Report produced in	September		December		March	June	
To show status for	Q1 Apr-Jun		Q2 Jul-Sept		Q3 Oct- Dec	Q4 Jan- Mar	
Improving Independent Living for Older People	Green - Good	*	Green - Good	¥			
2. Ensuring people have the right social services to meet their needs	Amber- Acceptable		Green - Good	*			
6. Ensuring the best educational outcomes for children	Green - Good	*	Green Star - Excellent	**			
8. Improving outcomes for youth justice	Amber- Acceptable		Amber- Acceptable				
OVERALL	Green - Good	★	Green - Good	4	I		

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

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

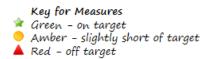
IP1 Improving independent living for older people

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

Overall Judgement

	Sep 2017									
Actual Performance Comments										
Gı	reen - Good		In 2017/18 this is made up of 3 measures, 2 relate to reablement and a local measure for adults over 75 requesting advice and assistance once in a 6 month period.							
			All of these are annual measures so won't be reported until 31st March 2018							

Measures



	Actual (YTD)	Target (YTD)	Performance (YTD)	Actual 1 year ago (YTD)	DoT 1 year ago (YTD)	Wales Average (YTD)	Perf. v Wales Average (YTD)	Period Performance
CCAS/L/026 OT Assessments & Reviews % (IP1) (M)	91.1%	85.0%	*	91.6%	**	?	!	

Key for measure RAG status

▲ Red triangle - off target (over 15% away)

(15%tolerance)

Direction of Travel - DoT

Green tick - performance has improved

Red cross - performance has declined

performance remains the same

Annual Measures

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

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

Key for measure RAG status



? Data missing/ not available

- Amber circle slightly short of target (15%tolerance)
- No target set

Red triangle - off target (over 15% away)

Direction of Travel - DoT



● Green tick - performance has improved



Red cross - performance has declined

◆ performance remains the same

Key for Actions

O Amber - Deviation from Plan

A Red - Action is of concern

		Sep 2017	
	Performance	IP Progress Update	IP Activity Planned
IP I.I To deliver an integrated assessment process for older people	*	a new Act compliant Care & Support plan	Newport continues to work regionally with the Welsh Government to develop a new outcomes reporting framework. Since the inception of the Social Services & Well Being Act the annual reporting framework has been evaluated and Welsh Government agree that changes are required to make it more meaningful. A new set of measures will be developed for implementation in 2019/20.
☑ IP 1.2 To roll out the integrated pathway for older people	ŵ		The Strategy & Partnership Manager will take over responsibility for managing the interface between Health and Social Services in relation to the Older Persons Pathway as part of the Care Closer to Home workstream. Work will continue to develop the pathway as part of the wider preventions agenda.
✓ IP 1.3 Restructure the operational adult social services teams on the NCN footprints.	ŵ	·	Workflow processes continue to develop in conjunction with the implementation of the new WCCIS data capture system

Key for measure RAG status

? Data missing/ not available

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

No target set

Red triangle - off target (over 15% away)

Direction of Travel - DoT



€ Green tick - performance has improved



Red cross - performance has declined

→ performance remains the same

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

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

Overall Judgement

Sep 2017									
Actual	Performance	Comments							
Green - Good	*	Adult Protection which is currently 98.2% for quarter 2 against a target of 90% therefore demonstrating strong performance.							
		DTOC is currently 2.8 against a target of 1.75 (low values are good) There are several factors that have impacted on DTOC and can be attributed to the increase this quarter: ability to respond to the volume of referrals within the hospital team and to have a robust workflow pathway has impacted on Social Work capacity. This has resulted in delays in allocation of cases. The fluctuating domiciliary market has meant that over the recent months key provider agencies have closed. The impact therefore is that the existing agencies have had to absorb ongoing cases which reduces their capacity to take on new cases. This has resulted in delays to individuals							
		being discharged with home care more quickly. There have been some challenges with getting residential providers to respond to requests to assess individuals for placement quickly which has impacted on DTOC. There is a current review of the hospital discharge pathway to address some of the workflow issues to release capacity to manage what is Social Services work. We are also working with our commissioning and contracts team to see how we can improve access to domiciliary care. The In Reach project is also supporting a more streamlined approach to manage hospital discharge cases.							

