

Pecyn Dogfennau



Mark James LLM, DPA, DCA
Prif Weithredwr,
Chief Executive,
Neuadd y Sir, Caerfyrddin. SA31 1JP
County Hall, Carmarthen. SA31 1JP

DYDD GWENER 4^{YDD} RHAGFYR 2015

AT: HOLL AELODAU'R PWYLLGOR CRAFFU GOFAL
CYMDEITHASOL AC IECHYD

YR WYF DRWY HYN YN EICH GALW I FYNYCHU CYFARFOD
O'R PWYLLGOR CRAFFU GOFAL CYMDEITHASOL AC IECHYD
A GYNHELIR YN Y SIAMBR, NEUADD Y SIR, CAERFYRDDIN AM
10:00YB AR DDYDD LLUN 14^{EG} RHAGFYR 2015, ER MWYN
CYFLAWNI'R MATERION A AMLINELLIR AR YR AGENDA
ATODEDIG.

Mark James

PRIF WEITHREDWR



AILGYLCHWCH OS GWELWCH YN DDA

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PWYLLGOR CRAFFU GOFAL CYMDEITHASOL AC IECHYD 14 AELOD

GRŴP PLAID CYMRU – 5 AELOD

- | | | |
|----|------------|-----------------------|
| 1. | Cynghorydd | T.T. Defis |
| 2. | Cynghorydd | W.T. Evans |
| 3. | Cynghorydd | D.J.R. Llewellyn |
| 4. | Cynghorydd | G. Thomas (Cadeirydd) |
| 5. | Cynghorydd | J.S. Williams |

GRŴP ANNIBYNNOL – 4 AELOD

- | | | |
|----|------------|---------------------------|
| 1. | Cynghorydd | S.M. Allen (Is-Gadeirydd) |
| 2. | Cynghorydd | I.W. Davies |
| 3. | Cynghorydd | E.G. Thomas |
| 4. | Cynghorydd | H.I. Jones |

GRŴP LLAFUR – 4 AELOD

- | | | |
|----|------------|--------------|
| 1. | Cynghorydd | K. Madge |
| 2. | Cynghorydd | E. Morgan |
| 3. | Cynghorydd | P.M. Edwards |
| 4. | Cynghorydd | J. Williams |

POBL YN GYNTAF (SIR GAERFYRDDIN) – 1 AELOD

- | | | |
|----|------------|-------------|
| 1. | Cynghorydd | S.M. Caiach |
|----|------------|-------------|

AGENDA

1. YMDDIHEURIADAU AM ABSENOLDEB
2. DATGAN BUDDIANNAU PERSONOL
3. DATGAN CHWIPIAID PLAID SYDD WEDI EU GWAHARDD
4. CWESTIYNAU GAN Y CYHOEDD (NID OEDD DIM WEDI DOD I LAW)
5. EITEMAU AR GYFER Y DYFODOL 5 - 6
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Mae'r dudalen hon yn wag yn fwriadol

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

14th DECEMBER 2015

**Forthcoming items for next meeting –
Wednesday 20th January 2016**

Discussion Topic	Background
Welsh language in Social Care Services for Older People	<p>The Welsh Government Strategic Document 'More than Just Words' sets out the importance of the Welsh Language when caring for older people. The Committee considered a position statement during 2014/15 and this item will enable it to monitor how the Council is increasing provision across its social care services.</p> <p>The Committee has been particularly interested in understanding how the Health and Social Care workforce is being up-skilled in relation to the Welsh Language.</p>
Charging for Non-Residential Services	<p>This policy was introduced during 2014/15. The Committee endorsed it as part of the consultation process but requested that an evaluation report in terms of its impact be prepared for the Committee's consideration during 2015/16.</p>
Carmarthenshire Carers Action Plan	<p>The Committee has played an active role in developing policy and monitoring progress in relation to supporting carers. Last year saw the introduction a new Carmarthenshire Carers Strategy. This item will enable the Committee to monitor the effectiveness of this strategy.</p>

Discussion Topic	Background
Dementia Support	<p>As part of the Joint Scrutiny Forum alongside the Community Health Council, Committee members produced a set of recommendations that are now helping to shape the way people living with dementia and their carers are supported. This item will enable the Committee to monitor the progress being made in relation to:</p> <ul style="list-style-type: none"> (a) Improving the skills of the workforce in dementia care and support; (b) Addressing the stigma of dementia through the development of Dementia Friendly Communities; (c) Changing and improving the way services are provided.

**PWYLLGOR CRAFFU GOFAL
CYMDEITHASOL AC IECHYD
14^{eg} O RAGFYR 2015**

**Ymgynghori ynghylch Strategaeth y Gyllideb
Refeniw 2016/2017 tan 2018/19**

Atodiad A – Strategaeth ar gyfer y Gyllideb Gorfforaethol o 2016/17 tan 2018/19

Atodiad A (i) – Crynodeb effeithlonrwydd sy'n ymwneud â'r Gwasanaeth Gofal Cymdeithasol ac Iechyd

Atodiad A (ii) – Twf Gwasgedd sy'n ymwneud â'r Gwasanaeth Gofal Cymdeithasol ac Iechyd

Atodiad B – Y rhannau o'r gyllideb sy'n ymwneud â'r Gwasanaeth Gofal Cymdeithasol ac Iechyd

Atodiad C – Crynhoad o'r Taliadau sy'n ymwneud â'r Gwasanaeth Gofal Cymdeithasol ac Iechyd

Ystyried y materion canlynol a chyflwyno sylwadau arnynt:

- Bod yr aelodau yn ystyried ac yn gwneud sylwadau ar gynlluniau strategaeth y gyllideb
- Bod yr aelodau yn ystyried ac yn gwneud sylwadau ar gynlluniau ar gyfer arbedion effeithlonrwydd yn eu meysydd gwasanaeth hwy, a glustnodir yn Atodiad A(i)
- Hefyd, bod yr aelodau'n cael gwahoddiad i gyflwyno unrhyw gynlluniau eraill ar gyfer arbedion effeithlonrwydd.
- Bod yr aelodau'n edrych yn fanwl ar y Gyllidebau Adrannol
- Bod yr aelodau'n cymeradwyo'r Crynhodau o'r Taliadau
- Bod yr aelodau'n llunio barn am faterion sydd i'w cyflwyno gerbron y Bwrdd Gweithredol i'w hystyried.

Rhesymau:

- Yn ei gyfarfod ar y 16eg o Dachwedd 2015, fe wnaeth y Bwrdd Gweithredol ystyried Strategaeth y Gyllideb Refeniw o 2016/17 tan 2018/19 (Atodiad A) a chymeradwyo'r adroddiad at ddibenion ymgynghori. Yn y cyfarfod caiff y wybodaeth ddiweddaraf ei rhoi ar lafar ynghylch unrhyw newidiadau neu gynlluniau penodol gan y Bwrdd Gweithredol, os bydd hynny'n briodol.

Angen cyfeirio'r mater at y Bwrdd Gweithredol er mwyn gwneud penderfyniad: OES

Aelodau'r Bwrdd Gweithredol sy'n gyfrifol am y Portffolio:

- Cyng. David Jenkins (Adnoddau)
- Cyng. Jane Tremlett (Gofal Cymdeithasol ac Iechyd)

Y Gyfarwyddiaeth: Gwasanaethau Corfforaethol	Swydd:	Rhif Ffôn / Cyfeiriad E-bost:
Enw Pennaeth y Gwasanaeth: Owen Bowen	Pennaeth Dros-Dro Gwasanaethau Cyllidol	01267 224886 obowen@sirgar.gov.uk
Awdur yr adroddiad: Owen Bowen		

EXECUTIVE SUMMARY

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 14th DECEMBER 2015

Revenue Budget Strategy Consultation 2016/17 to 2018/19

The objective of the report is to allow members to consider the corporate budget strategy for the financial years 2016/17 to 2018/19 to consider the service delivery impact and options for the forthcoming years.

The report is set out as follows:

Appendix A

- The attached report is a copy of the Revenue Budget Strategy 2016/17 to 2018/19 that has been presented to the Executive Board. As part of the budget consultation process the report is presented to this Scrutiny Committee for your consideration.
- The report provides members with an initial view of the revenue budget issues for the forthcoming year and also reflects departmental submissions.

Appendix B

Budget extracts for the Social Care & Health service, which incorporates the initial Efficiencies/Service rationalisation proposals already reflected in the budget for consultation.

Appendix C

Charging Digest for the Social Care & Health service. The charges for 2016-17 have yet to be adopted and any change to the proposed charges will impact on the budget/efficiency proposals.

DETAILED REPORT ATTACHED?

YES

IMPLICATIONS

I confirm that other than those implications which have been agreed with the appropriate Directors / Heads of Service and are referred to in detail below, there are no other implications associated with this report.

Signed: Owen Bowen Interim Head of Financial Services

Policy, Crime & Disorder and Equalities	Legal	Finance	ICT	Risk Management Issues	Staffing Implications	Physical Assets
YES	NONE	YES	NONE	NONE	NONE	NONE

1. Policy and Crime & Disorder

The budget is being prepared having regard to the Improvement Plan.

3. Finance

The report provides an initial view of the Budget Strategy for 2016/17, together with indicative figures for the 2017/18 and 2018/19 financial years.

The impact on departmental spending will be dependent upon the provisional and final settlements from Welsh Government, and the resultant final Budget adopted by County Council.

Current projections indicate an increase in the validated budget of £10.834m, before offsetting the potential efficiency savings.

CONSULTATIONS

I confirm that the appropriate consultations have taken in place and the outcomes are as detailed below:

Signed: Owen Bowen Interim Head of Financial Services

1. Local Member(s) – N/A

2. Community / Town Council – N/A

3. Relevant Partners – Consultation with relevant partners will be undertaken and results will be reported during the budget process.

4. Staff Side Representatives and other Organisations – Consultation with other organisations will be undertaken and results will be reported during the budget process.

**Section 100D Local Government Act, 1972 – Access to Information
List of Background Papers used in the preparation of this report:**

THESE ARE DETAILED BELOW:

Title of Document	File Ref No. / Locations that the papers are available for public inspection
2016/17 3 year Revenue Budget	Corporate Services Department, County Hall, Carmarthen

Mae'r dudalen hon yn wag yn fwriadol

REPORT OF DIRECTOR OF CORPORATE SERVICES

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

14th December 2015

REVENUE BUDGET STRATEGY 2016/17 to 2018/19

(Copy of Executive Board report 16/11/15)

HEAD OF SERVICE & DESIGNATION.	DIRECTORATE	TELEPHONE NO.
O Bowen, Interim Head of Financial Services	Corporate Services	01267 224886
AUTHOR & DESIGNATION	DIRECTORATE	TELEPHONE NO
O Bowen, Interim Head of Financial Services	Corporate Services	01267 224886

1. INTRODUCTION

- 1.1.** Executive Board in September 2015 received a report on the Revenue Budget Outlook for 2016/17 to 2018/19 which appraised members of the financial outlook and the proposals for taking forward the budget preparation for the three year period.
- 1.2.** Due to the lateness of the outcome of the Comprehensive Spending review, the current timetable for the announcement of the Provisional and Final Settlements are as follows:
- Comprehensive spending review due 25th Nov 2015.
 - Welsh Government (WG) setting provisional budget 8th December 2015
 - Provisional Local Government Settlement 9th December 2015
 - WG publish final budget 1st March 2016
 - WG Publish Final Local Government Settlement 2nd March 2016
 - WG move Final Welsh Budget 2016-17 for debate 8th March 2016
 - WG Move Final Settlement for Debate 9th March 2016
 - Indicative deadline for Authorities to set Council Tax for 2016/17 financial year: 10th March 2016
- 1.3.** Accordingly therefore, this report provides Members with the current view of the Revenue Budget for 2016/2017 together with indicative

figures for the 2017/2018 and 2018/2019 financial years. The report is based on officers projections of spending need and potential settlement with no forward indicators being provided by WG. It also reflects the current departmental submissions for savings proposals.

- 1.4. Whilst significant work has already been undertaken in preparing the budget, this is only an initial position statement which will be updated over the coming months the budget will be further developed as figures are reviewed, and the settlement becomes known.
- 1.5. The report is broken down into 5 parts:
 - Funding Projections
 - Budget Requirement
 - Impact on the Authority's budget requirement
 - Consultation
 - Conclusion
 - Recommendations

2. PROVISIONAL SETTLEMENT

- 2.1. As outlined in paragraph 1.2 the Welsh Government will not be setting their own provisional budget until 8th December 2015, so it will be the 9th December 2015 before the provisional settlement will be announced. Despite the announcement of the Comprehensive Spending Review, it is understood that is the Welsh Governments intention to provide figures for 1 year only i.e. 2016/17.
- 2.2. In the absence of indicative Aggregate External Funding figures from Welsh Government the base model reflects 3.3% reductions in each of the three years. This is based on the letter received from Welsh Government in June 2014 suggesting that it would be prudent to assume that the current trends in Local Government funding will continue. It remains difficult to predict what the final outcome will be from the current spending review and how WG chose to allocate the funds available to them between Health and Local Government. As a guide each 1% reduction in funding equates to some £2.5m.
- 2.3. For Carmarthenshire a 3.3% reduction in the provisional settlement equates to £8.3m.
- 2.4. During the course of the current National Assembly term, the Council has met the commitment to fund schools at 1% above the level of funding received by WG from the UK government. From 2016-17 onwards, the MTFP assume no service protection, and therefore schools will need to absorb reductions in line with other service areas.

- 2.5. Service specific Grants within the current year's budget stands at £107m and it is assumed that this level will be maintained during the three year period of the model

3. BUDGET REQUIREMENT 2016-2017

3.1. Current Years performance (2015/2016)

3.1.1. As the Authority's core spending requirements remains constant year on year, a review of current year's performance is important in identifying whether there are any underlying problems within the base budget

3.1.2. The current projection for the Revenue Outturn for 2015/16 (based on the August 2015 monitoring) is as follows

Service	Approved Budget £'000	Total Expenditure Forecast £'000	Variance Forecast For Year £'000
Chief Executive	10,600	11,178	578
Education and Children's Services	159,427	160,476	1,049
Corporate Services	22,914	22,799	-115
Communities	90,856	91,500	644
Environment	45,598	45,749	151
Departmental Expenditure	329,395	331,702	2,307
Cont from Dept/Earmarked Reserves		-1,121	-1,121
Capital Charges	-3,535	-4,535	-1,000
Pensions Reserve Adjustment	-5,085	-5,085	0
Levies and Contributions	9,214	9,214	0
Outcome Agreement Grant	-570	-570	0
Transfer to/ from Reserves	-1,198	-1,198	0
Net Expenditure	328,221	328,407	186

The departmental overspends are primarily as a result of delays in the delivery of savings proposals put forward for 2015-16, and a review of the savings proposals that were agreed in February 2015 has identified that some £1.5 m of the original proposals for 2015-16 are at risk of not being delivered/not being delivered in full:

The Education and Children's Services department is facing pressure due in the main to school based EVR and redundancy costs, and whilst the department can meet the bulk of these pressures through a transfer from its departmental reserves in the current year, this will not be available in future years.

The Authority is currently forecasting a variance of £186k at the year-end that will have to be met from General Balances.

In considering next year's budget, the current strategy assumes that departments will actually deliver/make good those savings proposals adopted for 2015/16 by the commencement of the next financial year.

3.2. Validation

3.2.1. Validation reflects the changes in expenditure requirements to deliver the **current level** of services in future years. Primarily this is inflation, but also includes some service specific changes. The key validation factors are as follows:

	<u>2016/17</u> <u>Original</u>	<u>2016/17</u> <u>Proposed</u>	<u>2017/18</u>	<u>2018/19</u>
General inflation	1.8%	0.6%	1.4%	1.8%
Electricity	5.0%	3.0%	3.0%	3.0%
Gas	5.0%	3.0%	3.0%	3.0%
Fuel	5.0%	-12.5%	3.0%	3.0%
Pay Inflation - non teaching	1.5%	1.0%	1.0%	1.0%
Pay Inflation - Teaching	1.5%	1.0%	1.0%	1.0%
Levies	0.0%	0.0%	0.0%	0.0%
Pension Contributions	£291k	£297k	£309k	£312k
Teachers Superannuation	£575k	£575k		
Employers NI Changes	£3,700k	£4,100k		
Auto Enrolment			£1,600k	
Capital Charges	£250k	-	£250k	£250k
Main service Specifics:				
County Elections	£70k	£70k	£230k	-£300k
Adj to pay scales starting salary	£118k	£118k	-	-

3.2.2. Under the Local Authorities (Capital Finance and Accounting)(Wales)(Amendment) Regulations 2010 [the Amendment Regulations] the authority is required to make an annual provision from revenue to contribute towards the reduction in its overall borrowing requirement at a rate that it considers to be prudent and having regard to the guidance issued. The Budget Strategy has been prepared based upon the Regulatory Method for supported borrowing in which the calculation is based on 4% of the opening Capital Financing Requirement and the Asset Life Method for the Unsupported Borrowing e.g. Modernising Education Provision and Fleet replacement.

3.2.3. The most significant specific validations over the three year period remain the changes in the Employers NI rates from April

2016, when defined benefit contracting out will be abolished. The consequence of this is that contracted out employers will stop receiving National Insurance rebate and instead pay the same NI rate as all other employers.

- 3.2.4. There is a clear risk to the Budget Strategy that departments may find it difficult to manage their expenditure within these parameters, especially where the inflationary increases have been applied by service providers. This risk is something that will require close monitoring during the year.
- 3.2.5. In line with the Chancellors announcement relating to Public Sector pay, the Budget as constructed makes provision for an annual pay award of 1% in each of the financial years.
- 3.2.6. Whilst recognising that we meet the national Living Wage requirement in year 1, it should be recognised that the MTFP makes no provision for further increases above the assumed inflation rises for future years.
- 3.2.7. In total, validation adds £7.8m to the current year's budget.

