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Dear Director,

Care Inspectorate Wales (CIW) - Assurance Check 2021: Gwynedd Council

This letter summarises the findings of our assurance check on the 18 January to 22 January 2021. The purpose of this assurance check was to review how well local authority social services continue to help and support adults and children with a focus on safety and well-being.

Overview

In March 2020, Care Inspectorate Wales (CIW) suspended its routine 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 to provide assurance about how people are being safeguarded and well-being promoted during the pandemic. The purpose of this assurance check was to review how well the local authority continues to help and support adults and children with a focus on safety and well-being. We considered 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. We focused our key lines of enquiry within the four principles of the Social Services and Well-being (Wales) Act 2014 and have recorded our judgements and findings aligned to these: People - Voice and Control, Prevention, Partnerships and Integration, Well-being.

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We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Our focus was on:

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?
3. How well is the local authority providing early help, care and support and seamless transitions between services for disabled children and their families?

Summary of findings and priorities for improvement:

People - voice and control - We asked: How well is the local authority ensuring people, carers and practitioners are having their voices heard, making informed choices, and maintaining control over their lives. While also balancing the recommendations and requirements made by Public Health Wales and Welsh Government to limit the spread of COVID-19?

We saw strong evidence of the local authority maintaining contact with people during the pandemic to offer support and assistance. In both children's and adults' services there was an abundance of activity in records. We saw examples of people being offered both practical and emotional help, which was valued by individuals. Practitioners we spoke with expressed confidence that children and adults were safe. There was evidence of practitioners taking a collaborative approach and working in partnership with people to ensure their views and wishes were captured. Additional focus is needed to confirm people are always enabled to have their voices fully heard and make informed choices about the care and support needed to achieve optimal outcomes. The local authority has not embedded one preferred model of social work practice, however collaborative conversations training is being implemented across adults and children's services in line with the principles of the Social Services and Well-being Act (2014).

In response to our staff survey the vast majority of practitioners in adults services describe caseloads as manageable. They clearly understood the circumstances of the people they work with and their communities well. People were informed of their rights and entitlements including advocacy and staff were clearly committed to providing high quality social services in Gwynedd. This was evidenced in empathetic, kind and caring responses. Some assessments reviewed remained too focused on need and the recording of personal outcomes lacked clarity. At times it was difficult to follow decision making and clearly understand the rationale at key decision points in people's lives, such as when an individual moves into a care home. Supervision was rarely recorded in adults services files. Doing so would provide an opportunity for managers to ensure agreed outcomes and pertinent

decisions are articulated clearly. It is encouraging to see the local authority had already identified recording on Welsh Community Care Information System (WCCIS) as an area requiring attention in the adults services programme of work. In summary, managers need to ensure people have their voices heard and these are consistently recorded.

In children's services, assessments and care plans generally demonstrated good information gathering, with analysis of strengths and barriers aimed to support outcome focused planning. The local authority should ensure each child's wishes and needs are captured individually, particularly if there are larger sibling groups. During the pandemic practitioners maintained contact with children both face-to-face and virtually to ensure their safety. We found professionals made timely and appropriate referrals to children's services which triggered well established multi-disciplinary mechanisms. We saw good examples of the local authority using innovative practice models such as the effective child protection pilot to enable families and practitioners to clearly articulate concerns and aims of intervention. The results of our staff survey evidenced this was valued by practitioners who gave multiple examples of the benefit of this approach to children and families.

The local authority is committed to delivering a service in the language of choice. We found assessments and ongoing care routinely provided in Welsh. The local authority is proud to make the Active Offer and ensure people's rights are protected. We also observed translation in other languages being used to facilitate participation. In some instances the files seen were maintained in a mixture of English and Welsh, however the local authority ensures documents are provided in the language of choice.

Gwynedd Council has a positive approach to recruitment and retention of staff with no use of agency staff. We saw evidence of the benefits of this stability to children and adults. The vast majority of practitioners who responded to our survey expressed the view the workforce has been well supported during the pandemic. Practitioners value the accessibility of managers and peer support from colleagues, both informally and through formal supervision. In children's services, supervision decisions were recorded on files with clear actions and good analysis of risks evident. We heard from practitioners about positive opportunities for learning and development which support them to feel more confident in their roles. This included people in the first three years of practice who expressed gratitude for the support provided and confidence they would remain with the local authority to progress their careers.

