

# CYNGOR BWRDEISTREF SIROL RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

## **GWŶS I GYFARFOD O'R CYNGOR**

C. Hanagan
Cyfarwyddwr Gwasanaeth y Gwasanaethau Democrataidd a Chyfathrebu
Cyngor Bwrdeistref Sirol Rhondda Cynon Taf
Y Pafiliynau
Parc Hen Lofa'r Cambrian
Cwm Clydach CF40 2XX

Dolen gyswllt: Claire Hendy - Uwch Swyddog Gwasanaethau Democrataidd (01443 424081)

DYMA WŶS I CHI i gyfarfod o PWYLLGOR CRAFFU - IECHYD A LLES yn cael ei gynnal yn Siambr y Cyngor, Y Pafiliynau, Parc Hen Lofa'r Cambrian, Cwm Clydach, Tonypandy CF40 2XX ar DYDD MAWRTH, 24AIN MEDI, 2019 am 5.00 PM.

Caiff Aelodau nad ydyn nhw'n aelodau o'r pwyllgor ac aelodau o'r cyhoedd gyfrannu yn y cyfarfod ar faterion y cyfarfod er bydd y cais yn ôl doethineb y Cadeirydd. Gofynnwn i chi roi gwybod i Wasanaethau Democrataidd erbyn Dydd Gwener, 20 Medi 2019 trwy ddefnyddio'r manylion cyswllt uchod, gan gynnwys rhoi gwybod a fyddwch chi'n siarad Cymraeg neu Saesneg.

#### **AGENDA**

Tudalennau

#### 1. DATGAN BUDDIANT

Derbyn datganiadau o fuddiannau personol gan Aelodau, yn unol â gofynion y Cod Ymddygiad.

#### Nodwch:

- Mae gofyn i Aelodau ddatgan rhif a phwnc yr agendwm mae eu buddiant yn ymwneud ag ef a mynegi natur y buddiant personol hwnnw: a
- 2. Lle bo Aelodau'n ymneilltuo o'r cyfarfod o ganlyniad i ddatgelu buddiant sy'n rhagfarnu, mae rhaid iddyn nhw roi gwybod i'r Cadeirydd pan fyddan nhw'n gadael.

#### 2. COFNODION

Derbyn cofnodion cyfarfod blaenorol y Pwyllgor Materion lechyd a Lles a gynhaliwyd ar 9 Gorffennaf 2019

5 - 8

## ADRODDIAD CYFARWYDDWR CYFADRAN Y GWASANAETHAU CYMUNED A GWASANAETHAU I BLANT

#### 3. YMGYSYLLTU - Y PWYLLGOR CRAFFU A'R CABINET

Derbyn Cynghorydd y Fwrdeistref Sirol G Hopkins (Aelod o'r Cabinet ar faterion Gwasanaethau i Oedolion a'r Gymraeg), sy'n rhoi trosolwg i Aelodau'r Pwyllgorau Craffu o'r gwaith a gaiff ei gyflawni'n rhan o bortffolio'r Aelod o'r Cabinet. Mae adroddiad ynghlwm i gyd-fynd â'r eitem yma.

9 - 34

## 4. ADRODDIAD BLYNYDDOL BWRDD PARTNERIAETH GWASANAETHAU CYMDEITHASOL A LLES CWM TAF 2018/19

Derbyn Adroddiad Blynyddol Bwrdd Partneriaeth Gwasanaethau Cymdeithasol a Lles Cwm Taf ar gyfer 2018/19.

35 - 64

## 5. YMATEB Y CABINET I ARGYMHELLION Y GWEITHGOR CRAFFU - HENOED BREGUS EU MEDDWL

Ymateb y Cabinet i ganfyddiadau Gweithgor y Pwyllgor Craffu - lechyd a Lles mewn perthynas â'r ddarpariaeth gwelyau nyrsio i bobl Henoed Bregus eu Meddwl.

65 - 80

### 6. MATERION BRYS

Trafod unrhyw faterion sydd, yn ôl doethineb y Cadeirydd, yn faterion brys yng ngoleuni amgylchiadau arbennig.

## Cyfarwyddwr Gwasanaeth y Gwasanaethau Democrataidd a Chyfathrebu

### Cylchreliad:-

(Y Cynghorwyr Bwrdeistref Sirol Y Cynghorydd R Yeo a Y Cynghorydd G Holmes – Cadeirydd ac Is-gadeirydd, yn y drefn honno)

#### Y Cynghorwyr Bwrdeistref Sirol:

Y Cynghorydd A Roberts, Y Cynghorydd M Forey, Y Cynghorydd J Davies,

Y Cynghorydd J Williams, Y Cynghorydd P Howe, Y Cynghorydd G Stacey,

Y Cynghorydd M Tegg, Y Cynghorydd G Hughes, Y Cynghorydd Owen-Jones,

Y Cynghorydd C Willis, Y Cynghorydd W Jones and Y Cynghorydd E Griffiths

Christian Hanagan, Cyfarwyddwr Gwasanaeth y Gwasanaethau Democrataidd a Chyfathrebu

Gio Isingrini, Cyfarwyddwr Cyfadran y Gwasanaethau Cymuned a Gwasanaethau i Blant Andy Wilkins (Legal), Cyfarwyddwr y Gwasanaethau Cyfreithiol Neil Elliott, Cyfarwyddwr Gwasanaethau i Oedolion Luisa Bridgman, Head Of Service Short Term Intervention

Y Cynghorydd Bwrdeistref Sirol G Hopkins, Aelod o'r Cabinet ar faterion Gwasanaethau Cymuned i Oedolion a Phlant



## Agendwm 2



#### RHONDDA CYNON TAF COUNCIL HEALTH AND WELLBEING SCRUTINY COMMITTEE

Minutes of the meeting of the Health and Wellbeing Scrutiny Committee held on Tuesday, 9 July 2019 at 5.00 pm at the Council Chamber, The Pavilions, Cambrian Park. Clydach Vale, Tonypandy, CF40 2XX.

## County Borough Councillors - Health and Wellbeing Scrutiny Committee Members in attendance:-

Councillor R Yeo (Chair)

Councillor G Holmes
Councillor M Forey
Councillor J Williams
Councillor M Tegg
Councillor D Owen-Jones
Councillor W Jones
Councillor G Hughes
Councillor C Willis

#### Officers in attendance:-

Mr C Hanagan, Service Director of Democratic Services & Communication Mr G Isingrini, Group Director Community & Children's Services Mr A Wilkins, Director of Legal Services

#### County Borough Councillors in attendance:-

## 1 Apologies for Absence

Apologies for absence were received from County Borough Councillor J. Davies and P. Howe.

### 2 Declaration of Interest

In accordance with the Council's Code of Conduct, there were no declarations made pertaining to the agenda.

#### 3 Minutes

It was **RESOLVED** to approve the minutes of the 19<sup>th</sup> March 2019 as an accurate reflection of the meeting, subject to it being noted that County Borough Councillor M Forey apologies had not been recorded.

### 4 Health & Wellbeing Scrutiny Work Programme 2019/20

The Service Director, Democratic Services & Communications presented Members of the Health and Wellbeing Scrutiny Committee with the draft Work Programme up until the end of December 2019 following it being endorsed by

Members of the Overview and Scrutiny Committee on the 1<sup>st</sup> July 2019.

Members were reminded that at the special meeting of the Overview and Scrutiny Committee on the 1<sup>st</sup> May 2019, a report was presented which provided a response to the request from Committee Members to review the Council's Scrutiny arrangements and to update Members on the progress from the Wales Audit Office (WAO) report in respect of the Council's Scrutiny arrangements 'Fit for the Future'.

Members praised the new way of working and agreed that this would strengthen scrutiny's role within the Council.

Members considered the content of the Health and Wellbeing Work programme in depth and put forward their views.

#### Members **RESOLVED** to:

- Agree the Health and Wellbeing Scrutiny Committee Work Programme for the Municipal Year 2019/20 (up until December 2019 in the first instance)
- Agree that the Work Programme be reviewed at quarterly intervals to ensure the items identified for inclusion are relevant and that any additional referrals are incorporated.
- Agreed that if Members had any suggestions to notify Democratic Service with any suggestions.

#### 5 Training

The Service Director, Democratic Services and Communications asked Members to consider their training requirements for the new municipal year and to consider if there is any specific training that will assist them to better undertake their scrutiny role.

It was suggested by the Chair that if Members wanted more time to consider their training needs then they could contact the Democratic Services department and arrangements could be made for future training.

It was **RESOLVED** to inform either the Chair of Health and Wellbeing or the Democratic Services Department of any future training needs.

#### 6 Notice of Motion Initial Meeting in respect of Autism

The Service Director Democratic Services & Communications presented Members with the initial report in respect of the Notice of Motion regarding Autism, which was amended and adopted by the Council at its meeting on the 27<sup>th</sup> March 2019.

The Service Director Democratic Services & Communications asked Members to consider how as a Committee Members would want to proceed with taking this piece of work forward.

#### Members **RESOLVED** to:

Agree to progress this matter on behalf of the Council

- Agree to consider how best to work in collaboration with relevant stakeholders on what more the Council can do to support those living with autism in Rhondda Cynon Taf.
- Agree that the Relevant Officers attend the next meeting of the Health and Wellbeing Scrutiny with an overview on how the Local Authority currently supports those living with autism within RCT.
- Invite the Proposer and Seconder of the Notice of Motion to attend the next meeting of the Health and Wellbeing Scrutiny Committee when the matter is discussed.

## 7 Notice of Motion Initial Meeting in respect of Motor Neuron Disease

The Services Director Democratic Services & Communication explained that a Notice of Motion was presented to the meeting of the Council, which was held on the 6<sup>th</sup> March 2019 in respect of adopting the Motor Neurone Disease Association's MND Charter to help make a positive difference to lives of people living with MND in our local community.

Members considered the information put before them and **RESOLVED** to:

- Acknowledge the Motor Neurone Disease Association's Charter and the difference it makes to the lives of people living with MND in Rhondda Cynon Taf
- Agree to consider how best to identify the practical implications and how the Councils can best implement the aims of the Charter at a future meeting
- Instruct the relevant officers to bring forward specific recommendations to progress this matter, to the meeting of the Health and Wellbeing Scrutiny Committee in October 2019.

#### 8 Director of Social Service Draft Annual Report 2018/19

The Group Director of Community and Children's Services presented the Draft Director of Social Services Annual report to Members of the Health and Wellbeing Scrutiny Committee.

It was explained that the Committee's comments were sought on the content of the Director of Social Services Annual Report 2018/19. It was explained that this will form part of the formal consultation process.

The Group Director Community and Children's Services explained that the Director of Social Services has to prepare and publish an Annual Report. The report must evaluate the performance of the Local Authority in relation to the delivery of its social services function in respect of that year and include lessons learned. The report also sets out objectives in relation to promoting the wellbeing of people who need care and support, and carers who need support for the forthcoming year.

Members gave robust consideration and put their views forward. A Member thanked the Officer for a very comprehensive report. Members congratulated the department on the commitment to work jointly with other organisation to support people wellbeing while living independently for as long as possible.

Members commented positively on the work being done with regards to the Community Hubs and the development new models of accommodation for the older person. Members were informed that a number of topics that are in the report will be presented to the committee later which can be found on the Committee's Work Programme.

Further questions and observations were put to the Group Director of Community and Children's Services and it was **RESOLVED** that the comments would be taken into consideration when compiling his final report.

This meeting closed at 5.50 pm

CLLR R. YEO CHAIR.



## RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

## **MUNICIPAL YEAR 2019/2020**

## HEALTH AND WELLBEING SCRUTINY COMMITTEE

## 24<sup>TH</sup> SEPTEMBER 2019

## REPORT OF THE CABINET MEMBER FOR ADULT SERVICES & WELSH LANGUAGE

Author: Gio Isingrini – Group Director, Community & Children's Services

### 1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to provide Members with an update on the progress made in advancing the portfolio responsibilities of the Cabinet Member.

## 2.0 **RECOMMENDATIONS**

2.1 It is recommended that Members scrutinise the content of the report.

### 3.0 REASONS FOR RECOMMENDATIONS

3.1 To challenge any arising matters or issues with the relevant Cabinet Member and to ensure that the appropriate mechanisms are in place to effectively scrutinise the Executive.

### 4.0 BACKGROUND

- 4.1 On the 22<sup>nd</sup> January 2018, the <u>Overview & Scrutiny Committee</u> considered a report regarding the engagement of the Executive at future Scrutiny Committees going forward.
- 4.2 At the meeting Members agreed to receive Cabinet Members at future Scrutiny meetings on a quarterly basis to present relevant information relating to their portfolio areas, alongside the relevant Director.
- 4.3 Such an approach will provide Scrutiny Members with the opportunity to further challenge the Executive, as the Cabinet Members can provide details (both

verbal and written) relating to the potential challenges facing the services, as well as the opportunities and policy changes currently being considered. This approach would allow each Cabinet Member the opportunity to update Scrutiny Members on the delivery of their respective areas of the Corporate Plan, reference Key Performance Indicators and important details of policies being considered for future decisions which are referenced for future business, or those which have been developed since the last publicised Work Programme.

## 5.0 EQUALITY AND DIVERSITY IMPLICATIONS

5.1 There is no negative or adverse equality or diversity implications associated with this report

## 6.0 CONSULTAION

6.1 There are no consultation implications aligned to this report

## 7.0 FINACIAL IMPLICATION(S)

7.1 There are no financial implications associated with this report.

### 8.0 LEGAL IMPLICATIONS OR LEGISLATION CONSIDERED

8.1 There are no legal implications associated with this report

## 9.0 <u>LINKS TO THE COUNCIL'S COPORATE PLAN/ OTHER CORPORATE</u> PRIORITES

To contributes to the well-being goals under the Well-being of Future Generations (Wales) Act. The proposals set out in this report support the Council's aim to provide a long-term sustainable plan for the delivery of adult and community services in RCT. Working in collaboration with communities and third sector organisations creates for the benefit of residents.



## RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL MUNICIPAL YEAR 2019/20

## Introduction

- 1.1 Members will be aware that Adult Services and Social Services generally are key functions for the Council. Our Wellbeing Services. Our aim is to help people to live safely and independently in their own home for as long as possible, which we know helps to improve their long-term wellbeing.
- 1.2 What we do and how we do it is framed by several things. This includes laws such as the Social Services and Well Being (Wales) Act 2014 and the Wellbeing of Future Generations (Wales) Act 2015, both of which focus on wellbeing, prevention, partnership, collaboration and integration, and involving people. Together with our regional partners we have also assessed the needs of the population.
- 1.3 In terms of Adult Services we work to meet the care and support needs of all those who need our help, and the wider community. We have an emphasis on helping:
  - People with learning disabilities
  - Older people with complex needs and long-term conditions, including dementia
  - Carers
  - People with physical impairment and / or sensory impairments
  - People with mental health issues.
- 1.4 Our assessments have told us that the following are important to people:
  - Getting information, advice and assistance
  - Stopping problems before they start
  - Stopping problems before they get worse
  - Connecting people to their community
  - Seamless services i.e. different organisations working together as one
  - Making it personal and working with people who need help
- 1.5 Our longer-term aims, continue to guide our work and what we deliver. These include:
  - Remodelling services for adults to minimise the need for intervention and to maximise people's independence by more prevention and early intervention.

