Some Boards are still to make fundamental decisions about structures of IFST for 2015/16 and the management group are noticing that the original intent of IFST is becoming increasingly diluted because of the levels of uncertainty and lack of strategic direction.
- 10.2 With the recruitment of an IRO it will be essential to ensure that the service is embedded in the IFSS methodology. Training of all the IRO's in Cardiff to ensure this will be a priority in the coming year.
- 10.3 Concerns have been expressed regarding the continuation of the IFST's across Wales however, it has been reassuring that Lisa Dunsford, WG, has attended the managers meetings in Builth Wells and is able to reassure managers and staff that the Minister, Mark Drakeford, is committed to this way of working with families (and not only those where there are substance misuse issues) and the IFSS leading the way on transformational change is still high on his agenda, by sharing and disseminating the IFSS practice to influence how services engage with families.
- 10.4 With the unprecedented challenges facing local authorities regarding budget cuts, pressure on the IFST is likely to increase without funding for extra resources becoming available. As with all challenges there are opportunities. The service is intending to pick up new referrals in week three of the intensive phase of the intervention, when the family will be practicing and implementing new ways of working. The team will ensure they are building robust relationships with partner agencies (statutory and voluntary/third sector) to support the family post intensive phase.
- 10.5 At a local level, challenges have centred on maximising the potential for consistency of practice when working across two local authority areas that have different systems and processes that are well established and work effectively. In addition, the intention to afford IFST staff the flexibility for mobile working in order to improve efficiency and effectiveness has proved challenging due to variance in development of IT systems.

11 Priorities for the next 12 months

- 11.1 The main priority for the next 12 months will be to ensure least disruption to delivery of service in a culture of change and uncertainty. We know the model works and has positive outcomes for families and referrers, so we will continue to build and consolidate on the strong progress made over three years since the IFST inception. Work will focus on a number of areas including increasing the number of referrals worked with by IS's, picking up in week three and if necessary visiting the family (with consent) prior to the consultation with the social worker.
- 11.2 Other priorities will be to continue to train the wider workforce in the IFST model of intervention using Motivational Interviewing, Solution Focussed and other cognitive behavioural techniques and the need to improve inter-agency and partnership working, to provide a truly integrated service across Social Care and Health, Adult and Children's Services and third sector agencies. With the referral threshold into Children's Services increasing we will train and work with third sector organisations, including housing associations and their housing support teams, to increase confidence and competence in working with families in an early intervention and prevention model.
- 11.3 We will continue to embed the system for the formal review of IFST cases where Independent Reviewing Officers become more confident and competent in their role, chairing these reviews and to improve partnership working to allow the IFST to be recognised as a valuable resource to professionals with whom the team works directly and indirectly.
- 11.4 The commitment to further strengthen partnership working across Families First, Flying Start and Communities First will continue. The Service Manager continues to be an active member to partnership forums including:
- Early Intervention and Prevention Group
 - Workforce Development Group
 - Cardiff and Vale Substance Misuse Area Planning Board.
- 11.5 To consolidate a working relationship with both Cardiff & Vale Training Department to ensure IFSS training is embedded in the training calendar and work together to align the training to the new CPEL framework if possible.
- 11.6 Governance arrangements to be reviewed as a result of non-attendance by certain partners of the Board and Operational Group to be reinstated to sit below the executive group to ensure guidance and support delivery of the Service.

12 Conclusion

Despite the challenges regarding staff shortages (mainly due to maternity leave and retirement of a member of staff), and the budget pressures on both Cardiff and the Vale of Glamorgan Councils, the team have worked tirelessly in their endeavours to deliver an excellent service to benefit families in Cardiff and the Vale of Glamorgan.

In these unprecedented times we have to be innovative and adaptive whilst ensuring the fidelity of the IFST model. We will continue to build on the positive work with families, referrers and other professionals to ensure the IFST continues to be a valuable resource, ensuring best outcomes for families and children across Cardiff and the Vale of Glamorgan.

We are excited at the prospect of working with partner agencies in an early intervention and prevention model, which we hope will reduce the demand on Statutory Services by working in partnership with families to ensure the safety and wellbeing of their children.

2014 – 2015 Training Schedule

Module	Title	Overview	Available spaces	Date
Module 1	Building Stronger Families by Enhancing Motivation for Behaviour Change	<p>Aims: At the end of this course participants will:</p> <ul style="list-style-type: none"> ✓ Understand the concept of intrinsic and external motivation ✓ Explore the theoretical evidence for how people change behaviour ✓ Practice the skills proven to enhance motivation and assist people through change 	15 15 15	06/10/2014 17/11/2014 12/01/2015
Module 2	Building Stronger Families: Lowering Resistance to Behaviour Change in Families	<p>Aims: At the end of this workshop participants will:</p> <ul style="list-style-type: none"> ✓ Understand the nature of resistance & how it impacts on behaviour change ✓ Experience the dynamics associated with building and lowering resistance ✓ Recognise resistance in service users ✓ Practice strategies to reduce it 	15 15 15	25/09/2014 04/12/2014 22/01/2015
Module 3	Building Stronger Families Using Outcome Focussed Interventions	<p>Aims: At the end of this workshop participants will:</p> <ul style="list-style-type: none"> ✓ Explored referral taking processes & negotiating goals from the outset ✓ Considered the process of change & where goal setting fits in ✓ Explored families preferred futures ✓ Considered SMART goals ✓ Considered how to maintain a consistent approach to goals 	15 15 15	15/07/2014 11/11/2014 17/02/2015
	IFSS Model – 4 day training IFSS Model – 3 day training	<ul style="list-style-type: none"> ✓ Describe philosophy and the underpinning knowledge ✓ Demonstrate skills and strategies implicit to the model ✓ Share a collective view of the process from beginning to end 	15 15 15	18-21/08/2014 17-20/08/2014 17-19/02/2015

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AGENDA ITEM 4

THE CITY OF CARDIFF COUNCIL
GYNGOR DINAS CAERDYDD

CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE

7 APRIL 2015

CHILDREN'S SERVICES PERFORMANCE MANAGEMENT INFORMATION

REASON FOR THE REPORT

1. The Children and Young People Scrutiny Committee is responsible for scrutinising the performance of Children's (social) Services. This report sets out performance data outlining progress against the objectives aligned to the social theme for the quarter ending 31st December 2014.

BACKGROUND

2. The ongoing development of the Cardiff Performance Management Framework has brought into line the monitoring and evaluation of progress against the key objectives as set out in the Corporate Plan and the performance indicators set to assist in the understanding of the overall performance position of the Council. This range of performance data relating to Children's Services is contained in **Appendix B** to this report.
3. The Cabinet have identified that the delivery of their key priorities and the Council's performance against key indicators should be the focus of future quarterly reports. Quarterly reports are prepared on that basis, allowing for trend analysis to be undertaken on an appropriate basket of indicators and the effective delivery of the Administration's key priorities as attached at **Appendix A**.
4. The performance report attached at **Appendix B** has been constructed to highlight the progress made in delivering the key objectives, associated performance indicators, and commentaries that help to identify progress, issues and actions planned where the trend in performance is falling. To make the information in the performance report clearer, each indicator is accompanied by an arrow, and in some cases, a happy, indifferent or sad face.
5. For your information, these symbols represent the following:
 - The face symbol shows whether performance is likely, unlikely to, or may meet the target set for the year.
 - The arrow direction shows whether performance has declined, has been sustained or improved when compared with an appropriate previous period.
6. At the meeting officers will be present to explain the performance information to the Committee, to highlight performance issues, and to answer questions that Members might have.

PERFORMANCE DURING QUARTER 3: OCTOBER – DECEMBER 2014

7. Performance is being reported against the following corporate outcomes:

People in Cardiff are safe and feel safe
People in Cardiff achieve their full potential
People in Cardiff are healthy
Cardiff is a fair, just and inclusive society

8. The Service has three main functions:

- a. Promoting the welfare of children in need
- b. Safeguarding children
- c. Improving outcomes for looked after children

OVERVIEW OF QUARTER 3 PERFORMANCE

9. During Quarter 3, improvement was achieved in relation to a number of key indicators. For example, there was continued improvement in relation to timeliness of initial assessments with performance rising from 47% in Quarter 2 to 67% in Quarter 3 despite a 5% increase in the number of referrals outcomed for initial assessment (1,028 from 975). Further detail is included in paragraph 20.
10. Performance in relation to the timeliness of core assessments also increased (from 55% during Quarter 2 to 70% in Quarter 3) despite a 24% increase in the number of required core assessments (596 from 482). Performance in December reached 76.8%, just short of the 80% target.
11. Timeliness of initial child protection conferences increased from 86% in Quarter 2 to 93% in Quarter 3 in the context of a 40% increase in the number of required initial child protection conferences (165 from 118).
12. There was also continued improvement in recording of initial care plans for looked after children – performance increased to 81% from 69% in Quarter 2.
13. However, recording of decisions on referrals decreased from 87% in Quarter 2 to 84% in Quarter 3 in the context of an 8% increase in the number of referrals received, and the number of children seen by a social worker during initial assessment decreased from 60% in Quarter 2 to 57% in Quarter 3. Senior managers have initiated an analysis of the reasons for, and risks associated with, this level of performance in relation to children being seen at initial assessment.
14. Work to progress the Directorate's improvement plan has continued:
 - a. A draft Prevention Strategy has been developed and will be presented to Members at the April Scrutiny Committee. The potential role of a Social Impact Bond within that Strategy will also be subject to more detailed consideration.
 - b. Further independent audit work has been undertaken and reports received – action plans to address recommendations are in place and being monitored

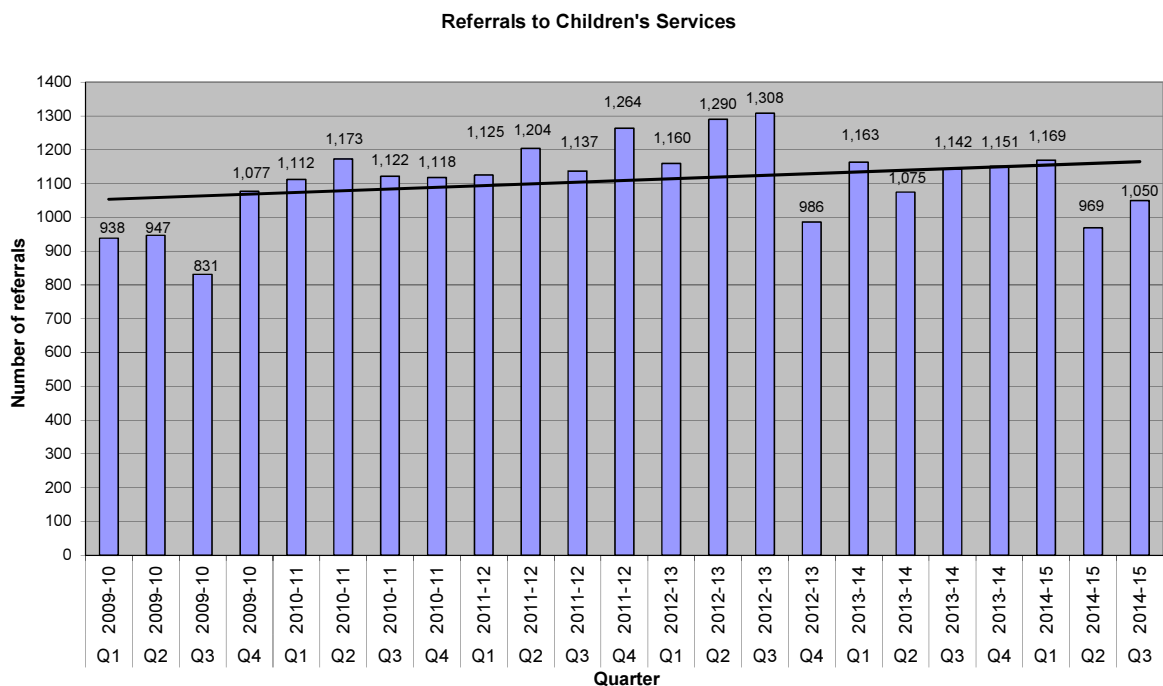
via the Service Improvement Board.

- c. An Exit Strategy for the Managed Team has been agreed on the basis of the additional team withdrawing in mid-April.
- d. A proposal for weekly Legal Surgeries has been agreed between relevant Directors and Legal Surgeries will commence in January.
- e. A Lean review has commenced.

DETAILED COMMENTARY

A) PROMOTING THE WELFARE OF CHILDREN IN NEED

15. Children’s Services received 1,050 referrals in Quarter 3 (Referrals 1) compared with 969 in Quarter 2. In response to the Committee’s request following presentation of the Quarter 2 performance report in December 2014, a detailed breakdown of contacts and referrals is provided at **Appendix C**. This report shows the source of the 7,420 contacts received by Children’s Services during Quarter 3, along with the outcome and a summary of the trend over the last 2 years. Similar information is provided for the 969 referrals received during Quarter 3. The number of referrals to the service continues to be closely monitored (see graph below). The proportion of referrals received that were re-referrals within a year remained static at 25.6%.



16. In relation to the recording of decisions on referrals (SCC/006), the improvement that was evident in Quarter 2 has dropped back slightly from 87.1% (844 / 969) to 83.7% (879 / 1,050) in Quarter 3. This is in the context of an 8% increase in the number of referrals received. The performance report is based on electronic records, but there is evidence that the electronic capture of the information is delayed. However, management oversight confirms all referrals are subject to manager decision and

prioritisation on the day of receipt.

17. Agreement has been reached with the Chief Superintendent to establish a new model for managing referrals and a programme of meetings has been arranged with the Director of Children's Services and the Chief Superintendent to actively progress the development of a new model.
18. Source of referrals – a table summarising the source of referrals to Children's Services during Quarter 3 is included below:

Source of Referrals	Q3
Ambulance Service	0
Central Government Agency	0
Family, Friend or Neighbour	27
Housing	0
Independent Provider Agency	0
LA Housing Dept. or Housing Association	23
Local Authority's own Social Services Department	106
Other Agency	130
Other Departments of Own or Other LA	50
Other Individual	14
Other Social Services Department	0
Other Type	0
Police	272
Primary Health / Community Health	125
Probation Service	45
School	207
Secondary Health	48
Self Referral	1
UK Border Agency	2
Total	<u>1,050</u>

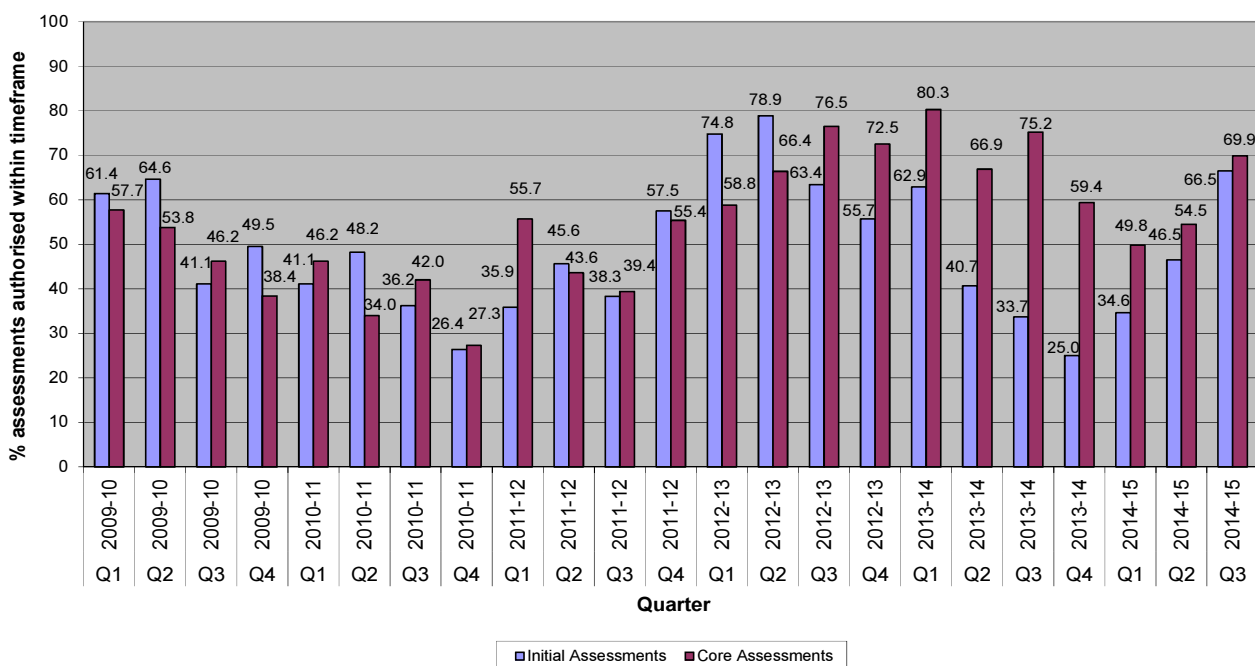
19. Outcome of referrals – 92.5% (971 / 1,050) of referrals were allocated to a social worker for initial assessment in Quarter 3 compared with 97.0% (940 / 969) in Quarter 2 (SCC/007a). 5.4% (57 / 1,050) of referrals were allocated to other grades of worker for initial assessment compared with 3.6% (35 / 969) in Quarter 2. 3.0% (32 / 1,050) of referrals did not proceed to assessment during the quarter. In these cases, referrers were signposted to other agencies, given advice or information, or the referrals were closed with no further action. As noted in previous reports, while we have improved the management of the front door and determining what contacts should become referrals, we are also seeing an increase in the complexity of the cases that stay open to Children's Services.
20. Improvements made in relation to the timeliness of initial assessments in Quarter 2 have been sustained and performance in Quarter 3 improved to 66.5% (654 / 983) from 46.5% (537 / 1,155) in Quarter 2 (SCC/042a). Although performance increased during the quarter, improvements were not at the rate anticipated. Following an increase to 75% in October, timeliness fell back to 62% in November and December as a result of a change to the I&A structure. A four-team I&A structure has been introduced and it is anticipated that further improvement will be evident in Quarter 4 now that the structure has become embedded.

21. The Children's Services Improvement Plan continues to be supported by external audit capacity provided through the Welsh Local Government Association (WLGA). Further independent audit work has been undertaken and reports received – action plans to address recommendations are in place and being monitored via the Service Improvement Board.
22. 56.5% (555 / 983) of children were seen by a social worker during their initial assessment compared with 59.6% (688 / 1,155) in Quarter 2 (SCC/011a). Inclusion of children seen by a Children's Services worker other than a social worker increases the percentage of children seen to 60.4% (594 / 983). Senior managers have initiated an analysis of the reasons for, and risks associated with, this level of performance.
23. The percentage of initial assessments where information regarding ethnicity, religion and first language were recorded during Quarter 3 is as follows:
 - a. Ethnicity – 74.0% (727 / 983)
 - b. Religion – 37.4% (368 / 983)
 - c. First language – 58.7% (577 / 983)

A detailed breakdown of the ethnicities, religions and first languages of children and young people who were subject to an initial assessment during Quarter 3 is available on request.

