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Bridgend County Borough Council



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Dyddiad/Date: Friday, 2 December 2022

Dear Councillor,

SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

A meeting of the Subject Overview and Scrutiny Committee 2 will be held hybrid in the Council Chamber, Civic Offices, Angel Street, Bridgend / Remotely via MS Teams on **Thursday, 8 December 2022 at 10:00.**

AGENDA

1. Apologies for Absence
To receive apologies for absence from Members.
2. Declarations of Interest
To receive declarations of personal and prejudicial interest (if any) from Members/Officers in accordance with the provisions of the Members Code of Conduct adopted by Council from 1 September 2008 (including whipping declarations)
3. Update on the Care Inspectorate Wales Inspections of Bridgend County Borough Council's Regulated Services In Adult Social Care For 2022 3 - 14
Invitees

Councillor Jane Gebbie - Deputy Leader of Council and Cabinet Member for Social Services and Early Help

Claire Marchant - Corporate Director - Social Services and Wellbeing
Jacqueline Davies - Head of Adult Social Care
Carol Owen - Provider Service Manager - Support at Home/Accommodation Services
Jane Lewis - Group Manager – Direct Care Provider Services
4. Annual Report - Safeguarding of Children and Adults 15 - 52
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Councillor Jane Gebbie - Deputy Leader of Council and Cabinet Member for Social Services and Early Help

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Jacqueline Davies - Head of Adult Social Care

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Laura Kinsey - Head of Children's Social Care
Raeanna Grainger – Group Manager, IAA & Safeguarding
Terri Warrilow - Safeguarding and Secure Estate Manager

5. Conclusions/Recommendations

6. Forward Work Programme Update

53 - 64

7. Urgent Items

To consider any item(s) of business in respect of which notice has been given in accordance with Part 4 (paragraph 4) of the Council Procedure Rules and which the person presiding at the meeting is of the opinion should by reason of special circumstances be transacted at the meeting as a matter of urgency.

Note: This will be a hybrid meeting and the meeting will be recorded for subsequent transmission via the Council's internet site which will be available as soon as practicable after the meeting. If you have any queries regarding this, please contact cabinet_committee@bridgend.gov.uk or tel. 01656 643147 / 643148.

Yours faithfully

K Watson

Chief Officer, Legal and Regulatory Services, HR and Corporate Policy

Councillors:

S Aspey
F D Bletsoe
E L P Caparros
P Davies

Councillors

P Ford
D M Hughes
M Lewis
J Llewellyn-Hopkins

Councillors

RL Penhale-Thomas
A Wathan
AJ Williams
R Williams

BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

8 DECEMBER 2022

REPORT OF THE CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING

UPDATE ON THE CARE INSPECTORATE WALES INSPECTIONS OF BRIDGEND COUNTY BOROUGH COUNCIL'S REGULATED SERVICES IN ADULT SOCIAL CARE FOR 2022

1. Purpose of report

1.1 The purpose of this report is to provide the Committee with the outcome of the Care Inspectorate Wales (CIW) Inspections of Bridgend County Borough Council's (BCBC) Regulated Services in Adult Social Care during 2022. This report relates to inspection activity detailed below:

- Ty Ynysawdre Extra Care (Residential Provision) – 13th January 2022
- Ty Llwynderw Extra Care (Residential Provision) – 9th March 2022
- Ty Cwm Ogwr Residential Home for Older People – 28th June 2022
- Breakaway Short Stay Service – 14th September 2022
- Bryn y Cae Residential Services for Older People – 7th October 2022

2. Connection to corporate well-being objectives / other corporate priorities

2.1 This report assists in the achievement of the following corporate well-being objectives under the **Well-being of Future Generations (Wales) Act 2015**:

- **Supporting a successful sustainable economy** – taking steps to make the county borough a great place to do business, for people to live, work, study and visit, and to ensure that our schools are focussed on raising the skills, qualifications and ambitions for all people in the county borough.
- **Helping people and communities to be more healthy and resilient** - taking steps to reduce or prevent people from becoming vulnerable or dependent on the Council and its services. Supporting individuals and communities to build resilience, and enable them to develop solutions to have active, healthy and independent lives.

3. Background

3.1 The inspections were conducted in line with the CIW Inspection Framework for accommodation-based and domiciliary support services, to evaluate the service's adherence to legislative and regulatory requirements, principally the Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 and the meeting of conditions of registration and the Statement of Purpose.

The inspections also evaluate the services' ability to provide the Welsh Language active offer. In doing so, CIW are aiming to ensure that people using the services are supported to achieve the best possible outcomes, are not placed at risk and do not experience harm. The inspections are undertaken in consideration of four core themes:

- Wellbeing;
- Care and Support;
- Environment and;
- Leadership and Management

and the reports are presented with a short summary, followed by findings under these core themes.

- 3.2 Ty Ynysawdre, Ty Llwynderw, Ty Cwm Ogwr and Bryn y Cae provide support to adults in the main over 65 years of age in a residential care home setting.

Breakaway provides short stay for adults aged 18 years and over with a range of needs including learning disabilities, Autism Spectrum Disorder (ASD) physical disabilities and complex needs in a residential setting.

The inspection process considers the wellbeing of individuals receiving care and support, the quality of care and support provided to individuals and the leadership and management of the service, including the organisational arrangements for the provision of care and support.

- 3.3 During the inspection, the inspectors review a range of information including policies, Statements of Purpose, written guides, complaints information, incident reports, supervision data, training data, safeguarding referrals and quality assurance reports. The inspector may ask for this information to be provided electronically and uploaded onto the secure portal, CIW Online. The Inspectors aim to engage with individuals in receipt of care and support and their families to gather first hand feedback about the services they receive.
- 3.4 All reports are initially received prior to publication from CIW along with an Inspection Response Form, which can be used to comment on the factual accuracy or the fairness and proportionality of findings within the reports.
- 3.5 There is a requirement under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA) to have a nominated Responsible Individual (RI) which for these services is the Head of Adult Social Care. The RI is accountable for the provision of care and support and is required to have oversight of the running of the service. In addition, there are also Registered Managers (RM) in post, who are suitably qualified and registered with Social Care Wales as required under RISCA.

4. Current situation/proposal

- 4.1 The reports have identified that the standard of care and support provided across the services is of a generally good standard. Key strengths include the relationships between staff and individuals receiving care and support; choice of food and positive

mealtime experiences; the provision of activities; individuals are happy with their care and support and their needs are well met.

4.2 There are however a number of areas for improvement identified within the reports and some have now been identified as Priority Action Notices, which will need to be addressed. One of the key themes where improvement is needed is in relation to Regulation 12 (Policies and Procedures). There is an action plan in relation to this area and the Directorate has recently engaged a Policy Officer to urgently progress this work for both Adults and Children services.

4.3 Key inspection finding for Ty Ynysawdre:

The report identified that people live in a warm and friendly environment which is clean and well maintained. The staff know the individuals and encourage them to engage with others and to make choices about their daily routines. Personal plans and risk assessments are in place and are reviewed regularly. Staff receive regular supervision and are given opportunities to attend training as required. The people living at the home give positive feedback about the services provided. There is good management oversight and governance of the service.

- Wellbeing – People are supported to have choice and control over their daily routines and interactions. Care plans and files are well maintained, and detailed shift handovers ensure up to date knowledge of people’s needs. The home is secure, and people are safeguarded. There are good links to other professionals such as healthcare. People are comfortable in the environment and there is a good variety of activities available. The décor is personalised with people’s belongings.
- Care and Support – Individuals and their families are happy with the service provided and there is a warm and friendly atmosphere. The service supports people to maintain their health and there are good links with the GP surgery and community nurses. The administration and recording of medication is good and had improved since the last inspection. Individuals are properly assessed before being accommodated at the service to ensure that it can meet their needs. Personal plans contain enough information and have improved since the last inspection, although they could be more detailed. Staff regularly check on the safety of individuals throughout the night and offer care and support to those who are awake.
- Environment – The home is clean, well maintained and secure. There is a buzzer system to enter the building and at the time of the inspection COVID-19 restrictions were in place for visitors to ensure that the number of people in the building were properly controlled. Staff were wearing appropriate personal protective equipment (PPE) and were using it correctly. Health and safety compliance is managed by the building owner, Linc, and all checks were up to date. People have personal evacuation plans to be used in the event of an emergency. Hazardous substances are stored securely.
- Leadership and Management – There is a clear management structure in place and staff are supportive of the leadership of the service. Family members find the manager and care staff approachable and helpful. There are sufficient staff deployed at the service and care is delivered in a timely manner. Staff are

appropriately recruited, vetted and trained. Staff are supervised and appraised regularly. The service guide and statement of purpose were available and are up to date. The policies most relevant to the service were separated from the corporate policies for ease of reference and this was an improvement from the previous inspection. A medication policy is still not available as a new policy is under joint development with the health board, but medication procedures were available and staff undertake annual competency checks. There are systems in place to monitor the quality of care provided and there are good governance arrangements in place with the RI.

- The report for Ty Ynysawdre did not identify any Priority Action Notices or Areas for Improvement and noted that previous non-compliance with Regulation 12 (Policies and Procedures), Regulation 15 (Personal Plans) and regulation 58 (Medicines) had been achieved.

4.4 Key Inspection findings for Ty Llwynderw:

The report identified that people live in a warm and friendly environment which is clean and well maintained. The staff know the individuals and make them feel comfortable and happy. Personal plans and risk assessments are in place and are reviewed regularly. Staff receive regular supervision, but there is not full compliance with mandatory training. The people living at the home give positive feedback about the services provided. There is good management oversight and governance of the service. There is one person living at the home who is a first language Welsh speaker and some staff are able to speak Welsh fluently to chat with them. Other staff use incidental Welsh when they can. This service is working towards providing an 'Active Offer' of the Welsh Language.

- Wellbeing – People are supported to make choices about their daily routines and staff are familiar with their likes and dislikes. There are a good variety of activities available, and people are supported to take part or spend time alone as suits them. People are supported to maintain their health and there are good links with GP surgeries, community nurses and other allied health professionals. There are systems in place to safeguard people and risk assessments are available in care plans but recording of reviews should be included on the risk assessments. Policies are in place, but some staff need to refresh their safeguarding training to ensure up to date knowledge.
- Care and Support – The staff encourage individuals to engage in activities and to develop relationships with others. There were warm interactions between staff and individuals at the services and good feedback was received from a visiting professional. Personal plans provide staff with the information they need to provide people with the appropriate care and support and are reviewed regularly. Management and staff communicate well and there are detailed shift handovers. Part of a medication round was observed and it was noted that staff were competent in the administration. People have choice of their meals and any dietary requirements and preferences are catered for.
- Environment – The home is secure and well maintained and promotes achievement of people's outcomes. An individual commented "I'm living in the lap of luxury here".

The home is well equipped and has a spa room and spacious communal areas and bedrooms. The wider complex offers access to a salon and restaurant. Health and safety compliance is managed by the building owner, Linc, and all checks were up to date. People have personal evacuation plans to be used in the event of an emergency. Hazardous substances are stored securely.

- Leadership and Management – There is a clear management structure in place and staff are supportive of the leadership of the service. Staff are appropriately recruited and vetted but must ensure that refreshers in core training such as manual handling, safeguarding, fire training and medication administration are completed. Staff are supervised and appraised regularly. There are sufficient staff deployed at the service and care is delivered in an unhurried manner. There are relevant policies and procedures on site to guide staff. A medication policy is still not available as a new policy is under joint development with the health board.
- The report for Ty Llwynderw did not identify any Priority Action Notices and noted that previous non-compliance with Regulation 15 (Personal Plans) had been achieved. It did however identify a new area for improvement being:-

Area for improvement – Ty LLwynderw	
Regulation	Summary
36	Care staff need to be up to date in mandatory training in order to provide the best possible care.

- A training programme is in place to address this improvement.

