

**SERVICE PLAN – 2022/23 FINANCIAL YEAR**

**1. Name of service area**

**SOCIAL CARE & HOUSING**

**2. Responsible Chief Officer**

**JASON O'BRIEN – ACTING CHIEF OFFICER, SOCIAL CARE & HOUSING**

**3. Purpose of your service area**

**To support, protect and enable vulnerable people to achieve positive outcomes and wellbeing**

**4. Long term vision / ambition for the services you provide and / or the residents who receive them**

- We recognise the value of our workforce and the many challenges they face. We will ensure they receive support and training to deliver our vision.
- We want to see vulnerable people and communities making positive choices to become independent and reduce reliance on statutory services. We intend to do this by:
- Engaging with people and communities to listen and understand what matters to them, so their views help shape the support and services available
- Working alongside families to care for their children, providing assessed support where this is not possible.
- Informing and empowering people to make positive choices to find their own solutions within their communities to reduce reliance on statutory services.
- Recognising the value of both formal and informal support networks, so people and partners can achieve common goals and improved outcomes.
- Optimising investment and transforming by developing new service models that are sustainable and fit for the 21<sup>st</sup> century.
- Taking a positive approach to managing risk, so people and families are supported to achieve to remain within their own home and communities.
- Increasing social inclusion and stimulating community resilience so people and communities are better equipped and empowered to support themselves.

## 5. Team structure / grouping for service planning



## 6. Challenges currently facing the Chief Officer / Service Area

Overarching statement ... support for Torfaen's most vulnerable residents

### Adults and Housing

#### Challenges

By far the most pressing challenge for the remainder in the year and 22/23 is the difficulties with **recruitment and retention** at all levels, particularly acute in the areas of social work, occupational therapists and care support workers (internal and within external domiciliary care and care homes).

Our ability to respond, assess, and support – the basics of the role in the division is compromised whilst the staffing vacancies remain at the current level. We have continued to see an increased in complexity of presenting cases requiring a high skill level and intensive resources.

Whilst numbers in nursing and residential care have remained relatively static between September 2020 to September 2021 the number of people requiring dementia care in both categories has increased 6% and 4% respectively:

Active as at 30th Sept	Sep 2020	Sep 2021	Sep-20			Sep-21			% Increase Dementia
			General	Dementia	% Dementia Placement	General	Dementia	% Dementia Placement	
Nursing Care	103	103	71	32	31%	65	38	37%	6%
Residential Care	224	198	87	137	61%	69	129	65%	4%

Court of Protection cases have continued to increase alongside the request for MHA Assessments. These core function will be priorities however this has a knock-on effect on planned development work with little or no project capacity to take forward. The lack of detail on the Liberty Protection Safeguards Codes of Practice remains problematic. Staffing and training implications are difficult to plan for without the detail.

We have seen 17% increase in MHA assessments for the period April 2021 – September 2021 when compared to the same period last year.

We currently are involved with 11 individuals through the CoP process

The health and social care system is malfunctioning at a local, regional, and national level despite the continued commitment across partners. Strategic plans are challenging to progress and deliver on short term grant commitments. Temporary posts are difficult to recruit to, the alternative being recruiting to posts permanently at risk and face the potential of redundancy costs.

### Financial Challenges

<b>Funding</b>	<b>Award</b>	<b>2021/22 – Spend to 30<sup>th</sup> November 2021</b>	<b>Estimated Spend Year end</b>
	<b>£</b>	<b>£</b>	<b>£</b>
<b>Hardship Fund</b>	<b>Reclaim value</b>	<b>2,241,710</b>	<b>3,362,565</b>
<b>Social Care Recovery Fund</b>	<b>1,263,984</b>	<b>581,518</b>	<b>1,263,984</b>
<b>Winter Pressures (RPB)</b>	<b>Reclaim value</b>	<b>185,998</b>	<b>185,998</b>

We have been supporting all Social Providers with funding from the Social Care Covid Hardship fund. Since the beginning of the pandemic providers have received

We have received Social Care Recovery Fund monies to the value of £2.1m to cover Adult and Children’s Services. Whilst we are confident our spending plan will be maximised by the end of March 2022 when the funding ends, the concern is that the response needs to be longer term and strategic to address the

The financial viability / stability of the third sector is a high risk for the council as is the whole financial position in 2022/23.