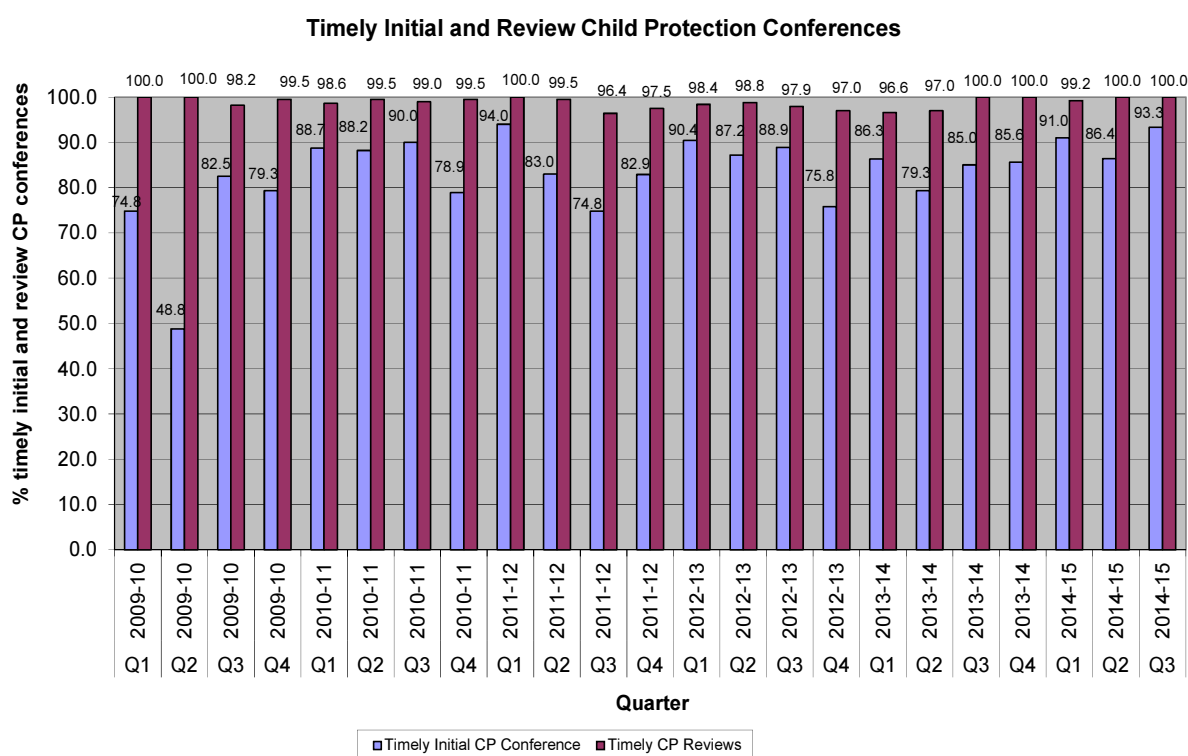
24. Performance in relation to timely completion of core assessments improved to 69.9% (438 / 627) in Quarter 3 compared with 54.5% (337 / 618) in Quarter 2 (SCC/043a). This improvement is in the context of a 24% increase in the number of required core assessments (596 from 482). Performance in December reached 76.8%, just short of the 80% target. A graph displaying timely completion of (initial and) core assessments is included below.

Timely Initial and Core Assessments



B) SAFEGUARDING CHILDREN

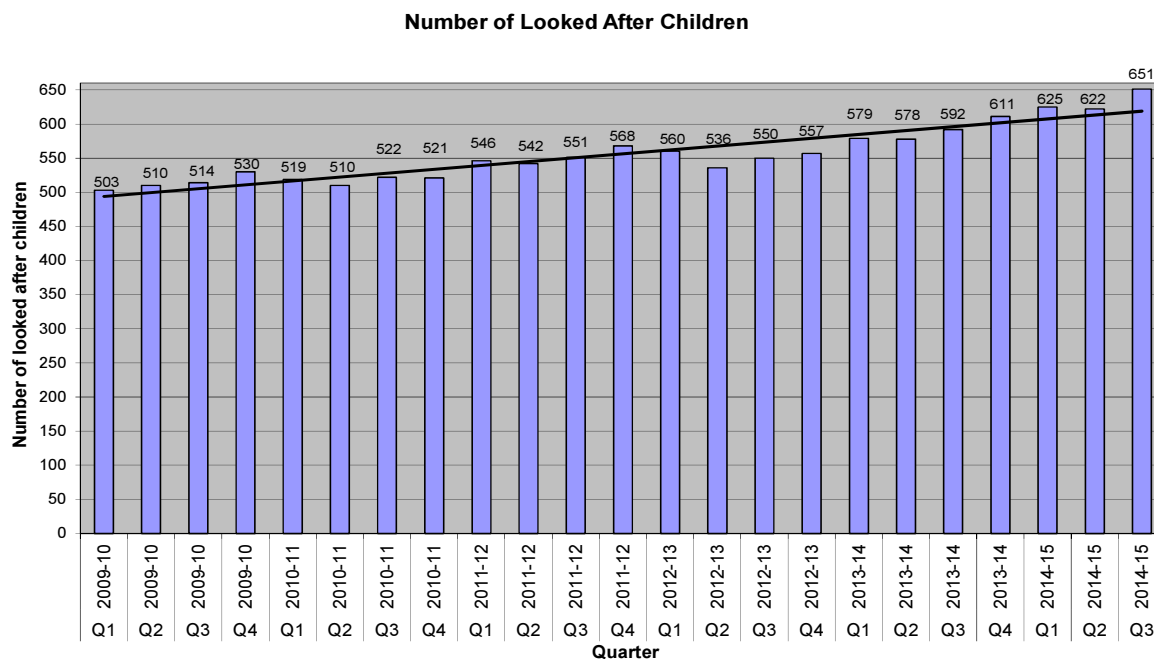
25. The number of children on the child protection register at the end of Quarter 3 was 297 (from 294 at the end of Quarter 2) (CS CPR 4).
26. 93.3% (154 / 164) of initial child protection conferences took place within the 15 working day timescale in Quarter 3 compared with 86.4% (102 / 118) in Quarter 2 (SCC/014). Performance has improved in Quarter 3 in the context of a 40% increase in the number of required initial child protection conferences (165 from 118).
27. Timeliness of review child protection conferences remained at 100.0% (237 / 237) in Quarter 3 in the context of a 23% reduction in the number of required conferences (237 from 309 in Quarter 2). Performance against initial and review child protection conferences is displayed in the graph below:



28. Initial core groups took place within the 10 working day timescale in 95.5% (127 / 133) of cases in Quarter 3 compared with 94.8% (92 / 97) in Quarter 2 (SCC/015). This slight improvement is in the context of a 37% increase in the number of required initial core groups (133 from 97).
29. 100% (297 / 297) of children on the child protection register had an allocated social worker at 31st December 2014.
30. The newly integrated Safeguarding Unit became operational. The Unit co-locates safeguarding teams from Education, Health & Social Care (POVA) and Children's Services (Independent Review and Case Conference Chairs). Safeguarding Business Support staff from Children's Services, Health & Social Care and POVA Co-ordinators have also transferred to the Unit.

C) IMPROVING OUTCOMES FOR LOOKED AFTER CHILDREN

31. The number of children who were looked after at 31st December 2014 (not including those children being looked after as part of a respite care arrangement) increased by 5% to 651 from 622 at 30th September 2014 (CS LAC 3e). This represents a rate of 9.1 children per 1,000 in Cardiff, which is the same as the all Wales rate as at 31st March 2014. The recent fluctuations in the number of looked after children are displayed in the graph below.



32. Initial care plans were in place prior to children becoming looked after in 81.2% (82 / 101) of cases during Quarter 3, compared with 69.4% (50 / 72) in Quarter 2 (SCC/001a). Performance against this indicator has improved in Quarter 3 following the introduction in September of a new process designed to simplify the system and reduce the burden on staff. This improvement occurred despite a 40% increase in the number of children starting to be looked after (72 to 101).
33. 81.8% (45 / 55) of permanence plans were in place by second looked after review in Quarter 3, compared with 72.5% (37 / 51) in Quarter 2 (SCC/001b).
34. 71.3% (367 / 515) of looked after children were placed with independent sector providers at the end of Quarter 3 (CS LAC 44), remaining static from Quarter 2 71.3% (351 / 492). The number of children placed in independent sector residential placements increased to 59 from 55 at the end of Quarter 2.
35. 61.4% (316 / 515) of children in regulated placements were placed in Cardiff at the end of Quarter 3 compared with 62.2% (306 / 492) at the end of Quarter 2 (CS LAC 58). A further 93 children placed outside Cardiff were within 20 miles of their home address. 1 of the children not placed in Cardiff is placed with a relative carer. For some children placement outside the authority is in their best interests, examples include children placed with family members who live outside Cardiff, children placed in specialist placements and some children who are placed in areas that are closer to their home address than some parts of the city.

36. 87.7% (429 / 489) of statutory reviews for looked after children were held within prescribed timescales in Quarter 3 compared with 82.9% (310 / 374) in Quarter 2 (SCC/021). 87.9% (430 / 489) of statutory visits were held in accordance with regulations in Quarter 3 compared with 89.0% (333 / 374) in Quarter 2 (SCC/025).
37. All looked after children were allocated to a social worker at 31st December 2014.

YOUTH OFFENDING SERVICE

38. The numbers of First Time Entrants (FTEs) to the Youth Offending Service (YOS) has decreased during Quarter 3 to 32 (from 37 in Quarter 2).
39. The self-assessment audit on recording in line with National Standards went well with YOS scoring highly throughout the assessment - 82% being the lowest score. The Youth Justice Board (YJB) has chosen not to undertake a full validation of our results but have sought clarification on one or two points.
40. The re-offending toolkit has been in use since Quarter 2. The YJB is using past year's data for analysis purposes and will be making recommendations based on their findings. Comparative data is expected to be available in Quarter 4.
41. The Youth Offending Service developed and implemented an improvement plan following dialogue with the Youth Justice Board - all action points have been implemented, including the work on re-offending and the use of the toolkit that is ongoing.

STAFFING

42. The percentage of social worker vacancies in Quarter 3 was 25.3% compared with 28.6% in Quarter 2 (Staff 1). The vacancy position has improved slightly during the quarter as appointed social workers have taken up post. The apparent high percentage of vacancies must be treated with caution because the percentage was inflated by the creation of new posts as part of the realignment of Children's Services. Recruitment is ongoing - the recruitment campaign this year has been very successful and has directly contributed to the service's ability to retain social workers. We are now attracting numbers of applications from agency staff who have been working within the service, and social workers from other local authorities.
43. The impact of the Managed Team being allocated 220 cases to date has enabled the service to reduce the overall number of cases from 2,953 at 30.06.14 to 2,504 at 31.12.14, bringing social worker caseloads in Children's Services teams down from 24.5 at 30.06.14 to 18.4 at 31.12.14. An Exit Strategy for the Managed Team has been agreed on the basis of the additional team withdrawing in mid-April.
44. The percentage sickness for Children's Services in Quarter 3 was 4.8% (1,026.5 / 21,250.2) compared with 6.9% (1,452.0 / 20,970.7) in Quarter 2. Sickness levels continue to be closely monitored to ensure that appropriate action is taken to manage sickness absence across the service area.
45. 86% compliance with finalisation of objective sheets and 81.6% compliance with 6 monthly reviews had been achieved at the time of writing. A small percentage cannot be initiated / reviewed due to staff absence (e.g. maternity leave and long term sick

leave), and a high level of recruitment activity and new intake accounts for a proportion of the outstanding PPDRs. Work to initiate and review the remaining PPDRs continues.

WAY FORWARD

46. Members are invited to consider the information set out in the report and to identify any issues which require more detailed scrutiny.

LEGAL IMPLICATIONS

47. The Scrutiny Committee is empowered to enquire, consider, review and recommend, but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Executive / Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers of behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

FINANCIAL IMPLICATIONS

48. The Scrutiny Committee is empowered to enquire, consider, review and recommend, but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Executive / Council will set out any financial implications arising from those recommendations.

RECOMMENDATION

The Committee is recommended to:
Consider the contents of the report and report any comments to the Cabinet Member.

Tony Young
Director of Children's Services
30th March 2015

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Q3 Customer Contact

Twitter followers
32,909 followers in English
1,468 followers in Welsh



481 complaints were recorded during Q3 which represents our best result this financial year. There is a sizeable decrease from Quarters 2 & 1 where 658 & 652 complaints were recorded respectively. Over 50 fewer complaints were recorded than this time last year (1791 complaints compared to 1854 at the end of December 2014.) Environment saw the largest decrease in complaints with a decrease of 124 complaints when compared to Quarter 2.

Complaints	Q1	Q2	Q3
New Complaints Received	652	658	468
Corporate Complaints	652	656	467
Welsh Complaints	0	2	1
Acknowledgements not sent within 5 days	25	15	14
Response not sent within 20 days	54	36	33
Compliments Received	389	383	341

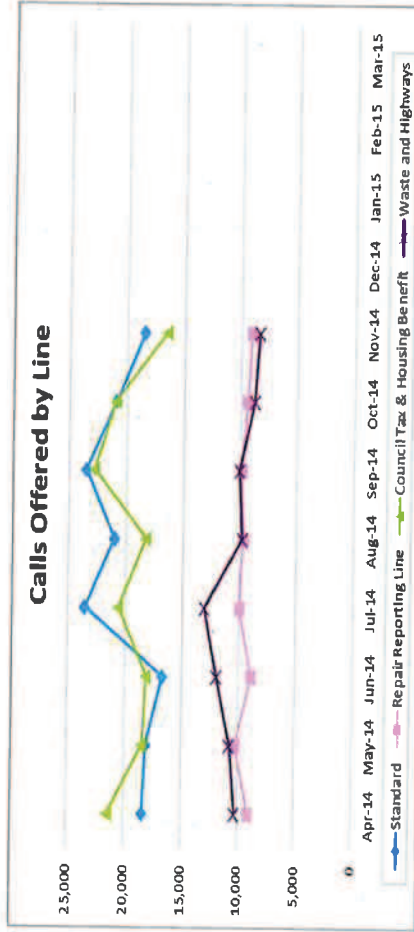
Members Enquiries

Directorate	Received			Responded on time	
	Q1	Q2	Q3	Q3	Q3 %
Childrens	1	1	2	0	0%
Communities	178	171	117	84	71.79%
Corporate	9	9	11	6	54.55%
Democratic	10	12	4	3	75%
Economic	6	8	4	4	100%
Education	9	12	3	1	33.33%
Environment	526	284	188	141	75%
Health & SC	4	3	3	3	100%
SPHT&T	316	229	193	136	70.47%
Sport L&C	84	100	40	21	52.50%
Total	1143	829	558	396	70.97%

The Members Central team have been working closely with Members Services to reinforce the Member Enquiry system should be used. The team have also offered to provide Members with additional training. It has also been highlighted what enquiries are appropriate to use the system for which accounts for a slight reduction in use by Members.

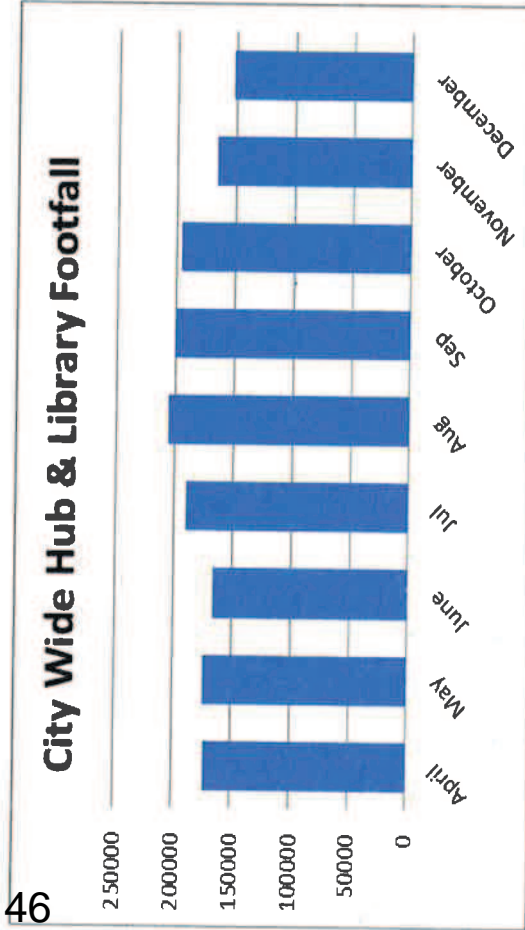
Customer Contact

Calls offered to C2C



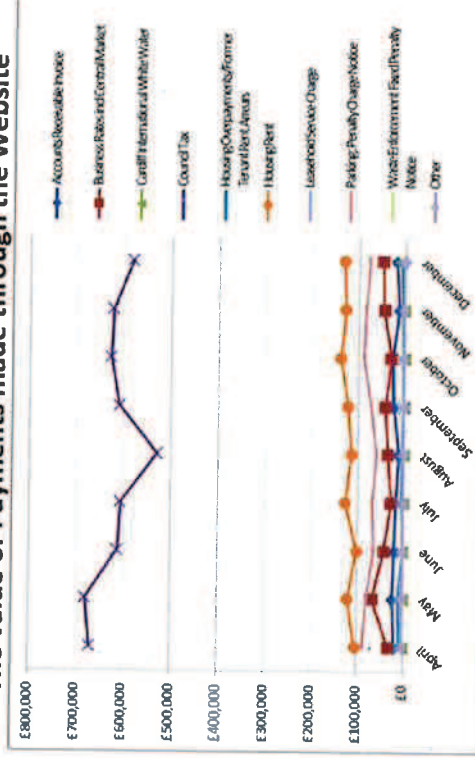
Update: There has been a decrease in calls received in Quarter 3, compared with some very high call volumes in July & September during Quarter 2.

Total Footfall in both Libraries & Hubs across the City.



Update: Due to the budget consultation that took place in Q3, compared to Q2 there has been a dramatic increase in those visiting the Council Finances section of the Website, with 80,571 visits in the Quarter.

The value of Payments made through the Website



Website Areas with the highest % increase in visits in Q3 since Q2

Top 10 Trending Sections in Quarter 3	%	#
Council Finances	1496%	80,571
Neighbourhood Regeneration	52%	1,784
Parking, Roads & Travel	33%	152,947
Jobs	24%	53,532
Data Protection & FOI	21%	2,014
Animal Health & Welfare	21%	11,970
Information for Landlords	20%	864
Leisure, Parks & Culture	17%	130,717
Council Management	15%	2,197
Support & Finance for Business	11%	1,339

Update: There has been a slight decrease in footfall during Quarter 3; this is due to the emergency closure of Roath Library in early November and the temporary closure of the 5th floor of Central Library.

Total Staff Costs at Q3	£145,200,127
Total Agency Costs at Q3	£11,725,502
Total Overtime Costs at Q3	£3,560,860

The spend on agency may reflect an overspend against budget as there may be vacant posts where there is a budget but the staff are employed through an agency, so the permanent staff budget will show an underspend and the agency staff an overspend.

