

2010 - 2011



Annual Report
Director of Social Services



Contents

Page

1. Introduction	4
2. A continuing story	5-6
3. Business support services	7-10
4. Safeguarding	11-15
5. Workforce	16-18
6. Improving the quality of the services that we provide and commission	19-23
7. Collaboration and integration	24
8. Conclusion	25

1. Introduction

This is the second annual report in my role carrying the statutory responsibilities of director of social services. It has been an important year as we have pushed forward with continuing service change and improvement, whilst also responding to the need to make our services more efficient. These are not incompatible objectives, i.e. improvement and efficiency, but they bring challenges that place demands on members of staff; demands that add to the pressures associated with carrying out a difficult job, whatever the financial climate.

I have carried out my commitment to meet with more users and carers to gather intelligence about what it feels like to 'be on the receiving end' of services. There have been user and carer meetings every two months since September 2010 and we have focused on particular groups to ensure that these opportunities allow people to develop some strength from coming together. I have met with representatives from minority ethnic communities in the city, people with a hearing impairment and workers working with them, young people currently looked after by the city council, carers through Newport Carers' Forum and parents of children with a range of disabilities. In addition we have again worked with StoryWorks of University of Glamorgan. StoryWorks have worked with small groups of users and carers and are continuing to do so, to offer them a voice and a chance to consider what they want to say about how services can be improved.

The agencies that contributed their comments, having seen an earlier draft of this report, include: Age Concern Gwent, Alzheimers Society, Aneurin Bevan Health Board (ABHB), Melin Homes, Newport City Homes, Gwent Association of Voluntary Organisations (GAVO), Education Service, including a headteacher, Gwent Police and parents of disabled children.

Following the death of Victoria Climbié, one of the recommendations made by Lord Laming in his report (Dept of Health, 2004), was that the responsibility for the safeguarding of children be shared within local authorities, going up to the Chief Executive and senior members. In responding to this recommendation, senior managers, including the Managing Director with cabinet members, now meet with front-line practitioners in Children's Services twice each year. That allows a conversation

to take place about the pressures faced by social workers and their managers and for senior managers and cabinet members to be given the opportunity to respond to their concerns. At the meeting in March 2010, social workers in frontline teams expressed a great deal of concern about high caseloads and vacancy levels that included a number of key Team Manager and Senior Practitioner posts. In addition the overwhelming majority of practitioners had been qualified for less than 2 years and morale was low. By October 2010, as a result of a number of initiatives, including the recruitment and retention strategy, we were able to report the lowest caseloads and vacancy levels in our recent history. In addition staff morale was seen to be high, particularly amongst newly qualified staff, who had found the support from their mentor, a dedicated Senior Practitioner, most helpful.

Care and Social Services Inspectorate for Wales (CSSIW) have carried out some inspection activity during the year and provided a Review and Evaluation Report of 2009/10 that was reported to cabinet in February 2011. That is also part of the evidence that has been available, as well as that collected by managers.

As part of the Improvement and Efficiency Programme for social services, the city council appointed a partner, following a diagnostic review by Northgate Public Services in late 2010, to work with us over the next three years to continue our efforts to improve and modernise social services as well as help us identify and achieve efficiencies and offer additional and necessary capacity. That partner is Newton Europe and they are forging a collaborative relationship with members of staff so that a legacy is left to ensure that we work towards continuous improvement year on year and that I can evidence that improvement in my annual report in subsequent years.

Stewart Greenwell
Corporate Director, Care and Customers



2. A continuing story

My report last year set a number of challenges for 2010/11 and I will begin each section of the report saying something about how we have responded to these challenges. They are not challenges that have gone away and in some instances they will remain challenges for several years. However they are a good place to start.

In addition my report, as part of the continuing story, will say something about culture. Culture is 'the way we do things around here' and can be seen in people's behaviour, how they talk about the job and the people with whom we work and whether we celebrate what we do well. Considering whether the culture helps to take services forward towards improvement brings a focus on everything that is required to change culture. This can only be done through people and recognising that each of us can only change the behaviour of one person - ourselves!! In doing so, we can see the impact that changing our behaviour has on others and invariably it leads to others changing their behaviour.

For example the frustrations that teenagers bring into other people's lives are heightened when those young people have been emotionally damaged by the adults in their lives. Those frustrations can lead adults working with them to express irritation and even anger at their behaviour. Listening calmly, when a teenager is inviting you to scream and shout back at them, is behaviour that can be learned, usually by spotting that screaming and shouting does not work and therefore you have to try something else. This in turn can provoke a different response from the young person and change can begin. A culture that includes calmness produces different and better outcomes for young people, e.g. they learn how to negotiate successfully, thereby developing a skill to use in later life. Everyone ends up seeing and feeling the benefit of the change.

The overall context for this story is now contained in the WAG policy paper, 'Sustainable Social Services - a framework for action' (WAG Feb 2011), making it clear that collaboration and integration are expected rather than simply encouraged. In addition there is the expectation that the citizen will remain at the centre of everything we do, with an increasing opportunity for people to play a real part in their own care planning and wherever possible a part in deciding how the service should be delivered.



"There is growing confidence amongst front line practitioners and the quality of practice is good and in some instances excellent."

2 A continuing story

A part of that context is the need for shared responsibility, also referred to in 'Sustainable Social Services' (2011). That is played out in the bi-annual meetings between senior managers, cabinet members and front-line practitioners and in the need for information to be shared between agencies to protect the interests of the most vulnerable people. It also features in the journey towards integrated services and pooled budgets, since the principle of shared responsibility is a central tenet of both. You will note that the words '**shared responsibility**' feature several times throughout this report and for that, I make no apologies and prepare yourself for even more next year.

My overall judgement is that the foundations remain strong to deliver high quality services and that is recognised by CSSIW in their review and evaluation report for 2009/10 and by WAG in having selected the city council as a pioneer area for IFST. The Gwent Frailty Project offers the same kind of opportunities as IFST to move practice into an arena where it will always make a positive difference to people's lives. The relationship with ABHB is becoming stronger and the establishment of the post of Head of Integrated Services (Social Care and Health) is testament to that. There is growing confidence amongst front line practitioners and the quality of practice is good and in some instances excellent.

There remains a need to refine how we listen to users and carers, learning from complaints and ensuring that it is evident to the complainant. In addition listening has to be extended to taking action to remedy our behaviour when we are told that it has not helped a user or carer to make changes to improve their circumstances. That will show that we have actively listened and it is a test of whether we are serious. Our determination to improve will be aided by the need to also make efficiencies and it provides the opportunity to reshape services and at the same time invite people to change their expectations to see how they can play a real part in improving their well-being.

