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Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr

Bridgend County Borough Council



Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont, CF31 4WB / Civic Offices, Angel Street, Bridgend, CF31 4WB

*Rydym yn croesawu gohebiaeth yn Gymraeg.
Rhowch wybod i ni os mai Cymraeg yw eich
dewis iaith.*

*We welcome correspondence in Welsh. Please
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Annwyl Cyngorydd,

PWYLLGOR CRAFFU TESTUN 2

Cynhelir Cyfarfod Pwyllgor Craffu Testun 2 yn Siambr y Cyngor, Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont ar Ogwr, CF31 4WB ar **Dydd Iau, 12 Gorffennaf 2018 am 09:30.**

AGENDA

1. Ymddiheuriadau am absenoldeb
Derbyn ymddiheuriadau am absenoldeb gan Aelodau.
2. Datganiadau o Ddiddordeb
Derbyn datganiadau o ddiddordeb personol a rhagfarnol (os o gwbl) gan Aelodau / Swyddogion yn unol â darpariaethau'r Cod Ymddygiad Aelodau a fabwysiadwyd gan y Cyngor o 1 Medi 2008.
3. Cymeradwyaeth Cofnodion 3 - 14
I dderbyn am gymeradwyaeth y Cofnodion cyfarfod y 07/03//2018 a 17/04/2018
4. Adroddiad enwebu hyrwyddwr rianta corfforaethol 15 - 18
5. Enwebiad i banel trosolwg a chraffu y bwrdd gwasanaeth cyhoeddus 19 - 22
6. Diweddariad ar Raglen Waith 23 - 90
7. Diogelu 91 - 120

Gwahoddedigion:

Susan Cooper, Cyfarwyddwr Corfforaethol - Gwasanaethau Cymdeithasol a Lles
Cllr Phil White, Aelod Cabinet - Gwasanaethau Cymdeithasol a Chymorth Cynnar
Jacqueline Davies, Pennaeth Gofal Cymdeithasol i Oedolion
Laura Kinsey, Pennaeth Gofal Cymdeithasol I Blant;
Elizabeth Walton James, Rheolwr Grŵp Diogelu a Sicrhau Ansawdd,;
Terri Warrilow, Rheolwr Ansawdd a Diogelu Oedolion

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8. Materion Brys

I ystyried unrhyw eitemau o fusnes y, oherwydd amgylchiadau arbennig y cadeirydd o'r farn y dylid eu hystyried yn y cyfarfod fel mater o frys yn unol â Rhan 4 (pharagraff 4) o'r Rheolau Trefn y Cyngor yn y Cyfansoddiad.

Yn ddiffuant

P A Jolley

Cyfarwyddwr Gwasanaethau Gweithredol a Phartneriaethol

Dosbarthiad:

Cynghowrwyr

TH Beedle
MC Clarke
PA Davies
SK Dendy
J Gebbie
CA Green

Cynghorwyr

M Jones
MJ Kearn
JE Lewis
AA Pucella
KL Rowlands
SG Smith

Cynghorwyr

G Thomas
SR Vidal
DBF White
A Williams

PWYLLGOR CRAFFU TESTUN 2 - DYDD MAWRTH, 17 EBRILL 2018

ACOFNODION CYFARFOD Y PWYLLGOR CRAFFU TESTUN 2 A GYNHALIWDYD YN SIAMBR Y CYNGOR - SWYDDFEYDD DINESIG, STRYD YR ANGEL, PEN-Y-BONT AR OGWR CF31 4WB DYDD MAWRTH, 17 EBRILL 2018, AM 09:30

Presennol

Y Cyngorydd CA Green – Cadeirydd

TH Beedle	MC Clarke	SK Dendy	J Gebbie
M Jones	JE Lewis	JR McCarthy	AA Pucella
KL Rowlands	G Thomas	SR Vidal	

Ymddiheuriadau am Absenoldeb

MJ Kearns, SG Smith a/ac KJ Watts

Swyddogion:

Sarah Daniel	Swyddog Gwasanaethau Democrataidd - Craffu
Julie Ellams	Swyddog Gwasanaethau Democrataidd - Pwyllgorau

Gwahoddedigion:

Susan Cooper	Cyfarwyddwr Corfforaethol - Gwasanaethau Cymdeithasol a Lies
Carmel Donovan	Rheolwr Grŵp - Gwasanaethau Cymunedol Integredig
Cyngorydd Philip White	Aelod Cabinet - Gwasanaethau Cymdeithasol a Chymorth Cynnar

37. DATGAN BUDDIANNAU

Dim

38. CYMERADWYO COFNODION

PENDERFYNWYD: Cymeradwyo cofnodion cyfarfodydd y Pwyllgor Craffu a Throsolwg Pwnc 2 ar 7 Chwefror 2018 yn gofnod gwir a chywir.

39. DIWEDDARIAD AM Y FLAENRAGLEN WAITH

Cyflwynodd y Swyddog Craffu adroddiad oedd yn nodi'r eitemau a flaenoriaethwyd y Pwyllgor Craffu a Throsolwg Corfforaethol gan gynnwys yr eitem nesaf a ddirprwywyd i'r pwyllgor hwn. Cyflwynodd restr o eitemau posibl eraill hefyd i'w blaenoriaethu a gofynnodd i'r Pwyllgor nodi unrhyw eitemau eraill i'w hystyried drwy ddefnyddio'r ffurflen meini prawf a bennwyd ymlaen llaw. Gofynnwyd aelodau hefyd i gymeradwyo'r adborth o'r cyfarfodydd blaenorol a rhestr yr ymatebion gan gynnwys unrhyw rai sy'n weddill.

PENDERFYNWYD: Gwnaeth y Pwyllgor:

- i) Gymeradwyo'r adborth o gyfarfodydd blaenorol y Pwyllgor Trosolwg a Chraffu Testunau 2 gan nodi rhestr yr ymatebion gan gynnwys y rhai sy'n weddill o hyd.
- ii) Nodi gwybodaeth ychwanegol yr oedd y Pwyllgor am ei derbyn am yr eitem nesaf a ddirprwywyd iddo.

40. CYMORTH A GOFAL DEMENSIA YM MWRDEISTREF SIROL PEN-Y-BONT AR OGWR

Cyflwynodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles adroddiad oedd yn rhoi diweddariad ar y cymorth a'r gofal i bobl â demensia sy'n byw ym Mwrdeistref Sirol Pen-y-bont ar Ogwr (BSP) ac ymateb i'r cwestiynau a godwyd am ddemensia yn CBSP ac yn rhanbarthol.

Gofynnodd aelod am ddiffiniad sylfaenol o ddemensia i helpu'r aelodau nad oedd ganddynt fawr o ddealltwriaeth o'r pwnc. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod demensia'n afiechyd dirywiol yr ymennydd a bod y tebygrwydd o ddatblygu demensia'n cynyddu'n sylweddol wrth heneiddio. Yn bennaf mae'n effeithio ar bobl dros 65 oed, ond gall effeithio ar bobl iau o'r pedwar degau hwyr ymlaen. Mae'n effeithio ar bob agwedd ar fyw, gan gynnwys colli cof tymor byr a gweithgareddau pob dydd megis lleferydd a symudedd, ac yn y pen draw gallai effeithio ar y cof tymor hir. Mae'r effaith ar bob unigolyn yn amrywio ac mae sawl math o ddemensia sy'n datblygu ar wahanol gyfraddau ac sydd â symptomau gwahanol. Mae cyffuriau ar gael i drin symptomau demensia ac mae diagnosis'r afiechyd yn gynnar yn gwella llwyddiant y cyffuriau. Ni all cyffuriau atal yr afiechyd ond maen nhw'n gallu caniatáu i'r unigolyn sefydlogi ei gyflwr.

Cyfeiriodd aelod at y tabl sy'n dangos y diagnosis fesul meddygfa yn CBSP. Gofynnodd yr aelodau am boblogaeth bob ardal fel ei bod yn glir pa ganran yn union roedd y ffigurau yn cyfateb iddi. Esboniodd aelod fod tair meddygfa mewn un ward, gyda phob un yn gyfrifol am nifer llai o gleifion, ac felly nad oedd y tabl yn rhoi darlun cywir.

Gofynnodd aelod a oedd nifer uchel yr achosion ym Meddygfa Portway, Porthcawl yn gysylltiedig â nifer y cartrefi gofal ym Mhorthcawl. Esboniodd y Rheolwr Gwasanaethau Cymunedol Integredig fod gan Borthcawl hefyd nifer uchel o bobl oedd yn heneiddio ac y gallai hyn, yn ogystal â nifer y cartrefi nyrsio yn yr ardal, fod y rheswm dros nifer uchel yr achosion. Cytunodd gyflwyno map â ffiniau i aelodau nad oeddent yn gyfarwydd ag enwau'r meddygfeydd yn ogystal â'u lleoliadau.

Diolchodd aelod i'r swyddogion am yr adroddiad a gofynnodd pam roedd ei bwyslais ar reoli'r sefyllfa yn hytrach na cheisio'i hatal trwy ystyried iechyd a lles yr etholwyr. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod canfod a diagnosis'r afiechyd yn gynnar yn ddull effeithiol o gynnal gallu person ar y lefel orau posib a bod peth tystiolaeth ar gael i ddangos bod person yn gallu byw'n dda â demensia am gryn amser. Roeddent yn dibynnu'n fawr ar feddygon yn adnabod arwyddion cynnar. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod dau gynllun gofal ychwanegol newydd i'w cwblhau ym mis Medi/Hydref a allai darparu ar gyfer y rhai â demensia. Roedd mentrau ar gael hefyd i gadw pobl i symud yn ogystal â thîm i hybu ymarfer corff a chadw'n heini.

Esboniodd y Swyddog Iechyd a Gofal Cymdeithasol, BAVO, eu bod yn helpu pobl yn y gymuned i gael gwell dealltwriaeth, a hynny yn ogystal â phrojectau Dementia Friends. Roedd gwaith yn parhau gyda' tîm atal ar sut i ddatblygu sgiliau a thargedu sefydliadau i weithio o fewn yr arbenigedd Yn y dyfodol byddent yn ystyried atal a lles a digwyddiadau i dargedu sefydliadau a'r gymuned i weld yr hyn roedd ei angen arnynt. Esboniodd dechreuwyd y fenter bresennol gan Gymdeithas Alzheimer.

Gofynnodd aelod a fyddai meddyg teulu'n fwy gwyliadwrus gyda grwpiau oedran penodol i asesu a oedd angen rhagor o wirio. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod pob meddyg teulu wedi'i hyfforddi i edrych am arwyddion, diystyru achosion eraill ac yna cyfeirio at y gwasanaeth i gael gwiriad manylach a dod i gasgliadau. Gallai'r broses bara am nifer o fisoedd.

Gofynnodd aelod a fyddai'r cyfleusterau gofal ychwanegol yn gallu darparu ar gyfer y rhai â demensia ysgafn a datblygedig. Meddai Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles mai'r bwriad oedd galluogi unigolyn i aros yn ei

gartref ei un cyhyd â phosib gyda mynediad i ofal ychwanegol. Roedd prinder nyrsys EMI ar draws Cymru, felly byddai'n dibynnu ar yr asesiad a lefel y gofal y gellid ei ddarparu.

Gofynnodd aelod sawl gwely oedd wedi'i golli ym Mhen-y-bont ar Ogwr. Hysbyswyd yr aelod fod cartref gofal ym Mhen-y-bont ar Ogwr wedi cau ond bod asiantaeth allanol yn ystyried dichonolrwydd ei ailagor.

Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod adolygiad allanol wedi cael ei gomisiynu i edrych ar y model gwasanaeth. Roedd cymhariaeth â 41 o fyrddau iechyd yn dangos bod gan Ben-y-bont ar Ogwr y 5ed nifer uchaf o welyau. Roedd yn bwysig cadw pobl yn y gymuned cyhyd â phosib yn ogystal â darparu gwelyau arbenigol. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod gwasanaethau cymunedol yn cefnogi amrywiaeth o bobl ar hyn o bryd a fyddai wedi bod yn yr ysbty yn y gorffennol. Roeddent bellach mewn sefyllfa well i gadw preswylwyr yn eu cartrefi eu hunain cyn bod angen gofal dwys arnynt a byddent yn parhau i ddatblygu amrywiaeth o welyau a dewisiadau i gefnogi person trwy'r llwybr cyfan.

Gofynnodd aelod a oedd y mecanweithiau cefnogi a oedd ar waith yn cael effaith ar ddadansoddi tueddiadau. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod y dadansoddiad yn seiliedig ar oedran y boblogaeth. Byddai canfod yr afiechyd yn gynnar yn helpu i gadw pobl yn eu cartrefi a gwella ffocws ac ymwybyddiaeth gymunedol.

Gofynnodd aelod a oedd cymorth ar gael i deuluoedd. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM y cydnabyddir bod y teulu ehangach yn chwarae rôl bwysig, yn benodol wrth geisio cadw unigolyn yn ei gartref. Roeddent hefyd yn ymwybodol o effaith rôl gofalu ar y teulu a phwysigrwydd cymorth. Gyda demensia cynnar gallai fod teuluoedd ifanc a goblygiadau ariannol y mae angen i sefydliadau fod yn ymwybodol ohonynt. Esboniodd y Rheolwr Gwasanaethau Cymunedol Integredig fod dyletswydd i ofalwyr yr oedd ganddynt hawl i asesiad a chymorth mewn modd sy'n canolbwyntio ar ganlyniadau. Roeddent yn ceisio datblygu ymatebion hyblyg gan nad oes un ateb yn addas i bawb. Roedd ymagwedd amlochrog at fyw'n dda â demensia a chynllun cyflawni i roi cymorth perthnasol yn ystod y broses gyfan.

Gofynnodd aelod pam nad oedd cyfeiriad at Gwm Taf yn yr adroddiad ac a fyddai'r un ddarpariaeth a gwasanaeth i Ben-y-bont ar Ogwr yn y dyfodol petai ffiniau'r byrddau iechyd yn cael eu newid. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM eu bod yn aros am y cyhoddiad. Cynhaliwyd trafodaethau rhagarweiniol a byddai'r ddarpariaeth ym Mhen-y-bont yn ystyried model gwasanaeth gwahanol ond nid oedd yn bwriadu newid unrhyw beth ar unwaith. Cadarnhawyd y sefyllfa gan Gyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles a dywedodd y rhoddwyd sicrwydd yng nghyfarfod diwethaf y Cyngor. Roedd prif weithredwyr y ddau fwrdd iechyd wedi cwrdd â'i gilydd yn ddiweddar i ystyried strwythur llywodraethu posib. Byddai cyfarfod arall ym mis Mai i drafod y materion yn fanylach. Roeddent yn gobeithio am ymateb cynnar i'r ymgynghoriad. Pwysleisiodd yr Aelod Cabinet dros y Gwasanaethau Cymdeithasol a Chymorth Cynnar fod partneriaeth gref ar waith a bod rhaid i'r gwaith caled barhau. Gofynnodd aelodau i gydnabod pwysigrwydd dod yn gymuned sy'n ystyriol o ddemensia.

Gofynnodd aelod a oedd mwy o wybodaeth ar gael ynglŷn â'r mathau o ddemensia ac oedran y bobl yr oedd yn effeithio arnynt. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod gwybodaeth yn deillio o'r cyfrifiad a meddygon teulu. Byddai mwy o wybodaeth ar gael yn y dyfodol pan fyddai meddygfeydd yn cyflwyno gwybodaeth am y diagnosis i Lywodraeth Cymru. Cadarnhaodd y Rheolwr Gwasanaethau Cymunedol Integredig ei bod hi wedi ceisio cael yr wybodaeth ond wedi cael ei hysbysu nad oedd ar

gael yn y fformat y gofynnwyd amdano ar hyn o bryd. Roedd hyn yn cael ei hadolygu a dylai fod ar gael yn y dyfodol.

Esboniodd aelod ei bod wedi gweld rhai ychwanegiadau buddiol yn ystod ei hymweliadau rota â chartrefi gofal defnyddiol i hwyluso bywyd yn y cartrefi, megis lluniau yn hytrach nag arwyddion ysgrifenedig. Roedd y rhain wedi cael eu cyflwyno gan staff i wella'r lle yn hytrach na dilyn gwybodaeth neu gyngor a roddir i'r cartrefi gofal. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles y cynhaliwyd hyfforddiant helaeth ar draws y sector am strategaethau ac ymagweddau. Roedd disgwyl i bob cartref gofal reoli amrywiaeth o weithgareddau ac i staff gyfrannu at reoli'r cartrefi.

Gofynnodd aelod am raglen hyfforddi gofal demensia. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod staff y bwrdd iechyd wedi derbyn hyfforddiant ymwybyddiaeth o ddemensia a bod hwn wedi'i estyn ers hynny i gartrefi gofal. Atgoffwyd aelodau gan Gyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod hyfforddiant ar gael iddynt ond bod llai na hanner ohonynt wedi derbyn yr hyfforddiant hyd yma.

Gofynnodd aelod pam nad oedd llawer o sôn am bobl ifanc yn yr adroddiad. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM nad oedd yn gyffredin ymhlith pobl ifanc ond bod yr effaith yn sylweddol. Roedd gwasanaeth demensia cynnar ar gael gyda thîm bach penodol. Gofynnodd aelod a oedd cyfyngiad oedran cyn y gellid cyfeirio unigolyn. Fe'i hysbyswyd nad oedd cyfyngiad oedran. Roedd y niferoedd yn isel iawn a byddai pecyn yn cael ei deilwra i unigolyn yn hytrach na bod rhaid i'r unigolyn addasu i'r gwasanaethau prif ffrwd. Cadarnhaodd y Rheolwr Gwasanaethau Cymunedol Integredig ei bod wedi cysylltu â'r tîm arbenigol a oedd wedi rhoi gwybod bod 30 o'r 155 o achosion a oedd ar agor yn bobl dan 65 oed. Ychwanegodd Rheolwr Gwasanaethau Clinigol BIP ABM na fu cynnydd yn y proffil oedran.

Gofynnodd aelod beth oedd perthnasedd data am bobl â demensia yng Nghaerdydd a Bro Morgannwg. Atebodd y Rheolwr Gwasanaethau Cymunedol Integredig y gofynnwyd i'r swyddogion yn benodol i roi'r wybodaeth honno.

Gofynnodd aelod sawl gwely arhosiad byr oedd ar gael. Fe'i hysbyswyd bod 2 wely seibiant ar gael a nodwyd y meini prawf ar gyfer eu defnyddio. Roedd defnydd y gwelyau'n amrywio gyda rhai teuluoedd yn eu defnyddio'n amlach na rhai eraill. Nid oedd yn ymddangos bod gormod o alw amdanynt ac nid oedd rhestr aros. Roedd dadansoddiad o'u defnydd yn cael ei gynnal er na fyddai modd roi canran y rhai â demensia.

Gofynnodd aelod pa mor gadarn oedd y ffynonellau ariannu. Esboniodd Swyddog Iechyd a Gofal Cymdeithasol BAVO fod y rhan fwyaf o arian yn cael ei roi'n flynyddol er bod peth arian 2 flynedd ar gael. Roedd arian yn flaenoriaeth ac roedd yn bryder o hyd. Roedd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles yn ymwybodol o'r sefyllfa ariannol anodd a'r Strategaeth Ariannol Tymor Canolig. Roedd y cynigion yn ystyried yr angen i fuddsoddi mewn gwasanaethau ymyrraeth gynnar a lles. Roedd £10m wedi'i neilltuo i bob rhanbarth: £5m ar gyfer 2018/19 a'r gweddill ar gyfer y flwyddyn ganlynol. Ni fyddai mentrau newydd yn cychwyn nes bod y ffordd ymlaen yn glir. Roedd arian grant yn ei le ond nid arian parhaol oedd hwn ac roedd hi'n ymwybodol o'r her anferth o'n blaenau.

Cytunodd aelodau ei bod yn hanfodol nodi unrhyw arian a oedd wedi'i neilltuo i Ben-y-bont ar Ogwr ac i Ben-y-bont ar Ogwr gadw'r arian hwnnw. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod hyn eisoes wedi'i drefnu mewn ardaloedd eraill. Cytunwyd arno mewn egwyddor ac roedd ymdrechion yn cael eu

gwneud i sicrhau cyn lleied o darfu â phosib. Roedd yr Aelod Cabinet y Gwasanaethau Cymdeithasol a Chymorth Cynnar a'r Arweinydd yn aelodau o'r grŵp a byddent yn parhau i sicrhau bod Pen-y-bont ar Ogwr ar y blaen mewn unrhyw gynlluniau.

Argymhellion:

Roedd yr aelodau'n pryderu y byddai dirywiad yn y gwasanaeth ar gyfer preswylwyr petai'r cynnig i Gyngor Pen-y-bont ar Ogwr drosglwyddo gwasanaethau gofal iechyd i Fwrdd Iechyd Prifysgol Cwm Taf o Fwrdd Iechyd Abertawe Bro Morgannwg yn cael ei gymeradwyo. Felly argymhellodd yr aelodau y dylai'r swyddogion a'r aelodau cabinet barhau i ymgysylltu ac atgyfnerthu partneriaethau cryf â'r ddau fwrdd iechyd. Hefyd argymhellodd yr aelodau y dylai'r swyddogion a'r aelodau cabinet ymgyrchu i sicrhau nad oedd Pen-y-bont ar Ogwr dan anfantais mewn unrhyw ffordd pan fo Llywodraeth Cymru'n dyrannu arian grant i gefnogi cyflwyno'r weledigaeth genedlaethol, a sicrhau ein bod yn derbyn cyfran ddigonol o'r arian yn unol â'n dadansoddiad tuedd.

Argymhellodd yr aelodau y dylai'r swyddogion gynnal sesiwn hyfforddi arall am ddemensia i'r holl Aelodau Etholedig, cartrefi gofal a staff allweddol er mwyn cynyddu ymwybyddiaeth a'u galluogi i fod yn Dementia Friends.

Rhagor o wybodaeth

Gofynnodd yr aelodau i dderbyn adroddiad y Cyngor Iechyd Cymuned am ddemensia er gwybodaeth.

Gofynnodd yr aelodau i dderbyn gwybodaeth am boblogaethau meddygfeydd teulu, i gynnwys manylion pob meddygfa fesul lleoliad ynghyd â map. Nododd yr aelodau y byddai'n haws iddynt ddadansoddi'r wybodaeth petaent yn gwybod canran y cleifion a oedd wedi cael diagnosis demensia fesul pob meddygfa.

Gofynnodd yr aelodau am fwy o wybodaeth am y rhaglen ymwybyddiaeth o ddemensia a sut maent yn cyfleu pwysigrwydd newidiadau i ffordd o fyw i'r cyhoedd er mwyn atal demensia a sut i fyw'n dda â demensia.

Faint o welyau EMI sydd wedi cael eu colli yn CBSP? Nododd y swyddogion fod hyn ar gael yn yr adroddiad am y Strategaeth Cartrefi Gofal y byddent yn ei rannu â'r aelodau.

Sawl gwely seibiant byr sydd ar gael i gefnogi pobl iau â demensia a'u teuluoedd.

Gofynnodd yr aelodau i gadw'r eitem yn y Flaenraglen Waith er mwyn i'r pwyllgor ei hailystyried o fewn 9 mis er mwyn rhoi mwy o wybodaeth a diweddarau'r aelodau am y cynnydd a wnaed ers y cyfarfod hwn.

41. **EITEMAU BRYD**

Dim

Daeth y cyfarfod i ben am 12:00

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PWYLLGOR CRAFFU TESTUN 2 - DYDD MAWRTH, 17 EBRILL 2018

ACOFNODION CYFARFOD Y PWYLLGOR CRAFFU TESTUN 2 A GYNHALIWIYD YN SIAMBR Y CYNGOR - SWYDDFEYDD DINESIG, STRYD YR ANGEL, PEN-Y-BONT AR OGWR CF31 4WB DYDD MAWRTH, 17 EBRILL 2018, AM 09:30

Presennol

Y Cyngorydd CA Green – Cadeirydd

TH Beedle	MC Clarke	SK Dendy	J Gebbie
M Jones	JE Lewis	JR McCarthy	AA Pucella
KL Rowlands	G Thomas	SR Vidal	

Ymddiheuriadau am Absenoldeb

MJ Kearns, SG Smith a/ac KJ Watts

Swyddogion:

Sarah Daniel	Swyddog Gwasanaethau Democrataidd - Craffu
Julie Ellams	Swyddog Gwasanaethau Democrataidd - Pwyllgorau

Gwahoddedigion:

Susan Cooper	Cyfarwyddwr Corfforaethol - Gwasanaethau Cymdeithasol a Lles
Carmel Donovan	Rheolwr Grŵp - Gwasanaethau Cymunedol Integredig
Cyngorydd Philip White	Aelod Cabinet - Gwasanaethau Cymdeithasol a Chymorth Cynnar

37. DATGAN BUDDIANNAU

Dim

38. CYMERADWYO COFNODION

PENDERFYNWYD: Cymeradwyo cofnodion cyfarfodydd y Pwyllgor Craffu a Throsolwg Pwnc 2 ar 7 Chwefror 2018 yn gofnod gwir a chywir.

39. DIWEDDARIAD AM Y FLAENRAGLEN WAITH

Cyflwynodd y Swyddog Craffu adroddiad oedd yn nodi'r eitemau a flaenoriaethwyd y Pwyllgor Craffu a Throsolwg Corfforaethol gan gynnwys yr eitem nesaf a ddirprwywyd i'r pwyllgor hwn. Cyflwynodd restr o eitemau posibl eraill hefyd i'w blaenoriaethu a gofynnodd i'r Pwyllgor nodi unrhyw eitemau eraill i'w hystyried drwy ddefnyddio'r ffurflen meini prawf a bennwyd ymlaen llaw. Gofynnwyd aelodau hefyd i gymeradwyo'r adborth o'r cyfarfodydd blaenorol a rhestr yr ymatebion gan gynnwys unrhyw rai sy'n weddill.

PENDERFYNWYD: Gwnaeth y Pwyllgor:

- i) Gymeradwyo'r adborth o gyfarfodydd blaenorol y Pwyllgor Trosolwg a Chraffu Testunau 2 gan nodi rhestr yr ymatebion gan gynnwys y rhai sy'n weddill o hyd.
- ii) Nodi gwybodaeth ychwanegol yr oedd y Pwyllgor am ei derbyn am yr eitem nesaf a ddirprwywyd iddo.

40. CYMORTH A GOFAL DEMENSIA YM MWRDEISTREF SIROL PEN-Y-BONT AR OGWR

Cyflwynodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles adroddiad oedd yn rhoi diweddariad ar y cymorth a'r gofal i bobl â demensia sy'n byw ym Mwrdeistref Sirol Pen-y-bont ar Ogwr (BSP) ac ymateb i'r cwestiynau a godwyd am ddemensia yn CBSP ac yn rhanbarthol.

