

Meeting of:	SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2
Date of Meeting:	19 FEBRUARY 2024
Report Title:	CARE INSPECTORATE WALES (CIW) INSPECTION OF BRIDGEND COUNTY BOROUGH COUNCIL'S (BCBC) REGULATED SERVICES IN ADULT SOCIAL CARE
Report Owner / Corporate Director:	CORPORATE DIRECTOR, SOCIAL SERVICES & WELLBEING
Responsible Officer:	JACKIE DAVIES HEAD OF ADULT SOCIAL CARE
Policy Framework and Procedure Rules:	There is no effect upon the Policy Framework and Procedure Rules
Executive Summary:	<p>Care Inspectorate Wales (CIW) are the independent regulators of social care and childcare services in Wales and inspect care service providers against the requirements of relevant legislation including the Regulation and Inspection of Social Care Wales Act (RISCA) and Social Services and Wellbeing Act 2014.</p> <p>The CIW are required to:</p> <ul style="list-style-type: none"> • Carry out functions on behalf of Welsh Ministers to provide assurance on the quality and safety of services • Decide who can provide services • Inspect and drive improvement of regulated services and local authority social services • Undertake national reviews of social care services • Take action to ensure services meet legislative and regulatory requirements <p>This report provides the committee with information on the regulatory activity undertaken by CIW across Bridgend County Borough Council's Adult Care Services in 2023.</p> <p>The inspections in the accommodation based and domiciliary regulated support services report against core themes:</p> <ul style="list-style-type: none"> • Well-being • Care and Support

	<ul style="list-style-type: none"> • Leadership and Management • Environment (residential care only) <p>Summaries of the inspections are contained in this report and include:</p> <ul style="list-style-type: none"> • Key findings of how we have performed against standards in our residential and domiciliary regulated services. • Activity undertaken to meet regulatory standards. • Actions to address areas of improvement and non-compliance notices.
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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 in 2023. This report relates to inspection activity detailed below:

Service	Visit Date	Publication Date
Ty Llwynderw Extra Care (Residential Provision)	09/02/2023	31/03/2023
Bryn y Cae Residential Services for Older Persons	17/03/2023	Draft
Breakaway Short Stay Service	14/04/2024	13/06/2023
Bridgend CBC Domiciliary Care Services	18/05/2023	03/07/2023
Ty Ynysawdre Extra Care (Residential Provision)	05/07/2023	22/08/2023
Ty Cwm Ogwr Residential Home for Older Persons	24/07/2023	04/09/2023

2. Background

- 2.1 These 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 conditions of registration and the individual service's 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 quality of support, achieve their identified outcomes, are not placed at risk and do not experience harm. The inspections are undertaken in consideration of four core themes:

- The wellbeing of individuals receiving care and support
- The quality of care and support provided to individuals.
- The leadership and management of the service
- Environment (except domiciliary services)

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

- 2.2 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 residential for adults aged 18 years and over with a range of needs including learning disabilities, Autism Spectrum Disorder (ASD) and physical disabilities in a residential setting.

Bridgend County Borough Council Domiciliary Service is a complex umbrella service, which incorporates short and long term home care and support services encompassing; the learning disability supported living services; Glyn Cynffig hostel Ty Mor Young Persons Service; HMP Parc and the domiciliary provision located within the extra care facilities at Ty Llwynderw and Ty Ynysawdre. Therefore, the service provides care and support for adults of all ages and with a wide range of needs.

- 2.3 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. 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.
- 2.4 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.
- 2.5 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 Group Manager for Provider Services. The RI is legally accountable for the provision of care and support and is required to have oversight of the running of the services. In addition, there are also registered managers (RM) in post, who are suitably qualified and registered with Social Care Wales as required under RISCA.

3. Current situation / proposal

- 3.1 The reports have identified that the standard of care and support provided across the services is of a good standard. Key strengths include the relationships between staff and individuals receiving care and support; leadership and management, the provision of activities; individuals happy with their care and support and their needs being well met, choice of meals and positive mealtime experiences.