4.5 Key inspection findings for Ty Cwm Ogwr:

The report identified that the individuals accommodated at the service are happy with the care and support that they receive. Positive relationships between individuals and staff were observed with staff having a good understanding of the needs of the people that they support. Care needs of individuals are given in personal plans, although they could be further developed to ensure that they are more person centred. People are supported to engage in activities which are well tailored to meet their needs. Meals are varied and people are encouraged to participate in mealtimes in the communal dining areas but do have the choice to eat in their preferred location. The inspection report praised the administration of medication and the infection control procedures at the service. Areas for improvement include strengthening of the governance and quality assurance process, personal plans, staff supervision and training, the service guide, and the availability of policies and procedures. The service provides an ‘Active Offer’ of the Welsh Language.

- Wellbeing - People live in suitable and safe accommodation which supports and encourages well-being. They speak highly of the staff and look happy and relaxed in their company. People enjoy a good variety of food and activities. Staff are kind and attentive. There are good links with the GP surgery and community nurses. Individuals’ rooms are suitably furnished and personalised. The environment is safe and compliant with health and safety requirements.

- Care and Support - People are supported with their physical, mental health and emotional well-being. Staff know the people they support well. Staffing levels are consistent in order to meet the care and support needs of the individual accommodated. Individuals experience warmth and kindness and the rapport between individuals and staff is a positive factor. Individuals are safeguarded and staff respond well to their needs. Medication records were good, but the policy is not in line with current guidance.
- Environment - The home is clean, comfortable and homely. Communal areas are well utilised and give opportunities for social interaction. The building is well maintained and there is evidence of good practice in terms of health and safety. Some signage is provided in both Welsh and English. There were good standards of hygiene and infection prevention and control.
- Leadership and Management: The service has a clear management structure, but aspects of management oversight requires development. Quality assurance systems need strengthening and notifications to the service regulator need to be made consistently. Policies and procedures need to be in place and communicated to staff. The service has a clear vision and ethos and its aims, values and delivery of care and support are set out in the statement of purpose. The recruitment process meets regulatory requirements and staff receive an induction, but improvements are needed to ensure staff are up to date with core training. Supervision and annual appraisal records have not been kept up to date so it is unclear what activity has taken place. Staff are supportive of each other and of management. There was no service guide available for individuals and their families.
- The report for Ty Cwm Ogwr identified four Priority Action Notices and two areas where improvement is required these being:-

Priority Action Notices – Ty Cwm Ogwr	
Regulation	Summary
80	The responsible individual must prepare a report to the service provider including an assessment of the standards of care and support and recommendations for improvement at the service.
60	The service provider must notify CIW of events specified under Part 1 Schedule 3.
12	The service provider must ensure appropriate policies and procedures are in place and that these are kept up to date.
19	The service provider must ensure the written guide is dated, reviewed and updated as needed. It also needs to include information about how to make a complaint and the availability of advocacy support.

- Regulation, 80, 60 and 19 have all now been completed. In terms of Regulation 12 in Adults Social Care, an action plan is in place and a recently appointed Policy Officer is working towards meeting this regulatory requirement.

Areas for improvement – Ty Cwm Ogwr	
Regulation	Summary
15	Personal plans need to be updated to accurately reflect people's care and support needs and mitigate risk.
36	The service has not ensured care staff have received supervision in line with their statement of purpose and completed training as per the training matrix.

- Regulation 15 has been actioned and the supervision element of Regulation 36 has been actioned and a training programme is in place to address the training element of Regulation 36.

4.6 Key inspection findings for Breakaway:

The atmosphere at the home is relaxed and friendly and staff support people to have a choice in their daily routines. The service is working to provide more flexibility to meet people's needs more closely. Personal plans detail people's wishes and their care and support needs. There is access to other health and social care professionals. Staff are appropriately trained and supervised. The RI has good oversight of the service and quality assurance activity is up to date. Policies and procedures have not been updated as required.

- Wellbeing – People are supported to have control of their daily routines and can ask for their preferred foods and to stay in their preferred rooms where possible. People who are staying in an emergency are greeted warmly and staff strive to quickly learn about their preferences. There are systems in place to safeguard people and risk assessments are included in peoples' files. Staff are trained in safeguarding and there is a policy in place for guidance. There is appropriate equipment in place to meet peoples' needs and it is all well maintained. There is good oversight of the quality of care and support provided.
- Care and Support – Personal plans are person centred and provide an accurate plan for how care should be provided. Risk assessments are in place. People are supported to maintain their health and the service works alongside a multidisciplinary team of health professionals to meet specific needs of individuals. The medication practice required some improvement and there is no current policy in place. People bring just enough medication for their stay and this is booked in by care staff. The service promoted infection control practices, however there is no current policy in place to support and guide staff. Management consult with Public Health Wales (PHW) for latest COVID-19 guidance and specific questions. The home environment was clean and tidy. Temperature checks continue to be completed on entry to the home and anyone with cold like symptoms are asked to

test for COVID-19 before coming to the service. Face masks are worn in enclosed spaces or when providing close care.

- Environment – The environment promotes achievement of people’s personal outcomes and is well maintained. Personal evacuation plans are in place in the case of an emergency. There are communal and private areas so individuals can choose to be in the company of others or alone. The outdoor space is pleasant and safe. There is evidence of compliance with health and safety requirements.
- Leadership and Management – The statement of purpose and service guide were available and both had been updated since the previous inspection to better reflect the service being provided. Management has good communication with individuals’ families and care managers. The deployment of staff at the service is sufficient and staff are well trained. Staff work across Breakaway and sister services to provide a tailored and flexible service. Staff are supervised by their manager at their usual service and this can be checked by the Breakaway manager. There are arrangements in place for the effective oversight of the service. The manager audits the respite stay summary at the end of each person’s stay to identify if any referrals need to be made or care documentation updated. The RI visits the service at least every three months and compiles a report on the quality of care being provided. Policies such as infection control, whistleblowing, medication and health and safety remain out of date.
- The report for Breakaway identified one Priority Action Notice but noted that previous non-compliance with Regulation 36 (Supporting and developing staff / Supervision) had been achieved. The Priority Action Notice is: -

Priority Action Notice - Breakaway	
Regulation	Summary
12	The service provider must ensure appropriate policies and procedures are in place and that these are appropriate to people at the service and kept up to date.

- In terms of Regulation 12 in Adults Social Care, an action plan is in place and a recently appointed Policy Officer is working towards meeting this regulatory requirement.

4.7 Key inspection findings for Bryn y Cae:

The RI has good oversight of the service and the service manager is registered with Social Care Wales (SCW). The support is provided in a warm and friendly environment. The premises are safe and secure with spacious indoor and outdoor areas. Staff know the individuals at the service well and the care files detail how people like their needs to be met. There are varied activities and projects to meet people’s physical and emotional wellbeing needs. Staff feel supported and are receiving regular supervision and training. Policies continue to be out of date or absent which was also identified at the previous inspection. The service provides an ‘Active Offer’ of the Welsh language.

- Wellbeing – People are supported to have control over their lives and personal plans are clear and regularly reviewed. The statement of purpose outlines the service provided and how to raise a complaint, although there have not been any in the period since the previous inspection. There are good systems in place to promote physical and emotional health and there is good access to healthcare as required for each individual. The reablement service has access to allied healthcare professionals such as Occupational Therapists and Physiotherapists. There is good access to a varied selection of nutritious meals and snacks. There is a focus on safeguarding people and there is a policy in place, with staff understanding reporting requirements. Interaction between staff and individuals is warm, friendly and familiar and people are supported to enjoy health relationships with others. There are no restrictions on visitors and people are also supported to maintain contact with loved ones on telephone calls and digital platforms. The home is safe and secure. Individuals’ communications needs are considered and the service provides the Welsh Active Offer.
- Care and Support – The service does consider a wide range of views and information to confirm it can meet individuals’ needs and outcomes, although there continues to be no admissions policy, which was identified at the previous inspection. The manager does however complete a pre-admission assessment and these were evident on care files. Care plans are accurate and regularly reviewed enabling staff to provide a good standard of care. Staff are familiar with individuals and one person described the service as “outstanding”. There are a good range of meaningful activities available and there is plenty of food choice to meet any dietary requirements. The interactions between staff and individuals were positive and staff consider people’s communication needs. The medication policy is out of date, although there are protocols and arrangements in place for the safe and appropriate management of medication. The infection control policy is significantly out of date. PHW guidance and risk assessments are in place to prevent infection including COVID-19. Staff were observed appropriately using PPE and other preventative measures such as additional cleaning were also observed.
- Environment – The home is accessible and safe with appropriate security measures in place. The environment is warm and welcoming, spacious and odour free. The building is homely with personalisation throughout. There is a maintenance staff member on site and records of compliance with health and safety requirements was evident.
- Leadership and Management – Staff are suitably fit to work in care and are recruited appropriately. Staff are supported to undertake training to ensure they have the knowledge and skills to provide care and support to help people achieve their personal outcomes and there has been an improvement in this area since the previous inspection. Staff are participating in regular supervision and appraisals. People have access to information about the service and the statement of purpose and service guide are up to date.
- The report for Bryn y Cae identified one Priority Action Notice:-

Priority Action Notice – Bryn y Cae	
Regulation	Summary

12	The service provider must ensure appropriate policies and procedures are in place and that these are appropriate to people at the service and kept up to date.
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- In terms of Regulation 12 in Adults Social Care, an action plan is in place and a recently appointed Policy Officer is working towards meeting this regulatory requirement.

5. Effect upon policy framework and procedure rules

5.1 The service provider must ensure appropriate policies and procedures are in place. Adults Social Care have an action plan, and a Policy Officer has been appointed to meet this regulatory requirement.

6. Equality Act 2010 implications

6.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. This is an information report, therefore it is not necessary to carry out an Equality Impact assessment in the production of this report. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

6.2 Despite an equalities impact assessment not being conducted the information contained in the report positively describes support being made available to those providing care.

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

7.1 The implementation of the duties and responsibilities under the Social Services and Well-being (Wales) Act 2014 (SSWBA), 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 well-being goals of a healthier and more equal Bridgend and Wales are supported.

7.2 The Well-being 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 demand led and the SSWBA focusses on sustainable prevention and wellbeing outcomes for the future. There is a requirement to meet the needs of people in the longer term and, because of

rising demographics and increasing complexity, the remodelling and transformation of services continues to be a priority.

- Prevention – the report focuses on services meeting regulatory standards, including the promotion health and wellbeing and provision of support for people to remain independent for as long as possible.
- Integration – the implementation of the SSWBA requires services to work with partner agencies, particularly health to ensure care and support for individuals is provided.
- Collaboration –services work collaboratively with partner agencies are such as health and generic services in order to provide the best possible intervention to people.
- Involvement – the key stakeholders are the people who use social care. There is considerable engagement including surveys, stakeholder meetings, feedback forms and the complaints process. The provision of accessible information and advice helps to ensure that the voice of adults is heard and inform the inspection process.

8. Financial implications

8.1 There are no financial implications arising from this report.

9. Recommendation

9.1 The Committee is recommended to note the outcome of the Care Inspectorate Wales (CIW) Inspections of the Council's Regulated Services in Adult Social Care and consider making comments upon the report.

Claire Marchant
Corporate Director, Social Services and Wellbeing
November 2022

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Background documents:
None

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO TO SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

8 DECEMBER 2022

REPORT OF THE CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING

ANNUAL REPORT – SAFEGUARDING OF CHILDREN AND ADULTS

1. Purpose of report

1.1 The purpose of this 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;
- Children and Adult Practice Reviews.

1.2 This report includes information from October 2021 and September 2022.

2. Connection to corporate well-being objectives / other corporate priorities

2.1 This report assists in the achievement of the following corporate well-being objectives under the **Well-being of Future Generations (Wales) Act 2015**:

- **Supporting a successful sustainable economy** – taking steps to make the county borough a great place to do business, for people to live, work, study and visit, and to ensure that our schools are focussed on raising the skills, qualifications and ambitions for all people in the county borough.
- **Helping people and communities to be more healthy and resilient** - taking steps to reduce or prevent people from becoming vulnerable or dependent on the Council and its services. Supporting individuals and communities to build resilience, and enable them to develop solutions to have active, healthy and independent lives.
- **Smarter use of resources** – ensure that all resources (financial, physical, ecological, human and technological) are used as effectively and efficiently as possible and support the creation of resources throughout the community that can help to deliver the Council's well-being objectives.