Safely reducing the number of children looked after is a recognised priority for the local authority. Senior managers and officers have a good understanding and knowledge of the profile of looked after children and are strongly committed to the preventative agenda. We heard there is good support for corporate parenting across the council. The number of children being looked after has increased over the last twelve months but the local authority are well sighted on the reasons for this. They are implementing measures to discharge care orders including a rigorous scrutiny panel where each child's placement is challenged and all attempts to work with families undertaken. For example, we heard about matching

practitioners skills to the family's needs to improve relationships and engagement. We saw other examples of positive initiatives to safely reduce the number of children in care including additional resource in the edge of care team, and a dedicated post for supporting foster parents in the fostering service.

Prevention - We asked: To what extent is the local authority successful in promoting prevention and reducing need for increased or formal support from statutory agencies?

Senior managers understand access to early intervention and prevention is key to maintaining well-being and mitigating demand on statutory services. Practitioners emphasised the resilience of and support offered by local communities. We heard positive examples of innovative community projects to enhance people's quality of life during the pandemic. These included delivering a Christmas box to everyone over the age of 70 in one village, and a pen-pal scheme to connect children with older people benefitting both generations. We also heard about food banks being open to everyone in need without a criteria, and examples of many online activities to connect people through shared interests such as an online carers festival.

Responses to our staff survey strongly reflected the view preventative services are working well and are valued for reducing the need for statutory support but more investment would be welcomed. In adults services we found timely responses to requests for minor aids or adaptations in the home. However, some waiting times for occupational therapy support such as bathing assessments do not meet the intentions of the 2014 Act and must improve. To mitigate this there is workforce planning underway to increase the number of occupational therapists available when people contact the local authority. We heard about the benefits of the five information advice and assistance points which enables local responses to need. The local authority should ensure it has sufficient data about the work of preventative services to monitor their effectiveness across Gwynedd and enable it to plan at a local level for future needs.

The family support strategy aims to combine all preventative services for children and families to offer a seamless service. Practitioners from early help services proactively contacted families to offer support. We saw examples of children and families in receipt of early practical help, such as a nursery place which supported a mother to care for her new baby. Responses to our staff survey strongly reflected the view children's services is willing to innovate and introduce new ideas to continually improve. This was evidenced during the pandemic by an information hub for children and families providing information for people online and by phone on issues such as grieving and mental health as well as signposting people to alternative support as necessary. We heard about smooth transitions between early help and children's services teams with managers taking a flexible approach to stepping up or down support as necessary.

Partnership and Integration - We asked: To what extent is the local authority able to assure itself opportunities for partnership working are positively exploited to maximise person centred planning and ensure integrated service delivery and service sustainability?

In the majority of the files we reviewed we saw evidence of practitioners developing professional working relationship with people built upon co-operation and a shared understanding of what matters. We saw good partnership working between professionals, families and carers. We heard from a small sample of carers in adults services about excellent support from the local authority, with innovative examples of craft boxes being delivered and then a virtual craft activity undertaken together to reduce isolation.

We heard and saw positive examples of multi-agency working to manage the risks of people with the most complex needs. At a practice level in children's services the multi-agency Tîm Emrallt has been developed and delivered to facilitate a shared understanding and development of practice in the area of problematic and inappropriate sexual behaviour in children and young people. We observed timely information sharing with police, probation and other partners where this was required. We heard from social work staff and managers about the challenges of supporting the emotional needs of children and a lack of agile mental health services available. The local authority and health board have had difficulty reconciling services, with the Child and Adolescent Mental Health Services (CAMHS) focused primarily on the needs of children with a mental illness. For many children working with children's services this clinical definition is not applicable, and there is concern that services are not available for some children with highly complex emotional needs. This issue is not only specific to the local authority and senior managers were actively working to develop alternative support.

The majority of providers and a small sample of third sector organisations who responded to our survey reported excellent working relationships and support during the pandemic. They praised the local authority for timely use of new digital ways of working to support seven day communication with them. We heard about excellent distribution of Personal Protective Equipment (PPE), prioritising the safety of care workers and the local authority advocating on behalf of individuals for other agencies to support them. We heard how the Covid Support Team was a point of contact for people to support and alleviate the pressure on statutory services. In adults services we saw examples of the local authority working effectively with partners to ensure people were returned home from hospital as soon as possible.

We heard about the Management Board for Disabled Children's Services which operates across two local authority areas and provides greater opportunities for working together. For instance, it has enabled joint recruitment of twenty short break volunteers to offer respite care to families and to assist with family days out, sibling support and day trips. There are a number of jointly commissioned packages of support for disabled children between the health board and the local authority with partners working together closely to best support children and their families. Responses to our staff survey identified that

improved working with the health board should be prioritised to ensure people's needs are met appropriately, particularly where joint funding arrangements are required. We heard how obtaining suitable housing can be challenging and the local authority are continuing to address this with partners.