Key for measure RAG status

- Green star on target
- Amber circle slightly short of target (15%tolerance)
- A Red triangle off target (over 15% away)

- ? Data missing/ not available
- No target set

Direction of Travel - DoT

- € Green tick performance has improved
- Red cross performance has declined
- ◆ performance remains the same

Measures

Key for Measures

Green - on target

Muber - slightly short of target

Red - off target

	Actual (YTD)	Target (YTD)	Performance (YTD)	Actual 1 year ago (YTD)	DoT 1 year ago (YTD)	Wales Average (YTD)	Perf. v Wales Average (YTD)	Period Performance
ACS/18 The percentage of adult protection enquiries completed within 7 days (SSPM, IP2) (M)	99.1%	90.0%	*	96.9%	v	80.1%	*	
ACS/19 PAM/025 Delayed Transfers of Care (SSPM, PAM, IP2, SP) # (M)	2.80	1.75	A	0.94	**	1.40	A	
ACS/L/24 Number of assessments of need for support for carers (IP2) (Q)	94.00	45.00	*	63.00	v	?	· !	
CCAS/L/027 Number of integrated assessments completed per month (IP2) (M)	603	300	*	763	•**	?	Ŀ	

Key for measure RAG status



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

Red triangle - off target (over 15% away)

? Data missing/ not available

No target set

Direction of Travel - DoT



Green tick - performance has improved



Red cross - performance has declined



→ performance remains the same

Key for Actions

Amber - Deviation from Plan

Red - Action is of concern

		Sep 2017	
	Performance	IP Progress Update	IP Activity Planned
☑ IP 2.1 Establish the pathway for adult social services across health and social care	•	New risks to the project, not present in the original scope have been identified within the technical workstream. These risks could negatively impact the implementation deadline and have been caused by the early and unexpected termination of the South East Wales Consortium (SEWC). The SRS are assessing the technical gap to inform the resources that will be needed to ensure successful implementation of the project. Other project workstreams are progressing well - system build/training/communications are on target but the technical risks will impact these areas of work. For example, if the technical issues are not rectified then the training will need to be re-scheduled and could result in a reduction in the availability of trainers who have committed to current timescales.	The project team are working collaboratively to secure additional resource to mitigate the risks created by the early termination of the Consortium. Discussions have taken place with ABUHB. Caerphilly CBC and RCT to identify opportunities to share resources.
IP 2.2 Restructure the operational adult social services teams.	*	NCN based teams are now well established.	Completed - Ongoing monitoring of demand and capacity
✓ IP 2.3 Develop and implement the integrated assessment tools	☆	93% of adults are now in receipt of a new Act compliant Care & Support Plan (CASP)	ECO continues to operate on a weekly basis and monitors the equality, consistency and outcomes of assessments and service allocations. There is ongoing dialogue with the Welsh Government to determine a revised set of Pl's and outcome framework for 2018/19. Regional meetings have taken place and more are scheduled during the 3rd quarter of 2017/18

Key for measure RAG status

? Data missing/ not available

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

No target set

Red triangle - off target (over 15% away)

