

# **SOCIAL SERVICES:** **WHAT WE DO, AND THE** **DIFFERENCE IT MAKES**

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**Director of Social Services Annual Report**  
**Wrexham**  
**2018-19**

This document is available in Welsh





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# 1.

# INTRODUCTION

*At the end of each financial year, every council in Wales must publish a report about its social services. This is our report.*

When people think about their council, they often think about the really visible stuff.

Emptying bins, fixing potholes, schools and lots of other services that touch our day-to-day lives, and are so tangible across our communities.

But Social Services is a great example of the less obvious stuff. Services that are less visible to people who don't need them – but make a massive difference to the people who do.

It's also a great example of how we respond to problems and circumstances on an individual level – doing our very best to make a difference to each person that needs us.

A lot of the things we help people with are complicated and difficult. We help people with major life-challenges. It can even be a matter of life and death. And the challenge we face in managing ever-shifting resources only adds to the complexity of our work.

But we're continuing to make a difference to lives all over Wrexham County Borough, and we're constantly learning from our successes, our failures and – most importantly – the views and experiences of the people we help.

At the centre of this is our workforce. Because none of this happens without the passion, skill and dedication of our employees. I want to thank them for continuing to make a difference.

I also want to take this opportunity to thank all of our Partners, their staff and volunteers, informal carers and families without whom we could not do our job.

Last but by no means least I want to thank all of the people we support for sharing their views, contributing to service development and helping us to do the 'right thing'.

We've made a lot of progress over the past year, and we'll continue to put individuals at the centre of what we do – listening to their views and helping them achieve the outcomes they want.



**Charlotte Walton**

Head of Adult Social Care & Interim Director of Social Service

# 2.

# SUMMARY OF PERFORMANCE

## *Background*

At the end of each financial year, every council in Wales must publish a report about its social services. This is our report.

The aim is to evaluate how well our services have been delivered, and highlight any improvements needed.

It's also a chance to explain how we're going to help people over the coming year – both people who need care and support, and carers who need our help.

As you read through these pages, you'll notice we talk about six 'quality standards.' These are part of the *Social Services and Wellbeing (Wales) Act* (we'll just call it the *Act* from hereon).

The format of this report reflects the requirements of the *Act*, and the need to measure the performance of social services around these six standards.

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

Finally, you'll notice we talk about 'outcomes' a lot. This is because so much of our work is focused on helping people achieve the end results they want to achieve.

# 3.

## WHAT PEOPLE TELL US ABOUT OUR SERVICES

*Our Quality of Life survey sent out annually to over 1000 people is an important measure of the difference our services are making*

Listening to the people we support is crucial. It allows us to deliver quality services that help people achieve what's important to them.

We're developing our approach to 'co-production', and we've learnt a lot through the work we've done to review our day and work opportunities services.

We'll use these lessons to help us listen to and involve service-users and partners in the future – so we can work together to find solutions.

Here's some insight into what people told us in 2018...

When we receive complaints, senior managers receive a copy to help identify issues or themes.

And every year, an annual review of compliments and complaints is considered by Councillors on our Scrutiny Committee.

So compliments and complaints provide useful feedback.

You can find information about feedback on our services in Appendix B at the end of this report.

### Feedback on intermediate care

Our *Intermediate Care Survey* helps us understand whether it the service meets the needs of the people who are referred to it, to either overcome a hospital admission, or to return home from hospital sooner.

Overall satisfaction with the service was high. 67% of people who responded to the survey felt that they were involved as much as they wanted to be in decisions about their care and support. The people we spoke to were also positive about the impact that the service had on their lives:

“They made me feel more confident”

“They helped me to be independent. Excellent service everyone. Thank you for my life back”

Whilst the majority of feedback we received was positive, a number of people raised concerns over the lack of consistency of staff, and especially those people delivering direct care. We understand how important consistency is for the people we support. These results will be fed back to the team so that the service can be improved.

## Feedback from carers

Our *Annual Carers Survey* helps us understand the impact we're having on carer's lives and from this we know we need to continue to improve our services for carers:

- 58% of carers felt that access to support from Wrexham *Adult Social Care (ASC)* was straightforward
- 66% felt their views were listened to
- 51% felt Wrexham ASC has helped to improve their quality of life
- 55% felt the help they receive from ASC meets their needs as a carer.

## Feedback on quality-of-life

Our *Quality of Life Survey* helps us understand the feelings of people we provide help and support to.

The questionnaire was sent to 1366 people. 23% of people returned a questionnaire. Here's the percentage of respondents who said they 'strongly agree' or 'tend to agree' with the following statements.

- The services I receive help my family to support me: 89%
- The services I receive improve my quality of life: 90%
- The services I receive help me to feel more secure and safer at home: 93%
- The services I receive help me cope with daily living: 94%
- The services I receive help me remain independent: 93%
- I have little control over my daily life: 58%
- I have little social contact with people and feel socially isolated: 53%

We know services support people to achieve positive outcomes however having control and social contact/isolation remain key issues.

## Feedback on Shared Lives

We've had positive feedback from people who use our *Shared Lives* service.

