

Summary

In April 2016 full Council approved eight Improvement Objectives for 2016-18. This is part of our duty under the Local Government measure 2009. The objectives have been chosen through consultation and represent areas that the citizens of Newport want the council to focus on.

The Council is also subject to the Well-being of Future Generations Act (Wales) 2015, which states that well-being objectives must be set that maximise our contribution to the Well-being Goals for Wales.





The Improvement Objectives align with and contribute to the achievement of the Well-being Objectives which were agreed as part of the Corporate Plan by Cabinet in March 2017.

The council provides many other services in addition to the work focused on in this report, the objectives reported here are a snapshot of how the council is focusing its efforts on improvement.

This report summarises progress towards delivering the actions set out in the improvement plan and the performance measures that support those actions in 17/18. The overall assessment of progress towards achieving the Improvement Objectives is classed as 'Green – Good.' The council continues to meet its obligation to demonstrate continuous improvement.

| <i>Report produced in...</i> | <i>September</i> | | <i>December</i> | | <i>March</i> | | <i>June</i> | |
|---|---------------------|---|------------------------|----|---------------------|---|-------------------|--|
| <i>To show status for....</i> | <i>Q1 Apr-Jun</i> | | <i>Q2 Jul-Sept</i> | | <i>Q3 Oct-Dec</i> | | <i>Q4 Jan-Mar</i> | |
| 1. Improving Independent Living for Older People | Green - Good | ★ | Green - Good | ★ | Green - Good | ★ | | |
| 2. Ensuring people have the right social services to meet their needs | Amber - Acceptable | ● | Green - Good | ★ | Green - Good | ★ | | |
| 6. Ensuring the best educational outcomes for children | Green - Good | ★ | Green Star - Excellent | ★* | Green - Good | ★ | | |
| 8. Improving outcomes for youth justice | Amber - Acceptable | ● | Amber - Acceptable | ● | Amber - Acceptable | ● | | |
| OVERALL | Green - Good | ★ | Green - Good | ★ | Green - Good | ★ | | |

In order to provide a more meaningful assessment of the progress of the Improvement Plan and enable more informed judgement to be undertaken, an overall evaluation of progress is made using the following criteria.

| Status | | Evaluated as | Explanation |
|------------|---|----------------------|---|
| Green Star |  | Excellent | All actions and measures are on track |
| Green |  | Good | Actions and measures are on mostly on track, one or two falling marginally short of planned targets |
| Amber |  | Acceptable | Some actions and measures have deviated from plan and are some are falling short of planned targets |
| Red |  | Improvement Required | Actions and measures are of concern and are mostly falling short of planned targets |

Background

The council is also subject to the Well-being of Future Generations Act (Wales) 2015, and published well-being objectives as part of the Corporate Plan in 31st March 2017 to maximise its contribution to the Well-being Goals for Wales.

Advice received from the Welsh Local Government Association states that; “The Welsh Government and the Future Generations Commissioner have made it clear that duties under the Well-being of Future Generations (Wales) Act 2015 should not be treated as separate from any objectives that guide and steer the actions and decisions of organisations. In addition, they have also set out that planning and reporting processes should be aligned and integrated. As the Local Government (Wales) Measure 2009 states, Improvement Objectives need to reflect the key strategic priorities of authorities and to all intents and purposes, well-being objectives and improvement objectives can be treated as one and the same. Therefore, by integrating processes for setting and reporting on these key objectives, authorities can discharge their duties under both areas of legislation”

The council is required to report on its progress against the Improvement Plan by 31st October each year. The council should also report on its first year progress against its well-being objectives by 31st October 2018 (but not later than March 2019). The two can be an integrated report.

There is alignment between the improvement objectives and the newly required well-being objectives and this report links the two. In future Scrutiny Committees will receive updates on progress against the wellbeing objectives and this report represents a step towards that.