- Integrating the commissioning of social care services with primary and community health care services to improve the experience of users and to manage more effectively the huge cost of Accident & Emergency and hospital admissions.
- Delivering more support in the community to people with mental health issues to help them stay well, re-engage in learning, find and keep a job and remain active. Our support is focused on helping people with their whole life, not simply a diagnosis.

## 2. Summary of performance

- 2.1 I am pleased to report that our teams across Rhondda Cynon Taf County Borough Council continue to deliver a high quality of service to people needing care and support. We have continued to demonstrate strong commitment to joint working, innovation and creativity in further developing our strategic partnerships and new models of care. We continue to work with others in the public, private and third sectors to provide the best services and support we can to help people to improve their wellbeing and to live safely and as independently as possible.
- 2.2 An important part of our role in improving people's wellbeing is encouraging and supporting people to learn, develop and participate in society. Our Community Hubs development aims to join up public services, making them more cost effective and accessible. They provide a single point of contact within communities to access good quality information, advice and assistance. They also provide a platform for learning, volunteering, to developing community capacity, and flexible community space for people to meet and socialise, thus helping to tackle loneliness and social isolation. Community Hubs play an important part in preventing ill health and improving health and wellbeing.
- 2.3 We have also made considerable progress in developing alternative models of accommodation to provide more choice for older people, enabling them to live healthily and safely for as long as possible, increasing independence and reducing social isolation, which are key parts of our agenda. Our Extra Care housing programme is well underway and we have developed plans to increase capacity for those with dementia.

## 3. How are people shaping our services?

- 3.1 We have continued to reach out to people who use our services and to the public more widely. We use a variety of approaches, including information and awareness raising, social media, surveys, meetings with people who use services and feedback questionnaires. We encourage feedback whether positive or negative and, in some cases, make special arrangements to help individuals to take part. This year we have placed a greater focus on the use of social media and our online platform, which makes it easier to see what residents are being asked.
- 3.2 We a try to regularly review our services to ensure they meet people's needs and provide value for money. We consider carefully the findings of reviews, the results of surveys, the views expressed in consultations and people's comments when they contact us with complaints or to compliment us. A good example is the Maestrisant housing complex in Talbot Green. Adult Services reviewed the provision of domiciliary care and support for four people at the Maestrisant complex, which is a 31-bed scheme. We consulted with each person receiving care and support from the internal Support @Home Maestrisant Service. We commissioned Age Connects Morgannwg to provide independent advocacy to support each person through the consultation process. After engaging with the people receiving care

and support, their advocates, families and social workers, we concluded a change of domiciliary care provider would be detrimental to them. While initially it was thought costs could be reduced by a change of provider, our consultation identified significant benefits to them physically and mentally from the knowledge, experience and continuation of care provided. We also identified that where appropriate and following assessment of need, other residents at Maestrisant could be included in the service provided thus allowing the current service to maximise value for money and potentially provide better quality services to other residents by being on site.

## What do people think of our services?

- 3.3 We use surveys to measure the quality of our services and to determine what outcomes we achieve by working with people to meet their care and support needs:
- 3.4 The table below provides the results of this year's survey for Adult Services and the two previous surveys in 2016-17 and 2017-18. The survey was based on a sample of adults aged 18 and over who had a care and support plan on the day the sample was drawn. It measures things which people tell us are important to them.

Table 1: Key service quality measures, Adult Services, 2016-17 to 2018-19 (%)

	Statement	2016- 2017	2017- 2018	2018- 2019	Change this year/last
1	I live in a home that supports my wellbeing	87	89	93	
2	I can do the things that are important to me	49	50	77	
3	I feel a part of my community	52	52	69	
4	I am happy with support from my family, friends, neighbours	84	88	97	
5	I feel safe	76	79	94	
6	I know who to contact about my care and support	79	79	83	
7	I have received the right information or advice when I needed it	79	75	91	
8	I have been actively involved in discussions about how my care and support was provided	73	78	90	
9	I was able to communicate in my preferred language	93	94	95	
10	I was treated with dignity and respect	92	91	97	
11	I am happy with the care and support I have received	84	84	97	
12	It was my choice to live in a residential care home	67	60	56	

3.5 All but one measure shows a positive change. The exception was Q12 which relates to placement in a residential care home being a person's own choice. Most respondents – 290 out of the sample of 365 – preferred not to say or did not answer the question.

- 3.6 Over and above the national outcome measures, some of our individual service areas also have mechanisms for collecting feedback. For example, of the 300 people who responded after receiving help from our Support@Home (Intermediate Care and Reablement) service:
  - 94% rated the service as "very good" or "excellent".
  - 95% said they had achieved their goals.
  - 97% said they had been able to maintain or improve their independence.
- 3.7 The Quality Assurance Framework developed for our own residential care homes has also enabled us to place greater emphasis on hearing people's views and experiences. We send questionnaires to residents and their families. Of 58 residents and 68 family members, friends or advocates who returned forms in one survey:

#### Residents

- 98% reported their care home showed an interest in their health and always ensures their needs are met
- 96% reported they their privacy and dignity was respected at all times
- 87% reported their religious and cultural beliefs were respected

#### Family members, friends and advocates

- 94% reported they felt the personal needs of their relative / friend were assessed regularly and were extremely happy that the home fully met their needs
- 91% reported they strongly agreed they were made to feel welcome when they visited the care home
- 90% reported they strongly agreed staff were readily available and approachable
- 3.8 All survey results and any supporting comments from people who receive our services are used to plan developments to further improve the services we deliver. Self-assessment is also being used to identify possible improvements.

### **Complaints and compliments**

3.9 We welcome and appreciate the complaints and compliments we receive. While we are disappointed to hear of occasions when a service hasn't met people's expectations, we also appreciate people who take the time to tell us. The table below summarises the number of complaints and compliments received in the last four years.

Table 3: Number of complaints and compliments received,
Adult Services 2015-16 to 2018-19

		2015-16	2016-17	2017-18	2018-19
Adult Services	No, of complaints received	68	82	51	56
	No, of compliments received	156	102	102	124

- 3.10 It is encouraging that there were more compliments that complaints.
- 3.11 While we aim to prevent the need for people to complain in the first place, when a complaint is made, we consider it an opportunity to get even better at what we do and to learn from it to ensure similar issues are avoided in future. For example, in Adult Services this has led to:
  - The development of an information pack for parents of adults making the transition to supported living.

- Improvements to the timeliness of decision-making in relation to the transition process for adults with complex learning disabilities.
- Improvements to the management of additional calls for Homecare using mobile device alerts.
- 3.12 We recognise that people are themselves best placed to make judgements in relation to their own wellbeing. In its recent inspection of our services, the Care Inspectorate Wales highlighted the increasingly effective systems we have in place to support this. It also concluded that our practitioners are well-motivated and increasingly adept at ensuring people's voices are heard; ensuring it is incorporated into assessment of needs, and subsequent planning and delivery of individual care and support. It highlighted more work needs to be done for carers and we agree. We have identified this as a priority for action in the next financial year.

## Welsh language

- 3.13 Nearly 28,000 people in Rhondda Cynon Taf speak Welsh (2011 Census) which is slightly more than 1 in 10 of the population (12.3%). The Welsh Language Standards apply to all local authorities. This means everyone in Wales can expect the same approach to the Welsh Language in services, ensuring it is treated the same as the English language with all Councils offer ing people the opportunity to receive services from us, as well as from those funded by us, in Welsh.
- 3.14 In 2018-19, we have enhanced our approach for service users who wish to communicate in Welsh. Our approach is shaped not only by the requirements of the Welsh Language Standards and the Welsh Government's "Follow-on Strategic Framework for Welsh Language Services in Health and Social Services" but also by our commitment to delivering services which meet people's needs. We work closely with our colleagues in the Council's Welsh Language Service and use the Cwm Taf "More than Words" quarterly forum to ensure we are complying with statutory requirements.
- 3.15 We reviewed our progress against the Welsh Language Standards. As a result, all our correspondence and written material available to the public, including online information and our content on DEWIS Cymru (the national website for people who are looking for information or advice about well-being), is available bilingually. If someone corresponds with us in Welsh, we will respond in Welsh. All our staff are aware of the requirements of the Welsh Language Standards and what it means for how they work. We also monitor all our external service providers to ensure they comply with the Standards.
- 3.16 Our front-line staff make an active offer of communication in Welsh if it is someone's preference. Arrangements are then made for a Welsh speaking member of our staff to have the conversation and to work with them. We record people's language preference on our system, which informs subsequent communication, and we check preferences on language when core data is checked. No complaints were received during the year about services from Adult Services being available in Welsh.
- 3.17 We continue to encourage and support staff to learn Welsh in several ways including learning sessions, learning programmes and courses (including intensive courses), and online training modules. Our services have continued developments which enable staff to access Welsh language support tools on their computers. We are also considering the use of an App "More than Just Words" to further support our social workers and care staff. During the year, 14 staff received additional support from our Welsh Language tutor. This was provided after we identified several residents on the site of our Pentre House project speak Welsh. While it would be beneficial to have more Welsh speaking staff, we believe we

currently have enough Welsh speakers to meet the demand for services delivered through the medium of Welsh.

## What are our priorities?

- Ensure compliance on Welsh language preference at review when the core data is checked and ensure the Welsh Community Care Information System is updated
- Work with external providers via the contract terms and conditions to ensure Welsh language requirements are met

## 4. Promoting and improving the wellbeing of people we help

- 4.1 One of the Council's priorities is promoting independence and positive lives for everyone in Rhondda Cynon Taf. Social Services play an important part. Helping to improve the wellbeing of people who need care and carers who need support is at the very heart of our work. We aim to make a real difference to their lives. We cannot do this alone.
- 4.2 In delivering our services, we continue to face big challenges financial, population changes, and changing expectations. Only by working together with others can we respond to the challenges. One of the ways we do this is through a regional partnership. With our partners, we looked at the needs of our population and identified the action we need to take over a five-year period. The Cwm Taf Regional Plan 2018-23<sup>1</sup> describes what will be done and is the basis for our work.

## (a) Working with people to define and co-produce personal well-being outcomes that people wish to achieve

## What did we plan to last year?

- 4.3 As part of our self-evaluation, we decided on a range of priority actions to support adults, to be delivered during the 2018-19 year. We said we would:
  - Prioritise the integration of services for: Older people with complex needs and long-term conditions, including dementia; People with learning disabilities; Carers, including young carers; Integrated Family Support Services; and Children with complex needs due to disability or illness.
  - Deliver new accommodation models to improve outcomes for those individuals who
    need support to live independently and continue to work jointly with Linc Cymru to
    deliver the Council's Extra Care Housing Development Programme.
  - Make better use of technology solutions to maintain people's independence in their home and prevent escalation of need.
  - Ensure the offer of a direct payment to all people with eligible care needs

## How far did we succeed and what difference did we make?

### **Information, Advice and Assistance Services**

- 4.4 Last year, we helped 6,800 adults with information, advice and assistance. This is an increase of 4% over the previous year. The increase is significantly less than the jump of 30% between 2015-16 and 2017-18 but continues the trend of increasing demand for the service.
- 4.5 During the year, 2,990 people were assessed for care and support needs, a 10 per cent increase over the previous year. Of those, nearly 3 out of 4 assessments (72.74%) led to a care and support plan being prepared. We narrowly missed our target for the year of 70.15%, which was the same as our performance the previous year. We aim for the lower figure as this means we are getting better in helping people to find different solutions to a formal care and support plan.

7

- 4.6 The number of reviews of care and support plans was 7% higher than the previous year. 4,286 review were completed compared to 4,013 in 2017-18. Nearly half of the reviews (49.6%) were completed within an agreed timescale, which is a small improvement on the 46.5% the previous year.
- 4.7 We commissioned an independent review of our Community Review Team to evaluate its impact on performance and service quality. The review set out the opportunities and challenges in how we deliver and made recommendations for the authority to consider. We will use this report to help us to further improve the service.
- 4.8 Given the role carers play in helping people to stay living in their home and community, meaningful and beneficial support for them is vital. We will continue to focus on doing this as a priority. Over the twelve months, 246 assessments of carer support needs were undertaken of which 84 (34%) resulted in a support plan for the carer. This compares to 206 and 39 (19%) in the previous year.
- 4.9 We have reviewed our Carers Support Project. As a result, we have invested in the Service and its capacity with the aim of improving the take-up of carer assessments.

Table 4: Key national performance indicator - Information, Advice and Assistance Service, RCT and Wales, 2018-19

	Our target	Our performance	Actual vs Target
Percentage of adults who have received advice and assistance from the IAA Service and have not contacted the service for 6 months (Measure 23)	74.64%	80.00	

4.10 As the above table shows, 4 out of 5 adults who received information, advice and assistance from our service did not contact us in the 6 months after. We exceeded our target for this year and improved on the previous year's figure of 74.62%.

### **Integrating services**

- 4.11 We continue to work with many organisations to deliver more integrated services. Looking at alternative ways of doing things is a key part of the way we work. We do this by drawing on the results of service reviews and evaluations, our performance monitoring systems, and feedback from service users. We also take advantage of opportunities e.g. if a vacancy occurs in a team, we consider whether services improvements or economies can be made by deploying the resource in a different way. This stems not only from a need to ensure our services remain sustainable in increasingly challenging times and to make the best possible use of our limited and decreasing resources but also our desire to give people better services and support.
- 4.12 Our joint working with the housing sector in Rhondda Cynon Taf was featured in a report commissioned by the Association of Directors of Social Services (ADSS) Cymru. The study is part of work to implement "A Healthier Wales" and was supported by the Welsh Government. Our two training flats with Trivallis housing association which help individuals in care to make the transition to living independently on their own were highlighted. So too was our partnership working with Cynon Taf housing association to remodel its Pen Llew Court property into 19 one-bedroom flats for adults with learning difficulties.