- The Fee methodology work with the care home sector is suggesting fee increases of up to 27% in 2022/23.
- National Commissioning Board work have a fee methodology that is suggesting an hourly rate in respect of Domiciliary Care and supported living of £26.98 an increase of an increase of 55% on our current rate.
- The WG announcement of real living wage of £9.90 to all care workers, will create additional pressures within the Adult Services budget for 2022/23.
- We are also aware of private companies enticing domiciliary carers away from the sector with salaries of up to £12 an hour, again significantly higher than our commissioned rate.

There is a need for a whole service review which is likely to result in the identification of the need for greater investment in order to mitigate demand and capacity within the whole system.

**Change Activity – Scope out the implications of legislative changes**

Whilst the implementation date for LPS has been put back to a date later in 2022/23 all the modelling /planning work has highlighted the additional demand that will be created and ultimately a further gap in capacity.

Staff wellbeing remains a cause for concern for the rest of this year and next. The negative long-term impact of covid is evident across the divisions. Staff have worked tirelessly over the last 20 months and are now covid weary. Working from home for an extended length of time has had a negative impact on team working and peer support.

As at 3<sup>rd</sup> January 2022 we have 9% of Social Care staff absent. Our status on our weekly WG workforce return is amber.

3	<b>Please give the status of your workforce as of today</b>			
	Green	We have sufficient staff to provide cover for all essential roles. We are able to transfer staff where appropriate and are not currently experiencing any major issues covering absence or employing additional staff.	<input type="checkbox"/>	✓
	Amber	We are able to cover most areas of work, but some non-essential services have had to be suspended or operated on a priority basis. We are currently experiencing some difficulty in recruiting certain staff groups to provide the cover needed.	<input checked="" type="checkbox"/>	✓ We have commenced a phased return to some limited building-based day opportunities on a sessional and mainly 1;1 basis however this is being impacted by the need to redeploy Day Opps staff to support Dom Care. Occupational Therapist and social work shortages are significant and impacting with mainly critical referrals being responded to so waiting times are increasing. This is approaching red.
Red	We are only able to cover essential services and work is being prioritised to those most in need. We are experiencing severe difficulties in providing cover for key areas and are not being successful in recruiting into those roles.	<input type="checkbox"/>	✓	

The system is under huge strain and staff are experiencing high levels of fatigue and work related stress due to the lack of capacity to meet peoples care and support needs which results in staff feeling inadequate even though this is a system failure. We continue to offer support to all staff and are focussing on staff wellbeing.

The requirement for staff to work more flexibly to fill the gaps has not been supported by the new flexi system, a work around system of TOIL has been developed to respond to the pressures however the accrual of TOIL will cause additional problems next year.

There have been challenges in 21/22 with the move to a new platform for WCCIS. Based on current and historical experiences, we anticipate this continuing and impacting on staffing capacity throughout numerous “down time” and is resource intensive for support from our performance team who have to be available for testing the system out of “normal” working hours which is impacting on capacity in the team during normal working hours, combined with the increased data collection requirements, locally, regionally and nationally capacity is at its maximum. We have secured through Welsh government funding an additional performance officer working across both adults and children’s who is predominantly working full time on the requirements from Welsh Government for additional data and the current care crisis, freeing up officer time to develop and improve business processes arose the whole service area..

The delay in launching the new Continuing Health Care Framework has also exacerbated some of the local and regional problems. It was hoped that some clarity would be forthcoming to reduce the number of disputes with the health board. This is costly, both in terms of financial impact and officer time and well as hugely frustrating.

## **Children and Families**

### **Activity**

Recruitment and retention within the division remain a priority. Work started in 2021/22 will continue:

Work with providers to support recruitment initiatives

Work with colleagues to engage potential recruits

Review the skill mix needed and develop new roles that may be easier to recruit to

Work with the HB to transfer therapy resources into the community

Promote social care as a career through positive stories and establish career pathways

Review recruitment policy / grades

Explore different ways to meet with people who may wish to consider working in Torfaen

Continue to maximise all grant funding. - Lobby Welsh Government with regards to the timescales and Ts and Cs associated with grant funding.

The financial position in 2021/22 is manageable fortuitously due to the high number of internal vacancies, uncommissioned care, and short-term grants. The current budget will not meet the expected pressures. Pressures in 2022/23 will hopefully in part be mitigated through additional WG funding through additional monies in the 2022/23 budget settlement but we recognise that there will be competing pressures for the authority.

