

Social Care & Health: Director's Report 2023/24



Foreword

This report reflects the activity within Social Care and Health between the period April 2023 – March 2024. It is my third annual report as a Chief Officer.

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 2024 – 2025.

Whilst the report relates to the period April 2023 – March 2024 I have not stuck rigidly to this and where it feels relevant I have referred to the current position or used more recent information.

The report contains:

Section 1 - Basis of the Report

Section 2 - Progress against the priorities from 2022 - 2023

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 the 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 re-balanced, 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, heartfelt motivation, professionalism and dedication 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 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 (SSWBA) 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.

2023/24 is the fourth year of reporting metrics under the first element of the framework. As there are over a hundred metrics within the framework, we have selected those that are the most relevant to support the analysis and discussion. To help demonstrate the work of individual teams and describe service user experience and outcomes, we have supplemented national metrics with locally derived performance and impact measures alongside of case study material.

How we measure and evidence our performance, and use this to help drive service improvements remains an area of on-going development both at a local and national level.

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
- Health and Social Care (Wales) Bill
- Six Goals for Urgent and Emergency Care (2022)

- A Healthier Wales
- Strategic Programme for Primary Care
- Equality Act 2010
- “More than Just Words (Welsh language) Strategy” (Mwynna Geiriau),

At a more local level, social care is delivered in the context of the Regional Area Plan (2023) and the Council's Community and Corporate plan (2022 - 2028) particularly 'A Safe Place to Live' and 'A Connected Place Where People Care'.

The report provides a broad overview and illustration of what happens within social care, balancing descriptive passages with honest self-evaluation using a range of methods and drawing on both qualitative and quantitative data. Where possible I have triangulated self-assessment 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
- 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 2022 - 2023

In this section, I provide headline comments regarding progress against the areas that I identified as key priorities last year.

Priority: Work on targeted recruitment where it is most needed.

Progress: Over the year **Children's Services** has reduced vacancies into key child protection posts. The use of agency workers is now predominantly limited to covering long-term sickness and maternity leave. There were **7** agency deployments in the service at year end, a decrease of **5** from the year before. In part, this has been achieved by pursuing overseas recruitment in partnership with

Social Care Wales, a scheme which has welcomed **4** new, permanent child protection social workers into the service.

The service has retained stable leadership with no current vacancies. There has been recent successful appointments of **2** Service Manager roles which has increased leadership capacity particularly into safeguarding and children's placement development.

The service continues to prioritise social worker retention through 'grow our own' schemes and through professional training and support. The CIW inspection report of children's services found that generally morale within the service was good and that people would recommend working for the service. Nevertheless ensuring a sufficient qualified and experienced child protection workforce remains a challenging area and is a constant area of leadership attention.

Adult services continue to have challenges in the recruitment of mental health social workers, specifically those with Approved Mental Health Practitioner status (AMHPs). We need 3 additional AMHPs in the team to meet the accepted minimal requirement. We have plans over the next 2 years to support social workers through AMHP training.

Challenges remain in the recruitment of Occupational Therapists, otherwise the workforce position in social work and direct care within adults services is generally stable.

Priority: Recruit to key gaps in the leadership structure within adult services so that practice can be supported with appropriate levels of oversight and accountability.

Progress: We have recently adjusted the leadership structure to reflect the current priorities of the service. This saw a successful recruitment into the post of Service Manager for Direct Care and allowed the remaining 2 Integrated Service Manager roles to have shared oversight across the 3 integrated teams. This is beginning to strengthen a one-service ethos and bring consistent approaches and opportunities for sharing good practice across areas. We have made 2 appointments at Team Manager level, and will be securing a 3rd Team Manager during 2024 to complete the structure.

Priority: Implement a quality assurance process that is digitally enabled and supports practice in line with areas for improvement indicated within the CIW inspection report of Adult Services July 2022.

Progress: FLO (our social care management system for Adult Services) has been developed so that there is a digital workflow pathway for signing-off assessments and care and support plans. [This was already in place within Children's Services]. A Quality Assurance and Learning Group (QALG) was established and has now been in place for over a year. This has helped increase management accountability and control and has provided opportunities for practice learning, as well as ensuring better equity and consistency around eligibility and the provision of services.

Improving the accuracy of our data and increasing effective use of management reporting remains an area of focus for the year ahead, with a particular emphasis on data validation as we prepare for the implementation of a new social care management system in 2025.

Priority: Facilitate the on-going training, support and practice development across the workforce.

Progress: This has remained an area of strength across the service with key achievements in training within Direct Care, particularly in the new Severn View Parc; the roll out of THINQI and progressing training for foster carers to an in-house model.

Our training needs evolve continually in accordance with the priorities and demands of the service. Over the next year our training programme will include the roll out of a revised practice framework for children's services 'Keeping Children Safe' and further work in adult services around Collaborative Communication, applying the Hierarchy of Support and the development of a finance and legal module for adult care.

Priority: *Develop further clarity around how we communicate with the public and with the workforce about social care and health services.*

Progress: We have used press releases and landing pages on the Council's website to communicate with the public about specific issues. More generally, we have recently updated some of our leaflets and the social services website to promote easy access to help and information. Individual service areas, such as social care recruitment, Foster Wales Monmouthshire, the carers' service and Assistive Tech have given thought to building their media presence and producing communications such as newsletters and social media releases to raise their profile and keep people well informed and connected. A particularly good example of internal communication was the Festival of Family Support hosted by Children's Services in October 2023. However, there is still more to do in this area. Our aim remains, to ensure that our workforce and people using social care services are informed and updated about developments and involved in designing the shape of future services.

Priority: *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).*

Progress: This is now in early stages and is a major priority for 2024/25. We have established a regional cluster which is moving forward with a procurement process. In the meantime we are taking steps to prepare for the move to a new system through data cleansing and validation. We are looking at how we will ensure that the right resources are in place to support local implementation and how we can mitigate key risks.

Priority: *Further develop assistive technology approaches and a joint action plan to support prevention and reablement.*

Progress: Using assistive technology to increase people's independence and well-being has moved forward at pace over the last year. We have established a partnership with housing colleagues and developed a 'digital coach' role which has helped bridge the gap between Assistive Tech and social care practice. Developments in this area are helping us to achieve good outcomes for people at lower cost for the Council. We are excited to move forward over the next year with more teams and services areas getting involved.

Priority: *Review and redesign services where this is required to increase future sustainability and viability and implement the outcomes from the disability support services reviews.*

Progress: We have taken forward the outcomes of the two reviews that were undertaken, although progress is slower than we would like in some aspects. We are currently remodelling My Day My Life and Individual Support Services into a single service with the emphasis on individually tailored support plans aligned to people's personal outcomes. The development of suitable and fully accessible service 'bases' is progressing within the Monmouth area (Overmonow Family Learning

Centre), however, there have been delays in the North (Melville Centre for the Arts). The residential respite service at Budden Crescent was de-commissioned in January 2024. The team continue to aspire to the aspirations of a high quality flexible respite service that offers choice and supports individual outcomes through the use of Shared Lives, Direct Payments and commissioned residential respite. We would still like additional respite options for people who have higher level needs and wheelchair users.

Priority: Rebalance reablement and long-term care within our in-house care at home service.

Progress: We have been able to increase our capacity to provide a reablement service to those who would benefit from it. During the year we provided **331** packages of reablement representing a significant increase from **184** during 2022/23. Whilst this is good progress, we want this to improve further over the next year. Linked to our commissioning work we are seeking to further increase the availability of in-house home care to support reablement as opposed to providing long term care, and to increase the number of people accessing the opportunities that reablement provides.

Further develop strategic and locality based commissioning and seek to expand choice for how individuals receive the care they need.

Progress: We have developed a comprehensive strategy for how we commission home-care through increased block purchasing and have started to engage with local providers for how we intend to take this forward. Implementing the strategy is a key objective for 24/25. At the same time, micro-care within Monmouthshire goes from strength to strength allowing people increased choice and control over how they receive care and support. Overall there is increased capacity across home care which has assisted in allowing us to meet **96%** of demand.

Priority: 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.

Progress: We have reviewed our arrangements and identified where making some changes could improve the way we respond to people contacting social care. We are trialling the use of 'community conversations' in the South to see the extent to which this can support people to meet their personal wellbeing goals without the need for formal care and support. Partnership working is key to this and we have increased the leadership capacity within the Integrated Wellbeing Network to allow for a clear focus on this area. Progress in our front-door arrangements is impeded by the intensity of demand. Consequently, waiting times for social work and therapy assessments remain much longer than we would like. Developing and deepening our preventative and early help approaches to help reduce demand and maximise people's independence for as long as possible is a priority for the year ahead.

Priority: Further enhance family support services in Children's Services using Welsh Government grants.

Progress: This year we have further enhanced our family support services. The Family Time Service was expanded to provide intensive supervision to children most at risk and implemented the Family Resolutions and Family Reconnect teams. These further developments within the service are directly supporting a safe reduction of the number of children needing expensive placements. This is helping us achieve better outcomes for children and increasing our ability to generate savings and move towards longer term sustainability.

Priority: 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.

Progress: This is in progress. We are increasing our supply of suitable placements and this year purchased one property for development into a residential children's home and identified a further 2 pipeline projects. The recruitment and retention of foster carers remains an area of significant challenge. Overall, the lack of suitable and available placements for children remains concerning - it puts additional strain on the service both from a financial and a workforce perspective and means that sometimes we can't find the right placement for an individual child.

Priority: Use the Integrated Services Partnership to ensure good alignment of local resources against shared priorities

Progress: The Integrated Services Partnership is in a strong place, with inter-agency relationships well developed across the third sector, social care and Primary & Community Care including the Neighbourhood Care Networks (NCNs). This has allowed us to move forward on areas of joint priority such as supporting hospital discharges, establishing community based projects to support people with dementia and developing training for home carers in 'vital signs' to keep people safe and well. Maintaining trusting and open relationships across the partnership will be critical as we continue to navigate the challenges and pressures within the social and health care system.

3. Children's Services

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 & 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

Overview of the year

2023 - 2024 has been another challenging year within children's services. Responding to operational demands and driving forward significant policy developments have converged to put pressure on all aspects of the service. Nevertheless, we have maintained our course with strong and stable leadership and a clarity of intent that has allowed the service to move forward positively.

Over the year, the number of contacts into the 'front-door' of the service has been particularly intense. We received **7071** contacts into the service representing a **21%** increase from the year before compared to a national increase of **11%**. The number of contacts received (4,452 per 100,000) was higher than the national average (4,223 per 100,000) as of March 2024. Similarly, the number of child protection enquiries received (746 per 100,000) was higher than the national average (289 per 100,000) as of March 2024 representing an increase of **68.8%**, compared to an increase of **26.2%** nationally.

The team has done well to process, review, and follow up each of these individual contacts achieving the expected standard of making a decision about how contacts should be progressed within 1 working day at a rate of **99.9%**. Nevertheless, the sheer volume meant that whilst we kept children safe there was less time for strength-based engagement with parents and children.

We are keen to understand what factors are driving the increased levels of contacts in order to consider the best way of intervening. We are currently undertaking a detailed analysis of referral activity over the last year. Early indications suggest that there are a number of contributing factors including:- i) the impact that lock downs had during COVID on children's development and family functioning; ii) increasing societal and family pressures because of external factors such as the cost of living; iii) the challenging operational and financial context within referring agencies, such as schools and health.

In line with our objectives for the year, we have retained our focus on two interlinked aspects of service development. The first supports our commitment to ensuring that children only come into care when absolutely necessary and that children are supported to leave care in a safe and planned way when it is the right time for them.

The first commitment has seen the further expansion of our suite of specialist family support services. We have expanded the Family Time Team to provide support and supervision to children living at home in higher risk situations; we have implemented the Family Resolution Team to work with families in conflict; and we have developed the Family's Reconnect service to support the safe rehabilitation of children returning to their families and communities. Our integrated family support provision supports some of our most vulnerable families to navigate critical times, often working with high levels of risk and volatility.

As a result we have seen a further reduction in our Children Looked After (CLA) numbers. At year end the number of CLA was **200** including **15** Unaccompanied Asylum Seeking Children (UASC) compared with year end 2023 at **211** including **10** UASC. This means our base line figure has reduced by **16** children (201 – 185). Similarly, we have maintained a high percentage of children exiting the child protection register because of the risk of harm being reduced together with an extremely positive rate of children requiring re-registration within the year at **less than 1%**.

In October the service hosted a 'Festival of Family Support' to raise awareness of the family support we offer and how the different elements work together as a coherent whole.



1 - Staff members at the Festival of Family Support





The second priority area was the development of our commissioning and placement strategy – with specific emphasis on the development of in-county residential and support living accommodation. An effective partnership between Children’s Services and the Estates team has allowed us to move forward at pace such that during the year we established 2 supported accommodation provisions for unaccompanied asylum seeking young people; purchased one property for development of a residential children’s home and identified a further 2 pipeline projects. Our report to Council in April 2024 provided political endorsement of our plans and established the mechanism to realise them through business cases, the use of available grants and prudential borrowing. Establishing a residential workforce and bringing the projects into operation is a priority for the year ahead.

In the meantime, however, finding appropriate placements for children remains as challenging as ever. The policy direction of removing profit from children’s care has created instability and uncertainty within the provider market (for both foster care and residential care) resulting in placement insufficiency and driving up the cost of placements. At the same time, we continue to gain little ground in the recruitment of in-house foster carers despite considerable effort and attention. This year saw our number of foster carers increase from **36** to **38** (including 7 new carers) with a corresponding increase in placement capacity from **64** to **67** (at year end 40 children were placed). Our current projections for 2024/25 include a further 6 carers currently going through the assessment process. During the year ahead we will be reviewing our overall offer to foster carers to see where and how we can encourage more carers to join our in-house team.

Finance

ACTUAL OUTTURN £	REVISED BUDGET £	OUTTURN VARIANCE TO BUDGET £
22,355,885	22,175,075	180,810

From a budgetary perspective, Children’s Services have been able to capitalise on progression planning for individual children, bringing children into placements that are closer to home and more in keeping with their personal outcomes, including supporting some children to return home, or, for older children, into more independent settings. The additional family support services which have been put in place to support this endeavour have been done so using Welsh Government grants to

avoid in-year pressure on the budget. This has allowed us to work within our budget envelope this year, including delivering our required savings of over £1mil.

There are significant financial risks within the service. The WG grants being used to support the service currently with regard to responding to the new Health and Social Care Bill (Eliminate) and the Programme for Government 'Radical Reform' of Children's Services are due to cease in April 2025.

Added to this is the continued over-reliance on agency staff working in the service particularly in child-protection. Although this has improved over the year, it remains a budgetary pressure.

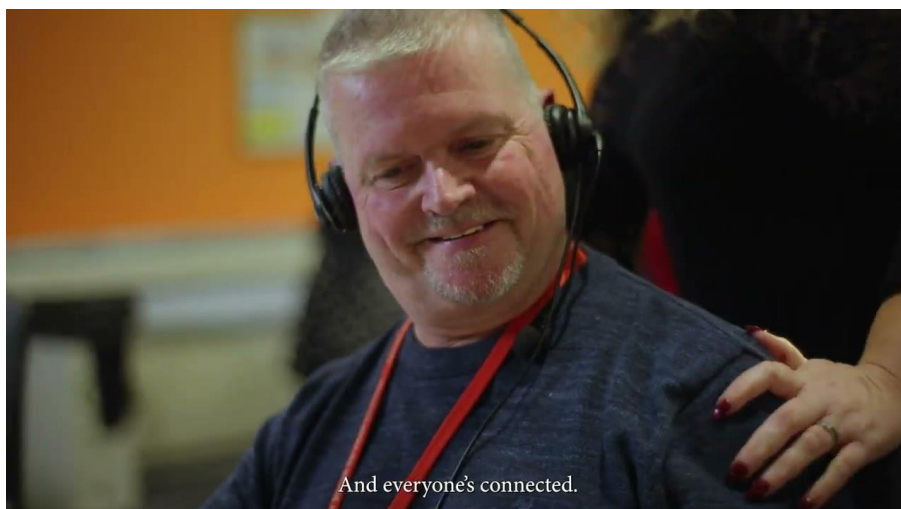
At the end of Jan 2023 we were informed that Children's Services would be subject to a Care Inspectorate Wales inspection. The inspection subsequently took place in February 2023. We were broadly happy with the outcomes which recognised many areas of good practice as well as providing a different perspective on some aspects of the service where we know there is room for improvement. Implementing the outcomes from the inspection will be a priority over the next year, particularly around supporting strengths-based working at the front-door. There is further information about the inspection findings and the service response below.

With the requirement to respond to a shifting policy context, lead the service through reform and practice change, and manage day to day demand pressures and operational risks, it is understandable that leadership capacity within the service has been under considerable strain.

We ask a lot of our children's workforce at all levels within the service. Ensuring that we continue to prioritise having sufficient, well trained and supported practitioners is a critical success factor for the service. The priority given to the workforce was recognised and commended within the CIW inspection report:

"Nearly all staff report being well supported by their colleagues and managers to do their job. Most staff would recommend working for MCC. This is underpinned by a 'one service and team' ethos with practitioners, managers, and leaders being described as motivated, accessible, and supportive. Given the contextual challenges above, it is a credit to leaders that staff have been supported through these changes and report these strengths."

Below is this year's recruitment video featuring members of the workforce describing their experience of working within Children's Services.



A summer picnic for Children's Services has become an annual tradition. It proves a great morale boost and provides an opportunity to celebrate, take some well deserved time out and spend time getting to know each other better.



Care Inspectorate Wales Inspection- Feb 2024

Care Inspectorate Wales (CIW) carried out a performance evaluation inspection of Monmouthshire County Council's Children's Social Services in February 2024. This was an inspection of children's services only, as adult services received an inspection in July 2022. The purpose of this inspection was to review the local authority's performance in exercising its social services duties and functions in line with legislation, on behalf of Welsh Ministers. CIW sought to answer the following questions aligned under the principles of the Social Services and Well-being (Wales) Act 2014 (The 2014 Act).

People - voice and control: How well is the local authority ensuring all people are equal partners who have voice, choice and control over their lives and can achieve what matters to them? How well do professionals ensure children's lived experience and individual needs are understood and included in decision making?

Prevention: How well is the local authority ensuring the need for care and support is minimised, and the escalation of need is prevented whilst ensuring that the best possible outcomes for people are achieved? How well do leaders and managers understand the experiences of children and families that need help and protection?

Well-being: How well is the local authority ensuring that children are protected and safeguarded from abuse, neglect and any other type of harm? Do children receive the right help and protection because of the application of appropriate thresholds and effective information-sharing?

Partnerships: How well is the local authority able to assure itself effective partnerships are in place to commission and deliver fully integrated, high quality, sustainable outcomes for people? How well are children supported and protected through effective multi-agency arrangements?

The scope of the inspection included:

- Evaluation of the experience of children at the point of performance evaluation inspection.
- Evaluation of the experience and outcomes people achieve through their contact with services.
- Evidence of the local authority and partners having learnt lessons from their recent experiences and actions taken/plans for service development and improvement.
- Consideration of how the local authority manages opportunity and risk in its planning and delivery of social care at individual, operational and strategic levels.

A report about the CIW inspection was taken into People Scrutiny Committee in July 2024.

