

Rhondda Cynon Taf County Borough Council

DRAFT

Director of Social Services Statutory Annual Report

2021/22

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1. Introduction

- 1.1 The publication of this report is a statutory requirement of the Code of Practice issued under Part 8 of the Social Services and Well Being (Wales) Act 2014. The report describes how we have exercised our social services functions, our performance across the range of services and support we provide, and action taken to further improve our services and support.
- 1.2 A summary of progress against our priorities for the year is provided, together with an overview of our continued response to the pandemic. We also set out our service priorities for 2022/23.
- 1.3 We have a skilled and experienced workforce committed to meeting the needs for our residents for care and support and, where necessary, protecting them from harm. Our goal is not only to keep people safe but also to improve their wellbeing across the age range.

Our priorities

- 1.4 A significant part of what we do and how we do it is governed by law. For example, the Social Services and Well-Being (Wales) Act 2014 and the Wellbeing of Future Generations (Wales) Act 2015 both place a duty on us to improve people's wellbeing through partnership with other organisations. Involving people in the review and design of services is also a requirement.
- 1.5 We are committed to meeting the care and support needs of all those who need our help and the wider community, particularly:
 - People with learning disabilities
 - Older people with complex needs and long-term conditions, including dementia
 - Carers, including young carers
 - Families and individual members of families, including children
 - Children with complex needs due to disability and illness
 - People with mental health issues
 - People with physical impairment and / or sensory impairments
 - People who have experienced adverse childhood experiences
- 1.6 We know the following are important to people:
 - Helping to meet people's needs and doing what matters to them
 - Preventing problems from happening in the first place
 - Where problems occur, preventing them from getting worse
 - Providing people with good quality information, advice, and assistance
 - Helping people to access services and support so they can connect with others in their community
 - Working closely with other organisations to providing more integrated services
- 1.7 We aim to avoid, as far as possible, people becoming dependent on services, instead seeking to maximise people's independence, providing the minimum support they need to live safely, preferably in their own home.

What is in this report?

- 1.8 We are accountable to the residents of Rhondda Cynon Taf. This report of our performance in 2021/22 helps us demonstrate our accountability by being open about what we are doing and why, and what we have achieved.
- 1.9 It explains what we have delivered through our day-to-day services, and the developments during the year which have enabled us to do more to meet people's needs now and in the future.
- 1.10 **Part 2** provides an overview of what our Adult Services and Children's Services delivered and achieved during the year, while **Part 3** explains how people are shaping our services and what we do.
- 1.11 **Part 4** explains how we work with people and what we have done to improve their wellbeing. It also says what we have done to protect and safeguard people from abuse, neglect, and harm, and to help people develop and maintain healthy domestic, family and personal relationships.
- 1.12 **Part 5** explains how we operate as a department including our workforce, our financial resources and how we plan, and our partnership working with other organisations. On the last page of this report, **Part 6** provides sources of relevant information.

2. Overview of performance

- 2.1 This last year has been another of considerable challenge. While restrictions eased over the course of the year, we have continued to protect the health and wellbeing of people who use our services and their families and our staff. Many of the impacts of the pandemic remain and we are seeing increasing demands on our services as a result.
- 2.2 Our ability to keep delivering services, albeit with some limitations at times, has only been possible because of the immense efforts of our staff throughout social services and our colleagues in other parts of the Council and in our partner organisations. Our foster carers and individuals who come forward to adopt children play a significant role and over and above helping us to ensure a child gets the care they need, they make a huge difference to their lives.
- 2.3 I commend their dedication and effort in difficult circumstances. We are also fortunate to have strong corporate support from the whole organisation and support from the leadership of the Council and our Elected Members. I am grateful to everyone who has played a part in helping us deliver much needed care and support to the County's residents.
- 2.4 Key achievements during the year for our Adult Services include:
- We received almost 12000 contacts and we were able to successfully provide information, advice, and assistance in 88% of the contacts received.
 - Overall assessment activity was up by over 20%, with almost 8500 assessments completed compared to just over 7000 in the previous year. Our SPA assessment activity was also up by nearly 18% (over 1060 assessments) year on year and almost 70% of the assessments resulted in either the provision of information, advice, or a preventative service avoiding the need for long term social care support.
 - We supported over 10600 people and supported almost 9200 people to remain living within their own homes within their local communities.
 - Over 3600 people received support from our Lifeline+ Service, which provides a 24-hour mobile response service to support people in their own homes by responding to non-medical emergencies. Over 8000 calls were made by the service to assist people with non-injured falls and emergency personal care, preventing more than 6000 calls being made to emergency services.
 - 67% of the 1290 people we supported through our intermediate care and rehabilitation service who received support (up by 20% in 2021/22) returned to self-caring or had reduced their levels of formal support following the intervention period.
 - We continued to work closely with the Health Board to expedite the safe discharge from hospital, investing in a new permanent Hospital Social Work Team and

adopted new processes and ways of working. On average we supported 21 in-patient discharges per week and 22 discharges per week through our integrated Stay Well @ Home service therefore avoiding in-patient admission.

- We maintained increased levels of carers assessments and support offered. 485 adult carer conversations have taken place this year compared to 374 last year, a 30% increase.

The Carer Support Project have continued to support unpaid carers this year to enable them to balance their caring role and maintain their desired quality of life. This has included raising awareness, identifying more carers and exploring ways in which they can bring carers together for mutual support and advice. There are now over 2500 adult carers registered with the project.

- Expanded our engagement framework with people with people with a learning disability to deliver our aspirations for co-production and transformation initially of our day services offer to them. In 2021/22, we created a Partnership Group chaired by a “paid” person with a learning disability and a citizen’s panel “RCT Transformers” to ensure that our future plans are informed by peoples’ experiences and are appropriate to their needs.
- Cwrt Yr Orsaf Extra Care in Pontypridd and Oxford Building Independent living scheme in Mountain Ash, opened and welcomed new residents in 2021/22 and we are also continuing to work on 7 new accommodation with care schemes across Rhondda Cynon Taf.

2.5 Key achievements during the year for our Children’s Services include:

- We have implemented year one of our 3-year CLA prevention strategy and have seen an increase in the number of families remaining together and an associated reduction in the rate of children becoming looked after. At the end of March 2022, we had 655 Children Looked After compared to 694 the year before, and 717 the year before that.
- More than 90% of visits to children in our care were completed on time.
- We received 24385 contacts for children, 25% more than the previous year. In 99% of cases, a decision on the need for advice or assistance was made by the end of the next working day. This performance was achieved despite the significant increase in the number of contacts.
- We completed 85% of all reviews to ensure we are delivering what children in our care need due within the statutory timescales, a slight increase on our performance the previous year (83%)
- There was nearly a 20% increase in children placed for adoption.
- 35% of children looked after were placed with relative carers, an increase on the previous year.

- We provided information, advice, or assistance to 10463 children and families, an increase of 29% on the previous year
- The resilient families service responded to an increase in referrals of 80%.
- There was a small increase in use of our own children's residential care rather than independent / private residential care.
- There was a small increase in the number of people being assessed to become a foster carer in the County.

2.6 The pandemic has had a profound impact on our services, our staff, and the people for whom we care and support. Although the acute phase and response to the pandemic has passed, we face a significant and ongoing challenge in responding to complexity of need and increased demand for social services and social care.

2.7 In this report, we have described key elements of our performance and developments. We have also identified where we need to improve, and this is reflected in the priorities we have set ourselves for 2022/23.

A handwritten signature in black ink, appearing to read 'Paul Mee', written in a cursive style.

Paul Mee
Group Director for Community and Children's Services

3. How are people shaping our services?

- 3.1 Reaching out to obtain the views on needs and services of people who use our services and to the public more widely central to the way we work. Huge efforts continue to be made to keep in touch with people through information and awareness raising, social media, surveys, and feedback questionnaires.

Capturing the views of those who use our services and their families

- 3.2 We capture feedback on our services in different ways to measure the quality of our services and to determine what outcomes we achieve for people in meeting their care and support needs. For example, surveys of peoples' experiences, together with letters from people with compliments or complaints, are important to finding out whether we are getting things right. Our services are also regulated and are therefore subject to inspection by the Care Inspectorate Wales to help us improve.
- 3.3 Across our adult social work teams "community of enquiry" is now embedded as our engagement and participation approach, giving service users and their families and carers opportunity to discuss current service offers and changes they would make to services and practice. We have used this community of enquiry work to inform the redevelopment of our direct payment and advocacy polices and offers.
- 3.4 Despite some disruption due to the pandemic, Quality of Care Reviews have continued to be undertaken in Adult Services to ensure compliance with the statutory requirements placed upon the Council's in-house registered residential and domiciliary care services. Through this work, residents and their families are provided with an opportunity to express their views on the care and support they receive. Their views are recorded within quarterly review report and, where relevant, actioned and reported to CIW. As in previous years, comments made by residents and their families have been positive and paints an overall positive picture for each individual home and the services provided.
- 3.5 We have engaged with unpaid carers to review the introduction of the carers conversation in the previous year, which reported positive improvements to our new approach to carers assessments and is embedded across our social work teams. We have also surveyed carers directly to inform the ongoing development of the Carers Support Project service offer and programme of activities.
- 3.6 In November 2021 we held a face-to-face engagement event with unpaid carers from Rhondda Cynon Taf and Merthyr Tydfil, jointly with the Regional Partnership Board, to understand what unpaid carers need in terms of breaks from their caring role and support to achieve a life alongside caring. A menu of options was produced by the people at the event, covering everything from basic information and advice to short breaks and wellbeing support. We will use what we learnt to inform future commissioning of carer support and to develop any future strategy or services.

- 3.7 Building on engagement with people with a learning disability in the previous year, a further round of engagement events and activities with key stakeholders were carried out in the Autumn of 2021 to inform the development of a co-produced learning disability day opportunity service strategy and offer.
- 3.8 As part of work to consider how the residential care homes and nursing homes market in the Cwm Taf Morgannwg region needs to adapt and develop to meet changing needs and demands, we asked for comments from family members of residents and the public. More than 100 individuals provided feedback on what is important to them and their relatives in the delivery of residential and nursing care, and this information will inform future developments.
- 3.9 In 2021/22, we identified 227 adults for advocacy to assist them compared to 186 in 2020/21. In 200 cases, an Independent Professional Advocate was provided compared to 175 in the previous year.

Engaging with children and young people

- 3.10 We use a range of methods to engage children. These included our Forum for looked after children, the Young Carers Forum, and street-based surveys which are undertaken termly. Young carers have been part of a film highlighting the impact of the pandemic on their lives, alongside other carers of all ages. This is designed to raise the profile locally of unpaid carers. We are also undertaking “Mind Our Future” and Public Service Board Wellbeing of Future Generations working group sessions which feed into our strategic planning.

How people have influenced our decisions?













- 3.11 Our commitment to capturing feedback from users and their families is endorsed by the findings of Care Inspectorate Wales’ assurance check, which was reported in November 2021. It concluded that overall, people’s views are sought, and they are involved in assessments and care and support planning. Although case recordings were variable in respect of capturing the person’s involvement. However, people are provided with opportunities to comment on the services they receive
- 3.12 In Adult Services, the inspectors found an outcome-focused approach embedded in practice, which supported a co-production style and the identification of personal outcomes. Matters relating to consent, advocacy, mental capacity, and best interests were routinely considered at an early stage in the engagement process, and information gained was used appropriately to inform assessments and care planning.

What do people think of our services?

- 3.13 We assess what people think of our services by undertaking surveys, analyse the findings of reviews and consultations, and note people’s comments when they contact us with complaints or to compliment us. We use this information to improve the services we deliver. Our Adults Services and Children’s Services teams also undertake self-assessment exercises, which aim to reflect on what we are doing and where we can improve.

3.14 The following table compares the results of this year’s survey for Adult Services with those of the previous three years. The survey, which is based on a sample of adults aged 18 and over who had a care and support plan on the day the sample was drawn. It measures things which people tell us are important to them. A total of 495 people responded to the survey.

Table 3.1: Key service quality measures, Adult Services, 2018-19 to 2021-22

| | Service quality measure | 2018 - 2019 | 2019 - 2020 | 2020 - 2021 | 2021 - 2022 | Change to last year |
|----|--------------------------------------------------------------------------------|--------------------|--------------------|--------------------|--------------------|---------------------------------------------------------------------------------------|
| 1 | I live in a home that supports my wellbeing | 93% | 92% | 94% | 92% |  |
| 2 | I can do the things that are important to me | 77% | 85% | 86% | 73% |  |
| 3 | I feel a part of my community | 69% | 77% | 74% | 63% |  |
| 4 | I am happy with support from my family, friends, neighbours | 97 | 96 | 93 | 94 |  |
| 5 | I feel safe | 94 | 95 | 92 | 91 |  |
| 6 | I know who to contact about my care and support | 83 | 87 | 85 | 87 |  |
| 7 | I have received the right information or advice when I needed it | 91 | 92 | 92 | 90 |  |
| 8 | I have been actively involved in discussions about how my care and support was | 90 | 88 | 92 | 88 |  |
| 9 | I was able to communicate in my preferred language | 95 | 95 | 96 | 95 |  |
| 10 | I was treated with dignity and respect | 97 | 99 | 98 | 98 |  |
| 11 | I am happy with the care and support I have received | 97 | 97 | 96 | 94 |  |
| 12 | It was my choice to live in a residential care home | 56 | 57 | 61 | 64 |  |

Source: Rhondda Cynon Taf County Borough Council

Note: Percentages based on adults who answered each question with “Yes” or “Sometimes”. Figures have been rounded.

