



**NEWPORT**  
CITY COUNCIL  
CYNGOR DINAS  
CASNEWYDD

# MID-YEAR REVIEW

ADULT SERVICES

2024-25



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## Strategic Leads

|                                    |                        |
|------------------------------------|------------------------|
| Cabinet Member for Social Services | Councillor Laura Lacey |
| Director of Social Services        | Tanya Evans            |
| Head of Adult Services             | Myfanwy Moran          |

# Introduction

Newport City Council's Corporate Plan 2022-27 has four Well-being Objectives to support its mission to deliver an Ambitious, Fairer and Greener Newport for everyone and contribute towards Wales' Well-being Goals set in the Well-being of Future Generations Act. To support the delivery of these objectives, strategic priorities, and deliver continuous improvement each service area has developed their service plan. This report provides the mid-year progress against the Adult Services Service Plan 2024-25.

Adult Services is part of the Council's Social Services and is responsible for delivering a range of statutory adult social care to residents and their carers across Newport. It is important for Newport Council to ensure all of our services including those delivered by third parties comply with the Social Services and Well-being (Wales) Act 2014. Adult Services delivers a range of services and support to individuals (including carers) across Newport including Adult managed care social work; residential and day care services; safeguarding; First Contact (Information, Advice and Assistance); Occupational Therapy; Carers support; Home First. Newport Council also commissions social care providers to provide residential and non-residential (domiciliary) care and support packages.

Newport is Wales' fastest growing city with a 9.5% rise in population since the last Census in 2011. Across Wales there is more than one in five people (21.3%) aged 65 years and over. In Newport there has been an increase of 14.5% in people aged 65 years and over, an increase of 10.2% in people aged 15 to 64 years and an increase of 10.2% in children aged under 15 years. With these increases in the adult population, over the next 10 years the adult population, in particularly those aged 65 and above is likely to increase further. Newport has a diverse group of citizens, and their social care needs are determined by a wide range of factors including age, physical and mental health and economic circumstances. Furthermore, Wales (like the rest of the UK) post pandemic is facing a backlog of patients awaiting surgery, and with that presenting more longer term, complex cases of health, care and support. Additionally, the social care sector is experiencing staff shortages, increases to the cost of care (residential and non-residential) and additional statutory duties to safeguard and support adults and carers. It will be essential that Newport Council and its partners over the five years prevents many of these risks from getting worse but also ensure the sustainability of services in the long term for Newport's communities. Adult Services will continue to deliver services with integrity, dignity and compassion for individuals and ensure services are delivered to our most vulnerable residents who have eligible care and support needs. To support residents who require 'Information Advice and Assistance' at the first point of contact and correct signposting of what is available in the community.

## Adult Services Vision and Objectives

Adult Services will continue to deliver services with integrity, dignity and compassion for individuals and ensure services are delivered to our most vulnerable residents who have eligible care and support needs. To support residents who require 'Information Advice and Assistance' at the first point of contact and correct signposting of what is available in the community.

To support the delivery of the Corporate Plan and Adult Services vision the following objectives have been set.

**Objective 1** - Supporting individuals and carers to maintain their independence and support them when they need help by providing equitable access to early intervention and prevention support.

**Objective 2** - Ensure safeguarding arrangements for adults and their carers remain robust and NCC remains compliant with the Social Services and Well-being Act.

**Objective 3** - Continue developing and improving the sustainability of adult services through a co-production model with providers, individuals and carers to meet our statutory duties, and future demands based upon Population Needs Assessment.

# Head of Service Executive Summary

Every day across Newport our staff work closely with people and their carers to protect their rights and ensure they can access the right care and support. We continue to respond to an increasing number of referrals and complexity of need. While the challenges and risks remain as outlined previously, there is much to be celebrated when we reflect on the last six months.

We have many excellent internal provisions run by the Council. This includes our residential homes and newly acquired Centrica Lodge which recently had an extremely positive inspection from Care Inspectorate Wales (CIW). People provided feedback about their experiences of the service, and this has enabled a review to further tailor the support offered. Ty Claire in Caerleon has opened, which is a fantastic purpose-built home for people with learning disabilities. The provision will hugely enhance people's quality of life, and we are extremely proud of it.

To provide effective care and support to people we must have good relationships with the providers of social care services. Over the last 6 months the stability of this market has increased. Our ability to provide vital community services such as timely domiciliary care to people is among the best in Wales.

The risks to our service remain the demand on adult social care, leading to waiting lists particularly for our initial full social care assessment. There is also the need to increase the population of staff who are Approved Mental Health Professionals (AMHPs) for Newport. We are beginning a review of the service and have agreed an increase to additional staff payment for 2024/25. We are concerned about our ability to undertake the Deprivation of Liberty Safeguards (DoLS) assessments without the funding we received in recent years from Welsh Government. These assessments are a vital safeguard for our most vulnerable citizens.

We have recently re-launched our assistive technology hub in the local library and are working to a detailed plan to increase awareness and deliver the maximum benefits to citizens. There are so many opportunities to support people at home for longer by using technology effectively, and we need to positively exploit all these opportunities. Please see the case studies at the end of this document for details on the difference it can make to people's lives.

We know that social care can be such a rewarding but also challenging field to work in. Regular good quality supervision is so important for staff and the percentage recorded of these does need to improve.

In terms of a forward look for the second half of 2024/25 we will look to progress our projects at pace. This includes the transition to assistive technology but also consideration of the best model of practice for the front door of hospitals and frailty. This is a key area of demand for social care, and we will continue to work closely with partners to progress this.

