

Public Document Pack

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To: Cllr Arnold Woolley (Chair)

Councillors: Marion Bateman, Mel Buckley, Tina Claydon, Jean Davies, Carol Ellis, Gladys Healey, Dennis Hutchinson, Dave Mackie, Hilary McGuill, Debbie Owen and Linda Thomas

1 September 2023

Dear Sir/Madam

NOTICE OF HYBRID MEETING
SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE
THURSDAY, 7TH SEPTEMBER, 2023 at 2.00 PM

Yours faithfully

Steven Goodrum
Democratic Services Manager

Please note: Attendance at this meeting is either in person in the Lord Barry Jones Council Chamber, Flintshire County Council, County Hall, Mold, Flintshire or on a virtual basis.

The meeting will be live streamed onto the Council's website. The live streaming will stop when any confidential items are considered. A recording of the meeting will also be available, shortly after the meeting at <https://flintshire.public-i.tv/core/portal/home>

If you have any queries regarding this, please contact a member of the Democratic Services Team on 01352 702345.

A G E N D A

1 APOLOGIES

Purpose: To receive any apologies.

2 DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)

Purpose: To receive any Declarations and advise Members accordingly.

3 MINUTES (Pages 5 - 10)

Purpose: To confirm as a correct record the minutes of the meeting held on 20 July 2023.

4 FORWARD WORK PROGRAMME AND ACTION TRACKING (S&HC OSC) (Pages 11 - 20)

Report of Environment and Social Care Overview & Scrutiny Facilitator - Cabinet Member for Governance and Corporate Services including Health and Safety and Human Resources

Purpose: To consider the Forward Work Programme of the Social & Health Care Overview & Scrutiny Committee and to inform the Committee of progress against actions from previous meetings.

5 COMMENTS, COMPLIMENTS & COMPLAINTS (Pages 21 - 46)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: To consider the Annual Comments, Compliments & Complaints report.

6 C2A UPDATE (TO INC. AROSFA ADDITIONAL PLACEMENTS) (Pages 47 - 54)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: To highlight to elected members of Overview and Scrutiny Committee the work undertaken withing the Child to Adult team (C2A)

7 **STRATEGIC CAPITAL PLAN PRIORITISATION** (Pages 55 - 62)

Report of Chief Officer (Social Services) - Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing

Purpose: To ensure members are supportive of the prioritised schemes which will be taken forward with business Cases submitted to Welsh Government (WG) for consideration for Capital funding.

Please note that there may be a 10 minute adjournment of this meeting if it lasts longer than two hours

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SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE **20 JULY 2023**

Minutes of the meeting of the Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held as a hybrid meeting on Thursday, 20 July 2023

PRESENT: Councillor Hilary McGuill (Vice-Chair in the Chair)

Councillors: Marion Bateman, Mel Buckley, Tina Claydon, Gladys Healey, Dave Mackie and Linda Thomas

APOLOGIES: Councillors: Jean Davies, Carol Ellis, Debbie Owen and Arnold Woolley

CONTRIBUTORS: Councillor Christine Jones (Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing); Chief Officer (Social Services); Senior Manager Children and Workforce; Senior Manager - Integrated Services and Lead Adults; Early Years and Family Support Service Manager and Supporting People Contracts & Compliance Officer.

IN ATTENDANCE: Social Care and Environment Overview & Scrutiny Facilitator and Democratic Services Officer

11. DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)

Councillor Mackie - Item 5 Para 2.2 - Trustee of an After School Club.

12. MINUTES

The minutes of the meeting held on 8 June, 2023 were approved and moved by Councillor Dave Mackie and seconded by Councillor Gladys Healey.

RESOLVED:

That the minutes be approved as a correct record.

13. FORWARD WORK PROGRAMME AND ACTION TRACKING

The Social Care and Environment Overview & Scrutiny Facilitator presented the current Forward Work Programme as set out in the report, adding two additional items - update on the Audit Wales Report into Older Peoples Care Homes - Care Home Commissioning in North Wales and the Domiciliary Care Framework Refresh. She reminded Members that a training session on Corporate Parenting would be held the following day on Zoom which would be recorded. In response to a question from Councillor Gladys Healey, the Senior Manager Children and Workforce gave assurance that the Corporate Parenting Session the following day would be very detailed and would set out what Corporate Parenting was and what the responsibilities of elected Members were and that once the Corporate Parenting Strategy had been revised, that in-person workshops would be held to compliment the training.

Councillor Marion Bateman suggested that some of the young people should meet Councillors as they did a few years ago. The Senior Manager Children and

Workforce confirmed that young people would help to design the workshops and would also attend them when they are held in the Autumn.

The Vice-Chair requested that a date be set with Betsi Cadwaladr University Health Board as the new board had been set up a few months ago.

The recommendations within the report were moved by Councillor Dave Mackie seconded by Councillor Gladys Healey.

RESOLVED:

- (a) That the Forward Work Programme be noted;
- (b) That the Facilitator, in consultation with the Chair of the Committee be authorised to vary the Forward Work Programme between meetings, as the need arises; and
- (c) That the Committee notes the progress made in completing the outstanding actions.

14. CHILDCARE SUFFICIENCY ASSESSMENT (CSA) 2022-26 ANNUAL UPDATE

The Early Years and Family Support Service Manager presented a broader context of the report on how they were meeting the statutory duty for the local authority under the Childcare Act (2006). She explained that their focus was always on the two key elements of the Childcare Sufficiency Assessment which were:-

- Providing sufficient, sustainable, and flexible childcare that was responsive to parents' needs.
- Providing information, advice and assistance relating to childcare to parents, prospective parents and those with parental responsibility or care of a child.

She highlighted key points within the report and gave a wider context within the service and with other key partners.

In response to a question raised by the Vice-Chair concerning postcodes and the access to childcare, the Early Years and Family Support Services Manager explained that they were working hard for that not to be the case but that they were influenced by Welsh Government and had to follow their lead. She said that they were given the number of children that they could take on and if this number was not met then they were able to roll out further.

The Vice-Chair also questioned whether there was provision or crèche facilities for small children to mix with immigrant children while their parents were being taught English. In response, the Early Years and Family Support Service Manager advised that there were facilities at Ty Calon that would allow for childcare to run alongside parenting programmes but would check about the crèche provision; also she was not aware of any demand in relation to small children mixing with immigrant children but would look into it.

In response to the questions raised by Councillor Mackie on the different involvement of organisations, it was decided that due to their complexity that it would be better to wait until the workshop to explain them. In answer to the other question he raised on the word 'disruptor' being used in paragraph 1.12, the Early Years and Family Support Services Manager said that it was in relation to the differences between Early Entitlement and Childcare Offer especially around the fees. She explained that Flintshire made sure that the disruptor was positive and piloted a rate working with Welsh Government to contribute to the Early Entitlement Programme which she advised had now been increased nationally to match the Childcare Offer so that both programmes were now paying the same rate. She added that Flying Start had also been aligned to the same rate.

The Vice-Chair accepted the offer of a workshop and asked that it be added to the Forward Work Programme which was agreed by Members.

Councillor Gladys Healey asked if there was any training for Childminders to help communicate with non-speaking English parents and children. The Early Years and Family Support Services Manager said that she would forward her a copy of the Childminders' curriculum so that she could see what was covered. She also advised that under legislation, equality was covered as part of the childminders registration process and agreed that there should be no language barrier in welcoming parents and children. She advised that they ran language programmes called Eclan, which can be adapted to any language and Makaton as they find that a lot of children sign to each other which parents can also join in with.

The recommendations within the report were moved by Councillor Tina Claydon seconded by Councillor Gladys Healey.

RESOLVED:

- (a) That the Committee supports the effectiveness of the Council's strategic response to securing sufficient, sustainable, and high quality, childcare within the county that is responsive to the needs of children and their families;
- (b) That the Committee supports the on-going work and commitment to the delivery of the Childcare Sufficiency Assessment every five years and the annual Progress Report; and
- (c) That a workshop for Members of the Committee be arranged for a future date to be held at the Westwood Centre, Buckley.

15. COUNCIL PLAN 2022-23 YEAR-END PERFORMANCE

The Chief Officer (Social Services) introduced the report which summarised the performance of areas relevant to Social & Health for 2022-23 at year end Quarter 4. Although some of the areas in the report were outside Social Services, there was an 80% match so he felt it was important to look at the overall sub-priority of the Council Plan most relevant to this portfolio. He was pleased to report an overall good level of progress made in activities across the areas as outlined in 1.04 of the report and that he had spoken to Vicky Clarke in Community & Housing prior to this meeting concerning the red activity as shown in 1.05 of the report, advising Members that she was willing to

provide any areas of assurance to them concerning this. He went on to give an overview of the other areas listed below that were relevant to this Committee:-

- Independent Living
- Safeguarding
- Direct Provision to Support People Closer to Home 2022/23

In relation to a question raised by Councillor McGuill concerning the number of providers of Micro-Carers compared to the number of service users, the Chief Officer (Social Services) advised that the figures in the report were correct as Micro-Carers provide care to more than one person. In response to a further question, the Senior Manager - Integrated Services and Lead Adults advised that a team of people co-ordinated a rolling program for the recruitment of Micro-Carers and by word of mouth around the care sector to encourage people coming forward.

The Senior Manager - Integrated Services and Lead Adults responded to questions raised by Councillor Mackie and explained that the All Wales Pathway for Dementia was part of a wider pathway that was being developed by Flintshire and the Health Board in relation to hospital discharges. Part of this enabled people who had been diagnosed with Dementia to have a comparable service wherever they lived in Wales throughout their journey and that support and advice would adapt as their needs changed. The Chief Officer (Social Services) added that the Health Board had the lead role around the Dementia Strategy and that as suggested, with Member support, they would invite Health Board colleagues to a future meeting. The Vice-Chair requested that it be put on the Forward Work Programme.

Councillor Gladys Healey stated that it was not appropriate for Mental Health to be under the same umbrella as Dementia and Drug Users as there were different criteria of mental health and patients should not be in the same hospital wards. The Chief Officer (Social Services) stated that it was a fair point and that there was room for improvement around mental health services and that Flintshire worked very hard to maintain a strong local authority mental health service. He advised that they still had community based teams in combination with the Health Service which most authorities in North Wales had moved away from. He assured Members that they made every effort to provide a good mental health service but recognised that there was still a long way to go.