Gofynnodd aelod am ddiffiniad sylfaenol o ddemensia i helpu'r aelodau nad oedd ganddynt fawr o ddealltwriaeth o'r pwnc. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod demensia'n afiechyd dirywiol yr ymennydd a bod y tebygrwydd o ddatblygu demensia'n cynyddu'n sylweddol wrth heneiddio. Yn bennaf mae'n effeithio ar bobl dros 65 oed, ond gall effeithio ar bobl iau o'r pedwar degau hwyr ymlaen. Mae'n effeithio ar bob agwedd ar fyw, gan gynnwys colli cof tymor byr a gweithgareddau pob dydd megis lleferydd a symudedd, ac yn y pen draw gallai effeithio ar y cof tymor hir. Mae'r effaith ar bob unigolyn yn amrywio ac mae sawl math o ddemensia sy'n datblygu ar wahanol gyfraddau ac sydd â symptomau gwahanol. Mae cyffuriau ar gael i drin symptomau demensia ac mae diagnosis'r afiechyd yn gynnar yn gwella llwyddiant y cyffuriau. Ni all cyffuriau atal yr afiechyd ond maen nhw'n gallu caniatáu i'r unigolyn sefydlogi ei gyflwr.

Cyfeiriodd aelod at y tabl sy'n dangos y diagnosis fesul meddygfa yn CBSP. Gofynnodd yr aelodau am boblogaeth bob ardal fel ei bod yn glir pa ganran yn union roedd y ffigurau yn cyfateb iddi. Esboniodd aelod fod tair meddygfa mewn un ward, gyda phob un yn gyfrifol am nifer llai o gleifion, ac felly nad oedd y tabl yn rhoi darlun cywir.

Gofynnodd aelod a oedd nifer uchel yr achosion ym Meddygfa Portway, Porthcawl yn gysylltiedig â nifer y cartrefi gofal ym Mhorthcawl. Esboniodd y Rheolwr Gwasanaethau Cymunedol Integredig fod gan Borthcawl hefyd nifer uchel o bobl oedd yn heneiddio ac y gallai hyn, yn ogystal â nifer y cartrefi nyrsio yn yr ardal, fod y rheswm dros nifer uchel yr achosion. Cytunodd gyflwyno map â ffiniau i aelodau nad oeddent yn gyfarwydd ag enwau'r meddygfeydd yn ogystal â'u lleoliadau.

Diolchodd aelod i'r swyddogion am yr adroddiad a gofynnodd pam roedd ei bwyslais ar reoli'r sefyllfa yn hytrach na cheisio'i hatal trwy ystyried iechyd a lles yr etholwyr. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod canfod a diagnosis'r afiechyd yn gynnar yn ddull effeithiol o gynnal gallu person ar y lefel orau posib a bod peth tystiolaeth ar gael i ddangos bod person yn gallu byw'n dda â demensia am gryn amser. Roeddent yn dibynnu'n fawr ar feddygon yn adnabod arwyddion cynnar. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod dau gynllun gofal ychwanegol newydd i'w cwblhau ym mis Medi/Hydref a allai darparu ar gyfer y rhai â demensia. Roedd mentrau ar gael hefyd i gadw pobl i symud yn ogystal â thîm i hybu ymarfer corff a chadw'n heini.

Esboniodd y Swyddog Iechyd a Gofal Cymdeithasol, BAVO, eu bod yn helpu pobl yn y gymuned i gael gwell dealltwriaeth, a hynny yn ogystal â phrojectau Dementia Friends. Roedd gwaith yn parhau gyda' tîm atal ar sut i ddatblygu sgiliau a thargedu sefydliadau i weithio o fewn yr arbenigedd Yn y dyfodol byddent yn ystyried atal a lles a digwyddiadau i dargedu sefydliadau a'r gymuned i weld yr hyn roedd ei angen arnynt. Esboniodd dechreuwyd y fenter bresennol gan Gymdeithas Alzheimer.

Gofynnodd aelod a fyddai meddyg teulu'n fwy gwyliadwrus gyda grwpiau oedran penodol i asesu a oedd angen rhagor o wirio. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod pob meddyg teulu wedi'i hyfforddi i edrych am arwyddion, diystyru achosion eraill ac yna cyfeirio at y gwasanaeth i gael gwiriad manylach a dod i gasgliadau. Gallai'r broses bara am nifer o fisoedd.

Gofynnodd aelod a fyddai'r cyfleusterau gofal ychwanegol yn gallu darparu ar gyfer y rhai â demensia ysgafn a datblygedig. Meddai Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles mai'r bwriad oedd galluogi unigolyn i aros yn ei

gartref ei un cyhyd â phosib gyda mynediad i ofal ychwanegol. Roedd prinder nyrsys EMI ar draws Cymru, felly byddai'n dibynnu ar yr asesiad a lefel y gofal y gellid ei ddarparu.

Gofynnodd aelod sawl gwely oedd wedi'i golli ym Mhen-y-bont ar Ogwr. Hysbyswyd yr aelod fod cartref gofal ym Mhen-y-bont ar Ogwr wedi cau ond bod asiantaeth allanol yn ystyried dichonolrwydd ei ailagor.

Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod adolygiad allanol wedi cael ei gomisiynu i edrych ar y model gwasanaeth. Roedd cymhariaeth â 41 o fyrddau iechyd yn dangos bod gan Ben-y-bont ar Ogwr y 5ed nifer uchaf o welyau. Roedd yn bwysig cadw pobl yn y gymuned cyhyd â phosib yn ogystal â darparu gwelyau arbenigol. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod gwasanaethau cymunedol yn cefnogi amrywiaeth o bobl ar hyn o bryd a fyddai wedi bod yn yr ysbty yn y gorffennol. Roeddent bellach mewn sefyllfa well i gadw preswylwyr yn eu cartrefi eu hunain cyn bod angen gofal dwys arnynt a byddent yn parhau i ddatblygu amrywiaeth o welyau a dewisiadau i gefnogi person trwy'r llwybr cyfan.

Gofynnodd aelod a oedd y mecanweithiau cefnogi a oedd ar waith yn cael effaith ar ddadansoddi tueddiadau. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod y dadansoddiad yn seiliedig ar oedran y boblogaeth. Byddai canfod yr afiechyd yn gynnar yn helpu i gadw pobl yn eu cartrefi a gwella ffocws ac ymwybyddiaeth gymunedol.

Gofynnodd aelod a oedd cymorth ar gael i deuluoedd. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM y cydnabyddir bod y teulu ehangach yn chwarae rôl bwysig, yn benodol wrth geisio cadw unigolyn yn ei gartref. Roeddent hefyd yn ymwybodol o effaith rôl gofalu ar y teulu a phwysigrwydd cymorth. Gyda demensia cynnar gallai fod teuluoedd ifanc a goblygiadau ariannol y mae angen i sefydliadau fod yn ymwybodol ohonynt. Esboniodd y Rheolwr Gwasanaethau Cymunedol Integredig fod dyletswydd i ofalwyr yr oedd ganddynt hawl i asesiad a chymorth mewn modd sy'n canolbwyntio ar ganlyniadau. Roeddent yn ceisio datblygu ymatebion hyblyg gan nad oes un ateb yn addas i bawb. Roedd ymagwedd amlochrog at fyw'n dda â demensia a chynllun cyflawni i roi cymorth perthnasol yn ystod y broses gyfan.

Gofynnodd aelod pam nad oedd cyfeiriad at Gwm Taf yn yr adroddiad ac a fyddai'r un ddarpariaeth a gwasanaeth i Ben-y-bont ar Ogwr yn y dyfodol petai ffiniau'r byrddau iechyd yn cael eu newid. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM eu bod yn aros am y cyhoddiad. Cynhaliwyd trafodaethau rhagarweiniol a byddai'r ddarpariaeth ym Mhen-y-bont yn ystyried model gwasanaeth gwahanol ond nid oedd yn bwriadu newid unrhyw beth ar unwaith. Cadarnhawyd y sefyllfa gan Gyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles a dywedodd y rhoddwyd sicrwydd yng nghyfarfod diwethaf y Cyngor. Roedd prif weithredwyr y ddau fwrdd iechyd wedi cwrdd â'i gilydd yn ddiweddar i ystyried strwythur llywodraethu posib. Byddai cyfarfod arall ym mis Mai i drafod y materion yn fanylach. Roeddent yn gobeithio am ymateb cynnar i'r ymgynghoriad. Pwysleisiodd yr Aelod Cabinet dros y Gwasanaethau Cymdeithasol a Chymorth Cynnar fod partneriaeth gref ar waith a bod rhaid i'r gwaith caled barhau. Gofynnodd aelodau i gydnabod pwysigrwydd dod yn gymuned sy'n ystyriol o ddemensia.

Gofynnodd aelod a oedd mwy o wybodaeth ar gael ynglŷn â'r mathau o ddemensia ac oedran y bobl yr oedd yn effeithio arnynt. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod gwybodaeth yn deillio o'r cyfrifiad a meddygon teulu. Byddai mwy o wybodaeth ar gael yn y dyfodol pan fyddai meddygfeydd yn cyflwyno gwybodaeth am y diagnosis i Lywodraeth Cymru. Cadarnhaodd y Rheolwr Gwasanaethau Cymunedol Integredig ei bod hi wedi ceisio cael yr wybodaeth ond wedi cael ei hysbysu nad oedd ar

gael yn y fformat y gofynnwyd amdano ar hyn o bryd. Roedd hyn yn cael ei hadolygu a dylai fod ar gael yn y dyfodol.

Esboniodd aelod ei bod wedi gweld rhai ychwanegiadau buddiol yn ystod ei hymweliadau rota â chartrefi gofal defnyddiol i hwyluso bywyd yn y cartrefi, megis lluniau yn hytrach nag arwyddion ysgrifenedig. Roedd y rhain wedi cael eu cyflwyno gan staff i wella'r lle yn hytrach na dilyn gwybodaeth neu gyngor a roddir i'r cartrefi gofal. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles y cynhaliwyd hyfforddiant helaeth ar draws y sector am strategaethau ac ymagweddau. Roedd disgwyl i bob cartref gofal reoli amrywiaeth o weithgareddau ac i staff gyfrannu at reoli'r cartrefi.

Gofynnodd aelod am raglen hyfforddi gofal demensia. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM fod staff y bwrdd iechyd wedi derbyn hyfforddiant ymwybyddiaeth o ddemensia a bod hwn wedi'i estyn ers hynny i gartrefi gofal. Atgoffwyd aelodau gan Gyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod hyfforddiant ar gael iddynt ond bod llai na hanner ohonynt wedi derbyn yr hyfforddiant hyd yma.

Gofynnodd aelod pam nad oedd llawer o sôn am bobl ifanc yn yr adroddiad. Esboniodd Rheolwr Gwasanaethau Clinigol BIP ABM nad oedd yn gyffredin ymhlith pobl ifanc ond bod yr effaith yn sylweddol. Roedd gwasanaeth demensia cynnar ar gael gyda thîm bach penodol. Gofynnodd aelod a oedd cyfyngiad oedran cyn y gellid cyfeirio unigolyn. Fe'i hysbyswyd nad oedd cyfyngiad oedran. Roedd y niferoedd yn isel iawn a byddai pecyn yn cael ei deilwra i unigolyn yn hytrach na bod rhaid i'r unigolyn addasu i'r gwasanaethau prif ffrwd. Cadarnhaodd y Rheolwr Gwasanaethau Cymunedol Integredig ei bod wedi cysylltu â'r tîm arbenigol a oedd wedi rhoi gwybod bod 30 o'r 155 o achosion a oedd ar agor yn bobl dan 65 oed. Ychwanegodd Rheolwr Gwasanaethau Clinigol BIP ABM na fu cynnydd yn y proffil oedran.

Gofynnodd aelod beth oedd perthnasedd data am bobl â demensia yng Nghaerdydd a Bro Morgannwg. Atebodd y Rheolwr Gwasanaethau Cymunedol Integredig y gofynnwyd i'r swyddogion yn benodol i roi'r wybodaeth honno.

Gofynnodd aelod sawl gwely arhosiad byr oedd ar gael. Fe'i hysbyswyd bod 2 wely seibiant ar gael a nodwyd y meini prawf ar gyfer eu defnyddio. Roedd defnydd y gwelyau'n amrywio gyda rhai teuluoedd yn eu defnyddio'n amlach na rhai eraill. Nid oedd yn ymddangos bod gormod o alw amdanynt ac nid oedd rhestr aros. Roedd dadansoddiad o'u defnydd yn cael ei gynnal er na fyddai modd roi canran y rhai â demensia.

Gofynnodd aelod pa mor gadarn oedd y ffynonellau ariannu. Esboniodd Swyddog Iechyd a Gofal Cymdeithasol BAVO fod y rhan fwyaf o arian yn cael ei roi'n flynyddol er bod peth arian 2 flynedd ar gael. Roedd arian yn flaenoriaeth ac roedd yn bryder o hyd. Roedd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles yn ymwybodol o'r sefyllfa ariannol anodd a'r Strategaeth Ariannol Tymor Canolig. Roedd y cynigion yn ystyried yr angen i fuddsoddi mewn gwasanaethau ymyrraeth gynnar a lles. Roedd £10m wedi'i neilltuo i bob rhanbarth: £5m ar gyfer 2018/19 a'r gweddill ar gyfer y flwyddyn ganlynol. Ni fyddai mentrau newydd yn cychwyn nes bod y ffordd ymlaen yn glir. Roedd arian grant yn ei le ond nid arian parhaol oedd hwn ac roedd hi'n ymwybodol o'r her anferth o'n blaenau.

Cytunodd aelodau ei bod yn hanfodol nodi unrhyw arian a oedd wedi'i neilltuo i Ben-y-bont ar Ogwr ac i Ben-y-bont ar Ogwr gadw'r arian hwnnw. Esboniodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles fod hyn eisoes wedi'i drefnu mewn ardaloedd eraill. Cytunwyd arno mewn egwyddor ac roedd ymdrechion yn cael eu

gwneud i sicrhau cyn lleied o darfu â phosib. Roedd yr Aelod Cabinet y Gwasanaethau Cymdeithasol a Chymorth Cynnar a'r Arweinydd yn aelodau o'r grŵp a byddent yn parhau i sicrhau bod Pen-y-bont ar Ogwr ar y blaen mewn unrhyw gynlluniau.

Argymhellion:

Roedd yr aelodau'n pryderu y byddai dirywiad yn y gwasanaeth ar gyfer preswylwyr petai'r cynnig i Gyngor Pen-y-bont ar Ogwr drosglwyddo gwasanaethau gofal iechyd i Fwrdd Iechyd Prifysgol Cwm Taf o Fwrdd Iechyd Abertawe Bro Morgannwg yn cael ei gymeradwyo. Felly argymhellodd yr aelodau y dylai'r swyddogion a'r aelodau cabinet barhau i ymgysylltu ac atgyfnerthu partneriaethau cryf â'r ddau fwrdd iechyd. Hefyd argymhellodd yr aelodau y dylai'r swyddogion a'r aelodau cabinet ymgyrchu i sicrhau nad oedd Pen-y-bont ar Ogwr dan anfantais mewn unrhyw ffordd pan fo Llywodraeth Cymru'n dyrannu arian grant i gefnogi cyflwyno'r weledigaeth genedlaethol, a sicrhau ein bod yn derbyn cyfran ddigonol o'r arian yn unol â'n dadansoddiad tuedd.

Argymhellodd yr aelodau y dylai'r swyddogion gynnal sesiwn hyfforddi arall am ddemensia i'r holl Aelodau Etholedig, cartrefi gofal a staff allweddol er mwyn cynyddu ymwybyddiaeth a'u galluogi i fod yn Dementia Friends.

Rhagor o wybodaeth

Gofynnodd yr aelodau i dderbyn adroddiad y Cyngor Iechyd Cymuned am ddemensia er gwybodaeth.

Gofynnodd yr aelodau i dderbyn gwybodaeth am boblogaethau meddygfeydd teulu, i gynnwys manylion pob meddygfa fesul lleoliad ynghyd â map. Nododd yr aelodau y byddai'n haws iddynt ddadansoddi'r wybodaeth petaent yn gwybod canran y cleifion a oedd wedi cael diagnosis demensia fesul pob meddygfa.

Gofynnodd yr aelodau am fwy o wybodaeth am y rhaglen ymwybyddiaeth o ddemensia a sut maent yn cyfleu pwysigrwydd newidiadau i ffordd o fyw i'r cyhoedd er mwyn atal demensia a sut i fyw'n dda â demensia.

Faint o welyau EMI sydd wedi cael eu colli yn CBSP? Nododd y swyddogion fod hyn ar gael yn yr adroddiad am y Strategaeth Cartrefi Gofal y byddent yn ei rannu â'r aelodau.

Sawl gwely seibiant byr sydd ar gael i gefnogi pobl iau â demensia a'u teuluoedd.

Gofynnodd yr aelodau i gadw'r eitem yn y Flaenraglen Waith er mwyn i'r pwyllgor ei hailystyried o fewn 9 mis er mwyn rhoi mwy o wybodaeth a diweddarau'r aelodau am y cynnydd a wnaed ers y cyfarfod hwn.

41. **EITEMAU BRYD**

Dim

Daeth y cyfarfod i ben am 12:00

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

12 JULY 2018

REPORT OF THE SOLICITOR TO THE COUNCIL AND MONITORING OFFICER

CORPORATE PARENTING CHAMPION NOMINATION REPORT

1. Purpose of the Report.

- 1.1 The purpose of this report is to request the Committee to nominate one Member as its Corporate Parenting Champion to represent the Committee as an invitee to meetings of the Corporate Parenting Cabinet Committee.

2. Connection to Corporate Improvement Objectives.

- 2.1 The key improvement objectives identified in the Corporate Plan 2018-2022 have been embodied in the Overview & Scrutiny Forward Work Programmes. The Corporate Improvement Objectives were adopted by Council on 22 February 2018 and formally set out the improvement objectives that the Council will seek to implement between 2018 and 2022. The Overview and Scrutiny Committees engage in review and development of plans, policy or strategies that support the Corporate Themes.

3. Background

- 3.1 Corporate Parenting is the term used to describe the responsibility of a local authority towards looked after children and young people. This is a legal responsibility given to local authorities by the Children Act 1989 and the Children Act 2004. The role of the Corporate Parent is to seek for children in public care the outcomes every good parent would want for their own children. The Council as a whole is the 'corporate parent' therefore all Members have a level of responsibility for the children and young people looked after by Bridgend.¹
- 3.2 In order to further develop and enhance the Council's corporate parenting role with its partners, a Corporate Parenting Cabinet Committee comprising all Members of Cabinet was established by Cabinet on 4 November 2008.
- 3.3 The inaugural meeting of the Cabinet Committee was held on 27 November 2008 where it was agreed that the Cabinet Committee will meet bi-monthly. The terms of reference for the Cabinet Committee are:
- to ensure that looked after children are seen as a priority by the whole of the Authority and by the Children and Young People's Partnership;

¹ Welsh Assembly Government and Welsh Local Government Association 'If this were my child... A councillor's guide to being a good corporate parent to children in care and care leavers', June 2009

- to seek the views of children and young people in shaping and influencing the parenting they receive;
- to ensure that appropriate policies, opportunities and procedures are in place;
- to monitor and evaluate the effectiveness of the Authority in its role as corporate parent against Welsh Government guidance.

3.4 At its inaugural meeting, the Cabinet Committee requested that a Corporate Parenting “Champion” be nominated from each of the Overview and Scrutiny Committees to become permanent invitees to the Cabinet Committee.

4. Current Situation / Proposal.

4.1 The Committee is requested to nominate one Member as its Corporate Parenting Champion to represent the Committee as an invitee at meetings of the Corporate Parenting Cabinet Committee.

4.2 The role of the Corporate Parenting Champion is to represent their Overview and Scrutiny Committee, partaking in discussions with Cabinet over items relating to children in care and care leavers.

4.3 It is also suggested that in this role each Champion considers how all services within the remit of Scrutiny affect children in care and care leavers and encourage their own Committee to bear their Corporate Parenting role in mind when participating in Scrutiny.

4.4 Scrutiny Champions can greatly support the Committee by advising them of the ongoing work of the Cabinet-Committee and particularly any decisions or changes which they should be aware of as Corporate Parents.

5. Effect upon Policy Framework and Procedure Rules.

5.1 The work of the Subject Scrutiny Committee relates to the review and development of plans, policy or strategy that form part of the Policy Framework and consideration of plans, policy or strategy relating to the power to promote or improve economic, social or environmental wellbeing in the County Borough of Bridgend.

6. Equality Impact Assessment.

6.1 There are no equality impacts arising from this report.

7. Well-being of Future Generations (Wales) Act 2015 assessment

7.1 The Act provides the basis for driving a different kind of public service in Wales, with 5 ways of working to guide how public services should work to deliver for people. The following is a summary to show how the 5 ways of working to achieve the well-being goals have been used to formulate the recommendations within this report:

- Long Term – The establishment of the Corporate Parenting Cabinet Committee demonstrates the Authorities long term commitment to improving and strengthening their role as Corporate Parents to care leavers and Looked After Children.
- Prevention – The Corporate Parenting Cabinet Committee are preventative in their nature and ensure that appropriate policies, opportunities and procedures are in place for all care leavers and Looked After Children
- Integration – This report supports all the well-being objectives
- Collaboration – All members are Corporate Parents and this report supports collaborative working with Cabinet and Members of Scrutiny and emphasises the role of Corporate Parents for all Elected Members.
- Involvement – Corporate Parent Champions provide practical support and guidance to children in care and care leavers to ensure they achieve their well-being goals

8. Financial Implications.

8.1 None.

9. Recommendation.

The Committee is asked to nominate one Member of the Committee as its Corporate Parenting Champion to represent the Committee at meetings of the Corporate Parenting Cabinet Committee

K Watson
Solicitor to the Council and Monitoring Officer

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 Bridgend County Borough Council,
 Civic Offices,
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Background Documents

Bridgend County Borough Council Constitution

Part II of the Local Government Act 2000: Executive Arrangements

Report of the Corporate Director – Children to Cabinet, 4 November 2008: Establishment of a Corporate Parenting Cabinet Committee

Report of the Corporate Director – Children to the Inaugural Meeting of the Corporate Parenting Cabinet Committee, 27 November 2008

BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

12 JULY 2018

REPORT OF THE SOLICITOR TO THE COUNCIL AND MONITORING OFFICER

NOMINATION TO THE PUBLIC SERVICE BOARD OVERVIEW AND SCRUTINY PANEL.

1. Purpose of Report

- 1.1 The purpose of the report is to request the Committee to nominate one Member to sit on the Public Service Board Overview and Scrutiny Panel.

2. Connection to Corporate Improvement Objectives / Other Corporate Priorities.

- 2.1 The key improvement objectives identified in the Corporate Plan 2018–2022 have been embodied in the Overview & Scrutiny Forward Work Programmes. The Corporate Improvement Objectives adopted by Council on 22 February 2018 and formally set out the improvement objectives that the Council will seek to implement between 2018 and 2022. The Overview and Scrutiny Committees engage in review and development of plans, policy or strategies that support the Corporate Themes.

3. Background.

- 3.1 From 1 April 2016, the Well-being of Future Generations (Wales) Act 2015 introduced statutory Public Services Boards (PSB) across each local authority area in Wales. PSBs work together to improve the social, economic, cultural and environmental well-being of the board's area. The Act specified that one Committee take an overview of the overall effectiveness of the Board which this Authority determined to carry out via a PSB Overview and Scrutiny Panel which is now proposed to sit under the remit of the Corporate Overview and Scrutiny Committee.
- 3.2 The purpose of the Panel is to review and scrutinise the efficiency and effectiveness of the PSB and its decisions as well as the governance arrangements surrounding it. The Panel will hold up to two meetings a year and will make reports or recommendations to the Board regarding its functions, with the aim of enhancing its impact. These recommendations are to be presented to the Corporate Overview and Scrutiny Committee for approval prior to submission to the Board.
- 3.3 A copy of any report or recommendation made to the Public Service Board must be sent to the Welsh Ministers, the Commissioner and the Auditor General for Wales.

3.4 The membership of the PSB Panel is determined annually and incorporates three Members from the Corporate Overview and Scrutiny Committee, one Member from each of the Subject Overview and Scrutiny Committees and counterpart representatives that sit on the Public Service Board.

4. Current Situation / proposal.

4.1 The Committee is asked to nominate one Member to sit on the Public Service Board Overview and Scrutiny Panel.

5. Effect upon Policy Framework and Procedure Rules.

5.1 The work of the Subject Overview and Scrutiny Committee relates to the review and development of plans, policy or strategy that form part of the Policy Framework and consideration of plans, policy or strategy relating to the power to promote or improve economic, social or environmental wellbeing in the County Borough of Bridgend.

6. Equalities Impact Assessment

6.1 There are no equalities impacts arising from this report.

7. Well-being of Future Generations (Wales) Act 2015 Assessment

7.1 The Act provides the basis for driving a different kind of public service in Wales, with 5 ways of working to guide how public services should work to deliver for people. The following is a summary to show how the 5 ways of working to achieve the well-being goals have been used to formulate the recommendations within this report:

- Long-term - The establishment of the PSB Panel will assist in the long term planning of the business of the Council by the continuation of effective relationships with other organisations to improve wellbeing in Bridgend County now and in the future.
- Prevention - The PSB Overview and Scrutiny Panel will monitor the Public Service Board's objectives and priorities within the Wellbeing Plan which address underlying causes of problems and prevent them getting worse or happening in the future.
- Integration - The report supports all the wellbeing objectives.
- Collaboration - The PSB Panel supports partnership working with other organisations both locally and regionally.
- Involvement - The PSB Panel will maintain a relationship with other

Organisations through effective partnership working and act as a critical friend to ensure the PSB are involving citizens of Bridgend when making decisions that affect them.

8. Financial Implications

8.1 There are no financial implications arising from this report.

9. Recommendation

The Committee is asked to nominate one Member to sit on the Public Service Board Overview & Scrutiny Panel.

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Background Documents

None

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO THE SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

12 JULY 2018

REPORT OF THE SOLICITOR TO THE COUNCIL AND MONITORING OFFICER

FORWARD WORK PROGRAMME UPDATE

1. Purpose of the Report

- a) To present the items prioritised by the Corporate Overview and Scrutiny Committee including the next item delegated to this Subject Overview and Scrutiny Committee;
- b) To present the Committee with a list of further potential items for comment and prioritisation;
- c) To ask the Committee to identify any further items for consideration using the pre-determined criteria form;
- d) To consider and approve the feedback from the previous meetings of the Subject Overview and Scrutiny Committee 2 and note the list of responses including any still outstanding at Appendix A.

2. Connection to Corporate Improvement Objectives / Other Corporate Priorities

- 2.1 The key improvement objectives identified in the Corporate Plan 2016–2020 have been embodied in the Overview & Scrutiny Forward Work Programmes. The Corporate Improvement Objectives were adopted by Council on 1 March 2017 and formally set out the improvement objectives that the Council will seek to implement between 2016 and 2020. The Overview and Scrutiny Committees engage in review and development of plans, policy or strategies that support the Corporate Themes.

