

SUBJECT: OUTCOME OF THE CARE INSPECTORATE WALES (CIW) INSPECTION OF ADULT SERVICES APRIL 2025

MEETING: PEOPLE SCRUTINY COMMITTEE

DATE: 22.07.25

DIVISION/WARDS AFFECTED: ALL

1. PURPOSE

To set out the findings of the Care Inspectorate Wales (CIW) Improvement Check inspection of adult services in April 2025 and present the areas for improvement.

2. RECOMMENDATIONS

- i. People Scrutiny Committee note the findings of the inspection and provide any comments in respect of the steps adult services are taking to deliver the required improvements.

3. KEY ISSUES

Background

3.1 In July 2022 CIW conducted a Performance Evaluation Inspection of Adult Services (appendix 1) and found 23 areas of improvement under the following categories

- (1) People
- (2) Prevention
- (3) Well-being
- (4) Partnerships.

3.2 In April 2025 CIW conducted a follow up Improvement Check focusing specifically on the 23 areas identified in 2022 to determine if improvements had been made.

Methodology

3.3 The follow-up inspection was conducted over 3 days of on-site field work (31st March – 2nd April). The inspection included:

- Reviewing 30 individual case files for people who had received a service
- 6 tracked cases which involved a more detailed review and interviews with practitioners and people receiving services

- Pre-submitted questionnaires from people receiving services, staff and partners.
- A range of focus groups with colleagues including senior leaders, team members and partners
- Individual interviews with the Chief Officer, Head of Service, Deputy Chief Executive and senior Health colleagues.

3.4 The findings provide an overview against the improvement areas with 3 levels of rating: - (i) no improvements made action required; (ii) some improvements made with further actions required; (iii) improvements made and must be sustained. The ratings are supported by a more detailed findings letter (appendix 2).

Findings

3.5 The inspection identified that improvements were evidenced in 20 out of 23 areas:

(1) People	All 8 areas identified in 2022 evidenced improvement
(2) Prevention	All 4 areas identified in 2022 evidenced improvement
(3) Well Being	5 out of 7 areas identified in 2022 evidenced improvement
(4) Partnerships	3 out of 4 areas identified in 2022 evidenced improvement

3.6 The areas which were deemed to still require improvement were contingency planning, identification of risk and co-production of outcomes for carers. The inspection found little evidence within case records of risks being explored or contingency planning with individuals and their families. This means that the service needs to improve how we help people to explore alternative scenarios and identify responses to potential emergencies or how an individual's needs / care requirements might change over time. The inspection found variable practice in providing formal carers assessments and that improvements are required in how outcomes with carers are co-produced using a strengths-based approach and ensuring clarity of what is on offer for carers.

3.7 Alongside areas for improvement, the inspection identified a number of areas that represented good practice in Monmouthshire. They found a dedicated workforce who are 'passionate about supporting people' and recognised positive strategic planning to address what is recognised as a challenging operating context for adult social care. Specific areas of positive practice included:

- Person centred biographies in assessments
- People who lack capacity are well supported
- Expansion of assistive technology
- Developing the micro carer economy
- Our strategic plans to develop the service
- Safeguarding procedures
- Staff communication significantly improved
- Staff receiving good line management support
- Effective partnerships
- Integrated structures and relationships with health colleagues.

3.8 In response to the follow up inspection the service will continue to develop the current strategic plan that received endorsement from CIW as representing positive service development namely:- (i) Domiciliary care commissioning strategy; (ii) Specialist information advice and assistance service and (iii) Expansion of Reablement.

3.9 The outcomes from the inspection are being developed into a more detailed set of actions, cross-referenced against existing programme implementation plans. In particular the plans include:

- Further development of a quality assurance framework for the service and how that can be used to support good assessment practice and consistency in decision making across the service
- Provide additional focus on case recording and implementation of Mosaic (new case management system)
- Further extend and implement the bespoke practitioner training and support programme including mandatory risk management and contingency planning training
- Fully implement and monitor compliance with the service supervision policy
- Review how we integrate carers' assessments within the service and that the carers offer aligns with the new information, advice and assistance approach at the 'front-door'.

3.10 In terms of follow up CIW will monitor progress through its ongoing performance review activity with the local authority via the established regular monitoring meetings.

4. EQUALITY AND FUTURE GENERATIONS EVALUATION (INCLUDES SOCIAL JUSTICE, SAFEGUARDING AND CORPORATE PARENTING):

4.1 The service provides care and support to adults with protected characteristics including physical disabilities; older adults; people with mental illness including dementia, people with learning disabilities and people undertaking caring roles. Care and support, including our early help and reablement services, allows people to achieve good personal wellbeing outcomes including accessing the community, maximising independence and doing what matters most to them. We will consider in detail the outcome findings of the follow up inspection to ensure that we continue to improve the quality and timeliness of our services.

5. OPTIONS APPRAISAL

Not applicable.

6. EVALUATION CRITERIA

The service submits quarterly returns to WG, copied to CIW, covering a range of performance measures and quantitative information. This includes numbers of people accessing reablement; waiting times for assessments and services; and numbers of

carers' assessments undertaken. There are, in addition a number of local measures through which we track specific areas including numbers of care and support plan reviews completed within timescale and the outcome of reablement interventions. The findings and improvement planning in response to the follow up inspection will be monitored through these established performance frameworks.

7. REASONS

The report is provided to ensure that members have the opportunity to scrutinise findings of the CIW follow up inspection undertaken in April 2025.

8. RESOURCE IMPLICATIONS

There are no additional resource implications.

9. CONSULTEES

- Cllr Ian Chandler, Cabinet Member for Social Care, Safeguarding and Accessible Health Services.
- Senior Leadership Team (SLT)
- Directorate Management Team (DMT)

10. BACKGROUND PAPERS

Appendix 1 CIW Performance Evaluation Report (July 2022)

Appendix 2 CIW Improvement Check outcomes letter (June 2025)

11. AUTHOR

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