3.3. Cost reduction Programme

- 3.3.1. In anticipation of the unprecedented reductions in this settlement round, significant work in identifying further service efficiencies/rationalisation proposals has been undertaken. Accordingly departments have developed a range of proposals, and these efficiencies are included in **Appendix A** of this report.

3.3.1.1. The efficiency proposals are categorised as follows:

Managerial – Efficiencies that result in no perceivable change to the overall level of service delivery but may in some instances affect quality of service provided

Policy – Efficiency or service rationalisation proposals that will directly affect service delivery.

	2016/17 £m	2017/18 £m	2018/19 £m
Managerial	6,307	3,347	2,357
Existing Policy	554	806	300
New Policy	6,835	7,418	8,302
Total	13,696	11,571	10,959

(Detail at **Appendix A**)

- 3.3.2. The summary sheet at Appendix A sets out the savings targets set for individual departments and the value of savings currently

identified. Work is still on-going within services departments to identify further proposals so that their targets are met in each of the financial years.

- 3.3.3. As in the previous budget round, an exercise is being undertaken to obtain 'expressions of interest' from staff who may be interested in voluntary severance/early retirement as well as other flexible working options. Managers are currently considering the applications received to identify those that can contribute to the budget strategy.

3.4. New Expenditure Pressures

- 3.4.1. New expenditure pressures are the combination of additional cost to meet existing service needs e.g. increased client base/greater service take up and the costs of meeting change in service provision e.g. policy changes.
- 3.4.2. In the setting of the current financial year's budget, a total sum of £4.9m was allocated to services, of which £4.1m was allocated to Social Care.
- 3.4.3. The original budget outlook for 2016-17 and 2017-18 contained a sum of £3m per annum to meet growth pressures, and the same provision for growth is currently reflected in the 2018-19 indicative budget.
- 3.4.4. Initial growth bids of £3.7m have been submitted by departments against this sum of £3m in relation to 2016-17. Detail at Appendix B
- 3.4.5. No prioritisation or allocation of the £3m contained within the budget proposals has been made at this stage. This will be considered at the budget finalisation stage.

3.5. Internal Funding

- 3.5.1. Generally speaking whilst the use of reserves to support annual budgets should not be summarily discounted, it must be treated with caution. Funding on-going expenditure from such funds merely defers and compounds difficult financial problems to the following year. One-off items of expenditure within any budget proposal lend themselves better for such funding support.

3.5.2. In deliberating this point however, members must bear in mind any **inherent risks** that may be built into the budget strategy. These include:

- Final WG budget not being published until 2nd March 2016, and Final Settlement not being moved for debate until 9th March 2016
- 2015 Challenging Efficiency targets
- Future inflation/interest rates
- Current economic climate continuing
- Additional pressure on demand lead Services
- No indicative figures for future year's settlements have been provided by Welsh Government therefore there is the potential for the overestimation of the future settlements.

3.5.3. The following table summarises the main categories of reserves held by the Authority.

	1 st Apr 2015 £'000	31 st Mch 2016 £'000	31 st Mch 2017 £'000	31 st Mch 2018 £'000	31 st Mch 2019 £'000
Schools Reserves	3,940	1,801	1,201	351	0
General Reserves	8,500	8,245	8,245	8,245	8,245
Earmarked Reserves	72,002	52,476	45,301	38,261	40,153

3.5.4. School Reserves

3.5.4.1. Schools have delegated responsibility for the management of their own finances. The level of reserves held by an individual school at any point in time will depend on a number of factors including the level of contingency fund that the school governing body considers appropriate, and the particular plans each school has for expenditure. Officers have yet to be informed of any transfers to/from these reserves by individual schools for future years.

3.5.4.2. Legislation allows schools to carry forward reserves from one financial period to another. The School Funding (Wales) Regulations 2010 requires schools to limit their accumulated reserves at year end to £50,000 for Primary Schools and £100,000 for Secondary and Special Schools or 5% of their budget dependant on what is greater. School Improvement officers are currently working with schools to ensure they comply with the guidance. As at 31st March 2015, 22 schools were in deficit and 23 schools held surplus balances in excess of the £50k/£100k threshold.

3.5.5. General Reserves

3.5.5.1. In the changeable and challenging environment currently facing Local Government the Authority is committed to maintaining a reasonable level of General reserves or Balances. Whilst there is no prescribed minimum level for Balances, Council has previously deemed 3% of net expenditure as being a prudent level, which has been accepted by our Auditors as being reasonable

3.5.5.2. The overall level of balances is taken into consideration each year when the annual budget is set and has on occasions been utilised to augment expenditure/reduce council tax. Whilst the 2016-2017 budget was set on the basis of a transfer of £138k from General Reserves, with the October monitoring forecasting and end of year overspend, there could be draw of £324k.

3.5.5.3. Given the likely draw on this reserve in the current year therefore it is deemed imprudent at

this stage to assume any further support for future years budgets from the current General Reserves.

3.5.5.4. Taking account of these changes the average level of the general reserves is forecasted to be around 2.5% of net expenditure during 2016/17.

3.5.6. Earmarked Reserves

3.5.6.1. The Authority holds earmarked reserves which have been set up to finance the delivery of specific projects, or in protecting the authority against future liabilities or issues. The reserves can be summarised as follows:

Reserve	31 March 2015	31 March 2016	31 March 2017	31 March 2018	31 March 2019
	£'000	£'000	£'000	£'000	£'000
Insurance	9,625	9,425	9,225	9,225	9,225
Capital Funds	28,063	21,386	21,331	16,834	19,187
Development Fund	899	304	440	637	816
IAG/OAG	3,246	1,328	1,328	1,328	1,328
Corporate Retirement Fund	4,158	2,766	971	0	0
Joint Ventures	1,591	1,760	1,940	2,120	2,300
Other	24,420	14,507	10,066	8,117	7,297
TOTAL	72,002	52,476	45,301	38,261	40,153

3.5.6.2.As can be seen from the table above the level of earmarked reserves fluctuates greatly year on year, and whilst the level in each fund is not an exact science it is based on an informed estimate and past experience of the likely call on the authority in future years in line with the intended purpose of each reserve. Great care must therefore be taken when considering utilising such funds for purposes other than those which they were created as this could lead to the authority being faced with substantial unfunded liabilities in the future

3.5.6.3.The budget proposals assume a sum of £200k per annum being transferred from the Insurance Reserve to support the revenue budget in 2016/17 and 2017/18.

3.5.6.4.A further analysis of the reserves held will be undertaken over the coming months with any further proposed utilisation being considered at the budget finalisation stage.

3.5.6.5.Taking account of the proposals within this report, including the use of reserves, the Director of Corporate Services confirms that overall the estimated level of financial reserves (as indicated above) is adequate for the financial year 2016/17, with the General Reserves being at the minimum that could be supported.

4. IMPACT ON THE AUTHORITY'S BUDGET STRATEGY

- 4.1. The table below provides an updated position on the current financial outlook taking account of our projection for the provisional settlement and also other recent validation changes, including the latest pay offer made by the national employers.
- 4.2. As previously referred to in the report, no indicative or provisional settlement figures have been provided by Welsh Government for 2016-17 as yet, and therefore the estimated figures included in the financial model are only based on officers current projections.
- 4.3. Current Financial Outlook (updated for the Provisional Settlement):

	Current MTFP		Financial Model		
	2016/17 £'000	2017/18 £'000	2016/17 £'000	2017/18 £'000	2018/19 £'000
Previous Year's Budget	329,991	324,969	329,991	324,967	321,271
General Inflation	1,831	2,095	665	1,745	2,027
Pay Inflation	2,961	2,868	2,263	2,270	2,246
Other	4617	1,582	-582	-140	0
Growth	3,000	3,000	3,000	3,000	3,000
Teachers Superannuation			575		
Employers NI/Auto Enrolment			4100	1600	
Original & approved PBB Proposals	-18,201	-13,811			
Net Expenditure	324,199	320,703	340,012	333,442	328,544
Revenue Settlement	-244,149	-236,093	-244,149	-236,093	-228,302
Council Tax Receipts	-80,050	-84,610	-80,051	-84,607	-89,421
Shortfall	0	0	-15,812	-12,742	-10,821
Savings Proposals to date			-13,696	-11,571	-10,959
Balance / To be identified			-2,116	-1,171	138

4.4. The total cost reductions now required for 2016/17 is £15.8m and for the 3 year period are estimated at £39.4m.

4.5. Over the three years there is currently a shortfall of £3.1m if all the savings proposals identified are delivered, of which £2.1m relates to 2016/17.

5. CONSULTATION

Budget consultation has been planned for the coming months and a summary of the individual approaches are as follows:

5.1. Members seminars. (November and December 2015)

5.2. The consultation process will commence online from the 18th November 2015.

5.3. The public and commercial ratepayers consultation will be supported by roadshows across the county as follows:

Wednesday 25 November:

11am – 2pm Carmarthen Market outside Clock Tower
4pm – 6pm – Carmarthen Leisure Centre

Friday 4 December

11am – 1pm - Ammanford Market
4pm – 6pm – Tesco, Ammanford

Thursday 10 December

11am – 2pm - St Elli Shopping Centre, Llanelli

3pm – 6pm Llanelli Library

- 5.4. Consultation with Scrutiny Committees during November and December
- 5.5. 'Insight' youth conference in November 2015.
- 5.6. Consultation with the Schools Budget Forum in November 2015
- 5.7. Trade Union Consultation December 2015/January 2016

6. CONCLUSION

- 6.1. Currently there is a shortfall of £3.1m over the three financial years, assuming delivery of all of the £36.2m savings proposals currently submitted.
- 6.2. Further cost reductions need to be identified to deliver a balanced budget in the first two financial years
- 6.3. The current budget proposals assume a Council Tax increase of 5% in each financial year. A 1% movement in the Council Tax rise equates to +/-£760k

7. RECOMMENDATION

- 7.1. Note the contents of the report and approve as a basis for consultation on the three year budget strategy, and specifically seek comments from consultees on the efficiency proposals in Appendice A.
- 7.2. Give consideration as to what additional savings proposlas can be identified to deliver a balanced budget in each of the three financial years

SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE
14th DECEMBER 2015
Revenue Budget Strategy Consultation 2016/17 to 2018/19
(Extract of Revenue Strategy report to Executive Board 16/11/15)

27 November 2015

	Targets issued to Departments				CURRENT PROPOSALS				VARIANCE on Targets			
	2016/17	2017/18	2018/19	Total	2016/17	2017/18	2018/19	Total	2016/17	2017/18	2018/19	Total
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Chief Executive	882	829	266	1,978	863	365	429	1,657	-19	-464	163	-321
Education	1,072	411	1,014	2,497	1,073	420	225	1,718	1	9	-789	-779
Schools Delegated	5,500	6,000	6,780	18,280	5,500	6,000	6,780	18,280	0	0	0	0
Corporate Services	1,161	523	186	1,870	777	401	568	1,746	-384	-122	382	-124
Community Services	5,079	3,213	1,657	9,949	3,444	2,629	2,053	8,126	-1,635	-584	396	-1,823
Environment	2,117	1,766	917	4,801	2,039	1,756	904	4,699	-78	-10	-13	-102
	15,812	12,742	10,821	39,375	13,696	11,571	10,959	36,226	-2,116	-1,171	138	-3,149



Current Proposals																
	MANAGERIAL				EXISTING POLICY PROPOSALS				NEW POLICY PROPOSALS				TOTAL PROPOSALS			
	2016/17	2017/18	2018/19	Total	2016/17	2017/18	2018/19	Total	2016/17	2017/18	2018/19	Total	2016/17	2017/18	2018/19	Total
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Chief Executive	863	365	429	1,657	0	0	0	0	0	0	0	0	863	365	429	1,657
Education	453	130	125	708	250	50	0	300	370	240	100	710	1,073	420	225	1,718
Schools Delegated				0	0	0	0	0	5,500	6,000	6,780	18,280	5,500	6,000	6,780	18,280
Corporate Services	752	401	568	1,721	25	0	0	25	0	0	0	0	777	401	568	1,746
Community Services	2,912	1,859	775	5,546	214	250	300	764	318	520	978	1,816	3,444	2,629	2,053	8,126
Environment	1,327	592	460	2,379	65	506	0	571	647	658	444	1,749	2,039	1,756	904	4,699
	6,307	3,347	2,357	12,011	554	806	300	1,660	6,835	7,418	8,302	22,555	13,696	11,571	10,959	36,226

<u>New strands of savings:</u>	2016/17	2017/18	2018/19	Total
	£000	£000	£000	£000
1. Collaborate to save	45	10	25	80
2. New ways of working to save	7,988	7,613	8,731	24,332
3. Re-structure to save	1,440	832	724	2,996
4. Specification to save	3,860	2,689	968	7,517
5. Invest to save	363	373	357	1,093
6. Transformation, innovation and challenge	0	54	154	208
	13,696	11,571	10,959	36,226

Department	2016-17	2017-18	2018-19	Total	EFFICIENCY DESCRIPTION	Strand of Saving 1 - 6
	Proposed	Proposed	Proposed			
Communities	£000	£000	£000	£000		
Commissioning						
L.A Residential Homes	100	0	0	100	Service review of in house provision	4
Domiciliary care	20	20	10	50	Operational efficiency	4
	120	20	10	150		

Older People Physical Disabilities

Review of Contract Replacement Care Contract for Older People	150	0	0	150	Adjustment to Crossroads contract	4
Private Sector Residential Homes	350	300	0	650	Reduction in placements	4
Extra Care	350	0	0	350	Service review and renegotiation of contract	4
Private Sector Home Care	450	300	0	750	Reduction in care packages	4
Grants to Voluntary Organisations	55	0	0	55	Reduction of grants to voluntary sector (Amman Valley Dementia (£10k), Crossroads (£10k), Hafan Gobaith (£15k), Care & Repair (£14K) and Llanelli Assoc for the blind (£6k))	4
Careline	0	30	0	30	Increased income	2
Divisional Supplies & Services	40	93	122	255	No inflationary uplift	4
Management & Support	75	40	0	115	Workforce modernisation and service redesign	3
	1,470	763	122	2,355		

Learning Disabilities

LA Day services & Employment Training	40	0	0	40	Management restructure	3
LA Day services & Employment Training	40	0	0	40	Reconfiguration of craft centre	1
Private Sector Residential Homes	500	500	0	1000	£500k each year from Accommodation strategy	4
Grants to Voluntary Organisations	123	0	0	123	Reduction of grants to voluntary sector (MIND (£27k), Mencap (£65k), Llanelli & district Gateway Club (£23k), Links (£8k))	4
Divisional non pay budgets	159	360	470	989	No inflationary uplift	4
	862	860	470	2,192		

Support Costs

Back Office realignment	50	0	0	50	Realignments	3
Support Costs	98	71	69	238	Rationalisation of functions	3
	148	71	69	288		

Total Social Care & Health Service	2600	1714	671	4985		
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Department	2016-17 Proposed	2017-18 Proposed	2018-19 Proposed	Total		Strand of Saving
Communities	£000	£000	£000	£000	EFFICIENCY DESCRIPTION	1 - 6
L.A Residential Homes for Older People	200	0	0	200	Full year saving from closure of Glanmarlais/Tegfan and opening an extra care facility in the Ammanford area	2

Efficiency Proposals

NEW POLICY PROPOSALS

Department	2016-17 Proposed	2017-18 Proposed	2018-19 Proposed	Total		Strand of Saving
Communities	£000	£000	£000	£000	EFFICIENCY DESCRIPTION	1 - 6
Meals on Wheels	57	0	0	57	Increase meals cost by £1.00 from £3.70 to £4.70	2
L.A Residential Homes for Older People	0	0	350	350	Implementation of alternative service model either Externalising the service or developing a Local Authority Trading Company model	2
Domiciliary care	0	500	500	1000	Implementation of alternative service model either Externalising the service or developing a Local Authority Trading Company model	2
Total Social Care & Health Service	57	500	850	1,407		

Demographic, Legislative or Continuing Pressures				
	2016-2017 £'000	2017-2018 £'000	2018-2019 £'000	Description
<u>Chief Executive</u>	235	35	0	
<u>Communities</u>				
Full year effect of proposed increase in Residential Care Home fees	711			
Demand pressures – existing commitments	500			
Re-instatement of budget for Day services - No council decision	500			
Living Wage - Impact on charges from private sector	449			£449k minimum scenario - worst case £2.560m
	2,160	0	0	
<u>Environment</u>	1,324	291	669	
Total	3,719	326	669	

Mae'r dudalen hon yn wag yn fwriadol

SOCIAL CARE & HEALTH SCRUTINY - SOCIAL CARE (COMMUNITIES DEPARTMENT EXTRACT)

