



## **Annual Review and Evaluation of Performance 2012/13**

**Local Authority Name: Newport City Council**

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

### **Summary**

Newport City Council has been moving through a period of significant change with new appointments (some interim) at the highest levels in the organisation. This provides both opportunities for fresh thinking but also creates risks. The council has taken bold and innovative decisions in relation to children's services in recent years particularly in developing third sector involvement with Barnardo's. It will be important to critically anticipate and mitigate risks, evaluate outcomes and ensure the services deliver safe and reliable care.

The council has taken a proactive approach to engaging and working with the third sector. Its relationship with the health board is challenging in some areas of service delivery. Given the financial pressures, the council rightly needs to be convinced of the costs and benefits of any arrangements it enters into.

### **Adults**

The budget for adult services was overspent in 2012/13.

In general, the council provides reasonable care and support, however, senior managers are now questioning the value of some of the legacy arrangements. This is particularly so in relation to its commitment to the Gwent Frailty programme and the quality premiums paid for care home placements, both of which are proving expensive. Working with health is proving challenging. This is reflected by the high and increasing number of delays in transfers of care from hospital which suggests that care pathways and interagency working are not optimised. There are also pressures with the amount of available residential placements in the area. This requires careful review.

Capacity to deliver adult services may be an issue. In 2012/13, the council did not review care plans as it should and therefore cannot be assured that people are receiving services that remain appropriate to their needs, or that resources are being managed effectively.

## **Children**

Performance in children's services is mixed. Whilst some performance indicators are positive, others suggest significant risk, in particular high staff turnover, less initial assessments being undertaken, the high and increasing re-referral rate, the low numbers of children seen alone as part of initial assessments and the delays in convening core group meetings.

There is clear evidence of a broad range of preventative services the council has developed in conjunction with Barnardo's and that these are having a positive impact for people. Although a number of targets are being met and improved upon, CSSIW has had concerns about the quality of decision making in some instances. The continuing high turnover of frontline childcare staff is resulting in the loss of experienced staff and managers and the consequent greater proportion of less experienced staff managing caseloads and incoming referrals is likely to present an area of risk. As noted, the council has a high and increasing re-referral rate. Although a review has taken place, this pattern needs to be properly understood and the reasons behind it to ensure that the correct thresholds are being applied.

The council has contained pressures for children to become looked after and not experienced the increases experienced elsewhere across Wales.

The director's annual report to the council is well structured and detailed. It presents a confident view of effectiveness and innovation in relation to children's services. The director acknowledges challenges in relation to adult services and budget pressures. This evaluation recognises the issues raised by the director and places emphasis on these, along with additional issues that are considered to be salient for Newport Social Services.

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

- Financial pressures in adult services and the challenge of collaboration with health.
- The leadership changes and temporary appointment of the statutory strategic director, people and integrated head of children's services. This may present a challenge to strong and consistent governance.
- The appointment of the integrated head of children's services with Barnardo's. Whilst this high level of integration with the third sector is clearly innovative and provides opportunities, there are potential risks including conflicts of interest.
- Continued high staff turnover in children's services and an imbalance of newly qualified social workers impacting on morale and shortages in skills.

- Response to incoming referrals. A number of indicators suggest potential risk. In particular high re-referral rates suggest decision making processes and thresholds on assessment may not be correct.

### **Response to last year's areas of development**

In general there has been progress on the areas identified last year.

#### **Adults**

Staff are positive about the progress in relation to transition into adult services achieved by the appointment of a dedicated transitions worker in the disabled children's team.

A decision was made to keep the New Willows respite service open, while new models of service are explored, including widening the remit of the Shared Lives scheme. Consequently, it appears that respite for young adults is improved.

Adult carers needs have been considered during the year and a group of carers report greater support from the carers' development worker appointed.

#### **Children**

There are acknowledged difficulties with the assessment of young carers. CSSIW will explore this further with the council during the coming year.

The effectiveness of preventative and early intervention has been reviewed (IFSS overview report, March 2013) and an audit of duty and assessment team decision making and thresholds has taken place.

The 16 plus team has developed a department work and pensions funded course for young people to improve their prospects of training or employment. In addition, young people are able to access a third sector service that provides psychological support for care leavers. We would be interested in the evaluation of outcomes of this additional support.

#### **Good practice identified**

We have previously recognised the partnership with the third sector in broadening the range of preventative services available to families and the work of the Serennu Centre in supporting disabled children and their families.

