



## **Social Services**



### **Annual Report** **Statutory Director of Social Services**

**2018/19 v1 (Draft)**

---

## **SWANSEA COUNCIL SOCIAL SERVICES ANNUAL REPORT 2018-19**

### **CONTENTS OF REPORT BY DIRECTOR OF SOCIAL SERVICES**

1. Introduction
2. Director's Summary of Performance
  - 2a) Current position
  - 2b) How we are performing - Child & Family
  - 2c) How we are performing - Adult Services
  - 2d) Progress on improvement priorities
3. How people are shaping services
4. Promoting and improving the well-being of those we help (six standards)
  - 4a) Working with people to define and co-produce personal well-being outcomes that people wish to achieve
  - 4b) Working with people and partners to protect and promote people's physical and mental health and emotional well-being
  - 4c) Taking steps to protect and safeguard people from abuse, neglect or harm
  - 4d) Encouraging and supporting people to learn, develop and participate in society
  - 4e) Supporting people to safely develop and maintain healthy domestic, family and personal relationships
  - 4f) Working with and supporting people to achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs
5. How we do what we do
  - 5a) Our workforce and how we support their professional roles
  - 5b) Our financial resources and how we plan for the future
6. Accessing further information and key documents
  - 6a) Complaints and representations
  - 6b) Mwy Na Geriau - More Than Just Words
  - 6c) How to get in touch
  - 6d) Further information

Appendices: Summary of outcomes (qualitative) and improvement programmes.

## **1. INTRODUCTION**

Social Services can have a huge, positive impact on people's lives. It is important that we reflect upon the way we are doing things and to make sure we are getting things right. It is crucial that we listen to the children, young people and adults that we support to make sure that we are working to be the best that we can be and are making a positive difference.

This annual report by Swansea Council's Director of Social Services 2018/19 is a statutory requirement under Part 8 of the Social Services and Wellbeing (Wales) Act 2014 ('The Act').

In my third annual report role as Director of Social Services, as well as reviewing our overall performance and contribution to wellbeing outcomes, I have highlighted some of the excellent work being undertaken in our key services and on the progress we are making on our improvement journey. This report reflects some of the stories of achievement emerging from our pursuit of excellence in social care practice and our ambition to be the best we can be.

Swansea Council, as with other public services, are facing unprecedented demand and resource challenges in Social Services and the wider local authority. Swansea Council are putting effort into managing demand by getting things right at our statutory front door, and in making sure that we have a targeted approach to early help and prevention services. Our mantra remains that potentially vulnerable individuals and families receive the right help, from the right person, at the right time.

Social Services have recently assumed greater responsibility for helping shape the Council's poverty and prevention service. This provides a great opportunity for the Council and partners to deliver an even more integrated approach to early help and prevention services. This is entirely consistent with expectations under the Social Services and Well Being Act.

Our initial focus will be on the integration of family support services that are traditionally considered the territory of children services. We would be missing a trick if we didn't also think about bringing the skills of our adult services workforce into play when we trying to support parents, families and communities to provide safety and permanence for their children.

We have taken some important decision during this year, including the implementation of charges for day services and respite at home, in order to make our charging arrangements more equitable, and in line with the rest of Wales.

Following a public consultation, we have begun the remodelling of our residential care and day service offer. By refocussing what we directly provide over a smaller number of sites, we have freed up much needed investment in our in-house services designed to support individuals with the most complex needs. I am pleased that we successfully managed to minimise disruption for all existing service users by supporting their transition to other services of their choice and through access to which they are likely to achieve good outcomes.

Whilst throughout this report there will be many examples of the challenges we face and improvements in train, there is one area of particular concern for me; the availability of and access to domiciliary care. This is a national issue, that will continue to vex us probably until social care achieves parity of esteem with health care. It isn't good enough for us to park our local capacity issue in the too hard to deal with box whilst waiting for national solutions.

We have remodelled our in house service and are in the process of recommissioning external providers but whilst such a significant gap exists between demand for domiciliary care and our capacity to provide that care, this will continue to be a systemic flaw in our local social care and health arrangements. We have to face up to the fact that some individuals who require social care support do not receive it in a sufficiently timely fashion. This will be an area of particular, personal focus in the coming year.

As Director of Social Services, I am acutely aware that the single most important measure of the performance of Swansea's social care and social services is the quality of practice that takes place the next time we knock on someone's door. I have carried out further visits to teams, services and individual recipients of care throughout the year. I continue to be blown away by the quality, skill, resilience and downright hard work of our staff. They continue to do themselves and the Council proud.

I am also conscious that the Director of Social Services role would quickly move from challenging to impossible without the constructive support and challenge from both Corporate colleagues and Elected Members.

Hence particular thanks to:

Cabinet Members:

Cllr Mark Child, Cabinet Member- Care, Health and Ageing Well;

Cllr Elliot King, Cabinet Member -Children Services - Early Years;

Cllr Will Evans, Cabinet Member -Children's Services -Young People;

Chairs of Scrutiny Performance Panels:

Cllr Paxton Hood Williams (Child and Family Services);

Cllr Peter Black CBE (Adult Services)

Colleagues in the Corporate Management Team

**David Howes**

**Director of Social Services**

**May 2019**

## 2. DIRECTOR'S SUMMARY OF PERFORMANCE

This section considers how well our services have been delivering on its statutory requirements, achieving performance targets and addressing last year's priorities for improvement.

It highlights our key activities, performance against targets and improvement programmes within:

- Adult Services
- Child and Family Services.

It sets out Swansea's improvement priorities in the year ahead.

Swansea Council serves a population of around 250,850 people, including 47,860 children and young people aged 0-17, and 202,980 adults aged 18 and over (source: Daffodil- projections to 2020)

It is a large population that is steadily growing, mostly due to international and internal (UK) migration, an increasing student population and through more people living longer.

There are estimated to be 111,767 households across Swansea, which are home to families with very different life experiences, and there are wide variations between well-being outcomes of citizens from the poorest and wealthiest areas of the city.

We have to plan effectively where and how we target our resources, as the overall number of households is projected to increase to 124,578 by 2035 (source: Daffodil), whilst the resources available to the Council may reduce in real terms, at least in the short to medium term.

More information about our regional population assessment is available here:

<http://www.westernbaypopulationassessment.org/en/home/>

The decision to change the existing Health Board footprint was announced by Welsh Government last year, and its implementation, and associated requirement to set up a new regional partnership board, has been the main focus of our work during recent months.

Consequently, from 1 April 2019, our regional partnership has changed, following Bridgend CBC moving to the Cwm Taff region.

Abertawe Bro Morgannwg University Health Board has the new title of '**Swansea Bay University Health Board**', with the geographical footprint now covering the areas of Neath Port Talbot and Swansea.

The Western Bay Regional Partnership has been renamed the '**West Glamorgan Regional Partnership**' and the Area Plan is being updated to reflect these changed arrangements.

Implementation of the Social Services and Well-being Act is progressing well, albeit many changes needed to the way we work and our plans to meet the changing needs of the local population.

For example, Swansea have had to change how we provide Information, Advice and Assistance to people needing help with their wellbeing, as well as those who may need care and support.

We are making sure that people can access the full range of help available to support them to maintain independence and to achieve their own wellbeing outcomes. There will be more about these important changes later in the report.

## 2a) **Current Position**

Overall, I am pleased with our end of year performance figures, though there is still room for improvement.

Despite that Swansea has a mature and embedded Safe Looked After Children reduction strategy, the number of children requiring to become looked after to ensure their safety and well-being has risen this year. The reasons behind the rise are complex including factors that undermine parenting capacity (eg substance misuse, mental ill health and domestic violence), factors that increase the risk of children being exploited (e.g. child sexual exploitation and county lines) and societal factors such as increasing poverty. However complex, it remains our responsibility to work with partners to ensure that multi agency support to children and families is such that they are provided the best opportunity to maintain safe care of their children.

The Council's approach to Safe LAC reduction has been subject of a review by both Care Inspectorate Wales and the Ministerial Advisory Group for Looked After Children and we have received positive feedback on the approaches being taken despite the current trend.

CIW inspected services for children living in Swansea during July 2018 (report published in October 2018):

<https://careinspectorate.wales/inspection-childrens-services-city-and-county-swanseas-council-oct-2018>

They found examples of good quality practice in Swansea children's services, with positive outcomes being achieved for many children and young people.

They reported that staff in Swansea were dedicated, resilient, and valued the support and accessibility of their managers.

CIW challenged the local authority that despite having begun to re-shape its services in line with the Social Services and Well-Being (Wales) Act 2014, areas of practice needed further development, particularly around the 'what matters conversation' and ensuring the voice of the child or young person is clearly recorded.

They acknowledged that Children's services are effectively led with confidence by an experienced Head of Service and management team who managed change well.

## CIW Inspection Report August 2018

‘The local authority’s vision for children and young people was well-established, corporately owned and invested in throughout the authority. Elected members were committed to delivering positive outcomes for children and had a clear understanding of their role.’

CIW further reflected that partnership working is generally seen as effective, particularly with regard to safeguarding. CIW heard from our staff that working relationships between children services and education could be strengthened, and that the support to some young people could be improved all of which is being addressed through an action plan overseen within a wider Improvement Programme.

In Adult Services, a particular area of concern is where people are experiencing a delayed transfer of care from hospital for social care reasons. There is a direct correlation between the availability of domiciliary care locally and the length of stay in hospital. We have to acknowledge and tackle that patients in hospital may be unable to return home if there are prolonged waiting times for a package of care, admission to a care home, or for sorting out funding of future care. We are working with care providers who are having difficulty recruiting & retaining staff, and who are struggling to provide care in some harder to reach local areas.

We are addressing concerns about both capacity and availability of domiciliary care provision. Regional plans to develop a hospital to home recovery service and local steps to re-tender a new patch-based domiciliary care model are the top priorities for the coming year.

By establishing a dedicated Deprivation of Liberty Safeguards team, we have made significant progress this year in reducing the backlog of DoLS assessments.

In the Annual Performance Review meeting in May this year, we received positive feedback from Care Inspectorate Wales (CiW). Swansea is recognised for transparently acknowledging the scale of challenges we face and for having ambitious change programmes in place to meet those challenges.

I was pleased that, through our approaches to collaboration and joint working, we are seen as having strong political and corporate leadership and being proactive and in looking for positive and innovative alternative ways of doing things.

Wales Audit Office (WAO) also provided very positive feedback during the national review of Swansea arrangements for Tackling Violence against women, sexual violence and domestic abuse, in particular the excellent work being undertaken in the multi-agency hub.

### **2b) Performance in Child and Family Services (last year in brackets):**

Our vision for Child and Family Services in Swansea is that

Vulnerable children are safeguarded, live within permanent, stable, secure and loving families (cared for by their birth family and within their community of origin whenever possible), which provide opportunities for success and a content and healthy adulthood where they can fully participate in what society has to offer

## Golden Thread

Our Safe Looked After Children reduction strategy (**see driver diagram in Appendix 2bi**), Child and Family Improvement Programme and a service plan are central to delivering on this vision, and a sustainable model of service.

Child and Family Services has developed a draft Participation and Co-production strategy for children and young people 2018-22.

In the same way we work with children and families, we have brought our best thinking to developing our improvement priorities, and to ensure all staff and partners are with us on the journey.

Child and Family Services Key priorities for 2019/20 as set out within the Service Plan and Improvement Program – **see appendix 2bii**.

By implementing these changes, we expect Child and Family Services to have:

- Ability to intervene earlier and provide targeted preventative support
- Common language across the continuum of need - Signs of Wellbeing / Signs of Safety to support risk sensible, strengths based practice
- Better Integrated working
- Better outcomes for service users
- Better Family Finding arrangements
- Better Edge of Care provision
- Better arrangements for tracking and monitoring impact of new projects on performance and budget

2bi) Child and Family Services Activity

**CHILD AND FAMILY SERVICES ACTIVITY IN 2018/19 (Last year in brackets)**  
**TABLE 1**

Of the approximately **47,272** (47,298) children and young people aged 0-17 who are living in Swansea,

No. of **children supported** by Child & Family Services during 2018/19 = **3035** (3428)

No. of **families supported** by Child & Family Services during 2018/19 = **1841** (2085)

Child and Family Services received **contacts 9754** (9529) and **referrals 1373** (1722) during 2018/19.

Children and Families received advice and assistance from Swansea's **Information, Advice and Assistance (IAA) service = 5801** (1731).

This **new Record of IAA activity** was introduced (in June 2018) making it easier for us to show the outcome of each contact to the statutory Front Door.

Approaches to the Child and Family Front Door can be broken down as those who received:-

**Information – 5326**

**Advice – 3239**

**Assistance – 1189**

**Referral – 1373...** of the no. of referrals **188** were **re-referrals** (190)

No. of **assessments completed = 1824** (2187), of which **1237** (1731) were proportionate assessments of children with care and support needs, as triggered by a referral

Of these, **662** (759) children went on to **have a care and support plan**.

Number of young carers identified = **6** (17) / and then assessed **6** (15)

**For Social Care Planning, as at year end:**

No. /rate of Children in Need of Care and Support = **778 / 165** (903 / 192)

No. /rate of children being looked after by the Authority= **554 / 117** (503 / 108)

No. /rate of children included on the Child Protection Register = **240 / 51** (254 / 54)

No. of children who are both LAC & CP = **35**

## CHILD AND FAMILY SERVICES ACTIVITY IN 2018/19 TABLE 2

No. of **open child cases within Child and Family Services at year end = 1537** (1588)

Of these **1537** cases:

### i) **Breakdown by Geographic / Team**

TEAM	CASES
Penderry	147
East	211
Valley	174
Townhill	170
West	212
CDT	275
LAC	248
BAYS Plus	100

### ii) **Breakdown by Age Groups:-**

NO OF CASES	AGE RANGE
47	Unborn
94	Under 1
292	01-04 years
372	05-09 years
555	10-15 years
177	16 + years

Children and families who are **subject to PLO** at year end (**NEW**):

- Child with PLO Initiated = **58**
- Child in Public Law Proceedings = **76**
- Families with PLO Initiated = **33**
- Families in Public Law Proceedings = **46**

The number of child cases that were successfully closed during the year = **1436** (1680)

The number of children becoming looked after in this year = **185** (194)

### **At end of March 2019**

Children looked after who are placed in residential care = **33** (34, last year).

**184** Swansea children who are looked after are placed with in house foster carers (Foster Swansea), which is **62%** of all foster placements (last year = 66%).

**111**, **38%** of children looked after are placed with independent foster carers (Last year (110, 34%).

We have **134** (131) approved Foster Swansea carers, offering up to **303** (302) registered places. By our new Fostering Recruitment strategy, Swansea has recruited an additional **18** foster carers (13) this year.

**30** (37) Swansea children were subject of new adoption orders granted in year.

Children returning home following a period as looked after = **45%**, **69/154** (50%, 87/174)

We are now able to demonstrate, with accurate figures, the success within the service. There is a high level of activity at the front door but the percentage of work coming through for formal assessment is moving in the right direction, and assessment performance is high, with exceptional performance around seeing children. Child and Family Services are aware that we must consistently ensure the voice of the child is reflected in all assessment and care planning work so we can demonstrate high levels of participation and co-production in the broader range of social work activities such as mappings, danger statements, statutory visits, safety plans and reviews.

Swansea is working hard to understand and analyse the reasons behind recent increase in the number of children being looked after in Swansea, and to use this information to inform better practice. Over recent years, Swansea has been successful in increasing the proportion of children placed with in-house foster carers, and closer to home. We work hard to maintain children with their families, where this is in their best interests.