Monmouthshire County Council Performance Evaluation Inspection Children's Services

Undertaken Feb 2024

Published April 2024

2 - Presentation slides from CIW Inspection Scrutiny held in July 2024

Scope and Purpose

- To review the Local Authority's performance in exercising its social services duties and functions in line with legislation
- Principles of the SSWBA:
 - People (Voice & Control)
 - Prevention
 - Wellbeing
 - Partnerships
- Focus on children's experience
- Outcomes of people's contact with the Local Authority
- Plans for service development and improvement
- How the Local Authority manages opportunity and risk in its planning and delivery of social care at individual, operational and strategic levels

Methodology

- 4 inspectors completed 4 weeks of pre-inspection work and a week of field work
- 34 social care records, 6 of which were tracked in more detail to understand the person's experience in more depth
- Tracking included having conversations with the child / young person, their family or carers, allocated social worker, their line-managed and other professionals involved
- Surveys were issued to workforce, partner organisations and families
- Specific engagement with 6 Children Looked After and 8 foster carers.
- Interviews with Children's Services workforce, partner organisations from statutory and third sector agencies
- 81 individuals altogether
- Review of service documentation including service data and KPIs, service plans, operational procedures, strategic documents, complaints / compliments report etc

Next Steps

- CIW routine monitoring
- Report shared and discussed with Cabinet
- Shared with the children's services workforce and partners including the Corporate Parenting Panel
- Brought into People Scrutiny Committee
- Inspection action plan in place and being implemented

Summary – positives

- Recognised significant challenges faced by all LAs e.g. demand, complexity, budgetary pressures, recruitment.
- Mention was made of the work done to achieve safe reduction of CLA and plans in place to respond to eliminate agenda {decrease in the number of CLA of 2.0%, compared to an increase of 0.8% nationally}
- Positive on-going development and improvement of family support services was recognised, and that a preventative approach underpinned the whole service
- Positive team spirit led by motivated, accessible, and supportive managers at all levels with the majority of staff saying they would recommend working for MCC Children's Services

"MCC leaders and staff are proud of the service they provide to children and families. Leaders have a good understanding of the service strengths and areas for improvement. Service development plans are in place which address national demands and the challenges facing public sector organisations."

Summary – areas for improvement

- Concerns raised over compliance with statutory requirements for safeguarding children specifically the timeliness of child protection visits and child protection case conferences
- Reported a renewed focus on practice but more work to be done to ensure practice is consistent across the service [particularly in the earlier parts of the child protection process] and ensuring that QA is in place.
- Areas for attention:
 - impact of demand at the ‘front-door’
 - aspects of child protection
 - specific elements of practice
 - strengthening quality assurance
 - workforce planning

Front-door

- Front-door deals with new contacts and when required manages CP inquiries (S47s) and holds a case until the initial child protection conference
- Context of high demand and volume
- Impact on workforce
- Impact on practice, specifically lost opportunities for strengths-based approaches early on and over cautious approach to risk

Specific actions in progress:

- Strengthening data analytics to understand referral patterns and what this is telling us so that we can engage with referring agencies
- This will also help ensure we have the right level of resource at the front-door
- Re-focus on practice framework ‘Keeping Children Safe’
- Development of regional threshold document

Demand Context

- The number of contacts received (4,452 per 100,000) was higher than the national average (4,223 per 100,000) as of March 2024.
- There was an increase in the number of contacts received of 29.7%, compared to an 11.0% increase nationally, from April 2023 to March 2024 (7071 compared with 5825)
- The number of child protection enquiries received (746 per 100,000) was higher than the national average (289 per 100,000) as of March 2024.
- The number of child protection enquiries received increased in Monmouthshire by 68.8%, compared to an increase of 26.2% nationally.

Child Protection Stat Visits - Compliance & Quality Assurance

- A stat visit is when a social worker sees child who is on the CPR. They are defined in the regulations and must be completed within specific timescales.
- Stat visits are not the only way in which children on the CPR are 'seen'
- 67% compliance at the time of the inspection compared with national average 73%

Specific Actions:

- Understanding, supporting, recording, auditing
- Providing additional individual support and regular training slots around the stat framework
- Resolve recording issues
- Ensuring accurate management information
- Audit programme being implemented

Child Protection Conferences

- Child Protection Conferences take place when a child is assessed as being at on-going risk of significant harm; a CP plan is developed and implemented through a Core Group with reviews and eventual De-registration managed through the CP conference process.
- Issues were identified regarding timeliness and variability in how the conferences were managed, specifically in respect of parental involvement.
- Some plans were found to be service led rather than outcome focused

Specific Actions

- Strengthen the role of the Safeguarding Unit in providing increased oversight for children from S47 (child protection inquiry) to Core Group and development of the CP plan
- Scale down the use of external CP chairs and re-emphasise practice expectations for chairs
- Reclarify business processes and expectations around timeliness of conference reports.

Child Protection Practice

- Following initial conference CP work is undertaken by the Family Support and Protection Team
- Significant positive practice identified particularly within pre-court (CP) work
- Interface with the front door takes some time to re-align
- But numbers have stayed strong (89 at end of year represents slight reduction despite demand at front door) and a very low re-referral rate following de-registration (0.7%)
- Managing complexity and risk is a major challenge and puts significant pressure on the workforce

Specific Actions:

- Re-focus on practice framework 'Keeping Children Safe' framework
- Look at how we pull forward 'strengths-based interventions' that could make a difference early on in CP process

Workforce & Leadership Capacity

- Positive recognition workforce planning is given constant strategic attention with some innovative practice and high-quality campaigns
- All Wales Pledge has supported agency exit planning
- Where we focus leadership time and attention makes a real difference (e.g. safe reduction of CLA and placement development)
- We have built-in some additional leadership capacity to help with the current leadership challenges
- Sufficient high-quality workforce makes a real difference in long-term (financial) sustainability and significantly improves outcomes for children
- Plan is to undertake a wider capacity / resource review over this year to re-look at the structure overall and demand around key areas

Confidence Levels & Key Risks

- Broadly happy with many positives, despite the challenging context
- Confirmed we had a good understanding of our own strengths / areas for improvement – whilst providing additional perspective and opportunity to ensure we are refining and prioritising service plans appropriately
- Many of the issues raised already represented in existing service plans / work in progress
- Positive experience of the process and an open and engaged relationship with our lead inspector

Key risks

- Connecting Care
- Eliminate
- Budgetary context and range of financial pressures
- Fragility across the service
- Resourcing and competing priorities and challenges

Summary of key actions so far.....

- Appointed a new SM to work strategically to address some of the challenges at the front-door
- Put in some additional temporary capacity at the front-door
- Launched the threshold document to assist referring agencies
- Appointed of a new SM to take forward placement development
- Re-launched the Keeping Children Safe practice framework with 2 days of mandatory training for all practitioners over the summer
- Put in place additional support and knowledge building for social workers around statutory compliance
- Improved compliance with CP stat visits [up to 79.9% within timescales at Q1]

Key Achievements Recognised

- Children's meaningful participation in service development and having a voice
- There is a coherent approach to early help and prevention
- Family support and preventative services work closely with social workers, to ensure families benefit from outcome-focused interventions
- Foster carers have good quality information and feel listened to
- Nearly all reviews for CLA are held within statutory timescales and foster carers describe the child's view as being prominent within the review process.
- Managers provide reflective spaces to support workforce resilience and team morale
- Positive practice within the 'public law outline' supports robust analysis and proportionate decision making in the latter stages of a child's journey through safeguarding processes
- Social workers have access to range of multi-disciplinary perspectives
- Leaders understand the needs of people in their area and provide good strategic direction to meet these needs and service demands."
- Most staff would recommend working for Monmouthshire

Key areas where we are performing well which were highlighted in the report include:

1. Significant challenges faced by all LA's were recognised e.g. demand, complexity, recruitment, budgetary pressures.
2. Mention was made of the work done to achieve safe reduction of CLA and plans in place to respond to eliminate agenda (decrease in the number of CLA of **2.0%**, compared to an increase of **0.8%** nationally).
3. Positive team spirit led by motivated, accessible, and supportive managers at all levels with the majority of staff saying they would recommend working for MCC Children's Services.
4. Positive on-going development and improvement of family support services was recognised, and that a preventative approach underpinned the whole service.

"MCC leaders and staff are proud of the service they provide to children and families. Leaders have a good understanding of the service strengths and areas for improvement. Service development plans are in place which address national demands and the challenges facing public sector organisations."

"The local authority historically had a high population of Children Looked After (CLA) and service plans have focussed on safely reducing the number of children Looked After by MCC."

"Nearly all staff report being well supported by their colleagues and managers to do their job. Most staff would recommend working for MCC."

"People find it easy to contact social services and they are treated with dignity and respect. The majority of people feel listened to and receive useful Information, Advice and Assistance (IAA)."

"The Children's Commissioner for Wales describes the MCC Participation Strategy as positive practice and 'an excellent example of how services are embedding the principle of participation into their ways of working'."

Key areas of improvement highlighted in the report include:

1. Concerns raised over compliance with statutory requirements for safeguarding children specifically the timeliness of child protection visits and child protection case conferences.

2. A renewed focus on practice but more work to be done to ensure practice is consistent across the service [particularly in the earlier parts of the child protection process] and ensuring that QA is in place.

3. Impact of demand at the "front-door".

4. Strengthening Quality Assurance.

5. Workforce Planning.

All recommended areas of improvement have been recognised by the council and an inspection action plan is in place. Improvement has already been made in key areas with Q1 of this year seeing an increase of Child Protection Visits from **67%** at the time of inspection to **79.9%** which is above the national average of **73%**. A new service manager has been appointed to take forward placement development and the *Keeping Children Safe* practice framework has been relaunched since inspection with 2 days of mandatory training for all practitioners in place for summer 2024.

How we Performed in Children's Service



3 - Overview of Children's Services

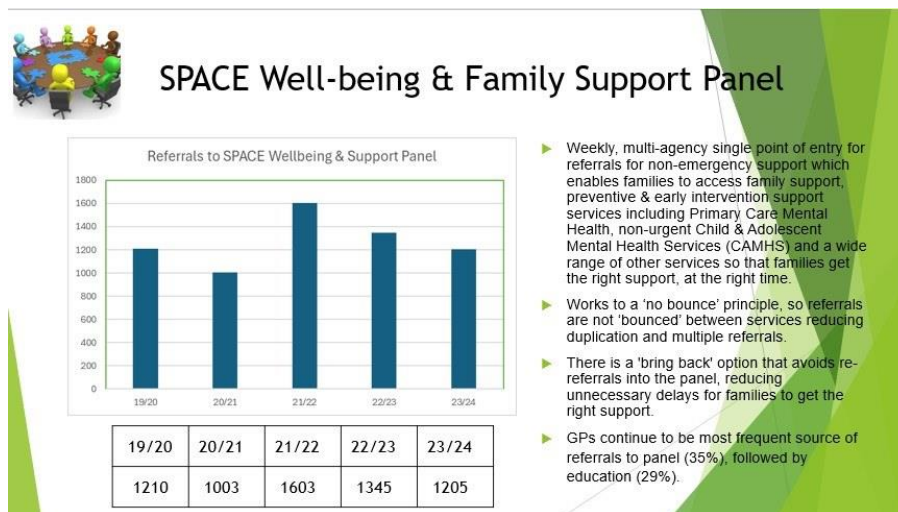
Prevention and early intervention

Providing support as early as possible to families who need it the most is the basis for achieving better outcomes for children. We have established a coordinated approach to early intervention and prevention in Children's Social Services through our multi-agency panel arrangements. Support offered includes community-based services such as School Based Counselling and The Integrated Families and Community Together teams and includes a clear pathway to accessing mental health support for young people. Demand remains high across all early help services. We have maintained low waiting times by building capacity through using group work approaches and supporting student placements. For example, Building Stronger Families has reduced the waiting list from around 6 months to a few weeks. This ensures that families get the help they need in a timely way and supports good outcomes for children.

Evaluation and feedback of family support services indicates clear and positive outcomes for families. During 2023/24, **100%** of families reported a positive outcome following a Building Stronger Families team intervention.

Early help services are the foundation for increasing the numbers of children who are able to live safely at home throughout their childhood. We have seen an ongoing reduction of children looked after and stable child protection figures which indicate the positive impact of preventative services.

A key risk in this area, is that much of prevention work is grant funded.





Integrating Families & Community Together Team (InFaCT)

The last financial year 2023/24 has been InFaCT's first full year as a children's services community and place-based project and sees the completion of its transition from the telephone-based advice line that had operated because of (and during) Covid, through to 2022/23.

InFaCT operates two streams of service within its community-focused model:

- 1) Direct service delivery
- 2) Networking and co-production



Direct service delivery

Our direct service delivery works within themes of social prescribing and community connection, linking families and professionals with existing community solutions to problems, and helping children, young people and parents navigate the often-complex support systems of referrals and service thresholds.

- 72 requests for support were received Apr 2023 – Mar 2024.
- 92% of these requests were closed with a successful outcome i.e., InFaCT was able to source a solution to the problem or need.
- Themes of need for families included the following:

Finances, household goods, food banks/vouchers, education and learning, employment, school uniform, children's toys, housing, parenting support, child and adult counselling, disabilities and additional needs, sports and exercise, activities, groups and social isolation.



"effective quick support"

"invaluable" to signpost/refer individuals to"



Networking and co-production

Our networking and co-production work goes beyond participation in local community conversations towards identifying gaps in child, young person, family and community support needs, and developing opportunities for local people and support agencies to exchange resources and collaborate on innovative responses to the problems that they face.

- We worked with local wildlife and outdoor spaces enthusiasts to develop a summer programme of outdoor activities for young people.
- We collaborated with key partners across the local authority, third sector and voluntary community groups, to create the first (hopefully of many) children, young people and family networking forum.
- We are collaborating with key partners across the local authority, third sector and voluntary community groups, to create community engagement events. So far, we have timetabled 3 school-based and 1 community event for the year ahead.



"What a wonderful service. Katie has been our go to for so many queries and help with families and schools. Thank you for your support."

Building Strong Families Team (TAF)

- ▶ BSFT is a small team who provide a 12-week intervention for families that feel they may need some support. The BSF team recognise that it can be hard to ask for help with the most difficult job in the world, Parenting. It may include support with routines & boundaries or managing children's emotions or behaviour. BSF can work with other professionals to arrange a TAF meeting to build a network of support for families.
- ▶ In 23/24 BSF have provided NVR support for parents, which has received positive feedback and supported parents to care for their teenagers, recognising the increased need in this area. In addition, BSF workers have trained in take 3 parenting this year a programme designed to support parents with teenagers.
- ▶ The reduction in the number of referrals, is due to improvements made in assessing the right service for families. As noted below this also has increased the % of families reporting that the intervention was successful.
- ▶ The number of step-down referrals from Children's Services has increased significantly this year by 32%.

Your willingness to attend meetings, and to advocate for us as a family has been great and our daughter very much enjoyed her time spent with you in the direct work.

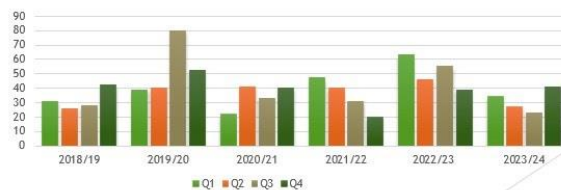
Thank you so much for the non-judgemental advice, the support, your kindness towards us and for being there at a difficult time. You have made such a difference to our family

Building Strong Families Team (TAF)

% of families that have reported a positive outcome

2018/2019	2019/2020	2020/2021	2021/2022	2022/2023	2023/2024
59.6%	75.53%	84%	84%	87.5%	100%

Referrals to BSF



"Our worker, listened to both of us and helped us, we really liked her she made us feel safe like we really mattered. She helped us move schools which made us love school again! and make new friends who really care"

11- & 12-year-old sisters

MONMOUTHSHIRE
YOUNG CARERS SERVICE



"...an amazing day out on the Wye...what stood out for me most is how a group of young people who didn't know each other fully, got on so well and seemed to build some really meaningful relationships through the day. This project continues to be generally super impressive from all angles 😊"

"Lovely day out despite the weather. Transport worked very well although was a little cramped. Children would have preferred a little longer there, it was a little rushed, but the children thoroughly enjoyed themselves and thank you for a lovely day out"

- ▶ The Young Carers Service has been delivered by MCC since April 2021. It is a small team offering 1:1 and group support, guidance, and social activity opportunities to all young carers across the county. The young carers forum continues to be an active driver of the young carers service.
- ▶ There are over 200 young carers known to MCC, who are receiving information and access to activities, and support with their emotional wellbeing and guidance on skills related to their caring role.
- ▶ Over 120 young carers (not including family members) came on trips and activities in the year ranging from bowling, outdoor pursuits, and theme parks.
- ▶ 43 young carers received one-to-one support. We delivered 11 group cohorts in comprehensive schools; 9 group cohorts in primary schools and 4 community group cohorts. Our groups offered young carers the chance to explore and receive guidance on their role while also offering skills on budgeting, household tasks and duties, and cooking.
- ▶ We held our first family fun day at Caldicot Castle in July 2023, and this was well attended by over 70 people.
- ▶ We received a very generous donation from Rogiet Women's Institute as their support agency of choice for the year, which will go on to fund more group activities and materials.



Creative Therapies Team

- ▶ Creative Therapies are a team of Play Therapists and Family Therapists regulated by the Professional Standards Authority, working within Monmouthshire.
- ▶ The referrals come from the SPACE Well-Being and Family Support Panel, though families can also contact the Family Therapy service directly for support.
- ▶ The team deliver one-to-one and group-based support to families and children across the county, working within schools and community venues.
- ▶ The work is varied. Both the Play and Family Therapists focus on the needs of their clients. Some children can receive 20 sessions of Play Therapy; however, others can work with their therapists for much longer. This is also true for Family Therapy.
- ▶ The Play Therapists deliver a wide range of therapeutic interventions, all of which are tailored to each individual child's needs.
- ▶ The Family Therapists offer interventions that cover a wide range of needs, from systemic coaching, individual therapy, Non-Violent Resistance (NVR), and traditional Family Therapy approaches.
- ▶ In addition to delivering therapy, the team will also deliver psycho-educational parenting workshops, consultations with schools and other professionals including social care, and supervision for other professionals working with traumatised children.

"I have a lot going on and coming to see you helps me to feel less overwhelmed and helps me to manage. You are helping me feel like me again. I felt I have a voice in here. I can talk about things that are bothering me instead of hiding them like I normally do" - Child

"You make it fun. You have good activities to do whilst we talk. You make it fun, whilst I talk about my problems. You give me good advice, so I can talk about my problems and get it off my chest" - Child

"You have been amazing, and our child has made such an advance on his trauma related experience. You have made a huge difference to his future." - Carer

School and Community Counselling Team

- ▶ The service continues to offer its 1:1, group and critical incident support, alongside the teacher and parent consultations that increase its impact 'outside' of the counselling room. The service is represented in the 4 comprehensives, has an alternate provision stream (EHE, EOTAS, PRS), community locations and an online/phone therapy offer.
- ▶ The team has broad expertise in terms of therapeutic modalities, from humanistic/existential counselling, to cognitive behavioural therapy and art psychotherapy; with enhanced trauma-informed training and practice and coordinating our work within the whole-school approaches ethos.
- ▶ During the 23/24 school year the service received over 350 referrals and delivered the following:
 - ▶ 150+ young people were supported with counselling and psychotherapy. 1000+ counselling and psychotherapy sessions were delivered.
 - ▶ YP Core (our quantitative measure for showing change) continues to show consistency between 4-7 points to the positive. i.e. a reduction from 'moderate' to mild/low level' mental health and wellbeing difficulties.
 - ▶ We continue to support teaching/education staff, and parents, with identification and consultation of young people's wellbeing needs, as an integral part of our work for most young people who consent to this more collaborative approach.