Staff Costs to End Q3	% of Annual Budget		% Spend Agency	Spend Overtime
£12,230,314	70.62%	Children's	21.70%	0.52%
£17,056,378	74.14%	Communities	4.50%	1.77%
£1,641,900	97.96%	County Clerk & Monitoring Officer	3.94%	0.54%
£1,213,822	74.79%	Corporate Mgmt	2.50%	0.18%
£24,763,633	67.98%	Corp Resources	3.94%	1.29%
£3,467,758	73.61%	Economic	6.03%	2.70%
£21,296,146	78.72%	Education	3.57%	0.94%
£16,605,242	72.10%	Environment	15.81%	3.74%
£17,756,672	78.17%	Health & SC	5.67%	3.47%
£19,321,506	78.99%	Sport L&C	12.26%	5.25%
£9,846,756	75.10%	SPHT&T	2.66%	3.24%

Agency
8.08%

Overtime
2.45%

Staff Costs at Quarter 3

Directorate	Staff Budget £	Total Staff Costs to month 9 £	% Annual Budget spent	Overtime Budget £	Total Overtime spend £	Overtime Spend YTD %	Total Agency Budget £	Total Agency Spend £	Agency Spend YTD %	% Costs spend on overtime	% Costs spent on agencies
Children's Services	17,318,190	12,230,314	70.62%	0	63,261	0.52%	63,261	2,653,644	21.70%	0.37%	15.32%
Communities, Housing & Customer	23,006,852	17,056,378	74.14%	235,620	301,794	1.77%	537,414	768,042	4.50%	1.31%	3.34%
County Clerk & Monitoring Officer	1,676,050	1,641,900	97.96%	0	8,943	0.54%	8,943	64,699	3.94%	0.53%	3.86%
Corporate Management	1,622,930	1,213,822	74.79%	0	2,192	0.18%	2,192	30,307	2.50%	0.14%	1.87%
Corporate Resources	36,429,031	24,763,633	67.98%	563,400	319,722	1.29%	883,122	976,162	3.94%	0.88%	2.68%
Economic Development	4,710,880	3,467,758	73.61%	80,970	93,775	2.70%	174,745	209,066	6.03%	1.99%	4.44%
Education	27,052,650	21,296,146	78.72%	0	201,214	0.94%	201,214	760,702	3.57%	0.74%	2.81%
Environment	23,030,430	16,605,242	72.10%	1,168,420	620,206	3.74%	1,788,626	2,626,008	15.81%	2.69%	11.40%
Health & Social Care	22,716,790	17,756,672	78.17%	138,700	616,867	3.47%	755,567	1,006,393	5.67%	2.72%	4.43%
Sport, Leisure & Culture	24,461,970	19,321,506	78.99%	828,220	1,013,732	5.25%	1,841,952	2,369,000	12.26%	4.14%	9.68%
Strat Planning, Highways & Transp	13,110,950	9,846,756	75.10%	410,150	319,154	3.24%	729,304	261,477	2.66%	2.43%	1.99%
Total	195,136,723	145,200,127	74.41%	3,425,480	3,560,860	2.45%	6,986,340	11,725,502	8.08%	1.82%	6.01%

Month 9 Financial Monitoring - Revenue 2014/15

Service Area	Revenue 2014/15	Net Budget £000's	Projected Expenditure £000's	Projected Variance £000's
Childrens Services		46,047	47,647	1,600
Communities, Housing & Customer Services		43,048	42,436	-612
Corporate Management		22,713	22,713	0
County Clerk & Monitoring Officer		4,124	4,095	-29
Economic Development		521	618	97
Education & Lifelong Learning		229,622	231,032	1410
Environment		26,978	27,328	350
Health & Social Care		95,308	100,903	5595
Resources		20,253	20,169	-326
Sports, Leisure & Culture		14,958	15,670	712
Strategic Planning, Highways and Traffic & Transport		30,018	30,018	0
Total - Directorates		533,590	542,629	9039

Month 9 Financial Monitoring - Directorate Savings Summary 2014/15

Directorate	Total Savings Accepted £'000	Total Savings Already Achieved £'000	Total Projected Savings £'000	Total Savings Unachieved £'000
Children's Services	2,655	2,493	2,493	162
Communities, Housing & Customer Services	2,886	2,178	2,405	481
Corporate Management	2,129	2,053	2,053	76
County Clerk & Monitoring Officer	494	388	446	48
Economic Development	1,509	879	1,316	193
Education	6,512	5,367	5,610	902
Environment	3,300	2,866	2,936	364
Health & Social Care	6,213	2,806	3,483	2,730
Resources	5,593	4,672	5,078	515
Sport, Leisure & Culture	5,289	3,528	4,132	1,157
Strategic Planning, Highways & Traffic & Transportation	7,253	5,181	6,706	547
Total	43,833	32,411	36,676	7,157

Sickness Absence Q3

FTE days

forecast 14/15

10.03

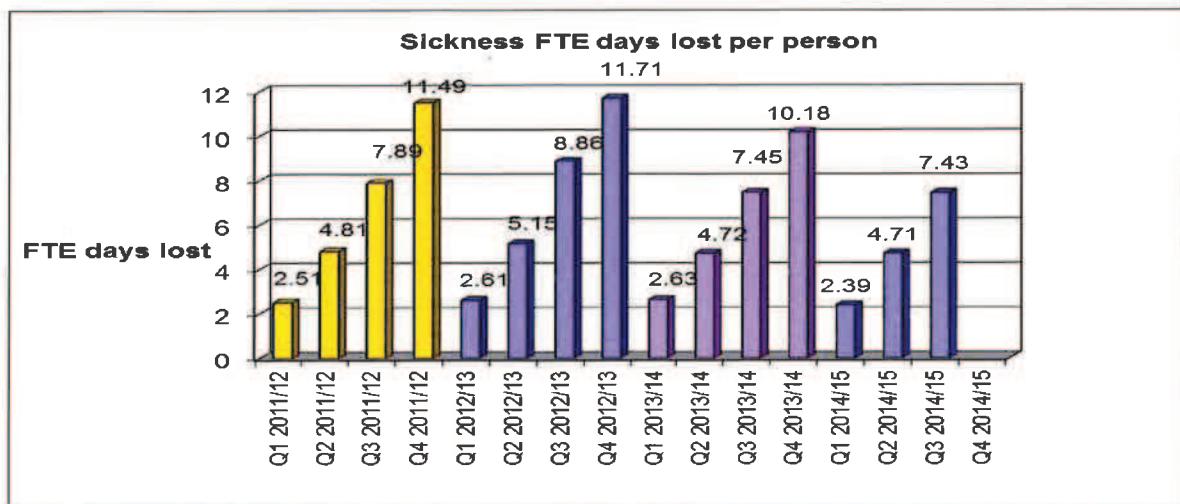
	Av FTE Numbers	FTE Target	Q3 Days lost	Forecast for 2014 / 15
Childrens	369	15.3	9.67	13.06
Communities	1019	9.0	7.95	10.73
Corporate	833	7.3	7.29	9.84
Democracy	86	6.0	3.36	4.54
Economic	118	6.0	3.39	4.57
Education	6527	7.3	6.31	8.52
Environment	632	18.2	11.85	16.00
Health & SC	691	13.1	12.48	16.85
Sport L&C	728	12.1	10.33	13.95
SPHT&T	375	7.2	7.54	10.18
Total	11382	9.0	7.43	10.03

The Council wide target for 2014/15 is 9.00 FTE days lost per person. This is a reduction of 11.6% on last years outturn figure of 10.18 days.

The data for Q1 showed a decrease over the same period last year, and was the lowest Q1 figure for the last 5 years. However, Q2 and Q3 results have remained stable based on last year's figures.

The current forecast figures based on 9 months data will be in the region of 10 FTE days lost per person. However, sickness information can fluctuate due to changes to staff FTE numbers and other seasonal factors.

The Attendance & Wellbeing policy which was implemented from 1st July 2013 is currently being reviewed after its 12 months of operation and is scheduled to be considered by Cabinet in March 2015.



Sickness – Return to Work
April 2014 to December 2014

Organisation	Return To Work Done (A)	Return To Work Pending (B)	Total (A+B)	Percentage Completed (%)
CHILDREN SERVICES	259	9	268	96.6
COMMUNITIES HOUSING & CUSTOMER SERVICES	681	4	685	99.4
DEMOCRATIC SERVICES	38	0	38	100.0
ECONOMIC DEVELOPMENT	44	5	49	89.8
EDUCATION - SCHOOLS	3,911	840	4,751	82.3
EDUCATION & LIFELONG LEARNING	1,056	11	1,067	99.0
ENVIRONMENT	382	4	386	99.0
HEALTH & SOCIAL CARE	666	6	672	99.1
RESOURCES	520	7	527	98.7
SPORT LEISURE & CULTURE	574	25	599	95.8
STRATEGIC PLANNING HIGHWAYS TRAFFIC&TRAN	180	8	188	95.7
TOTAL	8,311	919	9,230	90.0

Personal Performance and Development Review Compliance as at 12.01.2015

Organisation Organisation Name	Total (Head Count)	Half Year Review Compliance	
		Completed	Percentage completed (%)
CHILDRENS SERVICES	316	258	81.6
COMMUNITIES HOUSING & CUSTOMER SERVICES	989	924	93.4
CORPORATE RESOURCES	866	765	88.3
DEMOCRATIC SERVICES	73	65	89.0
ECONOMIC DEVELOPMENT	113	110	97.3
EDUCATION & LIFELONG LEARNING (exc schools and central teachers)	1419	1214	85.6
ENVIRONMENT	561	447	79.7
HEALTH & SOCIAL CARE	762	606	79.5
SPORT LEISURE & CULTURE	726	587	80.9
STRATEGIC PLANNING HIGHWAYS TRAFFIC&TRAN	343	315	91.8
TOTAL	6168	5291	85.8

Freedom of Information Requests Received 2014/15

Area	Q1		Q2		Q3		Trend
	No. of Requests Received	Responses on time (%)	No. of Requests Received	Responses on time (%)	No. of Requests Received	Responses on Time (%)	
Childrens Services	9	79%	16	31%	17	56%	Improving
Consumer Affairs	35	85%	24	76%	18	85%	Improving
Crematoria & Cemeteries	1	100%	2	100%	4	100%	Static
CTS	6	60%	1	100%	0	N/A	N/A
Customer Services	2	100%	3	50%	22	95%	Improving
Democracy & Comms	14	85%	17	8%	13	84%	Improving
Econ & Major Projects	2	0%	1	100%	8	100%	Static
Education	26	96%	18	73%	16	88%	Improving
Environment	9	70%	13	86%	14	75%	Declining
Facilities Management	3	100%	5	75%	2	100%	Improving
Finance & Procurement	71	83%	60	83%	73	91%	
Health & Safety	1	100%	0	N/A	2	100%	N/A
Health & Social Care	10	71%	10	50%	15	38%	Declining
Highways & Transport	46	93%	41	55%	41	90%	Improving
Housing	24	74%	20	75%	11	93%	Improving
HRPS	24	74%	21	91%	25	89%	Declining
ICT	15	88%	10	56%	11	67%	Improving
Improvement & Info	6	100%	8	71%	10	100%	Improving
Infrastructure	0	N/A	3	67%	3	100%	Improving
Legal Services	8	100%	5	75%	2	100%	Improving
Multi Function	12	31%	33	24%	27	52%	Improving
Sport L&C	16	95%	8	82%	11	100%	Improving
Planning	8	100%	19	57%	11	64%	Improving
Policy & Partnership	0	N/A	0	N/A	0	N/A	N/A
Reg & Support Serv	0	N/A	2	50%	6	100%	Improving
Registration & Coroners	2	100%	2	100%	0	100%	Static
Traffic Network Man	5	50%	10	55%	9	56%	Improving
Waste Management	5	86%	13	56%	6	42%	Declining
Total	360	83%	365	52%	377	80%	Improving

Requestor	Q2 2014/15		Q3 2014/15	
	Rec'	% of Total Requests	Rec'	% of Total Requests
AM/MP	25	7%	9	2%
Business/Company	65	18%	81	21%
Campaign	13	4%	13	3%
Elected Member	4	1%	2	1%
Employee	1	0%	2	1%
Local Authority	1	0%	1	0%
Not known	23	6%	60	16%
Police	1	0%	0	0%
Press/Media	31	9%	39	10%
Public	165	45%	140	37%
Student	6	2%	7	2%
WDTK*	29	8%	23	6%
Total	364		377	

*whatdotheyknow.com

The volume and complexity of FOI Requests received by the Council continues to be of a high level. The information in the table above demonstrates that the main users of the provisions of the Freedom of Information Act are members of the public for who the Act was introduced to benefit. There are also a number of commercial businesses using the Act seeking information to support their business activities.

Further streamlining and delivery improvement options for the FOI function, including within Children Services and Health & Social Care is currently ongoing. This will enable future improvements with request compliance within these directorates.

Subject Access Requests are not included in the table. Q1&2 figures have been updated due to figures being reviewed & validated.

Outcome Agreement Measures for 2014/15

Health & Social Care

Q3 Progress on Health & Social Care Performance Measures



Carer's assessments are unlikely to meet annual target though improvements have been evidenced through Q3.
 Delayed Transfers of Care may meet annual target but the situation from winter pressures at UHW remains critical. H&SC are working closely with UHB.
 Installation of aids and equipment has been affected by staff sickness which has been resolved and it is anticipated that improvement will be reflected in Q4.
 Service users 65+ supported with home care has missed target by 0.45%

- On target
- May meet annual target
- Unlikely to meet annual target
- Target not applicable
- Data not available

Education

Measure	Academic Year 13/14	Annual Target
Primary Attendance	94.9%	94.4%
Secondary Attendance	93.78%	93.6%
% of pupils achieving core subject indicator at Key Stage 2	84.5%	84.5%
The percentage of pupils aged 15 at the preceding 31 August, who achieved the Level 2 threshold	53.9%	55%
The percentage of pupils assessed at the end of Key Stage 3, achieving the Core Subject Indicator	81.5%	78.4%
The % of pupils achieving the Foundation Phase Indicator (FPI)	85.2%	83.7%
The number of local authority maintained schools who are placed in a formal category	4	1

Education, Employment & Training

Measure	Q1 & 2 14/15	Q3 14/15	Annual Target
% of 16-18 year olds Tier 1-3 (Monthly) – as a % of Cardiff's overall 1-5	15%	10.5%	Not set
% of year 11 (VAP) allocated a Lead worker	100%	100%	60%
% of 16-18 year olds in Tier 1-3 with assigned Lead workers	100%	100%	95%
Number of work experience placements	531	166	1000

Q3 Progress on the Into Work Service Performance Measures



*1 measure may meet annual target subject to a second jobs fair event being held in Q4.

Economic Development

Q3 Progress on the Economic Development Performance Measures



■ On target ■ Data not available / Annual Indicator

Grade A office space – Contracts let and construction has commenced at Central Square and Tyndall Street for 180,000 sqft against an annual target of 100,000 sqft.

There has been a significant increase in the amount of grant aid and private sector finance attracted by companies assisted by the Council due to the inclusion of the Super Connected Peering Grant and companies that have gone on to secure financial assistance either from the Council or from other organisations.

Housing

Measure	Completed Q1,2,3	Target (Annual)
Boiler upgrades	929	900
Roof replacements*	4	40
Cladding of flats	67	60

*The roof replacement programme is underway and current projections show that the target will be met by the end of Q4.

Solar Panels

Measure	Target	Completed
Solar Panels	100	0

The contract has been signed and the installations are due in February / March

Directorate: Children's Services

Director: Tony Young

Councillor: Sue Lent

Q3 2014/15

Number of Employees (FTE)	386
Sickness Absence YTD (Days Per Person)	9.67
PPDR Compliance (half year review)	81.6%

Budget	Projected Outturn	Variance	Variance (%)
£46.047m	£47.647m	+£1.6m	+3.4%
Target Savings 2014/15	Projected Savings	Variance	Variance (%)
£2.655m	£2.493m	£162,000	6.4%

Q3 Progress against Directorate Plan / Corporate Plan actions 2014/15 (24)

Green 75% (18) Amber 25% (6)

Q3 Progress against Performance Indicators (7)

Green 43% (3) Amber 43% (3) Red 14% (1)

Progress on Challenges Identified Q2 (previous quarter)

Resolving the long term strategy for sustaining lower caseloads and developing an exit strategy for the procured Generic Team:

An Exit Strategy for the Managed Team has been agreed on the basis of the additional team withdrawing in mid April. A proposal for weekly Legal Surgeries has been agreed between relevant Directors and Legal Surgeries will commence in January. A draft outline Prevention Strategy has been developed and subject to initial consultation with key stakeholders. Further work to finalise the strategy is now underway, and a Lean review has commenced.

Q3 Service Delivery

Budget Position

The month nine monitoring position for Children's Services shows a projected overspend of £1.6 million, an increase of £950,000 compared to the position reported at month six. The increase is mainly due to further pressures in respect of looked after children with an increase in the number of placements and the cost mix for both external residential and external fostering placements. There has also been an increase of £250,000 in the costs of the Managed Social Work Service in the current financial year. These have been partly offset by additional savings on staff agency costs and by a further reduction in commissioning costs within Child Health and Disability. The financial position reflects the allocation of the £950,000 specific contingency budget which formed part of the Council's 2014/15 budget. The allocation was approved by Cabinet as part of the consideration of the month four report on 18 September. This provided initial funding for the cost of the Managed Social Work Service with the balance of the contingency allocation partly offsetting the additional cost of external placements. The Managed Social Work Service is a one-off additional resource designed to reduce backlogs and enable effective alignment of social work resources. The initial cost was estimated at £600,000 however an extension to April 2015 has increased the cost by £250,000 in 2014/15 with a further £50,000 to be funded in 2015/16.

Although the directorate received an additional budget realignment of £2.7 million as part of the 2014/15 budget process, on-going pressures on the budgets for external placements, leaving care support costs, adoption fees and allowances, external legal costs and the Managed Social Work Service have all contributed to the projected overspend. These pressures have been alleviated to a certain extent by mitigating actions taken in respect of guardianship allowances which provide a significant offsetting saving in the current financial year. A total of £2.493 million is currently anticipated to be achieved against the £2.655 million savings targets set as part of the 2014/15 budget leaving a projected shortfall of £162,000 in the current financial year.

Directorate Delivery Plan

Good progress has been made against the actions in the Directorate Delivery Plan. Key areas of progress include:

- Newly integrated Safeguarding Unit became operational on a co-located basis, including teams from Children's Services, Health & Social Care and Education, with effect from 07.11.14.
- Continued reduction in caseloads evident - social worker caseloads in Children's Services teams reduced from 24.5 at 30.06.14 to 18.4 at 31.12.14. In February 2014 there were 16 social workers with caseloads in excess of 30, and 32 social workers with caseloads of 25-29 compared with 5 and 11 respectively in December 2014.
- Continued increase in timeliness of initial and core assessments.
- Legal Tracker introduced to ensure that timescales and directions from Court are adhered to.
- Residential Services integrated into LAC Service – early indications are that this is having a positive impact on planning for children moving in and out of residential care including returning children placed out of area.

- Personal Education Plan process streamlined and agreed at Joint Children's Services and Education Management Meeting.
- Payment by Results tender completed – contract to be awarded early in Quarter 4.
- IT system to support a new model for managing referrals (MASH or similar arrangement) purchased.

There has been some slippage in progress against some milestones including the model for managing referrals and progression of the Placement Strategy. Agreement has been reached with the Chief Superintendent for a new model for managing referrals and a programme of meetings has been arranged with the Director of Children's Services and the Chief Superintendent to actively progress the development of a new model. The report of externally commissioned research to analyse LAC pressures will be presented to the Corporate Parenting Advisory Committee in February to initiate and accelerate the preparation of a Placement Strategy. Relevant milestones will be reviewed and reflected in the Directorate Plan for 2015-16.

Management

86% compliance with finalisation of objective sheets and 81.6% compliance with 6 monthly reviews had been achieved at the time of writing. A small percentage cannot be initiated / reviewed due to staff absence (e.g. maternity leave and long term sick leave), and a high level of recruitment activity and new intake accounts for a proportion of the outstanding PPDRs. Work to initiate and review the remaining PPDRs continues.

Directorate: Children's Services

Key Performance Indicator Data – Q3 2014/15

Performance Indicator	Result 13/14	Position Q1	Position Q2	Position Q3	Position Q4	Target 14/15	R.A.G.
% of referrals with decision made within 1 working day	80.3	77.6	87.1	83.7		100	R
<p>The improvement that was evident in Quarter 2 has dropped back slightly in Quarter 3 in the context of an 8% increase in the number of referrals received. The performance report is based on electronic records, but there is evidence that the electronic capture of the information is delayed. However, management oversight confirms all referrals are subject to manager decision and prioritisation on the day of receipt.</p>							
% of referrals that are re-referrals within a year of previous referral	25.6	24.7	25.6	25.6		25	G
% of initial assessments carried out within 7 working days	40.1	34.6	46.5	66.5		80	A
% of core assessments carried out within 35 working days	71.1	49.8	54.5	69.9		80	A
% of child protection reviews carried out within statutory timescales	98.5	99.2	100	100		100	G
% of social work vacancies in all teams	20.8	30.1	28.6	25.3		17	R
<p>The vacancy position has improved slightly during the quarter as appointed social workers have taken up post. The apparent high percentage of vacancies must be treated with caution because the % was inflated by the creation of new posts as part of the realignment of Children's Services. Recruitment is ongoing - the recruitment campaign this year has been very successful and has directly contributed to the service's ability to retain social workers. We are now attracting numbers of applications from agency staff who have been working within the service, and social workers from other local authorities.</p> <p>The impact of the Managed Team being allocated 220 cases to date has enabled the service to reduce the overall number of cases from 2,953 at 30.06.14 to 2,504 at 31.12.14, bringing social worker caseloads in Children's Services teams down from 24.5 at 30.06.14 to 18.4 at 31.12.14.</p>							

Q3 Challenges Identified

Finalise Prevention Strategy.