Our understanding of both the parental causes of children looked after, is constantly improving. Parents may be misusing alcohol or substances (36%), there may be domestic abuse (40%), parental mental health problems (37%), a learning difficulty (8%), physical ill health (5%) or Youth Offending (2%)

Whilst there are other contextual drivers of children becoming looked after, such as

- Parents may have had their own adverse childhood experiences ACEs
- County Lines
- Child Sexual Exploitation
- Other agency's concerns about child welfare/ behaviour
- School exclusions/ bullying/ reduced timetable

Swansea Council's Signs of Safety (SOS) approach underpins all our statutory work including assessments, safeguarding and care planning. It provides a detailed framework for social workers, is transparently child and family centred and clearly identifies risk. The recently implemented 'signs of well-being' framework will complement this approach, promoting effective collaborative working across agencies and supporting better outcomes with enhanced, targeted and focussed early help interventions to prevent safeguarding concerns emerging.

Our in-house support services in family support which include a therapy team and an intensive family support service bring added value to professional case planning and to the support directly offered to families.

Foster Swansea is working hard to source in house foster placements with the focus on good matching. The support offered by the specialist support workers (SSWs) is helping us to maintain good performance around placement stability despite the high level of activity within the Looked after Children population.

## 2bii) Child and Family Services Performance

### **KEY PERFORMANCE MEASURES IN CHILD AND FAMILY 2018/19**

The percentage of **decisions about a referral for care and support** received by Child and Family Services which are taken within 24 hrs from receipt of referral = **99.78%** (99.96%) Target 18/19 = 100%

The percentage of **initial core group meetings held within 10 working days** of the initial child protection conference = **96.98%** (88.89%) Target = 90%

The number of children looked after per 10,000 of the 0-17 Swansea population = **117** (111) Target = 107

The number of children on the Local Authority's Child Protection Register per 10,000 of the 0-17 Swansea population = **51** (54) Target = 55

The number of children in need of care and support per 10,000 of the 0-17 Swansea population = **165** (192) Target = 205

Percentage of all statutory indicators for Child & Family Services that have maintained or improved performance from the previous year = **30%** (40%) Target = 80%

The percentage of **assessments completed for children within statutory timescales** = **78%** (72%) Target = 90%

The **average length of time for all children who were on the child protection register** during the year = **238 days** (208 days) Target = 300

Percentage of **children satisfied with their care and support** (Measure 13: children) = **82.5%** (76.2%) Target = 80%

Percentage of **children in care who had to move 3 or more times** (Measure 33) = **11.55%** (9.77%) Target = 7%

### **ANALYSIS OF CURRENT PERFORMANCE**

Taken as a whole, Child and Family Services' performance is consistently high and improving which demonstrates the hard work of staff across the service and the leadership of the senior management team. The impact of the newly developed performance hub is embedding and supporting the high level of performance being achieved.

Performance in vital areas supported by our Service Quality Unit remains high with child protection case conferences and reviews taking place within statutory timescales. Child Protection activity is relatively stable, although the re registration rate remains a worry and we must work hard to understand the reasons behind this. Challenges remain around our increasing Looked after Children population, although there is evidence, and a few stories offered in this report, of successful diversion and excellent relational social work practice taking place. Despite overall numbers of

looked after children increasing, there are early signs of a decreasing trend in the numbers of children living away from Swansea and in more institutionalised care settings. This has been a key focus of improvement activity.

## 2c) **Performance in Adult Services**

### Vision

Last year we set out our vision for a new service model for Adult Services, which clearly embeds the principles of the Social Services and Well-being (Wales) Act.

Our vision is that:

*“People in Swansea will have access to modern health and social care services which enable them to lead fulfilled lives with a sense of wellbeing within supportive families and resilient communities. We will help people to keep safe and protected from harm and give opportunities for them to feel empowered to exercise voice, choice and control in all aspects of their lives. Our services will focus on prevention, early intervention and enablement and we will deliver better support for people making best use of the resources available supported by our highly skilled and valued workforce”.*

Swansea’ Adult Services is still in transition. We are continuing to work towards embedding the new service model and to deliver on an ambitious Improvement Programme (APPENDIX 2).

Later sections of this report (Section 4a- to 4f) will outline our progress in these areas in more detail.

Our shared vision, service model and approach to improvement is understood across the whole service. One area of progress that Adult Services are driving forward is on implementing a Collaborative Communication practice framework, which helps all staff to understand their roles in relation to the changes needed, and how positive conversations with citizens and partners can better achieve personal outcomes. In this report, there will be some stories of how we are making a difference.

Implementing this new framework will help inform ongoing restructuring of Adult Services in the year ahead.

2ci) Adult Services Activity

**Adult Services activity in 2018/19 (2017/18 in brackets)**

No. who received support from Adult Services during this year = **6434** (7573).

Of this number, no adults who were helped to remain at home = **5157** (5932)

No. of calls received by Adult Services = **23935** (25,016)

%/ number of calls which became referrals = **52%** / 12,517 (51.8% /13,015)

No. of social care assessments carried out in year = **12,400** (11,086)

No. of adults were receiving residential and nursing care = **1,512** (1641)

%. of adults living at home who received community- based support = **79.9%** (78.3%)

No. of adults managing their own care & support through a direct payment = **549** (743)

No. of safeguarding enquiries = **1,185** (1321)

No. of safeguarding enquiries which we accepted as referrals/ possible concerns = **372** (540)- threshold met

No. of DoLS requests = **1,132** (1307)

No. of adult carers assessed during the year = **689** (684)

**At end of year:**

Number of open cases in Adult Services = **5,682** (5,904)

Number of closed cases in Adult Services during year= **n/a** (n/a)

**ANALYSIS**

Adult Services remains very busy with high levels of and increasing demand for assessments and ongoing care and support. Whilst we expect increasing demand linked with demographic change associated with more individuals living longer and with greater complexity of need, we also expect that a greater focus on and effective approaches to working preventatively should contribute to ensuring the delivery of a sustainable and safe service. It is too early in our journey post implementation of the SSWBA to make a judgement about whether our ambition to move to a more preventative model is having the intended impact.

## 2cii) Adult Services Performance

### KEY PERFORMANCE MEASURES IN ADULT SERVICES IN 2018/19

- Percentage of **adult protection referrals to Adult Services where decision is taken** within 24 hours (i.e. 1 working day) = **55.27%** (63.7%)  
Target 2017/18 = 65%
- Percentage of Deprivation of Liberty Safeguarding (**DoLS**) **Assessments completed** in 21 days or less = **56.13%** (59.6%) Target = 70%
- Percentage of **annual reviews of care and support plans** completed in adult services = **71%** (68.4%) Target = 70%
- Rate of **adults aged 65+ receiving care and support** to meet their well-being needs per 1,000 population = **90.29** (111.5) Target = 113
- Rate of **adults aged 18-64 receiving care and support** to meet their well-being needs per 1,000 population = **10.00** (12.99) Target = 13
- Number of **carers (aged 18+) who received a carer's assessment** in their own right during the year = **689** (655) Target = 700
- Percentage of **people who have completed reablement receiving less care** or no care 6 months after the end of reablement = **93.14%** (82.57%)  
Target = 80%
- Percentage of **all statutory indicators for Adult Services that have maintained or improved** performance from previous year = **31.82%** (78%)  
Target = 70%
- Percentage of **adult protection enquiries completed within 7 days** = **90.4%** (91.91%) Target = 90%
- Rate of **delayed transfers of care for social care reasons** per 1,000 population aged 75 or over = **7.47** (5.86) Target = 6
- Number of new **requests for local area co-ordination** = **471** (259)  
Target = 300
- Percentage of **adults satisfied with their care and support** (Measure 13: Adult) = **79.81%** (79.65%) Target = 75%
- Percentage of **carers that feel supported** (Measure 15) = **68.89%** (66.1%)  
Target = 65%
- Average **length of stay (days) in residential care** (Measure 21) = **943 days** (922 days)
- Average **age (years) on admission to residential care** (Measure 22) = **81.9 years** (83.7yrs)

## ANALYSIS OF CURRENT PERFORMANCE

Despite that, it is early days, there has been significant progress in some important areas of Adult Services' performance:

**DoLS (Deprivation of Liberty Safeguards)** -last year, to meet increasing demand and to ensure a timely and robust response, we revised our arrangement by establishing a dedicated DoLS team. We have eliminated all backlog of outstanding work (350 last year, now less than 40 cases) and are now focused on improving quality. By providing updated training to doctors and social care staff, we can ensure that best interest decisions are taken with and on behalf of the people we serve.

**Reviews:** Undertaking strengths-based reviews and re-assessments with clients receiving a package of care is important part of sustainable social care and helps promote better outcomes for citizens. Mental Health Services are now achieving over 90% compliance of assessments being completed. Other areas in Adult Services have made significant improvements. There needs to be further work undertaken to embed strengths based and outcome focussed practice within the review process.

**Delayed Transfers of Care-** There have been more delays due to social care reasons this year, predominantly associated with lack of capacity for domiciliary care. Actions are being taken to address the supply issues in the domiciliary care market

## OVERALL ANALYSIS

Overall, Adult Services is now better placed to succeed in making the changes needed to deliver a sustainable model of health and social care. We have a better understanding of our day to day performance. We have now agreed and are implementing our approach to strengths based, outcome focussed practice. We have a clear, coherent and ambitious improvement plan, underpinned by an agreed optimal model for adult services. We are working within strong regional partnership arrangements that promote effective collaborative working and a strategic and systemic approach to transformation...however challenging.

### 2d) Overall Priorities For The Year Ahead

In last year's annual report, I set out my priorities for improving the standards of our statutory social care services and ensuring that our most vulnerable children and adults are safe. Whilst we have progressed in all of these areas, there still remains work to be done:

- Safeguarding and protecting our most vulnerable citizens
- To achieve a financially sustainable position, delivering on agreed savings targets through our established improvement programmes.
- New regional partnership arrangements to achieve collocation and integrated health and social care
- Youth Offending- to develop a local offer building on the practice strengths and partnerships within Child and Family Services

- Workforce-by developing our staff to be the best they can be, by setting the right conditions to achieve excellence in their practice and to have a real impact in their work to achieve wellbeing and the personal outcomes of the people we work with.

### 3. HOW PEOPLE ARE SHAPING SERVICES

Everyone, adult or child, should be given a voice, an opportunity, their right to be heard as an individual and a citizen, to shape the decisions that affect them and to have control over their day to day lives. We actively seek feedback from individuals, families and carers who use our services to achieve their own well-being outcomes and their views help to inform our improvement journey.

Our approaches to coproduction and participation is set out in the revised Swansea Council Corporate Plan 2018-23, Swansea Well-being Plan, Corporate Prevention strategy and through the Council's Policy Commitments.

In this section, I will give examples of how we are working differently with Swansea's citizens, how as a Council we are listening and working in new ways, and how we are using this to promote change in how we work.

Some of the stories of achievement are presented throughout the report to reflect Swansea's new, emerging approaches to social care.

Finally, I will share one or two of the many comments that our staff have received during the year, many of these compliments earned through their hard work and skilled practice.

---

### Swansea's Ambition to Safeguard and Help Improve Wellbeing of Citizens

#### a) Local Area Coordination

Swansea has an ambition to roll out Local Area Coordination across the whole of the area. LAC is an approach that is both preventative and empowering for local citizens. We are helping people both before and at our front door with the offer of early help that can delay, or head off needs for statutory services. Importantly, we are building connections with communities. Local Area Coordination is helping us move away from a paternalist model of service provision by responding in ways that promote empowerment and choice, is centred around personal outcomes and building stronger communities.

#### **What is unique about Swansea' approach to Local Area Coordination?**

Our LAC service offer is based on a strong, shared vision:

'All people live in welcoming communities that provide friendship, mutual support, equality and opportunities for everyone'.

This means that, in our service offer, there are no time limits in how we deal with a person's referral. We offer a positive conversation built around open questions 'what matters' to you, or 'What does a good day look or feel like?'. With the help of a

skilled local area coordinator, support for the person can be then drawn from a wider network and resources within their local community.

LAC coverage- now spanning 13 areas of Swansea is being achieved and expanded through collaborative partnership involving Registered Social Landlords, Swansea University and more recently GP clusters.

There is more about Local Area coordination in **Section 4a** of this report.

b) Direct Payments

**COPRODUCING STRATEGY .....**

**Swansea's Direct Payments Strategy** was considered to be unclear and consequently lacked both strategic intent and transparency for citizens. Co-production with direct payment recipients and user groups has formed part of the process for developing a more effective strategy. We now have a strategic vision for how Direct Payments should be best promoted, and how they can support the wider adult service model of prevention, promote greater independence, and contribute to ensuring sustainable social services moving forward.

The following were identified as practical steps to improve the process:

- Rename the Independent Living Team to the Direct Payment Team
- Streamline any residual bureaucratic process
- Update and improve public information
- Provide training to personal assistants
- Continue with coproduction group to sustain this wider ownership of Direct Payments strategy, processes and outcomes.

There is more about Direct Payments in Section 4a & 4b of this report

c) Carers

**Support to and from Carers.....**

Carers views shape the work of Western Bay now West Glamorgan Carers Partnership Board. This is achieved through the presentation of Carers feedback each quarter and comments from local Carer Centres/ Services and Young Carers Projects. In addition, views are gathered at ABMU wide events where Carers and Young Carers from the three local authority areas come together.

There is more about carers throughout all sections in this report.

d) Other Coproduction examples:

BIG CONVERSATIONS

### **Swansea's Big Conversation with Swansea Citizens Aged 7+.....**

Swansea has held a second Intergenerational Big Conversation in the year, following an initial session in December 2018. The Well Being Plan objective for this session was Strong Communities and the theme for the day was 'Understanding Differences'

#### **INTERGENERATION WORKING – HELPING TO IMPROVE QUALITY**

### **Working across generations to enhance lives of people with dementia.....**

A team from across Adult Service Provision and the Life Stages team have been working in partnership to develop a dementia friendly schools project. The aim of our project was to work with young people to dispel the stigma and myth around dementia and see the whole person and to understand that people can live well with dementia

Pontarddulais Comprehensive school council and Social Services dementia care home 'The Hollies' have worked together on this pilot and were enthusiastic about being involved as Pontarddulais are already a rights respecting school. People speak up who are a team of professional story tellers became part of the pilot bringing young and older people together through storytelling, song, dance and conversation.

The project was funded by the Integrated Care Fund (ICF) to develop 'Dementia Friendly Generations Action' to raise awareness in schools throughout Swansea.

There is more about coproduction in **Section 4b** of this report

e) Co-production /Participation in Child and Family

**“We are more interesting than our paperwork” EW, Swansea Corporate Parenting Challenge 2017**

The Council adopted the United Nations Conventions on the Rights of the Child (UNCRC) in 2014. This means the Council must perform its functions in a manner which is consistent with the interests of local children. Children and young people must be provided with meaningful opportunities to influence decisions concerning their lives (Art. 12). Swansea has co-produced a new Participation and Co-production Strategy for Vulnerable Children and Young People April 2018 – March 2021. This Strategy describes how Child and Family Services will support the UNCRC and Article 12 in particular by:

Swansea is implementing ‘This Is Me’ framework, which is being rolled out across Wales .

‘Supper Club’ is the standing 16+ participation group – our plan to involve this group in the recommissioning of supported accommodation

Our participation team has been shortlisted for an All Wales Continuous Improvement Award – and their excellent work includes a video for siblings impacted by adoption, transition for young people with a disability, developing an online platform for young people in care accessing generic and personal information.

f) Commissioning reviews - Consultation

We are continually looking for ways to improve quality and raise standards of care within our commissioned and directly provided services. During my visits to services, I have witnessed many examples of the imaginative efforts of our staff to improve the life experience of service users and citizens.