3. Background

- 3.1 Under the terms of Bridgend County Borough Council's Constitution, each Overview and Scrutiny Committee must publish a Forward Work Programme (FWP) as far as it is known.
- 3.2 An effective FWP will identify the issues that the Committee wishes to focus on during the year and provide a clear rationale as to why particular issues have been selected, as well as the approach that will be adopted; i.e. will the Committee be undertaking a policy review/ development role ("Overview") or performance management approach ("Scrutiny").

Feedback

- 3.3 All conclusions made at Subject Overview and Scrutiny Committee (SOSC) meetings, as well as recommendations and requests for information should be responded to by Officers, to ensure that there are clear outcomes from each topic investigated.
- 3.4 These will then be presented to the relevant Scrutiny Committee at their next meeting to ensure that they have had a response. Attached at Appendix A to this report is the feedback that has been requested by this Committee, including the CSSIW inspection report that was previously requested.
- 3.5 When each topic has been considered and the Committee is satisfied with the outcome, the SOSC will then present their findings to the Corporate Overview and Scrutiny Committee (COSC) who will determine whether to remove the item from the FWP or to re-add for further prioritisation at a future date.
- 3.6 The FWPs will remain flexible and will be revisited at each COSC meeting with input from each SOSC and any information gathered from FWP meetings with Corporate Directors and Cabinet.

4. Current Situation / Proposal

- 4.1 Attached at **Appendix B** is the overall FWP for the SOSCs which includes the topics prioritised by the COSC for the next set of SOSCs in Table A, as well as topics that were deemed important for future prioritisation at Table B. This has been compiled from suggested items from each of the SOSCs at previous meetings as well as the COSC. It also includes information proposed from Corporate Directors, detail from research undertaken by Scrutiny Officers and information from FWP Development meetings between the Scrutiny Chairs and Cabinet.
- 4.2 The Committee is asked to first consider the next topic they have been allocated by the COSC in Table A and determine what further detail they would like the report to contain, what questions they wish Officers to address and if there are any further invitees they wish to attend for this meeting to assist Members in their investigation.
- 4.3 The Committee is also asked to then prioritise up to six items from the list in Table B to present to the COSC for formal prioritisation and designation to each SOSC for the next set of meetings.

Corporate Parenting

- 4.4 Corporate Parenting is the term used to describe the responsibility of a local authority towards looked after children and young people. This is a legal responsibility given to local authorities by the Children Act 1989 and the Children Act 2004. The role of the Corporate Parent is to seek for children in public care the outcomes every good parent would want for their own children. The Council as a whole is the 'corporate parent', therefore all Members have a level of responsibility for the children and young people looked after by Bridgend.

- 4.5 In this role, it is suggested that Members consider how each item they consider affects children in care and care leavers, and in what way can the Committee assist in these areas.
- 4.6 Scrutiny Champions can greatly support the Committee in this by advising them of the ongoing work of the Cabinet-Committee and particularly any decisions or changes which they should be aware of as Corporate Parents.

Identification of Further Items

- 4.7 The Committee are reminded of the Criteria form which Members can use to propose further items for the FWP which the Committee can then consider for prioritisation at a future meeting. The Criteria Form emphasises the need to consider issues such as impact, risk, performance, budget and community perception when identifying topics for investigation and to ensure a strategic responsibility for Scrutiny and that its work benefits the organisation.

5. Effect upon Policy Framework & Procedure Rules

- 5.1 The work of the Overview & Scrutiny Committees relates to the review and development of plans, policy or strategy that form part of the Council's Policy Framework and consideration of plans, policy or strategy relating to the power to promote or improve economic, social or environmental wellbeing in the County Borough of Bridgend. Any changes to the structure of the Scrutiny Committees and the procedures relating to them would require the Bridgend County Borough Council constitution to be updated.

6. Equality Impact Assessment

- 6.1 There are no equality implications attached to this report.

7. Well-being of Future Generations (Wales) Act 2015 Assessment

- 7.1 The Act provides the basis for driving a different kind of public service in Wales, with 5 ways of working to guide how public services should work to deliver for people. The following is a summary to show how the 5 ways of working to achieve the well-being goals have been used to formulate the recommendations within this report:

- Long-term - The approval of this report will assist in the Planning of Scrutiny business in both the short-term and in the long-term on its policies, budget and service delivery
- Prevention - The early preparation of the Forward Work Programme allows for the advance planning of Scrutiny business where Members are provided an opportunity to influence and improve decisions before they are made by Cabinet
- Integration - The report supports all the wellbeing objectives
- Collaboration - Consultation on the content of the Forward Work Programme has

taken place with the Corporate Management Board, Heads of Service, Elected Members and members of the public

- Involvement - Advanced publication of the Forward Work Programme ensures that the public and stakeholders can view topics that will be discussed in Committee meetings and are provided with the opportunity to engage.

8. Financial Implications

8.1 There are no financial implications attached to this report.

9. Recommendations

9.1 The Committee is recommended to:

- (i) Approve the feedback from the previous meetings of the Subject Overview and Scrutiny Committee 2 and note the list of responses including any still outstanding at Appendix A;
- (ii) Identify any additional information the Committee wish to receive on their next item delegated to them in the FWP including invitees;
- (iii) Identify any further detail required for other items in the overall FWP at Table B of Appendix B;
- (iv) Identify any additional items using the criteria form, for consideration on the Scrutiny Forward Work Programme;

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Background documents

None.

Date of meeting	Item	Members wished to make the following comments and conclusions:	Response/Comments	Follow Up Required
07-Mar-2018	Prevention and Wellbeing and Local Community Coordination	The Committee complimented the vast amount of work that was being undertaken and the good services that were being provided for the most vulnerable people in the County Borough.	The Directorate is grateful for the positive comments and recognition of the work that is progressing and emerging.	
		The Committee agreed that the subject of Partnerships and Joint Working in relation to Prevention and Wellbeing, such as in respect of the Police and Fire Service, be put forward for the Corporate Overview and Scrutiny Committee's item of Collaboration Working on their FWP.	The Directorate would contribute to any future report on collaborative working relating to the prevention and wellbeing theme that is subsequently developed.	
Additional Information				
		The Committee requested clarification of the statistic that 75% of women over 65 live alone.	Ageing Well in Wales states that 75% of women and a third of men over the age of 65 live alone. In 2016 at UK level, 62% of women aged 65 to 74 lived alone and 72% of those aged 75 and above. There has been a 16% growth in this area over a decade. Suggested contributors are that women have higher life expectancy, more women than men become widowed. There are indications that the gender gap may be narrowing as male life expectancy increases.	
		The Committee expressed concern over any proposed future budget cuts to the third sector as whilst the budget involved is not huge, many of the services provided under the Prevention and Wellbeing banner rely heavily on third sector involvement and the resulting impact of removing such services would be extremely significant to local communities. The Committee asked for clarification over how the Authority expects the third sector to provide more support and take on more provision with less funding.	A review of how cross-sector collaboration could be taken forward is being led by the Social Services and Wellbeing Directorate. A draft development plan and proposed actions is nearing completion based on an outcome focus of 'Building Resilient Communities'. The Third Sector Stakeholder group, third sector organisations and BCBC staff have been engaged in reviewing this issue. The issue of funding is only one dimension of a review that looks at capacity, future readiness, coproduction delivering value for money. The development plan and supporting data may be appropriate to be reviewed, potentially as part of the proposed Collaboration Working report.	

	<p>The Committee commented on the fact that whilst a lot of Officers refer to the 'One Council' approach, there seems little evidence of this occurring in practice. Members used the example of this particular item on Prevention and Wellbeing, pointing out that the report shows little of how other Directorates are involved in this work. The Committee requested clarity over this, both in relation to evidence on this particular subject and in the wider context of how corporately the 'One Council' Theme was being disseminated down through the Authority to ensure that all Directorates were working together to achieve joint Corporate Priorities.</p>	<p>In relation to the Prevention and Wellbeing agenda, it was highlighted at the meeting that it was intended that this would grow progressively across the Council and with external partners and stakeholders. There is an action in the 2018/19 Business Plan to promote the importance of this as part of the one council approach. There are many additional examples that could have been included linked to Early Help, tackling poverty, supporting vulnerable groups, active travel (others to be added) that would illustrate the connectivity that is increasing across the Council. This will be a long term challenge and be taken forward alongside the wellbeing of Future Generations Act and Social Services and Wellbeing Act which cross-cuts organisations.</p>	
	<p>Further Points The Committee heard evidence that the Public Service Board would be developing indicators that will illustrate how the Ageing Well Plan is contributed to by partners and how the quality of life of older people is impacted. Members proposed that this be picked up by the PSB Overview and Scrutiny Panel.</p>	<p>Scrutiny to pick up</p>	

17-Apr-2018	Dementia Care	Members were concerned if the proposal for Bridgend Council to transfer healthcare services to Cwm Taf University Health Board from Abertawe Bro Morgannwg University Health Board that residents do not see a decline in the service they receive. Members therefore recommended that Officers and Cabinet Members continue engagement and build on strong partnerships with both Health Boards. Members further recommended that when Welsh Government allocate grant funding to support the delivery of the National Vision, that Officers and Cabinet members lobby to ensure that Bridgend are not disadvantaged in anyway and ensure we are allocated an adequate share of the funding according to our trend analysis.	Noted	
		Members recommended that officers provide a further training session on Dementia to all Elected Members, care homes and key staff to increase awareness and enable them to become Dementia Friends	Discussions have commenced with the social services and wellbeing directorate training team about how we can do this in partnership with corporate training	
		Further information requested		
		Members asked to receive the Community Health Council report on dementia for information		
		Members asked to receive information on the GP Practice populations. To include details of the surgery practice broken down by location and to include a map. Members stated the information would be easier for them to analyse if they knew the percentage of patients diagnosed with dementia for each surgery	See map below of where GP practices are located and registered populations of the GP practices. The diagnosis per practice is detailed in the Scrutiny paper	
		Members asked for further information on the programme of awareness of dementia and how they reach out to the public on the importance of lifestyle changes to prevent the onset of Dementia and how to live well with Dementia.	In terms of the plan of work for the coming year on dementia awareness the following are in place: Maesteg sustainability plan, to oversee sessions and community development; Kenfig Hill DFC development plan is progressing; Porthcawl Promenade and town, work is progressing to work towards becoming Dementia friendly community (DFC); Champions are being identified throughout the County Borough; all GP practices have been approached; three comprehensive schools have had dementia friends training; and Bridgend Shout has started to become involved; and plans are in start up for Bridgend town centre and BCBC office staff becoming DFC. In respect of prevention Welsh Government are committed to providing support to people in Wales with dementia and their families. This includes supporting a number of initiatives including: • Dementia risk reduction Welsh Government's revised 'Dementia: reduce your risk guidance' sets out the lifestyle choices individuals can take which could lessen the risk of developing dementia. The guidance is available in English and Welsh. http://change4lifewales.org.uk/adults/dementia/information/?lang=en	
		How many EMI beds have been lost in BCBC? Officers stated that this was available in the Care Home Strategy report which they would share with members	Care Home Strategy attached	
		How many short break beds are available to support younger people and their families with dementia?	BCBC currently supports 13 individuals under the age of 65 years with a dementia diagnosis. We are currently reviewing short breaks for all client groups, including people with younger onset dementia and their families and carers. The aim is to offer flexible and person-centred short break services, enabling choice and control over the type of short break taken. There is evidence from stakeholders that short break respite beds in care homes are important, but they should not be the only option available. As such, BCBC is monitoring the availability of care home beds as well as developing plans to enable alternative options for short breaks. EMI registered residential beds available at 27/4/2018: Independent Homes, 27; BCBC Homes, 18 (all booked for short breaks). In 2017/18, the number of EMI beds used for short breaks for people under 65 in 2017/18 was 0.	
Members requested the item stay on the Forward Work programme for the Committee to revisit in 9 months' time to provide further information and update members on the progress made since this meeting	Noted			

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO CABINET COMMITTEE CORPORATE PARENTING

24TH JANUARY 2018

REPORT OF THE CORPORATE DIRECTOR, SOCIAL SERVICES AND WELLBEING

CARE AND SOCIAL SERVICES INSPECTORATE WALES - INSPECTION OF CHILDREN'S SERVICES JANUARY/FEBRUARY 2017 – ACTION PLAN UPDATE

1. Purpose of Report

1.1 To present to the Cabinet Committee the updated Action Plan following the inspection of Children's Services in January/ February 2017.

2.0 Connection to Corporate Improvement Plan/Other Corporate Priority

2.1 This report links to the following Corporate Plan priorities:

- Helping people to be more self-reliant;
- Smarter use of resources.

3. Background

3.1 The inspection undertaken in Children's Services in Bridgend focussed on how children and families are empowered to access help and care and support services and on the quality of outcomes achieved for children in need of help, care and support and/or protection, including children who had recently become looked after by the local authority.

3.2 The inspection also evaluated the quality of leadership, management and governance arrangements in place to develop and support service delivery.

3.3 The dates of the inspection were as follows:

Week 1 – week commencing: 30/01/2017

Week 2 – week commencing: 13/02/2017

In advance of the fieldwork, the authority was required to submit a self-assessment and a range of advanced information/documentation in the following areas:-

- Strategy and Structures
- Key Documents and Operational Protocols
- Blank Templates
- Cabinet/Committee Reports
- Development Work
- Families First and Integrated Family Support Team
- Performance Data and Quality Assurance
- Workforce

This required co-ordinating the provision of 212 documents/items in total.

- 3.9 In Fieldwork Week 1, CSSIW inspected the work by assessing a sample of 20 from 65 cases. In some instances this included interviewing the allocated case worker and their manager. In addition, CSSIW also sought the views of service users through interviews with children and young people and parents/carers.
- 3.10 In Fieldwork Week 2, CSSIW explored themes arising from week 1. They conducted a number of individual and group interviews with Elected Members, managers, partners and service providers. Where possible they observed practice linked to the cases reviewed during week 1.
- 3.11 CSSIW reported their findings on their website and to the Minister for Health and Social Services in June 2017. They also requested an opportunity to present findings to Bridgend County Borough Council's Overview and Scrutiny Committee.
- 3.12 The Overview and Scrutiny Committee 2 received the report and action plan on the 20th July 2017.

4. Current situation / proposal.

- 4.1 The CSSIW inspection report is attached at **Appendix 1**.

Summary of findings

- 4.2 Inspectors found that the authority had worked hard in the context of the Social Services and Well-being (Wales) Act (SSWBA) 2014, to reshape its services. The authority's Information, Advice and Assistance (IAA) function was delivered through the Assessment team which provided a single point of contact for both social work and preventative (Early Help) interventions.
- 4.3 Access arrangements were respectful of people's rights and individuality and were available bilingually but there was a lack of accessible quality information for children, young people and their families and the model was yet to mature into an integrated service fully understood and delivered with partner agencies.
- 4.4 Screening decisions were timely and Inspectors saw some positive evidence of management oversight. When contacts were received by Children's Services and there was an obvious indication of significant harm, prompt and proportionate initial action was taken to protect children. The Inspectors reported that they had not seen any serious failures that left children being harmed or at risk of harm however they did comment on the fact that the quality of threshold screening, assessments, care and support planning was inconsistent.
- 4.5 It was acknowledged by the service that the changes introduced to operationalise Information, Advice and Assistance had brought additional expectations that put pressure on the capacity of the managers and the workload of the assessment team. The impending transition to a Multi-Agency Safeguarding Hub (MASH) provided a timely opportunity to refresh service expectations resulting from the SSWBA, including learning from practice.
- 4.6 Inspectors commented that consistent good social work practice, to elicit the child's wishes and feelings, was not well reflected in the content of assessments. They concluded that assessments/plans needed to be better shared with children and families as well as better communication about any proposed changes about service developments.

- 4.7 Inspectors noted that senior managers were already taking steps to look at the impact services were having on reducing need and risk and the authority was working hard to transform Children's Services at a time when they had to deliver medium term financial savings.
- 4.8 They noted that the ambition of the authority's plans signalled their commitment to improving both early intervention and statutory services for children, young people and their families, recognising this was significantly dependent upon the ability of all Council directorates to work together in order to deliver against the Council's vision and contribute and co-ordinate an effective range of services. The Council will need to ensure there is an ongoing analysis of the underlying complexities and risks associated with statutory Children's Services.
- 4.9 Inspectors noted that it was positive that the Council had recently begun work to develop a more comprehensive evidenced based commissioning plan that will be key to the delivery of its early help and permanence strategy.
- 4.10 The inspection found that the workforce were committed to achieving good outcomes for children and families but staff morale was variable across the service and needed to be nurtured at a time of significant change. Like other local authorities across Wales, Bridgend should continue to focus on how they can retain staff for longer and have more timely recruitment of experienced staff.

Recommendations and Next Steps

- 4.11 An Action Plan was developed in response to the recommendations made by CSSIW. It was presented to Cabinet on the 25th July 2017.
- 4.12 The Action Plan has been monitored by the Early Help and Safeguarding Board which is chaired jointly by the Corporate Directors for Social Services and Wellbeing and Education and Family Support. An updated Action Plan is attached at **Appendix 2**.

5. Effect upon Policy Framework and Procedure Rules

- 5.1 There is no impact on the Policy Framework and Procedure Rules.

6. Equality impact Assessment

- 6.1 There are no equality implications in this report.

7. Financial Implications

- 7.1 Whilst there are no direct financial implications, the report highlights that the authority is working hard to transform services at a time when there are medium term financial savings to be delivered.

8. Recommendation

- 8.1 It is recommended that the Cabinet Committee receives and approves the updated Action Plan.

Susan Cooper
Corporate Director, Social Services and Wellbeing
January 2018

9. Contact officer

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10. Background Documents

None

Inspection of *Children's* Services

Bridgend County
Borough Council

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.
This document is also available in Welsh.

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Introduction and next steps

Care and Social Services Inspectorate Wales (CSSIW) undertook an inspection of children's services in Bridgend County Borough Council in January/ February 2017. Inspectors looked closely at the quality of outcomes achieved for children in need of help, care and support and/ or protection. We focussed specifically on the quality of practice, decision making and multi-agency work in respect of the authority's safeguarding, access and assessment arrangements; including arrangements for the provision of information, advice and assistance and preventive services. In addition inspectors evaluated what the local authority knew about its own performance and the difference it was making for the people it was seeking to help, care and support and/or protect.

The inspection was structured around people's pathway into care and support services, specifically access to preventative and statutory services and the interface between the two, as well as any safeguarding issues arising. We considered carefully the contributions made by social services in partnership with other agencies to achieving good outcomes for children and families and where relevant to protecting children from harm. Inspectors read case files and interviewed staff, managers and professionals from partner agencies. An electronic staff survey was carried out across children's services. Wherever possible, inspectors talked to children, young people and their families.

At the time of the inspection the council was experiencing a significant period of change including the requirement to implement the Social Services and Well-Being (Wales) Act 2014 (SSWBA). The social services and well-being directorate was also actively progressing a transformational agenda of services for children young people and their families while having to deliver medium term financial savings.

Inspectors were pleased to note that senior managers were committed to achieving improvements in the provision of help and protection for children and families.

The recommendations made on page 8 of this report identify the key areas where post-inspection development work should be focused.

They are intended to assist Bridgend County Borough Council and its partners in their continuing improvement.

The inspection team would like to thank Bridgend service users, elected members, staff and partner agencies who contributed to this report.

Next steps

Bridgend County Borough Council is to produce an improvement plan in response to this report's recommendations which will be monitored as part of CSSIW programme of engagement.

Overview of findings

Access arrangements

Inspectors found that the authority had worked hard in the context of the Social Services Well-being Act 2014, to reshape its services. The authority's Information Advice and Assistance function was delivered through the Assessment team which provided a single point of contact for both social work and preventative (Early Help) interventions.

Access arrangements to Early Help and statutory services were respectful of peoples' rights and individuality and were available bilingually but there was a lack of accessible quality information for children, young people and their families. The colocation of staff from social services, Early Help and partner agencies within the assessment team was supporting children and families to be directed more easily to appropriate services, but was yet to mature into integrated services. The Assessment team multi agency arrangements will be extended through the development of a Multi Agency Safeguarding Hub from April 2017. The current access arrangements, including the interface between social services and Early Help, were underpinned by a threshold criteria document, but this was not yet sufficiently understood by partner agencies. Screening decisions were timely and Inspectors saw some positive evidence of management oversight. When contacts were received by children's services and there was an obvious indication of significant harm, prompt and proportionate initial action was taken to protect children. The quality of threshold decision-making however, was inconsistent and not sufficiently evidenced. It was acknowledged by the service that the changes introduced to operationalise IAA had brought additional expectations that put pressure on the capacity of the managers and the workload of the assessment team. The information provided by partner agencies was not always of a sufficient quality to support the assessment team in their screening decision and some professional referrers demonstrated a lack of understanding of the requirements of the service. More work was needed to develop multi agency quality assurance systems to support staff to exercise appropriate and proportionate judgements and to provide assurance that children young people and families were being directed to the most appropriate service. The impending transition to a MASH provided a timely opportunity to refresh service expectations resulting from of the SSWBA, including learning from practice. The authority will also need to extend its performance information to include an analysis of the impact that services are having on reducing need and risk.

Safeguarding & Assessment

The assessment team were working hard to implement the requirements of the Social Services Well-being (Wales) Act 2014. Strategy discussions were timely and supported appropriate information sharing from key agencies.

The quality of the assessments and recording seen was variable; some were good but others did not sufficiently evidence the principle of co-production or an analysis of need and risk from the outset. The timeliness and quality of partner's contributions to assessments was not always evident and remained too dependent on individual professional relationships.

Good social work practice to elicit the child's wishes and feelings was not consistently well reflected in the content of assessments. Although most assessments were shared with children and families, lack of effective engagement resulted in them not always being sufficiently clear about the purpose of the help, care and support and/or protection they received. The resulting plans did not always reflect the findings of the assessments and were not sufficiently child focused or outcome driven. In some instances the quality of the plan hampered those taking over a case from swiftly understanding the needs and risks associated with children and families. Assessments and resulting plans need to be better shared with children and families in a way that promotes their understanding of the issues and engagement.

Management oversight of assessments and plans was seen but did not consistently provide the level of challenge and quality control needed.

Leadership management and governance

The authority was working hard to transform children's social services at a time when they had to deliver medium term financial savings. The ambition of the authority's plans signalled their commitment to improving both early intervention and statutory services for children young people and their families. The objective to mitigate the need for statutory social services however was significantly dependent upon the ability of all council directorates to work together in order to deliver against the council's vision and contribute and co-ordinate an effective range of services. The council will need to ensure there is an ongoing analysis of the underlying complexities and risks associated with statutory children's services. It was positive that the council had recently begun work to develop a more comprehensive evidenced based commissioning plan that will be key to the delivery of its early help and permanence strategy.

The council needs to ensure that the strategic direction is translated into an operational strategy for delivery of children's services that is effectively communicated and understood by staff, partners and service users. At the time of the inspection the SSWBA was still at an early stage of being embedded and more opportunities were needed to draw lessons from practice and engaged key stakeholders in reviewing progress and in any resulting service remodelling. The voices of children and families also need to be embedded in shaping service planning to provide a better understanding of the difference that help, care and support and/or protection is making for children and families. The introduction of a new quality assurance framework will help the councils to understand the pace of its service improvement.

Staff were committed to achieving good outcomes for children and families but staff morale was variable across the service and needed to be nurtured at a time of significant change. The recruitment and the retention of social workers had been given significant priority despite some good progress the authority had encountered difficulty in recruiting experienced staff. Services therefore were not always delivered by a suitably qualified and experienced workforce that had the capacity to consistently meet workload demands. Staff valued the approachability of their line managers, and peer support from team members particularly in relation to managing the increase in volume and complexity of their work. Staff would welcome greater visibility of senior managers particularly given the remodelling of services.

The importance of staff development and good supervision practice to retention was recognised and newly qualified workers were found to be well supported in their first year of practice and highly valued the mentoring provided to them. Despite the availability of some good training programmes staff including managers needed help to prioritise training against the competing demands of their work. The quality of supervision was found to be very variable and did not routinely evidence sufficient challenge or reflection, a new supervision policy had not yet impacted on these quality issues. Senior managers were working to develop a stronger oversight of practice and management culture the leadership development of group managers and front line managers was therefore being progressed as a priority.

Recommendations

Access

1. A range of user-friendly information should be developed and made easily accessible for families, children and young people not only with respect to signposting to preventative services but also how children's services and early help carries out its work.
2. Effective, multi-agency training and quality assurance arrangements should be established to ensure that the thresholds and referral expectations of both early help and statutory children's services are understood by staff and partners and are consistently applied;
3. The council should continue to develop information systems that include scrutiny of service demand and support an analysis of the difference that early help, care and support and/or protection is making for children and families.
4. Caseload and quality assurance reports should be continuously monitored to ensure there is sufficient capacity for workers to engage effectively with children and their families.
5. The quality and consistency of record keeping and the use of chronologies and genograms should be improved;
6. Effective arrangements should be put in place to ensure that the needs of children and young people are assessed if contacts and referrals about their well-being are repeated.
7. The council should review its Emergency duty team (EDT) arrangements to ensure that EDT referrals are effectively captured on the electronic system and that communication with the daytime service supports timely hand over and action.

Safeguarding and Assessment

8. The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.
9. A service model of risk assessment and risk management should be developed and shared with staff and also partner agencies. This should be accompanied by a programme of training and assurance mechanisms to ensure compliance, quality and impact.
10. Expectations in relation to the timeliness and quality of partner's contributions to assessments and care plans should be established. An assurance mechanism should be implemented to ensure compliance and quality.

11. Effective, management oversight and challenge systems should be established at the point of transfer between teams to ensure a clear understanding of the needs and risks associated with the case.

Leadership Management and Governance

12. The council should actively evaluate the effectiveness of its inter directorate working in supporting the Statutory Director Social Services in delivering against the statutory requirements of the Social Service Well-being Act and in particular Information Advice and Assistance.

13. The council should progress its commitment to developing an evidence based commissioning plan in relation to both statutory and early intervention services for children and families.

14. The council should consider how it can increase the voices of children and families in shaping service planning to provide a better understanding of the difference that help, care and support and/or protection is making for children and families.

15. The council should consider how it can provide opportunities for staff and partners to be further engaged in the development and transformation of services; the identification of lessons learnt from its implementation of IAA should be used to inform the planned transition to a multi-agency safeguarding hub.

16. The quality assurance framework should be developed and implemented as a priority.

17. The workforce strategy should continue to focus on maximising staff retention and actions to promote the timely recruitment of experienced staff.

18. Staff must have the capacity to complete the training which has been identified to support their professional development.

19. Senior managers should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism should be implemented to ensure compliance and quality.

20. Arrangements for group managers, team/deputy managers and senior practitioners should be kept under review as part of the remodelling of services to ensure their capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; access to a leadership and development programme should be progressed for managers to build resilience.