Tough negotiations with providers are anticipated on fee levels for all care.

Capacity and demand have been cited as areas of challenge, particularly out in the community. We have taken the following mitigating actions which hopefully will ease the issue in the short term:

- We have removed annualised hours from care staff contracts and have increased the hourly payrate from 22<sup>nd</sup> December until 31<sup>st</sup> March 2022.
- We have recruited a number of staff elsewhere from the division to assist in the community. It is important to note that our temporary ways of working are in response to a crisis.

The opening date of Ty Glas Y Dorlan is a critical event in order for Adult Services to begin to manage the demand and increase individual's independence and enable people to live the life the way they choose to live it. We have looked to utilise staff from Ty Glas Y Dorlan to assist with the crisis in the community, temporarily, recognising that in order to ease the demand and complexity we need to be able to get Ty Glas Y Dorlan up and running:

<b>Patch Team</b>	<b>No. Hours</b>	<b>From</b>
Pontypool Wellbeing Team	25	Increased needs – current provider handed back
East Cwmbran Wellbeing Team	5.25	Hospital Discharge
	5.25	Discharge from Respite in Nursing Home
	15.75	Hospital Discharge
	8.75	Hospital Discharge

	7	New Community Package
Central Cwmbran Wellbeing Team	10.5	Hospital Discharge
West Cwmbran Wellbeing Team	5.25	New Community Package
	3.5	New Community Package
	15.75	Hospital Discharge
	10.75	Hospital Discharge
	14	Hospital Discharge
	5.25	New Community Package
Learning Disabilities	7	
<b>Total</b>	<b>147 Hours</b>	

2022/23 will hopefully bring stability to review practice and take the next steps towards building more resilient communities as previously planned.

We would wish to enhance the blend of virtual working and face to face relationship building and embrace the flexible approach to working from home and office.

Whilst the teams have worked creatively to promote and ensure continued team working, some benefits of being in the office have been lost. In 2022/23 we will build in:

- More team training and team building days
- More multi-disciplinary working within the team and across partner agencies
- Improve multi-agency relationships/networks
- Develop positive information sharing mechanisms. Virtual working has also brought some positives with the use of virtual meetings.
- Balance the expectations of ourselves, our individuals, and the services available
- Maintain the work life balance we achieved in lockdown and remember its importance

Continuing with projects in the community

Identify a link person in the Police/ Bron Afon

Plan project work – with providers, with HB

Embracing new uses of technology

Determine a means by which currently accrued TOIL can be recompensed against a backdrop of staff shortage.

Ensure that the need for TOIL is approved beforehand and is supported by the use of flexi. Increase staff capacity / achieve full establishment.

## **Challenges**

1. Continued challenges with recruiting Social Workers into vacant Posts across the service. There is currently an 11% vacancy rate across qualified Social Worker Posts (excluding GMs and Head of Service). This issue is not unique to Torfaen and with a shortage of students opting to study Social Work, is likely to continue for the short to medium term. This continued position will impact on capacity and ability to fulfill statutory functions.
2. Continued challenges with regards to resource availability in line with financial restrictions / expectations. The service is currently resourced with a mixture of core and grant funding. The grant funding can become problematic due to any terms and conditions attached and particularly due to timescales of the grant viability which is not commensurate with medium to longer term planning. This creates instability for staff who are on fixed term contracts and results in short term service planning.
3. A full business case for the review of the family placement team has identified the need for increased resource and financial investment. Whilst there has been approval to progress with this there will be further consultation in order to fully implement. There is obvious uncertainty regarding the outcome of any consultation. This will potentially impact on the quality of service from within the family placement team and the ability to recruit and retain foster carers within the local authority.