School and Community Counselling Team



Our young people say: i think the counsellor was incredible with helping me she helped me grow as a person putting my worries behind me, i felt i could always talk to her about anything with no judgement shown, she always praised me for my achievements that didn't seem big to anyone else but were in fact massive in my growth. I thank the service so much.

Our schools say: "We are always grateful of the support that we are offered through the counselling service, and we know our students value the support that is given to them by the team. They work closely and supportively of the school and offer not only student support, but helpful advice and guidance for staff".

Challenges and Opportunities

- ▶ Demand has maintained across all services - we have continued to use volunteers & students to build up capacity and resilience. School and community counselling has made a 50% improvement on waiting lists referrals carried forward compared to last year. BSF has reduced the waiting list from 6 to 8 months to 6 weeks through refining process and better communication with families.
- ▶ All teams are moving forward on their Participation Action Plans & we have implemented QR codes for feedback from parents and young people. We have included Young people in interviews and plan to continue to use data to refine & improve services.
- ▶ There has been a change to the SPACE WELLBEING referral process which is likely to be responsible for a reduction in BSF referrals . FGC, BSF and MED attended the School and community fayre and met with children, parents and carers. Over the summer months we are also visiting school and GP surgeries to promote awareness of our services to families.
- ▶ Focus support on emergency needs for Example: Ukrainian refugees and critical incidents in schools.
- ▶ Context issues continue to challenge the services such as cost of living, fuel and food poverty, housing costs and energy costs which has affected all income groups.
- ▶ Work with schools to explore how young people might be better supported around particularly stressful times & work with partners to increase their understanding of trauma informed approaches and emotionally based school avoidance.
- ▶ Lack of available community venues can be a challenge delivery therapy and other support throughout the county.

Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Prevention and early intervention (Children)					
Local	Percentage of families supported by early help services who report being helped with matter to them (pre statutory services)	84%	84%	87.5 %	100%

The Front Door (Early Help and Assessment Team)

This year has seen high demand and volume at the front door of children’s social care. The front-door receives contacts, completes assessments and undertakes child protection inquiries. The rate of contacts received during March was higher than the national average, as was the rate of child rate protection enquiries received.

The number of contacts into children’s services increased by **21%** during the year. We received **7071** contacts, the majority of these were from police, education and health, accounting for two thirds of the total contacts received. The increase in volume of contacts is seen most dramatically in a **59%** increase from health and **35%** from education during the year.

Despite the volume and increase, the vast majority of decisions on contacts were taken on time. A decision on how to progress a contact is expected with 1 working day and during 2023/24 this happened in **99.9%** of contacts.

However, dealing with the sheer volume of in-coming referrals impacted on practice, in that there was less time to work with families using strengths-based approaches.



Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Front Door (Children)					
CH/001	The number of contacts for children received by statutory Social Services during the year	4329	5776	5825	7071
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	3879
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	7065
<i>Local</i>	<i>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</i>	<i>70.3%</i>	<i>99.9%</i>	<i>97.8%</i>	<i>99.9%</i>
Front Door (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	282
CA/012	Of those identified, the number where advice and assistance was provided	61	86	106	157

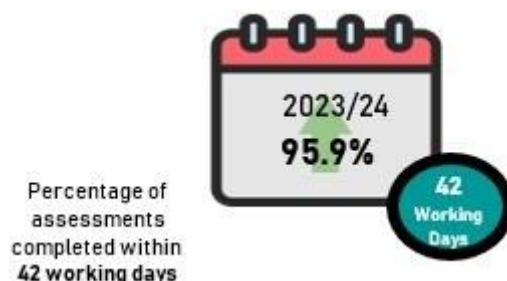
Assessments

The increase in demand resulted in the need for us to undertake more assessments. Assessments help us to understand better the needs of children and families brought to our attention and to decide on the most appropriate action to take. During 2023/24, there was a **20%** increase in completed assessments, of which **34%** recommended the need for a care and support plan. This is an increased proportion from the previous year.

In just below half of the cases, following assessment it was found that children's needs could be met in other ways, such as referring to our Early Help services or through involvement from an external agency, or by the family themselves.

Sometimes a decision on the best course of action needs further investigation, for example, where child protection procedures are to be followed.

We are expected to conclude assessments within statutory timescales (42 working days) and during 2023/24 we achieved this for **95.9%** of assessments. We need to ensure the child's involvement in the assessment process, for **98%** of assessments we undertook we made sure the child was seen as part of the process.



Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Assessments (Children)					
CH/006	The total number of new assessments completed for children during the year	828	884	907	1088
Local	The percentage of new assessments completed for children during the year where:				
Local	Needs were only able to be met with a care and support plan	30.1%	29.9%	27.9%	34.4%
Local	Needs were able to be met by any other means	54.1%	48.0%	54.4%	48.0%
Local	There were no eligible needs to meet	3.1%	1.9%	1.8%	3.2%
Local	The percentage of assessments for children completed during the year where there is evidence that the child has been seen	95.1%	96.9%	98.3%	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%	95.9%
Assessments (Young Carers)					
CA/014	The total number of young carers needs assessments undertaken during the year	36	40	29	16
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 care and support plan	16	18	10	12
CA/015b	Needs were able to be met by any other means	13	11	11	4
CA/015c	There were no eligible needs to meet	0	0	1	0

Care and Support Plans and Reviews

We were supporting **502** children with a care and support at the end of the year. This is a decrease on the number of children we were supporting at the same point last year, but is in line with the number of children we were supporting in the preceding two years. Of these, **55** children were receiving 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. We have focused on increasing the timeliness of reviews of children requiring care and support, this increased to 77% being completed in statutory timescales in 2023/24.

Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Plans (Children)					
CH/015a	The number of children with a care and support plan at 31st March	515	518	542	502
Local	The percentage of children supported to remain living within their family	58.6%	59.8%	61.1%	60.2%
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	55
CA/017b	The number of children or young people with a care and support plan who also have carer responsibilities	22	34	32	28
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%	81.7%
Local	Looked after reviews (including pathway plan reviews and pre-adoption reviews)	99.8%	98.6%	99.0%	99.6%
Local	reviews of children in need of care and support (including children supported by a direct payment)	67.3%	66.3%	65.4%	77.1%

Supporting children to live safely at home

Working to support children remain safely at home is one of our key objectives within the service. This helps us to reduce the numbers of children who need to come into care. 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, **60%** 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.

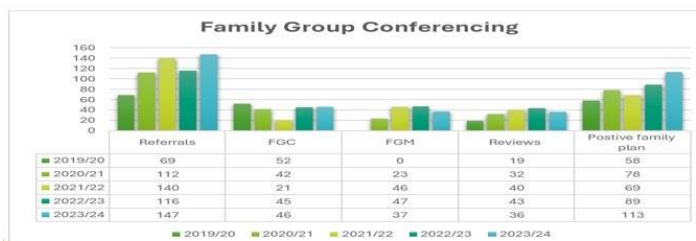
Family Group Conferencing and Family Mediation helps families resolve their difficulties and work together to ensure that the needs of children are met. Both services are being increasingly well used - providing additional opportunities for children to remain safely at home.

This year Family Mediation received **62** new referrals doubling the number received last year. All cases at closure saw children either remaining at home or with wider family.

Family Group Conference (FGC) & Mediation Service

- ▶ Referrals to the FGC service have significantly increased, while the amount of successful FGC conferences and family meetings has slightly reduced. Out of the total 147 referrals 83 FGC/Family Meetings were held, with 94% reporting a positive outcomes.
- ▶ FGC coordinators have noticed an increase in urgent referrals at times directed during care proceedings or family court however these are less successful, due to poor family engagement. To address this, we have been working with the children's services teams to improve timescales. It was also noted by a social worker that a judge has commented on how positive the FGC process had been with a family, where they had been able to discharge a care order.
- ▶ Mediation has taken 62 new referrals in 23/24 which is double the referrals from 22/23. 7 families did not engage. On all cases at closure children either remained at home or with wider family. During this year we have developed a service for parent-to-parent mediation which has been very successful. 32 individuals report that they have been able to avoid family court involvement, with significant improvements in co-parenting communication and improved family relationships.

Family Group Conference & Mediation Service



"The plan helped with helping my family de register my niece from the Child Protection register. I found the process very friendly and relaxed"

"Mediation has changed our family I am feeling I have got my boys and my mother again"

"We felt reassured and comfortable with you"

Family Resolution Team

During the year, the Family Resolution Team was implemented. This team was established in response to on-going high level of referrals into the service which featured domestic abuse, family conflict and poor parenting styles, often in the context of family breakdown. The added context here was that there had been a reduction in external services providing this sort of support to families.

The Family Resolution Team supports families experiencing conflict or family breakdown to make positive changes to their parenting skills and increase their overall wellbeing. The team uses a whole family approach and a number of different tools and techniques working towards conflict reduction and developing de-escalation strategies within the family environment, including where there is child upon parent violence. The team offers bespoke healthy relationship programmes through 1:1 or group work to address issues around domestic abuse and domestic abuse recovery.

Since its creation in July 2023 a total of **59** referrals to the Family Resolution Team have been submitted. The most popular programme on offer is the Bespoke Healthy Relationship Programme for Teenagers or Adults.

Here is some of the feedback received.

"I can better recognise poor behaviours in myself and others, understand how to moderate, deal with or react to them better, in order to maintain better relationships and to better protect my children from damaging experiences." Parent

"I feel more confident to know that it wasn't my fault even when I have always been led to believe it has been. I feel more confident to see domestic abuse within relationships and to know a healthy one to a toxic one." Parent

"Ways of understanding and coping with domestic abuse in general, the effects on my kids and how domestic abuse can affect them." Parent

"I have found it really helpful and more helpful than I have had in the past, I've had numerous counselling sessions, anger management sessions, GDAS support and nothing has opened my mind as much as the realness and severity of this and it has opened my mind up. I feel like I am a changed person and plan to get better and better. It has opened my eyes to have more understanding thank you." Parent

Our most intensive interventions which support children to remain at home are provided through **Achieving Change Together (ACT)**.

The 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.

Achieving Change Together Team (ACT)

ACTT explore the family's life journey and build on strengths, walking alongside parents to achieve goals which sustain longer term change for children.

Offering NVR, COS and therapeutic style parenting techniques to support parents to be present and able to move forward accepting and understanding their own experiences and trauma.

- 31 families (77) children worked with ACT in 2023/24
- 29 (83%) of the children completing the intervention remained living with family members or with parents

'My daughter has had someone to talk to outside of the family which has been 'invaluable'

'ACT has been invaluable all I needed was someone to rant to, once I got it off my chest nothing feels as bad.'

'it reassured me that it was okay if I felt anxious before I went. She said she feels okay about attending health appointments now.' A Parent

'They are amazing people that have helped me and my children in so many different ways.'

ACT Case Study:

In the household is mum (C) and child (J) aged 14.

The family had initially moved from London to the Monmouthshire area due to domestic abuse. This was a difficult decision, but C wanted a better life for her child. The move from London was difficult for J. J was out of school and C was finding J's aggressive and risk-taking behaviour concerning and difficult to manage.

ACT's Intervention

ACT intervened to help the family and other professionals involved to understand the impact of trauma and how this was affecting family functioning. Steps were taken to take-pressure away from key trigger points (e.g. start time for school). C was supported to better manage J's behaviour through Circle of Security Parenting (COSP) and using a Non-Violent resistance approach (NVR). Overtime this helped to minimise J's aggressive and controlling behaviours. At a practical level, ACT supported the family to find stable and more suitable accommodation. Throughout the intervention C was provided with the emotional support and encouragement that she needed to stay strong, build her own support networks and recover from her own experiences.

Family Outcomes

The relationship between C and J improved significantly and they were able to engage in family activities such as eating together, watching TV, and chatting. J has the occasional outburst with C which hadn't happened in a long time.

C and J's relationships with wider family members improved.

C feels that she can provide assertive parenting when required and provide emotional safety for J.

The family are in a safer and more stable position both physically and emotionally.

At the end of the ACT intervention the family were closed to Children's services

Family Feedback

I love the holistic approach that ACT have, that other services have never had. They focused on not just one aspect of what is going on, but looked at things from historical to present, and worked together, to work through this. Both J and I are both in such a better place since ACT's involvement and we now have our own new home, where at the start we were in one same room together. Oh and Clone, Shaz!!" (NB Clone and Shaz are workers)

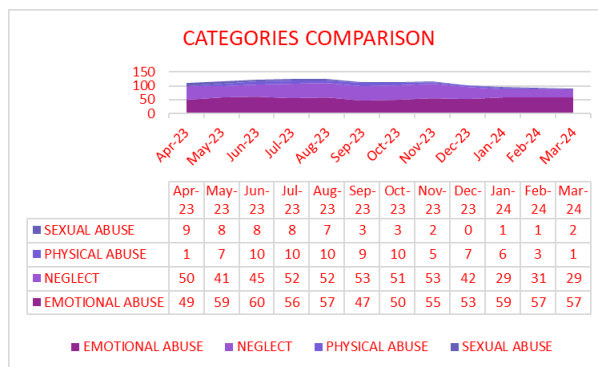
Safeguarding

Over the year, we undertook **729** Section 47 child protection enquiries. This is an increase of **14%** in the previous year and reflects the upward turn this year of more demand at the front door. The number of enquiries progressing to an initial child protection conference has only marginally increased, which indicates that wherever possible we support families to reduce risk without the need for formal child protection interventions.

The number of children on the child protection register at the end of the year decreased from **113** in 2022/23 to **89** in 2023/24.

A child's name is added to the register when it is found through a multi-agency process that the child is at on-going risk of significant harm. More children in Monmouthshire are registered due to neglect and emotional abuse than either physical or sexual abuse or exploitation. There are a range of underlying factors which cause risk of harm including domestic abuse, parental substance misuse, poor parental mental health, lack of parenting ability, parental isolation and issues related to poverty and poor living conditions.

The timeliness of initial child protection conferences has remained largely stable, at **79.7%** with attendance of the right professionals at the conferences being a priority.



When a child is added to the register, a multi-agency plan is put in place, coordinated by the allocated social worker and a range of services are provided to support the family to reduce the risk of harm identified. Core group meetings are held to implement and review the child protection plan. The percentage of initial core groups undertaken within 10 working days has increased to **89.6%**.

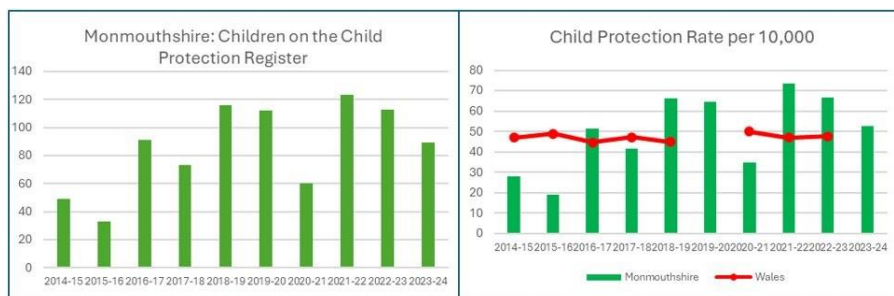
For children on the register, we are required to undertake statutory visits as defined through the regulations. We completed **63.6%** of visits within required timescales in the last year. Although this represents a slight increase from the previous year, we are taking further steps to improve. Positively, our performance at Quarter 1 has increased to **79.9%**.

We undertook **81.7%** of child protection reviews on time, which is a slight decrease from the previous years. We took longer to complete some reviews to ensure the correct people were able to attend the review conference so that all views were thoroughly considered.

During the year **137** children's names were added to the CPR and **161** were de-registered, illustrating the high numbers of children and families the service supports within a child protection framework. The effectiveness of the family support that we provide, and the positive engagement of families allowed **83%** (155/187) of children to be de-registered because risks had been reduced .



The rate of 53 children on the child protection register per 10,000 child population in Monmouthshire, exceeds the most recently published Welsh rate from 2022/23. One of the reasons for this is that we deliberately retain a child protection framework until there is a high level of confidence in families and professionals that risks are reduced and sustainable changes have been made. This is reflected in our low rates of re-registration rates which this year are **less than 1%**.



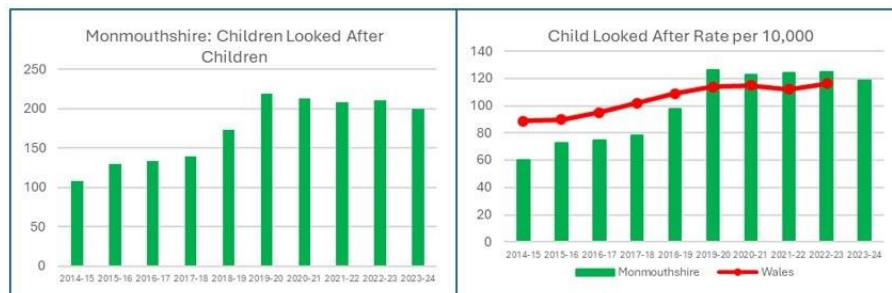
Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Safeguarding Children					
CH/021	The number of Strategy Meetings held during the year that progressed to Section 47 enquiries	453	630	641	729
CH/022	The total number of Section 47 enquiries completed during the year that progressed to Initial Child Protection Conference	113	176	145	153
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%	79.7%
CH/026a	The total number of children on the child protection register at 31 st March	60	123	113	89
CH/027	The total number of initial core group meetings held during the year	78	131	127	134
CH/028	The total number of initial core group meetings held during the year that were held within statutory timescales	72	120	112	120
Local	The percentage of initial core group meetings due during the year that were held within statutory timescales	66.7%	76.4%	86.8%	89.6%
CH/029	The total number of visits to children placed on the child protection register that were due during the year	2115	2161	2566	2533
Local	The percentage of visits to children placed on the child protection register that were due during the year that were completed	-	-	65.0%	94.6%
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%	63.6%
Local	The percentage of re-registrations of children on local authority Child Protection Registers (CPR)	5.6%	0.6%	4.7%	0.7%
Local	The average length of time for all children who were on the CPR during the year	302	215	263	283

Children who are Looked After

Some children need to come into care in order to protect them from harm. We only bring children into care when there is no alternative way of keeping them safe.

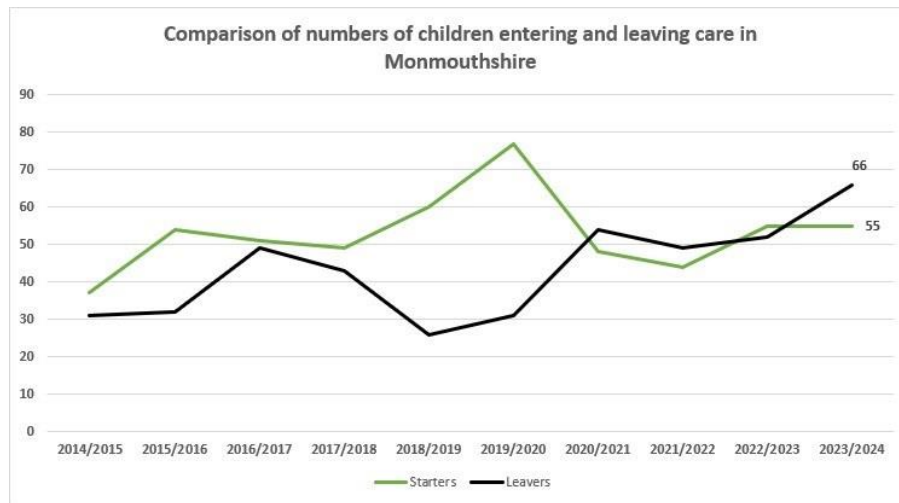
Monmouthshire was supporting **200** children who are looked after at year end, of which **15** were unaccompanied asylum seeking children. This compares with **211** children at year end 2023 including **10** UASC representing a reduction to our base-line figures by **16** children (201 – 185).

