

### **Annual Review and Evaluation of Performance 2012/2013**

Local Authority Neath Port Talbot County Borough Council Name:

This report sets out the key areas of progress for the year 2012/13 in Neath Port Talbot Social Services Department and areas for future improvement

## **Summary**

In November 2012 CSSIW reported on its inspection of children's services. This identified a range of factors that posed a significant risk to the welfare and safety of children. As a result, the council was placed under the serious concerns protocol by the Welsh Government and children's services are currently subject to close monitoring by CSSIW.

There have been a number of leadership changes within social services, including the retirement of the director of social services, health and housing and the appointment of an interim director. A new head of children's service and principal officer team have been appointed. The senior management team in community care and housing remained unchanged.

Adult services have made steady progress, with increasing collaboration with health and across the Western Bay collaborative.

During 2012/13 children's services remained an area of significant concern. The council is taking action to secure improvement although children's services continue to remain fragile.

## **Adults**

The council has provided evidence of ongoing progress in adult services with improvements in performance across a range of key performance indicators. For a second year there was a reduction in the level of delayed transfers of care for social care reasons. Progress has been made in moving towards increased integration with the Abertawe Bro Morgannwg University Health Board (ABMUHB) and collaboration with the City and County of Swansea, and Bridgend County Borough Council in the areas of safeguarding, learning disabilities, adult mental health and older person's services within the Western

Bay collaborative. The need to make significant improvements in services for people with learning disabilities has been recognised by the council.

#### Children

Performance in many areas of children's services, including responding to referrals, convening child protection case conferences and supporting looked after children remains weak in comparison with other councils. The number of looked after children is high and there has been weak performance in planning for their needs and future, and providing social work support. The council faces high demand and has not had the systems or staff to manage incoming referrals. The consequence of this has been to increase pressure throughout the child care system, in particular in supporting children who then become looked after. Although progress has been noted recently, the slow pace of improvement is resulting in higher costs in comparison to spending on children's services in other similar councils.

Whilst there has been significant effort and investment to secure short-term improvement, CSSIW is concerned as to whether the approach being taken and the resources being provided is sufficient for securing sustainable improvement in the longer term.

The director came into post at the end of April 2013 on an interim basis, as such his report clearly outlines the challenges ahead for the council and the work needed to achieve and maintain improvements.

### **CSSIW** has identified the following potential risks:

- Children's services face ongoing and serious challenges, particularly in relation to the resilience of the staff group, the impact of management changes and the volume of demand on services.
- The potential impact on adult services of resource concentration and attention to improvement in children's services.
- The use of interim arrangements in relation to achieving long-term stability and sustained improvement.
- The vulnerability of partnerships with key stakeholders in children's services.
- Budget pressures in the medium term and longer term resulting in a reduction in the resources available to sustain improvement.

## Response to last year's areas of development

The council embedded CSSIW's areas for development for adult services within its own improvement objectives, against which it has made good progress.

In children's services, the areas for improvement and the recommendations of the inspection and ongoing monitoring visits have been incorporated into the overall improvement plan. However, progress in 2012/13 has been slow.

### **Good practice identified**

CSSIW identified the following areas of good practice:

 The COASTAL project and the work based day opportunities for people with a learning disability.

### Visits and inspections undertaken during the year

CSSIW undertook a number of site visits to adult services this year. These included the COASTAL project, learning disability day opportunities, the homecare service, the occupational therapy service, assistive technology, extra care scheme, the older persons team and meetings with contracting and commissioning teams, safeguarding and carers.

These visits were in addition to the annual programme of inspections carried out on the council's regulated care settings, and on the independent services for both adults and children in the Neath Port Talbot area.

In children's services an inspection was carried out in September 2012 in order to follow up the inspection carried out the previous year. Further monitoring visits have taken place in line with the initiating of the serious concerns protocol. In January there was a review of corporate parenting arrangements and partnership working, followed by a visit in March which reviewed the intake service. A more recent monitoring visit in June 2013 focused on safeguarding arrangements.

