



**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: Julia Nicholls - Democratic Services (01443 424098)

**DYMA WŶS I CHI** i gyfarfod o **PWYLLGOR CRAFFU - IECHYD A LLES** yn cael ei gynnal yn **Hybrid** ar **DYDD LLUN, 22AIN TACHWEDD, 2021** 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 Iau, 18 Tachwedd 2021 trwy ddefnyddio'r manylion cyswllt uchod, gan gynnwys rhoi gwybod a fyddwch chi'n siarad Cymraeg neu Saesneg.

**AGENDA**

**Tudalennau**

**1. DATGANIAD O FUDDIANT**

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

Nodwch:

1. 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, rhaid iddyn nhw roi gwybod i'r Cadeirydd pan fyddan nhw'n gadael.

**2. COFNODION**

Derbyn cofnodion cyfarfod blaenorol y Pwyllgor Materion Iechyd a Lles a gynhaliwyd ar 20 Medi 2021.

**3. DOLENNI YMGYNGHORI**

Gwybodaeth mewn perthynas ag [ymgynghoriadau](#) perthnasol i'w hystyried gan y Pwyllgor.

## **ADRODDIAD Y CYFARWYDDWR MATERION IECHYD A DIOGELWCH Y CYHOEDD A GWASANAETHAU CYMUNED**

### **4. Y GWASANAETH RHANBARTHOL AR GYFER GORFODI'R GYFRAITH BWYD A BWYD ANIFEILIAID - ADRODDIAD ARCHWILIO LLAWN A CHYNLLUN GWEITHREDU'R ASiantaeth SAFONAU BWYD**

Derbyn Adroddiad yr Asiantaeth Safonau Bwyd mewn perthynas â'r Gwasanaeth Rhanbarthol ar gyfer Gorfodi'r Gyfraith Bwyd a Bwyd Anifeiliaid ar gyfer Cwm Taf wedi'i ddarparu gan Gyngor Rhondda Cynon Taf mewn partneriaeth â Chyngor Bwrdeistref Sirol Merthyr Tudful.

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### **5. TRAFOD Y CYNNYDD SYDD WEDI'I WNEUD GAN Y GWASANAETH TAI CYMUNEDOL MEWN PERTHYNAS Â STRATEGAETH DDIGARTREFEDD RHONDDA CYNON TAF 2018-2022**

Derbyn adroddiad gan y Cyfarwyddwr Materion Iechyd a Diogelwch y Cyhoedd a Gwasanaethau Cymuned mewn perthynas â Strategaeth Ddigartrefedd Rhondda Cynon Taf 2018-2022.

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### **6. MATERION BRYD**

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

### **7. ADOLYGIAD Y CADEIRYDD A DOD Â'R CYFARFOD I BEN**

Myfyrio ar y cyfarfod a'r camau gweithredu i'w dwyn ymlaen.

## **Cyfarwyddwr Gwasanaeth y Gwasanaethau Democraidd a Chyfathrebu**

### **Cylchreliad:-**

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

### **Y Cynghorwyr Bwrdeistref Sirol:**

Y Cynghorydd L De Vet, Y Cynghorydd J Davies, Y Cynghorydd M Forey, Y Cynghorydd M Griffiths, Y Cynghorydd P Howe, Y Cynghorydd G Jones, Y Cynghorydd L Jones, Y Cynghorydd S Powderhill, Y Cynghorydd A Roberts, Y Cynghorydd G Stacey, Y Cynghorydd J Williams and Y Cynghorydd S Trask



**RHONDDA CYNON TAF COUNCIL HEALTH AND WELLBEING SCRUTINY COMMITTEE**  
Minutes of the virtual meeting of the Health and Wellbeing Scrutiny Committee held on Monday, 20 September 2021 at 5.00 pm.

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

Councillor R Yeo (Chair)

Councillor S Evans	Councillor L De Vet
Councillor J Davies	Councillor M Forey
Councillor M Griffiths	Councillor P Howe
Councillor G Jones	Councillor L Jones
Councillor S Powderhill	Councillor A Roberts
Councillor G Stacey	Councillor J Williams
Councillor S Trask	

**Officers in attendance:-**

Mr A Wilkins, Director of Legal Services  
Ms W Edwards, Service Director – Community Services  
Mr P Mee, Group Director Community & Children's Services

**9 Declaration of Interest**

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

**10 Minutes**

It was **RESOLVED** to approve the minutes of the 8<sup>th</sup> February, 16<sup>th</sup> March and 19<sup>th</sup> July 2021 as an accurate reflection of the meeting.

**11 Consultation Links**

Members acknowledged the consultation links which were provided for their information and **RESOLVED** to note any consultations that are relevant to the remit of the Committee.

**12 Learning Disability Day Services Offer**

The Group Director Community & Children's Services took Members through the report which provided Members of the Health and Wellbeing Scrutiny Committee with the opportunity to contribute to the wider engagement and co-production approach of a new Learning Disability Day Services Strategy for Rhondda Cynon Taf.

The Group Director informed Members of the background to the report advising that at the meeting of Cabinet on 20th July 2021, Members considered a report on the Council's Learning Disability Day Service Offer. Members were directed to Appendix 1 for the full report.

Members were advised that the aim was to move away from a largely building based model to a community based model although Members were informed of the intention to retain some building based provision for service users with complex needs.

The Group Director highlighted the requirement for on-going engagement with people with a learning disability, their families and carers, staff and partners and the proposals to co-produce a new day opportunities strategy to transform the Council's current day services offer and future service provision in Rhondda Cynon Taf.

The Group Director acknowledged the importance of the results of the engagement to be fed in to the draft strategy and discussed the possibility of returning to a future Health and Wellbeing Scrutiny Committee meeting to provide feedback on this.

The Chair thanked the Group Director for the in depth report and welcomed the opportunity for the strategy to be brought back to Committee at a future date for further consideration and comments.

One Member acknowledged the need to modernise and provide a more expansive and progressive service. This Member also commented on the benefits that can be gained from utilising community resources referencing the example of St Mairs (Cynon Linc).

Another Member noted the requirement for a provision to be provided across the borough highlighting the need for suitable access to services in the Rhondda. The Group Director acknowledged this requirement and gave details of current provisions available at Llwynypia and Ystrad Sports Centre whilst also referencing the aim of the strategy to identify what is required for the future.

Members also raised a question regarding the provision of services for Welsh Language users. The Group Director advised that where it is identified that there is a requirement to provide services through the medium of Welsh that adequate staff resource is in place to provide this.

Members also referenced the option of hybrid service provisions in the future with a mix of building and community resource support. It was acknowledged that this approach will be key to delivering a comprehensive and modern service for users.

Finally, Members acknowledged the key support that is provided by volunteers and wished to thank those who currently are engaged in providing services within the community on a voluntary basis.

Following lengthy discussion Members **RESOLVED** to:-

- 1) Note the information provided in this report and the attached appendix and scrutinises its contents and;

- 2) Bring back for pre-scrutiny in the new-year after engagement and consultation has happened later this year to align with the Cabinet Work Programme ensuring it's brought back for pre-scrutiny for members to contribute to the Day Services Strategy.

**13 TO CONSIDER PASSING THE FOLLOWING RESOLUTION:**

Members **RESOLVED** "That the press and public be excluded from the meeting under Section 100A(4) of the Local Government Act (as amended) for the following item 9 of business on the grounds that it involves the likely disclosure of the exempt information as defined in paragraph 13 of Part 4 of the Schedule 12A of the Act".

**14 Community Resilience - The Delivery of the Community Hub and Neighbourhood Network Model**

Members received a report from the Service Director – Community Services on the Delivery of the Community Hub and Neighbourhood Network Model.

Following the update, Members of the Joint Committee made a number of observations and **RESOLVED** to examine the progress made in respect of the implementation of community hubs.

**15 Chair's Review and Close**

The Chair thanked Members and Officers for their attendance and contribution to this evening's discussion and informed Members of the upcoming Autism Working Group advising that dates will be confirmed shortly.

**This meeting closed at 6.15 pm**

**CLLR R. YEO  
CHAIR.**

Tudalen wag



## RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

### MUNICIPAL YEAR 2021-22

#### HEALTH AND WELLBEING SCRUTINY COMMITTEE

22<sup>ND</sup> NOVEMBER 2021

#### REPORT OF THE DIRECTOR, PUBLIC HEALTH, PROTECTION & COMMUNITY SERVICES

#### Agenda Item No. 4

REGIONAL FEED LAW  
ENFORCEMENT SERVICE:  
FOOD STANDARDS AGENCY FULL  
AUDIT REPORT & ACTION PLAN

**Author(s): Rhian Hope, Head of Service for Public Protection and Regulatory Services;  
Gary Lewis, Food Standards and Farm Enforcement Manager**

#### **1. PURPOSE OF THE REPORT**

- 1.1 The purpose of the report is to provide members of the Health and Wellbeing Scrutiny Committee with the opportunity to consider and scrutinise the Report of the Food Standards Agency (FSA) following the full audit of the Council's Regional Feed Law Enforcement Service, carried out in December 2019.

#### **2. RECOMMENDATIONS**

It is recommended that Members:

- 2.1 Consider and scrutinise the Food Standards Agency Report on the Cwm Taf Regional Feed Law Enforcement Service provided by Rhondda Cynon Taf County Borough Council in partnership with Merthyr Tydfil County Borough Council.

2.2 Consider and scrutinise the Action Plan prepared by the Public Health and Protection Service to address the recommendations arising from the Food Standards Agency Report on the Regional Feed Law Enforcement Service.

### **3. BACKGROUND**

3.1 The Council has a duty to carry out official controls on feed law. This includes interventions such as inspection, sampling and import controls.

3.2 Prior to 2015, funding for feed controls was provided via the Revenue Support Grant (RSG); however, after reviews into the delivery of animal feed official controls, and in response to a proposed model provided by the FSA, Welsh Ministers agreed that the sum of £490,000 should be removed from the RSG on a recurrent basis from 1 April 2015. This funding is now available to the FSA to direct and support local authorities and other partners to deliver an animal feed interventions programme in Wales.

