

Public

**Neath Port Talbot County Borough Council**  
**Cyngor Bwrdeistref Sirol Castell-nedd**

**Democratic Services**  
**Gwasanaethau Democrataidd**

**Chief Executive:** K.Jones

**Date:** 7<sup>th</sup> December 2021

Dear Member,

**SOCIAL CARE, HEALTH AND WELLBEING CABINET BOARD -**  
**THURSDAY, 9TH DECEMBER, 2021**

Please find attached urgent item for consideration at the next meeting of the **Social Care, Health and Wellbeing Cabinet Board - Thursday, 9th December, 2021.**

**Item**

15. **Directors Annual Report 2020 - 2021** (Pages 1 - 34)

Yours sincerely

p.p Chief Executive

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Cyngor Castell-nedd Port Talbot  
Neath Port Talbot Council

## **NEATH PORT TALBOT COUNTY BOROUGH COUNCIL SOCIAL CARE HEALTH & WELL-BEING CABINET BOARD**

**9<sup>th</sup> December 2021**

**Report of the Director of Social Services, Health & Housing –  
Andrew Jarrett**

### **SECTION A – MATTER FOR INFORMATION**

**WARDS AFFECTED: ALL**

### **DIRECTOR'S ANNUAL REPORT 2020-21**

#### **Purpose of Report**

The purpose of this report is for Members to note the Director's Annual Report 2020-21.

#### **Background**

The purpose of the annual report is to set out the local authority's improvement journey in providing services to people in their areas, those who access information, advice and assistance, and those individuals and carers in receipt of care and support. Under the new requirements of the Social Services and Well-being (SSWB) Act, the report needs to demonstrate how local authorities have promoted well-being and accounted for the delivery of well-being standards.

The former reporting requirements for Directors of Social Services in part 6 of the "Statutory Guidance on the Role and Accountabilities of the Director of Social Services" (Welsh Government June 2009) have

been replaced as a consequence of both the SSWB and Regulation and Inspection of Social Care (Wales) Act 2016.

The requirements are that every local authority must produce an annual report on the discharge of its social services functions and the report must include:

- an evaluation of the performance in delivering social services functions for the past year including lessons learned (Part 8 Code on the role of the director);
- how the local authority has achieved the six quality standards for well-being outcomes (in a code about measuring social services performance made under s145 of the SSWB Act 2014);
- qualitative and quantitative data relating to the achievement of well-being outcomes (also set out in the code on measuring performance);
- the extent to which the local authority has met requirements under Parts 3 and 4 of the SSWB Act as set out in separate codes covering assessing needs and meeting needs;
- objectives for promoting the well-being of people needing care and support and carers needing support for the following year including those identified by population needs assessments under section 14 of the SSWB Act;
- assurances concerning:
  - structural arrangements enabling good governance and strong accountability;
  - effective partnership working via Partnership Boards;
  - safeguarding arrangements;
- the local authority's performance in handling and investigating complaints
- responses to any inspections of its social services functions and update on Welsh language provision;
- how the local authority has engaged people (including children) in the production of the report.

### **Financial Impact**

Not applicable.

### **Integrated Impact Assessment**

There is no requirement to undertake an Integrated Impact Assessment as this report is for monitoring / information purposes.

### **Valleys Communities Impacts**

No implications.

### **Workforce Impacts**

No implications.

### **Legal Impacts**

No implications.

### **Risk Management Impacts**

No implications.

### **Crime and Disorder Impacts**

Section 17 of the Crime and Disorder Act 1998 places a duty on the Council in the exercise of its functions to have “due regard to the likely effect of the exercise of those functions on and the need to do all that it reasonably can to prevent:

- a) Crime and disorder in its area (including anti-social and other behaviour adversely affecting the local environment); and
- b) The misuse of drugs, alcohol and other substances in its area; and
- c) Re-offending the area”

There is no impact under the Section 17 of the Crime and Disorder Act 1998.

### **Violence Against Women, Domestic Abuse and Sexual Violence Impacts**

Section 2(1) of the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 introduced a general duty where a person exercising relevant functions must have regard (along with all

other relevant matters) to the need to remove or minimise any factors which:

- (a) increase the risk of violence against women and girls, or
- (b) exacerbate the impact of such violence on victims.

The proposals contained in this report are likely to have no impact on the above duty.

### **Consultation**

There is no requirement under the constitution for consultation on this item.

### **Recommendation**

This report is for information purposes only.

### **Reason For Proposed Decision**

Not applicable.

### **Implementation of Decision**

Not applicable.

### **Appendices**

Director's Annual Report 2020-21 – Appendix 1

### **List of Background Papers**

No additional papers required.

### **Officer Contract**

Andrew Jarrett, Director of Social Services, Health & Housing, Neath  
tel: 01639 763279 E-mail: [a.jarrett@npt.gov.uk](mailto:a.jarrett@npt.gov.uk)



# Director's Annual Report

2020 / 21

Social Services, Health & Housing



*Building Safe and Resilient Communities*

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## Foreword

The last year has been like no other. All of us have, in some way, been affected by the pandemic. Health and Social Care – clients, patients and staff - have been tested to the limit, but we are slowly emerging into a new post-pandemic world.

Whilst all non-urgent/critical work such as programmes of change, consultations and staff training sessions were suspended, we quickly adapted to new ways of working. Face to face meetings were cancelled to limit the spread of the virus, but we have strived to ensure that those who need support were not left without.

We had to quickly adapt to new ways of working. Many staff were redeployed. The NPT Safe & Well Service provided help with food shopping, prescription medication collection, daily errands and well-being checks, while we have worked closely with partner organisations across Health, public, independent and voluntary sectors.

And in conjunction with Welsh Government we have distributed more than 10 million items of PPE to social care providers across NPT.

At this point I would also like to pay tribute to the commitment shown by staff throughout Social Services and, indeed, the wider Council.

The Leader and Chief Executive of the Council, supported by Members and senior managers, have ensured that the Directorate's work in supporting the most vulnerable children, young people, adults and older people in our communities has continued throughout these difficult times.

This is a time for reflection but also a time when we must look to the future. Social care must be more flexible, adaptable to change, and sustainable.

