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Dear Jonathan Griffiths,

Care Inspectorate Wales (CIW) - Assurance Check of Wrexham County Borough Council, Adult Social Care.

1. Introduction

1.1 This letter describes the findings of our assurance check on 27 April to 01 May 2026. We carry out inspection activity in accordance with the Social Services and Well-being (Wales) Act 2014 ('the 2014 Act') and the quality standards in the *Code of Practice in relation to the performance and improvement of social services in Wales*. This helps us determine the effectiveness of local authorities in supporting, measuring and sustaining improvements for people and in services.

1.2 We focused our key lines of enquiry in accordance with the four principles of the 2014 Act and sought to answer the following questions:

1.3 People - voice and control

- How well is the local authority ensuring all people are equal partners who have voice, choice and control over their lives and are able to achieve what matters to them?
- How well are practitioners supported by leaders to meet the needs of people and carers?

Prevention

- To what extent is the local authority ensuring the need for care and support is minimised, and the escalation of need is prevented whilst ensuring that the best possible outcomes for people are achieved?

Well-being

- To what extent is the local authority ensuring that people are protected and safeguarded from abuse and neglect and any other types of harm?
- To what extent do systems and practices support timely, consistent, and person-centred Deprivation of Liberty Safeguards (DoLS) assessments, including the effective recording, monitoring, and review of authorisations?

Partnership

- To what extent is the local authority able to assure themselves effective partnerships are in place to commission and deliver fully integrated, high quality, sustainable outcomes for people?
- To what extent are people encouraged to be involved in the design or delivery of their care and support as equal partners?

2. Terminology and Quantity Definitions

A glossary of terminology is contained in Appendix one and a table of quantity definitions in Appendix two.

3. Summary of Assurance Check

3.1 Adult social care in Wrexham is managing high demand and increasingly complex needs of people. Workforce recruitment and retention challenges persist, alongside ongoing financial pressures.

3.2 Leaders demonstrate a clear understanding of what is working well for people and where outcomes need to improve, strengthening systems, improving the effective use of data and establishing a clear strategic vision are priorities. The local authority has commissioned a diagnostic review to better understand people's experiences, with the view of improving outcomes, strengthening preventative support and managing demand in a way that is responsive to people's needs.

3.3 Practitioners and leaders demonstrate a shared commitment to supporting positive outcomes for people. Most describe a positive culture underpinned by visible and supportive leadership, although this is not consistent across all areas. At times, weaknesses in communication and inconsistent application of guidance result in variation in how people are supported and practice. Leaders recognise and are taking steps to address this, including conducting a workforce review activity to ensure people receive a more equitable and effective service.

3.4 The local authority has a range of preventative services in place to support people, but delays in assessment and access to support mean that some people do not receive help when they need it. Safeguarding practice is largely robust, helping to protect people from harm, and staff describe the safeguarding team as accessible and supportive. Strengthening expertise at the first point of contact could further

improve decision making and ensure people receive the right support at the earliest convenience.

3.5 Partnership working is evident at operational and strategic levels, contributing to joined up support for people. However, differences in roles and responsibilities can affect how well agencies work together, particularly in relation to Continuing Healthcare and Section 117 responsibilities.

4. Key Findings and Evidence

Key findings and some examples of evidence are presented below in line with the four principles of the Social Services and Well-being (Wales) Act 2014.

People

Strengths

4.1 The local authority demonstrates a clear commitment of putting people at the centre of assessment, care planning and decision-making. Practitioners and managers consistently describe the importance of listening to people, understanding their individual circumstances and responding with care and respect.

4.2 People's views and priorities are usually identified through 'What Matters' conversations. In the strongest examples, records reflect people's perspectives using clear, person-centred language and describe outcomes important to them, such as independence, sustaining relationships and managing daily routines.

4.3 In many cases, practitioners know people and families well and adapt support when needs or risks change. Deputy Team Managers support timely changes to care and support plans. There are efficient and clear examples of person-centred and strengths-based practice across adult social care pathways.

4.4 Most practitioners describe a supportive culture, with managers and leaders who are visible and approachable. This contributes to a more stable and confident workforce which in turn benefits people through more consistent relationships and support. Informal peer support and well managed flexible working arrangements helps to support staff well-being and retention.