2015/16			Statutory S/NS/Bot F	2016/17			2017/18			2018/19			
Expenditure	Income	Net		Expenditure	Income	Net	Expenditure	Income	Net	Expenditure	Income	Net	
£'000	£'000	£'000		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	
<u>SOCIAL CARE</u>													
<u>Older People Services</u>													
3,200	-47	3,153	Commissioning	S	3,220	-47	3,173	3,255	-47	3,208	3,290	-48	3,242
9,874	-4,340	5,534	L.A Residential Homes	S	9,726	-4,367	5,359	9,843	-4,430	5,413	9,604	-4,507	5,097
16,785	-9,341	7,444	Private Sector Residential Homes	S	16,681	-9,145	7,536	16,407	-9,071	7,336	16,701	-9,235	7,466
24	0	24	Private Sector Day Care	S	24	0	24	24	0	24	25	0	25
2,156	0	2,156	Extra Care	S	1,803	0	1,803	1,798	0	1,798	1,791	0	1,791
6,269	-291	5,978	L.A Home Care Services	S	6,105	-291	5,814	5,649	-291	5,358	5,202	-291	4,911
338	-211	127	Meals On Wheels	S	283	-212	71	286	-215	71	291	-219	72
679	0	679	Direct Payments	S	679	0	679	678	0	678	678	0	678
400	0	400	Grants to Voluntary Organisations	S	193	0	193	187	0	187	180	0	180
10,925	-1,991	8,934	Private Sector Home Care	S	10,537	-2,003	8,534	10,378	-2,031	8,347	10,562	-2,068	8,494
0	0	0	Day Care (Grant Schemes)	S	0	0	0	0	0	0	0	0	0
1,225	-1,069	156	Telecare	S	1,235	-1,075	160	1,248	-1,090	158	1,262	-1,110	152
2,121	-800	1,321	Enablement	S	2,160	-800	1,360	2,185	-800	1,385	2,212	-800	1,412
799	-93	706	Day Centres Clubs	S	808	-94	714	816	-95	721	826	-97	729
1,290	-248	1,042	Management and Support	S	1,222	-249	973	1,190	-252	938	1,198	-255	943
56,085	-18,431	37,654			54,676	-18,283	36,393	53,944	-18,322	35,622	53,822	-18,630	35,192
<u>Physical/Sensory Disabled</u>													
926	-95	831	Occ Therapy Services	S	737	-95	642	746	-96	650	755	-97	658
442	-61	381	Private Sector Residential Homes	S	444	-61	383	450	-62	388	458	-63	395
1,440	-228	1,212	Group Homes	S	1,440	-230	1,210	1,442	-233	1,209	1,445	-237	1,208
101	0	101	Private Sector Day Care	S	101	0	101	101	0	101	101	0	101
464	0	464	Private Home Care	S	467	0	467	474	0	474	482	0	482
759	-397	362	Aids + Equipment	S	764	-399	365	767	-405	362	771	-412	359
113	0	113	Grants to Voluntary Organisations	S	113	0	113	112	0	112	112	0	112
1,823	0	1,823	Direct Payments	S	1,822	0	1,822	1,822	0	1,822	1,821	0	1,821
25	0	25	Hearing/Visually Impaired	S	25	0	25	25	0	25	26	0	26
8	0	8	Manual Handling	S	8	0	8	8	0	8	8	0	8
6,101	-781	5,320			5,921	-785	5,136	5,947	-796	5,151	5,979	-809	5,170
62,186	-19,212	42,974	Social Care - Carried Forward		60,597	-19,068	41,529	59,891	-19,118	40,773	59,801	-19,439	40,362

SOCIAL CARE & HEALTH SCRUTINY - SOCIAL CARE (COMMUNITIES DEPARTMENT EXTRACT)

2015/16			Statutory S/NS/Bot F	2016/17			2017/18			2018/19		
Expenditure	Income	Net		Expenditure	Income	Net	Expenditure	Income	Net	Expenditure	Income	Net
£'000	£'000	£'000		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
62,186	-19,212	42,974		60,597	-19,068	41,529	59,891	-19,118	40,773	59,801	-19,439	40,362
SOCIAL CARE - Brought Forward												
<u>Supported Employment</u>												
0	0	0	S	0	0	0	0	0	0	0	0	0
2,647	-882	1,765	S	2,596	-884	1,712	2,619	-889	1,730	2,644	-895	1,749
2,647	-882	1,765		2,596	-884	1,712	2,619	-889	1,730	2,644	-895	1,749
<u>Learning Disabilities</u>												
924	0	924	S	930	0	930	941	0	941	952	0	952
2,408	-196	2,212	S	2,444	-197	2,247	2,473	-200	2,273	2,505	-203	2,302
9,486	-2,708	6,778	S	8,986	-2,724	6,262	8,488	-2,762	5,726	8,489	-2,812	5,677
1,085	0	1,085	S	1,054	0	1,054	981	0	981	885	0	885
6,464	-1,013	5,451	S	6,495	-1,019	5,476	6,568	-1,032	5,536	6,663	-1,050	5,613
1,007	-812	195	S	1,024	-812	212	1,035	-812	223	1,046	-812	234
140	0	140	S	141	0	141	143	0	143	146	0	146
2,586	-164	2,422	S	2,587	-165	2,422	2,588	-167	2,421	2,590	-170	2,420
240	0	240	S	117	0	117	115	0	115	113	0	113
2,801	-2,130	671	S	2,817	-2,139	678	2,850	-2,160	690	2,890	-2,187	703
551	0	551	S	555	0	555	561	0	561	567	0	567
942	-28	914	S	945	-28	917	952	-28	924	960	-28	932
28,634	-7,051	21,583		28,095	-7,084	21,011	27,695	-7,161	20,534	27,806	-7,262	20,544
<u>Mental Health</u>												
879	-69	810	S	885	-69	816	895	-70	825	905	-72	833
5,757	-2,534	3,223	S	5,757	-2,550	3,207	5,758	-2,585	3,173	5,756	-2,632	3,124
301	-83	218	S	301	-83	218	301	-84	217	302	-86	216
136	0	136	S	136	0	136	136	0	136	135	0	135
666	-27	639	S	667	-27	640	670	-27	643	674	-28	646
234	-10	224	S	237	-10	227	239	-10	229	242	-10	232
88	0	88	S	88	0	88	90	0	90	91	0	91
0	0	0	S	0	0	0	0	0	0	0	0	0
0	0	0	S	0	0	0	0	0	0	0	0	0
356	-142	214	S	357	-142	215	360	-143	217	362	-143	219
8,417	-2,865	5,552		8,428	-2,881	5,547	8,449	-2,919	5,530	8,467	-2,971	5,496
101,884	-30,010	71,874		99,716	-29,917	69,799	98,654	-30,087	68,567	98,718	-30,567	68,151
Social Care - Carried Forward												

SOCIAL CARE & HEALTH SCRUTINY - SOCIAL CARE (COMMUNITIES DEPARTMENT EXTRACT)

2015/16			Statutory S/NS/Bot F	2016/17			2017/18			2018/19		
Expenditure	Income	Net		Expenditure	Income	Net	Expenditure	Income	Net	Expenditure	Income	Net
£'000	£'000	£'000		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
101,884	-30,010	71,874		99,716	-29,917	69,799	98,654	-30,087	68,567	98,718	-30,567	68,151
				SOCIAL CARE - Brought Forward								
				Support Costs								
1,198	-159	1,039	S	1,207	-160	1,047	1,218	-160	1,058	1,231	-161	1,070
1,548	-1,563	-15	S	1,529	-1,571	-42	1,551	-1,591	-40	1,576	-1,618	-42
54	0	54	S	54	0	54	54	0	54	54	0	54
85	-8	77	S	85	-8	77	87	-8	79	88	-8	80
137	0	137	S	138	0	138	139	0	139	139	0	139
2,469	-9	2,460	S	2,334	-9	2,325	2,283	-9	2,274	2,235	-9	2,226
5,491	-1,739	3,752		5,347	-1,748	3,599	5,332	-1,768	3,564	5,323	-1,796	3,527
0		0		-1,645		-1,645	-2,290		-2,290	-1,927		-1,927
107,375	-31,749	75,626		103,418	-31,665	71,753	101,696	-31,855	69,841	102,114	-32,363	69,751
				SOCIAL CARE TOTAL								

Mae'r dudalen hon yn wag yn fwriadol

APPENDIX C

CHARGING DIGEST - Social Services

2014/15 Actual £	2015/16 Budget £	2016/17 Budget £	Business Unit	Service Provided	2015/16 Charge Levied £	2016/17 Proposed Charge £	Comments
2,352	2,750	1,505		Laundry Cost per person to max 1 load	2.25	2.30	With effect from: *4th or 11th April 2016
352,563	426,755	405,635		Community meals incl day care Cost per meal	3.70	4.70	*4th or 11th April 2016
				Transport Day Care Transport Charge (per return journey)	FREE	FREE	N/A
182,549	182,549	183,644		**Respite Care Charge to Clients Adults with learning difficulties (per wk) All other adults <u>except</u> those receiving Higher Rate Attendance Allowance / Higher Rate Disability Living Allowance (per wk) All other adults receiving Higher Rate Attendance Allowance / Higher Rate Disability Living Allowance (per wk)	112.99 138.10 188.36	113.66 138.93 189.49	*4th or 11th April 2016 *4th or 11th April 2016 *4th or 11th April 2016
1,522,003	1,771,402	1,706,580		Home Care Charges Max charge (per wk) Home Care Charge (per hr) Day Care - all adults (per session) Employment Services & Day Opportunities Supported Employment Education Support (per hour) Supported Living (per hour) Adult Placement Long Term Placement (per night) Adult Placement Short/Short Breaks Adult Placement Day Care/Sessional Replacement Care Community Support	60.00 10.25 10.00 FREE FREE 10.25 10.25 10.00 10.00 2.00 10.25 10.25	Awaiting announcement from Welsh Government 10.30 10.05 FREE FREE 10.30 10.30 10.05 10.05 2.05 10.30 10.30	*4th or 11th April 2016 *4th or 11th April 2016 *4th or 11th April 2016 N/A N/A *4th or 11th April 2016 *4th or 11th April 2016 *4th or 11th April 2016 *4th or 11th April 2016 *4th or 11th April 2016 *4th or 11th April 2016 *4th or 11th April 2016
				Telecare (per week)	2.59	3.00	*4th or 11th April 2016

*Please be aware that the pension uplift rate and the date of implementation for 2016/17 hasn't yet been received from the DWP, and therefore the rate of inflation used to calculate the Respite care charge is in line with the councils rate of inflation of 0.6%.

**Respite care charges to clients may need to be reviewed when the charging guidelines for the new Social Services & Wellbeing (Wales) Act 2014 are finalised.

Mae'r dudalen hon yn wag yn fwriadol

**PWYLLGOR CRAFFU GOFAL
CYMDEITHASOL AC IECHYD
14^{eg} O RAGFYR 2015**

**Adroddiad Hanner Blwyddyn ar Reoli Perfformiad
– 1af o Ebrill hyd at 30ain o Fedi 2015**

Ystyried y materion canlynol a chyflwyno sylwadau arnynt:

Bod y Pwyllgor yn craffu ar y sefyllfa hanner blwyddyn mewn perthynas â monitro perfformiad, neu'r wybodaeth ddiweddaraf sydd ar gael, ar gyfer blwyddyn ariannol 2015/16, ac yn benodol, ar faterion lle gall aelodau a swyddogion geisio gwella. Mae'r adroddiad yn cynnwys:

- Golwg ar Berfformiad gan y Penaethiaid Gwasanaeth
- Y ddynesiad at Fesur Perfformiad – Gwasanaethau Pobl Hŷn ac Anabledd Corfforol a Gwasanaethau Iechyd Meddwl ac Anabledd Dysgu
- Monitro'r Cynllun Gwella – Dangosyddion Perfformiad a Gweithredoedd

Rhesymau:

- Sicrhau bod meysydd sy'n peri pryder yn cael eu nodi a bod camau perthnasol yn cael eu cymryd.
- Er mwyn i'r aelodau allu gweithredu eu swyddogaeth craffu mewn perthynas â monitro perfformiad.
- Yn ei gyfarfod ar y 19eg o Dachwedd 2015, penderfynodd y Pwyllgor drafod yr eitem yma yn ei gyfarfod nesaf.

**Angen cyfeirio'r mater at y Bwrdd Gweithredol er mwyn gwneud penderfyniad:
NAC OES**

Aelod y Bwrdd Gweithredol sy'n gyfrifol am y Portffolio:
Cyng. Jane Tremlett (Gofal Cymdeithasol ac Iechyd)

Y Gyfarwyddiaeth: Cymunedau	Swyddi:	Rhifau Ffôn / Cyfeiriadau E-Bost:
Enw Penaethiaid y Gwasanaethau: Rhian Dawson	Pennaeth y Gwasanaethau Integredig	01267 228900 rhian.dawson@wales.nhs.uk
Anthony Maynard	Pennaeth Dros-Dro y Gwasanaethau Iechyd Meddwl ac Anabled Dysgu	01267 228849 amaynard@sirgar.gov.uk
Awdur yr Adroddiad: Lyn Walters	Rheolwr Cymorth Busnes (Gwasanaethau i Oedolion)	01267 228768 dlwalters@sirgar.gov.uk

EXECUTIVE SUMMARY

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 14th DECEMBER 2015

Half-Yearly Performance Management Report – 1st April to 30th September 2015

The attached report sets out the Social Care & Health Services performance for the first half of the 2015/16 financial year. Members will be aware that the Communities Department has developed a new performance framework and the attached report sets out the Department's position and progress in managing and improving performance.

In order to evaluate performance, the Department has developed a number of local measures. It is proposed to only report on areas which are challenging the Department's resources and/or areas where the Department is planning to focus resources to effect change in the future.

The content of the report may therefore change from meeting to meeting and may include items and service areas which are not part of this first report. This will enable members to scrutinise the department's priority areas whilst at the same time, make the volume of data which is considered at the meeting more manageable and timely.

The attached report is structured in the following way:

1. Heads of Service Overview of Performance (Report A)
2. The Approach to Measuring Performance (Report B)
 - 2.1 Older Persons and Physically Disabled (OPPD)
 - Supporting Independence
 - 2.2 Learning Disabilities and Mental Health (MHL D)
 - Supporting Independence
 - Keeping Safe
3. Improvement Plan Monitoring – Actions & Performance Measures (Report C)

DETAILED REPORT ATTACHED?

YES

IMPLICATIONS

We confirm that other than those implications which have been agreed with the appropriate Directors / Heads of Service and are referred to in detail below, there are no other implications associated with this report.

Signed: Rhian Dawson Head of Integrated Services

Anthony Maynard Interim Head of Mental Health and Learning Disability Services

Policy, Crime & Disorder and Equalities	Legal	Finance	ICT	Risk Management Issues	Staffing Implications	Physical Assets
YES	YES	YES	NONE	YES	NONE	NONE

1. Policy, Crime & Disorder and Equalities – Performance Indicators are set to monitor the performance of services and targets set. If the Authority is to deliver its promises to citizens and stakeholders, then indicators underachieving need to be addressed.

2. Legal – Performance Indicators are set to monitor the performance of services and targets set. If the Authority is to deliver its promises to citizens and stakeholders, then indicators underachieving need to be addressed.

3. Finance – A significant sum of money is linked to the Outcome Agreement Grant. Receiving this funding in full is dependent on meeting the agreed Actions and Targets included in the Agreement.

5. Risk Management Issues – This report refers to actions and measures in the 2014/15 Annual Report and 2015/16 Improvement Plan relevant to Community Scrutiny, potential risks addressed are:

- obtaining the £1.9m linked to the Outcome Agreement Grant
- addressing any regulatory report recommendations
- comments on not meeting our own goals – actions and measures
- improvement and comparative data for national measures

CONSULTATIONS

We confirm that the appropriate consultations have taken in place and the outcomes are as detailed below:

Signed: Rhian Dawson Head of Integrated Services
 Anthony Maynard Interim Head of Mental Health and Learning Disability Services

1. Local Member(s) – N/A
2. Community / Town Councils – N/A
3. Relevant Partners – N/A
4. Staff Side Representatives and other Organisations – All departments have been consulted and have had the opportunity to provide comments on their performance and progress.

Section 100D Local Government Act, 1972 – Access to Information List of Background Papers used in the preparation of this report:

THESE ARE DETAILED BELOW:

Title of Document	File Ref No. / Locations that the papers are available for public inspection
Carmarthenshire Integrated Community Strategy 2011-16	www.thecarmarthenshirepartnership.org.uk
Corporate Strategy 2015-20	http://www.carmarthenshire.gov.wales/media/998105/corporate-strategy.pdf
CCC Annual Report 2014/15 & Improvement Plan 2015/16	http://www.carmarthenshire.gov.wales/media/846036/Full_ARIP_Report_15-16.pdf
Performance Measurement Records	Performance Management Unit, Regeneration & Policy Division, County Hall
Compliments & Complaints Records	Personal information not available for public inspection
Budget Monitoring Reports	Corporate Services Department, County Hall
Performance Management Framework (Social Care & Health Scrutiny Committee – 16th September 2015)	Cymraeg http://democratiaeth.sirgar.llyw.cymru/ieListDocuments.aspx?CId=169&MId=189&Ver=4 English http://democracy.carmarthenshire.gov.wales/ieListDocuments.aspx?CId=169&MId=189&Ver=4
Social Care & Health Scrutiny Committee (19th November 2015)	http://democracy.carmarthenshire.gov.wales/ieListDocuments.aspx?CId=169&MId=270&Ver=4

Mae'r dudalen hon yn wag yn fwriadol

REPORT A

HEAD OF SERVICE OVERVIEW – HALF YEAR 2015/16

RHIAN DAWSON – INTERIM HEAD OF INTEGRATED SERVICES

More than a third of the population of Carmarthenshire is aged over 65. There are 18,500 people who are over the age of 75 and this number is predicted to grow by 18% by 2020. This is significant because people in this age group are more likely to require Health and Social Care services. Managing this increase in demand at a time of significant reductions in funding is going to be challenging. The policy and practice change in the last 5 years to supporting to people to maintain their health and independence will need to be strengthened in order for the needs of the population to be met and to ensure compliance with the Social Services and Wellbeing (Wales) Act and the Future Generations (Wales) Act. In line with this we have developed 'Carmarthenshire's Vision for Sustainable Services for Older People for the Next Decade: Promoting Independence, Keeping Safe and Improving Health and Wellbeing'. This strategy highlights the challenges we face with the current and future demographic position and sets out a plan for delivering more sustainable services over the next ten years. Specifically, it highlights our approach to care provision over three offer areas

- 'Help to Help Yourself' – Encompassing universal services for the whole community that promotes and / or improves health and wellbeing, preventative services to prevent or delay the need for formal services and support for communities to build their capacity to meet population need. Crucial to this will be the need to ensure a robust Information, Advice and Assessment service
- 'Help When you Need It' – Short targeted intervention to promote or regain independence
- 'Ongoing Support if you Need it' – Self directed, highly individualised support to meet assessed needs which are complex and likely to be long term in nature

This half year summary report will reflect on recent service developments using these three areas as a framework for presentation

Help to Help Yourself

In line with the Welsh Government's Primary Care Plan for Wales (WG, 2014), each Cluster (Locality) in Carmarthenshire have utilised available funding to support service development in the specified areas of:

- Prevention early intervention and improving health, not just treatment
- Active involvement of the public, patients and their carers in decisions about their care and well being
- Prudent Healthcare
- Planning services at a community level of 25, 000 to 100, 000 people

Examples of development in this area include, a therapeutic exercise programme supported by our leisure team, GPs and the 'Education for Patients Programme (EPP)' to support individuals with respiratory disease. Based in Llanelli, this programme has been positively evaluated with demonstrable improvements in health outcomes for participants. Learning from this programme will be shared across the County in order to implement in other areas. Last year, Public Health Wales

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trained social care staff in health promotion techniques which would better equip them to have conversations with people who smoke, drink excessively or are obese to motivate them to seek help to address these problems. Evaluation from this initiative has allowed us to develop this further through informing practice. Lifestyle advocates are now identified to support health promotion and associated behaviour change in each GP practice across Carmarthenshire and these have been supported through the Cluster plans and associated funding.

