

Cllr Peter Black  
Convener, Adult Services Scrutiny Panel

*Please ask for:* Councillor Mark Child  
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*Our Ref:* MC/HS  
*Your Ref:* ref  
*Date:* 11 November 2019

**BY EMAIL**

Dear Cllr Black,

Thank you for your letter of the 14<sup>th</sup> October 2019. Please find below response to the three questions as required.

**Question 1**



Response to  
questions from relat

**Questions 2**

**Information on the descriptors of independence used and provide a blank tenancy agreement and care support agreement.**



Adult Social Care Assessment and Plan  
Coastal MONTHLY Assured Shorthold LIVING - Individual  
IPA SUPPORTED



**Question 3**

**Further information on the situation with waiting lists**



Schedules  
Llangyfelach and Pe

Yours faithfully

A handwritten signature in black ink, appearing to read 'M Child'.

**Councillor Mark Child**  
**CABINET MEMBER FOR CARE, HEALTH & AGEING WELL**