Access Arrangements

What we expect to see

All people have access to comprehensive information about Information Assistance & Advice services and get prompt advice and support, including information about their eligibility for care and support services. Preventive services are accessible and effective in delaying or preventing the need for care and support. Access arrangements to statutory social services provision are understood by partners and the people engaging with the service and are operating effectively.

Summary of findings

- The authority had worked hard to reshape its services and had developed an assessment team as a single point of contact for both social work and preventative (Early Help) interventions.
- The colocation of staff from social services, early help and partner agencies within the assessment team was supporting children and families to be directed more easily to appropriate services.
- Access arrangements to Early Help and statutory services were respectful of peoples' rights and individuality and were available bilingually.
- Despite positive performance in the number of Joint Assessment Family Framework (JAFF) completed, partners need to be encouraged to understand the impact that they could make by undertaking the role of the lead professional.
- The interface between social services and Early Help thresholds was underpinned by a threshold criteria document, but this was not sufficiently understood by partner agencies.
- Information provided by partner agencies was not always of a sufficient quality to support the assessment team to make secure screening decisions.
- There was a lack of accessible quality information for children, young people and their families.
- Performance information was being captured but needed to include a better analysis of service impact particularly in relation to repeat referrals.
- Screening decisions were inconsistent and managers and partners needed to be more engaged in the quality assurance of access threshold decisions.
- When contacts were received by children's services and there was an obvious indication of significant harm prompt and proportionate initial action was taken to protect children.
- More multi agency work was needed in respect of Information Advice and Assistance (IAA) service expectations to support staff to exercise appropriate and proportionate judgement.

Explanation of findings

Context

1.1. At the time of the inspection the Social Services and Well Being Directorate was progressing work to transform services to children in the context of a wider Corporate 'One Council' vision. This significant change process reflected the authority's corporate priorities and medium term financial requirements, the Directorate's business plan and the expectations and objectives of the Social Services Well-being Act (Wales) 2014. The safe reduction of its looked after children population remained a key priority for the council (387 children as of 31/12/2016). The council had reframed its focus, replacing its placement and permanence strategy within an Early Help and Permanence Strategy that was aimed at developing a "whole system" and multi agency approach to supporting Looked after Children, whilst helping families to remain together.

1.2 Children's Social services, designated as children's "social care", had been relocated from the former Children's Directorate – now the Education and Family Support Directorate and joined with adult social care under the Corporate Director Social Services and Well-being in January 2015. The authority's Early Intervention and support services (Early Help) remained within the Education and Family Support Directorate. The relationship between the Directorates had benefitted from their close ties in the past and these new arrangements were designed to underpin the corporate priority of 'helping people to be more self-reliant'. The location of early help responsibilities outside of the social services and well-being directorate however, means that any mitigation of need for statutory social services is significantly dependent upon the ability of the Directorates to work together in order to, co-ordinate and deliver an effective range of services.

1.3. Managers from across the two directorates, led by the Corporate Director Social Services and Well-being, had recently (summer 2016) developed a 'Vision into Action' document that identified four key change priorities. Children with Disabilities, Residential Services, Early help and Permanence and the development of a Multi-Agency Safeguarding Hub. The resulting shared project plans are now overseen by a 'Remodelling Children's Social Care Programme Board' and this includes other statutory partners.

1.4. The council had taken a national lead in the implementation of the new electronic Wales Community Care Information System (WCCIS). This necessitated that the authority create new operational templates consistent with the requirements of the act and the new system. The new arrangements 'went live' with the introduction of the SSWBA in April 2016, The system's electronic records were still new and recognised as a 'work in progress'. Staff reported early learning from practice was that the prescription of some templates impacted adversely on the proportionality of their work. The aim of WCCIS is to enable health and social services work together in a more integrated way nationally and locally. At the time of the inspection this integration of information with health was still at an early stage and the ambition of the system was yet to be realised. Inspectors found that the electronic record did not currently support readily accessible oversight of the authority's previous involvement with families. Chronologies and genograms were not well developed or purposeful and there was no common methodology. The

templates had not supported the capture of consistently good quality information or analysis. More work and training was needed particularly with those expected to use the tools, to develop a shared understanding of the intention of the templates and how they should be completed.

1.5. The authority was aware of the growth in demand for social services but also recognised the need to maximise the opportunity to promote more timely engagement with families when the threshold for statutory services was not met. The authority therefore had worked hard to reshape its services and had developed an assessment team as a single point of contact for both social work and the early help interventions. For example in 2015/2016: 3777 contacts had not progressed to a referral because they were deemed to be below the statutory threshold.

1.6. Whilst cross directorate work was evident between social services and early help services, the relationship between the assessment team and the council's other information services, including the Family Information Service (FIS) and the Council's Customer Service Centre (sometimes known as the call centre) was underdeveloped. Staff reported that a lack of understanding regarding the remit of the assessment team and its interface with other council information and signposting arrangements, created potential service tensions. The example most often cited by staff and observed by inspectors, was phone calls that could have gone to other services were misdirected to the assessment team blocking access to the duty system. Limited availability of dedicated business support staff to answer the phone had compounded this issue. The imminent transition to a Multi-Agency Safeguarding Hub (MASH) and the appointment of a new customer services manager was seen as an important opportunity for the council to clarify these information service pathways and to better publicise and disseminate the arrangements.

1.7. The authority had progressed work to implement the Dewis Cymru system (the national citizen portal for well being information) but this was still at an early stage. Information, including from the family information system, was still being uploaded onto the system. Once developed it is intended that Dewis will be used across the social services and well-being directorate and other parts of the council as a central information point for the public. As with any electronic information system, the challenge will be maintaining the relevance of information and ensuring ease of access for the public. It was helpful that a link had now been established on Welsh Community Care Information System (WCCIS) to support staff, to access pertinent information, particularly as some partners expressed concern that personnel providing IAA services did not always have sufficient information to signpost the public effectively.

A Multi-Agency Safeguarding Hub

1.8. A Multi-Agency Safeguarding Hub (MASH) was expected to go live from April 2017. Inspectors saw the Council's current approach to Information Advice and Assistance (IAA) as having been both progressed but also impeded by the work undertaken to develop the MASH. Staff involved in the project recognised that this would necessitate a further period of change but were optimistic that a MASH would extend the current multi agency make-up of the team, improve information sharing and the management of referrals, particularly those relating to domestic abuse. However the focus on the Mash had diverted some attention and resource away from ensuring that the operationalization of the SSWBA particularly in relation to the current access arrangements was sufficiently well understood and owned by staff and partner agencies. The transition to a MASH provided a timely opportunity for further joint training on the requirements of the SSWBA that could include learning from practice to date.

Information Advice and Assistance

1.9. Bridgend County Borough Council's current model for the provision of Information, Advice and Assistance (IAA) services for children, families and professionals was through a countywide assessment team based in Bridgend Civic Centre, or in relation to disabled children through a Disabled Children's team (co located with a multi agency adult social care team). Outside of working hours, a separate Emergency Duty Team responds to referrals that require an immediate response. As well as providing an IAA service, the Assessment team undertook initial safeguarding and child protection activities, child protection strategy discussions, section 47 enquiries, care and support assessments, court work and the accommodation of children as required, holding cases up until the point of closure or transfer.

1.10. The Assessment team consisted of two co-located pods of staff. A statutory services social work team, (team manager, three part-time senior practitioners, nine social workers and three unqualified social work assistant staff), an early help team, plus other specialist professionals.

1.11. The early help pod, comprised of a senior practitioner and screening officer who provided screening function for all new 'requests for help'. Membership had been extended in preparation for the MASH to include other co-located professionals, in order to facilitate more timely intervention and to ensure access to expert advice; these included a specialist health visitor (funded by health and an early help grant), a community drugs and alcohol worker and education child protection officers. Whilst the two pods had distinct functions and separate line management accountabilities, the co-location of agencies had started to improve understanding of each other's roles and the more flexible management of service thresholds. Despite the arrangements only being in place since April 2016, the council's ambition that people be directed more easily between social services and to early help services, had begun to be realised. It was reported by staff that approximately ten referrals a day were being passed directly to the two early help workers in the assessment team for screening, information gathering and direction on to early help services provided through early help locality hubs.

1.12. The interface between social services and early help was underpinned by one referral format and a threshold criteria document that sets out a pathway from universal through to targeted statutory services, including a step up and step down process. It was disappointing that whilst social work and early help staff were generally aware of these criteria, it was not well known by professional referrers. Despite reported confidence in children's services, partners identified that they often didn't know how the assessment team applied the thresholds between early help provision and statutory interventions. More work was needed to meaningfully engage with staff and partners including from across the council in shaping services and to promote greater transparency and understanding of operational thresholds.

1.13. It was not evident that children, young people and families had been consulted about service developments. Inspectors found that there were no leaflets or materials available to the public providing an information guide to the range of services available or how to access them; this gap is not consistent with the Information, Advice and Assessment requirements of the Act. A benefit associated with early intervention was that services did not carry the perceived stigma attached to the social service function. However, staff were unable to articulate how the public understood the differentiation of the council's service arrangements. It was unclear if the development of such published information had been postponed to accommodate the introduction of a MASH or if it was an unfortunate omission. It was significant that some staff indicated that they would also welcome such information, as they were not clear regarding service access thresholds for themselves.

1.14. Responsibility for those cases not meeting the statutory threshold but requiring preventative interventions was transferred to the early help service at the point of the early help request. Following screening, these cases were either closed; signposted or directed to the early help locality teams. It was positive that the parameters for eligibility to early help services were sufficiently inclusive to enable access to services both in relation to children and families with non-eligible and eligible needs and that the arrangements supported step down of cases from statutory social work teams. However, the lack of formal feedback systems regarding the take up of early help services meant that there were potential missed opportunities to actively engage families and ensure that the right response had been made. It had been recognised that some families needed a more prompt intervention in order to engage more effectively with early help and the authority were considering extending the early help service in the assessment team to include support workers able to undertake immediate task-focused work at the point of referral.

1.15. The demand on early help services had increased since its reconfiguration. Between April 2015 to September 2016 the early help service had received a total of 2999 'requests for help' (referrals) of which 40 % (1193) were made by schools and other education services. Children's social work teams made 31% (941) requests for help of which 32 % (303) were made by the assessment team (104 of which were made prior to completion of a care and support Assessment). Safeguarding hubs made 55 % (515) requests for help; 61 formal requests were made for step down support. Only 6 % (187) were self-referrals, whilst this was improved performance it remains stubbornly low and raises the question of whether the ability of the council's approach to early help to 'reach out' and maximise opportunities for identifying and mitigating early risk, are fully effective; this may reflect the lack of public awareness of the service.

Early Help

1.16. The early help services were configured around a central hub and three localities early help hubs. All of the hubs had strong connections with services commissioned through the Welsh Government's Families First grant and the Flying Start programme. Access to Flying Start support however, was location-specific, so creating some inequality in availability.

1.17. The central hub provided countywide specialist targeted services. These services have a key role in delivering the priority of safely reducing the council's looked after children population. (Services included Connecting Families; Specialist youth service co- coordinators and a regional IFSS team). The authority reported that 42% (394) of the requests for help made by the social work safeguarding teams from April 2015 –September 2016, were allocated to central hub services; 291 for example, were referred to Connecting Families. While staff highly valued these services and reported that they were effective there was frustration that service pressures impacted on their availability and the timeliness of their engagement with families.

1.18. The three early help hubs were co-located with social work safeguarding teams, with two hubs being based in their geographic area to promote better community links. The range of professionals who comprise the early help teams had all received training in 'evidence based practice' and 'motivational interviewing'. The teams operated a 'team around the family or team around the school' model. The service had seen a considerable growth in the number of JAFF assessments completed increasing from 228 in 2014/15 to 681 in 2015. Whilst this improved performance was positive, it appeared to stem in part from the location of the JAFF lead professional within the locality hubs. There was some evidence that the risk of concentrating ownership within a function in this way, rather than broadening it across partner agencies, was beginning to have a potential silo effect. It was recognised therefore that more work was needed to encourage and support partners in understanding the positive impact that they could make to children by undertaking the role of the lead professional.

1.19. Inspectors saw evidence of some timely and proactive early help work with children and families that supported their independence and improved well-being but some concerns were also raised that thresholds for interventions were still poorly understood by partner agencies.

Early help needs to be targeted early enough, some families who used to be able to access services are being excluded but the needs will just get worse '
(partner agency)

1.20. The complexity of some cases referred to early help caused some staff to feel that the service was not always operating within its professional competence. Early help providers identified that there was a frequent disparity between the reason for referral and the actual problem they encounter when they engage directly with family.

1.21. Inspectors saw a small number of examples where the threshold for service had been inconsistently applied and the case had been directed to early help before safeguarding issues had been sufficiently resolved. Inspectors were somewhat reassured however; that staff in the early help service were confident in their safeguarding responsibilities and that social work advice was available to support them to 'step up' such cases as needed.

Range of services

1.22. The council had developed a positive range of commissioned provision, a significant proportion of which was reliant upon grant funding. Some pressures and gaps in services were highlighted, particularly around services for children related to domestic abuse but the concerns raised by staff mainly related to issues of capacity and responsiveness. At the time of the inspection there were waiting lists for some services and delays in decommissioning and re-commissioning, due to grant funding constraints, meant that some early help organisations had stopped accepting new referrals. The authority was looking to resolve these issues and to strengthen future evidence based commissioning. Senior managers were very aware that access to early support was key to mitigating the need for statutory services and to the delivery of the early help and permanence strategy. Clearly this commissioning deficit is something that needs to be addressed as a priority.

1.23. The authority had recently begun work to capture the demand on services and had developed a shared dataset, which provided some numerical information from across both social services and early help. The data is reviewed by a multi agency Early Intervention and Safeguarding Board chaired by the Corporate Director of Social Services and Well-being. The data as seen by inspectors was at a very early stage but the authority had plans to progress this to include a greater emphasis on impact and outcomes. The analysis of such information will be essential if the authority is to understand the effectiveness of its arrangements and future development and commissioning needs.

Statutory services

1.24. The arrangements for access to statutory children's social services in Bridgend were well organised through the assessment team. In introducing the requirements of the SSWB Act, the service had sought to simplify operational expectations in relation to IAA by defining the role of the assessment team as providing a duty service to receive and screen referrals the result of which may be recorded as information and closed, signposted, or redirected to early help. Where advice or assistance was required, the assessment team undertook a proportionate assessment using a care and support assessment template, the outcome of which might include the identification of eligible need.

1.25. The authority had experienced year-on-year growth in the number of referrals. In 2015 /2016 the authority reported an 8% rise in contacts from 4619 to 4988 of which 1288 were screened as requiring social services involvement (a 28% increase in the overall number of referrals.)

1.26. Professional oversight of the duty arrangements was in place with the three designated senior practitioners sharing the day-to-day management of the first contact arrangements. Their responsibilities included screening cases, making and

signing off decisions on all new contacts, managing initial child protection strategy arrangements and allocating cases for assessment within the team. Increased pressure on the service meant that at least two of the senior practitioners were now engaged in the screening process on a daily basis. Inspectors noted that whilst they were there, the early help senior practitioner, again an experienced social worker had to step in to support the social work function because it was under capacity and could not manage the flow of work on that day.

1.27. A team manager has overall responsibility for the social work pod including supervision, performance and workflow. The team manager and the senior practitioners were all suitably experienced and secure in their professional decision making abilities. A key strength of the assessment team was the close working relationship between the managers and the staff and their shared commitment to safely supporting children and their families. The central location of the team meant that group managers were accessible and they were viewed as supportive. Staff reflected however, that changes in the group manager's roles to accommodate 'vision into action priorities' had necessarily impacted on their time, availability and continuity of responsibilities.

1.28. The authority had maintained consistently good performance in relation to the number of referrals on which a decision was made within one working day, and had retained this performance indicator as a means of providing assurance. As part of the introduction of the Act, the manager and senior practitioners had all 'worked' cases using the new templates, to better understand the practice changes needed. The team manager had also instigated systems including daily meetings with the senior practitioners to help support the consistency of decision-making and some sampling of cases was undertaken with the group manager. Inspectors saw some positive evidence of management oversight but found that whilst screening decisions were timely, the quality of the threshold decision-making was not yet consistent.

1.29. Inspectors saw examples of cases that were well managed and where screening attention was focused on safeguarding considerations but also on 'what matters' to the individual. When contacts were received where there was an obvious indication that a child was at risk or had suffered significant harm, prompt decisions were made and effective initial action was taken to protect the child.

1.30. In other cases the detail of the referral record was incomplete and information from the range of agency checks undertaken as part of the screening process was not always evident. The reason for the referral was also not always clear, or sufficiently clarified to ensure the appropriateness of the response. Staff reported and inspectors confirmed that EDT referrals were inconsistently captured on the electronic system and communication with the daytime service was too limited to ensure timely hand over and action.

1.31. Inspectors found it difficult to evaluate the quality of management decisions, as the underpinning rationale for the application of thresholds was not routinely recorded and did not reflect for example, the extent to which the cumulative effect of multiple incidents had been considered. Senior managers need to consider the extent to which this presents a potential safeguarding risk. In a minority of the cases seen, screening had not identified and reduced risks to children at the point of contact and referral. In these instances inspectors viewed the case as being

prematurely closed, inappropriately transferred to early help or requiring a more immediate statutory response.

1.32. Despite reported good 'working relationships with partner agencies it was evident that there was no shared common understanding of threshold criteria and staff told inspectors that referrals from partners were not of a consistently sufficient quality to support the assessment team to make informed decisions. Some partners equally described access to services as becoming increasingly bureaucratic and they did not understand the intentions behind the single point of contact arrangements.

1.33. The issue of consent was particularly highlighted, as being insufficiently addressed by referrers and it was clear that families were not always fully aware that they had been referred to the assessment team even where this was for early help. The perceived 'resistance' to gaining appropriate consent was often attributed to professionals 'wanting to preserve their relationship with families' but equally reflected a lack of understanding of the requirements of the service. The assessment team were seeking to positively challenge these issues and support partners to make more appropriately targeted referrals; this was being facilitated by the interventions of co-located multi agency colleagues within the team, who also helped to gather relevant information. The development of the MASH is intended to resolve some of these concerns. However, it was clear that more multi agency work was needed in respect of current IAA service expectations. Staff and Partners also need to be more engaged in the quality assurance process, particularly with regard to access threshold decisions.

'The assessment starts when enquiries on third party contacts start and then they go nowhere because when we speak to the families they didn't know about the referral and they don't want a service'. It all takes time ".
(Social workers)

1.34. The council's operationalization of the new legislation and particularly IAA had clearly resulted in some significant unintended consequences for the service that militated against the effectiveness of the team and had impacted on staff morale. Whilst welcoming a framework some staff told inspectors that they felt disempowered to exercise professional judgement, for example to close cases at the point of contact. The combination of incomplete information provided by professional referrers, the service trigger for instigating a proportionate assessments and the overly prescriptive nature of the accompanying assessment template, was all said to have resulted in 'excessively time consuming activity that was disproportionate to need'.

1.35. It was positive that senior managers had sought to respond to these concerns and had introduced new transfer arrangements to improve the throughput of work for the team. It had also been decided, prior to the implementation of the MASH, to reinstate a joint screening meeting with the police to better manage the high volume of police contacts and improve the identification of risk and timely action.

1.36. Whilst these changes were all helpful, it was nevertheless clear that the template driven nature of the assessment methods that have been introduced, had created a formulaic approach overall. Good safeguarding practice is predicated on the ability of experienced practitioners to exercise appropriate and proportionate judgement on a case-by-case basis. Whilst judgement always needs to be exercised within a clear framework, senior managers should review the extent to which the active social work analysis and decision-making function is being displaced by process and the potential for this to undermine confident professional decision making. Staff, partners and service users need to be actively engaged in the on-going review of the implementation of the SSWBA and in any resulting remodelling of the service.

Conclusion: - Access arrangements

Inspectors found that the authority had worked hard in the context of the Social Services Well-being Act 2014, to reshape its services. The authority's Information Advice and Assistance function was delivered through the Assessment team which provided a single point of contact for both social work and preventative (Early Help) interventions.

Access arrangements to Early Help and statutory services were respectful of peoples' rights and individuality and were available bilingually but there was a lack of accessible quality information for children, young people and their families. The colocation of staff from social services, early help and partner agencies within the assessment team was supporting children and families to be directed more easily to appropriate services, but was yet to mature into integrated services. The Assessment team multi agency arrangements will be extended through the development of a Multi Agency Safeguarding Hub from April 2017. The current access arrangements, including the interface between social services and Early Help, were underpinned by a threshold criteria document, but this was not yet sufficiently understood by partner agencies. Screening decisions were timely and Inspectors saw some positive evidence of management oversight. When contacts were received by children's services and there was an obvious indication of significant harm, prompt and proportionate initial action was taken to protect children. The quality of threshold decision-making however, was inconsistent and not sufficiently evidenced. It was acknowledged by the service that the changes introduced to operationalise IAA had brought additional expectations that put pressure on the capacity of the managers and the workload of the assessment team. The information provided by partner agencies was not always of a sufficient quality to support the assessment team in their screening decision and some professional referrers demonstrated a lack of understanding of the requirements of the service. More work was needed to develop multi agency quality assurance systems to support staff to exercise appropriate and proportionate judgements and to provide assurance that children young people and families were being directed to the most appropriate service. The impending transition to a MASH provided a timely opportunity to refresh service expectations resulting from of the SSWBA, including learning from practice. The authority will also need to extend its performance information to include an analysis of the impact that services are having on reducing need and risk.

Safeguarding & Assessment

What we expect to see

Effective local safeguarding strategies combine both preventative and protective elements. Where people are experiencing or are at risk of abuse neglect or harm, they receive prompt, well-coordinated multi-agency responses. People experience a timely assessment of their needs and risks which promotes their safety, well-being and independence. Assessments have regard to personal outcomes, views, wishes and feelings of the person subject of the assessment and that of relevant others including those with parental responsibility. Assessments provide a clear understanding of what will happen next.

Summary of findings

- Proportionate urgent action was taken to protect children and young people at risk of immediate significant harm. Strategy discussions were timely and supported appropriate information sharing with key agencies.
- The assessment team were working hard to implement the requirements of the Social Services Well-being (Wales) Act 2014.
- The quality of the assessments and recording seen was variable; some were good but others did not sufficiently evidence the principle of co-production or an analysis of need and risk from the outset.
- Good social work practice to elicit the child's wishes and feelings was not consistently well reflected in the content of assessments.
- The timeliness and quality of partners' contributions to assessments was not always evident and remained too dependent on individual professional relationships.
- The quality of plans should be improved to reflect the needs identified in the assessments, plans should be child focused and outcome-driven.
- Management oversight of assessments and plans was seen but did not consistently provide sufficient challenge and quality control.
- Assessments and resulting plans need to be better shared with children and families in a way that promotes their understanding of the issues and engagement in any resulting plan.

Explanation of findings

Safeguarding

2.1. For those children whose needs are greater or risks require action, the assessment team responded in a mainly timely way. Where children and young people were identified as at immediate risk of harm, children services convened a strategy discussion or meeting with the police.

The authority appeared clear in its decision making when moving into child protection investigations and proportionate urgent action was taken to protect children and young people at risk of immediate significant harm.

2.2. The senior practitioners in the assessment team and safeguarding hubs shared responsibility for managing strategy meetings and for section 47 enquiries on new cases. To promote continuity the social workers undertaking a section 47 enquiry within the assessment team reported to one designated senior practitioner who maintained oversight of the investigation. From the cases reviewed inspectors identified that social workers undertaking child protection investigations were suitably qualified but not always experienced. Staff holding child protection and looked after children cases were not always qualified but additional management oversight was provided.

2.3. Inspectors found that strategy discussions and/or meetings were managed in accordance with guidance. The relationships between social services and the police were viewed as positive and the arrangements for organizing strategy discussions/meetings were effective. Strategy discussions/meetings were timely and as required could be undertaken on the same day. A weekly 'set day' arrangement for strategy meetings was also in place and staff and partners described this as providing greater opportunity for relevant agencies to provide information and contribute to the decision making process. It was noted that, where relevant, early help staff also attended these meetings. Outcome strategy discussions /meetings were also convened and used effectively as a means of keeping agencies informed, reviewing progress and determining next steps.

2.4. The small number of strategy discussions, section 47 enquiries and case conference reports seen by inspectors as part of the case file sample were viewed as being appropriate and of a sufficient quality to inform decision making. Children were seen /observed and seen alone as part of the enquiry. Inspectors did not see any examples of children and families being subject to child protection investigations unnecessarily. When the decision was made that a child protection conference was required, the conference was convened within appropriate timescales. Child protection procedures were well understood by staff, and despite some variability in the quality of care and support protection plans seen, families were being supported to keep children safe.

2.5. Arrangements to seek legal advice were well established through legal gateway meetings (LGM). The decision making relationship between the LGM and the resource panels would benefit from clarification. Social workers and managers would also benefit from having clearer parallel processes between child protection

and the Public Law Outline (PLO) underpinned by a shared understanding of risk and the potential for change.

2.6. The authority had used emergency protection powers very infrequently in the last year. In the one case reviewed by inspectors it was questioned if planned action taken earlier might have resulted in a better outcome. The introduction of the MASH should support a system for review and learning from such cases.

2.7. As well as being an active member of the Western Bay Safeguarding Board (WBSCB) Bridgend has established a Safeguarding Operational Board chaired by the Corporate Director Social Services and Well-being and including partners from across the council. This has helped to ensure a local perspective and oversight of safeguarding activity for adults, young people and children within the County Borough. It was noted that the authority had undertaken significant work to raise the profile and response to risks of child sexual exploitation through the development of a Child Sexual Exploitation Task Force within the Bridgend area. All staff interviewed told us about recent training on this topic which included innovative ‘mapping sessions’ involving staff and partners. A similar approach is now needed in relation to risk assessment.

Assessment

2.8. At the time of the inspection Bridgend children’s services had sought to harmonise assessment practices with the new requirements of the SSWB Act. The consequence of this was that all assessments including those designated as providing advice and assistance (proportionate) were completed using one care and support assessment template that included the five domains of the SSWB. Staff in the social work pod of the assessment team were allocated responsibility for assessment, safeguarding and care and support planning on new cases. Case transfer points had been determined to maximise early opportunity to engage with and make a difference to children and families and minimise the early change of social worker, at a time when a family might be in crisis.

2.9. The Disabled Children's Team (DCT) undertook all assessments for disabled children including those where there are concerns of risk or potential harm for a disabled child. Inspectors only reviewed a few assessments undertaken by the DCT but the assessments seen were of a good quality. Inspectors also saw evidence in the files that the DCT routinely offered carers assessments to the parents/carers of disabled children.

2.10. Commitment in the assessment team was good, with varying levels of experience including newly qualified and non-qualified workers all of whom undertook assessments. Staff and managers said that the capacity of the team was being ‘stretched by the ‘competing and relentless’ demands being placed on the service. Caseloads, particularly of the more experienced staff were described as ‘increasingly unmanageable’ and manager’s oversight of cases was correspondingly under pressure.