Although we continue to face uncertainty, one thing I know is that we will continue to work together to help ensure that we help keep vulnerable people as safe as possible.

**Andrew Jarrett**  
Director of Social Services, Health & Housing  
Neath Port Talbot Council



## Director's Summary of Performance

Last year 2,675 adults had a service and care plan, while those aged 65+ receiving a service increased again to 2,037.

We have maintained the number of Local Area Coordinators and have seen them come even more to the fore during the pandemic in developing our communities and helping to reduce social isolation.

We strongly believe that children's needs are best met by their own families if this can be safely supported. I am pleased to report that number of Looked After Children has again fallen, standing at 299 at the end of March 2020, down from 309 in the previous year.

Unpaid carers have an invaluable role and often go unrecognised. To help ensure that carers are identified, supported and have a life alongside caring we have developed a local carers strategy which will help ensure we meet Welsh Government's national carers priorities. We have also collaborated in the development of a West Glamorgan regional carers strategy, and adhered to the carers emergency action planning guidelines. However, the pandemic has meant face to face carers assessments could not be undertaken, so the number completed fell to 167 from 289 the previous year as assessments were undertaken over the phone or via Zoom.

During the pandemic we asked for volunteers across Adult Services to provide support to older people's care homes who were struggling with staffing levels due to the impact of Covid.

Volunteers also worked at a newly established temporary accommodation to house homeless people during the pandemic crisis, while others helped out with the Safe & Well Service undertaking wellbeing calls across NPT.

Statistics only tell part of the story, and we have all had our share of daily updates, charts and news briefings.

The following provides more tangible information – about what the Directorate accomplished in the last year despite or perhaps because of events – and sets out what we see as our immediate priorities as we embrace the Council's Recover, Reset, Renew strategy.

## How are People Shaping our Services?

*This is about how we find out what people think about our services so we can build on good practice.*

The pandemic meant that we had to do things differently, with digital and online services playing a bigger part. And we signed up to the carer emergency action planning guidance.

During this time the Social Services website for both children and adults has undergone a revamp to ensure that the material is easily assessable and up to date. We developed an online digital platform to capture the voice of the child, carers and parents so everyone has the opportunity to partake in Looked After Children (LAC) reviews during the pandemic. Online Consultation material has been produced for internal and external partners to support in the ongoing development of service provision.

Nearly 200 individuals have been supported via Welfare Text/Calls during the year to ensure that contact is maintained with individuals identified as being at risk during the pandemic. We have maintained contact with third sector organisations and attended focus sessions and fun activities via Teams /Zoom to keep in touch with people during isolation/lockdown.

We also used the time to update the Dewis Directory of organisations offering care and support. As part of this we worked with Dewis Cymru to develop a 'cluster view' which enables Social Workers to access material relevant to the areas they are working in, and this is in the final stage of completion.

We have worked with the Regional Co-production Network which has helped in the development of the internal Co-production Statement of Intent to ensure that co-production is embedded in ongoing and future work. This represents the next stage of our Co-production journey and we recognise that it will take time to successfully co-produce across Social Services. But by ensuring an equal relationship where people with care and support needs, and those responsible for providing services, share power to plan and deliver support together, everyone has a vital contribution to make in improving the quality of life for individuals and communities.

Throughout the pandemic we collaborated with Platform 4YP to deliver weekly online wellbeing sessions for 13-16 year olds, as well as outdoor activities when guidelines permitted.

Other programmes included weekly YoVo (Your Voice Matters) sessions for primary age children run on Zoom, 'Circus Eruption' circus sessions run online with equipment posted to families, and the 'Comfort Mugs' project to reach out to young people experiencing loneliness during the pandemic, where mugs were decorated with uplifting messages, filled with chocolate and treats and posted out to children.

We kept in regular contact with young carers via calls and texts, held competitions and worked with the Children's Commissioner for Wales to promote the UNCRC (United Nation's Convention on the Rights of the Child).

We worked with the Child Poverty Action Group charity to ensure children can participate in all aspects of school life with no financial constraints, the Bullies Out Charity to further promote ant-bullying with children, and collaborated with the Children's Rights Charity to promote children's rights on a strategic level throughout the service as well as deliver online training workshops.

Other projects include a girls' rights group for care experienced girls, and an animal group for children including a therapy dog and visits to an alpaca sanctuary.

And we launched new annual consultations with children and families relating to short breaks services to develop and improve these service models on an ongoing basis.

### **Quality Standard 1 - Working with people to define and co-produce personal well-being outcomes that people wish to achieve**

*This is about how we work in partnership to help people achieve positive outcomes.*

The Commissioning Unit supported Children's Services to remodel the family volunteer befriending service (SHINE service) to focus on early intervention and prevention to improve people's outcomes.

We reviewed commissioned Children's Services contracts which included consultation with social work teams, children, young people, families and other stakeholders to improve service performance and service models both in the short and long term. We supported providers to make necessary service improvements, utilising formal performance monitoring processes when

appropriate, and we provided ongoing support to the West Glamorgan Parent Advocate Steering Group which aims to develop a new parent peer advocacy service.

We also held family engagement workshops around developing new Integrated Care Fund services. These enabled us to seek guidance and feedback on various aspects of the scheme development process including; developing care and support specifications, property development and design and co-producing tender method statement and presentation questions. The engagement workshops have also provided a support network for the families, Individuals and carers.

### **Priorities for 2020-21 - What we said we would do and what we achieved**

#### **We will further develop the “front door” to social services, ensuring that we provide a coherent, information, advice and assistance service**

- ✓ A Single Referral form has now been finalised for use by both Children and Young People Services and Adult Services. This referral form emanated from a collaboration between cross-sections of Social Services and Health staff. The form facilitates the opportunity to capture Adult safeguarding concerns (these were previously recorded separately). The single referral form was launched on 4th February 2020 and began to be implemented across partner agencies.