The previous themes around non-compliance with policies and procedures and staff support and development have now been achieved across the services.

- 3.2 There are some areas for improvement identified within the reports, which will be addressed at the individual service level.

3.3 Key inspection findings for Ty Llwynderw (Residential):

The report identified that people live in a warm and friendly environment which is clean and well maintained. The staff know the individuals and facilitate interaction and conversations with them throughout the day. Personal plans and risk assessments are in place and are reviewed regularly. Staff receive regular supervision to discuss professional issues and development needs. There is good management oversight and governance of the service. At the time of the inspection there was no nominated RI, however the person applying for the role had visited the home and was aware of the regulatory requirements. This service is working towards providing an 'Active Offer' of the Welsh Language.

- Wellbeing – People are treated as individuals and are supported to make choices throughout their day. People were observed getting up when they wanted to and requesting to play games or watch films. People are supported to be as healthy as they can be by receiving holistic care from a variety of health and social care professionals and there are good links with GP surgeries, community nurses and other allied health professionals. Medication guidance has been provided and staff complete competency assessments between training refreshers. Medication is stored safely and part of a medication round was observed that indicated care staff are competent in administration of medication. There are systems in place to safeguard people and risks to individual health and safety are included in care plans and risk assessments. There are appropriate policies in place and staff have completed safeguarding training. There is a person living at the service who speaks Welsh as well as English and care staff speak incidental Welsh to them as much as they can.
- Care and Support – The service encourages individuals to interact with each other and to be as active as possible throughout the day. One family member commented “I just can't fault what they do. I come every day, different times, it's always the same. They're just lovely here”. On the day of the visit two people were being cared for in bed due to ill health and care staff were observed checking in on them and delivering their care in a friendly but sensitive manner. In addition the manager was arranging access to a guest room for one person's family who were travelling long-distance to visit an ill relative. Personal plans contain information on people's needs and the support that is required to assist them with each aspect of daily living and there was evidence that they are reviewed when situations change. A thorough handover is completed between shifts. People have choice over their meals and there is a good rapport between individuals and kitchen staff in the dining room. There are systems in place to promote infection control and good hygiene and staff were observed using personal protective equipment (PPE) appropriately.
- Environment – Ty Llywnderw is part of a wider complex owned by Linc Cymru, which includes a variety of facilities such as a spa room, a salon and a restaurant. Utility areas are kept locked to safeguard people from potential hazards and the residential unit is secure from unauthorised persons. All bedrooms are en-suite and there are spacious communal areas. Bedrooms are personalised with décor and belongings. Linc Cymru provide effective maintenance, domestic and laundry services. Fire equipment and alarms are checked regularly and evacuation plans are stored by the fire box in case of an emergency.

- Leadership and Management – Many of the staff have worked at the service since it was opened and recruitment to the service has been successful. Due to long-term sickness absence, agency staff are being used. One staff member commented “It has been hard, but we all want the best for the people that live here so we try to cover as many shifts ourselves as we can and the manager is on it, you can call her for any problem or mistake, and she’ll come and help you sort it out”. Care staff are appropriately recruited and checked. Staff are appropriately trained and supported in their roles. Progress has been made on completing mandatory training and more training courses have been made available. Supervision and appraisal are held as frequently as required. There are systems in place to monitor the quality of the service provided. Quarterly monitoring visits have been completed by the previous RI. A biannual quality of care report has been completed to identify what is working well and what improvements are needed. Policies and procedures are in place and have been reviewed and updated.