2.11. At the time of the inspection the authority was in the first year of capturing base line performance data in relation to the introduction of the SSWB Act. Bridgend reported that in the nine months since the introduction of the Act, (April 2016 – December 2016) 1931 children and families had received advice and assistance (which were deemed as proportionate assessments). There had been 784 assessments for care and support undertaken of which 381(49%) had resulted in a care and support plan, with 404 (51%) assessed as not having eligible needs. Information from the shared data set captured for the Early Intervention and Safeguarding board, identified that 65% of all requests for help (early help) received from the assessment team between April 2015 to September 2016, were made following a care and support assessment. The volume of demand on the team had showed no signs of reduction and the authority will need to analyse its performance including its re-referral rate, to better understand if the current activity is proportionate, sustainable and promoting improved independence and outcomes for those using the service.

2.12. Managers were proactive and had systems in place to track assessments but the individual targets for the completion of assessments were not well recorded on the file. Inspectors found that the timeliness of assessments did not therefore consistently match the child's needs and some assessments were not completed within 42 days. Staff told inspectors that the repetitive nature of the assessment template did not support an overview of the case and was overly time consuming.

2.13. The quality of assessments seen was very variable. Inspectors saw some good examples that were proportionate to need and holistic in approach.

The assessment set out key aspects of the incident, discussion and an effective what matters conversation that included a clear focus on the child. The overall engagement was sensitive and carried out in a timely manner. Interviews and the case file record demonstrated that children were seen and the assessment was proportionate. The assessor directed the family to the possible support services available and to safeguarding and well-being information for children where they may witness domestic abuse. The mother was reassured by the intervention and felt able to access services as needed. (CSSIW inspector)

2.14. The best examples evidenced that the assessments built on from the initial information, the child was seen and the record captured both the child's and the parents' views (both resident and non-resident parent). This included what mattered to them in the context of their family history and their cultural needs. The analysis focused on potential strengths and risks and supported the identification of both eligible need and appropriate early help.

In other examples however, Inspectors found that the use of the "what matters conversations" as evidenced in the assessment reflected what was desired rather than what might be needed as a result of an over reliance on self-reporting. In a number of examples there was a lack of historical context and little exploration of the impact of previous support services provided.

2.15. Social work staff told inspectors that the timeliness and quality of partners' contributions to assessments was very variable and often remained dependent on individual professional relationships. In some cases seen by inspectors, it was apparent that despite persistent efforts by social services staff, relevant partners had not contributed effectively to complex assessments compromising social services decision-making.

Children's services compilation of a risk assessment of a father who had been convicted of a serious offence was initially compromised by the lack of information and risk analysis provided by those agencies working with the father's offending. (CSSIW Inspector)

2.16. The assessments of the need for care and support often did not provide a consistently sufficient analysis of risk or clear recommendations for action. It was a concern that staff and partners interviewed were not aware of the authority's risk assessment process and this raised questions regarding how the assessment informed and translated into a shared multi-agency risk management plan.

'Sometimes assessments prior to cases coming to conference are inconsistent, some are good and some not so good, some do not understand the domains they should be covering when constructing a child's plan however some are also very new to the role.'
(Staff survey)

2.17. Whilst it was positive that the assessment template required the identification of 'risks and strengths', this often produced a list rather than the analysis that is necessary for effective decision-making. In some case assessments and the resulting plan did not reflect a sufficient focus on the child's experience and lacked analysis of the impact of the adult behaviours on the child. Opportunities to use the assessment to support a learning context for the family, enabling them to reflect on how they might do things differently or better, were therefore missed.

2.18. Issues of disguised compliance were not always recognised and this meant that in some cases too much reliance was placed on the family's ability to improve outcomes for children without evidence of sustainable change. Social workers needed to be more confident in working with families in setting out their professional analysis of risk and needs. The lack of an appropriately holistic and coherent analysis of need and risk was at times detrimental to achieving a shared understanding with families regarding the level of concern, what change was required of them and/or the potential consequences of failing to make the changes needed. Staff and partners stated that they would welcome a defined whole service approach to the assessment and management of risk. It was understood that these materials were in the process of being redeveloped and would be re-launched and include a comprehensive training programme.

2.19. There were some good practice examples where children and young people were proactively engaged in producing their assessments but it was not always apparent. Managers and staff were very committed to undertaking direct work with families but staff across the service highlighted the impact workload pressures had on this ambition. It was disappointing that the extent of the good work undertaken by practitioners with children and families as part of the assessment was not always well evidenced in the records but rather was elicited through inspectors' interviews with staff.

We just want the best for our children, it's hard but the social workers and all the services working together have helped us sort it out and we are doing well now as a family. The social workers were honest about what we had to do, we just wanted to keep our children and they have helped us to do that.
(Service user – parent)

2.20. Advocacy was a mandatory domain in the assessment format and social workers told us that issues of support to engage in the process were routinely made to children young people and their families. Inspectors however saw few examples of formal advocacy being offered during the assessment phase.

2.21. Inspectors were not confident that assessments and the resulting plans were routinely shared with service users in a way that promoted their understanding of the issues. Information from the files reviewed and inspectors' direct contact with families led to the conclusion that while most were mainly positive about their experience, others were not clear about the purpose of children's services involvement in their lives. In a minority of cases this had directly impacted on the experience of the family and their ability/willingness to engage in a process that they described as oppressive and that they did not understand.

Quote

'It was my problem and I'm getting help, they never said it affected the children so they should leave us alone, it's against my human rights '(service user-parent)

'Initially I didn't find the social workers attitude helpful, I felt very pressured, but now I feel they are working with us and I can understand where they were coming from, its ok now, it feels like we all want the same thing '
(Service user – parent)

2.22. Inspectors again saw a positive emphasis on people being signposted to early help where the care and support assessment concluded that there was no eligible need. Despite being told that the requirements between statutory services and early help did not result in unnecessary duplication of assessments, inspectors were not confident that this was how families experienced the interface between the two services.

2.23. Inspectors found that where the assessment identified eligible need, a timely care and support plan was developed and this triggered the transfer of the case to the relevant social work safeguarding hub. Inspectors were concerned that the quality of the care and support plans seen were inconsistent and did not adequately reflect the assessment outcomes. The plans seen often did not routinely feature timescales, responsibilities for actions and what services were to be provided and why. Significantly, some plans did not include the level of risk or the contingencies needed if change was not achieved. It was not always clear how families were engaged in the co-production of their plans or whether they had received copies of the plans. In some instances Inspectors were concerned that the generalised nature of some plans demonstrated a lack of ownership and possibly reflected the necessity to expedite the transfer of work.

2.24. Staff and managers across the service described variability in the assessments but particularly in the quality of care and support plans. The plans were not seen as routinely providing newly allocated workers with a clear understanding of the needs and risks associated with the case. This was compounded by a lack of useful chronologies and limited commitment to joint introductory meetings at the point of transfer. Whilst staff were positive that some of the shortfalls in the written plans were mitigated through informal conversations between workers they also described having to 'unpick the plan' and 'start again' with families, in order to develop a shared understanding of what was needed including in relation to safeguarding issues. In some instances this clearly resulted in a loss of impetus while families re-engaged with the new social worker.

2.25. Transfer points for cases between the teams were established and the majority of staff were satisfied with the arrangements. Some concerns were expressed that there was a gatekeeping culture which did not support continuity for families and timely support. Case transfers were mainly managed through weekly transfer meetings and advanced information was provided so that receiving teams could plan and organize their work. Inspectors found that managers were not always using this opportunity to confirm that assessments and care and support plans were of sufficient quality to provide a cogent basis for on-going work. The importance of managers having a clear understanding of the issues and threshold for involvement with families is also essential to ensure the appropriate allocation of cases; particularly as the authority's workforce skill mix included unqualified staff. In some instances inspectors were concerned that safeguarding issues had not been sufficiently recognised.

2.26. Whilst all of the assessments and care and support plans reviewed had been appropriately signed-off, the current quality assurance systems in place were not sufficiently robust to oversee the consistent quality of work or to promote the improvement needed. The authority had recognised this and was actively developing a new quality assurance framework. Managers from across the service need to be supported to be more confident to evidence the extent to which they provide effective challenge and direction.

Conclusion: - Safeguarding and Assessment

The assessment team were working hard to implement the requirements of the Social Services Well-being (Wales) Act 2014. Strategy discussions were timely and supported appropriate information sharing from key agencies.

The quality of the assessments and recording seen was variable; some were good but others did not sufficiently evidence the principle of co-production or an analysis of need and risk from the outset. The timeliness and quality of partner's contributions to assessments was not always evident and remained too dependent on individual professional relationships.

Good social work practice to elicit the child's wishes and feelings was not consistently well reflected in the content of assessments. Although most assessments were shared with children and families, lack of effective engagement resulted in them not always being sufficiently clear about the purpose of the help, care and support and/or protection they received. The resulting plans did not always reflect the findings of the assessments and were not sufficiently child focused or outcome driven. In some instances the quality of the plan hampered those taking over a case from swiftly understanding the needs and risks associated with children and families. Assessments and resulting plans need to be better shared with children and families in a way that promotes their understanding of the issues and engagement.

Management oversight of assessments and plans was seen but did not consistently provide the level of challenge and quality control needed.

Leadership, Management & Governance

What we expect to see

Leadership, management and governance arrangements together establish an effective strategy for the delivery of good quality services and outcomes for people. The authority works with partners to commission and deliver help, care and support for people. Leaders, managers and elected members have a comprehensive knowledge and understanding of practice and performance to enable them to discharge their responsibilities effectively. Services are delivered by a suitably qualified, experienced and competent workforce that is able to recognise and respond to need in a timely and effective way.

Summary of Findings

- Leadership, management and governance arrangements complied with statutory guidance.
- The authority was working hard to transform services at a time when they had to deliver medium term financial savings. The ambition of the authority's plans signalled their commitment to improving both early help and statutory services for children young people and their families.
- The SSWBA was at an early stage of being embedded. More opportunities were now needed to draw lessons from practice and engage staff partners and service users in reviewing progress and any service remodelling.
- The ambition to mitigate the need for statutory social services is significantly dependent upon the ability of the directorates to work together in order to contribute, co-ordinate and deliver an effective range of services.
- The council should ensure there is an ongoing analysis of the underlying complexities and risks associated with children's services.
- Work had been recently instigated to develop a more comprehensive evidenced based commissioning plan in relation to both statutory and early intervention services.
- The council should ensure that the strategic direction is translated into an operational strategy for delivery of children's services that is effectively communicated and understood by staff, partners and service users.
- The principal of colocation of services was generally valued by staff but more work was needed to evaluate the service user's experience.
- The voice of the child was not evident in shaping service planning.
- Elected members' understanding of service improvement would be strengthened by reports that focus on outcomes and the impact for service users.
- Performance and quality assurance information needs to be more effectively captured and analysed to understand how the ambition for the service is being delivered. The new quality assurance framework will be essential to this understanding.
- The council needs to ensure that structured induction and core training programmes are available for all staff, including managers and agency staff.

- Staff valued supervision but the regularity and quality was inconsistent and subject to work pressures.
- Newly qualified workers reported that they were well supported and positively regarded the in house mentoring provided.
- Staff valued the approachability of their line managers, and peer support from team members. Staff morale was variable across the service issues raised included capacity to manage the level of demand, resource constraints, complexity of managing competing workload pressures and the potential impact resulting from planned remodelling of services.

Explanation of Findings

Leadership and Governance

3.1. At the most strategic level the authority had determined the vision to “always act as one council working together to improve lives” and the important principle of ‘helping people be more self reliant” is set out within the council’s corporate priorities and reflected in the corporate plan that came into effect in April 2016. The council had translated this priority as meaning developing approaches and practice to ‘reduce and prevent people from becoming vulnerable or dependent on our services or us.’ This priority had recently been developed into a children’s social care vision statement and an action plan aimed at “Together enabling better outcomes for children, young people and their families via responsive and timely services which support them to live together, work on difficulties and be safe.” The visions had been shared and were understood at the most strategic level within the council and by senior managers.

A ‘Vision into Action ‘ document was launched at an event in December 2016 .The Cabinet Member addressed the session and the event was attended by 111 staff representing every team from across the service (Head of Children’s Service)

3.2. As part of the remodelling of children’s services program, the authority was working to develop a more comprehensive understanding of need and provision. The extensive work undertaken as part of the population needs assessment will support this understanding and this information will be essential to the development of a comprehensive commissioning plan in relation to both statutory and early intervention services.

3.3. The managers and staff interviewed all expressed a commitment to improving well-being and safety outcomes for children and families. While less aware of the strategic vision, staff and partners were able to articulate the action taken to implement the requirements of the Social Services and Well-being (Wales) Act 2014, particularly in relation to Information Advice and Assistance. However critical elements of the early help approach, including the necessity for consent from families, were not sufficiently understood or embedded. Staff welcomed the priority being given to delivering a holistic service for people but, despite some recent consultation events, felt that there needed to be more opportunity to shape and

review access and IAA arrangements. Some staff described an unrealistic 'over optimism' by managers that the co-location of services in itself promoted effective joined up working.

3.4. Leadership, management and governance arrangements complied with statutory guidance. The authority was aware of its strengths and areas for development and the pressures resulting from its ambitious change agenda. The creation of a Corporate Director Social Services and Well-being was reported to have improved accountabilities and also efficiencies between adult and children's services. The council was confident that its 'one council vision' promoted the ability of the statutory director to help shape the corporate agenda. The strong reporting links between the Chief Executive Officer (CEO); Director of Social Services (DSS); corporate management board and Members was seen as providing good opportunities to share and oversee council priorities. Inspectors were reassured, for example, by the recent intervention and direction provided by the Chief Executive to address what were described as fragmented commissioning arrangements which staff and partners viewed as weakening the early help delivery model.

3.5. At the time of the inspection the authority's transformation agenda for children's services was being progressed alongside the requirement to contribute to medium term financial savings. There were considerable expectations being placed on the service particularly regarding the speed with which remodelling would deliver financial sustainability. Despite a greater shared awareness of the challenges facing children's services, there needs to be on-going recognition of the underlying complexities and risks associated with the service.

3.6. The successful delivery of remodelling in children's services is reliant on effective and constructive inter-directorate and interagency collaborations. While this was developing in relation to the work with the Education and Family Support Directorate, the contribution of other council services was not as apparent. There was evidence of some good communication and joint working with partner agencies at a strategic level, as highlighted by their engagement on the children services remodelling board and joint work to deliver new SSWB Act requirements in relation to the local prison. While such engagement provides a useful means of developing a shared strategic agenda it was yet to have had the necessary impact on promoting secure multi agency partnership working and "joined up practice". Poor communication was often highlighted by staff as a concern; however the Director and Head of Children's Service were actively committed to extending staff engagement.

3.7. Inspectors found a good level of political support for authority's strategic direction and children's services. Strong performance management and reporting mechanisms, which included opportunities to challenge, kept elected Members, well informed and also maintained safeguarding as a priority.

3.8. The reports provided to Members and scrutiny would benefit from a greater focus on outcomes, as this would support a more complete understanding of the level of improvement achieved. Mechanisms for elected Members and corporate officers to routinely hear the views of children, young people and their families using the assessment and early help services were underdeveloped. Elected Members and senior officer's visits to front line staff to directly hear their views also need to be

better planned and more purposeful. Staff told inspectors that they had limited awareness of these visits, as they did not know who people were, including the Chief Executive and members of the senior management team.

3.9. The Corporate Director Social Services and Well-being was working hard to promote a significant agenda of organisational and cultural change. This had been supported by the appointment of a permanent Head of Children's Services in 2015. It was noted that these managers had introduced regular management team meetings, which were routinely extended to include business support, legal services, early help managers, the complaints manager and human resource managers. This was aimed at improving shared ownership of governance arrangements.

3.10. Inspectors recognised that the scope of the authority's plans signalled their commitment to improving both early help and statutory services for children, young people and their families. The authority fully acknowledged that it had 'more to do to translate these aspirations into a secure framework for delivery of children's services.

3.11. It was recognised that the reorganisation of services and delivery of medium term financial savings necessitated more effective management oversight and 'grip'. An important emphasis was being given by the Director of Social Services and Head of Children's Services to improving the resilience of the children's services management culture, aimed at supporting group managers and team managers to take informed decisions in line with their accountabilities. While the intentions were broadly welcomed, staff reported that changes in management responsibilities and expectations of senior managers had created uncertainties and, what was perceived by staff as, additional bureaucracy that delayed key decision-making. Managers and staff need to be clear regarding service expectations, the location of decision-making accountabilities and have confidence in the timeliness of the response. Staff and managers also need to be supported to develop the skills needed to deliver the requirements of senior managers. The service changes to previously established ways of working will take time to embed. It is important that they are undertaken in a way that supports the meaningful engagement of staff and partners.

Performance Information and Quality Assurance

3.12. Performance management was well embedded across the service with effective mechanisms in place to collect and disseminate information. Data was systematically discussed at management meetings and compensatory actions agreed to address performance issues. Inspectors recognised the close and regular attention paid by senior officers and Members to children's services performance information and despite the change in performance targets resulting from the implementation of the SSWB Act, workers interviewed were all aware of the standards expected by the service. It was disappointing that some staff understood performance information as a management tool rather than as a means of improving the quality of services.

3.13. Officers and managers recognised that the quality assurance mechanisms required improvement and were in the process of developing a new framework that would better inform analysis of service effectiveness. This will need to be embedded as core business at all levels across the service. To provide a real understanding of the quality of services any framework would need to include a multi-agency

approach to monitoring thresholds and feedback from those providing, commissioning and using the service.

3.14. A safeguarding and quality assurance unit had been established across both children and adult services and this, plus the recent reinvigoration of the independent reviewing service, provided a helpful platform to monitor and drive service improvement. Overall the authority had more to do to ensure a sustained culture of learning. Most staff we interviewed expressed positive views about formal and required training but workload demands were said to impact on the ability of staff to access training. Systematic arrangements were not yet sufficiently well established across the service to capture and disseminate wider learning from social work practice and service user feedback mechanisms. Inspectors noted that complaint resolutions were coordinated and managed. While the outcome of complaints and compliments were shared with managers, including in an annual report, a more consistent mechanism for the prompt dissemination of learning points from complaints is needed to inform service improvement.

Workforce

3.15. As well as the central assessment team and the Children with Disability Team, children's social care comprises 4 other assessment and care management teams. These include a Just Ask Team (care leavers) and since July 2015 three safeguarding hubs. Staff in the safeguarding hub teams carry out the same functions as the assessment team in relation to children and young people who have eligible need and are subject to a care and support plan. Co-location with the early help teams meant that two safeguarding teams were based in the locality to promote improved public access and direct links with the local communities.

3.16. The authority has given significant attention to recruitment and retention of social workers and viewed this as a business critical area. Significant progress had been achieved in recruiting to social work posts however many of these were newly qualified workers and the recruitment of experienced workers had remained a challenge. The planned remodelling of the service will require a suitably experienced workforce if it is to be successful in reducing the demand for statutory services, and support better outcomes for children and young people living in the community.

3.17. The newly qualified workers interviewed reported that they were well supported through such arrangements as the First Year in practice programme, Continuing Professional Education and Learning (CPEL) Consolidation Programme and particularly through the in house mentoring provided. Most staff across the service were generally positive about the availability of training and managers were said to be attentive to staff development. Demand on workers' capacity however was reported to have impacted on their ability to attend planned training. All staff and managers interviewed demonstrated a good awareness of the changes to practice required by the SSWBA and had attended and valued initial training on the new Act. Further training including lessons from practice would now be timely and appropriate.

Social services are working well towards implementing the new Act. Children's Social services in Bridgend have a good mentoring scheme for newly qualified workers; I have received regular supervision and mentoring since being employed in Bridgend. Children's Social Services work well with preventative agencies (staff survey)

It is a stressful job to do and it is difficult when there are staffing issues, sickness and or annual leave and although this is recognised as a problem the expectation continues to be complete all work in a timely fashion and this is difficult to achieve without going over and above working in your own time.

(Staff survey)

3.18. The authority had experienced particular difficulties in the recruitment to senior practitioner's posts and had responded by implementing a successful 'grow your own approach'. This approach needs to be accompanied by a suitable induction and training programme to support staff moving into the management role.

3.19. The recent promotion of experienced social workers to a new senior practitioner role, their replacement with often less experienced staff, (many starting at the same time) and the presence of experienced but unqualified workers in the service structure meant that the authority was managing significant workforce vulnerabilities. These issues, as well as some sickness absence, were described by staff and seen by inspectors as impacting on the ability of teams to routinely allocate complex cases to suitably experienced and qualified practitioners.

3.20. It was positive that the need to strengthen some teams had been recognised and that the authority was using a small number of experienced agency staff to manage vacancies and absences. It was disappointing that there was no consistent approach to their induction to ensure that they understood Bridgend policy and procedures.

3.21. Despite the creation of deputy team managers in the safeguarding hubs (not the assessment team) the capacity of team managers to provide the level of support and oversight needed was identified as being under pressure across the service. Senior managers were actively seeking to develop and build the resilience of their workforce including their management staff group but recognised the difficulty they had in balancing this ambition whilst also managing capacity pressures. Management capacity has also been increased with the appointment of a new principal officer who will have line management responsibilities for the MASH but also for permanence.

3.22. Staff told inspectors that whilst they believed there were potential benefits of the new configuration of services, these were yet to be fully realised. The geographical location of some teams was seen as positive for building community links but not for service cohesion. Inspectors heard that social work staff 'did not know each other' and were concerned that social work teams were developing an unhelpful negative perception of each other that needs to be addressed. More work

is needed to support strategic and operational alignment and to ensure that teams have a clear sense of shared identity and value within the service.

3.23. Morale amongst workers was variable. The majority of concerns expressed particularly in the staff survey were about volume of work, retention of staff and changes in the service.

Bridgend has the most amazing loyal and hard working staff who try hard in the most difficult of circumstances to provide a good service to the children and families they work with. Within my own team everyone supports each other and really cares about each other.

Highly experienced staff are being replaced by newly qualified staff, which has an effect on service.

Resources for children and carers are diminishing by the day, and no new options are available to replace them.

(Social workers and staff survey)

3.24. The majority of the staff interviewed told us that workloads were becoming increasingly pressured both in terms of volume and complexity. Whilst most staff felt supported by their team manager they expressed concern that the demands of their caseloads were not always apparent or sufficiently recognised by senior managers. The demands created by different team boundaries were also said to impact inequitably on staff workloads.

3.25. Staff expressed significant frustration that communication was poor across the service and that they did not know how actively senior managers were addressing recognised challenges that impacted on the team's capacity. For example, the growth in demand for supervised contact meant that, despite contact workers in the team, social workers and manager's time was increasingly taken up with finding venues and arranging supervisors for contact. At the time of the inspection social workers also had to undertake transport responsibilities for children within the service due to a contract issue with the voluntary driver scheme.

3.26. Managers and staff expressed anxiety that the demands on both management time and on experienced workers were increasingly impacting on the resilience of the service. Staff were particularly concerned that looked after children on their caseload did not receive sufficient time despite permanence being a council priority. Staff indicated that time constraints reduced their ability to undertake meaningful direct work with children and that whilst they valued the support services available they increasingly felt like case co-ordinators rather than agents of change. Equally social workers need to be supported to recognise the significance of their own work as a preventive service in itself.

3.27. Staff experience of supervision varied across the service. Team managers routinely undertook supervision of social workers; deputy team managers supervised some social work assistants and contact workers. Those interviewed told us that while most had regular supervision, few thought it was reflective. The supervision received by team managers, deputy team managers and senior practitioners was also described as inconsistent across the service and often said to be vulnerable due to competing demands. Inspectors found that supervision records were of poor quality and focused on task centred case discussion. The supervision policy had been refreshed and launched through briefings and skills workshops in April 2016 aimed at supporting a better outcome focus but this had not yet made any significant impact. The authority was working with managers to develop their skills and recognised that targeted training was needed on the new supervision framework. More work is needed to ensure workers receive good quality reflective learning opportunities through supervision as this supports practice but is also crucial to the retention of competent, confident staff.

Conclusion: - Leadership, Management and Governance

The authority was working hard to transform children's social services at a time when they had to deliver medium term financial savings. The ambition of the authority's plans signalled their commitment to improving both early intervention and statutory services for children young people and their families. The objective to mitigate the need for statutory social services however was significantly dependent upon the ability of all council directorates to work together in order to deliver against the council's vision and contribute and co-ordinate an effective range of services. The council will need to ensure there is an ongoing analysis of the underlying complexities and risks associated with statutory children's services. It was positive that the council had recently begun work to develop a more comprehensive evidenced based commissioning plan that will be key to the delivery of its early help and permanence strategy.

The council needs to ensure that the strategic direction is translated into an operational strategy for delivery of children's services that is effectively communicated and understood by staff, partners and service users. At the time of the inspection the SSWBA was still at an early stage of being embedded and more opportunities were needed to draw lessons from practice and engaged key stakeholders in reviewing progress and in any resulting service remodelling. The voices of children and families also need to be embedded in shaping service planning to provide a better understanding of the difference that help, care and support and/or protection is making for children and families. The introduction of a new quality assurance framework will help the councils to understand the pace of its service improvement.

Staff were committed to achieving good outcomes for children and families but staff morale was variable across the service and needed to be nurtured at a time of significant change. The recruitment and the retention of social workers had been given significant priority despite some good progress the authority had encountered difficulty in recruiting experienced staff. Services therefore were not always delivered by a suitably qualified and experienced workforce that had the capacity to

consistently meet workload demands. Staff valued the approachability of their line managers, and peer support from team members particularly in relation to managing the increase in volume and complexity of their work. Staff would welcome greater visibility of senior managers particularly given the remodelling of services.

The importance of staff development and good supervision practice to retention was recognised and newly qualified workers were found to be well supported in their first year of practice and highly valued the mentoring provided to them. Despite the availability of some good training programmes staff including managers needed help to prioritise training against the competing demands of their work. The quality of supervision was found to be very variable and did not routinely evidence sufficient challenge or reflection, a new supervision policy had not yet impacted on these quality issues. Senior managers were working to develop a stronger oversight of practice and management culture the leadership development of group managers and front line managers was therefore being progressed as a priority.

Methodology

Pre-fieldwork

The authority completed a self assessment and provided CSSIW with documentation and performance information relating to the focus of the inspection. The information provided was reviewed and used to shape the detailed lines of enquiry for the inspection.

Fieldwork

The inspection team were on site in Bridgend for 8 days during January and February 2017.

Case Review: inspectors considered 60 randomly selected cases and explored 21 of these in further detail with social workers and their managers, other professionals involved and children and families. We undertook 21 interviews with allocated case workers and team managers as well as 10 interviews with children, families and/or carers.

Interviews & Focus Groups: inspectors conducted over 24 group or individual interviews with senior managers, staff, elected members and partners.