# Service Area 2024/25 Dashboard Overview

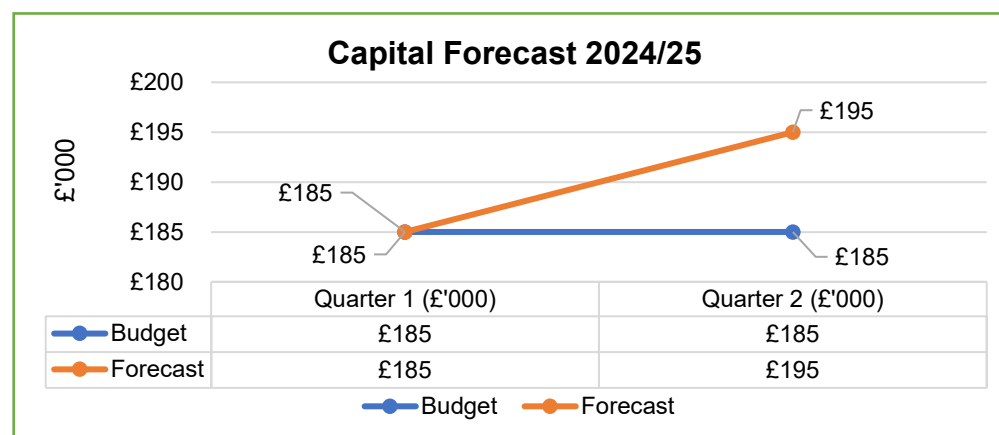
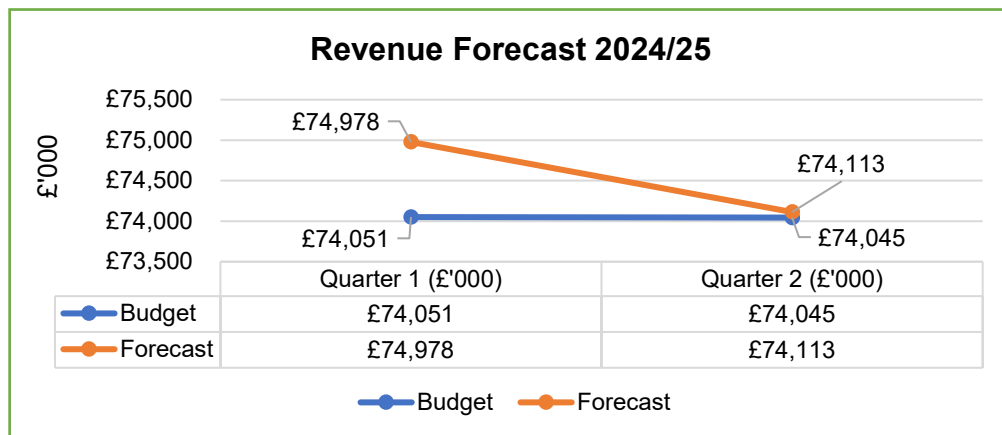
## Service Plan Objectives

| Objective   | End of Year Status<br>23/24<br>(Red / Amber / Green / Blue) | Mid-Year Status<br>24/25<br>(Red / Amber / Green / Blue) |
|---|---|--|
| <b>Objective 1</b> - Supporting individuals and carers to maintain their independence and support them when they need help by providing equitable access to early intervention and prevention support.  |   |  |
| <b>Objective 2</b> - Ensure safeguarding arrangements for adults and their carers remain robust and NCC remains compliant with the Social Services and Well-being Act.  |   |  |
| <b>Objective 3</b> - Continue developing and improving the sustainability of adult services through a co-production model with providers, individuals and carers to meet our statutory duties, and future demands based upon Population Needs Assessment. |   |  |

## Service Area Risks

| Risk                                     | Corporate / Service Risk | Inherent Risk Score | Target Risk Score | Quarterly Risk Scores (Q3 2023/24 to Q2 24/25) |                    |                    |                    |
|--|--------------------------|---------------------|-------------------|--|--------------------|--------------------|--------------------|
|  |                          |                     |                   | Quarter 3<br>23/24                             | Quarter 4<br>23/24 | Quarter 1<br>23/24 | Quarter 2<br>23/24 |
| Pressure on Adult and Community Services | Corporate Risk           | 20                  | 12                | 20   | 20                 | 20                 | 20                 |
| WCCIS Replacement                        | Corporate Risk           | 20                  | 6                 | N/A  | 20                 | 20                 | 20                 |
| Stability of Social Services Providers   | Corporate Risk           | 20                  | 12                | 16   | 16                 | 12                 | 12                 |
| Statutory Mental Health Service          | Service Risk             | 16                  | 12                | 12   | 9                  | 12                 | 12                 |
| Regional Integration Fund Grant          | Service Risk             | 12                  | 3                 | N/A  | N/A                | 12                 | 12                 |
| Safeguarding Risk                        | Service Risk             | 15                  | 4                 | 4  | 4                  | 4                  | 6                  |

