MINUTES OF A MEETING OF THE SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2
HELD REMOTELY - VIA MICROSOFT TEAMS ON WEDNESDAY, 2 FEBRUARY 2022 AT
09:30

Present

Councillor AJ Williams - Chairperson

S Aspey MC Clarke C L C Davies PA Davies SK Dendy JE Lewis G Thomas KJ Watts

Apologies for Absence

M Hughes, M Jones, MJ Kearn, AA Pucella and DBF White

Officers:

Lucy Beard Scrutiny Officer

Meryl Lawrence Senior Democratic Services Officer - Scrutiny
Claire Marchant Corporate Director Social Services and Wellbeing

Andrew Thomas Group Manager Sports & Physical Activity
Mark Wilkinson Group Manager - Learning Disability

Invitees:

Councillor Huw David Leader

Councillor Jane Gebbie Deputy Leader and Cabinet Member Social

Services and Early Help

Robert Goodwin Locality Manager for Bridgend Mental

Health and Learning Disability Services

Simon Gwynne Partnership Manager HALO Richard Hughes Chief Executive, Awen Trust

Councillor Dhanisha Patel Cabinet Member for Wellbeing and Future

Generations

Scott Rolfe Chief Executive HALO

Kay Baker BAVO

6. DECLARATIONS OF INTEREST

The following Declarations of interests were declared in the report upon Progress in Delivering Priorities for Wellbeing, Leisure and Cultural Services in Bridgend, as follows:

Councillor Janice Lewis declared a personal interest in the report as a user of the Library Service and as a Volunteer helping to run St Brides Minor Community Centre.

Councillor Dhanisha Patel declared a personal interest in the report as a Member of St Brides Minor Community Council.

The Leader, Councillor Huw David declared a personal interest in the report, as the Chair of Cefn Cribwr Community Association.

7. PROGRESS IN DELIVERING PRIORITIES FOR WELLBEING, LEISURE AND CULTURAL SERVICES IN BRIDGEND

The Corporate Director - Social Services and Wellbeing introduced the report and emphasised the importance of Scrutiny considering the report, as leisure and cultural services, and their wellbeing approach in Bridgend had been at the fore of their responses during the past almost two years of the Covid pandemic and needed to continue to be for their responses during the recovery phase over the coming years.

The Group Manager for Prevention and Wellbeing advised the report looked at leisure and cultural opportunities, what had been done and what would be done to improve accessibility, removal of barriers and things that can be developed to support both individual and community wellbeing, linked to Council and Community COVID recovery. He explained they also had representation to show the work that had been progressed with the Third Sector and through their building resilient communities' approaches and where that may be taken in the future. To add to that they had included some of the areas of service that the Prevention and Wellbeing Service directly delivers in terms of active young people programmes, healthy living services and play development.

A Member referred to paragraph 4 of the report and the participation in the learn to swim programmes and asked would this be re-established in 2022, and when that would happen as the report stated they had a twenty-one-month backlog.

The Group Manager for Prevention and Wellbeing explained that the way school swimming was supported within Bridgend was that the investment was delegated to the schools and then the school arranged how they wanted to use that investment to attend those programmes. Regarding the young people who were no longer in primary school and were now attending the secondary school the project needed to move beyond school swimming, and they had to look at more holistic programmes. This included how they target programmes like the free-swimming initiative, where they knew people had barriers such as the cost to learn to swim, and how they make programmes more available to those people who would not be engaging in any other way was potentially a real challenge going forward, but one that needed to be firmly on the radar.

The Partnership Manager for Halo advised that an eighteen-week programme of school swimming had resumed. From January they had an eighteen-week plan for the rest of that year to July of schools going back, which meant that they had 30 different schools back. 118 different groups, so different year groups or different in the same year group going at different times based on the numbers of schools, as there were still restrictions on capacity.

A Member expressed his concern that the swimming pool in Maesteg was closed on a Sunday.