Well-being Objective: To enable people to be healthy, independent and resilient

IP1 Improving independent living for older people

| | |
|---------------------|--|
| Lead Cabinet Member | ▪ Cabinet Member for Social Services |
| Lead Officer | ▪ Head of Adult and Community Services |

Overall Judgement

| | | Dec 2017 |
|--------------|-------------|--|
| Actual | Performance | Comments |
| Green - Good | ★ | <p>In 2017/18 this is made up of 4 measures,</p> <p>1 relates to OT assessments that is currently green and performing 9% above target. This will be reviewed at the end of the year.</p> <p>The remaining 3 are annual measures that will be reported at the end of the year 2 of which relate to Reablement and the remaining measure relates to adults over 75 requesting advice and assistance once in a 6 month period.</p> |

Measures

- Key for Measures**
- ★ Green - on target
 - Amber - slightly short of target
 - ▲ Red - off target

| | Actual (YTD) | Target (YTD) | Performance (YTD) | Actual 1 year ago (YTD) | DoT 1 year ago (YTD) | Wales Average (YTD) | Perf. v Wales Average (YTD) | Period Performance |
|---|--------------|--------------|-------------------|-------------------------|----------------------|---------------------|-----------------------------|--------------------|
| CCAS/L/026 OT Assessments & Reviews % (IP1) (M) | 91.6% | 85.0% | ★ | 74.4% | ↕ | n/a | + | |

Key for measure RAG status

- ★ Green star - on target
- Amber circle - slightly short of target (15% tolerance)
- ▲ Red triangle - off target (over 15% away)
- ? Data missing/ not available
- ! No target set

Direction of Travel - DoT

- ↕ Green tick - performance has improved
- ✖ Red cross - performance has declined
- performance remains the same






up arrows indicate that high values are better
down arrows indicate low values are better

Annual Measures




Annual measures are included for information, these will be populated in quarter 4

| | ▲ Target 2017/18 | Actual 2016/17 | Wales Average (YTD) |
|---|---------------------|-------------------|---------------------------|
| ACS/20b reablement no package of care and support (A) (SSPM, IP1) | 40.0% | 77.8% | ? |
| ACS/23b Adults who have received advice and assistance no repeat contact (aged over 75) (SSPM, IP1) | 50.0% | 40.3% | ? |
| ACS/20a reablement reduced package of care and support (A) (SSPM, IP1) | 65.0% | 40.0% | ? |

Key for measure RAG status

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Direction of Travel - DoT

-  Green tick - performance has improved
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Actions

Key for Actions

- ★ Green - on track
- Amber - Deviation from Plan
- ▲ Red - Action is of concern

| | Dec 2017 | | |
|---|-------------|---|--|
| | Performance | IP Progress Update | IP Activity Planned |
| <input checked="" type="checkbox"/> IP 1.1 To deliver an integrated assessment process for older people | ★ | 93% of adults are now in receipt of the Act compliant Care & Support plan. | <p>Newport has been involved in the consultations with Welsh Government to develop a new outcomes reporting framework for 2018/19. During the first year of reporting since the implementation of the SSWB Act a number of anomalies have been identified and National discussion and collaboration has been ongoing to develop a more meaningful set of measures. Newport awaits further guidance from the Welsh Government to clarify reporting requirements in 2018/19 and 2019/20.</p> <p>The full implementation of the Welsh Community Care Information System (WCCIS) will offer different opportunities to capture and analyse data on a National level and 2018/19 will provide the opportunity for the new system to be in across Local Authorities and for its benefits and limitations to be fully realised. Newport is transferring to WCCIS On March 12 2018</p> |
| <input checked="" type="checkbox"/> IP 1.2 To roll out the integrated pathway for older people | ★ | The Older Person's Pathway is part of the Care Closer To Home work stream that is being developed by Health. The Strategy & Partnership Manager is part of the project group and is overseeing the interface with the adult service preventions agenda. | Work is ongoing to develop the pathway as part of the Care Closer to Home Health led workstream that includes social prescribing |
| <input checked="" type="checkbox"/> IP 1.3 Restructure the operational adult social services teams on the NCN footprints. | ★ | The NCN team structure is now fully embedded and workflow process have been developed in relation to the implementation of WCCIS. | WCCIS goes live on 12th March 2018 and newly established business processes will be tested and evaluated |