I am aware that some people are concerned about the outcome of reviews, when the review results in their care being reduced. That will happen when someone's needs are assessed as having reduced and that will happen more often, as we improve the way that we help people to take control over their own lives and it will be a sign of success. This is not to deny that reviews will also produce assessments that determine that someone needs more support. In 2010/11 we carried out 2055 reviews, of which 255 resulted in the package of care increasing and 225 where there was a reduction in the care package.



3. Business support services

I described these services as ‘unsung heroes’ last year and they remain as important as ever in helping front-line services to function effectively. In a time of financial constraint, back office services are often under most pressure. It is appropriate to have to justify back office support, but when we get it right, it can make the life of front-line workers that much easier.

So what were the challenges for this year, set out in my report last year?

a) The continually difficult financial climate.

It has been essential that everyone has sufficient understanding of financial management to monitor the budget for which they are responsible and this would be the case in less stringent times. However the present environment requires absolute diligence to budget management, in order to safeguard frontline services and concentrate upon key priorities. Newton Europe will bring additional capacity to help us explore where and how we can improve our business support services, in particular by making the best use of the technology that is currently available to the Council. Voluntary redundancies have played their part in reducing our expenditure, where posts have been identified as non-essential in the future direction of services. These are difficult but necessary decisions, whilst our aim is to ensure that there is no deterioration in the services as we modernise them.

We have had to prepare a medium term budget plan that produces real savings and yet protects our ability to deliver the most critical functions. 65% of the Children’s Services budget is focused on children in care and therefore the plans to reduce the number of looked after children by 20% over the next three years is the most sustainable way of achieving that. That has to be done safely and I believe that it will be possible through the approach being piloted by the Integrated Family Support Service (IFSS), whereby earlier intervention will allow families to make more informed choices about the changes that they need to make to their lifestyle and/or parenting behaviour, to avoid their children being at risk of coming into the care system. This serves to illustrate that a service improvement can be used as a means to do things very differently and more efficiently. I will comment below more fully on the early signs about the impact of IFSS.

In Adult Services the Gwent Frailty Project is aimed at having the same impact, i.e. a better service with improved outcomes and consequent efficiencies and in addition we need to give attention to better arrangements for commissioning services, in particular for people with learning disabilities. This is something else to which I refer below.

b) Exploiting efficiencies through more shared business support services with other local authorities and with Aneurin Bevan Health Board.

Whilst we were hoping to have progressed further on this, it has been a case of exploring, rather than exploiting efficiencies. The explorations have included a joint approach to training with our neighbouring councils. We have always started that exploration amongst our four nearest neighbours, but where that is not immediately possible, we are discussing collaboration with those neighbouring councils where interest is high. We are clear that there is enormous potential for delivering training and staff development more efficiently across council boundaries and it has happened in small ways for many years, e.g. child protection training. It is helpful that ‘Sustainable Social Services’ (2011) sets a different pace to future collaboration, actively encouraging this kind of joint arrangement.



3 Business support services

In addition we are exploring how we can bring together the planning functions of ABHB's Locality Office with those in social services and I would expect to see that taking place in 2011/12. However we have worked with ABHB in reviewing our separate contracts with voluntary agencies in the city to ensure that we are making best use of public funds. We are planning joint contracts with a number of agencies to remove duplication and waste.

There are planned developments that could mirror the Regional Commissioning Unit for children's services across the ten South East Wales local authorities (SEWIC). It will build on what has been achieved in children's services in delivering cost reductions and savings, with improved and more business-like relationships with independent sector providers and replicating that in adult services.



c) Developing pooled budgets where possible.

Last year I reported only one pooled budget arrangement locally, i.e. Gwent-Wide Integrated Community Equipment Service (GWICES). With the beginning of the Gwent Frailty Project (GFP), there is now a second pooled budget that also spans the five local councils and ABHB. The scale of GFP is far greater than GWICES and includes the 'Invest to Save' funds of £9million made available by WAG and cements the overall theme of GFP, that we share responsibility for delivering a very different

approach to the care, treatment and support available to frail people.

April 2011 saw the opening of Serennu, previously known as South Gwent Children's Centre. We are currently building a case for a pooled budget between the city council and ABHB for disabled children to continue the momentum provided by the opening of Serennu. This is something that parents of disabled children have told us that they will welcome.

d) Increasing the number of people receiving direct payments.

There are now a total of 115 people receiving direct payments. This includes an additional 6 families with a disabled child, making 40 families in total.

There are 66 disabled people receiving direct payments and of these, 21 are people with learning disabilities. This is a particularly encouraging feature, as it is often thought that people with learning disabilities would not be able to cope with direct payments and yet here is proof that this is not the case. The increase since the end of last year is 10 people and we will look to further increase the total by 31st March 2012. It would not be overly ambitious to set a target of 200 people. In addition we should be extending opportunities for more people to have a real say in what services they receive and how they are provided.

We also brought back into the Council the support service for those people who are in receipt of direct payments, due to the previous provider not performing satisfactorily. We are examining with our neighbouring councils how we can develop more collaborative arrangements in future, possibly by jointly commissioning a support service.

e) Becoming smarter commissioners, i.e. getting the best prices for the services that we commission, as well as the best possible services for people.

This is an area of work where we will collaborate with Newton Europe, having earlier commissioned OLM to undertake a review of a small number of cases of people with learning disabilities where the costs are high, i.e. over £1500 per week, to negotiate with providers on the costs being charged for the care provided, following a review of the person's needs. This work will continue, to ensure that we do everything we can to keep costs to a reasonable and appropriate level, whilst working

collaboratively with providers and making it clear that our concern is to maintain and improve quality, at the same time expecting value for money.

In addition we are working closely with our neighbouring councils to develop joint commissioning arrangements that can provide savings through economies of scale. The most fruitful area to explore is likely to be for services for people with learning disabilities, but we want to examine whether there is scope for smarter commissioning of residential care for older people; either on our own or in partnership with other councils. This is an area where we have no block contracts, thereby limiting the potential for achieving savings and offering commercial certainty to providers. That in turn limits the potential of providers to improve quality and to offer greater consistency of staffing. Similarly we are committed to explore different arrangements for the commissioning of domiciliary care, where currently all provision in the independent sector is procured on a spot-purchasing basis, limiting the chance of securing savings through block contracts and again offering little commercial certainty to providers.

Overall this particular work invites us to be more challenging with providers, as well as working more collaboratively with them, towards a mutual understanding of each other's business.

f) Ensuring access to the best technology for the workforce and for users and carers.

We are making improvements to the way in which we expect staff to use the Integrated Children's System (ICS) and have worked with other councils to reduce the amount of time spent completing Unified Assessment documentation, by reducing the

number of pages to be completed from 47 to 7, without any reduction in standards. We need to make more effort to release members of staff to spend more time with users and carers and to support this, we will be moving to more agile working, enabling people to work from home and work in different workplaces across the city, thereby spending less time travelling and reducing the need to frequently return to the office.

