Arolygiaeth Gofal **Cymru**
Care Inspectorate **Wales**

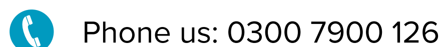
Improving social care and childcare in Wales

Chief Inspector's Annual Report 2020–21

Contents

Foreword	**3**
Our organisation	**7**
Engaging with people	**11**
National Advisory Board	**13**
Adult and children's services	**15**
Childcare and play services	**22**
Local authority social services	**33**
Annex	**40**

How to provide feedback about social care and childcare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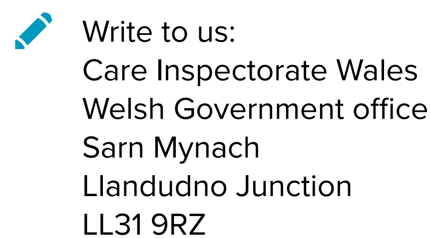
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Foreword

This annual report for 2020-21 recognises the extraordinary year this has been for all of us. No one's life is untouched.

I again offer my deepest sympathies to all those who have lost a family member or friend as a result of the COVID-19 virus. My thoughts and prayers are with you all, at this sad time.

I want to acknowledge and pay tribute to the social care and childcare and play workforce in Wales for their dedication in caring for people, and their hard work tackling the many challenges they faced. This has been, and continues to be, an extremely stressful and difficult time for everyone. Where we have seen examples of poor care, we have taken action; but we have also been inspired by many, many examples of dedicated, compassionate and selfless care.

By February 2020:

- we had completed the enormous task of successfully re-registering 1,700 services under the Regulation and Inspection of Social Care (Wales) Act 2016 introducing new models of regulation, inspection frameworks, processes and guidance to support the successful implementation of the 2016 Act
- we had introduced ratings for childcare and play services
- our online and digital work was moving forward at pace
- we had finalised our strategic priorities and actions for the next three years.

We were encouraged 2020 would be a year for consolidating and embedding our new ways of working and then on 12 March, we received our first notification of a suspected case of COVID-19. On 16 March, we received notification of the first confirmed death of a care home resident and by 5pm that day we had paused our routine inspection programme. We quickly adapted our processes so we could continue to provide assurance about the safety and quality of services; embracing technology to enable us to do this as safely as possible. We worked co-productively with the sector and supported each other to respond to the unprecedented events surrounding the pandemic.

Our priority was to continue to provide assurance to the public and Ministers regarding the safety and quality of services, including social services. Our decisions were guided by three key principles:

- focusing our activity where it was needed most to ensure people receive safe care – this meant concentrating on those areas where we saw the risk to the quality of care was highest and where we could make the biggest difference
- supporting providers by looking at how we could act flexibly and proportionately
- honouring our duty of care to our colleagues in Care Inspectorate Wales.

This year we also saw the completion of inquests into deaths 15 years ago at Brithdir Care Home, which led to the police investigation called Operation Jasmine. I have been deeply moved and saddened to listen again to the tragic circumstances surrounding the deaths at this home. On behalf of Care Inspectorate Wales I should like to express deepest sympathies to the bereaved families. I know nothing can repair the loss they have suffered, but hope the inquests have given them the resolution and answers they deserve.

Putting people at the heart of what we do has long been our central premise and never has this felt more important. We will continue to do everything we can to ensure the safety and quality of the services we regulate and inspect and help protect the most vulnerable in our society.

Finally, I should like to extend my gratitude and admiration to my staff. I am exceptionally proud of the way they have adapted and continued to provide assurance that standards of care are being met. Witnessing their commitment and passion throughout this year has been inspirational. It has been a year like no other, but with the support of my two Deputy Chief Inspectors, Margaret Rooney and Vicky Poole, and our dedicated senior management team, leading Care Inspectorate Wales through this turbulent year has been an extraordinary privilege.

Gillian Baranski
Chief Inspector, CIW

Reflections

This has been an incredibly difficult and challenging year but it has also been a time of inspiration and an opportunity to reflect and learn lessons. Here are some of our key reflections from our work this year:

1. We have been humbled by the courage, innovation and resilience of people working in the social care and childcare and play sector. Providers must be recognised and valued for their continued and vital contribution to caring for and supporting people.
2. The interdependence of the health and social care sector was yet again brought into sharp focus. It is essential people working in the social care sector are given parity of esteem and terms and conditions as those who work in the NHS.
3. Providers of social care services should be recognised and treated as partners in care. During the pandemic, we have been concerned this has not routinely occurred, particularly in relation to people being discharged from hospital. Successful discharge occurs with coordinated communication, timely discharge planning and the receipt of detailed and timely discharge information.
4. Everyone involved in health and social care must ensure people's human rights are respected and remain at the centre of decision making. People receiving health and social care, and their families or advocates must be involved in all decisions affecting them. Decisions must be taken on an individual basis and in the best interests of the person. We saw examples of blanket decisions being made in relation to Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) and banning of visits to people in care homes across entire local authority areas when the national guidance enabled risk assessed visits to occur.
5. Operation Jasmine inquests shone a light on the impact poor leadership and management has on the culture of an organisation and how this in turn affects the safety and well-being of people receiving a service. Culture is made up of the organisation's values, traditions and beliefs, and the behaviours and attitudes of the people in it. A negative culture in Brithdir care home created the environment in which the neglect, abuse and breaches of people's human rights occurred. All social care and childcare organisations should actively promote a positive culture to ensure high quality, safe and compassionate care and support is provided.
6. Working with and sharing information with partners has supported us all to coordinate efforts, understand priorities and respond effectively to secure improvement. Supporting long-term improvement in social care and childcare sectors requires effective partnerships. We will build on our strengthened partnerships to ensure collaborative working is central to how we work.

7. CIW has adapted new and innovative ways of working using virtual technology and online services enabling us to work more flexibly and productively whilst reducing burden on the sector. This included engaging with providers virtually as part of registration, inspection and through large scale provider events. We will build on these new ways of engaging with providers as we continue to review and improve our ways of working.

8. The best outcomes for people were achieved when we worked co-productively with all partners. The work to develop visiting guidance for care homes was an example of this, bringing together the knowledge and experience of a wide range of stakeholders to help address the complex issues of enabling people to reconnect with family and friends. As we move forward to planning for recovery and beyond, this approach must continue and be further strengthened.

The pandemic has been a sad and challenging period in our lives but it has also given us an opportunity to build on the wider public recognition of the importance and value of care services and the impact and difference good quality care can make. Care services matter to everybody and we must all continue to do what we can to secure improvements for people using and working in these vital services.