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Well-being Objective: To enable people to be healthy, independent and resilient

IP2 Ensuring people have the right social services to meet their needs

| | |
|---------------------|--|
| Lead Cabinet Member | ▪ Cabinet Member for Social Services |
| Lead Officer | ▪ Head of Adult and Community Services |

Overall Judgement

| Dec 2017 | | |
|--------------|-------------|--|
| Actual | Performance | Comments |
| Green - Good | ★ | <p>There are two measures contained within IP2 Adult Safeguarding and Delayed Transfers of Care (DTC)</p> <p>1.. DTC - Delayed Transfers Of Care</p> <p>This annual target was reduced in 17/18 (from 4 to 3.5) as a result of strong performance last year. However, continuous improvement is challenging and after a difficult first half of year the target was increased to 6 in response to new demand. This is a complex area of work and receives continuous management oversight to monitor the interface between health and social care. Overall, the length of stay in hospital is reducing and this increases the turnover of patients and the number of hospital discharges. Additionally, the hospital in reach project is streamlining the discharge process and the combined effect is creating additional pressure on the ability of NCC to broker packages of care in the community and find providers with capacity to meet the demand The end of year target is 6 and we are currently at 4.75. It is unlikely, given the challenges outlined above, that we will comply but work is ongoing to manage demand and work collaboratively to ensure people are safely discharged from hospital at the earliest opportunity.</p> <p>Although this measure is showing as red it must be seen within the National context. In Newport the numbers are still very low and oversight of hospital discharge processes are being intensively managed from a social care perspective. Therefore it is unfortunate that this single measure will require the whole IP2 measure to be red. I have therefore recorded this measure as green given the strong performance in safeguarding and the small margin of under performance in DTC that is influenced by many factors out of our control.</p> <p>2. Adult Safeguarding.</p> <p>Safeguarding continues to perform strongly despite the continual high rates of referral. At current levels it is predicted that by the end of the 4th quarter 900 referrals will have been processed,</p> <p>The safeguarding hub is due to go live on Monday 12 February and we will need to monitor the short and longer term impact on referral activity.</p> |

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● Amber circle - slightly short of target (15%tolerance)

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Measures

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| | Actual (YTD) | Target (YTD) | Performance (YTD) | Actual 1 year ago (YTD) | DoT 1 year ago (YTD) | Wales Average (YTD) | Perf. v Wales Average (YTD) | Period Performance |
|---|--------------|--------------|-------------------|-------------------------|----------------------|---------------------|-----------------------------|--------------------|
| ACS/18 The percentage of adult protection enquiries completed within 7 days (SSPM, IP2) (M) | 99.9% | 90.0% | ★ | 97.7% | ↕ | 80.1% | ★ | |
| ACS/19 PAM/025 Delayed Transfers of Care (SSPM, PAM, IP2, SP) # (M) | 5.93 | 5.21 | ● | 1.79 | ↘ | 2.57 | ▲ | |
| ACS/L/24 Number of assessments of need for support for carers (IP2) (Q) | 167.00 | 67.50 | ★ | 86.00 | ↕ | n/a | + | |
| CCAS/L/027 Number of integrated assessments completed per month (IP2) (M) | 1,253 | 550 | ★ | 1,258 | ↘ | n/a | + | |