There are now over 700 people who have Telecare/assistive technology as a core component of their care package arrangements and we anticipate that this figure will substantially increase as more people are introduced to the benefits of Telecare, offering much greater choice and control over their own lives. For some people this will mean some element of their care, currently being provided by a care worker, being replaced by access to assistive technology and whilst for future generations, this will seem perfectly acceptable, we will have to help many people to understand and feel comfortable with the change and manage any risks arising from the change.

g) Reducing the number of steps that are taken before a service is provided or a decision is made and ensuring political support for that change.

A step in the right direction was recently approved, with changes to the scheme for delegated decision making, enabling officers to make judgements and take decisions, when the policy direction has been approved by members. In addition, whilst there is still room for improvement, there have been improvements in the speed that people are seen for an assessment.



3.1 Getting the culture right

There have been some changes to the way that we do things and I will point to a few of these to illustrate the importance of business support services in advancing cultural change.

Complaints are being dealt with more quickly and responsively with the majority settled at stage 1 of the complaints process. The report to cabinet in May 2011 set out our performance on dealing with complaints over the past three years and there was an increase in complaints over the three years from 53 to 84. This is encouraging as it demonstrates that we are welcoming complaints and that the process is one that is easy to access. As ever, we can improve and that is likely to come from emphasising the need to listen to complainants and avoid defensiveness.

People are notified at the earliest opportunity of their weekly assessed charge. This avoids any build up of arrears and we offer payment plans as early as possible. During the year 89% of people were contacted by our visiting team within 6 days of a referral being received. It is crucial to give people good information about their rights and their responsibilities.

We carried out a single assessment of the needs of people in the city to inform three separate strategies, saving both time and money and giving us a much fuller picture. This assessment informed the Health, Social Care and Well Being Strategy 2011/14 and the Children and Young People's Plan 2011/14, both of which promote personal responsibility as the key to people using their own strengths to find solutions. This is not to leave people feeling stranded, but to emphasise that, with support, people can take control of their own lives. These set the tone for a change of culture in the city, where health, social care and housing are recognised as essential ingredients for well-being.

We are planning the opening of a Face to Face centre in the city centre in Autumn 2011, offering one place for people to access good information and services from across the public sector. This will put all public sector services on a different footing in the city, so that people expect excellent rather than average services, encouraging us all to 'raise our game'.

The Supporting People team, focusing on meeting the housing needs of vulnerable people, continues to work across geographical boundaries, as that makes sense to local people and creates more opportunities for sharing valuable resources, whilst emphasising the contribution that housing associations can make in planning for people to lead successful lives.

We are also working towards paperless files over the next three years, creating more time for staff to have direct contact with users and carers and this will be a priority.



"...a change of culture in the city, where health, social care and housing are recognised as essential ingredients for well-being".

4. Safeguarding

I made the point last year that nothing is more important than safeguarding the interests of the most vulnerable children and adults in the city and it will be how people measure us.

So what were the challenges in my report last year?

- a) Finding out more about whether and why children and young people do not feel safe and giving them a voice in planning more responsive services.

'Not knowing what is happening does things to your head'.

'Having someone you can rely on makes all the difference'.

Both of the above are the words used by young people looked after by the City Council, giving a clear message about what is important to them, i.e. that they want and value planning and want to be involved in that planning, as well as needing an adult on whom they can rely. This does not mean someone who is always going to agree with them, but someone who will stick by them, whatever happens. I guess that is what most children and young people expect from their parents and that is no different when the City Council is the parent.

It is very clear that a good deal of the best practice with children and young people is doing very ordinary things, e.g. encouraging them to be useful in the kitchen, to take risks with their lives knowing that there will be someone there for them if something goes wrong. A residential social worker in one of our children's homes, in talking about a very difficult young woman who had been rejected by many other settings and people, said:

'I keep telling her that no matter what she said or did, I would be here for her'.

She was not inviting her to be even more difficult but was expressing her commitment to see things through with her.

There are also some important messages emerging from young people who have moved out of care about what the experience is like:

'When I was in foster care, I saw a social worker every week. I was so unhappy I cried. I felt listened to as I saw the same one every week'.

'It would be nice if they rang and asked me if I was OK'.

'They should come and see me, talk to me, not to other people about me'.

'My social worker is coming to help me decorate. Fair play. She will put in the effort'.

It is clear that consistency and doing what is promised are important first principles to win the trust of children and young people who are looked after by the council, as well as a willingness of staff 'to get their hands dirty'

CSSIW Inspection and Evaluation Review Report for 2009/10 advised us to 'continue our focus on improving performance to safeguard children', as well as 'develop further capacity in children's services' and 'expand project work on establishing better outcomes for service users'.



4 Safeguarding

We are working with 'Be Heard', an advocacy group, to develop the right kind of arrangements for children and young people to participate in the Newport Safeguarding Children Board (NSCB) and involving the local Children and Young People's Partnership to avoid any duplication of effort, as that partnership has done a lot of work on how best to engage children and young people, in what is an arena dominated by adults. 'Be Heard' also support children at child protection case conferences and help to ensure that children looked after by the council are informed about their advocacy service. One of the best ways to find out why children and young people do not feel safe is to give them a voice, where they feel safe and comfortable to have their say.

We are also looking at how we can make better use of new technology to enable children and young people to let us have their views. However whilst a planning document does not guarantee anything, it is important that the NSCB business plan has consultation and participation, with children, young people and their parents, as one of its five priorities.

We have listened to what a victim of domestic violence said about her experiences and those of her children, a process made possible by the Kafka Brigade, which brought all the key agencies in the city together to hear her story. The woman felt that no-one listened to her views and experiences whilst she was seeking help and as a result there is now a daily tele-conference to which all agencies contribute, to ensure that any incidents of domestic violence from the previous day are better managed and responsibility shared. In addition all agencies have agreed that the needs of the victim should always have priority over the perpetrator. We have now appointed a Domestic Abuse Coordinator and placed the post with Barnados to ensure that there is a strong connection between supporting the women who are victims and safeguarding and protecting the children involved.

Whilst a number of these developments are encouraging, there will never be any room for complacency.

- b) Measuring the public's confidence in our ability to safeguard the most vulnerable members of the community, with other public sector agencies, e.g. Gwent Police, ABHB, Housing Associations, Schools, Probation, NSPCC and voluntary sector agencies.**

I met with the editor of South Wales Argus to explain the nature of the work of social services and to encourage positive coverage rather than simply focus on when things go wrong. Things will always go wrong, because of the nature of our work, but we need to do more to help people understand the complexity associated with making a judgement about someone's best interests, when we have to balance their interests against those of the wider community.

