

## Social Care & Health: Report 2022/23

Director's

#### Foreword

This report reflects the activity within Social Care and Health between the period April 2022 – March 2023. It is my second annual report as a Chief Officer having come into post in October 2021.

I have collated the report with the assistance of many contributors and I am extremely grateful for input from the various teams and services within the Social Care and Health directorate.

The overall purpose of the report is:

- To evaluate progress against our social care priorities during the year
- To provide Members and residents with an evaluation of social care and health services, looking at how we are making a difference in peoples lives and our performance against key metrics
- To provide an analysis of the ways in which the current operating context is impacting on services and to identify key risks and challenges
- To inform Members and residents about how our services meet the standards and requirements under the Social Services and Well-being (Wales) Act (2014)
- To set out actions and priorities for 2023 2024

Whilst the report relates to the period April 2022 – March 2023 I have not stuck rigidly to this and where it feels relevant and pertinent I have referred to the current position or used more recent information, as 6 months can be a long time in social care, especially given the current climate.

The report contains:

- Section 1 Basis of the Report
- Section 2 Progress against the priorities from 2021 2022
- Section 3 Overview of Children's Services
- Section 4 Overview of Adults' Services
- Section 5 Carers Service
- Section 6 Complaints and Compliments
- Section 7 More Than Words
- Section 8 Workforce
- Section 9 Next Steps, Key Challenges and Priorities

The value-base of the Social Care and Health Directorate aligns to Social Services and Well-being (Wales) Act 2014 (referred to as the SSWBA) where putting individual people at the centre of what we do and practising with care and compassion is what really counts. Supporting citizens to live their own best lives has been the mantra for Monmouthshire Social Care and Health over many years, and is still at the heart of what we do.



Most readers of this report will be aware of the acute and deep-rooted challenges across the health and social care sector. With ever increasing demand and still further tightening of available resources, there are certainly no easy solutions.

Nevertheless, maintaining good quality services to people who need care and support remains our ambition. Whilst my intention within this report is to lay out the reality of the situation, I also seek to describe the ways in which the service is attempting to tackle the challenges we face. The Council as a whole, and the residents of Monmouthshire, are critical partners in how these challenges are addressed as we seek to understand where and how our social care and health system can be rebalanced, making difficult decisions about what we can and can't do and deciding on the best use of finite resources to balance short and long term sustainability.

At the centre of all of this, is the social care workforce. It is the workforce who carry the reality of how the various pressure points and challenges within the wider system impacts the citizens they encounter day to day, some of whom are the most vulnerable within the county. I am only too aware of the extent to which this can take both an emotional and physical toll on people. I am continually grateful for the resilience and resourcefulness of the workforce - their on-going commitment, heart-felt motivation, professionalism and dedication to serving people is the linchpin of the service and a true inspiration.

In many ways, this report is a celebration of the workforce and an expression of my heartfelt gratitude for everything they do.



#### 1. Basis for the report

Social Care and Health operates within the legal framework set out within the SSWBA around the four key principles of:

- Voice and control
- Prevention
- Well-being
- Partnership

Preparing and publishing an annual report that charts our progress in delivering against the principles and quality standards of the SSWBA is a statutory requirement.

The report forms an integral part of the continual development of social care and health practice. Understanding our performance is central to evaluation and helps us consider whether we are effective and efficient in how we do things. It is an opportunity to take stock, reflect and re-calibrate; to celebrate achievements, as well as being honest about some of our very real areas of challenge and concern. Equally, evaluating through the lens of people who are in receipt of services, helps us understand at a deeper level whether our involvement in their lives is making a positive difference to their overall wellbeing. As much as possible I have tried to apply this lens within the report.

The six quality standards inform our operational activity and set out the ways in which we should be providing services and orientating social care practice. The quality standards are provided in this stack.



Working with people to define and co-produce personal well-being outcomes

Working with people and partners to protect and promote physical and mental health and emotional well-being

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

Encouraging and supporting people to learn, develop and participate in society

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

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

In terms of how we evidence our progress and performance, we are guided by the revised code of practice in relation to the performance and improvement of social services in Wales set under the Social Services and Well-being (Wales) Act 2014 which commenced in April 2020. The code of practice sets a revised performance and improvement framework for social services which contains three component parts; measuring activity and performance, understanding experience and outcomes and using evidence to inform improvement.

2022/23 is the third year of reporting metrics under the measuring activity and performance part of the framework. As there are over a hundred metrics within the framework, the most relevant metrics collated in 2022/23 have been included to support the analysis within this report.

Of course, metrics alone do not tell the story of the performance of social services. To supplement these, we have combined some of them to create performance measures to further understand how well services are performing and included some of our own locally derived performance data used by our services. Evidence and case material we have included in the report will supplement this analysis to further understand the experience and outcomes of service users.

How we measure and evidence our performance will continue to be developed in 2023/24, including further development of the remaining two parts of the performance and improvement framework.

Although the SSWBA is the primary legislative framework, the report is written within a wider statutory and policy context including:

- Programme for Government
- The Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA)
- The Well-being of Future Generations (Wales) Act 2015

- A Healthier Wales June 2018
- Strategic Programme for Primary Care Nov 2018
- Equality Act 2010
- "More than Just Words (Welsh language) Strategy" (Mwyna Geiriau),

At a more local level, social care is delivered in the context of the Council's previous corporate plan (2018 - 2022) particularly Goal A '*Best Start in Life*' and Goal D '*Lifelong Wellbeing*' and the current Community and Corporate plan (2022 - 2028) particularly 'A Safe Place to Live' and 'A Connected Place Where People Care'.

I have deliberately provided information and description within the report, as I am aware that in Social Care we do not often have opportunity to show-case what we do. I have attempted to balance descriptive passages with honest self-evaluation using a range of methods drawing on both qualitative and quantitative data, triangulated where possible through external sources including direct feedback from people.

Information sources include:

- Illustrative information directly from teams and services
- Self-assessment and challenge processes within the social care and health leadership team including self-assessment material under the Local Government and Elections (Wales) Act 2021
- Internal documents such as corporate plan, strategic risk assessment, and service business plans
- Internal Quality Assurance reports
- Complaints and compliments and direct feedback from people using social care and health services
- Performance framework data and analysis
- Regulation 73 reports and Quality of Care reports under RISCA
- Contract monitoring and performance reports (commissioned services)
- Regional documents and performance information associated with the Regional Partnership Board and Gwent Safeguarding Board
- Regulatory reports from Care Inspectorate Wales

#### 2. Progress against the priorities from 2021 - 2022

Last year I set out some key priority areas to focus on in the year ahead. Below, I have provided some headline comments regarding our progress against these.

Priority: Continue to develop and implement the workforce strategy for recruiting into the social care and health workforce over the immediate and longer term.

**Progress:** Workforce planning has remained a strategic focus for the directorate through the year. A number of well received recruitment campaigns have been launched promoting social care as a career of choice. Within children's services recruiting to child protection posts remains challenging and gaps persist. We are working with national partners to address this through limiting the use of agency workers and through overseas recruitment. The recruitment of foster carers remains a key area of focus. Within adults' services specific gaps remain within occupational therapy posts, mental health social work and direct care.

### Priority: Continue to develop and implement the workforce development plan with emphasis on individual well being and increased opportunities for professional support and development

Progress: Supporting practice learning across the directorate remains a core objective.

This year we have implemented a learning management system across the social care directorate, going live in April 2023. We have developed and delivered a new induction and on-boarding programme for direct care with excellent feedback and continued to support foster carers through core training.

We have taken steps to implement approaches to supporting workforce wellbeing through Connect-5 and the promotion of a range of other wellbeing resources.

Our turnover and sickness rates within the directorate remain higher than we would want them to be. In the context of continued and relentless operational pressure, the overall wellbeing of the workforce remains a cause for concern.

# Priority: Maintain a strategic and operational focus on preventative services with emphasis on community resilience and targeting the most vulnerable groups and individuals to help reduce demand.

**Progress:** Following the links made with communities and place directorate a strong partnership approach has remained to ensure good alignment of the Council's resources. The Well being Network in partnership with primary care has remained at the forefront of the work. Community Links workers are embedded within front-facing community venues and this year included specific support to people from Ukraine. Key areas of on-going development include Community Action Networks, participatory budgeting and the development of the well being community hubs.

With the continued high rate of referrals into adult social care, this year we intend to review the connection between the social care '*front-door*' and early help.

Within children's services waiting lists for the early help and preventative services have been significantly reduced with a high level of positive outcomes being reported following interventions.

### Priority: Further develop innovative responses to the challenges within the provider market, specifically through a 'place-based' approach to home care.

**Progress:** During the last year we have seen some expansion in care service providers following the lifting of restrictions caused by the pandemic. This has enabled us to reduce our hours of unmet need within home care and has minimised waiting times for residential placements. We have made significant progress in increasing the availability of micro-carers in locality areas, and there has been a slight increase in people choosing direct payments.

# Priority: Re-focus on practice particularly within adult's services including quality assurance processes and management oversight, support of practice, specifically to address issues raised within the CIW Performance Evaluation Inspection July 2022

**Progress:** We are designing and implementing system development work to support quality assurance processes within 'Flo' the adult data base recording system. We are further reviewing how practice across the system consistently aligns with eligibility criteria and have put a programme in place to support care plan reviews. Demand pressures from new referrals continues to impede progress in some areas.

## Priority: Work with partners to develop and implement services that will address the insufficiency of placements for children and young people, particularly those with complex needs.

**Progress:** Sufficiency of placements for children who need to be looked after remains a key risk for the council. Challenge in securing appropriate placements for children has been exacerbated by uncertainty owing to the *'eliminating profit'* agenda.

Our prime strategy to address this is the on-going work to recruit and retain in-house Monmouthshire foster carers. Whilst kinship care placements have increased, progress in terms of recruiting in-house foster placements is slow.

This year we have worked in partnership to develop 2 bespoke residential provisions for children with complex needs. We have plans in place regarding increasing our residential provisions utilising the council's existing property base; however, the project time to stand-up a residential provision takes at least a year. We are developing learning and experience in this field within the service.

We have worked in partnership to increase access to 16 plus supported living accommodation including for unaccompanied asylum-seeking children (16 plus).

### Priority: Continue to maintain a strong partnership presence in key forums particularly within the Gwent Safeguarding Board and the Regional Partnership Board.

**Progress:** Monmouthshire remains well-represented across all key partnerships. Through this we have been able to ensure financial and other resources to support key initiatives this year including the development of the micro-care project; assistive technology and the purchase and refurbishment of a residential children's home.

#### **3. CHILDREN'S SERVICE**

The primary purpose for Monmouthshire Children's Service is to support children to live safely and happily within their families and communities, building the skills and resilience they need to go on to achieve their full potential as adult citizens.

To achieve this Monmouthshire Children's Service has built a strong identity underpinned by a consolidated set of values aligned to the principles of the SSWBA. These include:

- Keeping children at the centre of everything we do, embracing a single service ethos so that the child's experience is coherent and seamless
- Practice that is values driven, family focused and strengths-based
- Ensuring services are appropriately aligned so they add value to each other
- Recognising the power of early intervention and preventative family support at every tier of need
- Maintaining a strong focus on workforce by proactively supporting practice development and a positive learning culture
- Embracing integrated and multi-disciplinary approaches
- Proactively seeking opportunities for participation and engagement with children, young people and families
- Seeking ways of releasing resources and money from the system to get better longer-term outcomes and increase sustainability.

These values drive our activity and help us ensure that our service development themes and priorities remain as coherent as possible.

Child Centred	Focus on the child's experience of services & using participation to shape &
child centred	improve services & inform practice
Workforce	Develop practice & support confident & competent practitioners across the service who are passionate about Children's Services
Quality Assurance	Facilitate a culture within Children's Services which promotes transparency, reflection, learning and review to drive continuous improvement towards achieving the best outcomes for children, young people & their families
Services	Ensure that family support services are in place & sufficient at all tiers including services for children who are looked after & care experienced young people Ensure that all services focus on prevention & de-escalation & build on individual, family & community strengths
Integrated Working	Harness and embrace the power of integrated / partnership working to maximize access to resources and improve outcomes for children, young people and families

In my last report, I described a challenging year for children's services. Unfortunately, this year the picture has remained very much the same. Demand arising from new referrals has remained high with the complexity of presenting needs being an on-going cause for concern. Domestic abuse, family dysfunction, substance misuse and mental health difficulties continue to have a significant impact on the safety and wellbeing of children across the county, with external factors such as the rising cost of living putting even further pressure on vulnerable families.

Supporting the wellbeing of our workforce and difficulties in recruitment, particularly into child protection services, has remained a constant factor requiring considerable investment of time and resource. Shortages within the workforce particularly in critical posts has placed extra pressure on teams and has slowed us down with some aspects of implementing service developments. Recruitment into key posts and reducing the use of agency staff remains a key priority.

One of the most significant challenges for the service this year, was the lack of suitable placements for children, particularly those with complex needs. Good placement options are a crucial

component of how we keep children safe and help them recover from any trauma or abuse they may have experienced. Not having placements available is potentially harmful for children, puts additional pressure on resources and is incredibly demoralising for our workforce. This year has seen placement availability become even more competitive as 'for profit' providers respond to the governmental policy drive to eliminate profit from children's social care.

Pressure in this area was the major reason why the service experienced unsustainable financial pressure against the budget over the year. From an original budget of £18,012,000, out turn at year end was £22,180,000 meaning that the budget was overspent by £4,147,000.

Service Area	Original Budget 2022/23	Actual Outturn	Actual (Under) / Overspend @ Outturn
	'000's	'000's	'000's
Children Services	18,012	22,180	4,147

We are developing plans to respond to the challenges laid out through the 'eliminate' agenda, however, progress is not as quick as we would like it to be. Making use of regional resource to further development and implement our placement sufficiency strategy will remain a key priority area over the next year.

Despite the challenges the service continues to develop and has seen some real positives and highlights through the year.

In the previous report I highlighted the launch of the Monmouthshire Children's Services Participation Strategy <u>Participation-Strategy-v5-003.pdf (childcomwales.org.uk)</u> Since then, the strategy has been recognised as a model of good practice by the Children's Commissioner for Wales and each team is working on their own Participation Action Plan in line with the strategy.

Each team is developing work on children's participation in different ways and are sharing their skills and learning across teams, here are some examples of things that have happened or are underway.

The Children with Disabilities Team ran an event in August to consult with children and young people who use their services on what works well for them and changes they would like to see.

The Early Help and Assessment Team are reviewing recording so that records are written to the child and reports use the child own voice.

The BASE team have been working with children who use their service and members of the local community to develop a community garden.

The Young Carers team launched the Young Carer's Forum with a fun day that was planned by young carers, for young carers and their families.

The Family Time Service has consulted with children and young people about the kind of resources and activities they would like to see at the centres and is planning on involving children in the design of the new centre in Abergavenny when it is being developed.

The Family Support and Protection Teams are planning ways of getting feedback on their involvement from children in order to improve the service they offer.

Young people have also been directly and indirectly involved in the recruitment of staff. In some cases they have sat on interview panels, in others they have provided questions for panels to ask.

And some of our other key highlights.....

The service has focused on working with families to support their strengths, manage risks and achieve good outcomes. The Family Focus Team was implemented this year to provide targeted bespoke support to families aimed at preventing the need for a child protection intervention.

Building on what we have learned from previous events, we have run further activity days for children who are looked after together with their social workers. This is because children told us how important it was for them to share experiences with their social workers outside of 'processes' to help develop trusting relationships.

Capacity has been created to address enable support to be provided to refugee children. This year we have received 10 Unaccompanied Asylum Seeking Children into our service and have supported them into suitable placements that meet their cultural and identity needs.

We continue to run a comprehensive training and development programme based on core skills including working with risk and using strengths-based approaches. This year the service went live with a much needed training management system THINQI to support practitioners with their professional development.

Last year we worked with our housing association partners, Pobl, to re-design a supported accommodation option for care leavers and homeless young people that supports progression planning and a pathway to independence. This year we have been able to support several young people to safely leave residential placements via this step-down approach.

With the easement of COVID restrictions, our partnership with Action for Children has gone from strength to strength. The service provides support, fun, leisure and social activities for children and young people with disabilities while parents and carers have a break from caring responsibilities. This reinforces the long term resilience of families to continue to care for children and young people with disabilities and helps contribute to the child's personal and social development, reducing social isolation and preventing family breakdown.

In partnership with health and Action for Children we have developed a 2 bed specialist residential children's home for children with complex disabilities.

While continuing to manage these pressures we have seen the timeliness of some of our key processes remain high, such as: decision on contacts made by the end of the next working day, 97.8%; new assessments completed within statutory timescales, 92.3%; and looked after reviews, 99.0%, completed within statutory timescales.

This year our Children's Service Christmas Wishes appeal raised over £5,200. This enabled the county's most vulnerable children and young people to receive a Christmas gift they would not otherwise receive. With the current Cost of Living Crisis, more and more people will be struggling to provide a Christmas gift for their children this year, which makes this year's appeal even more important.

Our usual Children's Services Christmas party went down a storm, the singing gets better year on year and Rob's quiz really does bring in the crowds. A very special way to end the year and say Thank you for the amazing work each and everyone does across all teams.







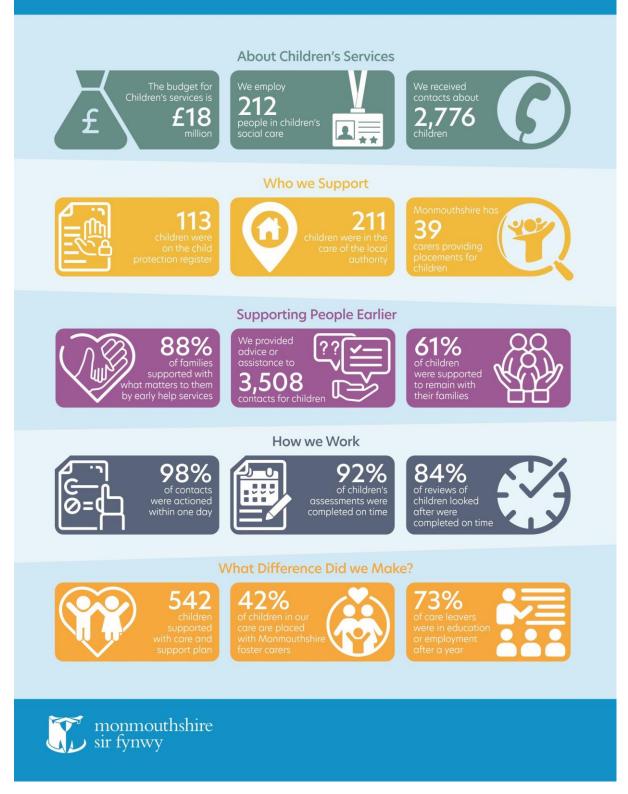






#### How we Performed in Children's Service

### Social Care for Children 2022-23



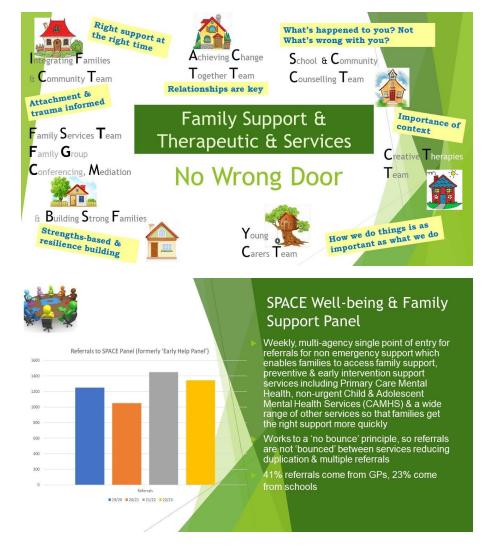
#### Prevention and early intervention

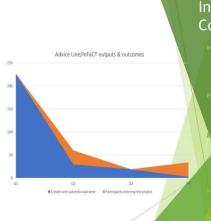
Over recent years Children's Social Services has established a co-ordinated approach to early intervention and prevention providing support to children and families who need it as soon as possible and ensuring that the right help is provided at the right level. Working with families when vulnerabilities first start to emerge allows increased opportunity for families to define their own outcomes. This helps families to achieve and sustain the changes they want to make, addressing problems before they become more entrenched and harder to overcome.