3.15 Respondents’ responses in 2021/22 show that 33% of the service quality measures improved or remained the same compared to 2020/21. The remaining measures predominantly show a slight reduction in the performance levels over the last year. Some of the changes can be explained by people’s experiences during the pandemic, relating, to “feeling part of my community” and “being able to do things that are important to me” due to some reduced services and reported increases in isolation and loneliness through 2021/22. However, considering that this survey was undertaken during a pandemic, the high percentage of positive responses received is an indicator that most people who were surveyed were satisfied with the care and support they were receiving.

3.16 In addition to the above, Individual service areas within Adult Services have well-established processes for collecting feedback as part of their quality assurance processes. For example, Our Support@Home Services, which provides home care, intermediate care and rehabilitation services, regularly capture feedback from people who use our services and their families and unpaid carers, either at the end of











intervention or annually. This year's survey provided positive feedback despite the difficulties encountered during the pandemic:




- **Support @Home (Intermediate Care and Rehabilitation Services)** – respondents' feedback is consistently positive with:
 - 97% reporting they benefited from the services they received
 - 91% reporting they had achieved their goals
 - 97% reporting they had been able to maintain their independence

- **Support @Home (Home Care)** - respondents' feedback is consistently positive with:
 - 82% reporting the service they received was very good or excellent
 - 94% reporting they had been helped to keep their independence
 - 100% reporting they had been treated with dignity and respect

3.17 The following table compares the results of this year's survey for Children's Services corresponding results for the previous three years. The survey is based on children who had a care and support plan on the day the sample was drawn. There were more than 160 respondents to the survey of which 102 were aged 7-14 and 48 aged 15-17. The remainder preferred not to say or did not answer this question

Table 3.2: Key service quality measures, Children's Services, 2018-19 to 2021-22

| | Statement | 2018-2019 | 2019-2020 | 2020-2021 | 2021-2022 | Change this year/last |
|----|-------------------------------------------------------------|-----------|-----------|-----------|-----------|---------------------------------------------------------------------------------------|
| 1 | I live in a home where I am happy | 98 | 97 | 98 | 85 |  |
| 2 | I am happy with the people I live with | 99 | 97 | 100 | 89 |  |
| 3 | I can do the things I like to do | 96 | 96 | 97 | 75 |  |
| 4 | I feel I belong in the area where I live | 92 | 92 | 94 | 81 |  |
| 5 | I am happy with my family, friends, and neighbours | 98 | 95 | 98 | 91 |  |
| 6 | I feel safe | 96 | 97 | 97 | 91 |  |
| 7 | I know who to speak to about my care and support | 94 | 95 | 94 | 92 |  |
| 8 | I have had the right information or advice when I needed it | 89 | 90 | 95 | 84 |  |
| 9 | My views about my care and support have been listened to | 93 | 92 | 93 | 82 |  |
| 10 | I have been able to use my everyday language | 98 | 98 | 99 | 97 |  |

| | | | | | | |
|----|---------------------------------------------------------------------------------------------------|----|----|----|----|-------------------------------------------------------------------------------------|
| 11 | I was treated with respect | 98 | 98 | 97 | 89 |  |
| 12 | I am happy with the care and support I have had | 96 | 97 | 97 | 91 |  |
| 13 | I have had advice, help and support that will prepare me for adulthood (16 and 17 year-olds only) | 90 | 77 | 82 | 80 |  |

Source: Rhondda Cynon Taf County Borough Council

Note: Percentages based on children who answered each question with "Yes" or "Sometimes". Figures have been rounded.

- 3.18 Performance was slightly lower this year compared to the previous year in all thirteen service quality measures. Most of the differences were between 2-11 percentage points. Inevitably, it is likely some of the changes can be explained by experiences during the pandemic. Comments made by children and young people were on balance, complementary, reflecting some very positive experiences which were having a good impact on their lives. There was a variety of reasons for negative comments, including neighbours or the other children living with them.
- 3.19 4 out of 5 parents (80%) said they had been actively involved in all decisions about how their child's/children's' care and support was provided, with a further 11% saying this was sometimes the case. The results were similar to those of the previous two years. Comments made by parents do indicate that even with being actively involved, the experience can sometimes be negative. The most common theme, and thus an area for improvement, is lack of information or not being kept informed.
- 3.20 25 carers responded to our survey. This was lower than the 37 recorded in 2020/21. Three quarters of carers were aged between 65-84 years. The key highlights were:
- 20 carers (87%) said they had been actively involved in decisions on how the support for them was provided
 - 18 carers (75%) said they had been involved in all decisions about how care and support was provided for the person for whom they care. Four said they had sometimes been involved and 2 said they had not been involved
 - 14 carers (56%) said they felt supported to continue in their caring role. Eight carers said this was sometimes the case and one said they did not feel supported.
 - 18 carers (72%) said they had the right information and advice when they needed it
 - 10 carers (39%) said they can do the things that are important to them. The majority (54%) said it was only sometimes
 - 11 carers (46%) said they were happy with the support they have had. 13 others (54%) said they were sometimes happy with the support they received

Complaints and compliments

- 3.21 On the relatively few occasions when we have not met people’s expectations, we use the feedback to improve our service. The following table shows the number of complaints and compliments received this year and in the three previous years.

Table 3.3: Number of complaints and compliments received by Adult and Children’s Services, 2016-17 to 2020-21

| | | 2018-2019 | 2019-2020 | 2020-2021 | 2021-2022 |
|---------------------|------------------------------------|------------|------------|------------|------------|
| Adult Services | No, of complaints received | 56 | 54 | 25 | 63 |
| | No, of compliments received | 124 | 93 | 90 | 66 |
| Children’s Services | No, of complaints received | 32 | 59 | 29 | 47 |
| | No, of compliments received | 39 | 59 | 92 | 116 |
| Total | No. of complaints received | 88 | 113 | 54 | 110 |
| | No. of compliments received | 163 | 152 | 182 | 182 |

Source: Rhondda Cynon Taf County Borough Council

- 3.22 In 2021/22, there were increased complaints received in both Adult and Children’s Services compared to the previous year and are more consistent with pre-pandemic levels.
- 3.23 The top three reasons for complaints in Adult Services were poor communication and information sharing, the quality of care and services and dissatisfaction with the decision to provide a service. The first two reasons also feature in the top three reasons for complaints in Children Services, along with staffing issues.
- 3.24 The highest number of complaints were received for the social work teams across both Adult and Children Services which undertake longer term intensive and complex work with people and families, and this remains consistent with previous years. Complaints relating to our commissioned Domiciliary Care provision have risen in the year, which is mainly attributable to the high percentage of staff having to self-isolate due covid at very short notice and ongoing recruitment and retention challenges, which has on occasion impacted service delivery and quality.
- 3.25 Most complaints are dealt with at stage 1 (informal complaint) without the need to progress to stage 2 (formal complaint). There were no interventions from the Public Services Ombudsman for Wales in 2021/22.
- 3.26 The total number of compliments received relating to services for adults and children’s were the same as the previous year, although there was increase in Children’s Services over the same period compared to a decrease in Adult Services. Overwhelmingly the compliments received continue to demonstrate the high level of service and professionalism of our staff. People have explained how appreciative they are of the service provided and the big difference the input has had on their lives.

Welsh language

- 3.27 The release of the 2021 Census results from summer 2022 will provide us with a more up to date picture of the local population context within which we operate. However, we continue to be committed to giving people the opportunity to receive services delivered and/or funded by us in Welsh.
- 3.28 Our approach reflects the Welsh Language Standards and the Welsh Government's "Follow-on Strategic Framework for Welsh Language Services in Health and Social Services." The Council's tender and contract processes list all the applicable Welsh Language Standards required of services we commission, which ensures the Welsh Language is an integral part of commissioning. Monitoring officers ensure compliance as part of our monitoring of independently run care homes.
- 3.29 People who prefer to receive services and support through the medium of Welsh are highlighted in our system. All our publications are bilingual. We continue to train and development staff to encourage them to learn Welsh and provide briefings and reminders on the offer of services in Welsh.
- 3.30 The total number of new assessments completed for children during the year was 5,238. There was evidence of the active offer of Welsh in 1,242 cases (24%). The offer was accepted in 3 cases. In Adult Services, the total number of new assessments completed during the year was 8,452. There was evidence of the active offer of the Welsh language in 8,427 cases (99.7%). The offer was accepted in 80 cases.

4. Promoting and improving the wellbeing of people we help

- 4.1 We provide care and support using our own in-house services and by working closely with other organisations to meet the needs of vulnerable children, young people, adults, and families and to help them to improve their wellbeing. Our work is framed by the Cwm Taf Regional Plan 2018-23ⁱⁱ, which identifies what we need to do to meet the needs of our residents.
- 4.2 Aside from the challenges of helping people through the pandemic, there are many challenges ahead of us to meet people's ongoing needs. There is increasing demand for our services, and we expect this to continue. This section explains what we have done during the year to deliver services and support and to improve them.

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

What did we plan to do in 2021/22?

- 4.3 We said we would:
- Continuously evaluate and develop our early help service
 - Strengthen family support services that safely prevent entries to care
 - Continue to embed the new carers conversation approach to ensure the support offered to unpaid carers to maintain their caring role and quality of life is personalised to individual need
 - Continue to empower more people to commission their own care and support through greater promotion of direct payments
 - Further enhance commissioning and delivery models to improve access to, and support engagement in, early intervention and prevention services for children and young people and families to reduce the demand for statutory services.

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

Evaluating and developing our Early Help Service

- 4.4 Our Resilient Families Service programme responds to people's needs by delivering support as early as possible after the need has been identified. We assess families' needs, creating an individual plan for each family, which is reviewed to ensure the work has been done. Working in partnership with other organisations, it aims to resolve problems without the need for statutory services. It remains a vital part of our approach to providing the right support at the right time, thus reducing the likely need for statutory intervention. It is needed now more than ever considering the challenges facing families across the County because of Covid-19.

4.5 The multi-disciplinary team is vitally important as needs are varied and complex. The specialist appraisal, assessment, and therapeutic and targeted intervention support is provided by:

- Specialist Health Visitors
- Community Nursery Nurses
- Educational Psychologist
- Assistant Educational Psychologist
- Speech and Language Therapist
- Occupational Therapist
- PSCO

4.6 Over the last four years since its creation, the Resilient Families Service has had contact with over 7000 families.

4.7 Whilst referrals decreased by a quarter in 2020 when families preferred to wait until the hands-on support could resume after the pandemic, by July 2021, the average monthly referral rate was 126% more than the previous year. A comparison of the average monthly referral rate between 2020/21 and the first few months of 2021/22 shows a more settled picture, but demand remains extremely high with an 80% increase on 2020/21 levels.

4.8 Our Families Plus Team works with families where the children are at the edge of needing formal, statutory, care. Intensive support is provided to reduce the level of risk within the family. We have another specialist team which works with any family where the learning, physical or neuro-developmental needs of a child is impacting on family life. Our Parenting Support Team focuses on the development of early language and communication skills through play as well as helping families to develop their parenting skills to manage their children’s needs in a productive and positive way.

4.9 Our analysis of the types of support needed by families with high or very high requirements has shown the top 5 areas of need identified to be:

Table 4.1: Type and level of support identified at assessment stage of people accessing the Resilient Families Service.

| Type of support needed | % of all assessments |
|------------------------------------------------------|----------------------|
| Current levels of stress | 70 |
| Requires intense support to address challenges | 53 |
| Mental health | 45 |
| Engagement in leisure / sport / community activities | 41 |
| Health issues | 41 |

Note: figures rounded to nearest whole number

4.10 We have faced and continue to face a range of challenges in our Children’s Services:

- A high proportion (28%) of children coming into care aged less than 1 year, hence the development of the “MAGU” project as one element of our new looked after children prevention strategy (described later in the report).

- An increase in care experienced young people experiencing homelessness, from 7.7% to 9.6% in the year, hence the development of accommodation funded by the Integrated Care Fund and additional support through the Housing Support Grant
- Stabilisation of out-of-county placements at 25% and the development of a residential action plan and feasibility study looking at needs for next 5 years
- Re-registration rate of children on the Child Protection Register continuing at the same level of 40% between 2021 and 2022
- There has been audit of a sample of cases, and training for managers is underway. There is learning for partners too. This work is reporting to a sub-group of the Safeguarding Board
- A slight increase in the use of residential care as a placement from 8.7% to 9.4%
- Our Resilient Families Service Parenting Team uses innovative ways to support families across the county. Parenting, and the Talk and Play Team, posted weekly videos on the Family Information Service Facebook pages. These pages were viewed far and wide. Between April and September, a wide range of video materials were filmed and posted to our Family Information Service Facebook page.

Case study – Family P

During the first meeting, Ms A, who has two children, was observed to be anxious and worried. She said she did not go out and did not meet or talk to people. The family had not had a cooker for 3 months. Due to her dyslexia, she was not reading letters sent to her, which resulted in more debt, and her benefits were also stopped. Ms A was helped to contact agencies so that they understand her needs, which resulted in benefits being reinstated and a note on the system to ensure phone calls rather than written contact. Her child's education psychology report was explained to her in easy-to-understand language, so she understood their needs. She was helped to apply for grants to secure a cooker, saucepans, and baking trays etc. Ms A was supported for a visit to the dentist, which helped to improve her confidence and links were made with the local church to source a fortnightly food delivery for the family. As a result, Ms A went food shopping alone in preparation for Christmas and attended a school meeting, which has built a better working relationship with them. She has been able, with support to have telephone discussions with other agencies which has resulted in PIP application being made. Her children have had much needed dental treatment and optician appointments. The delivery and installation of a cooker means she can now cook meals for the family. Ms A now keeps all letters and files them, which enables issues to be dealt with appropriately and in a timely manner to minimise debt. Her children's school attendance has improved

- Plans to expand the number of venues used for community support were affected by the pandemic and led us to focus on maintaining contact through existing venues. For much of the year, community-based support was not possible. However, most families identified as having high needs received interventions online. Where possible, opportunities were provided for families in communities where they live after involvement with the service.