## **Delivering new accommodation models**

- 4.13 We are committed to improving residents' wellbeing by ensuring people can live and age well at home in their community. This can be seen from our ambitious strategy to modernise accommodation options for older people.
- 4.14 Extra Care housing is one of the ways we are taking this forward. The model is designed to enhance the wellbeing and independence of older people and is an alternative to institutional care home settings. It provides more choice for older residents, enabling them to live healthily and safely for as long as possible, increasing independence and reducing social isolation.
- 4.15 We have made solid progress over the year.
  - The Extra Care housing on the site of the former Maesyffynnon Care Home in Aberaman is under construction and due to open in 2019. It will provide 40 modern units of accommodation plus communal facilities such as a dining room; hair salon; guest suites; lounge and laundry and an activity room. Respite accommodation will also be provided.
  - A 60 units Extra Care facility on the former Magistrates Court Site, in Pontypridd has
    also commenced development and is designed to ensure sustainable arrangements
    are in place to support increasing levels of care for people within the scheme;
    including dementia care. We also continue to take forward the planning for the former
    Ysbyty George Thomas hospital site in Treorchy and have also explored the use of a
    site in Porth and have identified a preferred site in Mountain Ash.
- 4.16 We have also made good progress on the Crown Avenue sheltered housing scheme in Treorchy in partnership with Trivallis. This development will create new supported accommodation for people with learning disabilities.
- 4.17 As part of our commitment to deliver new accommodation models, we have also been working with Ategi to explore opportunities to increase the availability of current "Shared Lives" provision. The aim is to expand the model of care to offer support both short and long-term to a wider range of people who have an assessed need. We relaunched the Shared Lives scheme to identify and recruit additional carers. As a result, the number of short and long-term placements has increased and action to recruit more carers is ongoing.
- 4.18 We reviewed the sleep-in arrangements in our learning disabilities supported-living schemes to provide a better understanding of when support is required and to determine the optimum levels of support through the most effective combination of staff and technology. The findings from the trials will be implemented, in partnership, in 2019.

#### Making better use of technology

- 4.19 We have finalised an assistive technology strategy to inform the commissioning of a new model for equipment, assistive technology, community alarms and response services. The project is supported by the regional transformation funding received from the Welsh Government.
- 4.20 Our work with the Innovate Trust has continued. We have piloted the use of assistive technology to support people with learning disabilities to live more independently in the local community which is better for them and helps reduce the cost of services. The Trust secured additional funding from a trust fund to expand technology and purchase smart devices for all the people it supports in the locality [November 2018 January 2019]. This means a further 54 people with learning disabilities in the area received access to smart technology. To support the project, the Trust recruited and trained two Digital Champion Volunteers with

- learning disabilities to act as peer mentors and to help their friends to access and use this new smart technology.
- 4.21 The work has been extended to develop alternative "outcome-based day opportunities" initially for Supported Living residents. We have also agreed with the Innovate Trust to increase volunteer involvement through the University of South Wales student population.

## **Ensuring an offer of Direct Payments**

- 4.22 We have worked with people receiving a direct payment to explore opportunities to improve the support available to them. We did this by the recommissioning of a support contract, which was completed in March 2019.
- 4.23 The table below shows the progress we have made in supporting the uptake of Direct Payments over the past 3 years:

Table 6: Take-up of Direct Payments, RCT, 2016-17 to 2018-19

Adult Services			
2016-17	339		
2017-18	358		
2018-19	373		

4.24 We also undertook a best practice review into which high-performing local authorities promote and make the offer of direct payments with the aim of increasing the uptake in the area by targeting managed accounts.

Table 7: Key performance indicator - Percentage of clients choosing own providers through Direct Payments, RCT and Wales, 2018-19

	Our target	Our performance	Actual vs Target
Percentage of clients choosing their own service providers through Direct Payments	15.5%	16.07%	

4.25 As a result of our work over the year, our performance has improved. We exceeded our target for the year and improved on the 14.67% recorded in the previous year. Although these are slight improvements, they show our action is starting to have an impact. It provides a solid foundation for further action to improve our performance in the future.

## What are our priorities for next year and why?

- Strengthen systems for recognising and supporting the needs of carers. Increase the number of carers assessments completed and offers accepted of support when needed.
- Develop and fully implement, across all service areas, a systematic and collaborative process for capturing the views of service users and their families about the impact of our support and services.
- Continue to embed strengths-based and outcome-focused assessment, support planning and review across Adult Services

## (b) Working with people and partners to protect and promote people's physical and mental health and emotional well-being

## What did we plan to do?

#### 4.26 We said we would:

- Develop new community-based models of service with a focus on prevention, independence, choice and wellbeing This will include actions in relation to day services; respite, carers, direct payments; telecare; StayWell@Home; home care
- Develop the capacity and quality of specialist care home provision to ensure people with a dementia no longer able to remain in their own homes can access specialist care locally
- Continue the Valley LIFE project to develop a range of services for older people with dementia which helps to support people to stay well at home for longer.
- Continue the work between Adult's and Children's Services to improve the way we support young people transitioning into adulthood.

## How far did we succeed and what difference did we make?

## **Delayed transfers of care**

4.27 Reducing delays in people being discharged from hospital remains one of our top priorities and we work closely with Cwm Taf University Health Board. It remains a significant challenge with market capacity in home care being a specific area for action during the year.

Table 8: Key national performance indicators - Delayed transfers of care, RCT and Wales, 2018-19

	Our target	Our performance	Actual vs Target
Rate of delayed transfers of care for social care reasons for people aged 75+ per 1,000 population aged 75 or over (Measure 19)	1.3%	3.4	
Rate of delayed transfers of care for social care reasons for people aged 18+ per 1,000 population aged 75 or over (Measure 19)	2.4%	5.1	

- 4.28 Despite considerable effort, delays in transfer of care for social care reasons increased slightly last year. There were 99 cases for people aged 18 and over, of which 67 were for people aged 75 and over. The figures are higher than the corresponding number of cases in 2017-18 of 63 and 36 respectively.
- 4.29 We have worked hard to try and reduce delays due to the time taken to undertake assessments. However, there were 24 such delays over the whole year compared to 17 the previous year. An improvement can be reported in delays in transfer which were down to the choice of care home, which fell from 78 the previous year to 36 this year. There was also a

- marked improvement in delays in transfer due the availability of care homes, which fell from 47 in 2017-18 to 7 this year.
- 4.30 We are also continuing to work closely with providers to reduce delays. Our StayWell@Home service, the Brokerage Team we have developed, and our Support@Home service are all helping to minimise delays in arranging community care packages of support. We have looked to extend the Broker Service to cover residential care placements and pilot arrangements within selected teams to review effectiveness. As a result of our review, we will implement a bed booking system in 2019-20.

#### Reablement

- 4.31 Our reablement services provide intermediate care and rehabilitation to enable people to remain living in their home safely and independently. The support is available to anyone aged 18 and over who is a permanent resident of Rhondda Cynon Taf and is eligible to receive support.
- 4.32 A plan of support is discussed with the individual after we have worked with them to assess their needs and what they want to achieve. The service is provided free of charge for a maximum of six weeks subject to the person remaining in need of the support. If support continues for longer, charges are made in accordance with our policy on charging for non-residential social services<sup>2</sup>. Where necessary, specialist equipment and/or aids and adaptations for the home may also be arranged.
- 4.33 In 2018-19, our Reablement Service helped 995 people. The table below highlights our performance against key national indicators.

Table 9: Key national performance indicators - Support after reablement, RCT and Wales, 2018-19

	Our target	Our performance	Actual vs Target
Percentage of adults who completed a period of reablement & have a reduced package of care & support 6 months later (Measure 20a)	84.95%	85.43%	
Percentage of adults who completed a period of reablement and have no package of care and support 6 months later (Measure 20b)	77.23%	73.47%	

Source: Welsh Community Care Information System (WCCIS)

- 4.34 We were successful in reducing the proportion of adults who, six months after we had provided reablement assistance, were able to live with a reduced package of care and support. Our performance of 85.43% was better than our target of 84.95%. This means more than 4 out of 5 people required less care and support after receiving help from our reablement services.
- 4.35 We fared less well on the proportion of people who, six months after receiving our Reablement service, required no care or support. Our performance of 74.47% came in just below our target of 77.23%.

#### Residential care homes

4.36 The average age of adults entering residential care increased slight to just under 87 (86 years 9 months). Our target was 85 years 3 months. This is encouraging. The more that can be done where possible to prevent people from having to enter residential care by providing alternative means of support in the community the better.

Table 10: Key national performance indicators – Residential care homes, RCT and Wales, 2018-19

	Our target	Our performance	Actual vs Target
The average length of time adults (aged 65 or over) are supported in residential care homes (Measure 21)	922.5	959.35	
Average age of adults entering residential care homes (Measure 22)	85.27 yrs	86.78 yrs	
Number of people admitted to residential or nursing care (Corporate Indicator)	400	420	

## **Community based services**

4.37 Our Stay Well@Home Service continues to deliver well as an integrated approach to reduce delayed transfer of care from hospital. The service operates at Prince Charles and the Royal Glamorgan acute hospital sites in Accident and Emergency and on wards from 8.00am to 8.00pm seven days a week.

#### **Dementia care home provision**

4.38 Work is ongoing to increase the capacity and quality of specialist care home provision to ensure people with a dementia no longer able to remain in their own homes can access specialist care locally. For example, our proposal for the development on the site of the former Magistrates Court Site in Pontypridd is designed to ensure sustainable arrangements are in place to commission increasing levels of care for people over time, including dementia care.

#### Valley LIFE project

4.41 During 2018/19, we have worked with Cwm Taf and Linc Cymru to design the extra care housing scheme and dedicated community resources to be developed on the former Ysbyty George Thomas hospital site. We have secured additional ICF capital funding to support the development of the scheme.

In addition, we have worked with Cwm Taf to extend the specialist dementia intervention service in Rhondda Cynon Taf. This Service offers a needs led approach to understand and manage behaviours related to stress and distress that effect the wellbeing of a person with dementia. The service had previously demonstrated success providing support and education within the care home sector and the new arrangements ensures that the service can now respond to people in their own homes in the community of Rhondda Cynon Taf.

## What are our priorities and why?

• Undertake more work to implement arrangements for ongoing service user and carer engagement across Adult Services and to agree a strategy for annual delivery.

## (c) <u>Taking steps to protect and safeguard people from abuse, neglect or</u> harm

## What did we plan to do?

- 4.42 During 2018/19, we said we would:
  - Strengthen our Quality Assurance Framework and further reduce the number of repeat episodes where children and young people are placed on the child protection register.
  - Complete and deliver the Adults Quality Assurance audit schedule for 2018-19, focusing on the themes and trends that have become apparent from management information data and audits in 2017-18 and ensure this is aligned to the work of the newly formed Quality Assurance sub-group of the Multi-Agency Safeguarding Hub.
  - Deliver the training opportunities identified in the multi-agency safeguarding training plan focusing on suicide and self-harm.

### How far did we succeed and what difference did we make?

- 4.43 During the year, the Adult Safeguarding Team received 4,699 suspected adult-at-risk reports. This is 7% less than the number received the previous year (5,060). The reports resulted in further action in approximately 1 in 10 cases (9% or 418 cases)
- 4.44 Of reports received this year, 3 in 5 (60%) were Pubic Protection Notifications. The number of Section 126 enquiries (469), which are enquiries required by the Social Services and Well-being (Wales) Act 2014 when an adult is deemed to be at risk, decreased by 11% when compared to the previous year.

Table 13: Key performance measure – Adult protection enquiries, RCT and Wales, 2018-19

	RCT CBC	RCT CBC	Actual vs
	Target	Actual	Target
% of adult protection enquiries completed within 7 days (Measure 18)	97%	93.57%	

- 4.45 Nearly 19 out of 20 adult protection (93.57%) enquiries were completed within 7 days. This is similar to last year's performance (93.78%) but slightly below our goal of 97%.
- 4.46 An extensive programme of learning and development was delivered as a result of the multi-agency safeguarding training plan. More than 2,800 people from more than thirteen different organisations and council departments attended training events. The programme covered a diverse range of important subjects. More than 300 people also received "Ask and Ask" training as part of implementing the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015
- 4.47 A series of safeguarding audits were undertaken during the year:
  - Four multi-agency individual Adult Safeguarding case audits
  - Audit of use of the 'Professional Concerns Protocol'
  - Quality of strategy discussions & Investigation decisions
  - Use of advocacy in Safeguarding Adults Procedures

- Quality of decision-making in cases where there was no further action following \$128 Reports
- Quality of decision-making in cases where there was no further action to protect required following S126 enquiries
- Learning from Repeat Safeguarding Reports for the same adults at risk
- Quality of Deprivation of Liberty Safeguards case prioritisation decisions
- Correlation of Relevant People funded by Continuing Health Care and Deprivation of Liberty Safeguards applications made
- Quality of Deprivation of Liberty Safeguards Best Interests Assessments
- 4.48 The audits and the training programme, which involved staff from many different organisations working in the area, helps to further develop practitioner knowledge, skills and values in relation to Adult Safeguarding. It helps ensure effective operation of the multi-agency initiatives such as the Multi-Agency Safeguarding Hub. We are encouraged this is recognised by others. The Care Inspectorate Wales found an effective multi-disciplinary approach assists in promoting sound safeguarding practice.

## What are our priorities and why?

Implement the Quality Assurance Framework.

## (d) Encouraging and supporting people to learn, develop and participate in society

## What did we plan to do?

- 4.49 We said we would:
  - Increase the number of Community Hubs and neighbourhood networks over a three-year period. This phased roll-out of the locations of these Hubs to be based on the results of the consultations and evidence of greatest need.
  - Develop new community-based models of service with a focus on early intervention and prevention, choice, control and independence

## How far did we succeed and what difference did we make?

### **Community Hubs**

- 4.50 We have continued our development of Community Hubs and made good progress. Community Hubs encourage and support people to learn, develop and participate in society. They help to ensure better public services, which are joined up, cost effective and accessible. They provide a single point of contact within communities to access good quality information, advice and assistance to find support and a platform for learning, volunteering and to develop community capacity, and flexible community space for people to meet and socialise, thus helping to tackle loneliness and social isolation. As such, Community Hubs play an important part in preventing ill health and improving health and wellbeing.
- 4.51 The development of Community Hubs allows the Council to reconfigure its community assets and services. The facilities include a range of services provided by the public and third sector which are aligned with the Social Services and Wellbeing Act. Bringing services

together creates economies of scale in terms of staffing and building costs. Making better, more cost-effective use of our community assets allows resources to be reinvested in new or retrofitted, fit-for-purpose buildings to make services sustainable in the longer term. This year, we have:

- Agreed the leasehold transfer of St Mair's Day Centre to Age Connects
   Morgannwg. The Hub being developed by Age Connects Morgannwg will have a
   range of services for the local community.
- Developed, in partnership with a third sector organisation (Fern Partnership), a Community Hub in Ferndale at the former Ferndale Infants School. It will serve the Rhondda Fach area. The building work is nearing completion and the Hub is expected to open early summer this year.
- Developed a Community Hub at the former Mountain Ash Day Centre, which serves the South Cynon area. It is expected to open in early summer this year.
- 4.52 Each Community Hub will support a "neighbourhood network" of community-based services. The network of Hubs will link services and communities together and help make more use of the excellent facilities provided by our local Third Sector organisations throughout the area. They make a significant contribution to people's health and well-being with and without direct support from the Council.
- 4.53 We place great emphasis on community engagement on matter such as this, where decisions need to be taken on services and facilities. We engaged with people over a period of 6 weeks. We organised eight drop-in events, which were well attended by people who use the services and residents. We also ran an online survey. In total, 331 people response to the consultation. After careful consideration, the decision was made to close three centres, with Gilfach Goch being the one to remain open. We are working with Third sector organisations to explore alternative provision for those affected, which includes the Community Hubs we are developing.