Hywel Dda University Health Board's Foundations 4 Change programme provides an assurance framework for partners to demonstrate the impact of services and initiatives on the wellbeing of the population. Over the last couple of years, social care has been represented by the integrated managers from the Older Persons division. This year this will be strengthened through the inclusion of officers from the Local Authority's Housing, Public Protection and Leisure teams. Foundations 4 Change will be focusing on improved outcomes for our population in the following areas:

- Reducing Health Inequalities
- Reducing Misuse of Substances
- Obesity
- Dementia
- Frailty (including reduction in falls in older adults)

Carmarthenshire's single point of access to services 'Careline' is currently being redesigned to ensure that it is fit for service, safe and able to provide information, advice and assistance when required at the first point of contact. Careline provides a lifeline and Telecare monitoring service for approximately 30,000 people across South West Wales as well as providing a referral receiving service and information provision service to the people of Carmarthenshire. This service is being enhanced to ensure safe response times and to support staff competency in providing a consistent approach to services.

Help when you need it

Enabling older people and adults with physical disability / sensory impairment to live independently depends on Health and Local Authority services, third sector organisations and, for many, their families, friends and neighbours. Older people assist each other and it should not be underestimated how much mutual support people of advanced age give each other. The majority of older people do not have any contact with Social Care services. Strengthening communities, improving the physical environment to be 'age friendly' and encouraging people to access the range of community opportunities available will support older people. The Welsh Government collects performance information on how many older people are supported to live in the community. Carmarthenshire's performance continues to decline on this measure over the past few years. This is a success, not a failure, as it shows that older people are now being assisted in different ways. Building community resilience is a crucial component to achieving this and a strategic paper outlining our approach to supporting this is currently being progressed. Within recent years, each Locality's Community Resource Team has also benefitted from a 'Third Sector Broker'. These roles were funded by a fixed term European grant and were responsible for working with individuals and communities to identify their 'felt' and 'expressed' needs. The Brokers would also liaise with Carmarthenshire Association of Voluntary Services, Community Groups and other Third Sector provision to broker provision and meet identified gaps in existing service provision to support the identified needs. Following positive evaluation and through the Welsh Government Intermediate Care Fund, it has been possible to ensure that these roles are continued substantively within each CRT and will be an asset to ensuring implementation of the Social Services and Wellbeing (Wales) Act specifically in relation to building community resilience and development of social enterprises.

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The Community Resource Teams (CRTs) strive to enable people to make informed decisions and to empower and support them to do what matters to them. The CRTs based in each locality of the County continue to focus on delivering person centred assessment and care provision to support the promotion and maintenance of individuals' independence. Their work has been enhanced through alignment of the multidisciplinary teams with GP practices and these close working relationships continue to ensure we deliver an optimal service avoiding hospital admissions where appropriate.

Supporting 'care closer to home' is a key objective for health and social care providers and we continue to identify opportunities to grow and sustain service provision within local communities. One example of this includes the GP led Dementia Review clinic in Llandybie. Prior to the establishment of this clinic, patients were reviewed in a hospital environment. This service is complimented by a 'one stop shop' which provides support and advice to patients' carers and families. It is anticipated that this model will be replicated in other areas of the County. Strength and balance exercise programmes are delivered in community venues across Carmarthenshire. These programmes provide an opportunity to sustain improved outcomes following physiotherapy led rehabilitation as well as reducing the risk of falls in older adults. Strength and balance programmes are also delivered in the individual's home as an integral part of our reablement service.

The outcomes of our reablement service are generally positive in terms of supporting people to regain their independence, with around 45% of people being discharged with no long-term service. We are currently reviewing our reablement service and it is anticipated through realignment of all short term assessment and intervention provision that we will be able to improve our performance in this area. The realignment will specifically review and enhance how our reablement service works in partnership with the Health Board's Acute Response Team and Continuing Care Team, it will also ensure that we are maximising use of our Rapid Response domiciliary care team.

Where individuals have required a hospital admission, our Transfer of Care and Advice and Liaison Service (TOCALs) has been instrumental in reducing length of stay by up to two days. Our Delayed Transfer of Care (DToC) rate continues to improve and TOCALs provides an opportunity to further progress performance in this area.

Ongoing Support if you Need it

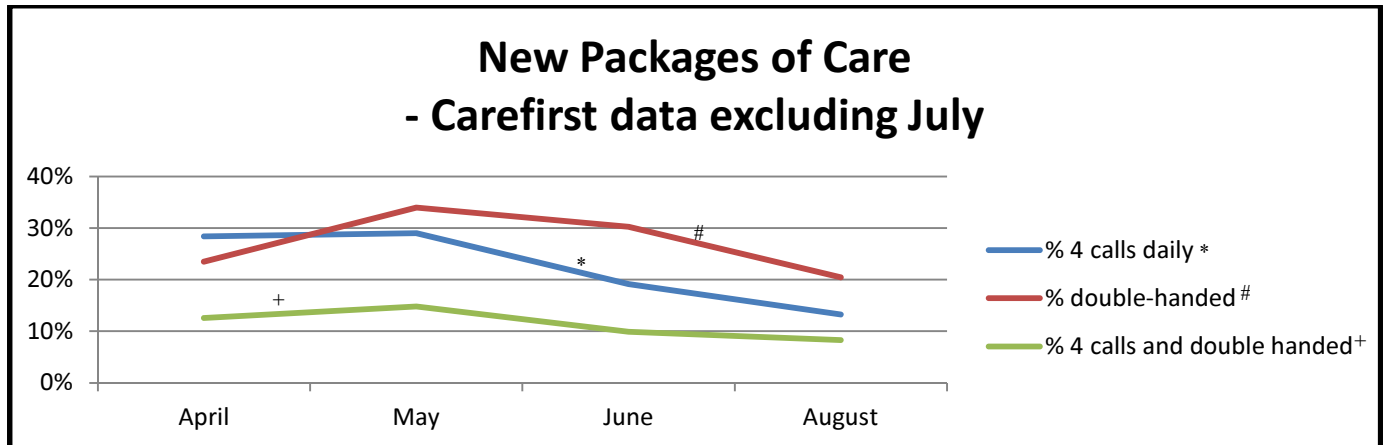
Most people want to stay in their own homes where they can exercise choice and control. The increase in the use of domiciliary care has been positive. Historically, however, due to our rural geography and associated challenges with recruitment and retention, we have found it difficult to consistently meet demand particularly in our most rural areas where services have not been available. In July this year we introduced our new Domiciliary Care Framework. Early indications have suggested that this is having a positive impact on care availability even in areas of the County where we have previously struggled to provide care. It is hoped that this improvement will continue and will serve to enhance performance in other areas including DToC and reablement.

A review of our domiciliary care commissioning identified a high number of care packages providing four calls a day and an increased number of care packages requiring care being delivered by two carers. On review, cases were identified where the care provision could be reduced to three calls a day without compromising the welfare of the individual. Indeed evidence suggests that providing the minimum amount of care provision to meet an individual's needs can have a significant positive impact on the wellbeing of an individual. A commitment has since been made to improve outcomes for individuals by introducing a single carer strategy and limiting the number of carer visits to only what is necessary at the time of assessment. Clinical reasoning by the multi disciplinary team will ensure that individuals receive the appropriate level of care provision. A senior occupational

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therapist has been appointed to support this care model in order to ensure that welfare and wellbeing of individuals is not compromised.

The division has embraced this change and staff are committed to improve the client outcomes and care experience. Early indications suggest that the trend for commissioned care packages providing four care visits per day is decreasing.



There has been a significant reduction over the past few years in the numbers of people the Council supports in residential care. This decline is slowing because of the higher levels of need in the older population. Recently there has been a sudden decrease in the number of individuals being supported in residential care. This has been due to a high number of decommissions relating to a number of deaths over the winter period. Much of the residential care that is commissioned is provided by the independent sector. The team of contract monitoring officers works with care providers, CSSIW and care management staff to ensure that processes are in place to deliver good care and also to identify and rectify problems if there are any. The construction of extra care housing in Carmarthen on the site of the Argel Care Home is due to be completed in October with the first tenants moving in at the end of the month. Building has also progressed at pace on the extra care housing in Ammanford - 'Ty Dyffryn'. Collaborative working with health has funded two 'assessment beds' and it is hoped that these facilities will be able to support health promoting 'clinics' that are traditionally delivered in hospital or GP practices.

Following a judgement by the Supreme Court, the requirement to assess people who live in care homes and lack Mental Capacity under the Deprivation of Liberty Safeguards has widened, this has presented a challenge to our Social Worker workforce due to increased workload of staff but it has also highlighted the need to protect the Human Rights of people in care homes.

Conclusion

Our financial position has necessitated the critical review of multidisciplinary practice and all services that are provided for older people and younger physically disabled people. A performance management framework developed by the department through a series of consultation events and workshops allows us to critically evaluate and monitor progress against key national and local performance indicators. Measuring performance in this way enables us to identify good practice and identify areas which require focused attention. Whilst the most important focus is to improve outcomes for service users, performance management enables budget holders to capture activity and forecast its impact on the current and projected budget enabling us to plan and modernise the services accordingly. Modernisation and associated improvements have commenced in some areas and which are demonstrating early indications of improved outcomes at individual and

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organisational levels. Performance management also allows us to provide feedback to individuals and teams, which, in turn, creates a positive culture and work environment that thrives on achievements throughout the department. A robust appraisal and supervision has been introduced to the division.

It is important not to underestimate the scale of the challenge ahead. This will require large scale and whole system review of service provision and which will require difficult decisions to be made. We will also need to consider the implications of the Social Services and Wellbeing (Wales) Act and the Future Generations (Wales) Act. Continued collaborative working with our departmental colleagues in the Local Authority and integration opportunities with our partners in health will allow us to identify and embrace opportunities that improve the wellbeing of individuals while maximising the use of resources during this time of austerity.

ANTHONY MAYNARD – INTERIM HEAD OF MENTAL HEALTH & LEARNING DISABILITY SERVICES

Reflecting on my first 12 months as Interim Head of Service, I am encouraged by the progress made across the Division in key areas which will better enable us to meet the challenges ahead. The expectation placed on us by the Social Services and Wellbeing Act to increase the involvement of individuals in how support is commissioned and delivered, in the current climate of fiscal austerity is certainly a challenge, but at the same time gives us the opportunity to review and improve on the way that we work.

The following gives a brief update across the various areas of work within the Division, progress to date and our plans for the next 6 months:

Community Services - the restructure of the services carried last year has bedded in and is now delivering opportunities to enable us implement the progression model encapsulating our objectives of promoting independence and providing *just enough* support. These new initiatives and the changing shape of the service were subject to a full consultation with all stakeholders, and we are now seeing a steady growth in the use of our day opportunity services. This person-centred approach continues to drive service delivery, recognising that everyone regardless of their skills and ability should have the opportunity to reach their full potential. Below are some examples of progress made in this service area.

- We have successfully managed a seamless transition from the ILF to the WILF with 2 payments made and no service disruption reported. All financial systems are in place with a robust audit process to be implemented in line with WG requirements early 2016.
- The new Opportunities team have received over 60 referrals all of which have been allocated.
- Coastal file closure will be completed end Oct with the financial closure completion set for end Dec. An EFAT audit has been completed with no recommendations so we expected the final payment without delay.
- We have implemented a new supervision and appraisal structure effectively.
- Students have begun to access the catering projects again with a steady stream of placement uptake commencing Nov.
- There were no planned closures of services this summer for the first time, with a new flexible summer timetable implemented ensuring continuity of service for all those who needed it.
- We welcomed some new arrivals at Maes Lliedi, at last the chickens have landed.

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- Our new hair salon, 'Tangles' opened in Coleshill providing an environment for enterprise, training and an accessible service

24hour adult Mental Health practitioner (AMHP) cover - Our pilot standby project, utilising a dedicated practitioner, is nearing completion and has proved very successful. We have supplemented this by expanding our pool of independent assessors. This is a model that we would want to further develop and integrate into office hours, in order to provide an effective 24hour service.

Deprivation Of Liberty (DoL's) - All Authorities throughout the UK are experiencing a challenge in response to the high levels of referral activity which within the current financial climate and available resource levels are simply beyond our capacity to address. However, one pleasing factor to note from the number of completed assessments at the half year point, is we are on target to exceed the number we achieved last year which will be a threefold increase on the numbers completed in 2013/14.

Carmarthenshire will be hosting an event in October which will provide feedback from the Law Commission, who have undertaken a comprehensive review of DoL's following extensive public consultation. The consultation highlights the difficulties and challenges, posed by the existing Dols scheme and reflects the experience of all Local Authorities. The consultation proposes an alternative model known as the "Protective Care Scheme", which not only has more positive connotations but also aims to provide a more streamlined and proportionate approach. It will be necessary to consider the proposals and ensure that these are drawn upon when establishing the new arrangements as part of the realignment of the teams referred to in this overview.

Statutory protection work under the Mental Health Act 1983 - we continue to perform impressively in terms of our response times to requests for assessment, with more than 90% of assessments completed within 48hours and the majority of those on the same day. Performance data confirms that our practice reflects our desire to work in the in the least restrictive manner with people either not admitted to hospital formally, or where they are admitted via Orders that are for the shortest duration.

We continue to monitor activity around this important area of work as there are some early indications that level of demand is increasing and there is definitely a trend around people from other areas (notably Ceredigion) being brought to Carmarthenshire for assessment because of lack of provision in the neighbouring authority.

Transition - The Team have undergone a restructure this year, aligning the management structure, roles and responsibilities. The team continues to work with a range of partners to increase opportunities for disabled young people and ensure our transition planning is effective. Many of the young people managed by the team aged 24 and 25 should now be transferred into long term managed care teams. This is not happening and is having an impact on those young people who need the support the most: those transferring from children's to adult services and those leaving home or Education.

Shared Lives (Adult Placement) - As part of our realignment proposals we are looking to relocate the Shared Lives service within our Provider Division under one Senior Manager. We are particularly keen to see *Shared Lives* as a growth area, not just in terms of people stepping down from Residential Care, but also in terms of those individuals we know who are currently staying with parents/ family, who may need alternative provision in the future.

REPORT A

Substance Misuse - The team continue to work in partnership with the Health Board and third sector providers, as well as adult social care and children's services. The focus is on those cases with the most complex needs, with the team providing professional advice and support to other social work teams. We continue to coordinate the multi agency premises in Llanelli on behalf of our partners. The change in commissioning arrangements for substance misuse this year has had apposite impact upon service delivery and we have ensured that we now have representation on the Area Planning Board. Both teams are well positioned to meet the requirements of the Social Care & Wellbeing act.

Performance management - through a series of consultation events and workshops involving senior managers and staff, we have developed a robust performance management framework which we are now implementing. The process will allow us to monitor progress against key national and local performance indicators and is supported by a business data system, developed in-house, which allows us to analyse key data. Measuring performance in this way enables us to identify good practice and provide feedback to both teams and individual practitioners. This, in turn, will help us to create a positive culture and a work environment that thrives on achievement. Whilst the most important focus is on improving outcomes for service users, it also enables budget holders to have timely information and an accurate account of both the current and projected budget, enabling us to plan and modernise the services accordingly.

Safeguarding - Following an independent review of the Safeguarding service in April 2015, the department was reassured that it provides an effective and safe service for protecting adults at risk. It was also noted that the safeguarding infrastructure provided further reassurance i.e. the department has comprehensive and robust quality control systems, undertaken by the commissioning and contracting team, and there are equally good systems in place within care management to support adults at risk.

However, the department concluded that a series of measures required attention including more effective and timely decision making. This has been implemented with significant progress made in the second quarter. Based on total referrals received, the threshold decision making of the decision made within seven working days (as provided by the 2014 Act's Code of Practice) has been 95%, 100% and 85% during the months of July, August and September respectively. Likewise, the department has given increasing attention to managing investigations and ensuring clear timescales are agreed and monitored. Referrals continue to run at over 40 plus per month which is consistent with activity from 2014/15. Over 50% meet the threshold for adult protection, those below the threshold or deemed inappropriate are signposted to more appropriate sources e.g. care management, contracting, service provider.