Strengthening family support services to prevent entries to care

- The Looked After Prevention Strategy has been finalised and approved during the year and we have made steady progress in the reduction in the numbers of Children Looked After. At the end of March 2022, we had 655 Children Looked After compared to 694 the year before, and 717 the year before that.
- An evaluation of the previous looked after children strategy took place during 2021. Overall, the evaluation found that the first looked after children prevention strategy had delivered important changes that have enabled the service to make progress. Those important developments are evidenced in the strong decision-making process that puts accountability for looked after decisions at the most senior level in the service, in practice standards that see the management of children's cases towards permanency without delay, and in the performance results where we can demonstrate a gradual reduction in looked after number. There are areas for improvement, and these are captured later in the report where we reflect on our activities to address the numbers of children coming into care.

Supporting carers

- We have continued to focus and reinforce our Carer Conversation approach with adult social care staff – a new co-produced process for carrying out carer assessments which was initially introduced in 2020. Nevertheless, unpaid carers in most cases currently face a waiting list of a few months for a statutory assessment. An audit of the Carer Conversation process was carried out in November 2020 which identified hugely positive experiences from carers who received an assessment and from staff. Contingency and emergency planning was identified as an area of further development and new staff guidance was written during 2021 to support this area of work for unpaid carers. Carer Conversation approach now mainstreamed into practice.
- We have maintained increased levels of carers assessments and support offered. In 2021/22, there were 485 adult carer assessments completed compared to 374 during 2020/21, a 30% increase.
- Carers of all ages play a vital role. Their own wellbeing is also important and sometimes they too need to be supported in what they do. We recognise that our support services for unpaid carers need to be more flexible and focused on meeting a wide range of needs in the future. We will therefore be evaluating our current support and work is ongoing to identify how we can utilise direct payments more effectively and creatively to support unpaid carers.
- A pilot project with The Care Collective, with funding from the Carers Respite Grant, focused on providing early support to unpaid carers aged 16+ with a small grants scheme attached to enable unpaid carers to meet their wellbeing needs. The project saw specialist Wellbeing Workers holding meaningful "What Matters" conversations with unpaid carers and identifying wellbeing outcomes that would support them in their caring role and to achieve a life alongside caring. The worker used their discretion to determine whether finances were a barrier to achieving these outcomes and could award a grant of up to £300 to enable carers to meet their own wellbeing needs. The

aim of the project was to see how targeted support at an early stage improved the experience of unpaid carers and delayed entry into statutory services.

- 4.21 The Rhondda Cynon Taf Carers Support Project (CSP) continues to deliver a range of low-level support and information to unpaid carers, including a regular newsletter and various social and practical events, workshops, training and activities throughout the year. Following the pandemic, support is now provided both online and face-to-face, which has created opportunities for attendance for many people. In 2021/22, we have increased counselling and one-to-one support available at the CSP.

Case Study

R is a single parent with extremely limited family support; she relocated from England to the Rhondda Cynon Taff area back in 2016 along with her daughter, C, whom R cares for. C has additional learning needs and has some underlying mental health difficulties. R supports C by offering consistent love and care, emotional support, and predictability. R too has had challenges with both her own physical and mental health needs.

R sought a self-referral to the RCT Carers Support Project & during the first couple of years with the Project she began to slowly integrate with others by attending events and workshops suitable for her. It wasn't long before R was exchanging telephone numbers and meeting with other Carers (in a small group) external to the Project. The more R came along, it was evident her confidence had grown, and she would appear happy and relaxed. R has grown from being someone who was rather insecure, unsure of herself & with low self-esteem, to quite the opposite. R has attended many events and activities provided by the Project, including a 2-night residential. This was a massive thing for her, and she nearly pulled out! In taking part in these events and activities, she has 'pushed' herself outside of her comfort zone on many occasions, all of which have taken courage and inner-self-belief; something the Project has supported but does not take credit for! R has also been a participant at workshops to assist her to better cope with her caring role and general 'life demands', including therapeutic sessions and educational sessions from professionals.

R has openly stated the friends she has made through the Project are 'friends for life'; that she feels more appreciated as a person, is a more confident and assertive as an individual, and feels happier about her life in general. It was particularly pleasing to see R interact with the Project through very tough times when it operated virtually, due to Covid 19-restrictions. R has admitted, if it had happened years previous, she likely wouldn't have had the courage to join in on-line. Again, an indication that the Project and those around her have helped her to be the person who she is today

- 4.22 The CSP are co-located with the support service for young carers and has a function room within the building for events and activities, providing an all-age carers hub in Rhondda Cynon Taf. The Project also provides a specific carers counselling service and specialist support for Young Adult Carers aged 18-25.

Supporting young carers

- 4.23 We have continued to reach out to young people who face such significant challenges in caring for others, although we have had to impose many restrictions to ensure the safety of staff, young people and families during the pandemic. Young carers positively welcomed those periods during the year when face-to-face support sessions were possible once again. During the year, young carers have benefitted from more 1:1 support.

4.24 In September 2021, Action for Children moved offices to be co-located in Pontypridd with the CSP. According to Action for Children, the following has worked well:

- Face-to-face group sessions reintroduced when restrictions were lifted.
- The project was able to carry out trips throughout the summer holidays.
- The Young Carer Choir have been able to meet and take part in opportunities.
- Applications made for grants to access food vouchers for families. Christmas parties held for young carers and their families.
- An 18+ reunion held for all those who had left the project throughout the lockdown.

4.25 However, the CSP and young carers still face several issues and barriers:

- IT access to join online sessions remains an issue for some families.
- Transport for young carers to access face-to-face group sessions is still an issue due to the restrictions in place
- The impact of Covid on the health and wellbeing of young carers due to the increase in their caring roles
- Families struggling with finances
- Some issues with accessing venues for group sessions due to closures and restrictions.

4.26 The Young Carers Forum and the Parent Carers Forum is important. Young carers have been part of a film highlighting the impact of the pandemic on their lives, alongside other carers of all ages. This is designed to raise the profile locally of unpaid carers.

4.27 Funding was secured in October 2021 from the Carers Respite Grant for a pilot model of service delivery for sibling carers. Sibling carers are children helping to care for a sibling with additional needs or who are impacted socially/emotionally by growing up with a sibling with additional needs. To the end of March 2022, 79 young people had registered to receive support, 62 of whom have accessed at least one activity in the previous six 6 months. After being assessed by the Young Carers Assessment Worker, they are offered a 6-week programme focusing on the social and emotional aspects of being a sibling carer. A workshop on autistic spectrum disorder is also offered to those with brothers or sisters who have the condition. The course enables them to gain more knowledge of ASD and understand why their siblings present certain behaviours.

Case study

B [sibling carer] had a real problem with talking about J's [sibling with additional needs] behaviour. He felt he was going to get J in trouble. It was so good for him to hear others talking about their siblings. He kept saying 'that's just like J'. I think it really helped him so thank you."

4.28 Helping young carers is a priority within the Information, Advice and Assistance function of Children's Services. During the year, we received 117 contacts from young

carers or from professionals making the contact on their behalf: a 54% increase on the previous year. We provided information, advice, and assistance in all but one case.

- 4.29 We undertake assessments of young carers' needs and, where necessary, prepare support plans. After plans have been put in place, we are also required to undertake reviews of existing plans within a set timescale. During the year, we undertook 126 assessments of the need for support for young carers, much higher than the 66 undertaken the previous year. Of these, 63% resulted in the preparation of a young carer's support plan. This compares with 59% in 2020/21.
- 4.30 During the year, 186 young carer support plans were due to be reviewed, of which 95% were reviewed within statutory timescales (97% in 2020/21).
- 4.31 We have continued to deliver a dedicated service for Young Adult Carers aged 18-25. We have seen a significant increase in young adult carers reporting low mood and anxiety over the last year so our programme of events will focus on building confidence, social interaction and wellbeing going forward. Through the services, carers received support from a dedicated worker who can support them to navigate the years of early adulthood by signposting to specific organisations and providing one-to-one support if needed. The Young Adult Carers are encouraged to take responsibility for their own service and the programme of events is wholly user-led.

Case Study

P had been caring for her Mum for a number of years due to the pain and mobility issues she experienced from having Fibromyalgia. P and Mum found ways to deal with the good and bad days and felt they worked as a team with Mum doing what she could on her good days and P taking over more tasks on her bad days.

However, during Covid, Mum's health deteriorated, and she developed respiratory issues. Eventually she was diagnosed with long-covid. P's attendance at school started to fall as she missed days to stay home and help her Mum. This was when she was referred by her school carer's champion for support.

P and her Mum agreed to a young carers assessment, but P was nervous about talking about how she felt. She agreed to some one-to-one sessions with the assessment worker so they could build a relationship and P started to open up about how stressed she was. She was studying for her A-levels and felt that she was getting behind with her work because she had so much to do at home but found it hard to be honest about it with her Mum. The assessment worker was able to start the conversation with Mum and P and a plan was put together to increase Mum's independence with a referral to the Single Point of Access in Adult Services.

A discussion was held with the school carers champion and support was put in place for P to catch up with her studies and to leave early if she needed to get home. Mum had a chat with other family members who stepped in to help when P needed to study and as P was nearing 18 years old, a referral was made to the Young Adult Carers worker to continue to support P through her transitional years. P is now looking forward to starting University and has loved meeting other young people who care for a parent as part of the YAC service.

4.32 Our priorities for unpaid carers, including young carers, mirror the four national priorities from Welsh Government:

- Identifying and recognising carers - all carers deserve to be recognised and supported to continue to care.
- Supporting life alongside caring - all carers must have reasonable breaks from their caring role to enable them to maintain their capacity to care and have a life beyond caring.
- Providing information, advice and assistance - it is important that all carers receive the right information and advice when needed and in an appropriate format.
- Supporting carers in education and the workplace – employers and educational or training settings should be supported to adapt their policies and practices enabling carers to work and learn alongside their caring role.

Empowering people to commission care through direct payments

4.33 If a person is eligible for assistance to meet their care and support needs, then they have a choice whether this support is provided through a service or through a direct payment where they purchase that service directly themselves. Having a direct payment means that the person will have much more control over their care and support arrangements and more flexibility to make important choices about how they live their lives. Using direct payments supports a strength-based approach to care and support and is an opportunity for people to tailor their care and support arrangements to their circumstances and build on, rather than replace or displace their existing support networks.

4.26 We are committed to supporting more people to take up the option of a direct payment and in 2021/22 the number of people in receipt of direct payment increased to 578 across adult and children’s services, continuing an upward trend over the past 4 years as shown in the table below.

Table 4.2: Take-up of Direct Payments, 2018/19 to 2021/22

| Children’s Services | | Adult Services | |
|----------------------------|-----|-----------------------|-----|
| 2018-19 | 154 | 2018-19 | 373 |
| 2019-20 | 172 | 2019-20 | 402 |
| 2020-21 | 167 | 2020-21 | 400 |
| 2021-22 | 166 | 2021-22 | 412 |

Source: Rhondda Cynon Taf County Borough Council

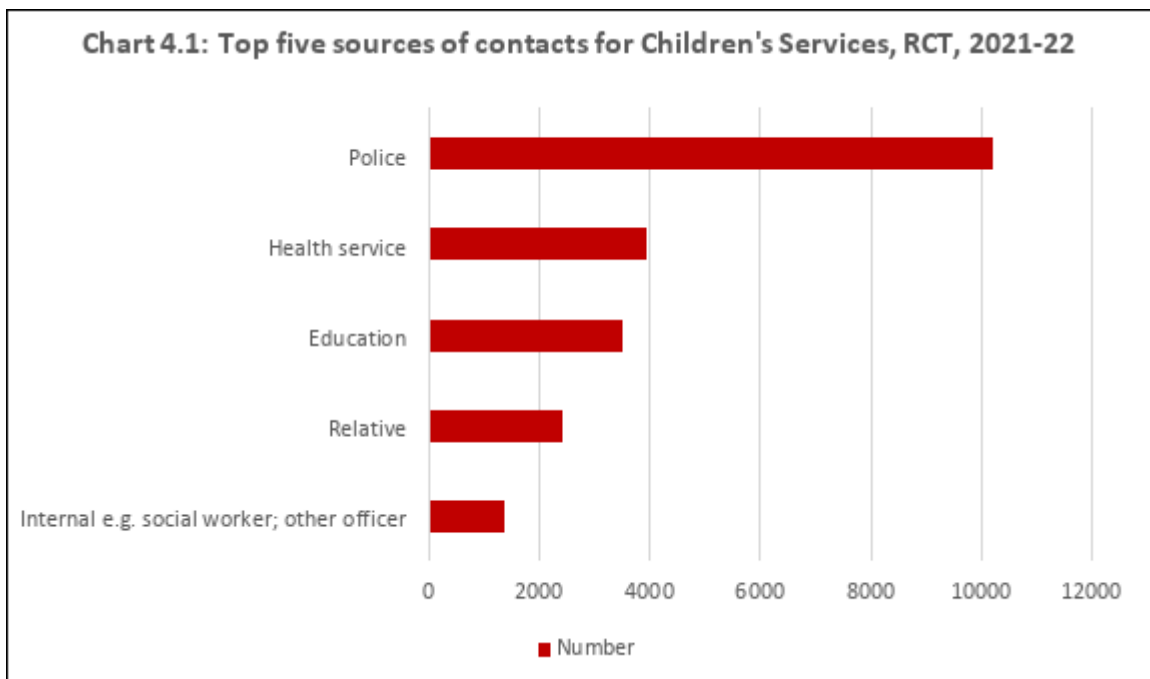
4.27 In 2021/22 we concluded our direct payment engagement and policy review programme. We are aware from our engagement that the management of a direct payment is not always immediately attractive to people as it can appear to be quite complicated and bureaucratic. The revised Policy will be confirmed in 2022/23 and will be accompanied by new and improved public information, staff guidance and training which we hope will promote direct payments locally as a more attractive and accessible alternative to commissioned care.