Our organisation

About us

Who we are

We are Care Inspectorate Wales (CIW), the independent regulator of social care and childcare.

We register, inspect and take action to improve the quality and safety of services for the well-being of the people of Wales.

Services regulated by us

Services we regulate and inspect:

- Care home services (adults and children)
- Domiciliary support services
- Adult placement services
- Secure accommodation services
- Fostering services
- Adoption services
- Residential family centre services
- Advocacy services
- Child minders and day care providers

We refer to these as “regulated services”.

We also review the performance of local authorities in delivery of social services functions. We carry this out through a combination of inspection and performance evaluation activity. In addition we inspect:

- Boarding schools
- Residential special schools (boarding arrangements under 295 days)
- Further education colleges, which accommodate students under 18
- Local authority fostering and adoption services.

Our legal powers

- Social Services and Well-being (Wales) Act 2014
- The Children Act 1989 (as amended)
- Adoption and Children Act 2002
- Children and Families (Wales) Measure 2010
- Regulation and Inspection of Social Care (Wales) Act 2016

All of these give us the power to register and inspect the services listed above.

Protecting against the erosion of people's human rights

The importance of protecting people's human rights has never been more important than during the COVID-19 pandemic. One of the important principles of equality and human rights law is that every effort should be made to involve people in decisions that affect them. Throughout the pandemic we have advocated strongly about the importance of ensuring people, and their families, are involved in decisions about their care.

We saw a move away from the principles of 'voice and control' embodied in the Social Services and Well-being (Wales) Act 2014 to 'doing to' people. Whilst we all faced restrictions on our daily lives, this situation was exacerbated for people in receipt of care and support.

Early in the pandemic we were extremely concerned to hear about blanket approaches to Do Not Attempt Cardiopulmonary Resuscitation (DNACPR). Together with Healthcare Inspectorate Wales (HIW) we issued a **statement** condemning this practice. We also advocated strongly for testing of people being discharged from hospitals to care homes.

In its social care briefing '**Equality and human rights in residential care in Wales during coronavirus**', the Equality and Human Rights Commission highlighted the human rights most at risk of being undermined as:

- Article 2: the right to life
- Article 3: freedom from ill-treatment
- Article 5: right to liberty
- Article 8: right to a private and family life.

We know it has been an extremely challenging time for social care providers and have sought to assist through our frequently asked questions (FAQs) on our website. From the outset, we have been clear about the importance of rights-based approaches.

For example, we worked closely with the Welsh Government to produce guidance on visiting people living in care homes underpinned by ethical and rights-based principles. We also stressed the need to avoid blanket approaches, recognising for example what may be appropriate for adults living in a care home may not be the same for children, nor for people living in supported tenancies. To this end we facilitated an external stakeholder group to advise on the development and implementation of the visitor guidance.

In December 2020, we organised an online provider event focused on rights. The event included presentations by the Equality and Human Rights Commission on its report and Social Care Wales who discussed its paper on 'Balancing Risks, Rights and Responsibilities'. The webinar and presentations can be viewed **here**. Our second event in January 2021 focused on safeguarding, always an important topic, but particularly so during the pandemic where the need to maintain people's safety and well-being has to be balanced with their rights.

We continued to monitor Deprivation of Liberty Safeguards (DoLS) – checking authorisations were sought and in place where necessary; this is an important issue where people who lacked mental capacity needed to self-isolate. We shared our concerns about the limitations of people's mental capacity being assessed 'virtually' at the height of the pandemic.

An important aspect of upholding people's human rights, as set out in More Than Just Words, is ensuring people can communicate in Welsh where this is their preferred language. In April 2020, we started to use a new format for our inspection reports that includes a clear judgement at the start of the report about whether a service is providing an 'active offer' in terms of Welsh language. As well as providing clearer information for the public, this change will enable us to report more systematically on this.

Engaging with people

Engaging during the pandemic

Innovation and collaboration

In July 2020 we published our engagement plan and whilst we have not been able to take forward many of the actions due to the pandemic, the past year has highlighted the critical importance of engaging with our stakeholders.

The role of our Communication and Engagement team has been crucial in keeping providers up to date with ever changing guidance and we worked closely with Welsh Government policy colleagues to make this happen. We also worked with ADSS Cymru and partners to produce a weekly newsletter for care providers, bringing together the week's updates and news.

The publishing of statements about our approach to our work along with regularly updated FAQs generated a total of **492,981** visits to our website.

We also issued two joint statements with HIW encouraging people working in health and social care services to speak up and share positive practice and any concerns they may have about the quality of care. (**4 May 2020**, **8 March 2021**)

The restrictions on our work this year also highlighted the limitations of inspection when we were unable to 'cross thresholds' and speak directly to people living in care homes or children accessing childcare services. Whilst we tried to find other ways of receiving feedback, it could never compensate for talking to people who use services in person. Having said that, we did find in some circumstances, speaking to people virtually resulted in better engagement, for example young people living in care homes for children, parents of children in day care and staff working in domiciliary support services.

Equally, our more regular engagement with services through our 'check-in' and monitoring calls enabled us to have supportive relationships with the shared outcome of keeping people safe. Inspectors provided a listening ear as well as being able to signpost managers to relevant advice and guidance.

In supporting childcare and play providers we held six online events and met regularly with local authority childcare leads and representative bodies such as Cwlwm.

National Advisory Board

A reflection from Dr Ruth Hussey

‘In my role as Chair of the CIW National Advisory Board (NAB), I am responsible for leading the Board in monitoring, scrutinising and raising awareness of CIW’s work. The Board is made up of representatives from across the social care and childcare sectors who provide CIW with an expert voice and valuable insight into the sectors CIW regulates and inspects.

When I was appointed Chair of the Board on 1 January 2020, the impact of COVID-19 was yet to emerge. The Board, previously meeting three times a year across CIW’s office locations, was able to come together virtually to share ideas and discuss how CIW can play its part in improving care and social services in Wales.

During my first year as Chair I have seen how each and every member’s experience has contributed to the collective voice of the group. This has been the most extraordinary of years, particularly for the health and care sectors. The voices of our members have reminded us not only of the pressure on services and communities but how people have managed to adapt under some incredible circumstances.

At each meeting we hear from individual members as part of the ‘Voices from the Sector’ discussion, giving us the opportunity to hear updates as well as posing questions for CIW to consider. We heard first hand of members’ experiences during the pandemic as people who use and provide care and social services across Wales.