4.5 The workforce is experienced, skilled and largely stable. The local authority is reviewing workforce sustainability and taking steps to strengthen workforce sustainability through its 'grow your own' programme and targeted recruitment incentives. However, ongoing recruitment and retention challenges persist, and capacity remains fragile in some specialist areas, with reliance on interim leadership roles. **The local authority should ensure workforce capacity and stability are sufficient to support consistent service delivery.**

4.6 The local authority demonstrates a clear commitment to supporting unpaid carers through commissioned services and community provision. Carers are supported to access information, advice and advocacy, and engagement helping them to sustain their caring roles. Engagement activity, including a carers group provides opportunities for carers to share their experiences and shape service development. **This is positive practice and contributes to improved support for both carers and the people they care for.**

4.7 Practitioners and managers receive regular supervision. Most respondents to the CIW survey (87%) report supervision is regular and supports reflection on practice. Practitioners value peer supervision groups, which promote reflective discussion and shared learning. **This is positive practice as it contributes to more thoughtful and consistent support for people.**

4.8 The majority of practitioners who completed the CIW survey (87.5%) report they have access to good training opportunities. However, a minority (12.5%) do not share this view, a finding that was corroborated through discussions with practitioners. This indicates that access to training is not consistently experienced. This may impact the quality and consistency of support people receive. **The local authority should review its training offer to ensure it is accessible and consistently available to practitioners and leaders across all service areas.**

4.9 Informal advocacy is promoted, with families and personal networks encouraged to support people to express their views and take part in decisions. Independent professional advocacy services are commissioned, and there is some evidence they are used in practice. Advocacy is routinely considered during best interest decision-making where a person is subject to a DoLS, a paid representative will visit when required. **This is positive practice by supporting people to remain at the centre of decisions about their lives.**

Areas for Improvement

4.10 Although the local authority is clear about its intent to deliver person-centred care, people's experiences are not consistent. Survey findings show that 65% of people feel listened to and 68% feel treated with dignity and respect. However, many people describe difficulties understanding their assessments and care plans. They also report poor communication, delayed responses and a lack of follow-through. Over half of respondents say they do not receive clear written records, which limits their ability to make informed decisions and exercise choice and control. **The local authority should strengthen communication and information-sharing to ensure people consistently receive clear and timely information about their care and support.**

4.11 Recording of people's voice and outcomes is not consistent. 'What Matters' conversations are not always clearly recorded or reflected across assessments, care plans and reviews, meaning people's priorities are not always visible in decision making. Some records remain focused on needs or are overly descriptive rather than clearly capturing what matters to people. Gaps in recording, including missing key information, mean the local authority cannot consistently demonstrate how practice is improving outcomes. **The local authority should improve the quality and consistency of recording to ensure people's views, outcomes and understanding are clearly evidenced at all stages.**

4.12 While there are positive examples of advocacy supporting people, there are a few examples of its use outside of Deprivation of Liberty Safeguards (DoLS) processes. There is limited evidence to show advocacy is routinely considered, offered, taken up and recorded with reasons. The lack of data means the local authority cannot always demonstrate that it is meeting its duties towards independent professional advocacy. **The local authority must ensure that the offer and provision of independent professional advocacy is consistently embedded in practice and clearly evidenced.**

4.13 While supervision is generally regular, its quality is inconsistent. Some records are descriptive or task-focused and do not evidence reflective discussion or the impact on people's outcomes. Recording does not consistently demonstrate consideration of practitioners' development or wellbeing. **The local authority should strengthen the quality and consistency of supervision to ensure it supports reflective practice and clearly evidences impact on people's outcomes and practitioner development and their wellbeing.**

4.14 Analysis of complaints and concerns show that statutory processes are followed and responses are provided. However, some responses about safeguarding lack clarity, learning outcomes and signposting support. This limits the extent to which people fully understand what has happened and how issues have been addressed and reduces the opportunity for learning to improve services. **The local authority should ensure complaint records consistently evidence safeguarding considerations, learning outcomes and follow-up actions, to improve assurance and support service improvement.**

Prevention

Strengths

4.15 The Rapid Discharge Service supports people to return home promptly with ongoing assessment and support. This reduces delays and promotes independence. **This is positive practice.**

4.16 The local authority is making progress in developing supported living and community-based provision. This enables people to return from out-of-county placements and receive support closer to home, maintaining connections with their communities and support networks. **This is positive practice by reflecting identified demand and supports improved outcomes for people.**