## Service Area Finance Forecast 2024/25



## Medium Term Financial Plan (MTFP) Savings 2024/25

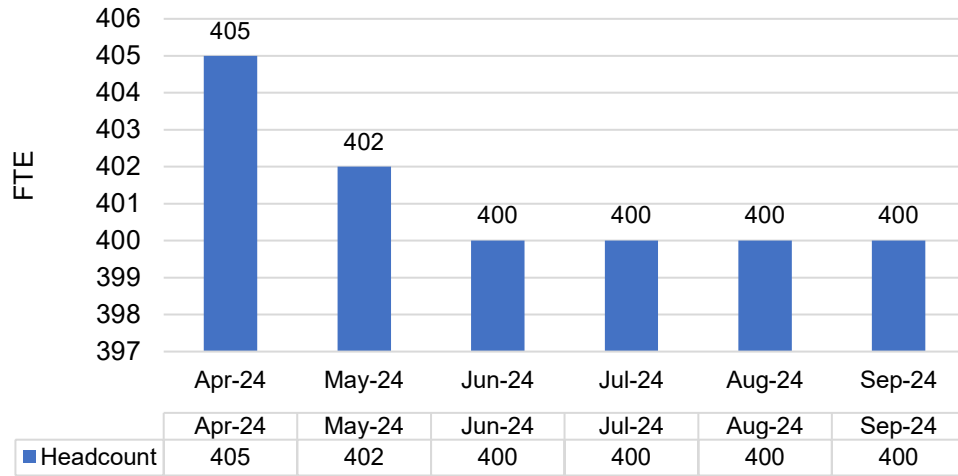
| MTFP Proposal   | Savings Target (£) | Savings Forecasted (£) | Forecast Variation (£) | % Variation |
|---|--------------------|------------------------|------------------------|-------------|
| Services to support residents with a learning disability (agreed in 23/24)  | £150,000           | £170,890               | +\$20,890              | 14%         |
| Short Breaks Service for older adults (formally known as day opportunities) | £200,000           | £200,000               | £0                     | 0%          |
| In-house residential income   | £100,000           | £100,000               | £0                     | 0%          |
| External residential income   | £253,000           | £253,000               | £0                     | 0%          |
| Appointeeship team to be self-funding                                       | £48,000            | £48,000                | £0                     | 0%          |
| Domiciliary Care threshold/assisted technology                              | £109,000           | £109,000               | £0                     | 0%          |
| Misc savings across multiple budgets  | £57,000            | £57,000                | £0                     | 0%          |
| Frailty budget  | £129,000           | £129,000               | £0                     | 0%          |
| <b>Total</b>  | <b>£1,046,000</b>  | <b>£1,066,890</b>      | <b>£0</b>              | <b>+14%</b> |

## Service Area Workforce Demographics, Sickness, and Check Ins

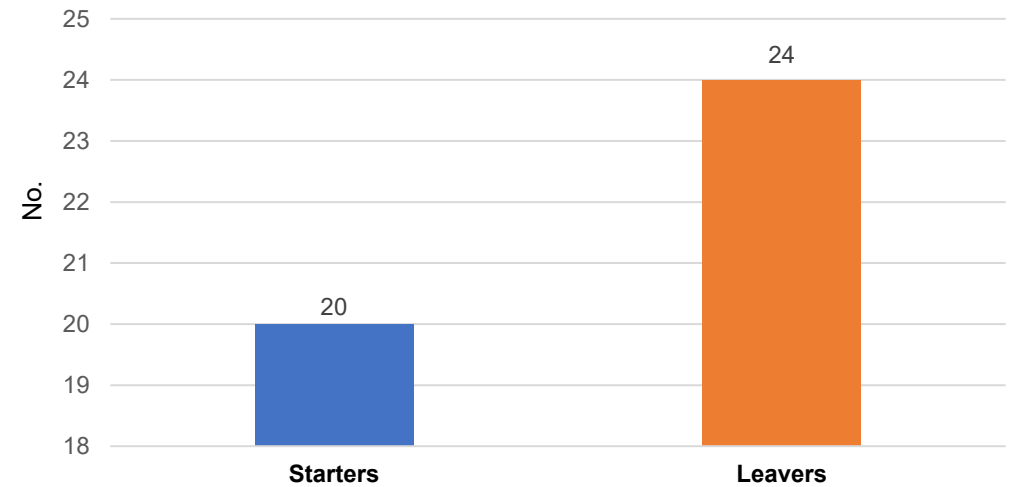
HeadCount - This does not include Agency staff.

Starters and Leavers- The figures provided show new organisational starters, and officers that have left the organisation. This does not include officers which have transferred between service areas.