There is more about strategic commissioning in Section 4e of this report

g) Feedback-

We carry out a qualitative survey each year of a large sample of people who have been receiving care and support. A wide range of comments received from Adults, Children, Parents and Carers as part of the Social Services Performance Measures Qualitative Survey 2018-19 have been summarised, codified (positive, neutral and negative for analysis to support of future improvements. **See Appendix 1**

**COMPLAINTS/ COMPLIMENTS RECEIVED**

We routinely collect and monitor compliments, comments and complaints. There is a written acknowledgement by senior managers, of every compliment received by the department thanking staff directly for the examples of best practice highlighted through these compliments. We provide an annual report on complaints to scrutiny.

Some comments received this year are particularly pleasing when the experience of the citizen reflects back their experience, in a way that resonates with our improvement journey:

**This is what one person told us about their Local Area Coordinator:**

"When A came into my life, I can honestly say I was at a point of sheer desperation. I am an 83 year old active lady who looks after my 85 year old severely disabled husband who has vascular dementia. My friend suggested I telephoned A, although I didn't know what at that time she could do for me.

She has been a ray of sunshine in my life, sorting out a smoke alarm, talking to me about what's available, taken me to the carers centre, re introduced me to clubs I had previously been a member of and most importantly facilitating a sitter for my husband for me to go to the hairdressers and old age club once a week. Without her intervention I really don't know what I would have done as I was absolutely exhausted and depressed. Had I not met her, I honestly believe that such was my exhaustion I would probably have ended up in hospital and my husband in a care home, a situation I pray every night won't happen as we have been married for 63 years and never been apart".

**This is what one person told us about their home care experience**

"I thought it important to inform you of what is happening at the grassroots of the Social Services Domiciliary Care. Re-enablement Team, Gorseinon Hospital, for 6 weeks from (this year) the above team of Community Care Assistants had been visiting our home three times daily to care for my 86 year old husband. Their dedication to their work was very impressive, demonstrating very high standards of care and ensuring his dignity at all times. Their kindness and understanding to ensure his needs were met was greatly appreciated. I was extremely grateful for their support as I am his main carer and have been for many years"

**This is what one parent said about their experience:**

"My daughter's social worker has over the last 2 years consistently supported my daughter and navigated a path (through emotional and difficult relationships) which has resulted in a positive outcome for my daughter. X has gone beyond the 'normal' duties of her role and would wish this level of commitment and professionalism be recognised by the Authority".

**OUR PRIORITY FOR NEXT YEAR:**

- We are looking to evaluate the wider benefits of the local area coordination approach using a nationally recognised model, using tested in Wiltshire that considers outcomes such as social impact, whether it is helping reducing demand against costs and future investment needed.

#### **4. PROMOTING AND IMPROVING THE WELL-BEING OF THOSE WE HELP (QUALITY STANDARDS)**

This section of my annual report provides an overview of social services quality and performance, using the National Standards Framework: [Code Of Practice: measuring performance](#)

It also reflects the Well-being of Future Generations Act, which aims to improve the social, economic, environmental and cultural well-being of Wales – by helping to create a place where we all want to live, now, and in the future.

The **six national quality standards** are:

**NQS 1:** Working with people to define & co-produce personal well-being outcomes that people wish to achieve

**NQS 2:** Working with people and partners to protect and promote people's physical and mental health and emotional well-being

**NQS 3:** Taking steps to protect and safeguard people from abuse, neglect or harm

**NQS 4:** Encouraging and supporting people to learn, develop and participate in society

**NQS 5:** Supporting people to safely develop and maintain healthy domestic, family and personal relationships

**NQS 6:** Working with and supporting people to achieve greater economic well-being, have a social life It covers the outcomes expected, what we are doing how well we are doing and the priorities for the year ahead

A new set of quality standards and the national performance measurement framework have been published for consultation: <https://gov.wales/measuring-social-services-performance-code-practice> (consultation ends on 8/8/2019)

Our aim must be to ensure that all Local Authorities in Wales can work towards what a good social services looks like, with a clear purpose that improving the wellbeing of those most vulnerable in our communities, and that we are becoming more sustainable in working with limited resources. As Councils, we have to be in a better position to show we doing the right things consistently well, within the resources we have. We can achieve this by having access to reliable and consistent data backed by better information systems, which cover the full range of social care activities. This work can support better performance measurement and an improvement framework that shows demonstrates to citizens how well their Council is doing and how this compares to other areas in Wales.

In this Section (4) of the report, I have used the headings from the national quality standards to give my view as Director of Social Services of Swansea's journey to date in working to a sustainable model of social services. These reflect the important improvement work currently taking place in Child and Family Services and Adult Services.

#### 4a) **Working with People to Define and Co-Produce Personal Well-Being Outcomes that People wish to Achieve**

This standard expects that Swansea citizens to know and understand what care, support and opportunities are available and use these to help achieve their well-being outcomes. People can access the right information, when they need it, in the way they want it and use this to manage and improve their well-being. It also expects each citizen's voice is heard by our service and listened to; that people can speak for themselves and contribute to the decisions that are made.

The Council's well-being objectives are an integrated set that collectively seeks to address all aspects of well-being, including environmental well-being as set out in the revised Corporate Plan 2018-22:

[Corporate Plan 2018-22 web version](#)

We have recognised that whilst everyone has a right to achieve well-being, this can be more challenging to some people and families. We have to work together to ensure the right help is available to the right people at the right time.

In order to meet these challenges, the Council has prioritised six well-being objectives. These are:

- Safeguarding people from harm
- Improving education and skills
- Transforming our economy and infrastructure
- Tackling poverty
- Maintaining and enhancing Swansea's Natural Resources and Biodiversity
- Transformation and future council development

Each of these well-being objectives is making a difference in how we work and support our most vulnerable people. Swansea has always had a good reputation for collaborative working with a range of organisations and services trying to make a difference in helping people to improve their lives. We have a strong third sector presence, diversity in our range of organisations, a commitment to improving people's lives and building stronger communities, and all backed by statutory health and social care services, all working together.

Helping more people to achieve better wellbeing outcomes is a big challenge, The Council is actively supporting this universal offer by not only maintaining public services at a time of considerable financial pressures but by having the ambition to improve.

Our policy commitments and a new 'Sustainable Swansea' transformation programme is helping social services to meet the many challenges we are facing.

### What did we plan to do last year?

We wanted to focus our work, both locally and regionally, towards working more co-productively with citizens, and to take our well-being offer to the next level.

We wanted coproduction to be more central to how we improve this well-being offer.

In section 3, there are some great examples of how coproduction is driving forward our commissioning reviews, plans for how we use Direct Payments, improving our support to carers and as a key feature in our work with children, young people and parents.

We also wanted our early help offer to become more focused on helping people and families, who are most vulnerable and at risk of ending up requiring a statutory social services intervention as a result of not having the right help, from the right person, at the right time.

### How far did we succeed and what difference did we make?

Council ensures that people can easily access the right information, advice and assistance (IAA) service when they need it, in the way they want it and use this to manage and improve their well-being outcomes by:

This year Council has changed its approach by moving from a People Directorate to now having a Social Services Directorate. This creates an exciting opportunity to make sure that all our poverty and prevention services and resources focus on and target the safeguarding of vulnerable people and families.

Last year Cabinet approved a Corporate Prevention strategy, and this report highlights some good examples of this how this work is progressing.

- Local Area Coordination
- Community building/ Community Hubs
- Coproduction
- Focus on Well-being

Children, families, individuals and carers with whom we work should be an equal partner in their relationship with Social Services by:

Our approach in Child and Family Services is about getting these services to work together and to target those children and families who are on the cusp of needing a statutory social services intervention- development of an Early Help Hub to help prevent the need for statutory interventions: right help, right time, by right people

Last year, I reported on Swansea's 'whole system' review of how we support families, and we are now implementing many of the recommended changes by improving our offer of early help:

- Swansea has a wide range of high-quality support for families, parents, services such as 'Team around the family' (TAF), Flying Start, Jig-so, ELDT, Young People's services, Resource Centre / Family Centre

- Swansea has had a multiagency domestic abuse hub, in which many public, statutory organisations work together with 3rd sector to provide a range of support services/ interventions. Swansea's approach was well received in feedback during a National thematic review by the Wales Audit Office.
- We want to 'close the loop' within the whole system by focusing all our efforts on preventative / early intervention responses. This work links back to work we undertook on our referral rates (Professor Thorpe & Dr Suzanne Regan). This work proposed we should try to eliminate professional differences, and all be prepared to work constructively with the children and families most in need of statutory help.
- Team Around the Family is a way of working together with families with additional needs broader than one service can address. Whilst Team Around the Family in Schools (TIS) trains primary school staff to tackle social challenges. The result is fewer complex social cases, higher levels of school attendance and increased community resilience.
- At the same time, Swansea's social work teams are working in localities to build stronger partnerships with schools, police and health professionals, and to help ensure there are effective 'Step up / Step down' arrangements
- We are also developing the public information available via the web using 'portals' such as Family Information System (FIS) & DEWIS CYMRU.

## **Story 1- working with Families**

### **Intensive Family Support Service (IFSS)**

Our Intensive Family Support Service team continues to work with families where the impact of parental substance use gives rise to a significant risk of family breakdown. This is a challenging area of practice. Our team is not just expecting to work with families to act as a catalyst for lasting personal change but also looks to promote systemic change across health and social care. On my recent visit to the team, I was hugely impressed by the examples of success achieved by families with whom the team have worked but also the extent to which the team had been able to assert influence over other substance use services and have helped shape practice thinking in statutory children services.

- Another development which demonstrates improvements in how early help is being used to better effect, is the Jig-so multi agency, young families initiative. This new evidence –based, initiative aims close the loop between statutory services across sectors. In the past, often the only involvement with vulnerable families in a child's first 1000 days is via health visitor or midwife.

## Story- Multi agency working

**Jig-so** is a new team based in Swansea of midwives, community nursery nurses, family facilitators and language development workers which offers support to all young parents up to 18 and vulnerable parents aged 19-24, and working closely with statutory services. This award-winning intervention not only results in long-term health and educational benefits for the families, but also has been evaluated, in a study undertaken by Swansea University, to demonstrate cost benefits and improved outcomes

Citizens and carers with care and support needs who wish to improve their well-being receive high quality assistance and a timely assessment of their needs which promotes their independence, choice and personal outcomes by

Our approach to Adult Services is reflected in the 'Tiered Service Model', as shown in Appendix 2a.

This service model has a *universal service* offer to all Swansea Citizens to enhance wellbeing (Tier 1).

Our focus is to ensure *early interventions* are targeted at people in need (Tier 2).

Swansea has some good examples of where this approach is working well:

- Local Area Coordination in Swansea is supporting people to stay strong through friends, family and community. Our aim is to have a single point of contact in populations of around 10-15,000 citizens. Swansea now has 13 Local Area Coordinators (LACs) in place and working in ways which enhance participation and empowerment through positive, strengths conversations which are not time bound.

## Story- what does it take to become a LAC

LACS- each of the 13 LACs were recruited co-productively within the communities they serve. We wanted them to have the right skills to enable them to hit the ground running. A panel of citizens were recruited to shortlist and interview candidates.

Once in post, LACs will take time to get to know people and communities well.

The aim is to provide community-based support at 2 levels:

- **Level 1** =info and advice form variety of sources
- **Level 2** = working with the 50-65 people who are more vulnerable or excluded in some way—providing support at a more intensive level, over longer periods of time to identify strengths, opportunities.

All the while LACs are ensuring that people are in control –they are promoting self-advocacy, advocating with and alongside people and groups, building stronger networks and helping citizens to access independent advocacy/ help if needed.

## ➤ **Dementia Friendly Communities / Dementia Support**

Swansea recently became the first Dementia Friendly City In Wales. As members of an active forum members involved champions from a range of organisations cascade the dementia friendly approach throughout their organisations and beyond. Swansea is also taking forward an innovative Living well strategy for developing a seamless service linking care homes, day services and domiciliary care, by appointing dementia champions in each setting.

Community Dementia Support Team in Swansea has been selected to take part in joint study (Newcastle University/Alzheimer's Society) because it is one of the few examples in the UK of a dementia support service, which is working in collaboration with GPs to provide early assessment, diagnosis and help. The team provides a first point of contact for anyone concerned about changes to their cognitive health and is located within the three Integrated Health and Social Care Hubs in the city. The team consists of two Senior Dementia Practitioners and six Dementia Support Workers who are now working with the five GP led Health Clusters in Swansea. Referrals can be made via GPs and professionals or directly via the Common Access Point in Swansea Social Services. The team offers a quick and friendly means of triage for memory concerns that can be escalated as necessary. The team takes a very person-centred approach and can arrange to see patients at home or in their GP practice. <https://research.ncl.ac.uk/pridem/>

## **STORIES OF OUTCOMES**

### **1. M.'s story.....**

M. got in touch with Swansea's Local Area Coordination, after seeing an article in SA4 Magazine.

I spent time with M., getting to know her strengths, what a good day looks like for her and building a trusting relationship. She talked about feeling lonely, becoming isolated, and contending with depression, and social anxiety. She also talked about how she used to be sociable and imagined there are a lot of women like her out there that could do with support and connections. Through the course of a series of conversations, M. decided she wanted to try to start a coffee morning. She talked over options, venues, and dates and ways to promote it. First Coffee morning was held with 4 people there; all people she had known for a while. Friendships re-formed straight away, and more people got involved. Group is now up to 12 people and they meet weekly. They have all organised a MacMillan Coffee morning. They have been meeting outside of the coffee morning and have formed some great friendships. They are finding support amongst each other which is helping them stay strong in the community.

- Story provided in presentation by LAC Implementation manager to People PDC

## **2. How JIG-SO worked with young mum & her family.....**

A young mum aged 20, who referred herself into Jig-so when she was 14 weeks pregnant, had a history of ADHD, ODD and personality disorder, as a teenager. She was living in supported accommodation where drugs were readily available and she was living a chaotic lifestyle. Her maternal grandmother had already contacted social services to say that she wanted to work with them and wanted to support her daughter in moving back to the family home.

There were 82 reported offences between her and her mother. The young mum had 4 adverse childhood experiences (ACEs). Due to the level of concerns about her history, lifestyle and also her relationship with her mother, her unborn baby was placed on the child protection register and her case was in a pre-court process.

Over weeks, the young mum engaged well with the Jig-so team, that of midwife, nursery nurse, parenting support worker and social worker but unfortunately her mental health dipped after the birth, and her mother was granted full custody of her baby at this point.

The young mum moved out of the family home and into her own home, and she began to engage in risky behaviours again. Her relationships with her family broke down, and there were further concerns in particular with the relationship between her and her mother.

At this point, the Jig-so team were faced with a young and vulnerable mother who did not have her daughter in her care and was isolated from her family with very little support.

Example of Intensive Jig-so support provided to the young, vulnerable mum:

- 9 antenatal home visits by midwife
- 5 postnatal home visits by midwife
- 4 social services meetings attended by midwife
- 9 antenatal group sessions attended
- 6 nursery nurse home visits
- 3 nursery nurse run mother and baby group sessions
- 20 home visits by parenting worker
- 7 social services meetings attended by parenting worker
- 2 parenting groups sessions attended
- 5 supervised contacts
- 4 supervised community wellbeing activities.

She has continued to engage very well with all services, she attended groups as well as home visits and her commitment to change was impressive. Because of the young mum's level of engagement with all the services and the changes she made her social worker felt confident enough to give her the opportunity to go to a mother and baby unit. That placement went very well, and she was able to put into practice what she had learned and eventually she was allowed home to her own home after 12 weeks. He was supported before during and after the placement and there was an excellent team around her that included her social worker, the Sail Project and all aspects of the Jig-so teams support.