Staff survey: an on-line SNAP survey was administered to staff in children's services; 115 returns were received.

Observation of practice: inspectors observed 2

Review of complaints & compliments: inspectors reviewed 10

Review of supervision & appraisal documents: inspectors reviewed 20

Further detail regarding the framework for local authority inspection, engagement and performance review can be viewed here:

<http://cssiw.org.uk/providingacareservice/our-inspections/how-we-inspect-local-authorities/?lang=en>

Inspection Team

The inspection team consisted

Katy Young

Pam Clutton

Ann Rowling

Norman Host

Rhonwyn Dobbing

Acknowledgements

CSSIW would like to thank the people who contributed to the inspection: children, families and carers, staff and managers of Bridgend; the service providers and partner organisations, including the third sector for their time, cooperation and contributions to this inspection.

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CSSIW inspection of Children's Services, Bridgend County Borough Council

Recommendations – Action Plan Updated January 2018

	= Action Completed
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	RECOMMENDATION	ACTIONS REQUIRED	LEAD RESPONSIBLE OFFICER	TIMESCALE	UPDATE
Access					
1.	A range of user-friendly information should be developed and made easily accessible for families, children and young people not only with respect to signposting to preventative services but also how children's services and early help carries out its work.	MASH Communication Plan to be finalised and implemented	GM Assessment-Case Management /PO/GM Integrated Working & Family Support	Jul- Sep 17	The communication plan has been finalised, and will be fully implemented once the future MASH accommodation has been finalised. Managers and teams affected are being provided with regular updates
		Public Information Plan to be finalised and launched	GM Assessment-Case Management /PO/GM Integrated Working & Family Support	Oct 17	See Above
		Dewis to be launched in line with the Corporate Digital transformation programme	Policy & Information Manager/Head of Children's Social Care	Dec 17	The Bridgend implementation of Dewis continues and will be co-ordinated within the Corporate Digital transformation programme. The plan is to launch Dewis in line with the Corporate launch of the BCBC website in the spring of 2018
2.	Effective, multi-agency training and quality assurance arrangements should be established to ensure that the thresholds and referral expectations of both early help and statutory children's services are understood by staff and partners and are consistently applied	Children's Social Care Workforce Development/ Training Plan to be finalised and delivered.	Training Manager	Aug 17	Complete - The Social Care Workforce Development Programme provides single and multi-agency training
		SS&WB Directorate Quality Assurance Framework to be finalised and launched	GM Safeguarding/ PO Service Development	Sep 17	Complete - Corporate QA Framework has been completed and disseminated in July 2017.
		Joint audit tools to be finalised and implemented	Principal Officer/GM Safeguarding	Oct 17	Audit tools have been developed for Adults Services and Children's Services both of which include questions around the principles of the Act and are common in terms of gathering themes &

					findings to inform better practice and training.
Page 76	The Council should continue to develop information systems that include scrutiny of service demand but also support an analysis of the difference that early help, care and support and/or protection is making for children and families.	Data reports to be routinely scrutinised by the Early Help and Safeguarding Board	Corporate Director Social Services & Wellbeing/ Corporate Director Education & Family Support	Jul 17 onwards	Complete – reports are a standing agenda item
		Joint data set to be further developed to incorporate qualitative information in addition to quantitative data	Principal Officer / GM Integrated Working & Family Support	Nov 17	Complete - Early Help and Safeguarding development day was held on 05.12.17, where qualitative data was analysed. The outcomes will be reported to the next Early Help and Safeguarding Board
4.	Caseload and quality assurance reports should be continuously monitored to ensure there is sufficient capacity for workers to engage effectively with children and their families.	Early Help and Permanence Strategy to be revised in response to independent review by IPC.	GM Safeguarding/GM Integrated Working & Family Support/ Principal Officer	Dec 17	The strategy will be revised following the conclusion of the IPC review (2018).
		IPC to complete review of Children's Social Care Remodelling Programme and associated projects	Head of Children's Social Care	Dec 17	Complete - Following the inspection and its preliminary results, IPC was asked to undertake a short exercise to help with revising the remodelling programme in May 2017. This involved a series of interviews with managers and review of materials. The findings were as follow: <ul style="list-style-type: none"> • The current vision and direction of travel in the remodelling programme is appropriate and relevant • The pace of change in the projects has been slower than needed due to lack of capacity within the service. The service has subsequently re-focussed resources and is now back on track and project plans with targets and timescales have now all been approved • In order to support the remodelling work a leadership and development programme has

Page 77					<p>been established.</p> <ul style="list-style-type: none"> A piece of work has also been commissioned to review the pathways between early help and safeguarding which has also concentrated on the decision making process. This work is due to report to CMB at the end of January 2018.
		Caseload data to be a routine item at weekly Team Managers meetings	GM Assessment – Case Management/ GM Disability Transition & Case Management	Jul 17	Complete - This is taking place.
		Supervision Policy to be revised to ensure caseload data is a routine agenda item in supervision	Training Manager	Jul 17	Complete
		Reports on QA activity to be routinely monitored and collated into an annual report	GM Safeguarding	Oct 17 onwards	QA activity is underway and is due to report in in July 2018 (2017/18 activity).
5.	The quality and consistency of record keeping and the use of chronologies and genograms should be improved.	WCCIS chronology and genogram functions to be further developed	Policy & Information Manager/Senior Administration Officer	Dec 17	Complete - Careworks are working with another provider to develop the genogram function in WCCIS nationally, this will be developed with the national Chronology information in the system so that needs are met. Whilst undertaking supervision and case file audits, managers monitor whether chronologies are present for individual cases
		Recording-skills training to be included in workforce development/training plan	Training Manager	Aug 17	Complete - Recording practice is included in relevant training, for example risk assessment, analysis and decision making.
		Audit tools to include reference to quality of recording.	PO Service Development/ GM Safeguarding	Sep 17	Complete.

6.	Effective arrangements should be put in place to ensure that the needs of children and young people are assessed if contacts and referrals about their well-being are repeated.	Include this in the Terms of Reference for audit activity in the MASH.	PO/GM Integrated Working & Family Support/GM Safeguarding/PO Service Development	Oct 17	Complete - The re referral rate has been agreed as part of the Performance Management Framework for MASH.
7.	The council should review its Emergency duty team (EDT) arrangements to ensure that EDT referrals are effectively captured on the electronic system and that communication with the daytime service supports timely hand over and action.	A review of business processes between EDT, IAA team and Safeguarding hubs to be undertaken	GM Business Support/ GM Assessment & Case Management/ PO	Dec 17	A review of processes has been completed and improvements in communication are evident. Any operational issues that emerge on a day to day basis are now responded to straight away between the relevant managers
		EDT Manager to be located in Bridgend MASH one day per week to improve communication/resolution of issues	PO	Nov 17	This has been delayed due to uncertainty of MASH premises however everything is in place for implementation once premises are confirmed and up and running. Expected April 2018
Safeguarding and Assessment					
8.	The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.	Delivering Outcomes Focused Practice Programme to be delivered for social workers and social care workers. Core components of the programme are: <ul style="list-style-type: none"> Engaging well – in order to measure outcomes in a person centred model of practice. Collaborative communications Inspirational conversations for social workers. 	Corporate Director Social Services & Wellbeing /Head of Children’s Social Care LK requested Principal Training Officer provide update	Mar 18	Complete - Outcome focussed 3 phase training programme commenced in October 2017 with dates running to May 2018.
		The QA framework to include a programme to ensure that all	GM Safeguarding/ PO Service Development/	Nov 17	Complete – Audit programme underway

Page 79		managers take responsibility for the audit of cases in their areas	all GMs		
	A service model of risk assessment and risk management should be developed and shared with staff and also partner agencies. This should be accompanied by a programme of training and assurance mechanisms to ensure compliance, quality and impact.	Review and relaunch the risk assessment framework and tools	GM Safeguarding /Training Manager	Jul 17	Complete – existing framework and tools have been relaunched.
		Begin implementation of the Training programme	Training Manager	Jul 17	Complete. A programme of risk assessment training is in the process of being delivered.
10.	Expectations in relation to the timeliness and quality of partner’s contributions to assessments and care plans should be established. An assurance mechanism should be implemented to ensure compliance and quality.	Early Help and Permanence strategy and associated plans/documents to be revisited with partner agencies.	IPC to provide independent review but to work with operational managers /Group Managers	Sep 17	Complete
		Approaches to joint assessments to be covered in the training described in 8 & 9	Training Manager	Oct 17	See above
		QA Audit tools will facilitate monitoring of multi-agency working	Principal Officer Service Development/ GM Safeguarding	Nov 17	Complete - The monitoring of multi-agency working is included.
11.	Effective, management oversight and challenge systems should be established at the point of transfer between teams to ensure a clear understanding of the needs and risks associated with the case.	Review the Transfer policy to ensure that the structure and content of transfer meetings capture the recommendation and are chaired by a GM	GM Assessment – Case Management/ GM Disability Transition Case Management	Jun-Aug 17	Case transfer policy under constant review. Case transfer meetings, held weekly as part of the Team Managers’ meetings, is chaired by a Group Manager
Leadership Management and Governance					
12.	The council should actively evaluate the effectiveness of its inter directorate working in supporting the Statutory Director Social Services in delivering against the statutory requirements of the	Internal Audit to undertake a programme of reviews, provide advice and support in this area	CMB	Qtrs 1 2 17/18	These are scheduled to take place in quarter 4 2018/19
		Areas for improvement identified by the audit activity	CMB	17/18	See above Safeguarding is a standing agenda item on

Page 80	Social Services & Well-being Act and in particular Information Advice and Assistance.	described above to be addressed			Cabinet/CMB meetings and CMB meetings.
	The council should progress its commitment to developing an evidence based commissioning plan in relation to both statutory and early intervention services for children and families.	Analysis of final BCBC Population Assessments	GM Commissioning	Jul 17	Complete - This has been completed and a summary document has been produced, which is to form the basis of the commissioning plan.
		Engagement & consultation with stakeholders	GM Commissioning	Dec 17	Complete - Work is underway on the development of Local Area Plans (to be done on a regional basis, currently progressing with Western Bay), which will inform BCBCs commissioning plan, but the final product is dependent on the health boundary consultation, and discussions continue to take place with regions and WAG in respect of timescales.
		Finalise & publish Commissioning Plan	GM Commissioning	Apr 18	In progress.
14.	The council should consider how it can increase the voices of children and families in shaping service planning to provide a better understanding of the difference that help, care and support and/or protection is making for children and families.	In line with the QA framework, co-ordinate the approach to gaining, recording and using feedback	GM Safeguarding/ PO Service Development	Sep 17	QA meetings are set up on a monthly basis to consider the findings/themes from audits carried out across the authority and the group will be developing further consultation mechanisms.
		Establish engagement and consultation plans for all remodelling projects in Children's Social Care	Head of Children's Social Care	Dec 17	The MASH communication plan has been finalised, there is a delay in its implementation due to the issues around the MASH premises not being finalised. For Residential remodelling, initial stakeholder engagement has taken place with young people previously and currently looked after, partner agencies, staff and foster carers. Final stakeholder engagement was distributed on the 1 st December to close on the 29 th December to feed into a final proposal. Once a proposal is agreed a communication plan will be established. Opportunities to engage with young people and

<p>Page 81</p>					<p>seek feedback are taken at every stage. It is an expectation that children and young people are seen (alone where appropriate), observed and communicated with throughout the assessment, planning and review processes and this is routinely monitored through supervision and QA activity</p>
<p>15.</p>	<p>The council should consider how it can provide opportunities for staff and partners to be further engaged in the development and transformation of services; the identification of lessons learnt from its implementation of IAA should be used to inform the planned transition to a multi-agency safeguarding hub.</p>	<p>A review will be carried out to extend staff and partner participation in the Children’s Social Care Remodelling Programme and projects that underpin this</p>	<p>Corporate Director Social Services & Wellbeing / Head of Children’s Social Care/ IPC</p>	<p>Commenced in Jun 17 but ongoing throughout the year</p>	<p>Complete - All project boards have both internal and external partner representation.</p> <p>Children With Disabilities: 52 Week: Built Environment including Health and Safety, Commissioning, Communication team Education, Finance, HR, ICT, Project Management, Property Adult Day Centre, BT, Catholic church, CSSIW, Heronsbridge School and governors, Provision staff, site users, Stafford Construction, Welsh Water Transition: Commissioning, Finance, HR, ICT, Knowledge management, Project Management Careers Development Officer, ABMU</p> <p>Early Help and Permanence: Early Help, Education (including schools), Finance, Knowledge Management, Project Management, Training, ABMU, SWP</p> <p>Remodelling LACs Residential Placement /Remodelling Fostering: Commissioning, Education, Finance, Housing (including Supported People), HR, Marketing, Project Management, Residential Staff , Trade Unions, Training, AMBU, SWP.</p>

Page 82					MASH: Early Help, Education, Finance, Housing, HR, ICT, Legal, Project Management, Property, ABMU, Community Rehabilitation Company, National Probation Service, Police Crime Commissioner, SWP.
		The statutory Director and HoS will continue to meet with staff regularly to update on the transformation programme and invite staff to participate in projects	Corporate Director Social Services & Wellbeing /Head of Children's Social Care	ongoing	Corporate Director Social Services & Wellbeing and Head of Children's Social Care have met with new social workers in a series of meetings during May-December 2017. Regular service visits are undertaken. The Director writes out to staff 2/3 times per year.
		MASH Communication Plan to be implemented	GM Assessment – Case Management/ PO/GM Integrated Working & Family Support	Sep 17	See above.
16.	The quality assurance framework should be developed and implemented as a priority.	As per recommendation 2	GM Safeguarding/ PO Service Development	Sep 17	See above
17.	The workforce strategy should continue to focus on maximising staff retention and actions to promote the timely recruitment of experienced staff.	Strategy to be finalised and implemented	GM Assessment – Case management/ Principal Training Officer	Aug 17	The Recruitment and Retention strategy has been finalised. The subsequent action plan is in draft.
18.	Staff must have the capacity to complete the training which has been identified to support their professional development.	Workforce Development Training plan to be launched to facilitate forward planning of training through individual supervision	Training Manager and all managers	Sep 17	The Training programme is available on the intranet. Staff are supported and encouraged to attend relevant training. Training Needs Analysis for 2018/19 is underway.
19.	Senior managers should take steps to improve the frequency, consistency and quality of front	Supervision Policy to be re-launched	HoS GMs Training Manager	Jul 17	The Supervision policy has been marketed as being available on the intranet (social Services and Wellbeing pages). A formal re-launch of the

Page 83	line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality.				policy will take place in the new year (2018) when the revised policy has been formally accepted.
	Audit tool to be relaunched and incorporated in annual audit work plan under auspices of QA framework	GM Safeguarding /PO Service Development	Jul 17	Complete	
	Regular reports to be taken to weekly Team Manager meetings	GM Assessment – Case Management/ GM Disability Transition Case Management	Jul 17	This is ongoing - reports from WCCIS are being developed.	
20.	<p>Arrangements for group managers, team/deputy managers and senior practitioners should be kept under review as part of the remodelling of services to ensure their capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; access to a leadership and development programme should be progressed for managers to build resilience.</p>	<p>Training needs analysis to be undertaken to inform a coordinated programme for managers which will include:</p> <ul style="list-style-type: none"> • Corporate and whole sector social care leadership and management development training programme (all managers). • Post Graduate Diploma in Managing Practice Quality in Social Care (team managers) • Postgraduate Certificate in Strategic and Operational Leadership in Social Care (MMDP) (group managers) • Coaching / Mentoring 	Corporate Director Social Services & Wellbeing / Head of Children's Social Care	Oct 17	A sector wide training needs analysis is taking place in line with the Social Care Wales Workforce Development Programme grant application schedule.

Page 84		(all managers).			
		IPC to deliver a leadership Development programme	Head of Children's Social Care	Dec 17	Programme is underway.

Scrutiny Forward Work Programme

The following items were previously prioritised by the Subject OVS Committees and considered by Corporate at its last meeting where the top three items were scheduled in for the next round of meetings:

Date	Subject Committee	Item	Specific Information to request	Rationale for prioritisation	Proposed date	Suggested Invitees	Prioritised by Committees	
Page 85	12-Jul-2018	SOSC2	Safeguarding	To include Safeguarding activity in both Children and Adult Services. To also cover: <ul style="list-style-type: none"> Regional Safeguarding Boards Bridgend Corporate Safeguarding Policy Child Sexual Exploitation (CSE) Deprivation of Liberty Standards (DOLS) Domestic Abuse Human Trafficking Modern Slavery How the Police assist the LA in relation to safeguarding vulnerable adults and children. 	Members stressed that this subject must be considered by Scrutiny on their FWP as it is a huge responsibility of the Authority and Scrutiny must ensure the work being undertaken to protect some of the most vulnerable people is effective and achieving outcomes.		Susan Cooper Corporate Director Social Services and Wellbeing; Cllr Phil White, Cabinet Member – Social Services and Early Help; Jacqueline Davies, Head of Adult Social Care; Laura Kinsey, Head of Children's Social Care; Elizabeth Walton James, Group Manager Safeguarding and Quality Assurance; Terri Warrilow, Adult Safeguarding and Quality Manager; Representation from Police;	
	12-Jul-2018	SOSC2	Care Inspectorate Wales (CIW) Inspection of Children's Services.	The Committee requested that they receive an information report detailing the progress of the plan and update Members whether or not the actions have addressed the issues raised by the Inspectorate.				
	23-Jul-2018	SOSC 3	Greener Bridgend	Following on from the notice of motion in which it proposed the authority to go plastic free and to encourage all organisations and individuals to follow as much as possible. Council Members wished to be informed of how Officers intend to work towards the following: If and when a review our own organisation will take place and plans to replace single use plastic items, encouraging the replacement of single use plastic items such as plastic straws, plastic coffee cups with biodegradable items in the workplace When will BCBC contact County Borough businesses to encourage them to replace single use plastic items, reduce unnecessary packaging and apply principles of sustainability within their everyday businesses. How we plan to promote 'Plastic free Bridgend' through social media and other appropriate marketing and communications methods. How do we support community initiatives to 'Keep Bridgend Tidy', including our beaches, parks and streets, and promote alternatives to throwing away materials, in keeping with principles of the circular economy and waste hierarchy. Include stats on what single use items BCBC currently uses and any plans for a replacement of these items. How we are working with Welsh Government Ministers on the measures, including guidance and legislation, can be introduced to reduce plastic waste across Wales, in keeping with the principles previously outlined.	To work towards Bridgend becoming a plastic free town. For the Committee to be informed of proposals in working towards this.		Mark Shephard, Corporate Director - Communities; Cllr Richard Young, Cabinet Member - Communities;	
05-Sep-2018	SOSC1	School Standards	Requested from SOSC 1 meeting in February to receive a further report at a meeting in the near future, (to be agreed by Corporate Overview and Scrutiny), incorporating the following: <ul style="list-style-type: none"> School Categorisation information; In relation to Post-16 data at 4.53 of the report, the Committee requested that they receive the baseline for each school to give a better indication of how each school has improved; Information on Bridgend's ranking for Key Stage 4 based on the latest results; Information on what targets were set at each stage in order to determine whether the performance was expected and possibly a cohort issue or whether any actuals differed significantly from the targets set; Information that the Consortium has gathered through drilling down into each schools' performance to determine what challenges schools face; Further detail of the performance of those with ALN attending the PRU or Heronsbridge School as Members felt this was not incorporated into the report to a great degree; Information on the work that the Consortium is doing to identify the variation for each secondary school at Key Stage 4, and what is being done about it; More information in relation to each schools performance – not necessarily more data but detail of the where, what and how in relation to good and poor performance for each school so that the Committee has an overall understanding of the current situation and priority schools in Bridgend; What extent are schools responding to the changes recently introduced such as the removal of Btec etc, to ensure they are still meeting the needs of the pupils; What work is being done to mitigate against future dips in performance resulting from any changes to curriculum or changes to performance measures; Evidence of how the Consortium has made a direct impact on schools and school performance, what outcomes can they be measured on in relation to Bridgend to assure Members of value for money; What is being done to mitigate against the impact of changes in teachers to ensure that this does not have a resulting impact on the performance of pupils; Performance in relation to vocational qualifications and non-core subjects – where are there causes for concern and where there is excellent work taking place etc. 			Lindsay Harvey, Interim Corporate Director - Education and Family Support; Cllr Charles Smith, Cabinet Member for Education and Regeneration; Nicola Echanis, Head of Education and Early Help; Mandy Paish, CSC Senior Challenge Advisor; Mike Glavin, Managing Director CSC Representative from School Budget Forum		

Item 6

06-Sep-2018	SOSC2	ALN Reform	<p>When the Act has been further progressed, report to include consideration of the following points:</p> <p>a) How the Authority and Schools are engaging with parents over the changes to the Act?</p> <p>b) What the finalised process is for assessments and who is responsible for leading with them?</p> <p>c) What involvement/responsibilities do Educational Psychologists have under the Act?</p> <p>d) Has the Act led to an increase in tribunals and what impact has this had? This is set against the context of the recent announcement by the Lifelong Learning Minister that instead of saving £4.8m over four years the Act could potentially cost £8.2m due to an expected increase in the number of cases of dispute resolution.</p> <p>e) Given that the Act focuses on the involvement of young people and their parents, what support is available for those involved in court disputes?</p> <p>f) Outcomes from the Supported Internship programme.</p> <p>g) Support for those with ALN into employment.</p> <p>h) Staffing - Protection and support for staff, ALNCO support, workloads and capacity.</p> <p>i) Pupil-teacher ratios and class sizes and impact of Act on capacity of teachers to support pupils with ALN</p> <p>j) How is the implementation of the Act being monitored; what quality assurance frameworks are there and what accountability for local authorities, consortiums and schools?</p>	Needs revisiting to monitor implementation of the Bill and if needs are being met as well as impact on future budgets -	COSC agreed with comments from Officers and will await further timing advice (March 2018)	Lindsay Harvey, Interim Corporate Director - Education and Family Support; Cllr Charles Smith, Cabinet Member for Education and Regeneration; Nicola Echanis, Head of Education and Early Help. Michelle Hatcher, Group Manager Inclusion and School Improvement Third Sector Representatives
17-Sep-2018	SOSC3	Waste Services	<p>Members would like the report to include an update on the following:</p> <p>The impact of the recently recruited senior managers associated with the Bridgend contract and front line operative staff. Was recruitment successful? Have all Members now been given full inductions and training</p> <p>Information on the updates to the CRC centre including the instalment of the polystyrene baler and webcam so residents are able to monitor the traffic flow at the site.</p> <p>Change of days for the communal collections - Has this happened? Has the service shown improvements since the change?</p> <p>Impact of the new collection vehicles. Have they made collection rounds more efficient?</p> <p>Outcome of the review of BCBC in house Street Scene enforcement activity</p> <p>Longer term trend of flytipping. What are the figures of flytipping in the Borough? Have they improved? Domestic or business?</p> <p>A breakdown in the number of referrals received before the new contract in a typical month and what they were related to and a breakdown of the number of referrals received in April 2018</p> <p>A review of the AHP bags be considered when Scrutiny revisit the subject of 'Waste' in approximately 12 months time to include the monetary against environmental impact.</p>		<i>Clarification needed on item - for COSC to determine Director has suggested September/October</i>	Mark Shepherd, Corporate Director Communities; Cllr Hywel Williams, Deputy Leader; Cllr Richard Young, Cabinet Member – Communities; Zak Shell, Head of Streetscene; Maz Akhtar, Regional Manager Kier Julian Tranter, Managing Director Kier Claire Pring, Kier
16-Oct-2018	SOSC1	Advocacy	<p>Advocacy for Children and Adults:</p> <ul style="list-style-type: none"> • The outcome from the Advocacy Pilot Scheme • The current system • Social Services & Wellbeing Act • Regional Children Services advocacy • Adult Services – Golden Thread Project 		Corporate Director proposed September 2018	Susan Cooper Corporate Director Social Services and Wellbeing; Cllr Phil White, Cabinet Member – Social Services and Early Help; Jacqueline Davies, Head of Adult Social Care; Laura Kinsey, Head of Children's Social Care; Richard Thomas, Strategic Planning and

For prioritisation					
Item		Rationale for prioritisation	Proposed date	Suggested Invitees	
Review of Fostering Project	Further project as part of the Remodelling Children's Social Services - Detail regarding the upskilling of three internal foster carers to provide intensive, therapeutic step down placements as part of Residential Remodelling project - Review of the foster carer marketing and recruitment strategy at a draft/early stage to allow members input into the process	COSC have proposed that this item be considered by a future SOSC 1 for continuity purposes	Corporate Director proposed October 2018	Susan Cooper, Corporate Director, Social Services and Wellbeing; Cllr Phil White, Cabinet Member – Social Services and Early Help; Laura Kinsey, Head of Children's Social Care; Pete Tyson, Group Manager – Commissioning; Lauren North, Commissioning and Contract Management Officer; Natalie Silcox, Group Manager Childrens Regulated Services.	
Parks and Playing Fields	To be updated by MS		Corporate Director proposed Nov 2018	Mark Shephard, Corporate Director - Communities; Cllr Richard Young, Cabinet Member - Communities;	
Direct Payment Scheme	Details on the revised policy including how the legislation has affected it. How Direct Payments are delivered. What support has been provided to service users since the launch of the new scheme. How was the scheme launched to service users.	Corporate Director has proposed this as a potential item	Corporate Director proposed November	Susan Cooper, Corporate Director, Social Services and Wellbeing; Cllr Phil White, Cabinet Member – Social Services and Early Help;	
CIW investigation into LAC	The Committee requested that the outcome of the CIW investigation into Looked After Children be provided to Scrutiny for information when it becomes available.		Self assessment and action plan due at end of year.		
Remodelling Children's Residential Services Project	SOSC 1 requested that the item be followed up by Scrutiny in the future for monitoring purposes, incorporating evidence of outcomes.		Corporate Director proposed early 2019	Susan Cooper, Corporate Director, Social Services and Wellbeing; Cllr Phil White, Cabinet Member – Social Services and Early Help;	
CAMHS	With reference to the responses received in relation to Child Adolescent Mental Health Services Members on 12 December 2018, Members note that most of the replies feature an element of work in progress and have asked to retain the item on the FWP for future review. To receive an update on current provision and further advise on current situation in relation to comments and conclusions made on 12 December 2018. Update on work being undertaken throughout Wales looking at causes of mental health: 'Working Together for Mental Health'. To include an update on how we are getting on moving into Cwm Taf.		Corporate Director proposed early 2019	Susan Cooper, Corporate Director, Social Services and Wellbeing; Cllr Phil White, Cabinet Member – Social Services and Early Help;	
Empty Properties	SOSC 3 requested that this item continue on FWP - reasons and purpose to be confirmed			Darren Mepham, Chief Executive	