Early help services are the foundation stone for our long term strategy to prevent and reduce the need for children to come into care.

To help support families effectively our multi-agency panel arrangements are well established and provide a co-ordinated approach to referrals. The panels are convened weekly and bring together a wide range of agencies. There is an emphasis on community based services such as School Based Counselling and The Integrated Families and Community Together Team as well as support for particular groups of children such as young carers. Panels also include Primary Care Mental Health and Child & Adolescent Mental Health Services (CAMHS). This ensures there is a clear pathway to accessing emotional and mental health support for young people, and is a process that is well used by GP services in particular.

For more information about community based support in children's services follow the slide show.





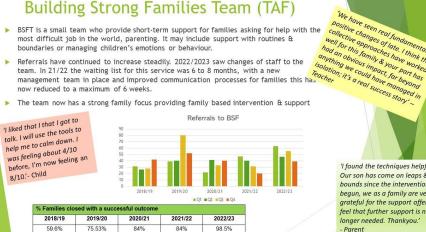
#### Integrating Families and Community Together 'InFaCT'

InFaCT is the new model for delivering and expanding rst point of id half of the

oadens the advice line concept al model to focus support in a m y. This is in line with other initiat th for early years and adult focu CT broa ithin the

Early outcomes for InFaCT have evidenced the service link/signpost parents to opportunities related to the cost of living (e.g. food vouchers, energy benefits, breakfast clubs), and offering short term emotional and service networking support to families until other agencies come on line more formally (e.g. housing).

ext year this work will continue but will also begin de the coproduction of new wellbeing mities between agencies, children and families door adventures and pursuits





We have seen real fundamental We have seen real fundamental positive changes of late 1 think the collective porcessing to think the well for this family & your por the had on obvious import for having the

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feel that further support is no

Our son has come on leaps & bounds since the intervention has begun, we as a family are very grateful for the support offered &

#### School & Community Counselling Team

- Offers 1:1, group & critical incident support to children & young people & teacher & parent consultations to increase impact 'outside' the counselling room
- Works in the 4 comprehensives & has an alternate provision stream (EHE, EOTAS, PRS), community locations & an online/phone therapy offer
- This year the team has broadened expertise in from humanistic/existential counselling to include cognitive behavioural therapy (CBT) & art psychotherapy
- 379 referrals received in 2022/23
  - 169 young people supported with counselling & psychotherapy
  - 1,577 counselling & psychotherapy sessions delivered
  - ▶ Feedback indicates wellbeing improvements from 'moderate' to 'mild/low level' mental health & wellbeing difficulties
  - > 144 young people supported & 798 sessions delivered through the Wellbeing Practitioner team (preventative/early intervention & step-down service)
  - ▶ 80 teaching/other education staff supported in identification & consultation of young people's wellbeing needs.
  - 86 parents were supported in better understanding & supporting young people's done for me' Child wellbeing needs.

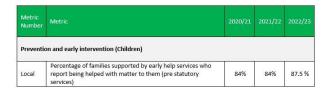


Demand remains high across all early help services and significant effort has been put into reducing waiting times. Volunteers and students are being used to build capacity and resilience, and group work approaches are being used to reach more young people. Through these approaches we have been able to increase capacity and reduce wait times.

School and Community Counselling has made a 50% reduction in waiting lists and Building Stronger Families has reduced the waiting list from 6 to 8 months to 6 weeks.

The current cost of living crisis is tipping more families into fuel and food poverty. Rising housing, food and energy costs has affected all income groups but particularly impacts low income families and the working poor. Continuing to work with others to provide accessible and coordinated early help support to families remains a key strategic aim for the service.

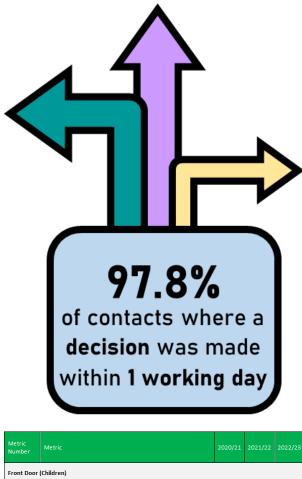
Evaluation and feedback of family support services indicates clear and positive outcomes for families. During 2022/23, out of 80 families, 87.5% reported a positive outcome from the early help intervention.



#### The Front Door

Concerns about the safety or welfare of a child or young person are made via referrals (known as reports or contacts) into the Early Help and Assessment Team. All reports are screened so that appropriate decisions can be made about how to respond to the information. The number of reports received for children not already in receipt of care and support increased slightly during 2022/23 resulting in a sustained high level of demand. The majority of reports were received for police and education colleagues. There has been a similar sustained number of reports received for young carers.

Providing appropriate and timely support to meet demand at the 'front-door' of statutory children's services remains challenging and is a pressure area for the service.



Metric Number	Metric	2020/21	2021/22	2022/23
Front Door	r (Children)			
CH/001	The number of contacts for children received by statutory Social Services during the year	4329	5776	5825
CH/002	The number of contacts for children received by statutory Social Services during the year where advice or assistance was provided	2700	3379	3508
CH/003	The number of contacts received by statutory children's social services during the year where a decision was made by the end of the next working day	3042	5769	5698
Local	The percentage of contacts received by statutory children's social services during the year where a decision was made by the end of the next working day	70.3%	99.9%	97.8%
Front Door	r (Young Carers)			
CA/011	The total number of contacts to statutory social serviced by young carers or professionals contacting the service on their behalf received during the year	143	233	259
CA/012	Of those identified, the number where advice and assistance was provided	61	86	106

A decision on how to progress a report (contact) is expected with 1 working day, and during 2022/23 this happened in 97.8% of reports (contacts).

Within the Early Help and Assessment Team, the safeguarding hub manages the busy day to day process of receiving reports about children and families. The hub supports effective inter-agency liaison to ensure that decisions are based on joined-up information about children and their carers. The hub comprises of social work practitioners who have established, strong networks with schools, health, probation and housing together with a full-time embedded Police Detective Constable to effect timely decision making about undertaking child protection enquiries.

Many reports can be turned around at the front-door of children's services by providing individual information, advice or assistance (IAA) to families. Last year we helped 3,508 families through providing IAA, which represents a slight increase from the previous year. Early help and preventative services are part of the hub arrangements which ensures that when it is safe to do so we have

systems and services in place to support families without the need for statutory social work intervention.

#### Assessments

When it appears that child protection enquiries need to be made or it is evident that further support is needed, an assessment is undertaken. During 2022/23, 907 assessments were completed which is a slight increase on the previous year. The number of children requiring care and support following an assessment remained fairly stable although the complexity of presenting needs remains a cause for concern. Often, following an assessment, needs can be met in other ways, such as referring to our Early Help services or an appropriate external agency. In some cases a decision on the best course of action needs further investigation, for example, where child protection procedures are to be followed.



Assessments are usually expected to conclude within 42 working days and during 2022/23 an increasing percentage (92%) did. To ensure the child's involvement in the assessment process, the child should be seen and was for 98% of assessments.

Metric Number	Metric	2020/21		
Assessments	(Children)			
CH/006	The total number of new assessments completed for children during the year	828	884	907
CH/007	The total number of new assessments completed for children during the year where:			
CH/007a	Needs were only able to be met with a care and support plan	249	264	253
CH/007b	Needs were able to be met by any other means	448	424	493
CH/007c	There were no eligible needs to meet	26	17	16
Local	The percentage of assessments for children completed during the year where there is evidence that the child has been seen		96.9%	98.3%
Local	The percentage of new assessments completed for children during the year that were completed within statutory timescales	87.1%	91.2%	92.3%
Assessments	(Young Carers)			
CA/014	The total number of young carers needs assessments undertaken during the year	36	40	29
CA/015	The total number of young carers needs assessments undertaken during the year where:			
CA/015a	Needs could be met using a young carer's support plan or		18	10
CA/015b	Needs were able to be met by any other means	13	11	11
CA/015c	There were no eligible needs to meet	0	0	1

#### **Care and Support Plans and Reviews**

For children who will need further support from an allocated social worker a care and support plan is developed. At the end of the year, 542 children had a care and support plan which detailed how their support was to be provided. Of these, 51 children had a direct payment, allowing their families to choose how their care and support should be delivered. The number of young carers with a care and support plan which includes support for their caring role is largely stable.

Metric Number	Metric			
Plans (Chilo	iren)			
CH/015a	The number of children with a care and support plan at 31st March	515	518	542
Local	The percentage of children supported to remain living within their family	58.6%	59.8%	61.1%
CH/016	The total number of children with a care and support plan where needs are met through a Direct Payment at 31st March	48	54	51
CA/017b	The number of children or young people with a care and support plan who also have carer responsibilities	22	34	32
Local	The percentage of reviews due during the year that were completed within statutory timescales, which were:			
Local	Child protection reviews	94.2%	96.0%	84.0%
Local	Looked after reviews (including pathway plan reviews and pre-adoption reviews)	99.8%	98.6%	99.0%
Local	reviews of children in need of care and support (including children supported by a direct payment)	67.3%	66.3%	65.4%

Children's care plans should be regularly reviewed according to statutory time frames. The timeliness of reviews for Children Looked After and Child Protection reviews remains high, although the timeliness of reviews for children in need of care and support requires improvement.

#### Supporting children to live safely at home



Working to support children remain safely at home is one of our key goals within the service. This helps us to reduce the numbers of children who need to come into care, and as long as their needs are met, remaining within their own families and communities secures better outcomes for children. Of the children with a care and support plan, 61% are supported to remain at home.

We have a strong family support service offer which underpins this endeavour and allows us to focus on preventing problems from escalating; supporting families to address risk; and increasing family and individual resilience. Our suite of family support services share a common theory base resting on attachment, strengths based, trauma informed and developmental approaches so parents experience a coherent approach across the service.

Our services include:

- Tailored parenting support and therapeutic parenting
- Helping young people develop strategies to keep safe from exploitation and harm
- Services aimed at facilitating long-term sustainable change for families with complex challenges
- Support for families impacted by domestic abuse or family conflict
- Family Group Conferencing and family mediation
- Counselling and therapeutic support for children
- Services aimed at re-uniting and strengthening families when children have previously been looked after
- Life-story work for children who have been in care and adopted children.

This year Family Mediation received 31 new referrals. In every case that was closed this year, all children remained at home or with family and 83% families reported they were taking forward the advice or had seen improvements in their family relationships.

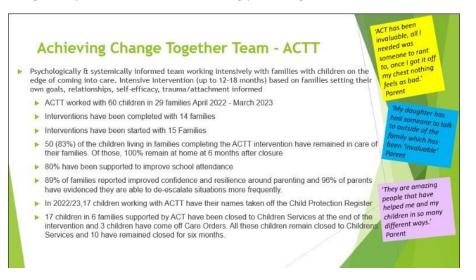
Family Group Conferencing	2019/20	2020/21	2021/22	2022/23	showed the support & understanding the
Referrals	69	112	140	116	family which
FGCs	52	42	21	45	supported me to
Review FGCs	19	32	40	43	make the decision
Family Meetings	Not recorded	23	46	47	that the children
FGCs resulting in a positive family plan	58	78	69	89	could return home' -
<ul> <li>Referrals to the FGC service have de and family meetings has increased. with 86% reporting a positive outcon</li> <li>Mediation has taken 31 new referral either remained at home or with win</li> </ul>	Out of the tota nes.	al 116 referral	s 92 FGC/Fam	ly Meetings we	ere held,
and family meetings has increased. with 86% reporting a positive outcom	Out of the tota nes.	al 116 referral	s 92 FGC/Fam	ly Meetings we Il cases at clo king forward n 23 there has b	ere held,

An area we focused on this last year was the development of our 'Family Focus' team. This team sits within the Early Help and Assessment Team and provides an intensive 12 week programme of intervention following an assessment or child protection enquiry, where it is indicated that this might help the family to 'turn around' rather than enter further into the child protection process. We were able to develop the service by realigning some of the roles within the team so that dedicated family support worker time could be made available. The results over the year have been positive, and has shown that a deeper and focused engagement with families at this early stage of statutory support can reduce the need for on-going intervention.

Of the 194 families that Family Focus worked with, following the intervention 109 were closed to the service and 56 transferred for longer term intervention.

Our most intensive interventions are provided through Achieving Change Together and MyST (My Support Team).

Achieving Change Together team works with children who are on the edge of coming into care and provides an intensive intervention (up to 12-18 months) aimed at supporting families to make sustainable change and provide a safe and nurturing parenting environment for their children.



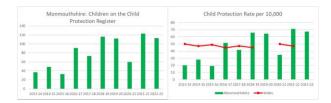
MyST (My Support Team) is a multi-disciplinary team that provides 24 hour attachment and trauma based support to young people and carers in a way that allows a child to learn and develop through a dynamic approach to risk. It is a long-term intervention in place or some of our most vulnerable and complex children. MyST provides individual consultations to help carers and teams understand and care for children who have disrupted attachment and have experienced trauma through adversity, abuse or neglect. This year MyST has supported 4 extremely troubled children remain at home and has prevented placement breakdowns for 14 children through intensive therapeutic intervention.

#### Safeguarding

When children are living at home and are at risk of serious harm the children's names are entered onto the Child Protection Register and a Care, Support and Protection Plan is developed. A multiagency core group is established to implement the plan and monitor the welfare of the children. The purpose of the plan is to reduce the risk of significant harm so that families can safely stay together.

As at the end of the year there were 113 children on the child protection register, a slight decrease since the end of 2021/22.

The rate of 67 children on the child protection register per 10,000 child population in Monmouthshire, exceeds the most recently published Welsh rate from 2021/22. In part this is as a result of the length of time that we stay under a child protection framework, rather than looking to deregister at the earliest opportunity. While the number of children on child protection plans fluctuates, the critical issue is that the right children are registered and remain subject to child protection core groups and planning for the right length of time.



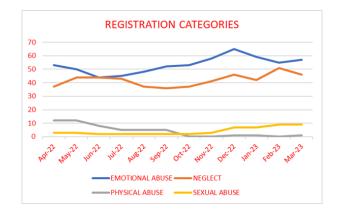
This year saw a slight decrease in volume of required initial conferences so consequently the overall number of children registered.

Following registration at initial conference, an initial core group should take place in 10 working days and did in 87% of cases. Positively, the percentage of initial child protection conferences completed on time also increased.

The timeliness of some child protection processes, such as review conferences and child protection statutory visits, has decreased during the year. Timeliness of reviews of children on the Child Protection Register has decreased this year, in part to ensure the correct people were able to attend conference and that the conference panel was able to consider all views thoroughly. The accurate recording of child protection visits is a focus for 2023/24.

Metric Number	Metric	2020/21		
Safeguardi	ing Children			
CH/022	The total number of Section 47 enquiries completed during the year that progressed to Initial Child Protection Conference	113	176	145
Local	The percentage of initial child protection conferences held during the collection year that were held within statutory timescales	42.6%	23.6%	79.3%
CH/027	The total number of initial core group meetings held during the year	78	131	127
CH/028	The total number of initial core group meetings held during the year that were held within statutory timescales	72	120	112
Local	The percentage of initial core group meetings due during the year that were held within statutory timescales	66.7%	76.4%	86.8%
CH/029	The total number of visits to children placed on the child protection register that were due during the year	2115	2161	2566
Local	The percentage of visits to children placed on the child protection register that were due during the year that were completed	12	2	65.0%
Local	The percentage of visits to children placed on the child protection register that were due during the year that were completed within approved timescales	66.6%	58.1%	37.5%
Local	The percentage of children removed (de-registered) from the child protection register during the year who later became looked after	27.3%	18.7%	26.1%

Measure	2018/19 Actual	2019/20 Actual	2020/21 Actual	2021/22 Actual	2022/23 Actual
Number of Children on the Child Protection Register	116	112	60	123	113
The percentage of re-registrations of children on local authority Child Protection Registers (CPR)	3.5%	2.4%	5.6%	0.6%	4.7%
Numerator: Number of re-registrations of children on the CPR during the year	6	3	6	1	6
Denominator: Total number of registrations on CPR during the year	172	126	108	157	129
The average length of time for all children who were on the CPR during the year	260	270	302	215	263
Numerator: The total number of days each child had been on the CPR if they were removed from the CPR during the year	33,794	35,046	49,872	19,537	37,348
Denominator: Number of children who were removed from the CPR during the year	130	130	165	91	142

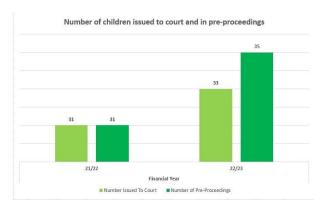


Neglect and Emotional Abuse remain the largest categories of registration for children in Monmouthshire. This slide shows the registration picture over the last 6 months.

The core purpose of a care, support and protection plan is to work with children, parents, carers and wider professionals to reduce risk and the likelihood of significant harm. The focus remains on prevention and on diverting children away from the need for court proceedings. For children where concerns remain high, the service will initiate a pre-proceedings framework where additional intensity of oversight and support is implemented. We use services, such as Achieving Change Together, to help us manage risk. Although it is not always successful, using the pre-proceedings framework represents an intensive, time-limited endeavour to support parents make the changes they need to.

The Family Support and Protection team is the central point within the service to hold and manage cases for children on the child protection register or in care proceedings. Last year we strengthened the leadership structure within the team and re-focused our attention on supporting practice in this area. Whilst this has resulted in positive benefit, child protection work remains our most pressured part of the service for recruiting and retaining qualified and experienced social workers.