Over the past year the Board has provided feedback on CIW’s approach and principles for how they work during the pandemic, in particular engagement with the sector externally and working together as an organisation. We have had some fascinating discussions about CIW’s role in improvement, how we can raise the profile of CIW and indeed the social care sector, and how CIW will continue to provide assurance about the quality and safety of services in Wales.

During this next year we will be reviewing the membership of the Board and will continue to scrutinise CIW's work against the actions and ambitions of the Strategic Plan for 2020-2025. It is an extraordinary privilege to be working with the care sector at such a pivotal time and I look forward to leading the Board's continued and valued contribution to CIW's work.

Dr Ruth Hussey, Chair of the National Advisory Board

'Hearing directly from those who use and provide the services we regulate and inspect keeps us in touch with the reality of how services impact the lives of people across Wales. We come to work every day to ensure the most vulnerable in society are cared for with skill, dignity and love; and to drive out poor care or abuse. Our NAB members keep us focused on what is important. We are so grateful for the commitment, honesty and support of our terrific NAB members!'.

Gillian Baranski, Chief Inspector, CIW

Adult and children's services

Providing assurance during the COVID-19 pandemic

Overview

When the UK moved into lockdown at the end of March 2020 as a response to the COVID-19 pandemic, CIW considered the potential impact on the care sector. It was clear from our understanding of the picture emerging from Europe there was likely to be significant impact on older people and the services supporting them.

CIW considered the risks to people posed by our inspectors visiting services at a time when testing was not available, and potentially carrying the virus to vulnerable people, against the need to have oversight of services that were not performing as we would expect.

These new and difficult circumstances meant we chose to use a flexible approach to the way we work. We retained the right to inspect services in line with our statutory responsibilities, while working with partners to ensure we shared data and intelligence which enabled us to be responsive to issues as they arose. Initially we focused where there were significant risks to people's safety and well-being. As we moved into the summer months with decreased outbreaks we expanded the scope of our inspections, continuing to take a balanced approach to risks for people using services and our own staff.

We were in the unique position of having oversight and links to the sector nationally. This enabled us to provide an ongoing picture of the impact on the care sector and the challenges they faced as the pandemic progressed.

We were able to raise issues and contribute to responses nationally with the Welsh Government and Public Health Wales as well as engaging local authority and health partners.

COVID-19 related notifications

Regulations require service providers to notify the regulator of specific events, including outbreak of infectious disease and deaths of people using their services (care homes). The information is used to inform our inspections and prompt action where we have concerns.

Due to the pandemic we saw a significant rise (41%) in notifications submitted compared to 2019-20. For example, in adult care homes we had a 31% increase in notifications from the previous year. This was in relation to outbreaks of infection and a rise in death rates. In response we designated a team working across inspection and information management to review the notifications related to COVID-19 outbreaks and deaths and produce regular daily and weekly reports.

We received 7,623 notifications of COVID-19 incidents at a service – either related to staff or people receiving the service. We received 8,420 notifications of deaths of which 7,948 related to care home services. 1,399 (17.6%) of these were confirmed as having COVID-19.

We shared these with relevant organisations to inform local and national planning and responses to outbreaks of infection and to promote oversight and support for services locally.

The collated information was used alongside national statistics to provide the public with transparent data about the national position in relation to COVID-19 outbreaks and impact on the care sector.

The methods used by CIW to provide assurance during the pandemic

		Techniques for assurance during the pandemic			
		Check-In Calls	Monitoring Calls	Inspections	Total Assurance Activity
Adult and Children's Services	Care Home Services for Adults	7,174	1,818	178	9,170
	Domiciliary Support Services	2,871	689	130	3,690
	Children's Services	913	427	44	1,384

From 30 March 2020 the team commenced weekly telephone calls to all adult and children's services. The aim of these calls was to understand how providers were managing during the pandemic and offer support, signposting services to sources of guidance and advice as appropriate. Between March and August 2020, we made 10,958 check-in calls to adult and children's services across Wales. These primarily focused on the developing situation within care services, outbreaks of infection, access to Personal Protective Equipment (PPE), impact of infection on staffing levels, potential issues such as access to medication and food supplies.

We were able to focus on services where there were concerns about care and support for people and provide links to relevant agencies to support the service and to consider whether there may be reason to take forward inspection due to potential harm to people.

This information when collated enabled CIW to play an active role in highlighting specific concerns to the Welsh Government, Public Health Wales and more locally with commissioners of services from health and social care. For example, we were able to raise problems for the sector accessing sufficient PPE early in the pandemic along with issues on hospital discharge, access to GP and end of life support services.

In September 2020, we published an **Overview of feedback** and our findings from the check-in calls with providers of services for adults and children during the peak of the COVID-19 outbreak.

In August 2020, our check-in calls were replaced with 'monitoring calls' as pressures on the sector began to ease in the early summer. The calls continued to focus on key areas such as access to PPE and support from other agencies for example GP and end of life services but we also brought in elements that related specifically to monitoring regulatory matters. Monitoring calls were made on a monthly basis, then moved to a more extended period in the autumn to winter months. Between August 2020 and March 2021, we made 2,934 monitoring calls to adult and children's services across Wales.

This was used alongside wider knowledge of services from historical performance and information provided by partner agencies to inform our inspection activity.

Where there had been previous regulatory failings in services we took a risk-based approach requesting evidence of progress in achieving compliance with regulations.

In addition, we sought confirmation from other agencies (social services and health boards) about progress made or concerns about services.

In care homes for children, early feedback was an improved relationship between the children and young people and the staff at services but there were also concerns about the lack of access to families and education.

In older peoples services, concerns about decreased staffing levels were a theme throughout the year. On the whole, providers took action to secure access to consistent staff with the right skills to care for people. This included groups of staff 'moving in' to care home premises to maintain the service.

When we spoke to older people they told us they missed their families and visitors but that staff were trying their best to fill the gap. Many felt frightened and worried about what was happening in the wider world. Children and young people told us they missed their friends and social life.

Inspections

From the beginning of the pandemic and the first lockdown, we aligned our approach to inspections with the alert level in place in Wales. When restrictions were at their highest level we made the decision to focus our inspections on services where we had significant concerns about the safety and well-being of people.

We undertook a risk assessment prior to all inspections and focused on key areas of concern during the inspection visit. The rationale for this was to reduce pressure on the care sector, to enable them to focus their resources on the people they care for and to reduce the risk of infection from increased footfall in services.