3.3 The Directors of Public Protection Wales (DPPW) agreed that local authorities would collaborate regionally to deliver feed official controls. Six regions were established, each with a lead feed officer responsible for day-to-day management and oversight of the work in their region. Governance of this work is delegated to Trading Standards Wales (TSW).

3.4 The funding available to each region is largely based on the number and type of feed establishments within that region. Unit costs for interventions were agreed together with an allocation for lead officers, sampling, import controls and feed officer training.

3.5 Rhondda Cynon Taf provides the Regional Lead Feed Officer for the Cwm Taf region; with responsibility for setting the annual programme of work, monitoring interventions to ensure completion of the programme and administering funding.

3.6 The FSA produce an annual Memorandum of Understanding (Appendix 1), which is signed by the local authorities in each region and the FSA; this identifies the programme of work for the year.

3.7 Both Rhondda Cynon Taf and Merthyr Tydfil maintain their own policies and procedures, feed register, and management information systems. Due to resource constraints in Merthyr Tydfil, Rhondda Cynon Taf undertakes Annex II feed work for the authority, for which the funding is retained.

3.8 The Food Standards Agency is the central competent authority in the UK with responsibility for overseeing that the official food and feed controls undertaken by local authorities are delivered in accordance with the MoU. It also has legislative power to undertake audits of local authority food and feed services. The audit carried out in December 2019 was part of a 5-year review of the Regional Feed Delivery model.

3.9 Between 10<sup>th</sup> and 12<sup>th</sup> December 2019, the FSA carried out a full audit of the Feed Law Enforcement Service, not just the Regional collaborative arrangements. Three auditors from the FSA attended Ty Elai and Merthyr Tydfil Council Offices. The audit comprised of an opening meeting, discussions with the audit liaison / lead officers, staff interviews, on-site visits and a closing feedback meeting. Prior to the audit, a number of electronic records had been provided to the FSA; during the audit period, detailed checks were



also made of various electronic and paper file records, including inspection reports, sampling results, training records and associated quality processes.

- 3.10 The FSA intention was that audit findings would be used to inform a summary feed audit report incorporating the findings of all six regional audits. This would have considered the impact of the regional feed delivery model across Wales and include examples of good practice that were identified across the six regions. Unfortunately, the coronavirus pandemic suspended the final two programmed audits, which in turn delayed the receipt of the individual audit report for the Cwm Taf region.

#### **4. FEEDBACK FROM THE FOOD STANDARDS AGENCY AUDIT**

- 4.1 A Draft Report was received on 25<sup>th</sup> February 2020, to which the local authority replied on 24<sup>th</sup> March 2020. On 8<sup>th</sup> April 2020, communication from the FSA stated that the audit programme was currently paused and there were no plans to finalise the Action Plan until post-pandemic.
- 4.2 The Final Report and Action Plan (Appendix 2) were received on 2<sup>nd</sup> July 2021; these are open documents and will be published on the FSA website.
- 4.3 At the audit closing meeting, both local authorities requested that the report finding be separated for each local authority, in order to provide clarity about which non-conformity or recommendation related to which authority. The FSA advised that this was not possible as the audit was carried out on the Region; but in the report itself, Annex 4 specifies which of the findings in Annex 3 specifically relate to Rhondda Cynon Taf.
- 4.4 The Report concluded that:
- A 'Moderate' Assessment of Assurance was identified in relation to the Cwm Taf Regional Feed Service. There are four categories of audit assurance; 'Moderate' is the second highest;
  - 11 specific recommendations were made by the auditors in relation to service delivery in Rhondda Cynon Taf;
  - 5 of these were required process or procedural amendments;
  - 6 of these were areas where Rhondda Cynon Taf already had processes in place, but could benefit from recommended amendment;
  - 1 example of Good Practice was identified within the report, and this specifically related to Rhondda Cynon Taf.
- 4.5 It was agreed during the closing meeting, that where amendments were required to policies, that these would be undertaken following the receipt of the summary feed report where examples of good practice in other authorities could be implemented in RCT. In light of this, the FSA was happy to accept Action Plan dates of December 2021.
- 4.6 A number of the recommendations were completed immediately following the audit; these are detailed in the Action Plan.

**5. FINANCIAL IMPLICATION(S)**

5.1 There are no financial implications for consideration within this report.

**6. CONCLUSION**

6.1 The Regional Feed Law Enforcement Report is a detailed report covering both the processes in place within Rhondda Cynon Taf, and the arrangements for the Cwm Taf Regional Delivery. It is of note that there was an area of Good Practice identified, which was attributable to Rhondda Cynon Taf. A number of recommendations have already been addressed by the local authority, and the Service is committed to taking the appropriate action on the outstanding actions as soon as the information is provided by the FSA to facilitate implementation and Regional consistency in approach.

# **Memorandum of Understanding for the Enforcement of Animal Feed Official Controls in Wales**

**between**

**The Food Standards Agency**

**and**

**Rhondda Cynon Taf County Borough Council**

**Merthyr Tydfil County Borough Council**

**COMMENCEMENT DATE**

**1 APRIL 2019**

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## **1. The Parties**

This Memorandum of Understanding (MoU) is between the following parties (the Parties):

- (a) The Food Standards Agency (FSA) in Wales of 11th Floor, Southgate House, Wood Street, Cardiff, CF10 1EW.
- (b) Rhondda Cynon Taf County Borough Council and Merthyr Tydfil County Borough Council.

### **Food Standards Agency (FSA)**

The FSA acts as the Central Competent Authority for feed law enforcement by local authorities (LAs) in Wales, England and Northern Ireland. This includes ensuring the delivery of activities in relation to feed hygiene, labelling and composition of animal feed, including pet food. The FSA has the statutory function of providing expert advice and knowledge as well as the role of influencing the way that LAs deliver animal feed official controls.

### **Local Authorities (LAs)**

LAs are responsible for the enforcement of trading standards and environmental health legislation, including that relating to feed hygiene at all feed related establishments, including importers, farms, manufacturers, transporters and food businesses sending surplus food into the feed chain. LAs provide advice and guidance to feed businesses, as well as carry out inspections, sampling, investigations and formal enforcement activities in accordance with the Feed Law Code of Practice. This work is closely linked to other LA enforcement responsibilities for animal by-products, animal health, animal welfare and food. Animal feed official controls are delivered on a regional basis in Wales, with the 22 local authorities in Wales divided up into six regions.

## **2. Purpose**

- (a) This MoU seeks to set out the general principle of collaboration between the Parties and provides a specific framework for the delivery of animal feed official controls in Wales.
- (b) This MoU seeks to ensure that the enforcement of feed legislation in Wales is carried out in an effective, consistent, coordinated manner and in accordance with the 'All Wales Feed Service Delivery Plan'.
- (c) This MoU establishes the responsibilities of the Parties and the general principles for their cooperation.
- (d) This MoU contains the financial arrangements between the Parties.
- (e) This MoU is not intended to create a binding legal obligation between the Parties.

### **3. Background**

In 2009 and 2011 the Food and Veterinary Office (FVO) audited the delivery of Animal Feed Official Controls in the UK and found significant weaknesses. In response to the audit findings the FSA established a Programme to research and implement solutions to the issues raised by the FVO. In July 2014 the FSA published a report titled “Food and Feed Law Enforcement in Wales,” in which concerns were expressed about the delivery of official feed controls by Welsh LAs. The report alerted the Minister for Health and Social Services to the risk that animal feed safety may be compromised unless the issues were addressed urgently. The Minister was clear that retaining the status quo was not an option and asked Welsh Government officials and the FSA to identify options for the future funding and delivery of this work in Wales. Local Government had a key role to play but it was clear that better targeting of the resources could provide a more efficient, effective and economic service.

On the basis of a proposed model and estimated costs provided by the FSA, Welsh Ministers agreed the sum of £490,000 should be removed from the current Revenue Support Grant (RSG) on a recurrent basis from 1 April 2015. This funding is available to the FSA to direct and support LAs and other partners to deliver a sampling and inspection programme in Wales.

Directors of Public Protection Wales (DPPW) have agreed that LAs would collaborate and work regionally in Wales to deliver animal feed official controls. Six regions had been set up, each with a lead feed officer responsible for day to day management and oversight of the work in their regions. DPPW delegated governance of this work to Wales Heads of Trading Standards (WHoTS).

Decisions in relation to the regional inspection programme have been made in consultation with the FSA, WHoTS and Regional Lead Feed Officers to ensure optimal use of the funds available, in line with feed safety and consumer protection priorities.

### **4. Roles and Responsibilities**

The Parties agree that they will:

- (a) Adhere to the following roles and responsibilities.
- (b) Consider each other as a potential source for mutual assistance.
- (c) Learn, develop and seek to achieve the full potential of the MoU.
- (d) Share information, experience and skills to learn from each other and develop effective working practices, work collaboratively to identify solutions, eliminate duplication of effort, mitigate risk and reduce cost.
- (e) Seek to extend the provisions of this MoU as appropriate where significant and on-going opportunities are identified.
- (f) Act in a timely manner.

- (g) Agree a strategy for managing communication with stakeholders, where appropriate.
- (h) Ensure sufficient and appropriately qualified employees and other necessary resources are available and (in the case of employees) authorised to fulfil the responsibilities set out in this MoU.
- (i) Act in good faith to support achievement of the key objectives and compliance with these principles.

### **FSA Key Roles and Responsibilities**

- Develop an agreed risk-based feed inspection programme for Wales in conjunction with Regional Lead Feed Officers.
- Develop an agreed risk-based feed sampling programme for Wales in conjunction with Regional Lead Feed Officers.
- Meet twice a year with Regional Lead Feed Officers.
- Attend WHoTS Regional Feed Meetings.
- Provide support to LAs in the delivery of animal feed official controls.
- Produce guidance where required and appropriate.
- Provide expert advice and knowledge.
- Promote and share best practice.
- Facilitate and/or deliver appropriate training, funding where appropriate.
- Provide funding for the delivery of animal feed inspections ensuring invoices are paid in a timely manner.
- Work with LAs to resolve situations where they encounter difficulties in fulfilling their responsibilities to follow the animal feed inspection programme.
- Where appropriate promote the animal feed delivery programme and the importance of safe animal feed.
- Monitor and audit the feed delivery model to ensure consistent interpretation of the Feed Law Code of Practice and to work with LAs to resolve any issues identified through this.
- Conduct a formal evaluation of the delivery programme within an appropriate timeframe.
- Maintain communications with key stakeholders involved in the funding, planning and delivery of animal feed official controls across the UK to ensure a consistent approach.
- Provide updates to Welsh Government on progress in delivering the programme.