- Referrals for homeless young people are passing directly to the 16 plus team without passing through duty. This means young people get early access to people who understand their needs and the resources available.

## **Visits and inspections undertaken during the year:**

Newport was included in the CSSIW national review of outcomes for children in need/looked after children in November 2012. Individual feedback was provided that identified good practice with regard to the “signs of safety” tool and service user response to Integrated Family Support Team (IFST). It noted concerns in relation to quality and evidence of critical analysis on initial and core assessments, early decision making, along with caseload and workforce issues. A CSSIW inspection of children’s and family services was completed in February 2013. This looked at the effectiveness of preventative/early intervention and found early indications of progress. It also noted very high staff turnover. The inspection process looked at decision making and case practice and noted some serious concerns that were brought to the attention of management in children’s services.

CSSIW has visited a range of front line child care teams. These included the duty and assessment team, child protection teams, disabled children’s team and 16 plus team. We wished to understand how the change agenda had “bedded in” and how recruitment and retention issues were impacting on staff. In addition, we have met with service managers for adult and children’s services and the quality assurance, director and head of children’s services.

We have met with a Barnardo’s manager and staff from the Family Support Team (FST), Family Assessment and Support service (FASS) and Children with Additional Needs (CANs) to understand the range of early intervention and support services. We have also met with SNAP Cymru, Be Heard advocacy project and representatives of Newport Carers Forum to gain an understanding of the views of service users.

These activities were in addition to CSSIW’s inspections of regulated services provided by the council.

## **Areas for follow up by CSSIW next year**

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

- Impact of budget pressures in adult services.
- Collaboration with health.
- Services to promote/support adult and child mental health and wellbeing.
- Identification of and support to young carers.
- Delays in hospital discharges.
- Management of referrals in children’s services.
- A national thematic inspection of looked after children.
- A national thematic review of commissioning of social care for older people.

- Work with the Wales Audit Office (WAO) to begin to scope a review into the effectiveness of the Gwent Frailty project.

## **PERFORMANCE**

### **Shaping services:**

#### **Adults**

Newport entered into a significant partnership in relation to the Gwent Frailty arrangements. This has not delivered to the local authority's satisfaction. This has resulted in significant capacity issues within local authority services. Newport is reviewing its position within the partnership, the application of the eligibility criteria and the option to reduce the current demand on particular services. The local authority feels it needs to ensure sufficient parity in its relationship with health.

An evaluation of the first two years of the frailty programme across the five local authorities is underway.

Some adult day services have been closed during the year as part of a larger modernisation agenda. Going forward, Newport is developing a holistic strategy for adult services to replace the more fragmented strategy of previous years. We have viewed the draft document detailing the five year vision for adult services, version dated July 2013.

Adult mental health is part of a Gwent wide strategy development and will be an area of interest for us in 2013/14. A health led management post is expected to be in place in early 2014.

Integration is less advanced in relation to people with learning difficulties, where health is the lead agency and local authority leadership will be exploring further the potential long-term benefits of integration in this service area.

#### **Children**

Newport has continued to develop its preferred partner relationship with Barnardo's throughout 2012/13. Preventative and early intervention services are managed by Barnardo's and funded through Families First and other funding sources. The IFST service continues and, at the end of the pilot phase, is due to be rolled out across Gwent. FST and FASS are being delivered as part of integrated services with Barnardo's. These teams contain a mix of Barnardo's and local authority staff. Other services are delivered by Barnardo's alone.

This approach offers a substantial range of intensive direct support for families. It may be necessary to monitor the move to increasing specialisation of support teams and individual staff roles to ensure that arrangements are co-ordinated and

improve outcomes for people. The CSSIW report in 2013 commended the focus on parent's ownership of the change process and the "distance travelled" model.

Newport has maintained its numbers of looked after children in 2012/13. There was a target to reduce this population and the range of preventative and family support services is designed to reduce the likelihood for young people needing to be accommodated or subject to compulsory interventions. However, this status quo is against the backdrop of more significant increases in some comparable authorities.

A draft joint commissioned report on differences in the looked after population by Cordis Bright was released in April 2013. Newport was one of five local authorities sampled using a case study approach. Having a well-defined strategy and leadership commitment to reduce numbers were seen as significant in achieving a reduction in demand. The research also cites the partnership with Barnardo's in the delivery of the preventative and support services as helpful in achieving a reduction in the potential care population. However, caution is expressed and the importance of less qualified support workers being suitably skilled to identify and work within a higher degree of risk within families is clearly identified. .