Councillor Gladys Healey also asked about the team that helped with housing for people with mental health issues. The Senior Manager - Integrated Services and Lead Adults stated that within Social Services there was an Adults at Risk Team who were very experienced and worked with the Homeless Team within Housing who supported people that did not fit anywhere, which unfortunately some people with mental health issues fell under, to prevent them from being homeless.

The recommendations within the report were moved by Councillor Dave Mackie and seconded by Councillor Gladys Healey.

RESOLVED:

- (a) That the Committee supports the levels of progress and confidence in the achievement of priorities as detailed within the Council Plan 2022/23;

- (b) That the Committee supports overall performance against Council Plan 2022/23 performance indicators/measures; and
- (c) That the Committee is assured by explanations given for those areas of underperformance.

16. TRI FFORDD & GROWING PLACES RE-LOCATION PROJECT (MAES GWERN DEVELOPMENT)

This item was considered to be exempt by virtue of Paragraph(s) 14 of Part 4 of Schedule 12A of the Local Government Act 1972 (as amended). Exclusion of the press and public was moved by Councillor Dave Mackie and seconded by Councillor Gladys Healey.

The Senior Manager - Integrated Services and Lead Adults gave an overview of progress on the Maes Gwern development. Reference was made to the current facilities at Tri Ffordd in Bretton (a day service that provided activities in a horticultural environment for adults who had learning disabilities) and Growing Places in Shotton (which provided a similar service for adults with mental health needs) being unable to expand for service development. The Supporting People Contracts & Compliance Officer gave background to the financial implications.

Following the presentations, officers responded to questions that were raised by Members.

The recommendations within the report were moved by Councillor Gladys Healey and seconded by Councillor Tina Claydon.

RESOLVED:

That the Committee notes the progress made for the Maes Gwern development for the construction of the new development providing the Welsh Government grant is approved.

17. MEMBERS OF THE PRESS IN ATTENDANCE

None.

(The meeting started at 10.00 am and ended at 11.48 am)

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Chair

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SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE

Date of Meeting	Thursday 07 September 2023
Report Subject	Forward Work Programme and Action Tracking
Report Author	Social & Health Care Overview & Scrutiny Facilitator
Type of Report	Operational

EXECUTIVE SUMMARY

Overview & Scrutiny presents a unique opportunity for Members to determine the Forward Work programme of the Committee of which they are Members. By reviewing and prioritising the Forward Work Programme Members are able to ensure it is Member-led and includes the right issues. A copy of the Forward Work Programme is attached at Appendix 1 for Members' consideration which has been updated following the last meeting.

The Committee is asked to consider, and amend where necessary, the Forward Work Programme for the Social & Health Care Overview & Scrutiny Committee.

The report also shows actions arising from previous meetings of the Social & Health Care Overview & Scrutiny Committee and the progress made in completing them. Any outstanding actions will be continued to be reported to the Committee as shown in Appendix 2.

RECOMMENDATION

1	That the Committee considers the draft Forward Work Programme and approve/amend as necessary.
2	That the Facilitator, in consultation with the Chair of the Committee be authorised to vary the Forward Work Programme between meetings, as the need arises.
3	That the Committee notes the progress made in completing the outstanding actions.

REPORT DETAILS

1.00	EXPLAINING THE FORWARD WORK PROGRAMME AND ACTION TRACKING
1.01	Items feed into a Committee's Forward Work Programme from a number of sources. Members can suggest topics for review by Overview & Scrutiny Committees, members of the public can suggest topics, items can be referred by the Cabinet for consultation purposes, or by County Council or Chief Officers. Other possible items are identified from the Cabinet Work Programme and the Improvement Plan.
1.02	<p>In identifying topics for future consideration, it is useful for a 'test of significance' to be applied. This can be achieved by asking a range of questions as follows:</p> <ol style="list-style-type: none">1. Will the review contribute to the Council's priorities and/or objectives?2. Is it an area of major change or risk?3. Are there issues of concern in performance?4. Is there new Government guidance of legislation?5. Is it prompted by the work carried out by Regulators/Internal Audit?6. Is the issue of public or Member concern?
1.03	In previous meetings, requests for information, reports or actions have been made. These have been summarised as action points. Following a meeting of the Corporate Resources Overview & Scrutiny Committee in July 2018, it was recognised that there was a need to formalise such reporting back to Overview & Scrutiny Committees, as 'Matters Arising' was not an item which can feature on an agenda.
1.04	It was suggested that the 'Action tracking' approach be trialled for the Corporate Resources Overview & Scrutiny Committee. Following a successful trial, it was agreed to extend the approach to all Overview & Scrutiny Committees.
1.05	The Action Tracking details including an update on progress is attached at Appendix 2.

2.00	RESOURCE IMPLICATIONS
2.01	None as a result of this report.

3.00	CONSULTATIONS REQUIRED / CARRIED OUT
3.01	In some cases, action owners have been contacted to provide an update on their actions.

4.00	RISK MANAGEMENT
4.01	None as a result of this report.

5.00	APPENDICES
5.01	Appendix 1 – Draft Forward Work Programme Appendix 2 – Action Tracking for the Social & Health Care OSC.

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	Minutes of previous meetings of the Committee as identified in Appendix 2. Contact Officer: Margaret Parry-Jones Overview & Scrutiny Facilitator Telephone: 01352 702427 E-mail: Margaret.parry-jones@flintshire.gov.uk

7.00	GLOSSARY OF TERMS
7.01	Improvement Plan: the document which sets out the annual priorities of the Council. It is a requirement of the Local Government (Wales) Measure 2009 to set Improvement Objectives and publish an Improvement Plan.

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Forward Work Programme

Date of meeting	Subject	Purpose of Report	Scrutiny Focus	Responsible / Contact Officer	Submission Deadline
26 October 23 2pm	Budget – to be confirmed NWRPB Annual Report Social Care Commissioning	To provide a progress report on the work areas being taken forward through the North Wales Regional Partnership Board To receive an update on Audit Wales Report into Older People Care Home Commissioning in North Wales and to receive an oversight of the Domiciliary Care Framework refresh for North Wales	Pre-decision Assurance Assurance	Jane Davies Jane Davies	
7 December 23 2 pm	Looked After Children Placements - Outcome of the review and impact on the Flintshire County Council local policy Budget – to be confirmed	As agreed on 27 April 2023	Assurance	Craig Macleod	
18 January 24 2pm	Council Plan 2023-24 Mid-Year Performance Reporting	To review levels of progress in the achievement of activities and performance levels identified in the Council Plan	Performance Monitoring	Chief Officers	

29 February 24 2pm	Dementia Strategy Joint with BCUHB	To receive an update on the Dementia Strategy led by BCUHB	Assurance	Janet Bellis	
6 June 24 2pm					
27 June 24	Joint meeting with Education, Youth & Culture OSC				
18 July 24 10.00 am	Council Plan 2022-23 Year End Performance				

Workshop to be held at the Westwood Centre Buckley – Autumn

BCUHB to be invited to attend – invitation sent

Regular Items

Month	Item	Purpose of Report	Responsible/Contact Officer
	Safeguarding	To provide Members with statistical information in relation to Safeguarding - & Adults & Children	Chief Officer (Social Services)
May	Educational Attainment of Looked After Children	Education officers offered to share the annual educational attainment report with goes to Education & Youth OSC with this Committee.	Chief Officer (Social Services)
May	Corporate Parenting	Report to Social & Health Care and Education & Youth Overview & Scrutiny.	Chief Officer (Social Services)
Sept	Comments, Compliments and Complaints	To consider the Annual Report	Chief Officer (Social Services)

	Betsi Cadwaladr University Health Board Update	BCUHB are invited to attend on an annual basis – partnership working.	Facilitator
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Action tracking from Social & Health Care OSC September 2023

Item/Date	Discussion	Action	By whom	Status
8 June 23 NEWCES	A discussion took place regarding the possibility of apprentices being taken on by NEWCES.	That the managers look into the possibility of apprentices working within the Team	Jamie Featherstone	Ongoing
20 July 2023 Child Care Sufficiency Assessment	The Committee welcomed the offer of a workshop to be held at the Westwood Centre for Members of the Committee.	Workshop to be arranged in the Autumn	Facilitator	Ongoing
	Childcare Curriculum to be forwarded to Cllr Gladys Healey in response to questions asked.	Information to be provided.	Gail Bennett	Completed
Forward Work Programme	Date to be confirmed with BCUHB.	Invitation to be sent	Facilitator	Invite sent – awaiting response.

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SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	Thursday, 7 th September 2023
Report Subject	Annual report on the Social Services Complaints and Compliments Procedure 2022-23
Cabinet Member	Cabinet Member for Social Services
Report Author	Chief Officer for Social Services
Type of Report	Operational

EXECUTIVE SUMMARY

The Social Services and Wellbeing Act (Wales) 2014 and Social Services Complaints Procedure Regulations 2014, requires Local Authorities to maintain a representations and complaints procedure for social services functions (referred to as the “procedure” from now on). The Welsh Government expects each Local Authority to report annually on its operation of the procedure.

212 compliments were received and recorded during the year across the Service, in recognition of the quality and valued care and support received from Adult Social Care staff.

There was an increase in the number of complaints made about Adult Social Care during the year. Of the 2,659 adults who had a care and support plan on 31st March 2023, 55 individuals complained about the service they received (2%). This compares to 46 complaints during 2021-22 and 45 complaints during 2020-21.

There were 171 compliments about the work of Children’s Services, in recognition of the quality and valued care and support provided by the service. Examples of all compliments are included in appendix 4.

There was an increase in the number of complaints received during the year regarding Children’s Social Services: 59 complaints from the total of 2,087 children and families who received care and support (2%). This compares to 44 complaints during 2021-22 and 48 complaints during 2020-21. Complaints about the Service have been comparable year on year for a number of years previously.

All representations made are scrutinised and used to improve both services as part of a ‘lessons learned’ process.