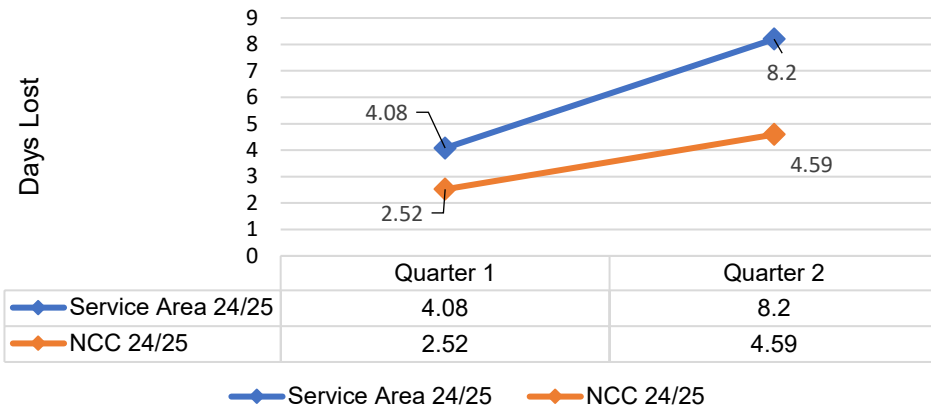
### Adult Services Head Count 2024/25



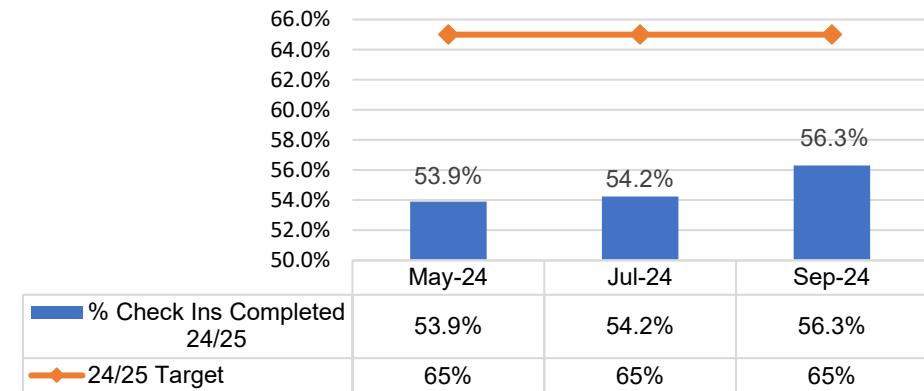
### Organisational Starters and Leavers 2024/25



### Sickness Days Lost



### Bi Monthly Check Ins Completed (%)



# Programmes and Projects

See Glossary for Red / Amber / Green / Blue assessment and Expected Completion date definitions.

| Programme / Project Title                  | Project Overview  | Well-being Objective(s) supported                        | Expected Completion Date (Quarter / Year) | End of Year 23/24 (Red / Amber / Green / Blue) % Completion | Mid-Year 24/25 (Red / Amber / Green / Blue) % Completion | Mid-Year Summary of Progress (Completed projects – Summary of project outcomes)  |
|--|---|--|---|---|--|--|
| <b>Adult Services Structure – Stage 2.</b> | <p>Following the initial implementation of the Adult Services Redesign in 2023/24 to undertake post implementation review and then implement refinements to the structure, systems and processes to ensure pressures and risk are managed appropriately. Outcome will be to implement efficient processes to support case management risks Minimising response times for assessment to achieve recognised wait times to minimise risk for people.</p> | <p>Well-being Objective 3<br/>Well-being Objective 4</p> | <p>Quarter 4 2024/25</p>                  | <p>Not Applicable</p>                                       | <p><b>10%</b></p>  | <p>The adult services restructure was finalised in 2024 and changes made to roles and responsibilities. This has included implementing an assistant team manager role across the service, which is taking time to embed in terms of reporting lines and responsibilities for supervision and approvals. A cleansing exercise is being undertaken in relation to unfunded posts to ensure that we have sustainable structures moving forward. Ensuring the structure is well supported by systems and processes is the next phase of this project. This will be closely aligned and associated with other projects across the Council including digitalisation and automation. We continue to focus on the primary risks of the service and delivering the best quality service within limited resources.</p> |



| Programme / Project Title             | Project Overview  | Well-being Objective(s) supported                           | Expected Completion Date (Quarter / Year) | End of Year 23/24 (Red / Amber / Green / Blue) % Completion | Mid-Year 24/25 (Red / Amber / Green / Blue) % Completion | Mid-Year Summary of Progress (Completed projects – Summary of project outcomes)  |
|---------------------------------------|---|---|---|---|--|--|
| <b>Redesign of Safeguarding Teams</b> | <p>To assess and develop a single Safeguarding team across the Council to improve the management of safeguarding cases, provide long term sustainability and ensure safeguarding good practice is maintained across all council services.</p> <p>Outcome to improve caseload management through effective use of resources.</p> | <p>Well-being Objective 3</p> <p>Well-being Objective 4</p> | <p>Quarter 4 2025/26</p>                  | <p>Not Applicable</p>                                       | <p>5%</p>  | <p>Fortnightly meetings are taking place to scope the realignment of safeguarding. There have been three meetings so far. The fortnightly meetings have looked at the list of statutory safeguarding functions across social care and broken these into areas: Front door function; Section V; Professional Concerns; Multi-agency Public Protection Arrangements (MAPPA); Multi-agency Risk Assessment Conference (MARAC) cover. This will form an options appraisal which will be shared before 30<sup>th</sup> December 2024.</p> |

# Workforce Development

To support workforce development across the service area the following actions were identified as priority in 2024/25.

| Action   | Outcome(s) of Action Delivery  | Action Start Date | Expected Completion Date | End of Year 23/24 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year 24/25 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year Summary of Progress<br>(Completed Actions– Summary of action outcomes)  |
|--|--|-------------------|--------------------------|--|---|--|
| <b>Succession Planning</b><br>Ensuring the workforce has capacity to deliver responsive social care that meets the needs of adults living in Newport.                      | Development of a plan for succession across all teams. Professional development opportunities that ensure our employees are skilled and qualified to deliver the needs of the service and our service users.<br>Recruit new and develop existing staff to ensure vacancies across the service generally and to specialist roles (e.g. AHMP, BIA and residential managers) are filled.<br>Further developing and supporting workforce to deliver and enhance services for adults living in Newport. | 1st April 2024    | 31st March 2025          | Not Applicable   | 20%   | Consideration needs to be given to identifying potential managers and for their development. This will be considered at the managers away day taking place in Quarter 3. |
| <b>Collaboration and Team Building</b><br>We have a workforce that works collaboratively between and across all teams to ensure consistent, quality services are provided. | Review to be undertaken of communication across the service.<br>Opportunities for team development and team building which will ensure consistency across the middle and senior leaders.<br>Develop strategies and procedures that encourage collaboration and partnership working across the service area.  | 1st April 2024    | 31st March 2025          | Not Applicable   | 50%   | Team building day has been arranged in Quarter 3.  |