There is some interesting work in its early stages with Gwent Police and ABHB thinking about how we can work differently in tackling the issues surrounding people who go missing and the huge amount of resources that go into dealing with them. We are considering how we can use our collective resources more effectively and with a different outcome. Part of the answer lies in sharing information more readily between agencies and as ever sharing responsibility.



- c) More capacity in those services that aim to protect vulnerable adults.**

The team with responsibility for the protection of vulnerable adults (POVA) has been strengthened and is up to full complement. It now includes:

Two Principal Officers, one investigating officer, two senior practitioners with special responsibility for POVA (1 in Duty and Assessment Team and 1 in Learning Disabilities Team), three administrators to take responsibility for the range of multi-agency meetings that have to be convened when someone is considered as being at risk.

The Service Manager (Learning Disabilities) has responsibility for POVA, all of which gives greater confidence and adds capacity, compared to what I reported last year. We will now give some thought to how best we can collaborate and/or integrate our POVA services with ABHB to make better use of the resources that are available and increasingly share responsibility.

I have referred above to our joint work with ABHB and Gwent Police in better responding to the needs of missing people and this will contribute to protecting vulnerable adults. Importantly the All Wales Adult Protection Guidance was launched on 1 April 2011 and this provides for and encourages greater consistency. Locally the POVA team are now screening all referrals for potential vulnerable adults and much better use is being made of the technology for recording and filing purposes and for collecting data for annual returns.

Agreement has been reached for Newport Area Adult Protection Committee (AAPC) to join the Joint AAPC for Monmouth, Torfaen and Blaenau Gwent in 2011 and we will be exploring a joint POVA team with ABHB in the early autumn of 2011 and also be considering how we contribute to a possible feasibility study to consider a Gwent-wide POVA Team.

- d) Implementing the recommendations of serious case reviews following the death and/or serious injury to children.

The key to this is 'talking more'. There is a working group with our four neighbouring councils locally and their respective Safeguarding Children Boards, ensuring that the lessons from serious case reviews are learned and taken back into each locality. This is now a key feature of the NSCB's business plan, i.e. collaborating with other local authorities. In that way, we share responsibility.

- e) Improving the educational outcomes for children and young people looked after by the City Council

CSSIW's Evaluation and Review Report 2009/10 advised us to develop 'more effective engagement with the Education Service to improve the educational attainment of looked after children and better education, employment and training opportunities for young people leaving care.'

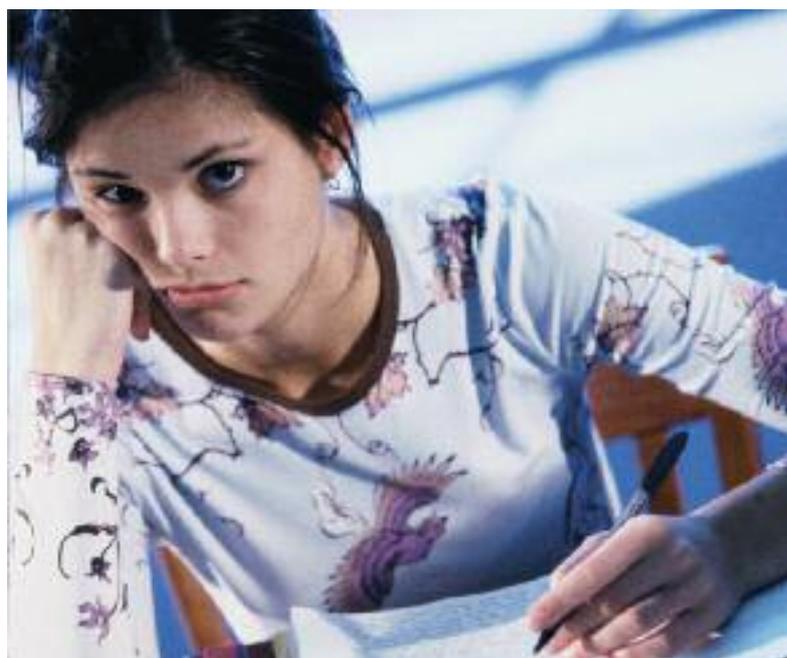
During the year we have made significant progress in these areas and we exceeded our target for

attendance at both primary and secondary schools for Looked After Children (LAC), 92.4% and 93.4% respectively and there were no LAC permanently excluded from school. In addition 83.3% of LAC had a personal educational plan in place within 20 days of having started a new school placement and this needs continuing attention as it is below our target of 87% and 20 children were receiving additional tuition. In addition the qualification points score for those LAC who are year 11 pupils (i.e. age 16) has improved significantly (up from 145 in 2009/10 to 216 in 2010/11).

All LAC have a city council leisure pass and where appropriate a free pass is issued to other children in the household.

However we know that this support has to be shown to deliver improvements in the education performance of LAC, although providing for their attendance and for them leading a full life outside of school will have an impact longer term. Yet again the words of a young person who has been in care give us a clue to how we have to behave, if we are to encourage young people to make the most of their education:

'It's important that someone notices if you go to school. If no-one notices or cares whether I go to school, why should I care about it, let alone, how I'm actually doing with my work?'



- f) Improving the planning for young people for their transition into adulthood, particularly young people who have been looked after, as well as disabled young people.

We have improved matters and a recently developed Transitional Planning Policy is being piloted at Maes Ebbw School in this academic year, where a group of young people have developed a review document for use at review meetings held at the school. Cardiff University are collaborating on research about developing the best possible experiences for disabled young people moving into adulthood.

We have transitional planning officers in Children's and Adult Services and they act as a stimulus for other workers to pay attention to the needs of young people moving into adulthood. There is still room for improvement and it has been agreed that this will be a major priority for our Improvement and Efficiency partner, Newton Europe. This will include strengthening the links between Child and Adolescent Mental Health Services (CAMHS) and services for adults with a mental health problem. The current work at Duffryn High School, where there is a unit for young people with Asperger's Syndrome, provides a good example of a relevant, supportive environment that is preparing young people for the transition to adulthood and illustrating the contribution that schools make to this important change in young people's lives.

I have referred above to Serennu's opening and the potential for pooled budgets for children, young people and young adults. The move into Adult Services should not lead to a poorer service or a change in service direction, unless that is planned. If that is so, it should have been identified as the young person was nearing the point of leaving school/college and moving towards independence and never be a surprise, which can often lead to the young person and her/his family having to deal with the consequences of professional staff having disagreements about what is best for the young adult in question.

As part of our developing Corporate Parenting Strategy, we have prepared a 'Pledge' for children in care setting out our commitment to deliver improvements in their wellbeing and life chances. The pledge includes a commitment to provide a safe and stable home, educational achievement, improving health outcomes, leisure opportunities and a smooth transition to adulthood. In order to

support council members in their role as champions for children in care, we are establishing a Corporate Parenting Forum that will be chaired by the Cabinet Members for Young People and Social Services and Housing, meeting three times per year. In addition we will establish a Children in Care (CiC) Council, led by young people themselves. This will enable young people to shape and influence decisions and to hold their corporate parent to account. The CiC Council will be supported by an independent advocacy organisation.