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 Well-being (Wales) Act 2014 and the Children Act 1989.
- 3.6 Part 7 of the Social Services and Well-being (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.
- 3.8 The Wales Safeguarding Procedures launched in November 2019, provide a framework for safeguarding adults and children. Part 5 makes reference to Safeguarding Allegations / Concerns about practitioners and those in positions of trust.

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 Well-being (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, 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 In November 2019 the Wales Safeguarding Procedures were introduced which covers both adults, children and young people. When working with adults who are alleged victims of abuse, the local authority has seven days to complete relevant enquiries. This is to determine if the report meets the threshold for investigation under Adult Safeguarding Procedures. If it is agreed it meets the threshold then strategy discussions and meetings will follow and a Care and Protection Support Plan developed with the individual and/or their family.
- 4.4 If a safeguarding report does not meet the threshold, relevant advice and support is offered and documented on all cases.
- 4.5 Table 1 below shows the number of adult at risk referrals received from 01/10/2021 until 30/9/2022 and also shows the number that met the threshold for Adult Safeguarding procedures:

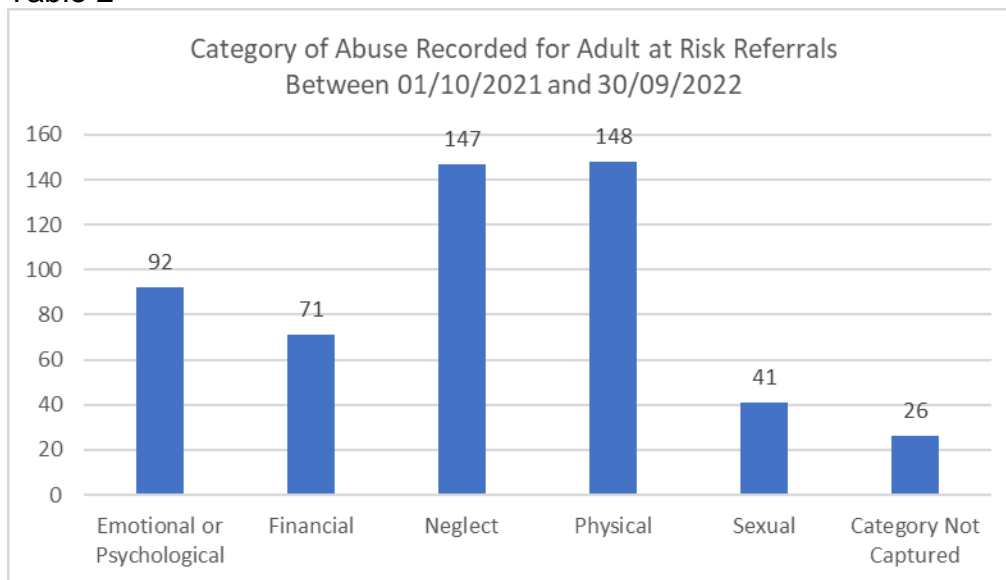
Table 1

		Number of Safeguarding Referrals	Met threshold for Adult Protection Procedures
01/10/2021	to	439	41
30/09/2022			

- 4.6 The highest recorded category of abuse between 01/10/21 and 30/09/22 was physical abuse which accounted for 148 referrals of the total recorded alleged abuse referrals, followed by 147 for neglect, 92 for emotional/psychological abuse, 71 referrals for financial abuse and 41 referrals for sexual abuse.

4.7 Table 2 below shows the category of abuse recorded for adult at risk referrals between 1/10/2021 to 30/9/2022:

Table 2



4.8 The Adult Safeguarding team joined Bridgend’s Multi-Agency Safeguarding Hub (MASH) in July 2018. The MASH remained operational throughout the Covid-19 pandemic. The co-location of all teams in the MASH has allowed for instant information sharing between agencies which in turn results in a more timely, focused, response to safeguarding concerns. The Adult Safeguarding & Secure Estate Service Manager is also a representative on the joint MASH Quality Assurance Group, which is attended by colleagues from Bridgend MASH and Pontypridd MASH.

4.9 Table 3 shows the number of initial professional concern strategy meetings for practitioners and those in positions of trust working with adults. The number of referrals between 1/10/2021 – 31/10/22 amount to 113 referrals:



Deprivation of Liberty Safeguards (DoLS)

- 4.10 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. People can be deprived of their liberty wherever they live, but in broad terms this is divided between a Care Home / Hospital setting and a Community setting.
- 4.11 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. This allows for the Authority, acting as a Supervisory Body, to authorise a DoLS in a Care Home setting when six qualifying assessments are met. If the person is in a Hospital the Health Board are the Supervisory Body and can authorise a DoLS if the qualifying assessments are met. The most fundamental qualifying requirement is that the Care Plan is in the person's (P's) Best Interests.
- 4.12 On 19 March 2014, the Supreme Court handed down its judgement in the case of P v Cheshire West and Cheshire Council and another. 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.**
- 4.13 Where the person resides somewhere other than a Care Home or Hospital the DoLS are not applicable and the Court of Protection (CoP) will authorise a DoLS. In these circumstances the Authority will make an application to the CoP and the type of application is determined on the level of agreement. If all those involved in P's care agree, the application can be made using a streamline procedure.
- 4.14 Due to the 2014 judgement, the number of DoLS referrals continued to increase. Currently the Adult Safeguarding and Secure Estate team employs two full time Best Interest Assessors (BIA) and five Independent Best Interest Assessors who receive a fee for each DoLS assessment completed. These assessors complete between 50 and 60 DoLS assessments per month. Currently there is a small backlog of 80 cases to be allocated.
- 4.15 It is planned that DoLS is replaced with Liberty Protection Safeguards (LPS). Unfortunately the implementation of LPS has been delayed by the UK Government, mainly due to the Covid pandemic and a delay in finalising the LPS Code of Practice. A scoping exercise has been undertaken in Bridgend using the new criteria for LPS and the estimated number of LPS applications will increase by at least 50% so in excess of a 1000 plus people coming into scope. LPS will also include young people of 16 and 17 years of age.
- 4.16 Table 4 The data below shows the numbers of DoLS referrals received in Bridgend from 1/10/2021 to 30/09/2022:

Table 4

	Number of DoLS Referrals Received
01/10/2021 to 30/09/22	459

Children Deprived of their Liberty

- 4.17 Bridgend has recognised that children can also be deprived of their liberty. In February 2017 Bridgend was the first local authority in Wales to successfully make an application to lawfully authorise a child to be placed within a residential setting with restrictions that amounted to a deprivation of liberty. Children who are subject to a deprivation of their liberty, are under 16, and have parents who are not able to exercise appropriate parental responsibility will require the High Court (under its inherent jurisdiction) to authorise any such deprivation. Between the ages of 16-18 years the application for authorisation is made using the same process as adults. The Authority is aware of a number of increasing numbers of DoLS applications being made by local authorities for young people who are on the cusp, but as yet do not meet the criteria of being deprived of their liberty. These situations are often managed via a secure accommodation order under Section 25 of the Children’s Act 1989 with Section 119 of the Social Services and Well-being (Wales) Act 2014 providing further legislation to keep vulnerable children and young people safe.
- 4.18 Since this time Bridgend has implemented a suite of training to raise awareness of the legislation, processes and implications for the Authority in relation to the lawful discharge of duties where children and young people are thought to require such interventions.
- 4.19 Practitioners have received this programme by a Barrister who specialises in this field to ensure that the Authority is able to recognise when circumstances amount to a child being deprived of their liberty and are well placed to respond in a lawful and proportionate manner.

Adult Practice Reviews

- 4.20 Part 7 of the Social Services and Well-being (Wales) Act 2014 sets out the provisions for Safeguarding Adults and Children for all partner agencies. Statutory Guidance also requires Safeguarding Boards to undertake Child Practice Reviews and Adult Practice Reviews as identified. The Cwm Taf Morgannwg 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 Safeguarding Board.

Current Adult Practice Reviews

4.21 Bridgend has recently had one extended Adult Practice Review published in the reporting period. Adult J of this review had complex needs arising from past trauma, mental illness and polysubstance misuse and physical health was poor and had a diagnosis of asthma and non-epileptic seizures. The death was unexpected and the cause of death remains unclear. The review considered the multi-agency response to the circumstances and made recommendations for learning which will be monitored via the Cwm Taf Morgannwg Joint Practice Review subgroup.

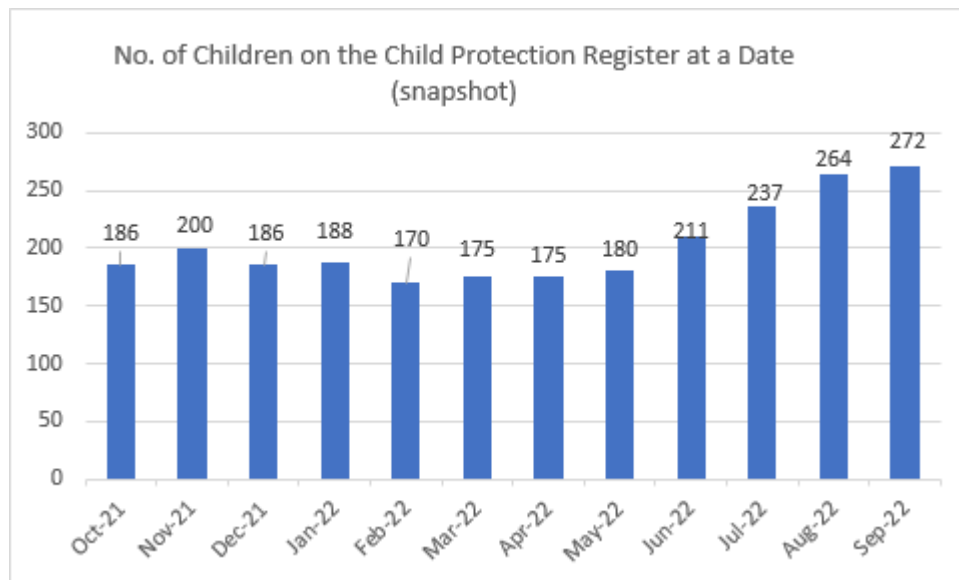
4.22 Learning outcomes from this review:-

- The idea of initiating meetings of the professionals when situations are not progressing – the idea of creating a reflective space to think things through.
- Reviewing who attends Multi-Agency Risk Assessment Conference (MARAC) – are the right people there?
- Setting up a protocol/arrangement with pharmacists to notify when a prescription is not collected. This would not apply to every uncollected prescription; it would need a flagging system for those who are most at risk/vulnerable.
- More input/development work on coercive control and effective interventions and trauma informed practice.
- On the whole communication and the exchange of information between services and agencies was good and systems were followed appropriately.
- The professional network involved with Adult J were committed and persistent. They worked hard to maintain contact with them.

4.23 There is currently one adult practice review ongoing.

Safeguarding Children

4.24 The Child Protection Register figures for this period are set out below.:



4.25 The below table shows the categories and ages of the children subject to the CPR as of the 30/09/22:

Category of Abuse	Age Group					Total
	Under 1	1-4	5-9	10-15	16-18	
Emotional Abuse	3	21	30	33	4	91
Neglect	6	17	24	27	2	76
Neglect and Physical Abuse	2	5	5	4	1	17
Neglect and sexual abuse	1	1	0	1	1	4
Neglect, Physical & Financial Abuse	0	1	1	0	0	2
Neglect, Physical and Sexual Abuse	0	0	0	4	0	4
Physical abuse	4	24	17	24	3	72
Physical and sexual	0	0	0	2	0	2
Physical and Sexual Abuse	0	1	0	0	0	1
Sexual abuse	0	0	2	2	1	5
Total	16	70	79	97	12	274

4.26 As can be seen, the numbers of children subject to the Child Protection Register is steadily rising on a monthly basis. Contributory factors for this are the rise of awareness of child protection factors in the media, the MASH strengthening processes which leads to greater assessments being undertaken, improved training and recognition of child abuse, covid-19 related social challenges and professional awareness of the importance of the duty to report following the tragic deaths of children in Bridgend.