| Action                                      | Outcome(s) of Action Delivery   | Action Start Date            | Expected Completion Date       | End of Year 23/24 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year 24/25 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year Summary of Progress<br>(Completed Actions– Summary of action outcomes) |
|---|---|------------------------------|--------------------------------|--|---|---|
| Develop the role of Social Work Assistants. | In collaboration with Children's and Preventions Services to ensure consistent approach to developing role of Social Work Assistant to enable them to take a broad role.<br>Provide opportunities to undertake Social Services Practitioner role qualification. | 1 <sup>st</sup> October 2024 | 31 <sup>st</sup> December 2025 | Not Applicable   | Not Applicable  | Action commencing in Quarter 3 of the Service Plan.                             |

# Objectives and Action Plan Update

See Glossary for Red / Amber / Green and Expected completion date assessment definitions.

| Objective 1 - Supporting individuals and carers to maintain their independence and support them when they need help by providing equitable access to early intervention and prevention support.<br>Corporate Plan Well-being Objectives Supported – Well-being Objective 3 and Well-being Objective 4. |  |  |                            |                             |  |   | Overall RAG Assessment   |
|--|--|--|----------------------------|-----------------------------|--|---|--|
| Ref  | Action   | Action Outcome(s)  | Start Date                 | Expected Completion Date    | End of Year 23/24 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year 24/25 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year Summary of Progress (Completed Actions– Summary of action outcomes)   |
| 1  | Development of Direct Payment service for people to access and commission their own care and support packages. | Increase the offer and take of Direct Payments ensuring compliance with the principles of the Social Services and Well-being Act.  | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> March 2025 | Not Applicable   | 60%   | Good progress to make process more straight forward. Staff absence has impacted upon delivery (waiting list). Audit starting which will assist evaluation of changes made.   |
| 2  | Increase and improve Respite options for older adults.   | Ensure provision of quality short break experience for older adults to meet needs of unpaid carers.<br><br>Increase range of options available particularly in local residential care homes. | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> March 2025 | Not Applicable   | 50%   | A review of demand and conversations with providers indicates that the demand is not as great as understood. Providers now indicate each week both availability for long term care and short term care and this is shared with care management. A greater uptake of direct payment to allow a person to purchase care at home or in a home with a higher charge than the NCC rate has provided additional flexibility. |

| Ref | Action   | Action Outcome(s)   | Start Date                 | Expected Completion Date    | End of Year 23/24 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year 24/25 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year Summary of Progress (Completed Actions– Summary of action outcomes)  |
|-----|--|---|----------------------------|-----------------------------|--|---|---|
| 3   | Promotion of the use of assistive technology to support people to remain living independently. | <p>Review the effectiveness of the 'smart flat' and consider approaches to promoting assistive technology to support people to remain living independently.</p> <p>Contribute towards achieving the MTFP Savings for 2023/24.</p> | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> March 2025 | Not Applicable   | 80%   | <p>Smart Hub has been relocated to the Central library and open to the public, professionals and health and social care workforce.</p> <p>Business case to recruit to an Assistive Technology Coach, fixed term secondment for 2 years has been agreed by The Head of Adult Services, HR and Finance. Recruitment process is in progress.</p> <p>Communication Strategy has been completed and will be reviewed shortly.</p> <p>Savings tracker is in place to meet the MTFP of £109k and is shared monthly with the Finance Team.</p> <p>With the additional workforce resource, embedding assistive technology is on target to be a business-as-usual consideration for all social care interventions, as per the job description. The role will be subject to regular review to monitor progress and evaluate success or challenges.</p> <p>Assistive technology is developing at a rapid rate therefore adopting Technology Enabled Care needs to become a standard offer for citizens who have care and support needs within adult services.</p> |

| Ref | Action   | Action Outcome(s)   | Start Date                 | Expected Completion Date    | End of Year 23/24 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year 24/25 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year Summary of Progress (Completed Actions– Summary of action outcomes)  |
|-----|--|---|----------------------------|-----------------------------|--|---|---|
| 4   | Review and restructure of Occupational Therapy.    | Establish and lead a review across Social Services of Occupational Therapy to ensure the effective use of Occupational Therapists in promoting independence across all age ranges   | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> March 2025 | Not Applicable   | 50%   | <p>This has been agreed by the previous Head of Adult Services as a scoping exercise to establish if there is a wider appetite for the restructure of the Occupational Therapy team to extend the service to align both adults and children under one management structure. This would strengthen the transition process, manage budgets more effectively and untimely improve the child / adult's journey through the community occupational therapy service.</p> <p>Discussions have taken place with both service areas; however further discussions are needed to explore advantages and disadvantages. Once this has been achieved an options paper will be submitted to the Head of Adult Services for further consideration.</p> |
| 5   | Development of intermediate care offer.            | Expand the provision of intermediate care (Step-Up Step-Down beds) at Parklands and Spring Gardens to promote reablement and independence of people at risk of going into or on discharge from hospital. Additional beds identified and funding identified. | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> March 2025 | Not Applicable   | 50%   | <p>The pilot at Spring Gardens is continuing and will require evaluation to determine its effectiveness.</p> <p>Consideration is being given to the future of the Frailty service and the role of Intermediate Care in the two homes will need to be considered as part of this. At present three additional beds at Parkland and those at Spring Gardens are being considered as part of the MTFP process - currently unfunded</p>   |
| 6   | Implementation of the Independent Living Strategy. | Work with partners to implement the Independent Living Strategy. Increase availability of supported living to meet the needs of all adults who would benefit from it.   | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> March 2027 | Not Applicable   | 25%   | <p>Policy due for review with Head of Service. Developments for people with a learning disability continue with two new properties opening before the new year.</p> <p>Centrica Lodge was returned back into the council's control to provide respite services. Ty Claire will be opening to provide supported living for people with learning disabilities.</p>  |

**Objective 2** - Ensure safeguarding arrangements for adults and their carers remain robust and NCC remains compliant with the Social Services and Well-being Act.

