

1. Introduction

The service areas of Resources Management, Safeguarding and Performance, Adult Services and Children and Young People Services combine to form the Social Services Directorate which has a wide range of statutory duties and responsibilities. Its primary role is to ensure the assessed social care and support needs of adults and children are met, helping them to achieve their outcomes in line with the Social Services and Well-being (Wales) Act 2014.

1.1 About our Service – Adult Services

The Division provides care and support services for adults with a learning disability, autism, mental health problems, frailty because of aging, a physical disability or sensory impairment, assessed as having an eligible need under the definitions of the Social Services and Wellbeing (Wales) Act, 2014.

Our broad functions are as follows.

Adult Locality Services are focused in six key areas across the citizen's care and support journey: Intake and Assessment; Reablement Services: Integrated Discharge Service; Longer Term Care Service including Review functions, Occupational Therapy (including Sensory Impairment), and Day Services (Older People and People with a Physical Disability). This reflects the current stage of the social care and health integration journey where elements of Cardiff Council and the Cardiff and Vale University Health Board work jointly with the Vale of Glamorgan Council.

Learning Disability Services are delivered through a joint team with Abertawe Bro Morgannwg University Health Board. It provides a specialist, multi-disciplinary service for learning disabled individuals. This includes Assessment and Care Management, an Integrated Autism service, Adult Placement Scheme and Day Opportunities in line with the Learning Disability Day Services Strategy.

The Vale of Glamorgan Community Mental Health Teams (CMHTs) are jointly operated by Cardiff and Vale University Health Board (UHB) and the Vale of Glamorgan Council. They offer a specialist, multi-disciplinary service for individuals living with mental ill health. CMHTs form part of an integrated 'network of care' that is delivered in conjunction with inpatient, crisis and specialist mental health services, the Primary Care Mental Health Support Services, a range of third sector support providers and community and housing support provided by Vale of Glamorgan Housing Services.

The Vale of Glamorgan Substance Misuse Services are delivered in partnership with the Cardiff and Vale University Health Board to provide rehabilitative interventions for people whose substance misuse is affecting their wellbeing or safety. The Vale Substance Misuse Social Work Service forms part of an integrated care pathway through safe usage, treatment and recovery.

The Vale of Glamorgan's own residential care homes provide care to over 100 residents across four local authority owned homes; Southway (Cowbridge), Cartref Porthceri (Barry), Ty Dewi Sant (Penarth) and Ty Dyfan (Barry) which also hosts our six bed reablement unit to support people to regain their independence following recent event for up to six weeks.

1.2 The Purpose of Our Service Plan

This plan identifies how we will contribute towards achieving the Council's vision – **'Strong Communities with a bright future'**.

Our service plan outlines our key priorities for the next four years and how we will manage our resources to deliver these. The plan gives an overview of our service, what we aim to achieve, why this is important, how we will achieve it, how we will monitor progress and what success will look like.

It is important that as a Council we have shared values and our service is committed to delivering its priorities within the context of the Council's core values:

- **Ambitious:** Forward thinking, embracing new styles of working and investing in our future.
- **Open:** Open to different ideas and being accountable for the decisions we take.
- **Together:** Working together as a team that engages with our customers and partners, respects diversity and is committed to quality services.
- **Proud:** Proud of the Vale of Glamorgan: proud to service our communities and to be part of the Vale of Glamorgan Council.

Our Council's priorities are contained in the Corporate Plan 2016-20 and are expressed as well-being outcomes and objectives. These have been decided upon following consultation with key stakeholders including citizens of the Vale of Glamorgan. Our well-being outcomes and objectives are:

| Well-Being Outcome | An Inclusive and Safe Vale | An Environmentally Responsible and Prosperous Vale | An Aspirational and Culturally Vibrant Vale | An Active and Healthy Vale |
|----------------------|---|---|---|---|
| Well-Being Objective | Reducing poverty and social exclusion | Promoting regeneration, economic growth and employment. | Raising overall standards of achievement. | Encouraging and promoting active and healthy lifestyles. |
| Well-Being Objective | Providing decent homes and safe communities | Promoting sustainable development and protecting our environment. | Valuing culture and diversity | Safeguarding those who are vulnerable and promoting independent living. |

The well-being objectives illustrate the contribution Council services will make to achieving the Well-being Goals for Wales. The Well-being Goals have been established to ensure all relevant bodies in Wales are working towards the same vision as part of the Well-Being of Future Generations (Wales) Act 2015. The Act is about improving the social, economic, environmental and cultural well-being of Wales. The Act is intended to make public bodies think more about the long-term, work better with people and communities and each other, look to prevent problems and take a more joined-up approach. The contribution our service will make to the well-being goals is highlighted throughout our service plan.

1.3 Developing Our Plan

Our service plan is set for one financial year. It is informed by and reflects the environment within which our service operates. As well as contributing to the well-being outcomes and objectives from our Corporate Plan, our service has taken the following into consideration when drafting our plan:

- The Directorate's Annual Self-Assessment for 2017 which provides an overall position statement for the year based on specific issues relating to performance, customer experience and the use of resources (workforce, financial, ICT and assets);
- The Director of Social Services Annual Report 2016/17;
- The need to meet new service requirements with limited public sector resources available to implement the changes, including those arising from the statutory obligations required by the

Social Services and Well-being (Wales) Act and the upcoming implementation of the Regulation and Inspection of Social Care Act, 2016;

- Cardiff and Vale University Health Board's Integrated Medium Term Plan;
- Cardiff and Vale's Population Needs Assessment.

1.4 How We Work - Sustainable Development

The Well-being of Future Generations (Wales) Act puts in place a 'sustainable development principle' which tells organisations how to go about meeting their duty under the Act:

"You must act in a manner which seeks to ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs, by taking account of the sustainable development principle".

The sustainable development principle means considering how actions are taken to support continuous improvement by:

- Looking to the **long term** – for us this means planning for the future and taking a strategic approach to ensure services are sustainable and that we understand the future need and demand for services.
- Taking an **integrated** approach – for us this means thinking about the needs of our customers and working with our partners.
- **Involving** the population in decisions – for us this means engaging with our residents and customers, including the business community and ensuring that we are listening to a wide range of views to inform our thinking.
- Working in a **collaborative** way – for us this means recognising we can achieve more and deliver better services by working as part of a team, for example by working with the Third Sector, Town and Community Councils and neighbouring authorities.
- Understanding the root causes of issues and **preventing** them – for us this means being proactive in our thinking and understanding the need to tackle problems at source for example by undertaking needs assessments to inform our priorities.

In response our Corporate Plan 2016-20 has reflected on the ways of working ensuring that it is consistent with our approach to planning for the future. These considerations are also reflected in the actions we will take as a service to deliver the Council's priorities.

2. Our Corporate Plan Priorities for 2016-20

2.1 Corporate Plan Priorities

Over the next few years Adult Services will take the actions outlined below to contribute to the Corporate Well-being Outcomes and Objectives.

| Well-being Outcome/Scrutiny Committee | Well-being Objective | Ref | Action |
|---|---|-------|---|
| WO4: An Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living | AH7 | <p>Implement new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work-streams of:</p> <ul style="list-style-type: none"> - provision of information, advice and assistance services - eligibility/assessment of need - planning and promotion of preventative services - workforce - performance measures.(2016/17) <p><i>Going forward the focus is on ongoing implementation of new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work-streams as outlined in the Sustainable Social Services Regional Implementation Plan (annual) monitored via the Regional Steering Group.</i></p> |
| WO4: Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living | AH8 | <p>Improve access to health and social care services by improving the speed, simplicity and the choice of how to access services (2018/19).</p> <p><i>During the coming year the focus will be on improving access to health and social care services by improving the speed, simplicity and the choice of how to access services through the effective provision of an Information, Advice and Assistance (IAA) service and improve preventative services provided by communities through new models of working</i></p> |
| WO4: Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living. | AH9 | <p>Work with partners to progress the integration of adult social care and community health services (2018/19).</p> |
| WO4: Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living | AH 12 | <p>Minimise delays in transfers of care and discharge from hospital through improved co-ordination of services and the delivery of the Accommodations Solutions Service (2017/18).</p> |
| WO3: An | O6: Valuing culture | AC12 | <p>Implementing the Welsh Language Standards to</p> |

| | | | |
|---|-----------------------------------|------|---|
| Aspirational and Culturally Vibrant Vale (L&C) | and diversity | | improve access to services and information. (2019/20) |
| WO3: An Aspirational and Culturally Vibrant Vale. (L&C) | O6: Valuing culture and diversity | AC10 | Improve our knowledge of the diverse needs of the community, so that groups of people protected under the Equality Act 2010 can better access Council services. (2019/20) |