3.4 Key inspection findings for Bryn y Cae:

The service provides support in a warm and friendly environment. Staff know people well and interact in a kind and caring manner. Activities and projects at the service are regular and varied to ensure people’s physical and emotional well-being. Audits and oversight by the management team are carried out. Staff feel supported, happy, confident in their roles and receive regular supervision and training. Policies have been or are in the process of being reviewed and updated. 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 professional such as Occupational Therapists and Physiotherapists. Staff work to offer choice of meals with a four weekly menu that is varied and nutritious. People make suggestions for the menu and alternative dietary needs are considered. Staff can identify risk of harm and abuse. Risks to people’s health and safety are included in personal plans and risk assessments. Policies are in place around safeguarding and whistleblowing and the manager and staff understand the requirements when reporting a potential safeguarding issue. People feel safe at Bryn y Cae and feedback is extremely positive. People maintain contact with loved ones through visits, telephone calls and digital platforms. Individuals’ communications needs are considered and the service provides the Welsh Active Offer.
- Care and Support – The service considers a wide range of views and information to confirm it can meet individuals’ needs and outcomes. The manager completes a pre-admission assessment and these were evident on care files. Care plans are accurate and up to date. Staff know people well and interactions are warm and friendly. Feedback is positive. One person commented “Staff are marvellous, food

is fabulous. "I'm loving it here. I like the arts and crafts. Relatives commented Its's lovely here. Exceptional. I've seen worse hotels. Staff are marvelous". People have good care and support and access to healthcare and other services. The medication policy is in the process of being updated. Protocols and arrangements are in place for the safe and appropriate management of medication. There are Welsh speaking staff at the service and others are completing a Welsh language course. Signage around the home is bilingual. The infection control policy is in the process of being updated, but Public Health Wales (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, welcoming, spacious and odour free. The building is homely with personalisation throughout. Outdoor spaces have been developed involving residents and donations from the local community, are accessible to people, but secure. There is a maintenance staff member on site and records of compliance with health and safety requirements was evident. The provider has not yet completed fire safety work required following a fire safety inspection in February 2022.
- 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. Most staff receive regular supervision and appraisals to support their wellbeing and personal development. Staff were happy and confident in their jobs and felt supported by management. One staff member commented "I'm loving it. Learning all time". People have access to information about the service and the statement of purpose and service guide are up to date. Policies and procedures are in place including Safeguarding and Whistleblowing. Other policies have been or are in the process of being reviewed and updated. Processes are in place to monitor the quality of the service. The RI carries out monitoring and provides good support to the management. RI visits take place and recommend areas for improvement. Quality of care reviews are completed every six months.

3.5 Key inspection findings for Breakaway:

Care staff follow an active support model, which encourages people to maintain their independence. Following several changes in management and staff last year, the staff team is now stabilising and is well led by a hands-on management team. Personal plans are outcome focused and regularly reviewed and encompass information gathered from the person, relatives and other professionals involved in their care. Staff are trained and supervised to be competent in their roles. The new designated RI is currently completing their application with CIW and show good awareness of their role in oversight and quality assurance.

- Wellbeing – People are supported to have control of their daily routines and can ask for their preferred foods. Staff facilitate people to continue in their usual jobs, education or day care services. Care staff were observed meeting people for the first time and interactions were warm. People were using different communication methods and technology to settle themselves into their stay and interact with new people. The service is adapting to people's needs to make it the most accessible

it can be. There are systems in place to safeguard people and risk assessments are included as part of people's service delivery plans. Staff are trained in safeguarding and there is a policy in place for guidance. There are communal areas where staff encourage people to congregate, interact and share meals.

- **Care and Support** – The manager and senior staff have completed new service delivery plans and risk assessments for everyone who is currently using the service. They are person-centred and contain relevant multi-disciplinary input. People are supported to be as healthy as they can be. Care staff follow a key worker model, whereby one staff member oversees the day of one individual and tailors the care and support and activities provided. Medication is stored safely and administration is accurately recorded. A medication policy has now been agreed and will replace interim guidance. The service promotes infection control practices and there is an updated infection control policy in place.
- **Environment** – The environment promotes achievement of people's personal outcomes and is well maintained. Individual bedrooms are spacious and neutral. People bring in personal items for their stay. The community spaces are clean, tidy and comfortable and there is a large, accessible outdoor space. The house is secure and areas of the home that may contain hazardous items are kept locked. Personal information is kept securely.
- **Leadership and Management** – Care workers were positive about the management team. One commented "They're brilliant, they listen to our suggestions, they are very supportive". Staff are safely recruited and suitably trained. External professionals have worked with the service to provide specialist training. Staff have regular supervision to discuss professional issues and development. There is good oversight of the quality of care. The new RI applicant has completed a monitoring visit and the report evidences that they have analysed feedback and events in the home and identified actions for themselves or management to complete. There has been improvement in the content of policies and procedures.