There has been in an increase in the number of children removed from the register this year, 142 in total, of which 26% went on to be looked after. This means that in 74% of cases children's names were removed from the child protection register because the risk of harm had been reduced.



Although this year 2 more children entered a formal legal process than last year, 35 children were held within a pre-proceedings framework.

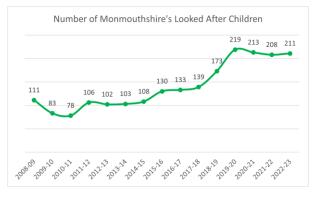
Even when we enter care proceedings our aim remains to find good family based permanent placements without the need for a care order.

#### Children who are Looked After

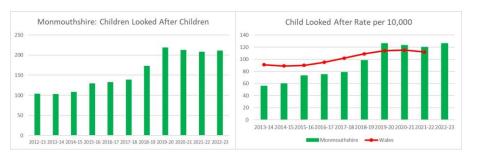
When it is not in a child's best interests to remain living at home, the Local Authority is under a duty to provide them with a looked after child placement. At year end Monmouthshire was supporting 211 children looked after. The number rose sharply in previous years but has recently stabilised as we have continued to embed preventative family support services including those focused on safe rehabilitation. In 2021 - 2022 the rate of children looked after in Monmouthshire remained higher than the average rate of children who are looked after across Wales, and is likely that this will be the case for 2022 - 2023.

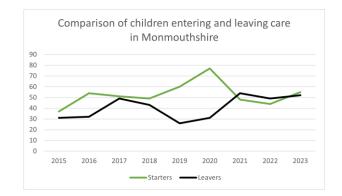
Measure	2018/1 9	2019/2 0	2020/2 1	2021/2 2	2022/23
INCOSULC	Actual	Actual	Actual	Actual	Actual
Number of Looked After Children	173	219	213	208	211
Number of Children Adopted in the Year	3	1	1	9	10
Number of Children Leaving Care with Special Guardianship Orders in the Year	2	8	11	13	9
Percentage of Looked After Children placed with MCC generic/kinship foster carers	37.6%	36.1%	41.3%	41.3%	42.2%
Number of Generic Foster Carers	26	34	38	40	39
The percentage of looked after children who have experienced 1 or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March	5.3%	12.7%	10.9%	5.4%	10.1%
Numerator: The number of children of compulsary school age looked after <u>at</u> 31 March who have <u>had one</u> or more changes of school, which were not due to transitional arrangements	6	18	15	8	17
Denominator: The number of children of compulsory school age looked after <u>at</u> 31 March	114	142	138	147	169
The percentage of looked after children on 31 March who have had three or more placements during the year	6.9%	7.3%	4.2%	6.7%	7.6%
Numerator: The number of children looked after <u>at</u> 31 March who had three or more separate placements during the year	12	16	9	14	16
Denominator: The total number of children who were looked after <u>at</u> 31 March	173	219	213	208	211

Our year end figure this year showed a slight increase in the number of children who are looked after from 208 to 211. However, the figure of 211 includes 10 Unaccompanied Asylum Seeking Children (UASC) whilst last year's figure of 208 included 2 UASC. This means that our underlying figure of Monmouthshire children who are looked after continues to decrease (from 206 to 201).



1 - Number of looked after children in Monmouthshire over the years.





During the year 55 children entered care and 52 ceased being looked after.

10 of the 55 children entering care this year were Unaccompanied Asylum-Seeking Children (UASC).

Monmouthshire has a history of supporting young people who arrive spontaneously in the Local Authority area fleeing oppression, exploitation, or war due to our border placement on the M4. During 2022 the Home Office placed a requirement on all Local Authorities to accommodate and offer care and support for Unaccompanied Asylum Seeking Children and Young People allocated via the National Transfer Scheme.

During the year 2022 - 2023:

- 10 Unaccompanied Young People seeking Asylum became Looked After in Monmouthshire;
- 7 of these young people were referred by the Home Office National Transfer Scheme;
- 3 young people arrived spontaneously arrived
- All are currently aged between 16 -17 yrs and 9 are male;
- Only 3 young people reside in Monmouthshire the others are in out of county placements.

Currently, children's services does not have sufficient culturally suitable accommodation to provide placements for all of our asylum seeking young people. We are working closely with the Gwent based strategic group, and regional leads to develop our response and have a designated worker within the Long Term Support team to enable access to appropriate services and advocacy as needed. Developing appropriate placements and services for UASC will be a priority area for the coming year.

Looked after children benefit from stability and, where possible, placement and school moves are minimised. The number of children experiencing school moves and the number of children experiencing three or more placements in the year have both increased. In some cases this is a consequence of difficulties in the availability of suitable foster placements.

Metric Number	Metric			
	ooked After and Care Leavers			
Children I	ooked After			
CH/043	The total number of children looked after at 31 March who have experienced three or more placements during the year	9	14	16
СН/044	The total number of children looked after on the 31 March who have experienced one or more changes of school during the year (excluding transitional arrangements, moves associated with adoption or moves home)	15	8	17

### **Involving Children in their Care**

The Children's Services Independent Reviewing Officer (IRO) is critical in terms of helping children and young people participate in their Children Looked After Reviews. The small size of the authority enables our IRO service to develop individual relationships with children which is helpful in encouraging them to express their wishes and feelings.

It is an expectation that proper consideration is given to all children over the age of 8 as to whether they should attend their child looked after review, or at least part of it. Above the age of 11, it is an expectation that children will always be invited.

Between April 2022 to September 2022, 108 children were invited to attend their reviews and 96 (89%) attended.

Between October 2022 to March 2023, 124 children were invited to attend their reviews and 99 (80%) attended.

Overall, the number of children who attend when they are invited is consistently positive, and is something we need to maintain.

The IRO also encourages parents to attend children looked after reviews. Attendance of parents at reviews is important in order to ensure that all parties have the opportunity to contribute to the review process. Attendance of parents is consistently high at between 80% - 90%.

To ensure that children's voices are heard we commission the National Youth Advocacy Service (NYAS), as part of our regional arrangements. NYAS is commissioned on a Gwent wide basis to provide advocacy for children and young people.

Over the year there were a total of 210 referrals into service. This comprised of 112 Issue Based Advocacy (IBA) and 98 Welsh Active Offer (WAO) referrals. Although the number of referrals has decreased 7% for WAOs and 18% for IBAs since 2021-2022, this still represents an increasing trend over the past 4 years. Overall the Monmouthshire referral numbers are currently higher than the Pan Gwent contract expectation, with Issue Based Advocacy considerably higher than anticipated within the contract.

The most popular reason why young people requested advocacy support this year continues to be presenting their views and feelings at formal meetings. 67% of the issues identified fall into this category. 10% of issues were around young people requesting advocacy for issues to with their 'contact' arrangements with family members; 6% were issues around access to services, including education and 8% were home/placement related issues. It is also notable that requests for advocacy are lower for children who are looked after than they are for children who are involved in the child protection process or on care and support plans. Areas for improvement this year include continuing to ensure the implementation of the active offer and to ensure that advocacy resources are in place and accessed by unaccompanied asylum seeking children and young people.

#### **Supporting Children to Leave Care Safely**

The following table shows the number of children and young people ceasing to be looked after between 1st April - 31st March each year during the period 2013 to 2023 and reasons for ceasing using Stats Wales categorisations. Only 8 children this year left care by virtue of the fact that they turned 18.

When children come into care there continues to be proactive care and permanency planning to ensure that children remain looked after only for as long as is required to support their individual outcomes; and that where possible and appropriate they have a pathway out of care.

2013/14 2014/15 2016/17 2017/18 2018/19 2019/20 Leave Reasons 2015/16 2020/21 2021/22 2022/23 When I'm Ready dopted Care taken over by another LA in the Uk teturned home to ve with parents SGO з Aoved into ndependent living Transferred to adult social services Ceased for other ason entenced to ustody **Iotal** 

As well as the work that we do regarding preventing the need for children being looked after, progressing children once they are in care is an equally important aspect of our reduction strategy.

Monmouthshire Families Together Team (MFT) is a partnership between Barnardos and the Local Authority. It is 3 years since the team was established and it is now an integral part of Family Support Services. The core purpose of the team is to support the discharge of care orders for children who are looked after through a focus on working with children who are 'placed' at home with their parents (PWP) and by increasing permanency in family arrangements through a focus on kinship care and Special Guardianship.

Where Care Orders are in place for children living with their parents or with wider family members (kinship care), the Families Together Team provides intensive, targeted, interventions in an effort to develop parenting capacity to a level that ensures risks are managed and the child's needs can be safely met independent of statutory services.



In the year 2022 - 2023, 20 children's Care Orders have been discharged. 8 Care Orders were replaced with Special Guardianship Orders and 12 Care Orders were discharged for children placed with parents including 3 that were agreed as the outcome of the ongoing care proceedings.

Converting Care Orders to Special Guardianship arrangements is part of our strategy to ensure that children are in the right permanent placement for them, and where possible to reduce the numbers

of children in care. We support carers through undertaking special guardianship assessments, and where required develop a special guardianship support plan, sometimes including life-story work for the child. We review all our special guardianship arrangements on an annual basis, and keep in touch with carers through training, newsletters, and support groups.



2 - During the year, 9 special guardianship orders were granted.

Families Together has developed a strong active offer of support to include financial support, therapeutic support, mediation, family group conferencing, information advice and assistance, training and peer support.

As of the 31st March 2023 there were 107 children and young people under an SGO known to Monmouthshire (equating to 84 placements).

Our recent positive outcomes for children whose permanency plan was adoption has continued this year. It can often be challenging to find the right adoptive placement for a child. We work with the South East Wales Adoption Service (SEWAS) and in partnership with Voluntary Adoption Agencies to secure suitable placements and provide support to new parents.



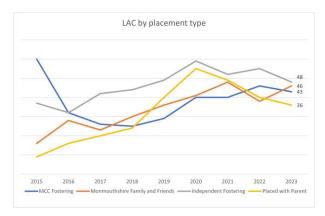
3 - During the year, 10 adoption orders were granted

A particular strength in Monmouthshire is the quality of our life story work that we undertake for children who are on an adoption pathway. Life-story books that are carefully put together by our family support workers help children understand their circumstances and history and are an important part of supporting a positive sense of identify. Monmouthshire books have been described by the regional lead as "exceptional" and are being used in their training as examples of "model" books.

#### Placements for children who are looked after

When a child comes into care we always explore family options first. If a family option is not found, children are placed with Monmouthshire in-house Foster Carers unless it is identified that the

assessed needs of the child cannot be met from this provision. This will be either because there are no vacancies or because there are no in-house foster placements that can match the child's needs. In these situations we look to Independent Fostering Agencies (IFA), or residential provision, again depending on the needs of the child.



4 - Number of children looked after by placement type.



5 - The number of residential placements at year end was 19.

Our year end data tells us that:

- Although the ratio of independent foster carers to in-house carers remains narrower than in previous years and the overall use of independent carers is reducing, at least 35 more in-house carers are required to move to a predominantly 'in-house' service.
- 23% live with kinship carers, 23% with IFA carers, 20% with MCC carers, 17% with parents, 9% in residential care and 8% in other types of care
- Foster carers are aged between 33-76, 66% are over 50
- 33% of foster carers live around Abergavenny, 21% in Caldicot, 26% in Monmouth, 15% in Chepstow & 5% in Usk
- The work of Monmouthshire Families Together team continues to support a reduction in children on care orders placed at home with their parents.
- We have a relatively high number of kinship foster carers, and are working hard to ensure that they receive the right type and level of support which can often be quite different from 'generic' cares. Kinship Foster Carers play a significant role in providing placements for children and allowing them to remain safely within their family networks and are greatly valued by the service.

- The use of residential placements for children is higher than we would want it to be, with some residential placements being used because of lack of availability of a suitable foster placement.
- Normally speaking it is children with the most complex needs who enter residential care. Sometimes the only placement option available for a child will be out of area, making it harder to support good outcomes.
- The cost of residential placements is extremely high, and represents a significant pressure on the children's services budget

#### PLACEMENT SUFFICIENCY

The Local Authority has a duty to provide sufficient suitable placements for children who are looked after.

Placements should provide a warm and nurturing environment for children and ensure that the child's holistic emotional and physical needs are fully met. We aim to find placements for children that are close to home, school, family and friends to allow essential links and support networks to be maintained.

The lack of placement sufficiency has been an issue of national concern; at a UK level there is simply not enough placements for children who need to be looked after.

Challenges in recruiting foster carers, whilst experienced across the UK, are acutely felt in Monmouthshire in large part due to specific demographic reasons. While Monmouthshire has a solid cohort of stable long-term foster carers, recruitment of new carers seems to be stagnant with number remaining very similar in recent years and even decreasing slightly between 2021/22 and 2022/23. We are particularly short of carers who are able to look after sibling groups, teenagers and unaccompanied asylum seeking children or provide mother and baby placements.

Over the last year, insufficiency of placements has been further exacerbated by increased instability in the provider market for both residential and foster placements following the Welsh Government commitment to eliminate profit from children's social care.

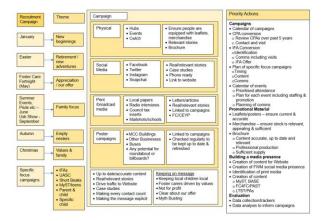
The reality of this is that for some children, particularly those with the most complex needs, it can be extremely difficult to find any placement at all. Frequently, there is little to no choice of placement, which can affect matching decisions. There have been 5 occasions this year when the Local Authority has been required to look after a child without the benefit of a registered placement. This is of extreme concern to the service and presents significant operational, legal and financial risks to the Council.

We are taking steps to address the issue of placement sufficiency in the following ways:

- Working in partnership with Foster Wales the service runs recruitment campaigns throughout the year and works proactively to follow up on any inquiry and keep fostering high in people's awareness.
- We ensure that each child in a residential placement has an appropriate progression plan to return to family based or supported living whenever possible so that there is flow through provision.

- Working with housing colleagues we have increased our supported accommodation provision for children who are 16 plus, though move-on into full independence is hampered by the lack of affordable housing.
- This year we have worked in partnership to develop our own local residential provision with the potential to accommodate 4 children with highly specialist needs, and worked with regional partners within Gwent to set up an integrated provision with health to provide short-term assessment placements.

This year our focus will be the further implementation of our commissioning strategy with the intention of creating further in-house residential placements through making use of existing council properties and utilising any available Welsh Government grant money to support our move to a not-for profit placement base. At the same time we will continue our work to recruit carers as well as further enhancing our family support services to reduce the overall numbers of children in care.



6 - The service has a sophisticated recruitment strategy that runs throughout the year and makes use of a variety of methods.

Monmouthshire Foster Carers are a highly dedicated and skilled group of people, who are at the very heart of our services for children who are looked after. Foster carers provide stability, nurture, care and support to some of our most vulnerable children and deserve the highest praise. Placing a child in an in-house foster placement allows us to provide the most appropriate holistic support for the child and the carers, drawing on the range of therapeutic and professional support that we have available as part of our 'offer' to Monmouthshire carers.

Following feedback from carers we are looking at ways of improving communication between carers and the children's social work teams. As the people who know and understand a child's day to day needs the best, we want to increase the involvement of carers as critical partners in key decision making and care planning for children.

Whilst our retention of foster carers is generally good we continue to look at how we can improve our offer in terms of benefits/support to foster carers. This helps both attract and retain carers. This year we will be seeking to provide some additional enhancements for in-house carers through becoming a 'foster-friendly' employer.



7 - Our foster carer appreciation event this year was held in the majestic Caldicot Castle in June 2023.



The Placement and Support Team work incredibly hard to recruit, assess and support foster carers. They work closely with carers to support applicants through a challenging assessment process; understand their development and training needs and provide carers with personalised supervision and support. Overall, the number of in-house foster carers has increased over the last 4 years from 24 to 40.



YOUNG PEOPLE LEAVING CARE

Care leavers are supported by personal advisors to make the transition into adulthood and independence. The Local Authority has a duty to support young people leaving care until they are 25 and a young person can reconnect and ask for support at any time up until then. We have 3 personal advisors situated within the Long Term Support team and at year end there were 73 young people who were care leavers.

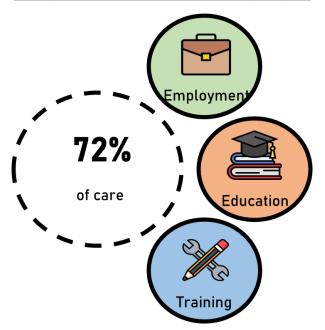
We are really positive about the achievements or our young people leaving care in Monmouthshire, who have often had to overcome considerable adversity.

We continue to have many Young People who:

- Manage full time employment or who are enrolled into further education studying a range of course, including university degrees.
- Move successfully into independent housing tenancies
- Pass their driving tests
- Become successful young parents themselves providing safe and secure environments for their children
- Budget and save for things such as holidays abroad or their first car
- Successfully reconnect to family and reestablish positive relationships.

One year after leaving care 72% of care leavers were in employment, education or training, and this remains very similar for care leavers 2 years after leaving care.

Metric Number	Metric						
Care Leavers							
CH/052	The total number of care leavers who experience homelessness during the year (As defined by the Housing (Wales) Act 2014) within 12 months of leaving care	4	4	5			
СН/053	The total number of <u>care</u> experienced young people in the following categories at the 31 March	64	60	73			
Local	The percentage of care leavers in categories 2, 3 and 4 who have completed at least 3 consecutive months of employment, education or training in the 12 months since leaving care		73.3%	72.7%			
Local	The percentage of care leavers in categories 2, 3 and 4 who have completed at least 3 consecutive months of employment, education or training in the 13-24 months since leaving care		25.0%	71.4%			



### **Corporate Parenting**

There is an active corporate parenting panel in Monmouthshire with representatives from across the council's directorates, care leavers, foster carers, as well as cross-party elected members. The panel is now chaired by ClIr Ian Chandler, lead member for social care and health. The panel offers members opportunities to hear directly about the experiences of children who are looked after, care experienced young people and foster carers. Issues that are raised include loneliness and isolation; the impact of COVID; the difficult experiences some young people have in care; challenges around move on accommodation and securing employment opportunities. Meeting with and listening to young people helps the panel champion many of the issues that are raised by the group as being important to them.

Some of these have included:

- changing language used within the council about children who are looked after
- developing activity days for children looked after so that they can develop more trusting relationships with their social workers
- ensuring priority interviews for care leavers apply for jobs in the Council
- arranging leisure passes.

The revised <u>Corporate Parenting Strategy (2022 - 2025)</u> was approved by Council in May 2023.