RECOMMENDATIONS

1	That Members scrutinise the effectiveness of the complaints procedure with lessons being learnt to improve service provision.
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REPORT DETAILS

1.00	EXPLAINING THE ANNUAL REPORT ON THE SOCIAL SERVICES COMPLAINTS AND COMPLIMENTS PROCEDURE 2022-23
1.01	Feedback in the form of compliments and complaints from service users, their family or carers can highlight where services are working well or where services need changing. Flintshire County Council wants to learn from this feedback and use the experiences to improve services for everyone who uses them.
1.02	As part of our day-to-day business staff deal with questions, concerns, problems, dissatisfaction, and general feedback which frequently includes praise. We encourage staff to listen to people, to explain decisions, to clarify where misunderstandings have arisen and to take action to put things right where they can. This approach enables us to provide a responsive and effective service. However, we recognise that there will also be complaints that we need to listen to, address and learn from.
1.03	Our assessment is that Social Services has a robust complaints procedure in place. We welcome complaints and want to ensure service users, carers and families are listened to, their views acted upon, and that receive a timely and open response. Staff and Managers work hard to resolve problems as soon as they arise, and advocacy is actively promoted. As part of our wider approach to quality assurance all complaints are reviewed to bring together information about the overall quality of services, to identify trends, and action required including any lessons learned to avoid similar issues arising again.
1.04	<u>Overview of complaints: Adult Social Care</u>
1.05	<p>There was an increase in the number of complaints made about Adult Social Care during the year. Of the 2,659 people with a care and support plan on 31st March 2023, 55 individuals complained about the service they received (2%). This compares to 46 complaints during 2021-22 and 45 complaints during 2020-21.</p> <p>The year also saw a small increase in the number of complaints escalating to Stage 2. Of the 55 complaints received, 3 complaints were investigated independently at Stage 2. The outcomes of these 3 complaints are reported in appendix 3.</p>

1.06	All complaints received across the Service are scrutinised to see if anything further could have been done to alleviate a complaint being made in the first place: broadly speaking there were no such instances where a complaint could have been avoided. Every effort is made by social work staff and Managers to resolve issues/concerns quickly with service users and families. See Appendix 1 for a summary of complaints grouped into themes.																																												
1.07	Older People Services is the largest part of Adult Social Care and receives the largest number of complaints, taking into account the challenges the Service faces with increased demand. The Disability Service, which includes the Progression Service and the Child to Adult Team) has also seen an increase in the number of complaints. Complaints relate to our involvement as well as delays with support.																																												
1.08	<table border="1" data-bbox="363 741 1139 2074"> <thead> <tr> <th data-bbox="363 741 596 869">Service</th> <th data-bbox="596 741 778 869">2022-23</th> <th data-bbox="778 741 960 869">2021-22</th> <th data-bbox="960 741 1139 869">2020-21</th> </tr> </thead> <tbody> <tr> <td data-bbox="363 869 596 981">Older People Services</td> <td data-bbox="596 869 778 981">16</td> <td data-bbox="778 869 960 981">17</td> <td data-bbox="960 869 1139 981">22</td> </tr> <tr> <td data-bbox="363 981 596 1093">Older People – Provider</td> <td data-bbox="596 981 778 1093">5</td> <td data-bbox="778 981 960 1093">2</td> <td data-bbox="960 981 1139 1093">1</td> </tr> <tr> <td data-bbox="363 1093 596 1227">Learning Disability Service</td> <td data-bbox="596 1093 778 1227">2</td> <td data-bbox="778 1093 960 1227">2</td> <td data-bbox="960 1093 1139 1227">1</td> </tr> <tr> <td data-bbox="363 1227 596 1406">Mental Health and Substance Misuse</td> <td data-bbox="596 1227 778 1406">1</td> <td data-bbox="778 1227 960 1406">0</td> <td data-bbox="960 1227 1139 1406">2</td> </tr> <tr> <td data-bbox="363 1406 596 1518">Disability Service</td> <td data-bbox="596 1406 778 1518">11</td> <td data-bbox="778 1406 960 1518">7</td> <td data-bbox="960 1406 1139 1518">3</td> </tr> <tr> <td data-bbox="363 1518 596 1574">Safeguarding</td> <td data-bbox="596 1518 778 1574">3</td> <td data-bbox="778 1518 960 1574">0</td> <td data-bbox="960 1518 1139 1574">0</td> </tr> <tr> <td data-bbox="363 1574 596 1709">Other (inc. Business Support etc.)</td> <td data-bbox="596 1574 778 1709">5</td> <td data-bbox="778 1574 960 1709">6</td> <td data-bbox="960 1574 1139 1709">5</td> </tr> <tr> <td data-bbox="363 1709 596 1877">Registered Residential Provider</td> <td data-bbox="596 1709 778 1877">4</td> <td data-bbox="778 1709 960 1877">7</td> <td data-bbox="960 1709 1139 1877">6</td> </tr> <tr> <td data-bbox="363 1877 596 2022">Registered Domiciliary Providers</td> <td data-bbox="596 1877 778 2022">4</td> <td data-bbox="778 1877 960 2022">4</td> <td data-bbox="960 1877 1139 2022">3</td> </tr> <tr> <td data-bbox="363 2022 596 2074">Integrated</td> <td data-bbox="596 2022 778 2074">4</td> <td data-bbox="778 2022 960 2074">1</td> <td data-bbox="960 2022 1139 2074">2</td> </tr> </tbody> </table>	Service	2022-23	2021-22	2020-21	Older People Services	16	17	22	Older People – Provider	5	2	1	Learning Disability Service	2	2	1	Mental Health and Substance Misuse	1	0	2	Disability Service	11	7	3	Safeguarding	3	0	0	Other (inc. Business Support etc.)	5	6	5	Registered Residential Provider	4	7	6	Registered Domiciliary Providers	4	4	3	Integrated	4	1	2
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Integrated	4	1	2																																										

		Autism Svc.												
		Total number of complaints	55	46	45									
1.09	<p>Broadly speaking the complaint themes are broken down into the following areas with the number received in brackets).</p> <ul style="list-style-type: none"> • Dignity (1 complaint) • Communication (5 complaints) • Timeliness of our decisions or actions (10 complaints) • Disagreements with our decisions or actions (12 complaints) • Quality of care (8 complaints) • Charges applied or financial issues (8 complaints) • Hospital discharges (1 complaints) • Process issues (6 complaints) • Lack of advice/assistance (6 complaints) <p><i>* Note that often one complaint contains more than one theme</i></p>													
1.10	<p>A range of methods are used to resolve complaints including:</p> <ol style="list-style-type: none"> a. A video conference meeting or telephone conversation with the complainant to discuss their concerns. b. Involving Advocates. c. A written explanation as to the reasons for a decision d. An apology where appropriate e. Action taken to review a decision f. An independent investigation (Stage 2 of the procedure) 													
1.11	<p>The Regulations place a duty to discuss and resolve any complaint within 10 working days and write formally to the complainant confirming the outcomes.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Adult Social Care</th> <th style="text-align: center;">2022-23</th> <th style="text-align: center;">2021-22</th> <th style="text-align: center;">2020-21</th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">Within timescale at Stage 1</td> <td style="text-align: center;">93%</td> <td style="text-align: center;">89%</td> <td style="text-align: center;">89%</td> </tr> </tbody> </table>						Adult Social Care	2022-23	2021-22	2020-21	Within timescale at Stage 1	93%	89%	89%
Adult Social Care	2022-23	2021-22	2020-21											
Within timescale at Stage 1	93%	89%	89%											

1.12	The Service has consistent response times to complaints and always strives to ensure the ten-day timescale is met. There are circumstances, however, when a timely response isn't possible, e.g., if key staff are unavailable, or the complaint is complex and crosses a number of social work teams. The complainant is kept informed of the progress of their complaint and complaints are often responded to or resolved shortly the ten-day timescale.
1.13	<u>Stage 2 (Independent Investigation)</u>
1.14	<p>3 complaints were escalated to Stage 2 of the procedures during 2022-23, compared to 1 complaint during 2021-22 and 4 during 2020-21. See appendix 3 for a summary of the Stage 2 investigations and their outcomes.</p> <p>All complaints that progress to Stage 2 are scrutinised to see if anything further could have been done to resolve the complaint formally at Stage 1.</p>
1.15	<u>Ombudsman</u>
1.16	<p>The Ombudsman made 4 enquiries regarding Adult Social Care cases during 2022-23.</p> <p>2 complaints were not taken further as settlements were agreed by the Council. One settlement resulted in the Social Services Transport Policy being revised. The other settlement resulted in an apology being made that separate carer's assessment were not offered to both parents in a family when only one carer's assessment had been offered. (Both sets of parents are usually offered a carers assessment in their own right).</p> <p>1 complaint was not taken forward as the Ombudsman insisted the matter be considered at Stage 2 (with regard to financial charges applied to an individual).</p> <p>1 enquiry was not taken further by Ombudsman as there was no merit to it and closed.</p>
1.17	<u>Lessons Learned</u>
1.18	<p>Learning from complaints is important and we use the findings and outcomes to inform policy and practice in delivering services (known as the 'lessons learned' process). Examples of action taken on issues raised as a result of complaints to Adult Social Care include:</p> <ul style="list-style-type: none"> • The Transport Policy being revised to include consideration being given as to how service users could be enabled to make financial contributions towards services received, should they choose to do so. • A new Top-Up Panel meeting now meets regularly. A guidance document for Social Workers has been produced detailing the