#### **We will develop greater integration of working arrangements between Children & Young People and Adult Services**

- ✓ The formal launch of the Adults and Children’s ‘Single Point of Contact’ - the purpose of which is to act as the initial contact for people who require information and advice relating to the health and wellbeing of children, families and adults - was due to take place on 1st April 2020 but was delayed due to the pandemic. However, work has continued to integrate the front door service as much as practicably possible and communications have been released to stakeholders so that they are aware of our integrated referral form and contact details. The service has also moved to a single integrated telephone number and email address to respond to all referrals into Social Services. One of the outcomes of a more integrated way of working has been

the completion of timely, comprehensive assessments from the point of referral. The Adult and Children's SPOC will be further aligned as part of the remodelling of Adult Social Care, which is due to commence during 2021/22.

**We will implement the Regional Joint Carers' Strategy with our health partners**

- ✓ Neath Port Talbot Council invited residents to join in Carers Week (8<sup>th</sup> – 14<sup>th</sup> June 2020) campaign to recognise the vital contribution made by the borough's 20,000 unpaid carers.
- ✓ All carers are being offered an assessment and carers who do not take up the offer are provided with access to information, advice and assistance as well as services provided by Neath Port Talbot Carers service.
- ✓ PPE was provided to unpaid carers via the Carers Service.
- ✓ A five year West Glamorgan Regional Carers Strategy has been developed and regional working groups have been established to take forward the priorities within the strategy.
- ✓ The Council signed up to the principles of the emergency action planning guidelines, to ensure that carers are considered in the development and implementation of emergency measures relating to COVID -19.

**We will embed a rights-based approach for older people and disabled people across the Council and ensure that people have access to advocacy support where that is required**

- ✓ Where it is identified that someone requires an advocate, arrangements are made for one to be appointed. The Council has a contract in place for an advocacy service. We have adopted a rights-based approach across the service.

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

*This is about how we help people to look after their physical, mental and emotional health.*

**Children Experiencing Adversity Social Emotional Recovery (CEASAR)**

During the year Children's Services received a grant from the Welsh Government's Intervention Fund for supporting child and family wellbeing, as part of extra funding to assist emotional wellbeing. The Children Experiencing

Adversity Social Emotional Recovery (CEASAR) project creates opportunities for young people and parents to build confidence, self-esteem, and emotional resilience to develop a range of personal development skills. In conjunction with YMCA Port Talbot two separate groups of participants (aged 8-12 years and 13-16 years) will access a six week summer activities programme, including kayaking/canoeing, outdoor climbing, bush-craft and mountain days.

The Commissioning Unit have provided intense support to providers and have monitored care homes, domiciliary providers and providers of specialist Learning Disability and Mental Health services in order to support them in continuing to deliver continuity of care throughout the pandemic. Weekly provider forum meetings have been held via Zoom/Teams throughout the year to engage with providers to ensure they are updated on relevant guidelines and that we understand where the pressures are in service provision, e.g. staffing shortages due to self-isolation.

We also have been calling all providers on a weekly basis to go through all aspects of the pandemic and how it was affecting them, looking at statistics around staffing/sickness/Covid positive cases/ vaccine take up/ providers in incident status etc. These responses are collated on spreadsheets and shared with our internal teams and partners, a RAG care home meeting has been held weekly to go through each response care home providers have made to ensure early identification of any potential pressures or issues. These meetings are multi-agency and include colleagues from CIW (Care Inspectorate Wales), Health, Public Health Wales, and Environmental Health, with actions agreed where necessary.

Throughout the pandemic the Commissioning Unit also established monthly multi-agency COVID-19 Q&A sessions for providers. These sessions gave providers an opportunity to receive updates from Public Health Wales, Trace Track and Protect and Environmental Health and ask questions on issues such as latest guidance, PPE and infection control.

A regional website was established for care homes in the West Glamorgan region so that providers could be alerted to any changes in guidance and have a central point to obtain relevant information.

Working with IT we have developed a Domiciliary Care Digital Brokerage System to improve efficiency, accuracy and data security. The Digital System will replace spreadsheets currently manually updated and create a live data brokerage list,

which will be automatically generated and sent to providers via Share Point. We will also use Share Point to share care plans, contracts and other brokerage information.

The Dynamic Purchasing System operates under a Framework Contract to allow providers to apply to be added to the Framework through a tender process at any time for the duration of the contract. Once on the Framework providers are able to bid for care packages through a call off system via the Domiciliary Care Brokerage, which operates to place people with care and support needs with the appropriate package of care. During the year eight providers applied to go onto the Domiciliary Care Provider Framework, five of which were successful.

#### Adult Social Work Teams

Adult social work teams worked from home but undertook visits where there were safeguarding concerns or where it was not possible to undertake an activity or gather the required information to complete an assessment or review using other methods.

Managers across Neath Port Talbot have worked closely with colleagues in the Health Board and Swansea Council to develop pathways and processes to streamline hospital discharge planning. This has included social work staff based in NPT Hospital throughout the pandemic to help facilitate timely hospital discharges.

#### Community Mental Health Team (CMHT)

In many ways preparation for the onset of the pandemic was more challenging than responding to the crisis itself. However, the significant efforts made by the entire team was of paramount importance to the continued functioning of the service.

Referrals pre-pandemic CMHT (South) were around 20-25 per week, with the CMHT referral screening meeting taking place on a Monday morning. Since the government imposed lockdowns the referral rate has reduced to between 4-10 referrals per week, with the greatest drop-off being from referrals made directly by GPs. The CMHT has continued to respond to screen requests from the Crisis Resolution Home Treatment Team or in-patient care.

#### Contingency Arrangements

In response to the pandemic contingency arrangements were put in place within CMHT (South). This included a dynamic RAG rating system (RED, AMBER, GREEN)



to categorise the level of individual service user's risk. Service users profiles were developed along with contingency arrangement kept in respective files with plans in place to re-assess these categories on a weekly basis, should the contingency plan need to be actioned due to predicted staff absence. To date these plans have only been partially actioned as the CMHT has managed to maintain adequate staffing levels (complemented by a staff member temporarily re-deployed from the ward and a social worker/assessor from LPMHS) throughout the pandemic.