At the regional level, continued work has been progressed with developing the documentation in preparation for the inaugural meeting of the Regional Safeguarding Board. Carmarthenshire has been heavily involved in the development of these documents e.g. Executive Board Terms of Reference, Quality assurance framework, a regional Annual report .

Commissioning and Contracting - Extensive work has been undertaken to develop closer working relationships between commissioning and care management to assist the effective and efficient use of resources for learning disabled adults and adults with mental health needs. This work has involved rigorous scrutiny of people in high cost residential placements, the management of supported accommodation and the performance of third sector organisations in the variety of services they perform. Work has also commenced to obtain reliable data on future need among both the Transition service (16-25 year olds) and the Community Team for Learning Disabilities (CTLTD).

A good example of this work involves a learning disabled gentleman who had been living in supported accommodation in a neighbouring authority being provided services by a provider not

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familiar with Carmarthenshire. Work by the commissioning and care management team enabled the gentleman to return to Carmarthenshire to a tenancy in a shared house with a care provider who the department has confidence and trust to deliver good quality services. This gentleman has not only settled well, his health and well being has improved and his family are visiting more frequently. In addition, the department has saved in excess of 40K per annum from this move.

Contract review meetings with care providers providing domiciliary care in supported accommodation continue on a regular basis as part of the department's quality assurance and partnership working. Concerns with care providers are collated and risk assessed in terms of departmental response. The bi-monthly provider performance for this sector also continues. Partner organisations attend including CSSIW and Health Board colleagues. In addition, a monitoring exercise has been undertaken involving service users and families who access respite care (short breaks). A report has been prepared for the Management team and a paper prepared for discussion on the review and subsequent development of a respite policy. Further contract monitoring work will continue throughout the remainder of the year.

Conclusion - Through a number of consultation events over the last year a new performance management framework has been developed. It has also highlighted the need to review the operational team management structure and realignment of the teams. Whilst the focus will always be to ensure that services are provided in a safe and person centred way, at all times staff have to consider the financial pressures that the Authority are faced with. Ensuring that performance management is linked not only to outcomes but also budget constraints is a culture that has to be developed and maintained.

The authority has been changing and implementing practice in response the challenges and opportunities brought about by the Social Services and Wellbeing (Wales) Act. Whilst there is still work to be undertaken much has been achieved to progress the vision that has been outlined in the Regional Statement of Intent for LD., The Safeguarding Annual Report and the The Annual Report of the Local Mental Health Partnership Board.

Report B - 2.1

OLDER PEOPLE & PHYSICAL DISABILITIES

The Approach to Measuring Performance

Our approach to measuring performance has been produced with the involvement of people from across the department, to give a clear and concise guide to:

- Our key objectives and priorities
- What we believe a good service looks like to us
- Our priorities for delivering a good service
- How we will use performance measures to continually improve

We have developed our approach to managing performance to ensure we balance the relationship between service demands, the allocation of resources and service user satisfaction. We will use measures to ensure we do the right thing and drive continuous improvement. The performance framework includes 5 themes – Supporting Independence, Keeping Safe, Improving Health & Wellbeing, Information Advice & Signposting, Valuing the Workforce.

- **Supporting Independence**

Our Statement of Intent

- We recognise individuals are different and responses will be tailored to meet these differing needs, demands and aspirations
- Service limitations will be known to ensure expectations of all are realistic and achievable
- Our work with partners, the independent sector and other organisations will deliver quality services in the most appropriate way

Principles of Supporting Independence - services which are:

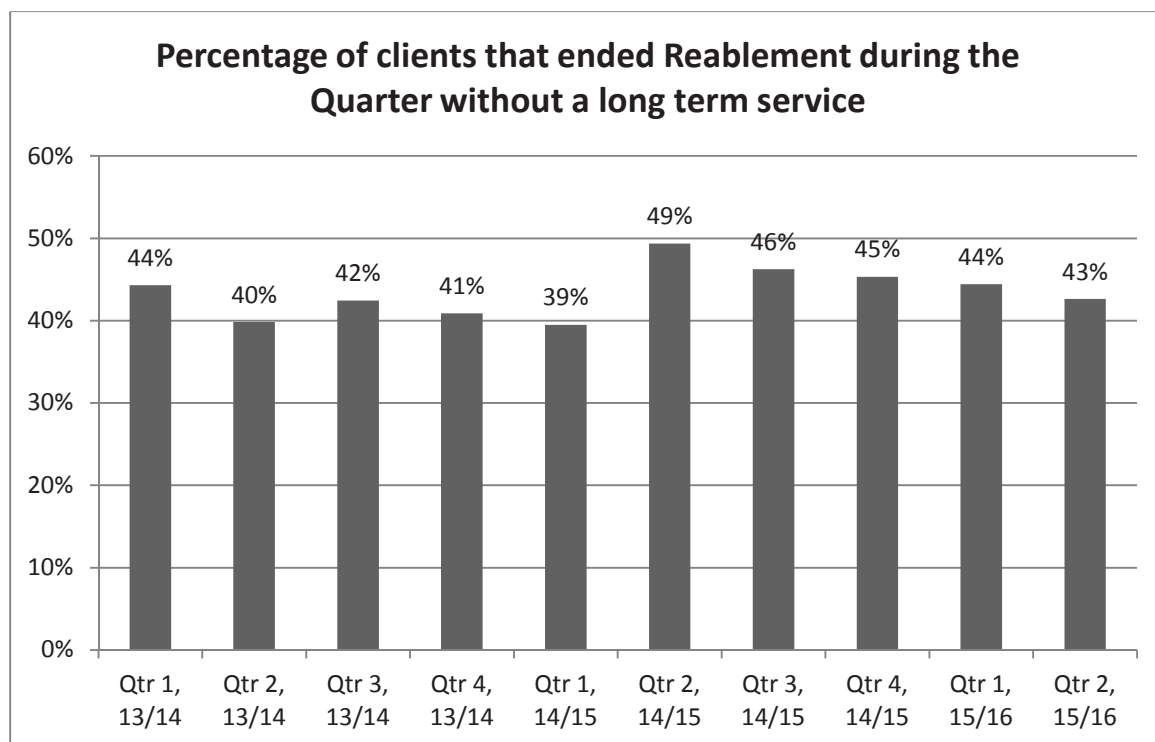
- Built around the need of the individual and are committed to putting the user at the centre of decision making
- Easily accessible and available when needed, and delivered in a timely and responsive way
- Provided by teams and individuals working together to find a workable, deliverable solution that makes a positive difference
- Flexible and responsive to meet changing needs
- Open and transparent which thrive on robust and constructive challenge

1 - Reablement

Improvement plan reference:

National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)



Comments:

The Reablement service provides support for people to set their own goals to improve their independence and to meet those goals. Data collection is being refined to allow reporting on the percentage of people who leave reablement with a reduced requirement for care and the length of time before people require assistance again.

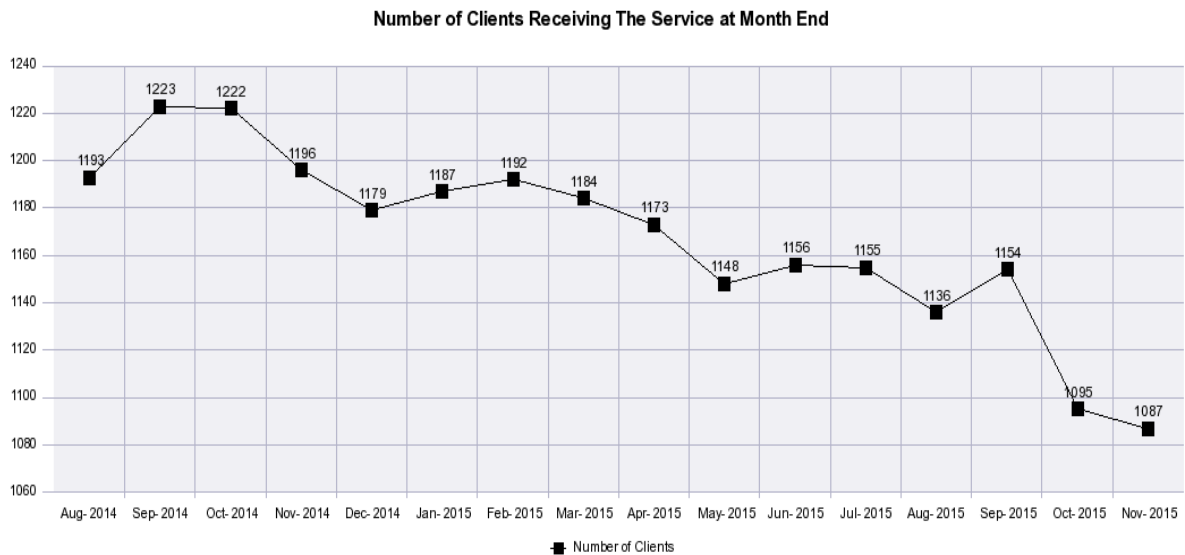
2 - Domiciliary Care

Improvement plan reference:

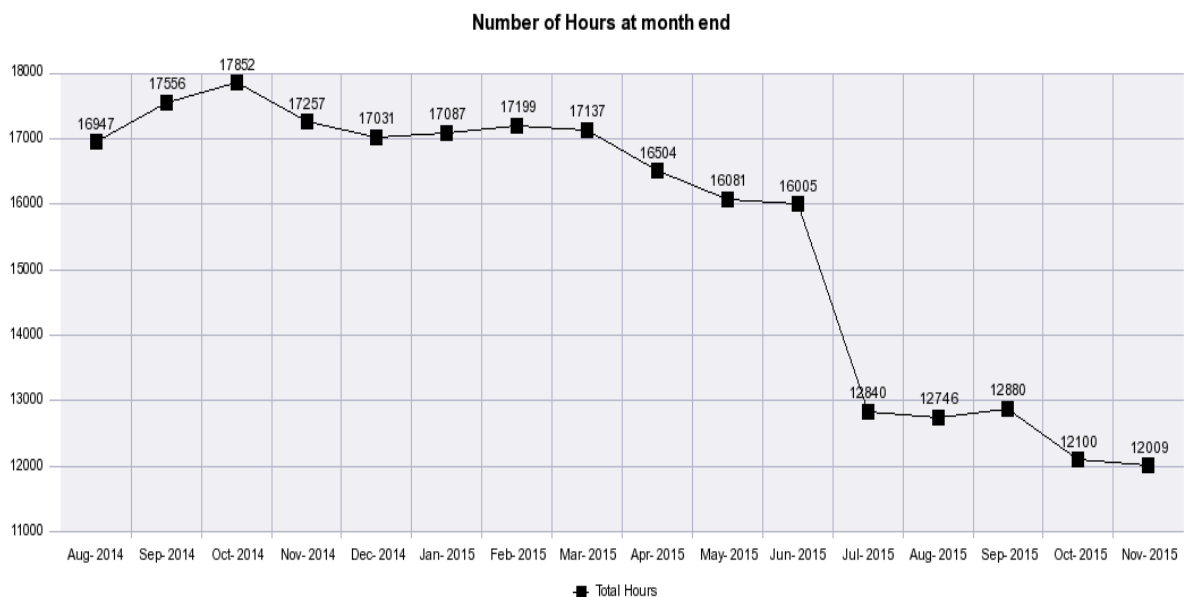
National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)

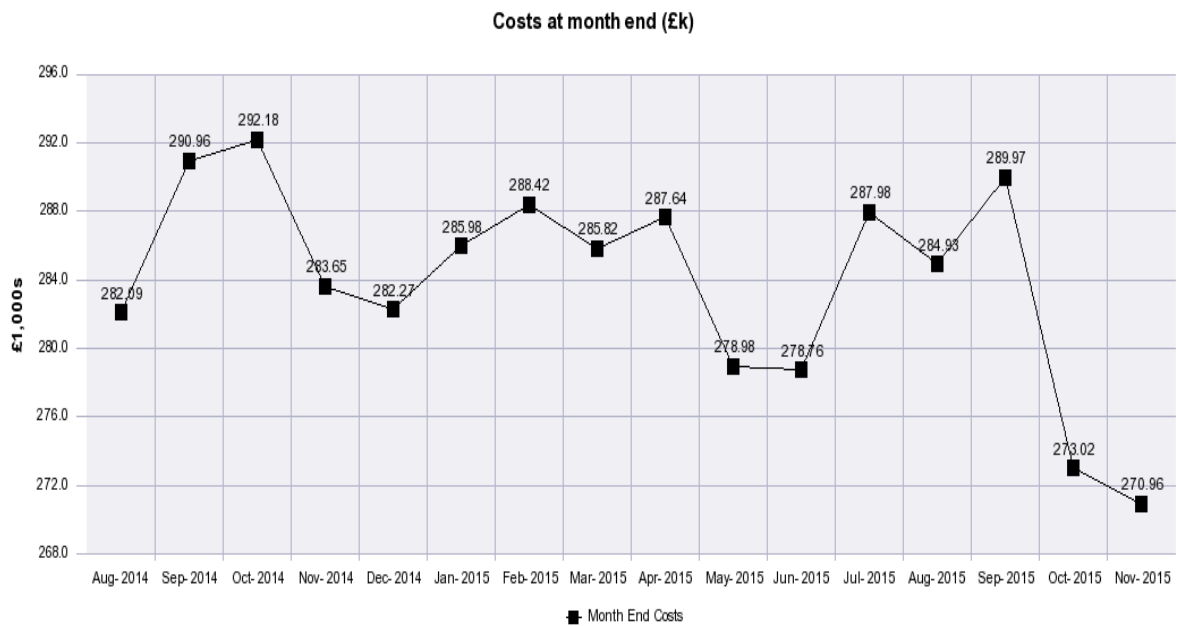
Number of older people and people with a physical disability receiving a domiciliary care service at the end of the month



Number of hours provided to older people and people with a physical disability receiving a domiciliary care service at the end of the month



Weekly cost for the number of older people and people with a physical disability receiving a domiciliary care service at the end of the month



Comments:

The number of people receiving a domiciliary care service has shown a decline over the past year. The main reasons for this are the impact of reablement and more generally ensuring that domiciliary care isn't a replacement for a more appropriate service such as a health service. Despite the reduction in numbers of people using these services, it has sometimes been difficult to arrange care in a timely manner because of the gap between supply and demand. The implementation of the new Domiciliary Care Framework has created more supply by bringing new providers into the local market. An additional benefit has been separating out time for carers to arrive and leave the property from the actual time spent delivering the care. Carers log in and out, allowing a true record of how much time they spend providing care. Where there is a difference between the time on the care plan and the actual time taken over a period of four weeks, the care plan is adjusted to reflect actual need. This could mean the time is increased but in practice, times have generally reduced. This allows the care agencies to reschedule their rotas and create space for additional people who need a service.

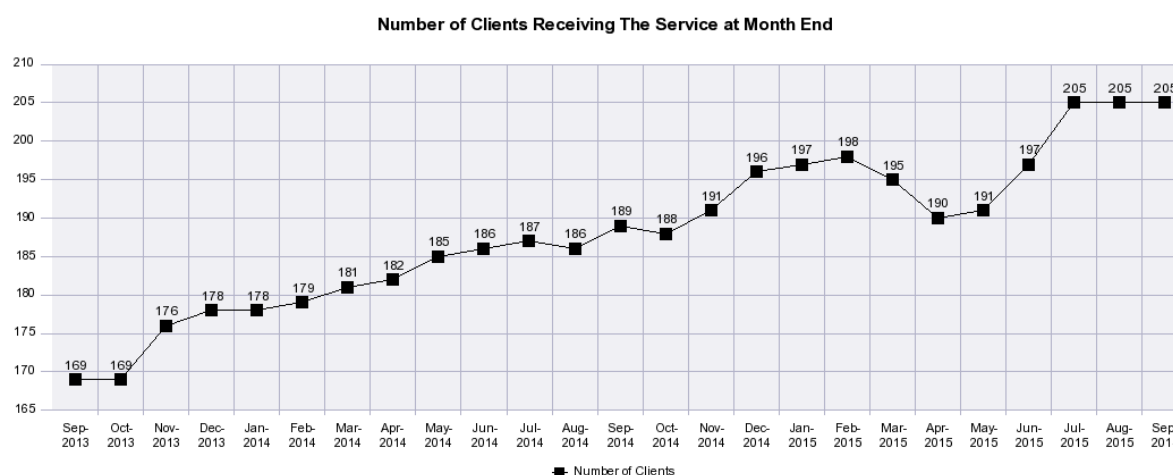
3 - Direct Payments

Improvement plan reference:

National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)

Number of older people and people with a physical disability receiving a Direct Payment at the end of the month



The number of people who use Direct Payments to meet their care needs has risen from 169 in September 2013 to 205 in September 2015. Direct Payments is an alternative way of delivering services, and the growth in this area will need to be funded by disinvesting in the services that have been traditionally commissioned. Direct Payments give people choice and control in meeting their needs. Following a tender exercise, the organisation providing support for people receiving Direct Payments will change on November 30th from the Rowan Organisation to Diverse Cymru. Arrangements are currently being made to transfer staff from one organisation to the other.

4 - Residential Placements

Improvement plan reference:

National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)

Between August 2014 and September 2015 the number of people under the age of 65 with a physical disability declined from 7 to 5. In the same period the number of people over the age of 65 in long term care declined from 865 to 786. The reasons for this are multiple. The main positive reason is that people are being supported for longer at home. The opening of Cartref Cynnes, the extra care development in Johnstown in November is tangible evidence of Carmarthenshire County Council's investment in non-institutional supportive care for people over the age of 50. Ty Dyfryn, a similar development in Ammanford, will open in January.