3.6 Key inspection findings for Domiciliary Care Services:

People receive care from happy, well supported, staff who receive regular supervision. Staff training has improved since the previous inspection to ensure that staff have the knowledge and skill to carry out their roles and raise concerns. People have accurate and up to date personal plans and they and their relatives are complimentary about the staff and the service. There is a new RI in place. Some policies have been reviewed and updated and there is now a policy officer in place. People's language and communication needs are considered. The service is working towards providing an 'Active Offer' of the Welsh language.

- **Wellbeing** – Staff develop plans with the individual and their representative, using recognised assessment tool and people have choice about the care and support that they receive. People provide feedback about the service that they receive by a variety of methods which contributes to quality assurance. People's needs and risks to their safety and well-being are documented in personal risk assessments. Up to date Safeguarding and Whistleblowing policies are in place.

- **Care and Support** – People and their families have positive relationships with staff and communication is good. Service guides are available for different parts of the service and the Statement of Purpose is consistent with the service provided. Feedback from people and their families is positive. One commented about staff “Excellent. I’d give them five stars. Even if I paid more I couldn’t get any better”. There are measures in place to assist people with their medication. There is an updated medication policy in place and measures are in place to provide improved medication training compliance. Staff receive safeguarding training and feel confident that they would know what to do if they were concerned about someone at risk of harm. Staff are training in infection prevention and control and there is an updated policy in place. There was a good supply of PPE and people receiving care and support said that staff use PPE when in their homes.
- **Leadership and Management** – Staff are knowledgeable and feel supported by the management teams. There is an induction process in place which includes training and shadowing colleagues. Staff have regular supervision which includes discussions around their wellbeing, professional development, observations and competency assessments. Staff receive a variety of online and face to face training, which has improved since the previous inspection. Staff feel happy and confident, one commented about management “They’re great, flexible, marvelous. Couldn’t fault them”. Recruitment is safe and robust and all staff have up to date DBS checks. Recruitment is ongoing using online platforms, attending job fayres, internal and external advertising and incentives for existing and new staff such as an electric car scheme and a pilot project to look at staff roles. There are quality assurance processes in place and the new applying Responsible Individual (RI) has good day to day oversight. Quality of care reports and quality assurance audits are up to date. The complaints policy has been updated and a number of other policies and procedures have also been reviewed since the last inspection.

3.7 Key inspection findings for Ty Ynysawdre (Residential):

The service provides support to people in a warm and friendly environment. Staff know people well and spend time and engage with them throughout the day. Personal plans and risk assessments contain all the necessary information. The residential unit is well maintained and people’ spaces are personalised. The manager and RI are currently absent, but interim cover arrangements are in place and the deputy manager is supported by their line manager and RI. The service does not provide an ‘Active Offer’ of the Welsh language.

- **Wellbeing** – People are supported to exercise choice over their daily routines are able to move freely between communal areas and their own space. People are encouraged to interact with each other and staff and are engaged in a variety of activities. At lunch time a member of staff was observed showing people their meal option to choose what they wanted and to decide on their desired quantity. People are offered drinks throughout the day. People are supported to be as healthy as they can be in conjunction with care from a variety of health and social care professionals and there are good links with GP surgeries, community nurses and other allied health professionals. Medication is stored safely and part of a medication round was observed that indicated care staff are competent in the administration of medication. There are systems in place to safeguard people and risks to individual health and safety are included in care plans and risk assessments. There are appropriate policies in place and staff have completed

safeguarding training. There is not anyone currently living at the service who requires the service in the medium of Welsh, but documents are available bilingually upon request.