### **Feed Regions Key Roles and Responsibilities**

- Deliver a programme of risk-based animal feed inspections and sampling as agreed with the FSA.
- Profile inspections for the year ensuring that delivery can be achieved.
- Complete the agreed annual programme of work, no later than 31<sup>st</sup> March in each year covered by this MoU.
- Give early warning of any emerging problems to the FSA so that advice and support may be offered.

- Work collaboratively to ensure animal feed official controls are carried out in all LA areas within the region.
- Have full regard to the Feed Law Code of Practice and the Framework Agreement on Local Authority Food Law Enforcement.
- Implement the Feed Law Code of Practice risk rating scheme and take into account the principle of earned recognition.
- Maintain an up to date register of feed establishments.
- Report any feed incidents to the FSA.
- Meet twice a year with the FSA.
- Attend WHoTS Regional Feed Group.
- Carry out official controls at import points of entry where appropriate.
- Provide quarterly returns and invoices to the FSA which accurately reflect the work carried out during the previous quarter.
- Provide returns and invoices within two weeks of the end of the quarter.
- Liaise with partner organisations in relation to feed enforcement where appropriate.
- Ensure officers undertaking animal feed official controls are trained, competent, and reviewed.
- Ensure officers undertaking food hygiene official controls at primary production are authorised, trained, competent and reviewed.
- Monitor consistency of inspections.
- Commit the necessary resource and time for officers to conduct inspections.
- Ensure sufficient information is captured and recorded during inspections using agreed model inspection forms to demonstrate that a thorough assessment of compliance has been carried out.
- Adopt model policies and procedures for animal feed enforcement subject to any specific requirements of LAs in their region.
- Have regard to food hygiene at primary production when carrying out animal feed inspections, by ensuring sufficient information is captured on the model inspection form to demonstrate an assessment of compliance has been carried out.
- Provide the Regional Lead Feed Officer with the resource, support and time to conduct the role effectively.

### **The Regional Lead Feed Officer**

Each region shall appoint a Regional Lead Feed Officer. The primary role of the Regional Lead Feed Officer is to:

- Ensure a risk-based approach is adopted for the delivery of animal feed official controls within their region and activities are coordinated.
- Act as the point of liaison between their region and the FSA highlighting strategic or operational issues that require discussion.
- Share best practice and promote consistency.
- Input into discussions with the FSA on emerging issues and operational issues.
- Input into consultation responses.
- Escalate unresolved queries from their region to the WHoTS Regional Feed Group and draft opinions to be agreed by members when appropriate.
- Provide good and best practice advice for the implementation of feed law.
- Provide advice and guidance on the preparation of guidance/leaflets.



- Identify and discuss future priorities, consider future developments and emerging issues.
- Attend meetings to represent regional views.
- Ensure all officers involved in the delivery of animal feed official controls are competent by carrying out a documented assessment of their competencies in accordance with an agreed procedure.
- Provide advice, guidance and mentoring as required to ensure sufficient capacity and maintain officer competence in the regions.
- Coordinate feed sampling.
- Assist in the production and maintenance of common standards, operating procedures and documentation to support delivery of the service in accordance with the FSA's Feed Law Code of Practice.
- Maintain a good working knowledge and experience of animal feed and the law relating to it.
- Monitor performance and consistency of inspections in their region.

## **5. Programme of Work**

As a part of the FSA's Business Planning process for each of the financial years covered by this MoU, the FSA and the WHoTS Regional Feed Group will agree an annual programme of work which will consist of the specific animal feed official controls to be undertaken.

Following agreement of the work plan the FSA will issue a Purchase Order (PO) which funds the forecasted costs.

## **6. Governance**

A governance group will oversee the delivery of animal feed official controls in Wales, including adherence to the terms of the MoU. The governance group will consist of a representative from DPPW, WHoTS, WLGA and the FSA.

The governance group will:

- (a) Ensure that the programme is on track to deliver the required benefit, that the financial performance is on target and any required changes are identified and addressed to ensure the delivery of activities.
- (b) Consider future developments, the understanding and sharing of good practice and addressing feedback on progress made and improvement opportunities.
- (c) Agree the process to facilitate the day to day operational working necessary to deliver the agreed programme of work. This will ensure efficient management of all the work involved, provide assurance that the key objectives are being met and that the region is proceeding in accordance with their work plan.
- (d) Meet at least annually and more frequently as the workload demands.

## **7. Dispute Settlement**

Any dispute between the Parties arising out of or in connection with this MoU shall in the first instance be settled amicably between the Parties and, if no resolution is reached, referred to the Chief Executive responsible for each Party.

## **8. Reporting**

Each feed region will provide the FSA with a quarterly update on the progress achieved on the programme of work within two weeks of the end of the quarter.

## **9. Funding**

Funding for the Programme of Work will consist of:

- (a) Quarterly payment from the FSA to fund regional delivery of animal feed official controls.
- (b) Regional Lead Officer Funding to cover the costs of administering and managing the programme of work, as necessary.
- (c) Funding to enable delivery of any agreed projects designed to improve regional delivery of animal feed official controls.

The quarterly payment will be inclusive of any relevant VAT and shall remain firm and fixed at the level set in the signed MoU, which will be up to the level determined in the work programme planning exercise. The specific activities outlined in this proposal should not already form part of any programmed expenditure plans by the feed region for the current financial year. The price paid per inspection for the delivery of animal feed official controls in 2019 - 20 is detailed below.

Premises Type	Cost Per Inspection
Manufacturer - A01-08, A11, R01-04 & R06	£561.00
Co Product Producer - R12	£382.50
Mobile Mixer - R04	£280.50
Importers	£127.50
Stores - R09	£183.60
Distributor - A01-08, A11, R01-03 & R05	£183.60
Transporter - R08	£183.60
On Farm Mixer - R10 (annex II)	£280.50
On Farm Mixer – R11	£183.60
Pet Food Manufacturer – R06	£561.00
Supplier of Surplus Food - R07	£214.20
Livestock Farms - R13	£142.80
Arable Farms - R14	£142.80
Business Ceased Operations – Visit	£38.25
Business Ceased Operations – Activities*	£20.00
Points of Entry	£38.25 per hour
Essential Revisits	£38.25 per hour

\*Business Ceased Operations - Activities can include, but are not restricted to, verifiable tasks such as, database cross-reference checks, surveys, and postal or telephone questionnaires.

Where activities are no longer being carried out on-site, a feed business operator should be taken off the LA Feed Register, unless there is definitive information about when the feed related activities will recommence, such as the activity cessation being seasonal and will definitely begin again at the appropriate time of year.

The funding must be used solely for allocating to regions to fund animal feed official controls for the period in question. The funding will be determined on an annual basis. Should the FSA wish to change this allocation during the financial year, the new allocation shall be agreed in writing. The funding is payable in quarterly instalments after each three-

month period of the work programme has been conducted, with Regional Lead Feed Officer funding payable in the first quarter.

The hourly rate at points of entry will additionally include the time taken to conduct official animal feed samples at that point of entry. Official controls at points of entry should be conducted as per Article 16 of Regulation 882/2004 which details the controls that need to be applied to third-country animal feed. The funding for point of entry work will be paid to the lead regional LA and can be claimed through the quarterly invoice submission. Official controls at points of entry should include at least a systematic documentary check, a random identity check and, as appropriate, a physical check of the animal feed. A breakdown of the payment schedule for Cwm Taf region is given below.

A full breakdown of the number and type of inspections being funded for each local authority is detailed in [Annex 1](#).

**Breakdown of Costs (Not to Exceed):**

Feed Inspections	£4,197.30
Inland Sampling Costs	£800
Regional & Lead Officer Allocation	£2,000.00
<b>Total Funding Awarded</b>	<b>£6,997.30</b>

Feed regions will ensure that the funding provided by the FSA is used in accordance with the terms of this MoU. The FSA will undertake to provide the agreed funding within agreed deadlines, following application through an invoice.

The FSA will ensure that it maintains appropriate financial systems and controls to fulfil its obligation to provide payment to enable the agreed work programme to be delivered.

The FSA is required to submit forecasts of its expenditure to Welsh Government at regular intervals. Regional Lead Feed Officers will support this process by providing forecast expenditure for the programme, as necessary, within the FSA's reporting timescales.

Right of Audit - FSA auditors will give an opinion on the accounts as to whether the FSA funds have been properly applied in line with this MoU.

The lead LA for the region shall be the accountable and responsible for the funding and its use.

Capital assets are not expected to be created, acquired or sold under this MoU. Should this situation arise prior authority should be sought from the FSA. Ownership of any capital assets purchased, and any proceeds of asset sales may revert to the FSA if appropriate.

## **10. Payment**

The FSA's financial year runs from 1<sup>st</sup> April to 31<sup>st</sup> March. The FSA have a 'no Purchase Order, no payment' policy and the FSA will issue a single Purchase Order for periodic invoicing before the commencement of work.

Invoices raised should quote the FSA provided purchase order number with a copy being emailed to [lasupportwales@food.gov.uk](mailto:lasupportwales@food.gov.uk).

The FSA shall make payment within 30 days on receipt of an invoice quoting the appropriate purchase order number.

A withholding of payment by the FSA may take place if there is a material failure to perform tasks, reach milestones or achieve targets agreed in the annual programme of work.

## **11. Review and Audit of the Memorandum of Understanding (MoU)**

This MoU shall be reviewed annually, and whenever substantial changes occur to the policies, external relationships and structures of the respective Parties. Any changes to this MoU will only be effective if set out in writing and signed by the Parties.