2.2. Integrated Planning Priorities

Our service is committed to maximising the use of resources so that we can deliver sustainable and cost effective services that best meet people's needs. In order to achieve this, we have identified a series of priorities 'enabling actions' that will support us in delivering the key outcomes identified in our Corporate Plan. The key areas of focus for our service over the next four years will be:

| Ref | Action |
|-----|---|
| CP1 | Deliver the Council's transformational change programme, Reshaping Services, to enable it to meet the future needs of citizens of the Vale of Glamorgan within the context of unprecedented financial challenges (2019/20). |
| CP2 | Align the workforce plan to the Reshaping Services strategy ensuring that staff have the necessary skills and training to adapt to the changes in how services are planned and delivered (2017/18). |

3. The Year Ahead (2018-19)

3.1. Our Annual Service Priorities for 2018-19

During 2018-19 our service will undertake the actions outlined below to contribute to Year 3 of the Corporate Plan Well-being Outcomes and Objectives.

| Well-being Outcome/ Scrutiny Committee | Well-being Objective | Ref | Action | During 2018/19 we will: |
|---|--|-----|---|---|
| WO4: An Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living | AH7 | Ongoing implementation new ways of working in light of the Social Services Well-being (Wales) Act with a particular focus on the priority work-streams as outlined in the Sustainable Social Services Regional Implementation Plan (annual) monitored via the Regional Steering | <ul style="list-style-type: none"> Review and amend processes at the Customer Contact Centre to support provision of advice and assistance (IAA model) in line with requirements of the Act. Promote the use of Dewis Cymru for the provision of information, advice and assistance for preventative services for adults. |

| Well-being Outcome/ Scrutiny Committee | Well-being Objective | Ref | Action | During 2018/19 we will: |
|--|---|-----|---|---|
| | | | Group: - provision of information , advice and assistance (IAA) services - eligibility/assessment of need -planning and promotion of preventative services - workforce - performance measures (2016/17) | |
| WO4: Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living | AH8 | Improve access to health and social care services by improving the speed, simplicity and the choice of how to access services (2018/19). | <ul style="list-style-type: none"> • Continue to develop the Customer Contact Centre as the single point of access for community health and social care services through expanding the range of services which it coordinates and enables. • Undertake further expansion of the Adult Placement Scheme. • Develop a Learning Disability Commissioning Strategy to ensure we can effectively meet the needs and outcomes of our service users both now and in the future. • Increase the use of Direct Payments to enable service users increased control over their care and support needs. |
| WO4: Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living. | AH9 | Work with partners to progress the integration of adult social care and community health services (2018/19). | <ul style="list-style-type: none"> • Maximise access to and use of grant funding streams such as of Integrated Care Funding to support the development of further integrated services. • Work with partners to develop locality models further in response to the recommendations of the Parliamentary Review. • Implement the new Community Mental Health Teams Integrated model to support working age adults with mental health needs • Improve communications with Mental Health Service in order to |

| Well-being Outcome/ Scrutiny Committee | Well-being Objective | Ref | Action | During 2018/19 we will: |
|---|--|------|---|---|
| | | | | <p>support effective transition for young people to move into Adult Mental health Services.</p> <ul style="list-style-type: none"> • Work with partners to launch a 10 year Dementia Strategy to better integrate service via a multi-agency service model. • Further develop and enhance the Integrated Autism Service with a specific focus on enhancing links with other services, service users and their carers and the provision of training for professionals. |
| WO4: Active and Healthy Vale (HL&SC) | O8: Safeguarding those who are vulnerable and promoting independent living | AH12 | Minimise delays in transfers of care and discharge from hospital through improved co-ordination of services and the delivery of the Accommodations Solutions Service (2017/18). | <ul style="list-style-type: none"> • Further enhance the Integrated Discharged Service through implementing a Joint Care Package Approval Process with Cardiff and Vale UHB. • Explore options to undertake this using finance modules of WCCIS |
| WO3: An Aspirational and Culturally Vibrant Vale. (L&C) | O6: Valuing culture and diversity | AC10 | Improve our knowledge of the diverse needs of the community, so that groups of people protected under the Equality Act 2010 can better access Council services. (2019/20) | <ul style="list-style-type: none"> • Continue to improve equality monitoring data to enable more informed decisions about service delivery. |
| WO3: An Aspirational and Culturally Vibrant Vale (L&C) | O6: Valuing culture and diversity | AC12 | Implementing the Welsh Language Standards to improve access to services and information. (2019/20) | <ul style="list-style-type: none"> • Ensure compliance with the 'More than just words' policy and the Welsh Language Standards. • Continue to promote and provide opportunities for staff to access Welsh language courses. |

| Ref | Action | During 2018/19 we will: |
|-----|---|--|
| CP1 | Deliver the Council's transformational change programme, Reshaping Services, to enable it to meet the future needs of citizens of the Vale of Glamorgan within the context of unprecedented financial challenges (2019/20). | <ul style="list-style-type: none"> • As part of Tranche 2 continue to support delivery of the Council's reshaping agenda and its associated projects. • Progress the reshaping of the in-house residential care service. • Continue to increase the provision of direct payments and particularly in relation to citizens with a learning |

| Ref | Action | During 2018/19 we will: |
|-----|---|--|
| | | <p>disability to enable greater choice and control.</p> <ul style="list-style-type: none"> • Increase the use of reablement home care to help people to achieve their potential for independence and reduce the need for externally commissioned care and support. |
| CP2 | Align the workforce plan to the Reshaping Services strategy ensuring that staff have the necessary skills and training to adapt to the changes in how services are planned and delivered (2017/18). | <p>Continue to review and strengthen the performance management and support arrangements in relation to sickness absence within the service.</p> <p>Deliver our key workforce development priorities for the coming year as outlined below:</p> <ul style="list-style-type: none"> • Support staff to receive the necessary training and development to undertake their roles effectively and in compliance with the Social Services and Well-being (Wales) Act and Regulation and Inspection of Social Care Act, 2016; • Explore options in terms of succession planning, in relation to the ageing profile of some teams as well as the more skilled social worker and team manager tiers. • Continue to enhance the Management Development Programme so that current and future managers are equipped with the skills required to manage modern social services; • Identify critical posts to the business as well as areas where recruitment difficulties exist in order to explore options to target recruitment more effectively and recruit to vacant positions. • Continue to focus on reducing our reliance on agency staff, where recruitment of permanent staff continues to present challenges. |

Appendix A contains the detailed plan which outlines the actions we will undertake in the coming year to deliver our Year 3 (2018/19) priorities for the Corporate Plan.

Appendix B outlines the ‘enabling’ actions we will undertake to maximise the use of our resources to enable us to deliver our priorities for the same year.

3.2. Managing Our Resources to Deliver Our Priorities

The following sets out how we will manage our resources to achieve the actions in our Service Plan and support our service.

Integrated Planning

We are committed to maximising the use of our resources so that we can deliver sustainable and cost effective services that best meet people’s needs. For 2018/19, we have identified a series of ‘enabling actions’ that will support us to deliver our priorities for Year 3 of the Corporate Plan and contribute towards the Corporate Plan Well-being Outcomes.

This section provides a summary of these actions, outlining how we will use our resources (including our workforce, ICT, finance, assets and customer insight) and manage identified risks in order to deliver planned improvement.

Workforce Development

| Key Service Statistics 2016/17 | | | | | | |
|--------------------------------|-------------|-------------------|------------|-------------------------------|--------------------------|-----------------------------|
| Average headcount 2016/17 | FTE 2016/17 | Average days sick | | Average days sickness per FTE | Turnover (no of leavers) | #itsaboutme completion rate |
| | | Long term | Short term | | | |
| 383 | 291.13 | 7.79 | 4.38 | 12.17 | 50 (13.05%) | 95% |

During 2017/18, 87% of (#itsaboutme) staff appraisals have been completed for the service compared to 95% in 2016/17.