This includes the relationship people have with their carer, as well as the activities they're able to enjoy through the support they get, and the positive impact on their quality of life.

## Feedback on Community Agents

You'll read more about *Community Agents* later in this report – including some really good case studies.

But in the meantime, take a quick look at these comments from people who've received their help.

- “Very pleased with the service. Couldn't ask for more or less – been patient, diligent...put me on the right path to where I want to go.”
- “After it was suggested this was the right move for me, it's proved a success.”
- “I've always been treated with courtesy and understanding, and professionally.”

## How we act on what people tell us

We're trying to address some of the low-scoring areas in the *Annual Carers* and *Quality of Life* surveys.

And to help unpick some of the issues, we've organised further 'big conversation' events for early 2019/2020 to help co-produce solutions.

Working with colleagues at *Betsi Cadwaladr University Health Board (BCUHB)*, as well as the third sector, we used feedback to shape proposals for our new *Dementia Action Plan* funding – including boosting capacity within the *Side-by-Side* initiative.

We also want to develop a 'team around the individual' approach to care co-ordination – to ensure support from across health, social care and the third sector is co-ordinated and seamless.

We've been using coproduction as a way of working collaboratively with a wide range of stakeholders – including people who use our services, their families, carers and communities.

This is helping us plan for the future, as well as make decisions about current services. This hasn't been without its challenges. We've closed a number of our business projects that were no longer fit for purpose.

However, coproduction has meant we've been able to secure a new provider for Alyn Waters Café, whilst keeping opportunities for individuals who have a work opportunity there.

Last year we undertook a great deal of consultation and engagement work with people who use our services, their carers and families – as well as members of the general public – to help us develop our Adult Social Care Departmental Commissioning Strategy. This 5 year strategy has now been produced and fully reflects what people have told us matters to them.

# 4.

## IMPROVING WELL-BEING (The Six Standards)

*These are the six standards we mentioned earlier. There's a lot of information here, so we've split them into two sections - adult social care and children's social care.*

### STANDARD 1:

#### Helping people achieve the well-being outcomes they want

This sounds complicated, but it's simple really. We're talking about helping people improve their situation in a way that takes account of how they feel, and what they want.

### ADULT SOCIAL CARE

#### This is what we said we'd do

- Continue to implement an integrated health and social care *Single Point of Access (SPoA)* – moving the *Occupational Therapy* team into SPoA, and improving the flow into *Reablement*.
- Continue to train and develop our *First Contact Advisors* and *Social Care Assessors*, ensuring the full benefits are felt across all teams.
- Review how we use Project Work Support to deliver a clear service model and future commissioning options – helping to free-up domiciliary care capacity.
- Continue to review the range of support options for people with a disability – including telecare, aids and adaptations – to increase independence and reduce reliance on commissioned services.
- Continue to help people in out-of-county placements get back to Wrexham, and increase the use of supported living as an alternative.
- Work with other North Wales councils and *Betsi Cadwaladr University Health Board (BCUHB)* to develop clear service specifications for residential and nursing homes – setting out the outcomes to be achieved for residents, based on what matters to them.
- Develop services at *Park View* for people with autism and dementia.



## This is what we did

### Single Point of Access (SPoA)

We've worked hard to turn our front-of-house *SPoA* into a fully-rounded service that offers information, advice and assistance – with a clear focus on prevention and early intervention.

As well as helping to manage demand, it'll improve customer experience and 'flow' through the department.

Locating the *Occupational Therapy* service within *SPoA* has been a major factor, creating a more integrated and streamlined response.

We've also re-configured *Reablement* from an 'intake service' into a 'targeted service.'

Not everyone benefits from *Reablement* support, so we've developed pathways which are clear about *if* and *when* it's appropriate. People who won't benefit are directed straight to long-term domiciliary care.

It's early days, but we hope this new approach will improve people's experience, and reduce demand on important resources

### First Contact Advisors and Social Care Assessors

With our *Workforce Development* team, we're designing a rolling training programme for *First Contact Advisors*.

Teams are also producing operational guidance instructions to help advisors develop in their new roles.

### Welsh Community Care Information System (WCCIS)

We continue to prepare for the launch of *WCISS* – a new info-sharing platform that will help health and social care professional's work together.

As part of this, we've done a lot of work with colleagues at *BCUHB* to develop a joint record for the system.

### Domiciliary care capacity

Domiciliary care capacity is a major issue in Wrexham. There just aren't enough care-workers, and the sector is experiencing acute workforce challenges.

So we're providing financial and practical support whenever we can – including above-inflation increases to improve wage rates, workforce grants, training and workforce development.

We have also increased the number of domiciliary care providers we work with to help improve capacity. We have tried to do this strategically to avoid fragmenting the market.

The shortage means we can't always provide people with care straight away.

This makes it harder to promote people's independence, and creates additional pressure on families and our social work teams and delays discharge from hospital.

This remains a strategic priority, so we're working with the care sector and *BCUHB* to manage demand and increase capacity.

Some of the things we're doing include:

- Where possible, reducing double-handed care packages
- 'Right-sizing' care packages
- Successfully trialling innovative 'values-based' recruitment to encourage more people to apply for jobs in the sector.
- Piloting *Modern Apprentices* – again to encourage more people to think about a career in care.
- Focussing on workforce / integrated commissioning as part of our community services developments with *BCUHB*.