The Partnership Manager for Halo advised several lesson programmes were run on a Saturday in Maesteg and on certain weekends on a Sunday too. He explained that they had historically closed earlier on the basis of capacity, use and demographics, so over the years there had been slightly less programmes in Maesteg based on that usage pattern. Regarding resource element they had challenges with teaching and were running several programmes this year where they were delivering swimming teacher courses and offering that out for a number of partners and to the population in terms of access, so looking for new people to come into their lesson programme and teach as well.

The Group Manager for Prevention and Wellbeing added on a broader context, when everything had been closed and then had been permitted to reopen at different phases and restrictions the position of the Council was to rebuild services from the base. Not everything needed to be exactly as it had been previously, so the opportunities that had been developed around reaching people digitally or through outreach programmes were

in the mix during the recovery period. He advised it was about rebuilding the business from the base progressively and growing the opportunities and maximising the use as they went on that journey.

A Member referred to paragraph 4.7 of the report regarding the Autism Swimming Pilot Programme and the plans to expand the opportunity and asked if there was a timescale on those plans.

The Partnership Manager for Halo advised that another programme would run in February and a Young Person's Active Communities Coordinator had been recruited into the Team to support the delivery of that programme on a more regular basis. The aspiration was therefore to run those programmes on a weekly basis.

A Member referred to paragraph 4.8 the Feel Good for Life Programme which had been supporting people living with dementia or cognitive impairment and asked if there was more scope to engage with people regarding this.

The Partnership Manager for Halo responded that they had submitted an application to develop the Programme across more centres and had also submitted a National Lottery application to support and develop it over five years. He advised that the support that they got from their partners was also important in terms of how they delivered.

The Group Manager for Prevention and Wellbeing added that it was a great example and demonstrated an interesting model of how a number of partners came together to deliver a programme rather than individually.

A Member referred to the Library Service Click and Collect Scheme in paragraph 4.12 and expressed concern about those who were digitally excluded and asked how they could still use their library.

The Chief Executive of Awen advised that click and collect was slightly misleading as it was call and collect, where people could telephone their local library and order the books which could lead to the home delivery service. The home delivery service had gained a lot of plaudits he said throughout the pandemic for the way that it had been able to engage with people who were socially isolated. He assured that there were many avenues to contact the library other than online.

A Member referred to Books on Wheels in paragraph 4.13 of the report and asked how people found out about the service, as they had not seen the scheme publicised and asked if the library buses still went out.

The Chief Executive of Awen explained that there had been a change in service which had been agreed with the Council pre pandemic, which they were hoping to improve and expand upon. With this Home Delivery Service, they were able to reach more people more often and those that really needed the service. He advised that they worked closely with local Community Coordinators, with the Group Manager for Prevention and Wellbeing and his Team and others to try and refer people to the service, as well as promotion to families and others through social media. He advised that they were looking at how people could be more formally referred through the social care system which would increase the number of people who were aware and were able to access the service.

The Group Manager for Prevention and Wellbeing wished to pick up on the digital point and explained that the role of libraries and supporting those that were digitally excluded was a significant issue. One of the bigger discussions going on he advised was how the libraries had always acted as Council information points, supporting people that perhaps

would not go into the council offices, so looking forward there had been discussions on how staff could be trained to have up-to-date information and then being able to support people to access their 'my council' apps.

A Member referred to the delivery service and how people selected what books they wanted. She wondered if they were sent a list of what was available to them or were they chosen on their behalf.

The Chief Executive of Awen explained that one of the things they had found customers liked as part of the collect system was that they could choose their own books, which would be the traditional request system. However, the library staff who knew their customers could pick books on their behalf as they could see what they had read before so there would be no duplications and it was a service people liked.

A Member asked due to the increase in digital demand would they still be retaining paper books and large print books for members of the community who required them.

