-		TO BE CHANGED / REFERENCED / ADDED INTO THE PLAN	
	KEY	DEALT WITH UNDER OTHER PARTNERSHIP/S	
		LOCAL WORK / NOT PART OF HEALTH AND SOCIAL CARE	
		CROSS CUTTING THEME	
		SPECIFIC QUESTION FOR LEAD	
		FOLLOWS LEGISLATION / GUIDELINES	
		MISC: QUESTION OR COMMENT (e.g. data etc)	
Name	Chapter Enquiry related to	Feedback	Recommended Related Actions
Response sent to HelenE@nptcvs.org.uk	Core themes and cross- cutting themes	Thanks for sending these across. Having read through the documents, I was wondering why Homelessness, Drug abuse/substance misuse and Sexual Health were not listed as core themes though later on in document, Homelessness and Drug abuse/substance misuse were listed as regional cross cutting priorities and not until the end of document under Secure Estate is sexual health mentioned. So does that mean only within the confines of a secure estate is sexual health an issue or priority to be tackled? I believe it should cut across the core themes as a priority particularly for Children and young people, Learning disabilities, Violence against women and Safeguarding.	Sexual violence is covered with the DA and VAW chapter Guidance stipulated chpaters Need to include housing on RPB WG - local priority Sexual health not within regional agenda Clarify purpose of area plan - what is covers
Response sent to HelenE@nptcvs.org.uk	General	I still am so shocked to see not one word about death, dying or bereavement. Do people not die in the Western Bay Area.? It is something that is relevant to each and every person and I have made my comments every time I see a consultation. What can I do to make sure it gets in there somewhere. There are so many places that is relevant to. What about when young carers lose the one they have been caring for etc? What can I do?	J. Abbott-Davies confirmed that the MH Strategy will inclued an element around dying, dementia, death ACTION: Pickup in Carers question with Carers Co-oridnator, LGH
HelenE@nptcvs.org.uk	Domestic Violence	1. Consideration to how does the future Bridgend alignment with RCT and Merthyr going to fit into the Western Bay Structure on the elderly wellbeing of residents. 2. Clear and concise strategic arrangements for elderly domestic violence (DV) victims. 3. Recognition within the plan that elderly people can be affected by DV within their homes, by family members and friends, people employed within other organisations or cultural/ideology issues. 4. Recognition and feasible solutions within the plan to resolve elderly DV victims residing within the Western Bay area by offering support services to elderly welfare residing within the region whom may have been traumatised by being stopped from or unjustly limited to seeing their grandchild(ren) due to false allegations upon a parental family separation. 5. Ensure the plan enables partnership working involving MPs and AMs on creating legislation incorporated into the wellbeing plan to ensure children see their Grandparents whenever it is safe to do so; and ensuring false allegations are not taken at face value by professionals involved in children welfare and contact arrangements. 6. Clear strategic solutions to be illustrated within the plan of addressing elderly DV victims with safeguarding pertinent funding for specific organisations supporting elderly DV clients. 7. Ensure the plan recognises the wishes and feelings of elderly DV victims are reasonably heard and considered by professionals involved with their wellbeing. 8. Recognition within the plan of the importance of elderly DV victims and the impact of a FSA (feasible, suitable and acceptable) strategy will positively aim to reduce or stop DV aimed to improve elderly wellbeing; that will hopefully positively impact on reducing public expenditure and organisational efficiency/performance when workable solutions addressing/reducing DV in the Western Bay area is implemented and evaluated by pertinent organisations.	All domestic plans sit locally - under VAW strategies - detail in the plans