**Care Coordination (Part 2 of the Mental Health Measure (Wales) 2010)) and Care Management (Social Services and Well-being (Wales ) Act 2014)).**

Allocated Care Coordinators (local authority and health personnel) have continued to maintain regular contact with service users mainly by telephone with face-to-face contact only taking place when deemed absolutely necessary. Care Coordinators are making the effort to physically speak to service users on their caseloads who attend depot clinic, and crisis plans have been updated to reflect changes in work practices. Generally service users have been resilient throughout the lockdown period and in the main adapted well to changes in work practice. However at present because of a combination of therapies being placed on hold and lockdown of community based services at present the CMHT are currently providing a maintenance service rather than planning outcomes and goals to promote recovery.

Whilst the lockdown of other key council services has been deemed necessary this also has a knock-on effect on service users and Care Coordinators / Care Managers. For example, the CMHT work with a number of individuals whose finances are managed by the Court Deputy Department, and effective plans have been put in place to ensure the personal allowance is paid directly into a bank account.

**Mental Health Act Assessments**

The Approved Mental Health Professionals (AMHP) based within CMHT (South) and AMHPs based in other teams have continued to provide a statutory AMHP service throughout the pandemic.

Generally the amount of requests for Mental Health Act (MHA) assessment was no different to pre-pandemic levels. However, it could be argued that there has been a slight increase in MHA requests the longer the crisis continues. There is some evidence in recent weeks that the cancellation of medical reviews for people with a functional mental illness is resulting in increased requests for MHA

assessments due to non-compliance in medication. Moreover the temporary closure of specialist day services for older persons with organic mental disorder is resulting in increased pressures on carers at home resulting in breakdown of care at home - also resulting in requests for MHA assessments.

### Direct Payments

Direct Payments are offered, following an assessment, to people as an alternative to either in house services or commissioned care, allowing them to employ Personal Assistants (PAs) of their choice. They enable people to meet their outcomes and exercise choice and control over the care they receive. The number of Direct Payments packages reduced slightly throughout 2020/21 with approximately 410 people being supported by the end of March 2021, a reduction of 35 during the last 12 months, although the service saw a significant increase in demand for support since the start of the pandemic. The in house Direct Payments Support Service (DPSS) sets up new packages, provides employment guidance and support, with the recruitment of PAs, as well as providing a range of other services. The DPSS continued to provide a comprehensive service throughout the year supporting employers and Personal Assistants to work as safely as possible and in line with employment law.

### Complex Needs Day Services

Day services for people with complex needs are delivered across 3 sites in Neath Port Talbot, (Trem Y Mor, Brynamlwg and Rhodes House). Plans were in place for the service based at Abbeyview, Neath Abbey to relocate to Brynamlwg and Rhodes House in Aberavon in May 2020 to enable each of the facilities to better meet the individual needs of the people who use these services; however, due to the coronavirus pandemic the complex needs day services closed on the 20<sup>th</sup> March 2020. The staff employed by the day services provided an outreach service to a small number of service users in the months following the closure of the service, and staff quickly responded to the need to wear PPE, follow guidance and Covid-19 risk assessments. Several of the staff were redeployed to a new team which was developed to support the in house domiciliary care team (CWT) and supported people to prepare meals, collect shopping and prescriptions, etc. and some staff were redeployed to the Test, Trace and Protect Service. Several of the staff provided invaluable hands on support to care homes in times of crisis during the last year. Plans are in place for the complex needs day services to reopen on a limited and phased return basis in mid-April 2021.

### Domiciliary care

The Council's Community Wellbeing Team delivers domiciliary care to people across the borough. The Team uses a reablement ethos to support individuals in their own homes to enable them to remain as independent as possible. The team provides both a short and long term service. The service is regulated by Care Inspectorate Wales who inspect the service and the quality of care provided on a regular basis. The in house service delivers care to 125 people, which is approximately 20% of domiciliary care needed whilst the rest is provided by the external market. The team responded immediately to the coronavirus pandemic and quickly adapted to wearing PPE, following guidance and Covid-19 risk assessments, and continued to deliver a full range of services to the people they support.

### Priorities for 2020-21 - What we said we would do and what we achieved

#### **We will further develop our progression-based model of care for people with mental health needs, learning disabilities and physical disabilities**

- ✓ A progression pathway working group meet to look at how to support people's progression into more independent living services and ensure that we commission the right care models.
- ✓ We continue to work with RSLs (Registered Social Landlords) and providers to develop new care models that better support progression.
- ✓ We have established 3 units of supported accommodation for people with mental ill health and 2 people were moved into this scheme in 2020/21.
- ✓ Work is progressing to develop a specialist supported living service for 3 people with complex ASD needs.
- ✓ A provider has been commissioned to deliver care in the new extra care service that is anticipated to go live in 2021/22.
- ✓ Developed a unit for emergency placements.

#### **We will develop the home care and residential care provision for older people to ensure that there are enough quality placements available to meet local need**

- ✓ 33 care home beds were block purchased to support hospital flow at the beginning of the pandemic.
- ✓ Weekly provider meetings took place in 2020/21 to support the care market.

- ✓ Weekly provider contact took place in 2020/21 to monitor and support the care market.
- ✓ Daily contact was maintained with providers that experienced a COVID-19 outbreak to provide support.
- ✓ Processes were established in order to provide the care sector with additional Welsh Government Funding to support additional cost pressures arising from COVID-19.
- ✓ A process for distributing PPE to the care sector was established.
- ✓ A volunteers' register of people within the directorate was established in order to support care providers with acute staff shortages arising from COVID-19.
- ✓ A regional commissioning group was established to support the sustainability of the sector.
- ✓ Contingency plans for services were developed to ensure continuity of care services throughout the pandemic.
- ✓ All domiciliary care staff (in-house & external) are now registered with Social Care Wales.

**We will undertake focused work with partners to improve access to the right support for children and young people who have poor emotional wellbeing/mental health**

- ✓ Peer review meeting takes place fortnightly, which provides a healthy discussion forum with partner agencies. Families that need to access further support are discussed, as well as any disagreements regarding decision making with a view of having a collective agreement and response. Child and Adolescent Mental Health Services (CAMHS) representation in peer review allows for case discussions to consider any emotional health and wellbeing support by either CAMHS or Early Intervention and Prevention (EIP) Service linked to CAMHS.
- ✓ Work is currently being undertaken on a regional basis to further develop the right emotional wellbeing and mental health support services.
- ✓ The pandemic has had an impact on the emotional health and wellbeing of our children, young people and their families, the effects of which are likely to see in the coming years. This is an area that we will need to consider further moving into 2021/22 and beyond.