We have held a number of Corporate Parenting seminars, led by officers, with contributions from service users, e.g. the session focusing on residential services included a visit to our children's homes and the seminar looking at educational achievement will include a presentation from looked after children about 'the Good, the Bad and the Ugly' of their experiences of education.

- g) Sharing the learning between protecting children and young people and protecting vulnerable adults.

Increasing the capacity in the POVA team will make a significant difference to this area of activity and we are committed to explore whether we could move slowly and safely to a stronger collaboration between the safeguarding of children and safeguarding vulnerable adults. There is now a place at NSCB for someone from Adult Services and a reciprocal arrangement for someone from Children's Services on the AAPC.

The launch of new All Wales guidelines for POVA connects to the approach taken to safeguard children and young people. We know that there are common denominators in the reports into child deaths and Homicide reviews, in particular the poor sharing of info and the need for better communication between professionals, highlighting the need for a much greater sense of shared responsibility between agencies and professional disciplines.

"...preparing young people for the transition to adulthood and illustrating the contribution that schools make to this important change in young people's lives."

4.1 Getting the culture right

When members of staff operate confidently, it gives a message about their competence and that is what we saw in the bi-annual meeting between senior managers, cabinet members and front line staff in March 2011. Behaviour had changed and there was a greater sense of calm about doing a job that requires a great deal of thought, along with the need for immediate action. That was a very encouraging sign.

In the area of protecting vulnerable adults, we have recruited a new POVA Coordinator and increased the overall capacity. That has been matched by an increasing confidence that the tasks are manageable and illustrates that there will be times when additional resources contribute to a solution.

The recruitment and retention strategy had within it a salary progression assessment and that has been put in place for social workers and OT's, giving the message that we have kept to our promise to make the system work for front line staff.

"...safeguarding the interests of the most vulnerable children and adults in the city."

The Local Safeguarding Children Board (LSCB) is energetic and has good partnership relationships, excellent training programmes, awareness raising in all schools, full compliance with the recommendations of the Laming Report into the death of Victoria Climbié and action plans on each Serious Case review. The LSCB benefits from excellent information about its performance and has a robust approach to assuring quality, in that expectations are high about standards being met. We have also improved the arrangements in the field of domestic abuse, so that all agencies share responsibility for making a difference to the lives of the victims. The LSCB has considered what it needs to do better and improved its business planning and sought different ways to engage with children, young people and their carers. We are looking to increase collaboration across LSCB's in 'Gwent', something else that is consistent with the recommendations in 'Sustainable Social Services - a framework for action'. In addition the quality of training on child protection and working with LAC in schools has been commended by headteachers.

The work on corporate parenting is also an important part of improving the way that we do things to improve the outcome for young people for whom we have some responsibility and the new Corporate Parenting Strategy is being considered by Cabinet in June 2011.



5. Workforce

The most important resource that we have available is the workforce and whilst the workforce of the city council rightly receives a good deal of attention, the majority of staff employed in the social care arena are employed by voluntary and independent sector agencies. We must not lose sight of that in all of our considerations.

So what were the challenges set out in my report last year?

- a) **Doing everything we can to offer social workers and other key frontline staff manageable caseloads.**

In April 2010 there was a 25% vacancy rate for frontline posts in Children and Family Services and a 50% vacancy rate for Team Managers and Senior Practitioners. Following the implementation of the Recruitment and Retention Strategy, we were able to reduce the vacancy rate to 8% in September 2010, albeit rising to 10% in January 2011. All Team Manager posts are filled and we have just one vacancy for a Senior Practitioner. Workloads for practitioners in front line teams have reduced and the average caseload is 19 children per social worker, with our aim to reduce further to no more than 15 children during 2011/12. No social work assistants in frontline teams undertake initial assessments and, other than in the Disabled Children's Team, they do not carry case responsibility but work under the direction of a qualified social worker. The reduction in caseloads and the development of the new Family Contact Service and the Integrated Family Support Team has increased opportunities for social workers to do more direct work with children and families.



In Adult Services, caseloads allocated to individuals are maintained as low as possible, whilst other cases are kept open to the 'team'. These are for 'review-only' and the team manager allocates cases to social workers/occupational therapists as required. These will include some people who are long term recipients of care packages and we have seen the benefit of reviews for these people in properly reassessing their needs. A case is identified for 'review-only' where there has been no active need for intervention for over 3 months.

Excluding cases open for 'review-only', the average caseload for social workers in Adult Services is 19 and the average number of cases being held for 'review-only' across 6 care management teams is 320.

In the learning disabilities team, person-centred planning (PCP) is now firmly embedded in all assessments; for disabled people the backlog of applications has been removed for Disabled Facilities Grants and there is considerable progress towards developing an integrated OT service in the city, whereby NHS and City Council OTs are already working much more collaboratively. Whilst the waiting list for OT assessments is still too large, the constant review of the waiting list has reduced it by over 13% in the last 12 months and further steps towards integration will see it reduce even further. 120 cases have been dealt with by ABHB OT's in this year as part of this collaboration. In addition 68% of reviews were completed by OTs compared to 27% last year and 89% of reviews by social workers were completed compared to 62% last year.

These moves are all contributing to increased morale and a sense that action can be taken to improve the working environment and culture.

- b) **Ensure that as much training as possible takes place with staff from different disciplines and differing agencies.**

POVA and child protection training is almost always multi-disciplinary and a lot of the training on IFST has also been multi-disciplinary as we are committed to agencies seeing IFST as something that offers advantages to other than social services.

Those independent sector agencies from whom we commission services are invited to contribute their training needs with bursaries available to support and encourage the take up of training. This contributes to agencies improving the quality of the service on offer as well as meeting their targets for qualified staff.

The Gwent Frailty Project has also identified the need for staff to be trained together, whatever their employing agency and that process began before 4th April and will continue into 2011/12.

- c) Encouraging flexibility in the workforce to provide opportunities for a better work/life balance.

Team managers are being encouraged to explore more flexible arrangements for staff. As we move towards a common approach to agile working, we will want to exploit flexible working as much as possible, so that we can better meet people's needs for advice and support when they need it. Time-off-in-lieu is being used in those parts of the service where a 7 day per week service is needed, e.g. IFST and the Family Support Team and this is enabling staff to balance their own personal needs with those of the service. We also have 4 social workers in Children's Services working a 9 day fortnight and that is working very successfully for the workers and their managers and their colleagues. In the OT team we have launched a pilot on working from home, to prevent unnecessary journeys to and from the office and to make best use of time and resources and we need to ensure that the technology available makes this easy. We will evaluate these arrangements and extend them, where they meet the needs of the service and where they offer greater certainty for members of staff and make the city council an attractive employer for people considering posts here.