There are now no concerns about this young mum's parenting, and although she is doing very well, she continues to engage with all support on offer.

- Story reproduced with permissions from Jig-so presentation: Exploring practices and experiences within the JIG-SO multiagency young families project, (April 2019)

## Performance Measures

### **PERFORMANCE IN 2018/19** (Reported last year - 2017/18)

#### **Qualitative Measures:**

See appendix 1 analysis of survey results (Adults)

#### **Quantitative Measures:**

- The percentage of adults who have received support from the information, advice and assistance service (IAA) and have not contacted the service again during the year = **86.5%** (93.8%)
- The percentage of assessments completed for children within statutory timescales = **77.5%** (72.4%)

### **Our priorities for next year**

- To incorporate poverty and preventive resources into social services, enhancing our early help offer to adults, children and families.
- Increase number of public information resources to improve well-being made accessible via Web.

### **4b) Working with People and Partners to Protect and Promote People's Physical and Mental Health and Emotional Well-Being (NQS2)**

This standard ensures Swansea citizens are supported to be healthy and active and do things to keep themselves healthy. That they can expect the right care and support, as early as possible and through preventative and community-based support that promotes independence. That our most vulnerable people are receiving care and support, to do the things that matter most to them.

Our approach is set out in Swansea Information, Advice & Assistance Service (IAA)- a guide for practitioners.

We recognised that we have to continue to improve how the front door to social service is working for Swansea citizens and carers. In Swansea we expect a 'warm' and welcoming approach at this stage to people making contact or enquiring about the help they can receive.

We recognise the importance of getting each of the front door arrangements right through ensuring the whole system is working seamlessly and in a coordinated fashion to improve citizen safety and wellbeing, managing demand at the statutory health and social care front door by promoting effective early intervention.

We recognise the need to meet the requirements of the Welsh language 'active offer', and to support minority ethnic populations, with access to translation and interpreters where needed.

As our activity figures (Section 2) show, the demand for social services reflected in the number of calls and people who are helped, is still high.

### What did we plan to do last year?

We have the multi-agency response available at the social services front door. By this we mean that there is a wider range of professionals who are available on a daily basis to support our information, advice and assistance (IAA) offer.

Across all services, we are offering 'What matter to you' assessments to help focus on people's own well-being outcomes.

Our front door IAA services are using the practice models such as signs of safety and collaborative communication to strengthen links to our frontline social work teams.

### How far did we succeed and what difference did we make?

We encourage and empower people to manage their physical health and well-being, and to do things to keep themselves healthy.

Swansea citizens can access information themselves to help them better understand and choose from the wide range of care, support and opportunities which are available, and use these to help achieve their well-being outcomes. Swansea continues to develop our range of public web resources available to help people make informed choices. We support the national launch of the **DEWIS CYMRU** Well-being resource directory, and we expect this system to complement the Council's public website and public information resources, as well as other systems such as Info-engine, Family Information System (FIS), and our regional Care Directory.

Regionally through the West Glamorgan Partnership Board, we are taking forward further development of Intermediate care services based on an agreed **Optimal**

Key features of a **Regional 'Optimal Model'** for Health and Social Services:

Common access point (s) to get right help to right people at right time:

- Multi-disciplinary 'triage'
- Mental Health support
- Third Sector Brokerage to help signpost to well-being support
- Acute Clinical Response
- Therapy led community reablement
- Community Equipment/ Assistive technology
- Intake & review reablement
- Therapy led residential reablement
- Access for people with dementia
- Step up/step down

**Model** underpinned by the 'What Matters to Me' framework. Work to develop the model was undertaken a few years ago but recent changes within the partnership has highlighted an opportunity to refresh the model. We are looking to improve the flow of individuals journeys through the system between hospital and home, with a focus on reducing unscheduled admissions to hospitals and support individuals to return home from hospital quicker. This will improve citizen experience and promote better outcomes.

As part of this work, we seeking to further enhance our reablement offer to citizens, through the development of a **Hospital to Home recovery** service.

We are also seeking to improve **Care Home support** to reduce emergency hospital admissions from Care Homes.

These new approaches are designed to support people to remain independent and keep well. We want to see more people cared for at home, with shorter stays in hospital if they are unwell, and to see a change in service delivery away from institutional care towards better community-based support.

In children services we have improved access services to maintain physical health, mental health and emotional well-being through:

#### **A new Wellbeing strategy for Children and Young people:**

The Family Support Continuum Steering Group was set up to manage improvements to our Family Support Services. We now have a shared vision and common approach. We have a good range of community-based services to support families, and to allow 'step-down/ step up' arrangements to work better in response to their needs.

*Integrated Well-being Strategy for Children and Young People 2018 – 2021* sets out how Swansea Council's Family Support Continuum Steering Group will promote an integrated approach to promoting and supporting children and young people's well-being. It offers a shared view of well-being, as well as setting out a framework for assessing a person's well-being at any time including potential risks to well-being. It also provides a model to promote and support well-being as well as to guide our interventions so that they are preventative, timely and focused.

#### ➤ **Change to our Child and Family Services Integrated IAA Team**

Our new integrated IAA hub was launched on 1st November 2018. The 12-month pilot of a new integrated service aims to help us make sure that we are enabling families to live happy, healthy and safe lives by providing the right support, if and when they need it. This pilot will test what impact a multi-disciplinary and multi-service team has on ensuring potentially vulnerable children and families get the right help, from the right person, at the right time.

The focus is on what positive action can be taken to meet needs without a child needing to be escalated to statutory services. Professionals are colocated and making joint visits. Currently the multi-agency team is made up from professionals from Early Intervention, Child Disability, Bays 16 Plus, the Domestic Abuse Hub and

Western Bay Youth Justice and Early intervention. It is hoped that this can be extended to include primary mental health services, health visiting, the police and education welfare.

Again, the focus of the integrated IAA hub is what matters to people – supporting families and children to live happy, healthy and safe lives with help from the right people if and when they need it.

#### ➤ **Working with other professionals and gaining consent**

To support and protect children and families, agencies need to share information to intervene early. It is essential when putting in place effective child protection arrangements. Children and families have the right to expect people to be open and honest with them, particularly if there are worries, concerns or help is needed.

We support other professionals in their work, and if they want a discussion about a particular child or young person then we ask that they get consent from the child or children's parents or carers. Our IAA hub will always speak directly to parents/carers of children and young people under 17, if there is a possible risk. Over the course of the year, our IAA Hub expects to hold many conversations about contacts, potential referrals, consent and referrals to safeguard children at risk.

This preventative work could be strengthened with greater involvement from professionals in health, education and the police. There is also value in considering a small integrated safeguarding function to sit behind the integrated IAA hub.

#### ➤ **IAA and BAYS+**

Have a shared purpose, understanding to do what matters with older young people, in order to achieve timely and positive outcome for young people whose circumstances may present additional vulnerabilities.

Info-Nation, on the Kingsway, offers information, advice, and specialist support across the range of challenges facing young people and their families. This includes prevention support with Healthy Relationships, Sexual Health, Drug and Alcohol use, and Youth Homelessness.

The Bays + service is provided by Swansea Council and a third sector provider, Barnardos through a strategic partnership arrangement. Barnardos is commissioned to run the Young Persons Advisory Service. They focus on 18 to 25 year old young people, and their work includes addressing youth homelessness. This year has seen BAYS+ now supporting Information, Advice and Assistance for 16+ cases, which will sit well within the open access of Info-nation.

Adult Services has also made good progress in ensuring multi agency Information, Advice and Assistance is available consistent with the regional 'Optimal Model' as described above.

### ➤ **Common Access Point CAP**

The Common Access Point Team has Access and Information Assistants who will talk to the person about their situation and provide information, advice and signposting. The Access and Information Assistants can also

- signpost to community-based services, such as local groups or charities.
- give information and Advice relating to care and support and assistance in accessing care and support
- Advise on how the care and support system operates in the local authority
- Advise on types of care and support available
- Explain how to access the care and support available
- Advise how to raise concerns about well-being of a person who appears to have needs for care and support.

### ➤ **Multi-disciplinary team (MDT)**

Swansea has developed the MDT team within the Common Access Point. Our team is now made up of qualified staff, Social Workers, Physiotherapists, Occupational Therapists, and a Third Sector Broker (who advises on voluntary / third sector services) and other professionals. The team work to provide a rapid response to those referrals where a more joined up approach is needed. The Multi-Disciplinary team (MDT) will discuss the person's situation to see if they can offer any specialist advice or assistance. The team may contact the person to get more information on the situation or will talk about what support is available to the person in need, the carer or a concerned professional.

We support access to a range of services to maintain mental health and emotional well-being, and our approach in Adults Services is through contact with the Common Access Point and through our **Community Mental Health Teams (CMHTs) and Older People's Mental Health teams (OPMH)**.

### ➤ **Community Mental Health**

We now have a Community Mental health nurse working in the common Access point to respond quickly to needs. We are developing a new operational policy for the Older Person's Mental Health team in Swansea (April 2019) to promote closer working with primary care and the Integrated Hubs. A Joint HIW & CIW National Review of Adult Community Mental Health Services, carried out an announced visit to Swansea Central (Area 2) CMHT. Their report found there was a responsive referral and duty system in place. We identified that the interface between the CMHT and other teams should be improved to promote timely care for service users. The quality of care and treatment/support plans was variable. Some included good information across the domains of the Mental Health (Wales) Measure and Social Services and Well-being (Wales) Act whilst others needed more detail recorded. Improvement was needed around the arrangements for staff supervision and appraisal of social work staff.

**People can expect the right care and support, as early as possible through a range of preventative and community-based support that promotes independence.**

➤ **Support to Carers** –Swansea recognises the essential contribution that carers make to the well-being and safety of some of Swansea’s most vulnerable citizens, and to sustainable systems of social care. All Swansea carers have the right to have their support needs addressed via I.A & A, and to access ‘what matters to them’ assessment to maintain their own well-being. Swansea commissions a range of services for carers through the local carers centre.

➤ **Hospital social work team**

Our Hospital Social Work team also works as a ‘front door’ for patients in Morriston or Singleton hospitals. Our social workers visit the wards to discuss all patients with nursing staff for early identification of those people who may need assistance for a safe discharge. We have also agreed trusted assessor arrangements with the health board with a particular focus on promoting timely access to re-ablement services. Some patients are referred by the Common Access Point or via the Integrated Hubs.

➤ **Sensory Team**

Our Sensory Services team based at Swansea Vale Resource Centre offers practical advice, information, rehabilitation and equipment as well as assessment and managed care and support to:

- people who have a sight loss,
- people who have a hearing loss
- people who have both a hearing loss and a sight loss.

Specialist support can take the form of hearing and communication support, getting around indoors and outdoors and using public transport, managing day-to-day tasks including meal preparation, administering medication, making telephone calls, reading mail or using IT in everyday tasks and employment support.

➤ **Emergency Duty Team (EDT)**

Our emergency duty team also provides a service to citizens of Swansea when the offices and day services are closed. They are there to respond to emergency situations, that arise out of hours and they take referrals from day-time services, partner agencies and the general public.

Our EDT now covers the four disciplines of social work: Adult Services, Learning Disability Services, Mental Health Services, and Child and Family Services. They have a Core Team of experienced qualified social workers and Approved Mental Health Professionals (AMHP) who can go out to assess and to manage risks.

EDT are also able to provide information, advice and assistance thus ensuring the Social Services Department provide a 24-hour services to the public of Swansea.

Adult Services also deals with a high number of safeguarding concerns, and some queries around Deprivation of Liberty Safeguards (DoLS), though there is now a dedicated DoLS team- more about these developments in Section 4c.

## **STORIES OF OUTCOMES: INFORMATION, ADVICE & ASSISTANCE**

### **Story 1**

**Common Access Point in a person centred work with person** in need, involving family, supported housing, primary health and paid carers.

Call to CAP from Warden at a Supported Housing complex about person not taking Warfarin for last six months or longer. Actions taken to address this concern and to prevent any re-occurrence. After -initial contact was made to CAP approximately 5 months ago, no further input has been needed.

### **Story 2**

**Common Access Point-supporting carers** call received from an ex-service man who is the main carer to his disabled wife. Person explained that his wife receives all care on the bed, which meant that throughout the day he would have to make numerous trips up and down the stairs. He had his own medical issues resulting in reduced mobility, explaining that the stairs were now becoming a major issue affecting his ability to continue as his wife's carer

Team were able to work with other professionals (OT, Primary Care) and person's own support networks (SSAFA/ RAF Benevolent fund) as ex service personnel to meet their needs as a carer, and to meet his wife's care and support needs.

### **Story 3**

#### **IAA and BAYS+ working together....**

An anonymous referral was received via the NSPCC helpline, regarding a young person aged 17.5 years; she was living at home with her father, step-mother and 4 younger half-siblings. Her 2 older siblings already living independently. The referral was in relation to emotional ill-treatment of the young person by her step-mother, and historical incidents of physical violence towards her. Action taken by IAA service was to make contact with the older siblings as their details were on PARIS from a previous referral for them, to assist in contacting the young person whilst ensuring her safety in the home. The young person said that she was the only child being treated like this in the home

What matters to the young person is that she would like to live independently, and to have a place where she feels safe and happy which in turn will positively affect her mental health and wellbeing.

Arrangements were made for the young person and her sister to attend at Info Nation to meet a BAYS+ worker the next day. Single Assessment completed which did not include her father or step-mother at her request. The assessment concluded that she

presents as a capable young woman who recognises that she has been treated differently from her half siblings within the family home. She has a full-time job, and she is earning a wage so is able to support herself whilst living independently. She has asked for support to identify appropriate accommodation which will also provide a minimal level of support to further develop her Independent living skills.

The outcome of this assessment is that the young person will be further supported through the youth homeless Team. Supported lodgings have been identified and she moved out of the family home on within 3 days of IAA receiving the referral.

The end to end time from understanding what matters to providing the right support in this case was just 3 days

In respect of the younger siblings, because the allegations were in respect of the older child only and she was clear that the behaviour was just towards her, IAA have waited until the young person has moved safely into her supported accommodation until opening referrals on the younger children. Based on the fact that there have not been any referrals from anywhere else in relation to these children, the duty SW has booked an appointment with them in the Civic Centre this week to speak to them about the referral and seek consent to undertake lateral checks

## Performance Measures

### PERFORMANCE IN 2018/19 (Last Year)

- Rate of delayed transfers of care for social care reasons per 1,000 of population aged 75 or over = **7.47** (5.86)
- Percentage of adults who completed a period of reablement and:
  - Have less or reduced package of care and support = **81.8%** (50%)
  - Have no package of care and support = **90.4%** (79.3%)
- The percentage of children seen by a registered dentist within three months of becoming looked after = **77%** (86.2%)
- The percentage of looked after children registered with a GP = **95%** (96%)

### Local Measure:

- Percentage of our **10-day assessments** carried out where there is evidence that the child was seen by a qualified worker = **92.09%** (93.3%)
- Percentage of our **42-day assessments** carried out where there is evidence that the child was seen by a qualified worker = **93.08%** (93.3%)

## Our priorities for next year

During 2019/20, our priorities will be to:

- To ensure there are consistent approaches to Information, Advice and Assistance across all services and access points.
- Ensure robust arrangements for staff supervision and appraisal of social work staff within frontline teams

#### **4C) Taking Steps to Protect and Safeguard People from Abuse, Neglect or Harm (NQS3)**

This standard expects that vulnerable people in Swansea are safe, and protected from abuse and neglect. There are strong and effective arrangements in place to make any concerns known. Also that people are supported by care and support plans which promote their independence, choice and well-being.

Our approach to Safeguarding and keeping people safe is reflected in the Corporate Safeguarding policy.