	information required to support Panel applications so there is consistency with decision making.																															
1.22	<u>Compliments</u>																															
1.23	<p>It is pleasing to report that Adult Social Care received 212 compliments during the year, showing the high regard in which care and support was delivered during the ongoing challenging and demanding time.</p> <p>Compliments are received in the form of cards, letters or emails from service users or their families when they recognise staff have done “over and above” what is expected. See Appendix 4 for a summary of some of the compliments received across service areas.</p>																															
1.24	<u>Overview of Complaints: Children’s Social Services</u>																															
1.25	<p>The 59 complaints received about the Service this year has been the most received in a number of years.</p> <p>The increase should be considered against the number of children and families (2,087) who received care and support from the Service. See appendix 2 for further details about these complaints.</p> <p>2 complaints were made by young people looked after, supported by their Advocates, and they are detailed in appendix 2.</p> <p>1 complaint was made by a care leaver which we resolved by meeting with them and their foster carer.</p> <p>Again, it is pleasing to report there were 171 compliments about the work of Children’s Services.</p>																															
1.26	<table border="1"> <thead> <tr> <th>Service</th> <th>2022-23</th> <th>2021-22</th> <th>2020-21</th> </tr> </thead> <tbody> <tr> <td>Protection And Support, And Resources</td> <td>46</td> <td>30</td> <td>35</td> </tr> <tr> <td>Fostering Service</td> <td>6</td> <td>3</td> <td>0</td> </tr> <tr> <td>Child to Adult Team</td> <td>5</td> <td>8</td> <td>11</td> </tr> <tr> <td>Safeguarding Unit</td> <td>0</td> <td>1</td> <td>0</td> </tr> <tr> <td>Other</td> <td>2</td> <td>2</td> <td>2</td> </tr> <tr> <td>Total Number of Complaints</td> <td>59</td> <td>44</td> <td>48</td> </tr> </tbody> </table>				Service	2022-23	2021-22	2020-21	Protection And Support, And Resources	46	30	35	Fostering Service	6	3	0	Child to Adult Team	5	8	11	Safeguarding Unit	0	1	0	Other	2	2	2	Total Number of Complaints	59	44	48
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	<p>As explained earlier, a range of methods are used to resolve complaints. These include:</p> <ol style="list-style-type: none"> A meeting or conversation with the complainant to discuss their concerns Involving Advocates. A written explanation as to the reasons for a decision An apology where appropriate Action taken to review a decision Independent investigation (Stage 2 of the procedure) 								
	<p>Broadly speaking the complaint themes are broken down into the following areas (with the number received in brackets).</p> <ul style="list-style-type: none"> Communication (15 complaints) Disagreements with our decisions or actions (19 complaints) Contact (8 complaints) Process issues (14 complaints) Lack of advice/assistance (10 complaints) Staff (5 complaints) Placement/fostering issues (7 complaints) <p><i>* Note that often one complaint contains more than one theme</i></p>								
1.27	<p>Of the 59 Stage 1 complaints received, 52 out of 59 complaints received were responded to within timescale (88%). The 7 late complaints were responded shortly outside timescale.</p> <table border="1"> <thead> <tr> <th>Social Services for Children</th> <th>2022-23</th> <th>2021-22</th> <th>2020-21</th> </tr> </thead> <tbody> <tr> <td>Within timescale at Stage 1</td> <td>88%</td> <td>86%</td> <td>90%</td> </tr> </tbody> </table>	Social Services for Children	2022-23	2021-22	2020-21	Within timescale at Stage 1	88%	86%	90%
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1.28	<u>Stage 2 (Independent Investigation)</u>								
1.29	<p>Although there has been an increase in Stage 1 complaints, the number of Stage 2 complaints remain comparable to previous years. 3 complaints progressed to Stage 2 during 2021-22, 3 progressed during 2021-22 and 5 progressed during 2020-21. A summary of these Stage 2 complaints is described in Appendix 3.</p>								
1.30	<u>Ombudsman</u>								

1.31	<p>7 enquiries were made by the Ombudsman's office during the year (the same as last year).</p> <p>6 complaints were not taken further as there was no merit to proceed further.</p> <p>1 complaint was resolved by way of settlement. The complaints procedure will be revised to consider the views of children/young people in any complaint made by their parent/carer.</p>
1.32	<u>Lessons Learned</u>
1.33	<p>Examples of action taken to further improve service delivery after complaints are made:</p> <ul style="list-style-type: none"> • Revised existing training to ensure incoming calls and texts to staff are recorded as per the Recording Policy. • Revised the Fostering Handbook so there is clarity between clothing including as part of the fostering allowance and the Education Department's uniform grant. • Advised social work staff that when visiting family homes, they need to be mindful of what they say before the door opens as 'Ring' doorbells and other devices can pick up conversations, some devices from an extensive range. •
1.34	<u>Compliments</u>
1.35	<p>Children's Social Services recorded 171 compliments this year. The compliments highlighted the good work of staff during another challenging and demanding year. Compliments are made by families, the Courts and other public bodies. They were in the form of cards, emails, texts or letters. See appendix 4 for a summary of some of the messages received.</p>

2.00	RESOURCE IMPLICATIONS
2.01	<p>The Regulations state all Stage 2 complaints involving both Adult and Children's Social Services are commissioned to Independent Investigators (and an Independent Person for Children's Social Services as set out in the Children Act, 1989). The cost of 2022-23 was £11,885.55, an increase that reflects Investigators' rates increasing.</p> <p>The cost for Stage 2 complaints in 2021-22 was £8,794.25 and the year before in 2020-21 it was £12,552.25.</p>

3.00	CONSULTATIONS REQUIRED / CARRIED OUT
3.01	None undertaken.

4.00	RISK MANAGEMENT
4.01	No risks identified.

5.00	APPENDICES
5.01	Appendix 1: Summary of complaints categorised into themes (Adult Social Care)
5.02	Appendix 2: Summary of complaints categorised into themes (Children's Social Services)
5.03	Appendix 3: Summary of Stage 2 independent complaint investigations and their outcomes (both Children and Adult Social Services)
5.04	Appendix 4: Summary of compliments received across service areas (both Children and Adult Social Services).

6.00	CONTACT OFFICER DETAILS
6.01	<p>'A guide to handling complaints and representations by Local Authority Social Services', August 2014 (Welsh Government).</p> <p>Contact Officer: Ian Maclaren, Complaints Officer for Social Services</p> <p>Telephone: 01352 702623</p> <p>E-mail: ian.maclaren@flintshire.gov.uk</p>

7.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
7.01	None

8.00	GLOSSARY OF TERMS
8.01	Stage 2 complaint: the Regulations stipulate that where a complainant remains dissatisfied with their response from the Council, consideration must be given to progressing the complaint further in the statutory procedure, i.e. to Stage 2. An independent investigation is commissioned using a shared North Wales 'pool' of retired social care Officers.

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Adult Social Care

Summary of complaints by theme (2022-23)

Complaints relating to dignity

X complained about the care his mother (Y) received in the last few weeks of her life. Y was not given fluids by staff in her care home following advice from District Nurses.

The home advised Y came to the home on 'Nil by Mouth' but on the nursing assessment it also stated she was able to have fluids. Y was having small amounts of fluids when she first came back to the home. This was then withdrawn due to the District Nurses coming in to see Y daily and informing the home not to offer fluids and diet as she is not able to swallow and it not being safe to do so. Mouth care was then given to Y on regular intervals where her mouth was moistened as per palliative care guidance.

Complaints relating to communication

X complained we had ceased using a convene with her father (Y) after several years without communicating this to her and we still hadn't identified a provider to help her as a carer.

We explained we were now experiencing difficulties with the convene, so specialist training was arranged to help resolve. District Nurses advised in the meantime not to use the convene given the difficulties. We trialed not using the convene for a week whilst alternatives were explored and we involved Y in these discussions. In terms of sourcing a package of care we are working hard to identify a provider at the time.

X complained to her provider she was not able to communicate with her case worker via British Sign Language (B.S.L.) at her normal speed and they sometimes don't understand her. The provider is slow to react to important situations. The provider wouldn't translate on daughter's behalf with her employer.

The provider requires a minimum of B.S.L. Level 2 and the caseworker is qualified to Level 6 which exceeds the provider's requirement for the role. People whose first language is B.S.L. are able to contact the provider in a number of ways, email and text local being two options. The provider explained they are not an emergency service. Public bodies as part of the Disability Act should provide qualified interpreters to support their service users. If an additional family member requires support the provider would communicate directly with this family member to complete an individual referral on their behalf.

Complaints relating to timeliness of our decisions or actions

X complained she and family had waited over 5 months for a referral to be actioned on behalf of her father (Y).

We explained the initial referral was followed up in a timely manner but Y was able to complete a large number of tasks himself, so alternative reablement options were discussed instead. Since this time Y's condition has deteriorated so a Social Worker was allocated.

X complained of a 4 week gap between their brother (Y) being discharged from hospital and our making contact about a package of care to support Y at home

Y was referred to the Service and allocated a Social Worker a month later. The delay was unfortunately due to lack of capacity within the Service for which we apologised for. We visited Y once the case was allocated and X was also present during the visit (which was planned before the complaint was made) and the case has moved positively forward.

Complaints relating to disagreements with our decisions or actions

Parents disagreed with our view that we were trying to engage with them but we weren't listening to their or their son's (Y) views his needs.

A review meeting was held and a number of actions proposed. However, parents disengaged and asked to withdraw Y from our Services, which has concerned all professionals involved with the family as they were doing so with her agencies. Parents have since re-engaged and everyone involved are promoting Y's independence.

X complained about being 'badly supported' and our making threats about involving the Safeguarding Team. X no longer wanted the involvement of services and asked that her adult son Y be transferred to another social work team.

X had displayed unprofessional behaviour during a recent meeting and Y had also asked her to be quiet so he could share his views. X has been critical of ourselves but she has not given us the opportunity to work productively or support Y in any way without placing a barrier to this. With regard to the 'threat' of involving the Safeguarding Team, this was in the context of X not allowing us to support Y with the Pain Management Service and it was suggested the matter could be a safeguarding issue as X was preventing Y from accessing the correct support.

Complaints relating to charges applied or financial issues

X complained their adult son (Y) was being financially disadvantaged and we weren't providing the necessary advice or support to him.

X had no consent to act on Y's behalf. This has been a difficult case to manage over recent years. However, we met with Y and his Advocate, assessed his ability to manage his own finances, and advised the D.W.P. we were relinquishing our role as Y's Appointee as he could manage his own finances.

X complained her adult son Y had been removed from her care for his safety, yet Y still has to pay for his care and support costs.

We reminded Y is in a placement ordered by the Court of Protection. Y is supported by ourselves to meet with X and family as often as they would like. Further Court Hearings are planned. Charges are in accordance with the Charging Policy, and they are applied consistently to every person supported. The amount being charged is accurate and calculated using the accepted formula.

Complaints relating to hospital discharges

X complained about the advice he received outside of office hours in terms of supporting his parents, which included him needing to step in and support them. X wasn't coping with the present situation and nobody was helping.

We advised we had spent a great deal of time supporting X's parents during this period. It is not uncommon for us in emergency situations to kindly request family in the short term to assist in supervising an elderly family member, in conjunction with liaising with carers. At the time the complaint was made N.H.S. Wales called on family members to assist in getting loved ones home from hospital as there was currently an unprecedented demand across the whole health and care system in North Wales.

Complaints relating to the quality of care from a home or carer

X complained about a number of things including: weight loss, inadequate meals, mixed messages re. father's (Y) infection and Y going missing from the home for an hour and a half without X being told.

The home agreed Y had lost weight which they were monitoring and could also be put down to Y being unsettled since admission, as well as a chest infection. Staff sit with Y at mealtimes to prompt him to eat and a referral had already been sent re. a Dietician. The home disagreed about X's views about their food and they have observed Y likes a little but often. The absconding incident had been subject to a safeguarding investigation and safeguards had been implemented to ensure there is no repeat.