### **Quality Standard 3 - Protecting and safeguarding people from abuse, neglect or harm**

*This is about helping to protect people who might be at risk of abuse, neglect, harm or exploitation.*

#### **Priorities for 2020-21 - What we said we would do and what we achieved**

##### **All children and young people in need of protection, or who have been identified as in need of care and support, will have a say in decisions that affect them**

- ✓ Bespoke questionnaires continue to be devised, to support specific thematic audits and will be incorporated as part of the process where relevant. For example, the views of children and young people were sought as part of the Looked After Children's Assessment and Family Contact Audit. The findings from this audit were disseminated through to all teams and managers including the Looked After Children Team and Fostering Team. A further survey to gain the views from Adult Service Users on the support they receive from their allocated worker was also underway at the start of the COVID-19 pandemic, which unfortunately had to be deferred. However, extensive links are now in place between Quality Assurance and Engagement and Participation Teams with the Audit Programme for 2021-22 having a number of audits scheduled that involves feedback from service users, such as the COVID-19 response in Children and Adult Services and Exploitation/Youth Justice Service Audit.
- ✓ We will continue to review and make improvements to the way we collect service user feedback to ensure all children and young people have a say in decisions that affect them.

##### **We will work with our partners to ensure those with the most complex needs are safeguarded, strengthening our vulnerable adults safeguarding arrangements**

- ✓ We continue to work towards streamlining the Adult Safeguarding Pathway to bring consistency across Children's and Adult Services. All Safeguarding Reports received on closed cases are now responded to at the front door up until determination of the s126 enquiries (*Safeguarding enquiries are made under s126 of the Social Services and Well-being (Wales) Act 2014*).

- ✓ All open cases continue to be overseen by the Adult Safeguarding Team.
- ✓ The Corporate Safeguarding Group and Safeguarding Board are now tracking all Safeguarding training across the Local Authority. Further training material will be developed in due course to respond to the launch and implementation of the Liberty Protection Safeguards in March 2022. A working group has been set up under the Safeguarding Group to oversee this work.
- ✓ Quality Assurance for Adult Services is overseen by the Quality Practice Strategic Group (Local Authority) and the Safeguarding Board. The audit programme specific to Adult at Risk (AAR) was disrupted as a result of COVID but this is now on track with s126 enquiries and Case conferences next in line to be audited.

**We will ensure all Council services follow rigorous and consistent safeguarding practices**

- ✓ All staff are now working to the new All Wales Safeguarding Procedures with progress against implementation being monitored by the Safeguarding Board. Training material has been developed and rolled out by the training department.
- ✓ Significant work has been undertaken to ensure a consistent response to safeguarding at the 'front-door' with Children and Adults Services now operating as one in response to safeguarding reports. A Self-Neglect Policy has been introduced across NPT through the Safeguarding Board and further work continues to ensure a robust and consistent response to all safeguarding reports. A decision-making tool is being trialled across Adult Services.
- ✓ A programme of Multi-Agency Audits stemming from the Safeguarding Board was undertaken to review the changes made as a result of the new procedures across children and adults. The audits centred on strategy discussions/meetings; Section 126/47 Enquiries and Case conferences (Children and Adults). To date the Strategy discussion/meeting has been completed owing to the disruption caused by pandemic.
- ✓ Funding was acquired from Welsh Government at the latter end of 2020 to advance plans to develop a Family Group Conferencing Service. Further funding has since been secured and the Local Authority has now commissioned a service and is now utilising Family Group Conferencing.

- ✓ All forms of exploitation (extra-familial harm) are now managed at the outset by the respective Area Teams, including Strategy Meetings for Child Sexual Exploitation, thus creating the space to embed the Contextual Safeguarding approach across practice. A toolkit is currently being piloted to support and strengthen the response to harm outside the family home.
- ✓ Ensuring robust, rigorous and consistent Safeguarding Practices will continue to be a priority for the Service moving into 2021-22.
- ✓ The percentage of re-registrations of children on the local authority child protection register has reduced from 13.9% in 2019-20 to 7.4% in 2020/21. The lower number of re-registrations may reflect better quality planning and support at the point of deregistration.

#### **Quality Standard 4 - Encouraging and Supporting People to Learn, Develop and Participate in Society**

*This looks at how we help people to learn and interact with other people so they can be part of their communities.*

##### Community Connecting Team

The Community Connecting Team (CCT) deliver community based opportunities to vulnerable people from the age of 16 years old living in Neath Port Talbot. During 2020/21 the services provided by the Community Connecting Team were stopped due to the coronavirus pandemic, however several of the staff were redeployed to a new team which was developed to support the in house domiciliary care team (CWT) and supported people to prepare meals, collect shopping and prescriptions etc. and some staff were redeployed to the Test, Trace and Protect Service. Throughout the year all those who access CCT received regular welfare phone calls.

##### Community Independence Service

The Community Independence Service (CIS) delivers housing related support to vulnerable people aged 16+ living in Neath Port Talbot. CIS aims to build people's confidence and independence by giving them the skillsets they need to live an independent life. During 2020/21 face to face services provided by the Community Independence Service were stopped due to the pandemic. Several of the staff were redeployed to a new team which was developed to support the in house Domiciliary care team (CWT) and supported people to prepare meals, collect shopping and prescriptions etc. and some staff were redeployed to the Test, Trace and Protect Service.

### Community Occupation Therapy Service (COTS)

The Community Occupational Therapy Service provides an assessment and planning service and aims to enable people to live as independently as possible by providing advice, aids and equipment. The team also undertake manual handling assessments to support the in house and external domiciliary care market. The team work closely with Social Services and Health colleagues to provide a comprehensive service to aid peoples independence and to minimise risks. The team responded immediately to the coronavirus pandemic and quickly adapted to wearing PPE, following guidance and Covid-19 risk assessments, and continued to deliver a full range of services to the people they work with. In 2020/21 the team provided a service to nearly 1,300 people.