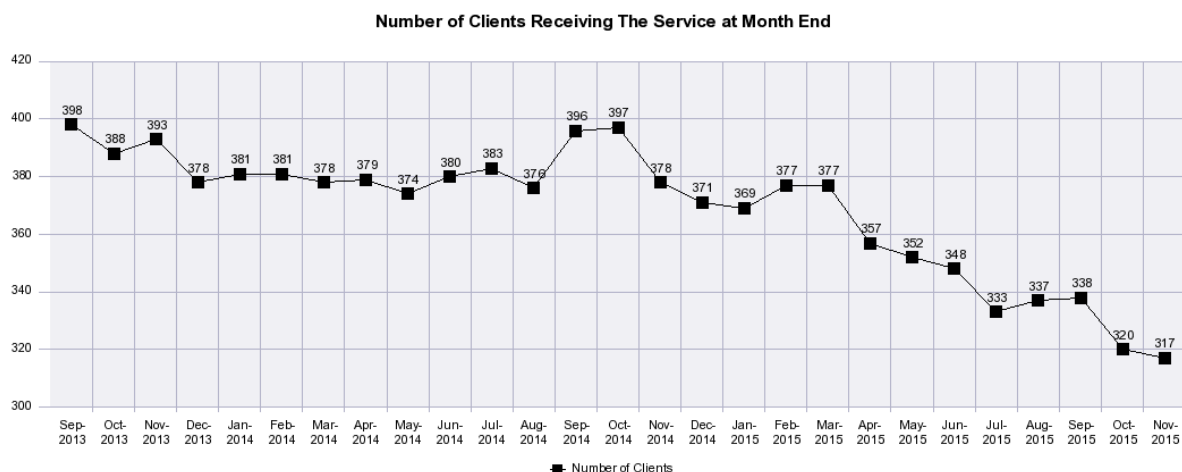
5 - Double Handed Calls (the number of clients receiving domiciliary care that receive care from two carers)

Number of older people and people with a physical disability receiving double handed calls at the end of the month

Improvement plan reference:

National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)



Where individuals have difficulty moving, it may be necessary for two carers to assist them. The number of people requiring two carers has risen over recent years. This has been attributed to the increasing complexity and frailty of older people.

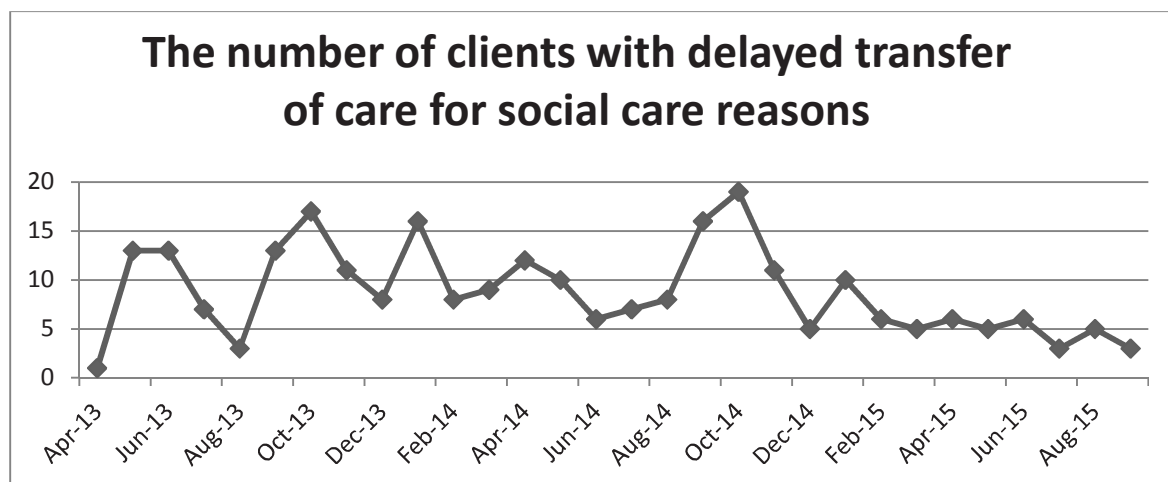
Carmarthenshire, however, was noted to have a higher than average use of two carers compared to other Authorities suggesting that there may be local factors affecting our performance in this area. In response to this, we introduced an initiative known as 'Releasing Time to Care'. This initiative ensured that the care provision is appropriate to the needs of the individual and where possible provided by one carer through multidisciplinary assessment by social workers, nurses and occupational therapists. This focused work has demonstrated significant reduction in the number of double handling calls as outlined in the graph.

6 - Delayed Transfers of Care

Improvement plan reference:

National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)



Performance on DTOC has shown a consistent improvement over the past year. A significant reason for delays has been because people were waiting for domiciliary care to be arranged. However, since the implementation of the new Domiciliary Care framework in August, there has only been one person (with particularly complex needs) delayed because of this. A focus continues to be maintained on ensuring that people are not admitted to hospital if this can appropriately be avoided and discharging people without delay.

Appendix A

National Measures in the framework	Reference
The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	National Measure 1
The rate of older people (aged 65 or over) Helped to live at home per 1,000 population aged 65 or over	National Measure 2
The rate of older people (aged 65 or over) Whom the authority supports in care homes per 1,000 population aged 65 or over.	National Measure 3
The percentage of clients who are supported in the community during the year, who are: a) Aged 18-64	National Measure 4
The percentage of clients who are supported in the community during the year, who are: b) Aged 65+	National Measure 5
Percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year.	National Measure 6
Percentage of carers of adults who had an assessment or review of their needs in their own right during the year.	National Measure 7
Percentage of carers of adults who were assessed or re-assessed in their own right during the year who were provided with a service.	National Measure 8
The percentage of adults who are supported in the community during the year	National Measure 9
% of adult protection referrals where the risk has been managed	National Measure 10
The % of client with a care plan at the 31st March who's care plans should have been reviewed that where reviewed during the year	National Measure 11
% of food establishments which are broadly compliant with food hygiene standards	National Measure 12
% of high risk businesses that were liable to a programmed inspection for Trading Standards	National Measure 13
% of high risk businesses that were liable to a programmed inspection for food hygiene	National Measure 14
% of high risk businesses that were liable to a programmed inspection for Animal Health	National Measure 15
% of high risk businesses that were liable to a programmed inspection for Health and Safety	National Measure 16
The average number of calendar days taken to deliver a Disabled Facilities Grant	National Measure 17
The percentage of private sector dwellings that had been vacant for more than 6 months at 1 April that were returned to occupation during the year through direct action by the local authority	National Measure 18
The number of visits to Public Libraries during the year, per 1,000 population	National Measure 19
The number of visits to local authority sport and leisure centres during the year where the visitor will be participating in physical activity, per 1,000 population	National Measure 20

Appendix B

Measure in the Social Care Improvement Plan	Reference
The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	Social Care IP 1
The rate of older people (aged 65 or over) Helped to live at home per 1,000 population aged 65 or over	Social Care IP 2
The rate of older people (aged 65 or over) Whom the authority supports in care homes per 1,000 population aged 65 or over.	Social Care IP 3
The percentage of clients with a care plan at 31st March whose care plans should have been reviewed that were reviewed during the year	Social Care IP 4
Percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year.	Social Care IP 5
Percentage of adult protection referrals completed where the risk has been managed	Social Care IP 6
The percentage of adults who are supported in the community during the year	Social Care IP 7
Percentage of physical disability clients who are supported in the community during the year aged - 18-64	Social Care IP 8
Percentage of learning disability clients who are supported in the community during the year aged - 18-64	Social Care IP 9
Percentage of mental health needs clients who are supported in the community during the year aged - 18-64	Social Care IP 10
The number of clients aged eighteen and over where the Social Care Department provides a direct payment of money to enable their clients to source their own care.	Social Care IP 11

Report B – 2.2

MENTAL HEALTH & LEARNING DISABILITIES

The Approach to Measuring Performance

Our approach to measuring performance has been produced with the involvement of people from across the department, to give a clear and concise guide to:

- Our key objectives and priorities
- What we believe a good service looks like to us
- Our priorities for delivering a good service
- How we will use performance measures to continually improve

We have developed our approach to managing performance to ensure we balance the relationship between service demands, the allocation of resources and service user satisfaction. We will use measures to ensure we do the right thing and drive continuous improvement. The performance framework includes 5 themes – Supporting Independence, Keeping Safe, Improving Health & Wellbeing, Information Advice & Signposting, Valuing the Workforce.

- **Supporting Independence**

Our Statement of Intent

- We recognise individuals are different and responses will be tailored to meet these differing needs, demands and aspirations
- Service limitations will be known to ensure expectations of all are realistic and achievable
- Our work with partners, the independent sector and other organisations will deliver quality services in the most appropriate way

Principles of Supporting Independence - services which are:

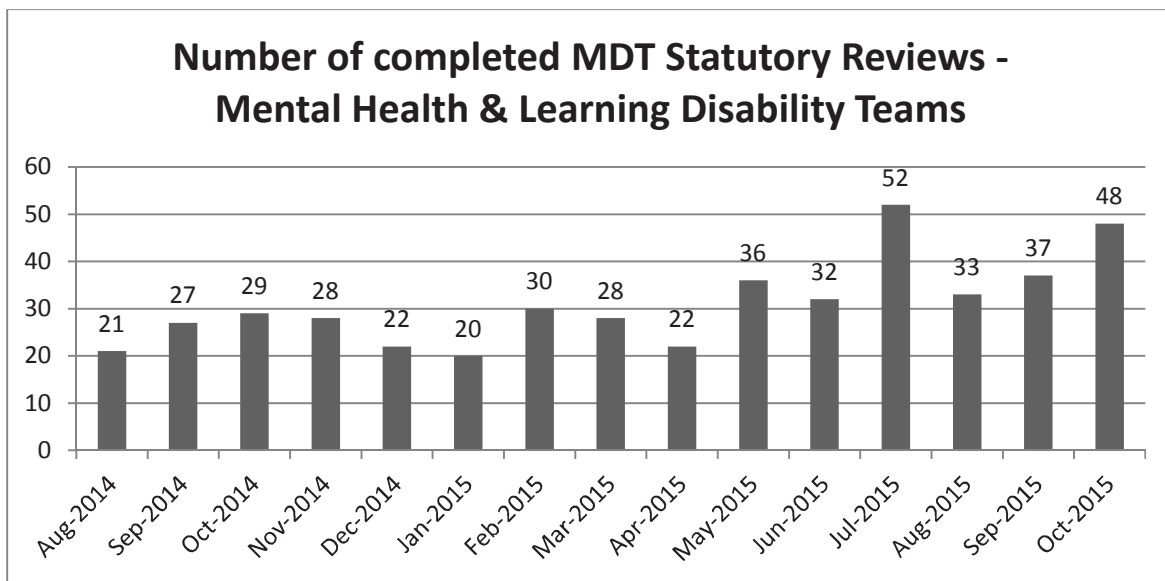
- Built around the need of the individual and are committed to putting the user at the centre of decision making
- Easily accessible and available when needed, and delivered in a timely and responsive way
- Provided by teams and individuals working together to find a workable, deliverable solution that makes a positive difference
- Flexible and responsive to meet changing needs
- Open and transparent which thrive on robust and constructive challenge

1 - Statutory Reviews

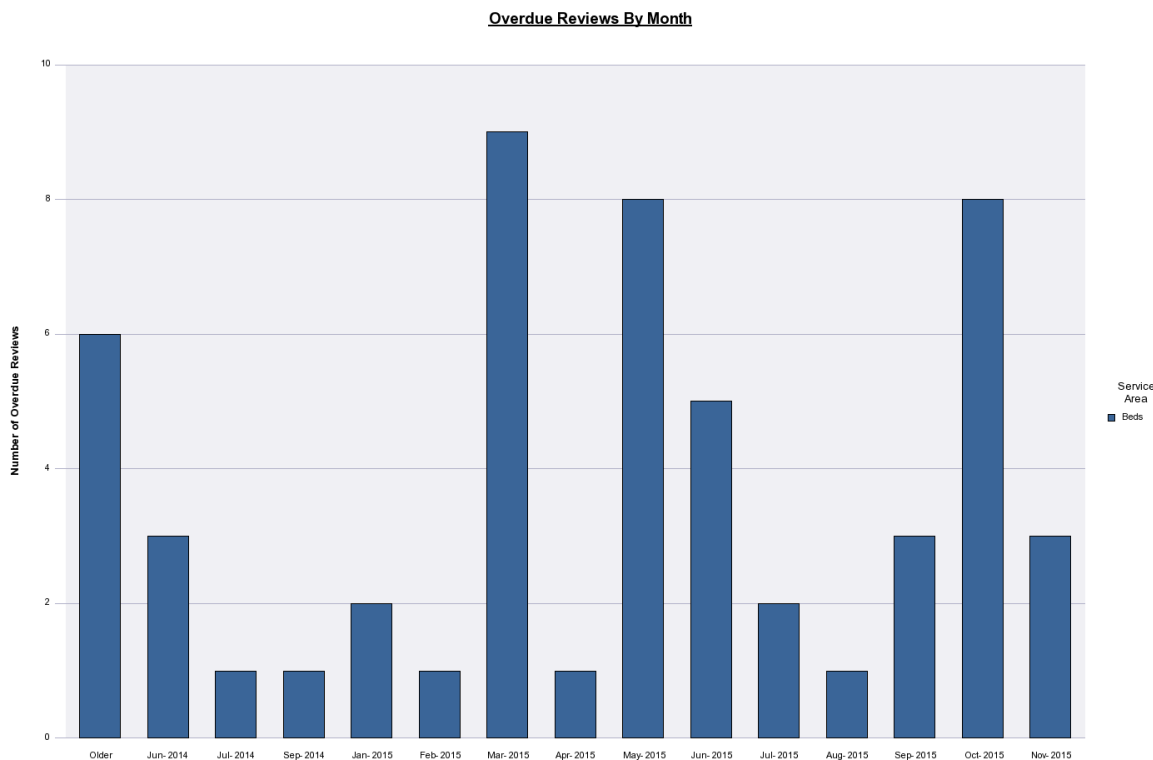
Improvement plan reference:

National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)



Number of Learning Disability clients in residential accommodation where their review is overdue.



Comments:

Based on comparison to last year month by month there is a significant improvement in performance with an upward trend in the number of reviews completed for the year to date. Reviews for Learning Disability residential accommodation planned for

Total 61

are a major area of work and the numbers of outstanding reviews are currently higher than planned. There needs to be a particular focus on residential placements over the coming months as part of the continued improvement in this area of work.

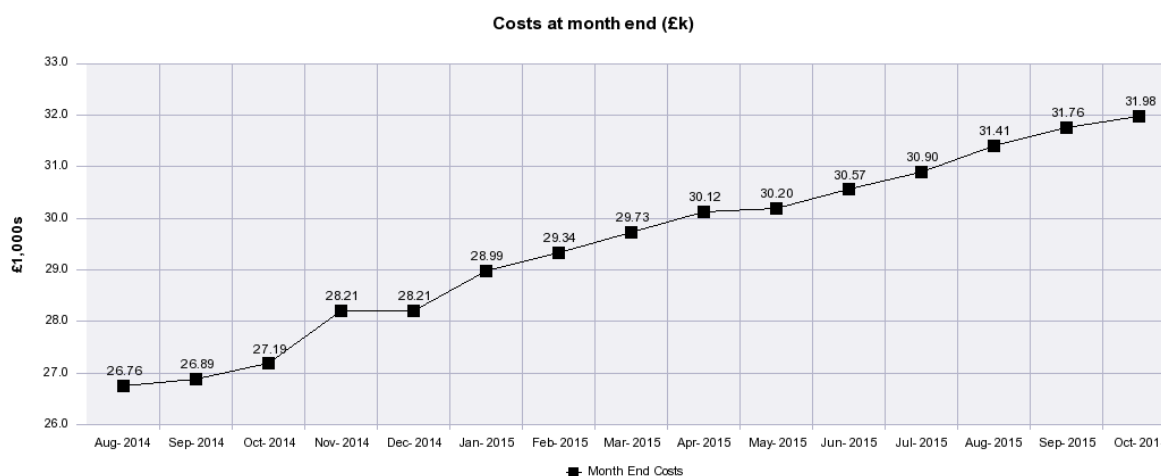
2 - Direct Payments

Improvement plan reference:

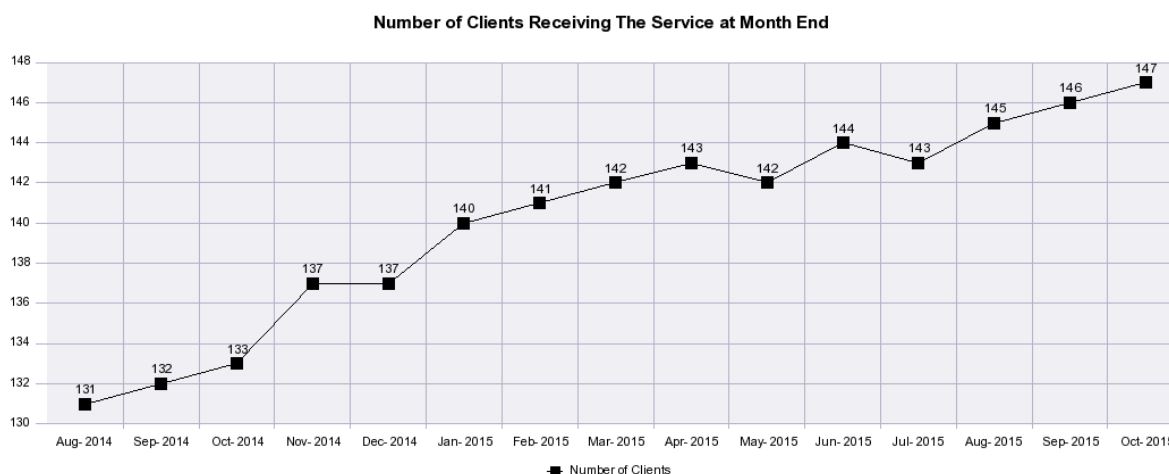
National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)

The weekly costs of clients receiving Direct Payments at the month end.