X complained on the day their mother (Y) was admitted to hospital following an accident. X wasn't informed of Y's admission to hospital by the home concerned. Y wasn't taken to hospital by staff and they instead called a family member. No one from the home travelled with Y to hospital and the home didn't realise mum had also hurt her back believing it was just a wrist injury.

The home explained Y suffered an unwitnessed fall. She had banged her head and her hand was hurting but she did not want to go to hospital. X has capacity to make her own decisions and therefore the home had to respect and support her with that decision. The home continued to monitor Y and later called 111 with their concerns and were advised to take her to hospital for an x-ray. It was Y who called another family member and they agreed to take her to hospital. The home advised Y to contact them if she required any support when she arrived at hospital. All staff in the home who were on duty were informed of Y's admission to hospital, but the home apologised if whoever answered X's call did not communicate this to her at the time.

Complaints relating to a lack of support

X complained her daughter's (Y) 1:2:1 care and support was being cut short or cancelled at short notice, meaning she had to cover the staff member not able to cover.

The provider had reported to ourselves they were experiencing staffing problems as a rival provider was poaching staff and packages of care. The provider advised a new member of staff has been recruited that should hopefully alleviate recent experiences which Y was satisfied with as both X and Y want to continue with the provider. Problems did persist for a short while afterwards but have since been resolved.

X raised concerns about the lack of services and support their adult son (Y) was receiving.

In terms of support from the North Wales Integrated Autism Service, Y would not be eligible for a service from them as he has complex mental health needs that need an appropriate response on a therapeutic level, which the Service are unable to support. Instead the Community Mental Health Team CMHT have become involved and explained to Y when he is ready to engage again with services, Y can be referred back for assessment if he wishes so. This applies to pursuing any social opportunities he may wish to take up with the Social Links Team.

Complaints relating to process issues

X was under the impression following conversations with ourselves that he would be included in any reports regarding his sister (Y) produced by the R.P.R. (Relevant Person's Representative), which is a key reason why he chose not to be R.P.R. for his sister in the Deprivation of Liberty Safeguards (D.o.L.S.) process.

Our records indicated we had spoken at length with X about the D.o.L.S. process and the role of R.P.R., and we suggested a paid R.P.R. purely due to his X's geographical location as he felt unable to commit to monthly visits due to his work (X lived some distance away). X had agreed to see how this arrangement progressed and review again in 12 months. At no point did we say he would receive the R.P.R. report as it remains independent as the person's voice so there must have been a misunderstanding. We offered to meet with him to go through how he could act as R.P.R. in future.

X complained she had been accused of 'getting random people off the street' to care for her adult son (Y) and that it wasn't her job to recruit people via the direct payment.

We reminded X of our role in terms of supporting people with direct payments. During a home visit concerns were raised about a recent P.A. who was recruited by X without support from the Direct Payments Team. This P.A. had been recruited without necessary checks, did not possess a current D.B.S. certificate and had not been issued with a contract of employment. Concerns have been raised over a period of time around X's understanding of responsibilities and her ability to act as a responsible employer, even with support. During the visit these concerns were again highlighted to X and we continue to monitor the arrangement.

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Children's Social Services

Summary of complaints by theme (2022-23)

Complaints relating to contact arrangements

X complained about why contact had been changed to supervised from unsupervised without a reason, as well as other issues with contact arrangements in general.

We have been clear previously there will be no changes to contact with X's son until the ongoing adoption process regarding X's daughter has ended, and X has some time to adjust, acknowledging their feelings and emotions. We have concerns about X's presentation since the final decision was made in respect of daughter, with X being more emotional and aggressive which raises concerns further. X hasn't completed some pieces of work that would help evidence she is working with professionals to develop herself and this furthers our own concerns. We reminded X of the significant emotional harm her anger posed meaning we had to protect their children. No changes will be made to contact with X's son and we clearly set out our expectations for X to work with us in terms of progression.

Complaints relating to communication

X complained we had shared incorrect information with Health about previous domestic abuse allegations and that X hadn't been informed of the outcome of recent S47 enquiries.

We had not given incorrect information to Health about previous domestic violence incidents as we received referrals from Health quoting such information. This will be evidenced when X's Individual Rights Request is processed and relevant records shared. X has previously been informed but reminded of the outcome of the Section 47 child protection investigation. The claims in the referrals were unsubstantiated and no further action required.

Complaints relating to a lack of advice or support

X complained their daughter's case had been allocated to a Children's Services Assistant (C.S.A.) and not a Social Worker. X also complained about not being offered respite and a lack of overall progress with their daughter's case. X wanted to access a local venue for daughter's support.

We explained to X her daughter does not require the support of a designated Social Worker as she is a settled young woman who remains fully supported at home. There

are no immediate concerns in relation to the care daughter receives. The C.S.A. is professional and knowledgeable with experience of working with young people with a learning disability. Respite facilities are difficult to source currently both within Flintshire and nationally. We offered a family group meeting where we can look at options within the external family for support. With regard to daughter attending a local venue via the direct payment, then a referral to Panel will be made. Additionally a three week package of support has been agreed by for the Summer of Fun scheme at Theatre Clwyd.

Complaints relating to disagreements with our decisions or actions

X complained about the small increase in fostering allowances that don't cover daily living costs for the children they look after, and the delay in the increases being implemented.

We acknowledged the financial pressures everyone is facing with growing bills and costs of living. The financial and associated support is considered to be an exceptional package and one in which we have responded over the last few years from house adaptations, vehicle ownership with petrol costs, and additional leisure/ social fees combined with the relief in council tax fee of 50%. The additional fees received is also very generous and reflects a salary which was part of X's original request. The level of allowance is set by Welsh Government and will be reviewed in due course. It is not within our discretion to alter this allowance, but we can provide discrete services to look at income and expenditure and general fostering household budget commitments.

Complaints relating to process

X complained their daughter is currently on the child protection register and should be visited every 10 days in another Local Authority as per the child protection plan. This has not been adhered to by ourselves and instead we recently sent a Social Worker from the Local Authority where daughter resides to visit. X wants the case transferred to the Local Authority where their daughter resides.

We acknowledged X's concerns about the lack of face to face visits, which has been discussed with the allocated Social Worker. As the plan is for the case to transfer to another Local Authority following the private proceedings, we requested that the Local Authority where daughter lives undertake a visit. There was also an unsuccessful attempt a visit the placement which we have addressed and apologised for. We have offered mediation between both sets of parents to discuss the difficulties and to move forwards. The Social Worker will continue with the case and their statutory visits in the meantime.

Complaints relating to fostering

X complained about the lack of communication and consultation during their transition from foster carers to 'When I'm Ready' carer, and the level of confusion caused.

We sought to begin 'When I'm Ready' work with X when the young person they look after reached the age of 16 years a couple of years ago, but X struggled to progress this as they were resistant to engage. We provided training on 'When I'm Training'. Information was also available during Looked After Reviews and within the foster carer handbook. 'When I'm Ready' means payments are only made when the young person returns home from university etc. but we need to be notified in advance. We reminded X they had received some payments post-18 prior to the young person starting university. We can consider backdated payments, but we will need the dates and clear evidence of such returns home from university.

Complaints made by young people

X complained they weren't placed in a residential home at an earlier age. X was placed with several different carers instead. Following a recent holiday abroad to visit family their paperwork returning to the U.K. wasn't correct meaning X had to stay outside the country for several weeks without a support network, and this impacted upon their relationship with their father.

We explained that placing young people in residential care is a last resort and we believed at the time a foster placement was most appropriate for her and would thrive living in a family unit. X's parents also declined long term foster care so short term foster care was considered the best option. It is true that X has been placed in care multiple times and this would never have been our intention at the time, but the changes happened because of a range of factors including foster carers having a personal emergency, X not being happy or respecting the arrangements put in place by the foster carers, and unfortunate breakdowns in relationships. X's mother advised us we had the correct paperwork for X and we trusted her as it had been used previously and worked. X's mother didn't share the paperwork with us until the day before travelling. We believe X had a good support network whilst on holiday and visiting their family.

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Summary of independent investigations and their outcomes at Stage 2

Adult Social Care

X complained we had failed to meet their adult son's care and support needs, and X's own needs as carers.

An independent investigation upheld both complaints based on the records held and reached a conclusion with the information that was recorded. This was because we did not update our records with regard to actions/discussions as and when they were happening. Work was happening with adult son's accommodation at various intervals but records weren't updated and didn't reflect this. The reasons as to why certain accommodation was no longer an option will therefore have been clearer to X. We apologised for our shortcomings and any unnecessary distress this may have caused, and revisited the Recording Policy with staff concerned.

X complained we were refusing to fund transport for their adult disabled son to his place of work every day of the working week.

An independent investigation found the Transport Policy did not make provisions for such an arrangement but that we had advised X previously about support with finding another Personal Assistant who would be willing to drive to and from the work placement. Instead we settled the complaint by reviewing the existing Transport Policy so service users could be enabled to make financial contributions towards services received, should they choose to do so. The Transport Policy was revised to include such considerations.

Dodd family complaint. X complained about the charges applied to their father's residential care. X hadn't agreed to the home where father was placed and charges hadn't been properly communicated to them.

The complaint was not upheld.

Children's Social Services

X complained about our involvement, we were biased against X compared to their ex-partner, we had contributed to a breakdown in communication between X and their ex-partner, our inappropriate questioning of their children following an incident and a delay in referring the family for respite.

An independent investigation did not uphold six of the seven elements to this complaint. There was a delay in making a referral for respite, however, the children were too young to access the facility anyway.

X complained they had been placed in a number of placements that were either unregulated, unstaffed with no support or in temporary accommodation where their support and emotional needs were not met. Placements were made by crisis reaction.

An independent investigation partially upheld X's complaint on the basis they supported X's assessment of the placements (i.e. they were either unregulated or were temporary without support), but X contributed to situations which resulted in many of the placement breakdowns and moves. Everyone involved in X's case did their best to provide them with some permanency and normality.

X complained about our involvement during a Section 47 child protection investigation and through legal proceedings.

An independent investigation upheld elements of the complaint involving the lack of transition between workers following handovers of the case, supervision not being strictly adhered to and parents not being assessed separately. We agreed to take the recommendations forward.

Examples of compliments received during 2022-23

Compliments received from service users, their families and other public bodies including Health and the Court Services are shared with all staff via email and a selection are included in the staff bulletin.