4.28 Unfortunately, people using direct payments are reliant on an ability to recruit and retain personal assistants and as seen in other areas of the social care workforce this became more difficult during and after the pandemic. Our support provider Dewis CIL has made improvements to the facilities offered to help people find staff and we have also, as part of the Policy review, relaxed some of the barriers for family members to work as personal assistants. We have however recognised that we need to develop alternative service delivery options for people to enhance the support options available. This will include for 2022/23 support and development opportunities for local people to set up microenterprises in their communities that can offer a wider variety of creative care and support options available for purchase with a direct payment

Early intervention and prevention – Children’s Services

4.29 During the year, we received 24385 contacts for children, which is significantly more (+25%) than the previous year. In 99% of cases, a decision on the need for advice or assistance was made by the end of the next working day. This performance, which is the same as that for the previous year, was achieved despite the significant increase in the number of contacts.

4.30 The top five sources of referral can be seen in the following chart.



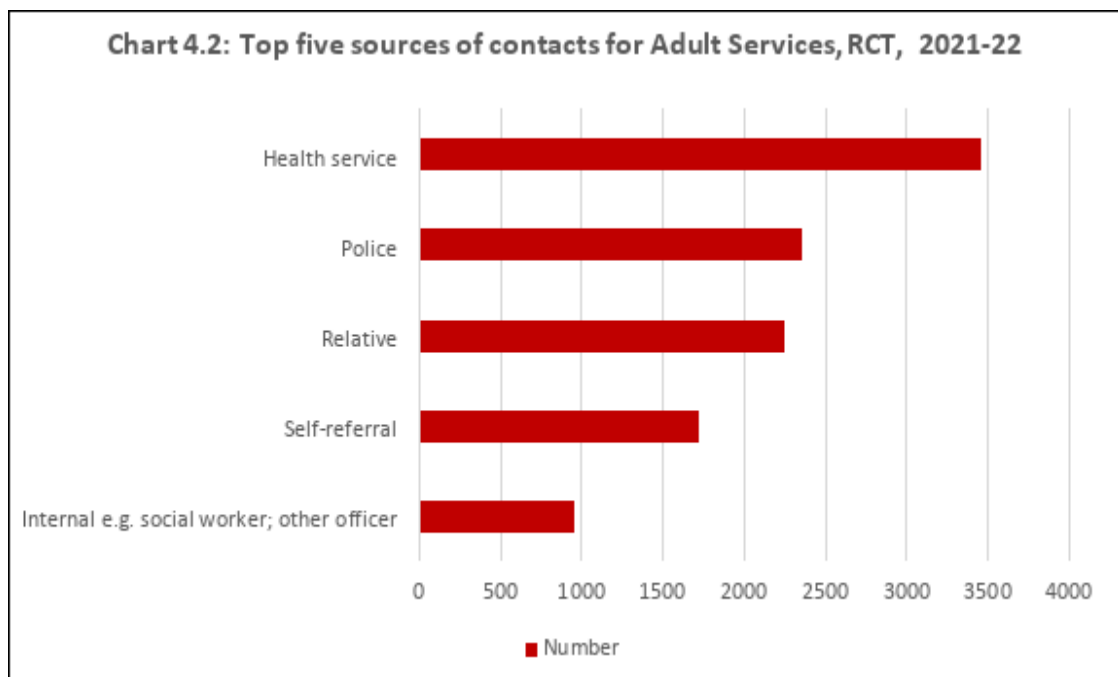
4.31 The increased number of contacts we received during the year has resulted in a corresponding increase in the assistance we offered. In 2021/22, we provided information, advice, or assistance to 10463 children and families, an increase of 29% on the previous year.

4.32 Over the course of the year, 5238 new assessments were completed. In 941 cases (18%), the needs could only be met by way of a care and support plan. In most cases (65%), the individual’s needs could be met by other means while in the remaining 17% of cases, there were not eligible needs to meet.

- 4.33 On 31 March 2022, there were 1902 children with a care and support plan. This increase of 18% from the figure of 1609 on 31 March 2021 is evidence of increasing need.
- 4.34 Reviews of 5138 care and support plans and provision of financial support were due during the year, of which 21% were child protection cases and 33% were for children looked after. A further 43% were reviews of children in need of care and support including those receiving direct payments for the provision of care. We completed 85% of all reviews due within the statutory timescales, a slight increase on our performance the previous year (83%).
- 4.35 We made 49 “Active Offers’ to children for advocacy to assist them, slightly less than the 61 offers made in 2020/21. In 39 cases, an Independent Professional Advocate was provided.
- 4.36 One area of focus in enhancing the delivery of our services has been in services for disabled children. The remodeling of the Disabled Children’s Team has been embedded from April 2021 and all referrals for disabled children now follow the same process as any other referral into Children’s Services. A specialist social worker is in place to carry out an assessment as required, and with changes to the staffing structure to support delivery, we now see a more consistent approach to assessing eligibility for services, decision making and thresholding.

Early intervention and prevention – Adult Services

- 4.37 In 2021/22, we received 11923 contacts for adults compared to 12176 in the previous year. In 88% of contacts received advice and assistance was provided, up from 76% in 2020/21.
- 4.38 The top five adult contact sources can be seen in the following chart:



- 4.39 The Council's Single Point of Access (SPA) provides the Information, Advice and Assistance service for adults and promotes early intervention and preventative services. SPA is the main entry point for adult services and undertakes a co-productive proportionate assessment in the form of a 'What Matters' conversation to help establish the most appropriate outcomes.
- 4.40 There has been a 17.9% increase in the number of assessments completed at SPA during the last year, with 7032 assessments completed in 2021/22 compared to 5965 in 2020/21. Nearly, 70% of the assessments resulted in either the provision of information, advice, or preventative service.
- 4.41 Preventative services are provided where an intervention can be put in place to allow a person to regain or maintain their independence. Our preventative services include:
- Intermediate Care and Rehabilitation
 - Occupational Therapist assessments for aids and/or adaptations
 - Specialist Sensory programmes
- 4.42 Our Adaptations and Community Equipment Team (ACE) was restructured in 2021/22, and additional capacity created to reflect the increased and changing demands on the occupancy therapy service. During last year, we completed over 1,300 assessments and we also worked with Care and Repair to implement a Trusted Assessor role that carried out assessments for minor aids and adaptations to ensure a timelier response to lower level needs. Despite this, waiting lists for assessment had been exacerbated by the increase in demand and some staff vacancies during the year. Plans are in place to reduce waiting lists in 2022/23.
- 4.43 During 2021/22, we completed over 1550 adaptations and delivered almost 11200 items of equipment to over 3600 people, helping to support people to maintain independence and remain at home.
- 4.44 In Adult Services, despite the ongoing impact of the pandemic on services we have continued to focus on helping people meet their needs and achieve the outcomes that are important to them.
- 4.45 Over the last year, 8452 new assessments of need were completed compared to 7010 in 2020/21, an increase of 20.1%. On 31 March 2022, 4117 adults had a care and support plan in place, an increase of 6% from the same date a year earlier - evidence of an increasing need.
- 4.46 The high number of people in receipt of care and support, many with higher levels of frailty and complex needs, as we continued to respond to the pandemic in 2021/22, placed increasing pressure on Adult Services. As a consequence, waiting list of cases awaiting allocation for reassessment or review had developed or increased in some areas. Plans are in place to reduce waiting lists in 2022/23.

What are our priorities for 2022/23?

4.47 During the next year we will focus on:

- Review and redesign our IAA Service in both Adult Services and Children's Services to ensure it meets changing needs and increasing demand
- Reduce waiting times in Adult Services and monitor performance monthly.
- Ensuring effective working arrangements with South Wales Police to implement the new legislative framework set by Section 1 of the Children (Abolition of Defence of Reasonable Punishment) (Wales) Act 2020 (Children Wales Act) which came into force on 21 March 2022.

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

What did we plan to do in 2021/22?

4.48 In 2021/22, we said we would:

- Develop our therapeutic services for children who are looked after
- The community well-being and resilience service will continue to proactively support the emotional wellbeing and mental health of children, young people, families and staff as a result of the pandemic
- Continue to invest in reablement and intermediate care services to enable recovery and independence or prevent escalation of need increasing
- Continue to work with Health to complete review and redesign Community mental health services to provide responsive access and effective mental health support
- Build on the learning over the Covid-19 pandemic to maximise the continued use of new technology and ensure services are accessible and available to people and their families

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

Developing our therapeutic services for children who are looked after

4.49 We commissioned a regional Multi-agency Permanence Support Service as a therapeutic resource for children looked after, including post-adoption support. This went live in January 2022. The services will provide more support for children and their carers including foster carers with the aim of promoting the stability of placements and reducing the cost of spot purchasing adoption support. The access to consultation has been welcomed but it is too early for any results of evaluation to be seen.

4.50 We were also successful in securing additional funding from the Welsh Government's Integrated Care Fund in 2021/22. The funding will enable us to provide therapeutic space at Glyn cornel and other children's homes.

Supporting the emotional wellbeing and mental health of children, young people, families and staff

4.51 During the year, we have:

- Revised quality assurance monitoring arrangements to ensure Flying Start childcare providers were focused on meeting the social and emotional needs of children who may have missed early developmental opportunities because of covid-19
- Delivered a programme of Targeted Play provision for vulnerable 5–14-year-olds with care and support needs.
- Piloted a Wellbeing Support Programme for children aged 8-11 years requiring one to one support to improve their wellbeing and build their resilience
- Enhanced the provision of support to 16–25-year-olds delivered by the Youth Engagement and Participation Service focusing on the delivery of transitional support for young people leaving school who because of the pandemic have not received timely Education, Employment and Training information and advice.
- Improved working arrangements with CAMHS, including the development of integrated support pathways for children and young people and support for parents to manage and meet their needs
- Revised existing Children and Communities Grant contracts with providers and identify opportunities for service delivery to be refocused to proactively support the emotional wellbeing and mental health of children, young people, and families
- Used the Community Wellbeing and Resilience staff wellbeing survey results to identify key issues faced by frontline staff within the service
- Established psychologist led group support and supervision sessions for Community Wellbeing and Resilience staff to support their mental health and wellbeing and assist them to manage the emotional impact of their work
- Introduced a programme of coaching and mentoring across the Community Wellbeing and Resilience Service
- Convened a Staff Wellbeing reference group to devise, implement and review initiatives and activities that promote staff wellbeing and cohesion

Investing in reablement and intermediate care services to support recovery and independence

- 4.52 Our Support@Home Intermediate Care and Rehabilitation Service provides short-term social care rehabilitation to support people to become or remain independent at home. People may need this service after a stay in hospital, or just because they have not been coping as well as they would like at home.
- 4.53 Despite the significant challenges of delivering the service during the pandemic, 1290 people received support during 2021/22 compared to 1072 people in the previous year, an increase of 20.3%. In 2021/22, 67% of people who received support returned to self-caring or had reduced their levels of formal support following the intervention period compared to 62% in 2020/21.

Case Study

Mr G is a 92-year-old gentleman. He lives alone and is supported by a friend who visits regularly and does his grocery shopping, cleaning, and laundry. Mr G is a very independent man and likes to do as much for himself as possible. He uses a rollator zimmer frame to mobilise and is usually independent with his personal care needs and can make meals and drinks for himself

Mr G was referred for a reablement service after he contracted Covid-19, he had become very weak, short of breath on exertion and was unable to stand unaided. A package of support was put in place and Mr G was very keen to return to his previous levels of independence

During a six week period, the Reablement therapist and calderdale trained frontline workers worked with Mr G and put in place a programme that enabled him to regain his strength, his stamina and his balance – over this period he gained the confidence to maintain his own independence unaided. As a result, Mr G no longer required a package of support and was left with information on how to contact Adult Services should anything change in the future.

Mr G's feedback was: "Thank you so much for your help. I am very pleased that I have been able to get back to how I was before"

- 4.54 Our Lifeline+ Service provides support to people to live safely and independently, in their own home, with the assurance that help is available, through a dedicated Mobile Responder Service, at the touch of a button, 24 hours a day, 365 days a year. Mobile Responders are fully trained and experienced staff who can support non-injured people when an emergency occurs, such as a fall. This means unnecessary calls to the Welsh Ambulance Service can be avoided as can unnecessary admissions to hospital.
- 4.55 The Lifeline+ Service provides support to over 3600 individuals across Rhondda Cynon Taf. During 2021/22, the Mobile Responder Service completed around 8000 calls for a variety of reasons, including falls, accidental press of alarm, etc. Over 95% of the calls were reached with an hour of the alarm being triggered. Of the calls made that would have normally resulted in the Emergency Services being contacted, the Service avoided them being called on nearly 6000 occasions.

Case Study

Mobile Responders attended property after alarm being triggered with no response. Upon arrival, they found Mrs A, who is blind, had fallen and was on the bedroom floor.

Mobile Responder staff carried out the I-stumble risk assessment and established that Mrs A had not sustained any injuries, they proceeded to help Mrs A from the floor using the specialist equipment and ensured she was safe and well. Following their observations and discussions with Mrs A's sister, felt that due to being so unsteady on her feet and the risk of further falls, more regular, ongoing help was required to assist Mrs A with performing daily tasks.

The Mobile Responders made a referral directly to the StayWell@Home2 Out of Hours Single Point of Access (SPA), as the call was completed after 5pm on a weekday, who in turn proceeded with completing a 'What Matters' conversation with Mrs A over the telephone, within 1hr of the responders visit. The outcome agreed was for Mrs A to commence with an Intermediate Care and Rehabilitation programme to help her perform the essential tasks during her morning routine, such as washing, dressing and preparing breakfast.