The rate of **118** children looked after per 10,000 child population in Monmouthshire, remains marginally higher than the average rate of children who are looked after across Wales in 2022/23.



During the year **55** children became looked after and **66** ceased being looked after. This shows clearly that whilst the overall number looks relatively stable, there is a lot of social work activity happening underneath. The overall decrease in the number of children looked after aligns with our service objectives to safely reduce the number of children in care. This has in part been achieved due to our proactive approach to care planning which has supported to children to exit care in a safe and planned way in keeping with their developmental needs and longer term outcomes. This has including an increase in children leaving care to live permanently with families in a special guardianship arrangement.

Over the year, children ceasing to be looked after included **7** discharge of Care orders, **22** Special Guardianship Orders, **10** no orders/Supervision Orders being made following court procedures and **9** Adoption Orders.



4 - Numbers of children entering and leaving care in Monmouthshire over time

Children in care have an allocated social worker. We undertake regular reviews of their arrangements and visit children in their placements in line with regulatory requirements.

Children over 8 and the child's parents are encouraged to attend their reviews. This year, of those children who were invited **76%** attended their reviews and **86%** of parents attended. This represents a high level of involvement in reviews and is testimony to the positive relationship established between the Independent Reviewing Officer, the families, children and carers. Being directly involved in their reviews, helps children feel they have a voice, agency and control in their care arrangements.

We continued to complete the vast majority of reviews of children looked after within statutory timescales, with **99.6%** being completed in time.

Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Children Looked After and Care Leavers					
Children Looked After					
CH/039	The number of children looked after <u>at</u> 31 March	213	208	211	200
Local	Number of Children Adopted during the Year	1	9	10	7
Local	Number of Children Leaving Care with Special Guardianship Orders during the Year	11	13	9	23
Local	Number of Generic Foster Carers <u>at</u> 31 March	38	40	39	38
Local	Percentage of Looked After Children placed with MCC generic or kinship foster carers <u>at</u> 31 March	41.3%	41.3%	42.2%	36.5%
CH/043	The total number of children looked after <u>at</u> 31 March who have experienced three or more placements during the year	9	14	16	Not available
CH/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	11
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	8
CH/053	The total number of <u>care</u> experienced young people in categories 1 to 6 at the 31 March	64	60	73	77

Looked after children and young people need access to safe and nurturing relationships, stable homes and experiences which promote well-being and development. Children in care will have experienced adversity and harm and need access to appropriate care and services which support their emotional and psychological wellbeing.



5 - BASE - Building Attachment, Security and Emotional Wellbeing

BASE is a therapeutic support service established in partnership with Aneurin Bevan University Health board. BASE works with young people in foster care, kinship care, special guardians and parents who have children living with them under a care order. The workforce includes clinical psychologists, play therapists and systemic psychotherapists. The team provides direct work with children as well as consultations, training and group meetings with professionals to help create a 'network' of care around a child. The aim of the service is to improve the emotional and psychological well-being of children as well as ensuring that carers have access to specialist support. This helps us to provide stable placements for children and improves their potential to recover and achieve improved health and wellbeing outcomes over the longer term.

Children and carers were asked how BASE helped them. Here is some of the feedback.

"It provides a safe space where my young person can discuss their worries"

"Explained to us that we are doing the right things and that why we parent is beneficial to the young person"

"It helps me understand my child's behaviour and what it means"

"Helped us to understand our young person's behaviour and given us lots of advice"

"You helped me with my worries"

"Has learnt to trust us and trust we will not hurt her"

"To make me feel more confident and talk to people about my feelings"

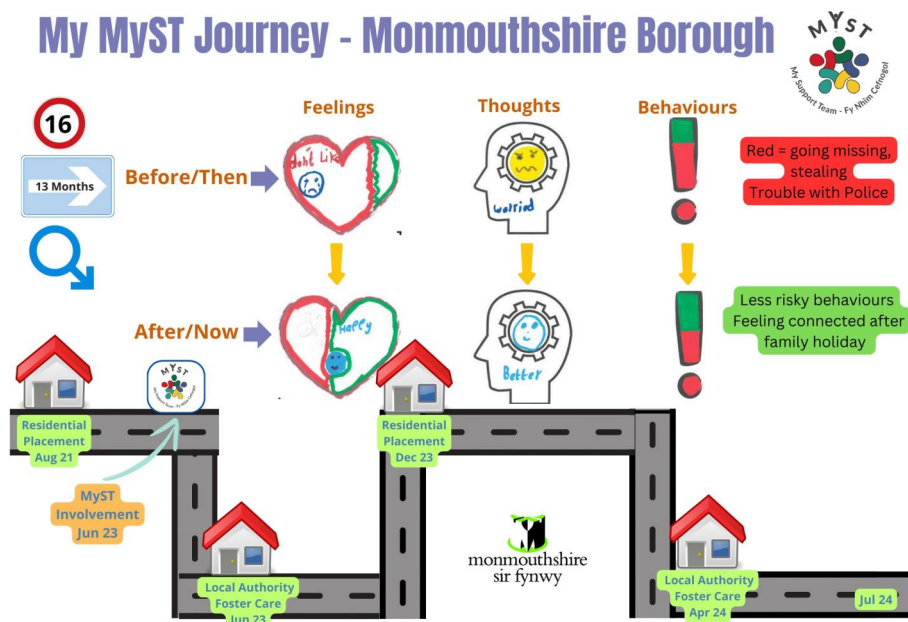
"As foster carers the BASE service is very valuable to us and we are glad it is so readily available"

"Helped me understand myself and my needs"

"I felt like I could talk to them about anything"

MyST

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 for 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. Below is a case study to show an example of the intensive work that MyST provides to the children under it's care.



MyST Case Study

P came into care when he was 8 years old due to parental neglect. P had extremely low self-esteem and poor coping strategies developed within the context of damaging early life experiences. Carers found it hard to provide P with the security and stability that he needed, and he experienced several placement breakdowns.

MyST Intervention

The key task for MyST was to build and maintain a relationship with P - 'coming alongside of him' and remaining there through various ups and downs, particularly at disruptive points within his care journey. The team began to help P understand his behaviour patterns particularly within care-giving relationships. P met regularly for sessions with his worker and engaged in direct therapeutic work on developing his emotional literacy skills, distress tolerance skills and emotional regulation skills in response to conflict and feelings of rejection. MyST remained a consistent part of supporting P through placement changes, providing practical support in moving and emotional support to manage positive endings and cope with further loss. The support MyST provided was crucial in holding P through these difficult periods. MyST supported carers understand P's mental health and psychological needs and how best to support him during placements. The 24hr on-call service was provided to his carers to offer input and reduce risk at moments of greatest challenge.

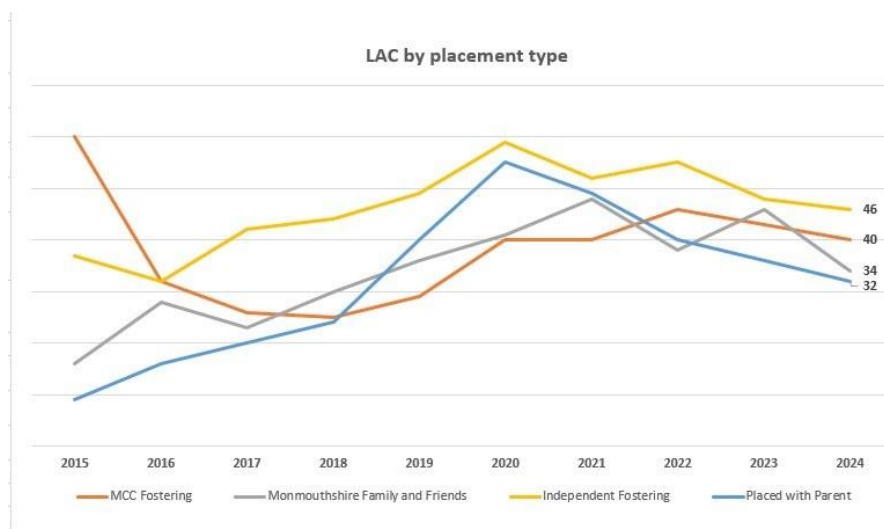
Outcomes for P

Over time P was able to gain in confidence and self esteem. He is now able to make better use of support networks and maintain relationships with people who can help him. With practical support from MyST, P was able to complete his statutory education and sit his GCSEs and has been accepted onto a further education programme. P has moved into semi-independent accommodation and is developing his independent living skills.

P now hopes to begin life journey work to make sense of his pathway through care as a looked after child. He wants to build an understanding of his early life experiences and sense of identity within the context of what is known about his family and early years.

Placements for children who are looked after

When a child comes into care we always explore whether an alternative family member could provide a placement. If a family option is not found, we look to place children with a Monmouthshire in-house Foster Carers first unless 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.

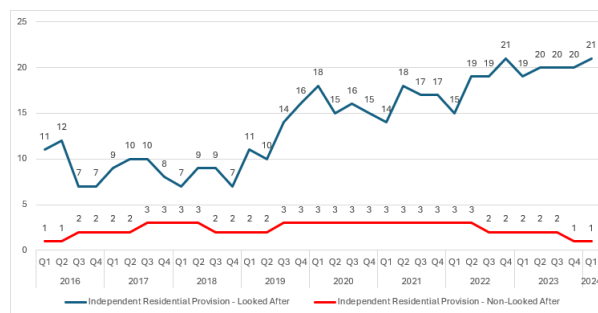


6 - Number children in different placement types over time

Our year end data tells us that:

- There continues to be a shortage of both short-term and long-term placements across all ages. Increasingly there is difficulty identifying placements even for babies and very young children aged 0-4. This is indicative of a wider problem recruiting foster carers as historically there has been no difficulty recruiting carers to care for babies.
- **43%** of our children who are fostered are living within Monmouthshire boundaries.
- **34** fostered children live with kinship carers, **46** with IFA carers, and **40** with MCC carers.

- **57** recruitment events were held throughout the year and **22** social events (including support groups) occurred.
- We have a relatively high number of kinship foster carers. This group of carers play a significant role in providing placements for children and allowing them to remain safely within their family networks.
- We try to minimise placement breakdowns through providing appropriate support; however, for a variety of reasons this is not always possible. A placement breakdown is a disruptive and difficult experience for a child and sometimes for the carers too. It can be difficult to find an alternative suitable placement following a placement breakdown.
- 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



7 - The number of children in residential care is higher than we want.

PLACEMENT SUFFICIENCY

The Local Authority has a duty to provide sufficient suitable placements for children who are looked after. There is a lack of placements at a national level with all local authorities across the UK competing for placements. The new Health and Social Care bill is adding an additional complexity to placement sufficiency as from April 2027, Local Authorities will be unable to place children in 'for-profit' placements. There is considerable uncertainty and instability in the provider landscape, and challenges within Local Authorities in terms of having the time, resources or capacity to generate alternative provision.

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, which means that we can't always place children in a placement which best meets their individual needs and has seen the number of children who are placed outside of the county increase.

Within this context we have undertaken a commissioning review of our future placement requirements based on an analysis of current and predicted need. We have developed a Placement Development Strategy which sets out our planned expansion and development of in-county

children's residential and 16+ supported accommodation placements. Building further on this and bringing current schemes into operation is a key priority for 2024/25.

Challenges in recruiting foster carers is a critical factor in developing overall placement sufficiency. Challenges in recruiting local authority carers is experienced across the UK, and acutely felt in Monmouthshire. We are particularly short of carers who are able to look after sibling groups, teenagers, children with more complex needs or parent and baby placements. Recruitment of new carers is difficult, partly due to demographic reasons, but also because our financial offer to carers has not kept pace with that of other Local Authorities in Wales. Over the next year we are looking at potentially increasing our financial offer to carers through the fees and allowances they receive.

The Placement Team put considerable efforts into recruiting foster carers. **7** new foster carers came on board during 2023/24 which is a significant achievement. Nevertheless, this represented a net gain of only **2** carers (36 to 38) because as much as we recruit-in, so do carers leave through retirement and other personal circumstances. Recruiting carers has huge rewards but is resource intensive. Given the numbers of in-house carers we would need to achieve sufficiency in the context of the new legislation, we need to reshape our thinking about what support we can provide foster carers both now and in the future.

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.



8 - Members of the placement team in Caldicot, at the Together Event



9 - Advertisement for Foster Carers

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. They provide stability, nurture, care and

support to some of our most vulnerable children and allows us to place children closer to their homes, school, family and friends so that essential links and support networks can be maintained.



10 - Foster Carers at the Appreciation Event



11 - The Placement Team at the Foster Carers Appreciation Event

The Fostering team organise several events throughout the year for the Foster Carers as well as the children under their care.

This year the Foster Carers Appreciation event was held at The Priory Abergavenny on the 23rd May. Approximately **30** carers attended. Foster Carers were presented with a Bouquet of flowers as a token of our appreciation for everything they do for the children and young people of Monmouthshire.



12 - The Coach & Horses, in Caerwent, gave our foster families a wonderful Christmas party. For the second year in a row, their team worked incredibly hard to organise a special Christmas event for our children who enjoyed a spin on their skate rink, arts and crafts, and a festive feast. The finale was a visit from Santa who gave each child a bag of goodies.



13 - An Easter party was held on the 4th April 2024 at Llanishen Village Hall. Approximately 12 families attended.

Supporting Children to Leave Care Safely

Monmouthshire Families Together Team

Monmouthshire Families Together Team (MFT); is a partnership between Barnados and the Local Authority. Developed in 2020, the MFT works with families where children have been placed on care

orders and placed with family members. This service aims to deliver bespoke targeted support to families in line with their care plan so that care orders can be discharged and permanency is achieved within family arrangements. The service focus is on kinship care, placement with parents and special guardianship. The discharge of care order means that children are no longer 'looked after'. This can be hugely beneficial to a child's self of identify and sense of belonging. The MFT ensure that the right support is available for families and carers to once the formal order has been discharged which helps sustain permanency over time and as the needs of children change.

In the financial year 2023 - 2024...

A total of **33** family support plans were put in place

The Families Together Therapy Team provided **over 5** different types of psychological intervention, including Trauma Informed Psychoeducation (TIP) and Family Therapy.

91 SGO Support Plan Reviews were completed by the Families Together Team, almost double the number completed in the previous year

35 Care orders were discharged, an increase of 15 from last year.

23 Care orders were replaced with Special Guardianship Orders (SGOs), **11** Care Orders were discharged for children Placed with Parents (PwP).





We will try to do a couple more of these events over the next year and change locations so you all have a chance to get there even if you don't have transport.

By the way I (Giovanna) take full responsibility for the poor quality of the photographs and missing some attendees out altogether!! Sorry.

Updates

We would like to welcome new staff member Tracey Rodgers to the Families Together Team. Tracey is a Family Support Worker and she will be helping me and Mike with some SGO reviews as the numbers of Special Guardians are constantly increasing. We will be asking some of you if you are happy for Tracey to shadow us on visits or when we complete a review and we're sure you will help Tracey feel at home as part of the team.

Since our last newsletter another six lots of Special Guardians have joined us - some single carers and some couples; some transferring into Monmouthshire from other Local authorities and some are new Monmouthshire carers. A big welcome to you newcomers and let us know if you have any ideas for training and the newsletters.

We have also sadly said goodbye to Special Guardians for two young people who have now turned 18 and we wish them and the two young people they care for all the very best for the future.

Kinship carer survey – hurry as time is running out please complete if you can by 4th September

- Are you a #KinshipCarer or #SpecialGuardian? Do you care for a relative or friend's child? Please complete gkinshipcharity's survey to help boost awareness of #KinshipCare and create change for #KinshipFamilies across England and Wales. <https://kinship.org.uk/annual-survey-2023/>

A golden nugget of wisdom from the therapy team

A New School Year

The beginning of September is the start of a new school year for many children. Many of us expect children to be excited about going back to see friends and begin their new school class or new school. It can also be very unsettling for children who find changes difficult to manage. Be prepared for increased worry or reassurance-seeking behaviours in the run up to the new year and for the first few weeks of term. Often children can seem to regress – going back to much younger behaviours or back to behaviours that they had appeared to grow out of – eg bed wetting, meltdowns, fighting with other children. It's a time of year when you might have to dig deep into your reserves of patience and be prepared to spend longer listening to your child's worries. We find the best time for talking about worries is bedtime or when we are in the car or out for a walk with our child. Remember – you can't fix these worries. Your child just needs to know you 'get it' and that you are alongside them in trying to work out how to feel OK.

Ever thought about Fostering?

Monmouthshire are always looking for new foster carers and as experienced carers yourselves, it is something you may wish to think about now or in the future.

You don't have to be full time foster carers as there are opportunities to just provide respite, short breaks, or placements for unaccompanied asylum seeking children. If you are interested let us know and we can pass on your details or you can call direct for more information on 01291 635682 or email foster@monmouthshire.gov.uk.

SGO Training /Information sharing events

SGO Training will be offered on the following dates and will be held online through Microsoft Teams. To join just click on the link we send out a couple of weeks before :-

Monday 11th September – 10.30 – 12.30 Contact issues

Tuesday 14th November – 10-12 Managing the Teenage Years

Wednesday 10th January 2024 – 10 -12 - Looking after yourselves

SGO Support Groups on the dates below and some will be held face to face as well as online

Tuesday 10th October- Giovanna
 Thursday 14th December – Mike
 Wednesday 14th February 2024- Giovanna

An email invite with links to all of TEAMs sessions will be sent out around 2 weeks prior to the date, confirming the topic of training or information sharing and the venue if we have a room booked for face to face support groups.

The next newsletter will be due in November.

Take care and hope to see you at one of the groups!

Mike & Giovanna
 Families Together Team
mikeyates@monmouthshire.gov.uk
giovannastanisicis@monmouthshire.gov.uk
guardianship@monmouthshire.gov.uk
 Mike – 07773657139
 Giovanna – 07929017107

As of the 31st March 2024 there were **125** children and young people under an SGO known to Monmouthshire. This is a **128% increase** from when this data was first recorded in Monmouthshire (Q1 2019/2020) at **55** children.

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.

All SGO carers are provided with bi monthly newsletters and are invited to regular hybrid training sessions and peer support groups.



14 - 23 SGO's were put in place this year, a significant increase from last year.

Monmouthshire Families Together Team Case Study - R's story

R was the youngest of 4 siblings and came into foster care as a young teenager as a result of emotional abuse. R's placement with her carers was positive and after 3 years the carers took the step of becoming R's Special Guardians. When she came into care R's parents broke off contact with her and she felt rejected and ignored by them causing her considerable psychological and emotional distress. As R grew older, her carers started to get increasingly worried about her behaviour. She was isolating herself from the family, avoiding her carers and seemed distracted, secretive and not herself. Relationships were becoming increasingly strained and the carers were worried that they may not be able to continue.

