



***CHILDREN, YOUNG PEOPLE AND EDUCATION
CABINET BOARD***

***Immediately Following Scrutiny Committee on
THURSDAY, 24 SEPTEMBER 2015***

COMMITTEE ROOMS 1/2, PORT TALBOT CIVIC CENTRE

PART 1

1. To agree the Chairman for this Meeting
2. To receive any declarations of interests from Members
3. To receive the Minutes of the previous Children, Young People and Education Cabinet Board held on the 4th September 2015 (*Pages 3 - 4*)
4. To receive the Forward Work Programme 2014/15 (*Pages 5 - 8*)

To receive the Report of the Director of Social Services, Health and Housing

5. Serious Concerns Protocol Focused Review (*Pages 9 - 34*)

To receive the Report of the Head of Children and Young People Services

6. Supervision and Appraisal Processes (*Pages 35 - 66*)

To receive the Report of the Head of Business Strategy and Public Protection

7. The Social Services and Wellbeing (Wales) Act 2014 (*Pages 67 - 70*)

8. Any urgent items (whether public or exempt) at the discretion of the Chairman pursuant to Statutory Instrument 2001 No 2290 (as amended)

S.Phillips
Chief Executive

Civic Centre
Port Talbot

Thursday, 17th September 2015

Cabinet Board Members:

Councillors: P.A.Rees and P.D.Richards

Notes:

- (1) *If any Cabinet Board Member is unable to attend, any other Cabinet Member may substitute as a voting Member on the Committee. Members are asked to make these arrangements direct and then to advise the committee Section.*
- (2) *The views of the earlier Scrutiny Committee are to be taken into account in arriving at decisions (pre decision scrutiny process).*

EXECUTIVE DECISION RECORD

CABINET BOARD – 4TH SEPTEMBER 2015

CHILDREN, YOUNG PEOPLE AND EDUCATION

Cabinet Board Members:

Councillors: P.A.Rees (Chairman) and P.D.Richards

Officers in Attendance:

Mrs.A.Thomas, A.Jarrett and Mrs.J.Woodman-Ralph

1. **APPOINTMENT OF CHAIRMAN**

Agreed that Councillor P.A.Rees be appointed Chairman for the meeting.

2. **MINUTES OF THE PREVIOUS CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARDS HELD ON THE 16TH JULY 2015 AND 30TH JULY 2015**

Decision:

Noted by the Committee.

3. **FORWARD WORK PROGRAMME 2014/15**

Decision:

Noted by the Committee.

4. **ONE DAY SCRUTINY ENQUIRY INTO CHILDREN'S SEXUAL EXPLOITATION (CONTAINED WITHIN THE SCRUTINY PAPERS)**

Members were very supportive of the findings of the One Day Enquiry into Children's Sexual Exploitation that had been undertaken by the Scrutiny Committee and thanked the Chair, Committee and Scrutiny Officer for progressing this issue.

Decision:

That the report be noted.

5. **CHILDREN AND YOUNG PEOPLE SERVICES - 1ST QUARTER (2015-16) PERFORMANCE REPORT**

Decision:

That the report be noted.

6. **PERFORMANCE INDICATOR MONITORING REPORT 1ST QUARTER (2015-16) (EDUCATION)**

Decision:

That the report be noted.

7. **ATTENDANCE AND PENALTY NOTICES REPORT**

Decision:

That the report be noted.

8. **ACCESS ARRANGEMENTS REPORT**

Decision:

That the report be noted.

CHAIRMAN

2015/2016 FORWARD WORK PLAN (DRAFT)

CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD

Meeting Date and Time	Agenda Items	Type (Decision, Monitoring or Information)	Rotation (Topical, Annual, Biannual, Quarterly, Monthly)	Contact Officer/Head of Service
22nd Oct 15	Children’s			
	Update on Workforce Data Children’s Services	Monitoring	Topical	Andrew Jarrett
	Young Carers Strategy	Decision	Topical	Eileen Flynn
	Single Point of Contact Children’s Services	Information	Topical	Andrew Jarrett
	Western Bay Youth Offending Board Data Report – Quarter 1	Monitoring	6 Monthly	Caroline Dyer
	CYPS Monthly Key Priority Indicators	Monitoring	Monthly	Angela Thomas
	Education			
	Inclusion Consultation Report	Monitoring	Topical	A.D.Thomas

Children, Young People and Education Cabinet Board – Forward Work Programme (DRAFT)

Meeting Date and Time	Agenda Items	Type (Decision, Monitoring or Information)	Rotation (Topical, Annual, Biannual, Quarterly, Monthly)	Contact Officer/Head of Service
12th Nov 15 (This is for budget only)	Children’s			
	BUDGET 16/17			
	Education			
	BUDGET 16/17			

Children, Young People and Education Cabinet Board – Forward Work Programme (DRAFT)

Meeting Date and Time	Agenda Items	Type (Decision, Monitoring or Information)	Rotation (Topical, Annual, Biannual, Quarterly, Monthly)	Contact Officer/Head of Service
3rd Dec 15	Children’s			
	Commissioning Arrangements for Care Leavers (around the Family Support Strategy – Care Leavers Accommodation)	Decision	Topical	Andrew Jarrett
	P.I. Data – Quarter 2 Including the Key Priority Indicators	Monitoring	Quarterly	David Harding/AJT
	Hillside Managers Report	Monitoring	Quarterly	Mark Lazarus/NJ
	Hillside (The Children’s Home (Wales))	Monitoring	Quarterly	Mark Lazarus/NJ
	Managing Situations at Hillside (Young People)	Monitoring	Topical	Mark Lazarus/NJ
	Petty Cash Procedures within Children’s Services	Information	Topical	Angela Thomas
	Education			
	P.I. Data – Quarter 2	Monitoring	Quarterly	Carl Glover/ADT
	Schools Admissions Policy 17/18 Permission to Consult	Decision	Annual	Helen Lewis
	All Composite Data on Pupil Performance 14-15 (Annual Report)	Monitoring	Annual	Carl Glover/CM
	Inclusion Consultation Update Report	Information	Topical	A.D.Thomas

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CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD

REPORT OF THE DIRECTOR OF SOCIAL SERVICES, HEALTH AND HOUSING – N. JARMAN

24 SEPTEMBER 2015

SECTION B – FOR INFORMATION

WARD(S) AFFECTED: ALL

Serious Concerns Protocol Focused Review

Purpose of Report

To inform Members of the review of the journey and learning by Children and Young People Services during the Serious Concerns Protocol period.

Background

Upon completion of the CSSIW Inspection Report in February 2015 the Chief Inspector (CSSIW) took the decision to remove Neath Port Talbot's Children and Young People Services off the Serious Concerns Protocol. Contained within Appendix 1 is the story of the Service's two year journey out of the CSSIW Serious Concerns Protocol. It sets out the specific lessons that have been learned and the more general learning.

Appendices

Appendix 1 – Serious Concerns Protocol Focused Review June 2015

List of Background Papers

None

Officer Contact

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Safer, Brighter Futures

better outcomes for children and young people

Neath Port Talbot County Borough Council

Children and Young People Services

Serious Concerns Protocol Focused Review

(June 2015)

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- 7. Quality Assurance Framework**
- 8. External Stimuli**
- 9. Conclusions**

1. INTRODUCTION

This is the story of our two year journey out of the Care and Social Services Inspectorate Wales (CSSIW) Serious Concerns Protocol. Here we set out the specific lessons we have learned and the more general learning.

Context

When a service 'gets into trouble' it does not happen overnight. For some time, the warning signs are there.

The reality of the situation and its seriousness are hard for those close to it to accept. Often, it is easier for those external to the situation to see it.

It was following a CSSIW Inspection in late 2012, that it became unmistakably clear that our Children's Social Services were seriously underperforming.

Painful as it may have been at the time, the Inspectors' judgements, like the referee's decision, are final.

The Inspectorate plays an invaluable role in confirming this, bringing things to a head and above all, acting as an effective advocate for children, young people and families.

One important piece of learning is not to treat the Inspectorate as adversaries. Harsh though their judgements may have seemed, they also fairly highlighted the areas where we had made progress, even when there was still much left to do.

Similarly, by working with rather than against the CSSIW, their support to us was invaluable in helping us at every stage to focus clearly on what we needed to do next and affirming our own analysis of where we had got to and where we needed to go next. We are all immensely grateful for that.

General Learning

Acceptance of the situation, however painful is a pre-condition of recovery. Denial or partial denial will only delay progress.

Key to this are these things:-

- That Elected Members accept the reality of the situation and support improvement
- That Members are committed to rapid improvement and recovery and understand the scale of what is wrong and what needs to be done

Our Members were totally committed, gave every assistance and resource and made recovery of Children's Social Services the Council's number one priority.