Each Party must keep and maintain until six (6) years after termination of this MoU, full and accurate records of all sums received from the other Party. Each Party must on request afford the other Party or its representatives such access to those records as may be requested in connection with the MoU or as otherwise required in connection with audit requirements (including, without limitation, audit by the National Audit Office).

## **12. Freedom of Information and Communications to the Public**

Each Party will provide to the other Party any information in its possession that may be reasonably requested by the other, subject to necessary confidentiality constraints, safeguards and statutory rules on disclosure.

Each Party will consult the other Party before making to any third party any disclosures of information under the Freedom of Information Act 2000 and/or the Environmental Information Regulations 2004 or Code of Practice on Access to Government Information.

Each Party will seek the other Party's approval before externally publishing any information resulting from the use of exchanged data received from the other Party; such approval will not be unreasonably withheld. In respect of the release of information identified as Confidential by either Party, the decision of the supplying Party shall be final.

### **13. Termination**

This MoU shall commence on 1<sup>st</sup> April 2019 and (subject to earlier termination on the terms of this MoU) shall continue in force for a period of one year, which may be extended by the mutual written agreement of the Parties.

This MoU may be terminated by any Party:

- (a) for any reason by giving 6 months' notice in writing to the other Party;
- (b) by giving 3 months' notice in writing in the event that it reasonably concludes following a review that the MoU no longer represents a valuable use of resources in the pursuit of its objectives; or
- (c) forthwith by giving notice in writing in the event of material breach by the other not remedied within 30 days of written notice from the terminating Party.

This MoU may also be terminated forthwith by any Party by that Party giving written notice to the other Party if events, circumstances or causes beyond its reasonable control (and arising without its fault or negligence) result in it being unable to comply with its responsibilities under this MoU.

### **14. Charges and Liabilities**

Except as otherwise provided in this MoU, the Parties must each bear their own costs and expenses incurred in complying with their respective responsibilities under this MoU.


Both Parties shall remain liable for any losses or liabilities incurred due to their own or their employees' actions and neither Party intends that the other Party shall be liable for any loss it suffers as a result of this MoU.

### **15. Signatures**


You are hereby requested to indicate your acceptance of this MoU by signing two copies and returning both copies to the FSA. One copy signed by the FSA will be returned to you, the other copy will be retained by the FSA for its records.

The MoU must be signed unaltered in any way: any amendment to it without prior written approval from the FSA will render the document void.


On behalf of the Food Standards Agency (FSA): -

<b>Name</b>	Nathan Barnhouse
<b>Signature</b>	
<b>Job Title</b>	Director of FSA in Wales
<b>Date</b>	19/11/2019

On behalf of Rhondda Cynon Taf County Borough Council: -

<b>Name</b>	Louise Davies
<b>Signature</b>	
<b>Job Title</b>	Service Director Public Protection Services
<b>Date</b>	11.10.19

On behalf of Merthyr Tydfil County Borough Council: -

<b>Name</b>	David Paul Lewis
<b>Signature</b>	
<b>Job Title</b>	Head of Protection and Safety
<b>Date</b>	24.10.19

Annex 1 - Breakdown of the number and type of inspections being funded for each local authority

<b>Cwm Taf</b>		
	<b>Rhondda Cynon Taf County Borough Council</b>	<b>Merthyr Tydfil County Borough Council</b>
<b>Inland Feed Inspections</b>		
Manufacturer A01-08 & R01-04	0	0
Co Product Producer R12	3	0
Mobile Mixer R04	0	0
Importers	0	0
Stores R09	0	0
Distributor A01-08, R01-03 & R05	1	2
Transporter R08	0	0
On Farm Mixer R10 (Annex II)	0	0
On Farm Mixer R11	0	0
Pet Food Manufacturer R06	0	0
Supplier of feed materials/ Surplus Food R07	6	1
<b>Feed Hygiene at Primary Production Inspections</b>		
Livestock Farms R13	1	6
Arable Farms R14	0	0
<b>Total Number of Feed Premises/Inspections</b>	11	9



Mr Chris Bradshaw,  
Chief Executive,  
Rhondda Cynon Taff County Borough  
Council,  
Ty Elai, Dinas Isaf East,  
Williamstown, Tonypanyd.  
CF40 1NY

1<sup>st</sup> July 2021

Dear Mr. Bradshaw,

**FOOD STANDARDS AGENCY (FSA) AUDIT: REGIONAL FEED LAW  
ENFORCEMENT SERVICES – CWM TAF, 10<sup>TH</sup>-12<sup>TH</sup> DECEMBER 2019**

I would like to thank you and your officers for their time and assistance to enable us to complete the audit of the regional feed law enforcement service. As discussed with the liaison officers at the opening meeting, our visit formed part of a programme of visits to local authorities to assess the delivery of official feed controls conducted as part of the Cwm Taf regional feed service. Detailed feedback of our findings was provided to the relevant service managers and officers and a summary of the preliminary overall findings was delivered at the conclusion of the visit. I am now writing to confirm the audit findings, which are attached to this letter at Annex 1. An agreed action plan containing the recommendations identified has been attached at Annex 2.

The authority is reminded that not all recommendations are of equal significance, for example, recommendations relating to resourcing, management of intervention programmes and internal monitoring carry a higher level of significance. Also, not all recommendations are equal in relation to the quantity of the requirements that are required in order to complete them. For example, one recommendation may comprise of a dozen or more individual parts. It is noted that the number of recommendations raised is not always representative of overall achievement. It is important that the root cause of any issue is identified, and that corrective and

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Ffôn / Tel: 02920 678918

Cofiwch gadw mewn cysylltiad drwy:  
Let's keep connected:

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 [@foodgov](https://www.instagram.com/foodgov)

preventative action is carried out. This is where the importance of internal monitoring is key to maintaining improved standards.

An overall assessment of the assurance of the region's feed service has been attached at Annex 3, whilst Annex 4 contains an indication of the issues that apply to your authority. The assessment of assurance at Annex 3 is currently being piloted. Any comments on the details involved; including the wording of categories should be made using the attached audit feedback questionnaire.

It is expected that the report letter be brought to the attention of relevant Members and that the regional lead officer ensures that all regional local authority partners be informed of the audit findings and action plan.

You will be aware that the findings will be used to inform a summary feed audit report incorporating the findings of all six regional audits which will be published on the FSA website. This will consider the impact of the regional feed delivery model across Wales and include any examples of good practice that are identified across the six regions. A draft of this summary report will be circulated for comment, following completion of the audit programme, prior to its publication on the FSA's website. This letter and its associated annexes will not be published.

If you would like any further information, please do not hesitate to contact me on 029 20 678918. A copy of this letter has been sent to Louise Davies, Service Director, Public Protection.

Yours sincerely



**Steve Adie**  
**Auditor, Consumer Protection Team**

cc Paul Mee, Director of Public Health and Community Services  
Louise Davies, Service Director, Public Protection  
Judith Parry, Trading Standards and Registrar Service Manager  
Gary Lewis, Senior Food and Agricultural Standards Officer

Enc: Annex 1 – Cwm Taf Region Feed Audit Findings  
Annex 2 – Cwm Taf Region Feed Audit Action Plan  
Annex 3 – Assessment of assurance for Cwm Taf Regional Feed Service  
Annex 4 – Indication of issues for RCT

## Summary of Cwm Taf Region Feed Audit Findings

### **1.0 Organisation and management of feed enforcement service and interventions programmes**

- 1.1 Feed service delivery is co-ordinated across the two Cwm Taf authorities by the regional feed lead officer in Rhondda Cynon Taff (RCT). There are currently three officers undertaking feed duties in addition to other Trading Standards duties, and at present they are all employed by one authority. The total number of full time equivalent (FTE) officers undertaking feed work is 0.6. The average proportion of time therefore currently spent on feed work per officer is 0.2 FTE. Both authorities are training additional staff to undertake feed work, who, it is anticipated, will contribute up to another 0.4 FTE of their time to feed work. The number of feed officers in Cwm Taf has reduced significantly (1.75 FTE to 0.6 FTE) since the inception of the regional feed delivery model in 2015, when funding was removed from the Revenue Support Grant and issued directly to local authorities (LAs) by the FSA based on an agreed annual programme of interventions and other feed control activity.
- 1.2 At the time of the audit, in the Cwm Taf region, RCT was responsible for the day to day delivery of the regions' feed enforcement activities and for leading and co-ordinating the intervention programme and sampling activities. The regional lead officer co-ordinated activities through liaison with a point of contact at Merthyr.
- 1.3 Under the Memorandum of Understanding (MoU) that governs the regional delivery of the feed service, the region plans its activities in relation to the intervention targets set by the FSA. A sampling plan is created at regional level according to the budget provided by the FSA. Activities undertaken by LAs are reported quarterly to the regional feed lead officer and then a combined return is made to the FSA. The return at the end of the last financial year indicated that the Cwm Taf region had, on the whole, delivered the planned numbers of inspections and samples, with some variance in the type of activity. The variances were considered to be reasonable, reflecting decisions made by authorities in response to changes in businesses and trading activities within each area.
- 1.4 A small number of rated establishments were overdue, in accordance with the frequencies in the Feed Law Code of Practice (FeLCP), at one authority. There were no unrated premises at either authority and interventions were being selected for inclusion within the programmes in a risk based manner.
- 1.5 Progress in meeting regional obligations were reported through a number of regional and national groups, including the Wales Heads of Trading Standards Group and authorities were also reporting progress on service delivery upwards to Cabinet Members.

## 2.0 Authorisation and Training of Officers

- 2.1 The authorisation of officers was being carried out by each LA for officers undertaking enforcement activities within their areas. Those authorisations were based on assessments of competence, which were overseen by the regional feed lead officer based on information collected from each LA in a standard all Wales format.
- 2.2 Auditors were shown cross border authorisations for officers in RCT to undertake activities in the Merthyr area, however, these require updating to ensure that all relevant legislation is included.
- 2.3 One authority had documented its procedures for authorising officers. The procedures should be amended to include documenting the full process of authorisation, the assessment of officer competence and linking both the authorisation document and the competency assessment record.