Monmouthshire Families Together Intervention

Families Together engaged with R in one-on-one sessions to explore how she was feeling and what was going on for her. R engaged positively and talked openly and honestly about her feelings centred around her mother and her siblings. The team helped R to revisit her Life-Story book; whilst R was aware of much of the information, looking at it again as an older child helped her to find different aspects and perspectives. She explored possible reasons her birth mother responded to her the way she did, and R was able to reflect and empathise, helping her make sense of it even though she could not condone it.

The team recognised that supporting communication between R and her carers was critical. Alongside the direct work with R, work was also undertaken with the carers to gain their perspective of the situation and assist them in recognising when R was feeling emotionally overwhelmed, and what they could do to support her.

Outcomes

R increased her ability to critically reflect on her own behaviours and actions and the impact they had. Equally, R's carers recognised that communication was the issue and that having conversations was important to understand each other's perspectives, rather than responding negatively to perceived behaviours. In turn, R recognised that she wanted to be more open and transparent with her carers about her thoughts, feelings and plans for her future.

R remained with her carers, and since turned 18. She has applied to University to study Social Care, and is looking forward to it.

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.



15 - This year in Monmouthshire 7 children were adopted

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 of our young people leaving care, 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 courses, 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 re-establish positive relationships.

53% of care leavers were in employment, education or training, for at least 3 months during the year.

Reasons why care leavers are unable to obtain employment, education or training can be complex and varied. They include the care leavers becoming or being parents themselves, health issues, immigration status, unstable accommodation and benefit issues. For some young people the Basic Income Pilot has been a de-motivating factor in studying or working.



16 - One of our care leavers graduating in Working with Children and Families supported by one of our personal assistants, Deborah Jones.

Youth Offending Service

The Youth Offending Service (YOS) is a shared service with Torfaen and supports a multi-disciplinary approach to working with children who have committed offences or who are at risk of committing offences, their families and communities.

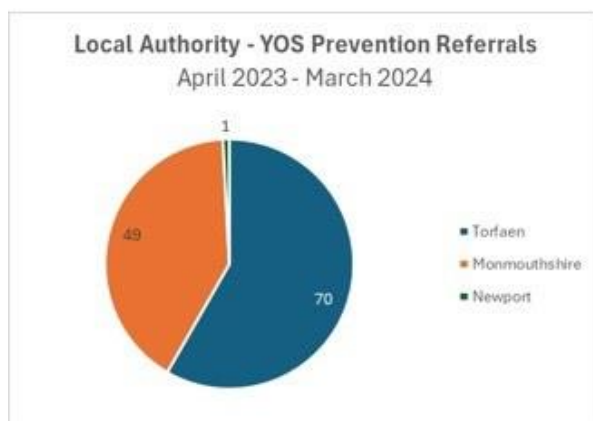
The service continues to evolve in-line with innovative approaches to practice which embrace a "child first" approach. All members of the service are trained in "trauma-informed" practice and a 'trauma' approach is applied to all facets of the service. This approach facilitates the preventative agenda and helps to avoid the 'criminalisation' of children.

The YOS has continued to make progress in reducing the number of children entering the Youth Justice System (FTEs), since 2018. The latest verified data evidences a further reduction with **16** children becoming a First Time Entrants (FTEs). During Quarter 4 of 2023-24 Monmouthshire and Torfaen YOS only had **1** child who was a First Time Entrant to the Youth Justice System.

This ongoing downward trend of FTEs is attributed to continued investment in prevention, early intervention services and collaborative working with partnership agencies.

Children are supported to repair the harm to victims and restore relationships with their communities. Children are encouraged, wherever possible, to meet with their victims to hear how their behaviour has affected them and agree actions that can repair the harm caused. The YOS works with parents and carers to support behaviour change within children and families so that young people who are exhibiting signs of offending or committing anti-social behaviour can be reintegrated back into their communities and achieve their potential.

There has been an increase in referrals from Monmouthshire over the last 12 months, with Monmouthshire children equating to **43%** of referrals received to our Prevention Service. This is a result of actively promoting the prevention services within Monmouthshire Children's Services teams and Education. Another factor could be that more children in Monmouthshire have been given newer disposals within the YOS such as Community Resolution Disposals and Referral Orders.



Alongside of the direct work with children, there is parenting provision within the service working with parents to help reduce the risk of children committed offences. YOS Parenting Workers use the principles of NVR (Non-Violent Resistance) in the majority of their interventions with parents. It can be hard to engage parents in this work but this year **75%** (63) parents took up the offer of support.

Feedback from parents who have finished receiving support from YOS parenting workers includes:

“Helped create a calmer atmosphere in the home”

“It has enabled us to better understand our grandson’s moods and feelings, helping us to better respond to his needs quicker.”

“Helped me to realise that I’m doing the right things.”

“help with family issues and help my son to stay out of trouble”

“Kept me sane. Unlike other services the YOS was non judgemental. It has helped me so much and supported me throughout.”

4. Adult Services



17 - Monnow Vale Health and Social Care Centre



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



19 - Mardy Park Resource Centre

Adult Social Care and Health services in Monmouthshire support people to live their own lives as independently as possible. Key to this is understanding what matters to people, finding solutions to

the issues they face and identifying the right support. 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.

The workforce in adults services comprises of **605** members of staff, all of whom are dedicated and skilled and whose mission is to make a positive difference in people's lives when they need it the most - supporting people to live life on their own terms.

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 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 to support multi-disciplinary working and information sharing.

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). Having primary, secondary health services and social care contained in the same building fosters joined-up and multi-disciplinary service provision to residents.

Monnow Vale 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.

Recently, Assistive Technology SMART rooms have been established in both Monnow Vale and Chepstow Hospitals.

Mardy Park Resource Centre in Abergavenny includes an **8** bed social care respite and rehabilitation unit, as well as a range of health and social care clinics. The provision supports a number of community-based wellbeing initiatives including Growing Spaces, an art group and a Community Cafe. The aim of all the various groups and activities at Mardy Park is to promote relationship building, encourage involvement in activities people enjoy and promote physical and mental health and wellbeing.

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 Parc residential home for people with dementia.
- Residential respite and rehabilitation unit Mardy Park.
- Monmouthshire Meals.

- Support for people who have caring responsibilities.
- Reablement services and home care.

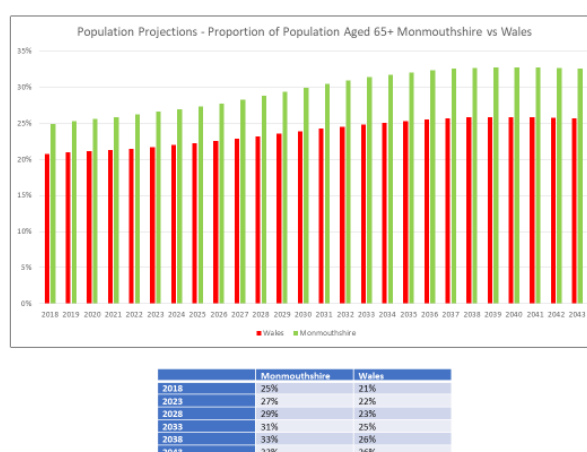
Overview of the Year

For Adult Services, this year has been one of both challenges and opportunities. From a leadership perspective it has been a three-way balancing act - trying to deliver considerable savings in the face of on-going demand pressures whilst simultaneously looking to engineer fundamental service changes aimed at increasing sustainability over the longer term. We are starting to make some significant adjustments in how we provide and deliver services, maintaining our commitment to ensuring that the changes we make do not undermine our ability to operate fairly and consistently and achieve good outcomes for people.

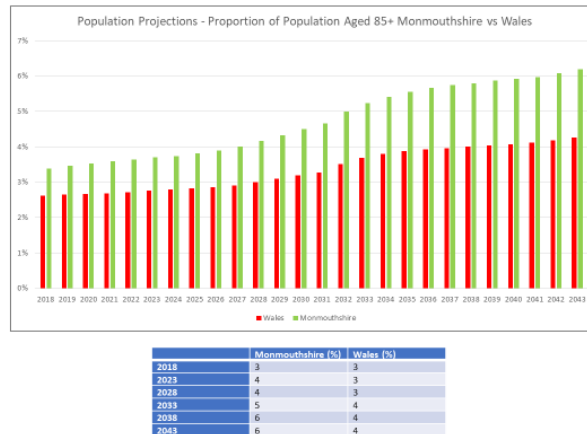
The operating context for the service remains challenging. There has been sustained demand pressure within the service with **8085** contacts received; information and advice provided on **3,635** occasions and **1,929** new assessments completed. Although the numbers have dipped slightly from last year demand is still high comparative to the rest of Wales. For example, the number of completed social care needs assessments at **238** per 100,000 was higher than the national average at **223** per 100,000.

It is well-documented, but worth re-stating that the prime factor driving service demand is the consequences of an aging demographic within the county. The proportion of residents aged 65 and over is expected to increase to **33.6%** by 2043, compared to **25.7%** across Wales. **6.2%** of the population is expected to be aged 85 and over by 2043 compared to **4.3%** across Wales.

Life expectancy for people in Monmouthshire is the highest in Wales, at **80.5** years for males and **84.1** years for females [compared to 78.3 for males and 82.3 for females]. However, healthy life expectancy is the critical issue that drives demand, which for males is average **69.8** years and **70.7** years for females. People living in the most deprived parts of the County are likely to experience poor health sooner by an average of **10.1** years for males and **11.1** years for females.



20 - 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.



4

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

Although referrals have reduced slightly the workforce report that the complexity of cases continues to increase. Complexity includes co-morbidity (people with a range of different conditions); people living with chronic ill-health or disability; people living with dementia (particularly in later stages); people living with frailty; and people being discharged from hospital after long-stays and / or delayed discharges. Often people with complex needs require more intensive interventions to ensure their basic care needs are met. This is demonstrated through the on-going upward trend in the number of residential placements which increased by **42** placements over the year (from 268 to 310 at year end). Similarly, the service is supporting more people who require double-handed calls at home – at year end the service was providing **515** double handed calls per week for **135** people.

Whilst we aim to ensure that people get the help they need in a timely way this continues to be challenging with social work and therapy waiting lists still higher than we would wish. The need to deal with acute pressures (e.g. hospital discharge) and emergency situations exacerbates our ability to respond to people with emerging vulnerabilities as quickly as we would like – this undermines our ability to work preventatively and contributes to the build-up of future demand.

This dynamic between acute versus preventative responses plays out regularly between health and social care heavily weighted because of the scrutiny and attention given to outcomes within secondary health care, specifically delays within hospitals. There are some encouraging signs that the focus is starting to shift. Limited additional capacity has been provided to enhance health lead community resource teams. These teams use integrated approaches to support people with frailty to be treated at home, avoiding hospital admissions. The history of integration within Monmouthshire, and the strong partnerships we have created, stand us in good stead to work jointly with primary and community care in strengthening our community based preventative services during 2024/25.

In my report last year, I highlighted some key areas which we saw as fundamental to supporting a reform agenda. The areas are inter-connected, remain relevant this year, and continue to illustrate both the progress we are making as well as the residual hurdles and challenges.

Assess and Provide Services

We have focused on developing a shared understanding of eligibility based on the hierarchy of support and increasing transparency in how care is allocated. We used the learning from the CIW inspection in 2022 to help us develop better quality assurance, oversight and control systems to support this work.

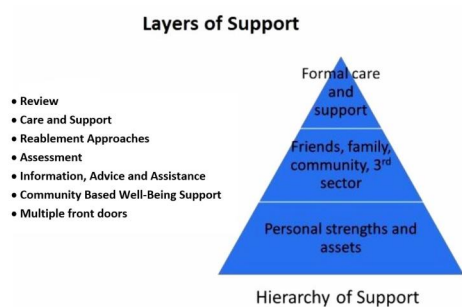
Taking affordability into account, we have had to make changes in the type of care the service is able to provide with the emphasis predominantly on ensuring that people's personal care needs are met. Achieving this in the context of high levels of need and where alternative solutions to supporting people's broader wellbeing outcomes are difficult to find, is not straightforward. Moreover, even when we are able to reduce the level of services provided, the overall cost of care has continued to increase because of inflationary pressures.

Practice-based solutions are part of the savings that we put forward to help bridge the Council's budget deficit. However, this takes time to achieve, with practitioners needing increased support to undertake this work with families. We use a daily panel to discuss care plans across service areas to help ensure fairness, encourage open dialogue about eligibility, support practice development and increase knowledge of services and alternative solutions. The panels have helped us gain further insight into our work with families and where we need to further strengthen and support practice.

We have made progress with new assessments and packages of care. This year we have reduced the percentage of assessments resulting in the need for a formal care and support plan by **5%**. The overall number of adults on a care and support plan at year end was **1580** representing a reduction of **71** from previous year. In respect of care at home hours, at 31st March 2023 FLO records showed that 636 people received care at home with 9,401 weekly care hours planned. Whereas, at 31st March 2024 FLO records show that 601 people were receiving care at home with 8,714 weekly care hours planned. We are looking to improve our systems so that care at home hours can be reconciled against real time invoices to increase the accuracy of our data.

The real measure of success; however, is whether these performance metrics are being achieved whilst still ensuring that people's needs are met. This is not easy to measure, however, taking from the social care survey, the number of people responding to the question *I am happy with the care and support I have had* rose slightly to **84.6% from 83.5%**. and equally *Do you think that the care and support you get still meet your needs?* rose to **89.4% from 87%**.

The process for reviewing existing packages of care has been more challenging with difficulties in prioritising reviews in face of the new demand. We are looking at different ways we can support reviews being completed in 24/25.



Reablement and Prevention

Reablement can be of enormous benefit to individuals allowing them to remain safely and independently within their own homes and is a cornerstone in how we manage demand. We have made some in-roads over the year, with increased numbers of people accessing a reablement provision (**331** compared with **184**) and the percentage of reablement interventions that either reduced, maintained or mitigated the need for support rising slightly by **2%** from previous year.

We are looking to build on this even further during the year ahead and are starting to review how we could reorganise our services to ensure that, anyone who might benefit from it, is offered a reablement pathway in a timely way. To do this we need to work in tandem with our Physiotherapists and Occupational Therapists, whilst freeing-up and training our in-house home carers to deliver this specialist service.

Broader than this, we are promoting empowering approaches as one of the underpinning values of the service. We want enablement focused 'what matters' conversations to run through every facet of practice and service provision. In line with this one of our priorities for next year is to sure-up how we provide Information, Advice and Assistance at the front-door including clear pathways into well-aligned early help and community wellbeing support.

Provision of Services - Supporting a stable and fair social care provider base

At year end there were **1580** people receiving social care services via a formal care and support plan with **1,368** individual services being provided. As well as its in-house services, we commission care from over **200** social care providers. These services are varied and include residential homes, domiciliary care, early intervention services, specialist placements and advocacy support. In the main we have well established and positive working relationships with our commissioned social care providers, which allows for an open approach to resolving shared issues and problems.

Recent years have been challenging for providers, having to contend with the pandemic, recruitment and retention issues and the increases in costs of living. These challenges have seen a number of providers across the UK struggle to continue to operate and some have withdrawn from the sector. However, the position in Monmouthshire whilst challenging has seen very few providers withdraw their services and most have managed to weather the difficulties around recruitment and retention with the social care sector. Positively we have seen home care services increase and have seen a reduction in the number of people waiting and the average length of wait time. This means that more people are getting the support they need in a timelier way and helping to reduce the pressure on unpaid carers.

This year, the increasing costs experienced by providers drove up the cost of care and contributed significantly to the budgetary overspend position within the service.

In October 2023 we began an analysis of our existing commissioned domiciliary care arrangements, an assessment of future need, and an exploration of options for the future. The work culminated in the development of a 10-year strategy for how we intend to purchase and provide domiciliary care across the county through an increased emphasis on block contracting. The proposed changes to the way in which we commission domiciliary care should improve capacity and resilience in the sector, whilst ensuring best use of public funds. The new commissioning model should enable a cost effective, secure and resilient model of care commissioning and delivery which will seek to provide best possible outcomes for individuals who require care in Monmouthshire.

The strategy was endorsed by Cabinet in May 2024. Implementing the initial stages of the strategy is a priority for 24/25.

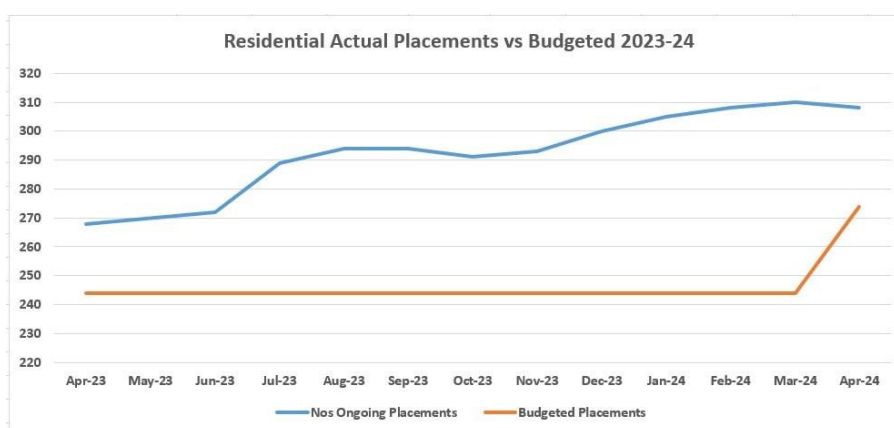
Finance in Adults Services



Progress against out saving mandates this year, has been challenging particularly regarding achieving a reduction in the cost of care.

Because of increased complexity of need within our population it has not been possible to reduce the number of care home placements. The increase in residential placements and costs of residential care had big impact on our budget. During the year an additional **42** care home placements (from 268 - 310) were commissioned, together with an increase in the average cost of care home placements. Although we had an increase in our budget to accommodate **274** placements we still had a shortfall in our budget by year end.

The main pressure on the budget during 2023/2024 was down to provider fees. At the beginning of the year the cost of the care that we commissioned was calculated at a higher rate than we were able to accommodate within the budget setting. With extensive fair fee negotiations with provider agencies we were able to reduce this; however, not to the extent that we were able to achieve remaining within the financial envelope agreed within the budget.



Oversight for agreeing new packages of care is in place, which allows us to make balanced decisions based on cost as well as outcomes. Residential placements are now used more frequently in situations where the cost of care at home would exceed the cost of a residential placement, contributing to the continued rise in residential placements.

Further pressure has been generated through overspend against grant funds, (something that will be addressed within 24/25) and challenges in making any gains regarding Continuing Health Care.

Debt for care charges is still running high, with over **463** clients owing us debt for unpaid care charges. This is now a target area for improvement within the service.

One of the main financial risks in Adult Services is the reliance on WG grants - which in total come to approximately £3M including £2M for services supported by the Regional Integration Fund and a £1M workforce grant.

How we performed Adult Services



Community-based wellbeing and early help

Community based wellbeing and early help services are the foundation stone of enabling people to live safely and well in their own homes and communities for longer. There are many ways which people can maintain their wellbeing and independence, especially with a little extra help when it's needed. Facilitating easy access to helpful information, encouraging and enabling people to connect with groups and activities in their local community; supporting people to stay physically active and make good use of aids and adaptations including assistive technology - all have a role to play. Staying

well and remaining independent is good for people, but also helps to reduce and delay the requirement for formal services or the need for costly long-term care and support.