4. Increasing complexity of cases being referred to and within the system. This results in the need for significant input and commitment from staff and the development of a multi-agency approach. Complex cases often result in high-cost placements where improved outcomes are not always achieved.
5. Decreasing supply of in-house placements and IFA placements for adolescents resulting in a greater use of residential placements, where these have not been previously identified as being required to meet the needs of the child/young person.
6. Increase in costs of residential placements due to an increase in national demand for such placements. Whilst we have been successful in managing and stepping down some residential placements, individual costs have and continue to increase.
7. The online referral pathway, that is in the process of being developed, has been delayed on numerous occasions due to GDPR issues. This will have impacted on the speed of progress for this development and will not have impacted on capacity (to this point) in the manner we would have anticipated. There continues to be a disproportionate number of referrals and contacts that do not progress in the system and / or are NFA, which results in waste of resources and reduced capacity.
8. There has been a continued build up of TOIL due to staffing vacancies and additional workload during the pandemic. It has been continually difficult for this accrued time to be taken back due to ongoing capacity.
9. The move to a new platform for WCCIS has presented challenges through significant amounts of “down time” and work being lost. Based on current and historical experiences, we anticipate this continuing and impacting on staffing capacity throughout numerous “down time.”

### **Proposed Activity**

1. Continue to work with colleagues in Human Resources in order to review the Torfaen offer to social work staff. Work with Social Care Wales and regional colleagues in order to ensure a continued through flow of social work staff. Review the secondment / sponsorship opportunities for unqualified staff who wish to become qualified. Consider the merits of recruitment of social work staff from overseas. Use agency social work staff where required and where available. We will develop the findings and processes established by the specialist recruitment officer.
2. Continue to highlight the issues of grant funding timescales with Welsh Government and use political pressure in order to promote longevity of grant availability. All staff who are on temporary contracts in line with grant funding timescales to be given permanent contracts in line with the LAs employment obligations once they have been in post for two years and in doing so increase staff security and an ability to maintain staff in position.
3. A sound business case has been created and stakeholders will now be consulted on the proposals, and it is anticipated that there will be an incremental approach to implementation which will include a review of fostering fees and a staffing compliment commensurate with the needs of FPT in order to increase in house foster carer capacity.
4. We will continue to challenge partner agencies in order to ensure that suitable multi agency services are utilised to improve outcomes for children with complex needs. Where a child requires a specialist service and / or high-cost care provision we will continue to challenge the response of other agencies (including health and education) in the event of there being a deficit. We will contribute to the development of a common regional referral pathway and escalation policy with health where it is viewed that a service / support or contribution is in deficit. We will use political influence to challenge any deficit in service both at a local, regional, and national level.
5. The review of family placement team and review of the financial offer to foster carers as part of the overall business case will (amongst other things) aim to increase capacity as it relates to foster carers offering placements to adolescents. We will also look to develop in-house

residential provision for children with complex needs, many present during adolescents / teenage years. We will continue to work with partner agencies to develop services for children and adolescents in order to prevent them entering into and escalating through the system.

6. We will work towards the development of small in-house residential provision where children can access local services and where the local authority can control the cost and facilitate step down and step out within a therapeutic environment where need will be better met. We will work regionally and nationally to influence the work being undertaken by Welsh Government to reduce “profit in care” and have a greater focus on outcomes for children and young people. We will use political influence within the work being carried out by the Welsh Government to reduce profit in care.
7. We will implement the online referral pathway and measure its success based upon the number of referrals / contacts that are received and the number that become NFA. Where required, we will use the data collected to challenge referring agencies on the suitability and appropriateness of referrals to the service.
8. We have piloted and now implemented the flexi scheme across the entire service and capped (with exceptional circumstances) the buildup to a maximum of 37 hours. We are utilising underspend to recompense for the historical buildup of TOIL so that all staff commence 2022 with zero hours build up and this coupled with the 37 our cap will afford greater management control.

## 7. Proposed change activities arising from self-evaluation

	Team	Change Activity	Timescale
<b>overarching statement ... support for Torfaen's most vulnerable residents</b>			
<b>Adults and Housing</b>			
1	<b>Adult services, housing &amp; commissioning</b>	<b>Implement a Domiciliary Care Strategy</b>	<p style="text-align: center;"><b>Multi Year</b></p> <p style="text-align: center;">Strategy Lead and project resources identified.</p> <p style="text-align: center;">Consider best practice and lessons learnt from Gwynedd, North Torfaen pilot and reablement Assessor project</p> <p style="text-align: center;">Engagement with providers May 2022</p> <p style="text-align: center;">Develop and carry out full Fee Review of the Domiciliary Care sector</p> <p style="text-align: center;">In house recruitment plan in place / regularly reviewed – identification of opportunities.</p> <p style="text-align: center;">Extend and update data capture to include external private contracts * subject to agreement from providers (Commissioning team)</p> <p style="text-align: center;">Establish support mechanisms for external providers – Vanguard workshops to be scheduled</p> <p style="text-align: center;">Understand the blockages and develop pathways between other support services</p> <p style="text-align: center;">Consider digital solutions link to corporate digital solutions for data capture.</p> <p style="text-align: center;">Link to assistive technology - ongoing</p> <p style="text-align: center;">Develop Domiciliary Care strategy and present to cabinet</p> <p style="text-align: center;">Draft patch based tender spec developed (Commissioning team)</p>