### Bspoked

This service provides work, training and employment opportunities for adults with a range of disabilities. The purpose is to create a live environment which prepares and provides service users with the tools and skills to develop their potential and to support their progression to paid or voluntary employment or community based activities. During 2020/21 the service at Bspoked stopped due to the pandemic; however, several of the staff were redeployed to a new team which was developed to support the in-house domiciliary care team (CWT). Staff also developed a range of alternative ways to engage with the people who attend Bspoked including online quizzes and events. Throughout the year, all those who access Bspoked received regular welfare phone calls.

### Priorities for 2020-21 - What we said we would do and what we achieved

#### **We will further develop our intermediate care services to enable more people to retain and regain their independence by implementing the hospital to home recovery model**

- ✓ Hospital 2 Home model (H2H) was reviewed during the pandemic and re-launched into Rapid Discharge based on the Discharge to Recover and Assess (D2RA) model.
- ✓ In July 2020, a multi-disciplinary team was established to triage and screen all hospital referrals into the Local Authority to ensure people are seen by the right service at the right time and hospital discharges are safely supported.
- ✓ Between July 2020 and March 2021 we have supported 571 hospital discharges.



**We will review the services we provide for people with the most complex needs to ensure that they remain fit for purpose**

- ✓ The Commissioning for Complex Needs Programme (Regional approach) continues with its agenda to deliver on a shared approach for commissioning, procurement and market arrangements for meeting the needs of individuals with complex needs.
- ✓ The focus remains on quality outcome assessments, care planning and reviews.
- ✓ Regional brokerage system for mental health and learning disability services to secure good quality care at a sustainable cost.
- ✓ Development of supported living schemes – growth in capacity and in models of service delivery to meet the needs of growing population of young people in transition.
- ✓ Links with commissioning to develop models of service delivery, identifying gaps, to support the changing needs/priorities of those individuals we support with a focus on progression based model of service as well as specialist good quality provision for learning disabilities and mental health.
- ✓ We continue to measure outcomes for people with the most complex needs on a case by case basis.
- ✓ Social Work Teams have a planned approach when undertaking reviews and have made progress in undertaking outstanding reviews and anticipate making further progress.

**We will promote social enterprise**

- ✓ We continue to support the 3rd sector voluntary organisations to assist, advise and inform the promotion of social enterprises. Unfortunately, as a result of the pressures of Covid-19, this objective has been delayed. This work is pivotal to the success of the various on-going community initiatives such as Building Safe & Resilient Communities, however, because of Covid-19, community pilot programmes had to be paused to allow us to focus on our safeguarding responsibilities. This will be revisited in 2021/22 as part of the ongoing development of Early Intervention Prevention (EIP) support within Adults Social Care. Our procurement processes also take into account the promotion of Social Enterprises.

## **Quality Standard 5 - Supporting people to develop safely and to maintain healthy domestic, family and personal relationships**

*This is about helping people to achieve healthy relationships at home and with the people they are close to.*

### Commissioning new services

The Commissioning Unit supported Children's Services to develop and commission a range of new services (which included market testing events), including:

- a Family Group Conferencing Service;
- Children Experiencing Adversity Social Emotional Recovery (CEASAR) project; and
- Equine Therapy Service.

### Whispers Equine Assisted Learning Program

Equine Assisted Learning (EAL) is a form of experiential learning including horses and a facilitator working together with a person to create positive change. EAL often includes a number of beneficial equine activities such as observing, handling, grooming, groundwork, and structured challenging exercises focussed on the young person's needs and goals. EAL provides unique non-verbal opportunities for young people to enhance self-awareness, recognise maladaptive behaviours and identify negative feelings. Research highlights that this approach has had positive results for people with social difficulties and mental health needs that can result in significant changes in cognition, mood, judgment, insight, perception, social skills, communication, behaviour and learning.

### Hidden Harm Service

The Hidden Harm Service was set up to offer people help and support to reduce or stabilise their drug or alcohol use, and aims to help parents to understand how drug/alcohol use affects their children. Many recreational users of alcohol or drugs have no problem in providing their children with a safe, secure and happy home. Many parents who do not use substances do not meet the needs of their children. Regular and uncontrolled use of substances can bring with it health, financial, emotional and parenting problems. It can create problems in family relationships and affect children's lives in many ways. Abstaining from drugs or alcohol can be extremely difficult, therefore cutting down or stabilising use with the support of professionals is often an important first step in helping

families with these difficulties. Any parent can self-refer or can consent to a referral made by social services staff to access substance misuse services.

### **Priorities for 2020-21 - What we said we would do and what we achieved**

#### **Substance Misuse**

Prior to April 2020 there were no floating support services specifically for individuals with alcohol and / or substance misuse. Due to a reported increase in substance misuse among clients, a pilot project was established from April 2020 to deliver housing related support to individuals at risk of homelessness to enable them to maintain their tenancy and reduce repeat episodes of homelessness.

#### **With our partners, we will further develop our Family Support Strategy to ensure the right range and quality of services are in place to meet need**

- ✓ The impact of the Pandemic during 2020-21 meant that we've had to modify ways of working with children and families, to become more creative and innovative. Partnership working and communication remained central to this approach.
- ✓ A scrutiny exercise of the caseloads and working practices with the Family Support Services was undertaken and a more goal orientated and outcome focussed way of working developed, which better meets Service demand. This approach will be fully implemented from 1<sup>st</sup> April 2021.
- ✓ Weekly Resource Panel meetings continued to be held with multi-agency partners to ensure the best support is provided from the most appropriate resources, at a time that is right for the needs of children and families.
- ✓ A Regional Working Group has been set up with Swansea Family Support Services to ensure a more joined up approach is in place to support families with the right range and quality of services.
- ✓ A range of multi-agency training has been provided across the Family Support Services, to promote individual development and ensure best level of support is afforded to children and families.
- ✓ The Working Together Service continued to work closely with families during 2020-21 and in doing so, prevented the need for any children the service worked during this time from being admitted into care.
- ✓ With the global pandemic still affecting all areas of life, our Integrated Family

Support Services (IFSS) have continued to provide a focused approach to reaching families that require support with substance use concerns, so that the children in those families are given the right parenting to thrive.