The planned integration of Newport and Torfaen Disabled Children's teams has not been completed and the status quo is one of co-location rather than integration. Staff consultation took place during the year and the differences in referral processes, IT systems and line management arrangements were cited as blockages. There now appears to be uncertainty as to the advantage to service users of full integration. Service users do, however, continue to benefit from the proximity of health and social services in the Serennu Centre and the excellent facilities provided in the building.

Staff are positive that the service they provide to families is enhanced by their working relationships with health and CANs, funded through Families First and managed by Barnardo's. They are positive that the traditional gap between disabled children's services and adult services is being effectively narrowed by increased independence training with young people, to the extent that some do not require adult services. Staff also describe constructive relationships with the transitions worker in adult services.

The 16 plus team is confident it can maintain contact with all young people leaving care in Newport, which is confirmed by the performance information received for 2012/13. Extra staffing has been allocated to the team. Young people in Newport are able to access an Action for Children service that can provide psychological support during this time of their lives. Young people can also access a course funded through a Department of Work and Pensions grant to prepare them for training/ employment.

The 16 plus team is now receiving direct referrals of homeless young people from the duty system. This is a pro-active and pragmatic approach to the support of young people whose needs can be overlooked in a busy intake team.

### **Areas of progress**

- Transition for young people with disabilities.
- Response to young homeless by direct access to 16 plus team.

### **Areas for improvement**

- A more timely response to adults referred to local authority services via the Gwent Frailty programme.

### **Getting help:**

During visits this year, external professionals, service users and their advocates all expressed concerns about accessibility, processes and facilities at the Information Station. People have described difficulties in getting through by telephone. They are concerned about the lack of privacy when speaking to staff in booths and waiting arrangements for meetings. The local authority staff we spoke to do not like the electronic booking process to access interview rooms. Service users are aware of this which means that gaining privacy is viewed as unduly effortful. The room off the public area used for review child protection conferences is regarded as unsuitable for this purpose and we would share this view. Similar views were included in a subsequent CSSIW report in February 2013 and it is evident concerns continue.

We are aware that the Information Station is a corporate facility and not under social services direct control. Nevertheless, we regard as valid criticism that the functioning of the building is not well received by those we spoke to and may not fully meet the needs and rights of vulnerable people around privacy and dignity. Some staff we spoke to liked aspects of the agile working arrangements and it may be that these changes have settled in.

### **Adults**

We understand that the efforts of the Frailty team to align with the hospital and health service have not been entirely successful and the hospital has altered its discharge system. The head of service believes this has contributed to the doubling of the rate of delayed transfers of care in 2012/13. This is now the highest in Wales by a significant margin compared with all but one other local authority in Wales. We understand the local authority has placed a manager at the hospital in the last few months (2013/14) with the aim of making improvements.

The local authority's community resource team created to deliver on the Gwent Frailty programme by receiving referrals from hospital (and GPs) has struggled with capacity in 2012/13. The local authority reports that remedial action is improving this situation in 2013. Given the impact on people of prolonged hospital stays, we would endorse the need to continue to focus on these problems.

The timeliness of reviews of care plans has decreased year on year for the past three years, where the Welsh average has increased incrementally. In 2012/13, less than two thirds of people in Newport with a care plan had it reviewed and this was the second lowest percentage figure in Wales. As a result, people may not be receiving the most appropriate care as their needs are not being reassessed and this will impact on outcomes and wellbeing.

The waiting time for people to receive assessments for adaptations has improved in 2012/13, but remains an area for improvement.

A small group of carers described mixed experiences of assessments including a view that response times were quicker in urgent situations, implying appropriate prioritisation.

## **Children**

Earlier in 2013, there were changes in transfer points between the duty and assessment team, the child protection team and the looked after children teams. The outcomes will be evaluated, but the changes anticipate changes in public law and evidence planning and responsiveness. Team managers feel this is better for children.

The director's report describes a significant increase in contacts to the duty and assessment team although actual referrals have reduced. A change in the decision making process means that contacts may be passed to the prevention team, and not classed as a referral, unless there is a clear safeguarding element. Performance data indicates that a decision is made on virtually all referrals within one working day.