Following this intervention an ongoing service was commissioned for Mrs A as it became apparent that she had not been managing for a long period of time, if this had not been addressed by the Mobile Responders with an onward referral Mrs A may have hit crisis which could have potentially resulted in an admission and a more costly social care intervention.

- 4.56 Throughout the pandemic we have worked closely with the Cwm Taf Morgannwg University Health Board to make sure people are discharged from hospital as soon as they are well enough and are ready to leave. In support of this ongoing priority, we invested in a new permanent Hospital Social Work Team and adopted new processes and ways of working. Nevertheless, some people remain in hospital for longer than is necessary.
- 4.57 The full implementation of home first and discharge to recover to assess models will continue to be a priority for 2022/23, improving the flow of patients through our hospitals and mean people can have their longer-term care needs assessed in a more suitable environment. This will also require increased health and social care delivery in the community through the development of Integrated Care Partnerships as we emerge from the pandemic.

Continue to work with Health to complete the review and redesign of Community mental health Services to provide responsive access and effective mental health support

- 4.58 Whilst completion of this work has been delayed in 2021/22 due to the pandemic and the restructure of the Health Board, we continue to ensure that strong mental health services are available for all citizens as we emerge from the pandemic. This work, along with a review of Older People with Mental Health Services, is being prioritised for completion in 2022/23. Notwithstanding this:
- The Independent Living Service has expanded to support the Community Mental Health Teams and provide additional support and monitoring for people during the pandemic

- The Taf Community Mental Health Team moved to Dewi Sant Hospital in June 2021 to offer joined up Community Mental Health Services from that location
- New, dedicated, hospital Advanced Mental Health Practitioner provision has been developed across Cwm Taf Morgannwg region. This will offer more sustainability for community-based support across Rhondda and Taf

Build on learning over the Covid-19 pandemic to maximise the continued use of new technology and ensure services are accessible and available to people and their families

- 4.59 Children’s Services continue to use hybrid working using video meetings where families prefer to use that option or find it easier to take part in that way. However, face to face work is back to “business as usual” and remains the optimum means of working with families and children.
- 4.60 We worked with Innovate Trust to support the ongoing roll out of the Insight app across our commissioned providers both in-house and with commissioned providers as part of Learning Disability Transformation Programme. In addition, Supporting Living providers continued to deliver a creative timetable of ‘virtual activities’, so that people who could not access day services and/or activities, (due to restrictions at the time) were able to be involved, see and interact with their friends and people they know. Sessions ranged from quizzes and music from around the world to relaxation and sensory activities.
- 4.61 We also continued to develop and increase our use of digital solutions to help residents living in care settings to remain connected to family members and loved ones.

What are our priorities for 2022/23?

- 4.62 During the next year we will focus on:
- Complete development and implementation of Home First and discharge to recover to assess hospital model that enables timely and safe discharge
 - Complete work with Health to agree new model of sustainable integrated primary and community services and implement
 - Work with Cwm Taf Morgannwg University Health Board to review and redesign community and older people mental health services to provide more responsive access and effective joined up mental health support
 - Embed then evaluate the work of the Therapy Panel, which coordinates access to therapy and enhances trauma informed and therapeutic approaches within children’s services

(c) Taking steps to protect and safeguard people from abuse, neglect or harm

What did we plan to do in 2021/22?

4.63 In 2021/22, we said we would:

- Demonstrate progress in implementing the recommendations of the evaluation of our strategy for supporting children looked after.
- Implement the Cwm Taf Morgannwg Safeguarding Annual Plan, specifically to deliver against the three identified strategic priorities:
 - i. Ensure an effective response to the impact of the pandemic – this concerns our approach to multi agency working; completing those task that were delayed due to the pandemic; re-engaging with vulnerable isolated people; learning from the experiences at our care homes and the wellbeing of our workforce and responding to the expected increase in demand.
 - ii. Strengthening safeguarding links to other partnerships in the region – this recognises safeguarding is everyone’s business and working arrangements need to be strengthened with the Community Safety partnership and Together for Mental Health partnerships in particular.
 - iii. An improved approach to public protection concerns – very much our core activity and identifies several key areas for service development – exploitation, modern slavery and trafficking and contextual safeguarding.
- Work with Partners to deliver new Liberty Protection Safeguards from April 2022.

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

Progress in supporting looked after children

4.64 As a result of the independent evaluation commissioned the previous year and further consideration of what more needed to be done, we have developed an enhanced approach to prevent children from having to enter care. The evaluation found that the first looked after children prevention strategy had delivered important changes which enabled the service to make progress. However, we identified four areas to strengthen in order to sustain these changes to further develop services in a way which optimises our offer to families at risk of parent–child separation.

4.65 Our looked after children prevention strategy 2022-2025 has four main areas of development:

1. **Model of practice:** the development of a clear practice model for social workers and allied staff to generate better engagement, particularly with families who have not yet come to the view that they need, or want, to change.

2. **Better pre-birth services:** the development of a specific pathway and set of support for families referred to Children's Services during a pregnancy to enable earlier intervention with parents considered to be vulnerable before the child is born.
3. **Developing reunification:** a more coherent and consistent approach to reunifying children who have spent some time being looked after by the local authority.
4. **Improved support for kinship carers and special guardians:** strengthened support to be offered to children living with extended family e.g., in kinship care and / or with a Special Guardian, including support for their carers

4.66 We launched the new strategy in January 2022 with full roll-out of the action continuing throughout 2022. The rollout will continue in 2023 when there will also be an emphasis on embedding the new approach throughout our Children's Services.

4.67 As part of work to develop better pre-birth services, the "MAGU" project has been developed. It responds to the evidence we found, where 28% of children becoming looked after are under one year of age, and 63% of new-borns who become looked after are from families where older children had already been removed or were on the child protection register.

4.68 The project builds on past work to integrate health and social care services for pregnant women and families to offer a single route through, and smooth and effective transitions between, early intervention, prevention, and edge of care services from 12 weeks of pregnancy through to the age of 1. The aim is to provide consistent support which prevents children having to enter care. The Welsh word "MAGU" means '*to bring up, rear, nurture, raise, gain*'. The MAGU project has recently been approved by Cabinet and construction of the service is underway.

Case study - Child J (aged 16) and Child A (9 weeks old)

Mother of Children J and A has extensive history of offending, chronic substance misuse, and poor mental health. Diagnosed with ADHD and emotional unstable personality disorder. Five previous children were removed from her care. She has no contact with four of them. Her eldest child, J, is in residential care and experiencing placement breakdowns.

In 2020, the mother was released from prison, where she had received regular medication for her ADHD. Unlike previous occasions, probation, prison service and health provided her with an ongoing prescription post-release. The community mental health team provides support, and she engages. She no longer requires substances to manage her symptoms, and her social stability, general well-being and compliance with agencies improved. Her relationship with her eldest child in care improved and they reconnect.

In April 2021, she is referred to Children's Services as she is pregnant. Assessments commence. Child protection and public law outline procedures are initiated. A social worker is allocated to the unborn child and begins intervention with mother who engages well. In June 2021, Child J experienced a placement breakdown. He returned home to his mother who has made progress and the social worker feels she can now look after her son. An intensive package of support is put in place, to include daily wrap around care, education, and emotional support. In July, Child A is born. Social work support continues, and formal placement with parent arrangements are approved for Child J in September 2021. Child A continues to thrive at home with mother, alongside an older brother who has re-engaged with education, CAMHS and no longer absconds, and presents no offending behaviour. The mother continues to receive social work support. She

is achieving the child protection plan, and there are no requirements for Court intervention regarding Child A. The case is scheduled to step threshold for proceedings is no longer met. The child protection plan is now sufficient to safeguard and address the risk, and the plan remains for both Child J and Child A to remain in the care of their mother.

Support provided to looked after children

- 4.69 On 31 March 2022, 378 children were on our Child Protection Register. This compares to 426 a year earlier; a decrease of 12.7%. This continued a downward trend from 498 in March 2019 and 502 in March 2018. This is encouraging but we are not complacent and will continue our action to prevent the need for children to become looked after or be placed on the Child Protection Register.
- 4.70 Children who were placed on the register during the year for reasons of neglect increased from 142 in 2020-21 to 156 this year. Those placed on the register this past year because of emotional abuse (290) was similar to the 288 the previous year.
- 4.71 During the year, we were due to make 10,032 visits to children placed on the Child Protection Register of which 7,614 were made within the approved timescale.
- 4.72 The total number of children being looked after at 31 March 2022 was 655, a 5.61% decrease on the total of 694 who were being looked after a year earlier.
- 4.73 Over the course of the year, there were 95 new episodes of children becoming looked after, a 36% decrease the previous year (148 in 2020/21).
- 4.74 The rate in children looked after per 10,000 population is now 130.7, compared to 138.7 the previous year.
- 4.75 We have continued our efforts to recruit and retain foster carers. They play a significant role in meeting the needs of children looked after, helping avoid the risk of the child having to move out of their local area, change schools, lose friendship groups and their support networks.
- 4.76 Over the course of the year, we registered 12 new mainstream foster carers in the County, a slight increase on the previous year's figure.
- 4.77 During the year, we consulted with kinship foster carers to obtain their views on the services and support we provided. The positive feedback reflected thorough explanation and support from social workers who were assessing and supervising the cases, the availability of support and the responsiveness of our fostering teams, and training opportunities. Helpfully, the feedback identified some areas we need to develop, including the assessment process, which can sometimes seem rushed, staff turnover and staff absence, and the timely sharing of information. Support from peer foster carers and support groups were also mentioned along with more training to prepare for foster care and after it has been approved.
- 4.78 We continue to work effectively with many other organisations on foster care and adoption. We deliver our adoption services through a consortium arrangement. We host 'Foster Wales', which is the regional entry point for foster carers, and the regional

contract for advocacy services. We also host the 4Cs., which is the Children's commissioning consortia for Wales.

- 4.79 During the year, 25 adoption placements were made. This is more than the 21 recorded the previous year.

Helping care leavers

- 4.80 Young people aged 16+ left care during the year. 24 (52%) of these remained in placements with their foster carers, either through a 'When I am Ready' arrangement or 'Shared Lives'.

Case Study - When I Am Ready

K lives with her grandparents in a relative foster care placement. This has been a warm familial relationship, that is protective, nurturing, and supportive of K. K attends a college level 1 hairdressing course & has a part time job that her grandparents transport her to and from as they live in a rural location. K loves her surroundings, she takes walks, spends time in the garden on the swing, reading and horse riding locally. K has settled into this lifestyle but has already been supported by her grandparents and her father to build her independence, through the provision of driving lessons and support to study for her theory test.

K presents somewhat young for her age and in line with this, she has no desire to move out immediately. She and her grandparents want their living situation to continue as seamlessly as possible.

It was felt that it would be in K's best interests for the relative foster care placement to convert to a 'When I'm Ready' placement when she is 18 years old. K sees this as her home, and grandparents can continue to provide K with the stability and support that she needs until she is ready to live independently.

C has been living with her foster carer L for over three years and is very happy and settled in placement. L has been supportive of C during this time and has demonstrated the ability to meet all of C's needs while she has been in her care. C has expressed a wish to reside with L until she attends university in September and has always been consistent in her wish to return to reside with L during university breaks. C has no contact with family members and very much views L and her family as her own. It has been decided that it would be in C's best interest for her foster placement with L to convert to a 'When I'm Ready' placement when she reaches the age of 18.

- 4.81 The third cohort of our Care2Walk programme began in January 2022. This time Care2work partnered with RCT Sport who were able to provide the young people involved with a Fitbit to track their progress. Six young people took part and we have seen a positive change in each individual. Interestingly each participant has gained something different; some have grown in confidence and self-esteem; others have benefited from the structure and routine it has given them helping their motivation. Everyone involved has particularly enjoyed being part of what is now a close-knit group. The group have completed individual challenges and group challenges to increase fitness and wellbeing over a six-week period.
- 4.82 Three members of the group have gone on to gain full time employment and two are now in volunteering roles. The motivation and confidence they have gained from Care2Walk has been a huge contributing factor to their success. As a staff, we have

been grateful to be able to rely on the skills and knowledge of RCT Sport Department around fitness and wellbeing and working in partnership has given us the opportunity to offer a simple but effective project.

Implement the Cwm Taf Morgannwg Safeguarding Annual Plan

- 4.83 This year, the Board was able to complete the work carried over from the previous year, including the development of a Board Learning and Improvement Framework and a regional Self Neglect protocol and toolkit for adults. We maximised opportunities presented by on-line working to engage families involved in the safeguarding process and used online platforms to deliver training and virtual events. The re-introduction of the annual partner agency compliance audit allowed us to compare the way we work pre and post-pandemic and identify aspects of the Board's work that needed to improve, including how partner agencies have and will cope with changing demands. We have strengthened reporting arrangements for care home monitoring via the Adult's Quality Assurance Group. Staff wellbeing has continued to be a priority and partner agencies produced regular reports to the Board during the year, to ensure that these continued to be robust. We need to continue to work on a multi-agency basis to improve our approaches to engagement with children, adults at risk and their families.
- 4.84 The Board has continued to work collaboratively with other partnerships in the region to strengthen arrangements for suicide prevention. This has involved improved partnership working with mental health and substance misuse services and the development of a multi-agency regional Suicide Review Group, to analyse the data generated via the Immediate Response to Critical Incidents process. We have ensured that the Board is actively involved in the development of the Single Unified Safeguarding Review, led by Welsh Government, as it prepares for its implementation in 2022. We will continue to seek opportunities to collaborate with other partnerships and forums to improve the way agencies work together to safeguard children, young people and adults at risk.
- 4.85 Exploitation has continued to be a priority for the Board, in relation to both children and adults at risk. Work continues on the development of a regional Exploitation Strategy, overseen by a dedicated Task Group, to agree our priorities for exploitation in all its forms, how we identify those that have been or are at risk of exploitation and how the use of a contextual safeguarding approach can support with this work. A multi-agency workshop was held in 2021, to identify gaps and barriers across the region and this has resulted in work to develop an assessment tool and pathway for young people, which is due to be completed in 2022.
- 4.86 Where information from a referral of a child or young person or an assessment result in a social worker suspecting the child is suffering or likely to suffer significant harm, a strategy discussion meeting is held. The discussion leads to a decision whether to initiate enquiries under Section 47 of the Children Act 1989. These are commonly known as "Section 47 enquiries" and local authority social workers have a duty to lead them, supported by the police, health professionals, teachers, and other relevant professionals as part of a multi-agency approach. The enquiries decide whether action is necessary to safeguard the child and to promote their welfare, and what type of action.