4.27 If professionals agree that a child is suffering or likely to suffer significant harm then their name is placed upon the Child Protection Register. An outline child protection plan is then agreed between all professionals at the conference. In addition to this a

core group of professionals is agreed. This core group are then responsible for implementing and monitoring the plan. The 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 or sooner depending on the level of risk identified.

4.28 The level of work has increased in the MASH and IAA Service. The table below shows the distribution of this work:

1st Oct 2021- to 30th Sept 2022	
Number of Safeguarding Contacts	6515
No of new assessments completed	2674
No of strategy meetings held	1603
No of section 47s investigations	1221
No Initial child protection conferences	326
No of Review child Protection Conferences	575

Public Law Outline (PLO)

4.29 The PLO is a legal process which was introduced in April 2014. The PLO sets out streamlined case management procedures for dealing with public law children's cases. The aim is to avoid care proceedings if possible and for those cases where proceedings are necessary, identify and focus on the key issues for the child, with the aim of making the best decisions for the child within the timetable set by the Court (26 weeks), and avoiding the need for unnecessary evidence or hearings. Under the PLO, the 'pre proceedings process' is considered when the above has not been effective with a family and the legal threshold is met i.e. when the child/ren is suffering or is at risk of suffering significant harm. This process is followed when the Authority has assessed that the risks are able to be managed safely whilst the children remain in the care of their parents/primary carers. The process allows the parents to obtain legal advice and a legal meeting takes place with the parents and lawyers. In this meeting the Authority sets out clearly its concerns, its plan to help the family, and the consequences if no progress is made. The 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.

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

- the Authority's concerns;
- what the Authority has done to try to address those concerns;
- what the family need to do in order to address those concerns;
- the likely outcome if they fail to do so which involves the 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.

Care Proceedings

- 4.31 This is a last resort situation for the Authority and will only be issued when the 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 suffering or are at risk of suffering significant harm should they remain in the care of parents or primary carers. In Bridgend there are currently 26 cases subject of these proceedings compared to 28 in July 2018. The process following the conclusion of care proceedings is dependent upon the care plan proposed by the Authority and agreed by the Court at the final hearing.

Child Practice Reviews

- 4.32 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.
- 4.33 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.
- 4.34 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.
- 4.35 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 Cwm Taf Morgannwg Safeguarding Board and partner agencies hold responsibility.
- 4.36 Like adult reviews, 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
- 4.37 At the time of the report there were 4 Child Practice Reviews being undertaken in BCBC currently and once published a programme of work will be undertaken to disseminate the learning to Children’s Services practitioners. All Child Practice Reviews concerning Bridgend children are reported to the Cabinet Corporate Parenting Committee once they have been published by the Cwm Taf Morgannwg Regional Safeguarding Board.

Regional Safeguarding Boards

- 4.38 Part 7 of the Social Services and Well-being (Wales) Act 2014 set out the need to establish regional Safeguarding Boards for children and adults and specify a lead partner agency for each Board. As from 1st April 2019, Bridgend became part of the Cwm Taf Morgannwg Safeguarding Board (for both children and adults) which covers Bridgend, Rhondda Cynon Taff (RCT) and Merthyr Tydfil localities, with Rhondda Cynon Taf County Borough Council (CBC) as the lead partner agency. The Cwm Taf Morgannwg Safeguarding Board's Annual Plan 2022-2023 is attached at **Appendix 1**.
- 4.39 The objectives of the Regional Safeguarding Board is to 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.
- 4.40 Membership of Safeguarding Boards is prescribed within the Act. A Board includes 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)
 - The Chair of the Cwm Taf Morgannwg Safeguarding Board is the Director of Social Services, RCT Council

Governance

- 4.41 The Safeguarding Board has published an outcome focused Annual Plan for 2022-2023. There is a committee and sub-group structure sitting under the Board to support the delivery of the Annual Plan on behalf of the Board. Each Sub-group uses performance measures to report on a quarterly basis to the Board, via the Joint Operational Committee, and to escalate any 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 to provide leadership to subgroups. There is an established business unit based in RCT that supports the Boards in this respect. The team is funded by partner agencies through a Safeguarding Board pooled budget and consists of one Business Manager, two Business Coordinators, a Communications and Engagement Officer and two Business Administrators.
- 4.42 The Terms of Reference for the Safeguarding Board is reviewed bi-annually and this promotes the requirement for accountability in respect of all Board partner agencies. There are clear definitions for professional challenge and holding partners 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 Joint Operational Committee reports to the Board on the progress of the Sub-groups.
- 4.43 The sub-groups of the Safeguarding Board are:
- Children's Quality Assurance Sub-group
 - Adults Quality Assurance Sub-group

- Joint Adult child Review Group
- Protocols and Procedures Group
- Training and Learning Group
- Engagement, Communications and Participation Group

The Terms of Reference, Membership and sub-groups are currently being reviewed as part of the new Regional Safeguarding Board arrangements.

4.44 The three priorities areas in the Board's plan for 2022-2023 are:

- Keeping our Communities Safe by Working Together
- A Renewed Focus on Prevention and Early Intervention
- Moving Beyond the Pandemic – Recovery and Reflection

4.45 The Safeguarding Board will deliver this strategic priority in conjunction with the Violence against Women, Domestic Abuse and Sexual Violence (VAWDASV) Groups to achieve the best outcomes possible for victims and their families. The Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 sets out the requirements for an improved collective public sector response to the way these issues are addressed, to support victims and to prevent abuse from happening. There are Steering Groups that sits under the Cwm Taf and Bridgend Community Safety Partnerships to deliver regional strategies for VAWDASV.

Improve Communications

4.46 The Safeguarding Board is required to raise awareness with the public of the need to protect and prevent children, young people and adults from becoming at risk of abuse, neglect and other forms of harm, and provide information about how this can be achieved. As part of developing a positive culture of learning the Board also needs to ensure that information is widely disseminated within the workforce to inform them about best practice and learning arising from reviews, audits and other Board activities. The Board has an established group whose aim is to ensure that there are clear processes in place for the identification of engagement and participation needs and to capture the activities of partner agencies in meeting these needs.

National Safeguarding Board

4.47 The National Safeguarding Board is an advisory board that advises Welsh Government on the effectiveness of arrangements to safeguard people in Wales. The Board members have been subject to an open public appointments process and ultimately appointed by the Minister.

4.48 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.

Bridgend Locality Safeguarding & Community Safety Group

4.49 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 Locality Safeguarding & Community Safety Group is chaired by the Corporate Director of Social Services & Wellbeing, which meets on a quarterly basis.

The group's membership consists of representatives from within the Local Authority and partner agencies for example Education, Health, HMP Parc and YOI and the third sector.

- 4.50 The Bridgend Locality Safeguarding & Community Safety 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 Corporate Safeguarding Policy

- 4.51 Safeguarding is the responsibility of all Directorates across the 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, well-being 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.
- 4.52 A designated corporate safeguarding page on Bridgend's intranet allows practitioners immediate access to information to support decision making and the referral process if required. It also signposts individuals to key officers in both adults and children's safeguarding.
- 4.53 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.
- 4.54 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.
- 4.55 The Corporate Director of Social Services and Well-being chairs a monthly Corporate Safeguarding Group which includes representatives from Social Services and Well-being, Education and Family Support and the Chief Executives directorate (human resources, housing and community safety). The group oversees a corporate safeguarding dashboard which includes information on safeguarding performance from all parts of the Council and which is reported to the Cabinet Corporate Parenting Committee (CCMB) on a monthly basis. The dashboard as at end of September 2022 is appended to this report as **Appendix 2**.

Child Sexual Exploitation

- 4.56 Child Sexual Exploitation (CSE) is a form of child sexual abuse which involves an element of exchange. Any child can be sexually exploited irrespective of gender, ethnicity or sexuality. CSE can be perpetrated in many different ways. The way in which children experience CSE is diverse and may be part of a complex picture of interrelated safeguarding issues. online and offline exploitation often overlap.
- 4.57 Perpetrators of CSE come from a wide range of ethnic backgrounds, they are predominantly male but females do offend. They act as individuals, in groups and in gangs and offenders may be family members.
- 4.58 Peer-on-peer abuse needs to be understood in the context in which it occurs and children who abuse need support. All Wales Practice Guidance on children where there are concerns about harmful sexual behaviour is available for use in conjunction with the Wales Safeguarding Procedures.
- 4.59 Children rarely disclose CSE and the identification of CSE is particularly reliant on the knowledge and understanding of practitioners and professionals. Everyone who works with children should be alert to the signs that a child is being sexually exploited and understand their duty to report a child at risk.
- 4.60 If Child Sexual Exploitation is suspected a multiagency strategy meeting will be held and partner agencies invited such as Police, Health, Education, Youth Offending and Barnardos.
- 4.61 The Council has developed an Exploitation Screening Tool within the MASH Service and this has since been implemented in Children's Services. This tool supports the identification of exploitation and guides the practitioner in how to best address these concerns. The tool can also be used as a means to gather intelligence about geographical areas where exploitation is occurring and individuals involved.
- 4.62 An interim Group Manager for Practice Improvement in Bridgend has been appointed. This practitioner has a strong background in Exploitation and is using her expertise to support and guide our processes and services in this area.
- 4.63 The number of CSE reports between 01/10/2021 and 30/09/2022 is 45.

Safeguarding in Education

- 4.64 Within the Education and Family Support Directorate the Education Engagement Team (EET) was established in 2018 and its remit includes the safeguarding in education role.
- 4.65 EET support children from groups identified by Estyn as being vulnerable or potentially vulnerable such as: excluded pupils, care-experienced children, those known to Youth Justice Services, those with English as an Additional Language and Home Educated Learners. This "joined up" approach means that the team are able to offer schools ongoing advice and guidance around a range of areas and have knowledge and skills in safeguarding, child protection as well as education. The EET

team are co-located within the Multi-Agency Safeguarding Hub (MASH) to enhance this “joined up” approach with Social Services and Wellbeing.

- 4.66 EET deliver the Designated Safeguarding Lead training to schools. They also facilitate the whole school safeguarding training to individual schools. Within the remit of EET, they also facilitate and coordinate twice yearly Designated Safeguarding Lead Forums. These meetings cover regular safeguarding and information updates as well as training sessions from internal and external speakers and agencies. This year, there will be information and training on exclusion, county lines, exploitation and Looked After Children training all of which have aspects which link into CSE and CSE awareness and risk and vulnerability.
- 4.67 The Education and Family Support directorate in partnership with Social Services and Well-being are commencing a safeguarding in education working group. The aim of this group is to bring a select group of Headteachers and Senior Managers within the local authority to look at the issues affecting children in schools, improve understanding on threshold, identify opportunities for further joint working and inform future training for schools in relation to safeguarding.
- 4.68 Further to this, the Authority will be re-commencing the Team Around the School model for Secondary schools. The aim of which is to identify children and families who currently presenting with some low level concerns and consider whether any additional support could be offered through Early Help, Youth Justice Services or other Education and Family Support services.
- 4.69 Schools in Bridgend have also been undertaking audits of their safeguarding approaches. Schools have used an audit tool developed by Estyn to satisfy themselves that their approaches to safeguarding children are robust. This process commenced last year and will continue to be undertaken on an annual basis. Findings from last year highlight evidence of good understanding of safeguarding responsibilities, evidence of partnership working and up to date policies and procedures on safeguarding. Areas for development included the role of the governing body being enhanced and to improve engagement with parents and carers in relation to their understanding of safeguarding issues.
- 4.70 Nearly all of the secondary schools participate in a team around the school forum which discusses and supports children where there are concerns around educational or wellbeing needs - including potential CSE concerns, and this forum incorporates Early Help and Police as well as the Vulnerable Groups team and the Education Welfare Service.

Domestic Abuse

- 4.71 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 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.
- 4.72 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 to effect changes necessary to improve the safety of victims and their children.