There has been a reduction in the proportion of referrals that result in completion of an initial assessment. This is against the Welsh trend and is significantly less than the Welsh average. This may require further consideration; fewer assessments are being completed proportionately, even where referrals have reduced and have been subject to an initial screen to divert to prevention where possible.

Performance data for initial assessments indicates good completion within timescales. However, in one third of assessments completed, the social worker has not seen the child. This is an increase on the previous year and is greater than the Welsh average. Social workers and senior management have queried this statistic. A quality audit undertaken leads the local authority to believe there



may be problems with recording practise and data collection. The leadership team will need to be satisfied that sufficient, and sufficiently thorough, initial assessments are taking place.

Performance data indicates the proportion of re-referrals received are the highest in Wales. It is suggested this is a feature of the different definitions of referrals across local authorities. However, the figures for Newport have not altered significantly from the previous year, despite a redefinition of referrals and the statistic relates to a proportion rather than a raw number. An internal review concluded that the duty and assessment team thresholds were satisfactory and there is not a high rate of referring back from the prevention team.

However, we believe the high rate of re-referrals is a cause for concern and should be reviewed again as a matter of priority.

Newport performs well in relation to its completion of core assessments within timescales in relation to the Welsh average.

There was a significant increase in the number of children on the child protection register in Newport in 2012/13 from the previous year. This is attributable to children remaining on the register for longer, rather than more children being placed on it in the year. However, the director reports a sharp increase in registration in the first quarter of 2013/14.

There has been a slight reduction in 2012/13 in the proportion of initial child protection conferences that were held within timescales, although Newport continues to perform in line with the Welsh average. Conversely, more core groups have been within time this year, but it is still an area for improvement.

The criteria for support from the disabled children's team have been altered with the establishment of the CANs team managed by Barnardo's. Open cases to the disabled children's team initially increased then decreased quite markedly in 2012/13. It has been explained that the increase was due to referrals for occupational therapy being allocated for initial assessment, which no longer happens. Part of the subsequent decrease is due to a cohort of young people turning 18 and leaving the service. The decrease will also be due to CANs working with those with less significant disabilities. The reported increase in severity and complexity of cases within the disabled children's team will also be as a result of these changes. The clear philosophy is to reduce reliance on social services and facilitate utilisation of universal community resources.

### **Areas of progress**

- Some improvement in waiting time for assessments for adaptations.
- Revised referral process and criteria for children's services.
- Completion times for core assessments.

## **Areas for improvement**

- Transfers of care from hospital.
- Further consideration of re-referral rate and assurance about the quality of decision making.

## **The services provided:**

### **Adults**

Overall, Newport has reduced the number of adults to whom it offered services in 2012/13, for a further year. The council has queried if thresholds have been altered: the head of service's view is that there has been a more consistent application of existing eligibility criteria. While there is ambition to further this reduction in 2013/14, there is recognition that this may not be possible to achieve safely and figures from the first quarter would indicate that numbers are stabilising.

There has been a slight decrease in the numbers of older people in care homes in Newport in 2012/13; this is in line with the trend in Wales.

The local authority spend on older people's nursing placements is somewhat higher than the Welsh average and that of neighbouring authorities. Fees paid to the private sector for Newport residents are above that for some other neighbouring authorities, due to Newport's involvement in the Care Home Quality Fees project with Torfaen. This was highlighted as an area of good practice in our report for 2011/12, as an initiative to drive up quality. However, from evidence gained from CSSIW regulatory work, we would question if extra quality of care has always been delivered despite the fact that enhanced fees are being paid.

Newport directly manages five adult care homes. Our regulatory inspection work finds that there are many elements of good quality care provided to residents. Two homes have been without registered managers for a long period of time which is in clear breach of care home regulations. We recommend that attention is given to progression planning and that the registration process is begun more swiftly for new managers. We have noted some issues with overall standards of décor within the local authority homes. A spending freeze at the end of the financial year resulted in essential equipment not being replaced. We would expect the local authority to apply the same standards to its own care homes that it does in its commissioning in the independent sector.

Regulatory inspections have highlighted some deficits in procedures within the two local authority services that provide domiciliary care, although the standard of care and promotion of independence is high. We are aware of significant problems of capacity in CRT, discussed above. We have issued non-compliance notices to both services in relation to recording around medication and risk assessments.

We were concerned that these issues took a considerable period to be addressed, although compliance issues are now resolved.