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Actions

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| | Dec 2017 | | |
|--|-------------|---|---|
| | Performance | IP Progress Update | IP Activity Planned |
| ✓ IP 2.1 Establish the pathway for adult social services across health and social care | ☆ | Risks have been managed and additional resource was obtained from the National team to assist with the data migration, testing and error rectification in order to progress to our scheduled go live date of 12th March | WCCIS is going live on 12th March. All staff have been trained and informed of implementation procedures. Post implementation will require ongoing monitoring, review and system development. |
| ✓ IP 2.2 Restructure the operational adult social services teams. | ☆ | NCN Teams fully established | Ongoing monitoring of demand and capacity - WCCIS implementation will embed new business processes associated with data capture and workflow |
| ✓ IP 2.3 Develop and implement the integrated assessment tools | ☆ | The Integrated Assessment (IA) is undertaken in accordance with the requirements of the SSWB Act and 93% of adults are in receipt of the Act compliant Care & Support Plan (CASP) | |
| ✓ IP 2.4 Review and recommission services as necessary | ☆ | | |
| ✓ IP 2.5 Review and develop our systems and processes | ☆ | Risks around the availability of resources have been managed and Newport prepares for WCCIS to go live on March 12th | Once WCCIS is implemented there will be considerable further work required to develop the system. Newport will continue to engage with Regional workstreams around the integration of health and social care data and the ongoing dialogue with Welsh Government to establish meaningful performance data |
| ✓ IP 2.6 Undertake a Questionnaire of people who have a care and support plan | ☆ | The 2017/18 Survey has been completed, responses were required by 28th February. Questionnaires were available online and distributed by post and by Social Work staff where appropriate. | Analysis of the questionnaires will be undertaken throughout March for submission to Welsh Government in April. The data will be captured in the end of year performance report |

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Well-being Objective: To improve skills, educational outcomes and employment opportunities

IP6 Ensuring the best educational outcomes for children

| | |
|---------------------|---|
| Lead Cabinet Member | ▪ Cabinet Member for Education and Skills |
| Lead Officer | ▪ Chief Education Officer |

Overall Judgement

| Dec 2017 | | |
|--------------|-------------|---|
| Actual | Performance | Comments |
| Green - Good | ★ | All actions for this objective are on track. The majority of actions for exclusions are on track. |

Key for measure RAG status

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Measures

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| | Actual (YTD) | Target (YTD) | Performance (YTD) | Actual 1 year ago (YTD) | DoT 1 year ago (YTD) | Wales Average (YTD) | Perf. v Wales Average (YTD) | Period Performance |
|--|--------------|--------------|-------------------|-------------------------|----------------------|---------------------|-----------------------------|---|
| PAM/005 (EDU/004) % pupils achieving the expected CSI outcome at the end of KS3 (PAM, IP6) (A) | 85.3% | 84.4% | ★ | 83.4% | ↕ | 86.1% | ● | |
| PAM/007 (EDU/016a) Attendance Primary Year-end % (PAM, IP6) (A) | 94.7% | 94.6% | ★ | 94.5% | ↕ | 94.2% | ★ | Primary: Newport submitted a rate of 94.7%. This is a 0.3% increase on last academic year. Newport is at 15/22 in the Local Authority rankings. This is an improvement by 6 ranking positions. The target for Primary attendance was exceeded this year due to a city wide programme of improving practice linked to the Callio process. In the majority of schools this was applied. This include all families receiving a Red / Amber/ Green status of where their childs attendance was on a termly basis. A city wide promotion of attendance also appears to be successful, including the addition of Fixed Penalty Notices. Individual schools were set challenging attendance targets which were tracked and challenged. |
| PAM/008 (EDU/016b) Attendance Secondary Year-end % (PAM, IP6) (A) | 93.6% | 93.4% | ★ | 93.3% | ↕ | 94.2% | ● | Secondary : Newport has recorded a 0.4% increase in attendance for the academic year 2016/17 and has improved on the Local Authority ranking position to 18/22 from 22/22. |