#### 4. Adult Services

Adult Social Care and Health services in Monmouthshire support people to live their own lives as independently as possible. Key to this is the ability to understand what matters to people and to identify the right support required to find solutions to the issues they face. The services are wide ranging and varied, but share a common purpose to 'support people to live their own best lives' as defined by what matters to them as individuals. This is a holistic, value based approach aligned with the principles of the SSWBA.

Adult Social Care and Health is available to people aged 18+ with eligibility being determined by a social care assessment under the SSWBA. Referrals come from a range of sources including hospitals, GP's, Police, families, carers and of course the person themselves.

The provision of Adult Social Care in Monmouthshire is organised around three integrated hubs (north, south and central). Each hub has a single management structure that brings together a range of health and social care practitioners. This integrated structure is fairly unique in Wales and was put in place to support multi-disciplinary working and information sharing, and to help citizens (and staff) navigate what can often seem like a complex and confusing system.



#### 8 - Chepstow Community Hospital opened in 2000 having been developed under the Government's Private Finance Initiative.

Chepstow Hospital is the base for the integrated Health and Social Care Team which serves the south of the county including Caldicot. It is a 47 bed community hospital which additionally houses two GP practices (Mount Pleasant and Town Gate Surgeries). With primary, secondary health services and social care contained in the same building joined up and multi-disciplinary service provision to residents is fostered.



Monowvale Health and Social Care Centre

Monowvale is an integrated health and social care facility situated in Monmouth. As well as the community based teams, a memory clinic, rehabilitation and therapy clinics there is a 19 bed community hospital ward on site which is GP led and has 2 direct community access beds.



### Mardy Park Resource Centre

Mardy Park Resource Centre in Abergavenny includes a social care respite and rehabilitation unit, as well as a range of health and social care clinics and support activities.

Mardy Park is a hub that welcomes people of all ages and hosts Growing Spaces and Bluebell Forest School in its grounds.



Alongside of the integrated hubs there is a community based mental health team and a specialist learning disability team working across the county.

The provision of direct services is organised through our commissioning team who work closely with the sector to ensure that support services including domiciliary and residential care are available to people who need them.

Adult social care also supports some in-house direct care services including:

- Learning disability support services including day opportunities
- Severn View residential home for people with dementia
- Monmouthshire Meals
- Support for people who have caring responsibilities
- Respite and rehabilitation centre in Mardy Park.
- Reablement services and home care.

# **Current Challenges Within Adult Social Care**

This year the sustainability of adult social care has been seriously called into question. Although in Monmouthshire we have remained steadfast in our commitment to developing community based early help, the demand for statutory care and support continues to rise to the extent that it is both outstripping our ability to meet demand and exerting considerable pressure on our financial resources.

During 2021/22 we saw increased demand for services and this has been sustained during 2022/23. The number of reports to social care and the number of assessments completed has remained high during 2022/23 at 8,806 and 2,205 respectively.

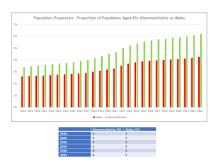
At year end 2022 - 2023 adult services had a relatively slight £367,000 overspend; however, this was bolstered by a number of grants totalling over £3 million. Added to this, at year end 2022 - 2023, there was an additional £3 million estimated projected costs for 2023 - 2024 due to inflationary pressures on the cost of care provision.

The ageing demographic together with the on-going impact of the COVID pandemic and other respiratory viruses has caused demand for services within adult care to remain on an upward trajectory over the year with increased waiting lists for social work and occupational therapy. Winter saw additional pressures on hospitals and the need to support timely hospital discharge has resulted in a number of costly packages of care and an increase in care home placements.

There is a demographic reality to this pressure.



9 - Population projections show Monmouthshire can expect the proportion of residents **aged 65** and over to increase to 33.6% by 2043. This is compared to 25.7% across Wales.



10 - Projections also show that 6.2% of the population will be aged 85 and over by 2043 compared to 4.3% across Wales.

Census data tells us that the age demographic in Monmouthshire is increasing i.e. overall the population within the County is ageing, as illustrated by the graphs.

In headline terms the 2021 census data shows that:

- The largest age group in Monmouthshire (and Wales) was those aged 55 to 59 years
- 25.8% of Monmouthshire's population was aged 65+ (24,000), higher than Welsh average (21.3%)

• In Monmouthshire, the total number of people aged 65 years and over increased by 26% between 2011 and 2021, the highest increase of all the Welsh local authorities. This compares with a 17.7% rise across Wales.

The older people are, the more likely they are to have complex care and support needs due to frailty, illness, dementia, disability and isolation.

The impact of Covid together with other acute respiratory illnesses and co-morbidities continue to generate powerful demand pressures across the system, particularly on our most vulnerable and frail residents and their carers. Increased admissions into hospital and subsequent delays in people's treatment and discharge pathways make it harder for people to get 'back on their feet' following long-stays, when lengthy periods of reduced mobility and loss of independence serve to lower confidence levels and increase physical frailty. In turn, the complexity and immediacy of people's needs when leaving hospital and the urgency generated by the need for hospital beds diverts our resources and creates increased 'unmet need' within the community.

Whilst increased pressures are felt more acutely during the winter months it is now generally accepted that building 'system resilience' requires a year-round approach.

The fact that growth in demand is not aligned to a similar growth in the workforce contributes further to the overall challenge within adult social care. This is in part associated with the limitation of our resources and in part to do with on-going significant recruitment and retention challenges across the sector, specifically in key posts including adult mental health, occupational therapy and direct care.

It is disappointing but unsurprising that in the context of increasing demand and a depleted workforce we are experiencing delays in provision. In many instances this has created situations where we have struggled to meet the care and support needs of our residents and where 'voice, choice and control' for some of our most vulnerable individuals and their families has been compromised.

All of this impacts on our ability to fully respond to people's needs in as timely a way as we would wish, which over time both exacerbates demand and has a demoralising effect on the workforce.

In the face of this financial and demand pressure the service has entered into a process of in-depth examination in order to identify where and how we must effect change in order to get ourselves onto a more sustainable footing. To achieve this without undermining our core practice values, of providing person-centred and outcome focused services, presents considerable challenges. Throughout the budget setting process this year, we have been clear in our intent to achieve sustainable change which is embedded within practice and rooted in concepts of fairness, consistency and equity.

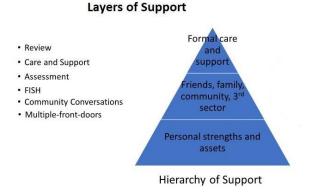
Ensuring our preparedness to deliver against substantial saving targets in the face of on-going demand pressures is very much a work in progress and will remain a top priority of the service over the next year and beyond. It is a process of learning, review and redesign and represents both threats and opportunities to the service, the council as a whole and most importantly to the citizens of Monmouthshire.

Here are some of our key areas of work to date:

• Assessing and Providing Services

The impact of the pandemic, and the surge of demand that followed, has had a lasting effect on the service and social care practice. In the face of this, we are putting in place steps to foster a renewed focus on practice as it was originally envisaged within the SSWBA. That is, practice that is strengths-based and seeks to build on personal resources and assets including what is available within families and communities. Individual, family and community resilience is more valuable and certainly more sustainable than statutory support.

To ensure fairness and equity we are working to put in place quality assurance measures that are shared across the service, allowing new packages of care and existing packages of care to be reviewed and understood through a consistent practice lens. In turn this builds further knowledge within the system (where services need to be better designed or developed, for example).



11 - We are looking at how we assess and intervene to meet peoples needs using the hierarchy of support

#### • Focus on enabling approaches across the system

To enable people to retain as much independence as possible, and to delay and reduce the need for long-term care, we want to ensure that there are sufficient and appropriate services in place. The focus of a reablement intervention can be as much social and psychological as a physical one and is a unique function of the council. Reablement can be of enormous benefit to individuals allowing them to remain safely and independently within their own homes and communities.

For us, this year, our priority will be to ensure that people who need support have access to our Occupational Therapy lead reablement services prior to any longer-term decisions being made and to increase the range of options available including solutions within assistive technology.

Reablement also underpins our ability to work with partners to develop services and practice approaches aimed at preventing unnecessary hospital admissions. Equally when people are in hospital a reablement approach ensures that the emphasis remains on maximising independence throughout their in-patient stay and supports integrated discharge planning.

## • Supporting a stable and fair social care provider base

The commissioning team within social care have good knowledge and understanding of social care providers across Monmouthshire, and use a relationship based approach to foster honesty, openness and transparency. The COVID pandemic placed many restrictions on care providers; however, over the last year we have seen providers able to absorb an increased amount of care hours and provide more care home placements. This increase, in the context of the inflationary pressure across many aspects of care provision, means that the cost of care is escalating. This year we are entering into negotiations with care providers to ensure best value for the council, using open discussions to see where costs can be curtailed without impacting on the viability of providers; pay and conditions for

social care workers; or the choice and quality of care for residents. These reasons effect the extent to which these negotiations will be able to alleviate the current financial pressure on the service arising from the cost of care.

# **Adult Services Inspection**

As referenced in last year's report, Care Inspectorate Wales undertook a Performance Evaluation Inspection of Monmouthshire Adults Services in July 2022. The purpose of the inspection was to review the local authority's performance in exercising its social services duties and functions in line with legislation and its alignment with the principles of the SSWBA. There was a particular focus on adult safeguarding and whether people and their carers are able to access appropriate and timely care and support.

Overall, we felt that the report was fair and balanced, took good account of the challenging context we are working in and identified areas for improvement that we agreed with.

In summary, the inspection report concluded,

"In common with many other local authorities in Wales, MCC is experiencing a challenging time in relation to the provision of social care. Many of the pressures currently experienced by the local authority's adult services reflect the national pandemic recovery context including high levels of demand and increased complexity of people's needs."

"We heard how staff morale was generally positive, managers were well regarded by staff, and managers in turn commented they have a committed and dedicated workforce. Workers valued the accessibility of managers and peer support from team members."

"During this inspection we found progress has been made in several areas. This has resulted in developments to practice and better outcomes for people. This progress has been achieved against a backdrop of the additional pressures and challenges of the COVID-19 pandemic."

The full report can be viewed here.

Identified strengths and areas for improvement included:

## Strengths

- People's voices are heard and people are supported to achieve their personal outcomes
- Strong strategic focus on prevention aligned to place-based working
- Effective partnership working
- Working in accordance with the Mental Capacity Act (2005)
- Flexible integrated teams, where different professionals work together, to provide tailored support
- Proactive monitoring and managing of waiting lists
- Effective and timely adult safeguarding

## Areas for Improvement

- Shortages of Domiciliary Care
- Pressure on partnership work at critical points, e.g. hospital discharge

- Maintaining a sufficient and suitably qualified workforce to meet increasing demand
- Gaps and inconsistencies in practice particularly around the identification of risk, contingency planning and timeliness of reviews
- Quality of assessments, and consideration of eligibility criteria
- Quality assurance process and management oversight
- Consistency of the Welsh active offer and the offer of advocacy
- Recognising and responding to needs of carers
- Role of commissioning in brokerage

The service has a robust action plan in place and has made good progress in working to address the recommendations made. We are confident in our ability to deliver the plan in the agreed timescales.

Areas where we have made progress this year include:

#### Implementation of a new supervision policy

We have implemented a new supervision policy across the service. This is helping to improve management oversight and supports the development of individual and team practice as well as assisting with workforce planning.

## System Development

We have agreed a specification and implementation plan for system development of our current Social Care Recording system (Flo). This is essential development that will allow evidenced decision making, recording of risk and management sign-off more effective. It will improve our reporting functionality particularly in relation to the active offer of advocacy and carers support. We are fully engaged with both the Gwent and national programme to ensure that we are part of the next phase in procuring an integrated Health and Social care recording system for Wales.

## **Learning and Development Plans**

The workforce development team and direct services have been working closely together to evaluate and re-design learning and development plans to ensure that these align with the skills required of our workforce and meet individual learning gaps and objectives. The induction programme for domiciliary care has been totally re-designed and we are looking to expand this across other areas due to its success. This year we have implemented, alongside our corporate colleagues, a training recording system which will improve our data recording and oversight of all training (Thinqi). We will continue to grow this approach as we progress through the next year and beyond to ensure all learning and development on offer meets the needs of the services in relation to skills, knowledge and expertise. The platform supports workforce retention and the workforce planning required for both in-house and commissioned services.

## Micro care

This year was saw the development and implementation of a micro care platform in the County. The number of micro carers operating in Monmouthshire steadily gained momentum providing alternative employment options in care and supporting choice and capacity within the provision of care. Our development and delivery plan will continue over the next few years and this includes the development of a micro care portal that will ease the admin duties as the service grows.

## Advocacy

Advocacy is defined within the SSWBA as: "services which provide assistance (by way of representation or otherwise) to persons for purposes relating to their care and support".

We are in the process of developing our social care recording system (Flo) so that the offer of advocacy is integrated into case work and to allow us to monitor the 'offer' and the take-up.

Advocacy for Adult Services is commissioned on a regional basis with the lead commissioning authority being Blaenau Gwent.

The service is called GATA – Gwent Access to Advocacy, and there is a website which provides citizens and professionals with information : <u>Gwent Advocacy Service – Home Page (gata.cymru)</u>. This service is a single point of access for information and advice regarding advocacy for adults. Citizens or professionals can ring the phone line and can be assessed and referred to the two main providers, Dewis and Age Cymru, if required. Social Workers can also ring Dewis or Age Cymru directly under the scheme.

## Carers

This year, we are looking to increase the level of integration between the carers team and the wider service so that we better understand the needs of carers across the whole system and ensure that roles and responsibilities around carers' assessments and support are clarified. We will be reviewing how we record the work we do with carers to assist with oversight and planning and look to increase training and awareness within the workforce with regards to supporting carers.

# How we performed Adult Services



Overall performance within adults services has remained incredibly resilient, largely attributable to the dedication and professionalism of the workforce. Our inspection report in July 2022 confirmed that despite the many challenges, the service continues to find ways to develop and improve, maintain good quality standards and meet its statutory requirements. Nevertheless, our ambition to maintain these standards leaves us with plenty to do.

Positively, our Care Inspectorate Wales (July 2022) inspection found that,

"For many people, their voices are heard, and people's personal outcomes are captured. We saw some detailed and comprehensive biographies and personal circumstances, evidencing 'what matters' to the person. Many people said social services were helpful and they were treated with dignity and respect by practitioners." Although below levels seen in previous years, our Adult Social Care service user questionnaire shows a high proportion, 83.5%, of services users are happy with their care and support.

Feedback from services users shows a slight decrease in several areas including communication and involvement in their care and support. Feedback was more positive when considering the reliability and continuity of services provided.

The response to our adult survey question '*I have been actively involved in decisions about how my care and support was provided*' is below where we would like it to be at 76.6% from 83% at its highest with '*I feel that i was listened to*' at 79.9% from highest point 86% (2020). These figures are reflective of our challenging circumstances.

Feedback was more positive when considering the reliability and continuity of services provided.

	2018/19		2020/21		2022/23
Adults Questionnaire	Actual	Actual	Actual	Actual	Actual
The service I get is reliable and I'm <u>told</u> about any changes in good time	80.0%	81.5%	82.1%	75.8%	79.1%
I usually get assistance from the same staff	67.8%	70.3%	70.1%	68.4%	71.3%
Do you think that the care and support you get still meet your needs?	92.4%	92.8%	91.2%	87.9%	87.0%

## **The Front Door**

Where people need to contact social care, multi-disciplinary professionals are available at the first access point. The role of the teams responding to reports (contacts) is to provide advice and assistance and where appropriate a decision is made for further assessment to be undertaken by the most relevant practitioner.

During 2022/23, the front door of adult services received 8,806 reports (contacts) of which almost three quarters (6,437) were from people not already in receipt of care and support. This is a is a slight decrease on the previous year, but the number of contacts received remains high. Health colleagues continue to be the main source of reports received as close integration continues between health and social care.

Of the new contacts received, 3,808 were provided with advice or assistance.

Feedback from our customer questionnaire shows 75% of adults receiving care and support feel they have had the right information or advice when they needed it which is the lowest level recorded in recent years.

In the same period, we have seen an increase in volume of reports received relating to carers, with 351 received in total during 2022/23, of which 128 were provided with advice or assistance.



Metric Number	Metric	2020/21	2021/22	2022/23
Front Door	(Adults)			
AD/001b	The number of contacts for adults received by statutory Social Services during the year which were new contacts	5787	6633	6437
AD/002	The number of contacts for adults received by statutory Social Services during the year where advice or assistance was provided	3961	4215	3808
Front Door	(Carers)			
CA/001	The total number of contacts to statutory social services by adult carers or professionals contacting the service on their behalf received during the year		272	351
CA/002	The number of contacts by adult carers received by statutory Social Services during the year where advice or assistance was provided	88	92	128

Adulte Quartiannaira	2018/19	2019/20	2020/21	2021/22	2022/23
Adults Questionnaire	Actual	Actual	Actual	Actual	Actual
I have had the right information or advice when I needed it	81.8%	84.3%	82.5%	77.4%	75.1%

## Assessments

Where the initial report (contact) indicates that an individual is likely to require additional support to ensure that their personal outcomes are met, an assessment is undertaken. The assessment looks further into their particular circumstances, what matters to the individual and their family and what might help. During the year ahead we want to support practitioners to be clearer about how we use the 'hierarchy of support' to make assessments and give advice about what we are able to provide.

The number of assessments completed during 2022/23 has remained largely stable, 2,205 in total, with around 30% of those assessed having needs that require a care and support plan. The picture is similar for assessments of carers, with a stable demand and proportion of assessments requiring care and support.

Patterns of demand have meant that some people have to wait for an assessment, with waiting lists being operated for both social work and occupational therapy. Although waiting lists are proactively managed and prioritised, we would like to see these reduce over the coming year. To assist with this, and where it is safe and appropriate to do so, our intention is to strengthen the advice and assistance that we provide at the 'front-door' rather than referring people on to wait for an assessment.

# **Care and Support**

Following an assessment, a care and support plan is developed which sets out how an individual's personal outcomes can be achieved. Not all adults with an assessed need require long-term support and wherever possible we use short term interventions. There was a reduction in the number of adults with a care and support plan at the end of the year.