### **Recommendation 1**

- a) Authorities shall set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the relevant Codes of Practice and any centrally issued guidance.
- b) Authorities should review and update authorisation documents to ensure they include references to all relevant and up to date legislation. The level of authorisation of officers should be consistent with their qualifications, training, experience and the Feed Law Code of Practice. Where authorisation certificates do not provide information on the level of authorisation, but such information is provided within respective assessments of competence, these documents should be linked within a single overarching instrument of authorisation. [The Standard 5.1 & 5.3]

- 2.4 A sample of authorisation, qualification and training records indicated that most officers had been authorised in accordance with their qualifications, training and experience. Officers in one authority were authorised, other than in accordance with a competency assessment, however, it was noted that they were not currently undertaking feed duties. Academic and other relevant qualifications were available for all feed officers, where relevant.
- 2.5 All officers had undertaken the required minimum of 10 hours CPD. In one authority records of qualifications and training were maintained by individual officers rather than centrally by the LA.

### ***Recommendation 2***

Records of qualifications, training and experience of each authorised officer must be maintained by local authorities [The Standard 5.5]

## **3.0 Feed Establishments Interventions and Inspections, Records and Reports**

- 3.1 One authority had developed a documented feed intervention procedure which provided details for officers on how to conduct feed interventions. The procedure would benefit from directing officers to the appropriate inspection forms and inspection report forms. It would also benefit from the inclusion of further detail to ensure the accuracy of registration activity codes, adding reference to the Home Authority Principle, prioritising risk within new businesses, providing information to officers on revisits including when they are appropriate and timescales, undertaking unannounced or short notice inspections and information relating to the removal of earned recognition, as appropriate.

### ***Recommendation 3***

Local authorities shall set up, maintain and implement documented procedures for the range of interventions/inspections carried out. [The Standard 7.4]

- 3.2 The intervention procedure that had been developed at one authority was supplemented by inspection forms for use at different types of feed establishments. The inspection forms were in use across the region and provided a consistent approach to capturing inspection observations and to the recording of assessments made during the course of inspections.
- 3.3 The inspection forms would benefit from minor amendment to ensure capture of information in relation to whether interventions were unannounced or short notice.
- 3.4 A total of 10 premises files, five from each LA, were selected for audit in relation to feed interventions. Evidence of inspection observations was available in all cases, which generally indicated that thorough assessments of compliance had been undertaken.
- 3.5 Some areas for improvement were identified to ensure that sufficiently detailed records of inspection were consistently being maintained. This included consistently recording the size and scale of business operations, evidencing thorough traceability assessments, assessing business progress in meeting

compliance with HACCP requirements and recording the nature and extent of pest issues. Further areas for improvement were identified including consistently applying the correct risk rating compliance score, consistently undertaking appropriate follow up action and timely revisits, and ensuring significant issues from previous inspections are followed up.

- 3.6 Further, inspection report forms for different types of feed establishments had been developed in order to provide feed business operators (FeBOs) with information about the outcome of each intervention. Three different report forms were in use across the region. The inspection reports provided to FeBOs contained specific prompts to record most of the required information with the exception of an indication of the action to be taken by the feed authority and up to date legislation under which the intervention was conducted. In some cases, **the various report forms would benefit from prompts** to include the name of the FeBO, whether or not samples were taken, clear separation of legal requirements and recommendations and timescales for achieving compliance.
- 3.7 Out of the ten file checks, inspection report forms provided to FeBOs were available in all cases and contained most of the required information. Examples were found where **some information had not been provided** including whether or not samples were taken, senior officer contact details, the name of the FeBO, the specific legislation under which the intervention was conducted, the recording of contraventions identified, including a timescale for compliance and stating the action to be taken by the feed authority.
- 3.8 At one authority there was an IT related issue in relation to their database, that affected their ability to apply earned recognition compliance scores for farm assurance scheme members, of schemes which had been approved by the FSA. A manual system was being used whilst the IT solution was being investigated.

#### ***Recommendation 4***

(a) Local authorities shall carry out interventions/inspections in accordance with the relevant legislation, Codes of Practice, centrally issued guidance and the Authority's policies and procedures. [The Standard 7.2]

(b) Local authorities shall assess the compliance of establishments and systems in their area to the legally prescribed standards. [The Standard 7.3]

(c) Local authorities shall maintain up to date accurate records in retrievable form on all feed establishments in its area, in accordance with Codes of Practice and centrally issued guidance. These records shall include the determination of compliance with legal requirements made by the authorised officer and details of action taken where non-compliance was identified. The authority should also record, with reasons, any deviations from set procedures. [The Standard 16.1]

#### 4.0 Feed Establishments Databases

4.1 The databases were well maintained, with no data errors or duplicate premises identified and no unrated premises.

#### 5.0 Sampling

5.1 One authority had developed a documented feed sampling procedure and policy. This was in accordance with requirements.

##### ***Good Practice***

Rhondda Cynon Taff had published the feed sampling policy on its website making it easily available to consumers and businesses.

##### ***Recommendation 5***

Local authorities shall set up, maintain and implement a documented sampling policy that shall accord with any centrally issued or relevant guidance, and relevant Codes of Practice and shall include reference to its approach to any relevant national sampling programme centrally co-ordinated by the Food Standards Agency. [The Standard – 12.4]

5.2 One authority had documented its feed sampling procedure which provided information for officers in relation to how to conduct sampling activities.

##### ***Recommendation 6***

Local authorities shall set up, maintain and implement documented procedures for the procurement or purchase of samples, continuity of evidence and the prevention of deterioration or damage to samples whilst under its control in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard – 12.5]

- 5.3 Checks were carried out on two feed sample files within the audit timeframe where unsatisfactory results of analysis were obtained. All sampling had been undertaken by authorised officers, the results of analysis were available and FeBOs had been notified of the unsatisfactory results. In one instance, appropriate follow-up action had not been undertaken at the farm where the sample was taken.

#### ***Recommendation 7***

Local authorities shall take appropriate action where sample results are not considered to be satisfactory. [The Standard – 12.7]

### **6.0 Feed Incidents**

- 6.1 One of the authorities had developed a comprehensive documented procedure which provided information for officers in relation to feed alerts issued by the FSA. Procedures for initiating feed incidents were not available.
- 6.2 There were no examples within the audit timeframe of where feed incidents had been initiated or responded to by either LA.

#### ***Recommendation 8***

Local authorities shall set up, maintain and implement a documented procedure for initiating and responding to feed alerts, in accordance with the relevant Codes of Practice. [The Standard – 14.1]

### **7.0 Enforcement**

- 7.1 Each LA had developed their own enforcement policies which had been documented and approved at the appropriate level. One policy contained the information required for feed enforcement; including the criteria for taking the different types of enforcement action. The other LA policy could be improved by including the criteria for informal action and issuing statutory notices.



### **Recommendation 9**

Local authorities shall set up, maintain and implement a documented enforcement policy, in accordance with the relevant Codes of Practice and other official guidance. [The Standard – 15.1]

- 7.2 One authority had developed documented enforcement procedures which provided information for officers in relation to the conduct of enforcement activities. The enforcement procedures would benefit from including instructions to officers in relation to the use of all enforcement options that are available. Template notices and forms for all type of enforcement options should be linked to the procedures.

### **Recommendation 10**

Local authorities shall set up, maintain and implement documented procedures for follow up and enforcement actions in accordance with the relevant Codes of Practice and official guidance. [The Standard – 15.2]

- 7.3 No formal feed enforcement action had been undertaken across the region within the specified audit timeframe.

## **8.0 Internal Monitoring**

- 8.1 Internal monitoring had taken place in both authorities which included 1-1 meetings with officers to discuss inspections, complaints and training. There was also evidence of shadowing of officers by the regional lead to ensure that officers were competent, consistent, using the correct forms and that advice given to businesses was correct and factual.
- 8.2 One LA had developed a procedure which included line managers shadowing officers during inspections, to ensure consistency and to monitor officer competency. Processes and procedures in relation to qualitative internal monitoring could be improved, to fully specify the scope, quantity and frequency of internal monitoring activity. Authorities would benefit from the use of standard forms, to ensure that more detailed assessments take place.
- 8.3 Auditors were able to verify that limited qualitative monitoring had been undertaken in relation to feed inspections including accompanied inspections and file record checks. The outcomes of internal monitoring had not been recorded in either authority.

### ***Recommendation 11***

(a) All procedures for internal monitoring must be documented including specifying the records to be completed. Documented internal monitoring procedures should include, where appropriate at regional level, local level or both, the following checks:

- An examination of intervention files to check consistency of officer observations and reports.
- That the database risk ratings (including total scores) and due intervention dates are correct. Database checks should include, where applicable, that risk ratings have been amended to reflect the earned recognition status and that an exception report has been made where required.
- That information held on databases and establishment files are consistent with each other; including the correct officer who conducted each intervention.
- An examination of files involving complaints or service requests about feed or feed establishments.
- An examination of files involving sampling activity, particularly those relating to unsatisfactory samples.
- An examination of files involving responses to incidents.
- An examination of files involving formal enforcement actions.