4.87 In 2021/22, a total of 2160 strategy meetings concluded, an increase of 18% on the previous year. The number of strategy meetings which progressed to Section 47 enquiries was 1875 and of these 637 (34%) progressed to an initial Child Protection Conference.

Improving our response to public protection concerns

4.88 We completed the restructuring of our Youth Offending Service in August 2021. It is part of our response to meet new demands set out in the Welsh Government-led “Blueprint for Youth Justice in Wales”. Prevention is one of the priorities and there is scope for the development of a national approach for targeted prevention activity across Wales.

4.89 One of our immediate challenges is the capacity to deal with the increasing levels of children being referred into the prevention service, many of whom present with complex needs, and to strengthen working links with other early intervention and prevention services. The restructure is designed to increase the managerial and social work capacity in the Service’s early intervention and prevention arm across the Cwm Taf Morgannwg region.

Case study

Child J first came to the attention of the Youth Offending Service in April 2019 for sending an offensive message on social media for which he received a Community Resolution Programme. He completed this intervention successfully, but in March 2021, received a second one for taking a motor vehicle without the owner’s consent. This was also completed successfully.

During the second intervention, an assessment highlighted Child J had experienced neglect, emotional and physical abuse during his early years and exposed to domestic violence between his mother and stepfather. It was also possible his mother could have used substances /and or been a victim of domestic abuse during pregnancy. There were also concerns about his mother’s emotional wellbeing and periods where she has been heavily reliant upon substances and at risk of self-harm. His mother had spent periods in custody and has been detained under the mental health act. Since the age of nine Child J had been in the care of the local authority and had experienced at least eleven house moves and nine changes of educational placement. He also lost his father when he was a baby.

Child J was referred to the Youth Offending Service “Relationship Building Practice” group for a multi-agency meeting and a detailed timeline was completed. A multi-agency assessment concluded he had a cognitive age of 5-7 years, a social age of 2-3 years and an emotional age of 1-2 years. His struggles to regulate his emotions could present with aggressive, reckless behaviour and considerably low levels of self-esteem. Recommendations were made by the Service’s Trauma-Informed Practice Coordinator which included a new plan was created which recognised his needs. The outcome was he attended all his appointments with Youth Offending Service, reduced his use of inappropriate language, showing empathy to his case worker, as he knew she did not like to hear him swear. He also began to think of ways to help his workers which showed he was becoming considerate to the people around him. He returned to the care of his mother, and their relationship is significantly more stable. He has attended ACT training several times on his own and achieved his CSCS qualification with a score of 48/50; one of the youngest children to achieve this qualification.

To date, Child J has not re-offended, and the Youth Offending Service is continuing to work with him on a voluntary basis to offer any additional support needed.

4.90 The Council hosts the Emergency Duty Team (EDT) for the Cwm Taf Morgannwg Region. EDT provides essential cover and a professional response for emergencies outside normal working hours and has remained fully functional throughout the year, receiving an increase in the number and complexity of calls.

Adult safeguarding

4.91 During the year, the Adult Safeguarding Team received 1777 reports of an adult suspected of being at risk of abuse or neglect. This is less than the 4714 reports received the previous year, but the difference is accounted for by changes in recording practice and is now consistent with other regional local authority Safeguarding Board partners.

4.92 Of the 1777 reports, 542 were received from health services, 378 from social workers or other internal teams, and 303 from third sector organisations. A further 371 were received from “other” sources. In most reports (637) the primary allegation was of neglect, followed by physical abuse (449) and emotional or psychological abuse (413). In two out of every five cases (39%), the individuals concerned were aged 75 and over.

4.93 Adult protection enquiries were made in 727 cases (41%). In four out of five cases (81%), the enquiry was completed within 7 days. This is a slight improvement on the 2019/20 figure of 84.7%. In 136 cases, it was determined that additional action needed to be taken.

4.94 In 2021/22, the Cwm Taf Morgannwg Safeguarding Board’s established a Self-Neglect Partnership Panel. The Panel is made up of managers from a number of departments and different partner agencies and chaired by Rhondda Cynon Taf’s Adult Safeguarding Service Manager. The Panel receives referrals for citizens who are experiencing severe self-neglect, either of their personal health and wellbeing, their living conditions or both, and determines whether there are additional resources that could be provided to support and assist citizens more effectively.

Case study

B is a 38-year-old single man who lives alone in a one-bedroom Trivallis flat. He was referred to the Self-Neglect Partnership Panel by his Housing Support Worker, who was concerned at his recent weight loss, his level of alcohol consumption and his inability to manage his prescribed medication. He presents with Autistic Spectrum Disorder traits but has no formal diagnosis. His living conditions were poor with accumulated rubbish: the floor could not be seen in any room in the flat because of papers, cans and food covering it & he was not taking good care of his personal hygiene. A referral had previously been made to Adult Services, but B would not engage with them. There was an action plan in place to improve the conditions in the property as he was in breach of his tenancy, but nothing had changed.

B's case met the criteria for the Panel and his case was presented by the referrer and discussed.

The Adult Services representative on the Panel agreed to allocate B's case again to a social worker who could work closely with the Housing Support worker to secure access to B in the first instance and then try to build trust and rapport to undertake an assessment of his needs. This was a successful strategy, and the social worker has worked hard to maintain contact and agree goals and priority actions with him, working alongside him & other professionals to improve his living conditions & supporting him to replace broken & unusable items. He has also managed to agree a Care and Support Plan with B, to motivate him to see his GP with support and he has accepted a referral to alcohol services. The social worker is now helping B to obtain a direct payment so that B can continue to have support to care for himself and maintain the improvements in his living conditions. Whilst the challenge will be to maintain progress, early indications are good, and B's quality of life is significantly improved.

Liberty protection safeguards

- 4.95 Implementation of the Liberty Protection Safeguards to replace the existing Deprivation of Liberty Safeguards planned for April 2022 has been delayed. As a result, planning and preparation was put on hold pending the publication of the new draft Mental Capacity Act Code of Practice and the draft Regulations for Wales. These were published in March 2022 for a 16-week consultation, the outcome of this consultation is not expected until late 2022. We have established a regional working group to respond to the consultation.
- 4.96 In the meantime, we have directed our efforts at increasing the confidence of social care staff in the application of the Mental Capacity Act by commissioning additional training and clearing the backlog of Deprivation of Liberty Safeguards applications which has accumulated over time. We have commissioned an external provider, using Welsh Government Grant, to complete assessments on the Council's behalf to supplement the work of in-house team. This work will be completed in 2022/23.

What are our priorities for 2022/23?

- 4.97 During the next year we will focus on:
- Continued development of, and progress on, the implementation of the MAGU project to integrate health and social care services available to women from 12 weeks of pregnancy through to the child's first birthday.

- Continue to prepare for the commencement of the Liberty Protection Safeguards, equipping staff with the necessary knowledge and skills and ensuring effective delivery of obligations such as assessments.

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

What did we plan to do in 2021/22?

4.98 In 2021/22, we said we would:

- Children's Services will review its participation strategy, making sure that service user's experiences of the service are heard and that they help shape future developments
- The looked after education service will commence implementation of the Additional Learning Needs Act reforms
- Subject to Cabinet approval, Adult Services will continue to engage with people with a learning disability, their families and carers, staff, and partners to co-produce a new day opportunities strategy
- Work with partners and specialist organisations to specifically target and engage with groups of clients who have a disability or learning disability to increase referrals into employment support.

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

Reviewing our Children's Participation Strategy

4.99 We delayed action on this priority, devoting resources instead to bring forward our new prevention strategy for looked after children and to enable us to manage the response to the pandemic, which continued throughout the year. We have drafted our Participation Strategy and we have also appointed someone to lead it from June 2022.

Improving the experiences of those with Additional Learning Needs

4.100 We have put in place a range of measures to ensure that the Additional Learning Needs (ALN) reforms can be implemented and understood ensuring that we understand in particular the implications for children who are looked after, as well as all those who have additional needs.

4.101 A new Personal education plan has been developed that could include an Individual Development Plan (IDP) which will replace existing Individual Education Plans and Statements of Special Educational Needs for children and young people with ALN over a phased period and be used for learners from the age of 0 to 25. This process has been piloted with a number of CLA learners educated both in and outside of RCT since September 2021.

4.102 Working together with Children's services and IROs we have supported schools and foster carers through the process with those children who have identified new or emerging additional learning needs. A series of workshops to ensure all key professionals are aware of this process have been held over the last two terms. Working with senior managers across both directorates (education and children's services) this has included training with children's services professionals, schools and foster carers.

Learning Disabilities

4.103 Our services play an important part in the lives of people with learning disabilities, their families, and carers. We launched our Learning Disability Transformation project during the pandemic.

4.104 Our work to transform the Council's Day Service Offer for people with a learning disability continued throughout the year. We are committed to meeting current and future needs which are increasing in complexity and the expectations of those we support and their families and carers. We are seeking to create more outcome-based opportunities for them which focus on individual progression and achievement, promoting independence not dependence. The work, which is also part of our response to the impact of the pandemic, aims to improve the delivery of the day service offer, including the use of current day centre buildings in the most efficient and cost-effective way.

4.105 Building on engagement in the previous year, and taking advantage of the easing of the pandemic, a further round of engagement events and activities were carried out in the summer and autumn of 2021. We developed the "My Day My Way" daytime opportunities engagement programme to obtain the views of people with a learning disability and their families and carers on what is currently good about or services and what is missing. A dedicated webpage has been established to support this work.

4.106 This activity informed the development of a new Day Services Strategy, produced with the involvement of those who use our services, their carers, and their families. This will be published for formal public consultation.

4.107 Through our work with People First, we continue to improve the quality, availability of, and access to, easy read alternatives for people with a learning disability but also other vulnerable people. Our Adult Services managers continue to attend parent / carer group meetings to pass on important information, to signpost to relevant services and have general conversations about people's needs.

4.108 We have engaged with several stakeholders, using a variety of tools such as Easy Read versions, videos, questionnaires, assistive technology, online events, and face to face meetings. My Day My Way Engagement was promoted via the Let's Talk RCT website. Following the Engagement process, a Task & Finish Group was set up to collate the 858 responses, which produced seven main themes. The extensive information gained through this process, will help to shape the learning disabilities daytime opportunities strategy for the future.

Case Study

P is a 56-year-old gentleman with a diagnosis of moderate learning disabilities and challenging behaviour. P also has a history of significant mental ill health and has been detained under the MHA on several occasions. P lived on his own with staff support provided 24 hours a day. This placement became problematic and there was significant concern in relation to P's physical health and mental wellbeing resulting in behaviour of concern which impacted the ongoing support within the placement. It became apparent that P required a more specialist provision.

Due to the ongoing nature of the issues a joined-up approach was required and input from all partner agencies. A range of assessments were undertaken including capacity assessments which determined that P was unable to make decision in relation to his care, support and accommodation needs with decision's being made under the best interest's process. During this time an advocate was involved to ensure that his views were shared (P unfortunately did not have any family).

As a result of the assessment and engagement work that was undertaken it was identified that a specialist learning disability residential placement was required, the MDT worked effectively together to plan the transition and the social worker and advocate met regularly with P to keep up his enthusiasm and eagerness to move as well as developing a plan with support staff and his new staff to ensure his move went smoothly. This was over a period of several months as intensive work needed to be undertaken, and this input and dedication from his support team and his social worker resulted in a positive move for P, he loves his placement and is settling in really well building up local connections and relationships with his support staff.

Work with partners to improve referrals into employment for those with a learning disability

- 4.109 A highlight of the Transformation Programme has been the recruitment and appointment of a person with a lived experience for the paid role of Chair of the RCT Transformation Partnership Board. This was achieved with the support of People First who were integral to this process. This model has been recognised and replicated at the Regional Learning Disabilities Group level recently.
- 4.110 We reimagined the recruitment and selection process, which involved a coproduced group that included people with a lived experience and carers, who created a job pack, consisting of an Easy Read job description and advert, which attracted high interest and received support from agencies such as Elite Supported Employment Agency. The successful candidate is keen to share his enthusiasm of this employment experience by producing a short video, to promote the world of work for others.
- 4.111 In 2021/22, despite the challenges of the pandemic, we continue to offer existing and new learning and employment opportunities to people with learning disabilities, for example at Pickle Gherkin in Ty Elai, Arts Factory in Ferndale, Lakeside in Clydach Vale and Café 51 in Pontyclun.

What are our priorities for 2022/23?

4.112 During the next year we will focus on:

- Complete development of our new co-produced day service offer for people with a learning disability to improve access community based services and volunteering and employment opportunities
- Develop an engagement and coproduction plan for Adult Services, building on the work already undertaken through the Learning Disability Transformation Programme
- In line with the recommendations of the report by the Association of Directors of Social Services Cymru which was published at the end of the financial year, we will take action to increase the take-up of social care by people from minority ethnic communities.
- Finalise and commence implementation of Children's Services Participation Strategy

e) Supporting people to safely develop and maintain healthy domestic, family, and personal relationships

What did we plan to do in 2021-22?