Despite these challenges the domiciliary care provided in Wrexham is high quality and we know people experience positive outcomes. Every year we survey people about their care services this year 94% of respondents told us they were satisfied with the care provided by their care provider.

## Project Work Support

To help tackle the capacity issues in domiciliary care, we've done a lot of work to 'right-size' the services we provide. In other words, to make sure we provide people with just the right level of support – no more, no less.

We've looked at demand, and identified opportunities for alternative commissioning arrangements.

Last year we focused on 15-minute calls. This year we've focused on Project Work Support – provided via domiciliary care agencies.

We've recruited a dedicated social worker to lead on this. As a result, our *Shared Lives* service is being developed to provide an outcome-focused alternative – lifting the pressure on care agencies.

All new project work support will be delivered in this way.

## Single-handed care project

Our *Occupational Therapy* team has worked hard with colleagues at *BCUHB*, as well as independent domiciliary care providers, to reduce unnecessary double-handed care-packages.

We've provided training to raise awareness of how single-handed care can be safely used with appropriate equipment.

And the team has worked closely with Therapists at *Wrexham Maelor Hospital* to help them specify more appropriately sized care packages for people when they're discharged thus avoiding people waiting in hospital for care at home they do not need.

We've also provided training for our contracted domiciliary care providers – to help them become more confident in safely supporting people on a one-to-one basis.

This work has produced some really positive results, with some people no longer needing a care package, and others needing support from just one carer instead of two.

## Supporting people with a disability

We've made it easier for people with learning or physical disabilities to have greater choice and control. And we're helping them be more independent, and less reliant on statutory services.

This has been the focus of the reassessments carried out as part of the changes to the *Welsh Independent Living Grant*.

## Case Study

Mr Z is in his late 40's. Over the years Mr Z has been supported by WILG and the Local Authority in 24 hour supported living accommodation.

Initially Mr Z required 24 hour support every day and assistance with all aspects of his social and wellbeing needs, from prompting with washing and dressing to making meals and maintaining personal hygiene. Mr Z particularly required support when in the community due to his lack of understanding in identifying risks. Mr Z would openly talk to strangers and could easily be targeted due to his vulnerability. Mr Z was a very anxious gentleman who did not like change; he was reluctant to try new things and lacked confidence. He was scared of upsetting people and for a period of time he was unhappy as he felt that he did not have a place within his local community and stated he felt "isolated and confused". Mr Z particularly experienced difficulties when encountering women in the community; he would often frighten them with his behaviour which led to conflicts on various occasions.

The Local Authority put in enablement plans to support Mr Z to develop his skills and independence. This initially began with Mr Z receiving prompts and encouragement to wash and dress on his own. He began to develop the skills and confidence to shower himself and take care of his appearance and personal hygiene. Mr Z was assisted to develop his skills to enable him to cook his own nutritional meals and maintain a healthy and active regime which not only had a positive impact on his health, but also made him feel more confident.

The biggest change Mr Z was supported to make was his interaction within the community. He was assisted to develop his awareness of safety, to interact with women appropriately and to find work opportunities. Mr Z now has "work friends" and he feels like he has a purpose. He now enjoys spending time participating in social activities such as the local disco which is held weekly.

Mr Z has developed the skills to keep himself safe at night within the home environment and he no longer requires support overnight.

While the WILG review process was taking place Mr Z received further enablement support and has developed his independence skills further and as a result has now decided to step down to a shared support model of supported housing. Mr Z is excited at the chance to have his own flat, the first thing he said when discussing this opportunity was "I'd love to have my own place, I can finally find a girlfriend and invite her to my flat and make a meal for her". Mr Z has also volunteered to help other tenants identified to move to the new development to "settle in" and he is currently looking for furnishings to make his new flat his own home.

Mr Z has progressed from being dependent on the support of others throughout the day and night with all aspects of his life, to now developing into a very independent gentleman who requires minimal amount of prompting to ensure his tenancy is maintained and his wellbeing outcomes are achieved. Mr Z is now in receipt of only shared support of 70 hours per week between 6 people in individual tenancies. Mr Z is able to access the community independently, he walks to and from work on his own, he is confident using public transport and he is self-advocating when it comes to making decisions about his life. He is able to cook for himself, undertake all domestic tasks with minimal prompting; he can undertake his own grocery shopping, do his laundry and access social activities without support. Mr Z has stated that since he has been supported to develop his skills and confidence and not require the support funded by WILG he has had increased independence and increased opportunities to do the things that matter most to him.

By building on the success of the *Community Inclusion Grant* and extending it to include community groups and activities for people with learning or physical disabilities, as well as carers and people with mental health needs, we are supporting the development of inclusive communities. Examples of initiatives we have funded include:

- Help to develop a resource pack to raise awareness of mental health
- The Choir with No Name, for people who are homeless; the scheme provides a safe and warm environment that offers food and drink and an opportunity to be part of a choir
- The Coedpoeth Care Group who provide a social club for people with a learning disability
- Wrexham homeless summer arts projects, which provides therapeutic art sessions and a warm environment for those who are homeless

It's early days, but we hope this will make it easier for someone with a learning or physical disability to access opportunities and activities in their community – offering an alternative to traditional location-based day services.