4.17 The local authority has achieved a sustained reduction in the Occupational Therapy (OT) waiting list, with overall numbers reduced and maintained over a two-year period. Strengthened front door arrangements and preventative approaches, including a Community Occupational Therapy Clinic have helped people access timely advice and support, reducing the need for longer term assessment. This ensures people receive the right support at the right time and promotes independence. **This is positive practice and demonstrates an effective approach to managing demand through early intervention and preventative support.**

4.18 The Progression Team provides targeted individual and group interventions that promote independence and reduce reliance on longer-term services. This includes support with daily living skills, social inclusion and safety. People told us this support is meaningful and improves confidence and independence. The team also works with community partners to support co-production and inclusion ensuring people are connected to their communities. **This is positive practice.**

4.19 The local authority has achieved the World Health Organisation Age Friendly Community status, demonstrating a clear commitment to prevention and creating supportive, inclusive communities where people can live well and remains independent for longer. **This is positive practice as the local authority are taking**

a structured approach to prevention that supports people to remain independent for longer.

Areas for Improvement

4.20 Delays in accessing care and support remain across several service areas. Sustained demand and limited capacity have led to backlogs and longer assessment times. This is impacting timely access to support, particularly for people with more complex needs. **The local authority should ensure that capacity and workforce arrangements across key services, are sufficient to enable timely access to care and support, reducing delays and supporting people to receive help at the right time.**

4.21 The local authority recognises the need to strengthen the use of data and performance information to better understand demand, measure outcomes and support continued service improvement. While work is underway to improve quality assurance, current arrangements do not yet provide consistent and robust oversight. This limits the ability to fully assure the quality of services and their impact on people. **The local authority must strengthen its use of data and performance intelligence and fully embed its quality assurance framework to improve oversight and governance arrangements.**

4.22 The local authority has taken positive steps to improve timeliness of reviews of care and support plans, to include creating additional capacity. However, challenges remain and there are many statutory reviews which are outstanding and are prioritised according to risk. Where reviews are not timely there is a risk people's changing needs are not identified or responded to appropriately, potentially leading to unstable care and support. **The local authority must ensure reviews are undertaken in line with statutory timeframes to monitor changes and mitigate against this risk.**

4.23 The use of direct payments is variable. While uptake is increasing, this has not translated into a sustained shift from traditional commissioned services. As a result, some people may not be fully supported to exercise choice and control over how their care and support is arranged. **The local authority should strengthen the promotion and support of direct payments, ensuring they are consistently offered and that people receive clear information and assistance to use them as a flexible alternative to traditional services.**

Well-being

Strengths

4.24 People are safeguarded, and the local authority largely adheres to the Wales Safeguarding Procedures (WSP). Enquiries undertaken in line with Section 126(1) (s.126) of the Social Services and Well-being (Wales) Act 2014 are mostly comprehensive and involve other agencies/ individuals as appropriate. **There is strong focus on protecting people while enquiries are ongoing, with reasoning to support decision making.**

4.25 There is strong evidence that there is a service wide and multi-agency approach to safeguarding people. Relevant partner and other agencies are invited to

strategy discussions/meetings, and there are consistent examples of multi-agency contributions supporting discussions and informing subsequent decision making.

4.26 People's voices are strong in records relating to safeguarding, with their wishes sought and the personal outcomes clearly recorded.

4.27 Practitioners and representatives of partner and other agencies describe the safeguarding team as approachable, supportive and providing easily accessible advice and guidance. **This supports timely advice, shared learning and consistent safeguarding practice, contributing to positive outcomes for people.**

4.28 Adult social care practitioners and leaders report improved visibility of safeguarding outcomes, including through system dashboards and closure documentation. This supports greater understanding and continuity. However, clearer written explanations where safeguarding reports are not progressed would strengthen practitioner learning and consistency. **The local authority should consistently clarify in writing the reasoning for not progressing safeguarding reports.**

4.29 Adult social care practitioners and leaders feel that progress has been made in that they are informed of outcomes of safeguarding reports made, and that these are also visible on system dashboards or closure documentation. There are examples of referrers (separate to local authority practitioners), being informed in writing of the outcome of a safeguarding report they have made. However, practice is inconsistent. **The local authority must ensure that practitioners and individuals are consistently informed of safeguarding outcomes, in line with Wales Safeguarding Procedures, and that records clearly reflect this.**