Home to School Transport	<p>To provide assurances on rationalisation of Learner Transport as far as possible in order to make budget savings: Update on pilot that school transport team proposing to run in Spring and Summer terms 2017-2018 - to support the enforcement of bus passes on home to school transport contracts. As part of this pilot, the Authority is also investigating opportunities to track the use of our school bus services by individual pupils.</p> <p>Update on Recommendation from BREP: The Panel recommend the need for the Authority to adopt a Corporate approach in relation to Home to School Transport maximising the LA's minibuses such as those used for day centres. It is proposed that this be supported by slightly amending the opening and closing times of day centres so that the buses can be available for school transport. Other aspects that could be considered include the exploration of whether school staff could transport children and young people instead of hiring independent drivers.</p> <p>To test and scrutinise the current licensing and school transport regime to gain assurances that it provides adequate protection against the potential of putting children and vulnerable children at risk from those who are in a position of trust. Changes to the DBS status of their employees to be scrutinised to ensure that children are not being put at undue risk.</p> <p>To provide robust scrutiny and recommendations on how the current regime can be improved.</p> <p>To provide assurances to the public and maintain public confidence in the system of school transport</p> <p>Report to include Update on the current arrangements of how licensing and school transport operates within the County Borough since the change in 2015 to the Police National Policy for disclosing non-conviction information to the local authority. Information to include a report from South Wales Police on its approach to disclosing information it holds about licencees following arrests, charges and convictions.</p> <p>What is the current relationship between the local authority's licensing and school transport departments in relation to the disclosure of information from South Wales police? Is there sufficient oversight on behalf of the local authority and a risk of contractors withholding information which may prejudice the continuation of their contract? Further proposed that Communities be invited to add to report and attend meeting to update Committee on safe routes assessment to determine what work has been undertaken since funding was allocated to this over a year ago.</p>	<p>To provide assurances on rationalisation of Learner Transport as far as possible in order to make budget savings.</p> <p>To test and scrutinise the current licensing and school transport regime to gain assurances that it provides adequate protection against the potential of putting children and vulnerable children at risk from those who are in a position of trust. Changes to the DBS status of their employees ought to be scrutinised by an Overview & Scrutiny Committee at the earliest opportunity to ensure that children are not being put at undue risk.</p> <p>To provide robust scrutiny and recommendations on how the current regime can be improved.</p> <p>To provide assurances to the public and maintain public confidence in the system of school transport</p>		<p>Lindsay Harvey, Interim Corporate Director - Education and Family Support; Cllr Charles Smith, Cabinet Member for Education and Regeneration; Nicola Echanis, Head of Education and Early Help. Mark Shepherd, Corporate Director Communities;</p>	
Communication and Engagement	<p>Is corporate communications meeting the needs of the various departments within the organisation to effectively communicate with residents Current data of engagement Are current KPIs an effective measurement in a fast changing digital world How do we engage with corporate communications with the digitally excluded</p>			<p>Darren Mepham, Chief Executive Corporate Communications Representative Cllr Dhanisha Patel, Cabinet Member Future generations and Wellbeing</p>	
Revised CAT Process	<p>What is the latest with the CAT process? How has it been streamlined since it last came to Scrutiny back in January 2018 How many CATs have now been processed and completed? How has the position improved What are the plans for CAT going forward How many CAT applications have been received altogether? How many have been progressed? How many have withdrawn and for what reasons? List of CAT 1 priorities and what is the plan for these?</p>			<p>Mark Shephard, Corporate Director - Communities; Cllr Richard Young, Cabinet Member - Communities;</p>	
Supporting People Programme Grant	<p>Full breakdown of the various services currently supported through this grant within BCBC (inc. the various financial detail) along with how this may have changed over recent years. The number of individuals supported through the grant and in what way. How are decisions made about where to spend the grant and how much in specific areas How effective is the grant support that is provided across a variety of sectors within BCBC, and to ensure that the grant is being targeted at the services most in need.</p>	<p>Improved outcomes in line with the agreed objectives of the grant. Improved support for those in need of emergency housing and support</p>		<p>Susan Cooper Corporate Director Social Services and Wellbeing Cllr Phil White Cabinet Member Social Services and Wellbeing Wellbeing directorate Housing Darren Mepham, Martin Morgans? Lynne Berry? Cllr Dhanisha Patel, Cabinet Member Future Generations and Wellbeing</p>	
Member and School Engagement Panel - Annual Report	<p>Annual Update to - SOSC 1 on the work of the Member and School Engagement Panel</p>				

The following items for briefing sessions or pre-Council briefing

Item	Specific Information to request
Social Services Commissioning Strategy	To include information on what work has taken place following the Social Services and Wellbeing Act population assessment. To also cover the following: <ul style="list-style-type: none"> • Regional Annual Plan • Bridgend Social Services Commissioning Strategy
Cwm Taf Regional Working	Update on situation and way forward with Regional Working with Cwm Taf? How will we undertake Regional working?
Residential Remodelling - Extra Care Housing	Site visit to current Extra Care Housing and then to new site once work has begun
Children's Social Services	Briefing for SOSC 1 on Child Practice Reviews - details of latest CPRs over last 12-18 months - what recommendations have come out of them, how have they been responded to, how have they helped inform future work to help safeguard children.

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO OVERVIEW AND SCRUTINY COMMITTEE 2

12 JULY 2018

REPORT OF THE CORPORATE DIRECTOR, SOCIAL SERVICES AND WELLBEING

SAFEGUARDING

1. Purpose

1.1 The Purpose of the report is to update the Committee with information on:

- Safeguarding (Adults & Children);
- Regional Safeguarding Boards;
- Bridgend Corporate Safeguarding Policy;
- Child Sexual Exploitation (CSE);
- Deprivation of Liberty Standards (DOLS);
- Domestic Abuse;
- Human Trafficking & Anti-Slavery.

2. Connection to Corporate Improvement Objectives/Other Corporate Priorities

2.1 This report assists in the achievement of the following corporate priority/priorities:-

1. Helping people to be more self-reliant – taking early steps to reduce or prevent people from becoming vulnerable or dependent on the Council and its services.
2. Smarter use of resources – ensuring that all its resources (financial, physical, human and technological) are used as effectively and efficiently as possible and support the development of resources throughout the community that can help deliver the Council's priorities.

2.2 The report also contributes to the delivery of the Council's Medium Term Financial Strategy (MTFS).

3. Background

3.1 Safeguarding means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect.

3.2 Safeguarding adults includes:

- Protecting their rights to live in safety, free from abuse and neglect;

- People and organisations working together to prevent the risk of abuse or neglect, and to stop them from happening;
 - Making sure people's wellbeing is promoted, taking their views, wishes, feelings and beliefs into account.
- 3.3 Safeguarding children and promoting their welfare includes:
- Protecting them from maltreatment or things that are bad for their health or development;
 - Making sure they grow up in circumstances that allow safe and effective care.
- 3.4 Effective safeguarding arrangements should be underpinned by two key principles:
- Safeguarding is everyone's responsibility: for services to be effective each professional and organisation should play their full part; and
 - A person-centred approach: for services to be effective they should be based on a clear understanding of the needs and views of adults and children.
- 3.5 The key pieces of legislation relating to safeguarding children and adults at risk are the Social Services and Wellbeing (Wales) Act 2014 and the Children Act 1989.
- 3.6 Part 7 of the Social Services & Wellbeing (Wales) Act relates to Safeguarding and includes:
- Definitions of an 'adult and child at risk';
 - A duty on relevant partners to report adults and children at risk;
 - A requirement on a local authority to investigate where they suspect that an adult with care and support needs is at risk of abuse or neglect;
 - The introduction of an Adult Protection and Support Order (APSO);
 - The requirement on the local authority to consider undertaking an investigation when there has been a report that a child is at risk and then carry this out in line with Section 47 of the Children Act 1989;
 - The establishment of a National Safeguarding Board;
 - The functions and procedures of Safeguarding Adults and Safeguarding Children Boards.
- 3.7 Section 47 of the Children Act 1989 sets out the duty on a Local Authority, with the help of other organisations as appropriate to make enquires if they have reasonable cause to suspect that a child is suffering harm, to enable them to decide whether they should take any action to safeguard and promote the child's welfare.

4. Current situation/Proposal

Safeguarding Adults

- 4.1 Safeguarding is everyone's business and practitioners in all agencies need to recognise and act when they identify adults at risk. The Social Services and

Wellbeing (Wales) Act 2014 was enacted in April 2016. Section 7, refers to safeguarding and created new legislation for adult safeguarding. It now provides the legal framework for improving the well-being of people who need care and support, and carers who need support, and for transforming social services in Wales.

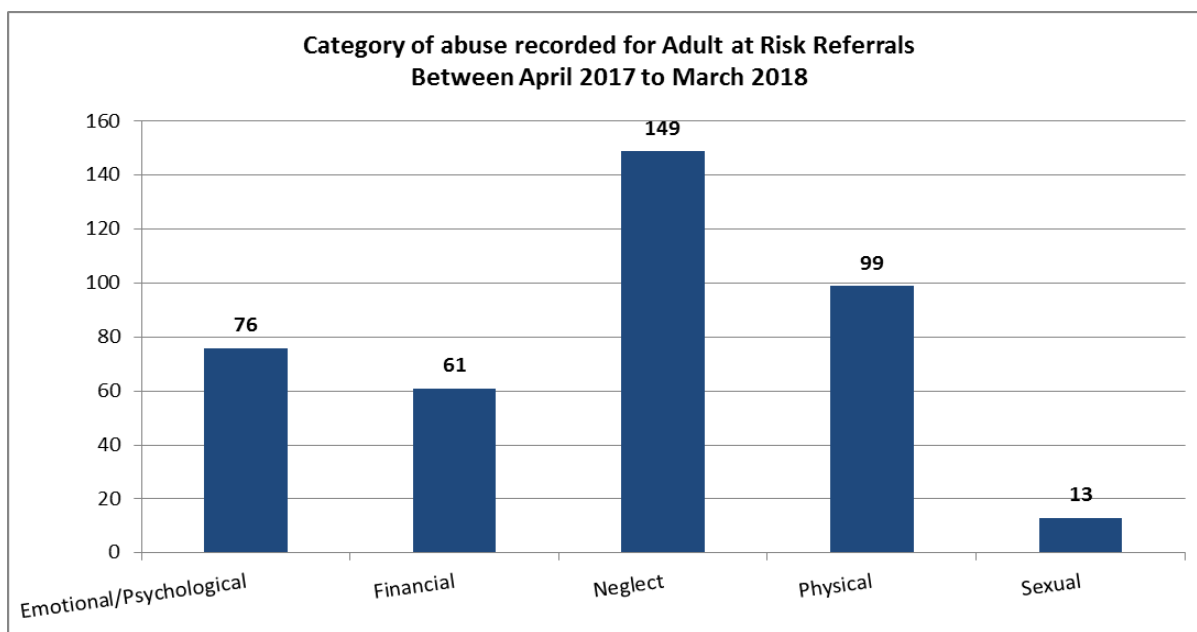
4.2 The main categories of abuse which are identified within existing procedures and within the Social Services and Well-being (Wales) Act are:

- physical, sexual, psychological, emotional or financial abuse (and includes abuse taking place in any setting, whether in a private dwelling, an institution or any other place), “financial abuse” which includes:
 - having money or other property stolen;
 - being defrauded;
 - being put under pressure in relation to money or other property;
 - having money or other property misused; and
 - “neglect” which means a failure to meet a person’s basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person’s well-being (for example, an impairment of the person’s health).

4.3 The table below shows the last two years’ figures since the implementation of the Social Services and Wellbeing (Wales) Act.

Years 1 April – 31 March	Number of Safeguarding Referrals	Met threshold for Adult Protection Procedures
2016/2017	375	88
2017/2018	344	58

4.4 The highest recorded category of abuse in 2017/2018 was neglect which accounts for 37.4% of the total recorded alleged abuse referrals, followed by physical abuse, emotional/psychological abuse and financial abuse. 75 referrals were for domestic abuse.



- 4.5 The Adult Safeguarding team have a very positive professional working relationship with all police officers in the Public Protection Unit (PPU) and the team is in regular contact with them to discuss cases. The team has undertaken joint visits with the police when required and share relevant information to assist their enquiries on cases. Senior police officers are an integral part of the Western Bay Safeguarding Adults and Children’s board and are members of the Boards subgroups including representation for Adult practice Reviews. The Adult Safeguarding Team is due to join the Multi Agency Safeguarding Hub (MASH) in July which will enhance the safeguarding process as services will be co-located.

Deprivation of Liberty Safeguards (DoLS)

- 4.6 The Mental Capacity Act 2005 provides a statutory framework for acting and making decisions on behalf of individuals who lack mental capacity to do so for themselves. In 2007, the Deprivation of Liberty Safeguards (DoLS) was introduced to provide a legal framework to prevent breaches of the European Convention on Human Rights following the ‘Bournewood’ judgement.
- 4.7 DoLS is appropriate if people lack the capacity to consent to a particular treatment or care that is recognised by others as being in their best interest or which will protect them from harm. Where this care might involve depriving vulnerable people of their liberty in a hospital, care home, supported living or foster placement for young people over 16 years of age, the DoLS have been introduced, in law, to protect their rights and ensure that the care or treatment they receive is in their best interest.
- 4.8 On the 19 March 2014, the Supreme Court handed down its judgement in the case of “P v Cheshire West & Cheshire Council”. The Supreme Court has now confirmed that to determine whether a person is objectively deprived of their liberty there are two key questions to ask, which is described as the ‘acid test’:

a) Is the person subject to **continuous supervision** and **control** (all three aspects are necessary)

AND

b) Is the **person free to leave** (The person may not be saying this or acting on it but the issue is about how staff would react if the person did try to leave).

This now means that if a person is subject both to continuous supervision and control and not free to leave they are deprived of their liberty.

4.9 Due to this judgement the number of DoLS referrals increased dramatically in 2014/2015 and still remains in excess of 400 per year. However Corporate Management Board (CMB) have been very supportive in identifying additional resources to enable the Safeguarding Manager to spot purchase independent Best Interest Assessors to manage the increase of referrals.

4.10 In addition to funding received from the Council and Welsh Government in previous years, there will be an additional £329,000 funding made available from Welsh Government on a three year basis from 2018/19. This has been allocated using the current over 65s population in each Local Health Board and Local Authority area, and Bridgend's allocation is £11,803 for this financial year. This is a contribution towards meeting the statutory responsibility.

4.11 The data below shows the numbers of DoLS referrals received in Bridgend by year.

YEARS 1 April – 31 March	NUMBER OF DoLS REFERRALS RECEIVED
2013/2014	12
2014/2015	325
2015/2016	443
2016/2017	416
2017/2018	415
1/4/2018 – 4/6/2018 (1st quarter)	115

There are currently 36 DoLS referrals waiting to be allocated which is comparable to the last two years.

Adult Practice Reviews

4.12 Part 7 of the Social Services and Wellbeing (Wales) Act 2014 sets out the provisions for Safeguarding Adults and Children for all partner agencies. Volumes 2 & 3 clearly sets out the statutory guidance which requires Safeguarding Boards to undertake Child Practice Reviews and Adult Practice Reviews as identified. The Western Bay Safeguarding Board's Practice Review Management Group has a key role in achieving these functions of learning, reviewing and improving safeguarding practice. The Practice Review Management Group will be the platform from which these reviews will be undertaken on behalf of the Western Bay Safeguarding Children Board and the Western Bay Safeguarding Adults Board.

Current Adult Practice Reviews

Type of Review	Progress	Status	Date
Concise Review	concluded	Report published	28/2/2018
Concise Review	2 nd Learning event scheduled	ongoing	18/6/2018
Multi-agency professional Forum	concluded	Report published Action Plan developed	Monitored by Practice Review Management Group
Concise Review	concluded	Report written	Presentation to the Safeguarding Board in July
Concise Review	concluded	Report written	Presentation to the Safeguarding Board in July

Safeguarding Children

4.13 On 12 March 2018, the Child Protection Register comprised the following profile:

Age Group	Category of Registration										Total
	Emotional Abuse	Neglect	Neglect and Physical Abuse	Neglect and Sexual Abuse	Neglect, Physical Abuse & Emotional Abuse	Neglect, Physical and Sexual Abuse	Physical Abuse	Physical and Emotional Abuse	Physical and Sexual Abuse	Sexual Abuse	
Under 1	6	10				1					17
1 to 4	21	15	3		3		2	1			45
5 to 9	22	18	6		1		4		1	1	53
10 to 15	25	16	2	3	2		2		2	1	53
16 to 18	6	4		3					1	1	15
Total	80	63	11	6	6	1	8	1	4	3	183

4.14 If professionals agree that a child is suffering or likely to suffer significant harm and their name is placed upon the Child Protection Register an outline plan is agreed between professionals at this time. In addition to this a core group of professionals is agreed who are responsible for implementing and monitoring the child protection plan. This initial core group is held within 10 working days of the conference and thereafter on a 6 weekly basis until the review Child Protection Case Conference 3 months later. If the child's name remains on the Child Protection Register, subsequent review conferences are held every 6 months.

Public Law Outline (PLO)

4.15 Under the PLO, the pre proceedings process is set for a realistic period of time for families to engage in the necessary services to ensure that the

child/ren's needs are met and they are kept safe from harm following a period of child protection registration.

4.16 In the first instance, the family will receive a 'pre proceedings letter' which sets out:

- the Local Authority's concerns;
- what the Local Authority has done to try to address those concerns;
- what the family need to in order to address those concerns;
- the likely outcome if they fail to do so which involves the Local Authority considering whether the children are able to remain in the family home and whether care proceedings should be issued;
- informing them of a meeting that they must attend with legal representation.

4.17 Bridgend currently has 48 children in this process and another 8 children who are unborn but there are plans to enter into this process when they are born.

Care Proceedings

4.18 This is a last resort situation for the Local Authority and will only be issued when the Local Authority has attempted to do all it can to work with and support the family but there has been no change and the child/ren are at risk of suffering significant harm should they remain in the care of parents or other carers. Bridgend currently has 28 cases in such proceedings. The process following the conclusion of care proceedings is dependent upon the care plan agreed by the Court at the final hearing.

Child practice Reviews

4.19 In 2013, Child Practice Reviews replaced what were known as Serious Case Reviews (SCRs). This new process stems from the Care and Social Services Inspectorate Wales report published in October 2009 - *Improving Practice to Protect Children in Wales: An Examination of the Role of Serious Case Reviews*. This work was pivotal to where we are today, and concluded that action was required to replace the SCR process which had become ineffective in improving practice and inter-agency working.

4.20 A key element of the new framework is different types of review – known as 'concise' and 'extended' – depending on the circumstances of the child involved. Child Practice Reviews will be effective learning tools where it is more important to consider how agencies worked together. The formal review processes are underpinned by multi-agency professional forums that are critical to improving practice, and will allow practitioners to reflect on cases – and not only where things have gone wrong – in an informed and supported environment.

4.21 The guidance sets out arrangements for multi-agency Child Practice Reviews in circumstances of a significant incident where abuse or neglect of a child is known or suspected.

- 4.22 The overall purpose of reform of the review system is to promote a positive culture of multi-agency child protection learning and reviewing in local areas, for which the Western Bay Safeguarding Children's Board and partner agencies hold responsibility.
- 4.23 Bridgend is currently undertaking one Concise Child Practice Review following the identification of concerns where the above criteria have been met. This review involves a baby who died whilst co-sleeping with its parents.
- 4.24 The purpose of the review is to identify learning for future practice and involve practitioners, managers and senior officers in exploring the detail and context of agencies' work with the child(ren) and family. The review is intended to generate professional and organisational learning and promote improvement in future practice.
- 4.25 Recommendations from Child Practice Reviews are considered and actions agreed are reported to and monitored by the Western Bay Safeguarding Children's Board. The lessons to be learnt are shared with senior managers and disseminated through learning events and training to Safeguarding practitioners.

Regional Safeguarding Boards

- 4.26 Part 7 regulations of the Social Services and Wellbeing (Wales) Act specify the establishment of regional Safeguarding Boards and require each region to specify a lead partner agency for each Board. The Western Bay Safeguarding Boards cover the Bridgend, Neath Port Talbot and Swansea regions, with Neath Port Talbot County Borough Council (CBC) as the lead partner agency. The Western Bay Safeguarding Board's Annual Plan 2018-19 is attached at **Appendix 1**.
- 4.27 The objectives of the Safeguarding Boards are to both protect adults and children who are experiencing, or at risk of abuse, neglect or other kinds of harm and to prevent them becoming at risk of abuse, neglect or other kinds of harm.
- 4.28 Membership of Safeguarding Boards is prescribed within the Act. A Board include senior representatives from agencies who exercise functions or who are engaged in activities in relation to children and adults. At a minimum a Board must include a representative from:
- Each Local Authority
 - Police
 - Local Health Board
 - NHS Trust
 - Probation services provider(s)
- 4.29 The current chairs of the Western Bay Safeguarding Boards are:
- Adults Board - Susan Cooper, Corporate Director, Social Services and Wellbeing at Bridgend CBC.

- Children Board - Andrew Jarrett, Director of Social Services at Neath Port Talbot CBC

4.30 Governance: The Safeguarding Adults and Children Boards have outcome focused business plans in place. There are management group structures in place which support the delivery of the business plans on behalf of the Boards. Reports are routinely submitted to the Boards to raise risks and issues against the delivery of the plan and for decision and action from the Board. This enables the Board to take ownership of its work at strategic level and provide leadership to the management groups. There is an established business unit based in Neath Civic Offices that supports the Boards in this respect. The team is funded through the Safeguarding Board budget and consists of one Strategic Business and Development Manager, two Strategic Business Coordinators and a Business Administrator.

4.31 The Terms of Reference developed for the Safeguarding Boards are reviewed annually and this promotes the requirement for accountability. There are clear definitions for professional challenge and holding to account. Each Board member is required to sign up to a member Role Profile to which they are individually accountable in relation to their contribution to the Board and attendance at Board meetings. The Boards also have measures within a Performance and Impact Framework which assist in reporting activity of Board members against elements within their role profiles. This allows the Boards to demonstrate multi-agency working at a strategic level.

4.32 The sub-groups of the Safeguarding Adults Board are:

- *Quality Monitoring, Review & Escalating Concerns Group*
- *Policy and Practice Management Group*

The sub-groups of the Childrens Safeguarding Board are:

- *Procedure and Practice Management group*
- *The Quality and Performance Management Group*

The joint sub-groups which include both adults and children are:

- *Strategic Training Management Group*
- *Practice Review Management Group*

4.33 Two priorities areas in the Boards plan for 2018/19 are:

1. Safeguarding People from Exploitation. This will include addressing current topics such as county lines and also increase focus on Modern Slavery and Human Trafficking.
2. Safeguarding People in Care Settings. This priority intends to bring consistency to monitoring of Care Homes for adults and children in relation to safeguarding standards and aims to develop improved contract and monitoring arrangements through the implementation of such standards.

4.34 Child Sexual Exploitation (CSE): CSE is actively debated at each Safeguarding Children Board meeting as a standing agenda item. A

comprehensive multi-agency data set has been developed with all partners which enables the Board to actively enquire about the prevalence of CSE across the region and to be clear on local interventions. Performance data is provided to the Board with 6 monthly updates on how agencies respond to cases of identified or suspected CSE and allowed the Board to target areas in need of training and awareness. A dedicated pool of Child Sexual Exploitation awareness raising trainers has been established using accredited training and resources with over 2000 staff trained across the region.

- 4.35 Domestic Abuse: The Safeguarding Children Board understands the impact that domestic abuse has on children living in domestic abuse situations and wishes to improve knowledge on prevalence, interventions and support provided to safeguarding children from living in domestic abuse situations.
- 4.36 The Board continues to work with the 3 domestic abuse forums to develop consistent information which will enable the board to understand more fully the prevalence of domestic abuse across the region. The National Training Framework is one of the key mechanisms for delivering on The Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015.

National Safeguarding Board

- 4.37 The National Safeguarding Board is an advisory board that advises Welsh Government on the effectiveness of arrangements to safeguard people in Wales. The Board is chaired by Dr Margaret Flynn with Board members having being appointed by Welsh Ministers through an open public appointments process.
- 4.38 One of the National Board's duties is to provide advice and support to regional Safeguarding Boards and each Board member has been assigned to a regional board. The Board member linked to the Western Bay Safeguarding Board is Keith Towler who is also Vice Chair of NISB.

Bridgend Operational Safeguarding Group

- 4.39 The Social Services and Well-being (Wales) Act 2014 makes it clear that safeguarding is a shared responsibility and depends upon effective joint working between agencies and professionals that have different roles and expertise. Bridgend has a Corporate Operational Safeguarding group chaired by the Director of Social Services & Wellbeing, which meets on a quarterly basis. The group's membership consist of representatives from within the Local Authority and partner agencies for example Education, Health, HMP Parc YOI and the third sector.
- 4.40 The Bridgend Operational Safeguarding Group focuses on Bridgend specific matters as well as the regional operational issues which are relevant to Bridgend and receive and review policy and guidance from the regional boards and national enquiries whilst ensuring that there are effective local monitoring arrangements.

Bridgend Safeguarding Policy

- 4.41 Safeguarding is the responsibility of all Directorates across the local authority. With a view to promoting awareness of this and raising the profile of Safeguarding across the whole of the Council, a Corporate Safeguarding Policy has been developed and implemented. This sets out the Council's duty and commitment to safeguard and promote the health, wellbeing and human rights of adults and children at risk and to ensure that effective practices are in place throughout the Council and its commissioned services such that individuals can live their life free from harm, abuse and neglect. This policy has been updated to reflect the changes pertaining to safeguarding as laid out in the Social Services and Well-being (Wales) Act 2014 and accompanying statutory guidance.
- 4.42 Each Directorate across the Council has identified an individual who is known as a Corporate Safeguarding Champion. This person acts as a conduit for information on safeguarding matters to others within their area of service and to signpost them to safeguarding services if they have a safeguarding concern. Following service reconfiguration and staff changes the membership of this group is currently under review.
- 4.43 The Council recognises that it has a commitment to ensure that all members of staff have an understanding of their roles and responsibilities when working with children and adults at risk and the requirement for reporting concerns.
- 4.44 All employees are required to complete the safeguarding e-learning awareness level module. More specialist single and inter-agency training opportunities are available for those who work routinely with children or adults at risk at a level appropriate to their role and responsibilities.

Child Sexual Exploitation

- 4.45 Child Sexual exploitation (CSE) is the coercion or manipulation of children and young people into taking part in sexual activities. It is a form of sexual abuse involving an exchange of some form of payment which can include money, mobile phones and other items, drugs, alcohol, a place to stay, "protection" or affection. The vulnerability of the young person and grooming process employed by perpetrators renders them powerless to recognise the exploitative nature of relationships and unable to give informed consent.
(All Wales Protocol CSE 2008)
- 4.46 Child Sexual Exploitation Strategy (CSE) meetings in Bridgend are chaired by the Group Manager for Safeguarding and Quality Assurance. The frequency of these meetings is considered on a case by case basis with the primary consideration being the risk to the child or young person. A constant chairperson ensures continuity and oversight of the actions identified within the care and support plans, continuous evaluation of the level of risk posed to the child or young person and identification and monitoring of those persons who pose the risk to the child(ren). Information about these individuals is closely monitored by the Police and attending agencies to assist in the disruption of their activities to better protect children and young people.