Increase in projected overspend attributable to the increase in the number of looked after children and extension of the Managed Team for a further 3 months.

Exit strategy for the Managed Team.

Q3 Actions being taken

Prepare a business case for key elements of the Prevention Strategy and engage key stakeholders in further consultation.

Review of in-year spend to identify areas where spend can be reduced in the current financial year.

Implement exit strategy.

Directorate: Children's Services

Councillor: Sue Lent Director: Tony Young

Corporate Risk

Risk Description	Inherent Risk	Residual Risk	Mitigating actions	Risk Owner
Potential for mismatch between children's needs and capacity to meet them if current trends continue, for example in children needing to be safeguarded, looked after and/or receive other services to support families and carers to care for them.	Red	Red	This risk has been mitigated by the deployment of the Managed Team - the impact of the Managed Team being allocated 220 cases to date has enabled the service to reduce the overall number of cases from 2,953 at 30.06.14 to 2,504 at 31.12.14, bringing social worker caseloads in Children's Services teams down from 24.5 at 30.06.14 to 18.4 at 31.12.14. An Exit Strategy for the Managed Team has been agreed on the basis of the additional team withdrawing in mid April. A draft outline Prevention Strategy has been developed and subject to initial consultation with key stakeholders.	Tony Young
The implementation of the Social Services and Wellbeing (Wales) Act will place new duties and responsibilities upon already pressured services.	Red	Red	As per Quarter 1, senior managers are engaged in national activity to influence the development of regulatory requirements with a view to promoting proportionality of expectations.	Tony Young

Emerging Risks Identified this Quarter

Risk Description	Inherent Risk	Residual Risk	Mitigating actions	Risk Owner
N/A				

Q3 Risk Update

Update on Previous Quarters Emerging Risks

Risk Description	Inherent Risk	Residual Risk	Progress
N/A			

Indicator Ref	Indicator Title	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	Q1 2014-15	Q2 2014-15	Q3 2014-15	Current Progress Against Target	Status	2014-15 Target	Level Triggering Mgt Action	Comments
Children are protected from significant harm and are empowered to protect themselves															
Referrals 1 Local PI	Number of Referrals Received	3,241	3,793	4,525	4,730	4,744	4,531	1,169	969	1,050	Target setting not appropriate		Target setting not appropriate		Q3 2012-13 = 1,308 Q3 2013-14 = 1,142 October = 373 November = 371 December = 306 In addition to referrals the service received 7,420 contacts in Quarter 3, of which 1,050 proceeded to referral and are included in the number of referrals above.
SCC/006 Core Indicator	The percentage of referrals during the year on which a decision was made within 1 working day	98.6% (Ave)	99.2% (Ave)	90.4% (Ave)	89.6% (Ave)	90.7% (Ave)	80.3%	77.6%	87.1%	83.7%	☹️	▼	100.0%		879 / 1,050 The improvement that was evident in Quarter 2 has dropped back slightly in Quarter 3 in the context of an 8% increase in the number of referrals received. The performance report is based on electronic records, but there is evidence that the electronic capture of the information is delayed. However, management oversight confirms all referrals are subject to manager decision and prioritisation on the day of receipt. All Wales average 2013-14 = 96.3%
SCC/007 (a) Core Indicator	The percentage of referrals that proceed to allocation for initial assessment during the year allocated to a social worker for initial assessment	44.0% (Ave)	44.4% (Ave)	42.2% (Ave)	57.1% (Ave)	61.9% (Ave)	92.0%	92.2%	97.0%	92.5%	Target setting not appropriate	▼	Target setting not appropriate		971 / 1,050 5.4% of referrals were allocated to someone other than a Social Worker for initial assessment in Quarter 3 (57 / 1,050). 3.0% of referrals did not proceed to initial assessment in Quarter 3 (32 / 1,050). All Wales average 2013-14 = 75.5%
SCC/010 Core Indicator	The percentage of referrals that are re-referrals within 12 months	22.2%	25.1%	29.1%	29.5%	32.3%	25.6%	24.7%	25.6%	25.6%	☺️	↔️	25.0%		1,111 / 4,340 All Wales average 2013-14 = 22.2%
CS CPR 4 Local PI	CPR caseload	213	283	272	255	372	314	325	294	297	Target setting not appropriate		Target setting not appropriate		As at 30.11.14. Figure does not include 14 temporary registrations where case management responsibility for the children is retained by their home authority.

Quarter 3

Indicator Ref	Indicator Title	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	Q1 2014-15	Q2 2014-15	Q3 2014-15	Current Progress Against Target	Status	2014-15 Target	Level Triggering Mgt Action	Comments
SCC/014 Core Indicator	The percentage of initial child protection conferences due in the year which were held within 15 working days of the strategy discussion	73.5% (Ave)	72.7% (Ave)	86.3% (Ave)	82.6% (Ave)	84.6%	83.8%	91.0%	86.4%	93.3%	☺	▲	90.0%	75.0%	154 / 164 Performance has improved in Quarter 3 in the context of a 40% increase in the number of required initial child protection conferences (165 from 118). All Wales average 2013-14 = 89.9%
SCC/015 Core Indicator	The percentage of initial core group meetings due in the year which were held within 10 working days of the initial child protection conference	78.6%	82.6% (Ave)	87.6% (Ave)	88.7%	90.4% (Ave)	88.4%	96.5%	94.8%	95.5%	☺	▲	95.0%	85.0%	127 / 133 This slight improvement is in the context of a 37% increase in the number of required initial core groups (133 from 97). All Wales average 2013-14 = 90.0%
SCC/034 Core Indicator 62	The percentage of child protection reviews carried out within statutory timescales during the year	99.2% (Ave)	99.5% (Ave)	99.2% (Ave)	98.5% (Ave)	98.0% (Ave)	98.5%	99.2%	100.0%	100.0%	☺	↔	100.0%	70.0%	237 / 237 All Wales average 2013-14 = 98.1%
Children and young people are supported to live safely within their families with the lowest appropriate level of intervention															
SCC/042 (a) Core Indicator	The percentage of initial assessments carried out within 7 working days	69.8% (Ave)	54.4% (Ave)	37.9% (Ave)	44.8% (Ave)	67.4% (Ave)	40.1%	34.6%	46.5%	66.5%	☹	▲	80.0%	50.0%	654 / 983 Performance against the timeliness of initial assessments has continued to improve during the quarter, although not at the rate anticipated. Following an increase to 75% in October, timeliness fell back to 62% in November and December as a result of a change to the I&A structure. A four-team I&A structure has been introduced and it is anticipated that further improvement will be evident in Quarter 4 now that the structure has become embedded. The average working days taken to complete initial assessments that took longer than 7 working days = 17.9 (5,893 / 329). All Wales average 2013-14 = 71.9%

Quarter 3

Indicator Ref	Indicator Title	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	Q1 2014-15	Q2 2014-15	Q3 2014-15	Current Progress Against Target	Status	2014-15 Target	Level Triggering Mgt Action	Comments
SCC/011 (a) Core Indicator	The percentage of initial assessments that took place during the year where there is evidence that the child has been seen by the Social Worker	31.0% (Ave)	40.7% (Ave)	45.1% (Ave)	44.9% (Ave)	59.6% (Ave)	67.1%	66.3%	59.6%	56.5%	☹️	▼	80.0%	60.0%	555 / 983 Performance against this PI has a relationship with SCC/007a. Senior managers have initiated an analysis of the reasons for, and risks associated with, this level of performance. Inclusion of children seen by a Children's Services worker other than a social worker increases the percentage of children seen to 60.4% (594 / 983). 26.3% of children were seen alone by a social worker (259 / 983). All Wales average 2013-14 = 78.9%
SCC/043 (a) Core Indicator	The percentage of required core assessments carried out within 35 working days	41.2% (Ave)	49.5% (Ave)	36.3% (Ave)	49.5% (Ave)	68.2% (Ave)	71.1%	49.8%	54.5%	69.9%	☺️	▲	80.0%	50.0%	438 / 627 Performance has continued to improve in Quarter 3 despite a 24% increase in the number of required core assessments (596 from 482). Performance in December reached 76.8%, just short of the 80% target. The average working days taken to complete core assessments that took longer than 35 working days = 76.5 (14,453 / 189). All Wales average 2013-14 = 81.2%
Looked after children experience the best care and support to help them recognise their abilities, have aspirations and achieve their full potential															
CS LAC 3e Local PI	LAC caseload (not including respite care arrangements for disabled children)	520	530	521	568	557	611	625	622	651	Target setting not appropriate		Target setting not appropriate		Cardiff rate at 31.12.14 = 9.1 per 000 Wales rate at 31.03.14 = 9.1 per 000

Quarter 3

Indicator Ref	Indicator Title	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	Q1 2014-15	Q2 2014-15	Q3 2014-15	Current Progress Against Target	Status	2014-15 Target	Level Triggering Mgt Action	Comments
		61.4%	64.8%	67.0%	65.6%	62.2%	62.0%	61.9%	62.2%	61.4%	☹	▶	65.0%	60.0%	
CS LAC 58 Local PI	Percentage of children in regulated placements who are placed in Cardiff	61.4%	64.8%	67.0%	65.6%	62.2%	62.0%	61.9%	62.2%	61.4%	☹	▶	65.0%	60.0%	316 / 515 The PI counts only children placed within the LA boundaries and excludes children placed in neighbouring authorities close to their home area and attending Cardiff schools. 17.6 (34) of children not placed in Cardiff are placed within 10 miles of their home address. 1 of the children not placed in Cardiff is placed with a relative carer. Planning always takes account of placement location for children. Some children need a specialist placement that is not available in the city or need to live away from families, communities or individuals that could present risks for them.
SCC/001 (a) Core Indicator	The percentage of first placements of looked after children during the year that began with a care plan in place	83.4% (Ave)	82.3% (Ave)	78.3% (Ave)	72.3%	64.2% (Ave)	62.5%	62.8%	69.4%	81.2%	☹		90.0%	90.0%	82 / 101 Performance against this indicator has improved in Quarter 3 following the introduction in September of a new process designed to simplify the system and reduce the burden on staff. This improvement occurred despite a 40% increase in the number of children starting to be looked after (72 to 101). All Wales average 2013-14 = 90.9%
SCC/001 (b) Core Indicator	For those children looked after whose second review (due at 4 months) was due in the year, the percentage with a plan for permanence at the due date	80.2% (Ave)	90.7% (Ave)	90.4% (Ave)	87.1%	83.0% (Ave)	76.4%	80.4%	72.5%	81.8%	☹	◀	92.0%	80.0%	45 / 55 All Wales average 2013-14 = 93.4%
SCC/021 Core Indicator	The percentage of looked after children reviews carried out within statutory timescales during the year	95.9% (Ave)	96.2% (Ave)	96.4% (Ave)	95.2%	95.2% (Ave)	92.4%	85.3%	82.9%	87.7%	☹	◀	100.0%	70.0%	429 / 489 All Wales average 2013-14 = 95.9%

Quarter 3

Indicator Ref	Indicator Title	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	Q1 2014-15	Q2 2014-15	Q3 2014-15	Current Progress Against Target	Status	2014-15 Target	Level Triggering Mgt Action	Comments
		79.5% (Ave)	88.2% (Ave)	83.9% (Ave)	85.1%	89.5% (Ave)	87.7%	89.5%	89.0%	87.9%	☹️	▼	90.0%	85.0%	
SCC/025 Core Indicator	The percentage of statutory visits to looked after children took place in accordance with regulations														All Wales average 2013-14 = 85.3%
Cardiff is the destination of choice for committed social work professionals															
Staff 1 Local PI	Percentage of social work vacancies in all teams	26.1%	15.2% (Ave)	14.7% (Ave)	15.9% (Ave)	14.5% (Ave)	20.8% (Ave)	30.1%	28.6%	25.3%	☹️	▲	17.0%	22.0%	116.3 / 459.1 I&A = 35.1% CIN = 31.1% LAC = 17.3% The vacancy position has improved slightly during the quarter as appointed social workers have taken up post. The apparent high percentage of vacancies must be treated with caution because the % was inflated by the creation of new posts as part of the realignment of Children's Services. Recruitment is ongoing - the recruitment campaign this year has been very successful and has directly contributed to the service's ability to retain social workers. We are now attracting numbers of applications from agency staff who have been working within the service, and social workers from other local authorities. The impact of the Managed Team being allocated 220 cases to date has enabled the service to reduce the overall number of cases from 2,953 at 30.06.14 to 2,504 at 31.12.14, bringing social worker caseloads in Children's Services teams down from 24.5 at 30.06.14 to 18.4 at 31.12.14.
Staff 3a Local PI	Percentage sickness for Children's Services	7.2%	6.6% (Ave)	6.5% (Ave)	7.2% (Ave)	8.1% (Ave)	7.6%	7.2%	6.9%	4.8%	☺️	▲	7.0%	9.0%	1,026.5 / 21,250.2 I&A = 1.7% CIN = 5.9% Sickness levels continue to be closely monitored to ensure that appropriate action is taken to manage sickness absence across the service area.

Quarter 3

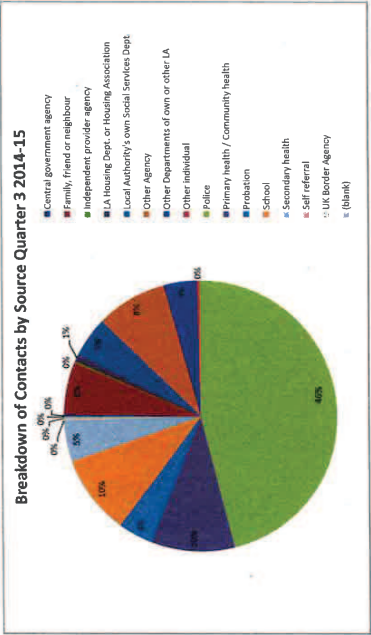
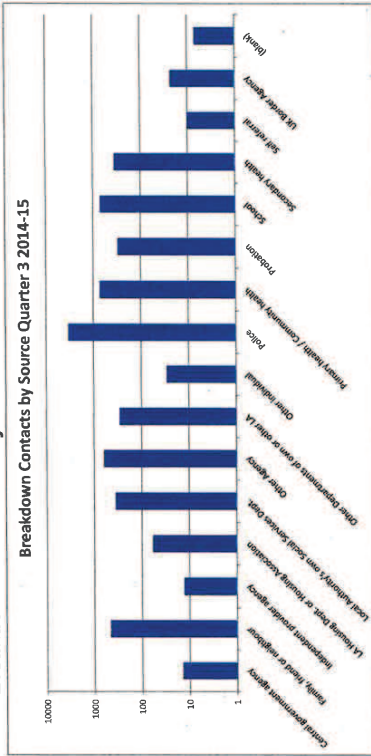
Indicator Ref	Indicator Title	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	Q1 2014-15	Q2 2014-15	Q3 2014-15	Current Progress Against Target	Status	2014-15 Target	Level Triggering Mgt Action	Comments
Children's Services are provided on the basis of the most efficient and effective use of resources															
CS LAC 44 Local PI	Percentage of LAC placements with independent sector providers	56.6%	58.9%	62.0%	64.2%	68.6%	67.4%	69.6%	71.3%	71.3%	☹	↔	60.0%	367 / 515	Of the 367 placements with independent sector providers, 179 started within the last 12 months. The Payment by Results tendering process has been completed – the contract will be awarded in Quarter 4.

Contacts - Quarter 3 - 2014-15 Summary

Total No of Contacts in Quarter 3 - 2014-15 **7420**

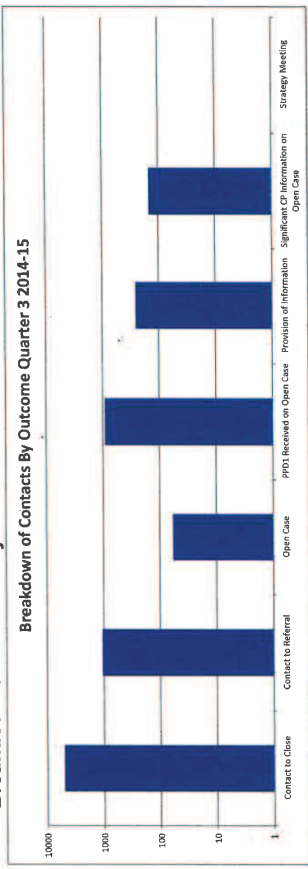
Source of Contact	Total	Total %
Central government agency	14	0.2%
Family, friend or neighbour	45	0.6%
Independent provider agency	15	0.2%
Local Authority Housing Association	55	0.8%
Local Authority's own Social Services Dept.	356	4.8%
Local Authority's own Social Services Dept.	677	9.1%
Other Departments of own or other LA	289	3.9%
Other individual	29	0.4%
Police	3423	46.1%
Primary Health / Community health	794	10.7%
Probation	305	4.1%
School	35	0.5%
Secondary health	35	0.5%
Self referral	10	0.1%
UK Border Agency	23	0.3%
(blank)	7	0.1%
Grand Total	7420	100.0%

(blank) -no information recorded on CareFirst



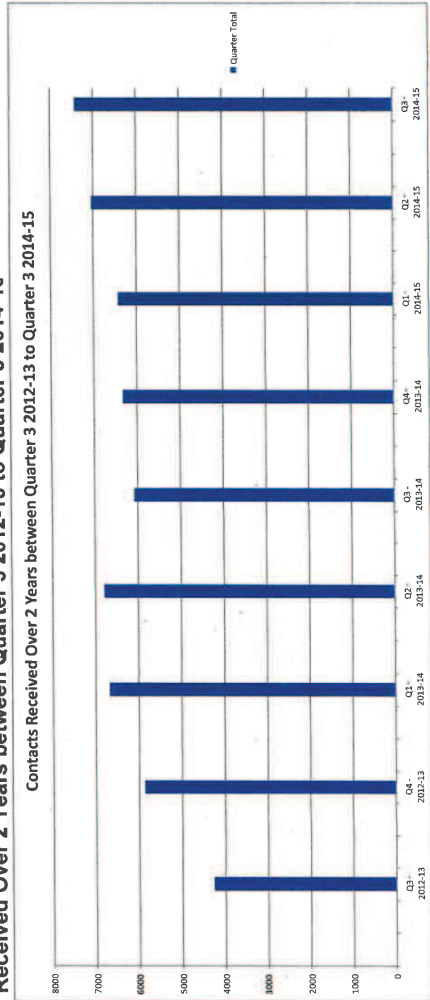
Breakdown of Contacts By Outcome Quarter 3 2014-15

Contact Outcome	Total	Total %
Contact to Close	5000	67.4%
Contact to Referral	1050	14.2%
Open Case	59	0.8%
PPD1 Received on Open Case	912	12.3%
Significant CP Information on Open Case	253	3.4%
Significant CP Information on Open Case	345	4.6%
Strategy Meeting	1	0.0%
Grand Total	7420	100.0%