#### New community-based models of service

- 4.54 We have commenced work with the Rainbow Trust to explore opportunities to develop new day opportunities aimed at improving the employment chances of young people with a learning disability on transition from school or college
- 4.55 As part of our joint working with others, we now have 5 Community Co-ordinators covering the Cwm Taf University Health Board area. The posts are funded by the Welsh Government's Integrated Care Fund. Three of the co-ordinators cover the Council's area Cynon, Taff Ely, and Rhondda and one covers the Merthyr Tydfil Council area. The role of the fifth co-ordinator is to work specifically with primary care across the whole area. They engage with people in communities and provide information, advice and signpost to local community groups, activities and services, building strong local networks. As such, they complement our development of Community Hubs.
- 4.56 Community Zones are being developed and the implementation plan will consider how loneliness and isolation with young parents can be tackled. Loneliness and social isolation can affect people of all ages. We secured a £120,000 Transformation Grant from the Welsh Governments Museums, Archives and Libraries Division to renovate the interior of Tonypandy Library. This has created a modern library with community spaces including rooms for confidential advice sessions and a new dedicated area for people of all ages to create and collaborate on projects. A new IT suite has also been created for Work Clubs such as Digital Friday and adult education classes. As part of the Cwm Taf Public Services Board's priority action, we participated in volunteering fayres in Treorchy Comprehensive

School and Merthyr College with the aim of aligning the interests of young people in the work needed to meet the community challenge element of Welsh Baccalaureate and Duke of Edinburgh awards

## What are our priorities and why?

- Develop new community-based models of service with a focus on prevention, independence, choice and wellbeing, including day services; respite, carers, direct payments, telecare, StayWell@Home and home care.
- Review the changes made to the single point of contact for service provision to realign with the development of the Community Zones.

## (e) <u>Supporting people to safely develop and maintain healthy domestic, family and personal relationships</u>

## What did we plan to?

- 4.57 We said we would:
  - Complete development of the Learning Disability Day Opportunities Strategy and prepare an effective business case for the re-modelling of current service delivery model

## How far did we succeed and what difference did we make?

### **Learning Disability Day Opportunities Strategy**

4.58 We progressed the development of a Learning Disability Day Opportunities Strategy and re-modelling of current service delivery mode. A set of options was prepared, and the service continues to consider the redesign of services to become more outcomes focused. We delayed the draft report in light of intentions for regional commissioning and to coproduce options with the people who use services and their parents and carers. We held workshops with all stakeholders in February and March 2019 to develop the strategy and implementation plan. We have set a revised target date of July 2019 to allow further coproduction with people with a learning disability and their parents /carers in order to finalise the priorities for change.

# (f) Working with and supporting people to achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs

## What did we say we would do?

4.59 We said we would:

- Complete the development and build of the modular construction for the Extra Care Housing to provide more choice for older residents to enable them to live healthily and safely for as long as possible, increasing independence and reducing social isolation.
- Conclude the review of existing residential care home (and day centre)
  provision for older people to support our future service needs supporting more
  people to live independently in their own homes rather than institutional settings
- Complete the redevelopment of specialist accommodation for people with learning disabilities
- Continue to ensure that there are appropriate levels of modern fit for purpose housing and accommodation available for vulnerable people that meets their needs and supported, where appropriate, by access to community facilities

## How far did we succeed and what difference did we make?

## **Extra Care Housing**

- 4.60 As reported earlier in this report, and in response to the first two priorities listed above, we have made solid progress against our plan to develop more Extra Care accommodation, an alternative to institutional care home settings, which is designed to enhance the wellbeing and independence of older people.
- 4.61 We commissioned a major review of existing residential care home and day centre provision for older people. The review helps us understand the future service need within the wider strategic context of enabling more people to live independently in their own homes rather than in institutional settings. We have undertaken a 12-week consultation the outcome of which will inform future decisions.

### Accommodation for people with learning disabilities and vulnerable people

- 4.62 Our partnership working with Cynon Taf housing association to develop better accommodation for people with learning disabilities by remodelling Pen Llew Court in Aberdare has now passed the tender stage. The original 34 homes flats and maisonettes are being converted into 19 one-bedroom flats. It means people will not being living in just one bedroom but will have their own front door, a living room and bedroom, kitchen, and adapted shower. Support will be available on site 24/7. The goal is for individuals to be able to live in a community not an institution. The complex will include community facilities. Completion is anticipated by the end of 2019.
- 4.63 In response to the Wales Audit Report regarding people with a Learning Disability, we have continued to work with Partner Agencies, the people we provide care and support to and their parents/carers to implement the Statement of Intent for Learning Disability. The statement describes a shared commitment to delivering a new model for health and social services. It is helping us address the recommendations set out by the WAO in their report and more importantly, co-produce commissioning outcomes for the short and medium term. In 2018/19, we have focused on the following priority areas:
  - · Preventing loneliness and isolation by increasing community inclusion
  - Reducing Stigma

- Housing
- · Further Education
- · Employment, training and lifelong learning

The agreed shared outcomes are now being used to inform our co-production of work plans for 2019/20

## What are our priorities for next year and why?

 Deliver new accommodation models to improve outcomes for those individuals who need support to live independently (This will include actions in relation to extra care/supported living)

## 5. How we do what we do

## (a) Our workforce and how we support their professional roles

- 5.1 The delivery of high-quality services depends on us having an adequate workforce of well-trained staff with the right mix of skills, experience and approach e.g. to enhance partnership working across organisational boundaries. We have continued to press ahead with organisational and cultural change following the introduction of the Social Services and Wellbeing (Wales) Act.
- 5.2 To ensure we have the workforce we need to achieve the best for our residents, we play our part in implementing the Council's five-year Workforce Plan. The Plan has five aims:
  - Developing a flexible and agile workforce that shares organisational knowledge
  - Recruiting and retaining the best talent to create a diverse workforce
  - Leadership and management development
  - Enabling a high performing, engaged and committed workforce
  - Supporting the health and well-being of our workforce to maximise attendance
- 5.3 We have also taken, and are continuing to take, action specific to our social care workforce internally and through the Cwm Taf Social Care Workforce Development Partnership Annual Workplan 2018/19. This is a rolling action plan to:
  - Support the continued implementation of the Regulation and Inspection of Social (Wales) Act including the domiciliary care workforce to prepare for registration and supporting the knowledge/role of responsible individuals.
  - Support the training, development and qualification of social care managers: including Step Up to Management; Middle Manager Development Programme; Team Manager development programme; and those requiring registration as managers
  - Support the ongoing development of approaches to outcome-focussed care and support practice
  - Support for both Social Work qualifying training and post-qualifying training in Wales
  - Support front line social care workers to develop their skills overall in relation to social care, and to support introduction of the revised induction framework
  - Enable the workforce to meet regulatory requirements for qualification and/or registration
- 5.4 A training needs analysis undertaken across the region took account of the national priorities identified by Social Care Wales. The regional priorities identified are a combination of cyclical core training (i.e. required annually) and development events that will raise awareness and develop practice. The local priorities reflect the policy and service delivery of each local authority in the region.
- 5.5 In 2018-19, we took several steps to strengthen our workforce planning, our performance management and to train and develop our workforce. They include:
  - Action to make effective use of the new Welsh Community Care Information System, which gives us better information to manage people's care and saves time by avoiding the need to repeat information to different agencies.

- A new Supervision Policy, which was co-produced with staff and which is aligned to the principles of strength-based practice.
- The introduction of peer-group support arrangements across Assessment and Care Co-ordination Services.
- Regular engagement with staff by managers to improve communications and to allow concerns, developments, suggestions and ideas to be discussed. This happens in different ways in different service areas.
- Where possible, more temporary and permanent posts created to increase capacity as a response to specific pressures.
- A "Leadership in Dementia Care" programme, and support for our domiciliary staff to complete their registration with Social Care Wales. We have also actively encouraged and supported our in-house direct service front-line staff to attain at
- Our safeguarding staff also continue to contribute to the well-received programme of Multi Agency Practitioner Events. The many events which were held during the year aid professional development practice by sharing learning from audits and reviews.

## (b) Our financial resources and how we plan

- 5.7 The financial position, coupled with changing needs and demographic pressures, continues to be challenging. The Council continues to support and prioritise Adult Services and once again has demonstrated its commitment to protecting front-line services and investing in our local priorities. For 2018-19, the Council allocated £144.9 million to the Children and Community Services budget, an increase of £6.8 million (4.9%) on the budget for 2017-18.
- 5.8 The previous financial year (2017/18) ended with an over spend for Adult Services of £0.903 million. This was mainly due to replacement and sickness cover where necessary and the need to provide specialist accommodation placements, home care packages, and reduced occupancy of in-house residential care. We also under-achieved in bringing in income where charging was due.
- 5.9 We ended 2018/19 with an over spend of £1.08 million. The main reasons for this were overspends on:
  - Long-term care and support staffing costs
  - Nursing/residential care costs
  - Intermediate care and reablement, due to increased demand for services to prevent admissions to hospital or to facilitate hospital discharges
  - Fairer charging, due to lower levels of income received
  - Increased costs of residential care and adoption fees and allowances.
- 5.10 During the year we also encountered additional staffing requirements in Accommodation Services and less income was received due to lower than budgeted client numbers within Home for the Elderly establishments.
- 5.11 During the year, we have taken a range of action to manage the financial challenges and pressures and this work is ongoing.
- 5.12 In order to manage ongoing budget pressures, we continue to implement robust and very challenging budget plans as part of the Council's financial management strategy and

associated Medium-Term Financial Plan. We have robust processes in place to identify budget pressures and budget efficiencies, including rigorous scrutiny. Vacancies which arise are considered as part of our ongoing, broader, work to reflect on and rethink our activity with the possibility of transforming the way we deliver services. Quality assurance panels oversee commissioning decisions across Adult Services to ensure challenge and consistency in the quality of assessment outcomes along with monthly cost-of-care meetings and fortnightly specialist placements panel meetings.

5.13 We are also focusing efforts to further strengthen prevention work to reduce and/or contain demand and increasing the number of clients living independently thus reducing the cost of care. We continue to work to improve efficiency and productivity of our operations through reviews and by increased use of technology.

## (c) Our partnership working, political and corporate leadership, governance and accountability

- 5.14 We are fortunate to have a political and corporate leadership which is committed and effective in supporting and challenging the performance of Cabinet members and officers to drive improvements in services and transformation. This was recognised by the Care Inspectorate Wales in its recent inspection. Our Cabinet Members are approachable and supportive and fully engaged in the delivery and development of services.
- 5.15 Partnership working to improve services and to achieve efficiencies remains an important part of our work in both Adult and Children's Services. We continue to play a significant part in the Regional Partnership Board and the delivery of the regional plan, which was produced in conjunction with, Merthyr Tydfil County Borough Council, the Cwm Taf University Health Board and Third Sector organisations.
- 5.16 In June 2018, the Welsh Government announced responsibility for healthcare services in the Bridgend County Borough Council area would transfer to the Cwm Taf University Health Board from the Abertawe Bro Morgannwg University Health Board. As a result, the Board's boundary would extend to encompass the Bridgend County Borough Council area. The change came into effect on 1 April this year. We have worked with our original partners and new partners in the Bridgend County Borough Council area to ensure the new Cwm Taf Morgannwg Regional Partnership Board is up and running and effective. We are committed to playing our part to the full to develop more integrated care and support services which benefit those who need our services and the population of the whole area.
- 5.17 In Adult Services, we have continued to work closely with partner organisations across the health and social care system in Rhondda Cynon Taf and regionally. For example:
  - We are the regional operational lead on the Reablement and Stay Well
     @Home integrated services which have been developed in partnership with Cwm Taf Health Board and Merthyr Tydfil County Borough Council.
  - We have developed new service model proposals such as Stay well @Home 2 and Telecare to support a regional transformation bid, and dementia service proposals to enhance support available in the community. This follows the success of Stay Well @Home in the 2018 National NHS Awards for working seamlessly across agencies. It was also "highly commended" at the Social Care Accolades. A recent independent evaluation of the service evidenced good joint working in practice.
  - We continue to work closely with regional partners for effective co-ordination on, and development of, joint investment opportunities e.g. the Integrated Care Fund. We are the regional lead with externally commissioned home care

agencies to ensure the effective delivery of home care services; including recruitment and retention initiatives, zoning and outcome-based commissioning.

- The links we have developed with housing providers, commissioned care
  agencies and third sector organisations are delivering results. We have
  delivered new accommodation models (long-term and respite) for people with
  learning disabilities including Pen Llew Court in Aberdare; Crown Avenue in
  Treorchy, Oxford Street in Mountain Ash and Belle Vue in Treforest. These
  developments have been highlighted earlier in the report.
- We manage various partnership projects with the Third Sector including RNIB, Action for Hearing Loss, Care and Repair, Mencap, DEWIS and Age Connects Morgannwg. We reviewed each of them in 2018 to ensure arrangements are efficient and effective and outcome focused.
- The Multi Agency safeguarding Hub has continued to develop and mature with strong evidence of sound inter-agency safeguarding practice. Likewise, the work of the Safeguarding Board has delivered opportunities for improvements in practice both within and between agencies.
- 5.18 In addition to the above, equipment provision for Adult Services is delivered via a Partnership with Cwm Taf Health Board, Merthyr Tydfil and Bridgend Council Borough Councils via a pooled funds arrangement. We have, as regional lead, also established a care home pool budget and commenced a review of joint commissioning of care home provision.
- 5.19 Care Inspectorate Wales has also commented that "effective operational and strategic relationships with other regional partners have facilitated the implementation of some innovative projects, such as the hospital based, multi-professional Stay Well @ Home initiative," reflecting a strong commitment to co-production.
- 5.20 We have worked with our partners to establish a Regional Commissioning Team and are committed to helping it become an effective means of developing more integrated services. The team, which will work across all services, will drive the health and social care integration agenda on behalf of the Regional Partnership Board. It will lead the implementation of the Regional Plan and a programme of commissioning activities, which will help to improve the quality and value for money of care services.

## What are our priorities and why?

- Development of an overarching workforce development strategy for Adult Services.
- Deliver agreed budget efficiencies and manage services within resources available in the medium-term, including action to reduce sickness absence and improve business processes.
- Embed quality assurance and performance management culture at all levels of adult services (This will include actions on management information and performance indicators).
- Maximise adult social care income and debt recovery to build on improvements in level of debt achieved in 2018-19.
- Manage the market to ensuring we have the local workforce and safe and the sustainable localised care and services that we need.