- ✓ Ensuring we have a robust, rigorous and consistent Family Support Strategy in place to deliver the right range and quality of services to meet the needs of those children and families we support will continue to be a priority for the Service as we move into 2021-22.

### **Quality Standard 6 - Working with and supporting people to achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs**

*This is about helping people to improve their income, benefit from a social life and have a suitable place to live.*

We developed our first Supported Living Scheme for individuals with a mental health diagnosis. The individuals identified for the scheme transitioned from high cost residential placements.

We developed a pan-disability Extra Care Scheme consisting of a block of five refurbished self-contained flats. The support will be made up of one 24-hour staff member and additional targeted support if required. Individuals identified for the scheme will transition for residential care home for additional emotional support and supported living. We are currently in the process of facilitating 'meet and greets' for the individuals moving into the property and engaging with the new provider. All are expected to move in by October 2021.

#### Supporting People Gateway

The Supporting People Gateway was established in July 2017 to initially manage referrals for a new floating support service. This was extended in 2018 to include referrals for our Young Persons accommodation services, and a comprehensive referral, assessment and allocations process was developed in conjunction with support providers. During 2020, the SP Gateway was again extended to manage referrals for generic homeless supported accommodation, mental health floating support and accommodation, and substance misuse floating support.

The Gateway received 537 referrals in 2020/21.

## Homelessness and Housing

During 2019-20 a pilot was run which provided resettlement support for individuals who had experienced a mental health / homeless crisis and had been supported into permanent accommodation by a Homeless Prevention Grant funded service. Due to the success of this service, it continued into 2020/21.

As part of the Phase 2 Homeless Accommodation planning, funding was secured to replace one existing 3 bed shared house with 4 self-contained flats, with existing tenants successfully moved early 2021/22. Additional Phase 2 Homelessness Accommodation funding was also secured to develop a further 7 units of supported accommodation for individuals who are homeless / threatened with homelessness and have mental health / complex needs. It is anticipated that these will be fully operational during 2021/22.

We secured nearly £5 million of grant to build new affordable housing in NPT (including over £1 million of additional in-year funding claimed against underspend in other areas across Wales) and 91 new grant-funded housing association homes were completed during the year. Affordable housing is however delivered by housing associations both with and without grant, sometimes working with private housing developers when planning conditions require them to make an affordable housing contribution. Therefore, the total number of new housing association homes completed during the year, despite the constraints of the pandemic on the building industry, is currently estimated to have been at least 110.

As the pandemic hit the country the Welsh government instructed all councils to ensure all homeless were housed immediately, to allow this to happen the priority need restrictions were removed. As a consequence the demand for emergency interim accommodation rose from the average 40 to 140 almost overnight. To meet this demand a large number of additional accommodation was required.

As amenities closed down, the Ambassador Hotel and the L&A outdoor centre agreed to accommodate the homeless, with the support and funding from the Welsh Government the required support and various services were immediately put in place.

Demand remained extremely high throughout the year, the local social landlords all came together with some offering additional units to be used as emergency interim accommodation.

As the situation continued the Welsh Government provided an opportunity to apply for funding to create additional units of accommodation for the longer term, and a number of the schemes put forward were successful.

The pandemic drove the majority of the additional demand with relationship breakdowns and elderly people shielding and asking other family members to leave being the main reasons for presenting. The latter part of year saw Welsh Government providing additional funding to increase staff in the service to help to meet the additional demand and to also provide more support for service users, 13 new posts were in the process of being created.

#### Housing Renewal and adaptation service

As the pandemic hit the country the Disabled Facilities Grant service turned its focus in assisting the hospitals with getting people out of hospital and stopping people from being admitted into hospital, the DFG work came to a halt for some time, the majority of service users are elderly and were shielding. Some minor emergency work was carried out until the service resumed in the summer.

New working processes and procedures were produced during the lockdown period to suit the working from home arrangement and to suit the restrictions that were in place, this has proved to be very successful.

By the end of the financial year a total of 97 jobs had been completed with a total end to end time of 363 days, significantly different to the previous year due to the lockdown. A total of 457 minor adaptations were provided to people's homes through other budgets and processes. Activity of the service was impacted significantly by the lockdown, including individuals shielding who did not want people entering their homes.

#### Welfare Rights

The Welfare Rights Unit continues to help local residents via a self-referral or from Social Services; advice is provided on their benefits entitlement. The Unit offers a public helpline, support with form filling and representation at appeals tribunals, assisted via funding from Communities for Work. The Unit has provided a service throughout the COVID pandemic, albeit with its significant challenges due to the lockdown restrictions, no face-to-face meetings and appeals tribunals undertaken remotely, for example.

The Unit also continues to work in partnership with Macmillan, who provide funding for Macmillan benefit advisors; again this has been undertaken

remotely from the hospital settings. Despite the challenges, during the year, the Unit helped over 1,890 people and increased the benefit incomes of residents by £7.3 million.

### Welsh Language

Social Services continue to consolidate arrangements in relation to the Welsh Language throughout the COVID pandemic; Directorate senior officers work with corporate colleagues to promote and support the implementation of the Welsh Language Standards and the development of a Welsh Language Promotion Strategy. The Directorate received no Welsh language complaints during the year.

## Priorities for 2020-21 - What we said we would do and what we achieved

### **Working with strategic housing partners we will continue to prevent homelessness**

66.7% (226 of 339) of households were successfully prevented from becoming homeless (**Corporate Plan Key Performance Indicator target: 60%**), compared to 51.5% for the same period of 2019-20.

Due to urgent changes in legislation at the end of March 2020 as a result of COVID-19, temporary accommodation demand has increased by 140% in comparison with the usual average and new accommodation sites have had to be sourced. Part of this is an additional 18 RSL (Registered Social Landlords) units which are on short term leases initially but reviewed regularly in line with the demand.

Regular liaison meetings take place with RSLs both at management and operational levels to ensure continued communication and that all processes reflect the new level of demand. This ensures that RSLs and Local Authorities are working in the most efficient way possible when working towards rehousing vulnerable individuals.

Due to the ban on evictions, successful prevention was higher than predicted. However a further increase in demand is expected when the ban is lifted in summer 2021 and prevention tools for that will be determined at that time alongside discussions with RSL's to eradicate evictions into homelessness.