Adult Social Services:

Single Point of Access: “Thank you so much for all your help yesterday and this hospital update. It’s so kind and you’ve done so much to help, thank you for the bottom of my heart!”

Older People Localities: “Can I please take this opportunity to thank for everything that you have done for us as a family. I cannot express how much I felt supported from you both. I know I was really fussy about where (dad) was placed but I know you will understand that you just want the best for your family member. The pandemic has been such a challenge, but my experience is that the service from social services and the package of care that you sourced was second to none despite the difficult world we’ve been in”.

Hospital Social Work Teams: “I just wanted to say thank you for everything you have done and are doing. You say you haven’t done much, but you really have, and your kindness means so much to all the family who just adore their Mum and want the best for her, and you have shown so much kindness and care throughout”.

O.T.: “I wanted to personally thank you for everything you have done for me and my husband, you are one of the best, I really can’t thank you enough. I’m grateful for everything you did, you went overboard to help us. It really means the world that we can at last have some quality of life”.

Reviewing Team: “Many thanks for the useful informative time you spent with us today. Also for your empathy, giving us information to make us think ‘outside the box’ in managing X’s care that we appreciate so much”.

Older People Provider Service:

Llys Gwenffrwd: “Thank you so much for what you all do for my mum. You are all diamonds!”

Llys Raddington: ““Thank you all so very much for your care and kindness shown towards my nan. We are so grateful to each and every one of you for looking after her”.

Plas Yr Ywen: “Thank you all for the care, thoughtfulness and kindness shown to mum on moving day. A potentially anxious day was made so much smoother by all the attention to mum had on her arrival”.

Llys Eleanor: "Thank you for the care and affection you showed to my dad. Thank you for enabling me to see him as a fun loving, mischief maker in his later years of life. The importance your time and considerations make each day, supporting those folks who have chosen Llys Eleanor to live".

Marleyfield home: "Thank you for the loving care and attention you gave to our mum. She was very happy at Marleyfield and we are very grateful to you all".

Croes Atti: "I cannot thank each and every one of you enough for all the love, care and support you gave my mum and myself. Diolch!".

Llys Jasmine: "How impressive and dedicated your caring team are. All of them have made my life here much improved. Also my health has much improved thanks to the daily happiness and dedication shown to us. Their presence fills our day with joy and laughter as they work as a team and a very happy bunch of girls. They provide us with much laughter and music each and every day".

Ty Trefynnon: "Just to tell you how wonderful you have been keeping me in touch with my mum. I can't thank you enough".

Homecare/Reablement: "'I'd like to extend an enormous thank you to you for your time, patience and care in dealing with X. On arrival, you were faced with a most challenging situation which I can imagine would not have been dealt with by many as professionally as you have. What you had to deal with and the actions you took today demonstrates your skill, understanding and dedication to your job. You have gone above and beyond your duties... and would be lost without you."

Learning Disability Community Team: "X went on to express his gratitude for the assistance and support provided by your team, stating they were 'stuck between a rock and a hard place' but you went over and above to support Y".

Learning Disability Provider Service: "X always had such positive things to say about you and hearing how happy Y has been in STC. He said it sounds like a real family feel there and he was so grateful to see how much Y enjoyed it. I wasn't sure if you'd ever heard that from X, but the work you and your team put in had allowed X to feel settled and content about Y in his last few years. The biggest of thanks to you all for that!".

Child to Adult Team: "Can I just say a massive thank you, you have really made a difference to X. I know that X is so proud of the young man he has turned into, and a lot of that is down to you.... X is thriving....you have shown the way with a limited amount of fuss and made it really easy for me and and at times it was really difficult especially managing X's needs. He has finally started to shine"

Physical Disability Service: "I would like to thank you as we had a referral for a lady in Holywell, we needed social worker advice and support and you were so approachable and supportive. This was joint working at its best with the patient/client at the centre. I look forward to working with you again".

Mental Health and Substance Team: “You have done some amazing work with X around a long awaited and difficult home move. It will not be news to you but your knowledge, commitment and tenacity are amazing. I am very grateful for her support with X and I am sure X would be if they truly understood what has gone on in the background to make her safe”.

Integrated Autism Service: “We have recently been through the assessment process with your team and found your support and guidance, what is a difficult and highly emotional situation, so much easier. You showed interest in our family. I knew from that moment you were good listeners, really empathetic and genuine people who wished to help families like ours to understand ourselves better. We could not speak more highly of our experience with IAS”.

N.E.W.C.E.S.: “Your drivers delivered some equipment to parents today and they wanted to pass on their thanks. They said they were lovely and polite. They were extremely helpful”.

Safeguarding: “I’d like to thank you very much for giving me such a thorough account of how X is. These past few months have been extremely challenging and, due to the pandemic, I’ve not been able to see X as often as I would like, it is very reassuring that you have completed such a thorough assessment, it is very much appreciated and has put my mind at rest”.

Financial Assessment and Charging Team: “I did not realise the wealth of information that you and your colleagues have accumulated to help us looking after our loved ones here in Flintshire. We are so fortunate. Thank you so much for the info and always ready to help”.

Contracts and Commissioning Team: “Thank you all for all the support this year. We are so grateful for everything that you have done for us. Rest assure, we brag at every opportunity on how great the FCC team is, and what social care should mean. You all are just the best”.

Direct Payments Team: “Your ladies have been so helpful at all times. Flintshire leads the way and your staff cannot be praised enough in mentoring, helping with budgets, employment contracts etc. and setting up a portal so we can access Carers looking for employment. I am most grateful for all your help”.

Children’s Social Services:

Protection and Support, and Resources: “X has undertaken some fantastic preventative work with both parents and managed to get them both on board with accessing the relevant support services. She has gone above and beyond at times to make sure that both parents have been able to attend important meetings etc. X has been successful in achieving a really positive outcome for this family”.

“It is practically impossible to verbalise the wonderful job X has done with this... She worked with the family in (another country) to ensure they completed the correct COVID documentation... The situation at the airport was tense. X stayed calm while

supporting an upset Y. X liaised with the (foreign) all within a short period of time. X did an absolutely wonderful job in the unexpected situation that was presented. So grateful that she was the person who was providing support to Y on her travels.”

“I just want to say thank you for all the advice you have given me from the start because everything you have said has turned out to be right so far. The advice you gave me has guided me all through this and reminded me exactly what and who I'm fighting for. I know I gave you a hard time at the start but I've realised you were the only one being honest with me. I just wanted to say thank you anyway for everything”.

Safeguarding: “Thank you to your staff for their professionalism and support. We had a particularly difficult situation and you handled a challenging situation really supportively and professionally. With a moment’s notice your staff rushed around and stepped in at the last moment to ensure the young person was released the day after. Again you were very helpful and professional.

Early Years and Family Support, and Family Information Service

“Thanks for your time. We will all work together. You are an inspiration for the services you have developed/supported”.

“Thank you for all of the support you have and continue to give us, especially during the COVID pandemic. We really are grateful for all you do to help and support us”.



SOCIAL SERVICES OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	7 th September, 2023
Report Subject	Child to Adult team (C2A) and the provision of respite to children with disabilities at Arosfa, Mold, provided by Action for Children.
Cabinet Member	Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing
Report Author	Chief Officer: Social Services
Type of Report	Operational report

EXECUTIVE SUMMARY

The Child to Adult team (C2A) work with children and young people with disabilities (0-25 years) and their families.

This report seeks to provide a historic perspective, managerial information, and a sample of the work they undertake.

Part of this work is the provision of respite to families provided through Action For Children at Arosfa in Mold. Information will be provided on this service.

RECOMMENDATIONS

1	That members are informed about the work undertaken within C2A team.
2	Members are informed about the provision of respite based at Arosfa in Mold.

REPORT DETAILS

1.00	Explaining the Child to Adult team (C2A) report
1.01	<p>Historic perspective</p> <p>C2A team was previously located within Children's Services but was transferred to Adult Services in 2008 to improve the experience for older children, aged 14-25 years.</p> <p>Strong links exist between the team and Children's Service to ensure best practice in all areas of work.</p> <p>The team underwent a detailed service review approx. 5 years ago with changes made to ensure the team provide the best responses to the needs of almost 200 children with disabilities and their families.</p> <p>The current average caseload for team members is 15 children/young people, but the team also support the siblings within the family, some with significant needs themselves.</p>
1.02	<p>Team structure</p> <p>Located within the Disability Services, the team has a dedicated Team Manager, along with two Deputy Team Managers and two Senior Social Workers. The team comprise of Social Workers, Children's Services Assistants, and Paediatric Occupational Therapists. The team is formed of 15 people. C2A also receive excellent administrative support from a dedicated officer.</p> <p>Following feedback from the team during the review, we now operate two distinct sub teams, one supporting children under 14 years, and one supporting young people aged 14 -25 years. This enables each sub team to develop specialism in aspects of work relating to the age of the child and the experiences the family might be having. We do have flexibility to retain the same social worker if it is in the best interest of the young person.</p>
1.03	<p>How the team support children and families throughout their lives</p> <p>The team support children and young people through every circumstance in their lives and usually have a long terms relationship with the family. Life events would include:</p>
1.04	<p>Small children.</p> <p>C2A might provide practical and emotional support to parents if their baby or young child is diagnosed with a disability. Some families feel loss/grief/ are overwhelmed/ struggle with day to day living. The team would support the parents and their other children. The Occupational Therapist can also help with practical matters as the child grows, such as bathing and seating.</p>
1.05	<p>Adolescence</p> <p>As the child grows, the family might need support with the behaviours of the child, the child wanting friends and activities, additional support if parents are working or struggling to cope. We use Direct Payments creatively to support children and their families and this can take the form of Personal Assistant support or equipment. Families comment that this</p>

	give them flexibility to suit their circumstances and it is becoming more widely used amongst children and families.
1.06	<p>Teenagers</p> <p>As young people grow up, they might need support when leaving school, wanting to go on to college, moving to live away from the family home, employment. For parents who struggle with children who have complex needs, they sometimes feel unable to carry on and the young person might need to live elsewhere. C2A would assist in finding appropriate placements, and the legal aspect of placing children away from parents/carers.</p>
1.07	<p>Statutory/legal processes.</p> <p>The team also undertakes work relating to Statutory responsibilities and legislative requirements. These would include Safeguarding, applications to Court of Protection, Fostering, Adoption. C2A team support the family unit in these instances.</p>
1.08	<p>Provision of respite for families.</p> <p>Respite can be provided using various options, designed to suit the individual family circumstances and need.</p>
1.09	<p>Use of Direct Payments</p> <p>Families can recruit Personal Assistants using Direct Payments to fund. The Personal Assistant can support the child in the family home, the community or their own home and gives the family a break. Families often choose a relative or close friend to provide overnight support to the child, enabling parents to have a break either at home, or away.</p> <p>Respite can also be commissioned by Social Services through Action for Children based at Arosfa.</p>
1.10	<p>Arosfa Respite provision</p> <p>Prior to March 2023, Arosfa supported 16 children over 324 nights of the year, usually 3 at a time, but sometimes the young person is best supported on their own. They also provided 6 tea visits and 4-day care sessions which offer flexible respite for families. Since March 2023, the contract has been increased to 364 nights of the year.</p> <p>Staff work out the rota's and share with families but are flexible if parents need urgent support. They provide a lovely, homely environment in a residential property in Mold and give the families a much-needed break knowing the child is very well cared for and having fun.</p> <p>Action for Children gain feedback from young people through 'House Meetings', and they conduct Peer audits to assess the quality of documentation. They also have a Registered Individual (Care Inspectorate Wales requirement), who visits approx. once every month and manages staff questionnaires to gain feedback and make improvements.</p> <p>This service is very popular and there is a wait for places. We have been able to use additional grant funding over recent years to provide additional support at Arosfa.</p>