Service Type	No. of Inspections
Boarding School	2
Care Home Service for Adults and Children	13
Care Home Service for Adults	165
Care Home Service for Children	40
Domiciliary Support Service	130
Residential Family Centre	2
Total	352

We developed new ways of working to provide oversight of services, this included:

- check-in and monitoring calls referred to previously in this report;
- virtual inspections, using technology to speak to people using services, their relatives and staff as well as virtual tours of the service; and
- working collaboratively with partners from social care, NHS and public health to share information, focus our resources and prioritise those services requiring physical inspection and/or intervention.

While the use of technology and telephone calls enabled us to gather feedback and information during an unprecedented and difficult time, we also recognised the limitations of this. Children and younger adults were more able to engage whereas people living with dementia were less able to communicate with us virtually.

We will use what we have learned during the pandemic to inform and enhance our ways of working.

Care home case study

"A relative contacted CIW as they wanted to visit their mother in a home. Her mother was unable to use an outside visitor pod and the home had refused to allow her to visit indoors as they had a blanket "no visits" in place. The daughter was very upset and was willing to take a COVID-19 test and wear PPE but the home still refused, even though there was no outbreak in the home. The CIW inspector intervened and referred the manager and responsible individual to the latest Welsh Government guidance. The home subsequently allowed a visit and the daughter reported she was over the moon and said *"for the first time in a year I cried tears of joy rather than tears of sadness"*.

Inspector, CIW

Themes of non-compliance

Where we found failures in services that impacted or posed a risk to people's well-being outcomes we issued priority action notices. These are the first stage of our securing improvement and enforcement pathway and set out the regulatory failings for the service provider and the action they are required to take to improve the service. These services are prioritised for a follow-up inspection within six months to check the required actions have been taken.

In 2019-20 we issued 300 notices to a total of 109 services. In 2020-21 we issued 349 notices to a total of 83 services. This illustrates the extent and serious nature of the failings of these services.

The types of services these were issued to included:

- 57 care home services for adults;
- 11 care home services for children;
- 14 domiciliary support services; and
- 1 residential family centre.

In the initial wave of the pandemic we followed up all outstanding priority action notices with a request for evidence of progress. The notices remained outstanding until we could satisfy ourselves of sound evidence of improvement.

When we returned to inspect, 65% of services had taken action to improve. Where services failed to take action to improve we took further enforcement action as outlined in the table below.

The Statutory notices issued: 1 April 2020– 31 March 2021

Improvement Notices	12
Notices to impose conditions	20
Cancellation of responsible individual	2
Cancellation of service	1

Our work is informed by information we receive through concerns and safeguarding incidents. Overall we saw a 24% increase in concerns raised with us, from 1,736 to 2,151. This included an 83% increase in concerns raised by whistle blowers, from 463 in 2019-20 to 848 in 2020-21.

With the majority of concerns in the previous year being raised from visitors (personal and professional) to services, it is reassuring that during a period with decreased visitors to services the staff working in them have been prepared to come forward and raise concerns. In March 2021, we published a **joint statement** with HIW on the importance of speaking up to keep people safe. We also published a **joint statement** on 4 May 2020.

It will be important for us to monitor this over the coming months and encourage people to come forward with concerns in order to focus our inspection work.

We record concerns under the themes set out in our inspection framework. In adult care home services a notable change in concerns was the rise in issues relating to leadership and management of services, rising from 438 concerns in 2019-20 to 735 in 2020-21. This reflected whistle blowers concerns about the way in which services were run, but also around access to PPE and support.

The latter part of the year saw a rise in the number of concerns raised by relatives about being able to visit family members living in care homes.

Carehome case study

‘’A care home in the Cardiff area had non-compliance issues since September 2020 relating to systemic failings at the service. CIW undertook three inspections and issued five priority action notices. At our latest inspection, we found the service had worked extremely hard to secure the necessary improvements with residents safe, well cared for and experiencing positive outcomes of good care. Our inspector said it was like walking into a different home as the atmosphere was completely changed – staff were working together, felt supported in their roles and practices had significantly improved.’’

Inspector, CIW

Childcare and play services

Providing assurance during the COVID-19 pandemic

The 2020 Self-Assessment of Service Statement (SASS) were submitted to CIW shortly before the COVID-19 pandemic. The information collected provided a benchmark of the pre-COVID world of childcare and play.

As at 31 March 2020, there were 3,966 Childcare and Play services registered with CIW; 2,025 of these were child minders and 1,941 were children's day care. Half of children's day care services were full day care and just over a quarter were sessional day care; the remainder consisted of out of school care, open access play provision and crèches.

Table 1: Number of services as at 31 March 2020 by service type and sub type

Service Type	Service Sub Type	Total
Child Minder	None	2,025
Child Minder Total		2,025
Childrens Day Care	Crèche	20
	Full Day Care	970
	Open Access Play Provision	41
	Out of School Care	385
	Sessional Day Care	525
Childrens Day Care Total		1,941
Grand Total		3,966

Changes in the number, type and capacity of services over the two year period 31 March 2018 to 31 March 2020 show a decline in the number of services coupled with an increase in the number of places. Tables 2 and 3 overleaf provide a summary of the results. The largest increase in the number of services registered was in 'full day care' with an additional 221 services (+30%), which equated to an additional 6,441 places (+21%) in 2019-20 compared to 2017-18.

Conversely, there was a decrease in the number of child minder services, reduced by 176 services (-8%), equating to 490 less places.

Sessional day care services were also reduced by 170 (-24%), equating to 3,818 less places. Overall, there was a 4% decrease in the number of services (-171 services), however, the number of places has increased since 2017-18 (+1,260 places).

Table 2: number of childcare and play services as at 31 March over a three year period

Service Type	Service Sub Type	2017-18	2018-19	Number changes 2017-18 to 2018-19	% change 2017-18 to 2018-19	2019-20	Number changes 2018-19 to 2019-20	% change 2018-19 to 2019-20	Number change 2017-18 to 2019-20	% change 2017-18 to 2019-20
Childrens Day Care	Full Day Care	749	878	129	17	970	92	10	221	30
Childrens Day Care	Sessional Day Care	695	603	-92	-13	525	-78	-13	-170	-24
Childrens Day Care	Out of School Care	415	390	-25	-6	385	-5	-1	-30	-7
Child Minder	None	2,201	2,131	-70	-3	2,025	-106	-5	-176	-8
Childrens Day Care	Crèche	27	26	-1	-4	20	-6	-23	-7	-26
Childrens Day Care	Open Access Play Provision	50	45	-5	-10	41	-4	-9	-9	-18
	Grand Total	4,137	4,073	-64	-2	3,966	-107	-3	-171	-4