[The Standard – 19.1]

(b) Internal monitoring procedures should be fully implemented, and local authorities should record the outcome of any check and the action taken in relation to any inconsistency identified. [The Standard – 19.1 & 19.3]

**Action Plan for Cwm Taf Regional Feed Service**

**Audit Date: 10<sup>th</sup>-12<sup>th</sup> December 2019**

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>1. a) Authorities shall set up, maintain and implement a documented procedure for the authorisation of officers based on their competence and in accordance with the relevant Codes of Practice and any centrally issued guidance.</p> <p>b) Authorities should review and update authorisation documents to ensure they include references to all relevant and up to date legislation. The level of authorisation of officers should be consistent with their qualifications, training, experience and the Feed Law Code of Practice. Where authorisation certificates do not provide information on the level of authorisation, but such information is provided within respective assessments of competence, these documents should be linked within a single overarching instrument of authorisation. [The Standard 5.1 &amp; 5.3]</p>	<p>Dec 21</p> <p>Jan 20</p>	<p>LAs will set up, maintain and implement procedures for the authorisation of officers or otherwise update them where necessary.</p>	<p>Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.</p> <p>Authorisations amended.</p>
<p>2. Records of qualifications, training and experience of each authorised officer must be maintained by local authorities [The Standard 5.5]</p>	<p>Dec 21</p>	<p>LA's will maintain records of qualifications, training and experience centrally.</p>	<p>Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.</p>

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
3. Local authorities shall set up, maintain and implement documented procedures for the range of interventions/inspections carried out. [The Standard 7.4]	Dec 21	LAs will set up, maintain and implement procedures for the range of interventions/inspections that they carry out or otherwise update them where necessary.	Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.
<p>4. (a) Local authorities shall carry out interventions/inspections in accordance with the relevant legislation, Codes of Practice, centrally issued guidance and the Authority's policies and procedures. [The Standard 7.2]</p> <p>(b) Local authorities shall assess the compliance of establishments and systems in their area to the legally prescribed standards. [The Standard 7.3]</p> <p>(c) Local authorities shall maintain up to date accurate records in retrievable form on all feed establishments in its area, in accordance with Codes of Practice and centrally issued guidance. These records shall include the determination of compliance with legal requirements made by the authorised officer and details of action taken where non-compliance was identified. The authority should also record, with reasons, any deviations from set procedures. [The Standard 16.1]</p>	<p>April 20</p> <p>April 20</p> <p>April 20</p>	<p>LA's to provide further guidance/advice/training to Officers undertaking Feed Official Controls.</p> <p>LA's to provide further guidance/advice/training to Officers undertaking Feed Official Controls.</p> <p>LA's to provide further guidance/advice/training to Officers undertaking Feed Official Controls.</p>	<p>Some LA's are now able to apply Earned Recognition electronically.</p> <p>Inspections and interventions are now being conducted in line with the Standard.</p> <p>LA's are now maintaining records in line with the Standard.</p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
5. Local authorities shall set up, maintain and implement a documented sampling policy that shall accord with any centrally issued or relevant guidance, and relevant Codes of Practice and shall include reference to its approach to any relevant national sampling programme centrally co-ordinated by the Food Standards Agency. [The Standard – 12.4]	Dec 21	LA's will set up, maintain and implement a documented sampling policy where necessary, in accordance with issued guidance and relevant Codes of Practice and covering the areas required.	Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.
6. Local authorities shall set up, maintain and implement documented procedures for the procurement or purchase of samples, continuity of evidence and the prevention of deterioration or damage to samples whilst under its control in accordance with the relevant Codes of Practice and centrally issued guidance. [The Standard – 12.5]	Dec 21	LA's will set up, maintain and implement sampling procedures where necessary, that cover the areas required.	Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.
7. Local authorities shall take appropriate action where sample results are not considered to be satisfactory. [The Standard – 12.7]	April 20	LA's to provide further guidance/advice/training to Officers undertaking Feed Official Controls.	LA's have provided initial advice and guidance to Officers.


TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
8. Local authorities shall set up, maintain and implement a documented procedure for initiating and responding to feed alerts, in accordance with the relevant Codes of Practice. [The Standard – 14.1]	Dec 21	LAs will set up, maintain and implement procedures relating to feed alerts or otherwise update them where necessary.	Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.
9. Local authorities shall set up, maintain and implement a documented enforcement policy, in accordance with the relevant Codes of Practice and other official guidance. [The Standard – 15.1]	Dec 21	LA's will amend their Enforcement Policy where necessary.	Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.
10. Local authorities shall set up, maintain and implement documented procedures for follow up and enforcement actions in accordance with the relevant Codes of Practice and official guidance. [The Standard – 15.2]	April 20	LAs will set up, maintain and implement procedures for follow up and enforcement actions.  LA's to provide further guidance/advice/training to Officers undertaking Feed Official Controls.	Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.

TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)	BY (DATE)	PLANNED IMPROVEMENTS	ACTION TAKEN TO DATE
<p>11. (a) All procedures for internal monitoring must be documented including specifying the records to be completed. Documented internal monitoring procedures should include, where appropriate at regional level, local level or both, the following checks:</p> <ul style="list-style-type: none"> <li>• That the database risk ratings (including total scores) and due intervention dates are correct.</li> <li>• Database checks should include, where applicable, that risk ratings have been amended to reflect the earned recognition status and that an exception report has been made where required.</li> <li>• That information held on databases and establishment files are consistent with each other; including the correct officer who conducted each intervention.</li> <li>• An examination of files involving complaints or service requests about feed or feed establishments.</li> <li>• An examination of files involving sampling activity, particularly those relating to unsatisfactory samples.</li> <li>• An examination of files involving responses to incidents.</li> <li>• An examination of files involving formal enforcement actions.</li> </ul> <p>[The Standard – 19.1]</p>	Dec 21	LAs will set up, maintain and implement internal monitoring procedures or otherwise update them where necessary.	<p>Use of WHoTS Shadowing/monitoring form implemented</p> <p>Initial meeting held. Task to follow up with RFLO the proposed 'best practice model policy/procedure' to be agreed by FSA and WHOTS.</p>

<b>TO ADDRESS (RECOMMENDATION INCLUDING STANDARD PARAGRAPH)</b>	<b>BY (DATE)</b>	<b>PLANNED IMPROVEMENTS</b>	<b>ACTION TAKEN TO DATE</b>
(b) Internal monitoring procedures should be fully implemented, and local authorities should record the outcome of any check and the action taken in relation to any inconsistency identified. [The Standard – 19.1 & 19.3]	Dec 21	LA's will implement and amend, their internal monitoring procedures, where necessary.	



### Assessment of assurance for Cwm Taf Regional Feed Service

<b>Assessment of Assurance:</b>	
	<p><b>Moderate Assurance:</b> The system for delivering official controls requires some improvement to fully demonstrate effective implementation of planned arrangements suitable to achieve the objectives of legal requirements and guidance.</p>

### Audit Opinion

The opinion above is based upon four categories of audit assurance that is applied in relation to each audit report.

AUDIT OPINION – ASSESSMENT OF ASSURANCE	
Assurance	Definition
<b>Substantial</b>	The system for delivering official controls demonstrate effective implementation of planned arrangements suitable to achieve the objectives of legal requirements and guidance.
<b>Moderate</b>	The system for delivering official controls requires some improvement to fully demonstrate effective implementation of planned arrangements suitable to achieve the objectives of legal requirements and guidance.
<b>Limited</b>	The system for delivering official controls requires significant improvement to fully demonstrate effective implementation of planned arrangements suitable to achieve the objectives of legal requirements and guidance.
<b>Unsatisfactory</b>	The system for delivering official controls requires substantial improvement to fully demonstrate effective implementation of planned arrangements suitable to achieve the objectives of legal requirements and guidance.

## Indication of issues for RCT

Report paragraph	Audit finding
2.2 & Rec 1	Cross border authorisation certificates require updating to include the addition of key legislation.
2.3 & Rec 1	Documented procedures for the authorisation of officers should be updated and amended to include the documentation of the full process of authorisation, the assessment of officer competence and linking the authorisation document to the competency assessment.
3.1 & Rec 3	The interventions procedure required some amendments which included directing officers to the appropriate inspection forms and inspection report forms. It would also benefit from including information relating to the application or removal of earned recognition, ensuring the accuracy of registration activity codes, adding reference to the Home Authority principle, prioritising risk within new businesses, providing information to officers on revisits, including when they are appropriate and timescales and undertaking unannounced or short-notice inspections.
3.3 & Rec 4	The inspection forms would benefit from minor amendment to ensure capture of information in relation to whether interventions were unannounced or short notice.
3.5 & Rec 4	Premises files required improvement to ensure that sufficiently detailed records of inspection were being maintained that included: - <ul style="list-style-type: none"> <li>• Recording the size and scale of business operations</li> <li>• Evidencing thorough traceability assessments</li> <li>• Consistently undertaking appropriate follow up action and timely revisits</li> <li>• Ensuring significant issues from previous inspections are followed up.</li> </ul>
3.6 & Rec 4	Some of the inspection report forms issued to FeBOs would benefit from amendment to include prompts that would identify: - <ul style="list-style-type: none"> <li>• The name of the FeBO</li> <li>• Whether or not samples were taken</li> <li>• Clear separation of legal requirements and recommendations</li> <li>• Timescales for achieving compliance</li> <li>• An indication of the action to be taken by the feed authority</li> <li>• Specific, up to date legislation under which the intervention was conducted</li> </ul>

3.7 & Rec 4	<p>Out of the files checked, some files did not provide all required information, including: -</p> <ul style="list-style-type: none"> <li>• Whether or not samples were taken</li> <li>• Name of the FeBO</li> <li>• Specific legislation that the intervention was conducted under</li> <li>• Recording of contraventions identified</li> <li>• Timescales for compliance</li> <li>• Indicating action to be taken by the feed authority</li> </ul>
5.3 & Rec 7	Appropriate follow-up action should be undertaken in relation to unsatisfactory sample results.
6.1 & Rec 8	The feed incident procedure should be amended to include the initiation of feed incidents.
7.2 & Rec 10	The enforcement procedures would benefit from including instructions to officers in relation to the use of all enforcement options that are available. Template notices and forms for all type of enforcement options should be linked to the procedures.
8.2 & Rec 11	Processes and procedures in relation to qualitative internal monitoring could be improved, to fully specify the scope, quantity and frequency of internal monitoring activity, and the use of standard forms which will help to ensure that thorough assessments of officer's intervention activities take place.
8.3 & Rec 11	Outcomes of internal monitoring not documented

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**RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL**  
**MUNICIPAL YEAR 2021-22**

**HEALTH AND WELL BEING SCRUTINY**  
**COMMITTEE**

**22<sup>nd</sup> NOVEMBER 2021**

**REPORT OF THE DIRECTOR, PUBLIC**  
**HEALTH, PROTECTION & COMMUNITY**  
**SERVICES**

**Agenda Item No. 5**

**Progress made by Community  
Housing in relation to the Rhondda  
Cynon Taf Homelessness Strategy  
Action Plan 2018-2022**

**Author(s): Cheryl Emery, Head of Community Safety and Community Housing.**

**1. PURPOSE OF THE REPORT**

- 1.1 The report will update members of the committee with the progress made by the Housing Department in relation to the RCTCBC Homelessness Strategy Action Plan 2018 -2022.
- 1.2 The report also outlines the significant ongoing pressure on the Housing Solutions Service and support services resulting from the pandemic and the additional actions that have been taken.