- 4.73 Anybody can be a victim of abuse irrespective of their age, ethnicity, gender, etc., and the Act recognises this.
- 4.74 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

5. Effect upon policy framework and procedure rules

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

6. Equality Act 2010 implications

- 6.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh language have been considered in the preparation of this report. As a public body in Wales, the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. It is considered that there will be no significant or unacceptable equality impacts as a result of 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 Well-being Act (Wales) 2014 (SSWBA), 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 implementation of the Multi-Agency Safeguarding Hub has enabled 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 annual report and provide any comments upon the report.

Claire Marchant
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November 2022

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Background documents:

None

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Cwm Taf Morgannwg Bwrdd Diogelu Safeguarding Board



Annual Plan 2022/2023



GIG
CYMRU
NHS
WALES | Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Cyngor Bwrdeistref Sirol
MERTHYR TYDFIL
MERTHYR TYDFIL
County Borough Council



Gwasanaeth Prawf
Cenedlaethol
National Probation
Service



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FOREWORD FROM THE CHAIR OF THE CWM TAF MORGANNWG SAFEGUARDING BOARD

Welcome to the Annual Plan of the Cwm Taf Morgannwg Safeguarding Board.

This Plan identifies what the Board will be focusing on during 2022-2023, in pursuit of our aim to ensure that the people of Cwm Taf Morgannwg are safeguarded from abuse, neglect or other forms of harm.

Members of the Board met in January 2022 to reflect on the past year and to agree the key priority areas that needed to be focussed on in the coming year. Board members acknowledged that the COVID pandemic has continued to have a major impact on service delivery and staffing capacity but despite this some good progress has been made and we need to continue to build on this and learn from the lessons over the past year.

Our priorities this year stem from these lessons and an analysis of the current and prevalent safeguarding issues affecting the region. These priorities will be carried out alongside and in addition to the Board's core statutory safeguarding functions. Underpinning these priorities is the need to ensure that our staff working across the region are supported appropriately to carry out their duties and that promoting staff well-being is a core objective for all partner agencies.

Whilst we were developing this Annual Plan, we have become aware of the crisis in Ukraine and the urgent requirement on partner agencies to respond to the obligation to offer Ukrainian refugees shelter in the UK. This will inevitably have an impact on safeguarding across the region as we will need to ensure that satisfactory safeguarding arrangements are in place to protect these vulnerable people. It is important, therefore, that Board priorities are kept under review to address any changing demands on services.

We are keen to promote opportunities for people to engage in our work and anyone wishing to find out more about safeguarding in Cwm Taf Morgannwg can visit our website www.ctmsb.co.uk or contact our Regional Safeguarding Board Business Unit via the following email ctmsafeguarding@rctcbc.gov.uk



Paul Mee, Chair of the Cwm Taf Morgannwg Safeguarding Board

A handwritten signature in black ink, appearing to read 'P Mee', written in a cursive style.

1. SAFEGUARDING IN CWM TAF MORGANNWG

The area of Cwm Taf Morgannwg covers the local authority areas of Bridgend, Merthyr Tydfil and Rhondda Cynon Taf with a total population of almost 450,000¹.

The **Cwm Taf Morgannwg Safeguarding Board (CTMSB)** is a statutory partnership made up of the agencies that are responsible for safeguarding children and adults at risk in the Cwm Taf Morgannwg region. The Board ensures that agencies responsible for safeguarding have effective arrangements in place to ensure that people of all ages are protected from abuse, neglect or other kinds of harm. This also involves preventing abuse, neglect or other kinds of harm from happening.

The Cwm Taf Morgannwg Safeguarding Board carries out its objectives in line with the national statutory guidance as set out in Part 7 of the Social Services and Wellbeing (Wales) Act 2014. This legislation provides the framework for the [Wales Safeguarding Procedures](#) which supports practitioners to apply the legislation and the statutory guidance with an aim to improve person-centred outcomes for children and adults at risk of abuse and neglect.

Our Objectives

The two key **safeguarding** objectives around **protection** and **prevention** underpin the work of the Board and inform the priorities that we have agreed in this Annual Plan for the financial year 2022-2023.

Keeping children and adults at risk safe is everyone's responsibility and all agencies have a duty to report suspected abuse and/or neglect (see page 15 for details)

¹ Source: StatsWales

What is Abuse and Neglect?

- Abuse can entail physical, sexual, psychological, emotional or financial abuse.
- Neglect 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.

Multi Agency Safeguarding Hubs

In the Cwm Taf Morgannwg region there are two Multi Agency Safeguarding Hubs (MASH) that report to the Board:

The **Cwm Taf (Merthyr Tydfil and Rhondda Cynon Taf) Multi Agency Safeguarding Hub (MASH)** and the **Bridgend Multi Agency Safeguarding Hub (MASH)**.

The purpose of the MASH is to act as the single point of contact for all professionals to report safeguarding concerns. MASH provides the opportunity for a higher standard of safeguarding by providing all professionals with more information on which to make better, more informed decisions. This has significantly improved the sharing of information between agencies, helping to protect the most vulnerable children and adults from harm, neglect and abuse.

Although the concept of the MASH involves co-location, partner agencies have responded to the different ways of working over the past two years, including remote working, without compromising the need for prompt information sharing and actions to safeguard people. As part of the Board priority linked to Recovery, we intend to seek ways to strengthen our MASH arrangements by identifying opportunities to collaborate across the region.

Who are the Members of the Regional Safeguarding Board?

The Lead Partner for the Board is Rhondda Cynon Taf County Borough Council and the membership complies with the statutory guidance issued under Part 7 of the Social Services and Well Being Act 2014. A list of members is attached as Appendix 1.

What are the Core Functions of the Regional Safeguarding Board?

Every Regional Safeguarding Board has a statutory responsibility to carry out core functions in relation to multi-agency safeguarding. The Cwm Taf Morgannwg Safeguarding Board carries out these day to day functions via specific committees and sub groups (see Appendix 2). These include:

- Contributing to the development, implementation and monitoring of protocols and procedures that support the protection of adults and children and to prevent abuse
- Raising awareness of the Board's objectives to protect and prevent adults and children from becoming at risk of abuse, neglect and other forms of harm, and to provide information about how this might be achieved
- Reviewing the efficacy of measures taken by agencies to implement the objectives of the Board and to make and monitor recommendations
- Undertaking child practice reviews, adult practice reviews, audits, investigations and other reviews as are required in pursuance of its objectives and to disseminate learning and information arising from these reviews
- Reviewing the performance of the Board and its partners and bodies represented on the Board in carrying out its objectives
- Facilitating research into protection from, and prevention of, abuse and neglect of children and adults at risk of harm
- Review the training needs of practitioners working in the area of the Board in order to identify training to assist in the protection and prevention of abuse and neglect of children and adults at risk of harm

2. WHAT ARE THE OUTCOMES THAT WE PROPOSE TO ACHIEVE THIS YEAR?

In January 2022, Board members met to identify the priorities for 2022/2023. These were agreed as:

- 1: Keeping our Communities Safe by Working Together**
- 2: A Renewed Focus on Prevention and Early Intervention**
- 3: Moving Beyond the Pandemic – Recovery and Reflection**

A detailed work plan for the Board and its Sub-Groups will sit underneath this Strategic Annual Plan to identify specific objectives to deliver the improvements that have been agreed. The work plan will include the actions required to achieve these improvements, including: who is responsible, timescales and measures of success.

The progress of the work plan will be monitored and reviewed on a quarterly basis and will form the basis of the Annual Report for 2022-2023.

An overview of what the Board intends to do to achieve its priorities for the coming year is provided below.

Strategic Priority 1: Keeping our Communities Safe by Working Together

What does this mean for the Regional Safeguarding Board?

In our Annual Plan for 2021-2022, we set out plans to approve our approach to tackling specific public protection concerns. We aimed to have in place by March 2022, a Regional Exploitation Strategy to set out how we will respond to this ever-growing area of concern with an emphasis on protecting both children and adults at risk from all forms of exploitation.

A significant amount of work has been undertaken already to scope out the governance arrangements across the region in respect of tackling exploitation. A multi-agency workshop was held in 2021 to support this work and a detailed action plan has been developed to oversee the development and implementation of our strategy, ensuring that this links with national initiatives and policy.

This year, with our draft strategy in development, we need to continue with this work to address the prevalent issues linked to exploitation. We need to do this in collaboration with other partnerships and structures across the region (see Section 3 of this plan).

Priority Area	What improvements do we need to make?	How will we measure progress?
Exploitation	<p>In 2022-2023, the Board will:</p> <ul style="list-style-type: none"> ▪ Finalise our Regional Exploitation Strategy which will set out how our partner agencies will recognise and understand exploitation, safeguard and empower victims, and disrupt perpetrators ▪ Develop supporting documentation for practitioners, including toolkit, assessments, and referral pathways ▪ Ensure that appropriate governance and reporting structures are in place to manage and respond to exploitation across the region ▪ Respond to national policy and guidance on exploitation to ensure that we are aligned to Wales-wide approaches ▪ Consider the potential impact of the Ukrainian refugee crisis and any increasing risks of exploitation in relation to these vulnerable people. 	<p>A detailed work plan will be developed to oversee this priority area and will include the following measures:</p> <ul style="list-style-type: none"> ▪ The development of an exploitation dashboard across the region to enable us to identify, quantify, and measure exploitation ▪ A shared understanding and agreement on how agencies can respond to exploitation ▪ Receive reports from partner agencies on how they are raising awareness of exploitation ▪ Monitor the impact of the strategy

Strategic Priority 2: A Renewed Focus on Prevention and Early Intervention

What does this mean for the Regional Safeguarding Board?

In the last two years, the COVID pandemic has had a significant impact on services, with our partner agencies needing to prioritise critical areas of work to safeguard our most vulnerable people. The closure of some services such as schools, community facilities and day services during lockdowns has inevitably had an impact on children and adults. In many cases, the nature of this impact is yet unknown, and partner agencies need to be prepared and flexible to respond to changing demands.

In addition to this, we are experiencing increasing levels of deprivation in our communities as a result of austerity measures and an increase in the cost of living. We are aware from Education colleagues that more children are being electively home educated, children with complex needs and behaviours are starting school later, and from a youth justice perspective there has been an increase in street disposals and anti-social behaviour.

Partner agency data and learning from reviews has indicated that isolation in adults, and in particular older people, has become more prevalent, and in some cases this has had a detrimental effect on mental well-being.

Agencies are keen to learn the lessons from the unprecedented demands on services and to refocus activities on early intervention and preventing people from becoming at risk of abuse and neglect.

Priority Area	What improvements do we need to make?	How will we measure progress
Early Intervention and Prevention to Support Adults and Older People	In 2022-2023, the Board will: <ul style="list-style-type: none"> ▪ Improve engagement and opportunities to access provision for adults at risk by identifying and overcoming any challenges and barriers ▪ Increase our communications and information sharing around preventing abuse and neglect ▪ Receive updates on how care homes are returning to normal visiting arrangements and how any safeguarding concerns are being addressed ▪ Make links with the third sector and partner agencies community co-ordinators to identify support and signposting services in the community 	A detailed work plan will be developed to oversee this priority area and will include the following measures: <ul style="list-style-type: none"> ▪ Establish clear pathways for signposting and referrals for professionals and public ▪ Reports in relation to safeguarding in care homes presented to the Board and improvement actions addressed ▪ An increase in communications and information regarding safeguarding and community services/provision ▪ Increase in website on-line traffic and social media access
Early Intervention and Prevention to Support Children and Young People	In 2022-2023, the Board will: <ul style="list-style-type: none"> ▪ Establish links with the local authority Early Help Hubs to monitor the effectiveness of provision for children, young people, and their families 	A detailed work plan will be developed to oversee this priority area and will include the following measures:

	<ul style="list-style-type: none"> ▪ Improve engagement and opportunities to access provision for children and young people by identifying and overcoming any challenges and barriers ▪ Increase our communications and information sharing around preventing abuse and neglect ▪ Receive regular update reports from Education and Youth Offending Services on how children are being supported and address any identified areas of concern ▪ Receive regular data reports from CAMHS to monitor referrals/activity and to identify opportunities to improve safeguarding 	<ul style="list-style-type: none"> ▪ Reporting arrangements established to monitor the effectiveness of early intervention and prevention ▪ An increase in communications and information regarding safeguarding prevention for children and young people ▪ Increase in website on-line traffic and social media access
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Strategic Priority 3: Moving Beyond the Pandemic – Recovery and Reflection

What does this mean for the Regional Safeguarding Board?