Annual Measures

Annual measures are included for information, these will be populated in quarter 4

| | Target 2017/18 | Actual 2016/17 | Wales Average (YTD) |
|---|----------------|----------------|---------------------|
| EDU/010b) (N) Pupils fixed excl'ns secondary days # | 1,527 | 1,607 | ? |
| EDU/L/061 Percentage of FSM pupils achieving Level 2 Inclusive (A) (IP6) | 36.50 | 36.33 | ? |
| EDU/L/062 Pupils achieving Level 2 Maths (A) (IP6) | 66.60 | 63.73 | ? |
| EDU/L/063 Pupils achieving Level 2 English (A) (IP6) | 68.35 | 68.49 | ? |
| PAM/006 (EDU/017) Pupils achieving level 2 threshold inc English & Maths % (PAM, IP6) (A) | 60.0% | 58.4% | 60.7% |

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Actions

- Key for Actions**
 ☆ Green - on track
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 ▲ Red - Action is of concern

| | Dec 2017 | | |
|--|---|--|---------------------|
| | Performance | IP Progress Update | IP Activity Planned |
| ✓ IP 6.1 Improve the number of pupils achieving the expected level in the Key Stage 3 Core Subject Ind | ☆ Attainment targets for each school were set in collaboration with the EAS in December 17. The school risk register was updated taking into consideration recent attainment data. | The school risk register will be reviewed taking into consideration recent attainment data in January 18. Schools will be informed of specific reasons they are on the risk register. Progress towards targets will form an agenda item on all Intervention Plan Monitoring meetings. | |
| ✓ IP 6.2 Improve Primary & Secondary Attendance | ☆ The first truancy sweep of the academic year 2017/18 took place in October 2017 as part of Operation Bang. School Governor training on school attendance took place in November 2017. The results of the School Attendance were shared at the Attendance Forum in October. A revised media and communication strategy was developed and launched to promote school attendance. | Further truancy sweeps will be booked and completed in collaboration with Gwent Police Children Missing From Education training will be provided to schools An attendance forum will take place including activities led by GEMS, Senior EWO and the attendance lead from St Joseph's High School. The Local Authority will pilot a Children Missing from Education location pilot with HMRC | |
| ✓ IP 6.3 Reduce pupil exclusions | ☆ A primary school managed move protocol will be drafted and provided to schools for consultation. A review of the Learning Development Centre based at St. Julian's Comprehensive will commence during the latter part of the autumn term to ensure that provision is meeting the current need The Principal Educational Psychologist will be overseeing the new way of working within the PRU and half termly meetings of the Inclusion Team will monitor progress | The draft primary managed move protocol will be presented to primary head teachers on 31 January for a 3 week consultation. The members of 'Team Around the Bridge' are next due to meet on 01/03/2018. Curriculum Improvement Advisor and Challenge Advisor are working collaboratively with the Bridge Achievement Centre Manager to address key issues identified through their Intervention plan. The Principal Educational Psychologist is providing a degree of 'informal support' to the BAC manager. | |

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Direction of Travel - DoT

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Well-being Objective: To build cohesive and sustainable communities

IP8 Improving outcomes for youth justice

Lead Cabinet Member

▪ Cabinet Member for Social Services

Lead Officer

▪ Head of Children and Family Services

Overall Judgement

| Dec 2017 | | |
|--------------------|-------------|---|
| Actual | Performance | Comments |
| Amber - Acceptable | ● | The workload is now slowly reducing though the complexities and challenges evident in the current caseloads are significant. YOS continues to monitor each of these areas on a monthly basis and put action plans in as needed. |

Measures

Key for Measures
 ☆ Green - on target
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 ▲ Red - off target

| | Actual (YTD) | Target (YTD) | Performance (YTD) | Actual 1 year ago (YTD) | DoT 1 year ago (YTD) | Wales Average (YTD) | Perf. v Wales Average (YTD) | Period Performance |
|---|--------------|--------------|-------------------|-------------------------|----------------------|---------------------|-----------------------------|--------------------|
| YJ/L/13 Number of first time entrants into youth justice system (M) (IP8) | 67 | 72 | ☆ | 48 | ⬆️ | ? | ! | |
| YJ/L/14 Number of young people sentenced to custody (M) (IP8) | 10 | 22 | ☆ | 9 | ⬆️ | ? | ! | |
| YJ/L/18 Out of court disposals % (Q) (IP8h) | 23% | 30% | ☆ | 24% | ⬆️ | ? | ! | |
| YJ/L/19 % young people who reoffend in 12 months (Q) (IP8i) | 47.5% | 50.0% | ☆ | 43.5% | ⬆️ | ? | ! | |