- 4.47 Each meeting takes into account the specific vulnerabilities of these young people to ensure their care and support plan targets all aspects of their needs and their need to be protected and educated around the facets of grooming and sexual exploitation.
- 4.48 When Bridgend initially started recording statistical data in 2014/15 relating to the number of children and young people being monitored under the CSE protocol, the Authority were aware of some 37 children who fell within this area of service. This number has decreased to 5 individuals currently being monitored by agencies via the CSE protocol. The 5 individuals consist of 1 male and 4 females ranging between the ages of 14-17yrs.
- 4.49 The multi-agency CSE Task Force that was created in 2015 has worked hard to monitor and coordinate service response across the agencies and the impact of early identification and timely interventions have resulted in CSE numbers reducing.
- 4.50 The Task Force addresses issues such as identifying gaps in training, highlighting and tracking high risk cases, new CSE concerns identified outside of the strategy meetings, monitoring and mapping children and young people who are reported as missing with CSE concerns.
- 4.51 The Task Force is chaired on a monthly basis by the Group Manager for Safeguarding and Quality Assurance and is supported by representatives from Early Help, Health, Education, Youth Offending and of course the Police. The work that the Task Force has coordinated has been recognised as innovative and good practice. As such the Task Force was nominated for the South Wales Police Innovation Awards in 2016 and more recently shortlisted by Social Care Wales with regards to Social Care Accolades which the service will have the result about very shortly.
- 4.52 The Western Bay Safeguarding Children's Board have ensured that across the region there are a number of practitioners who are trained to deliver CSE awareness raising training and further work is underway to increase available trainers and training opportunities. Bridgend Social Care Development Workforce Partnership (SCDWP) along with partner agencies have developed a comprehensive training program to ensure that all aspects of the community are involved in raising awareness of CSE across Bridgend. All Bridgend's in house foster carers have received training in CSE and South Wales Police are working with the Authority to facilitate training to Licensees, taxi drivers and door staff to identify offenders and protect children.
- 4.53 Good communication and collaborative working with the Police is essential in all cases and particularly so in CSE cases and cases where children are frequently reporting missing. The priority for all agencies is to protect children and young people but for the Police there is also the duty to investigate and prosecute offenders. In response to this South Wales Police now has a dedicated CSE and Missing Persons Team of investigators supported by a Police analyst who regularly completes a problem profile for the Bridgend area regarding children who are at risk of being sexually exploited and the perpetrators of exploitation. The Safeguarding team holds a data base of all

young people subject to CSE meetings and also has substantial performance reporting arrangements with the Western Bay Safeguarding Children's Board.

- 4.54 With regard to Child Sexual Exploitation and Education, the Child Protection Manager for Education delivers an annual programme of Child Sexual Exploitation training to year 8 pupils with their teachers present. This training is delivered jointly with South Wales Police Officers and evaluated on an annual basis. This ensures children and young people within the education establishments in Bridgend receive appropriate early education around the risks and behaviours associated with CSE.

Domestic Abuse

- 4.55 Bridgend takes a holistic approach to domestic abuse and has a wide range of services. The Violence Against Women Domestic Abuse Sexual Violence Act (Wales) 2015 (VAWDASV) received Royal Assent on the 29 April 2015 and the aim of the Act is to improve public sector responses through strong leadership and a consistent focus on prevention, protection and support.
- 4.56 It ensures a shared, collective strategic vision through the development of national/local/regional strategies to tackle 'violence against women, domestic abuse and sexual violence' in all its forms. It further seeks to raise the issue of gender-based abuse, domestic abuse and sexual violence among senior leaders by placing responsibility on them effect changes necessary to improve the safety of victims and their children.
- 4.57 Anybody can be a victim of abuse irrespective of their age, ethnicity, gender, etc., and the Act recognises this.
- 4.58 There are six objectives within the National Strategy that Bridgend also follows:
- Objective 1:** Increase awareness and challenge attitudes of violence against women, domestic abuse and sexual violence across the Welsh Population
 - Objective 2:** Increased awareness in children and young people of the importance of safe, equal and healthy relationships and that abusive behaviour is always wrong
 - Objective 3:** Increased focus on holding perpetrators to account and provide opportunities to change their behaviour based around victim safety
 - Objective 4:** Make early intervention and prevention a priority
 - Objective 5:** Relevant professionals are trained to provide effective, timely and appropriate responses to victims and survivors
 - Objective 6:** Provide victims with equal access to appropriately resourced, high quality, needs led, strength based, gender responsive services across Wales

Services in Bridgend

- 4.59 The Inspiring Families Programme is an innovative 10 week intervention and assessment of families where domestic abuse is an identified component and the families have chosen to stay together. The Inspiring Families Programme is designed to be an accessible tool that will provide professionals with the

evidence they need to make an assessment of the family and to identify the type and level of further intervention required. In Bridgend the intervention is focused around the child/ren and at the heart of the programme.

- 4.60 The Choices Programme is a model for behavioural change for males only, founded in the theory of the unequal position of females within society. The programme includes a five week assessment and successful participants will proceed to a 32 week facilitated programme.
- 4.61 The STAR Project* (4-6 years; 7-11 years) has specifically tailored courses aimed at children, teenagers and younger adults to explore safety, trust and respect within relationships. It provides children and young people with a toolkit of knowledge and resources designed to prevent them entering a domestically abusive relationship or, if they are in an abusive relationship, the knowledge on how to leave that relationship safely and obtain support.
- 4.62 The Spectrum Programme is delivered in schools in Wales and funded by Welsh Government. The Spectrum Project is a national training programme funded by Welsh Government to raise awareness of domestic abuse and associated issues and is offered to all primary and secondary age children.
- 4.63 The Freedom Programme explores the roles played by attitudes and beliefs on the actions of men who abuse and the responses of victims and survivors. The aim is to assist victims/survivors to make sense of and understand what has happened to them. The Freedom Programme also describes in detail how children are affected by being exposed to abuse and how their lives are improved when the abuse is removed.
- 4.64 The Recovery Toolkit is a 12 week programme for women who have experienced domestic abuse.
- 4.65 The Respect Toolkit is aimed at young people who have witnessed domestic abuse or are displaying abusive behaviour (after witnessing domestic abuse) to mum or siblings. Most programmes are delivered in a group setting however, they can be delivered one-to-one in certain circumstances.
- 4.66 Target Hardening is funded through the Housing Renewal Grant. Target Hardening as a concept is to increase the safety of a 'target' of crime. In Bridgend, victims are offered target hardening measures to increase their personal safety, those within the home and of the home. A stock of safety equipment is kept at the Assia Suite and provided to victims as an immediate response. However, a full property assessment is undertaken by Care and Repair (trained by South Wales Police) and the required measures applied to the home if the property is private rent (with consent of landlord) or owner occupier. If the victim resides within a Registered Social Landlord property, any remedial work to increase the security of the property is undertaken by them. Referrals are also made to South Wales Fire and Rescue Service where there is a threat or fear of arson.

- 4.67 The Support in the Community team provides outreach support to victims of domestic abuse within a community setting and at a location suitable to the service user.
- 4.68 The Assia Suite is a domestic abuse provision based within Civic Offices in Bridgend. The Bridgend commissioned domestic abuse service and the IDVA (Independent Domestic Violence Advocate) and the IDSVAs (Independent Domestic and Sexual Violence Advocate) are also co-located at the Assia Suite. The IDVAs and IDSVAs support high victims of domestic abuse through the MARAC process. The Calan contract provides support to victims that drop-in to the service via civic reception, arrange monthly solicitor (pro-bono) advice sessions for victims, joint assessments with Housing Solutions team, etc.
- 4.69 Emergency accommodation in Bridgend consists of 2 refuges that house eight families. There is also a further five houses and five self-contained flats as part of the move-on accommodation from refuge to independent living.

Modern Slavery / Human Trafficking

- 4.70 Modern slavery is a crime and a violation of fundamental human rights. It takes various forms, such as slavery, servitude, forced and compulsory labour and human trafficking, all of which have in common the deprivation of a person's liberty by another in order to exploit them for personal or commercial gain. Training currently being delivered has been developed to help raise awareness for practitioners, better spot the signs and increase confidence in reporting modern slavery when potential cases are encountered.

5. Effect upon Policy Framework and Procedure Rules

- 5.1 There is no effect upon the Policy Framework and Procedure Rules.

6. Equality Impact Assessment

- 6.1 There are no equality implications arising from this report.

7. Well-being of Future Generations (Wales) Act 2015 Implications

- 7.1 The implementation of the duties and responsibilities under the Social Services and Wellbeing Act (Wales) (SSWBA) 2014, in turn, supports the promotion of two of the seven goals of the Well-Being of Future Generations (Wales) Act 2015 within the County Borough of Bridgend. By promoting an environment that maximises people's physical and mental well-being and by supporting children, young people, adults and their carers and families to fulfil their potential no matter what their circumstances, the wellbeing goals of a Healthier and more equal Bridgend and Wales are supported.
- 7.2 The Wellbeing of Future Generations (Wales) Act 2015 provides the basis for driving a different kind of public service in Wales, with five ways of working to guide how the Authority should work to deliver wellbeing outcomes for people.

The following is a summary to show how the five ways of working to achieve the well-being goals have been considered in this report:

- Long Term – Social Services is led by demand and the SSWBA focusses on wellbeing outcomes for the future. There is a requirement to safeguard and protect both children and adults in the longer term and, as such the Local Authority has acknowledged the need to bring together both the Safeguarding of adults and children as one safeguarding service.
- Prevention – the development of a Multi-Agency Safeguarding Hub will facilitate the bringing together of this service and will enable better sharing of information between agencies at the earliest stage to anticipate safeguarding and child protection at the earliest opportunity.
- Integration – the implementation of the SSWBA requires local authorities to work with partners, to ensure care, support and protection of all and more specifically it's most vulnerable. The report evidences consultation between professionals and partner agencies with this regard and with a specific focus to the safeguarding and protection of people within the Borough of Bridgend.
- Collaboration – This is currently managed in order to provide the best possible intervention for children and people across Bridgend.
- Involvement – the key stakeholders are the people who use children and adults social care services. There is considerable engagement through the inclusion of surveys, stakeholder meetings, feedback forms and the complaints process. The provision of accessible information and advice helps to ensure that the voice of adults, children and young people is heard and responded to.

8. Financial Implications

8.1 There are no direct financial implications linked to this report.

9. Recommendation

9.1 It is recommended that the Committee note the report.

Susan Cooper,
Corporate Director Social Services and Wellbeing
July 2018

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11. Background documents:

None.



WBSAB



WESTERN BAY SAFEGUARDING BOARDS

JOINT ANNUAL PLAN

2018 - 2019

Introduction

On 6th April 2016 the Social Services and Wellbeing Act 2014 will become law and with it Section 134 – 141 (Part 7) of the SSWA 2014 replaces the requirements for Local Safeguarding Children Boards referenced above with new provisions for Safeguarding Boards. The Safeguarding Board (General) (Wales) Regulations 2015 make provisions for the requirements of Safeguarding Boards including the production of an annual business plan. This Business Plan has been developed for both the Western Bay Safeguarding Adults Board and Western Bay Safeguarding Children Board in accordance with the Safeguarding Board (Wales) Regulations 2015.

What is Safeguarding and what does it mean? What is the responsibility of the Board?

Safeguarding Board Objectives

The objectives of a Safeguarding Children Board are:

- a) To protect within its area who are experiencing, or at risk of abuse, neglect or other kinds of harm, and
- b) To prevent children within its area from becoming at risk of abuse, neglect or other kinds of harm.

The objectives of a Safeguarding Adults Board are:

- a. To protect adults within its area who –
 - i. Have needs for care and support (whether or not a local authority is meeting any of those needs), and
 - ii. Are experiencing, or at risk of, abuse or neglect, and
- b. To prevent those adults within its area mentioned above from becoming at risk of abuse or neglect.

There is one set of regulations for the functions and procedures of both Safeguarding Adults Boards and Safeguarding Children Boards in line with Welsh Government's commitment to improving safeguarding arrangements for everyone. This annual plan has been developed in the provides a framework for those improvements and focusses on the strategic priorities set by the Boards.

Core Business

The Boards recognise its functions under Section 139 of the Safeguarding Board Regulations within the Social Services and Wellbeing (Wales) Act 2014 as its core business. Core Business/core functions underpin the effectiveness of a Safeguarding Board and so they are written into each Boards' the Terms of Reference and its management groups and includes the responsibility to make enquiries into organisations and other partnerships in relation to their safeguarding responsibilities. Membership and structures are regularly reviewed and updated within the Safeguarding Board arrangements and work plans for each management group are aligned with this business plan and include core business functions, actions to achieve and success measures to enable us to monitor effectiveness. The management groups' work plans will also include mechanisms on how they will engage and include people who may be affected by their work into the work they are required to do. These plans are regularly reviewed and amended throughout the year and status reports are provided to the Boards on progress.

Members of the Safeguarding Boards

Membership of the Safeguarding Boards is compliant with Chapter two of the Guidance under Part 7 section 139(3) of the Social Services and Wellbeing (Wales) Act 2014. For Western Bay Safeguarding Adults Board the membership and their area of responsibility is set out below:

Organisation	Post	Area of Responsibility	Name
Bridgend County Borough Council	Corporate Director for Social Services & Wellbeing	Chair of WBSAB & Local Authority representative for Bridgend CBC	Susan Cooper
Neath Port Talbot Borough Council	Director of Social Services, Health & Housing	Local Authority representative for Neath Port Talbot CBC	Andrew Jarrett
City & Council of Swansea	Chief Social Services Officer	Local Authority representative for City & Council of Swansea	David Howes
City & Council of Swansea	Head of Adult Services Swansea Council	Adults Services representative & Policy Procedure Practice Management Group representative	Alex Williams
Bridgend County Borough Council	Head of Adult Services Bridgend CBC	Adults Services Bridgend Representative	Jackie Davies

ABMU Health Board	Corporate Lead for Safeguarding & Head/Deputy of Safeguarding Children	Vice Chair & Head of Safeguarding ABMUHB	Cathy Dowling
Public Health Wales	Designated Doctor in Public Health Wales	Public Health Wales representation	Dr Lorna Price
South Wales Police	Superintendent	South Wales Police Public Protection	Claire Evans
Wales Probation Trust NPS	Assistant Chief Executive Head of Swansea, Neath Port Talbot and Bridgend	NPS representative	Eirian Evans
Wales Probation Trust CRC	Probation Service representative	Wales CRC representative	David Bebb
ABMU Health Board Mental Health	Mental Capacity Act and Deprivation of Liberty Safeguards	Representative for IMCA Service	Karen Williams
Swansea Council for Voluntary Services	Support Services Team Leader	Representative for SCVS	Danielle Lock
NPTCBC, BCBC, Swansea Council	Domestic Abuse Co-ordinator	Domestic Abuse Representative	Bethan Lindsay-Gaylard
Secured Estate	Director/ Governor	Parc Prison/ HMP Swansea Secure Estate representative	Lisette Saunders/ Graham Barrett
Care Home Providers	Home Managers/RI's/ Providers/Directors etc	Third Sector representation	Diane Purnell Jaqueline Orrells Chris Rees Christian Heinrich & Inti Zirga

South Wales Police	Independent Protecting Vulnerable Person Manager	Practice Review Management Group representative	Sue Hurley
NPT County Borough Council	Learning, Training & Development Manager	Joint Strategic Training Group representative	Lynne Doyle
Bridgend County Borough Council	Service Manager Safeguarding	Quality & Performance Monitoring Management Group representative	Terri Warrilow

For Western Bay Safeguarding Children Board the membership and their area of responsibility is set out below:

Organisation	Post	Area of Responsibility	Name
NPTCBC	Director of Social Services Health & Housing	Chair & Local authority representative	Andrew Jarrett
South Wales Police (Western BCU)	Superintendent	South Wales Police representative/Vice Chair	Simon Belcher
South Wales Police (Central BCU)	Superintendent	South Wales Police representative	Claire Evans
National Probation Service	Assistant Chief Executive	Probation Service representative	Eirian Evans
Safeguarding Services Public Health Wales	Designated Nurse Child Protection and Looked After Children	Public Health Wales representative	Daphne Rose
NSPCC	Services Manager	Voluntary sector representative	Karen Minton
Barnardo's	Strategic Manager	Voluntary sector representative	Sarah Bowen
CVS	CCoS CVS	Local Voluntary Sector representative across WB	Clare Hopkins

Western Bay Youth Justice and Early Intervention Service	Youth Offending Services Manager	Western Bay Youth Offending services and Quality & Performance Management Group representative	Caroline Dyer
Prison Service	Head of YOI	HMP Parc	Jason Evans
Hillside Secure Unit	Manager	Hillside Secure Centre	Alison Davies
Bridgend Local Authority	Director of Social Services & Lead Director for CYP	Local Authority representative Bridgend CBC	Susan Cooper
Bridgend County Borough Council	Head of Children's Services	Children's Services Representative Bridgend CBC	Laura Kinsey
NPT County Borough Council	Lead Director Children & Young People	Local Authority representative NPTCBC	Aled Evans
NPT County Borough Council	Head of Children and Young People Services	Children's Services Representative NPTCBC	Keri Warren
City & County of Swansea	Chief Officer Social Services	Local Authority representative Swansea Council	Dave Howes
City & County of Swansea	Chief Officer Education	Local Authority representative Swansea Council	Nick Williams / Kathryn Thomas
City & County of Swansea	Head of Child and Family Services	Children's Services representative Swansea Council	Julie Thomas
ABMUHB	Assistant Nurse Director	ABMU Health Board representative	Cathy Dowling
ABMUHB	Assistant Medical Director Primary Care	Health Board Representative – Primary Care	Dr Matt Stevens
Public Health Wales National Rep.	Named Professional Safeguarding Children	PHW representative	Ian Smith
Swansea Domestic Abuse Forum	Domestic Abuse Coordinator	Domestic Abuse Forum: Swansea, NPT and Bridgend representative	Ali Morris

ABMUHB	Lead Nurse Safeguarding Children	Policy, Procedure and Practice Management Group representative	Virginia Hewitt
South Wales Police	Independent Protecting Vulnerable Person Manager	Practice Review Management Group representative	Sue Hurley
NPT County Borough Council	Learning, Training & Development Manager	Joint Strategic Training Group representative	Lynne Doyle

Safeguarding Priority Outcomes 2018/19

Safeguarding Priority 1. SAFEGUARDING PEOPLE FROM EXPLOITATION					
Strategic Outcome: THE WBSBs ARE RESPONDING APPROPRIATELY AND EFFECTIVELY TO THE IMPACTS OF EXPLOITATION					
Priority Objectives:					
<p>1.1 Safeguarding is a priority consideration within the parameters of Human Trafficking and Modern Slavery.</p> <p>1.2 People across the region are aware of the risks identified within County Lines (incl. Cuckooing) and are safeguarded from all aspects of criminal exploitation.</p> <p>1.3 All Children and young people who are subject to or at risk of Child Sexual Exploitation are identified and safeguarded effectively, consistently and at the earliest opportunity</p>					
Priority Objectives	Where are we now?	What improvements are needed to fulfil objectives?	Lead Safeguarding Board	Management Group lead:	By When
1.1 Safeguarding is a priority consideration within the parameters of Human Trafficking and Modern Slavery.	There are tentative links between WBSBs and the Western Bay Anti Human Trafficking Forum. Most First Responders are now aware of their role in the NRM process	Understand the wider impacts and issues the Modern Slavery Act has on Safeguarding.	WBSAB/WBSCB	-	May 2018
		Build data collection and analysis of NRM and MARAC information into Performance Frameworks	WBSAB/WBSCB	Quality & Performance Management Groups	September 2018
		Undertake Audit Safeguarding processes linked to NRM and MARAC information	WBSAB/WBSCB	Quality & Performance Management Grops	January 2019
1.2 People across the region are aware of the risks identified within County Lines (incl. Cuckooing) and are safeguarded from all aspects of criminal exploitation.	Increasing professional awareness resulting in improved recognition; A police poster campaign in	Promote training for staff enabling them to identify indicators of exploitation	WBSAB/WBSCB	Strategic Training Management Group	June 2018
		Develop a public awareness campaign to raise awareness of County lines, criminal		Communication & Engagement Group	September 2018

	hospitals and council buildings is raising public awareness	<p>exploitation, the use of vulnerable people in targeted drug running</p> <p>Develop practice guidance to underpin WG's Handling Individual Cases which identifies pathways (eg Radicalisation, prevent, Chanel) to safeguarding people in specific exploitative situations</p> <p>Include in practice guidance how transition to adulthood is managed for children who are identified as suffering exploitation.</p>	<p>WBSAB</p> <p>WBSAB/WBSCB</p>	<p>Policy Procedure & Practice Management Group</p> <p>Policy Procedure & Practice Management Group</p>	<p>December 2018</p> <p>January 2019</p>
All Children and young people who are subject to or at risk of Child Sexual Exploitation are identified and safeguarded effectively, consistently and at the earliest opportunity	Regular data is collected and analysed for WBSCB. A CSE mispers group meets regularly and makes links with local MASE groups.	Work with Welsh Government in the development of revised guidance for safeguarding children at risk of CSE	WBSCB	Policy Procedure & Practice Management Group	June 2018
		Establish links with specialist providers to capture the experiences from children and young people affected by CSE	WBSCB	Communications and Engagement Group	Sept 2018
		Review the impact of Barnardo's Gwella Project	WBSCB	Policy Procedure Practice Management Group (CSE/MISPERs sub group)	March 2019

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Safeguarding Priority 2. Safeguarding People in Care Settings					
Strategic Outcome: EFFECTIVE QUALITY MONITORING AND ASSURANCE IS IN PLACE TO SAFEGUARD PEOPLE IN CARE SETTINGS					
Priority Objective:					
2.1 All adult's & Children's residential and nursing care homes in the region are compliant with the Regulation and Inspection Act and strive to meet the highest safeguarding standards required to safeguard people's wellbeing					
2.2 There is a consistent approach to commissioning and monitoring arrangements throughout Children's and Adults' residential care settings					
2.3 All contracting and commissioning arrangements include safeguarding standards as a routine requirement					
Priority Objectives	Where are we now?	What improvements are needed to fulfil objectives?	Lead Safeguarding Board	Management Group lead:	By When
2.1 All adult's & Children's residential and nursing care homes in the region are compliant with the Regulation and Inspection Act and strive to meet the highest safeguarding standards required to safeguard people's wellbeing	The regulation and inspection Act comes into force on 2 nd April 2018	Work with Care Inspectorate Wales to understand the level of Care provision available across the region.	WBSAB	-	May 2018
	The WBSBs have not had direct oversight of the numbers of care settings across the region.	Work with the Western Bay Care Homes Sub Group to have oversight on the implementation of actions following the Older People's Commissioner's report – A Place Called Home	WBSAB	Quality & Performance Monitoring Management Group	Ongoing
		Have oversight of the Memorandum of Understanding between SWP (Western BCU) and local care	WBSAB	Quality & Performance Monitoring Management Group	Ongoing

		homes to quality assure its effectiveness Undertake an audit/engagement exercise to audit Wellbeing in Care Settings	WBSAB/WBSCB	Quality & Performance Monitoring Management Groups	January 2019
2.2 There is a consistent approach to commissioning and monitoring arrangements throughout Children's and Adults' residential care settings		Undertake Mapping exercise of the quality monitoring processes across Adults' & Children's' residential Care settings	WBSAB/WBSCB	Q&PMMGs	June 2018
		Identify areas for unification of process in quality monitoring	WBSAB/WBSCB	PPPMGs	June 2018
		Develop a unified process for quality monitoring and Safeguarding Board oversight			December 2018
2.3 All contracting and commissioning arrangements include safeguarding standards as a routine requirement		Develop and Promote WBSBs as a Brand	WBSAB/WBSCB	STMG/Communication and Engagement Group	June 2018
		Develop Practice Guidance for Embedding Safeguarding into Contracting and Commissioning Arrangements	WBSAB	Policy Procedure & Practice Management Group	September 2018
			WBSAB		March 2019

		Develop an implementation plan for new and renewed contracts for audit purposes		Quality & Performance Monitoring Management Group	
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Expenditure:

The Western Bay Safeguarding Boards have held a shared budget for several years and have successfully managed their expenditure without any additional contributions required to support the inclusion of Western Bay Safeguarding Adults Board expenditure. There are two main reasons for this. One is based on the largest expenditure being staff. The Business Management Unit consists of 1 Manager, 2 x Business Coordinators and 1 x administrator. This resource has been effective in managing and coordinating all arrangements for the Safeguarding Boards and its management groups. The other has been the year on year savings from projected CPR/APR expenditure. Pooling a resource of independent reviewers across the region has allowed the Boards to significantly save on expenditure used for commissioning external review writers.

Projected Budget for 2018/19 Is as follows:

Item	Type	Allocated budget
Staff	1 x Board Manager, 2 x Coordinators 1 x Administrator	£142,990
Conferences/Awareness raising	1 x annual conference, 6 x multi agency learning events	£15,000
Practice Reviews	APRs x 7 @ £750 CPRs x 7 @ £750	£10,500
Training	Various	£10000
Admin	Travel, subsistence, mobiles, printing	£5000

	TOTAL:	£183,490
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Collaboration:

The role of collaboration and participation for Safeguarding Boards is twofold. The SSWBA part 7 volume 1 outlines the expectation of Safeguarding Boards to provide children and adults who are, or maybe affected by the exercises of a Safeguarding Board the opportunity to participate in its work function. In addition to this the Safeguarding Boards also have an assurance role in ensuring its' partner agencies are engaging with people and the voice of the adult at risk or child is heard across safeguarding practice. This will inevitably look different in different agencies and so the Boards have a role in continuous audit and review in this area. Additionally the Boards, as part of its' Core Business should ensure that each Management Group work plan includes how they can include the voice of the people their work is likely to affect.

The Western Bay Safeguarding Boards acknowledge the links between these local, regional and national partnerships and the safeguarding themes that run through them. In particular Western Bay Safeguarding Boards will ensure close links are made with each Community Safety Partnership across the region with a strategic focus on Domestic Abuse and the local VAWDASV (Violence Against Women Domestic Abuse and Sexual Violence) strategies. In previous years, the Safeguarding Boards have considered Domestic Abuse as a safeguarding priority and although the topic is not included within this annual plan the Boards are keen to ensure communications between the partnerships are maintained and that safeguarding people at risk of or suffering domestic abuse remains key in the delivery of the strategy.

The Boards must also build relationships and work closely with the other partnerships locally, regionally and nationally to ensure Safeguarding is on everyone's agenda. These include, Public Service Boards, Anti Human Trafficking Groups, Other Safeguarding Boards, National Independent Safeguarding Board and Welsh Government.

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