Safeguarding is the council's number one priority, and we have strong leadership in place to drive forward a regional and corporate approach.

Cllr Mark Child is the council's lead on safeguarding and Cabinet Member for Health and Wellbeing, as he says: 'Safeguarding is the council's number one priority. It's not just the job of social workers or teachers, it's everyone's business'.

A revised Corporate Safeguarding policy ensures the 'Everybody's business' approach is extending the expectation to partners and providers, as well as Council staff. It underpins a new work programme for the Corporate Safeguarding groups.

I am pleased to be jointly chairing with Cllr Mark Child and that there is strong engagement from service leads across the whole of the Council. This Council wide approach promotes greater awareness of contextual safeguarding issues such as child sexual exploitation, human trafficking/ modern slavery, female genital mutilation, and county lines.

Through the Corporate Safeguarding group - all areas in the Council have safeguarding named officers who provide leadership and training on the duty to report concerns and the implementation of the revised policy and work programme. There are mandatory safeguarding courses that all staff must complete when they start, and every 3 years, and the same expectation is placed on elected members

I am particularly proud of work in this area, as it brings together employees and managers from across the council who may not routinely work together to look at ways we can tackle the many issues that impact on the safety of vulnerable adults and children.

Less positively, a recent inspection of the regional youth offending service, highlighted significant concerns about risk management and consequent safeguarding of young people accessing the service. The local authority has acted

swiftly to re-establish a Swansea YOS and put a comprehensive improvement plan in place to address all identified concerns.

### **What did we plan to do last year?**

As promised a full review of safeguarding arrangements has been undertaken; proposals for way forward includes a new dedicated safeguarding team to be established which will be incorporated into the restructure of Adult Services. The changes are to ensure that all concerns are addressed at the earliest opportunity, risks are managed effectively with the person at the centre's full involvement and investigations are followed through to conclusion.

Swansea has significantly improved performance in relation to Deprivation of Liberty Safeguards (DoLS) through implementing dedicated team arrangements. Feedback suggests this has not only improved professional knowledge but is driving up standards and response times.

### **How far did we succeed and what difference did we make?**

Swansea's number one corporate priority is to ensure that vulnerable people in Swansea are safe, and protected from abuse and neglect by:

#### **➤ Regional Safeguarding Boards**

We aim to ensure that effective regional safeguarding boards are established for the West Glamorgan region, with clear business plans in place to promote shared accountability, awareness through targeted campaigns, preventative approaches performance reporting and learning lessons from serious cases.

Across the Council and within social services, there are strong, timely and effective arrangements in place to make any concerns known

#### **➤ Duty to report and respond to concerns-**

Swansea has a strong corporate safeguarding culture with all service areas and staff working collaboratively to prevent abuse and neglect where possible. Swansea launched a Spot It! Report It! Campaign to raise understanding of duty to report under the Act. There is good awareness, following mandatory training, of the duty to report concerns. Our commissioning arrangements aim to ensure that other agencies/ services and individuals give timely and proportionate responses when abuse or neglect have occurred. Through contract monitoring and a regional quality framework we seek that safeguarding practice is robust and continuously improving, to enhance the quality of life of adults in each service area whoever the provider of care.

➤ **National guidance**

The development of the All Wales Safeguarding Procedures for the Protection of Children and Adults is underway and Swansea is engaged with regional and national consultation.

**Safeguarding practice aims to be both person-centred and outcome-focused.**

In Child and Family Services, the Signs of Safety Practice Framework is a whole systems approach embedded across the service, whilst adhering to the prescriptive requirements of the Wales Safeguarding Children practice guidance.

In an effort to further embed our strengths-based approach, as planned children services underwent a full scale restructuring this year, through which we implemented a reclaiming social work design, introducing for example practice leaders as a separate function from team managers. Undergoing inspection during period of major restructure was an extraordinary challenge. The Inspection findings and feedback from the review team was both positive and constructive and further influenced our transformation plans.

We have a comprehensive assurance framework in place made up of performance reporting, national comparative data indicators and established quality assurance mechanism through the Service Quality Unit. The work of Independent Reviewing Officers and Practice Leader posts focus on driving practice excellence. Child practice review processes and feedback from families through appreciative inquiries provide considerable reassurance about the effectiveness of children safeguarding work in Swansea.

➤ **Children subject to child protection plans**

Performance in relation to the timeliness of Initial Core Groups, initial conferences and visits to children on the Child Protection register is significantly improved. Swansea has a rate of children on the protection register that is around the Wales average, though the number of children added to the CP register has increased in year whilst children removed from the register has also increased.

➤ **Edge of Care**

We are seeking to work constructively with Cafcass and the courts to promote strengths-based work with families that enable different and better outcomes for children than those remedies, which may traditionally arise through care proceedings. We recognise the challenge of this approach to practice in the adversarial context of court proceedings.

A recent report by Isabel Trowler, about care proceedings in England: [The Case For Clear Blue Water full report](#), highlights the challenges social workers face ensuring that children needing protective care and support are the right children given the right support at the right time. The report argues that families subject to thin, red line decisions, where the decision to remove a child from his or her parents could go either way, should be diverted away from Court, or taken to Court earlier. The report suggests we should aim to create *clear blue water* between the standard of care and protection given to a child involved in public court proceedings compared to the care and protection of other local children considered to be at risk of significant harm.

➤ **'Contextual safeguarding'**

Swansea has been successful in bidding for funding to support one of the first whole area 'contextual safeguarding programmes in Wales.

**'Contextual safeguarding'** involves considering how, for example, peer groups, social media, neighbourhoods and schools, impact on young people's vulnerability. This approach was first developed by Dr Carlene Firmin, of The University of Bedfordshire, and first piloted in Hackney:  
<https://www.contextualsafeguarding.org.uk/en/>

Swansea is looking to establish a programme which will identify new partnerships with organisations like transport providers, local businesses, fast food restaurants and other places where young people gather. The main aim of the project is to reduce the need to move children away from unsafe social environments and instead, create safety in the places and communities in which they spend their time. Addressing risky behaviours, where child or young person is more influenced by peer group than family, in particular those most vulnerable children at risk of exploitation can be best achieved where a multi- agency approach helps target a range of interventions aimed at influencing or disrupting a peer group where there are risks to a vulnerable child.

**People in Swansea are supported by care and support plans, which promote their independence, choice and well-being.**

➤ **Safeguarding Adults -.**

Care Inspectorate Wales visited Adult Services this year to listen to how our safeguarding policies and practice are developing, to help inform their national inspection programme. Overall the feedback from practitioners highlighted both the progress we have made in terms of process and some frustrations with the challenges around keeping the person at the centre of what we do, 'making Safeguarding Personal'. There has been progress in how we are working with partners in responding to and managing risk. We are considering options for a dedicated safeguarding team as part of the restructuring of Adult Services. A work group on Safe Voice has been established as part of the corporate safeguarding work programme to take forward making safeguarding personal and the implementation of the new guidance.

## ➤ **Best Interests**

Best Interest considerations and meetings are very evident in Adult Services, within care and support plans. These plans are co-produced to meet assessed need to protect people from abuse or neglect or other harm by making use of the best interest approach, promoting human rights, applying Deprivation of Liberty Safeguards, and by working with families and partners.

## ➤ **Advocacy**

Swansea Council commissions advocacy services for people who need support in representing their views, as part of making best interest decisions and with the intention of giving them a stronger voice. We commission independent advocacy services for children and young people consistent with the agreed national approach and are beginning to see increased take up of the active offer.

## ➤ **Secure Estates**

We are reviewing our work with the prison (secure estate) as required under Part 11 of the Act which gave local authorities new responsibilities for prisoners who have care and support needs and live within the local authority. Given the nature of the prison estate in Swansea servicing a younger, short-term cohort, we continue to meet those new responsibilities through access to IAA and by supporting a range of in prison health, care and well-being initiatives.

## **STORIES OF OUTCOMES: SAFEGUARDING**

### **Story 1**

#### **Keeping Swansea children safe.....**

In May 2018, Social Services were alerted to an extremely distressing photograph that a mother had taken of her daughter and posted on social media; the 2-year-old child's body and clothes were filthy dirty, she appeared to have black eyes and the floor and the walls of the room she was in were also black with dirt. Mum had written on the picture 'someone come and take her I'm losing the \*\*\*\*\* will to live'. The child protection medical, which **occurred that day** stated that "to an extent the injury is more consistent with a punch to the eye or a thrown object, than a fall". The child was placed in foster care the same day with consent from her mother. She was then placed on the child protection register under the category of neglect, and PLO commenced

The child's father did not wish to be assessed to care for her, while her mother was initially unsure, saying at different times that she wanted for her to be returned to her care, then that she wanted her parents to care for her because she felt her own mental health impacted on her parenting. The social worker did assess Mum's capacity to care for her child, should she again take a position that she wished to care for her, however this assessment was negative.

Through the PLO period, both the child's Mum and Dad agreed that they felt it was in her best interests, to be cared for by her paternal grandparents, who were

willing and able to look after her well, and to support contact with both parents and her half sibling. The outcome of the PLO assessment was that this would be the best outcome for her.

She is now settled and doing very well in the care of her paternal grandparents, who are currently in the process **of applying for a Special Guardianship Order.**

## Story 2

**A piece of good practice was noted following a review child protection case conference.**

The manager of Service Quality Unit (SQU) gave feedback on how impressed she was with the quality of the direct work with the children, 2 siblings who had been initially registered in March 2018 under the category of emotional abuse, because the children had said that they felt frightened and sad living with Mum because she would get angry when they play together and has pushed and scammed them. There were complicating factors of strained relationships between parents and grandparents. At the time of their registration, the children had been staying with their grandparents and had refused to go home to parents.

The direct work that the social worker completed with the children demonstrated that the children had been able to very clearly express what they felt was going well in their lives, their worries, and their hopes. They also did work about what they wanted in their own safety plan, what everyone was going to do to help make their home happy, and what they thought that they needed to do themselves. The safety plan was detailed, and everyone contributed to it, the children, parents and grandparents. It was well-tested and the children had returned home to parents.

It was a unanimous decision to remove the children's names from the CP register in December, and the case closed in April 2019.

## Performance Measures

### **PERFORMANCE IN 2018/19** (Last Year in brackets)

#### **Qualitative Measures - See Appendix 1 for summary results**

#### **Quantitative Measures:**

Percentage of adult protection enquiries completed within statutory timescale: enquiries completed within 7 days = **85.6%** (91.9%)

Safeguarding concerns -referral to Adult Services where decision is taken within 24 hours = **55.3%** (63.7%)

Percentage of re-registrations of children on local authority child protection registers= **9.76%** (7.19%)

Average length of time for all children who were on the child protection register during the year= **236 days** (210.5 days)

#### **Local Measures:**

AS9: % of DOLS assessments completed within accepted national standard for completion (21 days or less) =**56.1%** (59.7%) Target = 60%

## Our priorities for next year

- To better show how we are listening to / working with voice of child and vulnerable adult in all aspects of our safeguarding work.
- Re-establish the Swansea YOS and implement all improvement actions required following the recent inspection.

### 4d) **Encouraging and Supporting People to Learn, Develop and Participate in Society (NQS4)**

This standard expects that Swansea citizens can learn, develop to their full potential, and to do the things that matter most to them. People accessing managed care and carers can engage, contribute to communities and feel valued in society.

Our approach to social work practice development in helping people to achieve their own personal well-being outcomes is set out in practice handbooks and through our overarching practice models of Signs of Safety (Child and Family Services) and Collaborative Communication (Adult Services)

My visits to social work teams, and the compliments I have received about social work practice during the year has confirmed that we are beginning to embed relational social work practice. By promoting high practice standards supported through expert leadership, we are beginning to positive impacts of improved

outcomes for vulnerable children, families and adults in Swansea. This relentless focus on being the best we can be throughout the organisation is helping ensure we continue to deliver a sustainable model of social care and social services into the future.

I was pleased that CiW chose to highlight our practitioner's commitment to outstanding practice in their recent inspection of Child and Family services, as well as noting the strong leadership from our Head of Service, Julie Thomas and her senior management team. It's important to also acknowledge that frontline services are absolutely dependent on an expert back office, business support functions. We have continued to invest in that expert, back-office function.

### **What did we plan to do last year?**

We recognised that we have to continue our journey towards being the best that we can be, by further embedding our preferred Practice Frameworks across all areas of our work. We have been well supported by the Council's continued investment in innovative strengths-based prevention models such as Local Area Coordination, as well as continued investment in our frontline social work and social care workforce.

### **How far did we succeed and what difference did we make?**

Swansea citizens can learn, develop to their full potential, and to do the things that matter most to them:

#### **➤ Social Services improvement**

I am confident Social Services is achieving better outcomes by focussing on raising practice standards through for example the creation of new roles such as the Principal Social Worker and Practice Leads in each child and family team. These new roles are an important part of our redesign of children services to adopt a reclaiming social work infrastructure which includes a bespoke performance hub. These new roles and infrastructure are helping promote our practice framework and to ensure that practice standards and personal and case supervision are seen as priorities.

We have prioritised Staff development/ training to meet the requirements of our improvement programmes, and the new expectations of the Social Services and Well-being (Wales) Act 2014.

As Director, I realise the pressures staff are working under. I am even more impressed when I read or hear about stories of the good work taking place, and that we are taking the time to explore feedback from families through appreciative enquiries.

Some of the stories of good social work presented in this report reflect the depth of practice we expect in Swansea, and the significant changes taking place.

#### **➤ WCCIS**

The Welsh Community Care Information System (WCCIS) is a single information system that supports the delivery of innovative, person-centred and integrated

community health and social care. It will allow local authorities and community health services to share care records as required by the Social Services and Well-being (Wales) Act 2014, to help improve support for citizens across Wales.

The implementation of WCCIS across the Western Bay region has been making good progress.

Swansea Council are well into their implementation phase, having signed a Deployment Order (DO) this year. Adult Services and Child and Family Services have been engaging with the project team to map out processes and review documentation in readiness for the system to be best configured.

WCCIS 'champions' have been identified and regularly meet to help co produce Swansea's implementation plan, whilst also receiving practical insight into and hands-on experience of the system. The system is due to go live at the end of February 2020, and a training strategy is being developed to ensure all staff receive the necessary support during this change.

Swansea are helping people to gain the skills and the educational attainment they need to engage in society, and we have encouraged people to be active members of communities and support each other, and by reducing the barriers to social inclusion by:

➤ **Child & Family Services** -what has changed in our practice....

In Children Services, we implemented our new reclaiming social work infrastructure of Supported Care Planning (SCP).

➤ **How we expect this to be better for child and families.....**

Swansea's approach is based on stronger family focused practice, better decision making and more sophisticated and tailored support services, and aims to ensure that we are safeguarding and protecting our most vulnerable children.

➤ **Child and Family Services practice standards** – Swansea, as with all Local Authorities , has to meet many statutory requirements in child protection, with looked after children and for children in need of care and support. Swansea has been on an important journey to place each child and family at the centre of their safety, care and support, by embedding the Signs of Safety framework into everything we do. Social work practice excellence is a vital part of our sustainable model. The more we can do to help children remain in families and to achieve permanence at the earliest opportunity, the greater the resources available to support prevention and early intervention thus avoiding significant harm occurring in the first place.

➤ **Signs of Safety**

Swansea is in its 8th year of using the Signs of Safety methodology. We are still the pioneers of this approach in Wales, and I am delighted that six other Welsh authorities have since started using the Signs of Safety model. Our Signs of Safety implementation plan continues to provide the main focus to our improvement work over the next 3 years. Signs of Safety is a safety and strengths approach to case

work. The framework is all about practice. The model has a strong emphasis on building partnerships and collaboration.