- d) Building increasingly strong and productive links with University of Newport.

University of Newport are actively involved in IFST, carrying out local evaluation and impact, playing a real part in the development of the service. City Council staff members are involved in the University's social work qualifying degree programme, through teaching, acting as practice supervisors to students and playing a part in assessment interviews for candidates applying for a place on the course. In addition, we have planned a series of seminars on 'Ethics in Social Work Practice' and the first took place in autumn 2010 on 'direct payments and people having control' and the second takes place in May 2011 on 'removing children at birth'. This is an important development to add to the continuing professional development of social care staff in the city.

The university is also involved in offering young people looked after by the city council the chance to visit the new City Centre campus, to demystify university life, raising the aspirations of young people to look towards higher education as a real ambition.

- e) Making the best possible use of social workers' and occupational therapists' time and skills.

Our efforts to reduce caseloads and waiting lists, as set out above, are all targeted at making the best use of the time of professionally trained staff. As we develop more integrated services, this will have a greater emphasis through finding increasing ways to avoid duplication of effort between different professionals groups, e.g. nurses and social workers in their work with both people with mental health problems and people with learning disabilities.

- f) Embedding the work of the IFST, so that it sets the tone and becomes a common practice across both Children's and Adults' services and between the City Council, ABHB and other agencies.

IFST has provided renewed focus for professional practice locally with vulnerable children and their families. A framework within which to operate, that offers the chance of success and behavioural change, is quite different from the way in which many professionals have worked with vulnerable families all their careers. Yet again the principle of shared responsibility is a key focus for IFST, so that no single agency or professional group feels that it has a monopoly on a solution or indeed total responsibility for simply 'picking up the pieces' when everything tried has failed.

There are some encouraging early signs about the model producing changes for families, driven by the family being included and involved throughout the process, given constant information and feedback and therefore, whatever their circumstances, being treated respectfully. A well trained and motivated workforce, supported by enthusiastic managers and overseen by a national programme with the emphasis that provides, are also contributory factors to its early successes, but factors that we can replicate beyond the life of the pioneer project.

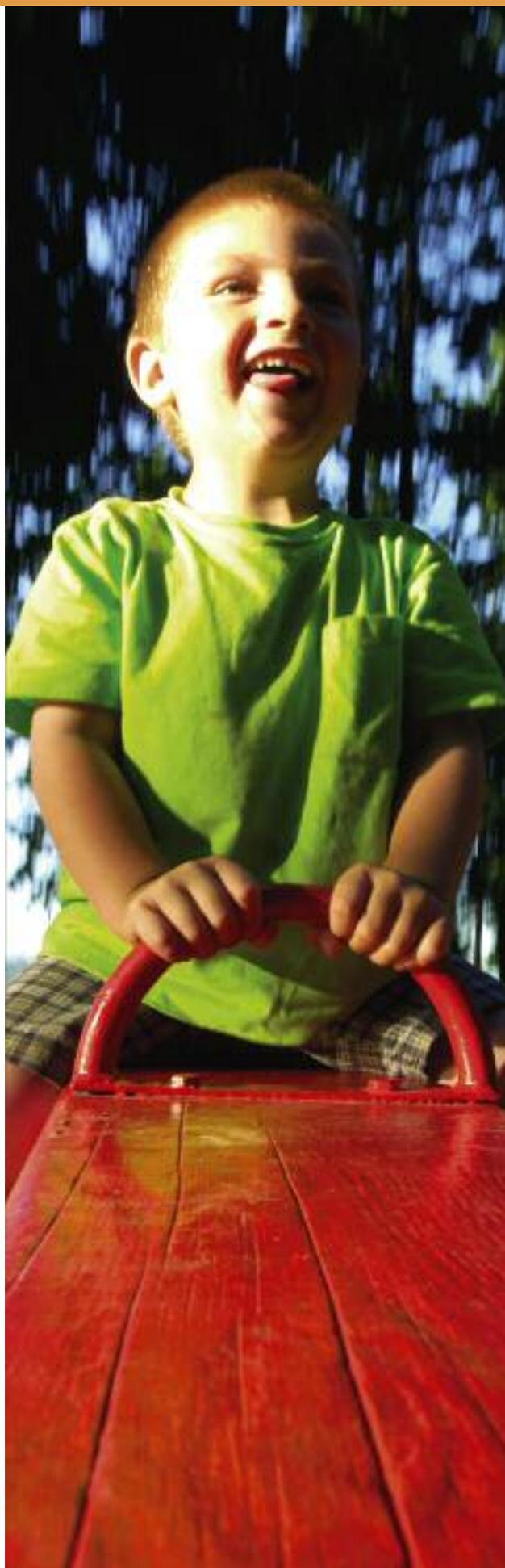
5.1 Getting the culture right

Newly qualified social workers now receive consistent and excellent support from their mentor, a permanently established post at senior practitioner level. It provides recognition that a protected caseload gives newly qualified staff the opportunities to develop and retain their enthusiasm.

We have built a relationship with Barnados Cymru, as our preferred voluntary sector provider and a new Family Assessment and Support Service, managed by Barnados, will be established by October 2011 and will provide assessments, carry out work with families and be able to respond at short notice on a 24/7 basis. Barnados bring valuable experience to the city as well as additional resources and this partnership with a national voluntary organisation adds to our reputation, attracting the interest of new employees who are keen to explore links with the voluntary sector. This will help us take advantage of IFST as a model for a wider range of family support services that will focus on early intervention and hence contribute to the planned reduction in the numbers of children looked after by the city council. This has provided evidence to our own staff that we can find creative ways of adding capacity to the workforce. We are encouraging more flexible working and although it is in its infancy, there is scope for further development and that will play a part in retaining the workforce and inviting others to see the city council as an employer of choice.

IFST and GFP have attracted additional resources into the city, again providing a message that even in these financially constrained times, we can still access additional funds, even if it is sometimes on an 'invest to save' basis.

"...a model for a wider range of family support services that will focus on early intervention and hence contribute to the planned reduction in the numbers of children looked after by the city council."



6. Improving the quality of the services that we provide and commission

This is something that has to be continually addressed as part of our programme of Improvement and Efficiency, but we should be learning from what works and what does not work and what people tell us about the impact of services on their lives.

So what were the challenges set out in my report last year?

- a) Using the opportunity of the South Gwent Children's Centre to enhance services for disabled children and their families.

'Serennu' opened on 4th April and as yet it is too early to determine whether it will have the impact anticipated. However the focus on a model of practice that is child-and family-centred moves us away from concentrating on a new building. It will ensure that we continue to develop a model promoting every child's potential and harnessing the parents' wishes for their children to achieve the best that they can.