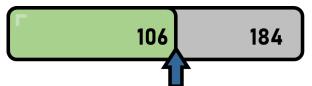
Metric Number	Metric			
Assessments	and Plans (Adults)			
AD/004	The number of new assessments completed for adults during the year		2177	2205
AD/005	Of which:			
AD/005a	Needs were only able to be met with a care and support plan	721	826	671
AD/005b	Needs were able to be met by any other means	630	542	583
AD/005c	There were no eligible needs to meet	627	506	553
AD/012	The number of adults with a <u>care and</u> support plans at 31 March	1813	1728	1651
Assessments	and Plans (Carers)			
CA/004	The total number of carers needs assessments for adults undertaken during the year	132	196	192
CA/005	Of which:			2
CA/005a	Needs could be met with a carer's support plan or care and support plan	39	48	58
CA/005b	Needs were able to be met by any other means	32	43	63
CA/005c	There were no eligible needs to meet	55	25	27
CA/008a	The number of adult carers with a support plan at 31 March		105	86
CA/008b	The number of adults with a care and support plan who also have carer responsibilities	41	64	50

Adults Questionnaire	2018/19 Actual	2019/20 Actual	2020/21 Actual	2021/22 Actual	2022/23 Actual
I have been actively involved in decisions about how my care and support was provided	81.4%	83.1%	83.0%	77.4%	76.6%
I feel that I was listened to	82.7%	86.5%	85.9%	81.4%	79.9%

# **Time-limited Interventions & Enablement Services**

Wherever possible we use reablement to provide intensive short-term interventions which aim to restore people to independence, mitigating the need for long-term services in the immediate future. The sustained increase in demand for social care and lack of available provision, has meant that for the second year we have completed fewer packages of reablement. However, positively, during

2022/23 we saw an increase in the percentage of people who were independent following reablement.



57.6% reablement packages completed that mitigated the need for support

Metric Number	Metric			
Early Interve	ntion and Prevention			
AD/010	The total number of packages of reablement completed during the year	291	240	184
AD/011	Of which:			[
AD/011a	Reduced the need for support	50	54	32
AD/011b	Maintained the need for the same level of support		36	35
AD/011c	Mitigated the need for support		122	106
AD/011d	Neither reduced maintained nor mitigated the need for		28	11
Local	The percentage of packages of reablement completed during the year that mitigated the need for support		50.8%	57.6%
AD/013	The total number of adults with a care and support plan where needs a met through a Direct Payment at 31 March	123	139	149

Adults Questionnaire	2018/19	2019/20	2020/21	2021/22	2022/23
Adults Questionnaire	Actual	Actual	Actual	Actual	Actual
I am happy with the care and support I have had	88.3%	89.4%	89.0%	86.9%	83.5%

Reablement relies on the availability of physiotherapists and occupational therapists together with specialist home carers who can support and assist people to recover or develop their independent living skills.

In recent times, our ability to ensure that everyone has the benefit of reablement to maximise their independence has been hampered in part because of shortages in community occupational therapy and also because our specialist reablement home carers have been diverted to provide long-term home where critical gaps in provision have arisen.

Our plans this year include steps that we want to take to ensure increased capacity within our inhouse reablement teams.

Assistive technology and specialist aids and adaptations can play a central role in supporting and enabling independence. This year we have developed a joint action plan, together with housing colleagues to ensure that social care practitioners are supported to understand what technology is available and the ways in which technology can enhance the lives of residents.

# **Rehabilitation and Respite at Mardy Park**

In July 2022 CIW inspected the wing at Mardy Park resource centre which provides a rehabilitation, re-settlement and respite service for up to eight adults. This provision provides the opportunity for individuals to stay in a safe and nurturing environment whilst their needs for care and support can be assessed and better understood. There are also beds which are dedicated to providing short-term respite for carers and a break away from home for residents.

In general CIW inspectors found that:

"People at the service are happy with the care and support they receive. Careworkers provide support to people with dignity, respect and warmth."

"We saw an excellent handover of information between shifts which ensured all staff are aware of the current goals and needs of each person being supported."

"Care staff enjoy working at the service and feel well supported to carry out their roles... and the Responsible Individual has good oversight of the service, they visit regularly and know the care staff and residents well."

Areas for improvement included ensuring that personal care plans contain all the relevant information pertaining to the individual and for care staff files to be fully compliant with safe recruitment guidelines.

# **Enabling timely hospital discharge**

Delays across the health and social care system create challenges and tensions within partnership and integrated working, particularly in the area of hospital discharge. The impact on individuals remaining in hospital longer than they should, are at best, not conducive to achieving positive outcomes and at worst, can be devastating.

Over this last year, we have worked together with partners in both primary and secondary health to both prevent unnecessary admissions to hospital and support timely discharges. The regional 'home-first' team provides a 'turn-around' response at the hospital front-door wherever possible. In Monmouthshire we have extended this to pilot an integrated practice approach between ward staff and community practitioners to promote discharge planning earlier in the patient's journey following admission. Alongside of this we convene weekly multi-disciplinary meetings to try to identify and unblock delays when they arise. Despite these measures, however, ensuring well coordinated and timely discharges and managing the pressure within the hospital system remains challenging. More recently we have started to monitor the number of people who are delayed in hospital due to social care reasons was 16 at the census date in March 2023 [this figure fluctuates week by week].

## Longer Term Care and Support

For many individuals within the service, a longer-term care and support plan is required. We have a requirement to regularly review care plans and in 2022/23 we reviewed 57% of care plans that were due. This is an identified area for improvement this during 2023/24, with plans in place to turn some additional resource to this task. As people's needs and circumstances change we need to ensure that their care and support plans are appropriate and equitable.

The provision of longer-term support is often directed at our most vulnerable residents with severe learning disability; chronic mental health conditions; complex physical disability; sensory impairment and those living with frailty.

One of our aims within the service is to support individuals and their families and carers to exercise choice in the way that they receive longer term care. This is sometimes compromised by lack of choice caused by both affordability (due to fees and charges that fall to individuals) and availability (for example limited choice of care home, or lack of available care at home).

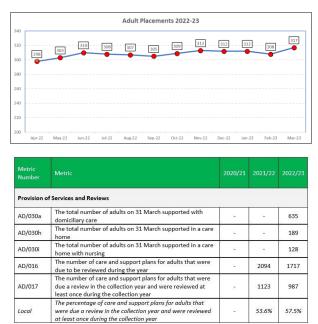
The overall quality of care and support plans and reviews with an emphasis on risk and contingency planning was identified by CIW as an area for improvement.

CIW inspection report July 2022 commented that the quality of assessments and care plans varied and that,

" The local authority must improve the way it reflects people's strengths and barriers to achieving their personal outcomes, and the risks of them not achieving them."

Survey responses show that overall satisfaction with care and support remains high, although this has dipped to 83.5%.

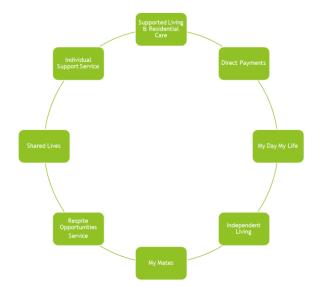
The increasing complexity of people's long-term care needs has seen a steady increase in the number of care home placements over the year reflective of an underlying upward trend. Care home placements includes both residential, nursing placements and specialist placements, depending on the needs of the individual.



The number of people arranging their own care through a direct payment has increased during the year. Direct payments give people more choice and control over their own care and support.

# **Learning Disability Support Services**

Just over 220 individuals with learning disabilities have care and support plans in place. There are a range of services in place to support people with learning disabilities to achieve their personal outcomes and goals and engage in activities that matter to them. Services range from short-term, task focused support to reach a specific goal, to longer term support to engage in daily living, access the community or live independently.



As with all social services, support services to people with a learning disability have changed considerably over the last 10 years or so. The emphasis has been on transforming services, so they are person-centred, strengths based and afford people the opportunity to be involved and engaged citizens in their communities.

Previously services had been very traditional and were aimed at meeting need, usually within exclusive learning disability settings. The emergence of the Housing Transformation, Respite Opportunities Service, My Day My Life and My Mates have been as a response to this new approach; seeking to support people to make friends, engage in their communities and do what matters to them as individuals.

COVID required us to think and work differently within a short space of time. As COVID restrictions eased we embarked on two service reviews to help us move forward positively from the impact of the pandemic taking into account the changing patterns of demand that had been observed.

During November 2022 to March 2023 we engaged Practice Solutions Ltd., an independent organisation with experience and expertise in services for people with learning disabilities, to undertake a review of My Day Life Services. My Day My Life is a service that enables people with a learning disability to develop and pursue their individual aspirations within every day, community settings. This approach has been in place since 2014 and has resulted in a move away from traditional buildings-based only day service to more bespoke individual opportunities, with a mix of support within the community and within My Day My Life buildings.

The review engaged directly with people who use My Day My life services and their families as well as the My Day My Life workforce and a range of other stakeholders. The review concluded that over recent years the service had 'lost its way' and that in response the council should take urgent steps to restore and develop the positive aspects of the My Day My Life service. The report went on to say that,

"This will require a commitment to making timely plans and decisions, providing positive leadership and implementing practical changes. The programme of reform should be developed in full partnership with participants, their families, staff and stakeholders. The new service model must fit within a wider strategic offer for people with learning disabilities in Monmouthshire, which focuses upon supporting people to take part in community activities and helping services to become genuinely more person-centred. The evidence from our review is that a return to the core My Day My Life principles which were actively pursued prior to the Covid-19 pandemic would win widespread support and make a major contribution to improving the opportunities available to people with learning disabilities and support their participation in meaningful activities centred around personal goals and development."

The review made 10 widescale recommendations to support the development of the service. Implementing these recommendations will be a focus of the year ahead.

A link to the Practice Solutions report can be found here.

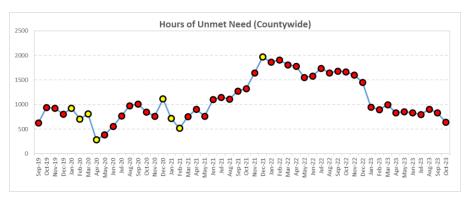
A review of the Respite Opportunities Service was similarly undertaken between November 2022 and March 2023. The review was undertaken internally and focused on patterns of demand and people's views about the different respite services that are offered:- residential respite; shared lives; short break holidays and direct payments. The review explored the prospects for the council's inhouse residential respite provision at Budden Crescent and concluded that, as other forms of respite had come to the fore, sadly, this much loved and valued provision was no longer viable. Taking forward the service development recommendations arising from the reivew is a priority for the year ahead.

## **CARE AT HOME**

Domiciliary Care is the cornerstone of Adult Social Care and Health, and is provided through a mixture of in-house and independent sector providers at roughly at 30% / 70% split. The demand for care at home remains high and has been on an upward trend for several years - although over the last year we have been able to stabilise it. All the social care teams are reliant on domiciliary care and unavailability of home care impacts all elements of the service. This year, our ability to purchase care from our partner provider agencies has increased; however, provision across the county remains patchy.

Overall our weekly unmet need within home care has improved from last year. At year end the overall weekly demand for care at home hours was 8,177 with approximately 650 people in receipt of care at home. There were 834 hours per week identified as 'unmet'.

Notably, our home care data tells us that there are more people waiting for home care in the community, as opposed to those waiting for home care to enable hospital discharge, and that there is less of an acute problem in the North of the county than in the South and Central areas; and that rural areas remain particularly reliant on in-house rather than independent providers.



This year Monmouthshire's in-house Care at Home Service was inspected in July 2022 with overall positive outcomes.

CIW summarised their findings:

"People are happy with the care and support they receive and are very complimentary of the service provided. Care and support is designed in consultation with people using the service, which considers their needs, wishes and aspirations. People know and understand what care and support is available to them, they are listened to and contribute to decisions affecting their lives. They are supported with their physical, mental health, emotional and social well-being."

"There is an embedded multidisciplinary approach at the service prioritising people's well-being and empowering independence. There is oversight of the service by the Responsible Individual with comprehensive quality assurance processes in place."

Areas for improvement included recruitment and reporting practises and the process for reviewing care and support plans.

With a more stabilised position achieved, our intention is to move forward with reviewing the way that we provide care at home taking into account the profiles of the main localities within the county and the different patterns of available provision. The aims of this are twofold in that we want to support a vibrant and high quality provider market and at the same time ensure that wherever possible our in-house provision is turned to reablement as this is where we can bring our specialism to bear most effectively.

# Expanding Choice and Capacity within Care at Home - MICRO CARERS



In partnership with the Regional Partnership Team we have developed a supplementary way of delivering care and support in the community, by supporting people to become self-employed care workers.

Recruiting home care workers in rural areas has historically proven a challenge. The development of the micro care directory looks to address this issue by offering an additional, viable solution to the availability of care services across Monmouthshire, providing greater choice to its residents.

Micro carers are self-employed individuals who offer personalised support and care to citizens who live in their local area. This means that the support services they offer can be delivered at times and in ways that suits the needs of the individual, offering greater continuity of care and flexibility. Micro carers aim to offer a tailored service that is responsive and imaginative in its delivery. A micro carer can help and support with a variety of different care and support tasks, which could include (but is not limited to) domiciliary care, respite for carers, leisure and wellbeing activities, domestic tasks, pet care, companionship, gardening and shopping.

With support from Business Wales, all micro carers receive ongoing advice and guidance from the micro care team in order to meet the standards required to be entered onto Monmouthshire's Micro Care Directory. All the micro carers are offered free training through the Monmouthshire County Council Workforce Development Team, including, where appropriate, manual handling, safeguarding, food hygiene, Mental Capacity Act and other training relevant to the role. Once on the directory, micro carers are linked with local people looking for care services with help from Monmouthshire's direct payments team.

Since April 2022, the micro care team have supported 15 micro carers on to the micro care directory and are currently assisting many more people through the process of becoming a micro carer.

A facebook group is available for Monmouthshire microcarers and for more information which can be found <u>here</u>.



https://sway.office.com/GzhJn0aMjHhdkrRK#content=WwcA4lbeevkRtF

12 - Tracy takes us around Caldicot and explains the benefits that being a microcarer has for her.

During our first year our focus has been developing all of the Microcare polices and procedures. We have been able to on board to the register some micros and an evaluation of year one also took place. Below you will see the evaluation of year one. The micro care register can now can grow from strength to strength and we look forward to seeing our network or micros cover each and every nook and cranny within the county.



# executive summary

This report provides a broad evaluation of the microcare pilot developed between March 2022/23 in Monmouthshire CC in partnership with the Gwent Regional Partnership Team. The pilot aimed to support 10 Monmouthshire residents to set up their own micro care enterprise, providing care and support in their local community, in areas where traditional care services have historically proved difficult to source.

The pilot built on the principles of the Foundational Economy through the development of skills and talents within local communities, the creation of local jobs and maximising the economic and social benefits of social care delivery. The delivery model of microcare helps to ensure money remains in the local economy while providing residents with greater voice, choice and control regarding the care and support they receive.

In April 2019, the Welsh Government declared a climate emergency and In 2022 created a National Programme Board to support the decarbonisation of health and social care. The microcare model of care works on the principle that microcarers deliver care and support within their local community. This can significantly reduce travel times and car use as part of care delivery, thus reducing carbon emissions within communities. The report finds:

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- There is an appetite for microcare in Monmouthshire amongst residents seeking care and support either through their own funds or via a direct payment
- Monmouthshire residents are seeking flexible, autonomous local employment
- Microcare can help fill gaps in care provision
- Microcare can support the take up of direct payments amongst residents
- Microcare can prevent and/or delay people arriving at the front door of social services
- Microcare can potentially support timely hospital discharge
- Microcare does not appear to be more risky than traditional home care services if the correct quality assurance measures are in place

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# what is microcare?

A microcarer is a self-employed care worker that provides flexible, personalised support and care to people who live in their local area. Microcarers offer an additional option to traditional commissioned care, that does not replace, but compliments existing care delivery.

Microcarers can provide a wide range of services which will depend on the microcarers previous experience, skills, knowledge and what they are comfortable delivering. Some will offer personal care while others may offer support with domestic chores or social activities.

In Monmouthshire, microcarers are currently paid either via a direct payment or directly by those who fund their own care.

Microcarers are exempt from registering with Care inspectorate Wales under the following exceptions:

Regulation and inspection of Social Care (Wales) Act 2016 - Registration Guidance, page 11.

 'Personal Assistants are exempt from registration on the basis that they work solely under the direction and control of the person receiving care or a related third party.'

Whether the service is paid for through a direct payment or self-funded by an Individual, it does not affect the consideration of this exception. 2: 'A service that provides care and support to four or fewer named individuals at any one time is exempt from registration. This includes co-operatives which employ carers to provide care and support to four or fewer named individuals'.

Exception 2 has been interpreted differently by local authorities and 3rd sector organisations supporting the development of micro providers, compounded by differing guidance received from CIW (Care inspectorate Wales) when queried. As part of the development of the pilot we met with CIW and were advised that if exception 1 is met and the micro provider is working solely under the direction and control of the individual then it is not necessary to consider exception 2 as the criteria for the exception has already been met making any other exceptions irrelevant.

However, both exceptions are dependent on the care and support being provided 'Without the involvement of an undertaking acting as an employment agency or employment business.' Therefore, if a local authority was to commission a micro provider directly rather than via a direct payment, then it is the current understanding that exception 2 would apply.

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Despite reassurances to the project board from Care inspectorate Wales that microcarers are exempt from registering their micro enterprises, their remains some ambiguity that requires clarification at a national level. The **Regulation and inspection of Social Care (Wales) Act** 2016 was developed and published prior to the microcare model being adopted in Wales and so it can be assumed, that the regulations do not fully consider or reflect this new model of care. This has led to different interpretations of the regulations, particularly regarding the fulle of 4 where microcare delivery currently exists. It may also be the reason the development of the microcare model has been much slower in Wales than it has been in England.

Note: The grey area surrounding the exceptions has been raised with Weish Government's Domicillary Care Policy and Foundational Economy team who are currently exploring microcare delivery in Wales and where it sits within the wider social care delivery framework. Micro enterprises are now well established in England as part of a mixed economy of delivering care. In Wales, both Flintshire and Pembrokeshire have set up micro enterprise projects. All report that the establishment of microcare enterprises can offer the following benefits:

- People are well-supported at home or in the community by people who live locally
- Support is truly co-produced with those requiring care and support, meaning the care provided focuses on what matters to the individual.
- People can work locally, earn an income, and make a positive difference
- Care can be delivered more flexibly which can lead to greater engagement from the family of those in receipt of care.
- People stay better connected to their community, becoming less isolated.
- Money is saved as the cost of care delivered by microcarers is cheaper than traditional commissioned domiciliary care and agency sourced PAs and does not require prominent levels of back-onice support and co-ordination.
- Microcare removes the need for direct payment recipients to become the employer, leading to a smother and quicker transition when moving to direct payments. This can help speed up hospital discharge.



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# the microcare pilot

The microcare pilot was launched in April 2022, funded by the Winter Planning Fund for 12 months. The pilot has been developed and Implemented by the Regional Partnership Team and Monmouthshire CC.

Planed and Business Wales have also been key partners in the development implementation of the pllot.

Planed is a community-led partnership established as a social enterprise. Planed began their own microcare project in 2019 and have provided invaluable advice, insight, and support during the initial stages of the pliot. Planed currently has a network of more than 50 micro providers in Pembrokeshire with plans to expand the project into Carmarthenshire.

Business Wales provides free Independent advice to people starting, running, and growing a business in Wales. Business Wales have been extremely supportive of the pilot and have guided all those referred to them through the process of becoming self-employed microcares.

