

# Checking learning disability services in Carmarthenshire

What we found out



# How to use this report



This is an Easy Read version of: **Care Inspectorate Wales & Healthcare Inspectorate Wales - Assurance Check of Carmarthenshire County Council's (CCC) Community Learning Disability Team (CLDT) and the Learning Disabilities Directorate within Hywel Dda University Health Board (HDUHB).**



You might need help to read it. Ask someone you know to help you. Words in **bold blue** may be hard to understand. You can check what they mean on **page 33**.



Where the document says **we**, this means **Care Inspectorate Wales** and **Healthcare Inspectorate Wales**. For more information contact:



**Websites:**

[www.careinspectorate.wales](http://www.careinspectorate.wales)

[www.hiw.org.uk](http://www.hiw.org.uk)



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# Contents

<b>About this report .....</b>	<b>4</b>
<b>What we do .....</b>	<b>5</b>
The way we did our checks .....	6
<b>What we found.....</b>	<b>8</b>
People.....	9
Prevention .....	19
Partnership.....	24
Wellbeing.....	26
<b>What happens next.....</b>	<b>31</b>
<b>Hard words .....</b>	<b>33</b>

# About this report



We are **Care Inspectorate Wales** and **Healthcare Inspectorate Wales**.



From **10 to 12 November 2025**, we did an **Assurance Check** of:

- Carmarthenshire County Council Community Learning Disability Team and
- Hywel Dda University Health Board Learning Disabilities Directorate.



An **Assurance Check** is a check to make sure they are doing their jobs well and following the rules.



This report shares what we found out.

# What we do



We check how well councils and health boards are doing their jobs and helping people.

Our focus is on how well they work in these 4 areas:



**1. People** - Make sure everyone has a say and control in their life.



**2. Prevention** - Keep the need for support low and stop problems from getting worse.



**3. Partnerships** - Work well with others to provide good, lasting services.



**4. Well-being** - Protect people from harm and abuse, so they feel safe, happy, and supported.



We check if services are following the laws:

- Social Services and Wellbeing (Wales) Act 2014.
- Health and Social Care (Quality and Engagement) (Wales) Act 2020.
- Health and Care Quality Standards 2023.

## The way we did our checks

We looked at 15 people's records. This included:



- Checking health and social care records.



- Talking to the person, their family, carers and key workers.



We talked to 20 people who use services or their carers.



We talked to 47 council workers and health board workers.



We checked documents and did surveys with people who use services, carers, and council workers.

# What we found



We found good work being done.



And we found some things that need to be better.



There are some things we want the council and health board to do.



When we say **must**, this means changes that need to be done to follow the law.



When we say **should**, this means changes that will make things better but are not law.

# People

## Good work



Health and social care services work well together to support people. Their goals and rules mostly match. This helps give joined-up support. Services usually respond well when people need help.



The council hires and keeps staff well. There are enough staff to help people with mental health checks at all times.



The health board has made new jobs to better support people's physical health.



Council and health board staff say Carmarthenshire is a good place to work. Staff feel supported and able to share ideas. Leaders are friendly and easy to talk to.



Staff across health and social care can get training that meets their needs. Staff help each other across organisations.



Speech and Language Therapists give training on using lots of ways to communicate, not just speaking. This helps staff support people who use different ways to communicate.



Joint training helps health and social care staff work better as a team.



Many people say staff are helpful and friendly. People like staff who are clear and give good support.



Services support the Welsh language well. People can use Welsh without having to ask. Welsh-speaking staff and Welsh written information are available.



All council staff in the **Deprivation of Liberty Safeguards** team speak Welsh.



**Deprivation of Liberty Safeguards** is a legal process. It is used when a person cannot decide about their own care or treatment. It lets staff limit someone's freedom to keep them safe from harm.



Services use interpreters when people need other languages. Interpreters are people who can speak another language. Staff can get Makaton training.



Health staff use different communication tools, including:

- Easy Read information.
- Talking Mats with pictures.
- Symbol calendars to explain plans and routines.



People share their views through groups such as People First and Working Together. These groups work with the council to make sure people's voices are heard.