**Corporate Plan Well-being Objectives Supported** – Well-being Objective 3.

**Overall RAG Assessment**

| Ref | Action  | Action Outcome(s)  | Start Date                   | Expected Completion Date    | End of Year 23/24 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year 24/25 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year Summary of Progress<br>(Completed Actions– Summary of action outcomes)  |
|-----|---|--|------------------------------|-----------------------------|--|---|--|
| 1   | To support the Council's Human Resources team to ensure Mandatory Safeguarding training is delivered for all new and existing staff in the Council. | Collaborative working with Human Resources team to ensure new and existing staff have completed their training. Develop a tiered safeguarding training framework for all roles in Newport so that officers are clear on what level of Safeguarding training they need to undertake. Also to undertake regular monitoring and reporting across service areas. Managers to provided regular reports on who has / has not completed their training. | 1 <sup>st</sup> October 2022 | 31 <sup>st</sup> March 2025 | 30%  | 60%   | <p>A recent Audit Wales report identified improvements were needed to improve the number of staff outside of social services to complete mandatory safeguarding training.</p> <p>To deliver this action and implement the Audit Wales recommendations, there is ongoing work with HR to improve compliance recording and are carrying out some due diligence checks. A Corporate Safeguarding group has been established, led by the Director of Social Services which will oversee the implementation of the Audit Wales recommendations as well as looking at a better longer term solution.</p> |

| Ref | Action  | Action Outcome(s)   | Start Date                   | Expected Completion Date    | End of Year 23/24 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year 24/25 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year Summary of Progress (Completed Actions– Summary of action outcomes)  |
|-----|---|---|------------------------------|-----------------------------|--|---|---|
| 2   | Improve the external communication of safeguarding information to ensure they know who and how they can access the information, advice and/or assistance they need. | Collaborate with the Council's Communication team to ensure the Council's website and other communication methods such as social media. Newport matters etc has all of the necessary safeguarding information required. Also ensure regular communications are released during the year to continue the messaging. Communication is available in Welsh, English and other languages used by individuals in Newport. | 1 <sup>st</sup> October 2022 | 31 <sup>st</sup> March 2025 | 75%  | 85%   | Policy documents are now on the (old) website and will be migrating to the new website in the new year. There is join up and connectedness in the documents and there will be further work on Safeguarding information on the new site. |
| 3   | Improve the robustness of the Safeguarding Self-Assessment tool used by Newport Council.  | Through the Safeguarding Regional group and Safeguarding board, collaborate with other Gwent local authorities to improve the Council's self-assessment arrangements.<br><br>This will ensure consistent approach is adopted across Gwent authorities and benchmarking.   | 1 <sup>st</sup> October 2022 | 31 <sup>st</sup> March 2025 | 40%  | 60%   | There is ongoing regional work on the self-assessment. Next meeting is in December. This will then be discussed at the newly established Corporate safeguarding steering board.   |



| Ref | Action  | Action Outcome(s)   | Start Date                 | Expected Completion Date    | End of Year 23/24 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year 24/25 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year Summary of Progress<br>(Completed Actions– Summary of action outcomes)  |
|-----|---|---|----------------------------|-----------------------------|--|---|--|
| 4   | Develop processes to improve how professionals can report and escalate adult safeguarding concerns. | This will support improving how social care staff and other professional officers can report and escalate safeguarding concerns. This will improve the Council's compliance to relevant safeguarding legislation. | 1 <sup>st</sup> April 2023 | 31 <sup>st</sup> March 2025 | 85%  | 85%   | Section 5 guidance is soon to be out for consultation. We have recently attended a workshop on this and are looking at embedding the guidance. |

**Objective 3** - Continue developing and improving the sustainability of adult services through a co-production model with providers, individuals and carers to meet our statutory duties, and future demands based upon Population Needs Assessment.

**Corporate Plan Well-being Objectives Supported** – Well-being Objective 3.

**Overall RAG Assessment**

| Ref | Action   | Action Outcome(s)   | Start Date                 | Expected Completion Date       | End of Year 23/24 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year 24/25 Assessment<br>(Red / Amber / Green / Blue)<br>% Completion | Mid-Year Summary of Progress<br>(Completed Actions– Summary of action outcomes)   |
|-----|--|---|----------------------------|--------------------------------|--|---|---|
| 1   | Centrica Lodge – Review of the service to meet changing needs. | Review of existing service model and consideration of future service user needs to maximise capacity and ensure financial sustainability.   | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> December 2024 | Not Applicable   | 50%   | <p>Inspection results was reported by <a href="#">Care Inspectorate Wales in June 2024</a>. CIW stated: <i>We found the service is highly valued and well thought of by people who use it and their relatives. Care workers support people to maintain their usual routines whilst they stay at the home.</i></p> <p>Meetings with stakeholders will be completed in Q3 and we will be able to pilot ideas that have been discussed.</p>  |
| 2   | Review of Home First   | Undertake review of Home First Service (regional with NCC as lead) to ensure that the service provides sustainable option for discharge pathways from hospital<br>Options appraisal provided for regional Heads of Service. | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> December 2024 | Not Applicable   | 0%  | <p>A review of Home First is ongoing and aligning with other key reviews within Aneurin Bevan University Health Board to ensure the resources available to support discharge are utilised effectively and efficiently. There is currently a hold on any further recruitment whilst this work is undertaken to ensure current resources are configured accordingly and any additional opportunities are aligned effectively. The review also requires key work around funding in line with all requirements for projects funded under Regional Integrated Funding.</p> |