The pilot's main aims were to establish if the development of a local directory of micro providers could provide:

- Increased care capacity in the community.
- A reduction in the number of people waiting for a direct payment.

- Local carers assisting local people to reduce carbon footprint and develop selfsupporting communities.
- \* A reduction of unmet care hours.
- The pilot also sought to test if there was an appetite for self-employment within the social care sector in Monmouthshire.

Monmouthshire County Council was identified as the lead partner as the region has historically found it difficult to recruit care at home workers due to its rurality and high housing costs which means it relies on people providing care who live outside the county. Monmouthshire also finds it difficult to recruit personal assistants for direct payment recipients for the same reasons. Monmouthshire has the highest number of hours of unmet care needs in the region as well as a waiting list for direct payments due to a lack of Personal Assistants.

Microcare takes a foundational economy approach to social care delivery as it contributes economic and social benefits to the local community. It opens new recruitment pathways while providing good quality and rewarding employment to local people and ensures the money earned from care remains in the local community.

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# marketing and recruitment

Given the ongoing fragility of the domiciliary care market, the project made a significant effort to avoid recruiting existing care workers and destabilising the sector further. Initial recruitment was low key and focused entirely within Monmouthshire. A discreet social media campaign focused on local community Facebook groups and recruitment flyers were distributed to local community hubs.

A social media marketing company, Shed Social, was contracted to produce a Facebook advertisement and landing page that almed to target those not already working in the care sector. Shed Social were able to provide us with the following figures:

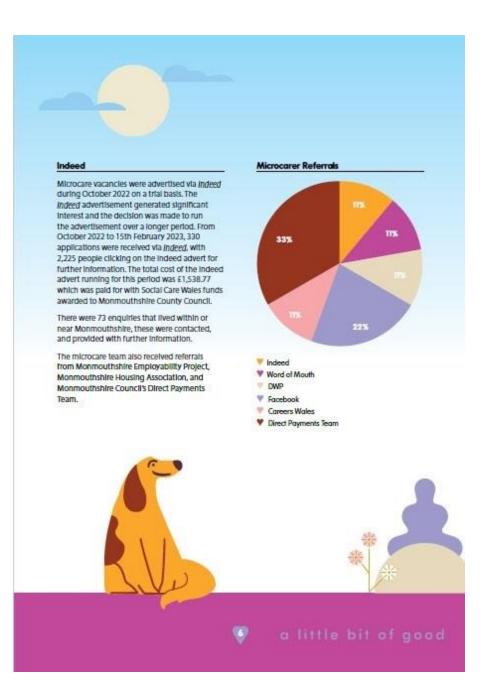
802 potential microcarers visited the landing page which was broken down as follows:

- V English language advertisement 574 visitors
- Velsh language advertisement 196 visitors
- V Retargeting advertisements 32 visitors
- Click through rates averaged 3.3% for first time viewers and 6.1% for retargeting campaigns.

The most responsive demographic to the advertisements were females aged 45+. The click through rates for this demographic were 120% higher than younger and male demographics. Enquirles received via the Facebook enquiry form increased by 85% during the 7-week campaign.



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# governance

There is evidence that the long-term shortage of commissioned domiciliary care has led to a gap in the market that is currently being filled by local entrepreneurs providing informal care and support without the knowledge of the local authority. The background, previous care experience and training of these people is not clear.

The microcare pilot provides the opportunity for greater oversight and governance of selfemployed care workers operating within Monmouthshire. Inclusion on the microcare directory is subject to the microcare following a code of practise that includes the completion of basic training, providing evidence of a valid DBS, public liability insurance and registration for self-assessment with HMRC.

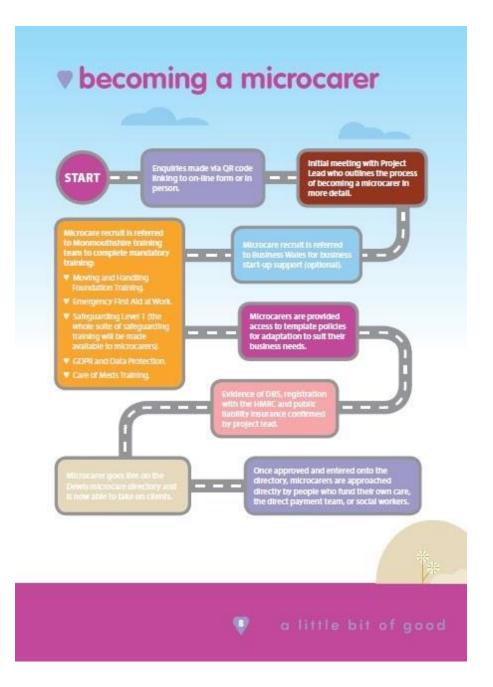
As part of the code of practise, the microcarer is also expected to develop a service agreement for those they contract with as well as basic policies such as risk assessments, a complaints policy, a privacy statement, and a confidentiality statement. The directory affords greater oversight than current arrangements made with personal assistants via direct payments.

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Monmouthshire County Council reserves the right to remove a microcarer from the directory should they fail to meet the standards laid out in the Code of Practise. The code of practise includes the necessity for the microcarer and the client to be fully aware of Adult Safeguarding reporting procedures as part of their complaints policy.

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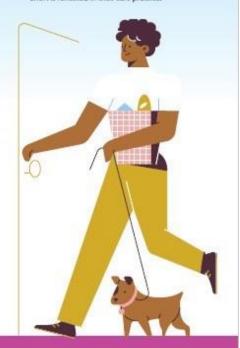


The Microcarer Handbook has been a key development in standardising the information and support provided to the microcarers in Monmouthshire. The handbook provides more detailed information regarding the entire process of becoming a microcarer and enables them to build a personalised action plan that progresses at a pace that suits them. The document has been made available to microcarers digitally, it is updated and reviewed frequently.

Monmouthshire County Council plan to host regular network meetings for microcarers which will focus on the latest guidance updates, training and any business support required. These meetings provide an opportunity for microcarers to meet each other, offer advice and guidance to others, and raise any support needs they may have with the microcare team.

The Dewls microcare directory lists those micro providers who have met the governance requirements of the project. Here, local residents, as well as the Direct Payments and Social Work teams within Monmouthshire can identify which areas of the county specific microcarers cover and the kind of care and support services their micro-enterprises can offer.

The Microcare Directory has been live since October 2022 and was the 3rd most searched term for Gwent on the Dewls website in 2022. Setting up a microcare business is a rewarding but daunting undertaking. It requires tenacity and motivation. Those microcarers who have persevered with the pliot and developed their micro enterprises have proved they are committed to providing high quality, safe, person-centred care. The investment the microcarers have made in terms of time and effort is reflected in their care practice.



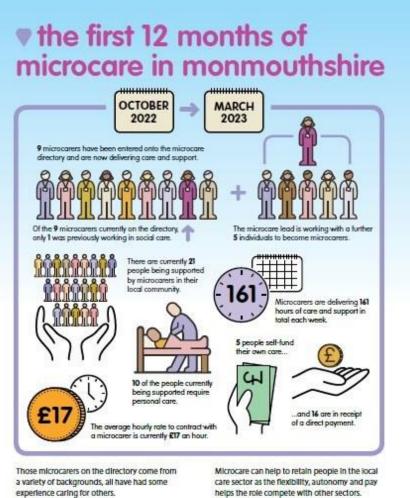
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CASE STUDY Sophie's Community Care Sophie is a parent living in Mormouthshire. She has worked within the care sector since she was 16 but stopped working to focus on the care of her son wito has Autom. Sophie hereif received a diagnosis of Autom. Autom Her care responsibilities for Work and Careers Wales when she was made aware of the microcare project in Mormouthshire. Despite being a fitte envolus about the prospect of setting up her own business. Sophie was assured that she would be supported throughout sophie hereif the Jocess on a onet-one basis. Sophie likeet the Idea of working houts and times that support that prospect on the sophie attended her, this made Sophie microcare learn referred Sophie to business Wales for additional support th business Wales for additional support his seminar designed specifically for those seminar designed specifically for those seminar provided Information about what is livinovide In setting up a business, and Sophie was offiered a boliow up appointent with a Business Wales additor.

To meet the microcarer code of practice standards, Sophie was able to access fully funded training via Monmouthshire Council which was arranged theough the microcare team, Sophie completed the following training: • Manual Handiling • Care of Medis • Emergency First Aid at Work • GDPR and Data Protection • Safeguarding Awareness The training gave Sophie the opportunity to refissip newloas learning, as well as the chance to meet the other microcarers. This helped to alrevidue any workes Sophie had an enabled her to maintain contact with the other microcarers. Sophie now communicates with the other microcarers via a WhatsApp group where they share updales and information. The microcare team also supported Sophie with a DBS check, sourcing suitable public fability insurance, withing a business profile and HANRC negistration via a Business Wales with a DBS check, sourcing suitable public fuelting insurance, withing a business profile and HANRC negistration via a Business Wales with a DBS check, sourcing suitable public fuelting insurance, withing a business profile and HANRC negistration via a Business Wales with a DBS check, sourcing suitable public fuelting insurance, withing a business tradies are elifectory on DeWIs. Sophie is currently supporting an elderity warma with underton for accontentments food

careClony on Dewls. Sophie is currently supporting an elderly woman with getting to appointments, foo shopping and general help around her ho Sophie now works hours that suit her fami commitments, as well as the support need her client.

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helps the role compete with other sectors.



# feedback from a microcare client

# 1. How have you found contracting with a microcarer?

"Excellent! Our carer, Liza, is very flexible and outgoing and has enabled our daughter to access lots of activities and helps her out with day-to-day tasks."

2. What difference has the microcarer made?

"Our daughter is very happy and has continuity of care."

3. Please could you tell us about how microcare differs from any previous care packages you have received?

"In the past we have employed PAs using direct payments. The problem with this is carers move on and the continuity of care, building up of relationships and trust is then lost."



CASE STUDY Microcare and Hospital Discharge

David was admitted to hospital in Sept 2022 and was there until late Feb 2023. David has a diagnosis of Huntington's which can impact his mental health. The condition affects his movement and puts him at an increased risk of faits. David's wife was unable to look after him at home without the support of carer workers, but care was not available via the traditional route of care agencies.

David required 2 calls per day (single handed, 1 AM and 1 PM visit). The social worker explored the option of microcare with David and his family. One of the microcarers was able to take on the moming calls and she approached her microcarer colleague to cover evenings and weekends. This was funded via a direct payment.

The alternative care route in this case was an interim placement in a care home whilst awaiting a care package. David and his family strongly wanted him to return home with support. Microcare enabled them to achieve those outcomes.

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# charges and fees

Microcarers are free to set their own fees for the work they carry out. However, they are advised to keep their hourly rate competitive. Microcarers currently on the directory charge between £15 and £18 an hour depending on the type of care and support they offer.

However, it remains difficult for direct payment recipients to recruit and retain Personal Assistants; microcarers are a more cost-effective solution to using agency staff, who typically charge a higher hourly rate.

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Those now being supported by micro providers In Monmouthshire via a direct payment would have been referred to an agency due to the current waiting list for support.

There are also the back-office functions related to direct payments that are supported and paid for by the local authority to consider. Because microcares are sole traders and the recipient of the direct payment no longer must act as the employer, much of this back-office work and support is reduced. The project run by Planed in Pembrokeshire is currently overseen by a single person.

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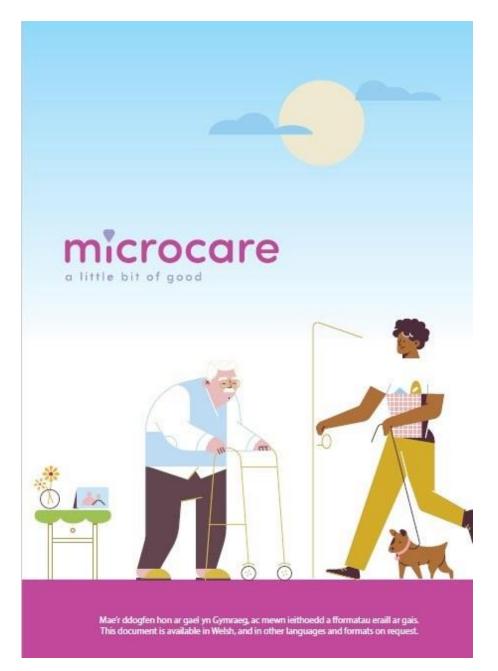
# next steps

Monmouthshire County Council Intend to continue the development of this project for at least further 12 months. They have employed a full-time member of staff to ensure the project can move forward with sufficient resource.

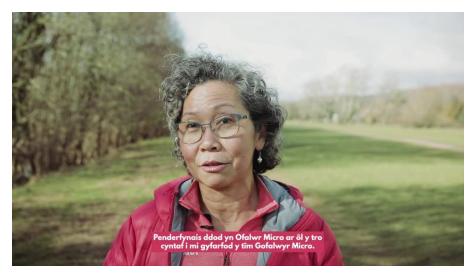
The Gwent Regional Partnership Team Intend to apply learning and resources to another local authority within Gwent, eventually developing a regional or sub-regional microcare service. An expansion of the microcare scheme can help to address significant workforce shortages, provide quality, self-employment opportunities to local people, increase direct payment take up and potentially support hospital discharge across the region.

Weish Government is currently scoping where microcare sits within the wider social care delivery framework through engagement events with local authorities and via a pan Wales micro provider survey. It is hoped Weish Government will recognise and support the opportunities microcare offers to local communities as the model chimes with much of their current strategic direction. There are several for-profit organisations currently seeking opportunities within the microcare market in Wales. These organisations are primarily seeking to act as intermediaries between the micro provider and the person requiring care, and charge for this service. There Is a risk that this could drive up costs for either the micro providers or the people they contract. with, which in turn could lead to increased costs for direct payments teams. A pan Wales approach to training and set-up from Social Care Wales, coupled with some arm's length support and guidance for micro providers would help minimise this risk and ensure that micro providers remain a grass roots, community-based movement while reassuring Monmouthshire residents that micro providers are subject to ongoing quality assurance and can provide high quality care and support.





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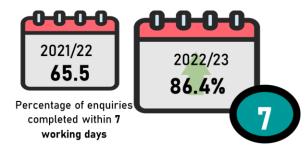
https://sway.office.com/GzhJn0aMjHhdkrRK#content=iw6Ar58giHrFgd

Here is an other Micro we would like you to meet, Liza. She will describe whats a day in the life of a micro and why she loves being a Monmouthshire microcarer.

# Safeguarding Adults Services

Adult safeguarding reports are made through the adult safeguarding team which sits alongside of the wider service and are line-managed through the safeguarding hub arrangements (under children's services). Safeguarding reports are made when there are concerns about an adult who has care and support needs. Concerns may be around the abuse or neglect of an adult including financial abuse or exploitation. Compared with children's services, a higher proportion of safeguarding concerns in adult services are raised with regards to the individuals providing care and once investigated can often be addressed through workforce training, oversight and practice development.

Adult safeguarding has seen a decrease in the volume of reports being made during the year. The reduction in reports and subsequently enquiries is due to the service providing increased advice and support to referring agencies to help with a more consistent application of the guidance in relation to safeguarding reports. During 2022/23, 577 reports were made regarding 438 adults. The majority of reports are from providers and most reports fall under the category of neglect.



The number of reports leading to enquires has similarly decreased during the year, in line with the reduction in reports. Enquiries should usually be completed within 7 working days and during 2022/23, 86.4% were. This had been targeted as an area for improvement this year and is a significant increase on the previous year.

81% of adults tell us they feel safe, which is an improvement on the previous two years. Where people do not feel safe, comments often refer to concerns about mobility and fear of falling.

Metric Number	Metric							
Adult Safegu	arding							
AS/001	Number of adults suspected of being at risk of abuse or neglect reported during the year				463	528	438	
AD/020	The total number of at risk received duri		n adult suspect	ed of being	680	799	577	
AD/022	The total number of reports received during the collection							
AD/022a	Neglect	ct				344	242	
AD/022b	Physical abuse				260	269	229	
AD/022c	Sexual abuse				35	56	27	
AD/022d	Emotional or Psyc	hological ab	use		176	214	145	
AD/022e	Financial abuse				106	97	114	
AD/023	The total number of at risk where it is ne				509	583	418	
AD/024		The total number of enquiries completed within 7 working days from the receipt of the reported alleged abuse				382	361	
Local	The percentage of enquiries completed within 7 working days from the receipt of the reported alleged abuse				51.5%	65.5%	86.4%	
Adults Questionnaire		2018/19 Actual	2019/20 Actual	2020/21 Actual	202: Act		2022/23 Actual	

## Early Help and Prevention Through a Partnership Approach

I feel safe

Over recent years we have remained constant in our belief that providing community based support as early as possible helps people stay independent for longer and reducing the likelihood of them requiring formal services. The service has continued to build networks that enable people to connect with groups and activities in their local community with the aim of maintaining long-term health and wellbeing and decreasing loneliness and isolation. These concepts are rooted in the aspirations of the Social Services and Wellbeing Act.

81.1%

81.8%

78.8%

78.3% 81.3%

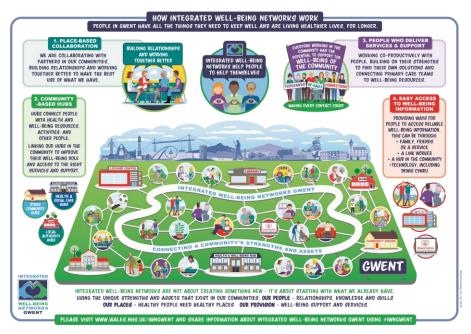
As demand pressure continues to increase and resources become tighter, one of the most critical challenges faced by adult social care over the next year is how to maintain our commitment to community based support. To do this we need to continue to work in partnership to jointly understand vulnerability and need; ensure that our resources remain well aligned and targeted at the most vulnerable and ensure that we maximise the use of existing, joint community assets wherever possible.



Concept of well-being central to the Act

The development and provision of early help is dependent on working closely with our partners both within and outside of the council including many third sector and voluntary organisations.

Together with our Gwent partners, particularly Aneurin Bevan University Health Board and Gwent Association of Voluntary Organisations (GAVO), we have established 'well-being networks' and are working to strengthen and expand these across the County.



Similarly, responding as we did to the COVID pandemic helped us cement our collaborative relationship with the Council's Partnership Teams and volunteer networks giving us even more experience of working together within communities and creating opportunities to increase involvement and social connection for people.

We recognise the importance of place and community and have continued to develop our concept of '*place based working*'. In essence this means a way of working that builds a network of community support to help people remain connected to things that matter to them supporting their health and wellbeing. By bringing a range of agencies together across social services, primary and community health services, and the third sector, with a shared purpose of supporting people's wellbeing, we are able to share skills, expertise, time and increase the opportunities for people to access support in the community without needing formal services.