The Integrated Services Partnership Board and our strong partnership between the third sector, GAVO (Gwent Association of Voluntary Organisations) social care, primary and community care and the Neighbourhood Care Networks (NCNs) is the primary mechanism through which we will continue to develop our community based wellbeing offer. Alongside of this we are seeking to ensure that early help and preventative services across the council are well coordinated and support the people who need it the most. To achieve effective community based support, we need to work collectively to understand vulnerability; ensure that our resources remain well aligned and targeted at the most vulnerable and ensure that we make best use of existing, joint community assets wherever possible.

One of our key risks in this area, is reliance on grant funding. However, as demand pressure continues to increase and resources become tighter, it seems more critical than ever to retain our commitment to community based support. In 2024 we are planning to release some leadership capacity so that access to community based well-being is prioritised within our service planning and re-design.



22 - Monmouthshire's Integrated Wellbeing Network plan is being reviewed to ensure that all the elements for community based wellbeing work effectively together based on growing knowledge about what works.

Many services and organisations contribute to our network of wellbeing support. Here are just a few.

Community Links Workers and Wellbeing Practitioners provide direct support tailored to an individual helping people re-engage in doing what matters to them.

TogetherWORKS (Caldicot Works) is a community hub in Caldicot, that aims to be community-driven. It offers a plethora of activities and groups, based upon local need, to reduce isolation and loneliness, encourage people to come together for the sharing of skills and information.

Chepstow's Community 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.

Age Cymru Gwent provides support for socially isolated older people in Monmouthshire within their local communities.

Dance Blast is the dance development organisation for Monmouthshire based in Abergavenny. The dance centre, situated behind the Melville Arts Centre offers two studios that host a variety of classes for our local community for people of all ages and abilities.

My Mates is a social group run by the council that arranges activities which people can attend independently or with their support worker. The goal is making friendships and close personal relationships. It has won a Social Care Wales award for innovation.

MHA Digital Lending Library allows people to try out a range of assistive technology and communication devices that can help with daily life and staying connected.

Bridges Centre provides a base for a wide range of activities, and also is directly responsible for a number of initiatives arising from and designed to fulfil the needs of the community. These include, the Bridges Community Car Scheme, Befriending Scheme, Social Circles and Building Bridges.

Volunteering for well-being have trained community volunteers to support those living with dementia in the community to increase their confidence and reduce feelings of loneliness and isolation.

Mardy Park's Community Cafe is open to the Public from 12pm to 2pm. Meals are prepared on site and may be eaten in or taken away. The Cafe supports people to come together, share food, and has a strong link with Growing Spaces. The cafe supports volunteers in preparing and serving food.

Growing Space Gardening Group provides horticultural training and therapy as well as classroom activities. Art, Craft and Music pursuits. There is also the ability to acquire accredited vocational skills to help with employment

The Front Door

Where people need to contact social care, multi-disciplinary professionals are available at the first access point. During 2023/24, the front door of adult services received **8,085** contacts of which almost three quarters (**5,951**) were from people not already in receipt of care and support. This is a slight decrease on the previous year. Health colleagues continue to be the main source of contacts received as close integration continues between health and social care.



Of the new contacts received, **3,635** were provided with advice or assistance. Feedback from our customer questionnaire shows that **77.6%** of adults receiving care and support feel they have had the right information or advice when they needed it which is an increase on the previous year, although still not at the same level as recorded in recent years.

We have seen a continued increase in volume of contacts received relating to carers, with **352** received in total during 2023/24, of which **129** were provided with advice or assistance

Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
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	5951
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	3635
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	226	272	351	352
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	129

Adults Questionnaire	2018/19 Actual	2019/20 Actual	2020/21 Actual	2021/22 Actual	2022/23 Actual	2023/24 Actual
I have had the right information or advice when I needed it	81.8%	84.3%	82.5%	77.4%	75.1%	77.6%

Assessments

The number of assessments for adults completed during 2023/24 has decreased compared to the previous year with **1,929** in total, with around **25%** of those assessed having needs that require a care and support plan. The trend is similar for assessments of carers, with a decrease in demand and proportion of assessments requiring care and support.

Whilst it is positive that in **75%** of cases, people needs can be met in other ways, it also poses a question as to whether there may be more opportunity to provide enhanced Information and Advice early on, rather than keep people waiting for an assessment. We are working to re-design our front door so that people's needs are met in a more timely and proportionate way. We hope that this will enable us to respond to people's needs in a more timely way and reduce the numbers of people waiting for an assessment.

Assessments are based around what matters most to people and their personal outcomes, as well as a thorough exploration about possible options for how their personal outcomes can be achieved using the hierarchy of support. Our service user survey responses show an increase in people feeling involved in decisions about their care and feeling listened to. While this is a slight increase on the previous year, it is still not at a level seen in recent years. Responses to the statement *I have been actively involved in decisions about how my care and support was provided* increased to **78.1%** from **76.6%**.

Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Assessments and Plans (Adults)					
AD/004	The number of new assessments completed for adults during the year	2035	2177	2205	1929
AD/005	Of which:				
AD/005a	Needs were only able to be met with a care and support plan	721	826	671	486
AD/005b	Needs were able to be met by any other means	630	542	583	482
AD/005c	There were no eligible needs to meet	627	506	553	573
AD/012	The number of adults with a <u>care and</u> support plans at 31 March	1813	1728	1651	1580
Assessments and Plans (Carers)					
CA/004	The total number of carers needs assessments for adults undertaken during the year	132	196	192	147
CA/005	Of which:				
CA/005a	Needs could be met with a carer's support plan or care and support plan	39	48	58	34
CA/005b	Needs were able to be met by any other means	32	43	63	24
CA/005c	There were no eligible needs to meet	55	25	27	44
CA/008a	The number of adult carers with a support plan at 31 March	68	105	86	70
CA/008b	The number of adults with a care and support plan who also have carer responsibilities	41	64	50	50



Adults with a Care and Support Plan

Following assessment, if further support is required and care and support plan is formulated. We supported **1,580** adults with a care and support plan which is a slight decrease on the previous year.

We have a requirement to regularly review care plans, in 2023/24 we reviewed **54%** of care plans that were due. This is a decrease of **3%** from the previous year and is still too low. The teams are finding it hard to prioritise reviews in the face of new demand. We are looking at how we might be able to address this in 24/25 so that we improve the timeliness of reviews being completed.

Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Provision of Services and Reviews					
AD/016	The number of care and support plans for adults that were due to be reviewed during the year	-	2094	1717	1580
AD/017	The number of care and support plans for adults that were due a review in the collection year and were reviewed at least once during the collection year	-	1123	987	856
Local	The percentage of care and support plans for adults that were due a review in the collection year and were reviewed at least once during the collection year	-	53.6%	57.5%	54.2%
AD/030	The total volume of services provided on 31 March			1,380	1,368

Adults Questionnaire	2018/19 Actual	2019/20 Actual	2020/21 Actual	2021/22 Actual	2022/23 Actual	2023/24 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%	78.4%
I usually get assistance from the same staff	67.8%	70.3%	70.1%	68.4%	71.3%	70.3%
Do you think that the care and support you get still meet your needs?	92.4%	92.8%	91.2%	87.9%	87.0%	89.4%

Adults Questionnaire	2018/19 9 Actual	2019/20 0 Actual	2020/21 1 Actual	2021/22 2 Actual	2022/23 3 Actual	2023/24 4 Actual
I am happy with the care and support I have had	88.3%	89.4%	89.0%	86.9%	83.5%	84.6%

Adults Questionnaire	2018/19 Actual	2019/20 Actual	2020/21 Actual	2021/22 Actual	2022/23 Actual	2023/24 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%	78.1%
I feel that I was listened to	82.7%	86.5%	85.9%	81.4%	79.9%	80.4%

Providing Care and Support

There are a number of different ways in which we provide care and support to people. Where possible we try to ensure that people have choice and control in the way that they receive care, although because of challenges in provision this is not always possible. When we are considering a person's care we want to ensure that the right level of care is provided, particularly if longer-term care is likely to be required. Deciding on the amount and type of care is something that is considered as part of the assessment process, and can be further supported by providing people with a period of reablement.



Over the last year, we aimed to increase access to reablement. Reablement provides intensive short-term interventions to support people to retain their independence. It helps people to regain strength and confidence and in some situations to 'relearn' how to do daily activities. People leaving hospital,

particularly after a long stay or serious illness, can benefit considerably from reablement. Effective reablement achieves good outcomes for people and helps to reduce or delay the need for high levels of support.

We provided **331** packages of reablement throughout this year, a significant increase on **184** for 2022/23. Of the packages we delivered last year, nearly **70%** of cases reduced or mitigated the person's need for support; **14.2%** reduced the need for support, whilst **55.3%** mitigated the need for support altogether. There is still a time delay for people to receive reablement and over 2024/25 we would like to see this reduce.

Much of the success of reablement depends on the availability of Physiotherapists and Occupational Therapists to design the programmes, together with skilled home carers to support the intervention. We are looking at how we can reorganise our services to ensure that there is a clear reablement pathway available to anyone who would benefit from it. To do this we will be looking at ways to ensure that our in-house home care team deliver less long-term care in order to concentrate on building a specialist reablement service in partnership with our therapists.

In 204/25, we want to build on the concept of reablement as the foundation for how we use shorter-term interventions to enable people to achieve better physical and mental wellbeing in the broadest sense. We see this as an integral part of how we will manage increased demand on social care and health services in the future.

Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Early Intervention and Prevention					
AD/010	The total number of packages of reablement completed during the year	291	240	184	331
AD/011	Of which:				
AD/011a	Reduced the need for support	50	54	32	47
AD/011b	Maintained the need for the same level of support	45	36	35	74
AD/011c	Mitigated the need for support	171	122	106	183
AD/011d	Neither reduced, maintained nor mitigated the need for support	25	28	11	27
Local	<i>The percentage of packages of reablement completed during the year that mitigated the need for support</i>	58.8%	50.8%	57.6%	55.3%
AD/013	The total number of adults with a care and support plan where needs are met through a Direct Payment at 31 March	123	139	149	140

Reablement Case Study - Mrs A

After suffering a stroke Mrs A initially required 4 x double-handed care calls daily to support with all aspects of daily living, including personal care, medication and meal preparation. Because of the impact of the stroke which had significantly affected her speech and mobility Mrs A was able to participate very little in any aspects of her care. The reablement carers worked alongside Physiotherapists and Occupational Therapists together with Mrs A's partner using various techniques, exercises, environmental modifications, support around medication and bespoke equipment to ensure Mrs A became as independent as possible. By the end of 6 months, Mrs A's calls were reduced to twice daily, and then after another month reduced to single-handed calls. Through her sheer determination and the specialist support of the team Mrs A regained a significant degree of independence with improved quality of life for herself and her husband.

Feedback from Mrs A's husband:

"With the constant reablement approach, we are seeing new improvements every month, new words, new motor skills and more confidence and joy. The continuity of the Reablement Team has allowed [Mrs A] to become confident in trying to communicate, and they have taken the time to get to know her and given her time to try to complete tasks on her own, stepping in only when needed."

Assistive Technology

Assistive tech is emerging as a key enabler within care and support planning - we are seeing increasing interest and traction in how practitioners are incorporating this into their work with families. With the creation of a new post of Assistive Technology Coach for Monmouthshire County Council, assistive technology is now being utilised more effectively than ever with an ever increasing array of products available to those who wish to have them installed in their homes.

The Assistive Technology Department receive professional referrals from Social Workers, OT's and other professionals within Adult Social Care. An appointment is made to visit the person and complete a *smart* assessment to see what technology might be best suited to their individual needs.

The team offers a range of technology that can help support somebody to live independently at home for longer which includes (and is not limited to) the following:

- Lifeline Unit and Falls Detector.
- Alexa's for medication prompts.
- Video Doorbell that is linked to Alexa so people with mobility issues can still answer the front door from the comfort of their armchair.
- Voice controlled lighting.
- Smart plugs to turn any appliance smart and link it to Alexa.
- Voice controlled curtain openers.
- Komp device – Video calling for individuals with memory problems.
- GPS Tracking Devices with built in Falls and Panic alerts.

The chosen technology is then installed into the Smart Tech Customer's home.

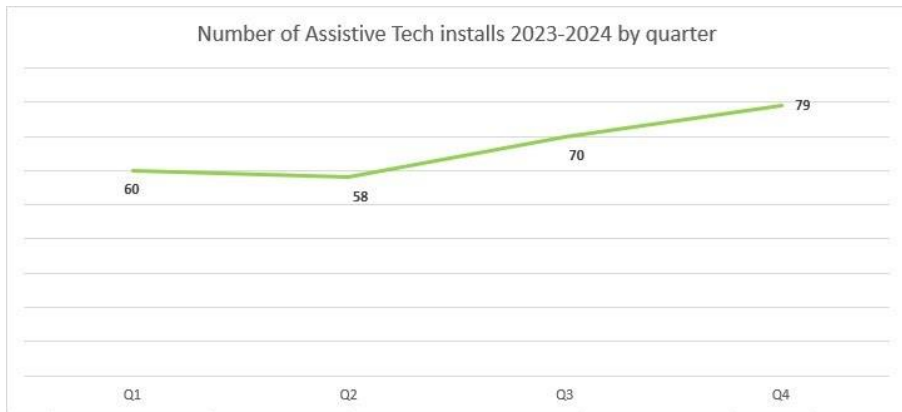
A **Smart Hub** has been created in Chepstow Community Hospital and another is due to be installed at Monnow Vale. Smaller displays have also been installed in the North and South of the county.

The Smart Hub in Chepstow Community Hospital can even be viewed online in a 3d interactive model. The link to the bedroom can be found here: [Monmouthshire - Chepstow Community Hospital Assistive Tech Bedroom \(matterport.com\)](#) and the living room here: [Monmouthshire - Chepstow Community Hospital - Smart Tech Living Room \(matterport.com\)](#)



Assistive Technology Case Study:
 We were contacted through the OT's working in Mardy Park to help someone with complex needs. Mr B was a middle-aged man who had been struck down with an infection resulting in bilateral amputations below elbow and below knee. Mr B had been in hospital and then rehabilitation for a total of 22 months. He wanted to go home and try and make a new life with his young children as soon as possible. We worked in partnership with the Disabled Facilities Grant team who would be carrying out the adaptations throughout the property for Mr B's return and went out on joint visits. We established that Mr B would have great difficulty answering the front door if he were alone. A ring doorbell was installed and linked to a screened Alexa, installed in the hallway where Mr B was able to access and talk to the person at the front door. If they required access, then Mr B could direct them to the rear of the property where he was able to operate the electronic door. In addition, smart lighting was installed throughout the property where he was able to voice command lights he wanted on/off. Mr B had difficulty turning certain things on and off, we installed smart plugs throughout, so Mr B was able to command lamps, fans, heaters around the property to his desire. Mr B could not open and shut his bedroom curtains and found this very frustrating, we installed curtain openers for him and linked them to Alexa – he was now able to open and close his curtains independently.

Outcome:
 Mr B said the technology we have installed has helped him stay independent and this was particularly important to him. Mr B is currently living at home with just 2 calls a day from carers and is learning every day to live his new normal. He is very thankful for our service.



As shown in the graph the number of assistive technology installations has been increasing over time with a total of **267** installations over the year. The most popular technology is that of a lifeline and pendant was installed **215** times.

We want to build on this further during 24/25 and increase the numbers of teams and practitioner using assistive technology within their care planning.

@assistivetech Monmouthshire



Newsletter June 2023

Firstly I would like to introduce myself, my name is Rhiannon Gregory, I am the new Assistive Technology Coach. I will be teaming up the Assistive Technology Team (Caroline) and Adult Social Care and Health to help look at new alternatives for the community using smart technology. This will enable people to live independently for longer. I look forward to meeting and working with you all in the near future. I will be here to support your needs and provide additional assistance with any technological advice.

If you have any questions or you're looking at smart and assistive technology for one of your clients, please feel free to call me on 01600 730524 or The Assistive Technology Team – 01633 644466.



Smart Technology

A new and exciting smart way of working with our vulnerable community members, helping them to stay independent and free from isolation. Keeping everyone in touch with society.



Assistive Tech Team

Jayne Chiplin – Assistive Technology Installation Officer (South Monmouthshire)
Samantha Jones – Assistive Technology Installation Officer (North Monmouthshire)
Vicki Goodway – Assistive Technology Customer Liaison Officer (North Monmouthshire)

@ssistivetech Monmouthshire



Professional Referral

If you are a professional looking to refer a client for assistive technology, you can now complete a professional referral online using the below links. There is one for internal employees and one for those outside our organisation.

Direct Links Below.

[Professional Referral Form - Internal](#)

[Professional Referral - external](#)

Self-Referral

[Assistive Technology Application Form](#)

Residents, family, or friends are now able to complete a self-referral online via our website. They will then be booked in for an appointment – alternately they can call us on 01633 644466 and we are able to send out an application form in the post.

New Information

We are now using a new email address which is assistivetech@monmouthshire.gov.uk please use this to get in touch.

New Online Launch!

Since we launched the new online applications, which are user friendly, our referrals have gone from 15-20 installations per month to a pleasing 35-50 per month – we have seen such a difference in our user friendly service and cannot wait to see what new clients it will bring to us.

Well Done Team!

Service Charges: we have had to review our prices for the first time in 8 years.

Our installation price will remain at £50 however please see below our price increase.

Lifeline and pendant are now £5 Per week.

Lifeline and falls detector are now £7 per week.

Any additional sensors are £1 per week.

We had 51 referrals last month, that's one of our busiest months ever had.



monmouthshire
sir fynwy

Cysylltwch gyda ni ar
Contact us on: 01633 644466

Care At Home

The provision of domiciliary care (care at home) remains a cornerstone service for people who need long term care and support. In order to try and take into account both affordability and demand we are increasingly having to prioritise personal care needs over supporting people in their wider wellbeing goals. Balancing this against people's needs and expectations and ensuring that we still achieve good outcomes for people is challenging. Working with families to help find alternative solutions by building on their own strengths and assets; strengthening pathways into community based support and developing our reablement pathway are some of the ways that we are trying to mitigate the challenges of reducing reliance on costly domiciliary care. Discussing requests for care at home within the Quality Assurance and Learning Group (QALG) panels is helping us to critically appraise requests for care.

QALG case study:

D is a gentleman who lives alone but family live nearby. He has a diagnosis of epilepsy and frequently falls at home. He has difficulty reading and writing. He also has a diagnosis of anxiety and struggles to go out alone to do his shopping and cook meals. D states he is very lonely.