Direction of Travel - DoT

Green tick - performance has improved



Red cross - performance has declined

→ performance remains the same

		Sep 2017	1		
	Performance	IP Progress Update	IP Activity Planned		
✓ IP 2.4 Review and recommission services as necessary		During this quarter the managed banking service for the Direct Payments service has been re-tendered and 5 bids were received. The Independent Living Service (ILS) framework has also been established and a range of providers offering better choice for citizens is in place. The Circles day service that was due to be re-commissioned as a separate lot of the ILS tender will end as the venue costs substantially increased during the tender process and no bidder was able to offer a viable alternative. The attendees of this service can be successfully transferred to the ILS with better options and choice for their future day service provision. The Regional drug and alcohol specification has been developed in collaboration with partner Authorities and the tender will be published in the next quarter. The Regional work around pooled budgets is ongoing with work focussed around establishing a common approach to fee negotiations, contract monitoring and contract documentation. A finance workstream is developing a shadow budget system which will allow partner spend to be recorded and tracked.	The regional drug and alcohol framework will be awarded in quarte 3. This quarter requires service planning in relation to winter pressure including communications with providers to clarify capacity and discussions with social work teams to keep them informed of market pressures. Planning for 2018/19 fee negotiations in line with projected budgets and demands.		
✓ IP 2.5 Review and develop our systems and processes	•	Additional resources have been identified from adults and children's services to assist with the WCCIS project and the system build and business processes continue to develop in line with project timescales Newport continues to engage regionally and nationally with Local Authorities and Health. Newport reps attended the first Regional Implementation Board hosted by ABUHB in September.	New risks to the WCCIS project have emerged due to the early termination of the South East Wales Consortium who were offerin technical support to the project. The project team are in the process of identifying and securing additional resource and working with partners including Local Authorities, ABUHB and SRS		
	? Da	ata missing/ not available Green tick - performanc	e has improved		
 Amber circle - slightly short of tar (15%tolerance) 	get ! No	o target set Red cross - performance performance remains the			
Red triangle - off target (over 15% away)		up arrows indicate that high down arrows indicate low v			

	Sep 2017							
	Performance	IP Progress Update	IP Activity Planned					
IP 2.6 Undertake a Questionnaire of people who have a care and support plan	*	Welsh Government have confirmed that all Local Authorities must distribute the same questionnaire this year to adults and children with a care and support plan, carers and parents. Due to lobbying by all the Welsh Authorities, the Welsh Government have conceded that the timeframe and methodology can be modified to enable better co-ordination and maximise opportunities for citizens to submit responses. The questionnaires are being sent out to adults, an online version will be available and children will be surveyed in a variety of ways i.e. social workers conducting reviews and Independent Reviewing Officers for Looked After Children	Questionnaires to be distributed by post, to staff and online. The deadline fur submission is the end of February					

Key for measure RAG status



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

Red triangle - off target (over 15% away)

Direction of Travel - DoT



? Data missing/ not available

No target set

Green tick - performance has improved



Red cross - performance has declined

→ performance remains the same

IP6 Ensuring the best educational outcomes for children

Lead Cabinet Member	Cabinet Member for Education and Skills
Lead Officer	Chief Education Officer

Overall Judgement

Sep 2017							
Actual	Actual Performance Comments						
Green Star - Excellent	≠ *	All actions for this objective are on track. Performance outcomes for KS4 are not validated at this stage.					

Measures

Key for Measures 🛊 Green – on target Amber - slightly short of target A Red - off target

	Actual (YTD)	Target (YTD)	(VTD)	Actual 1 year ago (YTD)	DoT 1 year ago (YTD)	Wales Average (YTD)	Perf. v Wales Average (YTD)	Period Performance
PAM/005 (EDU/004) % pupils achieving the expected CSI outcome at the end of KS3 (PAM, IP6) (A)	84.9%	84.4%	*	83.4%	v	86.1%	•	

Key for measure RAG status

Green star - on target

? Data missing/ not available

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

No target set

A Red triangle - off target (over 15% away)

Direction of Travel - DoT

Green tick - performance has improved

Red cross - performance has declined

performance remains the same

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

	Target 2017/18	Actual 2016/17	Wales Average (YTD)
EDU/010b) (N) Pupils fixed excl'ns secondary days #	1,527	1,607	?
EDU/L/061 Percentage of FSM pupils achieving Level 2 Inclusive (A) (IP6)	36.50	36.33	?
EDU/L/062 Pupils achieving Level 2 Maths (A) (IP6)	66.60	63.73	?
EDU/L/063 Pupils achieving Level 2 English (A) (IP6)	68.35	68.49	?
PAM/006 (EDU/017) Pupils achieving level 2 threshold inc English & Maths % (PAM, IP6) (A)	60.0%	58.4%	58.3%
PAM/007 (EDU/016a) Attendance Primary Year-end % (PAM, IP6) (A)	94.6%	94.5%	95.0%
PAM/008 (EDU/016b) Attendance Secondary Year-end % (PAM, IP6) (A)	93.4%	93.3%	93.9%

Key for measure RAG status

Green star - on target

? Data missing/ not available

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

No target set

A Red triangle - off target (over 15% away)