For children who were in care we saw all statutory visits and reviews undertaken in a timely manner. The reviews reflected the children's, carers and parents perspective with good narratives relating to well-being. We saw examples of children being included and involved in their plans. There was also timely sharing of plans with Independent Reviewing Officers (IRO's) and other partners including Health and Education to ensure a cohesive approach to care. We observed positive planning for contact between children and families with plans for contact when pandemic restrictions are lifted. Practitioners frequently contact children and carers to offer help and support. Foster carers we contacted reported excellent support from the fostering team. In order to support placement stability further additional resource has been identified in the fostering team. We heard about planning for Special Guardianship Order (SGO) arrangements; the local authority have been working on an updated policy and it is important that this is introduced across children's services as soon as possible to broaden permanency options for children.

We heard from a group of young people who had left care about the good support they had received from the 16+ team and their personal assistants. They described how they had been supported into employment and suitable living accommodation. We saw evidence of 'When I'm Ready' conversations taking place but heard that these could have begun at an earlier date in a small number of cases. Young people in care were supported to gain independent living skills, but we heard a lack of suitable accommodation can be a barrier to this. In summary, from the cases we saw children benefited from stable placements meeting their needs with good long term outcomes.

Well-being - We asked: To what extent is the local authority promoting well-being, ensuring people maintain their safety and achieve positive outcomes that matter to them?

Both adults and children's services benefit from good corporate support and an established senior management team who aim to take a whole lifespan approach to care and support. Practitioners we spoke with demonstrate an understanding of the strategic vision of the local authority as outlined in Ffordd Gwynedd.

In adults services the majority of the files we reviewed recorded what matters conversations which reflected people's circumstances. The better plans included the strengths people have and how these can contribute to outcomes they want to achieve. Some plans lacked a focus on what needed to happen for people to achieve what they wanted; this means care and support planning can misrepresent what is important to people. The local authority must ensure the person's strengths are consistently reflected in a meaningful way.

We heard about a waiting list for formal reviews in adults services, but saw evidence of practitioners maintaining contact with people and amending their method of review as necessary. The local authority must improve timeliness of reviews of care and support plans as some people may not be getting the support they need. We saw waiting lists for domiciliary support and practitioners we spoke with expressed concerns about this however we saw flexible and swift responses where there was an immediate risk to a person's independence.

Practitioners expressed positive feedback about adult safeguarding and this confidence was also reflected in responses to our provider survey. In the files we reviewed the safeguarding process was used to underpin conversations with adults at risk but it was sometimes not possible to follow decision making. The rationale for decisions in safeguarding should always be recorded clearly including decisions to take no further action. The local authority must ensure the new safeguarding procedures are implemented with analysis of evidence and rigorous recording of decisions. This should include consideration of mental capacity and how wider safeguarding issues are to be addressed and by whom.

For disabled children and their families, Derwen Multi-Disciplinary Team have frequently contacted people during the pandemic to offer support. This has included practical assistance with aids and adaptations, emotional support with telephone calls from a psychologist and also a range of activities for children during the summer holidays. Reviews were undertaken in statutory timeframes and as needs arose practitioners proactively looked to address these, for instance, organising physical intervention training for parents struggling with their child's behaviour. A number of day support services have ceased during the pandemic but we heard about innovative use of staff to support families at this time. The local authority must ensure each child is clearly visible in their own casefile and remains the focus of their care plans. Responses from parents to our survey highlighted a general lack of suitable childcare for disabled children which was also echoed by practitioners.

The local authority recognises it needs to offer a broad range of support and choices to families. There is a relatively low uptake of direct payments due to the challenges of recruiting personal assistants and the local authority must ensure this is an option for people. We heard about excellent provision provided by Hafan Y Ser and acknowledge how valued this support service is to families. The local authority has made every effort to re-open this facility as soon as possible to begin providing the service again, albeit at a reduced rate due to pandemic safety procedures.

Method:

- we reviewed documentation supplied in advance of our visit
- we spoke with carers and people who were receiving or had received care and support

- we reviewed 40 files
- we held 10 case tracking interviews with staff
- we administered a survey to social services employee
- We administered a survey to providers
- We administered a survey to third sector organisations
- we administered a survey to parent and carers of disabled children
- we administered a survey to people who had experience of care and support

Next Steps:

We have identified strengths and areas for priority improvement and we will review the progress of these areas through our performance evaluation review meetings with the heads of service and director. We expect the areas of improvement we have identified to be included in the local authority's improvement plans. We would like to extend our thanks to all those who helped with the arrangements for this assurance check and to those people and staff who spoke with us.

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Yours sincerely,



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