### Areas for follow up by CSSIW next year

Under the serious concerns protocol, children's services will continue to be monitored quarterly. A full re-inspection is planned for November 2013. A high number of areas for improvement were outlined in the inspection report of September 2012 which the council has embedded into its improvement plans. This evaluation report therefore does not reference all the areas of improvement in children's services being addressed by the council but areas for follow-up will include:

- Timeliness of quality of response to referrals to children's services.
- Quality of planning and support for looked after children and those leaving care.
- Resilience and competence of staff and managers in children's services.

A number of specific areas for improvement have been identified in the body of this report. Progress in relation to these will be the discussed with the council during regular engagement meetings in the coming year:

• The development of quality standards and risk assessment processes within contracting and commissioning.

- The progress of modernisation within learning disability services and the development of future care, support and models of accommodation for people with a learning disability.
- Safeguarding capacity and partnership working.
- The impact of the work carried out in order to reduce sickness absence in both adult and children's services.

In addition, CSSIW will be undertaking a national thematic inspection of looked after children and will be undertaking a national thematic review of commissioning of social care for older people.

#### **PERFORMANCE**

## **Shaping services:**

#### Adults

The council has continued with the programmed transformation of adult social care services. This, taken together with the Western Bay Health and Social Care Partnership, and the programme for integrating community services, is delivering on the council's commitment to improve community care services.

A review of the council's learning disability services has identified the need for modernisation. The council responded very positively to the review, identifying clear processes for achieving change and expected outcomes. It has dedicated a significant amount of senior officer time to its implementation. The council has evidence of over-provision for some users, a risk averse approach from the sector, a lack of progression in the review process from care managers and a lack of appropriate provision in the market-place. By developing a better understanding of needs and models of accommodation, it is hoped that the reassessment process will result in the commissioning of more appropriate packages of care and support. However, the council will need to ensure that there are a sufficient range of services in place for people to access and move on to.

An overarching commissioning strategy for older people's services is to be implemented alongside the learning disability strategy. Whilst some performance monitoring of the older people's care home sector is in place, the development of quality standards and a risk management tool needs to be established. Development work with partners within the Western Bay collaborative will support this The involvement of service providers, the regulator and the health board is recognised as being integral to this approach. There is sufficient capacity within the team to carry out effective monitoring but the associated business and administrative support needs to be maintained and built upon in order to support planned developments. Inspectors confirm that good liaison and partnerships with commissioned services are in place.

All users who are eligible for continuing healthcare funding are currently placed using the council's own contracting system. The health board is then recharged. The council should ensure that this practice is subject to a formal Memorandum of Understanding and agreement to clarify governance and ongoing liability.

The need to develop a better range of community services as a result of a reduction of the number of hospital beds has been recognised, especially for people with dementia. A workstream is looking at developing a single point of access and integrated services with health. The council has recognised it needs to move away from more traditional models of care and work more consistently with its health partners, and develop better links with communities in order to establish services which focus on promoting independence. This development area will be targeted by the council's transforming adult social care programme.

#### Children

The transformation and modernisation programme which had been a priority for the council has not yet delivered the improvements needed. It is recognised that the "systems model" of service delivery, introduced in 2011, had led to inconsistent and unsafe practice. As a response to these concerns, the service has been restructured and additional resources secured. Progress against the plan for improvement is being monitored by CSSIW following the Chief Inspector's decision to formally invoke the serious concerns protocol in October 2012. The council's efforts have been focused on resolving the short and medium term problems which have required urgent attention to keep the service viable. There does not appear to be a long-term strategy in place.

## **Areas of progress**

- Recognition of the need for modernisation of learning disability services.
- Performance monitoring of its commissioned services.

### **Areas for improvement**

- Consider how the contract monitoring team and the associated business and administrative support can be developed to improve quality monitoring and risk assessment processes.
- Development of future care, support and models of accommodation for people with a learning disability.
- The development of specialist dementia care services.
- Assess the council's ongoing liability and process of governance in its current contracting arrangements with health.
- Long-term strategic planning in children's services.

## **Getting help:**

#### Adults

The review and development of intermediate care services has meant people will be able to access social care through a single point of access known as the

"gateway service". The current contact and access team continues to provide people with advice and signposting. It provides a filtering mechanism, ensuring that only appropriate referrals come through to teams. Whilst the demand for the service can be high, all calls are responded to on the same day. The new "gateway service" will set clear performance standards for a response, and access via on-line referrals and e-mail will be promoted.