The Signs of Safety approach builds on the social workers skill base through the use of solution-focussed brief therapy techniques through utilising questions. Swansea has created a knowledge bank for practitioners to access the latest tools and share practice: <https://www.swansea.gov.uk/staffnet/signsofsafety>

### ➤ **Reclaiming Social Work**

Last year we explained about how we needed to redesign our supported care planning teams, and now Swansea are looking at Redesign 'Phase 2'. Soon after the original restructure took place, the Care Inspectorate Wales carried out a full inspection of our Child and Family Services. The feedback was generally positive with some improvements needed, particularly around evidencing the voice of the child in all our work. The focus of 'phase 2' of the redesign includes providing additional support to staff in supported care planning to make sure relational social work practice becomes embedded in the coming year. This will include a robust training plan so that staff are fully confident and skilled in their roles.

### ➤ **Family Finding**

Through Signs of Safety, Swansea prioritises the importance of effective family network meetings in the development of Safety Plans. Gaps in a child's family network can make it harder to achieve the best possible outcomes. Swansea has accessed Welsh Government invest to save funding to roll out the best practice model of 'Family Finding' to help social worker grow strong and supportive networks to support a child / young person through life. Based on work undertaken by Kevin Campbell: [http://www.familyfinding.org/trainings/trainings\\_kevin.html](http://www.familyfinding.org/trainings/trainings_kevin.html)

Swansea are using this approach to further strengthen our signs of safety model, and the programme of training to help social workers build resilience in children and families. This will further help reduce the number of care episodes or time spent in care experienced by children.

Social Workers in Swansea, through years of developing their practice, using advanced models such as Signs of Safety and Signs of Wellbeing, are confident when presenting child-care cases to court. A major strength in Swansea is the collaboration between a well-informed, children's Legal team and a children's service which prioritises high standards of social work practice.

### ➤ **Edge of Care**

By enhancing our Edge of Care services, we are supporting our most vulnerable children to stay at home or return home if they are in care. This year the West Glamorgan regional partnership board has agreed to prioritise investment in edge of care services utilising Welsh Government's Integrated Care Fund (ICF).

Swansea is a strong advocate of Special Guardianship Orders (SGOs), as a way of children achieving safety and permanence, where this is backed by robust care and support, and risk sensible planning.

➤ **Emergency Admissions-**

Performance data has highlighted that despite our established Safe LAC reduction strategy, in the last year, we admitted a large number of children into the LAC system. Many of these children became looked after as a result of emergency admissions. We have put into place a multi- agency solutions meeting, chaired by the Head of Service or a senior manager, with a remit to support the social worker to create a trajectory to ensure that children who are accommodated, have timely plans for reunification with their families or a pathway to permanence in place.

➤ **Service Quality Unit**

Swansea's Service Quality Unit has lead responsibility for the development of a **Quality Assurance and Learning Framework**. The Framework is aimed at developing a culture of working with children and families that is efficient, effective and outcome based. The framework also includes ensuring that we have coherent policy documents, procedures, service plans, team business plans, staff training, supervision and appraisal designed to promote that all staff have the necessary skills and expertise to meet our required practice standards.

➤ **Quality Audits**

A sample of cases are audited each month based around a key theme in a bid to help improve services by finding evidence of good practice and identifying areas which need improvement. Regular audit reports will be produced to drive focussed improvement against the themes that emerge from this audit activity.

There are a range of joined up approaches to improve social inclusion, learning and well-being, and some early and overarching actions include:

**Adult Services** has wide range of specialist social work teams either colocated or more fully integrated with other professionals, particularly health colleagues :

- Common Access Point CAP for Health and Social Care
- Community Hubs
- Hospital Social Work Team
- The DoLS Team
- Care Homes Quality Team
- Community Mental Health Teams
- Community Support Team (People with Learning Disabilities)
- Older Person Mental Health Team Areas (OPMHT)
- Sensory Services Team
- Emergency Duty Team (EDT)

Each team is made up of social workers and unqualified workers and a range of relevant health professionals including district nurses, therapists, CPNs and other support staff. Swansea has established a far greater level of integrated health and social care infrastructure than exists in most Welsh local authorities.

➤ **Care and Support Planning for Adults and Carers**

Swansea's approach is based on personalised care and support planning (PCSP). This is a systematic process based around 'better conversations' between the person and their health and social care practitioners. The overall aim is to identify what is most important to each person for them to achieve a good life and ensure that the support they receive is designed and coordinated around their desired outcomes.

➤ **Collaborative Communication**

Collaborative communication is the practice framework within Adult Services. This framework is a citizen based, strengths based, outcome focused, coproduction, progression model. It is the approach chosen by Adult Services as the practice framework for social work. Training for all social work staff is in the process of being rolled out and I expect to hear more about the impact on supporting citizens to achieve their well being outcomes in the coming year.

➤ **Doing what matters**

We have worked with the Institute of Public Care to establish policies, procedures and practice tools which collectively make up our Doing What Matters (DWM) optimal model for adult social services and social care.

Following the principles of DWM, our Central social work Hub team developed a 'capturing personal outcomes' tool and have adopted a contingency planning approach which is reducing the amount of crisis social work intervention that is having to take place with individuals accessing managed care and support. This is a good example of a coproduction approach to working directly with citizens accessing social care support.

➤ **CMHT**

We have three Community Mental Health Teams in Swansea, in which social care and health service staff provide assessment, care and treatment services for people who have severe or enduring mental illness that significantly impacts on their functioning or ability to manage daily living. The recent Joint HiW / CiW Inspection of a Swansea CMHT gave positive feedback on how joint working is helping to achieve positive outcomes.

➤ **Working with risk, positive risk-taking**

Swansea accepts that managing risk is a key part of care and support planning. This requires practitioners to work in collaboration with a potentially vulnerable individuals, carers and family members. We aim to manage risks in ways which seek to improve the quality of life of the person, to promote their independence or to stop these deteriorating if possible. Not all risks can be managed or mitigated but some can be predicted. Our approach to risk management uses a broad range of responses that are closely linked to care and support planning. This may involve preventative, responsive and supportive measures to mitigate risk of harm and/or promoting the potential benefits of taking agreed risks.

➤ **Reviews**

A review is a key part of effective care and support. Effective reviews ensure that services remain appropriate and that individuals are achieving their well-being outcomes

The regional partnership board has prioritised the roll out of outcome focussed assessment and review processes across health and social care services in the region

This year Adult Services improved their overall performance on reviews, with Mental Health team achieving **90%** of cases reviewed in year.

### **Relational child and family social work in practice....**

Here is an example of intensive work undertaken with a family with 6 children living in dangerously poor home conditions whose was referred for Public Law Outline (PLO). The social worker used a range of tools such as *Strengthening Families Together* and *motivational interviewing* to work with the family, to support them and to explore what they wanted for their family, and how they could achieve this.

By using a strengths based approach the family very quickly became engaged in working with their family intervention worker to make improvements for their children.

Whilst in temporary accommodation, the home conditions were not as bad as previously, it was important that the social worker helped the family recognise the triggers to the situation becoming the way it did. This uncovered that Dad's mental health had a huge impact on his ability to keep on top of a busy family home. The social worker met with the mental health worker, to find out how best he could work with dad, and this proved insightful to truly understand the complexities of dad's mental health.

#### **Sessions completed around:**

- Families preferred future, worst things could be and recognising where they are now, and what needs to happen to get to where they want it to be.
- Exploring families existing strengths that will help them make the changes they needed to.
- Looking at parents values, and core beliefs and how this matches to their current situation.
- Exploring their children's needs, which of these they haven't consistently met previously, the impact of this and how they can meet their needs in the future.
- Benefits and importance of routines for children and their families. Looking at when these routines have worked for them previously, and now.
- Triggers to not being able to keep on top of home conditions.
- Exploring how mental health affects dad, and what helps him maintain this as best he can.
- Parents working together and supporting one another.
- Looking at lapse and the cycle of change, where they are now, what would be the first signs things were slipping, and what can we do to maintain changes.
- Goals were set around 1) Dad managing his mental health the best he can 2) Parents working together on routines and home conditions.

#### **Outcomes achieved:**

The family worked well, and completed all sessions, home conditions in temporary accommodation maintained. Parents were accepting of the need to change and have since managed to maintain these changes. PLO has ended and the family no longer at immediate risk of being accommodated.

Social work visits not identifying any further concerns.

## PERFORMANCE IN 2018/19 (Last Year)

**Qualitative Measures – see Appendix 1 for summary results**

**Quantitative Measures:**

- Percentage of children achieving the core subject indicator:
  - at key stages 2 = **59%** (59%)
  - at Key Stage 4 = **7.5%** (8.7%)
- Percentage of looked after children who, during the year to 31st March have experienced one or more changes in school during periods of being looked after that were not due to transitional arrangements = **14%** (19%)

**Local Measures:**

- CFS41a - Percentage of eligible, relevant and former relevant children that have a pathway plan as required = **97%** (84%)

## Our priorities for next year

During 2019/20, our priorities will be to:

- Continue to implement practice framework in Adult Services and Child and Family Services
- Implement WCCIS

### 4E) **Supporting People to Safely Develop and Maintain Healthy Domestic, Family and Personal Relationships (NQS5)**

This standard also expects Swansea citizens are supported within and by communities, in which they can contribute to and enjoy safe and healthy relationships. That people are also helped to recognise unsafe relationships and to protect themselves from abuse and neglect. That the views of families, carers and other personal relationships are taken into account when assessing and planning care and support needs.

Swansea's approach to commissioning for better social care outcomes is set out in the commissioning work being undertaken regionally, and locally as part of Sustainable Swansea.

It is vital we are getting the most value from the money we have available to provide or commission social care. We are always looking to become more efficient, promote better outcomes and realise savings where we can.

## **What did we plan to do last year?**

An important part of our approach is through collaborating regionally to address service gaps, such as our work to improve pathways for children in need of care and support and families, or innovative approaches such as local area coordination.

Following the Welsh Government decision to change health board footprints, Bridgend Council left the Western Bay regional partnership at the end of March 2019. This transition has required considerable work to review and amend the existing regional arrangements and to update our regional transformation plans.

The **West Glamorgan Regional Partnership Board** has been formed, and this is a collaborative Health and Social Care initiative comprising:

- Swansea Council
- Neath Port Talbot County Borough Council
- Swansea Bay University Health Board
- Organisations in the third and independent Sectors
- Citizen and carer representatives

Swansea Council has approved the future direction of the West Glamorgan Regional Partnership Board and work programme which sets out an ambitious transformation programme for the future delivery of health and social care services in the region.

The long term and primary aim of the work programme is to ensure services are resilient and sustainable, and that there are demonstrable improvements in service delivery for all service users across the Health Board footprint encompassing the areas of Neath Port Talbot and Swansea.

Health and Social Care Services are currently over-stretched with a growing demand. The main aim of the programme is to make service improvements, to avoid service costs increasing and to ensure services are sustainable for the future. In order to do this the programme aims to achieve effective collaboration, so that capacity is used in a more efficient and effective way, saving time, resources, sharing expertise and contributing to improved citizen wellbeing.

### **The key aims of the new Partnership are:**

- To promote prevention and wellbeing from a citizen centred perspective, that will support and strengthen both the care delivered and the health and wellbeing benefits to the people of the region
- To integrate services more effectively for the benefit of service users and carers
- To focus on the person through an approach committed to personalisation, independence, social inclusion and choice

- To fulfil a shared responsibility that adults and children at risk of harm are safeguarded against all forms of abuse by working together to keep adults and children safe and to promote their welfare
- To make service improvements, to avoid service costs increasing and to ensure services are sustainable for the future, in the face of growing demand and the current financial climate.
- To recognise that incremental changes to existing models of care will not be sufficient and that a bolder approach is needed to bring about innovative models that are appropriate to the needs of the population.

The work programme involves work across:

- **Adult's Transformation Board** (the key priorities of which include implementing a regional hospital to home recovery service, reviewing the optimal model for intermediate care services, piloting social enterprise models as alternatives to traditional domiciliary care services, establishing pooled budgets for care home provision, embedding the Commissioning for Complex Needs Programme as business as usual, establishing a dementia framework to drive strategic development of dementia support and services, implementing the Mental Health Strategic Framework and the Learning Disability Strategic Framework)
- **Children and Young people's Transformation Board** (key priorities of which include Safe Lac reduction, edge of care services, post adoption support services, Multi Agency Placement Support, a model of collaborative commissioning for children with Complex Needs and developing a continuum of support for children with emotional and psychological difficulties)
- **Integrated Transformation Board** (the key priorities of which include support for Carers, Digital Transformation inc the Welsh Community Care Information System, housing and accommodation support, embedding social value and co production in health and care transformation).

As well as regionally, we have been identifying savings and improvements as part of the Council's Sustainable Swansea programme which includes continuing to implement the recommendations of previously completed commissioning reviews and to improve the quality, range and flexibility of the services and support we offer.

### **How far did we succeed and what difference did we make?**

We are supporting people to maintain the relationships that matter to them.

Families and carers views are heard, and other personal relationships are into account when assessing and planning care and support needs by:

## ➤ **Child and Family Services Commissioning**

The focus has been on improving our **in-house offer** for looked after children. We aim to ensure we are 'Making all placements count' by focusing on outcomes such as living safely and securely with a family to achieve permanence, educational attainment, in or as close Swansea as possible.

We are achieving this in a number of ways.

**Ty Nant** residential care home has moved to a better location. The development of outreach as part of the Ty Nant offer is supporting more children in achieving better outcomes either through supporting safe, to return back to their family home or ongoing stability within an alternative care setting.

**Foster Swansea, and Family and Friends**-carers are taking on the challenge to offer suitable foster placements for more children who have complex needs

**Internal therapy team** - Swansea has established a service, which has now been supplemented by a regional multi-agency placement support service MAPSS, to provide additional therapeutic support to parents/carers caring for children with complex needs.

**Direct Access Panel** has been put in place to evaluate placement outcomes and promote utilisation of all available support services where emerging difficulties have been identified.

**Respite**- we have increased the range of and availability of Respite/ Short Breaks to families

**Adoption**- we are in the process of establishing an enhanced post adoption support offer which will both support better outcomes for adopted children but hopefully encourage more prospective adopters to feel confident in coming forward to be assessed.

**Swansea citizens are supported within, and by communities, in which they can contribute to and enjoy safe and healthy relationships:**

People are also helped to recognise unsafe relationships and to protect themselves from abuse and neglect by:

## **Adult Services Commissioning**

The focus has been on implementing new approaches to commissioning to get better value for money, to improve the stability of and capacity within the social care market and to focus more on outcomes. We are achieving this by:

**Joint Commissioning** by working across the wider council, we can find areas of services where resources could be pooled, and some examples are:

- Transport,
- Work development and employability schemes
- Prevention

**Carers** – Swansea will contribute to West Glamorgan Carers Partnership Board, which is developing a regional commissioning strategy using the population assessment and service mapping to improve regional and local arrangements.

**Supported Living**- around 250 adults in supported living receive intensive support from paid staff every week. Swansea has coproduced a new supported living framework with providers and service users through which we have identified 8 supported living providers to work in a more coordinated, outcome focused way developing closer connections to the geographic patch within which they will be providing care and support.

**Regional Quality Framework** –is being applied to both externally commissioned and in-house service providers to improve the lived experience and promote more person centred care.

**Magic moments**- stories of outcomes are now captured routinely by services through partnership work between in house providers and the local university.

**Direct Payments**- a local strategy has been co produced with citizens to look at how we can use direct payments to change our service offer and achieve better outcomes

**‘4<sup>th</sup> commissioning review’** – by looking at mental health and learning disabilities services as a whole, we are working with parents/ carers on proposals to how we can offer services differently in the future.