**2. RECOMMENDATIONS**

It is recommended that members

- 2.1 Scrutinise the content of the report and comment on the progress made to date.

**3. BACKGROUND**

- 3.1 The Housing (Wales) Act 2014 placed a statutory requirement on local authorities to undertake a review of homelessness services and develop a Homelessness Strategy setting out how each Council in partnership with other stakeholders would identify and develop the services required to help and support those in housing need.

The Rhondda Cynon Taf Homelessness Strategy and Action Plan 2018 – 2022 set out its vision for Rhondda Cynon Taf where homelessness is prevented and if and where it does occur people are supported to secure accommodation and support as part of the below objectives.

### 3.2 Homelessness Strategy and Action Plan 2018 – 2022 Objectives

1. Preventing homelessness and repeat homelessness from occurring, wherever possible, therefore reducing homelessness.
2. Ensuring that appropriate support and accommodation, including temporary and emergency accommodation, is available to meet the needs of homeless and potentially homeless people.
3. Ensuring people with housing support needs have these fully assessed and have access to services to help sustain independent living.

### 3.3 Homelessness Duties

#### 3.3.1 The Housing Wales (Act) 2014 places duties on local authorities to help anyone seeking housing advice and assistance.

The specific duties are:

- **Duty to Provide Advice and Assistance:** The Council has a duty to provide advice and assistance to anyone including persons from abroad. For rough sleepers this includes outlining the various accommodation options available, as well as support to access relevant benefits.
- **Duty to Prevent Homelessness:** The Council is required to work with eligible clients to try and prevent homelessness or secure alternative accommodation. For rough sleepers this may include facilitating mediation with family members or addressing issues such as rent arrears.
- **Duty to Help to Secure Accommodation:** Where homelessness cannot be prevented, the Council must assist **all eligible** households to find suitable alternative accommodation. This may include assisting access into the private rented sector, or supported housing for those deemed vulnerable, as defined by the legislation.

### 3.4 Challenges arising from the Pandemic

#### 3.4.1 The Covid 19 pandemic has presented an extraordinary challenge for the homelessness sector following the removal of the Priority Order and the new duty to secure accommodation to all individuals deemed to be homeless.

#### 3.4.2 There has been a downward trend in 2021/22 for homelessness presentations for households with children due primarily to the eviction ban. However, there are higher numbers of single people presenting as homeless with the main reasons identified as due to 'Breakdown of Relationship with Family and Friends' and 'People leaving Prison'.

This is particularly relevant to male applicants aged 25+ who made up **60%** of homelessness presentations in 2020/21 in comparison to **53%** as at the 7/11/21. This has led to a reduction in prevention and relief outcomes with more applicants owed final duty ( help to secure housing) in 20/21 (nearly half of presentations) than 2019/20 (**10%**).

3.4.3 Despite this significant increase in cases triggering the final duty to help secure accommodation, RCT performed significantly better than the Welsh local authority average.

### 3.5 Temporary Accommodation Placement

3.5.1 The change in legislation has led to **696 clients placed in bed and breakfast in 2020/21, a 64% increase when compared to 424 in 2019/2020**. Over **55%** of clients placed in B+B currently would not have been offered a temporary accommodation placement prior to the pandemic. This additional case load has placed additional pressure on frontline staff and services including the housing register.

3.5.2 Alongside the growth in demand, there has been a significant increase in the complexity of cases presenting as homeless with the most common reason for priority housing need being mental health. (**32%**).

## 4. HOMELESSNESS ACTION PLAN PROGRESS

4.1 The RCT Homelessness Strategy 2018 – 2022 is nearing the end of its final year. During this time good progress has been made towards completing the actions and a number have already been achieved, despite the significant and on-going challenges faced this year in delivering effective homelessness services. The pandemic has enabled the Housing Solutions Team to re-evaluate work practice linked with the increasing number of single person applications and the more challenging client complexities linked with substance misuse and mental needs.

4.2 The COVID-19 pandemic has positively impacted on work processes for example the moratorium on evictions which resulted in a decrease in our homeless prevention applications between 2019/20 and 20/21 for households with children.

4.3 We have increased our housing led solutions and early intervention and prevention arrangements including Rapid Rehousing, extending outreach provision and enhanced collaboration across sectors and other council departments to address wider support needs.

4.4 Working in a collaborative way has also been essential to our new ways of working to achieve positive outcomes for our most vulnerable homeless service users.

4.5 **ACTION PLAN OBJECTIVE 1 - Preventing homelessness and repeat homelessness from occurring, wherever possible, therefore reducing homelessness**

### 4.5.1 Care Leaver Pathway

A new joint working Pathway is being implemented between 16+ Team and to effectively manage referrals and accommodation options for care-leavers in a timely way and avoid “crisis” homelessness and TA placements.

#### 4.5.2 Offender Pathway

In recognition that prison leavers are one of the highest needs for placement in bed and breakfast accommodation in RCT, a dedicated housing solutions officer is now co-located in Pontypridd Probation office to further enhance joint working and timely information sharing arrangements. New working arrangements include a revised referral pathway to provide clear information on the housing and support needs of prison leavers post release helping to divert prison leavers from a B+B placement.

Since March 2021 we have received 124 presentations for Prison Leavers with options Identified for 31 pre-release which included 3 being released directly to supported housing in the borough and 7 accessing supported housing post release.

#### 4.5.3 Not Evicting into Homelessness

We have established a Task and Finish Group with our local registered social landlords with the aim of developing a working protocol by the end of March 2022 to end eviction into homelessness, as result of rent arrears or anti-social behaviour. Many landlords have already developed policies in this area, which will be shared to help develop and promote best practice in preventing homelessness in the social housing sector in RCT.

#### 4.5.4 Tenancy Hardship Grant (THG)

This prevention option provides Welsh Government financial assistance to private rented sector tenants, not in receipt of Welfare Benefits, who have accrued rent arrears as a result financial hardship caused by the Pandemic.

To-date, we have received 30 referrals for THG and rejected eleven due to them not meeting the grant conditions. Two applications have been processed with the remaining applications currently being processed.

#### 4.5.5 Crisis Report

The Housing Solutions Team are currently working with Crisis who are a national charity for homeless people with the aim of identifying why 25% of households who present as homeless in RCT drop out of the system.

This work is also being undertaken with five other Welsh local Authorities with the findings discussed at local authority level and will be fed back as learning points to other local authorities. To date, consultation has been undertaken with the Housing Solution Team and Mangers. An information sharing protocol has also been developed to enable a file audit of homelessness applications to be undertaken for those who have dropped out of the system.

An action plan has been developed with recommendations for 8 quick wins linked with service improvement and design Ideas for longer term service planning including early intervention and prevention work.

#### 4.5.6 Complex Needs Panel



The Housing Solutions Service is also involved with the Serious Neglect Panel (SSNP) and the local multi-agency working arrangements agreed by the Cwm Taf Safeguarding Board to provide an escalation process for managing cases of serious self-neglect linked with vulnerable individuals to offer support and prevent loss of accommodation. The SNPP will be chaired by the Local Authority area Adult Safeguarding Manager. The Vice Chair will be the Head of Community Safety and Community Housing.

#### 4.6 **ACTION PLAN OBJECTIVE 2: Ensuring that appropriate support and accommodation, including temporary and emergency accommodation, is available to meet the needs of homeless and potentially homeless people**

To meet the increasing demand and the new challenges, the Council has worked in partnership with private landlords, the third sector and housing association partners to deliver new and innovative approaches to adapt to the increased demand, changing environment, and the needs of clients.

Site and project development issues have delayed the commissioning of 4 bedspaces of supported accommodation for young people in the Penycraig and 8 bedspaces of supported accommodation for single people in Treherbert. Both projects are due to come online early Spring 2022. Revenue funding has also been identified to commission additional projects based on need when suitable buildings have been identified to support those who are alcohol dependent and young people (aged 16-24).

##### 4.6.1 Enhanced Temporary Accommodation Arrangements

The Council has developed alternative forms of temporary accommodation during the last 18 months, which include shared accommodation managed by a private landlord. We also work with Cartrefi Hafod who provide leased properties in the community which are predominantly used to accommodate households with children

To meet the increased demand for temporary accommodation, we have secured additional bed and breakfast placements throughout RCT utilising WG Funding provided for this purpose. This includes bed blocking 93 rooms to ensure we have the capacity to meet any increased demand over the winter months. In recognition of the unsuitability of this type of temporary accommodation and the increasing number and complexities of individuals, it is important the needs of service users are thoroughly assessed to ensure they can be offered the right services at the right time.

Security arrangements have been agreed and are in place in some of our Bed and Breakfast establishments to help with the management and complexities of individuals placed.

#### **Table 1: Breakdown of Temporary Accommodation Establishments used by RCTCBC,**

- **Bed and Breakfast** - 10 Properties / 93 Rooms.
- **Directly with a private sector landlord** – 4 Properties / 18 Rooms.
- **Hostel and emergency bed (Young People)** – 11 bedspaces.
- **Hostel (Single people 18+)** – 12 bedspaces.
- **Private sector accommodation (leased)** – 22 Properties.

- 5 Bed = 1
- 4 Bed = 1
- 3 Bed = 11
- 2 Bed = 6
- 1 Bed = 3

#### 4.6.2 Social Letting Agency

The Social Letting Agency (SLA) was established during the pandemic following approval of £129k Welsh Government grant funding to work in partnership with private landlords, to help develop affordable housing options in the private rented sector for homeless people.

The new team is made up of a Team Leader post and two Housing Officers who are based within the Housing Solutions service.