In 2012/13 revised processes for telecare have meant that people can access basic telecare support without requiring a full assessment. The council intends to build on this service with third sector brokerage also being embedded within the "gateway service".

The council's work with health has made a positive impact on the rate of delayed transfer of care and, although further improvement could be made, progress has been maintained for the second year in succession. Both council and health staff meet on a weekly basis to discuss patients ready for discharge. There is improved collaboration, better planning and dialogue regarding the patient's journey.

Inspectors confirm that in older people's services care and support needs are being reviewed as required. The ongoing and regular reviewing of people's needs within learning disability services is less consistent and the council reports a dip in performance in this area. The council needs to consider how best to establish a system of review that can monitor people's changing needs and respond accordingly.

Partnerships have been established with the third sector to provide advocacy services for people requiring care and support. The mental health and older people's advocacy service is well established. The agencies involved are providing an opportunity to network and refer people across the whole range of services. An improved service for independent advocacy support to those being discharged from hospital or considering residential care has been an important development.

#### Children

The revision of the arrangements for managing referrals and initial assessments reported in the inspection of September 2011 resulted in community teams being overwhelmed. This led to a decline in the timeliness of initial assessments and an increase in re-referrals. A single point of contact was created in August 2012 to screen all referrals and improve timeliness in decision making. The performance data for completing initial and core assessments is weak in comparison to other councils. Only half of assessments are allocated to social workers and there has been an increase in re-referrals, which are high in comparison to similar councils. There has been delay in establishing a single assessment team. There has not been time to evidence any sustained improvement from the action taken at the time of the September 2012 inspection. However, in the last quarter of the year improvements in timeliness were noted.

### **Areas of progress**

- Progress on integration with health.
- Development of advocacy services.

## **Areas for improvement**

- The council needs to consider how best to establish a system of review within learning disability services that can monitor people's changing needs and respond accordingly.
- Further progress on the reduction in the rate of delayed transfers of care.
- Ensuring that there is sustained improvement in the response to referrals in children's services both in terms of reliability, timeliness and quality of analysis and decision making.
- Establishing a single assessment team.

## The services provided:

### Adults

The council and the health board carried out a review of intermediate care services. This found that, whilst the service was greatly valued by those who accessed it, people's journey through its services can be complicated. A new model has been piloted and a decision taken to move to full implementation. The integrated model has a multi-disciplinary single point of access and a streamlined initial assessment process. This ensures that people can either access advice, information, intermediate care, medical intervention or more long term support.

The occupational therapy service is part of a range of jointly delivered services which will form a new integrated structure in the very near future. The service is currently undergoing a number of challenges which include the capacity of the service to meet demand, high caseloads and the long-term absence of the team manager. The establishment of the new integrated structure aims to address these issues. Examples of good practice are evident with the service recognising the need to provide a totality of assessment of care and support, not just for the individual, but also the person's family and carers. There has been positive evidence of the responsiveness of the service, access to equipment, the potential to maintain people in their own homes and the support to carers.

Whilst the current assistive technology service provides support to predominantly older people, the council has recognised its value in supporting people with learning disabilities and mental health problems. This will be a development area for this service and ties in with the work the council is doing in response to the review of its learning disability services carried out by the Alder Review. The benefits of assistive technology should be promoted across health and social services to maximise its potential for supporting people in their own homes and reduce costs.

The developments within homecare, including the introduction of an electronic call monitoring system together with standardised contracts for workers, should ensure that people will continue to receive a consistent and effective service. The introduction of this has implications on the workload of management and administrative staff, and the council will need to monitor its impact.

Both in-house and community based work opportunities and placements for people with learning disabilities and mental health problems are well developed and have produced good outcomes for people. Establishing sustainable models to continue supporting people and finding employment opportunities are now being given a high priority. The council may wish to consider how its wider service areas can be utilised to provide work and placement opportunities for people.

A draft quality assurance framework for social work in adult services has been developed. A case file audit system is being used as part of the supervision to support this work. In addition, surveys are being undertaken to understand the experience of the assessment and care management process. This, together with a programme of qualitative "what matters" exercises, has led to a better understanding of how best to shape practice and service provision in a person centred way .