The Chief Executive of Awen advised that was the largest section of what they provided and although people were accessing their resources in different ways, including books, the more significant investment that they made would be in physical print and it was still the most popular medium of borrowing at that time.

The Leader advised that digital inclusion was important, and an area of success was the work they had done with carers and the work undertaken through schools to ensure none of the children would be digitally excluded. He advised work would continue around reaching out to those digitally excluded people as they recognised it was a constant piece of work.

The Group Manager for Prevention and Wellbeing advised that the investment in recent years into library facilities and resources remained positive. He explained that the things that libraries did were broader than digital and books, in terms of community groups, young family support and homework clubs, so developing libraries into vibrant, engaging spaces for the broader population remained important.

The Chief Executive of Awen advised that they should not underplay the fact that a lot of older people were digitally savvy so as well as making sure people weren't excluded, they also had to make the most of the new technologies and platforms available to them. He explained the wider service being carried out in libraries had been missed by people through the pandemic and as the reported stated Libraries had only been closed for around three months, and they had maintained a service throughout which he believed had been welcomed by many people.

The Corporate Director - Social Services and Wellbeing explained that libraries were Community Information Hubs and not only a place to provide books and reading resources for people. They were the heart of the community and making them and other community facilities vibrant places where people got together and had their need met was important. She advised using digital resources and not being scared of using them with their older population as well as the younger population would enable people to connect. It was an overall strategy and linked with some of the work around Local Area Coordinators, particularly to connect people to what works for them and digital was part but not all of that strategy.

A Member referred to the improvements being made in various libraries, but that Aberkenfig and Sarn Libraries had not been mentioned.

The Group Manager for Prevention and Wellbeing advised that they had aspirations that all assets, whether they be leisure, cultural or community were modern and kept pace with people's needs. Being able to do that all in one stream was a challenge and he thought with the investment they had secured they had done well out of the Welsh Government streams, but it was one project at a time and Aberkenfig had been discussed based on its size, scale and potential to do other things.

The Chief Executive of Awen advised that all the library sites were looked at where investment was concerned. Sarn library was one of the more recent ones to be developed as it had been part of the community centre redevelopment that took place in 2011-12 and had one of the most extensive information technology resources. He explained that they do keep a lookout to see what they could do better and more of to enhance spaces for children and young people as well, which he knew was a priority for them as a Council. There was certainly not a queuing system, and all libraries were looked at on a continuous basis.

A Member referred to paragraph 4.26 in the report and the Pen Pal Scheme and volunteers and asked if all primary schools had been approached or had it just been a select number for a pilot. She thought it would be something that could possibly be rolled out to all schools as it would help with writing and help those who may feel isolated.

The Operations and Partnership Manager, Bridgend Association of Voluntary Organisations (BAVO) advised that it had only been the one school that they had engaged with, as there had been a specific pot of money they had to work with over a period of three to four months. It had been a pilot they had tried and the information in the report contained the outcomes. She advised that it had been a good piece of work but needed capacity to maintain it and also there were safeguarding issues to be managed.

The Group Manager, Prevention and Wellbeing expressed that simple things could go a long way, talking about digital exclusion and trying to develop intergenerational work, they had started an agenda of becoming an age friendly community and looking at how they bring different population groups together and add value, of which this had been a good example. He advised they had tried to get some isolation investment but had not been able to apply that year as Welsh Government had wanted to invest smaller amounts to third sector groups. However, the pilot had something to offer regarding expanding a broader approach to befriending and supporting loneliness.

A Member referred to paragraph 4.22 in the report and asked if the work had been done through BAVO as throughout the pandemic they had been vital in providing volunteers and bringing in volunteers to assist where needed throughout the community.

The Group Manager, Prevention and Wellbeing explained that their partnership and the investment they had managed to secure had supported the Community Navigators and Volunteer Development Roles within BAVO. He advised there had been a strong platform at Bronze Command between Bridgend County Borough Council and BAVO in terms of positions and who was best placed to respond. He advised that BAVO provided the leadership and the resource for what had been intended originally to be a small programme with three hundred beneficiaries but had proved it was able to support high volumes based on Community Connections.