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## Agendwm 4













## CWM TAF SOCIAL SERVICES AND WELLBEING PARTNERSHIP BOARD

## **ANNUAL REPORT 2018/19**

This report is produced to meet the requirements set out by the Welsh Government in the Social Services and Wellbeing (Wales) Act 2014

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# 1. Introduction by the Chair of the Regional Partnership Board 2018/19

As the Chair of the Cwm Taf Social Services and Well-being Partnership Board, I am pleased to introduce our 2018/19 annual report.

From 1st April 2019, the responsibility for providing healthcare services for people who live in the Bridgend County Borough Council (BCBC) moved from Abertawe Bro Morgannwg University Health Board (ABMU) to Cwm Taf University Health Board (Cwm Taf). As a direct result of this change, Partnership arrangements and boundaries needed to be realigned and 2018/19 was a transition year which saw Bridgend disaggregating services from the former Western Bay Partnership arrangements and a new region was developed being Cwm Taf Morgannwg.

The boundary change whilst challenging does provide us the opportunity to review all governance arrangements and learn from one another and develop simpler more cohesive partnership arrangements to deliver better outcomes for people and communities across Cwm Taf Morgannwg. Any period of change can be very unsettling for all those involved, including service users, carers, staff and other stakeholders. We want to continue to make the whole process as simple and transparent as possible and ensure that there is regular, transparent and ongoing communication.

I would like to thank all those engaged in the Transformation Programme and for their continued commitment to Partnership working. I look forward to the year ahead and delivering on the major Transformation Programmes and expanded Integrated Care Fund programme for the region.

Rachel Rowlands Chair of the Regional Partnership Board

## 2. Background Regional Partnership Board (RPB)

The Social Services and Wellbeing Act Wales (2014) identified the statutory need for regions to create Regional Partnership Boards to oversee integrated strategic approaches to deliver integrated Health and Social Care services. Since this time, Welsh Government have more recently published "A Healthier Wales: our Plan for Health and Social Care" which emphasises the need to prevent illness by supporting people to manage their own health and wellbeing and on enabling people to live independently for as long as they can.

"Healthier Wales" also confirmed the importance of Regional Partnership working to develop new models of integrated Health and Social Care that are innovative and addresses regional priorities. RPBs are expected to provide a strong oversight and coordinating role as highlighted by the expectations of the national Transformation programme and the need for RPBs to have lead responsibility on the development, implementation and achievement of individual bids.

Such national expectations clearly stresses the critical role of Regional Partnership Boards in delivering the expected transformation of Health and Social Care delivery so that services become better coordinated and seamless.

In June 2018, the Welsh Government announced that responsibility for healthcare services in the Bridgend County Borough Council area would transfer to the Cwm Taf University Health Board from Abertawe Bro Morgannwg University Health Board. The boundary of the Cwm Taf Health Board would be moved accordingly with the changes coming into effect on 1 April 2019.

Regional Partnership Boards were based on the original health board footprint. The boundary change impacts on the Cwm Taf Regional Partnership Board and the Western Bay Partnership Board, of which Bridgend was a member.

During 2018/19 The Partnership Arrangements (Wales) Regulations 2015 and the Care and Support (Partnership Arrangements for Population Assessments) (Wales) Regulations 2015 were amended to take account of the change. Whilst the changes did not come into effect until the 1<sup>st</sup> of April 2019 Bridgend Members were co-opted in a shadow capacity onto the existing Cwm Taf Regional Partnership Board during 2018/19.

In addition to amending regulations for the boundary change, the Welsh Government took the opportunity to review the 2015 Regulations. It has consulted on, among other things, clarifying requirements for Regional Partnership Boards to establish pooled funds and requiring housing and education representation on Boards.

As set out in statutory regulations and in Welsh Government guidance, the RPB is required to produce an Annual Report by 30<sup>th</sup> June each year which must be submitted to Welsh Ministers. It is a publically available document summarising the work of the Partnership and its associated programmes in the previous year. The report focusses on the regional responsibilities of the RPB, highlighting key areas of progress, achievements and a brief forward look in relation to our plans for the future.

The RPB Annual Report is intended to be complementary to (and not replicate) the annual reports on Social Services required from both RCT and Merthyr Tydfil CBCs, the annual report by Cwm Taf Morgannwg Health board and the annual wellbeing report by the Cwm Taf Public Services Board.

# 3. Role, purpose and membership of the Regional Partnership Board and its associated structures

The boundary change provides the chance to pause and reflect on the experience of operating Cwm Taf's Regional Partnership Board and Bridgend's experience as part of the Western Bay Board and a review of the Governance arrangements for the Cwm Taf Morgannwg Regional Partnership Board is a priority for 2019/20.

In response to these significant changes, Members of the Cwm Taf Regional Partnership Board and Bridgend representatives from the Western Bay Regional Partnership Board held a workshop to share views and to draw on experience to date to shape the development of the revised Regional Partnership Board. This workshop was held on the 7<sup>th</sup> February and the objectives of the event were to:

- (i) Help participants to understand the key characteristics (common needs; high level priorities; any differences) of the areas coming together;
- (ii) Capture participants' aspirations and ambitions for the Board to form its vision for the future;
- (iii) Identify and agree the broad principles for the operation of the new partnership;
- (iv) Identify how the Board should operate to ensure good governance, accountability and supporting structure(s), drawing on participants' experience to date of what works well and what could be refined etc.

- (v) To determine how the Board can address issues relating to coproduction, including approach to "Citizen's Voice" and "Social Value"
- (vi) To identify next steps and key action(s)

A Memorandum of Understanding, formally endorsed by each partner organisation through their formal governance processes, sets out the arrangements for the Cwm Taf Morgannwg Social Services and Wellbeing Partnership Board. Key elements are included below:

# The principles that inform the work of the Cwm Taf Morgannwg Social Services and Wellbeing Partnership

- We will promote and support effective communication across the partnership
- We will make sure the public and particularly users of our services and their carers are able to influence the work of the partnership
- We will focus on what matters to the people and communities of Cwm Taf
- We will promote and develop solutions towards preventing problems occurring or getting worse for people in Cwm Taf
- We will promote and support collaboration and integration
- We will make sure that we strike a balance between short term needs and longer term goals

# The key roles for the Cwm Taf Morgannwg Social Services and Wellbeing Partnership are to:

- Ensure that there is an agreed shared vision and a clear direction of travel for service development and integration of health, care and wellbeing
- Ensure that there are shared plans and strategies in place (supported by appropriate business cases) for delivering on the vision
- Ensure that the strategic plans are evaluated and reviewed against agreed and understood outcomes and performance indicators
- Lead a strategic approach to communicating and publicising the direction of travel and the progress made
- Ensure that the principles of the Board are upheld

- Maintain an effective overview of the resources allocated by the Partnership Board
- Report to the Public Services Board on progress, key issues and exceptions. escalating any barriers to progress within the Partnership Board for resolution
- Ensure that an annual report on progress is prepared and delivered as required to the Welsh Government.

The required membership of RPBs is set out in statutory guidance. Boards can also co-opt additional members. The RPB membership in 2018/19 was as follows:

Rachel Rowlands (Chair)	Chief Executive Officer, Age Connects Morgannwg				
Maria Thomas (Vice Chair)	Vice Chair, Cwm Taf University Health Board				
Cllr Geraint Hopkins	Cabinet Member for Adult Community Services & Welsh Language, RCT CBC				
Cllr Christina Leyshon	Cabinet Member for Children and Young People, RCT CBC				
Cllr Rhys	Cabinet Member for Stronger				
Lewis	Communities, Wellbeing & Cultural Services, RCT CBC				
Cllr David	Cabinet Member for Social Services,				
Hughes	Merthyr Tydfil CBC				
Lisa Curtis-Jones	Director of Social Services Merthyr Tydfil CBC				
Gio Isingrini	Director of Social Services RCT CBC				
Pauline Richards	Acting Chair, Interlink RCT				
Mike Slator	Care Forum Wales Representative				
Anne Roberts	Chair of VAMT (County Voluntary Council for Merthyr Tydfil)				
Ruth Treharne	Director of Planning and Performance/Deputy Chief Executive Cwm Taf UHB				
Clare Williams	Assistant Director of Planning and Partnerships Cwm Taf UHB				
Nicola	Head of Health and Wellbeing Cwm Taf				
Davies	UHB/Regional ICF lead				
Angela Hopkins	Director of Nursing, Midwifery and Patient Services Cwm Taf UHB				
Alan Lawrie	Director of Primary Community and Mental Health Cwm Taf UHB				
Karen Kitch	Service User representative				
Kay Tyler	Carer representative				

Jon Day	Social Care Wales			
Cllr Andrew Morgan	Leader, RCT CBC			
Cllr Kevin O'Neill	Leader, Merthyr Tydfil CBC			
Shadow Members during 2019:				
Cllr Huw David	Leader, Bridgend CBC			
Cllr Phil White	Cabinet Member for Social Services and			
	Early Help			
Susan Cooper	Corporate Director of Wellbeing, Bridgend			
	CBC			
Heidi Bennett	Chief Executive, BAVO			

<sup>\*</sup>Bridgend members became full members of the RPB on the 1<sup>st</sup> April 2019 however were in attendance during 2018/19.

The position of Chair and Vice chair are reviewed on an annual basis, and rotated across all statutory partner organisations. Partnership Board meetings are held on a bi-monthly basis. Each member is responsible for ensuring any strategic decisions and plans made by the RPB have partner body support and are communicated and considered through their respective governance systems.

The work of the RPB to deliver its objectives is supported through a range of regional mechanisms including the following:

#### Transformation Leadership Group (TLG)

During 2018/19 the Cwm Taf Transformational Leadership Group (TLG) was jointly chaired by the UHB's Director of Planning & Performance/Deputy Chief Executive and RCT's Director of Social Services. The group comprised of Executive and Senior Officers from the partner organisations.

The terms of reference for this group were agreed in 2016. Meetings are currently held on a monthly cycle. From 1<sup>st</sup> April 2019 formal membership was amended to include Bridgend Senior Officers.

The key responsibilities for this group include:

- Facilitating the Transformation and change management process for services across the region.
- Prioritising and resourcing the content of the Regional Implementation Plan (including the Training and Development plan and associated commissioning strategies).
- Facilitating the progress of the Regional Implementation Plan and considering exception reports, immanent decisions, areas

- of concern and barriers to progress from the programme lead officers.
- Advising and making recommendations to the Cwm Taf Social Services and Wellbeing Partnership Board.
- Liaising with Welsh Government officials regarding the Regional Implementation Plan and its progress.
- Evaluating new service models, transformation and related activity (e.g. initiatives funded through the primary care, intermediate care and transformation grants).
- Supporting the co-ordination of information across all lead officer work streams particularly where actions are interdependent.

## **Area Plan Delivery and Implementation Group (APDIG)**

The Area Plan Delivery and Implementation Group (APDIG) advise the Transformation Leadership Group (TLG) and Social Services and Wellbeing Partnership Board (SSWPB) on:

- Development of, and delivery against, the Cwm Taf Area Plan Work Programme, ensuring any risks are managed or escalated to the TLG or SSWPB as appropriate.
- Development and monitoring of implementation, of Joint Commissioning Strategies.
- Regular review and evaluation of the outcomes of the Intermediate Care Fund.
- Provide a link to wider transformation work being under taken across the region, including those areas of work being developed by the Cwm Taf Public Services Board, the Mental Health Partnership Board and other partnership initiatives.
- Any other emerging partnership priorities from implementation of the Social Services & Well-being (Wales) Act 2014.

## **Delivery Groups**

Feeding into APDIG and TLG are a number of Delivery Groups;

- Dementia
- Carers Group
- Older Peoples Group
- Children and Young People's Group
- Learning Difficulties
- Physical Disabilities Group
- Wales Community Care Information System (WCCIS)

The above groups are currently being reviewed as part of the governance arrangements for the RPB.

Other Regional groups that support the work of the RPB include the Cwm Taf Social Value Network, the Citizens Panel and the Cwm Taf Social Care Workforce Development Partnership.

## 4. Our Strategic Direction - Regional Plan 2018-23

The previous Cwm Taf region's Area Plan (called locally the Regional Plan) was published as required on 1<sup>st</sup> April 2018 and can be accessed via the link below;

http://cwmtaf.wales/how-we-work/plans-and-reports/cwm-taf-social-services-and-well-being-area-plan/

The regional priorities derive from the previous Regional Population Assessment that converted into strategic activities into the Regions Area Plan that covered Rhondda Cynon Taff and Merthyr Tydfil Local Authority Areas. Prior to the boundary change Bridgend priorities were reflected through the Western Bay Area Plan.

A key priority for 2019/20 is to align the Bridgend and Cwm Taf Area Plan priorities and ensure that they are amalgamated into a revised document that will identify regional priorities and inform the Governance arrangements, by producing a combined new Cwm Taf Morgannwg Regional Plan. This will inform the sub groups required to support delivery.

# 5. Meeting our objectives and improving outcomes: Priority areas for integration

As required, the Plan focusses on integrated services for a number of priority groups, as discussed further in the sections below, and includes examples of key regional actions. Our actions are based on the premise of delivering integrated services to people of all ages, recognising the contribution from a range of partners, not just health and social services. We want to build on our existing partnerships but also create new ones. Our approach to integration means that for those people needing care and support, they must be able to say:

"My care is planned by me with people working together to understand me, my family and carer(s), giving me control and bringing together services to achieve the outcomes important to me."

We have developed a number of Statements of Intent which describe service models offering a continuum from prevention and universal services through early intervention for those with emerging difficulties to specialist support.

# 5.1. Older people with complex needs and long term conditions, including dementia

The Region has developed a Joint Commissioning Statement of Intent for Older People's Services with a common vision for integrated health and social care services for older people:

## 'Supporting people to live independent, healthy and fulfilled lives'

In implementing the Statement of Intent, the following priorities have been included in the Regional Plan:

OP1 We will nurture supportive communities and family networks through easily accessible universal services, general and targeted health and wellbeing initiatives

OP2 We will offer integrate, time limited and goal oriented services to help people whose needs cannot be purely met by community and preventative support.

OP3 We will ensure people have access to holistic assessment that takes into account peoples needs and wishes, promoting choice and control to improve quality of life

OP4 We will ensure that older people whose needs require a specialist or substitute service are able to access those services at the right time in the right place and that they offer an improved quality of life.

### 5.1.1. Stay Well@Home

Commencing in 2016, the Cwm Taf Stay Well@Home (SW@H) is a collaborative project between Rhondda Cynon Taf CBC, Merthyr CBC and Cwm Taf University Health Board. This regional service aims to prevent unnecessary hospital admissions and ensure timely discharge for those people that have been admitted to hospital.

