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Dear Jackie

ANNUAL FOCUSSED ACTIVITY

This letter summarises the findings of our annual focussed activity looking at services to carers, which we undertook on 21, 22 and 26 February. The inspectors were Denise Moultrie and Tracey Shepherd.

Overview

The local authority has completed a comprehensive revision of its offer to carers via a process of consultation/ co production. The aims of this are consistent with the Act's focus on improving the offer to carers, of ensuring signposting to community support is provided to as many carers as possible and increasing awareness of carers' assessments and potential services. We found the recording of discussions with people to complete the assessment and reach an outcome, in the sample we reviewed, was generally insufficient to evidence good practice or accountable decision making.

Areas for improvement

- Ensure the quality of recorded assessment outcomes and rationale and related case recording.

Findings

- Performance information for the quarter three indicates virtually all carers (96%) were offered an assessment. This refers to known carers and senior managers are very aware most carers are not identified. Of carers' assessments completed, 3% resulted in a support plan for the carer in their own right. No carer is in receipt of direct payments (in their own right) although managers were confident staff were aware of this option.

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We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

- The new format for carers' assessment introduced in January 2019 was more in line with the SSWB Act with respect to questions on personal outcomes and strengths. We queried if the question 'What do you like to do in your spare time?' may invoke a negative reaction due to the lack of free time experienced by many carers. This question was not positively responded to in the sample we reviewed and carers we spoke to were critical. There may be a risk that a lack of response is misunderstood as a lack of interest in social and leisure activities. The head of service confirmed this was promptly changed to 'What would you like to do if you had some spare time?' We also noted some differences in the paper and electronic version of the document which senior managers may wish to resolve.
- Assessment forms are routinely sent in the post to be completed by the carer. The accompanying letter offers support to complete if required. We spoke to carer link workers who routinely helped people complete this form, although this is only possible when carers are known to link workers, otherwise support would be from adult services. From our sample, forms where link workers had assisted were noticeable fuller and with richer detail valuable for the assessment. Conversely we saw forms completed by carers only which contained very little information to guide the assessor.
- A social worker will contact the carer usually over the telephone to complete the assessment. In our sample, we noted a paucity of recording of this discussion. Where little information had been recorded by the carer, we were unable to be confident additional information was obtained through discussion with the social worker. Recording on the assessment form or in case recording did not adequately evidence informed, clear and accountable decision making. Where carers had health conditions, we found their assessments would have benefitted from specialist information on their prognosis and how this would impact their caring role.
- We did not find evidence on files to be sure people were sent their assessments when they wished to receive these, or were always informed of the outcome of the assessment by other means.
- The head of service outlined recent delays in allocating assessments for care and support, which will have impacted on carers. Current pressures on capacity within domiciliary care was also of relevance.
- The carers' development officer audits files to identify trends and themes and carers' files were subject to the randomised auditing approach in operation across adult services. We understood carers' assessments are not signed off by team managers (although the carer's development officer believed they were). There may be an opportunity to consider if there are further opportunities to quality assure carers' assessments and to embed learning as required.
- There was a range of workers involved in supporting carers, including carers' champions across adult services, social services representation on carers' forum and mental health forum meetings, a carers' development officer and carers' link workers. Work had begun to outreach the service by engagement with GP surgeries. We saw a full calendar of events and activities at the carers' centre; while positive, senior managers view this as restricting services to those within travelling

distance of Bridgend town centre and to a single model of provision and to which the service model being tendered is a response.

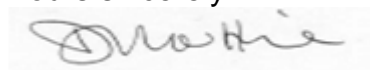
- Carers for people with mental health conditions told us they would like the local authority to increase its level of communication and consultation with them. They felt events and services for carers generally do not address their specific circumstances and they would like to have representation on relevant local authority groups. The carers were positive about the support they receive from Hafal but were critical of the responsiveness and level of understanding of carer's assessments within CMHT. Hafal workers told us they were unaware of the plans for the new service model and there may be opportunities to improve their view of local authority provision. Carers were concerned at the lack of information they received about their loved one when they are in hospital. Senior managers had acknowledged this and were developing a designated AMHP role to support and liaise with carers.
- Senior managers have shown commitment to the development of the new Bridgend Carers Wellbeing Service (BCWS) for delivering information, advice and support to carers. We were made aware of the co productive approach with stakeholders, including carers, to develop the service model over a considerable period. The tendering process for the information and advice service was in operation at the time of our visit. The main tenets of the new service model were well articulated by the project leader and in documentation provided. The planned move to a more outreach approach, involving other agencies in signposting and use of social media may reach the wider group of carers identified as a priority, including carers from minority ethnic communities. A revision of short breaks is anticipated to provide greater pooled resources and more flexibility of use. The project lead described the drive to increase the creative use of direct payments for carers.

Methodology

- Review of documentation provided
- Review of a sample of 18 carers' assessments and associated records
- Discussion with carers and support workers from Hafal
- Discussion with two carer link workers
- Discussion with the strategic planning and commissioning officer and carers development officer
- Discussion with Head of Service, including verbal feedback on focussed activity (28 February).

We have identified areas of good practice and an area for improvement. CIW will reflect the findings of this focussed activity in our annual Local Authority Performance Review letter. I wished to extend our thanks to all those who helped with the arrangements for this work and to those people and staff who spoke with us.

Yours sincerely



Denise Moultrie
Senior Manager
Care Inspectorate Wales