- The whole of the Corporate machine must be equally committed and must pull together to support recovery and improvement. It goes without saying that such a commitment comes from leadership shown by Members, as happened in NPT.
- A completely new Senior Management Team was brought in. We were able to see what needed to be done and we were not held back by association with the past. The latter point does not apply to the vast majority of staff who are still here. You have to assume that most of the staff who are there at the beginning of the journey will see it through with you.
- The support and co-operation of Trades Union Colleagues is vital. Without it, firm action to steer recovery will be delayed by endless disagreements. NPT Council has a Social Partnership with Trades Unions Colleagues. This partnership approach directly contributed to getting out of the Serious Concerns Protocol as soon as we did.
- You have to create the right conditions for recovery. This relies upon strong, resilient leadership from Members, Corporate Directors and Service Management. Potential obstacles to recovery need to be overcome collegially and quickly, like ICT systems, prompt production of clear financial and performance data, management of the HR issues and much more.
- It is important not to become precious and hung up about 'Managerial' versus 'Professional' issues. For instance:-
 - Many of the actions needed to repair our staffing, improve ICT, produce accurate data are managerial.
 - The same can be said of the need to drive pace, resolve conflicts or creating the right conditions for recovery
 - Social work and practice are of course professional issues, which require the knowledge, experience and expertise of professionals who 'Know What Good Looks Like'

- Conflict about managerial and professional domains will merely lead to delay and frustration. We were all of us clear about this from the outset.
- Paradoxically, it is as important to know and understand from experience the factors and behaviours which will delay/obstruct recovery; as it is to understand what are the key drivers for improvement.
- Clarity and Manageability are essential. That is to say:-
 - You need to select a handful of the most crucial improvement priorities at the outset, which you know you can deliver
 - Trying to take on everything at the outset will overwhelm you, exhaust and demoralise people and will probably mean that you achieve few if any of your goals; and certainly not at any pace.
 - Your Improvement Plan must be as clear, simple and easy-to-understand as it possibly can be – so that everyone understands what is expected of them. Large ‘Strategic’ documents are not the answer (Let’s face it, no-one logs on in the morning and says to themselves “how is the Strategic Plan going to inform my day?”)
- The clearer and simpler your plan is, the easier it will be to unite everyone including partners around what needs to be done and to get everyone pulling in the same direction. In our own case, we had initially to unite everyone around ‘Back to Basics’
- You must set out clear milestones and targets and clearly communicate when they have been met. When this happens and everyone can see it, as if by magic confidence and self-belief return – “yes we can do it”
- Similarly Members and Service Leadership must as we were; be uncompromising about pace “we are going to do this and we are going to do it quickly.” One of the characteristics of service failure is widespread high tolerance of slow or non-delivery. The moral imperative for pace needs to be accepted (Vulnerable children and families depend upon these services)
- Once clarity and pace become apparent Partner Agencies become more confident and feel safe again in engaging and working with the service
- The improvement journey has to be incremental. This means that once you have secured your original improvement goals in Priority Sequence Order, you can add new improvement objectives; thus expanding the scope of improvement and recovery. Here is a good example:

At the outset the service was fragile on Child Protection. It was also weak on including the 'Voice' of Children and Young People in assessment and planning. Would it have made sense, however desirable, from day one to have made protecting children an equal priority with 'Voice?'

Quote from staff member (detailed within the CYPS Staff Survey 2014):

"I believe the service is operating on a far more stable footing than previous years. Reinstating clear processes has provided a structure whereby staff can operate in a more controlled environment and children and families' welfare is better protected".

2. RELATIONSHIPS

Many of the priorities for Children's Services are cross-cutting in that they affect and are affected by the work of more than one of our partners. Clearly, effective partnerships can help to improve service delivery and contribute towards achieving our priorities by identifying shared goals.

At the start of the Serious Concerns Protocol (SCP) it was clear that Children and Young People Services (CYPS) had disengaged from planning and developing services with its multi-agency partners. We knew that if left unchecked, this would become a barrier to making the necessary improvements. This view was reflected in recommendations from the CSSIW.

The service embarked upon a path that would put partner agencies at the very centre of the improvement journey.

- From a council perspective, the Authority has and continues to provide CYPS with its unequivocal support and fully embraces the need to place CYPS as a corporate priority. Support has taken many forms, including the provision of targeted and sustained financial resources, as well as the formation of an Improvement Programme Board and a Member Panel.
 - The Improvement Programme Board is chaired by the Chief Executive and attended by key individuals from both within the Council as well as partner agencies. The key purpose is to:

- provide senior officer direction, challenge and support
- monitor and identify the financial impact and implications of the improvement work within the context of the Council's Forward Financial Plan
- ensure key improvement priorities are communicated effectively both internally and externally

The Board met regularly throughout our time on the SCP and the commitment of Board members to support and facilitate improvement was key to maintaining the momentum of recovery and progress. In acknowledgement that there is still much work to do, it is the intention that the Improvement Programme Board continues to meet periodically going forward.

- The Member Panel was set up at the instigation of the Leader of the Council, to provide him with reassurance about the morale and experiences of the workforce. Whereas the Improvement Programme Board operates at a strategic level, the Member Panel is far more focussed on dealing with issues directly at the coal face. The Panel comprises of cross party members, who regularly meet with social work teams. Without senior managers being present the Panel have been able to discuss frankly the experiences of social workers, support workers and business support within the teams and provides a very real connection between the issues being experienced on the frontline and the ability of the "corporate centre" to provide meaningful support.
- There has been a concerted effort to increase elected members' knowledge of CYPS. This is particularly evident in Children, Young People and Education Scrutiny Committee, where members have fully embraced the learning process and individuals are now confident to participate in constructive challenge and the provision of appropriate support.
- The Corporate Parenting Panel continues to be chaired by the Leader of the Council and has strong representation from the Cabinet and wider Council. The Panel is extremely proactive in undertaking their responsibilities and, for example, played a significant role in ensuring care leavers are provided with suitable accommodation.
- Direct links with children and young people are being developed to better make the connection between strategic direction and

“what matters” to the individuals we support. This programme of greater interaction has already started, with the Corporate Parenting Panel being instrumental in organising a very successful consultation and fun day for all looked after children and their carers.

Quote from the Leader of the Council:

“I’m delighted that the Council has now been removed from the Serious Concerns Protocol and want to go on record to express my gratitude to all staff who worked so hard. We are determined to continue the good work that has been achieved”.

Quote from Cllr Lella James, Chair of the Members Panel:

“Providing assistance and support to the social work staff of Neath Port Talbot, has been a real insight and a pleasure.”

Quote from Cllr Peter Richards, Cabinet Member for Children and Young People:

"It is always important for elected members to work with and support staff to deliver the best possible services, but never more so than when driving forward improvements on this scale.

Members now have a better understanding of the service and are kept well informed, which enables us to be more confident in our decision making. Above all we are now clearer on what needs to be in place for us to provide reliable, effective and safe services for children, young people and their families. We are absolutely determined to ensure that we continue to provide these.

With increased pressure on public budgets it is essential that we make the most efficient and effective use of our available resources. The focus on Early Intervention and Prevention is key to this. Getting involved with families at the earliest opportunity enables us to provide the right support to help them achieve better outcomes and prevent the need for intervention from Social Services."

Links with Health have been reinforced, with six weekly management meetings and health attendance at the Complex Needs and LAC Improvement panels.

Quotes from Head of Nursing and Operational Services:

"Children and young people services have demonstrated strong leadership within the partnership, to address poor performance and delivery and to challenge traditional models of service delivery. There's been a Focus on the preventative agenda; enabling teams at grass roots level to feel supported in implementing this new approach.

Lastly, the can do approach and partnership values demonstrated by Nick Jarman, have been essential; there now exists an honesty under Nick's leadership, where you feel able to challenge and any views expressed are always considered and health contributions to new service models encouraged".

- There has been a concerted effort to target support services within Children’s Services, in recognition that it will assist in developing children’s plans, thereby ensuring that risk is minimised by giving children and young people the right support in a timely way. The formulation of a Family Support Strategy (FSS) is a key step forward to achieving this aim.

The FSS has been developed following consultation with staff, partners and focused Task and Finish Group reporting to our Practice Improvement Group. It highlights Children’s Services joint working with the Think Family Partnership to ensure a joined up approach through the Tiers of need from early intervention through to Tier 4 specialist support.

- Following consultation there has been a remodelling of some of our support services to assist with delivering targeted support to the families most in need, these include:
 - Action for Children
 - Dewis housing support
- The Youth Offending Team has actively participated with Children’s Services utilising their Prevention Team and this support will become formalised within social work practice.

Quotes from Caroline Dyer, Regional Manager, Western Bay Youth Justice and Early Intervention Service:

“The plan to amalgamate the three youth offending services from Bridgend, Neath Port Talbot and Swansea Local Authorities has taken some time to come to fruition. However, the Western Bay Youth Justice and Early Intervention Service Management Board was formed in May 2014 and Neath Port Talbot has had strong representation and good relationships with partners on this Board, where working together to achieve positive outcomes for children and young people is at the heart of delivery”.

- CALAN DVS Project is now in place, offering a range of immediate and long term support options for individuals and families experiencing domestic violence and abuse.

Quotes from Rhian-Bowen Davies, Chief Executive, Calan Domestic Violence Service:

“There’s now recognition of what specialist services can achieve when they work with and alongside children and young people services to provide statutory services”.

From a business perspective, children and young people services have had to make difficult funding decisions, but we understand there is a need for change to ensure resources are targeted where their most needed’

There are visibly more opportunities to bring a wider range of partners together”.

Building upon what has been achieved to date; we plan on a further re-commissioning of targeted procured services throughout this summer, in order to ensure the right support is in place to meet the need.

3. **MANAGING CHANGE**

Any level of change will impact on both staff and processes. When faced with the task of transforming the service in such a short space of time, it was essential to manage the change process carefully.

‘The service lacks direction and staff need clear guidance and support to promote consistent levels of good practice’; this was one of the key conclusions emanating from the CSSIW’s Nov 2012 Inspection.

Unsurprisingly, implementing the necessary changes to practice and culture was a fundamental necessity, if real meaningful improvements were to be made.