Table 3: number of childcare and play places as at 31 March over a three year period

Service Type	Service Sub Type	2017-18	2018-19	Number changes 2017-18 to 2018-19	% change 2017-18 to 2018-19	2019-20	Number changes 2018-19 to 2019-20	% change 2018-19 to 2019-20	Number change 2017-18 to 2019-20	% change 2017-18 to 2019-20
Childrens Day Care	Full Day Care	31,197	34,593	3,396	11	37,638	3,045	9	6,441	21
Childrens Day Care	Sessional Day Care	15,584	13,611	-1,973	-13	11,766	-1,845	-14	-3,818	-24
Childrens Day Care	Out of School Care	15,909	15,366	-543	-3	15,656	290	2	-253	-2
Child Minder	None	16,184	16,113	-71	0	15,694	-419	-3	-490	-3
Childrens Day Care	Crèche	657	636	-21	-3	546	-90	-14	-111	-17
Childrens Day Care	Open Access Play Provision	3,534	3,111	-423	-12	3,025	-86	-3	-509	-14
	Grand Total	83,065	83,430	365	-0	84,325	895	1	1,260	2

Table 4: Change in number of services by number of places over a three year period

	Maximum Capacity <=10	Maximum Capacity >=10 <=30	Maximum Capacity >30 <=50	Maximum Capacity >50 <=70	Maximum Capacity >70
2017-18 – base data					
Full Day Care	5	316	212	126	90
Sessional Day Care	24	604	62	4	1
Out of School Care	4	183	163	42	23
Child Minder	2,180	21	0	0	0
Crèche	5	17	4	0	1
Open Access Play Provision	5	6	9	7	23
2018-19 – change from 2017-18					
Full Day Care	1	103	17	2	6
Sessional Day Care	-4	-78	-9	-1	0
Out of School Care	-1	-26	0	3	-1
Child Minder	-75	5	0	0	0
Crèche	0	-1	0	0	0
Open Access Play Provision	0	-1	-2	0	-2
2019-20 – change from 2017-18					
Full Day Care	2	169	31	2	17
Sessional Day Care	-7	-145	-15	-2	-1
Out of School Care	-2	-38	0	10	0
Child Minder	-184	8	0	0	0
Crèche	-2	-4	-2	0	1
Open Access Play Provision	-1	-2	-4	0	-2

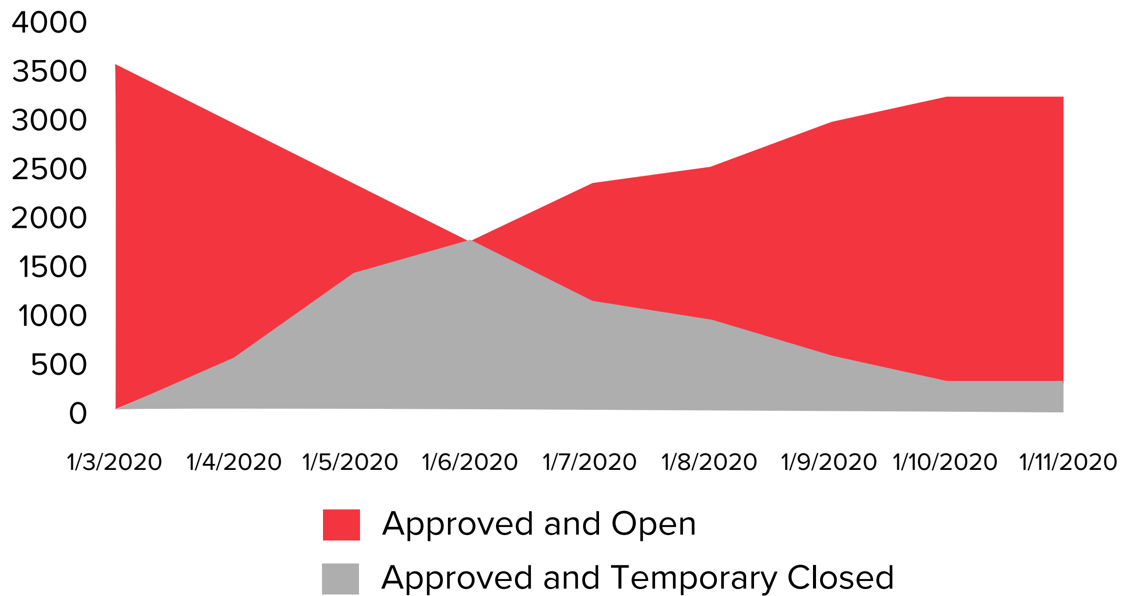
In summary, the period 2017-18 and 2019-20 saw a relative increase in places in those services with a maximum capacity of more than 10 places. This was accompanied by a decline in the number of services with a maximum capacity of less than 10 – mostly made up of child minders.

The impact of the pandemic

Childcare services remained open throughout the pandemic. Initially, support was focused on vulnerable children and those from families of essential workers. The response of the sector was overwhelmingly positive and professional, demonstrating a commitment to children and families. At the height of the pandemic almost half of provision registered with CIW closed temporarily. The reasons for this were mostly insufficient children attending the service or insufficient staffing. This reflected the impact of the pandemic, rather than a decision from providers to withdraw their support for families.

Over the course of the year we received 2,267 notifications of temporary closure due to COVID-19 and a total of 840 notifications of COVID-19 incidents at a service - either related to children or staff. At the peak of the first wave of the pandemic in June 2020 almost half of all services (1,731 equating to 47% of all services) had informed CIW they had temporarily closed (see chart 4). At this time 57% of capacity was closed.

Childcare and play temporary closures due to COVID-19 timeline



Providing assurance during the pandemic

		Techniques for assurance during the pandemic:			
		Check-In Calls	Monitoring Calls	Inspections	Total Assurance Activity
Childcare and Play Services	Child Minder	1,322	703	27	2,052
	Childrens Day Care	974	602	66	1,642

CIW continued to inspect childcare and play services throughout the pandemic, where we had significant concerns about the safety and well-being of children. Elsewhere we intensified our monitoring of services, using check-in calls, monitoring calls and virtual inspections to provide some assurance about the quality and safety of those services remaining open. Check-in calls were used in the early stages of the pandemic. They were brief and designed to check on the circumstances for services. Longer and more searching monitoring calls were developed and deployed as the pandemic progressed. Where we did inspect, time spent on site was kept to a minimum and, consequently, all four of our inspection themes were not necessarily explored in depth. For this reason we temporarily suspended ratings. This is kept under review and we will begin awarding ratings again when the full inspection methodology is routinely applied.