- Care and Support – Warm interactions were observed between care workers and people living at the service. One person commented “this is a nice place, the staff are very friendly”. Care staff have the information needed to be able to provide the care needed. Applications for Deprivation of Liberty Safeguards (DoLS) are kept on files. Risk assessments note the risk to people’s safety and the threshold at which care workers will need to intervene. A thorough handover is completed between shifts. There are systems in place to promote infection control and good hygiene and staff were observed using PPE appropriately.
- Environment – Ty Ynysawdre is part of a wider complex owned and maintained by Linc Cymru. There are a variety of facilities such as a spa room, a salon and a restaurant. Utility areas are kept locked to safeguard people from potential hazards and the residential unit is secure from unauthorized persons. All bedrooms are en-suite and there are spacious communal areas. Bedrooms are personalised with décor and belongings. Linc Cymru provide effective maintenance, domestic and laundry services. Fire equipment and alarms are checked regularly and evacuation plans are stored by the fire box in case of an emergency.
- Leadership and Management – People receive care from a consistent staff team who are familiar with their needs. Agency staff have been used to supplement sickness absence. The manager is absent and the deputy manager and team leader are covering the role and no negative impact was found. Staff comments included “I’ve had all my supervisions and can talk to the deputy manager about anything.” Another said “Agency staff don’t make any extra work for us, they are helpful and the know what they’re doing”. Care staff are appropriately recruited and checked. Care staff undertake mandatory and supplementary training. Supervisors practice observations and medical competencies are completed regularly throughout the year. Processes are in place to monitor the quality of service provision. The RI is currently absent, but the previous RI is providing temporary cover as they are familiar with the service, staff team and the people who live there. Quarterly quality assurance visits have been completed which contribute the biannual quality of care reviews. These identify areas of strengths and improvement. The statement of purpose is up to date and there are relevant and up to date policies and procedures in place.

3.8 Key inspection findings for Ty Cwm Ogwr:

People living at the service are settled and comfortable and there is a relaxed atmosphere. Personal plans give information about people and some care needs, however they require further development to ensure that they are person centred. People are supported to make choices about their daily living and are supported by dedicated and experienced staff. Staff feel supported by the new manager and receive training relevant to their roles. Recruitment practice is robust and staff receive regular supervision. The RI maintains sufficient oversight of the service. The service is working towards providing an ‘Active Offer’ of the Welsh Language.

- Wellbeing – People wishes are taken into account to support decision making and people are clear about how to make their feelings known. Those lacking capacity to make decisions are supported by professional advocates or relatives. People have choice over where they spend their time and there is a new programme of activities in place. Bedrooms are personalised to individual taste. There is a varied choice of meals and snacks. Care staff have undertaken safeguarding training and are aware of procedures to protect people from harm and neglect. Policies are in place which are being reviewed and risk assessments are in place to minimize risk to people and staff. There is a new management structure in place and feedback has been positive. The service supports people to be as healthy as they can be and there was evidence of regular contact with GPs, community nursing and other specialist services. Medication is stored safely and observations were made of correct administration and recording. Personal plans need improvement to ensure the information is person centred and consistently completed.
- Care and Support – Pre-admission assessments are completed to ensure people's needs can be met by the service. Care staff have a good awareness of people's likes, preferences and care needs, but this needs to be better documented in personal plans. Daily records indicate that people are receiving appropriate care but could be more detailed to include emotional well-being. Care staff are very attentive and responsive to people's needs with appropriate levels of prompting and support. Staff are friendly and people respond positively. One relative commented "I'm absolutely happy with the care and us as a family are happy that X is being so well looked after". Staff can identify when people may be at risk of harm or neglect and are aware of safeguarding and whistleblowing procedures. Medication is stored safely and medication audits ensure staff maintain good practices and identify areas for improvement.
- Environment – The building is secure and records of visitors are kept. Care files are stored securely. The accommodation is pleasant and of a good standard with personalisation of bedrooms. There are two units with one of them being specifically for people with a diagnosis of dementia. Communal areas are well utilised and people interact happily. Signage around the home is provided in Welsh and English. The service provides a clean and well-maintained environment with adequate equipment to meet people's needs. Cleaning materials are managed safely and procedures are in place to prevent the spread of infection.
- Leadership and Management – Staff are suitably recruited and checked. Care staff said that they were sufficiently trained to undertake their roles and the training matrix showed a range of core and specialist training for staff. Staff receive regular supervision and appraisals and regular staff meetings are held. Staff felt that they were able to talk to the new manager; one commented "She gets things done for the residents". The RI conducts regular visits and the six-monthly quality of care reports consider the standard of services offered. A selection of policies and procedures were looked at and were up to date and sufficiently detailed. The service benefits from having a stable staff team and rotas are managed appropriately. The new manager demonstrates a good understanding of the service and its current strengths and areas for improvement. The service operates in line with its statement of purpose and there is an information leaflet for people using the service.