| Ref | Action                             | Action Outcome(s)  | Start Date                 | Expected Completion Date    | End of Year 23/24 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year 24/25 Assessment (Red / Amber / Green / Blue) % Completion | Mid-Year Summary of Progress (Completed Actions– Summary of action outcomes)  |
|-----|------------------------------------|--|----------------------------|-----------------------------|--|---|---|
| 3   | Review of the Managed Care service | Undertake targeted reviews to be assured of equity and consistency of care packages.<br>Contribute towards achieving the MTFP Savings for 2023/24. | 1 <sup>st</sup> April 2024 | 31 <sup>st</sup> March 2025 | Not Applicable   | 50%   | Development of staff to encompass new ways of working has been key in this quarter. The NCN's are active in developing staff to become qualified social workers. By the end of the 3rd quarter the first of the NCN's open university social work trainees will be qualified, there are 4 more trainees going through the course and a member of staff was successful in gaining a place starting this year. To assist training of NCC staff and candidates from local universities, 5 members of staff are being trained as practice assessors. Two will also become practice assessors for the Approved Mental Health Professional (AMHP) award as there is a national shortage of AMHP's.<br>Evaluating and risk assessing the waiting list has been ongoing resulting in changes to practice in the next quarter. Targeted reviews have been agreed to ensure equity and consistency in packages of care. |

# Performance Measures

Annual measures will be reported in the service area's End of Year Review.

| Performance Measure / Description  | End of Year Performance (2020/21 to 22/23) |                |                | Mid-Year Performance 24/25 |                       |
|--|--|----------------|----------------|----------------------------|-----------------------|
|  | Actual 2021/22                             | Actual 2022/23 | Actual 2023/24 | Mid-Year Actual 23/24      | Mid-Year Actual 24/25 |
| <b>National (AD/004)</b> – The number of new assessments completed for adults during the year.   | 20 per 1,000 employees                     | 1,306          | 1,521          | 765                        | <b>852</b>            |
| <b>National (AD/006b)</b> – The active offer of Welsh was accepted.  | 1  | 0              | 0              | 0                          | <b>0</b>              |
| <b>National (AD/010)</b> – The total number of packages of reablement completed during the year  | 601  | 439            | 450            | 248                        | <b>199</b>            |
| <b>National (AD/011a)</b> – The number packages of reablement completed during the year that reduced the need for support                              | 24   | 32             | 29             | 14                         | <b>15</b>             |
| <b>National (AD/011b)</b> – The number of packages of reablement completed during the year that maintained the need for the same level of support.     | 62   | 64             | 65             | 27                         | <b>35</b>             |
| <b>National (AD/011c)</b> – The number of packages of reablement completed during the year that mitigated the need for support                         | 484  | 314            | 328            | 195                        | <b>131</b>            |
| <b>National (AD/011d)</b> – The number of packages of reablement completed during the year that increased the need for support                         | 31   | 29             | 28             | 12                         | <b>18</b>             |
| <b>National (AD/012)</b> – The number of adults with a care and support plan as at 31 <sup>st</sup> March.   | 1,940                                      | 2,249          | 2,163          | 2,248                      | <b>2,223</b>          |
| <b>National (AD/013)</b> – The total number of adults with eligible needs for care and support maintained by Direct Payments at 31 <sup>st</sup> March | 94   | 101            | 101            | 102                        | <b>100</b>            |
| <b>National (AD/022)</b> – The total number of reports of adults suspected of being at risk where it is necessary for enquiries to be made.            | 783  | 730            | 748            | 327                        | <b>512</b>            |
| <b>National (AD/024)</b> - No. of Adult Protection Enquiries Completed Within Timescale  | 745  | 671            | 672            | 314                        | <b>480</b>            |
| <b>National (AD/020)</b> - The total number of reports of an adult suspected of being at risk received during the year.                                | Not Available                              | 957            | 1,163          | 514                        | <b>733</b>            |
| <b>(NEW) AD/L001</b> - Number of Adult Professional Safeguarding Concerns raised in the year.  | Not Available                              | 39             | 30             | 15                         | <b>16</b>             |

## Compliments, Comments and Complaints

| Compliments / Comments         | Quarter 1 | Quarter 2 | Total Number |
|--------------------------------|-----------|-----------|--------------|
| Number of Compliments received | 6         | 4         | 10           |
| Number of Comments received    | 2         | 2         | 4            |

| Complaints                                     | Quarter 1 |         | Quarter 2 |         | Total 2024/25 |         |
|--|-----------|---------|-----------|---------|---------------|---------|
|  | Stage 1   | Stage 2 | Stage 1   | Stage 2 | Stage 1       | Stage 2 |
| Number of Complaints received                  | 1         | 0       | 0         | 2       | 1             | 2       |
| Number of Complaints refused after assessment* | 4         |         | 8         |         | 12            |         |

\*Refusals include – Out of timescale (over 6 months); dealt under separate process e.g. HR, Disciplinary, compensation; Attention of another agency e.g. Newport City Homes, Police, Health etc.