Telecare is regarded as a key resource for community based packages of care and has undergone some reorganisation in the last year and savings have been made. Expansion of its use was planned but did not occur in 2012/13, where use fell significantly short of a high target. Carers have expressed concern that the response to calls may alter as a result of re- contracting in 2013/14 and may place greater expectations on the ambulance service. Further exploration of this may be required.

The vast majority of adults with a physical or sensory disability in Newport are supported in the community. There is a relatively high rate of Newport adults with a learning disability in residential care; very high in relation to some neighbouring authorities and slightly higher than the Welsh average. This could be a matter for review to ensure that support for people with learning disabilities and/or the resources available fit with the current thinking around best support.

Carers have described restrictions on their use of the flexible carers grant. The local authority has exceeded its target for use of direct payments to people to promote independence.

The performance information for support provided to the carers for adults and assessments carried out requires re-examination as there appears to be a significant error in the data submitted.

Carers are very positive about the support provided by the carers development worker and recognise the impact of the carers' assessment worker in completing assessments. However, they are not aware of the "carers champions" described by the director in his report. Carers spoken to feel that their needs are higher up the agenda than previously and were positive about the director in this regard. They are also positive about the Shared Lives scheme while welcoming the continued operation of New Willows for those with more complex needs requiring respite. They highlight a "gap" in transitions between local authority and health funded support and a lack in local authority training on manual handling.

## **Children**

We did not speak to young carers in preparation for this report but will seek to meet with them during the coming year. The head of service acknowledges that the assessment and support of young carers did not meet expectations in 2012/13.

The range of services provided in conjunction with Barnardo's has increased and provision is considerable and complex by volume and degree of integration, compared to third sector provision in other Welsh authorities. A sizeable range of both specialist and more generic family support services is now in place.

Newport undertakes consultation through the child advocacy organisation. Independent reviewing officers ensure young people are provided with an advocate where appropriate. Young people can participate via the Children in Care Council (CiCC) and the Junior Safeguarding Board. In 2012/13, the CiCC presented to council in response to the pledges included in the Corporate Parenting Strategy. This included young people's views on choice and control in how LAC reviews are conducted. Facilitation of CiCC has recently been taken "in-house" (previously facilitated by Be Heard) and we hope this does not impede the voice of young people. The level of young people's attendance at child protection meetings may be an area for attention.

There have been a number of changes to the structure of IFSS teams and to the points of entry/transfer between teams. The crisis team has been subsumed into the FASS and this team and the FST now come under a newly appointed manager (2013/14). There has been a degree of rationalisation and the manager is increasingly gate keeping referrals. There were delays in allocation in 2012/13 which these changes seek to address.

The head of service tells us clear information is provided to social workers on the range of services available. Given staff turnover, it is possible the level of understanding has decreased during the year. In addition, eligibility criteria were blurred where waiting lists in one support team led to cases being allocated to another.

The in-house fostering service is substantial and was inspected by CSSIW in October 2012. Strong management and greater staff stability were noted in this team, although turnover in other parts of children's services was having an impact. More timely completion of foster carer reviews was expected.

There was a sizeable reduction in spend on out of authority placements. The budget for out of area fostering was exceeded, although the trend is downward. However, Newport reduced its spend for out of authority residential placements for young people.

Newport continues to maintain a relatively high local authority stock of four residential children's homes. Recent inspections of the larger two homes have found stable staff teams that readily describe their focus on good outcomes for children in their care. We understand there may be a change in senior management oversight of provision in 2013/14 and we are aware of a broader review of the therapeutic approaches used within the settings. This coincides with the development of a therapeutic team. We are also aware of a Stage 3 complaint that is resulting in a review of practice. These are areas we wish to find out more about during 2013/14.

The director is considering the potential for a further unit for children with autism to be provided by the local authority in the future. If appropriate, high quality local provision can be established for children, and further savings made from the out of authority budget, then this would be a positive strategy.

### **Areas of progress**

- The development of a therapeutic team and a review of residential provision, focussing on therapeutic approaches.

### **Areas for improvement**

- To improve identification and support for young carers.
- To ensure the maintenance of high standards in local authority adult care homes and a prompt response when non compliance is identified.
- To ensure the maintenance of high standards in local authority domiciliary care teams and a prompt response when non compliance is identified.
- To ensure accurate collation of data to evidence service provision to carers.