"Place—based working is a person centred, bottom-up approach used to meet the unique needs of people in one given location by working together to use the best available resources and collaborate to gain local knowledge



In October 2022 Caldicot's Together WORKS celebrated its first birthday. As a partnership bewteen the Council and a number of third sector organisations, Caldicot WORKS provides a safe, friendly, community space which supports a range of volunteering opportunities and welcomes groups such as Bore Coffee, Disability and Dementia Art and Craft, Stitched Together, Armchair Aerobics, Makers Space and Parents Breastfeeding Support to name a few.

Meanwhile in May 2022, the Chepstow's Community Cabin reopened for the first time since the Covid-19 Pandemic led to its temporary closure.

Based at Chepstow Community Hospital, the Cabin is a collaboration between Aneurin Bevan University Health Board and Monmouthshire County Council, and acts as a hub for the local community and for voluntary organisations. It's a place where a wide range of wellbeing-focused organisations can have a base, right in the heart of the community. This also creates a fantastic space for co-operation and working together, as well as a drop-in opportunity for members of the town's community to find out about all the wellbeing services and events on their doorstep.

More than a dozen local information and advice organisations attended the opening, including Mind Monmouthshire, Autism Awareness, Papyrus, Monmouthshire Housing, Cyffanol Women's Aid and the Ffrind I Mi befriending service.



Alongside of community hubs wellbeing practitioners are embedded within community based social care and health settings. 2 practitioners, employed by GAVO, are directly connected to GP surgeries. Wellbeing practitioners provide direct support tailored to an individual helping people re-engage in doing what matters to them.

#### **PARTNERSHIP PREVENTATIVE SERVICES - 2 Examples**

#### **My Mates Monmouthshire**

My Mates originated in Monmouthshire and is now available throughout Gwent. Through My Mates, people with a learning disability have access to a variety of social events to form friendships and personal relationships, whilst being offered advice and information in a supportive environment. My Mates assists to build confidence and independence utilising the person's own network and the community. Events are facilitated by My Mates and are self-funded with individuals providing their own support from their extended networks. The project is member-led. My Mate's focus isn't on trips and events; the relationships that are built within the social activity are paramount. My Mates seeks to improve: friendships and relationships, better community networks, education and awareness, combating isolation and the impact of loneliness for some people who might otherwise feel disconnected and unable to fully assert voice, choice and control over their own lives.





Follow the stack to see what people have to say about their involvement in My Mates

"There's so many places I've never been before. I'm doing so many new things with My Mates"

"Being with My Mates has got me the confidence that I've never had before. I have new friends & I've been to places I've never been before."

"It doesn't mater where or how we meet up, it's the meeting up that matters"

" I now have a reason to get out of bed!"

"My Mates is awesome!"

"What would I do without you? My Mates has changed my life!"

"Through My Mates, I've met the love of my life, I've got friends & I don't feel lonely anymore."

"I've got friends! I've got someone to talk to everyday - I used to go days with only my own company."

### **GROWING SPACES**

Growing Spaces is a Gwent-wide mental health charity that supports people with mental health challenges, learning disabilities and autism. Growing Spaces helps people to learn new skills in horticulture, woodwork and art and to build confidence and reduce social isolation. People receive support around re-entering paid employment opportunities and are supported with general advice

for example, around the cost of living or access to other services. Mardy Park resource centre hosts one of the Growing Spaces sites where there are around 50 participants who attend every week and find meaningful activity and connection with others in caring for the gardens and orchard. The project grows organic fruit and vegetables for participants to take home to try and any surplus goes to the kitchen at Mardy Park for the café.



Growing spaces has won a number of awards in recognition of our sustainability and best practice including Best Environmental Project in Monmouthshire at the GAVO awards and has been awarded the Keep Wales Tidy Green Flag status for the last 3 years.

Basing Growing Spaces at Mardy Park has allowed the resource Centre to develop into a hub that welcomes people of all ages, and become truly intergenerational. All ages can be seen enjoying both the inside of the building and outside in the grounds.

Recently Growing Spaces took part in the national tree planting initiative, and Bluebells forest school, who also use the grounds helped with the planting of the trees. From the photos included you can see generations working together, with Bluebells supervising the planting.

The digger is in the process of preparing the area for a Green Corridor Pond, attracting frogs, butterflies, dragonflies and also including a bee bath for the hives that are also in the grounds, enabling the bees to have a wash and drink when needed.



#### 5. Carers Service

14 - Our Carer's event in November 2022 was held in Westonbirt Arboretum.

The Carers Team commissions carers services, provides information and advice, offers a range of free events and activities, works alongside community groups, health and social care professionals and most importantly carers and young carers. The team also undertakes carers needs assessments to ensure that carers needs are understood in their own right. The carers team are seeing an increase in demand for their support, with carers and young carers presenting with more of their own support needs than has previously been seen.

The support that the team provide is very much valued by carers and young carers. Giving the carer an opportunity to talk to someone about their caring role is a service in its own right. The team continues to maintain strong, open and honest relationships with commissioned service providers who provide direct support to carers. This relationship allows both us to flex and adapt services to meet carers needs. An example of this is how Adferiad has now started to also support young carers who are supporting someone with mental ill health.

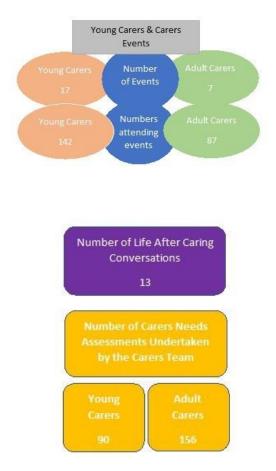
Post COVID, the Carers Team have resumed their offer of free activities for carers including a trip to Westonbirt, a steam railway ride followed by a cream tea, coach trip to Worcester market, new year lunches and a guided walk. Numbers in attendance have not been at the same level as pre-COVID, which is in part due to the reticence of some not wanting to venture far or mix within groups. There

have though been successes. One carer, along with her husband attended our steam railway trip and said she was so glad she came because she met so many people, and it has given her the confidence to go on our other trips. The Young Carers Service have similarly provided a number of trips for young carers including bowling, Greenmeadow Park, detective trail, Gilwern Activity Centre and theatre tickets.

These activities provide the Carers Team with the opportunity to talk directly with carers, young carers and their families. It is an informal way of checking in and seeing how they are managing with the caring role, and if there is any additional support or signposting they need. The events also give carers and young carers the opportunity to chat and make new friendships.

Feedback has been amazing, especially for the family events:

*"Hi, As a family we would just like to say a great big thank-you to giving us as a family the opportunity to have a day out altogether it was Robin Hood at the River Front Newport, it was amazing to see both M and B join in and for me to enjoy something with my girls to."* 



#### Life After Caring

Whilst many people may not identify as a carer when their caring role ends this can become a period of uncertainty, change and trying to recalibrate their own identity. The caring role, in some instances, can isolate a carer from their own interests and networks of support. The Carers Team recognises this and gives those who have cared, the opportunity to chat with our Carers Information and Support Workers (CSIW). One of our CSIW provided such support to a lady who was caring for husband. Due to the rural and remote location of their home they had few visitors, whilst their family lived 4 hours

away. Caring for her husband's complex and life changing illnesses put a great strain on the lady, especially as she was managing her own health conditions. Over this 3-year period, the CSIW and the District Nurses were the main visitors she received. When the lady's husband died, she turned to the CSIW for support. The CSIW helped her with some benefits queries and spent time listening to the lady and supporting her through this difficult period. Being there for those who have cared, allows us to acknowledge and value their caring role, whilst recognising someone as an individual.

#### **Commissioned Carer Services**

The Carers Team commission several services that support carers to have a life of their own and/or continue with their caring role. We are very grateful to these organisations which include Age Cymru Gwent, Care Collective and Adferiad Recovery and Building Bridges and Gwent Association of Voluntary Organisations who provides us with management of the Carers' Coordinator role.

The Carers Coordinator works in collaboration with the Council's Carers Team to plan and deliver carers events, administer the Leisure Card 25% discount scheme and the carers newsletter.



#### Welcome to Monmouthshire Young Carers Service



The Young Carees Service is working with a case/dad of young carees and Smilles that working with a case/dad of parents were invited to get with worked to provide the simily with some much-needed time out-out the similar depending on their level of focuses on their goats with induces embods and/or practical support. We had a great lime and pravents were invited to get with some much-needed time out-same were side to coasiase with people who undersam their stuation and practical support.

During February hat ferm the Young Carens team organized some activities one of them being a Potery session in Laytops and Larlystica as as opportunity for the young carens to take part in a fun-cerative therapoutic activity.

If you are a young carer/young adult carer aged 25 years and would like any support, please contact the young carers service on: Email: YoungCarers@monmouthshire.gov.uk / Tel: 01633 644621



#### Carers Rights Day Luncheons

e m wormouthshire enjoyed a three mas luncheon at Llanfoist Golf Club romote Carers Rights Day.

incheons took place on Wedness er and 1st December, 2021. Car tted over a scrumptious Christm

Social Media

Shopping

safely

Passwords

Phishing emails



The young carers were able to socialise with people who understand their situation and to make new friends.

# **TIPS TO HELP YOU STAY CYBER SAFE**

Top Tip

devices.

Always install anti-virus

software on your

For help and

advice about

visit:

staying safe online

www.ofcom.org.uk



 Be wary of the data you post on line. Social media sites do sell your data onto third parties so posts you share can also be shared with a wider audience. Don't put countdowns to holidays on there. Limit the data you post about yourself in your profile. Always keep your on-line presence small.

 Fake emails offering a refund will ask for bank details IGNORE IT Received an email from a friend asking to buy

- a gift card for them? IGNORE IT Look out for look-a-like websites, safe sites start 'HTTPS'
- Protect your cards by using RFID card protector sleeves.
   Stay vigilant for counterfeit goods. If it sounds too good to be true, it probably is. IGNORE IT.

Never use the same password for different accounts, if one is hacked the others can be too. Use UPPER, lower case characters, numbers and special characters e.g. IYOu'r3 Simply Th3 B3st%. Check if your at has been hacked at: www.haveibeenpwnd.com

 Check the spelling of the senders name and the email address. Hover over links to check where the link is pointing to. If in doubt, get the email checked out. Report Phishing to: report@phishing.gov.uk



#### IING St ...the New Carers Handbook

The Monmouthshire Carers Handbook has had a makeoverl Whils twe have had many positive comments on how useful the handbook has been, carers have also given us some excellent suggestions as to how the handbook could be improved. The new handbook offers guidance and support for a carer whilst highlighting the need for them to hink about their own needs beyond their caring viole. The handbook also includes a directory of organizations that may be able to offer additional support to carers. In he meantime, the 2018 handbook is still available online at waw.momonutshire goux.vi/socide-carectears-project. Watch this space. We will keep you updated and let you know when the handbook is ready for circulation.

#### SOUTH WALES ADMIRAL NURSE SERVICE



The Lagion works with Dementia UK to provide Admit Nurse support - a service that supports that penderales, which can be the carer or the person Wing with memeria, who have service and the UK Armed Forces. The locus of the title carers and amiles and to provide the practical with the carers and amiles and to provide the practical with the carers and amiles and to provide the practical with the carers and amiles and to provide the practical with the carers and amiles and to provide the practical with the carers and amiles and to provide the practical with the carers and amiles and to provide the practical with the carers and the way, obtaining address and the service every short formation and the address of the person with with demertials to provide the practical with the service way short the way obtained as the provide the practical with the meretials and the practical with the service way short the way obtained as the practical with the service way short the way obtained as the practical with the service and the integration and the service and the maines is provide emotional and psychological services and the market is benefit the market and here the services and the market is the service with demential and here to address and the service and the service with demential and psychological services and the market is the service with demential and here to address and the service and the integration and the service with demential and the service address and the service with demential and here to address address and the service with demential and here to address addre

Regional South Wales Areas Covers: Bridgend, Caerphilly, Cardif, Rhondda Oynon Talt, Vale of Giamorgan, Merthyr, Mormouthshile, Neath Port Talbot Newport, Torfaen and Blaenau Gwent.

In terms of postcodes, we cover all CF and NP postcodes and SA10 – SA13. Telephone: 0333 011 4497 • Email: adminalsouthwales@billishlegion



#### Carers UK have launched new resources for carers about Disability-Related Expenditure rs UK have launched new resources for carers about Dir ed Expanditure

sis in

garding their DR 5, and it can be co That's why, to help carers better understand what dis bonestis are, including whether they are entitled to at make a claim. Carers UK have recently launched on illy-related ort, and ho

help-and-advice/linancial-support/disability



#### If you want to talk to someone

You can talk to All Page who works within the Caters Team to see what support you might need. You may just want to talk about how turning 18 might change your carring role and the choices you want to make.

You will receive regular updates through the Carers Newsletter which contains information that could help you, gives you access to free events, updates on any new carers grants, access b leisure & wellbeing discounts while letting you know there is all support for you in Mommouthethire.

If you want to keep in touch & know what's going on

If you do want to have a chat then contact Ali Page, Young Carers & Young Adult Carers Assessment Worker, Monmouthshire County Council If you want to sign up to the newsletter then please contact Gwent Association of Voluntary Organisations (GAVO)

Tel: 07866 188360 Email: AliPage@n

Tel: 01291 675474 gavo.org.uk Email: can



We hope you want to keep in touch so we can all connect together

2

#### WhatsApp **Messaging Service**

We are expanding the way we communicate way we communicate to our residents by developing a WhatsApp messaging service. If you would like to subscribe to these messages, please contact ABB.Engagement@wales.nhs.uk

#### **Gwasanaeth Negeseuon** WhatsApp

Rydym yn ehangu ein dull o gyfathrebu gyda'n trigolion drwy ddatblygu gwasanaeth negeseuon Whatsapp. Os hoffech gael y negeseuon hyn, cysylltwch ag ABB.Engagement@wales.nhs.uk

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6

The Health Board will be launching a WhatsApp Messaging service to engage with residents across Gwent

By subscribing to this service, you will receive frequent updates from the Health Board on a variety of topics including, COVID-19 messaging our vaccination programme and other information about our healthcare services.

If you or someone you know would like to receive Trese messages, please contact ABB Engagement@wales.nhs.uk and title the email "WhatsApp Subscripton"

In the email, please provide the following details:

Your full name:
 Postoode/Borough:
 The mobile number you would like
 the messages to be sent to
 the messages to be sent to
 in the medium of Weish

For the avoidance of doubt, messages will be received from the following mobile number: 07973695798.

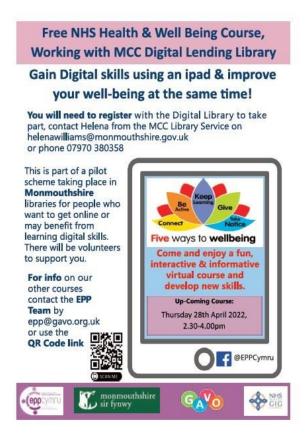
\$0.00 mmmmm

#### Welsh Ambulance Service Non-Emergency Patient Transport

Transport is available for patients in Wales needing to get to Non-Emergency appointments who have a pecific medical need and require Ambuildory Care. You can visit our website to enquire II you are eligible, to search for transport options in your local area and Indir FAQ's about what to expect II you tavel with us.

Temporary Changes to Booking: Under normal circumstance we ask they receive their appointment. However, due to the increased risk surrounding Covid cases, we will only be able to take transport bookings within 4-days of our patients' appointments. By limiting advance journeys advances us to obtain the most up to date Covid information from our patients and therefore helping lowards ensuing the asalety of our staff and patients. 





# 6. Complaints and Compliments

Representation and complaints procedures in Social Services departments are a statutory requirement. Everyone who makes a complaint about social services has a right to be listened to properly and have their concerns resolved quickly and effectively. We always take complaints seriously and use them as an opportunity to critically appraise our practice and reflect on any improvements that need to be made.

General advice about the procedure is published in our complaints leaflet "How to be heard". Alternatively, people can contact the Customer Relations team for help and advice about how to make a complaint.

There are 3 stages to the complaints process. Local resolution (stage 1); formal investigation (stage 2) and referral to the Public Services Ombudsman for Wales (stage 3).

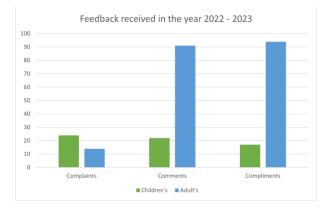
During the year covered by this report we received 38 complaints (24 in children's services and 14 in adults services). Of the 38 complaints, 33 were started at stage 1 of the process during April 2022 - March 2023. 7 complaints were received at stage 2 of the process, of which 3 were escalated and 4 were new within April 2022 - March 2023.

We received a total of 113 comments of which 91 were from adults services and 111 compliments of which 94 were from adults services.

General themes within complaints include communication issues; not being listened to or involved in decisions; and dissatisfaction with the provision of services.

We use the outcomes from complaints investigations as part of continued professional development and to help us shape policy, operational practice and the design of services.

Compliments are equally collated and used to validate the things we do well, support practice development and as an opportunity to recognise and celebrate the actions of individual practitioners or teams.



15 - Number of comments, compliments and complaints received in the year 2022 - 2023 in both adult's and children's services.



'\*\*\* wanted to pass on her sincere thanks for all the support you gave to both her and her husband before he died, \*\*\* reports " \*\*\* transformed her husband's life at the end, she was kindness its self. Thanks to \*\*\*."

'Not getting advised on changes of times of calls.'

'I just wanted to drop you an email to thank the staff of the day centre /pub club for all their hard work and dedication. Recently on Dad's 88th Birthday the day centre staff threw him a party and he had a lovely cake both my sister and myself were so touched its all the little thoughtful things the staff do that make it such an amazing resource. The Pub Club team are fantastic with dad and so understanding if he decides not to go last minute ! Only this week a lady came to the Dad's house from the reablement team as one of the bus escorts had contacted her ref dad needing a rail out by front door. Again showing the staff team going above and beyond. I just wanted to say such a big thanks and please pass this on to anyone who needs to see the recognition all the staff deserve.'

'I only see a social worker when it is my annual review or it is always someone different. There is no continuity.'

'I was really worried when I was discharged from hospital, I wondered if I would be able to manage on my own. Then these wonderful carers came each morning and night, I called them my Guardian Angels, they helped me to do things gave me confidence to do things I didn't think I could do, they never rushed me, it was these girls that helped me to get better, I don't have them anymore as I am improving every day, thanks to these guardian angels, can't thank them enough - \*\*\*.' '...However the Direct Payments Team in Monmouthshire are fantastic. They go above and beyond. \*\*\* in particular really is a credit to the team. Her manager is non-judgemental, she is fair, organised and incredibly helpful.'