The Operations and Partnership Manager, BAVO gave credit to the staff within the organisation and the Commissioners for allowing them to diversify their services to do what was needed during the pandemic. They were now trying to not just continue delivering what people believed they required, but also trying to support and educate people how they could do it themselves.

The Corporate Director - Social Services and Wellbeing wished to build upon how they move forward together as she believed that the programme, which had been recognised in the evaluations, the initial ambition, resourceful, resilient communities were about supporting communities and individuals to sustainably support their own wellbeing. She advised they were now using some of their social care recovery funding and trying to plan through the new Regional Integration Funding going into next year, how they support communities and individuals to recover and get back to where those original intentions of the programme were.

A Member asked if all the community centres in the borough were now up and running and open for people to use.

The Group Manager, Prevention and Wellbeing explained it was a mixed picture both now and during the pandemic, he thought there were community centres that thrived and supported the broad range of essential public services during the pandemic and then there were other centres that had different challenges. He explained that one of the things they were looking at was to progressively look at equipping community centres digitally to connect with each other, and with virtual village hall concepts and also support hybrid office for those that can or cannot always physically attend based on vulnerability. It may connect with the Carbon Neutral Agenda in the future where people do not always need to attend a centralised location, but that would not be a quick fix.

The Cabinet Member for Social Services and Early Help advised that at her community centre the finance had been difficult as its income was not as much as pre pandemic, but fortunately they had a BAVO connector working out of their community centre, who provided information, help, support, guidance, and advice in relation to any grant applications they were making. The biggest challenge was the constant changes as they did not know what service provision they were going to be able to provide as regulations had kept changing. She was aware of other community centres that had not reopened yet which was sad as each community needs a community centre, as a central hub.

The Operations and Partnership Manager, BAVO advised that did seem to be the pattern across the Borough, with BAVO supporting some Centres individually in different ways. There was a need for the support going forward, but not a one size fits all approach, it was about individual centres being able to access the funding needed to take forward what would be beneficial within their area.

The Leader agreed that the experience was different across the County Borough and there had been an increase in activity due to people being keen to get back to personal, face to face contact. He advised they also continued to see new initiatives that could provide additional use, although he pointed out that some community centres were still not available as they had been used as a testing centre for Covid. He advised community centres that were struggling to get in touch with BAVO and the Authority, as they recognised their importance.

A Member asked if there had been an increase in young carers since the pandemic.

The Corporate Director - Social Services and Wellbeing explained she was not able to give an exact figure at that time, but they were doing a lot of work, with one of the key challenges to appropriately addressing the needs of young carers was identification. The work they had been doing through the Young Carers Card and the work they needed to be doing going forward with schools, would be fundamental in terms of that early identification so they could put the right care and support, and services needed in place.

The Cabinet Member for Social Services and Early Help advised it was really difficult as young people did not identify themselves as young carers. She asked Members that if they see a young carer in their midst, it was useful to be able to identify and ensure that they have the appropriate support.

The Group Manager, Prevention and Wellbeing added that beyond the social work practice aspects the Prevention Team was trying to proactively engage particularly with young people who had caring responsibilities. He advised that two programmes had been run during the year, using the Youth Consultation Group of people to look at the Young Carers Card and to introduce the new Welsh Government approach to young carers identification and what partners could do to unlock for them in terms of social opportunities or engagements in different things that were meaningful to them. Through their work with schools, they had a number of network groups so they had been engaging with 204 young carers to identify what the network would look like, how they would propose it would run and what it focussed on.

A Member referred to sports and physical activities in the report for adolescents and asked what about the younger children to make sure that they were supported in being fit and active and catch up on potential sports that they had missed.