Contacts Received Over 2 Years between Quarter 3 2012-13 to Quarter 3 2014-15

Month	Month Total	Quarter	Quarter Total
Oct-12	809	Q3-2012-13	677
Nov-12	184	Q4-2012-13	677
Dec-12	1611	Q1-2013-14	677
Jan-13	3652	Q2-2013-14	677
Feb-13	2009	Q3-2013-14	677
Mar-13	2008	Q4-2013-14	677
Apr-13	2131	Q1-2014-15	677
May-13	2131	Q2-2014-15	677
Jun-13	2445	Q3-2014-15	677
Jul-13	2131	Q4-2014-15	677
Aug-13	2131	Q1-2015-16	677
Sep-13	2213	Q2-2015-16	677
Oct-13	2710	Q3-2015-16	677
Nov-13	2014	Q4-2015-16	677
Dec-13	1785	Q1-2016-17	677
Jan-14	2129	Q2-2016-17	677
Feb-14	2129	Q3-2016-17	677
Mar-14	1995	Q4-2016-17	677
Apr-14	2074	Q1-2017-18	677
May-14	2397	Q2-2017-18	677
Jun-14	2397	Q3-2017-18	677
Jul-14	2397	Q4-2017-18	677
Aug-14	2397	Q1-2018-19	677
Sep-14	2397	Q2-2018-19	677
Oct-14	2397	Q3-2018-19	677
Nov-14	2397	Q4-2018-19	677
Dec-14	2397	Q1-2019-20	677
Grand Total	22487	Q3-2014-15	7420



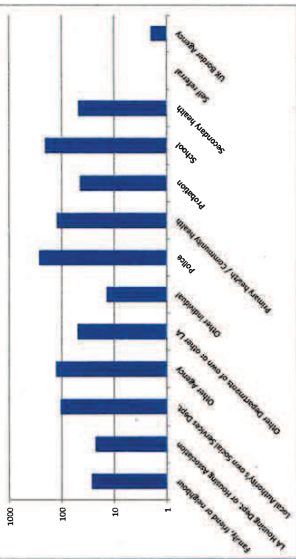
Referrals - Quarter 3 - 2014-15 Summary

No of Referrals Quarter 3 - 2014-15 1050

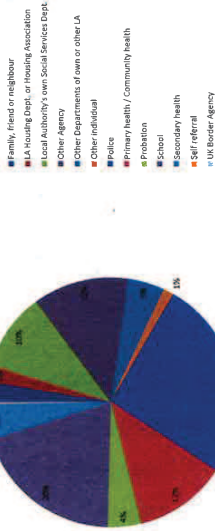
Breakdown of Referrals by Source Quarter 3 2014-15

Source of Referral	Total	Total %
Family, friend or neighbour	27	2.6%
LA Housing Dept. or Housing Association	33	2.3%
Local Authority's own Social Services Dept.	106	10.1%
Other Agency	130	12.4%
Other Departments of own or other LA	35	3.3%
Other individual	32	3.0%
Police	272	25.9%
Primary health / Community health	135	12.8%
Probation	45	4.3%
School	207	19.7%
Secondary health	48	4.6%
Self referral	2	0.2%
UK Border Agency	2	0.2%
Grand Total	1050	100.0%

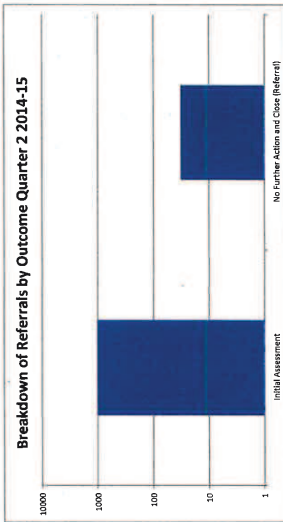
Breakdown of Referrals by Source Quarter 2 2-14-15



Breakdown of Referrals by Source Quarter 2 2014-15



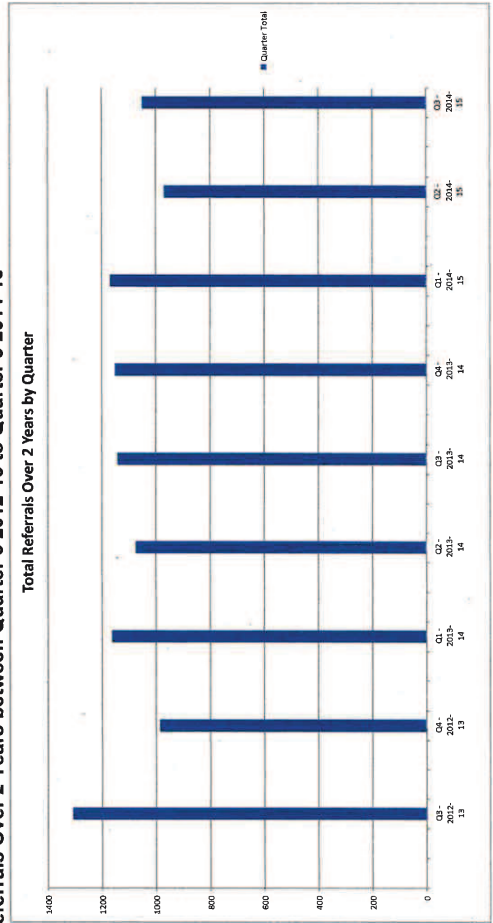
Breakdown of Referrals by Outcome Quarter 3 2014-15



Breakdown of Referrals by Outcome Quarter 2 2014-15

Referral Outcome	Total	Total %
Initial Assessment	1018	97.0%
No Further Action and Core (Referral)	32	3.0%
Grand Total	1050	100.0%

Total Referrals Over 2 Years between Quarter 3 2012-13 to Quarter 3 2014-15



Month	Month Total	Quarter	Quarter Total
Oct-12	617		
Nov-12	386		
Dec-12	110	Q3-2012-13	1165
Jan-13	282		
Feb-13	401		
Mar-13	303	Q4-2012-13	969
Apr-13	301		
May-13	301		
Jun-13	388	Q1-2013-14	1165
Jul-13	367		
Aug-13	367		
Sep-13	320	Q2-2013-14	1075
Oct-13	388		
Nov-13	348	Q3-2013-14	1147
Dec-13	395		
Jan-14	385		
Feb-14	371	Q4-2013-14	1115
Mar-14	405		
Apr-14	425	Q1-2014-15	1165
May-14	368		
Jun-14	256		
Jul-14	355	Q2-2014-15	969
Aug-14	371		
Sep-14	371		
Oct-14	371		
Nov-14	371		
Dec-14	305	Q3-2014-15	1050

CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE

7 April 2015

RECRUITMENT & RETENTION of SOCIAL WORKERS – UPDATE

Background

1. The Children & Young People Scrutiny Committee has regularly expressed its concerns at the high levels of vacancies in Children's Services. The Committee last received a briefing at its meeting in March 2014.
2. The Members were pleased to receive a copy of a briefing on the work in progress to develop a strategy for the recruitment and retention of social workers in Cardiff. Service management has also been acting to replace agency staff with permanent employees.

Purpose of the Report

3. The purpose of this report is to provide the Committee with a copy of the progress Update Report Card on the recruitment and use of Agency Staff. A copy is attached at **Appendix A**.
4. The Report Card covers a number of key areas:
 - Why the improvement initiative was started
 - The people involved
 - The timeline
 - The key things that we did to improve the situation;
 - What the numbers show us about the effect of what we have been doing;
 - The opinions we have collected;
 - The future trend;
 - Conclusions on the effectiveness of the initiative; and
 - Next steps.

5. Sarah Woelk (Operational Manager Intake & Assessment) and Menai Griffiths (Policy & Performance Officer) will present the briefing report, explain the work being undertaken and be available to answer any questions Members may have.

Way Forward

6. Members may wish to consider the information contained in **Appendix A** and in the presentation provided by Sarah Woelk (Operational Manager Intake & Assessment) and Menai Griffiths (Policy & Performance Officer), and provide any comments, advice or recommendations to the Cabinet Member and Director of Children's Services.

Legal Implications

7. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

Financial Implications

8. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and

review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

RECOMMENDATION

The Committee is recommended to consider the report and information presented at the meeting, and provide the Cabinet Member and Director of Children's Services with any comments, concerns or recommendations.

Marie Rosenthal
County Clerk and Monitoring Officer
30 March 2015

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Area of service being improved: **Recruitment, Retention and Use of Agency Staff**

RBA Implementation Update number 3: Evaluation (March 2015)

1. This is why the improvement initiative was started (The story)

During the period leading up to December 2014, the rate of social worker and social work manager turnover in Cardiff Children's Services was too high.

High numbers of vacancies together with long recruitment periods had led to the use of agency staff to fill gaps. The cost of paying agency workers was far too expensive. Some managers earned excessive sums.

Leadership and managerial instability had impacted negatively on Cardiff's reputation.

An insufficiently robust approach had been taken in relation to poor performance and this was linked to underutilising PPDR processes.

It was believed that the recruitment process was bureaucratic, but there were indicators that the development of DigiGov would go some way to resolving those difficulties.

2. These are the people who were involved in making improvements (Participants):

- Children's Services Management Team. • The Communication Team.
- Children's Services Training Team. • HR People Services Team.

3. This is the timeline and the emerging context:

The Recruitment and Retention initiative started in early December 2013, and was implemented during 2014. Formal evaluation started during March 2015 and the initial findings are presented in the following sections of this report.

Significant events during the time of implementation were:

- By June 2014 Children's Services had implemented a realigned model of case work. This separated teams of social workers who work with 'children in need' (not looked after) from those who work with 'looked after' children. This was a long anticipated development. Finalising it had a significant impact on staff confidence in the Children's Services Management Team, and consequently on morale.
- Starting at the end of July 2014, an external social work agency was commissioned to provide a team to case manage up to 250 cases for a time limited period. This remedial action was intended to rapidly reduce the social worker case-loads and intended to create long term reductions by increasing the rate of case closure. The agency team included qualified social workers, family support workers and managers. The team is due to depart during April 2015.

4. These are the key things (from the action plan) that we did to improve the situation:

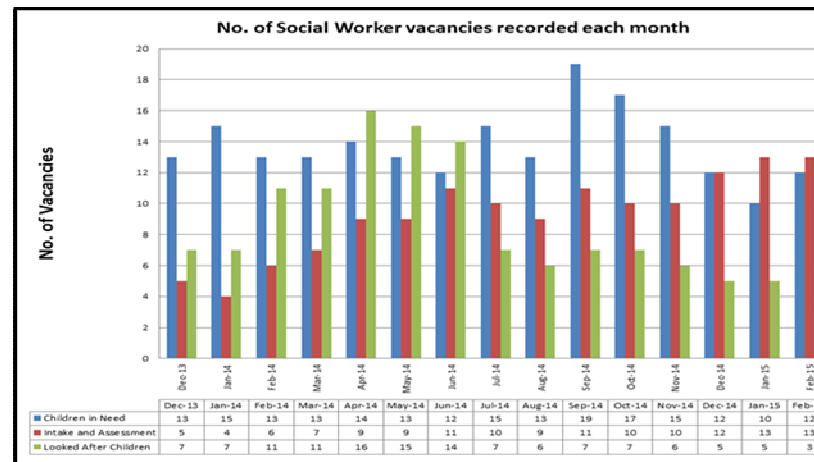
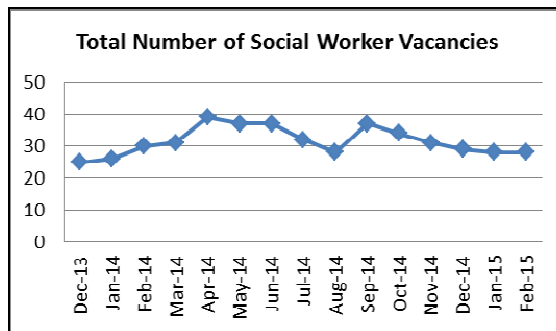
- A process was established to recruit to every post that was filled by an agency worker.
- A brand was created and promotional material placed in 6 publications of the Big Issue, 2 Primary Times, the Student Pocket Guide, Guardian website (100,021 views), Recruit3 and WCVVA websites, Capital Times (to over 145,000 households), Facebook (5,628 clicks, 1,528,579 views), Spotify (400 spots), on Billboards, Buses, and were played on the radio (across 200 spots) and shown in cinemas (1,628 showings to 132,769 people in 38 cinemas). The campaign video received in excess of 650 views on YouTube, and 28,000 tweets targeted social work graduates, social care lecturers, social work publications, community care websites, social work action network, UCLan school of social work and safeguarding children contacts on Twitter. Campaign posters were mailed to Hubs, leisure centres, libraries, community and youth centres, schools, doctors surgeries, play centres and sixth form students. There was a centre pull out in the June edition of Capital Time, with an additional editorial feature in the September issue reminding people about the vacancies.
- OMs improved direct engagement with frontline staff and with potential social work applicants.
- Links with universities were strengthened. Hosted students were encouraged to apply for permanent positions post qualification.
- The secondment to social work courses strategy was reviewed.
- Recruitment events were held during Social Care Week.
- Managers monitored staff satisfaction during supervision sessions. OMs led by example and had direct conversations with staff to build long term confidence.
- The February 2014 directorate newsletter reinforced attendance and wellbeing messages.
- Use of the Attendance and Wellbeing Policy became an agenda item in Supervision between Operational Managers and Team Managers.
- Training Officers conducted exit interviews.
- Workforce intelligence was improved.

These are the things that were tried but proved challenging:

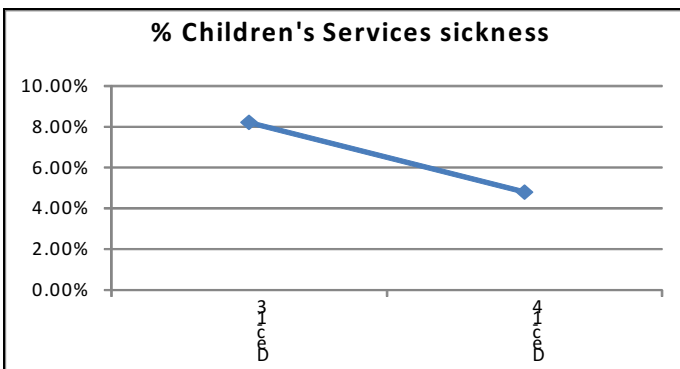
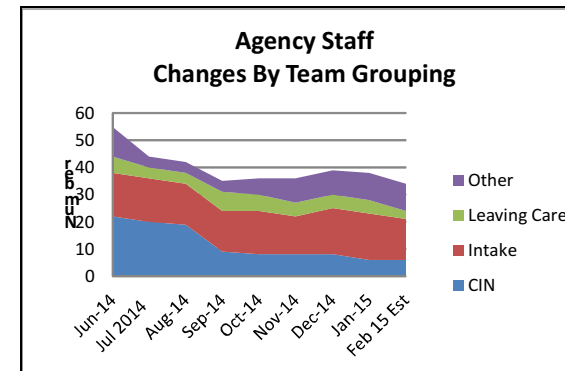
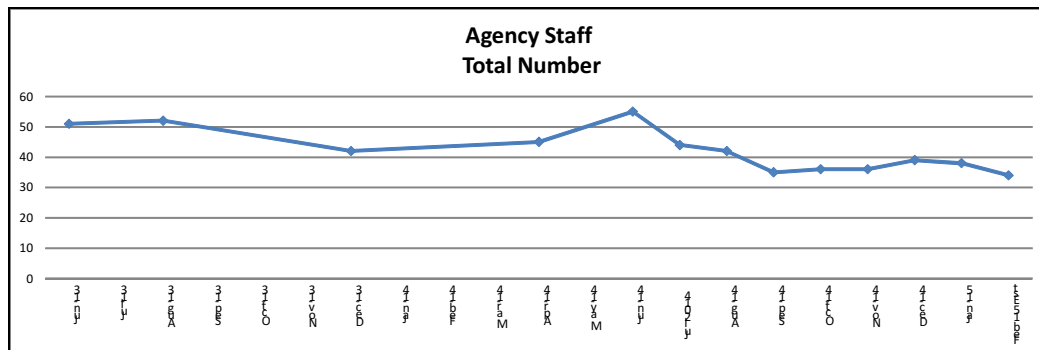
- Progress was slow in being able to create a 'Care Ambassador scheme'. The scheme was intended to be rolled out to events, job fairs, Job Centre Plus, Careers Wales, university open days and 14-19 pathway links with schools.
- Insufficient numbers of Principal Social workers limited the numbers of Mentors available, so Children's Services paid for external mentors to support newly qualified social workers.
- It was difficult to track if all managers had completed the Attendance and Wellbeing training provided by an external training organisation.
- A proposal for a remuneration package which was to include incentives broader than salary was not progressed.

5. This is what the numbers show us about the effect of what we have been doing (Quantitative Performance):

Please note: Service realignment occurred by June 2014. The direct impact of this was to create additional social worker posts which added to the overall vacancy numbers in the short term.



- At the peak of the recruitment drive OMs were interviewing 9 applicants per week.

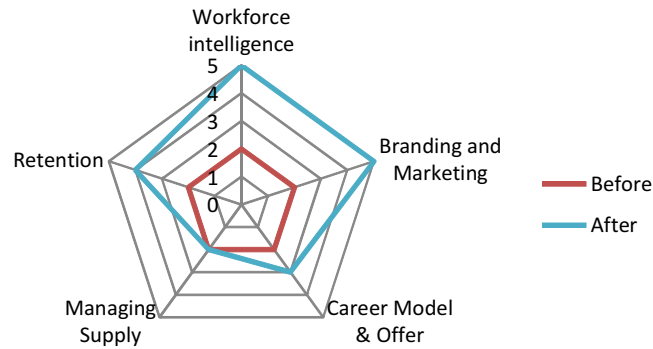


- Campaign information on the Council webpage received 1,170 views.
- There was a disproportionately high number of agency managers across the service prior to the initiative. The current position is that of the 17 Team Managers in Case Management Services, 16 are now permanent and 1 is in the process of being appointed as permanent.
- Expenditure on agency staff improved during the year, due to a significant reduction in the number of agency social workers employed within the CIN Team, although this was slightly offset by the number of agency staff in Intake and Assessment.
- The cost of the external managed social work service in 2014/15 was £850,000. The cost was partially offset by a contribution from corporate contingency (£600,000), which effectively covers the initial six month cost of the nine month contract.

6. These are the opinions we have collected (Qualitative Performance / Intelligence)

On a scale of 1 to 5 (1= (negative) really badly / failing / no difference at all, 5= (positive) really well / complete success / significant difference) Operational Managers rated their perceptions of progress as follows:

This is “how well” we did the things we decided to do (Putting our strategy into practice):



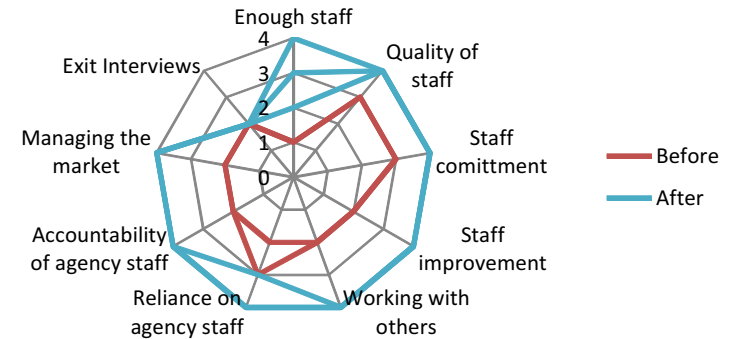
Comments:

- Some of the improvement made to the career offer was achieved through management action and realignment of the service.
- Strengthening links between the Training Section and Case Management managers would help manage supply.