The current housing market and the high demand for private rented accommodation outstripping supply, has meant progress in attracting landlords to the scheme has been slower than expected. However, the team have made many useful landlord contacts and are an important link between the Housing Solutions Team helping where possible to secure private rented accommodation particularly for households with children.

The WG National Rollout of the SLA planned for early later this year will offer enhanced financial incentives for landlords particularly in respect of grants and flexibility on the application of the 10% charge to landlords, as part of their rental payment set at the Local Housing Allowance rate. It is hoped the new arrangements, will offer a more attractive package to landlords who are currently enjoying a very buoyant housing market led by high demand for private rented accommodation and people who can afford to pay market rents.

#### 4.6.3 Supported Accommodation

The Council commissions various types and range of accommodation-based support services available for single homeless people. The schemes specialise in support for those with mental health, substance misuse and offending behaviour. In total there are 102 bedspaces funded by Housing Support Grant (HSG) in RCT to deliver specialist supported accommodation and help prepare people for independent living.

Additional HSG funding made available to all 24/ 7 commissioned projects this financial year will ensure the right level of staffing resources to meet the complex needs of client's currently being referred for some supported accommodation.

Access to all supported accommodation projects is managed through the Single Point of Access (SPA) with a Multi-agency panel overseeing referrals in to supported accommodation project. As from the 1<sup>st</sup> April 2021 over 1000 applications for a housing related support service have been received and processed by the Housing Support Grant Team with 82 single homeless people assisted to access a supported accommodation project and others offered support appropriate to their needs.

4.7 **ACTION PLAN OBJECTIVE 3: Ensuring people with housing support needs have these fully assessed and have access to services to help sustain independent living.**

4.7.1 Rough Sleeping

Incidents of rough sleeping are very low across many of our towns in Rhondda Cynon Taf and we do not experience the levels of entrenched rough sleepers as seen in many of the big cities.

Most experiences of rough sleeping are usually associated with the client not wishing to engage with support or being asked to leave their temporary accommodation placement due to unacceptable behaviour.

The Outreach Service based in Pontypridd and currently funded by Housing Support Grant is currently under review with the aim of expanding the service to provide a wider multi agency response in partnership with Probation, Dyfodwl and South Wales Police. This will help respond to the wider issues being experienced for example in Pontypridd Town Centre, which include street drinking, anti- social behaviour, and incidences of begging by clients known to local services.

4.7.2 Complex Needs

We recognise the increase in the number of homelessness presentations where the lead need is mental health, as well as a significant number of these presentations having co-existing substance misuse related needs. The Council in partnership with Area Planning Board (APB) Cwm Taf University Health Board, Bridgend County Borough Council and Merthyr County Borough Council have developed a Mental Health and Substance Misuse Outreach Health Team. This is an exciting new project offering medical and support interventions to those individuals placed in all forms of temporary accommodation and those assisted by the RCT Housing First Project.

The team is made up of:

- Administrative support.
- Independent Domestic Violence Advocate.
- 2x Co-occurring Support Workers (Barod).
- A specialist Substance Misuse Nurse.
- A specialist Mental Health Nurse.
- A General Practice Nurse.
- 4 x Trauma Councillors.

This project offers direct 121 support for service users with mental health and substance misuse issues ensuring they have access to outreach crisis intervention support and are referred to appropriate agencies. Additional work is ongoing to provide additional outreach services such as podiatry and dentistry.

Please see Table 1 below which outlines the referral reasons to the Outreach Health Project as at the 29<sup>th</sup> September 2021.

Table 1 Outreach Health Project

<b>Reason for Referral</b>	<b>Number of Referrals (%)</b>
Mental Health & Substance Misuse issues overlapping	54 (75%)
Difficulty engaging in generic services / fallen out of generic services for Mental Health and/or Substance Misuse	35 (48.6%)
High Risk individual with severe mental health / heavy substance misuse / high risk due to substance misuse & medication	27 (37.5%)
Only mental health support requested	18 (25%)
Physical health need	20 (27.8%)

#### 4.7.3 RCT - Housing First

The RCT Housing First Project is an initiative to help those with high complex support needs and chaotic lifestyles who cannot break the cycle of homelessness.

The project is a partnership with local registered social landlords and support provider Pobl to provide an alternative accommodation and support model, by placing people directly into properties with no preconditions offering an independent living solution with intensive wrap around support.

The Housing First Team received additional funding this year to provide additional staffing resources, to allow an increase in referrals and to develop a pilot a project with registered social landlord partners for complex individuals living in social housing who may be at risk of losing their tenancies.

This will aim to prevent homelessness for our most complex cohort of individuals by maintaining tenancies through reducing the need for alternative accommodation and for a temporary accommodation placement.

#### Housing First Data as from the 1<sup>st</sup> April 2021 – 31<sup>st</sup> October 2021

- There are **36** people currently on scheme, with **4** new referrals received during October 2021, bringing the total for accessing the scheme since the beginning to **60**.
- The number of new Housing First tenancies started during October was **1**, bringing the total to **28**.
- **19** people (**52.8%**) on scheme are maintaining tenancies at the end of October 2021.
- **9** people (**25%**) on scheme are not residing at their tenancy at end of October 2021, due to prison/custodial sentence (**7**), hospital admission (**1**) and rehabilitation (**1**). These individuals are still being supported where they are residing.
- **10** people on scheme are not sustaining tenancies and are being supported via outreach.
- **8** are residing in emergency/B&B accommodation; and
- **2** are currently in prison but have NFA (no fixed abode) once they are released.

#### 4.7.4 Short Term Offender Project

This is a new Housing Support Grant funded initiative in partnership with Kaleidoscope Probation and Her Majesty's Prison Service. This project will work with our most persistence repeat offenders who are often subject to short term sentences i.e., those

who are sentenced to less than 12 months in custody with the aim of providing one-to-one-person centred face to face support whilst in Prison, at the gate and wherever they are placed. The aim of the project is offer positive outcomes for repeat offenders, which include breaking the cycle of homelessness through harm reduction, diversionary activities and signposting to appropriate services. The project has received endorsement from the Cwm Taf Morgannwg Offender Management Group.

#### 4.7.5 Cwm Taf Healthy Partnership C4c Wales

This is a more recent innovative partnership between Community Housing and Public Health Wales and Cwm Taf University Health Board and will explore how Housing and Health are intimately intertwined and work towards improved housing/ health partnership arrangements. This will aim to improve outcomes for residents/ clients/ patients through development of a mechanism to share, interpret and use data for action across partners in relation to housing and Health. This will lead to a better understanding of the services we need to commission to address the health and support needs of our vulnerable client groups.

### 5. **UP-DATE ON REGIONAL PROJECT DEVELOPMENT- HOMELESS AND HOUSING SUPPORT GRANT**

5.1 In addition to projects aligned to the RCT Homelessness Strategy and Action Plan, the service works in collaboration with Merthyr Tydfil and Bridgend Councils through the Regional Housing Collaborative Committee. This is delivering additional Projects that benefit residents and service users in RCT.

#### 5.2 LGBTIQ+ Specialist Project

A team of consultants are working under the direction of support providers Llamau's Management Team and in close partnership with the Housing Support Grant & Homelessness Teams in Bridgend CBC Merthyr CBC and Rhondda Cynon Taf County Borough Council. The project will evidence the level of regional need and provide strategically relevant research in order to identify the potential needs and value of progressing with the development of a LGBTIQ+ specialist, regional project.

#### 5.3 BME Scoping and Development

This regionally commissioned project will scope the needs of the BME population in Cwm Taf Morgannwg specifically for those experiencing Harmful Cultural Practices, alongside Housing related support needs. The project also provides specialized support and signposting to BME victims who are threatened by or at risk of Domestic Abuse, forced marriages, honour-based violence, and Female Genital Mutilation (FGM)

Both the above projects will provide regular update documents to HSG leads and the Regional Housing Support Collaborative Group (RHSCG). A final report will include recommendations for the potential development of an appropriate service designed to meet the needs of the specific client group for completion 31<sup>st</sup> March 2022 and to inform future local and regional commissioning arrangements.

## **6. LOOKING FORWARD - CHALLENGES AND OPPORTUNITIES**

- 6.1 Despite the work undertaken to date and the additional funding made available during the pandemic, here remains ongoing challenges post March 2022. These include:
- The significant pressure on temporary accommodation and high number of individuals placed in Bed and Breakfast accommodation.
  - People remaining in temporary and supported accommodation longer than necessary due to limited move on housing options.
  - Meeting the housing and support needs of a small cohort of homeless individuals with high complex needs.
  - The possible removal of the WG Hardship Fund as from 1<sup>st</sup> April 2022 and the uncertainty of the medium to long term impact of the pandemic on homelessness and housing services.
  - Identifying suitable locations and buildings for the development of specialist projects.
  - Recruitment and retention within support sector of high- quality staff linked with uncertainty over funding and short- term contracts.
- 6.2 The current buoyant housing market is leading to higher demand and contributing to the lack of permanent accommodation options in both the social and private rented sectors. This remains an ongoing issue in being able to deliver long-term, holistic approaches to supporting those at risk of or experiencing homelessness.
- 6.3 Looking to the long term, the development of the Needs Statement and Housing Support Programme Strategy currently being developed by an Independent Consultant will be presented to Cabinet early in the new year for consideration. This will replace the Rhondda Cynon Taf County Homelessness Strategy and Action Plan 2018 -2022 and provide a new action plan based on the findings and recommendations of the needs assessment and the subsequent development of a “Statement of Need” for the period 2022 -2026.

## **7. CONCLUSION**

- 7.1 The Council has made significant progress in delivering the actions identified by the Homelessness Strategy and Action Plan 2018-2022, in spite of the tremendous pressures faced by the service during the past 18 months. This has been possible through effective commissioning and partnership working plus the use of innovative new approaches to address the needs of our clients, particularly those with complex needs. The Housing Needs Assessment currently being completed will fully assess the current and emerging needs of our clients and recommend a new strategic direction for the Council which, if supported by Cabinet, will form the basis of the forward plan for Homelessness and Housing Support Services from 2022-26.