This includes making sure *Shared Lives* is available to people with a physical or learning disability.

We also re-tendered our *Telecare* service in December, and the new contract will provide greater support for people at their first point of contact – with all telecare installers trained to deliver information, advice and assistance.

There's scope in the contract to extend our preventative approach further, by enabling people to access telecare without having to be referred to *Adult Social Care*.

We're continuing to develop an enablement service for people with a disability, which – much like *Reablement* – will help people achieve more independence.

We've begun to make sure opportunities are picked up at both the point of referral and review – helping us identify early-on whether an individual would benefit from support.

Our *Integrated Care Fund (ICF)* - funded *Progression Service* also continues to work with providers to promote a person-centred approach, and the delivery of enablement plans to support independence for service-users.

This is starting to have a positive impact on the level of commissioned services provided to people with a learning disability in *Supported Living*... but it's still early days.

## Out-of-county placements and supported living

We continue to work with people in out-of-county placements, looking for opportunities to bring them back (or closer) to Wrexham.

We're trying to develop further bespoke services for people who need specialist supported-housing, and we're currently working with two individuals ready to move from out-of-county placements into supported-living vacancies in Wrexham.

## Residential and nursing homes

We continue to work with the *North Wales Regional commissioning board* to develop a clear specification for residential care homes. The specification will ensure a focus on quality services and outcomes, and will apply to all types of residential care – including younger adults and nursing care homes.

## Park View

The extension to *Park View* (our respite facility for adults) was completed at the end of last year.

We've already had a small number of referrals for people with complex needs who we couldn't support before.

We are investing in additional staff training and over the next year this service will grow and provide more opportunities for people who will benefit from this service.

## This is what we want to do in 2019-20

Review our domiciliary care commissioning arrangements, increase our share of the homecare market, and work with the *North Wales Workforce Board* and *BCUHB* to address the workforce challenges the sector is facing.

## CHILDREN'S SOCIAL CARE

### This is what we said we'd do

- Continue to implement the national social care IT system (*WCCIS*) across adult and children's services.
- Improve the timeliness of assessments.
- Finalise and implement the *Regional Care and Support Plan* documentation.
- Implement the *North Wales Referral Form*.
- Implement and monitor progress against our engagement action plan.

### This is what we did

#### Health and social care IT system

We hoped to move to a new national IT system in 2018 – called the *Welsh Community Care Information System (WCCIS)*. However, this was delayed due to circumstances outside our control.

We've retained our project team, revised our project plan and hope to implement the new system in 2019.

#### Putting children at the heart of assessments

So what about assessments? Well, we think children should be at the heart of it.

We've changed our approach, and try to do more to understand families' circumstances and what they want, as well as their strengths and capabilities.

We recognise that families – with a bit of help – can often meet their own needs, and don't always need social services. But if we believe a child is at risk, we continue to act without delay to safeguard their welfare.

The timeliness of our assessments was below the Welsh average last year, and while we've made progress, we still need to do better. Timescales are important, but so is quality.

When it comes to making sure children are seen as part of their assessment, Wrexham maintains high standards – even though this can sometimes affect timescales. In almost every case, children are seen as part of their assessment and we continue to be one of the best in Wales when it comes to this.

And again, it shows how we build everything around the child.

That's why seeing and talking with a child is at the heart of our assessment process.

## Understanding how a young person feels is crucial in meeting their needs, and the needs of their family.

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### Regional working

We've made sure our assessment documentation focusses on 'outcomes' – in other words, the end result.

But we need to do more with our care and support plan documentation, which we've been working on regionally to create a consistent approach across North Wales.

The delay with the new IT system means we haven't been able to complete this, but it remains a priority for 2019.

However, a regional referral form for agencies referring into children's services *has* been implemented across North Wales.

The referral should be informed by a conversation with the child and / or the parents or family – to explore what's important to them and the outcomes they want to achieve.

The new form should encourage a more consistent approach, enabling prompt and appropriate decision-making so children and families are supported at the earliest opportunity.

### Engagement

There are some areas of engagement where we do well, and others where we need to improve.

We're re-writing our engagement strategy to link with our wider corporate '*Involvement Strategy*', which runs from 2018 to 2022. We've previously put on 12 sessions of mandatory engagement training for staff in *Children's Social Care*.

One hundred and seventy one employees attended, and we now run two sessions every year for new starters.

As part of the *Social Services & Wellbeing (Wales) Act 2014* we're required to provide information about our teams and the roles of our professionals. We're updating the *Young Wrexham* website ([youngwrexham.co.uk](http://youngwrexham.co.uk)) so this is easily available.

Our *Young People's Care Council* and the *Senedd Yr Ifanc* (Wrexham's youth parliament) led a consultation to help us develop a child-friendly and easy-read complaints procedure.

This can be used by any council service that works with young people and their families (not just social care).