Possibly the biggest change, as a result of Serennu's opening, will be for parents to come together more often and identify how they can mobilise their efforts for mutual support and appropriate services for their children. All agencies and professionals have to work hard at listening to the messages that come from parents and consider how they can make changes to better meet their needs and aspirations. Parents are expecting services to improve and for their children not to be denied opportunities because of their disabilities and/or conditions.

- b) Offering a wider range of accommodation options for people with learning disabilities.

This connects with the attention that we will give to commissioning services more smartly for people with learning disabilities. We are aware that a wider range of services is necessary to offer people real choices, choices that will allow people to reach their potential and develop skills that will lead to greater independence. In particular we have decided to collaborate with our 4 neighbours, with Caerphilly as provider, in a Shared Lives scheme, an adult placement scheme whereby adults with learning

disabilities are placed with families, as an alternative to small group homes or residential care. This can be for long term care and/or for offering respite care.

Social Services has also recently assumed ownership of a piece of land in St Julians, where it is planned that we will develop accommodation for people with learning disabilities, albeit yet to be planned and designed in detail.

- c) The integration of services for people with mental health problems and services for people with learning disabilities between the city council and ABHB.

Mental health services are solidly established as integrated services with the inter-disciplinary teams now managed by single managers and the professional background of the manager no longer having the previous significance. This means that neither nurses nor social workers are any longer managed only by nurses and social workers respectively.

We are reviewing the model for day services for people with mental health problems in an attempt to ensure that 'recovery' is the approach adopted and that users are directly involved in the development of the service, thereby aiding their recovery.

In services for people with learning disabilities, there is now a Joint Multi-Disciplinary Team in place and co-located. Work is progressing on a single access/care pathway, to prevent the service on offer being determined by where the initial contact is made. Integration is being progressed and a project plan is in place setting out who has to do what and by when. Initially there will be a single service manager across the City Council and ABHB and a job description has been developed.

The benefit of integration in mental health services is a much greater sense of shared responsibility between ABHB and the City Council, avoiding duplication and wasting resources by doing too many things twice. There is now a Joint Partnership Board between the five local authorities and ABHB for mental health and learning disability services, offering clear and shared strategic direction.

d) Implementing the Gwent Frailty Project (GFP) with tangible outcomes within the first 6 months.

It was anticipated that GFP would have started in September 2010, but due to a number of issues needing to be resolved, the date was 4th April 2011. I will report more extensively in my next annual report on the early outcomes, but already there has been progress in being able to offer a service locally on some days from 8am to 8pm, rather than 8am to 5pm as we had thought. That has come about by bringing staffing resources together. In addition the single point of access for referrers is proving helpful, so that professionals do not waste time trying to find their way through a complicated route.

GFP is a key programme of work that will set down the foundations for making the best possible use of both primary and secondary care in NHS and in social care services. We anticipate that local people will benefit from clinical assessment carried out in their own homes so that hospital admission will be avoided much more often than at present. In addition I was pleased that Age Concern Gwent, as provider of a Rapid Response Hospital Discharge Service that we commission, agreed that this service, as well as their Preventing Admission To Hospital (PATH) service, should become part of GFP and it is the only voluntary sector agency with services that sit within GFP.

Cabinet will be receiving a quarterly update on the progress of GFP, in addition to which Overview and Scrutiny Forum, Housing and Community Services will be monitoring GFP and are beginning that with an introductory session in September 2011.

e) Extending direct payments to a larger and wider group of people, including people with sensory impairments.

This remains a priority for this year, although it is good news that there has been an increase in the number of people receiving direct payments. We have to remain vigilant to what it feels like for service users and a person with a visual impairment pointed out that:

'it was all so complicated just to get someone to help me for a few hours a week.'

We have to find a way to ensure that this is not a common experience, as we have a responsibility to find ways to make access to and management of direct payments much easier for people.

Only two people of working age with a mental health problem use direct payments and that will be an area where I would expect to see an increase in direct payment users, particularly as a contribution to people's recovery, i.e. giving them control over their own care and support and gaining confidence from that.

f) Establishing an Independent Living Service to ensure that disabled people can more easily and speedily access environmental changes that make independence a real possibility.

Whilst we have not achieved a single Independent Living Service, we have seen some improvements to the way that we offer greater independence to people in their own homes. The backlog of applications for Disabled Facilities Grants has been removed and we have an OT placed in the Renewal Team in Housing Services, working closely with surveyors. Collaboration with Newport City Homes has contributed to a quicker response to disabled people's needs for adaptations to their property, with the waiting list reduced to three months and efforts in place to improve on that timescale.

I acknowledge that there is still a long waiting time for larger pieces of work to be completed and intend that we will look at this in 2011/12 with more urgency, building on what has been achieved through our work with Care and Repair, where the response is speedy and effective.



- g) Further developing the range of information and services for carers, including young carers and with more opportunities for mutual support.

Newport Carers' Forum is in its second year and has started to provide more mutual support, as well as a continuing focus for accessing information to make people's lives easier. This builds on the work of Carers Contact, still based in Newport Market, but also providing some small but valuable outreach services. It is encouraging that an additional 223 carers have been identified during the year, enabling them access to information and an assessment of their needs. Carers Contact now work with 12 GP practices, an increase in 5 from last year and this is a direct result of attending a Practice Managers' meeting. In addition they hold regular sessions at Royal Gwent Hospital.

Whilst we are supporting carers to offer each other support, we need to recognise the demands that carers face and therefore not to overload people. The words of a parent helping to organise a support group for other parents of disabled children act as a timely reminder:

'At our last meeting we had another three families attend the group and this week, I've had enquiries from another two. It's really exciting to know that more and more people are finding out about the group. But very sad that so many people need our help. The problem is, I now feel that in a few more months, the group will be out of control and that I will not be able to keep up helping all the families and offering advice, as I feel I still need more help myself.'

Carers often face an uncertain future and a carer, of his mother who has dementia, who was concerned about his future housing, sums up the relief when he learned that his future in the current accommodation was secure:

'I received a telephone call telling me that they (the landlord) were not intending to ask me to move, if anything happened to my mother and that they were looking into whether to make it a joint tenancy or to offer the tenancy to me after something happens to my mother. I look forward to caring for my mother for a long time to come, but also knowing that if something happens earlier, that my housing situation is now secure'

This illustrates the importance of practical support for carers and reinforces the importance of the Carers Measure, introduced by Welsh Government, to ensure that NHS and local government have a shared statutory obligation to assess the needs of carers and offer access to information and services.