## 7. Proposed change activities arising from self-evaluation

	Team	Change Activity	Timescale
			Agree multiyear implementation plan
2	Adult services, housing & commissioning	Operate Ty Glas Yr Dorlan – Community Enablement Hub	<p><b>Multi Year</b></p> <p>Business processes in place to support TGD.</p> <ul style="list-style-type: none"> <li>• Financial</li> <li>• Stays</li> <li>• Exit</li> </ul> <p>Full team of staff recruited – June 2022</p> <p>All long-term flats let June 2022.</p> <p>Short Term flats all equipped and fully operational June 2022.</p>
3	Adult services, housing & commissioning	Develop and implement an action plan to redefine and redesign day opportunities with key partners	<p><b>Multi year</b></p> <p>Each theme will develop a working prototype to test our assumptions and provide the specific measures of success. Each prototype will last for between 6 to 12 weeks. An illustrated report with learnings and recommendations will be produced at the conclusion of the process. It's expected that activity will help develop new practices and process that continually improve aligned to the identified set of values.</p>
4	Adult Services, Housing & Commissioning	Joint with C&F Servs: Review impact of new practice model for transition to adulthood to ensure it is fit for purpose	<p><b>Multi year</b></p> <p>Report to leadership to evidence effectiveness of transition model (<b>Sept 2022</b>).</p>

## 7. Proposed change activities arising from self-evaluation

	Team	Change Activity	Timescale
5	Adult Services, Housing & Commissioning and Children & Family's	Scope out the implications of legislative changes	<p><b>Single year</b></p> <p>Link to Regional transformation post to input into work programme.</p> <p>As legislation and guidance is announced by National Government / Welsh Government. The requirements will be scrutinised, and assessment will be made to the impact to the whole</p>
6	Adult Services, Housing & Commissioning	Implement the HSG Strategy and Delivery Plan in line with provision of HSG guidance.	<p><b>Multi year</b></p> <p>Development of Rapid Rehousing Transition Plan to support the implementation of RRH approaches.</p> <p>Development of the following service provisions as part of the HSP Strategy and Delivery Plan:</p> <ul style="list-style-type: none"> <li>Increase units and realign supported accommodation provision</li> <li>Development of emergency accommodation and assessment hub</li> <li>Implementation of Homeseeker Policy.</li> <li>Development and adoption of Move on Policy and processes</li> </ul> <p>Revision of HSP Delivery Plan</p>
7	Adult Services, Housing & Commissioning	Delivery of the Social Housing Grant (SHG) programme	<p><b>Single year</b></p> <p>Continue to work with RSL partners to identify land availability along with scheme details relating to housing need within Torfaen this is done through the data collected within the local housing market assessment and social housing grant prospectus</p> <p>Working in collaboration with forward planning to ensure affordable housing sites are available for the continued delivery of affordable housing</p>

<b>Children, Families and Communities</b>			
1	<b>Children &amp; Families</b>	<b>We will implement an effective multi-Agency approach to the safe triaging of referrals.</b>	<p>Pilot to develop a referral pathway will be implemented and reviewed with a view to develop this regionally (<b>Sept 2022</b>)</p> <p>Develop an understanding and enhance the use of threshold of need for partner agencies and evidence partner agencies are applying the threshold standards. Evidence partner agencies are applying the threshold standards</p> <p>Review current MASSH model in collaboration with external partner to ensure robust and multi-agency systems and processes are in place. Produce a report and recommendations to CS Board (<b>Oct 2022</b>)</p> <p>Develop and introduce a quality assurance framework for MASSH processes and decision-making.</p> <p>Develop the use of a partnership scorecard measuring performance and impact of MASSH</p>
2	<b>Children &amp; Families</b>	<b>We will implement the findings / outcomes of the review of the Family placement team (FPT)</b>	<p>Foster Carers allowances and expenses fees to be implemented (Apr 2022).</p> <p>Recruitment process for additional staffing to commence (Apr 2022).</p> <p>Appointment process and relevant staff to be in post (Aug 2022).</p> <p>Team structure and key roles and responsibilities to be embedded within practice of Family Placement Team (Oct 2022).</p> <p>Implement phase 2 and 3 of the review working model in the Family Placement Team</p>
3	<b>Children &amp; Families</b>	<b>Review availability of suitable accommodation for children looked after with complex needs.</b>	<p>Project board to be identified and set up (<b>June 2022</b>)</p> <p>Business case re: policy change to cabinet (<b>September 2022</b>)</p>