- It was recognised from the outset that staff needed a collective purpose to “get behind” - one that was clear, straight-forward and concise. It was agreed that we adopt the ethos of “**back to basics**”; three words that encapsulated what needed to be done.
- Although the message appeared simplistic, implementing “back to basics” was anything but. Following an objective review of

existing arrangements; some key changes were instigated, most notably reinforcement that practice is consistent with:

- The All Wales Child Protection Procedures
 - The Framework for Assessment of Children in Need and their Families
-
- To facilitate the required changes, huge strides were being made at this point in time to solidify our workforce (these efforts are recorded in more detail, later in this Review). However, it was imperative that system and process changes were made post haste, to expedite compliant practice. To this end, significant changes were made to the templates being used by workers, with the I.T. system effectively having to be “re-written”. The pace of change at this stage was frenetic and it was commonplace for workers to switch on their terminals in the morning and be faced with screens that looked totally different from the previous day.
 - At this stage of recovery, there was a need to strike a balance between complying with the fundamentals of social work (via the transformations to processes and systems), whilst ensuring that we continue to take staff “with us”. On reflection, there were occasions when the speed with which change was occurring was too quick, causing some staff to feel that changes were being made to them and not with them. To address some of these concerns, a temporary I.T. Trainer was appointed, who worked on a one to one basis with frontline staff.
 - After the initial developments, the process of change became more ordered. The Practice Improvement Group was established and continues to be the primary conduit by which developments to practice and systems are considered, tested and implemented. The group is chaired by the Head of CYPS, but its core membership is made-up of representatives of frontline workers. Developments “to” the service are now “owned” by the service.
 - The Senior Management Team have operated an open-door policy throughout the period of the SCP and have gone to great lengths to eradicate any perceived suggestions of bullying and harassment. In addition, suggestions of a blame-culture have been quashed over time, with staff being encouraged to take responsibility for their actions, safe in the knowledge that they won’t be subject to inappropriate retributions.

Extract from the CSSIW Inspection Report – February 2015:

'The senior management team enjoyed a high level of respect and credibility from the workforce, who in turn believed they were listened to and valued for the enormous amount of effort being made to improve timeliness and quality of services.'

4.

STAFFING

Children's Social Care is a service to people from people. It stands to reason then, that people and staffing are the most important element of what we do.

24 months ago our staffing pattern was in a very poor state:-

- Over 40% of staff had left and more were leaving weekly
- There was a succession of agency workers covering vacancies
- Staff morale was at its nadir.
- Casual sickness absence, often owing to stress was rife
- There was a series of outstanding Disciplinary, Capabilities and Grievances
- It was proving nigh on impossible to recruit.

It follows from this that you will get two major problems:-

- a) There will be serious discontinuity in the work of social workers with children and families, making it very difficult to complete safe, good quality work with them
- b) There will be massive disruption of multi agency working, where for example you never see the same manager or worker from one contact to another.

Dealing with this malaise was our number one priority. There are nine lessons that we learnt:-

- 1) We appointed two dedicated HR Officers to deal specifically, full time with the HR problems facing us. This has worked so well, we have continued to fund this.
- 2) We immediately reviewed caseloads and were adamant that caseloads for frontline teams remain no higher than 1 to 15 (unmanageable caseloads are the biggest deterrent to staff remaining with you or being able to recruit new staff. If you have high, unmanageable caseloads you may as well place an

advertisement hoarding by the M4 at Port Talbot saying “Don’t come and work here”). Getting caseloads manageable was one of the major factors in improving the Council’s reputation and marketability to potential recruits. Obviously we also monitored caseload mix (e.g. out of 15 cases, no-one had 12 difficult CP cases.)

3) Sickness

Much of the sickness originated from a climate of insecurity, excessive workloads and demoralisation. Firstly it was essential to convince our workforce that there was a clear plan which was deliverable over a short period of time to turn the service round. We were absolutely consistent in getting this message across to staff and gaining their buy-in and this made a material difference to attendance levels.

The second thing which improved attendance was that we were unashamedly aggressive in visiting people who were off sick at home and getting them back into work.

Nowadays it is understood within the service that if people are having a bad time, we talk about it we don’t go off sick.

4) Communication is everything. All Senior Managers from the Director down were constantly accessible to staff, were visible and “walked the floor.” It is hard to underestimate how significant this was in restoring staff confidence, allaying fears and boosting a good sense of team spirit.

5) We dealt promptly with performance issues. For over 18 months we have had no outstanding Disciplinary, Capabilities or Grievances and we are down to two people only who are off on sickness with long term conditions.

Quote from staff member (detailed within the CYPs Staff Survey 2014):
“Having worked for the Social Services Department in another Authority for approximately 32 years, I feel that Neath Port Talbot Council offer more support to their employees and are more willing to listen to staff concerns and provide advice and flexibility.”

We believe by reference to benchmarking data that we currently have the best HR Profile in Children's Social Care in the United Kingdom.

- 6) Training and Development are also vital. In addition to Standard Training e.g. on the basics of Child Protection which was mandatory, we insisted that each individual member of staff had an Individualised Learning Plan of high quality CPD. This ILP was designed specifically around each individual's developmental needs, at the place they were in at that time and to enable them to develop at their own speed, but to ensure that all staff raised their performance to a standardised high level.
- 7) We had an on-going monthly Recruitment Programme. We made this much simpler by 'shortening the line' over recruitment process, thus dramatically shortening the time between the Job Offer being made and the candidate starting work.
- 8) We retained a number of Senior Agency Staff to provide capacity, expertise and role modelling. This was a worthwhile investment.
- 9) Above all, we focussed down relentlessly on staffing as our number one objective and refused to be distracted from it.

Quote from a looked after child:

"I like it that I've had the same social worker for a long time".

Quote from a mother being supported through the adoption process:

"You have been amazing to me and my son; we couldn't have a better social worker"

5. **EARLY INTERVENTION AND PREVENTION**

For families that are showing signs of distress getting appropriate support at the earliest opportunity is critical. It can prevent them reaching a point where it is necessary for children's social services to intervene, less still for them to break down to the stage where their children are taken into care. This is why we made our Early Intervention and Prevention (EiP) agenda a priority.

We looked at other local authorities where the EiP approach has really made an impact to see what we could learn from them. Consequently we decided to adopt a Think Family Partnership approach. This meant turning our EiP arrangements upside down two years ago. At that time the challenge was to achieve in 12 months what other local authority areas had taken four to five years to accomplish.

A number of factors were key to the success of this:

- 1) We reformed our previous Children and Young People's Strategic Partnership onto more modern, effective lines to create The Think Family Partnership. The key emphasis being on prevention.
- 2) We established a dedicated Team Around the Family, with 15 staff.
- 3) To promote 'buy in' to our Think Family Partnership and TAF approach it was essential to raise awareness across Children's Social Services, but also across all of our partners including Health, the Police, Schools the voluntary sector and the other partners. We put out consistent messages about what benefits this approach offers, the part that people can play in it and what they themselves can expect from it.
- 4) TAF is a small team and we recognised that in order for them to make a difference it is crucial that colleagues across the Think Family Partnership agencies work together in a continuum. All of these professionals working together with a specific programme, designed to meet those families' needs can make a huge difference.
- 5) Training is essential, especially when introducing a new way of working. We rolled out a series of high quality training sessions for professionals working in the partner agencies. The aim was to achieve a high coverage rate (i.e. the number of people who undertake the training, understand it and buy into it).

Good progress is being made. The NPT Think Family Partnership is now fully operational and there is a steady rate of appropriate referrals into the team.

Shortly we should begin to see:

- Fewer children coming into care and
- Families that didn't meet the children's social care threshold criteria in the past but who still need support, receiving a service so that they become more resilient.

Quote from a parents of children-in-need, requiring a more appropriate home, better suited to accommodate the family:

"I'd like to thank our social worker for working with Housing, to get us a better home".

6. PERFORMANCE AND ACCOUNTABILITY

Effective recording and reporting of our performance management information is essential in helping us to know whether or not we are making a positive difference to the lives of the children, young people and families that we support.

It was widely acknowledged that our infrastructure for recording and reporting performance management information was broken:

- case files read by inspectors were difficult to follow;
- it was not possible to tell whether statutory checks had been completed.
- Recording was minimal on some case files even when the child was subject to statutory requirements.
- When speaking to staff and service users however, it was evident that direct work had been undertaken, but there was little recording on files of what action had been taken and even more so, little or no performance management information available to back this up.

The support provided by CSSIW in addressing this deficit was instrumental in helping us to identify a relatively small number of key areas in which to channel our initial focus to putting things right. A "don't run before you can walk" approach was adopted, and the following steps were taken:

- 1) As previously referenced, our IT systems and processes needed to be completely overhauled to ensure practice and reporting arrangements were compliant. This meant that the pace of change was often hectic, but essential to achieving the significant developments needed given the starting point we had come from.
- 2) With the children's services performance monitoring system established and providing a valuable context of the service and its

business, a decision on how best to use the available performance information.

- 3) Only by challenging and understanding the data, could the service make a step change in terms of service delivery and it was clear that managers needed to take accountability for performance in their respective areas.
- 4) To facilitate this, regular performance meetings were set-up with managers to discuss performance across a range of key areas, including access to the service. This process undoubtedly helped embed the shift in responsibility and accountability for performance, to the point that performance is now 'owned' by the teams. It is common practice for managers and staff to challenge and query performance data in a constructive way. Whilst we've actively promoted performance management, we have been very mindful that this message doesn't tip-over into inappropriate competitiveness between teams and individuals. This has certainly not been the case and the forums that have been established have definitely had a positive impact on the service. Although this process took time fully to establish itself as part of the day-to-day culture, the fact that CSSIW allowed time for it to evolve has without doubt been one of the positive aspects of their intervention.