#### Children

Partnership work within the council has been taken forward across a number of initiatives, one of which is aimed at the reduction of the need for statutory intervention by the provision of effective community based services. A regional intensive family support service is also being developed to help families who need a high level of support. The monitoring visit of January 2013 found a "disconnect" in the co-ordination of resource planning. The council carried out a review of preventative services as a result, and these are to be more aligned to need.

A quality assurance framework was developed and agreed by members in 2011. There has been a lack of capacity to implement the framework across the service, with team managers carrying out isolated pieces of quality assurance work. There is still a lack of capacity to monitor the performance management framework. This is to be developed.

The IT system which had previously been dismantled in response to introducing the systems model prevented the reporting of performance indicators. This has now been reviewed and refined.

### **Areas of progress**

- Work based opportunities for people with a learning disability or a mental health problem.
- Developments within assistive technology.

### **Areas for improvement**

- Review the capacity of the occupational therapy service to meet demand, in relation to high caseloads and management support.
- Awareness raising across adult services and health, of the benefits of assistive technology.
- Ongoing revision of the file audit tool to ensure it remains fit for purpose across all service areas.
- Systematic gathering of quality assurance information in adult services including outcomes following intervention.
- Ensuring support and prevention services for children and families are coordinated.
- Developing reliable quality assurance and performance reporting within children's services.

## Effect on people's lives:

### **Adults**

Progress continues to be made in risk and threshold management in safeguarding and the escalating concerns process. A case review which will be published in autumn 2013 has identified further training needs in non-criminal investigation training. The new regional adult safeguarding board will be critical in further developing strategic capacity in adult safeguarding. CSSIW's experience has been that people are protected by an effective safeguarding response and that individuals are well supported. It is recognised that outcomes for people within the safeguarding process need to be clearer, with greater consultation with those concerned as to their wishes and the outcomes they are seeking.

Joint working within safeguarding is felt to be good, the roles and responsibilities of agencies in the safeguarding and escalating concerns process still require clarification to improve understanding and responsiveness. The council has developed methods to screen and risk assess referrals, and has brought the safeguarding and deprivation of liberty safeguards roles together. This may impact on the capacity of the safeguarding team and the council will need to monitor this closely.

The council commissioned the Neath Port Talbot carers service to reach out to people who do not otherwise access services. This has been successful in combating social isolation and providing respite, and is now moving into the mainstream of service provision. A rolling programme of staff training regarding carers assessments, quality, and content is now necessary. The awareness of carers and the need to offer and provide quality carers assessments also needs to be embedded into social workers contact with users. The number of carers assessments has been low for a number of years compared with similar councils. The council made progress in addressing this issue this year and the number has increased. Carers have been consulted, with the outcome being,

that improved training and awareness raising with care management staff has been identified.

Direct payments continue to be promoted by the council. The focus this year has been the take-up of direct payments within mental health service and learning disability teams.

#### Children

The numbers of looked after children and children whose names are on the child protection register continued to rise last year. The council has a high rate of looked after children compared with similar councils. Planning for children who are looked after appears weak with low proportions having a plan in place on placement or a plan for permanency at there second review. There was a big drop in the numbers having a plan for permanency. However placement stability appears to be comparable with other similar councils. The allocation of social workers to children looked after is low compared with other councils. Insufficient statutory visits are being carried out and it is of concern that there has been a significant drop in looked after children and care leavers having pathways plans in place for their future. Only one fifth has plans in place. Only three quarters of children leaving care remain in contact with the council, a lower proportion that most councils.

Performance in convening child protection case conference and core group reviews on time is weak compared with other councils. The high number of cases in legal proceedings has increased the pressure on social workers, case conference chairs, and the independent conference and reviewing team. Inspectors saw examples of the recording of child protection actions having been adapted to fit the systems model. As a result, the recording of strategy discussions and the outcome of any Section 47 investigations were lost in the body of the recording.

In the last quarter figures for referral management did show an improvement. Clearly this trend must continue and be sustained.

### **Areas of progress**

- Risk and threshold management within safeguarding.
- Promotion of direct payments.