The council and health board involve people in planning services. People help decide how some money is spent. This includes money from the group called the Regional Partnership Board and the Regional Integration Fund.



People are involved in decisions about their care every day. Staff respect choices and get to know people well. Records include personal details, likes, needs and life stories.



Support plans and health plans have lots of information. They explain daily support clearly. They include signs to watch for if someone might be getting unwell again.



The council wants to have less residential care. They are offering more supported housing. Shared Lives lets people live with carers in their home. This service has grown a lot.



In the last 2 years, 45 people moved into supported living. This helps people have more choices, and live better lives.

Most people know about **Direct Payments** or already use them. The council offers this option and gives good support.



**Direct Payments** is money that social services can give you. You can use it to buy your own support and services. This gives you more control.



The council helps people gain work experience and paid work. For example, some people volunteer at Llyn Lech Owain café. They learn skills like food hygiene and customer service.



**Advocacy** services are available and work well.

**Advocacy** helps people understand their rights and speak up.



There is 1 main access point which matches people with an advocacy service. Staff know how to access advocacy for people and families.



Most health board staff complete required training. The council and the health board provide training on important laws. Training is changed for different roles.

## Things that need to be better



Care plans should be easier to understand. Better communication with care co-ordinators would help people stay involved.



**Services should make more Easy Read and accessible documents for everyone. Accessible means something can be used easily by anyone.**



Some people say it is hard to reach or talk to health and social care staff. People said:

- Phone calls are not returned.
- Emails are not answered.
- It is hard to contact the right worker.



Surveys show some people feel staff do not listen to them. Carers report short notice for health appointments.



**Leaders must help staff improve how and when they communicate with people.**



Health board care plans and **risk assessments** are not always easy to find.

A **risk assessment** means checking what could go wrong and how to stay safe.



Records are sometimes saved on different computer systems. This makes checks hard to do and staff could miss important information.



**Health board leaders should check care plans and risk assessments. They should make sure they are clear and easy to find.**



**There are problems hiring personal assistants. This can delay support and reduce how well **Direct Payments** work for people.**



**Leaders should fix hiring problems so people can get good support they can rely on.**



**The health board uses temporary doctors to provide mental health care. This causes staff changes and less stable care. People find it harder to trust changing doctors.**



**The health board should focus on hiring and keeping long-term doctors.**



Some healthcare staff have not completed Basic Life Support training. This training helps staff respond in emergencies and keep people safe.



Training levels are below the required level which puts people at risk.



**The health board must make sure staff complete training or refresher courses on time.**

## Good work



The council has a plan to help people early. Well-being workers and Community Connectors link people to local support like Carers Trust. Health board staff run community workshops about health checks and screening.

The council supports independence and social activities through:



- Day centre staff supporting groups in community places.



- Using leisure centres for group activities.



- Paid services running group sessions.



The council and health board have clear ways to check services are safe and work well. They carry out regular checks on how services work. Senior managers review this every month.



Health board staff know how to collect and use what people say about services. There are systems to:

- Record complaints.
- Check concerns.
- Fix problems early when possible.



The council has clear ways to review care plans on time. A reviewing officer makes sure reviews happen when they should.



Day service staff and social workers share information well. This helps review meetings to include full and correct information.

## Things that need to be better



There are waiting lists for day services and short breaks. People want more chances and longer time using these services.



**The council must keep working to improve these important services.**



Health board waiting lists can delay support for people. People often wait a long time for Occupational Therapy.



Urgent cases are seen first, but people with sensory needs often wait longest. Sensory needs mean issues with things like sight and hearing.



Staff report waiting a long time for information from other health teams.



**The council and health board must keep checking waiting lists. They must record information to show decisions are fair and clear.**



Some people do not get annual health checks from their GP. Some doctors do not understand how a learning disability affects health. This can lead to worse health for people.



**The health board must make sure people get annual checks. They must make sure GPs get training about the health of people with a learning disability.**



People who live away from towns find services harder to reach. Public transport problems and internet issues make this worse.