## Single Point of Access for young people

*Children's SPoA* remains the first point of contact for anyone making a new referral to children's services – including partner agencies and members of the public.

It also identifies families that might need early help, and signposts young people, parents and carers to services that can support them.

*Children's SPoA* is made up of various agencies and council departments, which means we can provide a wider range of information and advice.

Over the past year, we've made some big changes to *Wrexham Family Information Service (WFIS)*.

Various funding streams allow *WFIS* to provide information outreach, advice and one-to-one support.

It offers these services to parents, parents-to-be, people who find themselves in challenging circumstances such as refugees and asylum seekers, young parents, and carers who have children with disabilities and additional needs.

To make these services more effective and accessible, *WFIS* recently moved from Wrexham Library to the council's customer contact centre in Lord Street.

## Care Inspectorate Wales

Following our inspection in February 2017, *Care Inspectorate Wales (CIW)* visited our *Children's Social Care* department in January 2018.

Six cases were taken for examination and the need for further work and improvements were noted.

A follow-up visit took place in July, when inspectors also met with staff and management teams.

After re-examining the cases, *CIW* asked for an 'improvement-conference' and an action plan to address the main areas of concern around staffing, quality assurance and some departmental processes.

*CIW* was complimentary in its feedback about the openness and honesty of the managers it met, and noted that staff were "very motivated and committed to providing good outcomes for children." We developed an action plan, and the improvement-conference was held in October 2018. The things we discussed included:

- Working arrangements and how to make best use of office time and technology.
- Potential duplication in documentation and processes.
- Legal Planning Framework and Case Monitoring processes.
- Experience, skill-sets and the developmental needs of staff.
- Working with our *Human Resources* team to address vacancies in the department, as well as comparing pay and conditions with other local authorities.

The action plan and communications strategy were shared with *CIW* during the conference, and there were no recommended changes.

To promote staff engagement with the plan, a series of workshops were held throughout November and December 2018 to make sure every employee had an opportunity to contribute to ongoing developments and improvements in the department.

## Getting the views of young people and their families

We want children, young people and their families to understand that by attending meetings with us and giving their opinions, they're making a real difference.

The *Young People's Care Council* collects the views of all looked-after children and care-leavers in Wrexham.

And they make sure these views are listened to...and acted upon.

Their annual survey highlighted how important privacy is. So on this basis, and after successfully applying for a grant, here's what they did...

- They held a workshop for young people, facilitated by *No Barriers Theatre*, to explore how they could convey how important privacy is to them.
- They also worked with an organisation called *Fixers* to create a short film and presented it at a launch event that included *Foster Cares* and council staff, as well as other looked-after children and care-leavers.

In September 2018, we received a complimentary letter from the *Children's Commissioner for Wales* commending the work.

“I like it when people ask me what I think about changes.”

*Comment from a young person in the Citizen Survey.*

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## This is what we want to do in 2019-20

- *Finalise and implement the Regional Care and Support Plan.*
- *Implement the Welsh Community Care Information System (WCCIS).*
- *Improve the timeliness of assessments.*
- *Update and implement our Departmental Action Plan.*



## STANDARD 2:

### Working with people and partners to protect and promote physical, mental and emotional wellbeing.

This means helping people look after their physical, mental and emotional health.

## ADULT SOCIAL CARE

### This is what we said we'd do

Fully embed the *National Outcomes Framework* into all newly-commissioned services to ensure what matters to citizens is measured as part of our contract-monitoring process.

- Pilot outcomes-focused commissioning in domiciliary care.
- Fully roll-out social prescribing within *Primary Care* across Wrexham.
- Review *Direct Payment* arrangements and increase take-up – improving the support available, and working with people who receive payments to shape services going forward.
- Expand *Shared Lives* to provide a positive, person-centred alternative to traditional services, and work with colleagues across North Wales to develop a regional short-breaks service.
- Continue to work with partners to integrate social services and other services at *HMP Berwyn*, ensuring our procedures and practices are strong enough for when the prison reaches full occupancy.
- Prepare our social services response for men being released from *HMP Berwyn*, implementing a helpline and peer-mentoring.

### This is what we did

#### National Outcomes Framework

Our *Commissioning and Contracts* team has developed a new approach that ensures well-being outcomes are at the centre of our commissioning activity.

All specifications for newly tendered services are designed to be outcomes-focused. This includes embedding the *National Well-being Outcomes Framework*, and the nationally agreed well-being outcome indicators – ensuring we monitor services on the difference they're making to people's lives, rather than just counting activity and outputs.

This will continue as services are re-tendered and developed.

## Contract monitoring

We're reviewing our contract monitoring tools to ensure they're outcomes-focused and monitor what matters to people. A lot of work has been undertaken to engage with service-users, carers and providers to understand what 'good' care looks like across domiciliary care, residential care and supported living.

We're working closely with our regulators *Care Inspectorate Wales (CIW)* to get rid of duplication in our monitoring processes.

## Third Sector Workshop

Earlier in the year we held a joint workshop with Children's Services and the Third Sector. The purpose of the workshop was to explore how we could work better together and identify opportunities for how the third sector could help us to deliver on some of our key priorities. A joint action plan is being developed and will help inform our future service planning.