Quote from a parent of a child-in-need:

"My social worker is non-judgemental and always listens to me"

Quote from a child-in-need:

"I find my social worker really easy to talk to"

Quote from the Mother of a child on the Child Protection Register:

"I wouldn't be where I am today, without the support and help of my Social Worker"

7. QUALITY ASSURANCE FRAMEWORK

The need to be confident that our services are of the type and quality that our service users and other stakeholders expect and require cannot be underestimated. For that reason we set out clear parameters for how things should be done and to do them to a very high and consistent quality.

At the time of entering the SCR, there was little evidence of any planned and systematic actions in place. Additionally, despite some managers carrying out elements of quality assurance within their own teams, this was not being collated or used to shape the improvement agenda.

Whilst improvements were being almost instantaneously in our quantitative performance indicators, there was a lag in both measuring and reporting upon the quality of our work.

In 2013 a Quality Assurance Framework (QAF) was launched to address this shortcoming.

- The purpose of the QAF was to define “what good looks like”, by setting high quality standards to be delivered across the service, as well as establishing methods for measuring and evaluating the quality of our interventions with families and using findings from audits and complaints to identify priorities for improvement and further develop services.
- Initially, the responsibility for auditing of case files was placed firmly on Team Managers’ shoulders. Despite their best efforts, it was becoming evident this arrangement was proving problematic, with audits either not being completed or, completed to a sub-standard level.

In hindsight, it is now clear that asking Team Managers, most of whom were relatively new in post, to undertake a bespoke task with little or no training was doomed to fail. Particularly when these same individuals had to juggle so many balls, given the changes to workforce, processes and systems that they were being asked to implement at this stage of our recovery. Consequently, 2014 saw a more pragmatic approach to quality assurance, with the assistance of commissioned external assistance, whose remit was to audit case files and meet workers on a

one-to-one basis to provide constructive feedback/make suggestions to potential improvements in practice. On a more strategic level, thematic reports were produced by auditors, identifying strengths and potential areas for improvement within the service.

We recognised that the reliance on outside assistance to take forward the QAF was an unsustainable position that needed to be addressed:

- 1) Approval was sought and agreed to create a dedicated resource in order to undertake a further step change and equip the service to embed quality assurance throughout its everyday activity.
- 2) We have subsequently established a Performance, Quality and Practice Development Team, comprising of a Performance, Quality and Practice Manager, Complaints Officer and Engagement and Participation Officer. All three staff are now in post.

8. **EXTERNAL STIMULI**

Maintaining a sense of objectivity is essential to any improvement programme. It enables rigorous assessment of situations and leads to sound conclusions. To this end, the support of the CSSIW and others was invaluable throughout our journey out of the SCP.

- 1) The CSSIW clearly pinpointed our shortcomings; shortcomings that up to then were under the surface and frustratingly intangible.
- 2) The CSSIW's November 2012 report, focussed the attention of not just CYPS, but also the authority on what needed to be done to ensure the children and young people of Neath Port Talbot were properly supported.

We found that the CSSIW were not just focussed on solely measuring our success in meeting their recommendations; in addition, they proactively offered up regular advice, such as suggesting that the senior management team would benefit from a visit to Leeds City Council. This visit subsequently took place and proved extremely informative. Leeds CC showed us that despite having naturally high levels of demand; they were still able to provide quality social services support to children, young people and their families, particularly in the areas of:

- Managing high levels of complex cases

- Strong multi-agency safeguarding processes
- Innovative Intake arrangements
- Open and informed Leadership

Whether it was a conscious approach or not, we feel that several of the positive traits exhibited by Leeds CC, are now embedded within our service. To this end, we are extremely grateful to both the CSSIW for “pointing us in their direction” and to Leeds CC themselves, who were extremely generous in the advice and guidance they afforded us.

Another CSSIW suggestion adopted by the service was to enlist the help of someone independent of the service, to assist the development and implementation of our improvement plan.

We subsequently “appointed” Graham Williams and Rhonwyn Dobbing. After previously working for Welsh Government, both individuals had vast experience of supporting Local Authority Children and Young People Services’, particularly those in crisis.

- They were referred to as our ‘Independent Support Team’ and during our time on the SCP, they played the vital role of “critical friends”, constructively challenging not only CYPS, but also the authority.
- Being so closely linked to the CSSIW in their previous careers, the Independent Support Team were able to provide us with a unique perspective on how best to approach the necessary transformation of services. Their objective insight, knowledge and experience proved invaluable in focussing CYPS on what needed to be done and by when.

Late in 2014, it was evident that progress had been made, but with no formal Inspection due, we felt that it was important to explore other options to measure how far we had come, whilst at the same time establishing which priorities would likely be most effective in retaining or improving upon the momentum generated over the preceding 18 months or so.

We decided to Commission a Peer Review from the Social Services Improvement Agency (SSIA).

The Review Team were made up of professionals who each brought a wealth of expertise and knowledge:

- Cathie Williams – SSIA Associate

- Phil Hodgson – SSIA Associate
- Jake Morgan - Director for Education and Children, Pembrokeshire County Council
- Mike Nicolson - Strategic Director – People, Newport City Council
- Angie Allen – Supervising Social Worker – Fostering Team, City of Cardiff Council

The review started on 24th September 2014 and focussed on four key themes to help understand current arrangements and identify the best way forward. The themes covered were:

- Outcomes for, and the experiences of, children and young people and their families who use services
- Leadership, strategy and working together
- Service delivery, effective practice and commissioning
- Performance, quality and resource management

Not only did the Peer Review exercise confirm what we anecdotally suspected, in terms of progress made; it also gave us the confidence to move beyond the *'back to basics'* ethos and strive to become an exceptional service, adopting the new strapline:

'Achieving quality, supporting families, managing risk'.

Extract from the Peer Review Report – December 2014:

'It is evident that the council has completed a lot of work to improve services for children, young people and their families since the CSSIW inspections.'

9. CONCLUSIONS

- It is as important to understand and avoid the factors which can delay or complicate improvement; as it is to understand what brings about recovery and improvement.
- 100% commitment from Members, partnership with Trade Unions and concerted Corporate Support are pre-requisites.
- This is a service 'to people by people.' Most of the issues and their solutions will be about managing and developing people.
- Clarity of focus, prioritisation, pace and manageability of objectives are vital.
- It is essential to work with CSSIW to involve others from the sector (no one Council has all the answers or all the expertise).
- You have to be uncompromising about expectations and standards of performance.

- Staff must feel secure and have faith in what is promised. They must be able to see “Improvement Growth” for themselves.
- Always keep things simple (not simplistic). Always “shorten the line” in processes wherever possible.
- Make sure everyone understands what is wrong and what good looks like.
- Leadership is vital. Leaders need to be visible.

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CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD

24th September 2015

REPORT OF THE HEAD OF CHILDREN AND YOUNG PEOPLE SERVICES - A. JARRETT

SECTION B – MATTER FOR INFORMATION

WARDS AFFECTED: ALL

1. SUPERVISION AND APPRAISAL PROCESSES

1.1. Purpose of Report

This report is for information to the Children, Young People and Education Committee as an update to the continued improvements for workforce support and development following actions identified in the addendum to the Children and Young People Services Strategy for 2015 – 2016.

1.2. Background

Children and Young People Services in Neath Port Talbot has made significant improvements over the past two years. The service now has a stable workforce that is gaining the experience needed; practice that is procedurally sound and performance that is amongst the best across Wales. The “back to basics” work has now been completed and it is time for the service to fulfil its aspirations to move from the good service it is now to an excellent service.

As the service moves forward, support for staff continues to be a high priority for management. In light of this, work has been completed over the past several months to review the current Children Services Supervision Policy and the Corporate Personal Development Review (Appraisal) process in order to launch it within Children and Young People Services.

The Supervision Policy has been reviewed and aligned to quality standards within Children Services along with developments to the internal Children and Young People Services database and management electronic tracking system.

The Appraisal process has been amended to be more user friendly within the service and no content alterations have been made that distract it from the corporate model already being used across Neath Port Talbot County Borough Council.

In order to improve and update both the Supervision and Appraisal processes, consultation was undertaken with a range of groups that included:

- Children and Young People Services Practice Improvement Group (representatives of all teams)
- Children and Young People Services Management Group
- Senior and Team Managers
- Children and Young People Services Quality Assurance Group
- HR Management

The next stage for both the Supervision and Appraisal processes is to work with managers and staff to roll-out these processes, ensuring both managers and staff are equipped with the skills and knowledge to use them effectively.

1.3. **List of Background Papers**

Addendum to the Children and Young People Services Strategic Improvement Plan - February 2015 (not attached)

Appendix One – Supervision Policy

Appendix Two – Corporate Appraisal amended for Children and Young People Services

1.4. **Officer Contact**

Andrew Jarrett - Head of Children & Young People Services

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Childrens and Young Peoples Services

Supervision Policy

September 2015

1. Introduction

- 1.1 Neath Port Talbot County Borough Council is committed to developing a dedicated, skilled and effective workforce in order to provide a quality service to children in need and their families in Neath Port Talbot. Our aim is to develop a learning organisation in which high professional standards are celebrated and in which staff are supported to learn and develop their knowledge and skills in order to achieve positive outcomes for children and families.
- 1.2 We recognise that good quality supervision is critical to achieving this and we expect all staff to receive regular good quality supervision which supports their professional development, ensures compliance with statutory and regulatory requirements as well as compliance with the local authority's own policies and procedures.
- 1.3 Supervision makes a critical contribution to professional development and is the main component of a learning process which includes induction, training, review and appraisal.
- 1.4 All staff members, including agency staff and students are expected to participate in an induction process within the **first week** of their employment or placement and to receive one to one formal supervision every **28 working days**, although newly qualified staff may require supervision more frequently.
- 1.5 Supervision is a core responsibility as well as a core activity for all managers. It is a two way process and effective supervision requires the commitment and engagement of both supervisor and supervisee. It must therefore be agreed in a formal written contract which is revised regularly and as a minimum on an annual basis following a formal appraisal.