This is “how well” we achieved the outputs we decided we needed (Performance against self-imposed standards):

Our standards

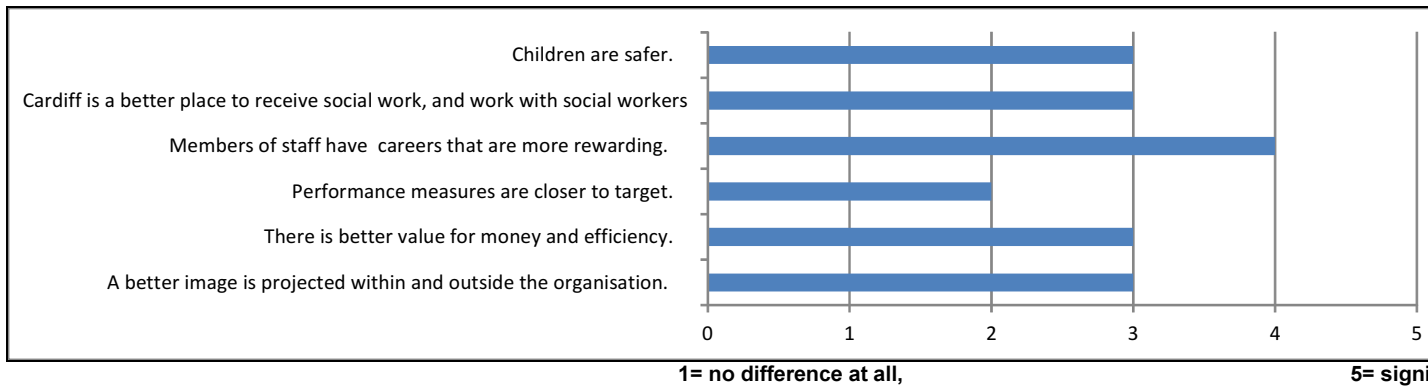
- There are enough staff to do the job.
- Vacant posts are filled promptly.
- Members of staff are competent, professional, demonstrate process compliance, and provide good quality services.
- Good members of staff are committed to staying for a long time, and have opportunities to progress their careers.
- Poor members of staff improve.
- Members of staff work well with each other and with others.
- Reliance on agency staff is reduced to an absolute minimum.
- Agency staff share the same degree of accountability as permanent staff.
- Agency markets are effectively managed by the commissioner.
- Exit interviews are held in a timely fashion and the organisation learns from the aggregated intelligence.



Comments:

- Continued progress in engaging partner agencies will further ease staffing pressures.
- Reduction in the use of agency staff has increased opportunities for progression within the directorate.
- Some agency staff are covering vacancies created by staff promotions.
- Realignment of the service into specialisms offers potentially more rewarding careers.
- Some agency staff from the Managed Team have applied for and obtained permanent positions with Cardiff.
- Managers are now more discerning in their choice of agency staff.
- Agency prices were increasing. This has now stabilised.
- The quality of the information from exit interviews can be further improved.

This is the “difference made” by the Recruitment and Retention initiative:



Comments:

- *Progress in the right direction. There are greater numbers of permanent and qualified staff.*
- *Teams are now specialised for Looked After and Children in Need. Consistency in practice has improved.*
- *Numbers of agency staff have been reduced.*

9. This is the intelligence we have about the future trend (the curve):

- The rate of short term sickness has improved and is no longer considered to be significantly related to dissatisfaction among the workforce. ☺
- There have been improvements in the rates of long term sickness. ☺ Previously we thought that wouldn't change.
- Maternity leave is high and is still not likely to change, as the workforce is predominantly female. ☺
- Measures to improve morale are thought to be working. ☺
- The new consistency resulting from having a permanently appointed Director and no agency / consultant managers in case management teams is thought to be having a stabilising effect. ☺

10. This is our conclusion about the effectiveness of the Recruitment and Retention initiative:

- The marketing campaign was extremely successful in promoting the work of social workers in the City of Cardiff to the interested public. However it has been difficult to obtain evidence showing a direct link between calls generated by the campaign and appointments made.
- Direct work by Operational Managers on improving culture and their drive to interview large numbers of candidates to replace agency staff with permanent appointments is thought to have had made the most significant contribution on the improvement made.

12. Next steps:

- A business case for a social worker trainee scheme.
- Case Management Operational Managers (OMs) could be rolled out as ambassadors at events, in a campaign to recruit 2015 social work graduates.
- OMs to review contents of recruitment packs.
- A lean review of the corporate recruitment process is recommended.
- Roll out work arising from the Social Worker Skill Audit.

THE CITY AND COUNTY OF CARDIFF
CYNGOR DINAS CAERDYDD

AGENDA ITEM: 6

CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE

7th April 2015

CABINET RESPONSES – LOOKED AFTER CHILDREN’S TRANSITION TO INDEPENDENT LIVING, CHAD and LISTENING EVENT

LOOKED AFTER CHILDREN’S TRANSITION TO INDEPENDENT LIVING

Background

1. The Children and Young People Scrutiny Committee agreed as part of their work programme to undertake an inquiry into Looked After Children’s Transition to Independent Living. As a result the Committee agreed to set up Task and Finish Group Inquiry. The terms of reference were agreed as follows:

- a) Gain an understanding of :the present provision and the challenges it faces;
- b) Consider evidence from officers, government organisations, third sector organisations, academic experts and young people;
- c) Examine good practice and successful initiatives in Cardiff and across comparable local authorities in the UK;
- d) Use the evidence collected above to make informed recommendations to the Cabinet and other relevant stakeholders aimed at improving the services and support for Looked After Children’s transition to independent life; and
- e) Report the findings of the Committee to the Cabinet and stakeholders.

2. The task group Inquiry was informed by the following:

- Overview and background – to set the context of the Inquiry and gain an understanding of what is meant by Transitions and the support in Cardiff for Looked After Children.

- Evidence from the Children’s Commissioner for Wales (*Lost In Care* report).
 - Evidence from the Cabinet Members for Social Care, Health and Wellbeing, and Children’s Services.
 - Evidence from the Director and managers from Children’s Services
 - Visit to the Leaving Care team – to meet with the staff and to discuss any issues of concern they have in supporting Looked After Children leaving care and once they have entered independent living, and discuss.
 - Research Papers / Reports (via Literature Review)
 - To review the evidence received from third sector organisations following the publication of a Call For Evidence letter.
 - To gather the views of those Looked After Children leading to transition and in independent living to gain an understanding on what support they feel they require, what worked and what could improve.
3. The report was presented to Cabinet in November 2014, and a full response was agreed by Cabinet on 19 March 2015, Copy attached at **Appendix A**.

Cabinet Response to Recommendations

4. The Cabinet response shows that all of the report’s 10 recommendations have been accepted. Which include increasing the care Leavers Grant to £2,000. As well as detailing the cabinet’s response to each of the recommendations, the response contains a commitment to include in the Directorates business plan the actions necessary to action plan to ensure that the recommendations will be implemented.

CHILD HEALTH AND DISABILITY TEAM

Background

5. The Children and Young People Scrutiny Committee agreed as part of their work programme to undertake an inquiry into the Child health and Disability Team as a

result the Committee agreed to set up Task and Finish Group Inquiry. The terms of reference were agreed as follows:

- a) Establish the level of service and support provided by the Team
 - b) Identify best practice that can be utilised in Cardiff;
 - c) Identify how best CHAD services should operate
6. The task group Inquiry was informed by evidence from Senior Management of Children Services, Interim Service Lead Manager, Staff from the Children's Health and Disability team, the previous Cabinet Member Councillor Richard Cook, the GMB Union as well as voluntary sector organisations and partners.
7. The task group Inquiry heard from representatives of the following external voluntary organisations; ABCD Cymru, Touch Trust, Ty Gwyn School, Bobath Children's Therapy Centre, Action for Children, Ty Storrie, Ty Hafan. It visited other local authorities which included Newport Council and Luton Borough Council. The task group also heard from parents, carers and a grandparent of disabled children.
8. The report was presented to Cabinet on 9 December 2013, and a full response was agreed by Cabinet on 19 March 2015, Copy attached at **Appendix B**.

Cabinet Response to Recommendations

9. The Cabinet response comments on all of the 18 recommendations. The response points out that the reports key findings and recommendations are comprehensive and relate to a very wide range of complex strategic policy and practice issues and several can only be realised over a sustained period and programme of improvement.
10. The Cabinet response includes a copy of the Departmental Development Plan which explains that the Service vision will be to ensure that:

- Disabled children are supported to live safely within their families, realise their aspirations and achieve their full potential;
- Where they cannot live at home disabled children will experience best care available within resources;
- Support disabled young people towards achieving smooth and safe transition to enabled adulthood.

The plan includes details of the actions, timescales, progress to date and the responsible officer, to ensure that each of the areas of activity; Strategy and Commissioning, Eligibility and Access, Service Standards and Quality; and Workforce) are undertaken.

LISTENING EVENT WITH LOOKED AFTER CHILDREN

Background

11. The Children and Young People Scrutiny Committee agreed as part of their work programme to undertake a Listening Event with Looked after Children under the age of 11.. The listening event was based around three key themes:

- a) School and healthy living;
- b) Visiting families and where you live
- c) Social Services.

12. The Committee agreed hold a listening event with a group of Looked After Children. Following discussions with officers and voluntary organisations it was agreed that the listening event would be developed and facilitated by Tros Gynnal Plant (Advocacy Service) together with a group of Looked After Children aged 11 and under in consultation with the Chairperson and officers from Scrutiny Services. It was further agreed that the event would be designed to enable Members of the Committee to hear the views of looked after children on their experiences, aspirations and concerns during their care by the Council. The

young people's views would be captured by members of the Advocacy Service and Scrutiny Services.

13. The report was presented to Cabinet on 17 July 2014, and a full response was agreed by Cabinet on 15 December 2015, Copy attached at **Appendix C**.

Cabinet Response to Recommendations

14. The Cabinet response shows that all of the report's 4 recommendations have been accepted.

Way Forward

15. Members may wish to consider the responses contained in the attached **Appendices** and the comments provided by the Cabinet Member for Children's Services, and provide any comments, advice or recommendations to the Cabinet Member and Director to help in supporting further improvements in the work of the Department.

Legal Implications

16. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not making policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to the Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly

motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

Financial Implications

17. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not making policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

RECOMMENDATIONS

The Committee is recommended to consider the Cabinet response reports, attached at **Appendix A, B and C** together with the information presented at the meeting, and provide the Cabinet Member and Director of Children's Services with any comments, concerns or recommendations.

Marie Rosenthal

County Clerk and Monitoring Officer

30 March 2015

CABINET MEETING: 19 MARCH 2015

**CABINET RESPONSE TO A REPORT OF THE CHILDREN AND
YOUNG PEOPLE SCRUTINY COMMITTEE SEPTEMBER 2014
ENTITLED LOOKED AFTER CHILDREN'S TRANSITION TO
INDEPENDENT LIVING**

**REPORT OF DIRECTOR OF CHILDREN'S SERVICES
AGENDA ITEM:10**

**PORTFOLIO: EARLY YEARS CHILDREN AND FAMILIES (COUNCILLOR
LENT)**

Reason for this Report

1. The purpose of this report is to enable Cabinet to respond to the report of the Children and Young People Scrutiny Committee arising from the work of a Task and Finish Group convened by the Committee.

Background

2. The Children and Young People Scrutiny Committee took evidence from wide range of stakeholders including children's services and housing staff; Children's Commissioner for Wales and the Police and Crime Commissioner for South Wales.
3. The report provides an effective and accurate insight into the challenges faced by care leavers as they move towards independent adulthood.
4. The report welcomes and acknowledges a number of developments that have been introduced to improve performance overall in children's services and to enhance the capacity of children's services to meet the needs of care leavers in particular. This includes
 - The recruitment of additional Personal Advisors
 - Joint work between Children's Services and Housing
 - Work to strengthen working arrangements with Adult services
 - The extension of Independent Visitor support
 - The strengthening of the role of the Corporate Parenting Advisory Committee
 - The Council LAC Traineeship Scheme

5. However the report identified a number of areas of concern including
 - The current level of the “leaving care grant”
 - The need for a better rent guarantor scheme
 - The need to modernise and improve information and advice to care leavers
6. The following responses to each of the report's 10 recommendations are set out for consideration in the appendix to this report.
7. Whilst the recommendations are welcomed overall, the current financial position which the council is confronting makes it more difficult to respond as fully as it would otherwise be able to do. However the service recognises the important messages within the report and will utilise the new 2015/16 Directorate Business Plan as the vehicle for responding to each of the key recommendations in more detail.

Reasons for Recommendations

8. To enable Cabinet to respond to the report of the Children and Young People Scrutiny Committee arising from the work of a Task and Finish Group convened by the Committee to consider Transitions for Care Leavers.

Legal Implications

9. There are no direct legal implications arising from this report

Financial Implications

10. Any costs including the additional £60,000 arising from the impact of changes to the care leavers grant in 2015/16 will be met from within the overall budget allocated to Children's Service with further costs arising in respect of 2016/17 and 2017/18 being considered as part of the Council's budget setting process for those years. Any financial implications arising from the development of a rent guarantor scheme will be considered as part of the feasibility review.

RECOMMENDATIONS

The Cabinet is recommended to agree the responses set out in the appendix in relation to the September 2014 report of the Task and Finish Group convened by the scrutiny committee to consider the needs of care leavers in Transition.

TONY YOUNG

Director
13 March 2015

The following appendix is attached:

Appendix 1 – Response to Recommendations

RESPONSE THE RECOMMENDATIONS OF THE CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE SEPTEMBER 2014 ENTITLED LOOKED AFTER CHILDREN'S TRANSITION TO INDEPENDENT LIVING

R1 - Ensure that the process for the transition of Looked After Children to independent living is made as flexible as possible; preparation should start early and support must also be available after children have left care. This could include a drop-in centre for care leavers.

Response - This recommendation is agreed.

The Operational Manager for Looked After Children will review the overall flexibility and effectiveness of preparatory programmes for care leavers and incorporate new developments into the 2015/16 Directorate Business Plan.

R2 - Immediately undertake a review of the Care Leavers Grant and set it at an appropriate level to enable care leavers to set up home. Members suggested that it should be set at £2,000. Care leavers should also be encouraged to open a Cardiff Credit Union account to enable them to access savings advice and financial support.

Response - This recommendation is agreed with effect from 1st April 2015 at a projected additional cost of £60,000 for 2015/16.

It is noted that this is based on known care leavers for 2015/16 and may be subject to minor change. The comparable additional costs for 2016/17 and 2017/18 are £47,000 and £92,000 respectively. The Operational Manager will consider the potential for engagement with Credit Unions.

R3 - Instruct officers to develop and implement appropriate processes to enable a tenancy guarantor to be in place for care leavers who require a private tenancy.

Response - This recommendation is agreed

Steps will be taken to explore the feasibility of establishing a rent guarantor scheme.

R4 - Instruct officers to develop and implement a communication strategy to include relevant information, advice and support, together with internet access for care leavers. The advice should cover finance management, access to benefits, loneliness, access to training and jobs, further education and general living skills. Internet access should be supported to enable care leavers to access online services, benefits and advice.

Response - This recommendation is agreed.

Opportunities to exploit existing council web and customer care resources more effectively will be considered as part of the Directorate Business Plan.

R5 - Instruct officers to undertake a review to consider the benefits, of having a multi-agency team for care leavers (including youth offending), thereby ensuring that all services and support are co-ordinated and provided from a single site.

Response - The need to promote a more integrated approach with partners and within the council is agreed. Options will be considered as part of developing the Directorate Business Plan 2015/16.

R6 - Ensure that the Youth Offending Service develops and implements good practice guidance around working with Looked After Children services.

Response - This recommendation is agreed and is the subject of work currently to strengthen the YOS and Children's Services interface.

R7 - Ensure that officers develop future Pathway Plans that are "live" documents for the young person, written in a young person friendly style, portable, reviewed and updated at least six monthly, with comprehensive contact details, and be fully shared (where appropriate) with Housing, Careers, Further Education, Probation and Youth Offending Team.

Response - This recommendation is agreed and will be provided for within the Directorate Business Plan 2015/16.

R8 - Support Children's Services staff to improve the working relationship with Cardiff & Vale College to optimise care leavers' options to access further education.

Response - This recommendation is agreed and will be provided for within the Directorate Business Plan 2015/16.

R9 - Ensure that the current transitions protocol and processes for young people who have high needs are reviewed and clarified, to ensure that they are fully prepared for the transition to adult support provision

Response - This recommendation is agreed and will be provided for within the Directorate Business Plan 2015/16.

R10 - Produce an action plan to demonstrate how they will seek to implement the above recommendations

Response - As indicated above the Directorate Business Plan 2015/16 will provide the vehicle for responding to the 10 recommendations. The Operational Manager for Looked After Children will report progress to the Corporate Parenting Advisory Committee.

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CABINET MEETING: 15 DECEMBER 2014

**CABINET RESPONSE TO A REPORT OF THE CHILDREN AND
YOUNG PEOPLE SCRUTINY COMMITTEE ENTITLED CHILD
HEALTH AND DISABILITY TEAM (CHAD)**

**REPORT OF THE DIRECTOR OF CHILDREN'S SERVICES
AGENDA ITEM: 4**

**PORTFOLIO: EARLY YEARS CHILDREN AND FAMILIES (COUNCILLOR
SUE LENT)**

Reason for this Report

1. The purpose of this report is to enable Cabinet to respond to the report of the Children and Young People Scrutiny Committee at the conclusion of its enquiry into the Council's Child Health and Disability Team (CHAD).

Background

2. The terms of reference of the enquiry were to
 - o Establish the level of services and support provided by the CHAD team to meet the needs of disabled children in Cardiff
 - o Identify best practice that can be utilised in Cardiff
 - o Identify how best CHAD services should operate

Issues

3. The report sets out 28 key findings and 18 recommendations that resulted from the inquiry
4. It is noted that the findings and recommendations are comprehensive and relate to a very wide range of complex strategic, policy and practice issues in relation to services for disabled children and their families. Several of the key findings and recommendations can only be realised over a sustained period and programme of improvement.
5. Of particular significance were recommendations 1 and 9. Recommendation 1 was concerned with undertaking an exercise to ascertain the staffing complement necessary to meet need. Given the likely strategic direction in favour of integration with partners (see paragraph 8 below), staffing resources will be a critical consideration in the development of the new model of delivery.

6. Recommendation 9 was concerned with reviewing eligibility criteria. Although there has been a review of eligibility criteria to support improvements to the operational effectiveness of the CHAD Team, it is clear that these will need to be revisited in any remodeling of services.
7. It is noted that on 13 May 2014, the Director of Children's Services reported to the Children and Young People Scrutiny Committee on a CHAD Development Plan. This plan was designed to respond to each of the recommendations in the report of the Scrutiny Inquiry.
8. It is noted that whilst the Development Plan has enabled the Children's Services Directorate to address significant deficits in the operation of CHAD it has also initiated key strategic work streams to enable the implementation of a new strategic approach and model of service in partnership with the Vale of Glamorgan Council, the Education Directorate and the University Health Board (UHB). This includes the preparation of detailed proposals to introduce a model of services base on a 0-25 age range (instead of as now 0-18); improve transitions; secure cost reductions in education, childrens and health and social care directorates; improve outcomes and service quality.
9. It is noted that agreement has recently been reached with the Vale of Glamorgan Council and the UHB to joint fund a 'Change Manager' post to prepare the detailed proposals and an accelerated implementation programme to enable delivery of these improvements. There is clear partner confidence in the prospects for achieving this strategic change.

Reasons for Recommendations

10. To enable Cabinet to respond to the report of the Children and Young People Scrutiny Committee following an Inquiry into CHAD.

Legal Implications

11. There are no direct legal implications arising from this report but the key changes proposed in terms of the model of service, transitions and cost effectiveness will need to be reviewed in legal terms once known.

Financial Implications

12. There are no direct financial implications arising from this report at the present time but the key changes proposed in terms of the model of service, transitions and cost effectiveness will need to be reviewed and quantified in financial terms once known.

RECOMMENDATIONS

The Cabinet is recommended to:

- 1) note the findings and recommendations of the report of the Children and Young People Scrutiny Committee following its inquiry into CHAD and

the agree the development plan at Appendix 1 as the Cabinet response.