We used the intelligence and evidence from our contact with providers, along with concerns raised with us, to help determine where we might need to undertake an on-site inspection. We also monitored the application of the relaxation of certain elements of the National Minimum Standards (NMS). The decision to relax the NMS was taken by the Welsh Government, with local authorities given the responsibility of approving applications from providers. CIW's role was to collate and monitor the applications and refusals. In addition, we shared information with local authorities about those services subject to enforcement action where relaxation of the NMS should not be approved. In total we were informed of 190 approvals of NMS relaxations, almost all in respect of day care.

We found most providers appreciated the contact with CIW. We were able to take some assurance about the response to the pandemic by asking about compliance with the protective measures guidance issued by the Welsh Government. At the same time we explored a number of questions related to the leadership and management and the staffing situation for each service that we called. Where we were not assured by what we heard, further investigation followed, including virtual or on-site inspection activity.

The most common issues raised with us by providers were concerns about the sustainability of their service, coupled with queries about the arrangements for financial and practical support at an intensely challenging time. We answered queries wherever possible, but for many questions we needed to signpost providers to further sources of Welsh Government information and advice.

Partnership and collaboration

During the pandemic we stepped up our engagement with local authorities; stakeholder organisations represented through Cwlwm; and with our Welsh Government policy colleagues. Through regular meetings with all concerned we worked hard to solve problems, coordinate our efforts and align our communications with the sector. Some providers were understandably frustrated with our inability, early on, to answer queries related to financial support or the protective measures guidance. While these are matters for the Welsh Government and not CIW, as the pandemic progressed we improved our ability to locate or signpost people to sources of information and answers to their queries.

Inspections

We aligned our approach to inspections with the alert level in place in Wales. When restrictions were at their highest level our inspections were restricted to where we had significant concerns about the safety and well-being of children. As restrictions eased we increased the number of inspections to include those services who were found to be non-compliant with regulations at their last inspection; were newly registered, or simply overdue an inspection.

For the most part, concerns raised with us during the pandemic were similar to those we receive at other times. There were, however, some specific concerns about providers not observing the protective measures guidance,

or failing to adequately staff services that remained open during the pandemic. In every example, we investigated further and sought assurance about the safety of the service for children. During the pandemic we were informed of four separate incidents where children left a service unnoticed. This is more than in normal times. In three of the examples the missing child was returned by a member of the public, in the fourth instance staff quickly noticed the child was missing and retrieved them within a few minutes. In each example we followed up the incident with an inspection and also considered whether there were common factors involved. Human error was the main factor in each example. In addition, because of the pandemic, each service had less children attending than usual.

Not surprisingly, given the temporary closure of many services, the number of concerns received (324) decreased by just over a quarter compared to 2019-20. The majority of concerns (156) related to leadership and management of the service, with the next highest category being concerns related to the care and development of children. This is the same pattern as in 2019-20. The majority of concerns related to leadership and management which is not unexpected as this is the category that encompasses concerns about staffing arrangements, including, for example, whether sufficient and appropriately qualified staff are on duty. The largest number of concerns related to Full Day Care services, with the next highest number related to child minders. This is the same pattern as in 2019-20. Most concerns were raised by members of the public with the minority (48) coming from members of staff. Again, these figures are similar to 2019-20.

Securing improvement

During 2020-21 we found that 19 services (15 day care and 4 child minders) did not meet legal requirements and we issued 47 priority action notices. This level of activity is less than 2019-20 and, of course, reflects the fact that many services closed temporarily and also the reduction in inspections. Most services were found to have made some improvements when we returned to them.

Case study example

“A childcare service was taken over by new owners who registered with CIW. There had been a number of issues identified and priority action notices issued following the last inspection under the previous owners. Staff were generally demoralised and were very nervous about the inspection process. The new owners had experienced some issues with staff being reluctant to follow new systems and procedures.

A virtual inspection was undertaken as a result of a concern. The concern and resulting inspection flagged up a number of issues around staff not consistently following new procedures put in place by the new owners. These were discussed with staff during virtual meetings and the outcome was positive. Overall it was a positive inspection and lessons were learnt from the concern and inspection process.”

Inspector, CIW

The responsible individual e-mailed CIW after the inspection report had been published:

‘All is going really well with the nurseries, the inspection was a good boost that everyone needed and it is showing. Everyone is coming together and adhering to the new systems in place’.

Case study example

“We received a notification from a nursery informing us a child had left the premises unnoticed. It was decided an immediate inspection of the service was required. The nursery management team were very cooperative and understood the severity of the situation and as a result disciplinary action was taken by the manager. During the inspection, it became clear risk assessments were poor. Internal and external gates were not locked and children could have left the premises with ease un-noticed. A priority action notice was issued requiring all gates to be secured during operational hours to prevent an incident of this kind happening again. During the feedback meeting, the leader of the setting commented they had reviewed processes, all gates were kept locked and staff and children had benefitted from the inspection.”

Inspector, CIW

Adapting our approach to registration

Early in the pandemic, we recognised the increased need for additional capacity within the social care sector. In response to this, the CIW Registration Team prioritised any applications for registration or variation, which brought additional capacity to the sector. We shared information on registration capacity information with CIW Local Authority Inspection team on a weekly basis, assisting local authorities with their commissioning arrangements.

The temporary closure of many childcare and play services meant not all key workers had access to childcare. We worked with local authorities to ensure day care services set up to care for the children of key workers were registered swiftly, meaning key workers were able to make use of local childcare provision and continue working.

We also adapted some of our processes to remove any barriers to registration brought about by the pandemic, such as:

- allowing applicants to self-declare any medical conditions and social services checks to reduce the burden on the NHS and local authorities;
- undertaking all site visits virtually, apart from empty premises;
- undertaking all registration interviews virtually; and
- undertaking virtual DBS checks.

All services registered using adapted processes have been flagged on our IT system to ensure we can follow up on any areas identified during the inspection process.

Whilst we will not continue with all of the adapted processes long term, we have learned we can achieve the same level of assurance as prior to the pandemic, whilst also making the registration process less burdensome for applicants.

When the Welsh Government introduced a temporary exemption from registration for services set up to respond to the pandemic, the CIW Registration Team devised and maintained a notification system for providers.

Where we have found services operating without registration, we worked across the CIW Registration and Enforcement Team to ensure the service ceased operating or applied to register.