4.113 We said we would:

- Work alongside partners to develop our continuing transformation strategy in relation to Early years Provision
- To continue to improve the resilience of residents and communities by working in partnership to strengthen the Neighbourhood Networks model, ensuring residents have the opportunity to influence decisions, activities and services in their communities which promote health and well-being

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

Continuing our transformation of early years provision

4.114 In last year's report, we described we would pilot the transformation of the Early Years provision across the Cwm Taf Morgannwg area, including reorganising Health Visiting services. Our Wellbeing and Resilience Health Programme is now providing enhanced health visiting services supported by the Resilient Families Service as the single integrated delivery model for family support in the area.

4.115 We commissioned a review of the pilot, which was published in July 2021, confirmed that the joint working had produced some notable results including the delivery of a

service available to all in Rhondda Cynon Taf. In the summary of the review, it says that:

“At this stage there is already some evidence of the outcomes of the pilot. The distinction between generic and Flying Start health visiting has been removed, with caseloads shared across the workforce. All health visitors are now able to offer the same range of support, including an additional antenatal visit and a visit at 20 months for the assessment. Stakeholders have commented on the presence of new families receiving support who previously would not have been eligible due to where they live.”

4.116 The transformation of early years support is expected to:

- See a short-term increase in families receiving support before an increase in community resilience
- Increase the number of new families accessing services that have not done so before, those who have been previously unable to access Flying Start type services
- Identify families with more complex needs by intervening earlier
- Target support where needed. There is evidence that needs have been better identified since the start of the pilot. Services are appropriate programmes to deal with identified need rather than simply offering a generic programme of support.

4.118 As a result, we are working collaboratively to deliver a range of positive outcomes including improved child and parental well-being, reductions in disruptive child behaviour, dysfunctional parenting and co-parenting conflicts, and improved parental mental health. Over the coming years the following impacts should emerge:

- Reduction in health inequalities across communities
- Reduced rate of poor mental health in children and young people
- Reduction in the impact of adverse childhood experiences and increased resilience.
- Reduced numbers on the Child Protection Register.
- Reduced rate of Children Looked After.
- Increased number of children meeting expected development milestones.
- Reduced number of exclusions from school.

4.119 The next phase of this work will be reported and analysed over the next year as we seek to demonstrate the progress and effectiveness in our continued transformation of the early years' service.

Strengthening the Neighbourhood Networks model

4.120 Our seven Community Hubs are at the forefront of our engagement with the county's residents, with more than 326,000 visits to the Hubs in 2021/22. The number of visitors for each site is set out in the table below:

Table 4.3: Number of visitors to Community Hubs, by location, 2021/22

| Community Hub | Number of visits |
|--------------------------------------------|-------------------------|
| Aberdare | 38,286 |
| Mountain Ash (Canolfan Pennar) | 89,787 |
| Porth (Plaza) | 30,338 |
| Ferndale (Hwb) | 12,481 |
| Pontypridd (Llys Cadwyn) | 126,232 |
| Llantrisant | 17,607 |
| Church Village (Garth Olwg)(Library only) | 11,904 |
| Total visits | 326,635 |

4.121 In 2021/22, our Community Coordinators responded to 4,111 calls for help (3,483 individual clients) from residents. Of these:

- 2,893 were allocated to a worker
- 306 were allocated to a Community Resilience Volunteer
- 359 were referred to partner organisations.

4.122 The impact of our action has been to reduce the need for people to access formal services, instead being helped by other community-based organisations.

Case Study-Community Development Hubs

Pontypridd Foodbank requested support via RCT Together Community Development Team in clearing the outbuilding to provide easier access to the venue.

They were struggling to sustain volunteers to clear the outbuilding of their venue and the Community Coordinator approached the Neighbourhood Network within Pontypridd to engage interest. Unfortunately, many community groups were unable to offer support, however, the Probation Service were able to help.

The Community Coordinator liaised with the Probation Team and the Foodbank to organise a clearance project and identified 4 volunteers to assist.

The probation team and volunteers assisted with the clearance which has allowed the outdoor space to be more accessible for residents needing to access the Foodbank.

“I’m so grateful. I didn’t even think of contacting the probation team. I am so pleased to be part of the Neighbourhood Network. I’m looking forward to seeing the end results as this will make a huge difference to the outside.” – Representative from the Foodbank

4.123 Our Community Hubs continue to provide a range of services in one in neighbourhoods which have been targeted as priorities for support. They bring services together thus providing a better service and creating economies of scale for

staffing and building costs, which makes them more sustainable. We have also established a presence from our Resilient Families Service presence.

Case Study-Resident Support

A Community Coordinator started to build a rapport with an older person who visited the Community Resilience Hub daily. Over time, the Community Coordinator sensed a change in this person's behaviour, particular during one period where the individual was very distressed about Anti-Social Behaviour and being targeted by the neighbour.

Via the individual's consent, the Police were contacted to make some enquiries, which resulted in these accusations being incorrect. Due to the changes in the individual's behaviour and memory, the Community Coordinator contacted Age Connects Morgannwg who provided an advocate to support the individual and family. With an advocate in place, the individual was supported to seek medical advice.

Subsequently, due to the individual's complex needs, relationship break downs within the family occurred and the Community Coordinator has supported this by liaising with the Advocate, individual and family members.

As a result of this intervention, the individual was able to see a GP at the right time to receive a diagnosis. This has made a significant difference to the individual by being able to access good quality information, advice, and assistance, seek support and be signposted to other services who continue to provide support. The family have thanked the Community Coordinator for their caring approach and accessing all the relevant professionals and agencies that were vitally needed

4.124 In 2021/22, we introduced a Wellbeing Assessment and Plan to enable the team to have 'What Matter's Conversation' and document key outcomes were required.

4.125 Towards the end of 21/22 our Community Hubs led on work to welcome Ukrainians who were seeking sanction to Rhondda Cynon Taf. The team were supported by both Adults and Children's services and developed an approach to help meet the needs of individuals and families who were arriving in our area.

What are our priorities for 2022/23?

4.126 During the next year we will focus on:

- Make a full contribution to ensure the second stage of the evaluation of the early Years Transformation Programme, which is focusing on the systems and processes which underpin the model, is completed on time.
- To further develop the relationship between the Single Point of Access and Preventative Services in Adult Services with the Community Hubs to promote a Social Prescribing approach.
- To roll out Wellbeing Assessments for the wider community, this will ensure that the Community Hubs can document and plan support around an individual's wellbeing needs

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

What did we say we would do in 2021/22?

4.127 We said we would:

- Develop close to home accommodation services for looked after young people.
- Continue to work with domiciliary care providers to restart development of an outcomes based domiciliary care approach and to ensure there is sufficient provision available at the right level to meet demand and deliver good quality home care.
- Continue to work with Linc Cymru to deliver the Council's extra care housing development programme and enable more people to live independently in their own home.
- Work with Housing Strategy to continue to develop a range of modern fit for purpose supported housing options for people that meets their assessed needs and is supported, where possible, by access to community facilities.

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

Developing close to home accommodation for looked after children

4.128 We have developed a new solo residential provision and commenced a feasibility study. The aim of the study is to develop a 5-year plan for developing sufficient not for profit local accommodation. The development is a significant challenge and transformational change.

Supporting independent domiciliary care providers

4.129 Development of an outcomes based domiciliary care approach remains a priority but has been delayed due to the pandemic. In 2021/22, we continued to prioritise working with homecare providers in order to maintain capacity and resilience and improve the stability of the market to meet increasing demand and ensure good quality care to all individuals at all times.

4.130 During 2021/22, we provided nearly 1 million hours of home care to over 1900 adults with long term support to live at home and is a testament to the hard work of all the staff involved, during what was a very difficult year. However, staffing related issues and increasing demand and need in the community, on occasion, impacted on service quality and delivery during the year. Waiting times for the start of new home care packages increased and a priority rating system is in place to ensure those most in need are seen first.

4.131 Our Support@Home Service has worked to develop an 'Intake' model for domiciliary care in 2021/22. This new approach provides right-sizing for people who have long

term care and support needs and stabilizes packages of care prior to long services being commissioned. Utilising an intake model and right sizing approach supports the creation of capacity and sustainability in the domiciliary care market. During the year, provided over 2000 hours of support for people who required 'right sizing' of packages.

4.132 In addition, in 2021/22, we commenced work to implement new "Community Catalyst" Partnership Service model to support people to develop small community based enterprises that can provide real choice for people alongside existing care providers in order to respond to the needs of our older and disabled citizens. As well as enabling Adult Services to meet local demand, the model will harness a new type of social care workforce providing additional work opportunities for people-working in a way that suits them and their family at these challenging times.

Extra Care

4.133 In 2021/22, we continued to progress our Extra Care housing development programme. The programme, which has been running over several years, represents a £50 million plus investment plan to develop 300 extra care places across Rhondda Cynon Taf as a modern form of housing which can better meet residents' support needs as they get older.

4.134 We were delighted that the new scheme, Cwrt Yr Orsaf in Pontypridd, we had been working on in partnership Linc Cymru became operational, despite the challenges of the pandemic, and welcomed new residents in November 2021.

4.135 As at March 2022, we have 3 extra care housing schemes, providing 140 places, operating in Rhondda Cynon Taf and planning approval for a new scheme in Porth, which is due open in Spring 2024. Our proposals for the development of new schemes in Treorchy, Mountain Ash and Ferndale will be considered for development approval in 2022/23.

Continuing to improve the range of accommodation with care options

4.136 In 2021/22, we also continued to progress our wider accommodation with care development programme, which focuses on providing modern accommodation options, partnership with housing associations, for people with combination of needs, including those with a learning disability. For example:

- 8 independent living flats developed specially for people with a learning disability as part of the redevelopment of the Oxford Buildings in Mountain Ash opened in April 2021. People living there can access targeted coproduced support from a commissioned care provided to enable them to maximise their independence in the community.
- A 5 person bungalow, jointly commissioned with the Health Board is underdevelopment at Elm Road in Llanharry to create new bespoke accommodation for autistic adults with complex needs. The accommodation, which is due to open in Summer 2022, will prevent people from having to go out of area to live and will be a locally delivered supported living model rather residential care.

- 4 independent living flats are under development in Treorchy to support vulnerable people with mental health needs to step down and move on to alternative accommodation options as part of the person's recovery. The accommodation is due to open in Autumn 2022.
- 8 supported living apartments for people with a learning disability, with on-site 24-hour support, are being developed as part of Big Shed Development by Rhondda Housing Association in Tonypany.
- Redevelopment proposals to provide new specialist care accommodation for up to 14 people with learning disabilities at the former Bronllwyn Care Home site in Gelli, as part of the wider modernisation of Council residential care provision, are being progressed for development approval in 2022/23

Case Study

Mr K is a 60-year-old man who previously lived in a rented two bedroom property. He has lived alone since the death of his wife in March 2018. Mr K has difficulty with mobility and had isolated himself from his local community. Mr K presents as a strong character, who is very capable of expressing his views. Mr K has a history of alcohol misuse, relapsing in March 2018 because of bereavement issues after five years abstinence. At that time Mr K's physical health was a concern to professionals, alongside additional issues relating to daily alcohol use and self-neglect. Mr K's motivation for positive change appeared to be affected by emotional trauma of the loss of his wife. During this time alcohol served a purpose to him, describing this as a "blocker" for the emotional pain he was in. Mr K spent his day sitting on the sofa watching television and had no desire to leave his property. Mr K's low mood and lack of motivation created a barrier for change and posed further risks of the identified issues continuing.

Mr K was admitted to hospital following a fall at home. Mr K was found to be disorientated and concerns were raised about his mental capacity. Social Services reviewed Mr K on ward and conducted a Mental Capacity assessment regarding his future care and accommodation needs that evidenced he was not able to make decisions related to the question but through the Best Interest processes it was determined that Mr K could return to the community with a package of care. However, his home environment continued to pose a risk to Mr K and was unsuitable for his current needs. Further issues were reported relating to financial exploitation and unknown males frequenting his property.

Services explored sheltered accommodation near other relatives whilst Mr K was in hospital. Mr K was then placed in an interim care home placement whilst suitable accommodation was being sourced. Mr K now resides in sheltered accommodation near to other relatives. Mr K is very settled in his home and has made new friendships. He engages with his package of care and has remained abstinent from alcohol since discharge.

What are our priorities for 2022/23?

4.137 During the next year we will focus on:

- Continue to work with Linc to deliver the Council's extra care housing development programme
- Continue to review and develop proposals for the ongoing redevelopment and modernisation of the Council's residential care homes to ensure we create the right model of service to respond to changes in demand and need.
- Complete Supported Accommodation Strategy and work with Housing Providers to continue build modern fit for purpose supported housing options for vulnerable people
- Commission Community Catalyst to support people and local partners to develop small enterprises that can provide real choice and increase the number and range of homecare and support options
- Develop commissioning intent to shape a sustainable home care market in line redesigned service model
- Continue to implement the Residential Action Plan and Feasibility Study for looked after children

5. How we do what we do

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

5.1 We have always said that our workforce is our most important asset without whom high-quality services could not be delivered without an adequate number of well-trained, experienced staff with the right skills and approach needed to work with citizens and effectively in partnership with other organisations.

5.2 The Council's five-year Workforce Plan has been the framework for:

- Developing a flexible and agile workforce that shares organisational knowledge.
- Recruiting and retaining the best talent to create a diverse workforce.
- Leadership and management development.
- Enabling a high performing, engaged, and committed workforce.
- Supporting the health and well-being of our workforce to maximise attendance.

5.3 In last year's report we said we would:

- Deliver services anticipating demand associated with the pandemic will impact local families.
- Have an engaged, motivated, and healthy workforce with the physical resources they need to do their job effectively, and able to access to resources which support and strengthen their emotional and physical resilience.
- Deliver an attractive recruitment campaign for Adult and Children's Services.
- Develop a pay structure that reflects qualifications, responsibilities, and the ability to take on more complex /challenging work.
- Develop an agile working environment across Adults and Children's Services which optimises the way we work.
- Invest in IT systems to support connectivity.