Key for measure RAG status

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Direction of Travel - DoT

- ⬆️ Green tick - performance has improved
- ⬆️ Red cross - performance has declined
- ➡️ performance remains the same
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Actions

- Key for Actions*
- ★ Green - on track
 - Amber - Deviation from Plan
 - ▲ Red - Action is of concern

| | Dec 2017 | | |
|--|-------------|--|--|
| | Performance | IP Progress Update | IP Activity Planned |
| <p>✓ IP 8.1 Reduction in first time entrants</p> | ● | Discussions are continuing, though have now extended to other criminal justice partners. Newport has the highest FTE in Wales. Gwent as a region has the highest FTE in Wales. We are confident that our diversionary processes ensure that eligible young people are diverted. We are also tweaking our RJD process in an effort to increase engagement. | <p>We are awaiting a thematic inspection from the YJB on Prevention, which we are anticipating may give us some guidance on what we may do in the future differently.</p> <p>The discrepancy between local and national PNC published figures continues. Blaenau Gwent/Caerphilly YOS are currently trialing an internal process, to bring PNC and YOS figures into alignment. Hopefully this will be rolled out by the beginning of the 2018/19 Financial year.</p> |
| <p>✓ IP 8.2 Reduction in the use of youth custody</p> | ★ | All 4 young people who received custody in Q3 had been subject to remand prior to sentence. One 17 year old female who is now looked after, had offended out of area, in her out of county residential home. Two 18 year old males, sentenced for perverting the course of justice and a 17 year old with possession of Class A Drugs with intent to supply. Clearly all met the custody threshold. | Youth Justice Board (YJB) have undertaken an audit around Risk, which has included some custody cases. Awaiting feedback and action plan from that. |
| <p>✓ IP 8.3 Access to Education, Training and Employment</p> | ● | Of the 7 young people in the cohort closed, 5 were offered 25 hours. One was not offered anything, due to non-engagement and the 7th young person was on a reduced timetable due to emotional/mental health needs. Average hours attended in the cohort increased from 11 to 14. | The Education, Training and Employment (ETE) working continues to meet on a bi-monthly basis and analyses all those cases where young people do not meet their target of ETE provision. This group reports directly to the YOS Management board. |
| <p>✓ IP 8.4 Access to timely mental health assessment and treatment</p> | ★ | No issues, continue as before | No issues, continue as before |
| <p>✓ IP 8.5 access to timely assessment and treatment in relation to substance misuse.</p> | ★ | Of the 7 statutory orders closing that required a Substance Misuse Assessment, 6 of them commenced within 5 working days upon receipt of referral. The 7th was under arrest at the time of the appointment. | No issues, continue as before |
| <p>✓ IP 8.6 Access to appropriate/suitable accommodation</p> | ★ | <p>No issues around this indicator, we are still hitting performance targets, despite 4 of the closed statutory orders in Q3 not in suitable accommodation for the following reasons:-</p> <ul style="list-style-type: none"> • 2 young people, who are looked after by the local authority, were residing in B&B's due to the breakdown of their placements. • A third young person was residing with family/friends. Despite this address not highlighting any safeguarding concerns, the case manager, assessed this as not suitable given that there are a number of unknown individuals residing at this address. Children's services had offered them a place in B&B, but they refused this option. They are now liaising with housing with a view to looking into a Supported Accommodation placement. • A fourth young person went to reside with dad in Cardiff, this was deemed unsuitable by the case manager due to dad's health issues | Continue with current practice |