4	Children & Families	We will complete the rollout of the risk management / strengths-based practice framework and review the effectiveness of newly developed practices	<p>Consultant practitioner has been employed who will continue to monitor development of the model and provide mop up training for new staff members.</p> <p>Reduction in caseloads 6-month trend.</p> <p>Reduction in children being looked after 6-month trend</p>
5	Children & Families	Having reviewed our Placed with Parents population of children, we will work alongside the judiciary to ensure timely application for suitable order discharge	Quarterly review of PWP progress
6	Children & Families	We will increase capacity for Family Group Conferences.	Grant funding established and continued into 22/23.
7	Children & Families	Review and update the guide to corporate parenting, the current corporate Parenting Board Plan and functions and the structures and processes across corporate parenting services.	<p>Analysis report to Leadership Team following the review of the Guide to Corporate Parenting and the current Corporate Parenting Board Plan and functions to consider next actions <b>(Aug 2022)</b>.</p> <p>Report and recommendations to the Leadership Team following review of the structures and processes across the corporate parenting Service <b>(Nov 2022)</b>.</p> <p>Impact of the CLA reduction strategy Report and recommendations leadership team <b>(Sept 2022)</b></p>
8	Children & Families	Review the Quality and performance framework in Children & Family Services	<p>New "score card" developed and agreed by Leadership Team (Apr 2022).</p> <p>Quality Report to Leadership (July 2022)</p> <p>Planning &amp; decision-making analysis report to leadership to consider next actions (July 2022)</p> <p>Children Services Development Plan, individual team plans and annual service plan (July 2022)</p>

			Impact of the CLA reduction strategy Report and recommendations leadership team (Sept 2022)
9	<b>Children &amp; Families</b>	<b>Review and redesign practice models, tools, policies, procedures, customer journey, support pathways and the commissioning offer for children and young people.</b>	Children Services Development Plan, individual team plans and annual service plan ( <b>July 2022</b> ) Approved analysis & diagnostic report to Programme Board to authorise next actions ( <b>Sept 2022</b> )
10	<b>Children &amp; Families</b>	<b>Agree and implement contextual safeguarding model locally.</b>	Report to LT on current practice and recommendations for development ( <b>Aug 2022</b> )
11	<b>Children &amp; Families / Adult Services, Housing &amp; Commissioning</b>	<b>Joint with C&amp;F Servs: Review impact of new practice model for transition to adulthood to ensure it is fit for purpose</b>	<b>Multi year</b> Report to leadership to evidence effectiveness of transition model ( <b>Sept 2022</b> ).

## 8. Key performance indicators & targets

Indicator	18-19 Actual	19-20 Actual	20-21 Actual	21-22 Actual	22-23 Target
<b>Adult Services</b>					
The number of new assessments completed for adults during the year (AD/004)	New Measure	New Measure	1,607	1,520	Demand Led
- Needs were only able to be met with a care and support plan (AD/005a)	New Measure	New Measure	272	258	Demand Led
- Needs were able to be met by any other means (AD/005b)	New Measure	New Measure	1,161	1,189	Demand Led
- There were no eligible needs to meet (AD/005c)	New Measure	New Measure	174	73	Demand Led
The total number of carers needs assessments for adults undertaken during the year (CA/004)	New Measure	New Measure	111	128	Demand Led
- Needs could be met using a carer's support plan or a care and support plan (CA/005a)	New Measure	New Measure	13	20	Demand Led
- Needs were able to be met by any other means (CA/005b)	New Measure	New Measure	78	101	Demand Led
- There were no eligible needs to meet (CA/005c)	New Measure	New Measure	20	7	Demand Led
The number of carers needs assessments for adults refused during the year (CA/006)	New Measure	New Measure	359	300	Demand Led
The number of care and support plans for adults that were due to be reviewed during the year (AD/016)	New Measure	New Measure	1,051	921	Demand Led