**The council should support group like the Working Together Group to share people's views.**



**The council must stop leaving people out of services because of where they live or their online access.**

# Partnership

## Good work



Senior managers in the council and health board work well together. For residential care and supported living services, they share money and plan together.



The health board pays for a staff member who helps people move from a mental health hospital to the community. This lowers the risk of people becoming unwell again.



Staff from different services work well together. Working in the same building and joint meetings helps them work as a team.



Care and support are well organised across hospital care, community, and home services. Teams do not repeat work and fill gaps in services. This means people get better care and support.

## Things that need to be better



Some staff feel working together does not always go well.



**The council and health board should include all care staff when talking about how services can be better.**



The council and health board use different computer systems. This makes sharing information harder.



Some staff cannot see each other's records. This can delay sharing important information about people's care.



**The council and health board should review the computer systems used. They should look at ways to make this better, like shared systems for recording information.**

## Good work



The council has separate learning disability and mental health teams. A manager links work with the health board.



The council is changing day activities for people with a learning disability. They are working on having more in the community and more hours.



People using day services and short breaks say they are good.



The council teams support many people who have Care and Support Treatment Plans. This shows services are meeting legal duties. It also shows good working between health and social care.



Care and support plans follow the rules and give clear information about people's lives and needs.



Staff are safe and follow health board rules when giving and recording medicines.



The council is improving planning for young people moving to adult services. They work with children's services, housing teams, and teams who plan services.



Work under **Deprivation of Liberty Safeguards** and the Mental Health Act focuses on safety. Decisions are clearly recorded.



Care plans and reviews show staff think about people's rights.



Staff across health and social care understand about deciding what is safest and best for the person. Assessments focus on the most important needs. Checks make sure this is done correctly.



**Deprivation of Liberty Safeguards** reviews are done well and renewed on time.



Trained staff look after the Mental Health Act records. Systems make sure everyone follows legal rules.



Clear systems are mostly in place to protect adults at risk. Staff understand their **safeguarding** duties and check referral forms well.

**Safeguarding** means keeping people safe from harm and abuse.



Supporting carers is important to the council. All teams are working towards Investors in Carers Awards. Or they have them already.



A check of carers assessments showed good results. Staff offer carers assessments to check their needs. Many carers feel listened to and supported.



The council is developing more **respite** services.

**Respite** means a short break for someone who needs support.



There is 1 respite service where people can stay overnight called Tir Eion. It supports people with complex needs and can handle emergencies. People said this service was good.

## Things that need to be better



**Safeguarding** record reviews showed that decisions can be slow. Information sharing and record keeping are sometimes not complete.



**Leaders should improve how quickly decisions are made. They should record why they take each decision.**



Many people said the move from children's to adult health services is bad. People often lose regular support during this time. Keeping support helps people stay healthy.



**The health board must improve access to services when people move from child to adult services.**

# What happens next



We want the council and health board to fix the things that need to be better.



At **Care Inspectorate Wales**, we will check the work done by the council.



The council should share what works well with other councils to make services better across Wales.



At **Healthcare Inspectorate Wales**, we will check health things that need to be better with an Improvement Plan.



It will say what needs to change, who will do it, and when.



You can find out how we use your information at:  
[www.careinspectorate.wales/how-we-use-your-information](http://www.careinspectorate.wales/how-we-use-your-information).



We offered people the choice to take part in Welsh, but no one wanted to use it.



Thank you to the people, staff and partners who helped with our checks.

# Hard words

## Advocacy

Advocacy helps people understand their rights and speak up.

## Assurance Check

An Assurance Check is a check to make sure they are doing their jobs well and following the rules.

## Deprivation of Liberty Safeguards

Deprivation of Liberty Safeguards is a legal process. It is used when a person cannot decide about their own care or treatment. It lets staff limit someone's freedom to keep them safe from harm.

## Direct Payments

Direct Payments is money that social services can give you. You can use it to buy your own support and services. This gives you more control.

## Respite

Respite means a short break for someone who needs support.

## **Risk assessment**

A risk assessment means checking what could go wrong and how to stay safe.

## **Safeguarding**

Safeguarding means keeping people safe from harm and abuse.

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