## **STORIES OF ACHIEVEMENTS (1)**

### **Regional Integrated Autism service.....**

A regional Integrated Autism Service has recently been launched. This service is to operate on a ‘Western Bay’ footprint across Bridgend, Neath Port Talbot and Swansea. A Regional Autism Strategy Group has been established to oversee the service, with membership from the three Local Authorities, Swansea Bay University Health Board, the Third Sector, Education, the national IAS team and the Neuro-Developmental Service. An Integrated Autism Service Operational Group has also been established and is chaired by the Health Board’s Clinical Lead for Autism. The intermediate Care fund is being used to support the Integrated Autism Service.

## **PERFORMANCE MEASURES**

- **PERFORMANCE IN 2018/19** (Last Year)
- **Qualitative Measures:** see appendix 1 for summary of results
- **Quantitative Measures:**
- CFS25 -The percentage of children supported to remain living with their family = **66%** (71.5%)
- CFS26 The percentage of looked after children who returned home from care during the year = **44.8%** (12.6%)
- • The percentage of looked after children on 31st March who have had three or more placements during the year = **11.55%** (9.81%)

## **Our priorities for next year**

During 2019/20, our priorities will be to:

- Through coproduction with citizens, taking forward proposals emerging from our regional and local approaches to commissioning to achieve better outcomes.
- Through Regional partnership arrangements, continue to improve access to CAMHS or alternative emotional and psychological support for children and young people
- Support delivery of all the regional transformation plans including Swansea's implementation of WCCIS.

### **4F) WORKING WITH AND SUPPORTING PEOPLE TO ACHIEVE GREATER ECONOMIC WELL-BEING, HAVE A SOCIAL LIFE AND LIVE IN SUITABLE ACCOMMODATION THAT MEETS THEIR NEEDS (NQS6)**

This standard expects that vulnerable people are supported to participate as active citizens both economically through work and socially, and within suitable accommodation

Our vision for this well-being measure is set out in the Service Models and Improvement Plans (Appendix 2)

### **What did we plan to do last year?**

In the previous section, I looked at how we have formed the new West Glamorgan regional partnership board and set out a work programme. There are still some challenges such as how we can be more effective in working with individuals with substance misuse issues, which negatively impact on vulnerable people, families and communities. Through coproduction, we are implementing the new supported living framework through new relationships with providers

### **How far did we succeed and what difference did we make?**

We are supporting people to participate as active citizens economically and socially. We are supporting people to access and sustain engagement with meaningful work. We are supporting people to access financial advice and help with benefits and grants.

A **Tackling Poverty strategy** is part of the Council's policy commitments and aims to outline our proposed approach to reducing and alleviating the impacts of poverty.

I mentioned earlier that poverty prevention is now integrated with social services in the Council, and this will involve working closely with the **Swansea Poverty Partnership Forum** to identify shared projects and outcomes to make the biggest difference.

Within traditional social services, we are looking at how we prepare to meet the needs of future generations by implementing more sustainable models for social care:

### ➤ **Child and Family Improvement Programme**

The Child and Family Services improvement programme 2017-22 has been revised (Jan 2019) to reflect how we are working towards Safe LAC reduction using the drivers diagram (Appendix 2)

The programme includes some of our priorities around corporate parenting, participation for our young people and supporting the wellbeing of our staff so that they are able to continue facilitating our demanding relational social work approach to practice.

The programme aims to help us achieve our vision for permanence for children, reducing the number of children who we look after and ultimately supporting us to be the best we can be in supporting children and families to stay safe and achieve their well-being outcomes. The revised improvement program sets our priorities for the next 12 months.

These include themes around early intervention and prevention, safeguarding, permanence, partnership and collaboration, and our workforce. It also includes the improvement actions points arising out of the Care Inspectorate Wales inspection report.

### ➤ **Corporate Parenting**

As corporate parents, all councillors and officers of the Council have a collective responsibility to ensure that looked after children and care leavers can have the outcomes every good parent would want for their children. This means ensuring they are safe and providing opportunities to help them achieve their potential. Corporate parents have responsibility for the child's education, training and employment, health, welfare, leisure, housing and cultural opportunities.

Swansea's Corporate Parenting Forum is an important mechanism for driving the Improvement programme. A group of committed councillors and officers each take a lead role in promoting the role of corporate parenting within and outside the local authority. Its members have an in-depth understanding of the issues that affect looked after children and will champion their rights. The forum reviews and monitors services and support for looked after children to ensure that outcomes are met and that there is a robust planning process. Forum members also have direct contact with the children and young people in order to understand their views, and what matters most to them, and support events involving looked after children.

### ➤ **Leaving Care and Becoming Independent**

The Council retains a level of responsibility for looked after children who have left care up to the age of 24 years. We support them in their transition to adulthood in such a way that their independence level increases as they acquire the knowledge

and skills, they need to exercise their rights and responsibilities as independent adults.

Every 16 and 17 year old young person who has been looked after by a local authority for 13 weeks or more after the age of 14, has a Pathway Plan and a Personal Advisor.

**Bays+** now provides confidential help, advice and support for young people leaving care and young people who are at risk of becoming homeless.

### ➤ **Adult Services Improvement Programme**

**Swansea's Adult Service Improvement programme has a number of key objectives**

- Better Prevention
- Better Early Help
- New Approach to Assessment
- Keeping People Safe
- Working Together Better
- Improved Cost Effectiveness

Work on the three previously completed commissioning reviews continues into 2019/20 – including implementation of new Domiciliary Care contracting arrangements, alongside changes to our in house residential and day services model in line with the optimal model for adult services. The 4<sup>th</sup> commissioning review is scheduled for incremental completion this coming year albeit opportunities for improvement are being realised as when they arise through the review.

Alternatives to more traditional care provision continue to be supported by the Direct Payments strategy roll out and expansion of Local Area Co-ordination.

Last year the improvement programme achieved more than £3m of identified savings, which contributed to a better than forecast outturn.

A number of improvement projects have already been mentioned in this report, it is worth mentioning some other which are making an important contribution to a more sustainable social services:

### ➤ **Outcome focussed review and reassessment**

As part of the regional work programme specific very intensive care packages are being reviewed independently and utilising a particularly robust outcome focussed methodology. The work varies according to each case but may involve undertaking or scheduling a review, working on funding contributions or managing disputes. There has been important work undertaken in Mental Health and Learning Disabilities services, in which the costs associated with individual placements or care packages are significant, outcomes have often been poor and where there are

shared agency responsibilities to meet individual's continuing health and social care needs.

### ➤ **Charging**

Swansea undertakes an annual review of its social services charging policy, to meet requirements of Parts 4 & 5 of the Social Services Act, and the focus this year has been on implementing the Council's policy of full cost recovery and progressing a fairer charging approach. This has led to implementation of a new charge for day services.

Swansea has in the last two years seen its schedule of charges for adult social services brought more in line with the rest of Wales.

We provide opportunities for people to be involved in a range of valued life and work experiences that will assist them to be more independent, involved, valued and active members of the community.

### ➤ **Work development/ learning opportunities**

Working together local services based in Gorseinon, Abergelli, The Beeches and Fforestfach Day Services, have put together a programme of workshops and employment opportunities which have been developed to improve individual life skills self-esteem and wellbeing and enable feelings of empowerment and independence.

CREST is a specialist mental health resource centre offering recovery-focused services to people with more severe or complex mental health problems. The recovery model focuses on encouraging people with mental health problems to develop skills and relationships that enable them move forward, take control of their lives and live in a more meaningful and independent way.

Working in partnership with local universities and the health board, CREST is set to become a *Recovery College* providing formal education programmes as a route to recovery for people with a lived experience of mental distress. Crest will continue to provide the employment and day services it already offers but this addition will enhance the work and educational opportunities available at the Cwmbwrla centre.

The Council's wider employability services and offer will be the subject of a commissioning review which will provide further opportunities to promote employment or skills development for citizens with care and support needs.

## STORIES OF ACHIEVEMENT (1)

### **Supported Living in Swansea.....**

A new shared supported living scheme was set up for three young people with very complex needs who were returning to Swansea from their current education residential placements. A property was funded following a successful application to the Welsh Governments Independent Care Fund (ICF), and then purchased on our behalf by a Registered Social Landlord (First Choice Housing) through an accommodation development agreement. Our People Policy Development Committee is interested in how elected members can better help schemes to establish in their ward areas, and a new communication protocol has been agreed. The tenants will be supported by experienced skilled staff with a working knowledge of learning disability, behaviours that challenge, appropriate forms of communication and autism. They will experience a consistent approach, from a dedicated staff team, to deliver continuity, stability and routine.

In partnership with family a range of professionals and carers, we co-produced a support plan to meet their needs. The Individual's strengths and weaknesses, barriers and risks were identified and a care plan created to clarify how the care providers can support the tenants to achieve their identified outcomes. The care team's focus will concentrate on the positives, their abilities and coping mechanisms to learn and become valued citizens in their community.

## PERFORMANCE MEASURES

### **PERFORMANCE IN 2018/19 (Last Year)**

**Qualitative Measures: See Appendix 1 for summary results**

**Quantitative Measures:**

- **The percentage of all care leavers who are in education, training or employment - At 12 months after leaving care = 61.1% (35.19%)**
  - **At 24 months after leaving care = 41.82% (34.15%)**
- **The percentage of all care leavers who have experienced homelessness during the year = X.X% (100%)      awaiting homelessness data**

### **Our priorities for next year**

During 2018/19, our priorities will be to:

Complete the 4<sup>th</sup> commissioning review and implement improvements to in scope services as when opportunities are identified

Continue to implement the recommendations of earlier commissioning reviews and in particular the new domiciliary care framework

Meet the milestones set out in the children and adults improvement plans

Participate in the whole council employability commissioning review to ensure opportunities to promote better outcomes for citizens with care and support needs are realised.

### **5a) Our Workforce and How We Support Their Professional Roles**

This section is about how we ensure services are delivered by suitably qualified, experienced competent and confident workforce, that is supported to be able to recognise and respond to individual's needs in a timely and effective way. How the Council ensures that staff and services meet the standards expected of them.

Our workforce is crucial to making this happen, and our approach is to encourage and support staff to be the best they can be. We encourage staff to adopt a position of humility when working with vulnerable individuals and to utilise relational social work practice to inspire hope and optimism for individuals, who at times find themselves in the most desperate of circumstances.

We are committed to ensuring that the social care workforce, not just within the Council but across the whole sector, has the appropriate skills, training and development opportunities in order to keep up with the new legislation. We firmly believe that a competent and trained workforce is the key to making sure that we are able to deliver quality services at the right time, in the right way and to the right person. The Regional Partnership receives funding from Welsh Government via the Social Care Wales Workforce Development Grant, which has been used to support the implementation of the Social Services and Well-being (Wales) Act

#### What we said we would do last year?

Last year we set out to develop a workforce strategy, and work on this is underway regionally and locally. In Swansea, we are reviewing arrangements for Workforce Development and Training following structure changes to the social services directorate and within the Council. Our ambition is to have a workforce development infrastructure and framework which supports professional development across all the Council's 'people' services.

#### What we have achieved?

To ensure that services are delivered by suitably qualified, experienced competent and confident workforce. This review will look at how we provide support to social care staff through the work of the Service Training and Development Unit, and the roles needed to support this. We are working with managers to identify the training needs and priorities to support the improvement programmes.

There are significant challenges such as:

- Qualifications and Competencies Framework (QCF)

- Social Care Workforce Development Plan/ funding
- Post qualification training pathways
- Reporting on staff training / sickness using corporate HR records
- Signs of safety / practice development (Child and Family)
- Collaborative Communication (Adults)
- Workforce development – Council wide approach

#### Our priorities for next year

- We expect to complete a Directorate Workforce Development Strategy this year
- Complete roll out of collaborative communication training to all adult services staff
- Embed the children services staff well-being strategy

#### **5b) Our Financial Resources and How We Plan For The Future**

This section provides an overview of the resources available within Swansea Council to provide social services, and how financial constraints are impacting on key public services.

The scale of the financial, demographic and sustainability challenge facing Swansea Council requires a radically different approach to planning how to use our financial and other resources.

Swansea's approach set out in Sustainable Swansea – Fit for the Future: Budget Proposals 2018/19 – 2021/22, as part of a Medium Term Financial Plan focuses on:

- The core future purpose of the Council
- The transformation of services and the model of delivery
- Greater collaboration with other councils and local organisations, community groups and residents

Above all, it emphasises sustainable solutions with prevention at its heart.

This ambition is set out in Sustainable Swansea – fit for the future, our long term plan for change, underpinned by our Innovation Programme. The Council's overall aim is to protect frontline delivery of services, including social services and education, as far as possible.

#### What we said we would do last year?

Achievement of a balanced budget.

- Outcome of public consultation on residential care and day services for older people.

- 4th commissioning review of services for adults with a learning disability, physical disability or mental ill-health.

### What we have achieved?

There are many developments in this report, all of which are making a vital contribution towards a sustainable model of social care in Swansea, and in meeting the challenges posed by pressures on local authority budgets, continued austerity and increasing demand for public services.

The vision for Adult Services as set out in the service model and improvement programme aims to deliver a more sustainable model of social care.

This will improve our use of resources to meet increasing demand and expectations.

By engaging with people and our partners early on, we can design services and approaches that are more efficient and cost effective. In addition, by commissioning and procuring services more effectively, and finding more cost-effective ways of delivering care we can ensure that every penny spent by the Council and its partners maximises the health and wellbeing of our population. The priority next year, following the public consultation will be to shift existing funding from our traditional model to this more progressive model of care.

Similarly, Child and Family Services has a Safe LAC (looked after children) reduction) strategy for what good looks like, and an improvement programme to deliver the changes needed.

By the changes shown in the driver diagram at four levels (Appendix 2b) across prevention, social work practice and commissioning for better outcomes, we can expect progress towards operational and financial targets relation to Child and Family Services over the next 3-5 years.

As part of the preventative approach, the Council will continue to facilitate investment in the Swansea model of Local Area Coordination to increase community-based support, which avoids or delays the need for managed care and support and maintain investment in integrated, intermediate care services where a demonstrable reduction in recourse to traditional direct care services can be evidenced.

The full details of our financial sustainability actions and targets are set out in trackers monitored at the Social Services Performance and Financial Monitoring meeting.

### Our priorities for next year

- Achievement of a balanced budget and savings targets

## **6. ACCESSING FURTHER INFORMATION AND KEY DOCUMENTS**

### **6a) Complaints and representations**

The Annual Reports summarising the Compliments and Complaints received and relating to the following were reported to Cabinet in Jan. 2019.

Adult Services Complaints

Child and Family Complaints

### **6b) Mwy Na Geria**

Swansea Council and Social Services recognises the importance of meeting the individuals' Welsh language needs, and we are committed to offering, providing and developing Welsh language services.

Swansea Council's Welsh Language Standards Annual Report 2017/18 has been published.

#### Summary of progress

Swansea continue to implement the Welsh standards, and work within *Mwy Na Geriau* strategic framework for Health and Social Care which ended in March 2019. There is good awareness across social services of the standards, and the 'active offer' to citizens. There are challenges in matching limited number of Welsh speaking staff to meet needs as shown in the regional population assessment. A Workforce Development review is looking a Welsh language training needs of the social care workforce. We have contingency arrangements at front door to ensure active offer can be implemented on a daily basis whether through available social care staff or via corporate customer services.

#### **STORY OF OUTCOMES**

A project officer working for Menter Iaith Abertawe, a business that promotes Welsh around Swansea is leading a new exciting joint project, which is funded by the People's Postcode Lottery. This exciting new project is called *Hen Blant Bach*, and aims to support groups of young children from Welsh Medium Schools in visits to older people at residential homes, to share experiences and to participate in various activities in the Welsh language.