## Cluster-working

To help us respond to *Welsh Government's* review of health and social care (*A Healthier Wales*), preliminary work has started with colleagues in the *BCUHB's* East Area Team to see how we develop our services using a cluster or 'locality' model.

This will create a stronger community focus for community health and social care services, and support enhanced integration – enabling us to work better together to meet the health and wellbeing outcomes of local people. This will be a priority for the next 12 months.

## Social prescribing

Social prescribing is where GPs can refer people to community groups or activities – in much the same way they'd write a prescription for medicine.

The aim is to put greater emphasis on helping people achieve positive well-being, and *Community Agents* are playing a key role in how we're developing social prescribing in Wrexham.

They're developing strong links with their local GP practices – basing themselves at surgeries for part of the week (engaging with people in the waiting room), as well as engaging directly with GPs. Out of the 26 surgeries in Wrexham 15 are engaging directly with *Community Agents*

When they receive a referral from a GP, they work with the person to understand what's important to them and help them identify solutions.

Links with practices have been strengthened, with *Agents* attending regular GP cluster meetings. One of the cluster leads also sits on the *Community Agent Steering Group*.

These links have increased referrals to *Community Agents* from GP practices.

We're also working closely with *Primary Care* colleagues who've received funding to develop an enhanced social prescribing service for people with more complex needs.

A dedicated *Social Prescriber* works one day a week across the Hanmer and Overton practices, and a new social prescribing service for the whole of the county borough launched in January 2019.

## Case Study

A Community Agent describes how they helped someone experiencing isolation...

“A 52-year-old woman – suffering from arthritis, nerve damage and anxiety – was referred to me by her GP.

“She needed help with her Personal Independence Payment (PIP) review form, as she was unable to go the Citizen’s Advice Bureau in person because of her mental health.

“We discussed her isolation and what interests she had. She quite likes craft but doesn’t have the motivation or concentration to do anything at home.

“We discussed her mental health and anxiety, and how being isolated at home could sometimes make her anxiety worse. I offered to take her to an art group.

“I also asked if she was receiving any support with how to manage her mental health, and signposted her to *MIND* and *Advance Brighter Futures*.

“Later she rang me for support with her *Employment and Support Allowance* review form, and told me she had chatted with her GP and was being referred to the *Community Mental Health Team* to deal with a past trauma.

“She now feels ready to try to manage her mental health.”

## Direct Payments

If you’re eligible for help towards the cost of your social care, you can have the money paid straight to you (or someone you choose) – so you can decide how to use it. This is called a ‘*Direct Payment*’.

We’ve made good progress towards expanding our *Direct Payments* offer across Wrexham.

Key policies and procedures have been reviewed to ensure we’re compliant with the *Act*.

And it’s been agreed we’ll be able to provide people with pre-payment cards – to simplify the process of administering and managing payments (good for the department and for customers).

We’re consulting with people who receive payments, to help them move across to this new way of working.

Training has also been provided to social workers – so they feel confident promoting *Direct Payments* when talking to people with care and support needs. Revised leaflets and posters have also been developed.

A new third party support service was commissioned, ready for launch in April 2019.

The service will continue to provide information, advice and assistance to new and potential recipients about how to manage *Direct Payments*.

*Personal Assistants (PAs)* provide one-to-one support to people with a *Direct Payment*. To grow the number of people who receive a *Direct Payment* we need to recruit more *PAs*. The development of co-operatives or social enterprises, which will enhance the *Personal Assistant* market, is also a key requirement of this new service – as well as developing approaches that let people pool their payments to give them greater flexibility and choice.

Through the *Community Inclusion Grant*, the department is growing the number of local activities and groups that people can access with their *Direct Payment*.

Our vision is clear. People who need care and support should be able to access activities in their local community (with the support of a personal assistant if they need one) – instead of having to rely on traditional location-based day-care.

## Shared Lives

Our *Shared Lives* project is being expanded to offer not only day support for all adults, but also short-breaks as an alternative to care-home respite and adult placement. This will provide an alternative to residential care, and help people move towards independent living.

We've been working with PSS – an experienced Social Value provider – since November 2018 to deliver these new services in Wrexham. The key to their success is the recruitment of self-employed *Shared Lives* carers.

PSS is beginning to recruit carers, but it won't happen overnight. So in the meantime, people can still access respite in the usual way.

## HMP Berwyn

As the prison took in more men, we had planned to review our service offer. However, the increase in occupancy has taken longer than expected, so the original agreement is still in place.

*Adult Social Care* jointly funds an *Engagement Officer* employed by *BCUHB* to develop 'peer support' for the men at the prison.

Berwyn now provides accommodation for *Adult Social Care* staff working at the site, which helps us provide a full-time presence.

Occupational therapy and personal care is provided through an agreement with *BCUHB*, ensuring a timely and integrated response.

The planned helpline and peer mentoring has been delayed by accommodation issues at Berwyn, and employment issues.

Social services support for men being transferred to other prisons or released into Wrexham or North Wales is provided by a dedicated team of social workers managed by our SPOA team.