	General	There needs to be more focus on co-production both at a regional level for construction of regional plans and actions and when improving local service provision	This is noted in the Area Plan ACTION - First step is to co-produce a plan on the page with the regional citizen panel members
	General	Education is not referenced in the Area Plan	Referenced in summary for area plan - Western Bay Program relates to health and social care
	General	The actions seem to be very high level and don't give detail on HOW and WHAT citizens and service users might see as a result	Futher details of outcomes, work plans etc included within individual programme and project
	General	The area plan and action plan are not always understandable and clear - terminology is not familure to citizens, background and purpose of the plan is not clear and there is a general sense of confusion	ACTION - Plan on the page to be co-produced with citizen panel
	General	There are numerous references to actions 'being developed' or 'TBC' or 'opportunities will be explored' how can we be more specific on what we will actually achieve so that citizens can have meaningful feedback? Language is general and non-specific	COMPLETE - Timescales included for all actions
	General	IAA - there are some comments relating to this which suggests that the explination in the plan is not clear enough	Not clear what this is referring to
	Carers who need support	Parent / Carers aren't highlighted (also evident in CYP chapter)	COMPLETE - Agreed to change to - All carers List of all types of carers included at front end of chapter to clarfiy
	Carers who need support	Comment that carers by their very nature need support and so the title should just be 'carers'?	COMPLETE - 'Act says 'carers who need support' however changed the title to Carers
	Carers who need support	How are we identifying those carers who don't necceserily know that they are carers?	ACTION: Pickup Carers question with Carers Co-oridnator, LGH
	Carers who need support	Promotion of carers rights and promotion of carers being able to work	ACTION: Pickup Carers question with Carers Co-oridnator, LGH
	Carers who need support	Should this be a cross cutting theme as it impactrs on all other chapters in some way?	Yes it is cross cutting, howwever we are following WG requirements Seen as positive move to have carers as chapter in own right
	CYP	Can we make reference to the UNCRC within the area plan?	COMPLETE - Now included in the Area Plan
	Health and Physical Disability	 HDP.P1 – "When commissioning services" – services should be co-produced from the start. Wording should commit to and reflect this. 	RPB have agreed to reduce regional priorities - so no longer a regional priority in the plan
	Health and Physical Disability	Employability - will this force people into employment when they're not fit?	No
	Health and Physical Disability	If people are self-identifying as 'disabled' then are our figures incorrect and is there a greater need for preventative intervention than first though?	Noted that people don't like to admit they are disabled / can we be clearer on what disabled is / lessons learned for PA
	Health and Physical Disability	Can we change the term 'people with disabilities' to 'disabled people'	COMPLETE - changed to disabled people
Feedback from Citizen Panel	Health and Physical Disability	If care and support needs are highlighten inn the Population Assessment as being largely organised around hospitals but we know that healthcare can and should be provided in the community how do we action this?	Struggled to get numbers for this cohert for this - add to lessons learned
	Secure Estate	Lack of joined up thinking between secure estates	RPB have agreed to reduce regional priorities - so no longer a regional priority in the plan - feedback via local arrangements
	Secure Estate	The response to this chapter should go beyond identifying some of the problems and focus on what works to support men coming from custody to prevent recidivism	This is done locally / however bear in mind when do the review
	LD and Autism	Figures in population assessment for ASD	ACTION - Can we establish where these came from to be clear on the validity / ND and IAS will identify more people - need to reflect this
	LD and Autism	 No suggestions of social enterprises or engaging people in work based opportunities whatever level of LD they have. 	The new IAS service will include linking in people with work based opportunities
	LD and Autism	What is plan for transition (or lack there of) services?	In the main, transition is done locally For autism -the new service will have all age service
	LD and Autism	Where is direct payments referenced?	Organisesd locally

LD and Autism	We feel autism has been lost be looking at it with LD	Suggestion to split these two chapters up so that the Autism can be referenced more easily COMPLETE - members in RPB workshop agreed to include as one chapter as high level regional priority was the same for LD and autism however include as 2 separate actions plans so can clearly see the actions for autism
LD and Autism	What do we mean by assistive technology	Respond to question Lessons learned - produce glossary?
LD and Autism	Population Assessment point 4 - Why/how is the diagnosis going to reduce by 2035? Is that because the general population is decreasing? Girls are widely agreed to be underdiagnosed.	ACTION - Can we establish where these came from to be clear on the validity
LD and Autism	Reference to additional diagnositc pathway for children outside of schools	Not currently part of the regional work
Sensory Impairment	No reference to Irlen Syndrome	Picked up under the general term of Sensory impairment
Sensory Impairment	IAA – needs to consider appropriate formats. One size does not fit all.	IAA is progressed / developed at a local level
Mental Health	Positive comment relating to a preventative agenda suggesting that community groups can support reduction in funds, meetings outcomes etc	Noted
Mental Health	Suggestion that the Mental Health population assessment is invalid	They do not recognise data sources. When we do next one - must co-produce with users of how we collect data - add to lessons learned exercise
Mental Health	Education mentioned several times - i.e. training on MH conditions for carers, families, employers, community	This will be picked up in the development of the mental health framework - though not currently clear in plan as it doesn't contain this level of detai
Mental Health	Investment in preventative and support services /Drop in groups for people to chat	This will be picked up in the development of the mental health framework - though not currently clear in plan as it doesn't contain this level of detai
VAWDASV	There needs to be more focus on how we will address the specific needs of male victims. Suggestion that male victims do not want to be supported by services that are grounded in the experience of women	Local strategies
Older People	 Ref: Older Persons' Commissioner – Place to Call Home 2014 – After a number of years – very significant comments from OPC. i.e "significant action required", "I have no assurance on a number of issues", "this is deeply concerning". 	ACTION - Is this included in the plan - do we need to include it / Link to RQF - discuss with Elaine and Jess
Older People	OP.P3 – Community events required to combat social isolation. <i>Promote intergenerational work</i>	COMPLETE This is already included in the action plan under this priority - OP.P3
	Continue working towards a dementia friendly Western Bay, improving support and information for people with dementia, their family and carers" – don't like the term 'friendly'	This sits under the Public Service Boards and not RPBs
Safeguarding	 V.A and M.L can be devices used by professionals against carers and family members. Advice and protection is needed for family. 	Not sure what VA and ML refers to

General

Introduction

Sensory Impairment

Secure Estate

Learning Disability and Autism

Older People

Mental Health

Children and Young People

Safeguarding

Health/Physical Disabilities

Carers who need support

Violence against women, domestic abuse and sexual violence