### **Effect on people's lives:**

#### **Adults**

Delays in reviews of care plans will impact on ensuring people are receiving the most appropriate support. Delays in hospital discharge or long waiting times for an assessment for adaptations impedes people in progressing their recovery or reablement.

Last year we identified adult protection as an area of risk. We believe there has been improvement and now consider that arrangements to protect adults in Newport are generally working well.

The local authority worked well in collaboration with CSSIW and health in 2012/13 to improve the outcomes for people resident in an independent sector care home by ensuring its closure. We would be interested in information on continued outcomes for those involved in moving homes at that time.

#### **Children**

Last year, we highlighted that a third of children were not having their child in need plan reviewed within timescales. There has been a marked improvement in 2012/13, where all plans were reviewed and this should impact positively by providing a clear focus for social work support.

All care plans were in place for children that became looked after last year and all young people who should have a plan for permanence did so. Those leaving care

had pathway plans. Health and dental check ups are taking place for looked after children and thereby ensuring these needs are met. School attendance figures for looked after children are good, but there has been a doubling of school changes for looked after young people from 2011/12. The director has explained that this rise was due to essential and planned changes to achieve permanency placements for a large number of children. The trend for 2013/14 will be reviewed by CSSIW during forthcoming engagement meetings.

Children and young people are very likely to have allocated social workers or personal advisors, at every point in the system, and statutory visits were undertaken. However, the high turnover of frontline staff determines frequent changes in social worker. This requires young people to “tell their story” again and heightens risk of salient information being missed. It reduces the likelihood of the young person investing in a relationship with a social worker. Further, social workers may be less able to make quick low level decisions due to relative lack of experience and knowledge of the child. This could impact on everyday life and outcomes for young people.

The statutory annual report describes a reduced referral rate and a reduced capacity in IFST in 2012/13. A new team manager has been appointed which, it is hoped, will strengthen the team’s operation this year. However the impact of roll-out across Gwent will require further consideration.

The evaluation of IFSS is described in the 2012/13 overview report. This presents strong evidence of positive feedback from service users and agreement from service users and workers that progress has been made in relation to the goals set by families. The report acknowledges that longer term maintenance of outcomes has yet to be evaluated. In addition, there is an intention to monitor the impact of preventative work on subsequent youth offending and antisocial behaviour.

A review of the looked after children population in a small sample of local authorities across Wales (including Newport) was carried out during the year by Cordis Bright. Their report recommends more robust quality assurance and review of prevention and early intervention services. We would concur that follow up work on meaningful and long-term change is important. Ongoing evaluation will aid periodic review of the overall approach to children and family services and the level of investment in support services and the safe management of risk.

There is no specific evaluation system in place for the work of the disabled children’s team but we are told this will be considered in 2013/14.

Initial child protection conferences tend to be held on time although data indicates subsequent core group meetings are not always held in line with expected timescales and the council’s performance is weak in comparison to other councils.

## **Areas of progress**

- Adult protection arrangements.
- Reviews of child in need plans.

## **Areas for improvement**

- Reviews of adult care plans.
- Development of outcome measures for disabled children.
- School changes for looked after children.
- Timely core group meetings.

## **CAPACITY**

### **Delivering Social Services:**

Newport demonstrates an awareness of impending welfare reform and has consulted stakeholder agencies. Newport is above the Wales average in relation to indicators of poverty and deprivation. Despite a stable population projection for the next 10 years, changes in benefits will impact on young people and families and thereby the demand on social care services.

We understand a draft corporate assessment produced by the WAO is with the council and expresses concern that Newport is not meeting its financial targets. The director reports an overspend in 2012/13; a larger overspend in adult services was offset to some extent by savings in children's services. This is against a backdrop of an ongoing savings target. Social services staff will undergo job evaluation in 2013/14 which has the potential to lead to an increase in payroll expenditure.

The director's report expresses confidence for 2013/14 that better services can be delivered at reduced cost. In general terms, this includes an intention to reduce the numbers of children and adults in residential care, enabling people, changing expectations of services delivered and increasing early intervention services. It is also recognised, however, that costs rise where those that will continue to require direct services are those with the most complex needs.

Frontline staff say the biggest challenge facing children's services is the high staff turnover and level of vacancies within teams. This is particularly in the key posts of senior practitioners and team managers. The market forces allowance remains in place but it seems that the signs of improvement noted in the CSSIW report of February 2013 have not continued sufficiently. The lack of internal staff promotions is apparent at all levels and illustrates a sizeable skills/experience gap in the workforce. This has led to a reliance on agency staff at team manager level.