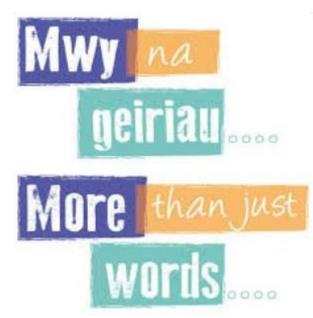
Raising concerns and complain about the drift, delay, poor communication, and case management in relation to nephews.

'My Father needs a social worker, he has recently been told that he hasn't been allocated one.'

'Our social worker has been very helpful and supportive many thanks.'

*'\*\*\* and \*\*\*, You made a very difficult and distressing situation more bearable than we could have hoped. Your empathy and professionalism were above and beyond what anyone could have expected and we are so grateful for that. We would like to thank you so much, You were both wonderful'* 

### 7. More Than Just Words



*More than just words* is the Welsh Government's strategic framework to strengthen Welsh language provision in health and social care. Its aim is to support Welsh-speakers to receive services in their first language.

In October 2021, it was announced there would be a small national task and finish group to develop a five-year plan for *More than just words*, following an independent evaluation of the framework.

The evaluation showed that, for many Welsh-speakers, being able to access services in Welsh made a significant positive difference to their overall experience and, in many cases, their health and wellbeing outcomes. But it also demonstrated people often found it difficult to access the services they need and were reluctant to ask when Welsh-language services were not offered.

The task and finish group, considered patients' experience, evidence from Welsh Government, the NHS and social care, regulators, professional bodies and from the education and training sectors.

The five-year plan is based on the following themes, which emerged from the task and finish group's work:

- Culture and leadership
- Welsh language planning and policies
- Supporting and developing Welsh language skills of the workforce
- Sharing best practice and developing an enabling approach

A performance management framework will measure progress against actions in the plan and a new advisory board will be set up.

In Wales, almost 200,000 staff deliver health and social care, by far the largest employer in Wales. There is therefore a huge opportunity for health and social care to become exemplars in providing Welsh language services and to contribute to the Welsh Government's ambition to increase language use and the number of Welsh speakers by 2050.

Across Gwent we have set up a regional group to support the delivery of the 5 year plan. In Monmouthshire the Welsh Language officer has been working closely with our directorate to support us with all our specific actions as detailed below.

Action	Progress	Who	When/RA
Data & Analytics			
Develop a data dashboard for More than Words in collaboration with the Welsh Language Officer and performance team.     Update quarterly.     Report year end.	Meeting planned to take forward with the newly appointed Welsh Language Officer.	C & S	
Workforce Planning			
Audit of staff Weihl Language skills in collaboration with the Weihl Language Officer.     Analyse Weihl Language skills across each operational team.     Cross reference skills against team with each service area. (This will identify learning & development priorities)	Last audit completed October 2022.	с	
Raise Awareness of 'Active offer'			
<ul> <li>Agree activities for both Children's &amp; Adult's services to raise awareness of the importance of the Active Offer when working with our residents.</li> </ul>		N	
Proposal of Welsh Language in Recruitment and Selection			
Language skills on application form.     Language skills on the E-Form (employee records).     Indude in every role profile: "what are the benefits of working in MCC": opportunity to develop weish language skills.     Used and test from the survey into individual Mrv View records.	In scope for new corporate E- recruitment modules.	A	
Social Care Sharepoint Tile			
Refresh the 'Active Offer' Hub Tile on Share point online.	Project due to commence	s	
Populate Hub site with all Welsh Speakers across both SC&H and whole the authority	Update on a regular basis	s	
Regional Collaboration / Joint Plan			

Continue involvement with regional More than Words activity.				Joint action plan in place & regional meeting set up	A	
Onboard	ing					
MCC video at induction/onboarding				Need to source funding (possibly via SCW)	N	
Meeting	and Review Plan	1				
Every Month Claire Robins, Nia Roberts, Sophie Cook.				Ongoing	A	
Key:	Green Complete	Amber Work In Progress	Red Not Commenced			

## 8. Workforce



In Social Care we recognise that the workforce is our most important resource. To deliver our vision, that Monmouthshire is a connected county that cares and supports well-being, health and dignity for everyone at every stage of life, we need a confident, competent and skilled workforce.

The social care and health workforce, whilst showing such incredible fortitude and resilience, has been under sustained pressure for over two years now without let up. The workforce as a whole could best be described as fragile. Given also the indications that decreasing numbers of people are choosing careers in care, sustaining an adequate, skilled and resilient workforce remains one of the top priorities for the service.

We recognise that our workforce is our greatest asset and are committed to building the capacity of our workforce to ensure they have the skills, knowledge, confidence, and experience required to deliver services that secure positive and sustainable outcomes for people. To continue to develop as a forward-thinking, innovative directorate we will continue to promote a culture of continuous learning and improvement.

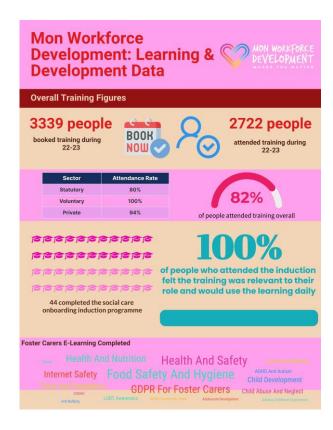
The following is a snap shot of how we have supported the workforce this year and our strategy for people, culture and performance – building a productive, safe, diverse, and respectful workplace; effectively managing risks and resources; and ensuring we have the capability to deliver our priorities now and into the future.

## **Workforce Development Team**



This has been another challenging and exciting year in the workforce development team with the continued development of many work programmes with particular focus on the implementation of a learning management system, new on-boarding programme and attraction and recruitment into the social care sector.

The infographic presented highlights learning & development data from the year 22-23.



# Onboarding

Attracting and retaining quality people in social care is fundamental to delivering high quality compassionate social care. Providing staff with a robust onboarding programme reflects the value that MCC places on its people. The onboarding programme developed collaboratively between the workforce development team and direct care has evolved based upon the feedback from both employees and managers. The programme has been so successful it has doubled in duration and is now a 10 day programme.

The programme delivers the essential mandatory training to safeguard and support our communities whilst reflecting working in social care though embedding learning into practice.

During 22-23, 44 new employees completed the social care induction programme. 100% of participants felt the induction programme was relevant to their role and that they would use the learning daily to support people in our communities.

You can see the feedback from participants by following this stack.

Thank you for a really informative 2 weeks. Coming from a fitness background, completely new to care work, it has been a real eye opener. Having the tools to perform my role. The knowledge to apply what I've learnt I am looking forward to the next part of my journey.

The two weeks was intense but I would rather have all the knowledge needed to go out to be able to do the job than dribs and drabs.

I think being proactive is the key and if I don't know ask!

Thank you was a great 2 weeks even though tired at times. But was all positive

Not too big groups so the interaction was very good between us all, everything was explained well and delivered well.

Training was very organised all information was clear and easy to understand

The group was lovely the training was exceptional

In everyday tasks to the best of my knowledge to ensure service users experience the best care as possible in their own homes

- It was very inclusive and relatively informal which definitely made it easier to learn. The trainers were very approachable and made the long sessions fun and enjoyable.
- Do a week training then practice in workplace, then do another week.

From the managers' perspective the impact of the induction programme was equally positive. Although there were concerns that there was a lot to learn all at once, overall it meant that people were starting their care roles with the appropriate training, *skills and connections with other carers already in place*.

100% of the evaluations identified the trainers were organised, approachable and knowledgeable demonstrating the value that our internal social care trainers have made through ensuring learning and development reflects the service needs. This engagement and collaboration with the services and approach of the trainers ensures meaningful learning for participants which is reflected in an 82% attendance rate.

# **Placed Based Learning**

Place-based learning and development to upskill care staff in Monmouthshire has been delivered wherever possible. Delivering learning and development locally increases access to training. It has reduced the travel time for participants therefore minimising the impact of staffing frontline services and ensures non-drivers are able to access it more readily.

Our work has been continuing to evolve with Aneurin Bevan University Health Board, and our two NCN leads, to develop a *train the trainer* model for delivering training and completing competency assessment in relation to vital signs and taking blood sugar readings for home carers. We hope that we can pilot this model of training and care delivery during 23-24, as part of our work to reduce unnecessary admissions to hospital.

# **Foster Carers**



Monmouthshire Foster Carers have been continuing to complete some of the core learning and development using the e-learning platform. 2022/2023 has seen a total of 125 e-learning courses completed.

In addition, the *Moving Children On* webinar proved popular in November with 4 Carers attending followed by an additional 7 in January 2023. Also popular was the *Suicide and Self Harm* webinar with 7 Foster Carers attending in February 2023.

Foster Carers feedback has suggested they are keen to have a mix of face to face and e-learning in the future so 2023/2024 will be working towards this.



# Learning Management System – Thinqi



Social care and health have been working collaboratively with our colleagues across the council to ensure we have a Learning Management System that will support us to deliver learning and to facilitate personal and professional development. In August 2022 the testing, evaluating, planning and building the content ready for migration of the whole social care and health workforce to move over to our new learning management system began. It was fantastic to realise this goal and to see social care and health go live with the new system – Thinqi – in April 2023.

Thinqi is proving a great platform for our social care and health workforce. Each employee has their own profile where any learning and development completed is recorded.

All line mangers are able to see all the learning that their team have completed and the system highlights what training is mandatory for each role and lets people know when they need to refresh learning in any particular topics.

Everyone learns differently so Thinqi has a host of learning resources within its library including interactive e-learning, podcasts, articles, powerpoint presentations and weblinks as well as the opportunity to book face to face and online training.

Learning needs and opportunities are discussed in supervision, 1:1's and appraisals including identifying any courses which are mandatory or specific to an individual's professional development.

Thinqi includes a booking and reporting system to assist how the Workforce Development Team plans, delivers and reports on training for all employees and managers. Access, knowledge and engagement with learning can be delivered in multiple formats to support individuals learning style and maximise their continuing professional development.

Given CIW registration is now required for both homecare and residential support workers, having all learning recorded in one central learning management system will support employees in evidencing the learning they have undertaken and facilitate the registration process.

## Well-being

During 22-23, to support the workforce there was investment in the social care trainers becoming trained in delivering connect 5, which is a 3 module course to support people with their wellbeing. Connect 5 is based upon the 5 ways to wellbeing and supports participants with their own mental wellbeing as well as the mental wellbeing of others by giving them confidence to engage in open conversations. The course focuses on a number of tools that can be used to support staff and help build resilience not only in their personal lives but also in the workplace.

During 22 - 23, 54 staff completed the Gwent Connect 5 module 1, 19 completed module 2 and 12 completed module 3.

In addition to the Gwent connect 5 programme, there are a number of resources to support employee wellbeing including the Melo website, Canopi, occupational health, employee counselling and the go to group.



# **First 3 Years in Practice**

First 3 years in practice is an important transition from student to qualified social worker. In Monmouthshire we believe it is essential that social workers are supported with a comprehensive induction, a specific Newly Qualified Social Work programme to consolidate their university learning and embed their learning into practice before undertaking the consolidation programme at either Cardiff Metropolitan University or the University of South Wales. in year 2022-2023 we supported three first year in practice students, one from adult services and two from children's services. During the year 2022-2023 the workforce team supported seven consolidation candidates, five from children's services and two from adult services.

Level	Programme
	Cardiff University x 1
1	University of South Wales x 3
	Open University x 2
2	Cardiff University x 2
-	University of South Wales x 1
	Open University x 1
	Cardiff University x 1
3	Open University x 3

# **Student Social Workers & Social Care Education**

As part of work force planning, Monmouthshire invests resource into enabling people to become qualified social workers, helping to ensure a sufficient workforce into the future. As a local authority we host students from both Cardiff University & University of South Wales. We also invest in our own workforce and sponsor staff to become qualified social workers via the Open University, whilst working in their existing roles.

In 2022 we enrolled three Social Care Assistants onto the Social Services Practitioner pilot programme. This is a 2-year, Level 4, work-based fully-funded qualification run by Bridgend College. A further three members of staff have been accepted onto the second cohort, commencing in September 2023. The qualification is recognised by Social Care Wales as an equivalent to the first year of the social work degree programme.

## Recruitment

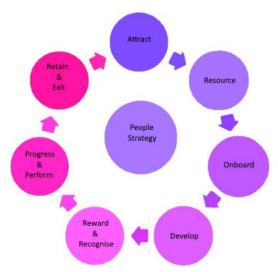
In terms of ensuring that we have the sufficient workforce, particularly in key posts around direct care, mental health, team leader posts and occupational therapy, this is an on-going endeavour. The perceptions of working in social care tend to be negative; however, in Monmouthshire we are to trying to counteract these negative perceptions and demonstrate the opportunities, career

progression, work life balance and job satisfaction that people experience who work within the sector. Attraction and recruitment of people into the social care sector continues to be a challenge. We were successful in securing a grant from social Care Wales to film a video to challenge these perceptions and support the recruitment of people into the sector – the video which can be seen below.

The impact of this video saw a 700% increase of applications within a 1 month period.



### **Our Workforce Priorities**



The All Wales Health & Social Care Workforce Strategy <u>Health and Social Care Workforce Strategy</u> - <u>HEIW (nhs.wales)</u> continues to help us set direction and forms the platform for our ongoing priorities.

Given that the council's challenging financial landscape will continue to stretch our workforce, we consider that supporting employees appropriately at each stage of the workforce *life cycle* is critically important to the overall resilience of the service.

We have developed our priorities around the 7 stages of the workforce life-cycle.

**Attract:** Use all of Monmouthshire's Social Care and Health attributes in order to be a major employer of choice in our community.

Resource: Facilitate all available talent to apply, leaving no stone un-turned.

**Onboard:** Welcome and induct everyone who joins us.

Develop: Support everyone in all corners services to grow, develop and learn.

Reward and Recognise: Everyone's contributions are recognised.

Progress and Perform: Hold regular conversations about performance and development.

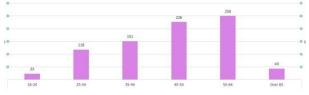
**Retain and Exit:** Encourage our people to stay and then learn from those who leave.

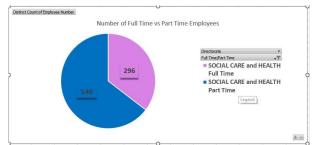
We are proud of our whole workforce and the underpinning values we all work to. We are a small local authority but we have big ambition and there is no holding back on what we can achieve together. Day in day out, no matter what, our people constantly strive to support our residents and continue helping people to live happier, healthier lives for longer in their communities.

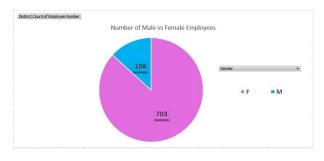
# What Does Our Workforce Look Like?

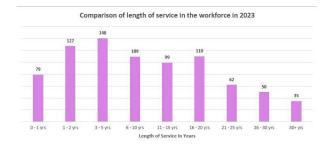


Number of employees per age bracket in Social Care and Health 2022 - 2023

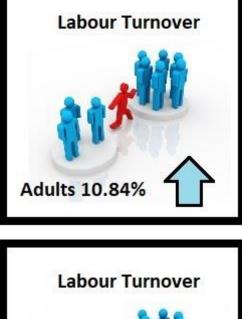
















# 9. Next Steps, Key Challenges and Priorities

This year, in the face of the post-pandemic reality of a demand heavy and resource depleted environment, we have embarked on in-depth appraisals across many service areas with the prime purpose of ensuring sustainable and viable services into the future.

In some instances this will mean continuing and, where possible, accelerating plans that are already in train such as supporting children to remain safely at home and the development of in-house placement solutions for children who are looked after. In others, it is driving us to return to basic principles of practice around how we assess, review and provide equitable services to people using strengths-based, preventative approaches. At some level, all services are inevitably having to change and respond to the current circumstances – doing so 'on the go', whilst simultaneously dealing with intense operational pressures.

I have tried to maintain balance within the report both highlighting challenges and describing how they are being addressed. In summation, my overall evaluation of the service is not a pessimistic one. My optimism springs foremost from our service base and the commitment and expertise of the workforce together with the quality of the leadership in place and the willingness within the service to be resourceful and creative - to engage in the professional thinking and knowledge build that is required to find solutions. Secondly, from the desire (which is evident across the board) to support the health and wellbeing of people in Monmouthshire in the best way that we possibly can, both on an individual basis and at a wider population level. I take optimism also from the deep-rooted partnerships within Monmouthshire that have been forged over many years. For all of these reasons, my belief is that we are well placed to face the coming years with positivity and confidence.

At very least I hope that this annual report has provided the context for what I consider to be our most pressing strategic risks and operational challenges, which I have summarised as follows:

#### Risks

- Financial sustainability of social care
- Demographic and demand pressures including complexities of presenting needs within both children and adults services
- Impact of financial pressures across the Council affecting social care
- Potential negative impact on people as a consequence of changes in how we assess and provide services
- Insufficiency of placements for children with the potential that we are unable to provide appropriate placements for individual children
- The operational pressure on the workforce and leadership within the services given the extent of the strategic and operational challenges

#### **Operational Challenges**

- Ensuring that the social care workforce is organised so that resources are deployed to best effect in order to meet demand and deliver the services changes that are required.
- The welfare of the workforce
- Ensuring that social care services are provided consistently, fairly and equitably in the context of financial restraints
- Delays and waiting times within adult social care services including assessments, reviews and provisions of home care packages, particularly the limited availability of reablement
- The need to protect resource for preventative / early help services in the face of budgetary pressures (in health and social care)
- Ensuring that early help services are targeted to the most vulnerable based on shared understanding and priorities
- Maintaining the stability of adult social care providers within the area
- Insufficiency of placements for children who need to be looked after
- Maintaining partnership working when all key partners and statutory agencies are under significant pressure

#### **Priority Actions for 2023**

• Work on targeted recruitment where it is most needed

- Recruit to key gaps in the leadership structure within adult services so that practice can be supported with appropriate levels of oversight and accountability
- Implement a quality assurance process that is digitally enabled and supports practice
- Facilitate the on-going training, support and practice development across the workforce
- Develop further clarity around how we communicate with the public and with the workforce about social care and health services
- Ensure that there is a fit for purpose case recording system that meets operational requirements and prepare for the next version of a Welsh Community Care Information System (WCCIS)
- Further develop assistive technology approaches and a joint action plan to support prevention and reablement
- Review and redesign services where this is required to increase future sustainability and viability and implement the outcomes from the disability support services reviews
- Rebalance reablement and long-term care within our in-house care at home service
- Further develop strategic and locality based commissioning and seek to expand choice for how individuals receive the care they need
- Review of front-door arrangements and Information, Advice and Assistance (IAA) within adults services with a focus on the connection between social care and community based support
- Further enhance family support services in Children's Services using Welsh Government grants
- Implement the placement commissioning strategy within Children's Services specifically regarding the recruitment of foster carers and the development of not for profit residential placements
- Use the Integrated Services Partnership to ensure good alignment of local resources against shared priorities