Going forward the key workforce issues impacting on the service are:

- Managing sickness absence rates continues to be an area of development across the division. Based on current data at Q2 (6.51 days per FTE), the service is on track to achieve a performance of just over 13 days per FTE in 2017/18 which will fall short of the Directorate's annual target of 11.6 days per FTE and last year's reported performance of 12.17 days per FTE. At Q2 2017/18 the service reported long term sickness at 4.99 days per FTE compared to 7.79 days per FTE for the whole of last year. The top four most common reasons for sickness absence within the service during 2016/17 and at Q2 related to stress, operations and recovery, viral infections and musculoskeletal Disorders. The service continues to be proactive in implementing risk assessment approaches, providing stress awareness training for staff and signposting to the Employee Assistance programme, and automatic referral of stress cases to occupational health. This absence is putting additional pressure on remaining staff who have to cover these absences as well as their own areas of work. These issues relate particularly to the Longer Term Care Team, C1V Social Services Team and Community Resource Services. If this trend continues it is likely to have a significant impact on capacity within the service overall.
- As at September 2017, Adult Services has an establishment of 303.98 FTEs compared to 297.3 FTEs at the same time period in 2016 and the workforce has remained relatively static. During the same time period, the service reported an overall turnover rate of 5.89% (of which 3.33% was voluntary) compared to just over 5.16% (of which 4.13% was voluntary) in 2016 and we currently remain on track to see a reduction on last year's overall performance of 13.05%. Going forward, the service is anticipating a continued decrease in turnover levels as it continues to implement its new ways of working whilst continuing to review how it delivers other services in order to improve efficiency and effectiveness, in line with the Reshaping Services programme and the requirements of the SSWB Act. We will continue our focus on flexibility within roles and increased emphasis on learning and development, innovation, improved performance and staff engagement which is anticipated will help build resilience within teams and the service as a whole.
- The age profile of staff whilst not a cause of concern in the short term, remains a major area of development for the service, as nearly 70% of employees are between the ages of 45 and 65+. As at September 2017, the age profile of the service is as follows: [4% (65+); 33% (55-64); 32% (45-54); 17% (35-44); 12% (25-34); 2% (16-24)]. Since last year there has been an increase in the 25-34 age category by 2% and the 55-64 category by 2%. There has been a 4% reduction in the 35-44 age category. To ensure continued resilience within teams for the long term, there is a need

increase the number of staff within the 16-24 and 25-34 categories especially as several staff are approaching retirement. We will continue developing initiatives with a focus on building capacity within specialist areas in order to increase resilience within the service.

- There continues to be a need to focus on developing skillsets within the division that enables us to effectively support the change management process of the Reshaping Services agenda as well as ensure that our current and future managers are equipped with the skills required to manage modern social services. Whilst we continue to sponsor Social Care Officers to obtain a Social Work qualification via University, the posts funded are limited by the financial resources we have available in any given year. However, we continue to enhance our Management Development Programme and proactively engage with social services staff in driving through this agenda.
- There is a need to focus on reducing our reliance on agency staff, where recruitment of permanent staff continues to present challenges and we will continue to explore options for succession planning to address these issues as well as those associated with an aging workforce, and business critical/ specialist posts in order to increase service resilience for the future.
- The service continues to struggle to recruit to residential care posts and reablement support workers across the service, primarily due to the salary as comparable salaries are available elsewhere in less demanding roles. There is a need to build greater flexibility and progression into the system to make care work more attractive as a profession as well as explore more creative forms of recruitment by further embracing the use of Social Media and Open Days which are already doing.
- Recruitment to critical posts also remains a problem in relation to Approved Mental Health Professionals.

It is important that we continue to maintain and develop the workforce necessary to meet future service needs both in terms of the numbers employed and the skills and competency required of those employees. It remains a priority for Adult Services to continue to support staff development and succession planning despite the pressures of budget and staffing reductions. Our key workforce development priorities for the coming year are:

Our key workforce development priorities for 2018/19 are as follows.

- To continue to support staff to receive the necessary training and development to undertake their roles effectively and in compliance with the Social Services Wellbeing (Wales) Act;
- To support staff in the ongoing implementation of the integrated ICT system – Welsh Community Care Information System (WCCIS)
- Explore options in terms of succession planning, in relation to the ageing profile of some teams as well as the more skilled social worker and team manager tiers in order to increase service resilience.
- Continue to support current and future managers to ensure they are equipped with the skills required to manage modern social services through continuing to enhance the Management Development Programme;
- Identify the critical posts to the business as well as areas where recruitment difficulties exist in order to explore options to target recruitment more effectively and recruit to vacant positions.
- Continue to focus on reducing our reliance on agency staff, where recruitment of permanent staff continues to present challenges.
- Maintain our focus on strengthening the performance management and support arrangements in relation to sickness absence within the service.

ICT

In line with Corporate direction, we continue to use ICT to work smarter and more flexibly. Our significant projects for the coming year are as follows. We will:

- WCCIS
- Pilot the purchase of agile working technology across a team with Adult Services.
- Develop and implement a new self-service payment facility online for domiciliary care and Telecare payments.
- Support delivery of the Digital Place strand of the Digital Strategy.
- Review the content and accessibility of our web pages and social media interactions with citizens, including maximising the potential for self-referral to services and online payments where appropriate.

Finance

The estimated base budget for our service area for 2018/19 is £43,683,000 and the planned improvement activities for 2018/19 focus on delivering the in-year savings identified for the service. The service also faces significant cost pressures in 2018/19 totalling £2.692m in relation to the community care packages budget. However, over the next two years, we are also required to deliver further savings which are outlined below.

| Scheme | 2018/19 (£000) | 2019/20 (£000) | Total (£000) |
|--|---------------------------|---------------------------|-------------------------|
| Review of management of adult care packages and day services | 320 | 330 | 650 |
| Total | 320 | 330 | 650 |

Adult Services will also be contributing to the delivery of general policy and council-wide savings. For 2018/19 these are:

- Review of the Procurement (Reshaping Tranche 3)- £1m
- Income and Commercial Opportunities (Reshaping Tranche 3)- £550k
- Digital Strategy (Reshaping Tranche 3) – £250k
- Establishment Review (Reshaping Tranche 3) – £250k
- Minimum Revenue Provision – £1.5m

Assets

In line with the Corporate Strategy, we are focusing on ensuring the suitability and sufficiency of our assets to meet service and corporate objectives by targeting any underperforming assets; reducing the amount of accommodation used to deliver services; and identifying opportunities to provide multiple service delivery from an asset (co-location). Our key areas of focus for 2018/19 are:

- Undertake a full review and assessment of all our assets as well as Third Party providers to provide a clear building compliance position in relation to all buildings and to address where appropriate issues on non-compliance as they arise.
- Transform Rhoose Road into a Supported Living facility as part of the Reshaping Services programme to bring clients back from out of county placements and reduce costs. It is anticipated that the new facility will support three clients in a supported living setting.

- Review the quality of our existing assets to ensure they are 'fit for purpose' both now and in the future, which includes identifying options for the way forward in relation delivery of integrated health and social care services.
- Continue to develop Ty Jenner as a Health and Social Care Hub, whilst considering other options that our health partners may provide through other funding initiatives.

Procurement

In line with corporate guidance, we are committed to promoting effective procurement using innovative, sustainable and modern practices to deliver value for money and contribute to the achievement of corporate well-being outcomes. Our significant projects for the coming year are:

- Renewal of contract for the use of temporary agency staff in residential care homes.
- Direct payments/management and support service - Dewis Cymru
- Procure a new Independent Advocacy Service for Adult Services.
- Retender of the Extra Care Service.
- Procure support services for people with visual impairment.
- Continue to explore further opportunities for regional based commissioning of Adult Services.

Consultation and Engagement

We engage with our key stakeholders with a particular focus on Adult services. Highlighted below are our planned activities for the coming year.