Newly qualified social workers continue to feel the benefit of in-house training and coaching. However, teams expressed less certainty with regard to workforce training opportunities for more experienced frontline staff. There appears to have been some issues within the training section that may now be resolved.

A common theme arising from discussion with staff at all levels is that large and complex caseloads are contributing to retention issues. According to performance data for 2012/13, caseloads for Newport children's services are comparable to the Welsh average and less than a neighbouring authority. However, there is a perception that a concentration of service users with aggression and alcohol related issues contributes to staff stress and workload.

It may be helpful to make increased use of staff exit interviews to examine the reasons people give for leaving as this does not seem to be clear. It may be equally appropriate to consider what determines a more positive experience for workers. Management and staff in the 16 plus team and disabled children team impressed us with their enthusiasm, clear philosophy of intervention and strong child centred focus. Alongside this, the IFSS overview report identifies service users as most impacted by the relationship they develop with their support worker. Given that this is also likely to be a positive factor for the worker, a potential line of enquiry in relation to retention issues may be the satisfaction levels of front line childcare social workers where signposting to support services has reduced their engagement in direct intervention work.

There have also been vacancies in the IFSS and IFST services that have impacted on capacity and delivery; although uncertainties for staff tenure is thought to have been a factor for these employees.

There is awareness of changes in public law and leadership has altered points of transfer between teams to best suit this. The financial investment and degree of integration with Barnardo's is considerable and the impact of the loss of this contractual arrangement would be significant for the delivery of the council's preventative services.

Adult services currently has a relatively low staff turnover. Staff unrest caused by a market allowance awarded to childcare staff appears to have eased throughout 2012/13 and staff are anticipating the upcoming job evaluation exercise.

### **Areas of progress**

- Staff morale in adult services.

### **Areas for improvement**

- Staff turnover and morale in children's services.



### **Providing direction:**

2013 is notable for the change in leadership within Newport social services in most senior positions. A new chief executive was appointed in 2013 and brings a new level of challenge and enquiry to the council. The director's temporary contract could impact on stability, although it does provide continuity of leadership, due to the internal appointment. The leadership change does not appear to be impeding vision. Leadership in Newport has embraced the agenda for collaboration and integration outlined in the White Paper and Social Services and Wellbeing Bill. While involvement in some partnerships is under review (Gwent Frailty project) and there is no longer joint funding for the head of adult services, the philosophy behind partnership working remains strong.

The director has cited community resilience as the next major theme. This connects with the focus on enablement, early intervention, third sector partnerships, reducing residential populations and changing people's expectations of statutory social care in both adult and children's services. As he has stated, this strategy involves a relatively high toleration of risk.

The head of service and director have referred to a holistic re-visioning of adult services with Newport and a draft document outlining such is available. This involves review of all current provision and the development of an overarching strategy. While this ensues, we would expect that high standards are maintained in local authority adult care homes.

The Gwent strategy for adults with learning difficulties equally focuses on increasing community living and a more citizen centred approach.

Remodelling the head of children's services as an integrated post with Barnardo's (effective from July 2013) has been described as the next step in the journey with the preferred partner. We are aware that consideration has been given to managing the considerable opportunities for conflicts of interest; the imposition of so called "glass walls". The impact of this bold and innovative development will be assessed next year.

We understand that the council will review its oversight of education in Blaenau Gwent in September 2013. Newport is taking the regional lead in the roll-out of IFST across the Gwent local authorities.

The South East Wales Local Safeguarding Board (SEWSCB) was established in April 2013. It is therefore not within the timeframe of this report and it is too early to evaluate its impact and effectiveness. Newport was committed to retaining a number of Newport specific associated groups that sit below the board. The interface and remit of these groups will be considered next year. Financial arrangements will require swift resolution for effective management.

The scrutiny committee has expressed concern at the reduction in adults receiving services in 2012/13 and eligibility criteria are likely to be considered again. Scrutiny of adult services is felt to be robust, while there may be less challenge of children's services. Broadly, the director feels there is good cross party support for the social care agenda.

### **Areas of progress**

- Production of a draft overarching strategy for adult services.

### **Areas for improvement**

- Stability in relation to contractual arrangements for director.
- Ensuring any risks associated with the appointment of the head of children's services are assessed and properly mitigated.