## This is what we want to do in 2019-20

- *Continue to develop and test our new outcomes-focused contract monitoring tools across all service areas – working closely with CIW to reduce duplication and ensure a more streamlined approach.*
- *Supported by the Community Services Transformation Grant bid - develop our approach to cluster based working in partnership with BCUHB and key stakeholders to develop more integrated health and social care community services.*
- *Work with Primary Care cluster leads to develop a clear model for social prescribing in Wrexham.*
- *Work with our new Direct Payment Support Service provider to achieve our strategic vision for Direct Payments,*
- *Work with partners to implement the Regional Learning Disability Strategy and the Learning Disability Transformation Grant bid.*
- *Work with partners to implement the Mental Health Transformation Grant bid.*

# CHILDREN'S SOCIAL CARE

## This is what we said we'd do

- Re-establish a recruitment officer role and implement a recruitment campaign to increase our pool of available foster carers.

## This is what we did

### Foster carers and recruitment

The increase in looked-after children affects all our social work teams, but places significant pressure on our *Fostering Team*.

The team is responsible for recruiting, assessing and approving foster carers.

It has to react quickly to requests for accommodation, think creatively about how to recruit new foster carers, meet statutory procedures with existing carers, and manage the increasing demand for kinship and viability assessments.

When children are placed with family members, the team has to undertake a '*Kinship*' *Foster Carer Assessment*.

Each kinship assessment also requires a viability assessment, and both are intensive pieces of work which detract from the team's core business of recruiting, assessing and retaining generic and therapeutic foster carers.

Also, once kinship carers are approved, they're subject to the same statutory visits and reviews, which further impact on the team's resources.

The challenge within the *Fostering Team* is finding a balance between recruitment and retention of generic and therapeutic foster carers, and dealing with the increasing demand for kinship care assessments.

Currently, the team doesn't have enough in-house carers to meet the increase in children entering the care system. So it has to use expensive agency placements.

To help expand the pool of approved foster carers, we recently appointed a recruitment officer to increase awareness in the community and generate more interest.

Their aim is to oversee the recruitment of generic and therapeutic foster carers – ensuring the needs of Wrexham's looked-after children are mostly met from in-house provision, and reducing our reliance on agency placements.

### Helping children with complex needs

We sometimes have children with complex needs who – rather than staying in residential placements – might benefit from therapeutic foster care.

So we've developed an approach for this – called the *Wrexham Repatriation and Prevention Project*.

Using *Integrated Care Fund* money, we've been able to expand it into a sub-regional model with ourselves and Flintshire, to further promote support for looked-after children who need complex therapeutic foster placements.

## Someone to turn to

We have a health board nurse based in our social services team. They work with health visitors, school nurses and paediatricians to help look after the children we're supporting.

We also support 11-18 year-olds who've been to hospital for self-harming and other risk-taking behaviour.

This is part of a project we've been running with the health board since 2006.

## Third sector workshop

To support collaborative working with the third sector, both adults and children's social care – along with AVOW – facilitated a workshop at Glyndwr University in October 2018.

This was well-attended by a range of services operating across the third sector. The aim was to look at how the sector can support social services and its priorities, what we can all do to remove barriers to effective partnership working, reduce duplication, and look at engagement methods to support a more co-productive approach to helping families.

The key messages from this workshop are being collated and will inform future service-planning.

## Helping families

*Flying Start* is a Welsh Government funded programme that operates in certain parts of Wrexham. It supports children from birth up until their fourth birthday, as well as their parents / carers.

The aim is to help children get the best possible start in life to promote their future growth and development.

The service employs a Social Worker, Mental Health Practitioner, and a Speech and Language Therapist to work alongside health and social care professionals and visit the homes of families that might need help identifying their needs early, before things escalate. This year the service has also successfully introduced 'baby yoga' and 'let's talk with your baby' programmes.

The service provides intensive health visiting support, support for early language development, parenting support and the provision of childcare for children aged 2-3 years.

All *Flying Start* services are free to families and information is available via midwives, health visitors and at the *Flying Start* office at Hafod y Wern.

**“I like it when people ask me  
what I think about changes.”**

*Comment from service-user via the Flying Start Facebook page.*

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## Case Study

*A Flying Start social worker describes how they helped a family...*

“Professionals within *Flying Start* had concerns about a family due to home conditions and the impact on the children’s development.

“The second child has a learning disability and the mother is worried that the two younger children will develop this too. The third child has poor attendance at school nursery and the fourth child isn’t mobile.

“The mother was sexually abused as a child and is also socially isolated and experiencing mental health problems. She’s also avoiding opening letters, which may lead to debt for the family.

“The father struggles to manage the mother’s mental illness and its impact on the family, and her low mood and anxiety is affecting her motivation to manage the inappropriate home conditions.

“The father also has a low mood but is managing to go to work. He came into the office requesting support.

“The family receive a care package from *Flying Start* consisting of intensive health visitor support (as well as being seen at the clinic), the language and play *Chatterbox* group, a family support worker, a speech and language therapist, and a primary mental health practitioner.

“Historically, the family have been poor at engaging with services. It’s also been difficult to gain access to the family home. There’s a long history of service involvement and non-compliance from the mother.