Our planned consultation activities for 2018/19 are:

| Consultation activity planned for 2018/19 | Brief description of the purpose of the consultation |
|--|--|
| Qualitative Measures for Adult Services (November 2017-February 2018). | As in 2016/7, questionnaires have been developed by the Welsh Government and will be sent to a sample of all adults with a Care and Support Plan, and unpaid carers who received a carer's assessment as at November 1 st 2017. All will be sent paper questionnaires and prepaid return envelopes. Interviews will also be carried out where appropriate via telephone or face to face. Questionnaires will be developed in both English and Welsh, and Easy Read versions will be made available for each service user group. |
| Contact OneVale (Information Advice and Assistance) | Questionnaires will be sent to those who have contacted C1V to ascertain their satisfaction with the information and advice service they have received. Questionnaires will be sent by the team once a proportionate assessment has been carried out. |
| Adult Placement Service | Interviews will be carried out with service users at their placements. Host questionnaires will be sent via post. Consultation report to incorporate both qualitative measures outcomes and host questionnaires. |
| Residential Service | Interviews will be carried out with residents of all Council run residential homes. Their relatives/carers will also be contacted for their views. The qualitative measures questionnaires that are returned from those living in residential homes will also be considered as part of this. |
| Older People's Day Services | Interviews will be carried out with those who attend the day |

| Consultation activity planned for 2018/19 | Brief description of the purpose of the consultation |
|---|---|
| | centre. For this consultation, both questionnaires and structured interviews will be used. A British Sign Language interpreter will also be available to facilitate an interview with one of the service users. |
| Physical Disabilities Day Services (New Horizons) | Experts by Experience workshops have taken place during 2017, and the Policy and Quality Assurance Officer will be involved in taking the action plan forward in relation to continued engagement with the service users. Interviews will also take place based on the qualitative measures questionnaires so that they can inform local service development. |
| Dementia Strategy | Consultation to take place with service users to inform the Dementia Strategy. Question areas will be based on the advice and support service users and their families have received in relation to dementia support. |



Collaboration and Partnerships




We continue to explore and promote opportunities for working collaboratively locally and regionally in order to deliver improved services for customers and deliver savings. Highlighted below are our planned activities for the coming year.




| Activity planned 2018/19 | Brief description of the purpose and intended outcomes from the partnership/collaborative activity. | Governance arrangements and details of partners involved. |
|--|--|--|
| Regional Independent Professional Advocacy Service for adults | Working in collaboration with other partners to develop an advocacy contract that complies with regional commissioning approach with the Vale of Glamorgan acting as the lead. | Vale of Glamorgan Council acts as the identified lead. Regular monitoring meetings regarding contract arrangements/compliance |
| Ongoing implementation of requirements of the Social Services Well-being (Wales) Act regionally with our key partners. | To continue to work together cohesively to implement the remaining requirements of the Act. | Regional Steering Group. |
| Implementation of requirements of the Welsh Community Care Information System. | To support the full implementation of the software across the Adult Services division. | WCCIS Operational Group. |
| Continued delivery of work streams associated with Integrated Care Fund. | To maximise the use of ICF monies to further enhance and improve services to support older people to maintain their independence and in relation to the Integrated Autism Service and Complex Needs service within Learning Disability Services. | Social Services Collaborative Working Board involving partners from the Third Sector, Independent Sector, University Health Board and Cardiff Council. |





Risk Evaluation





Highlighted below are our key risks as a service over the coming year. In addition to our service specific risks, there are a number of corporate level risks which impact on our service and these are identified below. In identifying these risks we have also shown how we are managing them.




| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|---|---|
| | Likelihood | Impact | | |
| CR1: Reshaping Services | | | | |
| Political & Legislative: Failure to continue to provide priority services. | 2 | 2 | <p>Effective challenge is in place to identify project work with a mixed economy model approach to Reshaping approved.</p> <p>Tranche 3 projects of a corporate nature lessen the impact on front line services.</p> <p>Risk management processes are embedded into project management to identify and mitigate the impacts on service users.</p> <p>Programme documentation makes linkages with Well-being of Future Generations Act.</p> <p>Ensuring sufficient resources are available to deliver projects.</p> <p>Emphasis on staff engagement in the Reshaping Services programme.</p> <p>Mandatory training provided to team leaders and managers in line with the Management Development and Competency Framework, aligned to the Reshaping programme.</p> |  |
| Resources: Failure to maximise and mobilise our existing resources in terms of skillsets, technology and assets to deliver the Reshaping Programme and make financial savings. | 1 | 2 | <p>Management Development Programme and Competency Framework aligned with the requirements of the Reshaping Programme. An Organisational Development Work stream is in place to support the programme.</p> <p>Programme Board and Manager in places with project team resources considered for each project.</p> <p>Business cases developed for all projects and guidance in place.</p> <p>Regular monitoring of savings by Cabinet.</p> <p>Programme Board and Scrutiny</p> |  |




| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|--|---|
| | Likelihood | Impact | | |
| | | | Committees. | |
| Service Delivery & Well-being: Failure to effectively engage and communicate with our partners and service users to identify new ways of working and maximise opportunities to deliver alternative service models that best meet the diverse needs of the local community. | 2 | 2 | <p>Business cases consider non-financial implications of any proposed changes.</p> <p>Equality Impact Assessments embedded within the overall programme's management approach.</p> <p>Communications and engagement activities inform project development.</p> <p>Risk management processes embedded in project management to identify and mitigate impacts on service users.</p> <p>Programme documentation makes linkages with Well-being of Future Generations Act.</p> |  |
| Reputation: Reputational damage as a result of failing to deliver the Reshaping programme's aims and objectives and the negative criticism this could attract from both residents and our external regulators. | 2 | 2 | <p>Risk management contained within project documentation.</p> <p>Regular updates to Cabinet and Programme Board on status of the programme.</p> <p>Consultation on the Council's budget annually includes questions relating to the approach being taken on Reshaping Services. All reshaping projects involve key stakeholders including service users in reviews of services.</p> <p>Programme Board includes representatives of partners as appropriate.</p> |  |
| CR6: Workforce | | | | |
| Political & Legislative: Political and legislative repercussions of failing to implement the Council's Workforce Plan and the ability to ensure our workforce needs are met in the future. | 2 | 2 | <p>CMT and Cabinet receive regular reports on a range of HR issues and developments across all service areas.</p> <p>Refreshed Workforce Plan aligned to the new Corporate Plan in relation to workforce needs and reflected in service plan.</p> <p>Robust performance management arrangements in service which reflect the Corporate Plan 2016-20, Human Resources Strategy, Workforce Plan 2016-20 and the Council's Reshaping Services agenda.</p> |  |




| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|---|---|
| | Likelihood | Impact | | |
| <p>Resources: Inability to anticipate and plan future workforce needs and to recruit and retain suitably qualified staff and leaders with the appropriate skills in the right areas to deliver services effectively.</p> | 2 | 2 | <p>Managers are supported through the management of change through training and ongoing advice from HR Officers.</p> <p>Leadership Café established to support succession planning and leadership development across the Council and Adult Services staff are encouraged to engaged in this process.</p> <p>Improvements made to workforce planning processes. Integrated approach to business planning including overview by Corporate Insight Board.</p> <p>Launched a new Training and Development Strategy and Management Competency Framework which is supporting staff and managers to upskill and enhance succession planning.</p> <p>New 'Staff Charter' promoted to the Service's managers and staff.</p> <p>Continue to monitor and report performance against corporate health indicators including labour turnover and attendance data.</p> |  |
| <p>Service Delivery & Wellbeing: Inability to anticipate and plan for workforce needs and manage and support organisational change in order to deliver sustainable services both now and in the future.</p> | 1 | 1 | <p>Workforce Planning delivered with a focus on alternative service delivery and workforce implications reflected in service planning.</p> |  |
| <p>Reputation: Negative perception of the Council amongst citizens as an employer impacting on our recruitment and retention rates across the service.</p> | 2 | 2 | <p>New Staff Charter and Staff Engagement Strategy widely promoted to colleagues.</p> <p>Corporate Staff Engagement Strategy in place and comprehensive engagement programme established.</p> <p>Recruitment adverts promote the Council as an equal opportunities employer.</p> <p>We have in place a well-established Career Progression Framework.</p> |  |



| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|--|---------------|--------|--|---|
| | Likelihood | Impact | | |
| | | | Merged the training service. Promote the work of the service and Directorate. | |
| CR7: Information Security | | | | |
| Political & Legislative: Political and legislative repercussions as a result of failing to put in place effective information security safeguards. | 2 | 2 | DPA/ICT Code of Conduct in place together with Access to Information Procedures, that is signed for by all staff and Members. Online training made available to staff on DPA and an introduction to their information security responsibilities. A project plan has been developed to prepare for compliance with the General Data Protection Regulation. |  |
| Resources: Failure to implement adequate ICT management systems and the financial cost associated with data breaches and/or cyber-attacks. | 2 | 2 | Corporate document retention system in place (TRIM) and FOI/Records Management Unit Established. Implementation of new security software (Veronis and Clear Swift) to give us improved data security. Secure e-mail solution in place and use of encrypted laptops within service. Nominated systems administrators and system audit trails/admin logs maintained. Regular penetration testing of systems. |  |
| Service Delivery & Wellbeing: Loss of data impacting on the delivery of key services and the impact of a data breach on our service users and their ability to access our services readily. | 2 | 2 | Adhere to Corporate Information Security and Governance Framework. Information Sharing Protocols in place with our key partners. Revised Information Management Strategy reflects how the Council's plans to use technology will support the delivery of the Council's Corporate Plan and how it will safeguard information that we exchange between organisations and our partners. |  |
| Reputation: Loss of confidence and trust by the public as a result of data breaches and the lack of credibility and | 2 | 2 | Consent gained for recording and sharing of personal information from key stakeholders including partners and citizens. Information provided on how personal data is used, stored and shared |  |






| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|---|---|
| | Likelihood | Impact | | |
| criticism from our external regulators and the Information Commissioner this would attract. | | | in line with Council information security arrangements. We publish and highlight through our fair data processing statements how personal information/data we collect on individuals is used, stored and shared. | |
| CR10: Corporate Building Compliance | | | | |
| Political & Legislative - Political and legislative repercussions of failing to meet our statutory responsibilities in relation to Public Building compliance associated with health and safety legislation. | 2 | 4 | Issues are monitored and discussed by a Building Compliance Working group on a regular basis and key issues/developments reported to Insight Board, CMT and Cabinet as necessary. |  |
| Resources - Failure to put in place appropriate systems, processes and resources in order to monitor building compliance and address any shortfalls in compliance, this also applies to the contracting out/commissioning of services to be delivered by a Third Party provider. | 2 | 2 | IPF Management system is operational, that is, a recording and monitoring system for all building compliance data relating to our assets. This management system is supported by a newly established Compliance Team. Developed an inventory of all Social Services premises which includes private (Third Party) establishments where clients attend. |  |
| Service Delivery & Wellbeing - Risk of injury/harm to service users and or their carers due to failing to effectively manage our building compliance risks. | 2 | 4 | Developed an inventory of all Social Services premises which includes private (Third Party) establishments where clients attend. Ensure regular review of all of our public buildings within the division to ensure electrical, gas, asbestos, legionella, fire and lift checks/assessment are undertaken within the designated time frames |  |
| Reputation - Erosion of public confidence and trust in the Council as a result of a compliance failure that would damage its reputation and attract negative criticism from Welsh Government our regulators. | 2 | 4 | In recognition of the increased responsibilities regarding compliance, the Directorate appointed to an Operational Manager position whose role it is to co-ordinate premises owners and ensure that we are compliant. |  |

| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|---|---|
| | Likelihood | Impact | | |
| CR11: Safeguarding | | | | |
| Political & Legislative: Political and legislative repercussions of failing to meet our statutory responsibilities where people are at risk of neglect/abuse and as a consequence our safeguarding procedures are deemed insufficient and ineffective. | 1 | 2 | <p>The All Wales Procedures and associated protocols are embedded in Social Services and are reviewed and updated nationally.</p> <p>Contribute to the ongoing cyclical review of the All Wales Protection procedures.</p> <p>Build and develop on the Regional Safeguarding Board's model.</p> <p>Engage with the Regional Safeguarding Boards, and the Council's Corporate Safeguarding Steering Group.</p> |  |
| Resources: Failure to comply with the corporate safeguarding requirements especially in relation to recruitment and staff training. | 1 | 2 | <p>Safer Recruitment Policy is in place to ensure checks on staff working with vulnerable adults are carried out.</p> <p>Referral of Safeguarding Concerns procedure in place, staff have an understanding of the 'Duty to Report' in line with the Act.</p> <p>Staff Supervision policy in place within the division with regular monitoring of quality and practice of those staff.</p> <p>Mandatory safeguarding, child/adult protection, Regional Safeguarding Board and Safer Recruitment training provided to staff as well as training on the Council's Corporate Safeguarding Policy. We have a Local Authority Designated Officer who is accountable for safeguarding and the protection of children and young people and adults in accordance with safeguarding requirements.</p> <p>Launched a new Safeguarding hotline to support staff to have a single point of contact to report any concerns they have regarding the well-being of an adult or a child.</p> |  |
| Service Delivery & Wellbeing: Failure to put in place appropriate safeguards for children and young people and adults resulting in | 1 | 2 | <p>Provider Performance Protocol Procedures in place and embedded in relation to commissioned services.</p> <p>Ensure that protection, fieldwork and contracting services work together to</p> |  |

| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|--|---------------|--------|---|---|
| | Likelihood | Impact | | |
| potential harm/injury. | | | protect people at risk and take timely and appropriate action to ensure protection measures are in place. | |
| Reputation: Erosion of public confidence and trust in the Council as a result of a Safeguarding incident that would damage its reputation and attract negative criticism from our regulators. | 1 | 4 | Information sharing protocols in place and used appropriately. Regular monitoring and reporting of compliance corporately. Robust safeguarding policies and procedures in place, with experienced staff supporting this area of work, ensuring that confidence in how the Division responds to safeguarding concerns is high. |  |
| CR14: Contract Management | | | | |
| Political & Legislative: Political and legislative repercussions for breaching the Council's procurement procedures and/or EU Tendering thresholds which puts the service/Council at risk of challenge. | 1 | 2 | Situation with regard to the finalisation of contracts reported to CMT on monthly basis. Updates regarding contract monitoring and management are considered by Audit Committee. Commissioning arm within Resource Management and Safeguarding provides clear and consistent advice and support on contract management to Adult Services. |  |
| Resources: Failure to challenge poor contractual performance and the impact this has on the ability to deliver cost-effective services that meet service user/customer need. | 1 | 2 | Situation with regard to the finalisation of contracts reported to CMT on monthly basis. Implemented and revised the Provider Performance Protocol to enable us to address areas of poor performance with providers and taking corrective action where required. Commissioning arm within Resource Management and Safeguarding provides clear and consistent advice and support on contract management to Adult Services. Revised Procurement Code of Practice published on StaffNet. Procurement pages on the Staffnet updated with key processes highlighted for all staff. More detailed training and discussions taken place in services where staff undertake more procurement |  |





| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|--|---|
| | Likelihood | Impact | | |
| | | | <p>activity.</p> <p>Training in relation to Procurement and Contract Management delivered to staff in March 2017 Procurement Code of Practice updated, reviewed via Insight Board and CMT.</p> <p>Joint working group with Cardiff Council and residential/nursing providers to amend current contract documentation.</p> <p>Following this, a similar exercise will be undertaken with the domiciliary sector.</p> <p>Any procured contracts will have the new legislative requirements covered in them.</p> | |
| <p>Service Delivery & Wellbeing: Failure of service arrangement due to poor management/lapse of contract impacts on the ability of the Council to continue to provide priority services.</p> | 1 | 2 | <p>Service performance requirements included in contract documentation.</p> <p>Successfully utilise the Provider Performance Protocol to enable us to address areas of poor performance with providers and taking corrective action where required.</p> |  |
| <p>Reputation: Reputational damage due to poor management/lapse of contact arrangement.</p> | 1 | 4 | <p>Service performance requirements included in contract documentation with performance reviewed as per contract terms.</p> |  |
| CR12: Integrated Health and Social Care | | | | |
| <p>Political & Legislative- Inability and capacity of key partners to work effectively together and failure to put in place governance structures to deliver integrated health and social care services across the region.</p> | 1 | 1 | <p>Information Sharing Protocols developed and operational.</p> <p>Integration of Health and Social Care is considered at all levels of the organisation through the strategic leadership group and the Regional Steering Group</p> <p>Arrangements are reviewed through regular reports to the relevant Scrutiny Committee.</p> <p>Significant changes to the structure and staff are considered by Cabinet and Trade Unions.</p> <p>Head of Adult Services and Locality Manager is a jointly funded post between</p> |  |

| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|---|---|
| | Likelihood | Impact | | |
| | | | the Council and Health Board. | |
| Resource- Failure to effectively agree pooled funding in line with legal frameworks and deliver fully integrated IT systems and the inability of staff to work across the organisational boundaries. | 3 | 3 | <p>Financial authorisation and management of disputes processes are in place with Cardiff and Vale University Health Board for joint funding arrangements.</p> <p>Developed the ability for integrated teams to access information across health and social care systems to view both database systems.</p> <p>IT issues are escalated to Operational Manager for IT and Contact Centre issues are escalated to Head of Performance and Development.</p> |  |
| Service Delivery & Well-being - Impact of poor communication, disproportionate funding and the failure of new service delivery models to deliver health and social care services that meet the diverse needs of the community. | 1 | 2 | <p>Launched the Dewis Cymru Portal that has enabled more effective signposting to services.</p> <p>Continue to develop the Customer Contact Centre as a Single Point of Access for health and social care enquiries and continue to look at ways to expand the range of services accessed via this service.</p> <p>Reviewed and put in place new assessment processes and IT infrastructure to ensure compliance with the Social Services and Well-being (Wales) Act.</p> <p>Effectively utilise the Integrated Care Fund (ICF) to support the development of the Integrated Community Resource Teams and fund wellbeing co-ordinators linked to GP practices. The ICF has also been used to develop a commissioning strategy for accommodation with care and the creation of 6 intermediate beds at the Ty Dyfan reablement unit to support older people following hospital discharge regain independence.</p> <p>Vale Integrated Discharge Service has strengthened links with Hospital Wards to enable rapid access to housing adaptations and supported accommodation to enable more timely discharge from Hospital that best meets client's needs.</p> |  |

| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|---|---------------|--------|---|---|
| | Likelihood | Impact | | |
| Reputation- Failure to manage expectations of service delivery as part of the new delivery models, hence impacting on the Council's reputation. | 2 | 3 | <p>Launched the Dewis Cymru Portal that has enabled more effective signposting to services.</p> <p>Engaged a third sector broker to support the preventative services agenda and signpost people to community based services.</p> <p>Continue to develop the Customer Contact Centre as a Single Point of Access for health and social care enquiries and continue to look at ways to expand the range of services accessed via this service.</p> |  |
| CR15: Transition to Welsh Community Care Information System (WCCIS) | | | | |
| Political & Legislative- Political repercussions of failing to fully implement the new WCCIS within the designated timescales. | 2 | 3 | Initial launch/Go Live has been successful. Delivery of other developmental phases of the system is monitored via operational meetings |  |
| Resource- Failure to maximise and mobilise our existing resources to ensure full implementation/ development of WCCIS across the Directorate. | 2 | 2 | <p>Identified Super Users for the system.</p> <p>Successfully trained all staff on using WCCIS which is now operational. Operational staff contribute to the development of the WCCIS system to ensure Act compliance and fit for practice</p> |  |
| Service Delivery & Well-being- Failure to effectively make the transition to WCCIS and safeguard client information could impact the ability of services users to access services readily. | 2 | 3 | Super Users have been identified that maintain links with the local and regional implementation team. |  |
| Reputation- Reputational impact of not being able to retrieve performance information from the new system (WCCIS) and the archive system (SWIFT) part way through a financial year. | 2 | 3 | <p>Managers engage in ongoing dialogue with Social Services Performance Management Team to ensure that data input is correct to enable extraction as reports are built.</p> <p>Ongoing liaison to ensure that reports are value adding to manage the service.</p> <p>Ongoing dialogue with CIW re performance data availability during transitional period. Consistent messages being given to all partners</p> |  |

| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|------------------|---------------|--------|--|------------------------------|
| | Likelihood | Impact | | |
| | | | regarding our ability to extract and report data at this time. | |

Service-level Risks

| Risk Description | Residual Risk | | Current Controls | Forecast direction of travel |
|--|---------------|--------|---|---|
| | Likelihood | Impact | | |
| AS:SR1 - Service users cannot access the services swiftly and their needs are not met. | 1 | 4 | <p>Effective management of service user expectations. Strict and proper application of eligibility criteria The programme of internal case file audits ensures the fair application of the eligibility criteria across adults and children's services is monitored. The region will also participate in the ADSS DTG Programme – Delivering More Effective Services Work stream which is driving national consistency and implementation of the new eligibility criteria.</p> <p>Maintain appropriate additional routes into the service. Increased monitoring of first contact performance measurement. More integration of processes, services, systems with the Health Board as appropriate.</p> |  |
| AS:SR2 - Insufficient operational staff capacity to ensure timely assessments. | 1 | 4 | We ensure work is prioritised and review systems are in place. Effective screening of assessments for Adult Services is undertaken increasingly by the Contact Centre for both health and social care call via an integrated assessment process. |  |
| AS:SR3 - Capacity of Approved Mental Health Professionals (AMPs) to undertake reviews in line with the requirements of the Mental Health Act. | 2 | 4 | We ensure work is prioritised and review systems are in place. Provide opportunities for staff to be trained to become AMHPs. |  |
| AS:SR4 - Compliance with requirements of requirements of the Social Services and Well-being (Wales) Act. | 2 | 3 | The Regional Steering Group oversees the requirements to deliver successfully the components of the SSWB Act. There are workstreams led by a Head of Service/Assistant Director that continue to operate and ensure that we remain compliant and ensure we are aware of risks. |  |

Appendix C details the risk evaluation scores for our service specific risks and those corporate level risks which impact on the service.

Adult Services Action Plan 2018/19

| | |
|---|--|
| Well-being Outcome 4: An Active and Healthy Vale | Objective 8: Safeguarding those who are vulnerable and promoting independent living |
|---|--|

| | | | | | | | |
|-------------------------|-------------------|-------------------|--------------------|---------------------------------|--|--------------------|------------------------------|
| Well-being Goals | A Resilient Wales | A Healthier Wales | A More Equal Wales | A Wales of Cohesive Communities | A Wales of Vibrant Culture & Thriving Welsh Language | A Prosperous Wales | A Globally Responsible Wales |
|-------------------------|-------------------|-------------------|--------------------|---------------------------------|--|--------------------|------------------------------|

| | | | | | |
|---------------------|-----------|------------|-----------|---------------|------------|
| Our Ways of Working | Long Term | Integrated | Involving | Collaborative | Preventing |
|---------------------|-----------|------------|-----------|---------------|------------|

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------------|---|---|---|------------------------|------------|-------------|--------------------|
| AS/A009 AH7 | Review and amend processes at the Customer Contact Centre to support provision of advice and assistance (IAA model) in line with requirements of the Act. | Processes used by C1V comply with the requirements of the Act and enable services users to access information/ advice in a timely way that enables effective signposting. | | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A022 AH7 | Promote the use of Dewis Cymru for the provision of information, advice and assistance for preventative services for adults. | Increased take up enables people to take control of their wellbeing and contributes towards maintaining their independence for longer. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A005 AH8 | Continue to develop the Customer Contact Centre as the single point of access for community health and social care services through expanding the range of services which it coordinates and enables. | C1V effectively triages calls and is able to respond to queries at first point of contact. | Calls answered at first point via C1V (Response time to calls.) | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------------|--|---|---|---|------------|-------------|--------------------|
| AS/A014 AH8 | Undertake further expansion of the Adult Placement Scheme. | Effective expansion of the Adult Placement service that is cost effective but able to meet the growing and diverse needs of service users | | Operational Manager, Mental Health and Learning Disability Services | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A023 AH8 | Develop a Learning Disability Commissioning Strategy to ensure we can effectively meet the needs and outcomes of our service users both now and in the future. | Delivery of a sustainable Learning Disability Strategy that is able to meet the needs of services users both now and in the future. | N/A | Operational Manager, Mental Health and Learning Disability Services | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A024 AH9 | Maximise access to and use of grant funding streams such as of Integrated Care Funding to support the development of further integrated services. | Increased numbers of older people are supported to live more independently. Integrated Autism Service Complex Needs Service | Rates of older people supported to live independently following reablement support. | Head of Adults Service | 4/1/2018 | 31/3/2019 | ICF |
| AS/A025 AH9 | Improve communications with Mental Health Service in order to support effective transition for young people to move into Adult Mental Health Services. | Principles of good transitional care consistently applied ensuring continuity in care for young people into adulthood. Integrated and person centred approach to supporting young people through their transition into adult mental health services. | N/A | Operational Manager, Mental Health and Learning Disability Services | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------------|--|--|----------------------|---|------------|-------------|------------------------------|
| AS/A026 AH9 | Work with partners to develop locality models further in response to the recommendations of the Parliamentary Review. | In line with the review aims new models contribute towards: <ul style="list-style-type: none"> - Improved health and wellbeing through a focus on prevention; - Improved experience and quality of care for individuals and families; - Improved wellbeing, capability and engagement of the health and social care workforce; and - Increased innovation, use of best practice, and eliminating waste. | N/A | Head of Adults Service | 1/4/18 | 31/3/2019 | Investment monies through WG |
| AS/A027 AH9 | Implement the new Community Mental Health Teams Integrated model to support working age adults with mental health needs. | Care and treatment is holistic and coordinated and addresses the medical, psychological, social, physical and spiritual needs of people accessing mental health service. Individuals are involved and engaged in identifying, planning, developing, delivering and evaluating services to meet their needs. | N/A | Operational Manager, Mental Health and Learning Disability Services | 1/4/18 | 31/3/2019 | Existing Resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|-----------------|---|--|-----------------------------------|---|------------|-------------|--------------------|
| AS/A028 AH9 | Work with partners to launch a 10 year Dementia Strategy to better integrate service via a multi-agency service model. | Health and social care services effectively work together to develop systems to effectively identify and best meet the needs of people with dementia and their carers. Integrated and person centred approach to supporting service users. | N/A | Operational Manager, Locality Services | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A029 AH9 | Further develop and enhance the Integrated Autism Service with a specific focus on enhancing links with other services, service users and their carers and the provision of training for professionals. | Integrated and person centred approach to supporting service users. Development of professionals across health and care will enable a consistent approach in meeting the needs of people with autism wherever they seek advice and support. | N/A | Project Lead Officer, Integrated Autism Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A030 AH12 | Further enhance the Integrated Discharged Service through implementing a Care Package Approval Process. | Reduced numbers of delayed transfers of care due to social care reasons. | Rate of Delayed Transfers of Care | Operational Manager, Locality Services | 4/1/2018 | 31/3/2019 | ICF/PCF |