3.9 Areas of Improvement and Priority Actions Notices

It is pleasing to note that the inspections did not result in the issue of any Priority Action Notices across services and that previous areas of improvements had been addressed in all cases.

The report for Ty Llwynderw did not identify any Priority Action Notices or Areas for Improvement and noted that previous actions for non-compliance with Regulation 36 (Supporting and developing staff) had been completed.

The report for Bryn y Cae did not identify any Priority Action Notices and noted that previous actions for non-compliance with Regulation 12 (Policies and procedures) had been completed.

It did however identify a new Area for Improvement this being: -

Area for improvement – Bryn y Cae	
Regulation	Summary
57	The Provider must ensure Fire Safety work is carried out promptly to reduce the risk of fire at the service.

The report for Breakaway did not identify any Priority Action Notices or Areas for Improvement but noted that previous actions for non-compliance with Regulation 12 (Policies and procedures) had been completed

The report for Bridgend County Borough Council Domiciliary Care Services did not identify any Priority Action Notices or Areas for Improvement but noted that previous actions for non-compliance with Regulation 12 (Policies and procedures) and Regulation 36 (Supporting and developing staff) had been completed

The report for Ty Ynysawdre did not identify any Priority Action Notices or Areas for Improvement.

The report for Ty Cwm Ogwr did not identify any Priority Action Notices but noted that previous actions for non-compliance with Regulation 36 (Supporting and developing staff) had been completed . The report noted that previous non-compliance with Regulation 58 (Medicines) had been achieved but identified a new Area of Improvement this being:-

Area for improvement – Ty Cwm Ogwr	
Regulation	Summary
58	Personal Plans need to be updated to accurately reflect people’s care and support needs and mitigate risk.

3.10 The areas for improvement are being addressed and achievement of the actions is monitored through the Council’s regulatory tracker which is reported to Governance and Audit committee and through the Corporate Performance Assessment process.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 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.
- 4.2 Despite no equality impact assessment being conducted the information contained in the report positively describes support being made available to those providing care.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 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 wellbeing goals of a healthier and more equal Bridgend and Wales are supported.
- 5.2 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 remodeling and transformation of services continues to be a priority.
 - Prevention – the report is about the new approaches adopted by the Directorate in line with the SSWBA, for example, the provision of assistance to enable people to remain independent for as long as possible. This will ensure that need is anticipated and resources can be more effectively directed to better manage demand.
 - Integration – the implementation of the SSWBA requires local authorities to work with partners, particularly the NHS and the Police, to ensure care and support for people and support for carers is provided.
 - Collaboration – The strategic planning and local delivery of integrated support and services are developed with partners such as Registered Social Landlords 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, children and young people is heard.

6. Climate Change Implications

6.1 There are no climate change implications associated with this report

7. Safeguarding and Corporate Parent Implications

7.1 It is a regulatory requirement that BCBC Safeguarding Policy meets Part 8 of The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 which is to ensure service providers have in place the mechanisms to safeguard vulnerable individuals to whom they provide care and support. This includes arrangements that:

- Support vulnerable individuals using the service
- Support and underpin staff knowledge, understanding and skill in identifying risks and action to take where abuse, neglect or improper treatment is suspected or identified; and
- Ensure the service provider works collaboratively with partners to prevent and take action where abuse, neglect or improper treatment is suspected or identified

8. Financial Implications

8.1 There are no financial implications associated with this report.

9. Recommendations

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.

Background documents

None