Stay well @Home is an integrated assessment & response service consisting of a multidisciplinary hospital based team (Social Workers, Occupational Therapists, Physiotherapists and Therapy Technicians), sited with the acute hospitals of Prince Charles (PCH) and Royal Glamorgan (RGH), and a range of community based responses across health and social care. The @Home Service based out of Dewi Sant Health Park is a team lead by health professions. The nursing element of this team was enhanced to provide Stay well @Home Team with a 4 hour nursing response, 7 days a week from 8:00am to 8:00pm, providing support for the following:

- Comprehensive nursing assessment for frail elderly patients approaching crisis
- Assessment for those patients who are frequently falling/ balance & gait problems, deteriorating mobility
- COPD
- IV antibiotics in the community
- Subcutaneous fluid administration in the community
- Advance care planning

This approach to working in partnership has transformed the experience of people in hospital, particularly at A&E, and through a revised approach to early intervention, joint working and flexible deployment of resources people are able to return to their home earlier with support rather than face prolonged unnecessary admission to hospital.

## **Activity and Performance**

A total of **3005** referrals made into the SW@HT during 2018/19, of which **1870** full assessments were undertaken (62%), with a further 15% being signposted onto more appropriate services following screening.

**82%** of actioned referrals were responded to in under 1 hour, with 100% of A&E based referrals being responded to in under 1 hour. 3% increase on previous year.

77% of those assessed were discharged home, with 84% being discharged home in under 24 hours from time of assessment to time of discharge.

**67%** were discharged from the 'Front Door' (A&E/CDU/AMU) and **33%** from the wards.

**691** A&E referrals were accepted, with 70% returning home in under 24 hours from time of assessment. 487 admissions were avoided directly from A&E following SW@HT involvement.

Facilitated discharged/overall reduced length of stay – 352 people were supported in returning home in a timely fashion via SW@HT 'Trusted Assessor' function.

**99%** of those assessed by the SW@HT were living in their own homes and/or with family.

Of those discharged home following SW@HT input, **51%** were discharged with the support of Support@Home/Initial Response (664 people/46% Support@Home RCT, 74people /5% Initial Response MTCBC).

A total of **2610** referrals were made to services to facilitate discharges home (these are services spanning community based health, social care

and third sector), which included **25%** of people returning home with assistive equipment.

**132** people were referred to the @Home service (9% of those discharged home) along with 51 people being referred to the Your Medicines Support@Home Team (4% of those discharged home).

A Transformation Funding Bid was developed to expand the SW@H to develop a Stay Well in the Community Approach to prevent conveyance to hospital and a response to community professionals such as nurses, GP's in and out of hours and WAST with a greater emphasis on the use of Technology to support the service user. This proposal has now been successful in securing Transformation funding and will be implemented in year.

#### 5.1.2. Virtual Ward

This multi agency and multi disciplinary project piloted in a Cynon Valley GP Practice supports patients with frailty and complex health and social care needs. It involves primary care, Third sector, social care and the Welsh Ambulance Services Trust in an anticipatory approach to provide support to the top 3% of service users in the Practice. The aims are

- Improving patient care and access
- Proactive healthcare delivery by using information on hand to target vulnerable groups
- Improve communication between a range of stakeholders from health and social care, as well as the third sector,
- Improving patient Records to be able to use them proactively
- Utilise a multidisciplinary team to construct holistic care plans built around patient need

The current model is managing approximately 240 patients per year and has had a dramatic impact reducing GP Out Of Hours contacts by 91%, reducing unscheduled care admissions by 76.3% and reduction in in-hours GP contacts by 57%.

This model has seen significant success and is a key part of the Transformational model (noted in 5.1.2) for the future which will also embrace more actively our local authority and third sector partners, transforming the way we work to improve patient outcomes.

#### 5.1.3. Dementia

Dementia Friendly Communities Co-ordinator commenced in post in January 2019 hosted by Gofal. Currently mapping the schemes within

our communities to identify gaps and ways to improve connectivity, working closely with the Alzheimer's Society DFC Co-ordinator.

Dementia Community Capacity Grants scheme was publicised widely and all applications assessed by a panel. 10 third sector organisations have been granted funding, providing a range of activities and support networks for people living with dementia, their carers and families.

- Still Me intergenerational project
- Valleys Kids support group and DFC community centre
- Gellideg Foundation Group –support group and activities
- Arts Factory opening up activities to people living with dementia, including transport provision
- British Red Cross 12 week befriending service
- The Parent Network carers support group
- St Matthew's Church support group
- Pontyclun Community Council support group
- Dementia Friendly Maerdy promotion of support group
- Age Connects Morgannwg engagement to inform how the Cynon Linc Hub and ACM can support people living with dementia
- GP Practice Development visits Dementia Awareness has now been included in the GP Practice Development Visits (PDV). The primary care team ask specific questions around staff awareness & training, appointments systems, referrals to advice and support etc. In addition to this the team have been distributing leaflets and posters to actively promote the Dementia Reading Well Scheme and availability of the books in the local libraries.
- Dementia Friends Training the Taff Ely Primary Care Cluster is aiming
  to become a Dementia Friendly cluster and have arranged Dementia
  Friends training for their GP practices. They are also working with the
  Alzheimer's Society to develop more tailored training for GP practices
  to ensure staff have the required knowledge and skills. Dewi Sant
  Health Park is being used as a community hub to train 47 staff as
  Dementia Friends with the aim of making this a Dementia Friendly site.
- RCT and MT CBC Social Care Workforce Development Programme:
- A comprehensive training programme is in place for the social care workforce on dementia care and its management.

## Merthyr Tydfil CBC:

• Within Merthyr Tydfil we have committed to embedding the Dementia Care Matters approach across the Local Authority. This has included

- providing training to all Local Authority Older People's (OP) Care Home managers, the Older Person's Day Service Manager, Social workers (including the Senior Social Worker) in the Psychiatry of Old Age Team and contract monitoring staff.
- The OP care home managers and day service manager have also completed the City & Guilds Level 3 award in awareness of dementia. Other dementia training is also available through the social care workforce development team.
  - Memory Assessment Services we are developing a new service model that ensures a consistent approach to assessment and diagnosis, and provides follow up information, advice and support for the individual and their carer/family. The service will be enhanced by the addition of the new Occupational Therapy MAS team which is being funded through ICF. This team will provide an early stage assessment of the individual's functional and occupational needs and offer evidence based interventions to help empower the person to retain their independence, meaningful activity and social inclusion.
  - Specialist Dementia Intervention Team this team provides specialist advice and support to families and care home staff to enable them to understand, manage and prevent 'behaviours that challenge'. The model of care is evidence based offering biopsychosocial individualised formulation led interventions. The aim is to reduce distress amongst people with dementia, their families and carers, to help prevent crises which often lead to hospital/ care home admission and carer breakdown, and to improve quality of life for all concerned.

Development of a Health and Wellbeing Centre for people with Dementia in Treorchy

ICF Capital in 2017/18 contributed to the costs of refurbishing Ysbyty George Thomas in Treorchy as a Health and Wellbeing Centre for people with cognitive and memory problems. The £1.5m Centre aims to transform care and support for people living with dementia and promotes a move away from hospital-based care. A range of services including day care, assessments, clinics, community nursing, therapies and care home teams as well as local authority and third sector services will be delivered from the Centre, which has been designed to reflect the strong history of the local area and promote a 'community' feel.

It is one of the key milestones in Cwm Taf's Valley LIFE project, which has seen a range of sectors come together to develop plans to redesign care

for people with dementia by helping them to live well in or closer to their own homes.

## 5.2. Children with complex needs due to disability or illness

During 2017/18, a draft Cwm Taf Regional Statement of Intent for Supporting Children, Young People and Families has been produced jointly by partners in Cwm Taf in response to the population analysis, and building on consultation with the public and professionals in 2016. It is intended to remain relevant until 2022 and is proposed as the shared vision, principles and objectives to direct the work of all partners.

The Statement of Intent is focused on the following shared vision, that:

- Children, young people and families in Cwm Taf will live safe, healthy and fulfilled lives and achieve their full potential.
- Families and communities will be more resilient and independent.
- Our focus on communities will give children, young people and families the best possible environment to thrive.
- The balance of resource will shift from safeguarding, substitute and complex care to early and targeted help.

An Engagement plan was developed and implemented at the beginning of 2018 to ensure that the draft Statement matched the shared needs and expectations of stakeholders. The responses received overall were positive but also reflected the need for more detailed information to show how the Statement will be implemented and what difference it will make. The RPB recognises that continuous engagement and a co productive approach will be essential in the ongoing work to deliver the Statement.

The final Statement was formally approved by partners in July 2018. The Regional Plan includes the priorities below but a set of detailed milestones and deliverables for partners under each objective in the Statement is currently being developed.

CYP1 We will have the right universal services at the right time to promote wellbeing, achievement and independence CYP2 We will focus on early help for those with emerging difficulties CYP3 We will target intensive support for those who are really struggling

#### 5.3. Carers

The Partnership's Carers Strategy 2016-19 has the following vision:

Carers of all ages in Cwm Taf will be recognised and valued as being fundamental to supportive and resilient families and communities. They will not have to care alone and will be able to access information, advice and support to help meet their needs, empowering them to lead healthy and fulfilled lives, balancing their caring role and their life outside caring.

The Regional Plan contains the following actions:

- C1 Identifying carers of all ages and recognising their contributions
- C2 Providing up to date, relevant and timely information, advice and assistance to Carers of all ages.
- C3 Providing support, services and training to meet the needs of Carers of all ages
- C4 Giving Carers of all ages a voice with more choice and control over their lives
- C5 Working together to make the most of our resources for the benefit of carers of all ages

In September 2017, the RPB commissioned the Welsh Institute of Health and Social Care to work with partners to review our current service model for carers and consider how we could provide more effective integrated services across the region. The Summary report of this work produced in January 2018 includes a blueprint of what a comprehensive "offer" for Cwm Taf carers could look like across five themes

- Access, information, advice and assistance
- Support services
- Employment support services, education and training
- Respite and breaks
- Making it happen

We have continued to explore how best to take forward recommendations from the review during 2018/19.

Welsh Government have 3 national priorities that we have also addressed alongside the Cwm Taf Carers Strategy:

- 1. Supporting life alongside caring all Carers must have reasonable breaks from their caring role to enable them to maintain their capacity to care, and to have a life beyond caring
- 2. Identifying and recognising Carers fundamental to the success of delivering improved outcomes for Carers is the need to improve Carer's recognition of their role and to ensure they can access the necessary support
- 3. Providing information, advice and assistance it is important that Carers receive the appropriate information and advice where and when they need it

A separate detailed Carers Annual Report is required by WG. The Cwm Taf Carers Annual Report for 2018/19 has been approved by the Regional Partnership Board at its July Meeting.

## 5.4. People with Learning Disabilities

Following engagement and a range of activities to raise awareness and involve service user, carers, public and other stakeholders in the development of a Joint Statement of Strategic Intent for Children, Young People, and Adults with Learning Disabilities (that includes autism and complex needs) and their families, the Partnership approved the final version in November 2017.

The Statement of Intent describes a shared commitment to deliver a new model for health and social services, focused on the following key messages:

- Maximise the use of universal services
- Increase early intervention, prevention, information, advice and assistance
- Build community support and develop people's independence
- Sustain people in their own homes
- Enable people to live full lives and achieve their potential
- Keep people safe
- Make the best use of our resources

To oversee implementation of the Statement of Intent, a Joint Steering Group was established and an action plan developed. A number of work groups met during 2018/19 to address the following themes:

- Preventing loneliness and isolation by increasing community inclusion
- Reducing Stigma
- Housing
- > Further Education
- > Employment, training and lifelong learning
- Communications

The original themes have been further refined with three priorities being carried forward into 2019/20;

- Health
- Home
- Employment

Workshops have been held early July to progress the themes.

### 5.5. Integrated Family Support Teams (IFST)

Integrated Family Support Teams (IFST) were initially established by the Children and Families (Wales) Measure 2010. Social Services and Wellbeing (Wales) Act 2014 Part 9 Code of Practice and related regulation now sets out statutory requirements in relation to partnership arrangements including IFST.

The aim of the Integrated Family Support team is to develop family focussed, evidence based interventions to enable parents to achieve necessary behaviour changes to improve outcomes for their children.

The objectives of the Cwm Taf Integrated Family Support Team are to:

- Reduce harm to children, resulting from parental drug and alcohol misuse, domestic violence, parental mental health difficulties and parental learning disabilities.
- Improve Well-being outcomes for children affected by parental drug and alcohol misuse, domestic violence, parental mental health difficulties and parental learning disabilities.
- Reduce the number of children becoming looked after by the local authority.
- Reduce the number of children requiring statutory social work involvement.
- Support the training and development of the health and social care workforce.

The IFST was developed on a regional basis in most areas in Wales in line with Health Board footprints. In April 2019, the regional footprint changed from Rhondda Cynon Taf and Merthyr Tydfil to include Bridgend locality. This will require changes to the current configuration of services, Board arrangements and legal agreements.

# 6. Meeting our objectives and improving outcomes: Enablers and how we use our regional resources

### 6.1. Integrated Care Fund

Welsh Government has published Guidance on the Integrated Care Fund (ICF) effective from 1<sup>st</sup> April 2018 The Guidance sets out the objectives; conditions; governance requirements; and reporting arrangements to Welsh Government for ICF in 2018/19.

The Integrated Care Fund aims to drive and enable integrated and collaborative working between social services, health, housing and third and independent sectors..... to test new approaches and service delivery models..... to support underpinning principles of integration and

prevention. Evaluation and learning lie at the core of the ICF..... and essential that ICF programmes or projects are designed with this in mind".

During 2018/19 a range of schemes were progressed across Cwm Taf Morgannwg with the objectives of:

- Improving care co-ordination between health, social care, third sector and housing;
- Promoting/maximising independent living opportunities;
- Avoiding unnecessary admission or delayed discharge;
- Supporting recovery by increasing reablement provision;
- Establishing more proactive approaches;
- · Facilitating integration; and
- Improving outcomes.

These included the Stay Well@Home service that continues to deliver an important component of the regional approach to preventing the escalation of need for care and support.

All ICF schemes report quarterly to TLG and RPB using a Results Based Accountability template that identifies how much has been done, how well has it been done and how people are better off/what difference the service has made. There is also an annual review of all schemes to inform investment decisions for the following year.

The Region also reports quarterly to WG which has confirmed that we have provided a good level assurance that the RPB has effectively managed the delivery of the ICF across the Cwm Taf region. Evidencing the impact of schemes remains challenging and we intend to undertake more work in 2019/20 to review our ICF schemes as part of a pathway approach which should assist in providing better outcome information.

The level of ICF funding coming into the region will increase from £5.608m to £12.7m this is due to inclusion of the Bridgend ICF allocation and increased funding available. With the volume of projects funded will increase significantly.

In addition to revenue the available ICF capital will increase from £2.99m to £5.7m during 2019/20.

The local infrastructure to support and manage the volume of funding is being reviewed to ensure robust governance arrangements are in place to enable the Partnership to deliver the priorities of the Board.

### 6.2. Regional Commissioning Arrangements

During 2017/18, working with the Institute of Public Care, Oxford Brookes University (IPC) we reviewed the arrangements for commissioning across

the region with a view to the development of a small Regional Commissioning Unit (RCU), developed in partnership.