2. Definition of Supervision

- 2.1 Support and supervision sessions are regular one-to-one meetings where work performance is discussed in a systematic manner. The session should take the form of a semi-structured interview with the emphasis on encouraging dialogue between the manager and the member of staff.
- 2.2 Support and supervision is concerned with monitoring work in hand, reviewing progress against individual work plans, discussing problems, developing solutions, and delegating new tasks and projects. Effective support and supervision should maximise learning on the job and support the individual in a way which is appropriate to their stage of development. It is expected that supervision will also review overall performance and manage personal and career development as part of a systematic appraisal system.

2.3 Effective supervision and support should generally cover four broad areas:

- Review of work
- Delegation of tasks/projects
- Priority setting
- Training and development review

It should cover both the regular work of the team and other activities such as attendance at various groups, team meetings, networks, etc.

3. Framework of the Supervision process

3.1 Supervision is the key component which is designed to support staff in discharging their professional responsibilities and to develop their skills and knowledge. It comprises of a number of elements;

- Induction
- Training and learning opportunities
- Appraisal
- Supervision

3.2 **Induction** - As previously stated, all staff joining the Children's Services will participate in an induction programme within the **first week** of their employment or placement, which will usually be devised by the Deputy Team Manager and agreed by the Team Manager. The content of the induction will reflect the needs and experience of the new member of staff but the deputy team manager will be responsible for ensuring that the staff member will be familiar with, and able to access the interactive policy and procedures manual (Interactive Practice Guide) and be aware of and able to access available resources and information both for themselves and service users.

3.3 The induction process should include visits/meetings with both internal and external teams. Newly qualified staff should have the opportunity of undertaking joint visits to service users with more experienced staff.

3.4 Personal development will also be enhanced by the creation and implementation of "**Individual Learning Plans**" which should be developed as part of the services Annual Appraisal Process.

3.5. A formal **Appraisal** will be undertaken at least **annually** with the exception of new staff when a first formal appraisal should be held after their **six month** probationary period.

3.6. During the period covered by the appraisal the supervisor should observe the supervisee's practice on at least one occasion. e.g. attendance at legal meetings, panels for those more complex cases.

- 3.7. The appraisal will consist of a review of the supervisee's practice over the period and include a review of their training and professional development. The appraisal will record the workers progress over this period and identify future training and development needs. On the basis of this review another supervision contract should be drawn up.

4. Training

- 4.1. The Children's and Young Peoples Services has a comprehensive training programme which is available to all staff. Some training courses are mandatory e.g. child protection, but others offer the opportunity to staff to increase their knowledge and develop specialist skills. Training and development needs must be discussed in every supervision session and a record of which should be noted within the supervision records and as part of the ILP for purposes of registration.

5. Aims and purpose of Supervision Sessions:

To ensure that employees deliver quality: direct, administrative or support services which are responsive, appropriate and effective.

- 5.1 To provide employees and their managers with a regular opportunity to discuss work progress, case loads, individual cases to review targets, learning and achievements and to plan to meet individual development needs.
- 5.2 The supervision sessions will feed information into the annual appraisal process and review targets set during appraisal.
- 5.3 This policy relates to 'formal' Supervision processes. It is acknowledged that there will still be a need for contact between managers and employees outside formal sessions, particularly when employees are new or inexperienced. Decisions made under these circumstances must be recorded and signed off by the manager.
- 5.4 The attached documentation is intended to assist managers, by providing useful documents to ensure the basic elements of the process are carried out i.e. a written agreement and a written record is kept of each supervision session.
- 5.5 Unresolved or unfinished issues should be carried forward to the next session. It is possible that disagreements about proposed decisions arise e.g. whether or not a case should be closed or whether a move of a child's placement is required and if, after considering the evidence, a difference of opinion still remains the case should be discussed with the relevant Principal Officer.
- 5.6. Decisions agreed in supervision may be revised as a result of a change in a child's circumstances or in the light of new evidence or information. Any change must be recorded in supervision records together with the reasons for the change. Records should be signed by both parties. **Supervision records must not be changed or amended unless the change is agreed and signed off by both parties.**

- 5.7 Regular supervision audits will be undertaken to ensure that supervision sessions are undertaken in accordance with these procedures.

To facilitate the following processes: -

A. Workload Management:

To review outstanding work/audit actions, progress, quality and quantity of work being undertaken. This is to ensure that policy and procedures are being implemented, that agreed plans of action are being followed, and that outcomes are being met.

At each supervision session every case should be considered as part of the workload management agenda should identify cases to be discussed in order of priority e.g. (Child Protection, pre proceedings those in the court arena, cases ready for transfer or closure, etc.) to ensure that other cases are not subject to drift, the Team Manager should review and note progress of other cases (CIN, LAC)

Urgent case decisions taken outside of supervision should be recorded as a Case Consultation (**within one working day**)

A copy of the handwritten notes should be given to the Social Worker at the end of the supervision session.

All supervision decisions must be recorded on SSIS within **five working days**.

B. Personal Development:

To discuss and explore ways of working, sharing information and different perspectives. Supervision must identify and contribute to continuing professional development. It should ensure Social Workers have the relevant skills, knowledge, understanding and attributes to do the job and progress their careers. This will include the review and identification of learning, training and development needs and different ways of meeting these needs e.g. projects, training courses, open learning, coaching etc. In particular, managers should identify expected outcomes from any course or learning agreed and evaluate outcomes of any training or learning undertaken

C. Support:

To provide constructive feedback and encourage reflective practice on work that has been undertaken. To explore and acknowledge the range of emotions that are generated by the work and agree action on reporting resource shortfalls and training needs to the appropriate sections within the Directorate.

7. Supervision Should Enable Individual Social Workers to:

- Be accountable for their practice and ensure quality of service for people who use services (adults, children, young people).
- Uphold professional standards.
- Build purposeful, professional relationships and communicate effectively.
- Make sound professional judgements based on good practice.
- Manage risk and protection alongside their duty to respect rights and address need.
- Reflect on, analyse and evaluate their practice.
- Manage the emotional impact of their work.
- Share, debrief and identify any further required resources to address responses to stressful situations.
- To constructively challenge practice in the interests of the service user, worker and agency.
- Develop the knowledge, skills and values required for their own role, professional development and as part of the Directorate.
- Contribute to research and use knowledge and experience to explore new ways of working.
- Identify and manage stress factors that may impinge on the worker, service user or agency.
- Ensure peer and management review of professional decisions and to encourage mutual learning and development.
- Communicate with their line manager on organisational issues.
- Manage realistic case loads.

8. Timescales For Supervision Sessions

- 8.1 One to one supervision sessions should take place every **28 days**. If employee and manager work in close daily proximity then an alternative pattern of supervision may be agreed between the employee, line manager and Head of Service and the reasons for the variation recorded on the Supervision Agreement, but this should not exceed the **28 days** interval between each supervision session.

9. Supervision of Child Protection Chairs and Independent Reviewing Officers

- 9.1 It is recognised that the numbers of cases allocated to staff in the conference and review team cannot be discussed within an eight week cycle and the following guidance should be applied to children on the child protection register and “looked after” children.

- **Child Protection Chairs**

All children subject to an Initial Child Protection Conference since the previous supervision session should be discussed together with those cases which have been deregistered. Children who have been on the register for more than eighteen months should always be discussed as well as those cases which appear to be “drifting” and those cases which are causing concern.

- **Independent Reviewing Officers**

All children who have been reviewed for the first time since the last supervision session should be discussed together with those children who have been discharged. Those cases where “plans” are not being realised should be discussed together with those causing concern.

10. Directorate Expectations

10.1 Key objectives of supervision are:

- To ensure accountability for the work undertaken by the supervisee
- To ensure that the supervisee understands and performs to the standards laid down by the Directorate
- To ensure that the supervisee is clear about her/his key roles and responsibilities
- To enable the supervisee to develop both personally and professionally
- To be a primary source of support for the supervisee recognising the demands of the job
- To provide regular and constructive feedback to the supervisee on her/his performance
- To ensure that the supervisee is treated equitably within the Directorate and areas of concern are addressed

11. Supervision Agreement

11.1 Guidance on Use

11.1.1 The Agreement must specify:

- The frequency, duration and location of the sessions
- The range of circumstances when sessions can be interrupted or changed.
- The expectations of both parties are set out
- Arrangements for any personal / professional disagreements between both parties.

11.1.2 The Supervision Agreement will be reviewed and amended at least every **six months** and for new staff at **six months** appraisal.

11.1.3 The purpose of the Agreement is to ensure that both parties are clear about the supervision process and to ensure that it is given a high priority.

12. Supervision Records

12.1 Guidance on Use

12.1.1 Supervision Records are important documents that identify key progress of a case and required actions and decisions as discussed and agreed in supervision sessions.

NB Requests can be made by courts to disclose supervision records as evidence in cases. Records made during supervision sessions must therefore be factual and accurate.