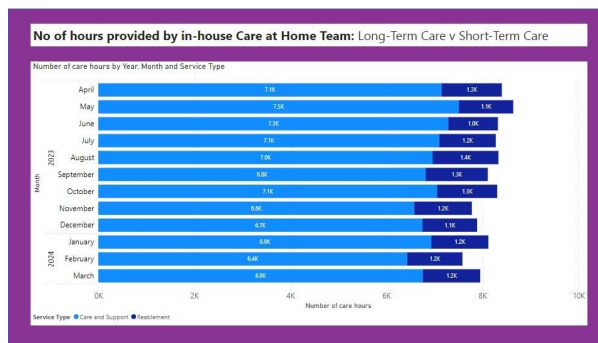
The support needs identified were: Help with shopping and cooking and help with correspondence/paying bills etc

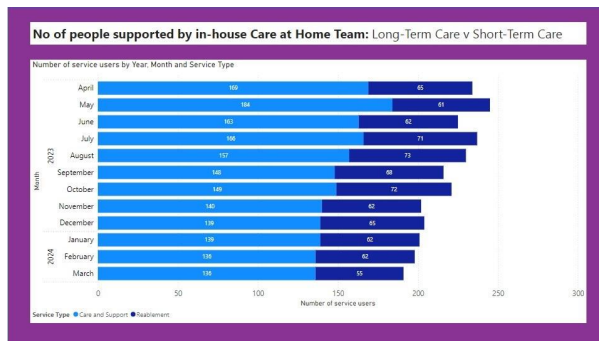

Outcomes:

D was referred to tenancy support for assistance around paying bills, correspondence and confidence building, and referred to a DWP disability advisor to check he was on the right benefits. He was supported to start volunteer work at a local church, who also provided meals. D was signposted to a micro-carer to help with his shopping, and an assistive technology falls detector was installed. D's case was subsequently closed to social services, without the need for long-term care and support.


When people do need care at home, it can sometimes be hard to put this in place due to the limited availability of carers. This year we have continued to focus on reducing the hours of unmet need in Adults' Social Care. There has been a **62% reduction** of unmet care need from **804 to 306 hours** per week. This means that we are providing **96.6% (8,714)** of the weekly **9,020** care at home hours that are required. This reduction is due to a combination of our activities, such as the increase in micro carers, and external factors which has seen the domiciliary care sector returning to its pre-pandemic level of provision. This has improved access to care and support for those who need it.

Long term domiciliary care is delivered in Monmouthshire by both the council's in-house care at home team and commissioned providers at approximately 25/75 % split. We are looking to concentrate the in-house team on providing specialist reablement care - where possible reducing the number of long term care hours they provide to be replaced by external providers. There will always be times when we need our in-house service to respond to specific gaps in provision, for example end of life and dementia care or providing care into our more rural locations (particularly the central area). Our commissioning strategy sets out how we intend to increase capacity and resilience across all parts of the county through locality based block contracts as well as spot-purchase arrangements for more specialist care.







Direct Care 2023 - 2024




Long-Term Care Hours

The number of long-term care hours provided during 2023 - 2024 by in-house direct care services is **88,604**. This is an decrease of **10,239** hours from last year.




Long-Term Care Service Users

Service users of long-term care decreased by **68** from last year to **274**. **151,896** visits were provided during 2023 - 2024.




Reablement Service Users

Service users of Reablement increased by **60** from last year to **342**. **24,368** visits were provided during 2023 - 2024.



Reablement Hours

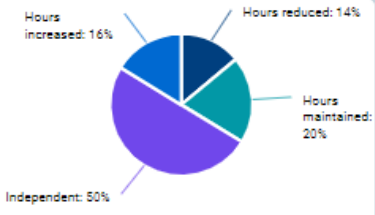
The number of Reablement hours provided during 2023 - 2024 by in-house direct care services is **14,747**. This is an increase of **2,255** hours from last year.



Impact of Reablement

50% of Reablement care packages resulted in service users living in their own home independently without additional care.

14% of Reablement care packages resulted in reduction in long-term care hours.



Hours increased: 16%
Hours reduced: 14%
Hours maintained: 20%
Independent: 50%

Community Care Questionnaire responses about Care at Home

'We would like to give you all a great big thank you for all of your help and support. You have all been amazing and will be missed. Many thanks *** x'

'Everyone is very friendly and helpful'

'Mum loves the carers that come to see here. She feel safe with them and they are all so lovely and helpful'

'Everyone is very kind and helpful. Thank you much appreciated.'

Direct Payments

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

There are **202** active direct payments in place across all the teams with care and support being provided by approximately 200 + Personal Assistants (PAs)

People can be put off from using Direct Payments because of the administration involved and the need to directly employ carers. We are working to overcome these barriers. During the year ahead we want to make it easier to receive a Direct Payment by encouraging more recipients to use a managed account to support them with the financing and payment of their support services. There are currently **106** individuals using a managed account.

In addition, we are working on developing a Personal Assistant portal to collate information about the PA's to make recruitment easier and quicker.

Direct Payments Case Study:

Mr B had to have bilateral below knee and below elbow amputations. Following extensive rehabilitation he returned home.

As well as extensive assistive tech (see case study above) Mr B has been in receipt of a Direct Payments and employs a team of five personal assistants for all his personal care and well being needs. It was very important to him to have control of his care and support and to be able to choose his own team.

Mr B's children stay with him every weekend and a Personal Assistant has been recruited especially to support him to engage in recreational activities when they're with him. Mr B feels it's important to spend time with his children doing family activities together and that they see him as a good role model.

Microcare

Since its launch in 2022, the Microcare project is now in its second year and is proving to be a vital supplementary way of delivering care into the community. It has helped increase the overall capacity of social care within the county and ensures that there is support available for people to turn to when they need it. The project has particularly helped to expand the availability of care into more rural areas of the county - it's ethos being local care for local people.

The project supports self-employed carers to develop their businesses as well as providing the opportunity for greater oversight and governance of self-employed care workers operating within Monmouthshire. The number of micro-carers is steadily increasing. There are currently **24** carers registered (an increase from 9 previously), and these are supporting **81** people in their local community, delivering **368** hours of care and support in total each week.

Micro-carers offer a wide range of services from medical care and support to companionship and assistance with shopping and gardening, giving residents a greater choice in how they receive support, and delaying the need for more formal services.

With support from Business Wales, all micro carers receive ongoing advice and guidance and receive free training through the Monmouthshire County Council Workforce Development Team, including, manual handling, Care of Medicines, Safeguarding and Data Protection (GDPR). Once on the directory, micro-carers are linked with local people looking for care services.

The flexibility of being a self-employed Microcarer has attracted a range of people to be added to the register on Dewis Cymru all offering a different level of service in terms of background, experience and the number of days/hours they are able to work with their clients. People like Sarah, a retired school teacher who wanted to do something that would also fit in around her other voluntary commitments in retirement. The video below shows Sarah's story:-



Microcare Portal

As a result of the increase in the volume of enquiries to become a self-employed Microcare it became clear that it was essential to design and build a digital self-service portal which would allow potential Microcarers to have access to, and store relevant information for them to be included onto the register.

The portal went live at the beginning of April, with **7** Microcarers using the portal and a further **9** in the process of going through the registering and uploading documentation.

The use of the portal has had a significant impact on reducing the volume of administration work associated with on-boarding Microcarers, allowing the team to focus on increasing the numbers of carers and helping to meet the demand for flexible, place-based-care across Monmouthshire.

Microcarer Statistics as at 31st March 2024:

No. of microcarers: **24**

No. of clients: **81**

No. of hours of care per week: **386**

Client Feedback

"The micro carer have a very important influence in Sara's day to day as she have the opportunity to do different activities every day and she really loves it. Brilliant Service that helps a lot."

"My mother has mixed dementia and I needed some supports to sit and chat with Mum / take her out for a walk while I work. Excellent! A has been brilliant- responsive and caring"

"This project has changed my life, I now have something to look forward to every week"

Secure estate

There are 2 prisons within Monmouthshire - Usk Prison and Prescoed. The central integrated health and social care team, provides a service into the prisons in partnership with the prison service.

People in the UK are continuing to live longer and the prison community is no exception.

An older prisoner is generally defined as aged over 50 due to age acceleration in this environment (Age UK 2019).

Since 2002, there has been a **243%** increase in this number of prisoners and by 2025, it is predicted that it will increase by a further 4.3% (Prison Reform Trust 2024). The length of prison sentences are also increasing. There remains a lack of National Strategy or guidance as to how to provide services into this ageing prison population to ensure consistency nationally.

This increasing prison population therefore highlights the need for appropriate services to support this population and ensure that their needs can be met within the constraints of the prison environment.

A successful case from HMP Usk highlights the benefits of multi-agency working for this population and in helping people prepare for release.

Secure Estate Case Study:

Mr J had been incarcerated for approximately 8 years.

It became apparent that Mr J had begun to develop memory problems and was diagnosed with early on-set dementia. Social Services and Occupational Therapy worked alongside Mr J to ensure that he was safe and his needs were met. The 'Buddies' became involved (prisoners supporting other prisoners) to enable Mr J to remain in his environment with prompting and support. The Memory Clinic assessed and prescribed dementia medication to enable Mr J to continue to manage day-to-day. Healthcare monitored any changes in his health and equipment was provided by Occupational Therapy so that Mr J could remain as independent as possible whilst he prepared for release.

Social Care ensured that support was in place for Mr J's release from prison by liaising with probation and the relevant local authorities. A follow-up visit was provided by Occupational Therapy and Social Work to support an ease of transition into the community. Mr J is continuing to manage well in the community. As well as helping him to stay safe and well, the services provided are also helping to embed the protective factors aimed at reducing the risk of recidivism.

Residential Care

Severn View Parc

This year saw the opening in March of the new Severn View Parc care home. This is a purpose-built specialist care home for people living with dementia. The preparation and planning that went into getting things ready for the move, liaising with families and supporting residents through the transition into a new environment was immense. There were concerns about the confusion and distress that moving 24 people living with advanced Dementia might cause; however, overall, the transition went incredibly well and is testimony to the dedication and thoughtfulness of the team.

The new home is comprised of **4** inter-dependent households for **8** people. One of the households is reserved for respite and rehabilitation. The households are embraced by easily accessible dementia friendly gardens, which are maintained and developed by "Growing Spaces" with residents getting involved if they wish. At the centre of the households is a community centre called the Burrows

which houses a day support service for people with dementia and is used for community events, entertainment and social gatherings.

Severn View Parc is all on one ground floor. The design of the building is very spacious and open with lots of natural light. Whilst households are independent of each other the whole home is connected allowing easy walks and access to other households which has seen a decrease in some symptoms of dementia such as anxiety and the feeling of being "locked up." Residents well-being is evident to see and frequently commented on by families and loved ones who have seen first hand the benefits and improvements to residents day to day lives.

All bedrooms have en-suite shower and toilet facilities allowing residents their privacy and dignity in a space that is personalised to their preferences.

The design of the home works to support a new model of care. We replaced the previous staffing model of dedicated cooks, domestics and care staff with a single household support worker. Everyone does the same job which also helps achieve the natural homely environment, and allows people to be flexible and spend more time with individual residents.

As a service we are extremely proud of this project which has finally come to fruition after many years in the planning. It is a visionary space and at the forefront of practice in dementia care. Over the coming year, we are excited to see how it develops further and the positive impacts it will bring for residents, families and the workforce.

Here are some of the values and principles underpinning the design of the home

It should look, sound and feel like a home that anyone would recognise - no reception desk and barriers

Residents should have a sense of being at home, rather than an institution

No locked doors – no barriers to freedom of movement and spontaneous activity. Be and go where you choose

The spaces should reflect who we are, how we want to be and how we feel at any given time.

Residents should be involved in all aspects of daily living and how we support people, should continuously focus on opportunities that provide purpose and the chance for residents to contribute

Food and drink will be central to our approach. Mealtimes are much more than the food we eat. Residents can be involved and surrounded by the sights, sounds and smells of preparation and cooking.





Some of the feedback received about the workforce at Severn View

'The staff at Severn View are wonderful'

"Severn View is an excellent environment for my mother. All of the staff treat everybody in residence with respect and will do anything for them. The atmosphere is very welcoming and friendly"

'On behalf of the *** family I wanted to wish you and your families a very happy Christmas (2023)and all good wishes for 2024. You are always flat out working hard. Having spent more time there this last week it is evident your workload has massively increased as you strive to make a very happy Christmas for all the residents. We can't thank you enough. Additionally you have been so supportive to us and loving and caring towards mum as you always are. I must say your staff have also been exceptional in the care they have provided to mum.'

Learning Disability Support Services

The Community Learning Disability Team provide support to Monmouthshire people who have diagnosed learning disabilities. **215** individuals with learning disabilities have care and support plans in place. A range of services are 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 interventions to promote independence, day support, respite, residential care, domiciliary support to help with daily life and supported accommodation.

Of the people we support, **103** individuals to live in their own home, **45** individuals are in supported living and **59** individuals are in residential care. Responsibility for a small number of cases (**8**) are open are shared with Continuing Health Care.

The team undertake work with some of the most vulnerable people in the county. They spend time to build relationships and find ways of communicating with people so that they can help them achieve what matters to them, and improve their wellbeing. Balancing the needs of carers and the cared for is a constant theme within the work of the team.

Community Learning Disability Case Study:

L has a Learning Disability and is registered deaf-blind. There have been long standing safeguarding concerns about whether L's needs are being met and whether she is at risk of abuse and neglect. L was born deaf but and lost her sight more recently. It had reached a point where L had not left her home, was spending all her time in one room, and was refusing to engage with any medical practitioners. Her mental health and well-being was deteriorating significantly.

Social Work intervention:

The social worker felt that the situation for L had become untenable. She used skills in communication to start to build a relationship with L and increase the level of trust with L's mother. She was able to advocate for L's needs and help her mother consider alternative options for L, and imagine a different future. The social worker looked for a potential residential placement that would be suitable for L and eventually supported the family to accept this as the right way forward.

Outcomes for L:

Since leaving home, L has started to engage with health professionals - this has allowed her to wear a headset through which she can hear music. This has led to L dancing with staff and smiling. L's diet and personal hygiene has improved and more recently she has had the confidence to be supported to go clothes shopping. L is supported to get out and about in the community and to go for a walk every day. The relationships with her mother and family have been maintained and she is supported to visit them on a weekly basis. Monmouthshire County Council has taken over as the financial appointee, which has enabled L to have her own money. Overall L has gained a sense of independence and happiness.

This year saw the decommissioning of the Council's residential respite facility at Budden Crescent. Since the closure of this service the aim of the team has been to provide respite care which is tailor made to suit the needs of individual people and their families and carers. We continue to have a block contract arrangement for a residential respite bed at Centrica Lodge, which is regularly occupied. In situations where emergency respite is required, the team are able to spot purchase an additional bed. This has helped us in developing a more robust range of emergency respite options. We continue to work with partners within Shared Lives (family based respite care) to extend the availability of Shared Lives support specifically for people who are wheelchair users or who have higher level care needs; however, this does remain an area of challenge. In addition, direct payments remains the preferred option for several families. The ethos of the service remains as before - a high quality flexible respite service that offers choice, meets people's respite needs and supports individual outcomes.

Case summary example of an individual using Centrica:

A has ASD and complex behaviours. He recently left school to start a specialist FE college placement. The family utilise the respite to go on holiday with A's siblings so that they can have their parents full attention. The respite is helping A to prepare for future supported living. A considers respite as a short break for and enjoys the community activities while there.

My Support Service

MCC are currently in the process of restructuring and remodelling the My Day My Life and Individual Support Services. The new My Support Service will be a singular service providing a range of support

primarily to adults with a learning disability but also to people with disabilities and mental health needs. Support will be individually tailored to deliver the outcomes within the social work assessment. Support may be solely community based and or within one of the former My Day My Life bases. Support will be either short term/reablement focused or of a longer-term nature.

This new service model will focus upon supporting people to gain independence, develop skills, supporting their participation in meaningful activities centred around personal goals and development. The service will operate flexible hours so support can be provided when needed. It is anticipated that the service will operate 7 days a week between 8:00 am and 10:00 pm.

Ensuring that the outcomes of the Practice Solutions Review are fully implemented is a priority for 24/25.

My Mates

My Mates is a group of **403** members, including approximately **150** Monmouthshire Members - who are self-directing and shaping the way people with a learning disability live their best life.

The focus is on non-paid friendships, peer support and the creation of close personal relationships; promoting choice, well-being, education and independence. Through My Mates, people have found networks of support which are more natural and sit outside of services. This helps tackle isolation and loneliness and reduces the need for more formal types of care.

Throughout the year My Mates hold educational workshops on topics including: social media safety, sexual health and well being, healthy relationships, personal hygiene, and using your voice (self-advocacy). We have held daily get-togethers and social events (outside of the '9 - 5!') including: Celtic Manor Christmas Ball, bowling, nightclubbing, pubs, coffee shops & restaurants. My Mates has an on-line presence as well so there are opportunities to connect every day of the week.

We have promoted venues throughout our local communities that are free to access including castles, libraries, museums and marketplaces which is encouraging community presence, supporting our local communities and strengthening community bonds, giving a sense of belonging.



23 - MyMates Members talk about how MyMates has impacted them



24 - MyMates members at an event

Follow the stack to see what MyMates members have to say about the service!

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

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

"People check on me when I'm quiet, MM actually care—I've never had it before!"

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

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

"I have friends! I always felt so lonely, but not more!"

"These are the best days of my life, thank you MM for making it happen!"

"I'm in awe at the changes MM has made to my daughter, thank you so much!"

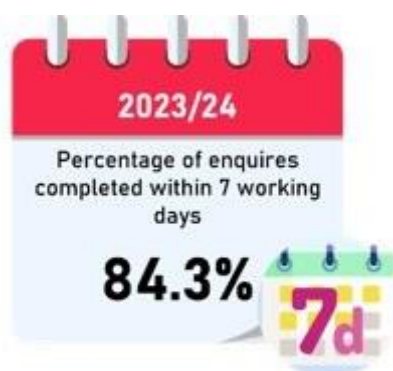


Safeguarding in Adults Services

Adult safeguarding has seen a slight increase in the volume of reports received during the year. During 2023/24, **586** reports were made regarding **441** 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 decreased during the year, despite there being an increase in reports. Enquiries should usually be completed within 7 working days and during 2023/24 **84.3%** were. This represents a significant improvement over recent years.

80.6% of adults tell us they feel safe, which, although a slight decrease on the previous year, is in line with the longer-term trend of responses. Where people do not feel safe, comments often refer to concerns about mobility and fear of falling.



Metric Number	Metric	2020/21	2021/22	2022/23	2023/24
Adult Safeguarding					
AS/001	Number of adults suspected of being at risk of abuse or neglect reported during the year	463	528	438	441
AD/020	The total number of reports of an adult suspected of being at risk received during the year	680	799	577	586
AD/022	The total number of reports received during the collection year where it was alleged that there was abuse under the primary category of:				
AD/022a	Neglect	258	344	242	286
AD/022b	Physical abuse	260	269	229	210
AD/022c	Sexual abuse	35	56	27	41
AD/022d	Emotional or Psychological abuse	176	214	145	160
AD/022e	Financial abuse	106	97	114	102
AD/023	The total number of reports of an adult suspected of being at risk where it is necessary for enquires to be made	509	583	418	396
AD/024	The total number of enquiries completed within 7 working days from the receipt of the reported alleged abuse	262	382	361	334
Local	The percentage of enquiries completed within 7 working days from the receipt of the reported alleged abuse	51.5%	65.5%	86.4%	84.3%

Adults Questionnaire	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
	Actual	Actual	Actual	Actual	Actual	Actual
I feel safe	81.8%	81.1%	78.8%	78.3%	81.3%	80.6%

Deprivation of Liberty Safeguards and Mental Capacity Act

The Mental Capacity Act is a piece of legislation that is integral to Social Work in both adults and children’s services, although primarily in Adult Services.

The **Deprivation of Liberty Safeguards (DoLs)** are an important safeguard for people’s rights under Article 5 of the Human Right Act. Any person who is in a setting with continuous support and lacks

the mental capacity to consent to this arrangement has the right to be safeguarded under this piece of legislation and to ensure their “detention” is lawful and they have a legal right of appeal. See attached fact sheet. [Deprivation of Liberty Safeguards and you - Easy Read \(gloshospitals.nhs.uk\)](https://www.gloshospitals.nhs.uk)

We currently have about **230** people in care homes awaiting a DoLs authorisation, which is too high. We currently don't have sufficient trained members of the workforce who can undertake this work. Our position is similar to many other Local Authorities and Health Authorities in Wales.