	<p>We also used grant funding to modernise a disused unit at the property which now has self-contained flat with two bedrooms, kitchen, bathroom, and lounge. There are currently two young people 'living' in the flat, and they will continue to do so until they become adults and move to supported living. C2A team will remain involved with the 2 young people through this process.</p>
1.11	<p>Use of the additional unit at Arosfa (referred to above in 1.10) has proven successful for both young people The alternative would have been a more costly placement outside of Flintshire which would have meant moving schools and leaving connections behind. At Arosfa they have been able to stay at their local school and maintain the friendships they have built.</p>
1.12	<p>Arosfa celebrated their 10th anniversary last year and feedback from families is extremely positive. The staff their support children with a range of needs, some complex health needs and some with challenging behaviours. Staff receive training and supervision to be able to look after children safely and for them to enjoy their stay. It also provides the family with a much-needed break, and parents can spend time with siblings, who also value this time.</p> <p>With regards to the teatime and evening support, along with Saturday support, young people don't stay overnight but are offered time and support to do activities outside school, again being fun for them and giving parents a break. This type of provision suits some people better than overnight and means there are options for people to choose.</p>
1.13	<p>The biggest challenge for Arosfa is the number of children and young people waiting for a place. There are eight children and young people on the waiting list. This is managed by Action for Children and C2A team.</p>
1.14	<p>What the team members think of working in C2A</p> <p>Team members were asked to provide some comments on their experiences within the team and this is often a valuable way for managers to find out how the team function.</p> <p><i>I wanted to work on the team due to having family members with disabilities and wanting to gain experience in another area of social worker. Also due to the team manager being very hands on, visible and supportive. Karen has not failed to disappoint and is all the above and more.</i></p> <p><i>I really enjoy the variety and diversity of the work. I hold a mixture of children's, adults, Looked After Children and Child Protection cases.</i></p> <p><i>It is really refreshing to work for a team that are truly happy and do not have recruitment and retention of staff problems.</i></p> <p><i>I have found it to be a very positive team, colleagues are willing to offer support and guidance as I've navigated through this new (to me) world of children with disabilities. I wanted to work in this team to develop my skills.</i></p>

	<p><i>The work has been more complex than I expected, using other Teams paperwork and processes</i></p> <p><i>In today's financial troubles it is a challenge to provide the families and children with the respite and support they need, especially the children with very challenging behaviours. As there is not enough provision out there for them. But it feels good to get access to the support you know the family needs in place, the information and support to enable the families to make and have choices around the care of their child. It can be a very gratifying experience indeed.</i></p>
1.15	<p>Some examples of recent work undertaken:</p> <p>The Social Worker lead the legal process for a long-term foster family to adopt the 7-year-old girl who has lived with them most of her life.</p> <p>Supporting families through Children's Safeguarding process and other legal/formal processes.</p> <p>For children and young people unable to continue living with their families, the team are involved in finding suitable placements where the children's her needs could be met, and behaviours managed. The team support the family through this difficult decision and process. They would also liaise with Education, Health, and others to ensure correct legal processes were followed. Once placed, the team will support the family to maintain relationships and visit as often as they are able.</p>

2.00	RESOURCE IMPLICATIONS
2.01	<p>The challenges facing the C2A team include:</p> <p>Expertise needed is vast and includes knowing about issues for babies all the way to 25-year-olds. The team must be knowledgeable and confident to advise and lead in specialist aspects. This is a challenge to the team to keep informed, work with best practice, learn about legislative requirements and internal processes to manage the Statutory requirement of the work. From survey work undertaken with parents, they told us they value having information provided to them, so the team work hard to maintain knowledge and information.</p>
2.02	<p>High level of demand. There are currently 195 children with disabilities being supported by C2A and their siblings, and their parents/carers.</p> <p>Achieving what matters to the child/young person. There is often conflict within the family who may want different outcomes, there are safety considerations, practical challenges, and expectations to manage.</p>
2.03	<p>Sourcing and funding appropriate placements when families can no longer support their child at home. The team submit applications for residential placements to the Children's Services panel which are scrutinised. These placements are difficult to source, even with the support of the Brokerage team, and are expensive in a provider lead market. Specialist providers</p>

	can command fees of over £6,000 per week. Such provision is often out of the County which makes contact with the child more challenging.
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3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	None

4.00	CONSULTATIONS REQUIRED/CARRIED OUT
4.01	None required for this report

5.00	APPENDICES
5.01	Who's who document

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None

7.00	CONTACT OFFICER DETAILS
7.01	Contact Officer: Jo Taylor, Manager Learning Disabilities Telephone: 01352 70 E-mail: Jo.Taylor@flintshire.gov.uk

8.00	GLOSSARY OF TERMS
	<p>C2A - Child to Adult team. This team sits within Disability Services and provides support to children and young people from 0-25 years.</p> <p>Arosfa - This is a respite facility located in Mold managed by Action for Children. It offers a homely environment and very skilled and committed staff who care for children and young people for nights away from the family home which gives parents a break from their caring role and a nice environment for the child.</p>

WHO'S WHO

THE MANAGERS



Mel Hough
SENIOR PRACTITIONER

“Hi My name is Mel. I am one of the Senior Practitioners on the Child to Adult Team. My job is to keep the services within Child to Adult Team running smoothly by supporting; Managers, Social Workers, Parents/Carer's and most importantly young people accessing our service. I keep bees and collect honey and wax from some of my hives and love taking my dogs out on very long walks and watching them play with friends.”



Garry Ellson
SENIOR PRACTITIONER

I manage the social worker team in order to keep disabled children and young adults safe, and to ensure the social workers work to the principles of the Social Services and Wellbeing (Wales) Act 2014. Outside of work I enjoy walking, cycling and camping but my major passion is Liverpool football club!



Kate Salvoni
TEAM MANAGER

“Hi I'm Kate! I'm here to make sure you're getting on okay with your caring role, so please give me a shout if you need some help or want a chat! Outside of work, I like eating ALL of the chocolate and going on muddy dog walks.”



Trevor Brand
TEAM LEADER, PROMOTING INDEPENDENCE

“Hi, I'm Trev! I'm here to support you with all aspects of your your caring role, so please give me a call if you need some help/information or want to chat! Outside of work I enjoy playing golf, taking my dog “Cerys” on long walks and spending time with my grandchildren.”



Jo Taylor
SERVICE MANAGER
DISABILITIES SERVICES

“My job is to help and support the C2A team to then help support you. We try to make everyone's life better. When I'm not working, I love being with my animals. I have 2 cats, 2 horses and 3 dogs who I like to train and take for walks. I enjoy gardening but the dogs spend their time jumping all over it!”



Megan Gaunt
BUSINESS SUPPORT ASSISTANT

THE SOCIAL WORKERS



Samantha Evans



Andrea Vaida



Debbie Sherlock



Lindsey Stowell-Smith



Claire Trevor



Mica Smith

THE COMMUNITY CARE OFFICERS



Lynsey Bennett



Carrie Allen



Ruth Dowling



Abigail Seddon

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SOCIAL SERVICES OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	7 th September 2023
Report Subject	North Wales Regional Partnership Board Strategic Capital Plan
Cabinet Member	Deputy Leader of the Council and Cabinet Member for Social Services and Wellbeing
Report Author	Chief Officer, Social Services
Type of Report	Strategic

EXECUTIVE SUMMARY

The North Wales Regional Programme Board (NWRPB), and all regions in Wales, have been tasked by Welsh Government to develop and implement a Strategic Capital Plan. The plan should reflect a ten-year view of the proposed capital investment needs of its community infrastructure for the provision of social care and primary and community healthcare. The plan is the only mechanism to release external capital funding to the Council.

This report provides an update on the development of a ten-year Strategic Capital Plan (SCP) by the North Wales Regional Partnership Board, in collaboration with all local authorities, health teams and other service delivery partners.

The Strategic Capital Plan relates to proposed capital development projects that are seeking Welsh Government funding from the Housing with Care Fund (HCF) or Health and Social Care Integration and Rebalancing Capital Fund (IRCF).

The report seeks to gain Cabinet approval for Flintshire County Council's participation in the plan and its strategic intent, noting that individual projects will need to be brought back to Cabinet for approval and considered in line with the Council's Medium-term Financial Strategy (MTFS) and Capital Programme.