- 2) Note that the Director of Children's Services will bring forward a report to enable Cabinet to further consider detailed proposals for the remodelling of services to disabled children prior to finalising agreement between joint funders as to next steps.

TONY YOUNG

Director

9 December 2014

The following appendix is attached:-

Appendix 1 Child Health & Disability Team Development Plan

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

APPENDIX 1

Date: April 2014

Vision Statement	<p>Cardiff Child Health and Disability Services will ensure that:</p> <ul style="list-style-type: none"> • Disabled Children are supported to live safely within their families, realise their aspirations and achieve their full potential • Where they cannot live at home disabled children will experience best care available within resources • Support disabled young persons towards achieving a smooth and safe transition to enabled adulthood
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1. Area of Activity: Strategy and Commissioning

Outcomes	<ul style="list-style-type: none"> • People are be able to access services which are carefully planned in the short and medium term, and which are available at the right time, in the right place and at the right price. In all our planning, we <ul style="list-style-type: none"> ○ Listen carefully to service users and carers ○ Work collaboratively across all partners and providers ○ Rely on sound evidence about needs and about effectiveness • The range of resources available meets the needs of children and young people. • Strategic Plans due account of the needs of carers • Children and young people are supported to live with their families rather than becoming looked after where it is in their best interest to do so. • Children and young people are supported to be as independent as possible, and to develop life skills, including access to universal and community based services, training and employment opportunities. • Children and young people who are looked after are supported in their preparation for independent living. • Young people leaving care are supported to live independently with access to appropriate Health and Social Care Services where eligible. • Sustainable financial plans deliver strategic objectives and best possible value for money.
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	Action	Timescale	Progress	Responsibility	RAG Status
Strategy					
1.1	Finalise and agree an integrated multi-agency strategy for disabled children and their families.	July 2014	A multi-agency group is well established. Partners in Cardiff and Vale University Health Board, Education Services and stakeholders represented on the Disability Work-stream	Cardiff Council led by Health	Amber

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

	Action	Timescale	Progress	Responsibility	RAG Status
			Group have been engaged.		
1.2	Establish inclusive processes for engaging stakeholders more effectively in planning and commissioning. (Links to Scrutiny recommendations R13)	July 2014	<ul style="list-style-type: none"> The Lead Manager has established effective communications with individual services providing organisations. Improved communication arrangements between social workers and managers are reported against action 4.5. The Lead Manager has met with the parent groups and organisations to discuss how communications can be best managed in the longer term and is planning developments with Cardiff and Vale University Health New arrangements are being established to engage with parents, to improve on the previous arrangements. Series of meetings held with a number of groups. Agreed will build on existing Parents Federation arrangements to support engagement in ongoing development of strategies. Board and other partners. 	LM; Commissioning	Amber
1.3	Explore opportunities to develop regional partnerships	Report due April 2014	<ul style="list-style-type: none"> Opportunities are being explored to work more closely with the Vale of Glamorgan Council and Cardiff and Vale University Health Board in delivering Child Health and Disability services, including broadening the Cardiff Strategy for Disabled Children to become a Cardiff, Vale of Glamorgan and Cardiff and Vale University Health Board regional strategy. Regional Collaborative Report Fund has commissioned external report to consider feasibility of an inter authority strategy for commissioning services. This will consider existing commissioning arrangements. 	Director (D)	Amber
Commissioning					
1.4	Review services, identify commissioning priorities and re-commission where appropriate.	Review by June 2014. Identify	<ul style="list-style-type: none"> Commissioning priorities will be determined a multi-agency group to review and update the Strategy for Disabled Children and young People. 	LM/ Commissioning & Procurement	Amber

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

	Action	Timescale	Progress	Responsibility	RAG Status
	(Links to Scrutiny recommendations R12)	priorities by June 2014. October 2014	<ul style="list-style-type: none"> • Direct Payments will be included in any review. The Lead Manager has initiated links with Health and Social Care Services to develop use of direct payments in Children's Services. • The Breakthrough service is being reviewed and re-specified by Children's Services, Cardiff and Vale University Health Board and Education Services. • The planning and implementation of the integrated Health and Social Care overnight short stay service model at Ty Storrie continues to progress. • A retendering process is being initiated for framework providers whose contracts have or are due to expire. 		
1.5	Engage partners through the Children and Young People's Programme Board in developing and extending special needs play schemes on a sustainable basis in order to meet the needs of children and young people during school holidays, with effect from summer 2014.	June 2014	<ul style="list-style-type: none"> • Development to be initiated through the Children and Young People's Programme Board in consultation with colleagues in Culture Leisure and Parks. • Commission review of play services for disabled children. 	LM	Red
1.6	Establish strengthened arrangements for monitoring to ensure the quality of services is effective and use of resources is appropriate.	Completed	<p>Significant progress has been made to strengthen service effectiveness. For example:</p> <ul style="list-style-type: none"> • Negotiations initiated with sessional support providers to strengthen cost-effectiveness. • Lead Manager has met with service providers and is involved in monitoring meetings convened by Operational Manager (OM) resources to ensure that all contracted services are operating according to the expectations of the contract specifications. • Monthly budget monitoring meetings are now established between Operational Manager (OM), Team Managers and Business Support staff to ensure that need, spend 	LM	Amber

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

Action	Timescale	Progress	Responsibility	RAG Status
		<p>and budget are more effectively aligned to maximise value.</p> <ul style="list-style-type: none"> • A process of OM approval has been established to authorise any increase in service provision or new care package. • Letters have been issued to service providers to ensure practice is compliant with financial procedures. For example: mileage, parking expenses, invoicing process. • The scope of the funding provided by LATCH for the Hospital Team is being clarified. • Business Support now use signed CP12 to verify invoice in line with the child in need review process before paying bills. • All CP12's currently have duration 'until 31st March'. At the point of each review, the durations will be amended to reflect the each child's individual plan. 		

2. Area of Activity: Eligibility and Access

Outcomes	<ul style="list-style-type: none"> • Disabled children, young people and their families will be able to find out where and how to get the help they need when someone may be at risk. • Disabled children, young people and their families are able to find information about available services. • Disabled children, young people and their families will receive an appropriate and timely response when they contact Children's Services. • Equality and diversity issues are effectively included in planning and implementation of services in order to most appropriately meet the needs of all children and young people. • Children and young people are supported by staff from the most appropriate statutory agency or service provider, who understand and carry out their safeguarding responsibilities effectively. 			
Action		Progress	Responsibility	RAG Status
2.1	Develop information resources in conjunction with stakeholders.	<ul style="list-style-type: none"> • Information published on the Council's website is currently being reviewed as part of the Council's web- 	LM	Amber

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

	Action	Timescale	Progress	Responsibility	RAG Status
	(Links to Scrutiny recommendation R12)		<ul style="list-style-type: none"> • refresh project. • Improved access to information will be a priority for consideration in development of the new Disabled Children's Strategy. • The creation of 'Awareness Days' at schools and clinics is being discussed with partner agencies. • Examples of good practice have been examined in preparation for creating a Disability Register and associated awareness raising media. Vale of Glamorgan have well established disability Index. Negotiations have been initiated with a view to developing a Cardiff and Vale Index. 		
2.2	Review, in association with stakeholders, the referral process and eligibility criteria for services to be delivered by the Child Health and Disability Team. (Links to Scrutiny recommendation R9, R11, R14)	July 2014	This will be determined as part of planned multi-agency work to review the Strategy for Disabled Children.	LM	Amber
2.3	Establish processes to ensure that parents of disabled children are fully informed of any changes in services that affect them or their children. (Links to Scrutiny recommendation R10)	Completed and ongoing	<ul style="list-style-type: none"> • Operational arrangements in place. 	LM	Green
2.4	Ensure effective alignment of eligibility so that children are appropriately stepped up or down between Children's Services and Families First on a timely basis. (Links to Scrutiny recommendation R11)	Completed and ongoing	<ul style="list-style-type: none"> • There are active and ongoing discussion between Child Health and Disability Team managers and Families First managers. • This will be further taken forward as part of the work to review the Disability Strategy. 	LM	Amber

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

3. Area of Activity: Service Standards and Quality

Outcomes		Timescale	Progress	Responsibility	RAG Status
<ul style="list-style-type: none"> • Children and young people will receive an appropriate and timely response to safeguarding concerns. • Where children and young people are eligible, they receive an appropriate and timely response to their needs. • Children and young people have up to date good quality sustainable care plans that ensure their needs are met. • Children and young people are supported to return to their families in a timely manner where it is in their best interest to do so. • Young People experience a planned and timely transition to Health and Social Care Services where they are eligible. • Children and young people are listened to and understood and are at the centre of making changes to their lives. • Children and young people are protected from harm and abuse wherever possible. 					
3.1	Investigate examples of best practice. (Links to Scrutiny recommendation R14, R15)	July 2014	<ul style="list-style-type: none"> • Visit to best practice sites are being undertaken. 	LM	Amber
3.2	Build relationships and integrated working where appropriate to ensure the best possible use of resources, opportunities and skills (Links to Scrutiny recommendation R3, R16, R17)	Ongoing	<p>Significant progress is being made in this action:</p> <ul style="list-style-type: none"> • Initial referral, intake, assessment and risk management screening has been enhanced by integrating a child health and disability social worker within the Children's Access Point (CAP) team. • Multi-agency planning sub-group being established as part of the work to review the Strategy for Disabled Children and Young People, including representatives from Education Services and the Health Board. • Meetings with Head Teachers of the Special Schools planned. • Named social workers will be identified as Child Health and Disability leads for liaison with each school. • Need to identify pathways and process for liaison with voluntary organisations not represented in existing groups. • Loss of funding for the Parents Network coordinator is a potential issue. Suggestion to mitigate the issue is that 	LM	Green

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

Action	Timescale	Progress	Responsibility	RAG Status
		<p>parent groups work together to create links between their groups and nominate a representative to feed back to the collective.</p> <ul style="list-style-type: none"> Lead Manager has met with all Head Teachers of special schools in Cardiff with a view to developing closer working relationships. 		
<p>3.3 Adapt CareFirst so that it is fit for the purpose of recording and case managing child health and disability services (Links to Scrutiny recommendation R2, R15)</p>	<p>October 2014</p>	<p>Measurable progress has been made as follows:</p> <ul style="list-style-type: none"> Plans in progress to established a Register of Disabled Children, using the CareFirst application, in accordance with the statutory guidance of the Children Act 1989. Analysis of requirements underway to inform technical specification. Development work completed to use the 'Service Agreement Package' facility on CareFirst to initially record all section 17 short breaks and then to record all services provided. Pilot planned as first stage of implementation. Transition Report created on CareFirst. Is live and pending implementation. Plan to Implement Occupational Therapy (OT) report on CareFirst. Pending new OT appointment. A review desktop has been created in CareFirst. CareFirst development officer has initiated review of correct CareFirst functionality. 	<p>LM</p>	<p>Amber</p>
<p>3.4 Ensure that CareFirst is being used for case recording, recording service provision and to manage performance.</p>	<p>Completed and ongoing</p>	<ul style="list-style-type: none"> Weekly performance information is shared and concerns are noted and addressed. Managers are making sure that all staff in the Child Health and Disability team are aware of the Key Performance Indicators on a weekly basis. 	<p>LM</p>	<p>Green</p>
<p>3.5 Make sure that all children have an appropriate care plan and are reviewed within the required</p>	<p>Ongoing</p>	<p>Significant work is ongoing in this area:</p> <ul style="list-style-type: none"> The team is focusing on reviewing all historical cases 	<p>LM</p>	<p>Amber</p>

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

Action	Timescale	Progress	Responsibility	RAG Status
timescales.		that are without a care plan and case where the care plan is no longer appropriate. Also reviewing those cases that might have been closed inappropriately. <ul style="list-style-type: none"> There are dedicated review social workers, however initially all of the team's social workers will be responsible for clearing some of the backlog of reviews. The appropriateness of cases where children are deceased but remaining open and worked by the Hospital Team is being considered. 		
3.6 Make sure Team Managers are conducting regular audits.	Achieved	The progress on this is being reported through Children's Services performance information.	NJ	
3.7 Develop effective Transition processes.	Ongoing	Working with colleagues in Health and Social Care. Discussions initiated. This also links with the work being commissioned under the Regional Collaborative Fund.	LM	Amber

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4. Area of Activity: Workforce

Action	Timescale	Progress	Responsibility	RAG Status
4.1 Agree and implement a structure where roles are clearly defined. (Links to Scrutiny recommendations R1, R3, R5, R6, R14)	Completed	Significant progress has been made: <ul style="list-style-type: none"> Staffing complement proposed as part of Children's Services realignment. This is not a final structure since work is ongoing to consider the capacity needed to address direct payment and transition priorities. There are no Social Work Assistants currently working within the team. Plans for realignment include two Social Work Assistant posts. Will have clearly defined roles and responsibilities. 	LM	Amber

Outcomes:

- Our workforce is recruited, managed and developed effectively to deliver the best possible outcomes for service users.
- The workforce has the capacity to respond to the changing needs of our population.
- Members and senior managers with direct responsibility for social services provide a clear sense of direction, and establish a culture of open communication, continuous learning, and accountability, keeping in close touch with the "front-line".

**CARDIFF COUNCIL
CHILD HEALTH AND DISABILITY TEAM
DEVELOPMENT PLAN**

	Action	Timescale	Progress	Responsibility	RAG Status
			<ul style="list-style-type: none"> Child Health and Disability Team social workers have now been established as part of the Child Access Point. Hospital Team posts confirmed as remaining until 31.03.15. Posts currently being advertised. The practice of Special Needs Health Visitors undertaking “social work” or work with children over the age of five has been discontinued. 		
4.2	Recruit and select sufficient social workers, in accordance with the Council’s Recruitment and Selection policy. (Links to Scrutiny recommendations R1, R6, R8).	Completed and ongoing	<ul style="list-style-type: none"> Two permanent team managers have been appointed which will alleviate the dependency on agency managers Several permanent social work posts have been appointed to. Ongoing recruitment to vacant posts 	LM	Green
4.3	Advertise for Occupational Therapist (22.5 hours post) and recruit.		Post has not yet become vacant. Health and Social Care have agreed that funding for Occupational Therapists will be transferred to Children’s Services. Considering revising duties to include additional line management responsibilities.	LM	Amber
4.4	Agree and undertake training programmes (Links to Scrutiny recommendations R7)	June 2014	All current managers have appropriate child care and managerial experience and training. New appointees will be supported by individual and appropriate training programmes as prioritised through Personal Performance and Development Reviews (PPDRs).	LM	Amber
4.5	Create a working environment that is attractive, appealing and has clear channels of communication. (Link to Scrutiny recommendations R4, R8)	Appoint by May 2014 & ongoing.	<ul style="list-style-type: none"> The Lead Manager (a post previously filled by a consultant) has been replaced by an experienced Cardiff Children’s Services manager. Appointment of permanent team managers A clear vision for the service is being developed. Formal fortnightly team meetings now take place. Informal weekly catch up meetings are convened by Team Managers. Information is conveyed to staff in the periods between meetings. A team-building programme is being planned. 	LM	Amber

**CABINET RESPONSE TO A REPORT OF THE CHILDREN AND
YOUNG PEOPLE SCRUTINY COMMITTEE ENTITLED
LISTENING EVENT - LOOKED AFTER CHILDREN MARCH 2014**

**REPORT OF THE DIRECTOR OF CHILDREN'S SERVICES
AGENDA ITEM: 3**

**PORTFOLIO: EARLY YEARS CHILDREN AND FAMILIES (COUNCILLOR
LENT)**

Reason for this Report

1. The purpose of this report is to enable Cabinet to respond to the report of the Children and Young People Scrutiny Committee following a 'Listening Event with Looked After Children' convened by the scrutiny committee in March of 2014.

Background

2. The Children and Young People Scrutiny Committee agreed to hold this event to ensure that the views of looked after children are heard by decision-makers in the Council.
3. It was the first such event held for children under 11 years of age and it was facilitated by Tros Gynal Plant
4. The event was based around three key themes:
School and healthy living
Visiting family and where you live
Social Services

Issues

5. The report sets out five key findings that resulted from the event.
6. The findings provide the Cabinet with an opportunity to reinforce a Commitment of the Council to the United Nations Convention on the Rights of the Child (UNCRC) and to the principle of participation by children and young people in general.
7. The report also recognises the vital role that listening to Looked After Children in particular, plays in upholding this commitment

8. The report provides a further opportunity to Cabinet to welcome the four recommendations made in the report.
9. It should also be noted that following dialogue between the Cabinet Member and the Director of Children's Services, the Directorate is actively considering effective ways to embed recommendations 2 and 4 as part of its ongoing approach to participation.
10. This is timely in light of the recommendations of the Care and Social Services Inspectorate's recent Report on its findings following an inspection in May of the Council's arrangements to support and safeguard Looked After Children. In that report it was recommended that the Council further strengthen its approach to the participation Looked After Children and this report.

Reasons for Recommendations

11. To enable Cabinet to respond to the report of the Children and Young People Scrutiny Committee following a 'Listening Event with Looked After Children convened by the scrutiny committee in March of 2014.'

Legal Implications

12. There are no direct legal implications arising from this report although it is noted that the recommendation supports the Council in discharging its general responsibilities in respect of consultation and the implementation of the UNCRC

Financial Implications

13. There are no direct financial implications arising from this report.

RECOMMENDATION

The Cabinet is recommended to agree the response to the report of the Children and Young People Scrutiny Committee following a 'Listening Event with Looked After Children' convened by the scrutiny committee in March of 2014', as set out in Appendix A

TONY YOUNG

Director

9 December 2014

The following appendix is attached:

Appendix A – Cabinet Response to Recommendations

APPENDIX A

R1. The Cabinet must ensure that decision makers regularly engage with Looked After Children (including those aged 11 and under) wherever possible to ensure that their views are heard during the development and implementation of all social care strategies, policies and plans and individual care plans.

Response – This recommendation is accepted

The recently refreshed Looked After Children Committee will integrate regular engagement within its annual programme of work and will provide conduit for their voice in policy and strategy.

R2. Children's Services should consider this format of listening event as an effective forum for Looked After Children aged 11 and under, to express their views.

Response – This recommendation is accepted

Children's Services will utilise this approach for the future at regular intervals

R3. The Children & Young People Scrutiny Committee and / or Corporate Parenting Panel should continue to hold regular listening events with different groups of Looked After Children to help understand their perspective on areas for improvement in social care.

Response – This recommendation is accepted.

As indicated in relation to recommendation 1, this will be integrated into the work programme of the Corporate Parenting Committee.

R4. Children's Services should develop additional methods of engagement with younger Looked After Children, to enable them to be made aware of, and actively involved

in, LAC reviews, meetings and decisions that affect them.

Response – This recommendation is agreed and this will be a priority for the newly established Looked After Children Service.

CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE

7 April 2015

Internal Audit – Children’s Directorate

Reason for the Report

1. The Chair of the Children and Young People Scrutiny Committee recently received a letter from the Chairperson of the Council’s Audit Committee, Sir Jon Shortridge. The letter raised some concern that the Audit Committee had expressed at its meeting on 19 January 2015. This report provides the Committee with a copy of this correspondence together with details of the actions undertaken since the receipt of the letter. A copy of the Audit Committee’s letter is attached at **Appendix A**.

Issues

2. The Audit Committee asked that this issue be raised with the Chair of Children & Young People Scrutiny Committee to seek assurance that the committee is aware of these matters and scrutinising and measuring the improvements in such areas within Children’s Directorate.
3. The Chairperson of the Audit Committee and Cllr Richard Cook, subsequently met to and agreed to write to the Cabinet Member for Early Years, Children and Families, copy attached at **Appendix B** to help address the serious issues that were raised at the Audit Committee.
4. The Chair’s also agreed that the Scrutiny Committee would continue to monitor this matter through regular contact with Directorate management and that the Audit Committee will continue to receive Internal Audit reports.