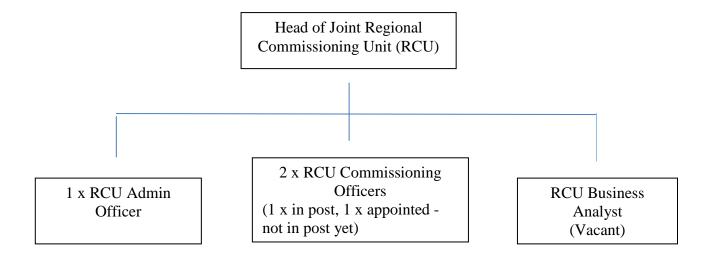
This would complement and support the resource already within partner organisations so that the Region could develop and implement regional commissioning plans for integrated service provision for a variety of client groups and develop joint community arrangements for the accelerated provision of integrated health and social care.

## 6.2.1. Regional Commissioning Unit

One of the key tasks highlighted within the Cwm Taf Regional Plan was to create a Regional Commissioning Unit, whose role is to work across the region, both with Local Authorities and Cwm Taf Health Board in order to progress local commissioning arrangements to meet the wellbeing objectives identified within the Regional Plan.

The Commissioning Unit was formally set up in the middle of March 2019 and four staff are currently in post.

The current staff structure is as follows:



#### 6.3. Social Value Network

The Social Value Network and associated Social Value Forum was created as part of the Regional Leadership arrangements to support social value based providers develop a shared understanding of the common agenda and to work together to enhance community capacity.

Three successful Social Value Network events took place with excellent involvement and attendance of large and small third sector organisations

across Cwm Taf Morgannwg and representation from service users and carers.

The three big themes were; Children and Young People (December 18); Investing in Community Support to tackle Loneliness and Isolation (July 18) and 'Citizens, Coproduction and Commissioning.'

## What are the Cwm Taf Social Value Network priorities for action?

- Develop a Vision of Transformation in Community Support: Agree a statement of intent and action plan that delivers a model of community support 'Stay Well in Your Community' that brings support and solutions together that supports rather than divides different groups and does not lead to working in silos.
- Transform Community Support: Collaborate and coproduce local placed based solutions including the development of strategic community hubs and community networks, led by SSWB Partnership Board to support 'Stay Well in Your Community'. This is about transforming what we do through community ownership and community action. It is not co-location of public services (it is not about creating One Stop Shops and public service improvement).
- Transform Commissioning Arrangements: Ensure information, advice and guidance becomes mainstreamed into all commissioned services including GP contracts – community coordination is 'everyone's business' – start with the 'What matters to you' conversation - not 'What service do we provide'.
- **Transform Funding**: Long-term revenue and capital funding needs to be secured for third sector to work collaboratively with public services to develop a volunteering base, develop compassionate communities, and lever in external funding. Decisions on the use of mainstream funding that impacts on wellbeing needs to be considered collaboratively alongside 'partnership' funding.
- Transform Collaboration: WG see clusters not as GP clusters but as locality based collaborative groups a local version of the SSWB Partnership Boards. These structures and resources need to be joined together with decision makers, commissioners, GP's and public service partners working together. For example, all partners attending a collaborative Social Value Network to share ideas.
- Transform Culture: Too many barriers exist to individuals, communities and the third sector being active. A shared vision shared across all partners of supporting and resourcing communities, including using asset transfer to mobilise community action not stifle it. The 5 ways of working should ensure all public service providers involve the citizens, communities and partners when planning service changes – before decisions have been made.

### 6.4. Health, Housing and Social Care Conference

In October 2018 Cwm Taf RPB held a Health, Housing and Social Care Conference to explore opportunities for more effective collaboration across the sectors and accommodation led solutions to the health and social care challenges faced by priority groups for integration under part 9 of the SSWB Act (which includes people with dementia and carers).

The conference brought together over 50 professionals, practitioners and stakeholders from across the Cwm Taf and Bridgend health, housing and social care communities. The conference explored opportunities for more effective collaboration across sectors, including the development of integrated solutions to improve service delivery and maximise the contribution housing interventions can make in people's health, wellbeing and independence.

Learning objectives for the day included building a better understanding of local need and demand, building an understanding of each other's sectors and challenges being faced, sharing what works well/best practice models, projects and outcomes achieved in the region and elsewhere. It also provided opportunities for networking and more effective working relationships and explored proposals for a pipeline of ideas and bids for future health, housing and social care projects.

Following the conference, feedback was very positive with a strong desire and commitment to work together more effectively across the sectors to harness the assets, skills, capabilities and capacity it was agreed were available locally. This will help to maximise the contribution housing can make to health and wellbeing, maintaining independence and reducing health inequalities.

A second conference is being planned for 2019 and a new CTM RPB Housing Community of Practice has also been established to provide the focal point for sharing of good practice and collaborative working around housing for all vulnerable people.

The Board recognise the importance of housing and terms of reference have been amended to include additional representation with members to be identified as part of governance review.

#### 6.5. Pooled Funds

In the former Cwm Taf region, pooled budgets are in place for youth offending services, integrated equipment services and learning disability packages of care. These funds provide an enabler for increasing value and improving outcomes through integrated and seamless services for a range of patient and client groups.

An overarching Pooled Fund for residential and nursing care has been established and is operating as set out in a Legal Agreement between partners, hosted by RCT CBC. It essentially encompasses all older persons' independent residential and nursing placements in establishments located within the regional footprint.

Bridgend's Care Home Pooled Funds were still within the Western Bay for 19/20 as a transition year. And 4 key actions were identified as forward work plan activities, with a view to bringing Bridgend into this arena by 31st Mar 2020, focussing on:

Action 1 - Market Positions Statements:

- RCT/MT; Market Position Statements are in place with a number of actions and recommendations presented from them.
- Bridgend need to review their Market Position Statements in light of the new boundary changes

Action 2 - A need was identified to review pooled fund contracts in line with legislation which highlights regional contract arrangements be considered.

Action 3 – Reviewing and understanding the pooled fund arrangements – a separate sub-meeting was to be held focussing only on the funding arrangements, in order for Bridgend to be informed and gain understanding of how local arrangements function, with a view to considering future changes.

Action 4 - Consideration be given to future commissioning arrangements across all regions, in light of the Bridgend boundary changes, and to progress a Commissioning Strategy for the region.

# 7. A progress report on Transformation Fund supported projects in the region.

Since March 2019 significant progress has been made by the Regional Partnership Board in furthering plans to implement the ambitious programmes of work detailed within the 'Stay Well in Your Community' (SWIYC) and 'Accelerating the Pace of Change for Our Integrated Services' (APCIS) proposals, both of which aim to build upon successful schemes to develop services around people within their communities; providing timely responses to health and social care needs and building well co-ordinated, resilient communities.

Clarity and assurance has been provided around:

- An implementation plan which combines all of the work streams within both proposals.
- The full cost detail, including posts, underpinning each work stream.
- The breakdown of recurrent and non-recurrent costs.
- A sustainability plan that cuts across all work streams within both the SWIYC and APCIS.
- An agreed financial risk management method and timeline to deliver it.

A programme management approach has been developed to ensure that both SWIYC and APCIS works streams are now able to move into the implementation phase at pace, optimising the benefit to our population within the time frame of the transformation programme.

## Key tasks to be completed:

- A joint approach to the recruitment of posts essential to underpin each work stream.
- Clear identification of outcome measures and agreement of an evaluation framework across all work streams.
- Additional workshops with work stream leads and members of MDT to further develop patient pathways from referral, through the service to discharge highlighting interdependencies and additional actions required

## Anticipated challenges:

- Implementing two programmes of work within the given timeframe.
- Producing robust data over reduced timeframe to accurately evaluate effectiveness of changes made.
- Delivering a whole system change that will achieve the required aims and objectives of the proposal whilst delivering the sustainable financial plan.

## 8. Integrated Autism Service

This is a regional service that became operational in the last quarter of 2017/18.

#### The service

- Is integrated across the LAs and UHB as it had been found that the majority of issues stem from people falling between gaps in services
- Is age wide to avoid transition issues
- Focusses on people with mild to moderate needs as existing services primarily focus on the specialist and complex end of need.
- provides information, advice, support and training eg in relation to emotional, anxiety and behavioural issues and aims to reduce social isolation, ASD specific issues and help support the development of

life skills, support to access to social, leisure and employment opportunities

Develops understanding within generic and community services.

The detailed impact of the service is captured through WG quarterly monitoring returns which require information on national service standards, activity data and outcome data in relation to quality of life, anxiety and depression.

# 8.1. Third sector schemes: Community Coordinators and a Community Capacity Grant scheme (CCGS)

There are 5 Community coordinators working across Cwm Taf with older people, groups and communities to reduce loneliness and isolation and promote independence. They provide information, advice, support and signposting to activities and services in local communities. New groups and initiatives are identified through community research, developed and promoted. In 2018/19 1222 referrals were received and 5870 signposts and/or referrals to third sector and statutory services were made.

The Cwm Taf Community Capacity Grant scheme was set up to enable third sector projects to bid for funding to provide a wide range of preventative services that improve health and wellbeing. It is often a test bed for new approaches and responding to gaps identified by the work of the Community Coordinators.

All the schemes funded through the CCGS use a well-being tool developed by Merthyr Tydfil CBC to measure the impact of their service and outcomes achieved. Participants are questioned at the beginning and end of interventions/projects to help determine if their well-being has improved in terms of the aspects highlighted below:

Good Relationship Measured by the statement

• I've been feeling close to other people

Meaning and Purpose Measured by the statements (the average of all three is the score)

- I've been feeling useful
- I've been dealing with problems well
- I've been able to make my mind up about things

Good Feeling Measured by the statements (the average of all three is the score)

- I've been feeling optimistic about things
- I've been feeling relaxed
- I've been thinking clearly

# 8.2. Pooled budget for packages of care for people with learning disabilities

A pooled budget arrangement has been set up for joint packages of care for people with learning disabilities. 14 joint packages (ie where an individual's needs have been assessed as being the joint responsibility of the UHB and one of the LAs) are currently included in the Fund in order to test out the approach and benefits. These include more proactive case management and joint review processes to ensure that people receive the care they need in the right place, with the desired effect of implementing move on arrangements where appropriate that improve outcomes.

14 joint reviews were undertaken in 2018/19.

## 8.3. Welsh Community Care Information System

The Welsh Community Care Information System (WCCIS) Programme has been set up to assist the transformation of community services in Wales. WCCIS is a single ICT system for Social Care and Community Health including Social Workers, Community Nursing, Mental Health and Therapies.

WCCIS is designed to support:

- the delivery of integrated, co-ordinated care arrangements to citizens in the community through the provision of technology and information for community staff
- community based services in order to deliver more effective and efficient services to citizens in their own homes
- emerging service models and service redesign

At a Regional Workshop at the end of February 19, it was agreed that given Cwm Taf Morgannwg (April 2019) would have 3 "live" local authorities and a UHB that was actively using WCCIS there were real opportunities to align to a more effective regional approach (acknowledging that this had been problematic to fully achieve previously due to the significance of local implementation). Opportunities included:

- Working towards the same vision and goals
- Rationalisation of forms with a view to using a standard template across the region
- Standardised processes / reporting
- wider joint strategies (or strategies that compliment each other) e.g. Agile / Mobile Working, Communication and Engagement, Training etc.
- Work towards a single integrated record
- Greater collaboration sharing knowledge and expertise.

• Simplify access arrangements, making things easier to use, whilst ensuring robust regional governance arrangements

# 8.4. Workforce - Cwm Taf Social Care Workforce Development Partnership (SCWDP)

The purpose of the Cwm Taf SCWDP which was created in April 2016 is to improve the quality and management of social services provision by applying a planned approach to learning and development, and by seeking to increase the take-up of training across the social care sector. It aims to

- under the Social Services and Well-Being (Wales) Act have the knowledge, skills and competencies to operate under the new legal framework and that the necessary cultural changes are driven forward
- Ensure that all core learning and development for social care staff, including induction and qualification training, is reframed to reflect the new legal framework
- Support Social Work training
- Support skill development for frontline social care workers
- Support the infrastructure for learning and development

Securing a sustainable and good quality workforce across health and social care is a priority action in the Regional Plan. The "Cwm Taf Careers, Recruitment and Retention Strategy and Action Plan 2018-21" is based on the principle of "One sector; one workforce; one approach" and identifies the following priorities, some for local action and some which need national attention.

- Social value of work
- Commissioning and contracting arrangement
- Unpredictability of demand
- Attracting the right people with the right values
- Leadership, Culture and valuing the workforce
- Working conditions and flexibility
- Training and qualifications
- Pay and benefits
- Career progression and continual professional development
- Operating systems

We will know if we have been successful by reducing staff turnover and the number of vacancies by 5% or more over the years 2018/19 to 2012/22 as well as increased staff satisfaction.

## 8.5. Engagement and co-production

The RPB is committed to further development of a co-productive and asset based approach to engagement and involvement. An initial set of priority areas for co-production have been identified as being emotional wellbeing of children and young people and loneliness and isolation.

#### 8.6. Working with other Partnerships

The Partnership Board reports to Cwm Taf Public Services Board (PSB) on its areas of specific responsibility in health, care and wellbeing. The Chair of the Partnership Board is a member of the PSB for that purpose and to promote effective alignment between the SSWB Act and the Well-being of Future Generations Act.

This representation is further supported at the PSB Strategic Partnership Board by the membership of the joint Chairs of the Transformation Leadership Group and these arrangements are proving effective in coordinating priorities and effort in the region.

The RPB also works closely with other Cwm Taf strategic partnerships including those listed below, some which have responsibilities identified in the Regional Plan to deliver on key actions:

Together for Mental Health Safeguarding Board Community Safety Partnership Board Regional Supporting People Committee

Areas for better alignment with the PSB for 2019/20 are identified as;

- Early Years
- Tackling Loneliness and Isolation / Social Prescribing
- Place Based Approach

#### 8.7. "A Healthier Wales: Our Plan for Health and Social care"

Welsh Government has issued its plan in response to the Parliamentary Review of the Long Term future of Health and Social Care. The Plan calls for a seamless whole system approach to health and social care, seeking to both speed up and embed change.

The Plan states that "RPBs will occupy a strong oversight and coordinating role. Regional partnership working will be at the heart of how we develop high value models of integrated health and social care." The Cwm Taf RPB welcomes the opportunity to drive the innovation and transformation agenda locally and sees this as the time to move from a system of reactive

interventions to one of true anticipatory care which proactively manages escalation of need through seamless working.

#### 9. Forward look

In 2019/20, the Partnership will be focussing on the following:

- Developing and embedding new governance arrangements for the new region.
- Development of communications strategy and communication capacity to support the Regional Partnership Board
- Develop of a partnership logo for the new region
- Delivering on the Transformation proposals.
- Explore opportunities for increased social value sector engagements
- Improve the RPB communication.
- Utilise the opportunities for further developing monitoring and evaluation through additional grant for 2020 and 2021.