Number of clients receiving Direct Payments at the month end.



Comments:

As can be seen from the above graphs there is a steady growth in both the number of clients receiving Direct Payments and the weekly cost to the service. It is necessary for people to have a choice on how they have their needs met after determining their assessed needs. There is a move towards Direct Payments as an alternative to services directly delivered or commissioned by the Authority, therefore the growth of Direct Payments will need to be funded through the disinvestment of services that have traditionally been purchased.

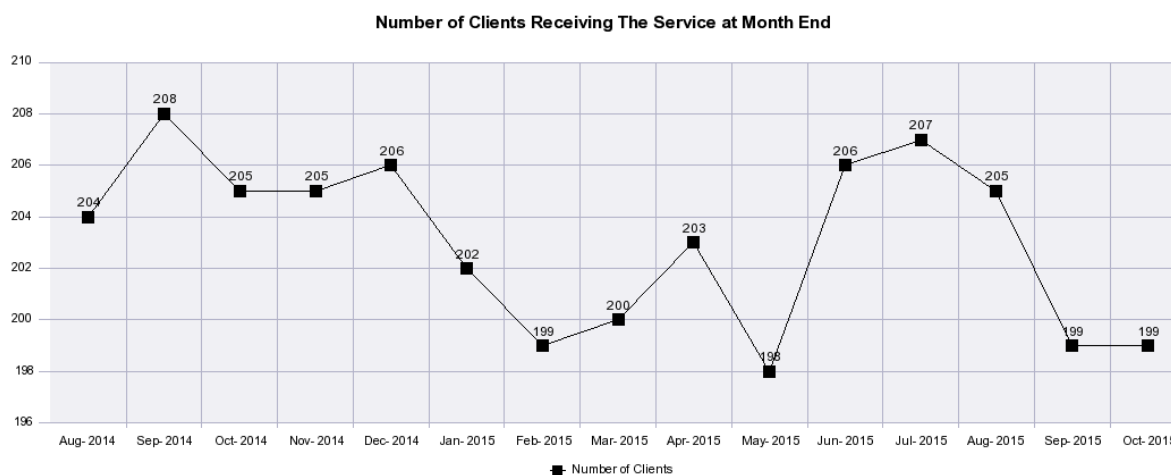
3 - Residential Placements

Improvement plan reference:

National Measure 1,2,3,4,5,6,7,8,11(Appendix A)

Social Care IP 1,2,3,4,5,7,8,9,10,11(Appendix B)

Number of Learning Disability and Mental Health clients in care homes



Comments:

This number should decrease steadily over the next 12 months as alternatives to residential placements are developed in community settings. Although the graph indicates a downward trend the numbers are small as a percentage but have high costs. Investment in Shared Lives (Adult Placement) and a review of Supporting Living will enable greater choice. The progression model recognises the need to increase independence and strengthen opportunities for vulnerable people to remain living in their communities, close to families and friends. It is essential that care plans are updated and reflect the needs and choice of individuals in a person centred way. Nobody should remain in a residential setting because an appropriate community setting is not available. Reviews should be undertaken within appropriate set timescales to ensure that care plans are being acted upon.

- **Keeping Safe**

This covers the way in which our services are provided to ensure that people feel safe and secure.

Our Statement of Intent

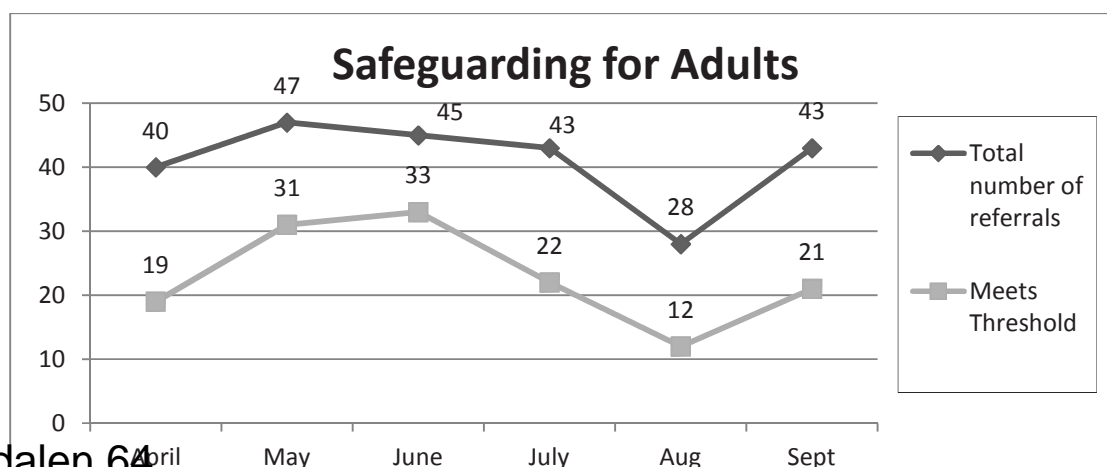
- We complete and share timely and informed risk assessments
- We adopt safe working practices, balanced against risk, implemented by trained and professional people
- Robust safeguarding arrangements are in place to protect the frail, vulnerable and elderly
- Commissioning arrangements are designed to give us good quality, value for money, providers and services
- Contract management arrangements deliver quality and safety
- Everyone that we work with is encouraged to contribute to improving safe working arrangements
- Preventative services are designed to deliver safe and sustainable communities

We believe that safe arrangements:

- provide quality services in a timely and appropriate manner to ensure that customers are safe
- have effective systems and processes in place to ensure safe working practices
- support understanding of the relationship between decision making and impact
- commission, manage and monitor services to ensure that they operate safe working practices
- ensure services fulfil statutory obligations and complies with local/national policies and approved guidance in order to keep people safe
- have effective risk assessments which balances risk and supports safe working
- have clear and transparent safeguarding arrangements which supports the welfare of the individual
- support and monitor staff to work safely

1 - Safeguarding for Adults

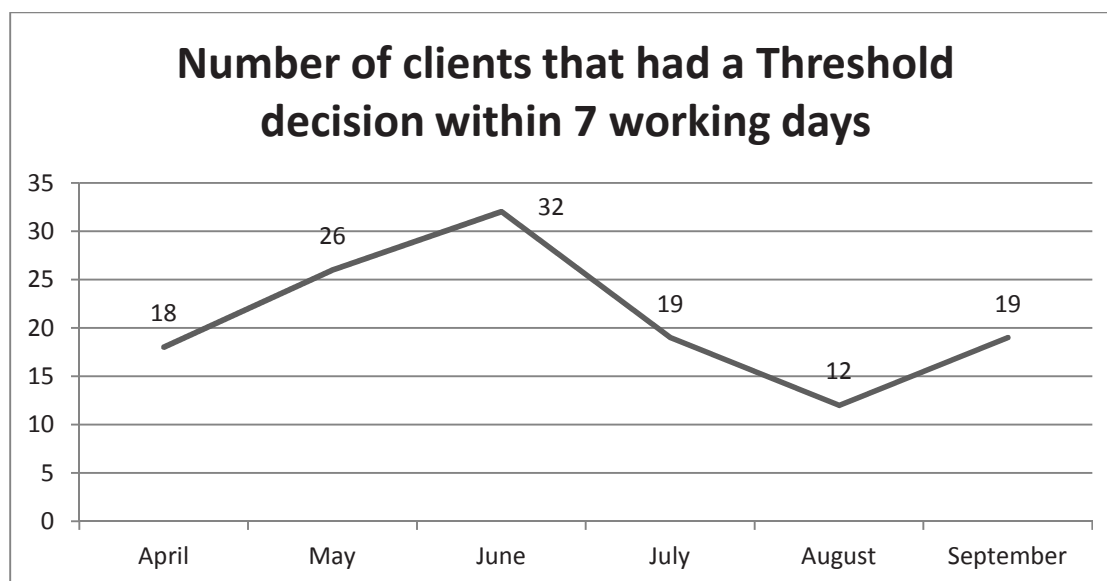
Improvement plan reference:
National Measure 10 (Appendix A)



Comments:

Referrals activity has been consistent during the past four months with the exception of August where there was a significant decrease. Monthly referral activity indicates similar levels to 2014/15 suggesting referrals for the 2015/16 year will be approximately 500 (497 in 2014/15).

Typically, over 40% of referrals met the threshold per month. In June, this reached 73%. Consistently, a significant number of referrals judged to have been below threshold or inappropriate were received from the assessment and care management source. In September 2015, this was as high as 25% of all referrals. Provider agencies are the second main referring source where referrals are judged to be below threshold and inappropriate. This is consistent with previous findings.

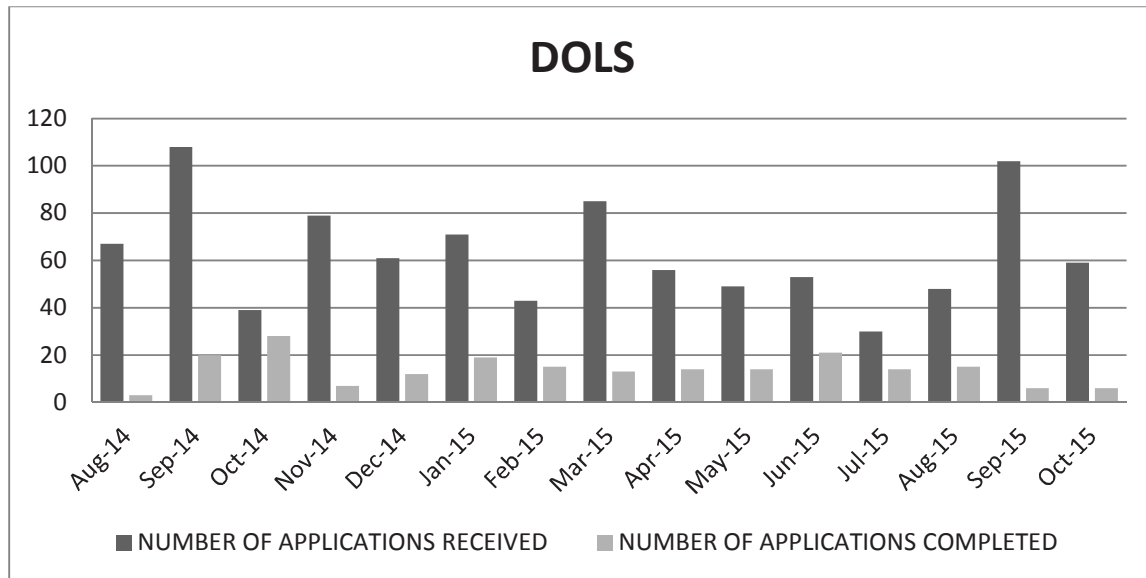


Decision making on referrals has been given greater scrutiny with the result that decisions are being made against a seven working day standard (in line with the draft statutory guidance re the Act 2014). Performance overall was good with 90% of cases that met the threshold in July and September 2015 being made within seven working days ; 97% and 100% was achieved in June and August respectively.

Further work is required on how long after the seven working days are decisions made in those cases outside of the standard.

2 – Deprivation of Liberty Safeguard (DOLS)

Improvement plan reference:
National Measure 10 (Appendix A)



Comments:

Between 1st April and 30 September 2015 the Authority has received a total of 338 requests for authorisations to deprive to be granted. Of the 338, 95 have been allocated for assessment and of those, 84 have been completed. This is an increase of 17 on the previous financial year. This has been helped by a small amount of dedicated resource but is primarily down to staff processing these assessments on top of existing workloads. As a result the huge increase in referrals from 2014/15 (a more than tenfold increase) our assessment activity has quadrupled since DOLS was first implemented in 2009/10. To help with risk management the department continues to utilise a prioritisation tool.

Appendix A

National Measures in the framework	Reference
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The rate of older people (aged 65 or over) Helped to live at home per 1,000 population aged 65 or over	National Measure 2
The rate of older people (aged 65 or over) Whom the authority supports in care homes per 1,000 population aged 65 or over.	National Measure 3
The percentage of clients who are supported in the community during the year, who are: a) Aged 18-64	National Measure 4
The percentage of clients who are supported in the community during the year, who are: b) Aged 65+	National Measure 5
Percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year.	National Measure 6
Percentage of carers of adults who had an assessment or review of their needs in their own right during the year.	National Measure 7
Percentage of carers of adults who were assessed or re-assessed in their own right during the year who were provided with a service.	National Measure 8
The percentage of adults who are supported in the community during the year	National Measure 9
% of adult protection referrals where the risk has been managed	National Measure 10
The % of client with a care plan at the 31st March who's care plans should have been reviewed that where reviewed during the year	National Measure 11
% of food establishments which are broadly compliant with food hygiene standards	National Measure 12
% of high risk businesses that were liable to a programmed inspection for Trading Standards	National Measure 13
% of high risk businesses that were liable to a programmed inspection for food hygiene	National Measure 14
% of high risk businesses that were liable to a programmed inspection for Animal Health	National Measure 15
% of high risk businesses that were liable to a programmed inspection for Health and Safety	National Measure 16
The average number of calendar days taken to deliver a Disabled Facilities Grant	National Measure 17
The percentage of private sector dwellings that had been vacant for more than 6 months at 1 April that were returned to occupation during the year through direct action by the local authority	National Measure 18
The number of visits to Public Libraries during the year, per 1,000 population	National Measure 19
The number of visits to local authority sport and leisure centres during the year where the visitor will be participating in physical activity, per 1,000 population	National Measure 20

Appendix B

Measure in the Social Care Improvement Plan	Reference
The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	Social Care IP 1
The rate of older people (aged 65 or over) Helped to live at home per 1,000 population aged 65 or over	Social Care IP 2
The rate of older people (aged 65 or over) Whom the authority supports in care homes per 1,000 population aged 65 or over.	Social Care IP 3
The percentage of clients with a care plan at 31st March whose care plans should have been reviewed that were reviewed during the year	Social Care IP 4
Percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year.	Social Care IP 5
Percentage of adult protection referrals completed where the risk has been managed	Social Care IP 6
The percentage of adults who are supported in the community during the year	Social Care IP 7
Percentage of physical disability clients who are supported in the community during the year aged - 18-64	Social Care IP 8
Percentage of learning disability clients who are supported in the community during the year aged - 18-64	Social Care IP 9
Percentage of mental health needs clients who are supported in the community during the year aged - 18-64	Social Care IP 10
The number of clients aged eighteen and over where the Social Care Department provides a direct payment of money to enable their clients to source their own care.	Social Care IP 11



Report C

Scrutiny measures & actions full monitoring report Social Care and Health scrutiny - at Half Year 2015/16



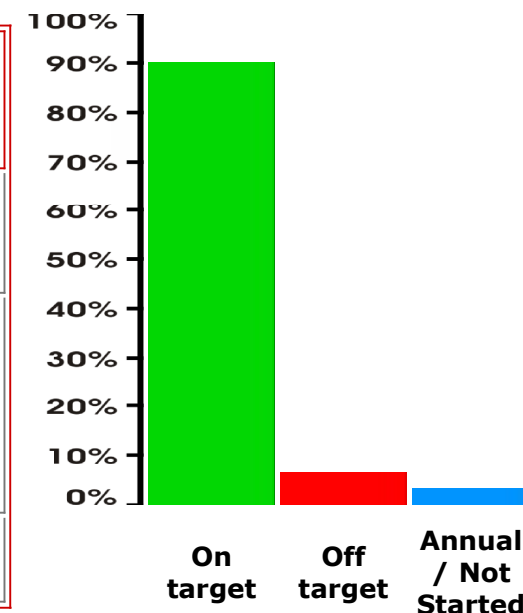
Filtered by:

Organisation - Carmarthenshire County Council
Source document - Improvement Plan 2015/16

The table below provides a summary progress against target for the Actions and Measures contained within the selected document

Performance against Target

		Total	On target	Off target	Not reported	Not available	Annual / Not started	% on target	Overall % on target
C. People in Carmarthenshire are healthier	Actions	15	15	0	0	N/A	0	100%	88%
	Measures	11	8	2	0	0	1	73%	
E. People who live, work and visit Carmarthenshire are safe and feel safer	Actions	3	3	0	0	N/A	0	100%	100%
	Measures	1	1	0	0	0	0	100%	
Overall Performance	Actions and Measures	30	27	2	0	0	1	90%	



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Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



Outcome Agreement Grant Monitoring

Total Deliverables	On Target	Off Target or Not Available	Not Yet Due or Annual	Not Reported
3	3	0	0	0



Report C

Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



Theme: C. People in Carmarthenshire are healthier							
Sub-theme: C2 Preventing ill health and encourage healthy living							
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The number of people referred to the "Vitality Scheme" (NERS – National Exercise Referral Scheme) 3.4.2.5	Not applicable		Q2: 655 End Of Year: 1245	Target: 320 Result: 257	Target: 650 Result: 552	Target: 950	Target: 1245
Comment	Due to the Activity Coordinator (NERS lead) being on long term sick (April-June) we failed to achieve our target in quarter 1, which has had a knock on affect on the cumulating result for quarter 2. However, we have set ourselves a very challenging target of 1,245 for 2015/16 compared to a target of 1,008 for the year set by our funding body target (Public Health Wales). Despite not meeting our own target, we are currently exceeding the Public Health Wales target at the end of quarter 2.						
Remedial Action	We will continue to work hard to meet our own challenging target. While also complying with targets set by our funding body Public Health Wales.						
Service Head: Ian Jones			Performance status: Off target				