RECOMMENDATIONS

1	Members note the requirement for a ten-year Strategic Capital Plan for North Wales and the associated prioritisation and business case processes required to secure Welsh Government funding.
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2	Members approve participation in the regional programme, the proposed projects, and the plan's strategic intent.
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REPORT DETAILS

1.00	EXPLAINING THE NWRPB STRATEGIC CAPITAL PLAN
1.01	<p>The Regional Integration Fund (RIF) replaced the Integrated Care Fund (ICF) in 2022. The RIF Revenue Programme has been implemented for an initial five years up to March 2027 and supports models of preventative care. The RIF Revenue Programme provides financial support to social care, health and third sector services and projects across Flintshire.</p> <p>The RIF revenue programme is supported by two capital funding programmes to accelerate a move towards greater independent living, provision of care closer to home and as a driver to rebalance the care market.</p> <p>The Housing with Care Fund (HCF) has a primary objective to increase the stock of housing provision to meet the needs of people with care and support needs, at home or closer to home. This supports accommodation projects where there is a social rented tenancy, such as Extra Care and Supported Living. It also supports projects that increase the stock of intermediate and medium-term community-based residential care settings.</p> <p>The Health and Social Care Integration and Rebalancing Capital Fund (IRCF) supports the development of integrated health and social care community hubs and centres to create local single points of access and co-location of staff and services delivering integrated care pathways. IRCF also supports the rebalancing of the care market by investing in community settings and residential care premises.</p>

1.02	<p>The two capital funds provide an opportunity for all counties to secure funding that will support local capital investment through a match funding approach.</p> <p>HCF funding is allocated to regions and counties, but still requires regional and national approval as part of a business case process.</p> <p>IRCF provides a national funding pot, allocated through a Business Case Panel review process and Ministerial approval aligned to strategic requirements.</p> <p>The current capital funding available for North Wales is shown below:</p> <p><u>HCF</u></p> <ul style="list-style-type: none"> • North Wales allocation of £14.2m per annum (2023 to 2026) • Flintshire allocation of £2.65m per annum (2023 to 2026) • There is a requirement for 10% of the annual HCF allocation to be used for small discretionary projects that provide equipment, technology, or minor refurbishments. <p><u>IRCF</u></p> <ul style="list-style-type: none"> • All Wales allocation of £60m for 2023/24 – subject to approval of Business Case bids through a national panel process • All Wales allocation of £70m for 2024/25 – subject to approval of Business Case bids through a national panel process
1.03	<p>The NWRPB, and all regions in Wales, have been tasked by Welsh Government to develop and implement a Strategic Capital Plan. The plan should reflect a ten-year view of the capital investment needs of its community infrastructure for the provision of social care and primary and community healthcare.</p> <p>This plan is being co-developed by all service delivery partners across North Wales. This includes teams from Social Services, Education, Housing, Health Board, Registered Social Landlords and Third Sector organisations.</p> <p>The SCP seeks to provide a planned and co-ordinated response at the regional level to deliver on the strategic service priorities and key challenges in relation to priorities defined in the North Wales Population Needs Assessment and Market Stability Report.</p> <p>The NWRPB is developing a capital plan that delivers a range of solutions to promote independence, wellbeing and care closer to home for our communities in a manner that aligns with Welsh Government strategic priorities and the drive to achieve Net Zero on the Decarbonisation agenda.</p> <p>The plan will also include projects that may choose to augment their capital outlays by accessing other relevant and targeted Welsh Government funding schemes, internal organisational investment capital, as well as public-private partnerships with the third sector or wider.</p>

1.04	<p>The SCP is being developed using a prioritisation process to ensure that local and regional governance is undertaken on all prospective capital projects before they proceed to the Welsh Government’s business case processes.</p> <p>The SCP is structured into three-year funding cycles, beginning with 2023-2026 for projects that are ready to proceed to a business case process. Future projects will be added to the SCP for subsequent funding cycles once they have attained local governance approval. The long-term ten-year SCP will be a living document that will evolve over time to reflect strategic changes at a national and local level.</p> <p>Flintshire County Council teams have contributed an initial list of projects for the SCP based on strategic priorities. This includes the projects that have been accepted into the Flintshire Capital Investment Programme. Namely, the current projects Relocation of Tri Ffordd Day Service Provision and Croes Atti Residential Care Home. In addition, the potential future scheme Llys Gwenffrwd, Holywell Care Home Review.</p> <p>The initial SCP for North Wales will be reviewed by NWRPB in September 2023 and submitted to Welsh Government in October 2023. Future capital projects will be admitted to the SCP from December 2023, subject to county and regional approval processes.</p>
1.05	<p>The NWRPB Strategic Capital Plan has been developed in alignment with a robust planning and prioritisation process for business case development and approval as follows.</p> <p>At Stage Zero the lead partner develops project proposition document, with local approval secured, including any core capital match funding requirements. RPB validates the proposition using a prioritisation tool reflecting funding requirements and strategic priorities. RPB approves or declines the project into the SCP.</p> <p>At Stage One the lead partner produces a Strategic Outline Case or Business Justification Case, for projects under £5 million in value, for review and approval by RPB and then Welsh Government funding panel.</p> <p>At Stage Two the lead partner produces an Outline Business Case for review and approval by RPB and then Welsh Government funding panel. Projects under £5 million approved at Stage One are commenced.</p> <p>At Stage Three the lead partner produces a Full Business Case for review and approval by RPB and then the Welsh Government funding panel. At Stage Four approved projects commence execution and governance.</p>

2.00	RESOURCE IMPLICATIONS
2.01	There are no additional resource implications for the development and management of the SCP.

	<p>The RIF Revenue and Capital programmes are managed and coordinated in Flintshire by a Wellbeing and Partnership Lead role which is wholly funded by Welsh Government RIF funding. This role provides a key link to the Regional Collaboration Team who oversee the development of the SCP on behalf of the RPB.</p> <p>There are lead officers in the impacted Council portfolio teams to provide input to the SCP and to develop project propositions.</p>
2.02	Capital projects on the SCP will require a level of local match funding in addition to HCF or IRCF funding from Welsh Government. This funding will require appropriate planning and governance through the Council's Core Capital Programme.
2.03	Individual projects contained in the strategic plan will be brought back to Cabinet for approval and will feed into the MTFs and Capital Programme.

3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	<p>Welsh Government have indicated that the HCF and IRCF programmes have provisional funding for three and two years respectively from 2023. This is subject to annual review and there is a risk that the funding may reduce in response to competing national or regional priorities.</p> <p>To mitigate this risk, the NWRPB has requested that Welsh Government provide early notice of any significant funding reviews.</p>
3.02	<p>The business case process introduced by Welsh Government for IRCF and HCF is based on a multi-stage approach which will add additional timescales to the development of capital projects and the requirement for more specialist business case writing skills.</p> <p>To mitigate this risk, the NWRPB is providing training and resources to support business case development.</p>
3.03	<p>It is anticipated that regional plans will not always reflect a proportionate allocation of the IRCF funds across all counties and population groups. Funding decisions of the Welsh government will be based purely on the merit of the individual proposed projects.</p> <p>To mitigate this risk, the local prioritisation of projects in Flintshire, based strategic service priorities, will help to provide a balanced capital programme of prospective projects.</p>

4.00	CONSULTATIONS REQUIRED / CARRIED OUT
4.01	<p>The NWRPB is the key leadership body to oversee all integration work across health and social care and to formally represent the interests of the local authorities, the Health Board, and its key stakeholders.</p> <p>The allocation of significant additional capital through the HCF and the potential to secure further capital for regional priorities through IRCF has required the NWRPB to consider how to strengthen its governance and delivery arrangements to deliver this strategy. The SCP provides a</p>

	comprehensive and collaborative approach to the prioritisation of capital funding. The NWRPB will strengthen its governance arrangements to optimise the use of capital for prioritised strategic development projects.
4.02	The strategic priorities for health and social care services in Flintshire are directly informed by engagement with local citizens and people supported by services.
4.03	All capital development projects led by Flintshire County Council will be subject to local governance processes to ensure acceptance into the MFTS and Capital Programme.

5.00	APPENDICES
5.01	No appendices provided

6.00	CONTACT OFFICER DETAILS
6.01	Contact Officer: Michael Jones Telephone: 01352 702546 E-mail: michael.jones@flintshire.gov.uk

7.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
7.01	None

8.00	GLOSSARY OF TERMS
8.01	<p><u>Betsi Cadwaladr University Health Board (BCUHB)</u> Service delivery partner for RIF revenue and capital projects, predominantly IRCF funded 'hub' projects rather than HCF accommodation projects.</p> <p><u>Capital Investment Programme (CIP)</u> The Flintshire County Council strategic investment programme for capital development.</p> <p><u>Health and Social Care Integration and Rebalancing Capital Fund (IRCF)</u> Welsh Government grant fund for capital projects that deliver integrated health and social care community hubs and centres service hubs or rebalance the care market by investing in community settings and residential care premises.</p> <p><u>Housing with Care Fund (HCF)</u> Welsh Government grant fund for capital projects that increase the stock of housing provision to meet the needs of people with care and support needs, at home or closer to home. This includes accommodation projects where there is a social rented tenancy, such as Extra Care and Supported Living.</p>

It also supports projects that increase the stock of intermediate and medium-term community-based residential care settings.

Medium Term Financial Strategy (MTFS)

The Flintshire County Council strategic financial programme.

North Wales Market Stability Report

The North Wales Market Stability Report published in November 2022 includes information about the availability of care and support across the region. This includes care homes, home care, children's homes, fostering, adoption, advocacy, and support for unpaid carers. The report assesses how well current provision meets people's needs and recommends ways to make sure enough support is available in future.

North Wales Population Needs Assessment

The North Wales Population Needs Assessment was published in April 2022 and provides information about the care and support needs of people in North Wales and the support needs of carers.

North Wales Regional Programme Board (NWRPB)

The NWRPB was established to meet Part 9 of the Social Services and Well-being (Wales) Act 2014. The Board includes representation for public service providers across the region including local authorities, the health board, emergency services, local voluntary council, third sector organisations and citizens. The Board provide overall governance and authority for the North Wales Strategic Capital Plan.

Regional Integration Fund (RIF)

RIF replaced the Integrated Care Fund (ICF) in 2022. RIF provides revenue and capital funding to service delivery partners for the development and implementation of integrated health and social care services.

Registered Social Landlord (RSL)

RSLs, such as First Choice Housing Association, work closely with the Council and Regional Transformation Programmes to deliver capital projects. These include supported living and extra care schemes and can bid for both Housing with Care Funding and Social Housing Grant funding.

Social Housing Grant (SHG)

SHG is the main capital grant provided by Welsh Government to fund the provision of affordable housing in Wales. Housing associations and local authorities can access this funding for the provision of building new homes and the rehabilitation of existing buildings to provide homes at social and intermediate rent. SHG provides supplementary funding in conjunction with HCF for accommodation-based projects where there is a social housing tenancy.

Strategic Capital Programme (SCP)

The NWRPB Strategic Capital Programme provides a ten-year view of the capital investment needs of the region for the provision of social care and primary and community healthcare. The SCP will be used to manage a prioritised business case process for HCF and IRCF funding requests.

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