The Regional Safeguarding Board has responded to a number of changes over the years. When the Social Services and Wellbeing (Wales) Act came into force in April 2016, this set out strengthened arrangements for Safeguarding Boards, particularly in relation to safeguarding adults. The separate adults and children Boards joined together, along with many of the respective sub-groups, to make 'safeguarding for all' a priority across the then Cwm Taf region.

In April 2019, the geographical footprint of the region expanded, and the Bridgend County Borough joined with Merthyr Tydfil and Rhondda Cynon Taf to become a new Cwm Taf Morgannwg region.

The safeguarding agenda has continued to cross over into the world of community safety and mental health and new structures have been established to tackle suicide prevention and domestic abuse.

The coronavirus pandemic in 2020 presented new challenges for the Board, different ways of working were adopted, and priorities were refocussed on those in most need of support.

In 2021, an independent rapid review was commissioned by the Board following a number of child deaths in the Bridgend area, none of which were connected. The recommendations from this review, alongside our reflection on the lessons learned over the years, have prompted the Board to seek opportunities to review its structure and governance arrangements.

A renewed focus on learning and the development of a learning culture across all partner agencies has become an integral part of how we improve safeguarding across the region. In 2022, the introduction of a new Single Unified Safeguarding Review process will mean that the Board will have more responsibility for safeguarding reviews in relation to Domestic Homicides and Mental Health Homicides, in addition to the existing arrangements for Child and Adult Practice Reviews.

Our overall aim is to become a more streamlined, effective, evolving, and challenging Board to enable us to prepare and respond promptly to risks, issues and opportunities to improve.

Priority Area	What improvements do we need to make?	How will we measure progress?
<p>Review the governance and reporting arrangements of the Board</p>	<p>In 2022-2023, the Board will:</p> <ul style="list-style-type: none"> ▪ Review the structure, Terms of Reference, membership, purpose, role profiles and remit of the Board and all of its Sub-Groups, in line with the statutory guidance ▪ Establish/strengthen our escalation processes and how we challenge each other constructively ▪ Review and improve our existing quality assurance and performance frameworks ▪ Review the current MASH arrangements and processes and agree key performance information that needs to be reported to the Board 	<p>A detailed work plan will be developed to oversee this priority area and will include the following measures:</p> <ul style="list-style-type: none"> ▪ By the end of March 2023, the Board will have a revised structure in place, with clear terms of reference for all groups ▪ Board Development Sessions to be held to engage with all members and share new arrangements ▪ An effective escalation and challenge process to be adopted ▪ A new quality assurance and performance framework to be adopted ▪ Opportunities for MASH collaboration to be identified and implemented

Practice Reviews and the Single Unified Safeguarding Review process	<p>In 2022-2023, the Board will:</p> <ul style="list-style-type: none"> ▪ Implement the new Regional Learning Framework ▪ Train more people to become independent Panel Chairs and Reviewers ▪ Set up a Task and Finish Group to oversee the implementation of the Single Unified Safeguarding Review (SUSR) process and manage the impact on the Board 	<p>A detailed work plan will be developed to oversee this priority area and will include the following measures:</p> <ul style="list-style-type: none"> ▪ Evidence that learning is making a difference to safeguarding practice ▪ An increased pool of independent chairs and reviewers ▪ The SUSR is implemented and managed accordingly
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3. CROSS CUTTING THEMES

This year, the Board has agreed the following cross-cutting themes that will underpin our priorities:

Participation

We will continue to seek opportunities to engage with children, adults at risk, and families in our work and provide them with opportunities to participate in the work of the Board. We will do this through our Participation Strategy to assist with engaging with our communities and to agree the key topics/areas of work, linked to this Annual Plan, that we want people to be involved in. We will also maximise the opportunities that National Safeguarding Week brings to improve our communications and engagement activities.

Staff Wellbeing

We will continue to promote staff well-being through different ways of working, maximising virtual means of engaging with staff and promoting training and awareness raising of how individuals can improve their own wellbeing and how they can access additional support. Partner agencies will be asked to report to the Board on how they are ensuring that staff wellbeing is fully supported.

4. WHO DO WE INTEND TO COLLABORATE WITH TO ACHIEVE OUR PRIORITIES AND OBJECTIVES?

Effective collaboration with other partnerships and agencies, whether it be on a regional or national basis, is key to the effective delivery of the Board functions.

Who will we collaborate with?	Areas to collaborate?
Welsh Government	<ul style="list-style-type: none"> ▪ Policies and legislation in relation to safeguarding ▪ Implementation of the Single Unified Safeguarding Review process ▪ The development of Practice Guides for safeguarding adults ▪ Business Managers and Chairs quarterly meetings
National Independent Safeguarding Board	<ul style="list-style-type: none"> ▪ Seeking advice on regional and national safeguarding issues
Third Sector	<ul style="list-style-type: none"> ▪ Actively encourage their participation in the work of the Regional Safeguarding Board, specifically linked to the identified Strategic Priorities
Other Regional Safeguarding Boards	<ul style="list-style-type: none"> ▪ Consistent policies and processes across Wales ▪ Sharing learning and best practice
Cwm Taf and Bridgend Community Safety Partnerships	<ul style="list-style-type: none"> ▪ Exploitation ▪ Single Unified Safeguarding Review
Regional Partnership Board	<ul style="list-style-type: none"> ▪ Participation of children and young people
Together for Mental Health Partnership	<ul style="list-style-type: none"> ▪ Suicide and Self Harm Prevention

Religious Establishments

- Consideration to be given to developing a specific safeguarding policy to cover these establishments, where there isn't one currently in existence

5. OUR BUDGET FOR 2022-2023

The Board budget for the year will be resourced by financial contributions from the statutory partner agencies. The budget set will enable the Board to delivery its priority outcomes as set out in this Annual Plan and will be allocated as follows:

Business Management Unit Staff Costs and Accommodation: £295,280
General Expenditure: £16,490

Are You Concerned About Someone?

If you suspect that a **child or young person** is being harmed or is at risk of being harmed then you have a duty to report it immediately. All calls concerning worries about children are treated seriously. Contact your local Safeguarding Team on the numbers provided below:

In Rhondda Cynon Taf: 01443 425006
In Merthyr Tydfil: 01685 725000
In Bridgend: 01656 642320

Opening Hours:
Monday - Thursday 8.30am - 5.00pm
Friday - 8.30am - 4.30pm

If you suspect that an **adult** is being harmed or is at risk of being harmed then you have a duty to report it immediately. All calls concerning worries about vulnerable adults at risk are treated seriously. Contact your local Safeguarding Team on the numbers provided below:

In Rhondda Cynon Taf: 01443 425003
In Merthyr Tydfil: 01685 725000
In Bridgend: 01656 642477

Opening Hours:
Monday - Thursday 8.30am - 5.00pm
Friday - 8.30am - 4.30pm

To contact Children or Adults Services outside office hours, at weekends and bank holidays, ring the Cwm Taf Morgannwg Emergency Duty Team on 01443 743665.

If you suspect that a child, young person or an adult is at immediate risk of harm call 999 and speak to the Police.

If you would like to report a non-urgent incident, or have a problem or general query, you can call 101, the 24 hour non-emergency number for the police. ***Use 101 when the incident is less urgent than 999.***

Remember - safeguarding is everybody's business!

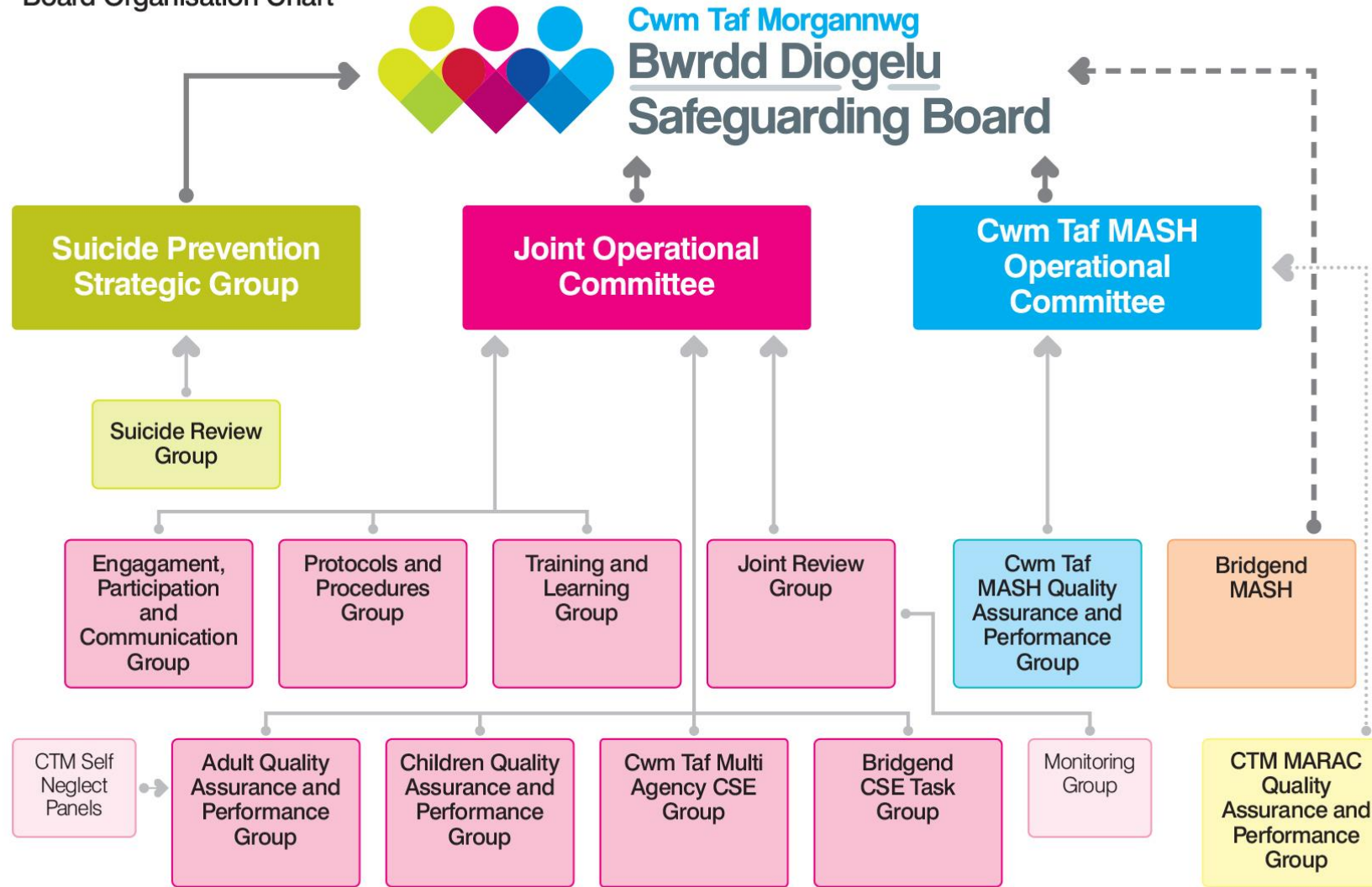
For more information and advice visit: www.ctmsb.co.uk