- 12.1.2 All supervision sessions must be recorded and filed in the individual Social Workers supervision file for future reference. **APPENDIX 2.**
- 12.1.3 A copy of the contemporaneous records made during supervision should be given to the Social Worker to ensure that decisions can be actioned immediately.
- 12.1.5 Actions and tasks that are agreed during the sessions should be recorded in the action section.
- 12.1.6 Where actions and tasks relate to specific service users, then the agreed actions or decisions should be recorded in other documents as appropriate. The supervisee should bring the child's plan to supervision on the cases to be discussed.
- 12.1.7 Preparation required for the next session by either the manager or employee should also be recorded including any outstanding audit actions.
- 12.1.8 The record of action agreed should be consulted at the start of the next session to check on progress against each agreed action.
- 12.1.9 The Manager's copy of the supervision record should be placed on the staff member's personal supervision File. These are confidential documents between employee, manager, reviewing manager and senior managers and must be stored appropriately.

SUPERVISION AGREEMENT TEMPLATE

Post-Holder Name: _____

Supervisor Name: _____

1. Dates of supervision to be mutually agreed by supervisor and supervisee and noted accordingly.
2. Supervision to be convened in a suitable venue respecting confidentiality.
3. Venue bookings to be arranged and agreed by parties.
4. Sessions to last for the duration of 1 hour 30minutes per session unless otherwise agreed by parties.
5. Both supervisor and supervisee to contribute to supervision agenda.
6. Responsibility lies with both parties to be prepared in advance for supervision.
7. Note taking to be undertaken and written up by supervisor.
8. Sessions should not be cancelled with the exception to circumstances beyond control to include sickness, court attendance, crisis CP situation.
9. Any cancelled sessions to be reconvened ASAP.

It has been agreed that sessions can be interrupted or re-arranged under the following circumstances:

Arrangements for any disagreements:

Date of Agreement: _____

Signed Post Holder: _____

Manager: _____

NB - This Agreement will be held on employee's file and a copy given to both parties

PERSONAL SUPERVISION AGENDA

<p>Supervisee Name:</p> <p>Supervisor Name:</p> <p>Team:</p> <p>Date:</p>

Support/Personal Considerations	Actions
Support/Personal Development Include: <ul style="list-style-type: none">• ILP• Training completed• Career progression	Actions

Practice/Professional Standards	Actions
Any other issues – e.g. H&S, DBS, Care Council Registration, Car documents, annual leave/flexi, lone working etc.	Actions

Signed Post holder:

Supervisor:

Date:

Date of next supervision:

CASE SUPERVISION AGENDA

Supervisee Name:

Supervisor Name:

Team:

Date:

1. Workload Management

- Number of CIN cases:
- Number of CP cases:
- Number of LAC cases:
- Number of Pre-Proceedings/In-Proceedings cases:
- Cases ready for transfer/closure:

2. Outstanding Actions

- Previous supervision Actions
- Audit Actions
- Social Workers Reminders

3. Statutory Requirements

- Are visits being undertaken within timescale?
- Are Child Care Plans being updated/reviewed, have they been shared?
- Are meetings recorded and within timescale, have they been shared?
- Have Parents/Carers/Child/Young Person's wishes/feelings been considered and how has this been evidenced? e.g. the Plans/Initial/Core Assessment, etc

CASE SUPERVISION ACTIONS

ACTIONS	TO BE COMPLETED BY

Please ensure that a copy of the Supervision Agenda and Actions are given to the Worker

Supervision Standards
(To be used in conjunction with NPTCYPS Supervision Policy)

APPENDIX 1

Standard 1		
Preparation for Supervision		
Criteria	Purpose	Timescales
The Supervisor and supervisee must ensure that formal supervision take place within timescales	<ul style="list-style-type: none"> To ensure accountability for work undertaken by the practitioner To ensure the effective management of practice, develop and support staff and promote the practitioners engagement with the organisation 	Every 28 days
The Supervisor and Supervisee complete the NPTCBC supervision agreement as part of the induction process	<ul style="list-style-type: none"> As part of the induction process, for all new staff and for those moving within the service must complete the supervision agreement, be provided with a copy of the supervision policy (shown how to access Interactive practice guide). 	During the first week for all new staff
Standard 2		
Supervision is arranged and conducted in such a way to encourage reflective practice and open discussion.		
Supervision is not subject to cancellation and is only postponed in exceptional circumstances.	<ul style="list-style-type: none"> Any postponed supervision session is reconvened at the earliest opportunity. 	Every 28 days
Supervision takes place in an environment which affords privacy and where arrangements have been made to avoid interruptions	<ul style="list-style-type: none"> Check whether there are likely to be any unavoidable interruptions To ensure that the supervisee can take time to reflect and discuss cases without interruption 	
Purpose of supervision	<ul style="list-style-type: none"> To ensure that children and their carers receive a quality service; To ensure implementation of policies and procedures; To improve internal communication; To assist in staff retention; lower rates of grievances, sickness and complaints; To promote clear communication between the organisation and the practitioner; To ensure that the practitioner has a manageable and appropriate workload 	

	<p>according to qualifications and experience.</p> <ul style="list-style-type: none"> • To value and review the practitioner’s work; • To ensure that the practitioner is clear and competent in his or her role and accountability • To assist the supervisee to understand the organisations plans and values, and how the supervisee contributes to ensuring children receive a quality service • Discuss and review work and practice issues, including workload • To identify specific training needs to ensure that the individual can carry out their role effectively. 	
<p><u>Responsibilities of the Supervisor</u></p> <p>Page 51</p>	<ul style="list-style-type: none"> • Start the session on time. • Confirm the agenda. Make sure the supervisee has had an opportunity to contribute to the agenda. • Start the session by asking the supervisee how they are in order to promote their health and wellbeing and to put measures in place if necessary. • Use good communication techniques for example open body language and good eye contact. • Listen and concentrate on what the person is saying without interruption. • Use open questions - what, why, who, where, when and how to explore ways of thinking creatively about a problem. Challenge where appropriate. • Be innovative in approach, acknowledge individuals learning style. • Provide constructive feedback ensure that you, praise, recognise achievements and encourage innovative ideas – when it is necessary, be constructively critical of practice offering alternative solution to interventions etc. • Discuss and review work and practice issues. If there are any conflicts and problems relating to work, assist in providing a solution wherever possible. • Note any areas of disagreement, ensuring that both points of view are recorded 	<p>Supervision sessions should take between 1 – 2 hours.</p>

	<ul style="list-style-type: none"> • Record the session by taking notes to then be transcribed onto the relevant template and individual child's file (SSIS). • Ensure that a copy of the supervision record is given to the supervisee. • At the end of each supervision session the supervisor and supervisee sign and date record. 	
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 52</p> <p>The Supervisee can expect</p>	<ul style="list-style-type: none"> • That the supervision session will commence on time • If the session needs to be rescheduled that arrangements will be put in place to ensure continued support • The supervision session will be reconvened as soon as possible • To receive effective and sensitive supervision • To be treated in an anti-discriminatory manner • To have their own feelings and opinions recognised • To disagree • To be listened to; • To improve team working; and • To increase transparency and openness • To learn from mistakes, to be unsure and to seek advice as part of the supervision process • That as part of the supervision process workload reviews will take place • To be briefed about changes relevant to service delivery, strategic plans and relevant policy and procedures • To understand the organisational values, where the organisation/setting is going and how they contribute to these; • To expect that supervision will constructively challenge thinking in order to ensure the development of the individuals practice • That the supervision process will be fair and without favour • Will address the supervisee's specific learning needs • There will be recognition from the supervisor and the organisation that the nature of the work sometimes generates powerful feelings and that the organisation will provide when appropriate additional support 	<p>Every 28 days</p>

	<ul style="list-style-type: none"> • That and disagreements will be resolved in a professional context 	
How and when the supervision agreement is to be reviewed	<ul style="list-style-type: none"> • According to the needs of the service, or • Reviewed in accordance with the Appraisal Policy, or • When job description changes 	Minimum timescale - 6 monthly intervals
Standard 3 Confidentiality		
How confidentiality is to be maintained	<ul style="list-style-type: none"> • All personal matters relating to the individual practitioner must be kept in accordance with Data Protection Act in a locked cabinet. • Case Management issues discussed as part of supervision is placed directly onto SSIS and is subject to NPTCBC policy and procedure relating to the recording of sensitive information (Data Protection Act). • Should information come to light during the course of supervision that calls into question the professional integrity of the practitioner, contrary to the Care Council for Wales Code of Practice, this must be shared with the Principal Officer. 	
Standard 4 Decisions and Action Points identified previous supervision sessions are reviewed and actioned		
How performance is measured	<ul style="list-style-type: none"> • Through reflection, analysis and evaluation of practice to ensure consistency of practice; • By agreeing and reviewing SMART (specific, measurable, achievable, realistic timely) goals and objectives as part of case management discussion; • By providing constructive feedback on work undertaken; • Ensuring that the supervisee fully understands their role and the role of others within the organisation 	Three monthly cycle- CIN, LAC,CP