Way Forward

5. Members are invited to consider the correspondence attached to this report Councillor Richard Cook, Committee Chairman will briefly comment on the correspondence.

Legal Implications

6. The Scrutiny Committee is empowered to enquire, consider, review and recommend, but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to the Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

Financial Implications

7. The Scrutiny Committee is empowered to enquire, consider, review and recommend, but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications.

Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

RECOMMENDATION

The Committee is recommended to consider the contents of the letters attached at **Appendix A & B** and provide the Cabinet Member and Director of Children's Services with any comments or concerns.

MARIE ROSENTHAL

County Clerk and Monitoring Officer

30 March 2015

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My Ref: AUD/DJK/WW

Your Ref:

Date: 02 February 2015



County Hall
Cardiff,
CF10 4UW
Tel: (029) 2087 2087

Neuadd y Sir
Caerdydd,
CF10 4UW
Ffôn: (029) 2087 2088

Councillor Richard Cook
Chairperson, Children & Young People Scrutiny Committee
The City of Cardiff Council
County Hall
Cardiff
CF10 4UW

Dear Councillor Cook

Re. Internal Audit - Children's Directorate

On 28 March 2014, Tony Young, Director of Children's Services presented the Committee with the risks and challenges facing the Directorate. The Committee considered the scale and complexity of these to be extensive. The work underway within the Directorate was encouraging and highlighted the commitment to make positive improvements with some success already secured through less reliance on agency staff and the recruitment of permanent staff. The Committee was advised that the Directorate management team have shaped its strategic direction for the future based on a service review and setting a medium term business plan.

Following this on 6 June 2014, a letter was sent to the Cabinet Member, Early Years, Children's & Families expressing concerns over the risks and challenges facing the Directorate, a copy of which is appended for your information.

The Audit Committee has a remit to review and challenge the Council's financial affairs, risk management, internal control and corporate governance arrangements and on 19 January 2015, the Committee were presented a series of Executive Summary Internal Audit Reports, which had been classified with either limited or no assurance; one of which related to Safeguarding and Review (Core Group) within Children's Services. Members of the Committee were informed that the work of the Auditors had been a follow up to previous audits.

The Committee acknowledges that positive steps are evident within the Children's Directorate, however there are still significant operational pressures to be faced which are evident from the Internal Audit's follow up review of 'Safeguarding & Review (Core Groups)'. The report highlighted that some progress had been made since the previous audit with some corrective actions and improvements have been implemented but Members of the Committee expressed concern over the continuing situation, particularly surrounding the non-completion of key records within stipulated timescales. Following constructive dialogue between the Directorate and Internal Audit a way forward has been agreed and Internal Audit has been invited to attend the Children's Directorate Management Team meeting from January 2015 so audit concerns are discussed.

PLEASE REPLY TO: C/O Internal Audit, Room 357, County Hall, Cardiff, CF10 4UW. Tel: (029) 2087 2248
Fax: (029) 2082 7154 internalaudit@cardiff.gov.uk or 00.shortridge@btinternet.com



The Audit Committee have ask that I raise these concerns with you on their behalf and seek assurances from your Scrutiny Committee that you are aware of these matters and scrutinising and measuring the improvement in such areas within the Children's Directorate.

If you wish to discuss this matter further, please do not hesitate to contact me.
Yours sincerely



Sir Jon Shortridge
Chairperson, Audit Committee
City of Cardiff Council

cc. Councillor Sue Lent, Deputy Leader. Early Years, Children & Families
Paul Orders, Chief Executive
Christine Salter, Corporate Director Resources
Tony Young, Director Children Services
Marie Rosenthal, County Clerk & Monitoring Officer
Derek King / Bob Jones, Audit Manager

My Ref: AUD/DJK/JB
Your Ref:
Date: 26th February 2015



County Hall
Cardiff,
CF10 4UW
Tel: (029) 2087 2087

Neuadd y Sir
Caerdydd,
CF10 4UW
Ffôn: (029) 2087 2088

Councillor Sue Lent
Cabinet Member, Early Years, Children & Families
The City of Cardiff Council
County Hall
Atlantic Wharf
Cardiff
CF10 4UW

Dear Councillor Lent

Re. Internal Audit - Children's Directorate – Safeguarding & Review

At the Audit Committee meeting of 19th January 2015, Members received an Executive Summary report to a follow-up audit in Children's Services entitled "Safeguarding & Review". A copy of the Executive report is attached.

This reported an improved position from the previous audit, but the findings still provided only limited assurance, due to risks, primarily relating to incomplete records and process delays. The report set out 12 recommendations for management to consider.

This raised concern amongst Members of the Audit Committee and as a result the pair of us met on 20 February to consider our respective roles in addressing the serious issues that the report raises.

At this meeting we agreed that the continuing risks to the safety of vulnerable young people, for whom the Council has a responsibility, were such that we should refer the matter to you and your Executive colleagues, bringing this report to your attention and, given the significant risks highlighted, seeking assurances these matters will be addressed.

We have noted the efforts to enhance the control environment and implement the Audit recommendations, as well as the commitment to mitigate the associated risks, but we are not persuaded that it will be possible to satisfactorily address all the audit concerns within the resources currently available.

Whilst we do acknowledge that steps are being taken to address these issues now, given their seriousness, it is particularly important that some time-lines should be set by when the improved controls that are needed will be put in place.



We agreed that the Scrutiny Committee would continue to monitor this matter through regular contact with Directorate Management, and that the Audit Committee will continue to receive Internal Audit reports. It is thus important that both Chairs should continue to be informed of developments in this area.

We look forward to learning how you propose to address our Committees' concerns. If you would like to discuss this matter further, please do not hesitate to contact us.

Yours sincerely



Sir Jon Shortridge
Chairperson, Audit Committee



Councillor Richard Cook
Chairperson, Children & Young
People Scrutiny Committee

Enc. Executive Summary Report

cc. Paul Orders, Chief Executive
Christine Salter, Corporate Director Resources
Tony Young, Director Children Services
Marie Rosenthal, County Clerk & Monitoring Officer
Derek King / Bob Jones, Audit Manager

**CITY & COUNTY OF CARDIFF COUNCIL
DINAS A SIR CAERDYDD**

CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE: 7 APRIL 2015

IMPROVING SCRUTINY PROJECT

Purpose of Report

1. To advise Scrutiny Members of the progress made to date in delivering the Council's Improving Scrutiny Project, and to seek views on the timing and next steps to bring the Project to conclusion.

Background

2. In May 2014 the Cabinet agreed a Programme of Organisational Change which was designed to meet the challenges set out in the Welsh Local Government Association's 23 September 2013 Peer Review report on this Council. One of the five programmes of change within the overall Programme is "Improved Governance", and within this Programme is a Project described as "*Strengthen the Scrutiny Function*".
3. The Peer Review report was complimentary of Cardiff's Scrutiny Function, noting:

*"The Team saw Scrutiny in action, and were impressed. There is indeed much other authorities can learn from the way Scrutiny is undertaken in Cardiff Council."*¹

The Council's five Scrutiny Committee Chairs, however, were mindful of significant plans in place to transform the Council, the pace of development of alternative delivery models, the growth of collaborative service delivery and governance, the potential for local government reform in Wales, and the changes in Welsh Government and public expectations of public scrutiny evidenced

¹ <http://www.wlga.gov.uk/wlga-peer-reviews-reports/cardiff-c-wlga-peer-review-report>

through the 2011 Local Government Measure and subsequent Simpson Review. They therefore felt it appropriate to consider ways that scrutiny could adapt to stay ahead of the curve, in delivering effective non-Executive challenge to the Cabinet and the complex range of emerging executive delivery arrangements likely to stem from these changes.

4. The Chairs consequently agreed in August 2014 to spearhead a bid for Cardiff to be included in a UK-wide research programme then being developed by the Centre for Public Scrutiny (CfPS), which was designed to assess the role of scrutiny in supporting transformational change within local authorities at a time of change and austerity. The bid document was signed by the Council Leader and Chief Executive, and the Council was advised in September that it had been agreed for Cardiff to be one of nine case studies included in the research programme. This would see the CfPS providing support to the '*Strengthen the Scrutiny Function*' Project.
5. The three key aims of the Project were identified as:
 - a. To equip Cardiff's Scrutiny function to meet the current needs and anticipated future challenges facing the Council's Executive and non-Executive Members.
 - b. To ensure that the Council's scrutiny structure enables Members to provide robust and effective overview and scrutiny that is relevant to the priorities of the organisation's Corporate Plan and operational challenges.
 - c. To seek evidence to support recommendations for Members to agree any potential changes to current governance arrangements, as part of a wider major transformation of the City of Cardiff Council's services and structures.
6. The three key objectives of the Project were identified as:
 - a. To take forward the learning from Cardiff's participation in the 2013 Wales Audit Office *Improving Scrutiny* Study, especially by using the 15 characteristics in the newly developed "Framework for Effective Scrutiny in Wales" as a mechanism for self-evaluation of the quality of scrutiny in Cardiff, and the planning of future Scrutiny Work Programmes.

- b. To assess and make recommendations on the structures and arrangements that will be most appropriate to manage the scrutiny of the Council's transformation in coming years. To consult upon politically and organisationally, and take proposals forward for inclusion in the Council's 2016/17 Budget proposals.
- c. To address recommendations in the Local Government Measure (Wales) 2011, and subsequent recommendations in the Williams Review, to consider opportunities for improvement to current collaborative scrutiny arrangements with partners.

Progress to Date

- 7. Between November and January 2015, CfPS advised on the scope of the project and met the Scrutiny Chairs, Council Leader, Opposition Leaders, the Chief Executive and selected Directors, plus a small number of key external stakeholders to gather evidence.
- 8. Key elements of the Project Plan attached at **Appendix A** include:
 - a. Desk research undertaken by the Scrutiny Research Team to benchmark Cardiff's current approach to scrutiny with that of other leading scrutiny authorities, and an analysis of leading practice in scrutiny practice in England and Wales;
 - b. A workshop for Scrutiny Members to provide their views on a number of themes and issues connected with the Project;
 - c. A Conference for Scrutiny Chairs and Members to engage with the Cabinet and political groups to gain consensus around a number of early key findings.

Issues for Member Consideration

- 9. The period leading up to the General Election may not be conducive to seeking to engage Members extensively in a Project of this importance and scale. The Council is now moving towards its Annual Meeting in May. It is suggested that some of the outputs set out in the Project Plan might be more easily and

effectively achieved if moved to the period following Annual Council. It will, however, be important to maintain focus on the Project delivery.

10. While officers will continue to work towards delivering these outputs within the original planned timescales, it will be helpful if Members could provide their views on the following potential revisions to the Project Plan. It is considered that the revised timescale set out below would still enable the Project to meet the aims and objectives set out in paragraphs five and six above:
 - a. Joint Scrutiny Task and Finish Inquiry initiated in May 2015
 - b. Desk Research completed in April.
 - c. Project Workshop for Scrutiny Members to be arranged in early June
 - d. Scrutiny Conference (engagement with Cabinet and political groups) to be undertaken in late June 2015.
 - e. Draft key findings circulated late July 2015
 - f. Task and Finish Inquiry report agreed and commended to Cabinet in September 2015.

Way Forward

11. At the meeting, the scrutiny Officer will be available to answer any questions Members may have on this report and Project.
12. Members may also wish to provide their views on the Project, and the proposed timescale changes.

Legal Implications

13. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the

powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

Financial Implications

14. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

RECOMMENDATIONS

The Committee is recommended to:

- I. Consider the contents of the report,
- II. Provide feedback on the proposed methodology set out in the Project Plan set out at page four of **Appendix A**, and
- III. Provide views on the suggested timescale set out in paragraph 13 above.

MARIE ROSENTHAL

County Clerk and Monitoring Officer

30 March 2015

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City of Cardiff Council *Improving Scrutiny* Project: Project Brief, January 2015

Project Purpose

- Cardiff is proud of its scrutiny arrangements and the important part scrutiny plays in Council improvement, and in representing citizens in holding to account the Cabinet for the decisions it makes. However, the Council is going through significant change in many ways, and will look very different in five years' time.
- Effective local governance relies on a cohesive web of accountability, of which internal review is an intrinsic part. The purpose of the Project will be to ensure that scrutiny remains agile and able to play its role as a critical friend, in an environment that will see greater emphasis on partnership, collaboration, commissioning and other alternative models of delivery.

Project Aim

- To equip Cardiff's Scrutiny function to meet the current needs and anticipated future challenges facing the Council's Executive and non-Executive Members.
- To ensure that the Council's scrutiny structure enables Members to provide robust and effective overview and scrutiny that is relevant to the priorities of the organisation's Corporate Plan and operational challenges.
- To seek evidence to support recommendations for Members to agree any potential changes to current governance arrangements, as part of a wider major transformation of the City of Cardiff Council's services and structures.

Project Objectives

- To take forward the learning from Cardiff's participation in the 2013 Wales Audit Office *Improving Scrutiny* Study, especially by using the 15 characteristics in the newly developed "Framework for Effective Scrutiny in Wales" as a mechanism for self-evaluation of the quality of scrutiny in Cardiff, and the planning of future Scrutiny Work Programmes.

- To assess and make recommendations on the structures and arrangements that will be most appropriate to manage the scrutiny of the Council's transformation in coming years. To consult upon politically and organisationally, and take proposals forward for inclusion in the Council's 2016/17 Budget proposals.
- To address recommendations in the Local Government Measure (Wales) 2011, and subsequent recommendations in the Williams Review, to consider opportunities for improvement to current collaborative scrutiny arrangements with partners.

Key Project Themes

- The purpose of Scrutiny as part of a holistic and effective governance framework in Cardiff, and its likely future challenges and priorities. The appropriate balance of priority achieved between holding to account, policy development and review, performance and improvement monitoring, finance and budget scrutiny etc.
- Maximising the impact of Scrutiny in Cardiff, and also to measure that impact so that resources can be most effectively targeted towards areas of highest impact. Setting in place effective and appropriate Scrutiny arrangements to deliver agreed priorities.
- Optimising interfaces between scrutiny and:
 - External regulators, auditors and inspectors to ensure effective Council performance and minimise the burden of external regulation.
 - The local population, so that the public has confidence in local democracy in the city, and sees Scrutiny as an accessible and effective avenue to represent its views and concerns.
 - Cabinet Members, managers and key stakeholders so that everyone is clear about their role in supporting effective governance in Cardiff.
- Optimising arrangements for the scrutiny of partnerships, as public sector collaboration, transformation and commissioning grow ever more complex.
- Appropriate arrangements for maximising Scrutiny Member and officer skills and competency.

Project Key Stakeholders

- Council Scrutiny Committee Chairs and Members;
- Council Leader and Cabinet; Opposition Party Group Leaders; Council Members;
- Chief Executive and senior management of the Council;
- Cardiff Third Sector Council and community and voluntary organisations regularly connecting with Scrutiny;
- Local strategic partners, key stakeholders and stakeholder organisations;
- Professional partners in the world of regulation, audit and inspection, regional and local government in Wales;
- The Centre for Public Scrutiny, WLGA Scrutiny Chairs Network and National Scrutiny Officers' Network; Regional local government partners.

Project Methodology

Desk Research (October 2014 to March 2015)

- Scan the horizon for legislative and policy changes in the wider environment that will influence Scrutiny in Cardiff over the coming 10 years.
- Identify from past reviews and evaluation of scrutiny in Cardiff the key learning points that have been derived, and to test how they can be applied.
- Glean from best practice analysis criteria for measuring the impact of scrutiny.
- Benchmark how effective scrutiny is conducted elsewhere, and how lessons can be applied to Cardiff.

Face to face interviews (October 2014 to March 2015)

- Identify from key Project stakeholders their view on the key project themes identified above.

Structured conversations (March and April 2015)

- Arrange events with Members and officers to Scrutiny Chairs to shape evidence from the desk research and interviews into draft key findings.

Project Report (May 2015)

- Scrutiny Chairs to craft a report with key findings and recommendations for Cabinet to consider, and to enable implementation of agreed future arrangements.

Project Governance

Recognising the connections this Project makes between the organisational and the political, the Project will have a hybrid governance structure:

- It will operate as a joint scrutiny task and finish inquiry comprising the Council's five scrutiny chairs, and report through the Policy Review and Performance Committee.
- It will serve as a PQA Project within the *Improved Governance* strand of the Council's *Programme of Organisational Change*. Paul Keeping (Operational Manager, Scrutiny Services) will be Project Manager, and Marie Rosenthal (County Clerk and Monitoring Officer) will be Senior Responsible Officer. The Project will apply the Council's 'Service Review' methodology to achieve its aims.

The Project will be undertaken in partnership with the Centre for Public Scrutiny, a charity providing expertise and capacity in non-executive governance, as one of nine major case studies featured in a UK wide analysis of local authority transformation.

For further details please contact:

Monitoring Officer and County Clerk:

Marie Rosenthal, ☎ Cardiff 2087 3860. Marie.Rosenthal@cardiff.gov.uk

Operational Manager: Paul Keeping, ☎ Cardiff 2087 2953. p.keeping@cardiff.gov.uk

Improving Scrutiny Project - Project Plan

Timescale	Action	Purpose
Sept 2014	Advisory support from CfPS confirmed	Increase capacity and expertise
Oct 2014	Project scoped and Scrutiny Chairs engaged as Project leads	Provide Project leadership
	Agreement of Project governance arrangement within Org Devt Programme	Provide Project governance
Early Nov 2014	Project Mandate agreed	Provide Project direction
18 Nov 2014	Scrutiny Chairs' Liaison Forum	Develop methodology
	CfPS interviews with: Scrutiny Chairs; Scrutiny officers; Monitoring Officer; Chief Officer, Change and Improvement.	Give initial direction for Project methodology
	Scrutiny chairs discuss Project with Council Leader and Chief Executive	Develop consensus for Project aims
Nov – Dec 2014	Desk Research on Core Cities scrutiny performance monitoring arrangements	Widen evidence base
8 Dec 2014	Project launched at Member Governance Seminar, and Briefed to Council Members and senior managers	Communicate Project aims and Member involvement opportunities
8 Jan 2015	Scrutiny Chairs' Liaison Forum	Develop methodology
26 & 27 Jan 2015	CfPS interviews with key Project stakeholders (including Council Leader, Chief Executive, Cabinet Portfolio Member, Leaders of Liberal Democrat, Conservative and Independent Groups, Scrutiny Councillors who requested interviews, Director of Communities, representatives in WLGA and Welsh Government, Challenge Forum Advisor on Performance Management)	Widen evidence base
Feb 2015	Further interviews with key stakeholders (through the month)	Widen evidence base
	Desk Research into Scrutiny Process and good practice (through the month)	Widen evidence base
	Scrutiny Chairs' Liaison Forum (late Feb)	Develop methodology
March 2015	Scrutiny Committees asked to establish a joint Scrutiny task and finish Inquiry (early March)	Enable Scrutiny Inquiry report to Cabinet
	Project Seminar for Scrutiny Members (early March)	Widen evidence base
	Scrutiny Chairs' Liaison Forum (mid March)	Agree interim findings
	Interim Project findings circulated (mid March)	Prepare for Project Symposium
	Member and Manager Project Symposium (late March)	Seek consensus for key findings
April 2015	Scrutiny Chairs' Liaison Forum (early April)	Agree report, key findings & recommendations
	Draft Scrutiny Inquiry Report circulated (mid April)	Seek final feedback on draft report
May 2015	Final Draft Scrutiny Inquiry Report adopted by Scrutiny Committees and submitted to Cabinet	Formally adopt draft report
Tbc 2015	Cabinet receives and considers Draft Scrutiny Inquiry Report	Make decisions on way forward
Aug 2015	Implementation of agreed recommendations begins	Implement decisions reached by Cabinet

This timescale will enable managers to implement arrangements in time for the start of the 2016/17 financial year.