## Community Consultations and Engagement 2024/25

Below is a summary of the consultations and engagement completed by the service area in the last year to support key decisions, strategy and/or policy development; and delivery of services. This list could also include any surveys, engagement activities such as workshops with service user / community groups, where their views were considered.

| Consultation / Engagement Activity             | Method(s) e.g. Bus Wifi, forums, surveys etc | Number of Responses  | Outcomes of the Engagement Activity  |
|--|--|--|--|
| Centrica Lodge – engagement with stakeholders. | Focus Groups                                 | <p>Families and service users who already utilise the service - 25</p> <p>Social Workers – 10</p> <p>Families of those who will transition from children’s within the next 12 months – 3</p> <p>Staff - 10</p> | <p>Feedback provided has been overwhelmingly positive in regard to NCC’s takeover from Field Bay. Comments included:</p> <ul style="list-style-type: none"> <li>• Improved communication between the service and families</li> <li>• Increased professionalism</li> <li>• Increased confidence in service provision</li> <li>• Activities both within the service and within the community setting have increased</li> </ul> <p>Feedback in regard to the environment has supported the refurbishment of all 6 bedrooms. Ideas provided for improvements within the communal areas are being taken forward. A specialist bed has been funded via RIF to support the transition from children’s services into adults for a young man. Families that presently utilise Oaklands for respite (children’s) commented that they are looking forward to being able to book in for dates they choose rather than having dates given to them and at times then cancelled at short notice when they transition to Centrica.</p> <p>Further open days to be held for families and service users to enable a ‘support network’ to grow.</p> |

# Case Studies, Key Achievements, Awards

| Case Study                                       |   |
|--|---|
| <b>Carers Perspective- Assistive Technology</b>  | <p>Mary lived alone, she had no formal carers and her son was her main support he worked full time from home during COVID and was visiting his mother 4-5 times a day and was exhausted. Mary has a mild cognitive impairment and age-related mobility. He had investigated many different devices nothing was suitable for his mother as was not used to technology. The KOMP from no isolation was being piloted in Newport and they agreed to take part.</p> <p>'It's not just the ability to make video calls that is extremely useful, it allowed us to send messages and photos of what the family were up to keeping her involved as much as possible even when she was disabled and confined to her home. It also allowed us to send reminders of things for her to do and medication to take too. We could check in with the carers and also make sure that my mother was comfortable, had not had any falls and was safely in her chair or bed at night.'</p> |
| <b>Person remaining independent- using Alexa</b> | <p>A 96-year-old lady wanted to remain independent in her home however she was having frequent falls in the home. The light switches are close to the main door and had to walk to the switches in the dark. Smart lights setup to Alexa on voice control prevented the falls. Alexa can call from Alexa show to Alexa show providing a video call keeping in touch with family and friends.</p>  |

# Glossary

## Service Area Project / Action Assessment

| RAG Status | Description   |
|------------|---|
| X%         | Objective / Project / Action is not on track to deliver by the expected completion date with major risks and/or issues preventing its achievement. Immediate management interventions is required to improve performance and escalation to Directorate Management Team and/or relevant Board.                                   |
| X%         | Objective / Project / Action is at risk of not delivering by the expected completion date with potential risks / issues which could prevent the Objective / Project / Action being completed. Management intervention(s) required to improve performance and close monitoring by the Head of Service / Service Management Team. |
| X%         | Objective / Project / Action is on track to be completed with no risks or issues.   |
| Complete   | Objective / Project / Action has been successfully delivered and achieved its outcomes.   |

## Performance Measure Monitoring / Tolerance Assessment

*Newport City Council has agreed a 15% tolerance against targets set in service plans.*

| RAG Status | Description   |
|------------|---|
| =>15%      | Performance is under achieving against Target or previous year's performance. Immediate management intervention and escalation to Directorate Management Board is required.                       |
| <15%       | Performance is off target or Previous Year's Performance but within a variance of 15%. Management intervention and close monitoring by the Head of Service / Service Management Team is required. |
|            | Performance is achieving / succeeding against its agreed Target or Previous Year's Performance.   |

## Risk Assessment Matrix

|             |   |              |              |              |              |              |
|-------------|---|--------------|--------------|--------------|--------------|--------------|
| Probability | 5 | 5 - Moderate | 10 - Major   | 15 - Severe  | 20 - Severe  | 25 - Severe  |
|             | 4 | 4 - Moderate | 8 - Moderate | 12 - Major   | 16 - Severe  | 20 - Severe  |
|             | 3 | 3 - Low      | 6 - Moderate | 9 Major      | 12 - Major   | 15 - Severe  |
|             | 2 | 2 - Low      | 4 - Moderate | 6 - Moderate | 8 - Moderate | 10 Major     |
|             | 1 | 1 - Very Low | 2 - Low      | 3 - Low      | 4 - Moderate | 5 - Moderate |
|             |   | 1            | 2            | 3            | 4            | 5            |
|             |   | Impact       |              |              |              |              |

## Abbreviations

| Abbreviation | Description                                 |
|--------------|---|
| AMHPs        | Approved Mental Health Professionals        |
| DoLS         | Deprivation of Liberty Safeguards           |
| IAA          | Information Advice and Assistance           |
| MAPPA        | Multi-agency Public Protection Arrangements |
| MARAC        | Multi-agency Risk Assessment Conference     |
| MTFP         | Medium Term Financial Plan                  |