Indicator	18-19 Actual	19-20 Actual	20-21 Actual	21-22 Actual	22-23 Target
- Of those, the percentage whose reviews were completed within the statutory timescales (AD/017)	New Measure	97%	31.78%	44%	80%
The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over. (WG Perf Measure Quant)	3.24	4.35	Not collected in 20/21	N/A	5
The total number of packages of reablement completed during the year (AD/010a)	New Measure	New Measure	311	238	Demand Led
- The total number of packages of reablement completed during the year Reduced the need for support (AD/011a)	New Measure	New Measure	135	71	Demand Led
- The total number of packages of reablement completed during the year Maintained the need for the same level of support (AD/011b)	New Measure	New Measure	175	165	Demand Led
- The total number of packages of reablement completed during the year mitigated the need for support (AD/011c)	New Measure	New Measure	1	0	Demand Led
- Neither reduced, maintained nor mitigated the need for support (AD/011d)	New Measure	New Measure	New Measure	2	Demand led
Average number of calendar days taken to deliver a Disabled Facilities Grant	281	272	394	339	220
<b>Childrens Services</b>					
The number of contacts for children received by statutory social services during the year (CH/001).	New Measure	1,428	4,675	4,792	Demand Led

<b>Indicator</b>	<b>18-19 Actual</b>	<b>19-20 Actual</b>	<b>20-21 Actual</b>	<b>21-22 Actual</b>	<b>22-23 Target</b>
Of those identified, the percentage where advice and assistance was provided (CH/002)	New Measure	New Measure	71.29%	68.66% (3,290)	70%
The number of contacts received by statutory children's social services during the year where a decision was made by the end of the next working day (CH/003)	New Measure	New Measure	99.79%	99.98% (4,791)	100%
The total number of new assessments completed for children during the year (CH/006)	New Measure	New Measure	3,236	3,195	Demand Led
The total number of children with a care and support plan at 31 <sup>st</sup> March (part 4, local measure)	New Measure	New Measure	143	176	Demand Led
The total number of children on the child protection register at 31 <sup>st</sup> March (CH/026)	New Measure	108	80	93	Demand Led
The number of children looked after at 31 <sup>st</sup> March (CH/039)	New Measure	441	446	407	Demand Led
Number of approved foster parents on the local authority register at 31 March (aggregate data CA1 Part 1) (Annual)	New Measure	New Measure	129	121	Demand Led
% of foster placement made In House v Agency Placements In house	New Measure	New Measure	79%	86%	80%
% of foster placement made In House v Agency Placements Agency	New Measure	New Measure	21%	14%	20%
PAM028 - The percentage of new assessments completed for children during the year that were completed within statutory timescales (CH012)	New Measure	95%	98.21%	95%	100%
PAM029 - % of Children Looked After who have experienced three or more placement moves during the year (CH043)	11.27%	12%	9.87%	7%	8%

## 9. Very High & High Risks for the Service Area

	Risk	Likelihood	Impact	Level	Treat/Tolerate
1	There is a risk that the increasing numbers and complexity of referrals from the dependant adult population will place an increased strain on demand led (statutory) services creating inappropriate waiting times posing a threat to the independence and outcomes of service users.	4 Medium/High	4 Significant	Very High	Treat
2	There is a risk that local nursing homes and domiciliary agencies will cease trading in the current market which will impact on the ability to commission appropriate support for vulnerable people	5 High	4 Significant	Very High	Treat
3	There is a risk that a continued increase in the looked after children population will see an increase in expenditure that will continue to adversely impact on the overall financial standing of the authority	Medium/ High	Significant	Very High	Treat
4	There is a risk that the demand for quality / affordable homes and housing needs will not be met if we are unable to increase supply due to lack of land availability and sourcing viable sites.	4 Medium/High	3 Moderate	High	Tolerate
5	There is a risk that the quality of private (rented) sector housing will not be improved due to a lack of investment.	4 Medium/High	3 Moderate	High	Tolerate