**We will target available funding to provide effective housing support for people identified as in need of additional help and support**

The Housing Support Grant (HSG) encompasses Supporting People, Homelessness Prevention and Rent Smart Wales Enforcement. The focus of the HSG is on homeless prevention - preventing people from becoming homeless, stabilises their housing situation, or helps potentially homeless people to find and keep accommodation.

Due to the increased demand as a result of Covid legislation changes, there has been a requirement to increase resources within the Housing Options service to meet that demand. An increase in the Housing Support Grant (HSG) has enabled the service to do that, 13 additional posts have been approved and recruitment will be finalised by end of summer 2021. This includes additional capacity for both prevention work and support within the service. There are also new projects funded via the HSG where partners will deliver specialist support which will assist Housing Options in meeting their statutory requirements.

During 2020/21 nearly 3,400 periods of support were provided to individuals and families with 2,300 individual, receiving floating support, and 1,063 individuals in supported accommodation.

**We will continue to provide Disabled Facilities Grants within the limits of the funding available to the Council**

The delivery of Disabled Facilities Grants (DFG) has been disrupted by the Covid-19 pandemic during 2020/21. There were sustained periods of inactivity due to the numerous lockdowns, while shortages in the supply of materials and labour have also caused significant delays. This resulted in increased time taken to deliver a DFG from an average of 196 in 2019/20 to 363 in 2020/21 and a reduction in the number of completed DFG's from 212 in 2019/20 to 97 in 2020/21. The **Corporate Plan Key Performance Indicator** target for 2020/21 was 230 average days to complete.

The demand for DFGs also dropped off as people were shielding in lockdown and did not contact the authority, this demand is expected to come into the service in 2021/2022 in addition to the normal demand.

**We will build on our work as Corporate Parents to ensure that all young people have suitable accommodation and support when they leave the care of the Council**



- ✓ Opportunities for care leavers have been impacted by the Pandemic. Although the Service has strived to maintain and support care leavers during what has been a difficult period for all, opportunities have decreased. This is an area where the Local authority will need to focus attention as we start to return to normality and further opportunities become available for our care leavers.
- ✓ The percentage of care leavers who were in education, training or employment continuously at 12 months after leaving care was 44.4% and 24 months after leaving care 41.9%. These figures are below target and significantly below previous years' results.

## **How We Do What We Do**

### **Our Workforce and How We Support Their Professional Roles**

Despite the pandemic putting a hold on face to face training, we offered a comprehensive on-line training programme which ranged from Autism awareness to safeguarding for disabled children and their families, and from digital coaching for foster carers to dealing with sexual violence disclosures. A total of 1,718 attendees participated in 265 training sessions.

Throughout the pandemic the Training Development Officers (TDOs) supported the service in its response to Covid-19 and set up a programme of training to train up volunteers prepared to work in the private care homes as and when necessary. They have delivered face to face training in client handling and e-learning opportunities for Manual Handling Theory to support the face to face training, also infection control, Managing Wellbeing through the Covid-19 Pandemic, and safeguarding. TDO's continue to support all services, internal and external, in relation to providing expert advice and guidance on Manual Handling issues and concerns and where necessary have provided on-site visits and training in individuals homes.

### **Our Financial Resources and How We Plan for the Future**

A decade of public sector funding pressures which has seen reduced resources and increasing demand, combined with the global pandemic mean that financial planning remains a challenge for the Council.

Senior officers receive monthly reports and quarterly reports are prepared for Elected Members. These reports monitor expenditure forecasts against the

Social Services budget which helps to identify trends, and highlight cost pressures and savings opportunities. Monitoring supports the budget setting process for the following year and the Council's **Forward Financial Plan** (FFP). The FFP sets out the Council's three year financial management approach, including projections, an assessment of key risks and our medium term approach to achieving the Council's key financial and service priorities.

### **Our Partnership Working, Political and Corporate Leadership, Governance and Accountability**

The Social Care, Health & Wellbeing Scrutiny Committee and Cabinet Board continued to remotely meet throughout the COVID pandemic, prioritising the issues, particularly in relation to the COVID response, as required. The Directorate enjoys the advice, support and guidance provided by its Cabinet Members, and indeed, the wider-Council.

Partnership working is paramount during the COVID pandemic, allowing the provision and sustainability of services, working closely with partners across the health, the private and third sectors.

#### Governance

The Council has adopted the 2016 Delivering Good Governance in Local Government: Framework (the Framework), developed by the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives (SOLACE). To comply with the Framework, the Council must publish an Annual Governance Statement (AGS), which explains the processes and procedures in place to enable the Council to carry out its functions effectively.

Corporate governance responsibilities and processes have remained in place throughout the COVID pandemic.

#### Complaints & Representations

The Social Services Complaints and Representations Procedure is based upon the good practice guidance issued alongside the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representation Procedure (Wales) Regulations 2014. The procedure is available to ensure that everyone who makes a complaint about social services in Neath Port Talbot has a right to be listened to properly. Their best interests must be safeguarded and promoted.

Their views, wishes and feelings must be heard. Their concerns should be resolved quickly and effectively.

The Complaints Team has worked remotely throughout the COVID pandemic; there have been a number of challenges, particularly in relation to no face-to-face meetings being possible. That said, staff have continued to provide a responsive service in supporting complainants in addressing their complaints and their desired outcomes, where appropriate.

A total of 37 complaints were received last year, a decrease on the year before (64 in 2019-20). We also received 125 compliments during the year.

### **Priorities for 2021/22 – What we want to achieve this year**

As we look ahead the Directorate has identified the following as our key priorities for the coming year:

1. To ensure a robust, resilient and consistent approach to safeguarding practice
2. To further embed outcome focussed practice within children and adults services
3. To support children and young people to live in safe, stable and permanent families and to ensure that only those children who need to be looked after are in care
4. To deliver the remodelling of Adult Social Care and Health services
5. To develop and embed a Discharge to Recover and Assess Model to support people to return home promptly and safely from hospital
6. To undertake a review of Operational provision of day services
7. Development of Early Intervention and Prevention Services

Each of these aims to ensure that those who access social care and support are treated with dignity, efficiency and empathy.

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