## **Areas for improvement**

- The council needs to consider whether with the additional Deprivation of Liberty Safeguards responsibilities, the safeguarding team has sufficient capacity to meet current and future demand.
- Work with partners to clarify roles and responsibilities where joint working in safeguarding.
- Staff training regarding the provision of carers assessments.
- Planning and social work support for looked after children.
- Timeliness and quality of the application child protection procedures.

Planning and support for children leaving care.

### **CAPACITY**

### **Delivering Social Services:**

#### **Adults**

People's views regarding the ongoing quality and development of services is in place through consultation events with user groups, advocacy services and carers.

Quality assurance processes across adult services are not currently consistently applied and the development of universal IT systems to gather and report on the quality work carried out would be beneficial. The council continues to further embed quality assurance mechanisms together using case file audits.

The council's community of practice networks across all community care areas for social work staff at all levels continues to show benefits of shared understanding and awareness across the social care workforce.

The council has highlighted sickness management across all service areas as an ongoing concern. Whilst a new maximising attendance policy was introduced, this has not been sustained. The council has identified this as an area that will need robust management scrutiny again during this year.

Good progress has been made to fully integrate community health and social care services. Management structures are now fully integrated with the head of community care and housing seconded to the health board and a full member of the locality management team. She is responsible for integrated community services. A management structure has been consulted on, approved and implemented below the head of service with integrated community services managers for community network and community resource teams.

Work to integrate IT, performance standards, assessment processes and service provision has progressed well.

#### Children

The workforce was in a vulnerable position at the time of CSSIW's inspection. The council has had some success in recruiting experienced staff by creating consultant social worker posts and improving terms and conditions. The profile of the staff group showed a high number of new staff in post, including a large number of social workers with little experience of practice. High usage of agency social workers is still apparent.

The workforce continues to be in a vulnerable position. There has been some success this year in recruitment and this is a main focus in the council's improvement plan. There remains a lack of experience in the workforce at both manager and practitioner level and this continues to be a challenge. There has

been continued reliance on a high number of agency social workers although, more recently, the principal officer posts have been filled. The lack of senior managers has limited the capacity for the council to drive improvement.

### **Areas of progress**

The integration of community health and social care services.

## **Areas for improvement**

- The council must consider supporting the current quality assurance processes with effective IT support.
- Ongoing work in order to reduce the impact of sickness absence on the delivery of services is still required.
- Stabilising the workforce in children's services and ensuring that staff are competent and feel supported.

## **Providing direction:**

A new head of children's service and principal officer team have been appointed. The senior management team in community care and housing has remained unchanged. The stability within adult care has enabled progress on its transformation agenda via the Western Bay Health and Social Care Partnership, the integrating community services programme and the council's own transforming adult social care programme.

A new, experienced head of children's services took up post in September 2012 and this is enabling the council to make progress in implementing the improvement plan. However, there needs to be a period of stability so that improvements can be maintained and built upon.

The Wales Audit Office annual improvement report for 2012/13 concludes that the council is securing improvement in many areas, but it faces particular challenges in children's services and is developing its performance arrangements during a time of considerable change. The council has improved in many areas but challenges remain, including addressing the serious concerns identified in children's services. The council is taking steps to improve its approach to performance management but, in the absence of good measures of impact for service users, it is difficult to establish whether aspirations are being met.

The council's arrangements to support improvement are generally sound, but it faces some difficult financial decisions. In developing medium term financial plans, the council must focus on securing sustainable long-term improvement.

Members are taking an active and direct interest in the delivery of services. The leader has ensured line of sight on front line service delivery and teams, and a members panel has been established. CSSIW has met with the chair of scrutiny who expressed his intention to take an active role in seeking assurance and his willingness to receive advice on what members should be looking for.

The director of social services, health and housing retired at the end of the year. An experienced director was appointed from April 2013 on a time limited basis.

# **Areas of progress**

- The transforming adult social care programme.
- Integrated working with health.

## **Areas for improvement**

- To continue to make progress in the implementation of the strategic improvement plan.
- Succession planning to secure a permanent director of social services.
- Development of competence of members, and the ability of scrutiny to understand the complexities and statutory expectations of social services and provide appropriate challenge to officials.