For more information about this Annual report or to obtain a copy of other documents referred to in it, please contact:

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# RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL MUNICIPAL YEAR 2019/20

HEALTH & WELLBEING SCRUTINY COMMITTEE

24<sup>TH</sup> SEPTEMBER 2019

REPORT OF THE GROUP DIRECTOR, COMMUNITY & CHILDREN'S SERVICES

Agenda Item No:

RESPONSE FROM CABINET TO THE RECOMMENDATIONS OF THE SCRUTINY WORKING GROUP ON EMINURSING BED PROVISION.

Author: Neil Elliott, Director of Adult Services. Tel No. 01443 444603.

### 1. PURPOSE OF THE REPORT

1.1 To provide the Health and Wellbeing Scrutiny Committee with Cabinet's response to the recommendations of the Scrutiny Working Group on EMI Nursing Bed Provision that was reported to the Cabinet in March 2019.

### 2. **RECOMMENDATIONS**

It is recommended that the Health and Wellbeing Scrutiny Committee:

2.1 Consider Cabinet's response to the recommendations of the Scrutiny Working Group on EMI Nursing Bed Provision and that the progress being made to address these recommendations be monitored by the Health and Wellbeing Scrutiny Committee.

### 3. REASONS FOR RECOMMENDATIONS

3.1 The need for Health and Wellbeing Scrutiny Committee to consider Cabinet's response to the recommendations of the Scrutiny Working Group on EMI Nursing

Bed Provision and consider the progress being made to address the Working Group findings and recommendations.

#### 4. BACKGROUND

- 4.1 A Health and Wellbeing Scrutiny Committee Working Group conducted a review of EMI Nursing Bed Provision within Rhondda Cynon Taf. This followed a presentation to the Health and Wellbeing Committee in November 2017 that identified a number of challenges faced by Adult Mental Health Services, including the lack of EMI nursing care home beds.
- 4.2 The Scrutiny Working Group reported the findings of the review to the Health and Wellbeing Scrutiny Committee at its meeting in February 2019 and the following two recommendations were made:

**Recommendation 1:** That Scrutiny continue to monitor delayed transfers of care performance, and in particular issues relating to the availability of EMI nursing care home provision

**Recommendation 2:** That Cabinet ensure the recommendations in the Cwm Taf Market Position Statement are being delivered in particular those aimed at the more specialised provision and need for more provision linked to complex care i.e. dementia and nursing dementia.

4.3 The Scrutiny Working Group findings and recommendations were reported to Cabinet in March 2019.

#### 5. CABINET RESPONSE

- 5.1 The Cabinet is pleased to confirm their agreement to the Scrutiny Working Group recommendations and thank the Health and Wellbeing Scrutiny Committee for undertaking this important work.
- 5.2 A detailed response is provided below for each recommendation:

Recommendation 1: That Scrutiny continue to monitor delayed transfers of care performance, and in particular issues relating to the availability of EMI nursing care home provision.

- 5.3 Cabinet recognises the importance of both avoiding unnecessary hospital admissions and ensuring timely discharge from hospital. Reducing delays in people being discharged from hospital remains one of the top priorities for Adult Services.
- 5.4 Despite considerable effort, delays in transfer of care for social care reasons increased during the 2018/19 as shown in the table below:

Performance Measure	2016/17 Performance	2017/18 Performance	2018/19 Performance
Rate of delayed transfers of care for social care reasons for people aged 75+ per 1,000 population aged 75+	4.9	3.0	5.1
Rate of delayed transfers of care for social care reasons for people aged 18+ per 1,000 population aged 75+	4.9	1.9	3.4

- 5.5 In 2018/19, there were 99 delayed cases for people aged 18 and over, of which 67 were for people aged 75 and over. This performance is higher than the corresponding number of cases in 2017/18 of 63 and 36 respectively.
- 5.6 Analysis of the increase in delayed transfers of care revealed a significant reduction in the number of delays due to care home choice/availability. However, as more people are supported to live at home, pressure on supply and capacity of services has increased and consequently this has had an adverse impact on delays awaiting commencement of care packages resulting in the number of delays for this reason increasing during the year.
- 5.7 Adult Services are continuing to work closely with all partners, in particular home care providers to reduce delays. Adult Services' StayWell@Home Service, the Support@Home service and the Brokerage Team are all helping to minimise delays in arranging community care packages of support. Adult Services have looked to extend the Broker Service to cover residential care placements and pilot arrangements within selected teams to review effectiveness. As a result, Adult Services will implement a new bed booking system in 2019/20.
- 5.8 No-one wants to remain in hospital any longer than they need to. However, discharge planning for people often older people with complex support needs will take longer and involves a multi-disciplinary response from both health and social care working alongside the citizen to achieve the ultimate goal for that person going home.
- 5.9 Significant work is being undertaken across the health and social care both strategically, structurally and operationally to improve performance.
- 5.10 For example, proposals to transform the delivery of social care in Rhondda Cynon Taf will see an additional £7.2m investment aimed at providing more choice and independence for individuals, while also reducing the pressure on GP surgeries and hospitals. Through this funding, £2.9m-a-year will be invested into Council Services, alongside additional Cwm Taf Morgannwg funding for Rhondda Cynon Taf and Merthyr Tydfil, worth £4.3m-a-year.

- 5.11 The Council is progressing several local projects aimed at transforming the way health and social care is delivered after Cwm Taf Morgannwg Regional Partnership Board received the funding support from Welsh Government earlier this year. The funding will help improve access to social care on weekends, expand the use of technology to support people living in their own homes, and bring health and social care closer together to co-ordinate the care for people with complex needs. The following projects will be launched in spring 2020:
  - Stay Well @Home Rapid Response the next phase of this service will enable community-based health, well-being, pre-hospital and social care professionals to access a same-day service of practical support to help people to live at home. It will be accessible from 8.30am to 8pm daily, providing practical support for people with ill health – for instance help with washing and dressing. The service will help people who do not need to go to hospital but need extra support to manage at home.
  - RCT Assistive Technology Lifeline this service will be enhanced to provide a
    24-hour mobile rapid response service, for 365 days a year, to people using an
    RCT lifeline pendent. The service will respond to people who have fallen or are
    unwell when they press their pendent. It will ensure individuals have the right
    equipment to support them to remain living as independently as possible in
    their own homes. It will also provide reassurance to residents that there is
    always help on hand.
- 5.12 The continued monitoring and scrutiny of delayed transfers of care performance by Health and Wellbeing Scrutiny Committee is an important task.
  - Recommendation 2: That Cabinet ensure the recommendations in the Cwm Taf Market Position Statement are being delivered in particular those aimed at the more specialised provision and need for more provision linked to complex care i.e. dementia and nursing dementia.
- 5.13 Overall, good progress has been made implementing the Cwm Taf Market Position Statement approved by Cabinet in November 2017.
- 5.14 In line with the strategic intentions set out in the Market Position Statement for Care Home Services, the Council has undertaken a review of the Council's residential care homes (and day services) provision for older people.
- 5.15 As Scrutiny Committee Members will be aware, Cabinet agreed on 11th September 2019 to further consult on specific proposals for the future residential care services across Rhondda Cynon Taf, having considered feedback from an extensive consultation following an independent review of current provision.

- 5.16 Recent analysis has confirmed a trend towards increasing demand for people with more complex and nursing needs, and a decreasing demand for people with less complex and residential needs as people are able to access more support in their own homes. The sourcing and securing of nursing care bed provision have been identified as a priority due to capacity and supply pressure in the market.
- 5.17 Currently, there is limited capacity for nursing care and, in particular EMI nursing care. Capacity does fluctuate and this may be seasonal issue related to increased respite requirements over the summer holiday period and continues to monitored by Adult Services and the Cwm Taf Morgannwg University Health Board.
- 5.18 Rhondda Cynon Taf Council, Merthyr Tydfil Council and Cwm Taf Morgannwg University Health Board are working together to improve services and support for the people and since April 2018 we have a pooled budget for care homes provision. The overall intention is to work together to commission services which will lead to better outcomes for service users, more effective decision making, and more effective use of pooled resources. Arrangements are in place to bring Bridgend Council into the pooled fund from April 2020 as part of the recent Regional Partnership changes.
- 5.19 Rhondda Cynon Taf Adult Services act as the host for the pooled fund and an Operational Pooled Fund Board has been established to oversee the pooled fund resources and reports to the Cwm Taf Morgannwg Partnership Board.
- 5.20 As part of the Operational Pooled Fund Board, Rhondda Cynon Taf Council, along with Regional Commissioning Partner Organisations have agreed to explore options to develop the market to shift the profile of care home provision linked to anticipated dementia and nursing care needs as one part of a revised Cwm Taf Morgannwg Market Position Statement to address this need. This work will be in partnerships with care homes providers in order to develop suitable new specialist provision together to meet current and future demand.
- 5.21 In January 2019, Rhondda Cynon Taf Council, Merthyr Tydfil Council and Cwm Taf Morgannwg University Health Board agreed a regional care home contract, specification and contract monitoring arrangements to improve the quality of care home accommodation in the Region.

### 6. **EQUALITY AND DIVERSITY IMPLICATIONS**

6.1 There are no equality and diversity implications associated with this report.

#### 7. CONSULTATION

7.1 There is no consultation required for this report.

#### 8. FINANCIAL IMPLICATION(S)

8.1 There are no financial implications aligned to this report.

### 9. <u>LEGAL IMPLICATIONS OR LEGISLATION CONSIDERED</u>

9.1 The provision adult social care services need to be considered in accordance with the Social Services and Wellbeing (Wales) Act 2014. This applies when considering decisions in respect of an individual but also when considering broader strategic issues that do not relate to an individual. In doing so, the overall purpose is to produce a sustainable and diverse range of care and support services to deliver better, innovative and cost-effective services and support and promote the wellbeing of every person, and carer, with the need of care and support. The Scrutiny Working Group report findings and recommendations aim to deliver the highest standards of care and support and are consistent with the requirements of the Act.

# 10. <u>LINKS TO THE CORPORATE AND NATIONAL PRIORITIES AND THE WELL-BEING OF FUTURE GENERATIONS ACT</u>

10.1 The Scrutiny Working Group report findings and recommendations link to the Council's Corporate Plan priority People – 'Promoting independence and positive lives for everyone' and the content of the Working Groups report has embraced the Well-being of Future Generations (Wales) Act 2015 - taking account of the long-term, helping to prevent problems occurring or getting worse, taking an integrated and collaborative approach, and considering and involving a diverse range of people.

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## **Appendix 1: Health and Well Being Scrutiny Committee**

## **Empty Property Action Plan**

**Recommendation 1:** The Council should develop a strategic vision for the future shape and identity of communities characterised by low housing demand and high concentrations of empty properties to determine how the Council can most effectively contribute to their future sustainability. This vision should consider the proactive re-shaping of these communities and action to build on their unique identities and assets.

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
<ul> <li>Through the Single Integrated Plan, the Council has committed to taking a targeted geographical approach to regeneration.</li> <li>Tylorstown is the first area that is being targeted for housing led regeneration as part of this approach, under a pilot project called a Housing and Health Action Area</li> <li>There are 146 empty properties in Tylorstown. These properties will be proactively targeted during the life of the Housing and Health Action Area in order</li> </ul>		Housing Strategy and Standards Team	Empty Properties have been identified in Tylorstown and a database established.  An audit of each property has begun to establish current condition, impact on community, ownership, intentions of owner etc.	STATUS
to find a sustainable solution for each one.				

**Recommendation 2:** That the Council revises the 2013 Cwm Taf Empty Homes Strategy to reflect the findings of this review, and in particular to make appropriate reference to the importance of using enforcement tools where appropriate, and the viability of innovative, new models based on those executed successfully in other local authorities such as Chimney Pot park in Salford.

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
Undertake research to ensure all opportunities and approaches to bringing empty properties back into use have been identified	•	Housing Strategy and Standards Team		
Produce an updated Empty Homes Strategy				

**Recommendation 3:** That the Council examines the funding stream at its disposal to tackle empty properties and considers every opportunity to generate private sector funding and develop private sector partnership with a view to increasing financial resources to tackle the issue of empty properties within RCT.

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
Research potential finance models and available funding opportunities	September 2016	Housing Strategy and Standards Team		
Ensure that the updated Empty Homes Strategy clearly identifies funding opportunities and provides a framework for investigating the viability a potential of each option.				

**Recommendation 4:** That the Service Director, Public Health & Protection is required to complete a review which links to the recommendation taken forward by the HMO scrutiny Working group in 2013 to consider the introduction of selective licensing schemes in defined wards that are experiencing high numbers of empty properties.

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
Prepare a business case for Selective Licensing in Tylorstown as part of the over arching Housing and Health Action Area, for decision by Cabinet Member for Housing		Housing Strategy and Standards Team		

**Recommendation 5:** That the Service Director, Public Health & Protection is required to develop an engagement strategy to strengthen the relationship between the Council, the private rented sector and other stakeholders such as Housing Associations to ensure all parties collaborative effectively to bring back into use empty homes.

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
Ensure that the revised Empty Property Strategy identifies opportunities for improving engagement with owners and other stakeholders and that it includes a plan for how this will be implemented		Housing Strategy and Standards Team		

**Recommendation 6:** That the profile of the Councils Empty Property Officer is raised and their work is further promoted amongst key partners and Council departments involved in tackling the issue of empty properties in RCT.

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
To launch a specific and targeted campaign to raise awareness of the issues caused by empty properties and the benefits of bringing them back into use. To include:  • Development of a brand  • Use of various media e.g website, radio, posters  • Improve Council's website and reporting mechanisms  • Improve and update the Council's empty property pack				

<b>Recommendation 7:</b> That a targeted, time limited media campaign with effective branding is undertaken to highlight the issue of empty properties amongst key stakeholders, empty property home owners and the residents of RCT.							
TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS				
By December 2016							
	ome owners and the resi	ome owners and the residents of RCT.  TIMESCALE RESPONSIBLE LEAD	me owners and the residents of RCT.  TIMESCALE RESPONSIBLE LEAD PROGRESS				

**Recommendation 8:** That the Council does everything at its disposal to ensure that advice and information aimed at bringing back empty properties into use is easily and readily available to all via the Council website.

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
As per Recommendation 6	By December 2016			

**Recommendation 9:** That the Council reviews the current arrangements for Council Tax discounts allowed for empty properties and consideration is given to changing the level of discount (currently 50%) to 25% or less applicable to those properties falling within Class C of the prescribed Classes of Dwellings Order in order to raise the additional revenue (to be ring fenced for housing issues including empty properties).

ACTION	TIMESCALE	RESPONSIBLE LEAD	PROGRESS	STATUS
Undertake an impact assessment to understand what the implications of changing the Council Tax discount would be both in relation to the Council's income and owners of empty properties.	December 2016	Director of Finance		

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