#### Our priorities for 2019/20

To review joint regional arrangements to support evaluation of progress and the implementation of updated 'Mwy Na Geriau' framework in 2019/20.

## **6c) Getting in Touch**

This Annual Report provides detail about Swansea's improvement journey within statutory social services in 2018/19.

The Full Report is available in other languages and formats upon request.

Please let us know if you think this report is a fair summary of the current position of social services in Swansea; and whether it reflects your own experiences in the past year.

Or, if you simply require more information about a subject within this report.

We would welcome any comments you may have, by email to:

[Simon.Jones@swansea.gov.uk](mailto:Simon.Jones@swansea.gov.uk)

You can write directly to myself:

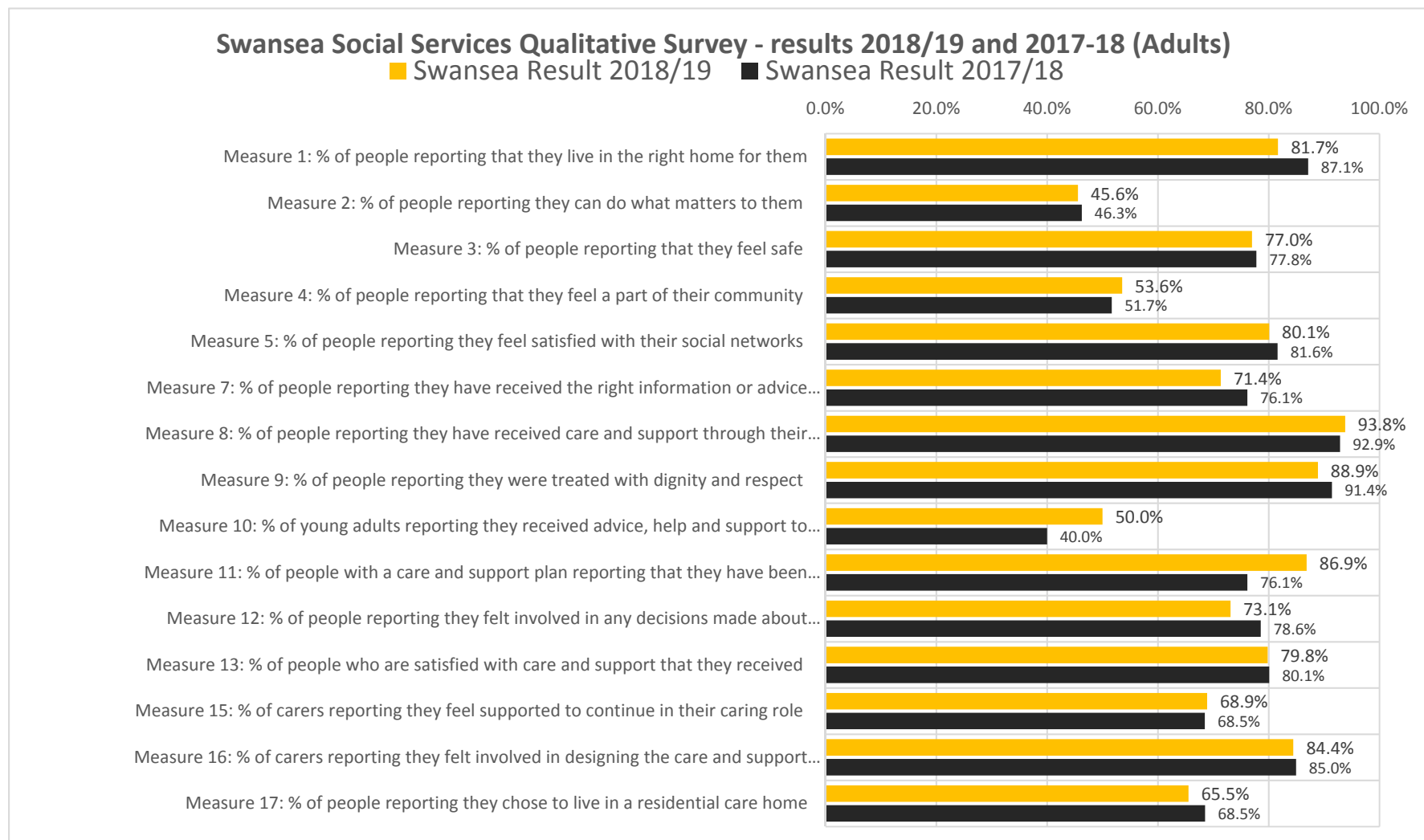
David Howes, Director of Social Services, Swansea Council, Zone 2e, Civic Centre, Oystermouth Road, Swansea, SA1 3SN

For further information on accessing Social Services, check out the Council's public website at: <http://www.swansea.gov.uk/article/2929/How-Social-Services-can-help-with-your-care-and-support>

## **Appendices**

Summary of Quantitative and Qualitative Performance & Improvement Programmes

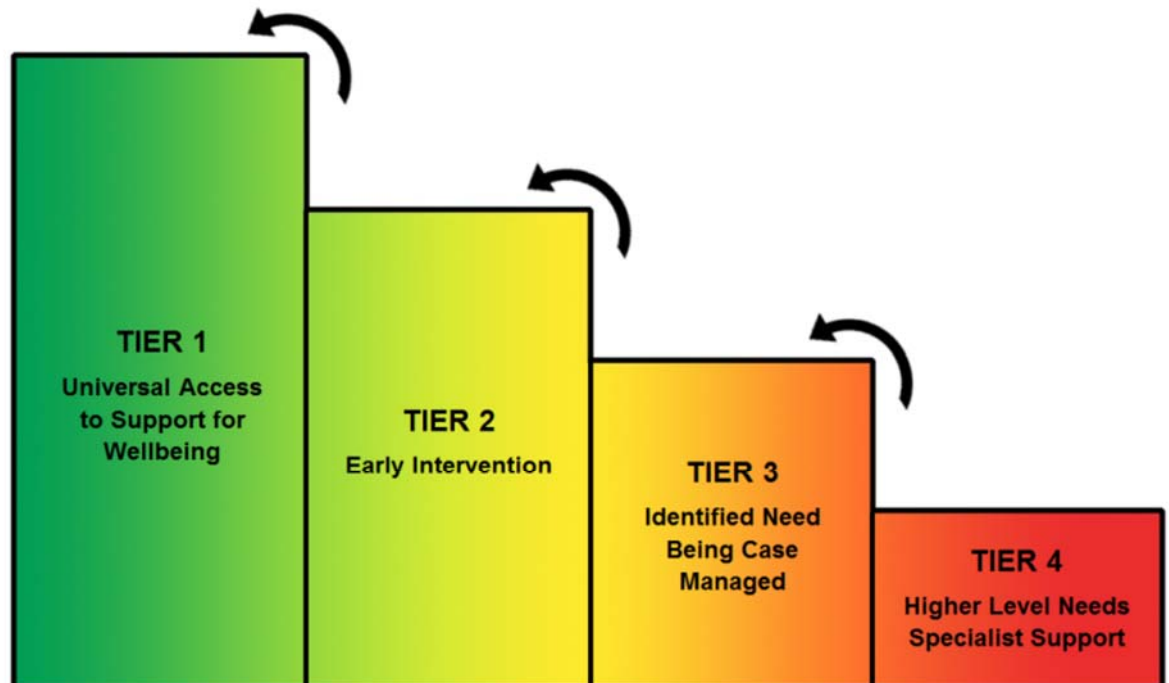
## 1. SUMMARY OF QUANTITATIVE AND QUALITATIVE PERFORMANCE



## 2. IMPROVEMENT PROGRAMMES

### 2a ADULT SERVICES

#### 2ai. Adult Services 'Service Model'



#### **Glossary**

Tier 1 – Universal services aimed at all Swansea Citizens to enhance wellbeing

Tier 2 – Early intervention targeted support for people in need – single agency

Tier 3 – Managed care aimed at people in need of managed care to support achievement of person's own outcomes – Multi disciplinary approach

Tier 4 – Managed Care Complex/Higher needs aimed at people with long term complex needs

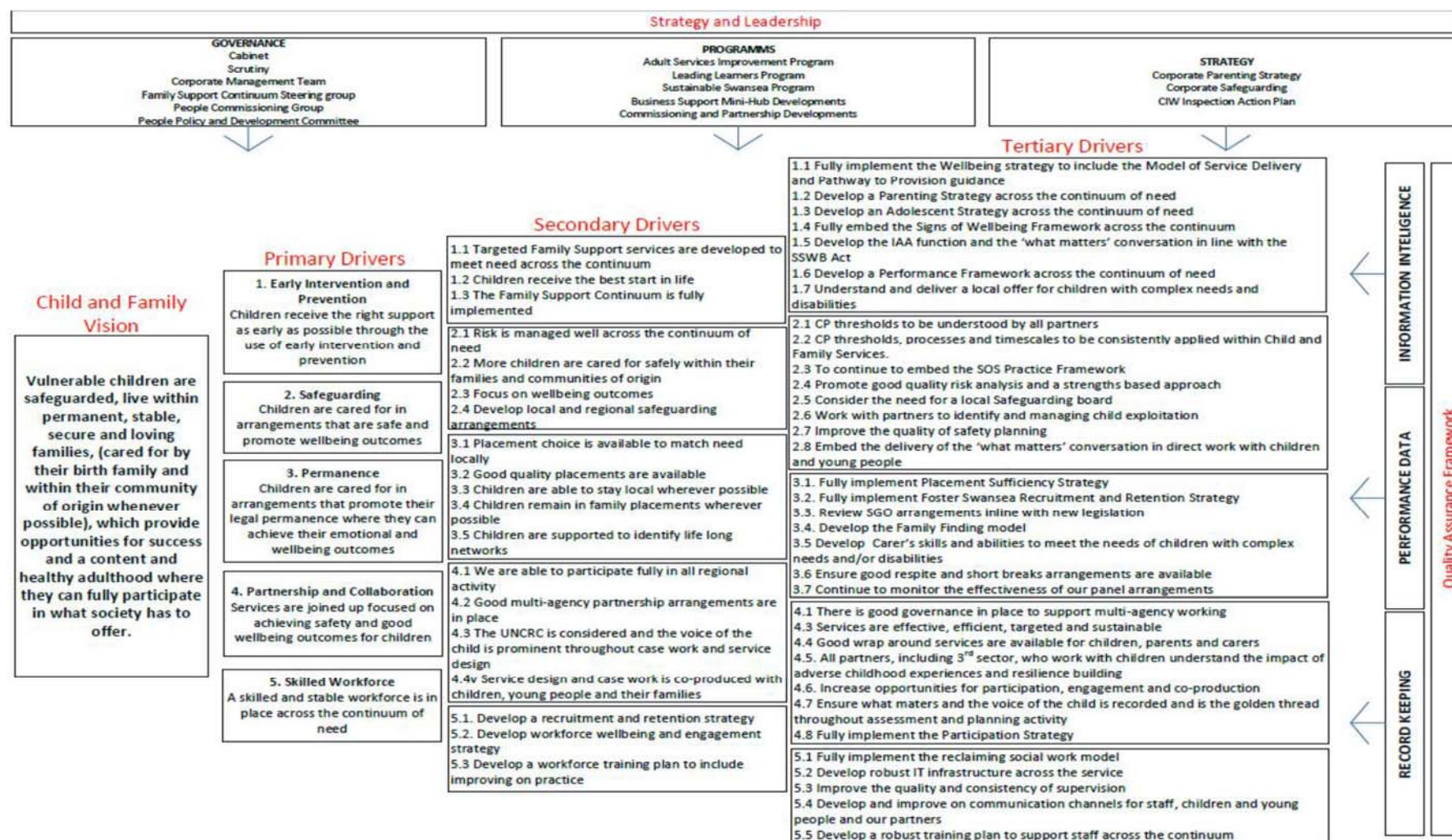
## 2a. Adult Services Improvement Programme

### ADULT SERVICES IMPROVEMENT PROGRAMME (2018 – 2021) PROVIDING AN OVERVIEW OF KEY PROJECTS & PRIORITIES



## 2b. CHILD & FAMILY SERVICES IMPROVEMENT PROGRAMME

### 2bi. Child and Family Services Improvement Programme 2017-2021 (Updated February 2019)



## 2bii) OTHER DRIVERS OF IMPROVEMENT/ SAFE LOOKED AFTER CHILDREN REDUCTION STRATEGY

### Quartenary Drivers

#### Early Intervention and Prevention

- 1.1 Review internal family support services
- 1.2 Review of family support services across the continuum
- 1.3 Develop protocols for managing anti-slavery and victims / those at risk of trafficking
- 1.4 Develop family support services across the continuum of need based on evidence based models of intervention and consistent with the best start in life approach
- 1.5 Develop family support services that are targeted to meet the needs of disabled children across the continuum.
- 1.6 Develop joint commissioning arrangements for family support services via the People Commissioning Group
- 1.7 Implement Integrated IAA Hub following pilot of the new service and embed the 'what matters' conversation
- 1.8 Launch the Wellbeing Strategy and achieve buy-in with partners
- 1.9 Develop single assessment framework across the continuum of need

#### Safeguarding

- 2.1 Fully launch the Pathways to Provision document with partners
- 2.2 PASM is fully understood by all partners, processes are applied and thresholds understood
- 2.3 Effectively identify FGM and honour based violence and ensure consistency of response
- 2.4 Develop the contextual safeguarding approach across partners in Swansea around Child Exploitation
- 2.5 Develop policies and procedures that ensure the service is fully aligned to the Signs of Safety framework
- 2.6 Implement meaningful measures that evidence success
- 2.7 Leadership behaviour mirrors the values of the Signs of Safety framework

#### Permanence

- 3.1 Develop measures to understand the 'reason' for children becoming looked after
- 3.2 Ensure children achieve permanence in a timely way
- 3.3 Develop and deliver the Family Finding Model in Swansea
- 3.4 Develop a training and support plan for all carers

#### Partnership and Collaboration

- 4.1. Improve transition processes for children into Adult Services
- 4.2 Develop Bays+ Service to include vision, partnership and transition
- 4.3 Ensure children's Educational needs are met, including EOTAS
- 4.4. Develop clear pathway into CAMHS
- 4.5 Ensure appropriate housing is available for children and young people
- 4.6 Agree funding formula with health to ensure children's needs, where complex, are addressed
- 4.7 Clarify the role of school nursing provision
- 4.8 Develop regional service and maximise grant opportunities via the regional CYP Board
- 4.9 Develop closer collaboration, with partners including the 3<sup>rd</sup> sector, in respect of commissioning
- 4.10 Ensure children are able to fully engage in their LAC reviews
- 4.11 Ensure information, including plans and minutes, are available to children via a platform that is accessible and in a language that meets need
- 4.12 Provide guidance for children, parents and carers around Swansea's local offer for disability services which is coproduced with stakeholders

#### Skilled Workforce

- 5.1 Develop a consistent approach to practice across the continuum of need based on the SOS and SOW practice framework (see also point 1)
- 5.2 Develop fully robust information sharing protocols (GDPR)
- 5.3 Ensure information is recorded efficiently and accurately
- 5.4 Develop a skilled workforce that are confident in applying the Signs of Safety framework (see also point 5)
- 5.5 Support staff through robust supervision and team / hub meeting templates including implementing the supervision and team meeting policies and templates
- 5.6 Conduct training needs analysis within Child and Family Services and across the continuum of need including with partners
- 5.7 Ensure the training and support plan includes provision for induction, Signs of Safety training and first year in service
- 5.8 Develop leadership and management training and opportunities for all staff
- 5.9 Develop Autism Awareness across the service
- 5.10 Fully implement the redesign of Supported Care planning including phase two priorities and roles and responsibilities