Local authority social services

Providing assurance during the COVID-19 pandemic

In March 2020, CIW suspended its routine inspection programme in response to the COVID-19 pandemic to enable local authorities and providers to focus fully on responding to the challenging circumstances. A revised programme with local authorities recommenced in September 2020 to provide assurance about how people were being safeguarded and well-being promoted during the pandemic. Our assurance checks focused on, safety and well-being of people who use or may need to use services, the safety of services they access and the safety and well-being of people who work in services.

In order to provide assurance to the people of Wales, we commenced a full programme of assurance checks in all 22 local authorities. Where we identified serious or significant risks to outcomes for people we undertook intensive inspection activity.

The impact of COVID-19 on local authority social services has been extremely challenging, with local authorities working in unprecedented circumstances. However, amidst this turmoil we heard of the collective strength of partnership working. We heard of the selflessness of staff working at every level across all local authorities, with partner agencies, coming together to deliver priority front line services in circumstances which can only be described as unrelenting.

Staff working in social services departments, and their wider colleagues, were required to take on extended roles such as the distribution of PPE and ensuring infection prevention and control measures were in place to protect staff and people using services. In some local authorities these new areas of work expanded to include distribution of food, co-ordination of track and trace and vaccination of the workforce. Managers and staff responded flexibly to accommodate these additional demands.

Moving forward, it is essential there is adequate resource to enable services to fully recover and improve. This must be long term if local authorities are to harness opportunities to innovate and reshape services to meet population needs which have and will continue to change as a result of the pandemic.

All local authorities continued to undertake face-to-face visits with people most at risk. They were innovative in adapting to COVID-19 restrictions, such as "through the window" visiting and the provision of outdoor activities for people to have contact with professionals. Increased use of digital technology ensured the continuity of statutory multi-agency meetings, such as child and adult protection conferences. Many local authorities provided devices to people to enable regular contact with their families and with services. We saw many positive examples of the use of technology to support a range of activities to help reduce isolation.

Nevertheless, people who use services were adversely affected with the impact on unpaid carers leading to the breakdown of some care arrangements. Coupled with suspension of services and increasing demand many people had to wait longer for the services they required. For children and young people in care placement stability has been high but increased use of online contact with children and families does not replace face-to-face contact.

We have seen the building of stronger partnership working across health and social care. All partners must capitalise and harness this learning as we reshape social care.

“In one local authority we heard about support provided to a carer and her husband. The carer was under significant pressure due to her husband’s poor mental health but social workers recognised the pressures and identified a period of respite was required. The couple had not spent a night apart for 30 years of marriage but the experience was managed carefully and skilfully. The respite period improved the person’s mental health and the carer described the help received as tremendous.”

Inspector, CIW

“One local authority, despite the challenges of the pandemic, successfully recruited 13 foster carers and had a further 19 applications in progress. The fostering team used a range of initiatives such as social media, radio and television as a recruitment platform. Virtual panels, training, and supervision arrangements had all helped to ensure there was no delay in securing appointments to this crucial service.”

Inspector, CIW

Methods of providing assurance during the pandemic

Our programme of assurance checks focused on two key questions;

1. How well is the local authority discharging its statutory functions to keep people who need care and support and carers who need support, safe and promote their well-being during the pandemic?
2. What is the local authority doing to prevent the need for children to come into care; and are children returning home to their families quickly enough where safe to do so?

The purpose of assurance checks was to review how well local authority social services continued to help and support adults and children with a focus on safety and well-being. We focused our key lines of enquiry within the four principles of the Social Services and Well-being (Wales) Act 2014 and recorded our judgements and findings aligned to these: People, – Voice and Control, Prevention, Partnerships and Integration and, Well-being.

What we found

Findings from our assurance checks and inspection activity during 2020-21 demonstrated people's voices were being heard ensuring they achieved their outcomes. We found local authorities were embedding a strength based approach. This included multi-agency preventive approaches at the "front door" and timely and thorough responses to safeguarding referrals.

In most of the local authorities we visited we found people's safety and well-being had been prioritised during the pandemic. We found local authority staff were committed to go above and beyond to support people.

Safely reducing the number of children in care was a priority for all the local authorities visited. Our early findings showed where there were clear whole system strategies; where an improvement narrative (rather than financial targets) was owned by all, better outcomes for children and young people were achieved.

Recruitment and retention of suitably qualified practitioners was problematic for a significant number of the local authorities we visited. We found persistent change of workers had a negative impact on engagement with and building trust with people and on staff morale. This also had financial implications for local authorities of hefty costs of agency staff.

In some local authorities partnerships could have worked better at a strategic level to deliver a more integrated and sustainable approach to promoting independence and well-being. This was most notable in relation to hospital discharge and in mental health services.

We found some services had to be reduced during the pandemic. As a consequence many people were waiting for the care and support they required. This was particularly evident in relation to domiciliary support and reablement services and has had an increasingly negative impact on unpaid carers.

Whilst we did see innovative practice in response to the needs of carers in some areas, assessment and support for carers remained an area for improvement in most of the local authorities we visited.

We identified strengths and areas for priority improvement across all of the local authorities we visited. We will review progress of these through subsequent performance evaluation, review and re-inspection. We will produce an overview of our findings when all assurance checks have been completed by the end of June 2021.

Case study example

“In one local authority, fluctuating quality in social care services for children had been a concern for CIW for some time. Rapid improvements in parts of the service often went in tandem with decline elsewhere. Outcomes for children were not consistently good and children were not getting the support they needed and were entitled to expect.

CIW met leaders of the council to make them aware of the seriousness of failings in operational practice and management oversight.

The detailed inspection and monitoring work CIW had undertaken in the previous two years enabled us to be very specific on the social care issues needing to be addressed. Our regular regional information sharing meetings with Audit Wales provided important context and helped us understand the background of the local authority and consequently helped shape our approach.

Support also came from the regional safeguarding board who provided additional independent audit of case files identifying areas for improvement.

The decisive actions of the CEO and professional support available from other local authorities in the region gave CIW the confidence to delay immediate further inspections. Our latest monitoring visit identified continued improvement in this local authority.”

Inspector, CIW

Operation Jasmine

Operation Jasmine was a historic inquiry by Gwent Police into allegations of neglect at a number of nursing homes in South East Wales from 2005 to 2013. It began as a result of a cluster of deaths in Gwent care homes linked to pressure wounds.

It was the subject of an independent review by Margaret Flynn who published her report, **In Search of Accountability: a review of the neglect of older people living in care homes investigated as Operation Jasmine**, in May 2015. In total twelve recommendations were made, including that inquests should be held.