| | |
|--|---|
| Well-being Outcome 3: An aspirational and Culturally Vibrant Vale | Objective 6: Valuing Culture and diversity |
|--|---|

| | | | | | | | |
|-------------------------|-------------------|-------------------|--------------------|---------------------------------|--|--------------------|------------------------------|
| Well-being Goals | A Resilient Wales | A Healthier Wales | A More Equal Wales | A Wales of Cohesive Communities | A Wales of Vibrant Culture & Thriving Welsh Language | A Prosperous Wales | A Globally Responsible Wales |
|-------------------------|-------------------|-------------------|--------------------|---------------------------------|--|--------------------|------------------------------|

| | | | | | |
|----------------------------|-----------|------------|-----------|---------------|------------|
| Our Ways of Working | Long Term | Integrated | Involving | Collaborative | Preventing |
|----------------------------|-----------|------------|-----------|---------------|------------|

| Ref | Action | Outcome & Key Milestones 2018/19 | KPI (where relevant) | Officer Responsible | Start Date | Finish Date | Resources Required |
|------------------|--|---|----------------------|------------------------|------------|-------------|--------------------|
| AS/A0 08 AC10 | Continue to improve equality monitoring data to enable more informed decisions about service delivery. | Accurate and timely data to inform proposals and decisions about service delivery. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A0 31 AC12 | Ensure compliance with the 'More than just words' policy and the Welsh Language Standards. | We effectively strengthen the use of Welsh Language services for those accessing social care services. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/A0 32 AC12 | Continue to promote and provide opportunities for staff to access Welsh language courses. | Council services comply with the Welsh Language Standards requirements Increased number of staff accessing Welsh language courses. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |

Integrated Planning

| | | | | | |
|---------------------|-----------|------------|-----------|---------------|------------|
| Our Ways of Working | Long Term | Integrated | Involving | Collaborative | Preventing |
|---------------------|-----------|------------|-----------|---------------|------------|

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------------|--|--|---------------------------|---|------------|-------------|--------------------|
| AS/F026 CP1 | As part of Tranche 2, continue to support delivery of the Council's reshaping agenda and its associated projects. | Delivery of cost-effective and sustainable Council services into the longer term. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/F027 CP1 | Progress the reshaping of the in-house residential care service. | Achievement of required efficiency savings. Sustainable model for in-house residential care. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/F028 CP1 | Continue to increase the provision and take up of direct payments, with a particular focus on citizens with a learning disability. | Greater choice and control for service users over their care arrangements. Increased numbers of services users utilise direct payments. | Number of direct payments | Operational Manager, Mental Health and Learning Disability Services | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------------|--|---|--|---|------------|-------------|--------------------|
| AS/F029 CP1 | Increase the use of reablement home care to help people to achieve their potential for independence. | Increased numbers of service users are utilising the Vale Community Resource Service to improve their independence. Reduced dependence. Reduction in the need for externally commissioned care and support. | Number of VCRS users Percentage service users who have become independent after using the service | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/F030 CP1 | Transform Rhoose Road into a Supported Living facility as part of the Reshaping Services programme to bring clients back from out of county placements and reduce costs. | The new facility will support three clients in a supported living setting and will contribute to reducing out of county placements costs. | N/A | Operational Manager, Mental Health and Learning Disability Services | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/W016 CP2 | Continue to review and strengthen the performance management and support arrangements in relation to sickness absence within Adult Services. | Reduction in sickness absence rates in line with 2018/19 targets. | No. days/shifts lost due to sickness absence | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------------|---|---|----------------------|------------------------|------------|-------------|--------------------|
| AS/W031 CP2 | Support staff in Adult Services to receive the necessary training and development to undertake their roles effectively and in compliance with the Social Services and Well-being (Wales) Act. | Staff have the relevant skills required to meet our statutory requirements and challenges we face within social care. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/W032 CP2 | Explore options for succession planning within Adult Services, in relation to the ageing profile of some teams as well as the more skilled social worker and team manager tiers. | Increased service resilience. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/W033 CP2 | Continue to enhance the Management Development Programme in Adult Services so that current and future managers are equipped with the skills required to manage modern social services. | Appropriate plans are in place to support progression of staff from first tier of management onwards. Managers develop the skills required to effectively deliver the Reshaping Services Programme. Increased service resilience. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------------|--|--|----------------------|------------------------|------------|-------------|--------------------|
| AS/W034 CP2 | Identify critical posts to the business (Adult Services) as well as areas where recruitment difficulties exist and explore options to target recruitment more effectively and recruit to vacant positions. | Effective recruitment to specialist and critical posts. Increased service resilience. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/W035 CP2 | Continue to focus on reducing our reliance on agency staff within Adult Services, where recruitment of permanent staff continues to present challenges. | Effective recruitment to specialist and critical posts. Increased service resilience. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/IT036 | Pilot the purchase of agile working technology across a team with Adult Services. | Increased staff mobility and flexibility contributes to a more responsive service. Reduction in work space required and associated costs. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------|--|---|----------------------|------------------------|------------|-------------|--------------------|
| AS/IT037 | Develop and implement a new self-service payment facility online for domiciliary care and Telecare payments. | Service users/ family members have 24/7 secure web access to make timely payments for their care support packages. Improved communication between, the service, care staff and service users. Improved efficiency. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/IT038 | Support delivery of the Digital Place strand of the Digital Strategy. | Delivery of the Digital Strategy contributes to cost-effective and sustainable Council services into the longer term. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/IT039 | Review the content and accessibility of our web pages and social media interactions with citizens, including maximising the potential for self-referral to services and online payments where appropriate. | Increased opportunities for citizens to interact with the Council online. Improved access to health and social care services. Services users are able to access information/ advice in a timely way that enables effective signposting. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|----------|---|--|----------------------|--|------------|-------------|--------------------|
| AS/AM040 | Undertake a full review and assessment of all our assets as well as Third Party providers to provide a clear building compliance position in relation to all buildings and to address where appropriate issues on non-compliance as they arise. | The Council is satisfied that its corporate buildings' compliance risks are being effectively managed. The Directorate's building assets comply with legislation requirements. | N/A | Operational Manager, Residential Services and Compliance | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/AM041 | Review the quality of our existing assets to ensure they are 'fit for purpose' both now and in the future, which includes identifying options for the way forward in relation delivery of integrated health and social care services. | Optimum use of our property assets contributes towards minimising operating costs. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |
| AS/AM023 | Continue to develop Ty Jenner as a Health and Social Care Hub. | Co-location of health and care services will contribute to ease of access to a wider variety of services in one place and better joint working between health and care professionals who serve the same client/service user. | N/A | Head of Adults Service | 4/1/2018 | 31/3/2019 | Existing resources |

| Ref | Action | Outcome & Key milestone 2018/19 | KPI (where relevant) | Officer responsible | Start date | Finish date | Resources required |
|---------|---|---|----------------------|--|------------|-------------|--------------------|
| AS/F042 | Renew the contract for the use of temporary agency staff in residential care homes. | Value for money contingency arrangements in place which ensures that residential care homes have access to experienced staff where needed to ensure service continuity to the required standards. | N/A | Operational Manager, Residential Services and Compliance | 4/1/2018 | 31/5/18 | Existing resources |