4.30 People's mental capacity is appropriately considered. While some variation in the quality of recording was identified, overall practice demonstrates a consistent application of the Mental Capacity Act. Best interests decision-making is generally robust, balanced and aligned with statutory guidance. However, mental capacity assessments do not consistently include verbatim recording of people's responses, which is recognised as best practice. **The local authority should ensure that mental capacity assessments are consistently robust and clearly evidenced, including explicit recording of the questions asked and how these were framed, and how people responded.**

4.31 Best-interest decision-making reflects thoughtful and proportionate practice, with practitioners clearly weighing risks and benefits in line with a rights-based approach. Some best interests meetings involve relevant professionals and family members to support decision making. Targeted training supports this practice and promotes consistency, helping to ensure decisions are made in people's best interest.

Areas for Improvement

4.32 There are some examples where adults were well supported and their safety and well-being promoted. However, in these cases the adult did not fully meet the definition of an "adult at risk", and support could have been provided appropriately through care and support arrangements rather than safeguarding procedures. In contrast, there are other examples where appropriate safety measures were

implemented and risks mitigated, but referrals were still made to the safeguarding team. **The local authority must ensure safeguarding practice is applied consistently and only when the definition of an adult at risk is fully met, as set out in section 126(1) of the Wales Safeguarding Procedures (WSP).**

4.33 DoLS applications are processed in a timely way, and people who lack capacity are supported and represented in matters relating to their deprivation of liberty. A dedicated local authority team provides oversight and supports consistent practice, helping to ensure decisions are made in people's best interest. The local authority also identifies strong working relationships with Section 12 Doctors¹, alongside ongoing engagement and training with registered providers, as contributing factors to timely assessment and authorisation. However, the limited availability of Section 12 doctors remains a recognised challenge and can impact on timeliness should demand increase. In 2024–25, the local authority was among the higher-performing authorities in Wales, completing 81% of standard DoLS assessments within the statutory 21-day timescale. Overall, performance provides assurance that most people are subject to appropriate legal protections.

Partnership

Strengths

4.34 The local authority continues to face significant and ongoing challenges in reaching agreement with the health board in relation to NHS Continuing Healthcare (CHC) and the provision of aftercare under Section 117 of the Mental Health Act 1983. These challenges impact on the timely delivery of care and support for people and increase financial pressures within Adult Social Care and, in some cases, on individuals' personal finances.

4.35 In response, the local authority has acted proactively by establishing a dedicated CHC and Section 117 team. This team supports the consistent application of the CHC framework and provides clarity on the respective statutory responsibilities of the local authority and the health board under Section 117. Practitioners across Adult Social Care value this specialist team, as it provides consistent interpretation of legislation, supports lawful decision-making, and reduces the burden on frontline social workers. **This represents positive practice, as it promotes consistent, timely and rights-based outcomes for people.**

4.36 There are differences in how partner agencies interpret safeguarding concerns, with some referrals to the front door not requiring a safeguarding response. The local authority promotes shared understanding and consistency through multi-agency training. **This is positive practice.**

4.37 The local authority collaborates effectively with the Regional Partnership Board and the Regional Safeguarding Board as well as other forums such as Association of

¹ **Section 12 doctors** are medical practitioners who have been **approved under section 12(2) of the Mental Health Act 1983** by the Secretary of State (or their delegated approving body) as having **“special experience in the diagnosis or treatment of mental disorder.”**

Directors of Social Services Cymru (ADSS) Cymru. The draft service plan in place aligns with ADSS priorities.

4.38 Feedback between the local authority and the commissioned carers assessment service is not always timely or visible. This limits shared understanding of assessment outcomes and delays access to appropriate support for carers. **The local authority should strengthen joint arrangements to ensure feedback following carer's assessments is consistently shared in a timely and visible way.**

Areas for Improvement

4.39 A threshold document has been developed to support effective flow and ensure adults are directed to the most appropriate team to meet their needs. However, this is not consistently applied in practice. Some teams report that the document remains open to interpretation, resulting in people being passed between teams. This lack of consistent application contributes to delay in individuals receiving timely and appropriate support. **The local authority must ensure people receive timely and effective access to the most appropriate care and support.**

4.40 Elected member oversight arrangements are established and demonstrate support for adult social care. However, further constructive challenge would strengthen governance and provide additional assurance of continuous improvement. **The local authority should continue to strengthen arrangements, including planned workshops for Members of the Council, to support effective scrutiny of service delivery.**