In January 2021, inquests commenced into the deaths of severn people who lived at Brithdir care home. The Coroner explored the care at the care home as well as the role of the state agencies in their oversight and regulation of the care home. This included the Care Standards Inspectorate Wales (our predecessor organisation), the then Caerphilly Local Health Board and Caerphilly County Borough Council.

These were incredibly important inquests, particularly for the families of the deceased. We recognise the pain and upset this has caused the bereaved families and their understandable frustration at the length of time it took for these matters to be explored in public.

The Coroner concluded the deaths of five of the people were contributed to by neglect.

He was critical of the failings of the qualified staff, the owner and managers of Brithdir care home. The evidence described a culture in the care home whereby residents were being ‘warehoused’, and ‘de-humanised’ with even the basic tasks of providing food and fluids not being undertaken to minimum standards.

The Coroner found state agencies were too focused on processes and opportunities were missed to take action earlier. He acknowledged the employees of the state agencies had acted to the best of their ability, were working in extremely difficult circumstances, and were hamstrung by the legislation in place at the time.

We acknowledge and accept the Coroner’s findings at the inquests and want to reassure people who use care services today that as a direct result of these tragic events that took place between 2002 and 2006, the law was changed to give us greater power to act swiftly and take firm action when needed.

Following the events surrounding Operation Jasmine, significant changes were made to social care services and regulation in Wales as well as how the regulator operates. These changes were informed by lessons learned from Operation Jasmine and the recommendations from the Flynn review.

New legislation, the Regulation and Inspection of Social Care (Wales) Act 2016 was introduced which places people firmly at the centre of regulation, focusing on their personal outcomes and what matters to them. It places accountability for the quality of care firmly at the highest level within the provider organisation and enables the regulator to take swift action when thing go wrong.

Our ways of working have also changed significantly since these events with new approaches to inspection and a progressive and proportionate enforcement pathway to ensure where there are care failings, action is taken swiftly. The safety and well-being of the people who use care services is at the heart of everything we do, and the quality of care is our utmost priority. We will not tolerate poor care and we will take action to protect people where necessary.

We must never become complacent and we are committed to continuously listen, learn and improve. Therefore we will be holding reflection and learning events both with our own staff and with stakeholders and partners in the comings months to ensure the lessons learned from Operation Jasmine are not forgotten.

Annex

Budget and breakdown

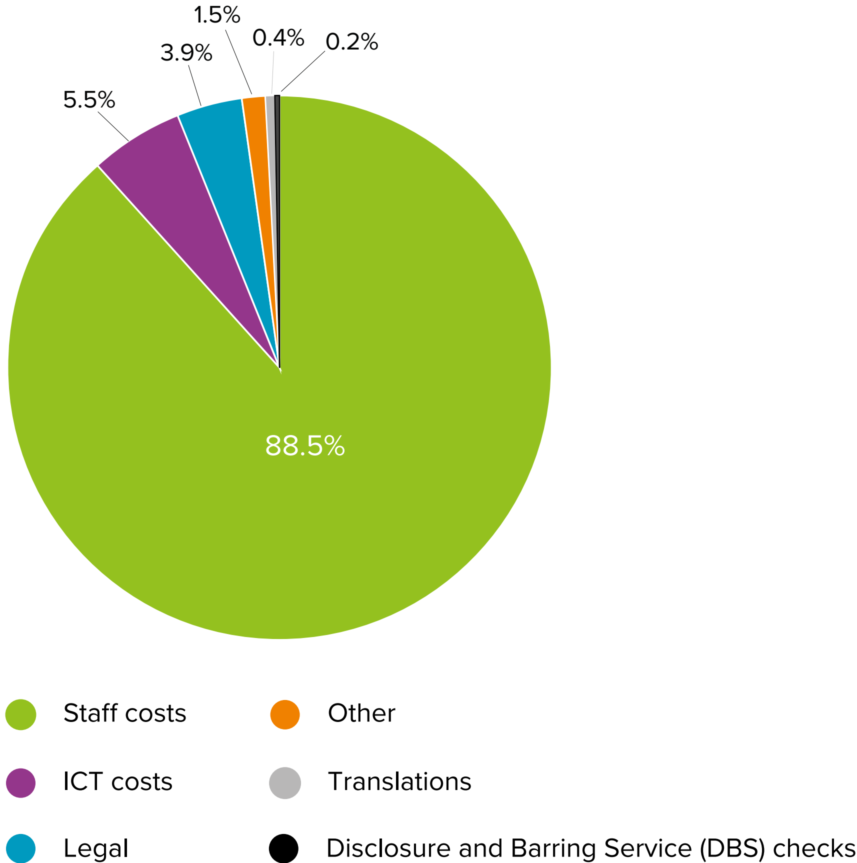
Our allocated budget for 2020-21 was £14,263,000.

We also received funding to support:

Our allocated budget for 2020-21	£14,263,000
The implementation of the Regulation and Inspection of Social Care (Wales) Act 2016	£535,453
The development and implementation of on-line self-assessment of service statements (SASS) for childcare and play services and for administration of the Voluntary Approval Scheme (known as the Nanny Scheme).	£95,001
Additional funding to part cover legal costs for Operation Jasmine to support CIW's response to the Coroner's inquests	£334,000
Total funding	**£15,227,454**
Costs	
Staff costs	£13,443,637
Non-staff costs (IT, translation, telephony, T&S etc)	£1,768,817
Total costs	**£15,212,454**

By the end of the financial year, £13,443,637 was spent on staff costs and £1,768,817 was spent on non-staff costs with 84% of the staff costs representing inspection and regulation activity.

Breakdown of spend



'Other' is an amalgamation of smaller costs, an example of which would be staff training and communication.

We adapted our events programme, and hosted 22 virtual provider events.

We sent 200 provider e-bulletin updates this year.

We built and launched a COVID-19 website information area including provider guidance and FAQ's.

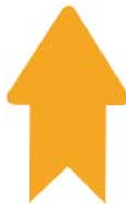
This had **33,575** visits by 31 March 2021.

There were **492,981 total** sessions on our website.

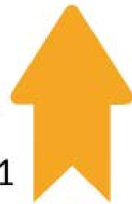
Our bilingual external newsletter subscribers have increased from 10,417 to an impressive 10,749.

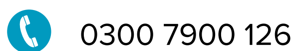
20,206 people engaged with our posts across all our Twitter and Facebook channels, down from 22,164 last year.

Our Twitter followers increased by 578, up to 5,910.



We gained 631 followers on our Facebook channels, up from 1,645 last year to 2,276 as of 31 March 2021.





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