Direction of Travel - DoT



Green tick - performance has improved



Red cross - performance has declined

performance remains the same

Key for Actions

Amber - Deviation from Plan

Red - Action is of concern

		Sep 2017	
	Performance	IP Progress Update	IP Activity Planned
IP 6.1 Improve the number of pupils achieving the expected level in the Key Stage 3 Core Subject Ind	*	The LA considered validated Key Stage 3 outcomes across the local authority. The LA worked with the EAS and each secondary school to consider and analyse (unverified) Key Stage 4 data. The LA and EAS have considered impact reports and next steps linked to actions set out within the EAS Business Plan.	Attainment targets for each school will be set in collaboration with the EAS. The school risk register will be updated taking into consideration recent attainment data.
☑ IP 6.2 Improve Primary & Secondary Attendance	*	Education Services has work with Gwent Police to organise truancy sweeps during the academic year 2017/18. Suggested individual school attendance targets for the academic year 2017/18 were developed and shared with schools. Welfare visits for children and young people who are Elective Home Educated were completed during Summer 2017. Results of the annual 'School Attendance Survey' were analysed and used to inform training and support offered during the academic year 2017/18.	The first truancy sweep of the academic year 2017/18 will take place in October 2017 as part of Operation Bang. School Governor training on school attendance will take place in November 2017. The results of the School Attendance Forum will be shared at the Attendance Forum in October. A revised media and communication strategy will be developed and launched to promote school attendance.
☑ IP 6.3 Reduce pupil exclusions	rich (A head teacher meeting has included a consultation on the development of a primary school managed move protocol. Half termly internal meetings have taken place to review exclusions and attendance to QA what actions officers are taking to address the issue. Exclusions information has been shared with the EAS and Every Child Group. Regional Exclusion protocol to be finalised and Step 1 /Step 2 process has been drafted in line with the current attendance protocol to address schools with unacceptable levels of exclusion. The PRU exclusions has been monitored monthly by CIA Behaviour and Challenge Adviser.	A primary school managed move protocol will be drafted and provided to schools for consultation. A review of the Learning Development Centre based at St. Julian's Comprehensive will commence during the latter part of the autumn term to ensure that provision is meeting the current need The Principal Educational Psychologist will be overseeing the new way of working within the PRU and half termly meetings of the Inclusion Team will monitor progress

Key for measure RAG status

? Data missing/ not available

Amber circle - slightly short of target

No target set

- (15%tolerance)
- Red triangle off target (over 15% away)

Direction of Travel - DoT

Green tick - performance has improved



Red cross - performance has declined

→ performance remains the same

IP8 Improving outcomes for youth justice

Lead Cabinet Member Cabinet Member for Social Services Lead Officer Head of Children and Family Services

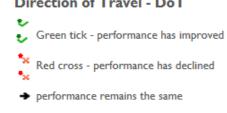
Overall Judgement

Sep 2017							
Actual	Performance	Comments					
Amber - Acceptable		As previously reported, the YOS continues all it can to reduce First Time Entrants and are satisfied it is doing that. Similarly with regards to ETE, the YOS is working hard with partners to ensure young people are at least offered the appropriate levels of ETE and to support those young people to improve attendance as we consistently do.					
		The substance misuse figure relate to one child where the target was not met, hence this is distorting the overall performance in this area. The YOS continues to monitor each of these areas and strive for improvement.					