Support for Young Carers has been underdeveloped and a revised Young Carers Strategy will be in place early in 2011/12, with the overall aim of promoting the welfare of young carers and their families and preventing the need for young people to undertake inappropriate caring responsibility for any family member. Yet again a plan does not guarantee anything, but in this case, it will set out what we plan to do, when action will be taken and who has responsibility for making the changes happen. We will involve young carers in the design of a range of accessible services, aiming to ensure that young carers do not miss out on their educational, health, leisure and career opportunities.

- h) Build stronger links between the Youth Offending Service (YOS) and other preventative services.

A recent inspection by HM Inspector of Constabularies concluded that YOS is performing at the national average. Partnership is a key feature of work with young offenders as well as running through the governance arrangements for the work of the service. There is continuing work aimed at improving the service, including managers demonstrating that they are supervising staff, directing casework and that practitioners are improving the quality of their practice. Inspectors also commented about the fragmented nature of

our preventative services. One step in tackling this is to bring together all prevention workers in the YOS and the Family Support Team to create a single Early Intervention and Prevention Team. This team will link with IFST and help make changes to the core services so that the impact is greater than simply those accessing the IFST.

6.1 Getting the culture right

There is a developing model of practice that places users and carers at the centre of our attention and this is a thread that runs through all the initiatives set out above. That involves treating people with respect and dignity at all times, even when making serious decisions that can seem not to be in their best interests, e.g. placing a child on the child protection register, removing a child from her/his parents, playing a part in removing someone to psychiatric hospital.

A number of members of staff at the City Contact Centre are now specifically trained in communicating with people with a sensory impairment and six staff in the Duty and Assessment team in Adult Services have undertaken training in British Sign Language. These are small but important steps in widening access for people who often experience real difficulties in doing so. Hopefully this will ensure that fewer people can say what 'Sight Support' often hear from blind and visually impaired people:

'We have tried ringing social services three times, but we can't get through to anyone who understands and we can't get the right answers, so can you help?'

Initially we will invite Sight Support to offer training to staff at the Face to Face Centre in an effort to 'get it right first time' and we intend including the costs of an additional Rehabilitation Officer for blind and visually impaired people as a budget pressure for 2012/13, to reduce the waiting list for rehabilitation training for people.

Significantly there are now 279 disabled children involved in accessing Sports Project, offering disabled children opportunities to keep fit and take part in sporting activities, ensuring that they can experience some of those activities that children without disabilities can take for granted.

The new Contact Service has offered 2300 family contact sessions since September 2010, a real demonstration of our commitment to keep children in contact with their birth parents where it is in their best interests and where it is required by the courts.

We are planning, as part of the new Corporate Parenting Strategy, to develop an apprenticeship and traineeship scheme so that the city council and other public sector bodies can play their part in offering young people leaving care a first step into employment, either through training and/or work experience. This is doing no more than behaving like a good parent.

During the year CSSIW carried out inspections of our approach to i) adoption and permanence planning and ii) fostering. Some of their comments point to the fact that we are moving in the right direction.

Following the adoption and permanence inspection (carried out in Sept 2010), they commented that there was 'a commitment at all levels to improve and develop the services', along with 'good consortium arrangements'. They noted that there was a 'core of knowledgeable, experienced and committed staff', delivering timely care plans and plans for permanence. They highlighted the helpful level of political and corporate support for adoption and permanence. We had been open in sharing with CSSIW a difficult 18 months before they carried out the inspection and they spotted a detrimental impact on the adoption team over that period. Their recommendation that managers and front line staff should be involved in shaping and developing the service was acted upon and that has enabled managers to nurture, support and develop the team. In addition we have improved systems and processes, using suggestions from members of the team. There is now stability in Management and Senior Practitioner posts and that has contributed to improved morale.

The fostering inspection (carried out in February 2011) was very positive. Carers showed their pleasure in working with the team and the support being provided:

"I cannot praise highly enough my link worker, who has always gone out of her way on mine and my child's behalf"

CSSIW noted the commitment to providing a high quality service at a time when the service is under review and summarised the position as:

'Overall Newport provides a very good fostering service within a climate of change and commitment to improve and develop the services'

Last year saw an important change in service for the people who had been using Ladyhill Day Centre and the early evidence is that people appreciate the alternatives provided. A number of people with complex needs now regularly attend new day facilities at Parklands and they describe it as:

'more intimate, a smaller group that is less threatening and some people are blossoming...the centre is bright and modern, with easy access to the grounds.'

95% of the people attending are said to be very happy with the new service and even those who are less positive nevertheless appreciate the range of activities on offer, including the increase in craft work.

Alzheimers Society provide a Memory Café with financial support from the City Council, offering carers valuable opportunities for mutual support, a key factor in helping people feel that they can continue to provide care for their 'loved one'. We have recently approved additional funding for Alzheimers Society to enable them to extend this service, through grant funding for voluntary organisations. In addition we commission Age Concern Gwent to provide a domestic service for carers, offering very practical support to relieve their burden, currently available for 25 carers in the city.

These are all further evidence of 'getting the culture right'.



7. Collaboration and integration

Collaboration and integration have both featured extensively throughout this report. They are key features of our future direction and this was confirmed when the cabinet approved the report in April 2011 on the 'Strategic direction of social services - integration as a key ingredient'.

The most significant development that will take place in this year will be the appointment to a new post, Head of Integrated Services (Social Care and Health), carrying the responsibilities of the previous post holder of Head of Adult and Community Care Services and the post of Divisional Nurse with ABHB. Rob Sainsbury will be taking up this post, as Lis House leaves in July 2011 and this signals a step change in the integration agenda.

It also contributes to the culture change that is necessary if we are to continually improve. This is a change that is characterised by no longer 'passing the buck' between the NHS and local government, by avoiding people being given the run-around between two agencies and by overcoming the historical organisational and professional boundaries that have plagued health and social care services for many years.

I have set out above a number of other collaborative programmes between the city council and other local authorities that show our commitment to move across traditional boundaries to gain the extra strength and capacity that it offers at a time of financial restraint, but which should be part of what we do as normal business.



"...we have focused on particular groups to ensure that these opportunities allow people to develop some strength from coming together."

8. Conclusion

This report shares with Council members a range of the work that has taken place during the year, focused on meeting the challenges that I set out in June 2010, as well as striving to make cultural change where that has been and continues to be necessary.

The challenges during this coming year will be to continue the journey of improvement and modernisation, supported by Newton Europe, enabling the city council to improve the experience of users and carers as well as make the necessary efficiencies.

In addition we will develop increasingly mature relationships with those agencies that provide services on our behalf. This will allow us to improve the way that we commission services, enabling smarter planning of services to be in place over the next 10/15 years.

The foundations are strong whilst there is also no room for complacency and this is something that is unlikely to change in future years, if only because the nature of our work in social services carries inherent risks that have to be well managed.

“...a legacy is left to ensure that we work towards continuous improvement year on year.”