The Cabinet Member for Future Generations and Wellbeing explained she had announced the Winter of Wellbeing, which was one of the programmes they had put in place. She advised that they were working with their partners that had helped deliver the Summer of Fun Programme that had been put in place to try and help motivate young people to get out, be active and reintegrate into society.

The Group Manager, Prevention and Wellbeing advised in terms of the Winter of Wellbeing Programme, the schools had also been given direct investment, with recognition across the county that young people had been universally challenged by the pandemic. He added that going forward most people would be hoping for more face-to-face opportunities and to see this continue to grow. He advised their investment from Sport Wales continued which was something they could share with the Committee regarding what that might look like going forward for 2022 onwards.

A Member referred to paragraph 8 of the report and the risk identified in terms of sustainability of the various initiatives, schemes and deliveries that were going forward and was conscious that it took time to develop new initiatives. He asked what the challenges were to match the aspirations of Halo and Awen in terms of developing and delivery, and what the issues were around staff job security and developing long-term strategy. Lastly, he asked what was the percentage of the business turnover that was relatively short- or medium-term grant dependent.

The Group Manager, Prevention and Wellbeing advised he would defer to his colleagues that came from a social enterprise background, which was really the underlying philosophy of some of those things where you test ideas, innovate, scale up and then look to embed things that work on a more semi commercial footing, as the risks being identified were core and the Third Sector worked by resourcing, building, and sustaining services. He advised that they were starting from a new place, they had been building networks of people and were looking to co-produce with the right population groups, which would really make a difference, looking more at how they could scale up and mainstream some of those things. He advised that picking which were the most important items and looking at things that gave the right time and resource to develop more strength and intelligence about programmes was important. He explained that the way that Bridgend, not just in the Third Sector work but where there would be anti-poverty investment was important, pooled across partners and programmes rather than being distributed in smaller aspects. He explained in terms of scaling up they should be

looking at their core resources and where things made more sense, challenging what they had always done that made less sense and do something new, a cultural shift and in doing this, doing it well and cheaper, and getting a better long-term outcome for people.

The Chief Executive Officer of Halo explained that they try to look at all the risks with a new initiative and the issue of long-term funding resonates. They were not keen on getting into pilots where they thought there was not going to be any continuity, so try to assess all of the risks as much as they can. He explained that as Halo was a social enterprise managing the leisure portfolio, the commercial aspects with the community aspects of the business were slightly different in that a large amount of the revenue that was generated, that gets reinvested was from the communities and the programmes that they run. He explained the challenges that they face over the next twelve to eighteen months were going through the recovery trying to predict the response from communities. He advised one of the opportunities that did stand out was those particular communities that were most in need and may well resonate across all the funding landscapes to attract additional funding, which they had seen some examples of over the past eighteen months.

The Partnership Manager of Halo advised the other element was that they had a fiveyear partnership plan that they worked towards which was made up of all the key documentation from Welsh Government and also Bridgend County Borough Council linked into the key objectives, into the sustainability of the facilities and they then work on those in terms of how they develop their plans and programmes. He advised they work in partnership and were doing so to have the best benefit for those in the community, working together to combat the challenges that they all face financially.

The Member acknowledged that from the response to his questions it seemed that the risk was well managed and asked what level was the risk

The Chief Executive of Awen explained they took a deliberate strategy when it came to financial planning to try and not rely on grant income to sustain their core services, so that was a relatively low risk. He advised that the longer-term risk was if Central Government funds dried up for capital schemes e.g., to keep maintaining venues, but at that time after a decade of austerity things were looking bright to that effect. He explained that the report was around the contribution of what they contributed to health and wellbeing and the brave decision to stop doing some of the traditional things, but also the shift in funding from health and social care into the community upstream in order to try and prevent people from needing formal services.

The Chairperson advised that there were no further questions from Members of the Committee for the Invitees for this report, thanked the Invitees for their attendance and advised that any Invitees not requested to attend for the next report may leave the meeting.