Recruitment

5.4 In November 2021, the Care Inspectorate Wales reported: *"recruitment and retention of a stable workforce remains a priority for the local authority...work is ongoing in relation to implementation of a workforce strategy, which includes the aim to have a workforce in sufficient numbers with the right values, knowledge, skills and confidence to meet the needs of the children and adults in Rhondda Cynon Taf."*

5.5 To address staff pressures and increasing demand and complexity in adult services, we have created some new social worker and care and support practitioner posts, for example Hospital Discharge Team and also maintained over-establishment cover to meet demand. However, due to the pressures our social work teams have not experienced the intended sustainability and improvements we need. Consequently, individual social workers workloads remain higher than preferred and waiting lists remain and reviews are overdue.

5.6 Recruitment and retention issues in our Adaptation and Equipment (ACE) and Sensory Teams, plus increased demand have become progressively worse during the

pandemic, which has led to significant staff vacancies. To address these issues, we have given Occupational Therapist posts a market supplement and remodeled both Teams creating additional Occupational Therapist assistants and Sensory Rehabilitation Assistants to increase capacity to meet the assessment demand and address waiting list backlogs, which are significant.

- 5.7 In children's services recruiting social worker and residential posts is more challenging than ever, with the Council having to advertise for longer than usual before having candidates to interview, but in general we are still able to recruit, albeit with delays, to social worker posts in the following areas: Youth Offending Service; Reviewing Service; Miskin; 16+ Service; Disabled Children's Service; Assessor Care Manager; Support Worker in every role and fostering.
- 5.8 Our toughest challenge lies in recruiting qualified social workers in Intensive Intervention where we have a 30% vacancy rate, so a workforce strategy, and recruitment marketing strategy has been developed aimed at addressing underlying challenges.
- 5.9 One of the affected service areas has been the two Enquiry and Assessment Teams which have implemented a risk management plan as vacancies have, affected the response to new safeguarding concerns and the ability of the service to carry out timely assessments of care and support needs.
- 5.10 We have put measures in place within Children's Services to attempt to address this pressure, for example increasing capacity within other parts of the service and recruiting to other non-social worker posts taking on some tasks.
- 5.11 A media strategy was also developed during the year to help promote social worker recruitment in Children's Services. This was developed by examining the strengths, weaknesses and challenges faced by the current social worker attraction campaign.
- 5.12 In response to ongoing difficulties in recruiting and retaining qualified Social Workers work commenced in 2021/22 to develop a number of measures to improve further on our established "Growing our Own" scheme, such as increasing the number of staff we will support to access the Open University Degree course, introducing an allowance payable to Practice Educators for mentoring a Social Work student and also in the next academic year we will agree a Bursary Scheme with both the University of South Wales and Cardiff University to fund a number of RCT resident students tuition fees"

Agile working

- 5.13 The Covid 19 experience has accelerated our development as an agile service. Staff remain working on an agile basis from home. Statutory meetings are now being held virtually and this has required the provision of suitable IT equipment. This has highlighted both opportunities and limitations, in particular virtual meetings, the importance too of face-to-face team meetings, supervision and peer support to promote the well-being of staff.

Developing our pay structure

- 5.14 We have undertaken a pay review and consulted on the outcome of the pay review in June 2021. A wider review of workforce development was planned and undertaken later in the year after the implementation of the pay review.
- 5.15 From December 2021, the Council extended the payment of the real living wage (RLW) to all independent sector care providers commissioned that provide older people residential and nursing care, supported living, extra care and home care. This commitment followed the Council's previous commitment to pay the RLW to our in-house and independent home care providers.
- 5.16 In November 2021, the RLW was increased nationally to £9.90 per hour. This increase would normally be applied from the start of the next financial year in April. Considering the ongoing challenges that the care sector is experiencing, this increase was applied early from 1st February 2022 and was also applied to all Council staff from 1st February where necessary. The Council recognised the need to support a sustainable workforce for care and support at home and the early implementation of the increase to the RLW provided further assistance to the sector and staff who provide care and support to our most vulnerable residents.

Supporting our staff

- 5.17 The pandemic has had a huge emotional and psychological impact on many of our staff, and this should not be underestimated. Our direct staff who have been involved on the frontline through the pandemic, and the significant emotional toll that it has played. We have tried to support all staff through the pandemic ensuring they benefit from corporate wellbeing programmes of support, although take-up and impact has been mixed.
- 5.18 As part of the development of the Council's budget for 2021/22 it was agreed that £50,000 would be allocated for wellbeing support programmes to be developed and extended, which will support those working in social care alongside their colleagues across the organisation.
- 5.19 We remain concerned about the physical and mental impact of the pandemic on our staff, and we continue to work with them to mitigate the effects that people have felt and may continue to feel. Although we are now emerging from the pandemic, morale, and resilience is reducing as staffing pressures increase, and this points to the importance of continuing to prioritise staff wellbeing.

What are our priorities for 2022/23?

- 5.20 We are planning to:
- Complete development of a Workforce Strategy and detailed annual workforce plan aligned to National and local workforce pressures and priorities
 - Complete remodelling of Care and Support and Complex Learning Disability Teams

- Continue implementation of all aspects of Children’s Services Workforce Strategy with the involvement of a practitioner forum for Children’s Services staff
- Focus on nurturing supportive & resilient teams by investigating options such as Schwartz Rounds in Children’s Services

(b) Our financial resources and how we plan

- 5.18 Our elected members are responsible for setting and agreeing the Council’s priorities and the budget allocations to deliver their commitments. Councillors and officials monitor our spending to ensure effective and efficient use of public money in providing high quality, and often, high-cost services to people in need.
- 5.19 In last year’s budget the Council allocated £168,586,000 to the Community and Children’s Services Directorate. This is the budget that includes social care, to help alleviate the key pressures that we face, and to help focus on supporting our recovery and delivery of services.
- 5.20 Our budget for this new financial year in 2022/23 is £182,706,000, an increase of £14,120,000 from the previous year.
- 5.21 We consult on how to use the money. In addition to consulting with elected members we also did an extensive public consultation, reaching out to over 1,100 people.
- 5.22 We used our new “*Let’s Talk*” online engagement platform, which provides a user friendly and interactive form of engagement. The “*Let’s Talk Budget*” project provided key information, key dates, documents, graphics, and videos to outline the background to the Council’s budget, in addition to engagement tools to allow feedback, including online polls, a survey and an ideas tool.
- 5.23 We used social media to communicate the key messages to residents and service users and encourage engagement and feedback regarding the Council’s budget and investment areas and emailed a range of stakeholders to promote the consultation.
- 5.24 Several outdoor face-to-face engagement events were re-introduced this year, after a temporary absence due to the pandemic. The Council’s recycling trailer was used, and Officers were on hand to outline the budget approach, answer questions and collect views. We also held engagement events at Ynysangharad Park in Pontypridd, Aberdare Town Centre, and the Co-op in Treorchy.
- 5.25 We engaged with the Older Person’s Advisory Group and engaged with young people, including online meetings with 3 secondary schools - St. John Baptist Church in Wales High School, Y Pant Comprehensive School and Treorchy Comprehensive School. During the sessions the young people were shown a video outlining the budget challenges followed by a short presentation with discussion prompts and questions from the full budget consultation.

What are our priorities for 2022/23?

5.26 We are planning to:

- Developing a financial strategy for the next 3 years for Adult Services and Children's Services, outlining short and medium-term efficiencies and investments and our approach to regional developments including capital and revenue elements of the Integrated Care Fund.

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

5.27 Our Corporate Plan 2020 – 2024 sets out the Council's overall vision and contains specific objectives to which social care services and our partnership working will continue to contribute.

5.28 Partnership working is key to the delivery of high quality and responsive services. We continue to work closely with key partners on an individual and strategic level to improve services and to achieve efficiencies.

5.29 We continue to play a significant part in the:

- Regional Partnership Board, which includes Merthyr Tydfil County Borough Council, Bridgend County Borough Council, Cwm Taf University Health Board, and colleagues from Housing and Third Sector organisations.
- Regional Learning Disability and other sub-groups
- Cwm Taf Deprivation of Liberty Safeguards Partnership
- ICES Partnership Board

5.30 Working with our regional partners, we led the commissioning of a new project supported by the Regional Partnership Board. With 85% of the region's residential care and nursing homes contributing their views to the study, it provided a robust body of opinion on what changes are needed to meet future needs and demand. We will play our part to the full in working with our partners to implement the recommendations.

5.31 We have also continued to make a significant contribution to the work of the Cwm Taf Morgannwg Safeguarding Board, where our Group Director is Chair of the Board and leads its' work. For 2021-22 the Safeguarding Board agreed to set three priorities as part of its annual plan to:

- Ensure an effective response to the Impact of the COVID-19 Pandemic
- Strengthen safeguarding links to other partnerships in the Region
- Improve our approach to public protection concerns

5.32 The Councils' political and corporate leadership is strong. Social Services continues to be a high priority, receiving strong and proactive support from the Cabinet Members for both Adults and Children's services.

- 5.33 In its report following its assurance check, Care Inspectorate Wales recognised the clear commitment to collaborative working across the area, noting that relationships with partners had been strengthened during the pandemic. In commenting on Adult Services, it said providers had cited good communication and positive meetings with local authority representatives during the pandemic and the benefits of timely guidance and support provided by the local authority.
- 5.34 We are accountable through a variety of mechanisms including monthly performance reviews and quality assurance checks, regular discussions with Cabinet Members and senior staff using the data we collect, reports to Council Cabinet, Scrutiny Committees, and Corporate Parenting meetings, and engagement with staff.
- 5.35 We have developed 3 new strategy documents during the year which will form the basis of service improvement plans for the next 3 years, these are the workforce strategy, looked after prevention strategy and participation strategy.
- 5.36 In last year's report we said we would:
- Accelerate the pace of integration of health and social care services across the Cwm Taf Morgannwg region to enhance integrated planning and service delivery of health and social care services with Cwm Taf Morgannwg University Health Board.
 - Review the projects and programmes delivered through Integrated Care Fund and Transformation Funding to ensure they are delivering the outcomes we need and that essential services are sustainable going forward.
- 5.37 As set out in last year's report, we continued to support the Test Trace Protect programme, supporting the Regional Strategic Oversight Group and Incident Management Team established to coordinate and oversee our response to the pandemic.
- 5.38 There continues to be a need to develop and implement new plans that accelerate the pace of integration of health and social care services with Cwm Taf Morgannwg University Health Board, but currently we face considerable challenge in achieving the integrated approach that is required to ensure the health and social system is delivering the outcomes we need and that these essential services are sustainable going forward. This will be addressed as we plan our approach in 2022/23.
- 5.39 The Integrated Care Fund and the Transformation fund has remained a significant driver for change, facilitating and supporting joint working with our partners throughout the past year. To ensure action supported by these funds continue to deliver, we have embedded projects in early help and residential care and a new proposal that enhances emotional well-being support for 8-11 years olds, developing capacity in residential care and importantly an integrated approach to support parents who are at risk of parent-child separation or separated from their children. As referenced earlier in this report, we use the regional funding with partners to invest significantly in services that are preventative and enable people to be supported as well and safely as possible at home.

5.40 Regional funding will continue in the 2022/23 year through the newly formed Regional Integration Fund. In addition, we see significant opportunities as the Welsh Government has announced £182m over the next three years in support of a new Housing with Care fund, to for example help people with learning disabilities, those with autism spectrum disorder and other neurological conditions to live independently, where possible, in their own home.

What are our priorities for 2022/23?

5.41 In 2022/23, working with our partners we aim to:

- Clarify the role and authority of the Regional Partnership Board, as the strategic body responsible for integration of health and social care, in respect of those areas where it has not been possible to reach agreement between the local authorities and health board e.g. Continuing Health Care.
- Examine whether any changes are required in our partnership approach as our new management structure settles in and we will seek out an evidence-based tool to inform our analysis in this.
- Further develop integrated working with health services e.g., review and redesign health services for older people to provide more responsive access and effective joined-up mental health support and redesign the primary and community-based care services model to include 'home first' discharge from hospital services.

Sources of information

This page provides links to sources of information on the services and support mentioned in this report.

Services and support

For support in the area:

- Adult Social Services Care and Support
<https://www.rctcbc.gov.uk/EN/Resident/AdultsandOlderPeople/AdultSocialServicesCareandSupport/AdultSocialServicesCareandSupport.aspx>
- Children and Families
<https://www.rctcbc.gov.uk/EN/Resident/ChildrenandFamilies/ChildrenandFamilies.aspx>
- **You can search “Dewis Cymru”** for community-based services to support you and your family <https://www.dewis.wales/>

Council meetings

Full information on councillors and meetings of the Council is available on the Council’s website: <https://www.rctcbc.gov.uk/EN/Council/Council.aspx>

Meetings of the Cabinet, the Children and Young People Scrutiny Committee and the Health and Wellbeing Scrutiny Committee are particularly relevant to this report. Agendas, papers, and decision reports can be accessed via the following web pages:

- Cabinet:
<https://www.rctcbc.gov.uk/EN/Council/CouncillorsCommitteesandMeetings/Committees/Cabinet.aspx>
- Children and Young People Scrutiny Committee
<https://www.rctcbc.gov.uk/EN/Council/CouncillorsCommitteesandMeetings/Committees/ChildrenandYoungPeopleScrutinyCommittee.aspx>
- Health and Wellbeing Scrutiny Committee
<https://www.rctcbc.gov.uk/EN/Council/CouncillorsCommitteesandMeetings/Committees/HealthandWellbeingScrutinyCommittee.aspx>