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Report C

Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



ACTIONS - Theme: C. People in Carmarthenshire are healthier			
Sub-theme: C3 Improving the Emotional, Mental Health and Well-being of all people in the County			
Action	11711	Target date	31/03/2016
Action promised	We will improve transition between Children's Services and Adult Services to include Education, Careers and Health, ensuring that young people and their families are at the centre of plans for the future		
Comment	We will be holding development sessions for all services for disabled children and young people in November. This will assist in promoting a greater understanding between services and developing clear care pathways. In particular, this will focus on the relationship between statutory and preventative services.		
Service Head: Stefan Smith		Performance status: On target	
Action	11713	Target date	31/03/2016
Action promised	We will undertake a scoping exercise for a strategic commissioning plan for the Mental Health and Learning Disability Service		
Comment	A draft document was prepared and is to be considered at the LD and MH senior management team during quarter 3		
Service Head: Anthony Maynard		Performance status: On target	



Report C

Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16




Theme: C. People in Carmarthenshire are healthier Sub-theme: C4 Reducing inequities in health							
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
Percentage of physical disability clients who are supported in the community during the year aged 18-64 9.2.5.0	Not applicable		Q2: 96.21 End Of Year: 97.25	Target: 97.23 Result: 96.79	Target: 97.22 Result: 97.43 Calculation: (455÷467) × 100	Target: 97.21	Target: 97.20
Comment	This service improvement measure is set-up in-line with the statutory measure SCA/020 - The percentage of adults who are supported in the community, which expects as many people as possible to be helped to live at home and the Q2 result reflects this. However as a Council we want to promote independent living and our innovative range of services aims to support people via community based services. Reductions in day care and meal provision have resulted from efforts to find community-based options that promote involvement in their local community.						
Remedial Action	Assistance is now focussed on the people who have more significant disabilities to help them live well at home.						
Service Head: Rhian Dawson				Performance status: On target			
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			

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	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
Percentage of learning disability clients who are supported in the community during the year aged 18-64 9.2.5.1	Not applicable		Q2: 86.69 End Of Year: 87.64	Target: 86.68 Result: 86.68	Target: 86.75 Result: 86.83 Calculation: (534÷615) × 100	Target: 87.50	Target: 87.76
Service Head: Anthony Maynard			Performance status: On target				
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
Percentage of mental health needs clients who are supported in the community during the year aged 18-64 9.2.5.4	Not applicable		Q2: 78.97 End Of Year: 79.53	Target: 80.38 Result: 83.18	Target: 79.20 Result: 84.34 Calculation: (280÷332) × 100	Target: 79.64	Target: 80.13
Service Head: Anthony Maynard			Performance status: On target				
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The number of adult clients provided with a direct payment by the Social Care Department to enable them to independently source their own care.	Not applicable		Q2: 320 End Of Year: 331	Target: 333 Result: 337	Target: 337 Result: 355	Target: 341	Target: 347

9.2.5.7 							
Service Head: Rhian Dawson				Performance status: On target			
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over SCA/001	1.43	3.39	Q2: 3.23 End Of Year: 6.18	Target: 1.42 Result: 0.92	Target: 2.83 Result: 1.51 Calculation: (28 ÷ 18560) × 1000	Target: 4.25	Target: 5.77
Comment	In the past year, the predominant reason for delays in discharge has been people waiting for domiciliary care. Since the implementation of the new Domiciliary Care Framework, there have been no delays for this reason.						
Service Head: Rhian Dawson				Performance status: On target			
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The rate of older people Supported in the community per 1,000 population aged 65 or over at 31 March SCA/002a	75.13	61.96	Q2: 58.71 End Of Year: 61.87	Target: 61.82 Result: 61.32	Target: 59.05 Result: 60.42 Calculation: (2509 ÷ 41523) × 1000	Target: 59.01	Target: 58.93

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Comment	This statutory measure expects as many older people as possible to be helped to live at home and the Q2 result reflects this when compared to the rate at Q2 2014/15 of 58.71. However as a Council we want to promote independent living and our innovative range of services aims to support people via community based services. Reductions in day care and meal provision have resulted from efforts to find community-based options that promote involvement in their local community.						
Remedial Action	Assistance is now focussed on the people who have more significant disabilities to help them live well at home.						
Service Head: Rhian Dawson				Performance status: On target			
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The rate of older people whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March SCA/002b	16.25	19.32	Q2: 21.54 End Of Year: 20.48	Target: 20.48 Result: 19.46	Target: 19.59 Result: 19.77 Calculation: (821÷41523) × 1000	Target: 19.59	Target: 19.59
Comment	<p>Residential placements have remained at a fairly consistent level over the past year. This reflects the practice of regarding residential placement as a last resort. This year there has been a larger than expected number of people leaving care homes for a number of reasons. The increase between Q1 and Q2 reflects a stabilisation of the population.</p> <p>Despite a reduction in residential placements compared to the same period last year, the measure remains off target. This is because the population figure of 42,420 (65+) used to set the 2015/16 target (the best available population estimate at the time) was far higher than the 2014 population estimates published in August 2015 of 41,523 resulting in a lower target set. Based on the actual population figures of 41,523 the target would calculate as 20 and would be on target.</p> <p>The positive is that the result has improved on quarter 2 last year and is currently better than the 2014/15 end of year result of 20.48.</p>						

Remedial Action	See above comment	
Service Head: Rhian Dawson	Performance status: Off target	

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Report C



Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



ACTIONS - Theme: C. People in Carmarthenshire are healthier
Sub-theme: C4 Reducing inequities in health

Action	10842 	Target date	31/12/2015 (original target 31/03/2016)
Action promised	In partnership with Family Housing Association, we will progress the new Argel extra care housing development and develop the next phase of our Extra Care/Residential Care Investment Programme (designed to help older people to maintain their independence by providing self-contained 1 & 2 bedroom apartments catering for people with different needs)		
Comment	<p>Completion date has slipped, site agent stated end of September, fit out to commence 5th October, with phased occupation to commence from w/c 19th or 26th October. Considerable labour has been transferred from other project Ty Dyffryn . Costs remain £226k over budget main reason pumping station, asbestos removal from Argel, lift specifications and garden. Contractors report External Balconies construction deficient (bolts and members)is being resolved. Ceiling Edge Detail adjacent windows common areas did not provide sufficient void for the services installation. The subsequent edge detail did not take cognisance of both the curtain and blind fixing details. Arrangements to be made for the curtain / blind contractor to visit site, to view and determine requirements. Sound Testing partition between Flats 206 & 207 had failed the sound test. Investigation has shown screws that are too long were the problem and the partition is being remediated.</p> <p>The original intention for letterboxes in flats 1-11 was for a dummy letter plate these have to be fire rated (Instruction to follow) Floors 1, 2 & 3 , generally - floor stops / toilet roll holders / shower curtains and snagging. Electrical installation all work closed Final decorations outstanding and Mechanical / Electrical 80% complete Ground floor Decorations 90% Handrail Letterbox Ironmongery Carpet will be dependent on external works External Area entering final stages</p>		
Service Head: Rhian Dawson		Performance status: On target	
Action	11159 	Target date	31/03/2016

Action promised	We shall increase the number of unique visitors to the new improved adult social care website (Yr1 2013/14 baseline 33,800; Yr2 2014/15 target 35,500 - Actual 37,447. Yr3 2015/16 target 35,700)		
Comment	There have been 20,036 unique page views (UPVs) from 1 April to 30 September, which represents 56.1% of the annual target of 35,700 for 2015/16.		
Service Head: Jake Morgan		Performance status: On target	
Action	11618	Target date	31/03/2016
Action promised	We will maintain an Annual External Accreditation in the Careline Service to ensure an industry standard quality service to customers		
Comment	Accreditation remains, with 97.6% of calls answered within a minute. However, special measures are in place and the high level response rate hides the inability at times to respond to calls in a consistent and timely manner.		
Service Head: Rhian Dawson		Performance status: On target	
Action	11657	Target date	31/03/2016
Action promised	We shall develop Older Person 10 Year Vision for Carmarthenshire supported by an action plan for its implementation		
Comment	Strategy approved by Executive Board 28/9 and due to be considered by full Council on 14/10/15.		
Service Head: Rhian Dawson		Performance status: On target	
Action	11658	Target date	31/03/2016
Action promised	We shall review models of care and support within Domiciliary Services i.e. Rapid Response and Reablement		
	<p>A review of Reablement and other short term services is underway. An initial workshop was held with multidisciplinary stakeholders from social work and care management, In house provider services (domiciliary care), Occupational Therapy, Physiotherapy and Acute Hospital Nursing. The workshops facilitated included: Definition of reablement and its assessment Resources / Processes Required for efficient reablement service Reviews – Definition, Current Practice and Proposed Practice Participants acknowledged that some improvement was needed in order to ensure that our reablement is as effective as possible to improve outcomes at both service user and organisational level.</p> <p>Work is being progressed for four key areas of improvement- Referral Detail, Referral Process, Assessment & Support, Performance Measures. It is proposed that community services in Carmarthenshire are reframed and divided into two distinct service areas: Reablement and Long Term Care. The proposed realignment presents a Short Term Assessment and Support service as the first point of contact for an individual presenting with increased need or functional decline. The Short Term Assessment and Support Service response will combine current Reablement, Rapid Response and Through The Night domiciliary care services as well as the Acute</p>		

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	<p>Response nursing Team (ART), the service user's GP, physiotherapy and occupational therapy. 'Step Up' beds such as convalescence and community hospital beds may also be considered during this service intervention.</p> <p>The Long Term Care service will continue to provide care management for those with complex and ongoing needs requiring commissioned social care.</p>		
Comment	<p>It is anticipated that redesigning community services in this way will improve outcomes. Implementing this model and the recommended process improvements will take some time and will include realignment of current resources and process changes.</p> <p>Currently the work is being taken forward in 4 workstreams, the next updating reports will be shared with the Project Board on the 5th October. On agreement of the proposed way forward a Project Initiation Document will be developed jointly with Health outlining the agreed purpose of the service with robust performance measures. This will then be used to inform the development of an implementation plan, risk assessment and timescales.</p>		
Service Head: Robin Staines		Performance status: On target	
Action	11659	Target date	31/03/2016
Action promised	We will develop, in accordance with the Welsh Government requirement, an Ageing Well Plan for Carmarthenshire based on five core themes:- Loneliness and isolation, Employment for opportunities and new skills, Falls prevention, Dementia supportive communities, Age friendly communities		
Comment	An Ageing Well plan (which incorporates the Strategy for Older People) includes the five ageing well themes and has been developed incorporating available evidence and building on relevant actions identified within business plans. The Plan is proceeding through the political process, with sign off by Council anticipated in December 2015.		
Service Head: Wendy S Walters		Performance status: On target	
Action	11660	Target date	31/03/2016
Action promised	We shall continue to increase the numbers of clients having reviews in Adult Service (2014/15 - 71.9% (SCA/007))		
Comment	Invest to Save application made for review team to increase numbers of reviews conducted. Application approved and recruitment progressing in order to increase the number of clients having reviews.		
Service Head: Rhian Dawson		Performance status: On target	



Report C

Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



Theme: C. People in Carmarthenshire are healthier
Sub-theme: C6 Improve access to health and social care for all people including vulnerable groups

Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The percentage of clients with a care plan at 31st March whose care plans should have been reviewed that were reviewed during the year SCA/007	87.2	79.5	Q2: 47.4 End Of Year: 71.9	Target: 20.0 Result: 43.9	Target: 40.0 Result: 55.5 Calculation: (1502÷2706) × 100	Target: 60.0	Target: 80.0

Service Head: Rhian Dawson

Performance status: On target

Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The percentage of adult clients who are supported in the community during the year SCA/020	87.19	85.51	Q2: 80.16 End Of Year: 83.08	Target: 79.06 Result: 81.01	Target: 80.14 Result: 82.08	Target: 80.94	Target: 83.05

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		<p>Calculation: (4389 ÷ 5347) × 100</p>	
<p>Comment</p>	<p>This statutory measure expects as many older people as possible to be helped to live at home and the Q2 result reflects this when compared to the percentage at Q2 2014/15 of 80.16. However as a Council we want to promote independent living and our innovative range of services aims to support people via community based services. Reductions in day care and meal provision have resulted from efforts to find community-based options that promote involvement in their local community.</p>		
<p>Remedial Action</p>	<p>Assistance is now focussed on the people who have more significant disabilities to help them live well at home.</p>		
<p>Service Head: Rhian Dawson</p>		<p>Performance status: On target</p>	



Report C

Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



ACTIONS - Theme: C. People in Carmarthenshire are healthier			
Sub-theme: C6 Improve access to health and social care for all people including vulnerable groups			
Action	11714	Target date	31/03/2016
Action promised	We shall continue to implement the regional carers strategy		
Comment	The strategy remains on target and delivering its action plan. Since the last report there has been no further news from WG about the ongoing funding situation. This means that staff will be, if not already, looking for new employment. This will put the delivery of the plan at risk.		
Service Head: Rhian Dawson		Performance status: On target	
Action	11716	Target date	31/03/2016
Action promised	We will review the way we allocate services to disabled children and their families to ensure that our processes are aligned with adult social care for continuity of provision and we are making the best use of our available resources by providing a service based upon need		
Comment	We have established weekly Triage meetings for our preventative disability services to ensure referrals are being screened and acted upon accordingly. The Children`s Disability team have re-drafted eligibility criteria which will be discussed in the Children`s services managers function group in November.		
Service Head: Stefan Smith		Performance status: On target	
Action	11718	Target date	31/03/2016
Action promised	We will develop a multi agency action plan to implement the recommendations of the Autistic Spectrum Disorder (ASD) Position Statement developed by the People and Work Unit		

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Comment	ASD (Autistic Spectrum Disorder) Steering group held on 23rd September. Key priority is to develop our `local offer` for ASD across organisations.		
Service Head: Stefan Smith	Performance status: On target		
Action	11719	Target date	31/03/2016
Action promised	We will develop and publish information for disabled young people and their families about our services		
Comment	Work ongoing to consult on draft criteria.		
Service Head: Stefan Smith	Performance status: On target		



Report C

Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



ACTIONS - Theme: C. People in Carmarthenshire are healthier			
Sub-theme: C7 Reducing drug and alcohol misuse			
Action	11308	Target date	31/03/2016 (original target 31/03/2015)
Action promised	We will review our Substance Misuse Service alongside Integrated Family Support Team (IFST) to ensure they are effective		
Comment	Formal review undertaken. Proposal to be developed for Heads of Service to outline options for closer working between teams. To include: co-location, joint screening and working protocols.		
Service Head:	Stefan Smith	Performance status:	On target
Action	11721	Target date	31/03/2016
Action promised	We shall review the transition arrangements for young people with substance misuse problems to ensure they do not get lost between children and adult services.		
Comment	Review to be scheduled with adult services/children`s services for substance misuse in Q3.		
Service Head:	Anthony Maynard	Performance status:	On target



Report C

Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

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Theme: E. People who live, work and visit Carmarthenshire are safe and feel safer							
Sub-theme: E5 Safeguarding all people from abuse, victimisation, neglect and exploitation							
Measure Description	2014/15 Comparative Data			2015/16 Target and Results			
	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The percentage of adult protection referrals completed where the risk has been managed SCA/019	100.00	98.78	Q2: 98.13 End Of Year: 98.98	Target: 98.00 Result: 100.00	Target: 98.00 Result: 100.00 Calculation: (35÷35) × 100	Target: 98.00	Target: 98.00
Service Head: Neil Edwards			Performance status: On target				



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Scrutiny measures & actions full monitoring report

Social Care and Health scrutiny - at Half Year

2015/16



ACTIONS - Theme: E. People who live, work and visit Carmarthenshire are safe and feel safer
Sub-theme: E5 Safeguarding all people from abuse, victimisation, neglect and exploitation

Action	11746	Target date	31/03/2016
Action promised	We will consolidate and develop effective and robust provider performance systems in association with the safeguarding service		
Comment	There is continued evaluation of the department`s provider performance systems to ensure effective communication is taking place. Presently, the Provider Performance Monitoring Protocol is being reviewed. The provider performance monitoring groups for both the Older Person`s Division and the LD/MH divisions are running in order. We have also introduced greater information gathering of the LD/MH services by engaging more actively with Health professionals e.g SALT, PIBS		
Service Head: Neil Edwards		Performance status: On target	
Action	11747	Target date	31/03/2016
Action promised	We will develop criteria for allocating investigations to service providers and care management teams		
Comment	A document was developed and has been circulated to CSSIW for information and approval The adult safeguarding team is implementing the criteria		
Service Head: Neil Edwards		Performance status: On target	
Action	11748	Target date	31/03/2016
Action promised	We will convene a workshop on "Investigations for Investigating officers and Adult Services Managers" to learn lessons and share best practice		
Comment	The departmental restructuring has stalled this development . The intention is to convene a workshop in Quarter 4 based on lessons learned internally and best practice		

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Service Head: Neil Edwards

Performance status: On target

**SOCIAL CARE & HEALTH SCRUTINY
COMMITTEE
14th DECEMBER 2015**

**Explanation for non-submission
of scrutiny report**

ITEM	RESPONSIBLE OFFICER(S)	EXPLANATION	REVISED SUBMISSION DATE
Capital Programme Budget Setting 2016/17 – 2020/21	Chris Moore / Owen Bowen / Phil Davies	<p>The capital programme is still in development and will not be completed until after the Welsh Government announces the Revenue Support Grant on the 9th of December.</p> <p>It is therefore proposed to hold an all member seminar later this month to consult on the draft programme. A report will be subsequently submitted to the Policy & Resources Scrutiny Committee on the 6th of January 2016.</p>	N/A

Mae'r dudalen hon yn wag yn fwriadol