RESOLVED: That having regard to consideration of the content of the

report and the responses to the questions asked, the

Committee endorsed the report.

8. STRATEGIC DEVELOPMENTS TO MENTAL HEALTH SERVICES

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse introduced the report, which referred to the strategic document that they used as the point of reference which is the Mental Health Delivery Plan which was reviewed in 2019 due to the pandemic. He explained that the report contained a number of overarching themes and a number of priorities which applied to both adults and children mental

health services. Those priorities guided them in how they delivered and developed the Mental Health Services in Bridgend. He advised the report moved on to an overview of the Community Mental Health Services and referred to the Operating Group, which was a group of senior managers from the Council and from Cwm Taf delivery unit which met every month to review the operating model, talk about developments in services and planning for future developments. He concluded that the report also talked about some of the work they had done with the Voluntary Sector, in particular the Wellbeing Retreat developed in 2020 particularly from mental health matters, the service had been in place for just over a year.

A Member referred to paragraphs 3.5 and 4.2 of the report where it stated the impact on mental health as a result of the pandemic had been evident during 2021, affecting the number and type of referrals to services and had almost doubled in 2021 from the level in 2020. She asked if they had an example of what the actual figures were and how many referrals they were looking at.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse explained it had doubled they thought because of the pandemic and the report gave a scale, and he could provide actual accurate figures following the meeting.

A Member referred to paragraph 4.2 and most referrals coming from the Police and asked what number of referrals they received from concerned neighbours or the public where there were aware that someone was on their own or they were concerned for them generally.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse advised that it was not a category in itself, however the Police referrals come mostly from them being called out to incidents in the community, which could have been reported by a neighbour. Once the Police had dealt with the situation, they would complete a referral form from them, but the identity of the person who contacted the police would not be shown.

The Cwm Taf Morgannwg University Health Board (CTM UHB) Service Group Manager replied that the pattern of referrals they had seen had been a growth in Tier Zero and Primary Care, but the number of people with serious mental health concerns had remained quite constant in terms of the numbers, which was evidenced by the number of people who had been detained under the Mental Health Act, which had not been significantly different to before the pandemic.

A Member commented on the alteration of the operating model to change methods of contact from face to face to phone and online contact and asked how they dealt with this as it can be difficult to ascertain how someone is feeling without seeing them, and also asked what about the digitally excluded without digital access digitally or via a telephone.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse explained that they had continued to see people but met them outside, so although regular contact with people had been done via the phone or digitally, if staff felt they were not satisfied with the phone or digital conversation and needed more information, they were able to meet following a process of risk assessment for every visit that they did and using personal protective equipment (PPE) and social distancing

A Member asked about the approach for those who appeared homeless and with mental health issues.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse advised they worked closely with the Wallich, a voluntary sector charity in Bridgend that assists homeless people. They would make a referral into mental health services it they thought it appropriate, and they would go wherever that person was and have a discussion and meet again, following a risk assessment process, using PPE and social distancing. He advised Princess of Wales Hospital had a single point of access, which provided an emergency response to people where they might be in the community, and they could either present at the hospital, or they may be brought there by the Police if on the street and in distress. There were different ways they would through their network of contacts in the Voluntary Sector and between themselves, people would be referred to the right place.

The CTM UHB Service Group Manager added that they had kept that part of their service open, which was a good service and one that was unique to Bridgend in the Health Board region. He advised it gave people some focused access to mental health services where they did not have to go through their GP or to Accident and Emergency. He continued that for people who were homeless, it was more difficult but supported by social care colleagues or people in the community, they could be referred with help.

A Member referred to paragraph 4.3 of the report, the Approved Mental Health Professional Hub which stated there had been a sharp increase in 2020, 117% from 18 to 39 people detained and an increase in the number of new people not previously known to mental health services and asked if this had led to a lack of beds or whether Covid had impacted on capacity in hospitals.