MCC has **9** trained DoLS signatories and **14** best Interest assessors (BIA), although 2 of those are not currently undertaking BIA work. This is an ever increasing area of work and we are looking to increase this number of trained staff in the coming year and onwards in order to upskill our workforce to be able to safeguard individuals rights under this legislation.

5. Carers

The Carers Team commissions carers services, provides information and advice and offers a range of free events and activities. The team 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 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 an important part of the service. The team continues to maintain strong, open and honest relationships with commissioned service providers who provide direct support to carers. This relationship allows us to flex and adapt services to meet carers needs.

How Unpaid Carers and Young Carers are Supported by the carers team

We commission Adferiad to support unpaid adult carers, and young carers (where applicable) of adults with a mental health illness.

We commission Age Cymru Gwent to provide a flexible respite service that affords carers time away from their caring role, knowing that the person they care for is being supported during that time.

We commission Building Bridges to support parent carers to have time away from their caring role, and to meet up and enjoy fun activities with other parent carers.

We offer a range of **free** unpaid carers events and activities managed by the Carers Team and Young Carers Service.

We offer a yearly programme of **free** events for young carers and unpaid adult carers including events for Carers Rights Day and Carers Week.

We send out regular newsletters

We offer discounted MonLife membership

We provide information, advice and adult/young carers needs assessments

We work alongside community groups and health and social care professionals, so they are more able to identify and support unpaid carers and young carers.



25 - Carers Rights Day - Abergavenny



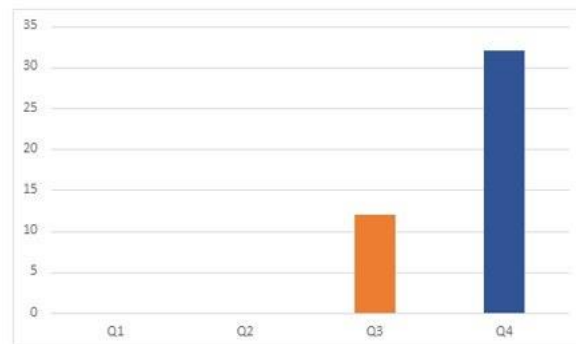
26 - During Carers Week in June 2023, the carers visited Dewstow Gardens

New Carers Respite Offer

In July 2023 Newport City Council successfully commissioned a new Gwent Carers Respite offer, 'Bridging the Gap, Gwent'.

Commissioned through the provider NEWCIS, Bridging the Gap Gwent (BTGG) provides unpaid carers of all ages a short period of rest from their caring role. The flexibility of the respite offer has meant more young carers are able to receive support.

Monmouthshire Referrals to Bridging the Gap Gwent July 23 – March 24.



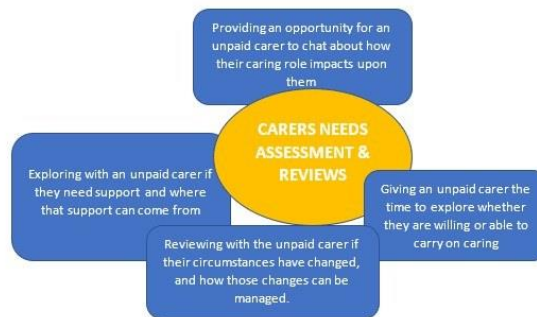
Carers Needs Assessments

The number of carers needs assessments undertaken this year was 147 compared with 192 the year before. This is in keeping with our close work with third sector partners to deliver a preventative

model of support for carers, as well as the wide range of informal support that we facilitate. This helps ensure carers receive the support they need directly through organisations that are there for them, rather than formal care and support plans. The Carers needs assessments that we do undertaken, are becoming more complex and therefore taking more time to ensure the right support is put in place.

Bridging the Gap Case Study

The Young Carers team had been working with a family whereby the young carer, alongside their parent, provides care and support to their two young brothers who have disabilities. The young carer had asked for piano lessons as it was a hobby they enjoyed whilst giving them time away from their caring role. The young carer sourced the piano teacher themselves, asked them to sign up to be a provider for Bridging the Gap, and as a result the young carer has been having piano lessons as respite.



27 - How a Carers Needs Assessments & Review Supports an Adult Carer

Adult Services - Carers Assessments				
Carers Needs Assessments	2020/21	2021/22	2022/23	2023/24
The total number of carers needs assessments for adults undertaken during the year	132	196	192	147



28 - How a Young Carers Needs Assessment and Review Supports a Young Carer

For a Young Carer the principles of a carers needs assessment are similar to that of an adult, however, as they are a child, more things need to be taken into consideration.

Regular reassessments and conversations have allowed young carers to develop strong links with the Young Carers Service, including the Young Adult Carers Assessment Worker. This has meant young carers are being supported by the right agencies, based upon their needs.

	Assessments (Young Carers)			
	2020/21	2021/22	2022/23	2023/24
The total number of young carers needs assessments undertaken during the year	36	40	29	16

Young Carers & Carers Events

We have been able to offer young carer events to under 8's, if a parent attends. This has proved really popular, giving families the opportunity to make new connections. Family days out are similarly important as many young carers have said they do not always get time to spend time with their parent(s) because time is spent looking after the person with caring needs.

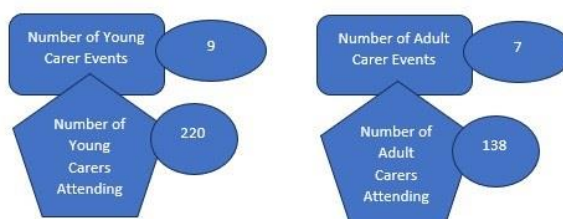
The New Year's lunches have been requested by carers, and we are seeing many carers coming by themselves and developing new friendships. The intention of the events is to help carers feel less isolated by their caring role, and to establish connections with others.



Life After Caring Conversations

When the caring role comes to an end, it can often bring a range of emotions and challenges for an unpaid carer. The Carers Team affords unpaid carers who find themselves in this situation, the opportunity to talk to one of the team about how the end of the caring role is affecting them, and whether they need support.

	Carers Team Data - Adult Carers			
	2020-21	2021-22	2022-23	2023-24
Registered on Database	1100	1013	1050	943
Life After Caring Conversations	14	17	13	19



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).

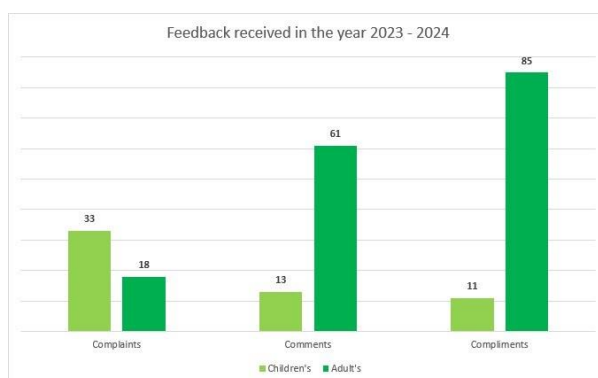
During the year covered by this report we received **51** complaints (33 in children's services and 18 in adults services). Of the **51** complaints, **44** were started at stage 1 of the process during April 2023 - March 2024. **10** complaints were received at stage 2 of the process, of which **3** were escalated and 7 were new within April 2023 - March 2024.

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 operational practice and the design of services.

We received a total of **74** comments of which **61** were from adults services and **96** compliments of which **85** were from adults 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.



'*** came out of hospital in September 23 after a long stay. We were promised the name of a social worker. We haven't heard anything'

'I am very pleased with the care and support from all at Monnow Vale day lounge. District Nurses, memory clinic, physios and OT. Thank you.'

'*** was so praising of you and what you have set up for them . He said that of everyone he has encountered through his wife's illness you have made the biggest difference. really sang your praises.'

'I feel I need more help getting ready for the day, washed, dressed, but later than when my carers currently attend at 7.30'

'I have respite care in Mardy Park. I look forward to going again and enjoy my times in there. All the staff are amazing and look after me well.' 'I have no complaints about the staff, they are very caring.'

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.

There is a five-year plan for *More than just words* strategy, following an independent evaluation of the framework. (<https://www.gov.wales/sites/default/files/publications/2022-07/more-than-just-words-action-plan-2022-2027.pdf>)

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 well being 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 five-year plan is based on the following themes, which emerged from a 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.

There are almost 200,000 staff that 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 there is 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 this.

Number of Social Care and Health Welsh Speakers: **112**

15 fluent speakers, **1** advanced speaker, **17** intermediate and **79** beginner speakers

8 staff members undertook Welsh courses in 2023/2024

7 staff took the Mynediad 1 course and **1** staff member took the Mynediad 2 course

8. Workforce

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. In Social Care we recognise that the workforce is our most important resource.

We continue to be challenged by the decreasing numbers of people that 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.

In the following section we provide 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.



29 - The new Monmouthshire people strategy sets 6 main objectives that we will strive to achieve for our workforce.

Workforce Development Team



During this year the workforce development team have continued to strive to ensure a bespoke learning and development offer to our social care and health directorate staff via our internal learning and development team. Where possible we continue to implement a 'place based' approach so our front-line social care workers, foster carers and connected carers have increased accessibility to learning.

Induction and Onboarding

Our bespoke direct care induction programme continues to evolve with the addition of expert input from our Aneurin Bevan Health Board (ABUHB) partners including the lead therapist from South Monmouthshire integrated team and the oral care specialist nurse team. We also have representation from the assistive technology team demonstrating preventative alternatives to care and support. This has ensured the level of reablement focus throughout the induction period continues to increase in line with the wider operational service ethos of prevention and early intervention in line with the Social Services and Well-Being (Wales) Act 2014.

We are pleased to announce that the previously outsourced skills to foster programme has now been successfully handed over to our in-house foster care workforce development officer and children's services workforce development officer, who with the support of social workers from the team have provided essential learning to prospective foster carers and connected carers within Monmouthshire. This will continue to run annually ensuring our approach is specific to Monmouthshire.



Learning Management System – Thingi



As documented in our previous report in 22-23, Thingi went live as planned for social care and health directorate in April 2023. Since then, the workforce development team have been able to host over 300 events on the system which has enabled over 800 internal staff to attend and have their learning record updated automatically.

They now have access to a content library filled with over 600 learning resources which can be accessed from anywhere to enable staff to continue their continuous professional development where ever they work. Towards the latter end of the financial year Monmouthshire took the corporate decision to join the 'Learning Consortium Wales' which will maximise the capabilities of the system via collaboration with other local authorities within Wales.

Qualification and Education

The workforce development team continue to support both existing and prospective employees with their education and learning to both attract and retain people who have an interest in working within Monmouthshire. We have continued to work hard to get the remainder of existing social care workers in Monmouthshire registered with Social Care Wales as well as new starters who pass through induction.

In the year 23-24 we have also hosted:

- 5 Coleg Gwent social care work experience student placements
- 17 social worker students from Cardiff University and University of South Wales

- **2** staff were successful in securing a funded social work secondment through the Open University and **3** of the previous cohort of seconded students are due to qualify with a social work degree with guaranteed social work posts awaiting them in MCC.
- we supported **2** social workers to obtain the required voluntary hours and evidence portfolio needed to re-register as a qualified social worker with Social Care Wales. Once qualified they then commenced an employment contract with the authority.

Post qualifying opportunities continued to be a focus throughout the year with the following opportunities provided:

- **2** Approved Mental Health Practitioner courses funded in Swansea and Chester University enabling those who successfully completed to become qualified AMHP's. This has been Monmouthshire's contribution to help tackle the shortage of suitable professionals in our local area who are desperately needed to assess and recommend individuals are detained under the Mental Health Act where appropriate.
- **4** Best Interest Assessor Course places enabling those who completed to become certified assessors helping tackle the backlog of outstanding assessments in Gwent.
- **2** Practice Educator award places to enable more teams in our workforce to host and internally assess a social worker student.
- **3** CUBAS (a dynamic parenting assessment tool) training places to ensure our children's services workforce have the highest standards of knowledge as directed by the courts.
- **3** Social Services Practitioner places to recognise those highly skilled staff within our workforce who are capable of undertaking assessments to a level 4 standard under the Social Services and Well-Being (Wales) Act 2014.
- **5** in-house first year in practice social worker programme places.
- **15** places for Collaborative communication mentors specialist workshop.



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**SWYDDI
AR GYFER
POBL
OFALGAR**

'Rwyf wedi gweithio mewn gofal cymdeithasol am 25 mlynedd, mae mor werth chweil'

**Ymunwch â'n tîm
gan wneud gwahaniaeth**

- Byddwch yn cael gweithio gyda thîm gwych, yn gwneud gwahaniaeth bob dydd – gan wybod bod yr hyn yr ydych yn ei wneud yn bwysig i'r bobl hyfryd y byddwch yn cwrdd â hwy yn y gymuned.
- Rydym yn gofalu am ein tîm, gada phawb yn cael eu gwerthfawrogi a'u cydnabod – gyda thâl ychwanegol am weithio ar y perwythnos, hyfforddiant ardderchog a llawer o gefnogaeth.

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Workforce development were involved in an exciting opportunity to support the on-boarding of 4 international social workers from South Africa during 2023. Our children's workforce development officer created a bespoke 12 month induction programme including everything from the geography of the county, to local schools and ways to build social networks to ensure that the social workers not only felt part of the Monmouthshire children services team, but also part of their new local community. In addition to this the social workers were mentored by the children's workforce development officer and attended in-house workshops on the following:

- Strengths and outcomes based practice in line with Social Services and Well-Being Wales Act 2014.
- Professional Resilience
- Social work in Wales
- Group supervisions including case discussions.

Attraction and recruitment of people into Children's services continues to be challenging, workforce development accepted the challenge and helped change perceptions by working alongside the service to create a video (seen above in the Children's Service introduction) which realistically highlights the rewards and realities of working in social services, particularly in children's services. The video was shared in line with multiple recruitment campaigns and accumulated a viral 20,000+ views over social media channels accompanied by comments such as 'such a wonderful place to work.'

Severn View Park



After a long-awaited moving date, the new Severn View Park residential home was signed off as complete. The workforce development team were tasked with providing bespoke training to the staff who worked on the old site and those who were joining as new members during the months leading up to the opening. This included a change of roles for the staff who were previously segregated into domestic/cook roles and care and support workers to a blended approach to ensure the site mirrored a home environment with everyone working together in a person centred, relationship based ethos alongside the residents.

Our in-house trainers worked hard to up skill those who had never cooked and those who had never provided personal care. They also ensured digital skills were up to date, familiarising staff with new digital recording systems. Severn View Park is on track to open thanks to the hard work of the trainers in making sure the staff have the best possible training and preparation for the grand opening in April 2024. We will look forward to providing an update on this project in 2024-2025.



9. Next Steps, Key Challenges and Priorities

Last year I referred to the need for an in-depth exploration of social care - to look again at how we might develop and change to increase our chances of a viable future in a high demand, resource constrained context. In some instances, this has seen plans accelerate such as the development of residential children's homes; the commissioning strategy for domiciliary care or the increased use of reablement and assistive technology. In others, it has been about re-prioritising the basic underpinnings of good practice - using strengths-based, preventative approaches in how we assess, review and provide equitable services to people.

It would be fair to say that this in-depth exploration has been achieved in many ways during 2023/24 with cycles of learning, adjustment and re-evaluation across many elements. As we move into 2024/2025 this deeper exploration has provided increased clarity at a whole system level around the

changes we want to pursue, with increased understanding of both barriers and enablers. The commitment to providing high quality services and working with people to achieve good health and wellbeing outcomes, however, remains the driving force. This commitment is the basis for an optimistic outlook as we navigate the coming years. There are no miracles or silver bullets; but we do have a plan, good partners, a skilled workforce and plenty of determination!

There are a number of key risks and challenges that we currently face.

From a financial perspective the directorate ended the year with a budgetary overspend of £2,945 against an overall budget of £64,075M [includes public protection]. The year ahead will require further savings to be made. The need to reduce the overall cost of social care is driving much of the activity presented in this report, but does not come without the workforce and operational risks associated with programmes of change. Added to this is the uncertainty created by the reliance on a range of Welsh Government grants which support both core services as well as many aspects of our reform agenda. Whilst we are exerting increasing levels of financial controls around how we allocate care, it is not always possible to predict or mitigate all elements of new demand, particularly given the ageing demographic and the complexity of people's need. Reducing the overall cost of care, and working within the services's allocated budget will remain a critical endeavour during the year ahead.

At an operational level, one of our major challenges is the inter-dependency of some of the changes that we are trying to make, meaning that changes across a number of different areas need to happen consecutively. This is because of the systemic nature of social care. The service development, practice, procedural and system change that this entails takes time to come to fruition and in itself is a dynamic process. Demand pressure, and other imperatives can impede progress around more strategic changes. One of those critical imperatives this year, will be preparing for the implementation of the new social care management system.

The operating context and the changes that we are making across the service are having an impact on people. For some people, this means that we won't be able to provide services in the way that they may have expected previously. Although we are working hard to manage expectations and support good outcomes for people in other ways, I am well aware that moving forward the type and amount of care that we are able to provide, may increasingly become a source of contention. As far as possible, we will continue to mitigate the impact of any changes we make.

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. Operational pressure is felt acutely by the workforce particularly when having to manage the needs and risks of some of our most vulnerable citizens, young and old. Not being able to find a placement for a child; or explaining to a family that there will be a delay in their loved ones care, are day to day challenges experienced on the ground. Whilst working to a practice change agenda can present opportunities for people, it can equally be experienced as yet another pressure demand to cope with. Ensuring that the workforce is appropriately supported and involved must remain a priority for the year ahead.

Priority Actions for 2024 - 2025

- Maintain focus on recruiting into child protection social work posts in Children's Services; and therapy and adult mental health practitioners in Adult Services.
- Implement the outcomes of the Children's Services CIW inspection (Feb 2022).

- Implement the relaunch training of Keeping Children Safe.
- Prioritise training to undertake Mental Capacity Act and Best Interest Assessing in Adult Services.
- Design and implement a finance module for adult care practitioners.
- Procure and begin to implement a new Social Care Management System to replace FLO and PLANT within a Gwent partnership.
- Deliver system redesign in 3 key areas of adult's services:
- Develop the front-door response, including pathways into community based wellbeing support, with the aim of increasing effective Information, Advice and Assistance and decreasing the number of people waiting for social work and therapy assessments;
- Design the reablement pathway including access to specialist home carers, so that more people receive reablement services and the demand for longer term care and support is mitigated;
- Implement the initial stages of the Domiciliary Care Commissioning Strategy.
- Accelerate the use of assistive technology within care planning for adults.
- Work in partnership with health to expand community based health services for frail older people in the central and north parts of the County to avoid any unnecessary hospital provision and keep people safe and well at home.
- Implement a system for ensuring that adult care and support plans are reviewed at least annually.
- Fully implement the new Individual Support Service including the completion of accessible bases in Abergavenny and Monmouth.
- Deliver the objectives of the placement development strategy for children's services to increase the number of in-house residential and supported accommodation placements.
- Develop an in-house residential children's workforce.
- Review the foster care offer to Monmouthshire carers to support the recruitment of new carers.