	<ul style="list-style-type: none"> • Ensuring that supervision plays an active role in building the self-confidence of the supervisee; • Via completed actions as discussed at subsequent supervisions • Through the Quality Assurance Audit programme 	
How the principles of diversity (within the supervisor/ supervisee relationship and in service delivery) are to be handled.	<ul style="list-style-type: none"> • It is the responsibility of both the supervisor and supervisee to ensure that due consideration is given to relevant legislation both in respect of the individual work and service user. 	
Standard 5		
All Supervision Sessions should be recorded promptly, competently and stored properly		
All supervision notes relating directly to case management should be recorded during supervision.	<ul style="list-style-type: none"> • A photocopy of the handwritten notes should be made available to the supervisee at the end of the supervision session, to avoid delay in taking forward action points. These should be kept until such time as the typed notes have been placed onto SSIS, checking that these represent an accurate record. 	
Records relating to process, including personal, practice, training should be completed onto the relevant proforma and kept with the Practitioners file for future reference	<ul style="list-style-type: none"> • Supervision records relating to personnel issues, as well as training should be signed by both the supervisor and supervisee at the end of the session • A copy should be retained by the Supervisor and placed in the supervisees file and retained for auditing purposes. • Case supervision notes to be on the system within 5 working days 	5 working days
Records demonstrate a knowledge and understanding of diversity	<ul style="list-style-type: none"> • To ensure that at each supervision session consideration is given to all areas of diversity, including practice and in the supervisory relationship 	

Standard 6		
Supervisors and Supervisees are trained to carry out their role		
Induction of staff	<ul style="list-style-type: none"> • Induction of all staff addresses the supervision policy and standards • The Individual Learning Plan is completed with each practitioner as part of the induction process and sent to the Training Department, a copy is kept on the practitioners file for reference. • All new appointees are subject to a period of probation – progress is monitored through the supervision process Tracked at 8 weeks,16 weeks and 24 weeks 	<p>Within 5 working days</p> <p>Probation period 6 months</p>
<p>All Supervisors are trained to carry out their role</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 55</p>	<ul style="list-style-type: none"> • Training is provided to all supervisors within 6 months of taking up their first supervisory role • Refresher training is available to supervisors, through peer discussions, action learning sets, to consolidate skills and is then discussed in the yearly appraisal • Supervisors receive regular feedback from their managers regarding their performance 	<p>Within 6 months</p> <p>Yearly Appraisal</p>
Standard 7		
The supervisor ensures that the management (competent, accountable performance) function is met.		
Supervision meets this function by ensuring that Policy and procedures, regulations are understood	<ul style="list-style-type: none"> • Agency policy and procedures are understood and adhered to • The supervisee’s workload is managed and priorities are set. • The quality of the supervisee’s performance (including anti discriminatory practice) is measured through establish audit processes 	
Case Management	<ul style="list-style-type: none"> • Work is allocated according to the experience and skills of the practitioner. • Children’s Plans are devised, implemented and reviewed as part of the supervision process • Advice/ consultations on cases given outside formal supervision are recorded and reviewed. • Risks are clearly identified, recorded and countered. 	

Standard 8		
The supervisor ensures that the continuing professional development function is met		
The organisations responsibility to develop the workforce	<ul style="list-style-type: none"> • Discuss and evaluate training and personal development needs. This may include feedback that the practitioner needs. • Help practitioners to develop their professional competence in line with the needs of the service • Enable practitioners to meet their post qualifying and training requirements • Enable practitioners to relate theory and research to practice • Develop skills and knowledge, through reflective practice. • Providing feedback on performance 	<p>Yearly appraisal</p> <p>At each supervision session</p>
Standard 9		
The supervisor ensures the support function is met		
Supervision addresses issues pertaining to case management and personal issues likely to impact on work	<ul style="list-style-type: none"> • Enable the practitioner to cope with the stresses that the work entails. • Offers advice on help available to cope with stress and personal issues • Create a safe climate for workers to examine their practice • Monitor the overall functioning of the practitioner in relation to team dynamics and relationships 	At each supervision session
How will differences in working relationships be managed	<ul style="list-style-type: none"> • Should there be a difference of opinion between the supervisor and supervisee. In the first instance, resolution should be sought through dialogue to remedy differences • Arbitrating between team members when required • If this is not possible then advice should be sought from the relevant PO and if considered necessary HR 	

Standard 10		
The supervisor ensures the engagement of the individual with the organisation are met		
Communication	<ul style="list-style-type: none"> • Communicating effectively with practitioners about organisational changes and initiatives • Consulting with practitioners and feeding back through the management group on how organisational policies and practice is perceived • Ensuring that practitioners develop positive working relationships with partner agencies and other teams 	At each supervision session
Standard 11		
Promotion of diversity in all aspects of work with children and families		
Supervision promotes a commitment to diversity in all aspects of work – Children and families are entitled to the same quality of service irrespective of ethnicity, religion, language, gender, age, disability or sexual orientation	<ul style="list-style-type: none"> • All assessments, plans and interventions address the implications of the child’s ethnicity etc. • The potential vulnerabilities of specific children e.g. disabled, sensory impairment are identified and relevant support put in place • Discrimination that children may experience is acknowledged and so far as is possible addressed through appropriate signposting or service provision • There is effective communication with all children (including children for whom English is a second language or who are disabled) • All children receive appropriate level of protection • Children and families receive appropriate services irrespective of ethnicity etc. 	At each supervision session
Standard 12		
Managers assure the quality of supervision		
Auditing of supervision	<ul style="list-style-type: none"> • Supervision records to be audited via information sent out to Team Managers by HR • To ensure that supervision records relating to open cases are placed on SSIS • To review the quality of supervision, including decision making, actions and outcomes for children 	Weekly via email Via Audit programme

Personal Development Review (PDR) - All Employees

Guidance Notes

The aim of this Council-wide **Personal Development Review (PDR) process** is to ensure that the following questions are answered from the perspective of each employee:

1. What is expected from me in terms of the work I do, and how I do it?
2. How well am I doing?
3. Do I need to do anything different, and what support is to be provided by my manager?

The **purpose of a PDR meeting** is to set aside time at least once each year for an open and honest discussion between an employee and his/her manager about:

- i) **For the last 12 months** - the employee's work performance, the extent to which the employee has carried out his/her role in accordance with the Council's Operating Principles and NPT People Charter (see pages 3 and 4) and a review of the effectiveness of the learning and development which has been undertaken by the employee;
- ii) **Now** - the employee's work / career aspirations and any work-related problems;
- iii) **For the next 12 months** - work priorities and any planned job or service-related changes;
- iv) **For the next 12 months** - the creation of an Individual Learning Plan (ILP) which will set out what the employee needs to do, with support from his/her manager, to further develop his/her knowledge, skills and capabilities (including to meet the requirements set out in the Council's Operating Principles and NPT People Charter).

Ideally, the **annual PDR cycle** will coincide with the Council's financial year, ie 1st April to 31st March. However, because Council priorities are generally agreed at Elected Member / Chief Executive / Director level, and then cascaded to senior managers and other employee groups, some employees may not have their PDR meetings until the Summer period. Where this happens, managers are requested please to ensure that all PDR meetings are completed by no later than 31st August each year.

Note for Manager:

This **PDR pro-forma** is not intended to be prescriptive. Managers are welcome to amend the document to include any variations which may be specific to individual services.

If you already use a PDR pro-forma which meets the needs of your service, e.g. for a large number of non-office based frontline staff, it may be possible to continue with your current arrangement mostly unchanged, but please take this opportunity to review what you are doing at present with the requirements of this new Council-wide PDR pro-forma.

Please contact Lynne Doyle, Corporate Learning, Training and Development Manager, for further information or advice about this PDR process, including tailoring this framework document to suit the needs of individual service areas.

NPT Operating Principles

- The **purpose** of our services is to deliver **what matters** to our customers. The role of our support services is to help frontline staff to deliver what matters to the people who use our services
- Our systems will be designed by the staff working in them, to deliver what our customers want, in the most efficient, easiest way we can
- We will identify our customers by understanding who the system was set up to serve
- We will design our systems so it is easy for our customers to access the service they need
- Managers will spend time with staff in the workplace, to understand how the systems work
- Managers will remove obstacles that prevent staff doing what matters for our customers
- Our measures of performance will be designed to tell us how well we are meeting the needs of our customers. Managers will use these measures to investigate and understand why performance varies and then act on the system to improve performance
- We want everyone to challenge any work that is not adding value
- We will understand the nature of demand on our services and take action to remove any that is preventable. We want to get things right first time
- Decisions will be based on data, knowledge and evidence
- We trust our staff and will encourage everyone to take responsibility to do what matters for our customers
- Managers will encourage and support staff to identify how we can improve and then to make the changes
- Managers will work with their staff to manage the risks associated with change. This may mean changing our audit, financial and other rules and policies and procedures where necessary to make sure that they are proportionate to risk

NPT People Charter

This **People Charter** sets out what the Council expects from everyone who works for the Council and what they, in return can expect from the Council.