APPENDIX 1 - BOARD MEMBERSHIP

NAME	TITLE	AGENCY
Paul Mee (Chair)	Director of Community and Children's Services	Rhondda Cynon Taf County Borough Council
Lisa Curtis-Jones (Vice Chair)	Director of Social Services	Merthyr Tydfil County Borough Council
Claire Marchant (Vice Chair)	Director of Social Services and Wellbeing	Bridgend County Borough Council
Cheryl Emery	Head of Public Protection	Rhondda Cynon Taf County Borough Council
Jackie Neale	Adult Safeguarding Service Manager	Rhondda Cynon Taf County Borough Council
Neil Elliot	Service Director, Adult Services	Rhondda Cynon Taf County Borough Council
Julie Clark	Head of Safeguarding and Support (Children)	Rhondda Cynon Taf County Borough Council
Gaynor Davies	Director of Education and Lifelong Learning	Rhondda Cynon Taf County Borough Council
Annabel Lloyd	Service Director, Children Services	Rhondda Cynon Taf County Borough Council
Cara Miles	Head of Legal - Community Care and Children	Rhondda Cynon Taf County Borough Council
Jon Eyre	Safeguarding Principal Manager	Merthyr Tydfil County Borough Council
Alyn Owen	Chief Officer, Community Regeneration	Merthyr Tydfil County Borough Council
Susan Walker	Chief Officer, Education	Merthyr Tydfil County Borough Council
Taryn Stephens	Head of Children Services	Merthyr Tydfil County Borough Council
Angela Edevane	Head of Adult Services	Merthyr Tydfil County Borough Council

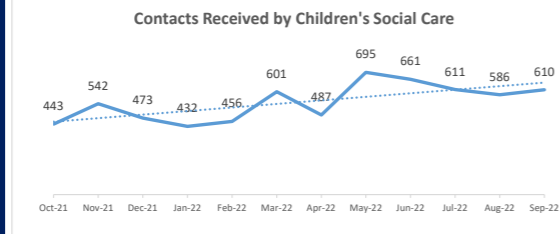
Carys Kennedy	Head of Legal and Governance	Merthyr Tydfil County Borough Council
Jacqueline Davies	Head of Adult Social Care	Bridgend County Borough Council
Laura Kinsey	Head of Children's Social Care	Bridgend County Borough Council
Nicola Echanis	Head of Education and Family Services	Bridgend County Borough Council
Greg Dix	Director of Nursing, Midwifery & Patient Services	Cwm Taf Morgannwg University Health Board
Louise Mann	Assistant Director for Quality and Safety	Cwm Taf Morgannwg University Health Board
Mark Attwell	Superintendent, Northern BCU	South Wales Police
Sue Hurley/Beth Aynsley	Independent Protecting Vulnerable Person Manager	South Wales Police
Eirian Evans	Assistant Chief Officer	National Probation Service
Sharon Richards	Chief Officer	Voluntary Action Merthyr Tydfil
Maria James	Third Sector Representative, Merthyr Tydfil	Voluntary Action Merthyr Tydfil
Lyndon Lewis	Head of Service	Cwm Taf Youth Offending Service
Virginia Hewitt	Designated Nurse (National Safeguarding Team)	Public Health Wales
Nikki Harvey	Assistant Director Quality, Safety & Patient Experience	Welsh Ambulance Service Trust
Jason Evans	Head of Young Person's Unit	HM Prison & Young Offenders Institute, Parc
Ian Coles	Interim Deputy Director	HM Prison & Young Offenders Institute, Parc

APPENDIX 2:
Board Organisation Chart

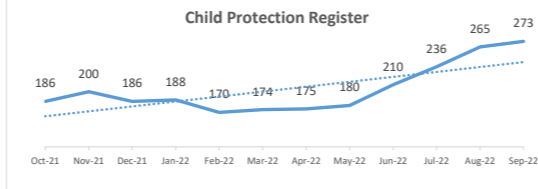


Safeguarding Dashboard - September 2022

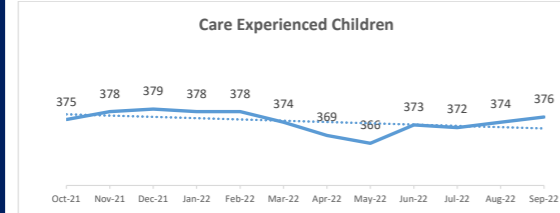
Children's Social Care



• Contacts received over the past 12 months have fluctuated in line with school holidays. September 2022 shows a 37.7% increase when compared to October 2021. Contacts in May 2022 are the highest over the 12 month period, with the highest referrer being Education. Referrals from Education saw a large increase in Qtr 4 2021/22.



• Since April 2022 the numbers of children on the child protection register have increased significantly. - Following initial analysis of this, reasons for the increase include:
 -Cases not being actively worked, so not able to be de-registered at RCPC. This is due to the high number of changes in SWs and the recruitment/retention challenges.
 -Case mapping/consultation not taking place to move on the stuck cases and the 18m+ cases.
 -Complexity of cases being referred to MASH/IAA and this results in a greater put through of work from MASH/IAA increasing the figures.

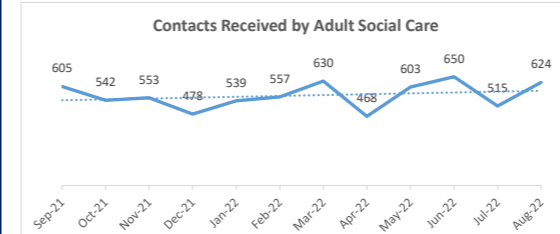


• The number of care experienced children has increased by 1 (0.3%) during the last 12 months

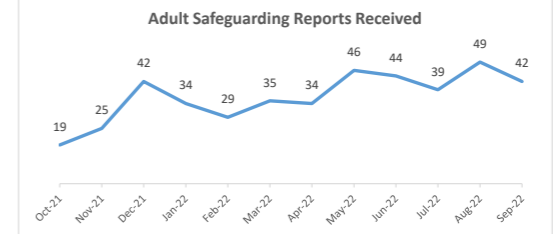


• 101 Initial Professional Abuse Strategy Meetings have been convened over the last year with education remaining the dominant profession referred. This is a 32.9% increase from the same period last year when there were 76 strategy meetings. There was a decrease in June 22 where referrals were low at the beginning of the month, with an increase towards the latter part of the month. These later referrals have resulted in meetings being held in July due to availability of required attendees.

Adult Social Care



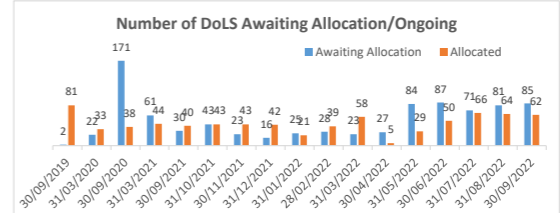
• The number of contacts received in June 2022 are the highest over the last 12 months. The number of referrals in August have increased by 3.1% when compared to September 21.



• 438 Adult Safeguarding reports have been received in the last 12 months, this is an increase of 4.3% on the same period last year when there were 420 reports

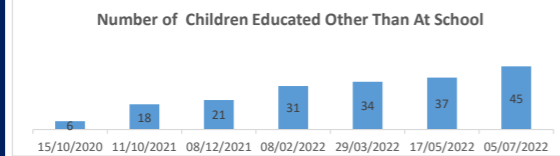


• 113 Initial Professional Abuse Strategy Meetings have been convened over the last year. This is a 6.6% increase from the same period last year when there were 106 strategy meetings. When comparing the current 12 month period with 2019/20, there has been a 117% increase, where 52 meetings were held in 2019/20.

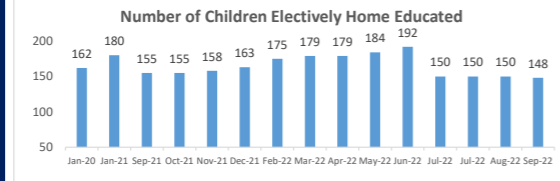


• During the last 24 months the number awaiting allocation has reduced by 50.3%, from 171 in Sep 2020 to 85 in August 2022

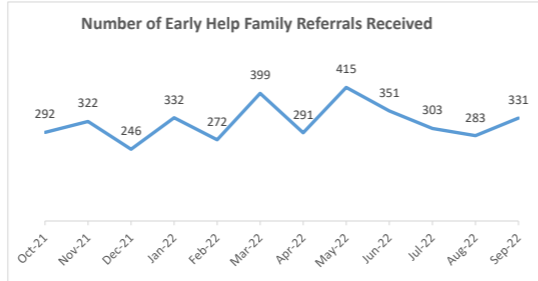
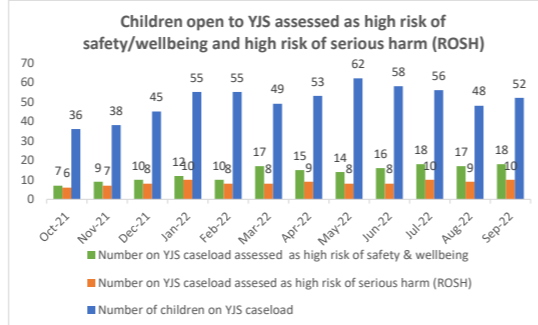
Education and Family Support



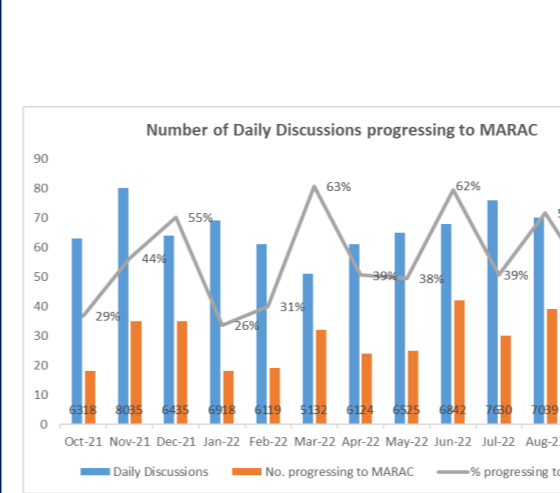
* EOTAS figures are updated twice a term following the AZE Panel



Schools Audits
 All schools in Bridgend (60) have completed their initial audits (4 had not been returned at time of writing but have been undertaken). Of which:
 * 52 schools have rated themselves as green
 * 3 schools have rated themselves as amber
 * 1 school is rated as red
 Audits reflect strengths within schools on areas related to the safety of their setting, their effectiveness of their safeguarding practices and how they work with partner agencies around safeguarding issues.
 Areas schools identify they need to develop relate to the robustness of their safeguarding approach and how effectively they communicate their safeguarding policies and procedures to staff, governing bodies, children, parents and carers.



VAWDASV



• 37% of all daily discussions have progressed to MARAC in the last twelve months
 • Staffing attendance is improving with some statutory agencies, which may help to reduce the number of those progressing to Full Marac going forward
 IDVA sometimes unable to make contact with victim (often worse in School holidays)
 Police investigations ongoing / outstanding arrests
 Partner Agency updates e.g. Social Workers struggle in the time frame
 • A remote evidence suite in Hartshorn House, Maesteg is now operational where domestic violence victims and witnesses can be supported to give evidence via a video link

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

8 DECEMBER 2022

REPORT OF THE CHIEF OFFICER - LEGAL & REGULATORY SERVICES, HR AND CORPORATE POLICY

FORWARD WORK PROGRAMME UPDATE

1. Purpose of report

1.1 The purpose of this report is to:

- a) Present the Committee with the Forward Work Programme (**Appendix A**) for consideration and approval;
- b) Request any specific information the Committee identifies to be included in the items for the next two meetings, including invitees they wish to attend;
- c) Request the Committee to identify whether there are presently any further items for consideration on the Forward Work Programme having regard to the selection criteria in paragraph 4.3;
- d) Present the Recommendations Monitoring Action Sheet (**Appendix B**) to track responses to the Committee's recommendations made at the previous meetings;
- e) Advise that the Committee's updated Forward Work Programme and Recommendations Monitoring Action Sheet will be reported to the next meeting of Corporate Overview and Scrutiny Committee (COSC).

2. Connection to corporate well-being objectives / other corporate priorities

2.1 This report assists in the achievement of the following corporate well-being objectives under the **Well-being of Future Generations (Wales) Act 2015**:

- **Supporting a successful sustainable economy** – taking steps to make the county borough a great place to do business, for people to live, work, study and visit, and to ensure that our schools are focussed on raising the skills, qualifications and ambitions for all people in the county borough.
- **Helping people and communities to be more healthy and resilient** - taking steps to reduce or prevent people from becoming vulnerable or dependent on the Council and its services. Supporting individuals and communities to build resilience, and enable them to develop solutions to have active, healthy and independent lives.
- **Smarter use of resources** – ensure that all resources (financial, physical, ecological, human and technological) are used as effectively and efficiently

as possible and support the creation of resources throughout the community that can help to deliver the Council's well-being objectives.