4.41 While there is evidence of proactive leadership and a clear understanding of workforce challenges, aspects of the service's culture and organisational arrangements remain under development. There are indications that previous management changes and variability in structures have impacted practitioners' confidence and consistency of practice in some areas. In addition, a lack of clarity in roles and responsibilities, functions and pathways continue to affect how services operate at key points, particularly within SPOA. **Although steps are being taken to strengthen engagement, workforce planning and care pathways, the local authority should work at pace to establish a consistent and well-understood operating model that enables practitioners to deliver effectively.**

5. Next Steps

CIW expects the local authority to consider the areas identified for improvement and take appropriate action to address and improve these areas. CIW will monitor progress through its ongoing performance review activity with the local authority. Where relevant we expect the local authority to share the positive practice identified with other local authorities, to disseminate learning and help drive continuous improvement in statutory services throughout Wales.

6. Methodology

Fieldwork

- Most inspection evidence was gathered by reviewing the experiences of 21 people through review and tracking of their social care record. We reviewed 18 social care records and tracked 3.
- Tracking a person's social care record includes having conversations with the person in receipt of social care services, their family or carers, practitioner the practitioner's manager, and were appropriate other professionals involved.

We engaged, through interviews with 10 people receiving services and/or their carer.

- We engaged, through interviews with 43 local authority employees and elected members (this included social workers, team managers, operational managers, head(s) of service, director of social services).

We reviewed supporting documentation sent to CIW for the purpose of the inspection.

- We administered surveys to local authority social services staff, partner organisations and people.

Our Privacy Notice can be found at <https://careinspectorate.wales/how-we-use-your-information>.

7. Welsh Language

CIW is committed to providing an active offer of the Welsh language during its activity with local authorities.

The active offer was required on this occasion.

8. Acknowledgements

CIW would like to thank staff, partners and people who gave their time and contributed to this inspection.

Yours sincerely,



Lou Bushell-Bauers

Head of Local Authority Inspection

Care Inspectorate Wales

Appendix 1

Glossary of Terminology

Term	What we mean in our reports and letters
Must	Improvement is deemed necessary in order for the local authority to meet a duty outlined in legislation, regulation or code of practice. The local authority is not currently meeting its statutory duty/duties and must take action.
Should	Improvement will enhance service provision and/or outcomes for people and/or their carer. It does not constitute a failure to meet a legal duty at this time; but without suitable action, there is a risk the local authority may fail to meet its legal duty/duties in future.
Positive practice	Identified areas of strength within the local authority. This relates to practice considered innovative and/or which consistently results in positive outcomes for people receiving statutory services.
Prevention and Early Intervention	A principle of the Act which aims to ensure that there is access to support to prevent situations from getting worse, and to enhance the maintenance of individual and collective well-being. This principle centres on increasing preventative services within communities to minimise the escalation of critical need.
Voice and Control	A principle of the Act which aims to put the individual and their needs at the centre of their care and support, and giving them a voice in, and control over, the outcomes that can help them achieve well-being and the things that matter most to them.
Well-being	A principle of the Act which aims for people to have well-being in every part of their lives. Well-being is more than being healthy. It is about being safe and happy, having choice and getting the right support, being part of a strong community, having friends and relationships that are good for you, and having hobbies, work or learning. It is about supporting people to achieve their own well-being and measuring the success of care and support.
Co-Production	A principle of the Act which aims for people to be more involved in the design and provision of their care and support. It means organisations and professionals working with them and their family, friends and carers so their care and support is the best it can be.
Multi-Agency working	A principle of the Act which aims to strengthen joint working between care and support organisations to make sure the

	right types of support and services are available in local communities to meet people's needs. The summation of the Act states that there is a requirement for co-operation and partnership by public authorities.
What matters	'What Matters' conversations are a way for professionals to understand people's situation, their current well-being, and what can be done to support them. It is an equal conversation and is important to help ensure the voice of the individual or carer is heard and 'what matters' to them

Appendix 2

Quantity Definitions Table

Terminology	Definition
Nearly all	With very few exceptions
Most	90% or more
Many	70% or more
A majority	Over 60%
Half	50%
Around half	Close to 50%
A minority	Below 40%
Few	Below 20%
Very few	Less than 10%