The Council will:

- Promote a culture of pride in working for a high performing Council
- Value your contribution and celebrate success
- Act with trust, integrity, respect, openness and transparency
- Value diversity and promote fairness and equality of opportunity
- Keep you informed and consult you in a meaningful way about Council business decisions which affect you
- Promote decision-making based on data, knowledge and evidence
- Engage and involve you in designing new ways of working
- Support you through change
- Promote your wellbeing within a healthy and safe workplace

Our leaders and managers will:

- Clarify your role and duties within the Council, along with acceptable standards of performance, conduct and behaviour
- Continuously develop the skills and experience needed to effectively lead, manage and develop you and your colleagues
- Offer encouragement and support to help you perform to the best of your ability and to support you to maximise your attendance
- Seek to resolve any potential workplace conflict informally and at an early stage through listening, understanding and a mutually agreed outcome, with the aim of moving to formal procedures only where necessary
- Spend time with you in the workplace to understand how systems work and to take responsibility for removing obstacles that prevent you from “doing what matters” for our customers
- Promote and support team working, sometimes as a leader and sometimes as a team member
- Ensure that you have an annual performance appraisal and development review which establishes clear work objectives and support for you and your team
- Provide you with regular and constructive feedback about how you and your team are performing
- Request and properly consider your ideas about improved ways of working
- Take into account the potential impact on you and your team of all work-related changes which may be contemplated
- Consult you and the trade unions about workforce matters in a meaningful way and at the earliest opportunity

We ask all employees to:

- Take pride in being an employee of Neath Port Talbot Council and to actively promote its reputation at all times by putting your customer first and delivering “what matters” to them
- Take time to understand how you personally, and your team, contribute to the achievement of the Council’s priorities
- Demonstrate a “can do” approach
- Continually improve your own performance, and the services you deliver
- Make the best of the opportunities which are available to learn and develop
- Be a team player, building effective working relationships and treating others with dignity and respect
- Raise any concerns you have at an early stage
- Maximise your attendance at work
- Be open to new ways of working, including putting forward your own ideas for change and improvement
- Constructively challenge any work which is not adding value
- Be aware of your role in the safeguarding of vulnerable children, young people and adults because this is a role for every employee in our workforce
- Ensuring that you understand and comply with the Council’s Employee Code of Conduct and any other codes of competence or standards which may apply to your job



Personal Development Review (PDR) Form - All Employees

Employee (name):	
Job Title:	
Payroll Number:	
Section / Team / Service Area:	
Manager (name):	
Job Title:	

Start of PDR year:	
Review meeting:	<p><i>Date:</i></p> <p><i>Time:</i></p> <p><i>Location:</i></p>

Contents Agreed & Signed:

Employee:	Date:
Manager:	Date:
Countersignatory: <i>(Managers Manager)</i>	Date:

IMPORTANT: Manager to ensure that notes of the matters discussed and agreed at the PDR meeting are recorded in this document and signed off above by all concerned.

Note For All Employees:

Please complete Parts 1 to 4, Part 6 and Part 8 before your PDR meeting takes place.



PART 1 - Job Description

Applicable to all employees:

Do the **current duties and responsibilities** of the post-holder match the **agreed Job Description**?

PART 2 - Employee's Role within the Council

To be completed by all employees: *Please give your understanding*

What are the Council's main objectives / priorities?

What are the main objectives / priorities for your team?

How are you personally involved in contributing to your team's objectives / priorities?

PART 3 - Last 12 Months – Work Priorities

To be completed by all employees:

Please set out below the details of **your work priorities** over the last 12 months, along with **your assessment** of the progress you have made in carrying out these work priorities. Please also include any action points which may have arisen as a result of any induction, probationary or supervision meetings which have taken place over the last 12 months.

PART 4 - Workplace Communications and Team Working

To be completed by all employees:

Is your personal contribution as an employee to the performance of the Council recognised and valued? Please give any examples of how you receive feedback on your workplace performance from your manager?

Is there anything you would like your manager to do to assist you to carry out your job more effectively?

Is there anything you would like your work colleagues to do to assist you to carry out your job more effectively?

Are there any other matters which you wish to discuss with your manager which are not referred to elsewhere in this document? Please include details here.

PART 5 - Manager's End of Year Commentary For The Last 12 Months

Work Priorities - what has gone well in terms of the employee achieving his/her work priorities? What has not gone so well, if anything? Does anything need to be done differently by the employee over the next 12 months?

Personal Behaviours - has the employee demonstrated the required behaviours over the last 12 months as set out in the **Council's Operating Principles** and **NPT People Charter**? What needs to be prioritised for improvement over the next 12 months?

PART 6 - Management Responsibilities

To be completed ONLY by employees who have management responsibilities:

What contribution have you made to the development of the Business Plan/s for your service area/s for the next 12 months? If none, please agree with your manager how this will happen in future.

How do you ensure that you agree work priorities with the employees in your team in a way which supports the Business Plan/s for your service area/s?

How do you (a) identify the different learning and development needs of the employees in your team and (b) ensure that everyone has equal access to the support they need?

How do you communicate, and how often, with the employees within your team? How can such communications be improved in future?

What have you done personally over the last 12 months to champion the Council's Operating Principles and the behaviours set out in the NPT People Charter?

PART 7 - Next 12 Months - Work Priorities

Notes for Manager:

Please set out below the details of the work priorities which you have identified need to be carried out by the employee over the next 12 months. Please include any key actions which have arisen as a result of any induction, probationary or supervision meetings which have taken place over the last 12 months.

Please set **SMART** work priorities, ie they are Specific; Measurable; Achievable; Realistic, and Timely.

1. **Mandatory for all employees** - personal behaviour to be displayed in accordance with **NPT Operating Principles** and **NPT People Charter**
- 2.

PART 8 - Last 12 Months - Personal Development

To be completed by all employees:

Please set out below the training and development activities which you have undertaken during the last 12 months and how these have assisted you to better carry out your duties and responsibilities.

PART 9 - Next 12 Months - Individual Learning Plan (ILP)

To be completed jointly by the manager and the employee

Consideration should be given to job-related personal development needs, any future career plans and potential succession planning arrangements. Please also include any learning needed as part of any formal course of study being undertaken, or for CPD (Continuous Professional Development) purposes.

Individual Learning Plans (ILPs) are **not** just about identifying training needs and attending training courses. While training courses will often form part of an employee's ILP, other learning activities such as those listed below can be just as, or even more, important:

• Being coaching / mentored	• Job Enrichment
• Action Learning	• Project work - special assignments
• E-learning	• Involvement in other work areas
• Observing and analysing what others do	• Guided reading and research

INDIVIDUAL LEARNING PLAN FOR NEXT 12 MONTHS

<p>Employee (name): Job Title: Payroll Number: Section / Team / Service Area:</p> <p>Manager (name): Job Title: Date:</p>	
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Learning, training and/or other development needs identified	Action/s to be taken by whom, and when?
<p>Details of any formal qualification course / study being followed:</p>	

Please return this Individual Learning Plan (single page only) - when completed and agreed - to the HR Training and Development team: training.admin@npt.gov.uk

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NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD

24th September 2015

REPORT OF THE HEAD OF BUSINESS STRATEGY AND PUBLIC PROTECTION – A. THOMAS

SECTION B – MATTER FOR INFORMATION

WARDS AFFECTED: ALL

THE SOCIAL SERVICES AND WELL-BEING (WALES) ACT 2014

Purpose of Report

To inform Members of the Social Services and Well-Being (Wales) Act 2014, to be implemented from April 2016.

Background

The Social Services and Well-Being (Wales) Act 2014 received Royal Assent and became law in May 2014.

The Act provides the statutory framework to deliver Welsh Government's commitment to integrate social services to support people of all ages as part of families and communities.

The intention is to transform the way social services are delivered by promoting people's independence and giving them a stronger voice and control. By integrating and simplifying the law this will lead to greater consistency, promoting equality, improved quality and enhanced access arrangements. Further, given the changes in demography the Act encourages an emphasis on prevention and early intervention.

Legal Framework:

The new legal framework has 3 parts:

- **The Social Services and Well-being (Wales) Act:** One law setting out the powers and duties for local authorities and other bodies
- **Regulations:** This is secondary legislation, where the Act needs more detail
- **Codes of Practice:** This is guidance with the force of law, clarifying how people and organisations must work within the new framework

Content of the Act

The Act is made up of 11 Parts:

- Part 1 – Introduction
- Part 2 - General Functions
- Part 3 - Assessing the Needs of Individuals
- Part 4 - Meeting Needs
- Part 5 - Charging and Financial Assessment
- Part 6 - Looked After and Accommodated Children
- Part 7 – Safeguarding
- Part 8 - Social Services Functions
- Part 9 - Co-operation and Partnership
- Part 10 - Complaints, Representations & Advocacy Services
- Part 11 - Miscellaneous and General

Key Principles contained within the Act:

The key principles contained within the Act are:-

- Voice and control
- Prevention and early intervention
- Well-being
- Co-production
- Multi Agency

with the focus being on ‘outcomes’ for people ie. adults, children and carers.

Aim of the Act:

- Engage with and empower citizens
- Promote independence and well-being
- Give people who receive support and their carers control over their lives and the support they receive to maximise independence.

New duties of the Act:

- Prioritise improved well-being of citizens and greater access to support
- Work across service boundaries in partnership
- Provide Adult at Risk with legal protection
- Reduce outdated bureaucratic systems in respect of assessment

The Act affords enhanced duties on local authorities and Local Health Boards to take steps to prevent and reduce the needs for care and support of people in their area.

These 'preventative' services would be available potentially to the population of 3 million in Wales.

It will further strengthen collaboration and provide a framework for integration of key services and place new duties on LA's LHB's and other public bodies to improve the well-being of people with care and support needs.

Impact on Partner Organisations

The Local Authority will be required to further promote the integration of care and support with health and health related provision with a view to improving well-being, prevention and raising quality. Partnership arrangements will be presented through legislation and include:- Health, the Independent Sector, Voluntary Sector and others eg. Community Services, Support Groups, Housing Benefits and Leisure Services.

Impact on day to day Working

The Act places great emphasis on a cultural shift towards minimum appropriate intervention where there is less emphasis on prescribed ways of doing things and a shift towards intervening earlier in the lives of people and promoting prevention strategies. Further, the Act aims to help people achieve their desired outcomes rather than assessing suitability for services.

Current Position

The regulations, codes of practice and statutory guidance that underpin the Act have been developed and consulted on in two phases.

The first phase of consultation on Parts 2, 3, 4, 7 & 11 have concluded.
The second phase of consultations on the Act covering Parts 5, 6, 9 & 10
is now open and will close on 31st July 2015.

Wards Affected

All

Officer Contact

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