3. Background

- 3.1 The Council's Constitution requires Overview and Scrutiny Committees to each propose items for the Forward Work Programme having regard to the Council's Corporate Priorities and Risk Management framework.
- 3.2 The Corporate Overview and Scrutiny Committee has the additional role of having oversight and coordination of the Forward Work Programmes for the Subject Overview and Scrutiny Committees to develop and implement an effective overall Forward Work Programme for Scrutiny.

Best Practice / Guidance

- 3.3 The Centre for Governance and Scrutiny's (CfGS) Good Scrutiny Guide recognises the importance of the Forward Work Programme. In order to 'lead and own the process', it states that Councillors should have ownership of their Committee's work programme, and be involved in developing, monitoring and evaluating it. The Good Scrutiny Guide also states that, in order to make an impact, the scrutiny workload should be coordinated and integrated into corporate processes, to ensure that it contributes to the delivery of corporate objectives, and that work can be undertaken in a timely and well-planned manner.
- 3.4 Forward Work Programmes need to be manageable to maximise the effective use of the limited time and resources of Scrutiny Committees. It is not possible to include every topic proposed. Successful scrutiny is about looking at the right topic in the right way and Members need to be selective, while also being able to demonstrate clear arguments for including or excluding topics.
- 3.5 The CfGS guide to effective work programming 'A Cunning Plan?' makes the following reference to the importance of good work programming:

'Effective work programming is the bedrock of an effective scrutiny function. Done well it can help lay the foundations for targeted, incisive and timely work on issues of local importance, where scrutiny can add value. Done badly, scrutiny can end up wasting time and resources on issues where the impact of any work done is likely to be minimal.'

Forward Work Programme

- 3.6 Following the approval of the schedule of Scrutiny Committee meeting dates at the Annual Meeting of Council on 18th May 2022, the scheduling of standing statutory reports to Scrutiny Committees upon: the Medium Term Financial Strategy, Performance, the Corporate Plan, Budget Monitoring, etc. were mapped to the appropriate timed COSC meeting dates into a draft Forward Work Programme.
- 3.7 The draft Forward Work Programme for each Scrutiny Committee has been prepared using a number of different sources, including:
 - Corporate Risk Assessment;

- Directorate Business Plans;
- Previous Scrutiny Committee Forward Work Programme report topics / Minutes;
- Committee / Member proposed topics;
- Policy Framework;
- Cabinet Work Programme;
- Discussions with Corporate Directors;
- Performance Team regarding the timing of performance information.

3.8 There are items where there is a statutory duty for Policy Framework documents to be considered by Scrutiny, e.g. the MTFS including draft budget proposals scheduled for consideration in January 2023, following which the COSC will coordinate the conclusions and recommendations from each of the Subject Overview and Scrutiny Committees in a report on the overall strategic overview of Cabinet’s draft Budget proposals to the meeting of Cabinet in February 2023.

3.9 An effective FWP identifies the issues that the Committee wishes to focus on during the year and provides a clear plan. However, at each meeting the Committee will have an opportunity to review this as the Forward Work Programme Update will be a standing item on the Agenda, detailing which items are scheduled for future meetings and be requested to clarify any information to be included in reports and the list of invitees. The FWP will remain flexible and will be reported to each COSC meeting with feedback from each SOSC FWP and any updated information gathered from FWP meetings with Scrutiny Chairs and Corporate Directors.

4. Current situation/proposal

4.1 The Committee approved its Forward Work Programme at its previous meeting.

4.2 The Committee’s Forward Work Programme will also be reported to the Corporate Overview and Scrutiny Committee, for coordination and oversight of the overall FWP.

Identification of Further Items

4.3 The Committee is 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 maximise the impact scrutiny can have on a topic and the outcomes for people. Criteria which can help the Committee come to a decision on whether to include a referred topic, are set out below:

Recommended Criteria for Selecting Scrutiny Topics:

PUBLIC INTEREST: The concerns of local people should influence the issues chosen for scrutiny;

ABILITY TO CHANGE: Priority should be given to issues that the Committee can realistically influence, and add value to;

PERFORMANCE: Priority should be given to the areas in which the Council is not performing well;

EXTENT: Priority should be given to issues that are relevant to all or large parts of the County Borough; or a large number of the Authority's service users or its population;

REPLICATION: Work programmes must take account of what else is happening in the areas being considered to avoid duplication or wasted effort.

Reasons to Reject Scrutiny Topics:

- The issue is already being addressed / being examined elsewhere and change is imminent.
- The topic would be better addressed elsewhere (and can be referred there).
- Scrutiny involvement would have limited / no impact upon outcomes.
- The topic may be sub-judice or prejudicial.
- The topic is too broad to make a review realistic and needs refining / scoping.
- New legislation or guidance relating to the topic is expected within the next year.
- The topic area is currently subject to inspection or has recently undergone substantial change / reconfiguration.

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 Corporate Parenting Cabinet Committee and particularly any decisions or changes which they should be aware of as Corporate Parents.
- 4.7 The Forward Work Programme for this Committee is attached as **Appendix A**.
- 4.8 The Recommendations Monitoring Action Sheet to track responses to the Committee's recommendations at the previous meeting is attached as **Appendix B**.
- 5. Effect upon policy framework and 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.

6. Equality Act 2010 implications

- 6.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh language have been considered in the preparation of this report. As a public body in Wales, the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

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

- 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 and Elected Members.
- 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 directly associated with this report.

9. Recommendations

- 9.1 The Committee is recommended to:
- a) Consider and approve the Forward Work Programme attached as **Appendix A**;
 - b) Identify any specific information the Committee wishes to be included in the items for the next two meetings, including invitees they wish to attend;
 - c) Identify any further items for consideration on the Forward Work Programme having regard to the selection criteria in paragraph 4.3 of this report;

- d) Note the Recommendations Monitoring Action Sheet to track responses to the Committee's recommendations made at the previous meetings, attached as **Appendix B**;
- e) Note that the Forward Work Programme, Recommendations Monitoring Action Sheet and any updates from the Committee will be reported to the next meeting of COSC.

Kelly Watson

Chief Officer – Legal & Regulatory Services, HR and Corporate Policy

2 December 2022

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Background documents: None.

**Draft Outline Forward Work Programme
Subject Overview and Scrutiny Committee 2:**

APPENDIX A

<u>Date of Meeting:</u>	<u>Report Topics:</u>
Mon 11 July 9.30am	<ul style="list-style-type: none"> - Corporate Parenting Champion Nomination report; - Nomination to the Public Service Board Scrutiny Panel report; - Draft Outline Forward Work Programme.
Thurs 15 September 10am	Meeting postponed for national period of mourning
Thurs 3 November 10am	<ul style="list-style-type: none"> - Care Inspectorate Wales (CIW) Performance Evaluation Report Of Childrens Social Care Services 23 - 27 May 2022 - Call In of Cabinet Decision: Porthcawl Waterfront Regeneration: Appropriation of Land at Griffin Park and Sandy Bay
Thurs 8 December 10am	<ul style="list-style-type: none"> - Annual Report - Safeguarding of Children and Adults - Update on the Care Inspectorate Wales Inspections of Bridgend County Borough Council's Regulated Services In Adult Social Care For 2022
Friday 20 January 10am (Provisional)	<ul style="list-style-type: none"> - Draft Medium Term Financial Strategy 2023-24 to 2026-27 and Budget Proposals
Thurs 16 February 10am	<ul style="list-style-type: none"> - Integrated Working with Cwm Taf University Health Board. - Child Practice Review and Action Plan - Early Intervention to Reduce Care Experienced Children and Key Pressures including Information, Advice and Assistance (IAA), Early Help and Edge of Care - Delays in Adult Social Care Packages
Mon 27 March 10am	<ul style="list-style-type: none"> - Support for Young Carers and Adult Carers - Learning Disabilities Action Plan
Date TBC	<ul style="list-style-type: none"> - Prevention and Wellbeing, Leisure (Halo) and Cultural Trusts (Awen) and Further Integration with BAVO. - Adult Mental Health - Post 18 Housing and Financial Support for Care Experienced Children

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Subject Overview and Scrutiny Committee 2

RECOMMENDATIONS MONITORING ACTION SHEET

Date of Meeting	Agenda Item	Action	Responsibility	Outcome
11 July 2022	Corporate Parenting Champion Nomination	Councillor Alan Wathan was nominated to represent Subject Overview and Scrutiny Committee 2 as an invitee to meetings of the Cabinet Committee Corporate Parenting.	Scrutiny / Chief Officer – Legal and Regulatory Services, HR and Corporate Policy	ACTIONED – Membership of Corporate Parenting Cabinet Committee updated and formally reported to Cabinet 19 July 2022.
11 July 2022	Nomination to the Public Service Board Scrutiny Panel	Councillor Paula Ford was nominated to sit on the Public Service Board Scrutiny Panel.	Scrutiny	ACTIONED – Membership of Public Service Board Scrutiny Panel updated and initial Briefing session arrangements underway.
11 July 2022	Forward Work Programme Update	The Chairperson proposed that a glossary of acronyms would assist Members.	Scrutiny	ACTIONED - response and information circulated to Members.

Date of Meeting	Agenda Item	Action	Responsibility	Outcome
3 November 2022	Care Inspectorate Wales (CIW) Performance Evaluation Report Of Childrens Social Care Services 23 - 27 May 2022	<p>The Committee proposed That the Chair of the Subject Overview and Scrutiny Committee 2 liaise with the Deputy Leader and Cabinet Member for Social Services and Early Help to identify:</p> <ul style="list-style-type: none"> a) What Members can do to support the Council's promotion of recruitment into Bridgend Social Services; and b) What support the Committee can provide to the Deputy Leader and Cabinet Member for Social Services and Early Help in her discussions with Welsh Local Government Association regarding employment terms and conditions and pay. 	Scrutiny / Chair of SOSC 2	Awaiting Response from Engagement between Deputy Leader and Chair of SOSC 2.
3 November 2022	Care Inspectorate Wales (CIW) Performance Evaluation Report Of Childrens Social	The Committee requested a briefing note setting out the process of calls made to the Information, Advice and Assistance (IAA) Service to	Scrutiny / Corporate Director -Social Services and Wellbeing	Recommendations circulated requesting response - to be provided.

Date of Meeting	Agenda Item	Action	Responsibility	Outcome
	Care Services 23 - 27 May 2022	include detail as to how or if these are being recorded and the responsibility of schools when making safeguarding referrals.		
3 November 2022	Care Inspectorate Wales (CIW) Performance Evaluation Report Of Childrens Social Care Services 23 - 27 May 2022	The Committee requested Detail of Social Worker current caseloads including the highest caseload attributed to any one Social Worker.	Scrutiny / Corporate Director -Social Services and Wellbeing	Recommendations circulated requesting response - to be provided.
3 November 2022	Care Inspectorate Wales (CIW) Performance Evaluation Report Of Childrens Social Care Services 23 - 27 May 2022	The Committee requested how many Direct Payments have been applied for in the past 12 months and how many were made	Scrutiny / Corporate Director -Social Services and Wellbeing	Recommendations circulated requesting response - to be provided.
3 November 2022	Care Inspectorate Wales (CIW) Performance Evaluation Report Of Childrens Social Care Services 23 - 27 May 2022	The Committee requested the current waiting list for children awaiting help from the Youth Emotional Mental Health Team.	Scrutiny / Corporate Director -Social Services and Wellbeing	Recommendations circulated requesting response - to be provided.

Date of Meeting	Agenda Item	Action	Responsibility	Outcome
3 November	Call in of Cabinet Decision: Porthcawl Waterfront Regeneration: Appropriation of Land at Griffin Park and Sandy Bay	The Committee concluded that the Decision would not be referred back to Cabinet but made a number of recommendations.	Scrutiny/Chair of Committee	Pending.