Risk Evaluation Scoring

Corporate Risks




| Category | Inherent Risk | | | Effectiveness of controls | | | Residual Risk | | |
|--|---------------|----------|-----------|---------------------------|----------|----------|---------------|----------|----------------------------------|
| | Likelihood | Impact | Total | Likelihood | Impact | Total | Likelihood | Impact | Total |
| CR1: Reshaping Services | | | | | | | | | |
| Political & Legislative | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 |
| Resources | 3 | 3 | 9 | 3 | 2 | 6 | 1 | 2 | 2 |
| Service Delivery & Well-being | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 |
| Reputation | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 |
| Average risk score | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 (Medium) |
| CR6: Workforce | | | | | | | | | |
| Political & Legislative | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 |
| Resources | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 |
| Service Delivery & Well-being | 2 | 2 | 4 | 2 | 2 | 4 | 1 | 1 | 1 |
| Reputation | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 |
| Average risk score | 3 | 3 | 9 | 2 | 2 | 4 | 2 | 2 | 4 (Medium) |
| CR7: Information Security | | | | | | | | | |
| Political & Legislative | 4 | 3 | 12 | 2 | 2 | 4 | 2 | 2 | 4 |
| Resources | 4 | 3 | 12 | 2 | 2 | 4 | 2 | 2 | 4 |
| Service Delivery & Well-being | 4 | 4 | 16 | 2 | 2 | 4 | 2 | 2 | 4 |
| Reputation | 4 | 3 | 12 | 2 | 2 | 4 | 2 | 2 | 4 |
| Average risk score | 4 | 3 | 12 | 2 | 2 | 4 | 2 | 2 | 4 (Medium) |
| CR10: Corporate Building Compliance | | | | | | | | | |
| Political & Legislative | 3 | 4 | 12 | 2 | 1 | 2 | 2 | 4 | 8 |
| Resources | 3 | 4 | 12 | 2 | 2 | 4 | 2 | 2 | 4 |
| Service Delivery & Well-being | 3 | 4 | 12 | 2 | 1 | 2 | 2 | 4 | 8 |
| Reputation | 3 | 4 | 12 | 2 | 1 | 2 | 2 | 4 | 8 |
| Average risk score | 3 | 4 | 12 | 2 | 1 | 2 | 2 | 4 | 8 (Medium/High) |
| CR11: Safeguarding | | | | | | | | | |
| Political & Legislative | 2 | 3 | 6 | 3 | 2 | 6 | 1 | 2 | 2 |
| Resources | 3 | 3 | 9 | 3 | 2 | 6 | 1 | 2 | 2 |
| Service Delivery & Well-being | 3 | 3 | 9 | 3 | 2 | 6 | 1 | 2 | 2 |

| Category | Inherent Risk | | | Effectiveness of controls | | | Residual Risk | | |
|--|---------------|--------|-------|---------------------------|--------|-------|---------------|--------|--------------------------|
| | Likelihood | Impact | Total | Likelihood | Impact | Total | Likelihood | Impact | Total |
| Reputation | 2 | 4 | 8 | 3 | 1 | 3 | 1 | 4 | 4 |
| Average risk score | 3 | 3 | 9 | 3 | 2 | 6 | 1 | 3 | 3 (Medium/Low) |
| CR12: Integrated Health and Social Care | | | | | | | | | |
| Political & Legislative | 2 | 3 | 6 | 3 | 3 | 9 | 1 | 1 | 1 |
| Resources | 3 | 3 | 9 | 1 | 1 | 1 | 3 | 3 | 9 |
| Service Delivery & Well-being | 2 | 3 | 6 | 2 | 2 | 4 | 1 | 2 | 2 |
| Reputation | 2 | 3 | 6 | 1 | 1 | 1 | 2 | 3 | 6 |
| Average risk score | 2 | 3 | 6 | 2 | 2 | 4 | 2 | 2 | 4 (Medium) |
| CR14: Contract Management | | | | | | | | | |
| Political & Legislative | 3 | 3 | 9 | 3 | 2 | 6 | 1 | 2 | 2 |
| Resources | 3 | 3 | 9 | 3 | 2 | 6 | 1 | 2 | 2 |
| Service Delivery & Well-being | 2 | 3 | 6 | 2 | 2 | 4 | 1 | 2 | 2 |
| Reputation | 3 | 4 | 12 | 3 | 1 | 3 | 1 | 4 | 4 |
| Average risk score | 3 | 3 | 9 | 2 | 2 | 4 | 1 | 3 | 3 (Medium/Low) |
| CR15: Transition to Welsh Community Care Information System (WCCIS) | | | | | | | | | |
| Political & Legislative | 4 | 3 | 12 | 2 | 1 | 2 | 2 | 3 | 6 |
| Resources | 4 | 3 | 12 | 2 | 2 | 4 | 2 | 2 | 4 |
| Service Delivery & Well-being | 4 | 3 | 12 | 2 | 1 | 2 | 2 | 3 | 6 |
| Reputation | 4 | 3 | 12 | 2 | 1 | 2 | 2 | 3 | 6 |
| Average risk score | 4 | 3 | 12 | 2 | 1 | 2 | 2 | 3 | 6 (Medium) |

Service-level Risks

| Risk | Inherent Risk | | | Residual Risk | | |
|---|---------------|--------|-------|---------------|--------|---------------------------|
| | Likelihood | Impact | Total | Likelihood | Impact | Total |
| AS:SR1 - Service users cannot access the services swiftly and their needs are not met. | 1 | 4 | 4 | 1 | 4 | 4 (Medium) |
| AS:SR2 - Insufficient operational staff capacity to ensure timely assessments. | 1 | 4 | 4 | 1 | 4 | 4 (Medium) |
| AS:SR3 - Capacity of Approved Mental Health Professionals | 3 | 4 | 12 | 2 | 4 | 8 (Medium/High) |

| Risk | Inherent Risk | | | Residual Risk | | |
|---|---------------|--------|-------|---------------|--------|-----------------------|
| | Likelihood | Impact | Total | Likelihood | Impact | Total |
| (AMPs) to undertake reviews in line with the requirements of the Mental Health Act. | | | | | | |
| AS:SR4 - Compliance with requirements of requirements of the Social Services and Well-being (Wales) Act. | 2 | 3 | 6 | 2 | 3 | 6 (Medium) |

| Scoring risks | |
|-------------------------------------|--|
| Likelihood score | Refers to how likely it is that the risk will occur, that is, the probability of the risk happening. The scoring ranges between 1 and 4, with 1 being very unlikely, 2 - possible, 3 - probable and 4 being almost certain to happen or has already happened. |
| Impact score | Refers to what the impact would be if the risk occurred. Again the scoring ranges between 1 and 4, with 1 being low, 2 - medium, 3 - high and 4 being catastrophic. Impact would include things such as financial costs, public wellbeing, environmental/ social impact, damage to reputation, health and safety etc. |
| Inherent Risk | This is the risk score in a pre-control environment |
| Residual Risk | Remaining risk score after controls have been applied. Shows impact of controls. |
| Current controls | This is a control score that provides an indication of the effectiveness of the controls at managing the risk. |
| Forecast Direction of Travel | Anticipates the future direction of travel of the risk by taking into account factors that are likely to impact on it. Risk increasing  Risk is decreasing  Risk remaining static  |

Risk Matrix

| | | | | | |
|---|--------------|------------------------|--------------------|------------------------|--------------------|
| Possible Impact or Magnitude of Risk | Catastrophic | 4 <i>MEDIUM</i> | 8 MEDIUM/HIGH | 12 HIGH | 16 VERY HIGH |
| | High | 3 <i>MEDIUM/LOW</i> | 6 <i>MEDIUM</i> | 9 MEDIUM/HIGH | 12 HIGH |
| | Medium | 2 LOW | 4 <i>MEDIUM</i> | 6 <i>MEDIUM</i> | 8 MEDIUM/HIGH |
| | Low | 1 VERY LOW | 2 LOW | 3 <i>MEDIUM/LOW</i> | 4 <i>MEDIUM</i> |
| Low 1-2 Low/Medium 3 Medium 4-6 Medium/High 8-10 High 12-16 | | Very Unlikely | Possible | Probable | Almost Certain |
| Likelihood/Probability of Risk Occurring | | | | | |

Effectiveness of Controls Score

| Score | Effectiveness of Control |
|--------------|---------------------------------|
| 0 | Very Low control of the risk |
| 1 | Low control of the risk |
| 2 | Medium control of the risk |
| 3 | High control of the risk |
| 4 | Very high control of the risk |