Key for measure RAG status



Direction of Travel - DoT



Measures

Key for Measures

🛊 Green – on target

Amber - slightly short of target

A Red - off target

	Actual (YTD)	Target (YTD)	Performance (YTD)	Actual 1 year ago (YTD)	DoT 1 year ago (YTD)	Wales Average (YTD)	Perf. v Wales Averag (YTD)	e Period Performance
YJ/L/13 Number of first time entrants into youth justice system (M) (IP8)	46	39	A	19	*8	1	? !	 FTE's significantly decreased in Q2 - in line with overall decrease in the number young people coming through the system. 7 of the 15 FTE had previous prevention intervention, whilst the other 8 were too serious to be diverted from Court or Bureau. September we had the overall lowest number of FTE's year to date
YJ/L/14 Number of young people sentenced to custody (M) (IP8)	5	12	*	4	*x	1	? !	
YJ/L/18 Out of court disposals % (Q) (IP8h)	20%	30%	*	26%	v	1	? !	
YJ/L/19 % young people who reoffend in 12 months (Q) (IP8i)	52.9%	30.0%	A	42.2%	***		?!	 Despite the cohort increasing by 4 young people, the number of young people re-offending has increased by 2, hence no real change in the percentage of re- offending. 30% of these children were looked after, hence have very complex needs. One order was unworkable due to the young person's complexities and vulnerabilities. This order was revoked but she subsequently re-offended as an adult. There were a number of young people who refused to engage within this cohort.
								On a national basis, re-offending rates (albeit that this information based on historic cohorts of 2 years ago) is increasing, with smaller cohorts and more complex and challenging young people. In terms of a national basis, over re-offending rate is in the middle range of all welsh local authorities. The targeted policing Operation Jewel did impact on this re-offending figure.

Key for measure RAG status

- ? Data missing/ not available
- Amber circle slightly short of target (15%tolerance)
- No target set

Red triangle - off target (over 15% away)

Direction of Travel - DoT



Green tick - performance has improved



Red cross - performance has declined



→ performance remains the same

Key for Actions

O Amber - Deviation from Plan

Red - Action is of concern

		Sep 20	017	
	Performance	IP Progress Update	IP Activity Planned	
☑ IP 8.1 Reduction in first time entrants	•	First Time Entrants (FTE's) significantly decreased in Q2 - in line with overall decrease in the number young people coming through the system. 7 of the 15 FTE's had previous prevention intervention, whilst the other 8 were too serious to be diverted from Court or Bureau. September we had the overall lowest number of FTE's year to date	espite a fall in motoring offences, which were significant FTE's in Q1, e are still in discussions with the police around developing a Gwent ide diversion for these offences. This is likely to happen in the new nancial year, if at all.	
☑ IP 8.2 Reduction in the use of youth custody	*	in relation to breach of alternative to custody programmes, indicating that viable alternatives had been proposed and	Youth Justice Board (YJB) has not confirmed as of yet, what support will be available and when. It is likely that the YJB will focus on risk management as a priority rather than custody as we have a very high proportion of young people assessed as proposing significant harm to others and/or themselves.	
IP 8.3 Access to Education, Training and Employment	•	This relates to 2 young people, not in the requisite hours. One of whom, appears within the custody cohort for this quarter also and is a looked after child. All of the provision referenced in Q1 still applies.	The Education, Training and Employment (ETE) working continues to meet on a bi-monthly basis and analyses all those cases where young people do not meet their target of ETE provision. This group reports directly to the YOS Management board.	
IP 8.4 Access to timely mental health assessment and treatment	*	No issues, continue as before	Continue as before	

Key for measure RAG status

Green star - on target

? Data missing/ not available

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

No target set

Red triangle - off target (over 15% away)

Direction of Travel - DoT

Green tick - performance has improved



Red cross - performance has declined

→ performance remains the same

		Sep 2	017		
	Performance	IP Progress Update	IP Activity Planned		
IP 8.5 access to timely assessment and treatment in relation to substance misuse.	•		Since the End of July 2017 a new Substance Misuse Worker (SMW) has been in post, seconded from the NGage Drug and Alcohol Service. Our SMW has been taking referrals since mid August. A total of 13 referrals have been made to the new YOS SMW and all commenced assessments within timescales. 10 of the 13 are currently engaging well with the SMW and there is a current waiting list of 13 referrals. All 10 young people are currently subject to a Tier 2 Intervention.		
✓ IP 8.6 Access to appropriate/suitable accommodation	*	No issues around this indicator. One 17 year old assessed as unsuitable due to living in a domestically violent household, however since order has finished he has moved into supported lodgings which is appropriate to meet his needs.	Continue with current practice		

Key for measure RAG status



- Amber circle slightly short of target (15%tolerance)
- Red triangle off target (over 15% away)

Direction of Travel - DoT



? Data missing/ not available

No target set

Green tick - performance has improved



Red cross - performance has declined

→ performance remains the same