The CTM UHB Service Group Manager advised they had kept inpatient services open throughout the pandemic and had been able to admit all patients who needed to be admitted, and clinical colleagues had made decisions around planned discharge for people who they could discharge in a safe way and be supported at home, so they had been okay in terms of capacity for their inpatient units. There had been some issues around discharging people in their older people services but even there they had some spare capacity and had not been overwhelmed in the same way that other services had.

A Member referred to paragraph 4.4 in the report and the increase in the number of young people on the autistic spectrum being referred and asked how these referrals were made to the community mental health teams.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse explained that the bulk of referrals to the community mental health teams are made through the GP. So, people would go to their GP, and they would make a call on whether they refer onto a community mental health team, one of the prevention and wellbeing services or social prescribing into another service. He added that for a lot of the young people they go form child and adolescent mental health services into adult mental health services as they ASD became more apparent, as they became teenagers and young adults.

THE CTM UHB Service Group Manager explained the community mental health teams are in their secondary care service and hospital wards in the community. He advised they provide care for people with complex need and are all care coordinated so they would have an identified nurse or social worker to provide a treatment plan for them and update that with them. He advised they had been able to allocate care coordinators to all their patients who had been referred in and using the risk assessment process to maintain contact with them face to face.

A Member asked if they had seen any delays in referrals due to the potential problems with getting a GP appointment for individuals to be seen physically by their GP when they were doing online referrals.

The CTM UHB Service Group Manager advised that inevitably the pandemic had affected General Practice which impacted on the number of referrals going through the system and they were now seeing this rising quite quickly as GPs went back to a more usual way of working.

A Member asked how an individual would find out about the different groups available to them to access.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse explained that each of those groups would advertise in their own specific way and would have posters and leaflets available in the area in which they operated or in the local community centre. Workers in the assisted recovery in the Community Team and in their Wellbeing Retreat, would also all have information about how to access these services in the community. There were a number of different routes and the single points of access mentioned would also have information and be able to signpost people to services.

The CTM UHB Service Group Manager advised that they could always do more to publicise their services and how to get to them and thought well targeted posters could be helpful.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse added that there were a number of online routes as well for people who had digital access, via the Council website and the Community Coordinators had a website, but the challenge for them was to reach people without digital access and get posters, leaflets, and information in places where they were likely to see them.

The Member commented that some people may not look digitally and not realise they had a problem until they saw something that could signpost them.

The Group Manager, Learning Disabilities, Mental Health and Substance Misuse agreed that coming out the pandemic they needed to think about how to widen their range of providing information and advice.

The Cabinet Member for Social Services and Early Help advised she and the Cabinet Member for Wellbeing and Future Generations had spoken to a Special Advisor from Welsh Government and part of that discussion had been about the distribution of mental health provision and how they were going to make it more public. There was some planning work going on around that, and an opportunity for the Officers to be involved. She stated that there were not enough practitioners, and they could not appoint to positions and the importance of getting people into university taking up the qualifications to be lead practitioners. She added that they had a good provision in their schools as well, so young people were further advised in their education provision.

The Chairperson advised that there were no further questions from Members of the Committee for the Invitees for this report, thanked the Invitees for their attendance and advised that they may leave the meeting.

RESOLVED: That having regard to consideration of the content of the

report and the responses to the questions asked, the

Committee endorsed the report.

9. NOMINATION TO THE PUBLIC SERVICE BOARD SCRUTINY PANEL

The Senior Democratic Services Officer - Scrutiny presented a report requesting the Committee to nominate one Member to sit on the Public Service Board Scrutiny Panel.

The Chairperson invited nominations, following which it was

RESOLVED: That Councillor Amanda Williams be nominated by the

Committee to sit on the Public Service Board Scrutiny

Panel.

10. **URGENT ITEMS**

None