“An initial visit was made with the *Flying Start* mental health practitioner to discuss the referral. The mother was very anxious about a social worker visiting her home and its consequences.

“During the visit, the mother was reassured that my role was to empower her to improve her home conditions. She appeared to be reassured and agreed to me visiting again.

“At my first visit we completed the ‘home conditions tool’ together. This was to make her aware of the concerns and to enable her to make the changes.

“The assessment concluded that if the home conditions continue to be of concern, this would impact further on the children’s wellbeing. I adopted an open and honest approach and explained my concerns.

“The mother also appeared to be open with me and discussed her concerns. She said she was ashamed of her home and did not want professionals to visit until she had made changes.

“After the second week of intervention, the parents had cleaned the kitchen and bathroom. They had also cleaned the living room, and one of the children’s bedrooms. The living room was also free from clutter and the children had space to play.

“The youngest child is now walking independently. The parents are now managing to maintain the home conditions. To promote evidence-based practice, the home conditions tool has been revisited and positive changes have been recorded.

“The children now access play provision and nursery. The youngest child regularly attends the child minder. The mother has accessed *Flying Start* and external services to meet her own needs.

“Had the family not engaged with a *Flying Start* social worker to make improvements, there is the potential this case would have been escalated to *Children’s Social Care* due to the likelihood of significant harm.”

All our teams play an important role in making sure children’s health needs are being met, and all young people in care placements have a health-record and regular medicals.

## **This is what we want to do in 2019-20**

- Appoint a *Placement Officer* for the *Fostering Service*.
- Increase the numbers of generic and therapeutic foster carers to reduce our reliance on private providers of foster and residential placements.



## STANDARD 3:

### Safeguarding people from abuse, neglect or harm.

This means helping to protect people who might be at risk of abuse, neglect or other forms of harm or exploitation.

## ADULT SOCIAL CARE

### This is what we said we'd do

- Continue to develop our safeguarding policy and practice to reflect the change in legal duty under the Act, and to respond to new national policy and procedures from *Welsh Government*.
- Maximise performance improvements made possible by having an *Adults' Safeguarding Team* in place.
- Implement a new *Advocacy Service* contract to help manage demand, and increase choice and control for service-users.

### This is what we did

#### Safeguarding procedures

Wrexham's *Interim Adult Safeguarding Procedures* were approved by the council's Executive Board in March 2018.

Our *Adult Safeguarding Policy* was written to reflect the requirements of the Act, and outlines how we implement our legal duty.

On a national level, one of our senior managers is on the board overseeing the re-writing of the *All Wales Adult Safeguarding Procedures (Interim)*, and we're represented on the working group.

#### Adult safeguarding

The *Adult Safeguarding Team* has been in place since April 2018, resulting in an improvement in all related performance measures.

Our speed and timeliness in dealing with enquiries has improved tremendously, and a tracking system ensures no referral goes unseen – and that screening takes place within 24 hours.

The team also ensures individuals are at the centre of the process, with their views and wishes clarified through a 'what matters' conversation.

Each referral is overseen by a lead manager, who co-ordinates enquiries and takes responsibility for decisions.

The team has also improved how we work with other agencies, linking up with practitioners from *BCUHB* on hospital and health-based referrals – co-ordinating enquiries and ensuring information is shared in a timely way.

## Advocacy service

In *Social Care*, an advocate is an independent person able to help you express your views and make sure your voice is heard.

Between April and September 2018, 226 people were supported by our *Advocacy Service*.

We re-tendered the service in September, with the new provider starting in January 2019.

The new service makes clear provision for older people and adults with learning or physical disabilities, with a focus on developing self, community and peer advocacy.

*Independent Professional Advocacy (IPA)* will be secured for more complex cases, or where there's no one else available to advocate for the individual.

After speaking with a range of stakeholders, we've developed a detailed action plan in response to the report by the Older People's Commissioner for Wales called *Making Voices Heard: Older People's Access to Independent Advocacy in Wales' (2018)*.

Together with the newly commissioned service, this will help older people access a greater range of advocacy – as well as making it easier for them to advocate for themselves and make use of informal support networks.

When it comes to safeguarding referrals, the team will make sure the individual knows about the referral and – if they lack capacity – that the family / advocate is aware too.

### This is what we want to do in 2019-20

- Ensure the *Advocacy Service* is developing, and review the outcomes being achieved for people.
- Deliver the actions set out in our response to the *Making Voices Heard* report.
- Achieve 100% compliance with Re-X procedures

## CHILDREN'S SOCIAL CARE

### This is what we said we'd do

- Revise and update risk assessment documentation that underpins assessment analysis.
- Undertake a review of the *Child Sexual Exploitation (CSE)* Panel process in light of changes to national guidance in 2018.
- Ensure children's social care remains compliant with *General Data Protection Regulations (GDPR)* in line with the corporate programme.
- Undertake a review of the quality of child protection plans and implement any actions identified.

### This is what we did

2018-19 continued to be a busy year for the *Safeguarding People Team*, with increased demand for services and the team having to respond to a complexity of cases.

Following a long period of stability, staffing challenges with our *Independent Safeguarding Reviewing Officer* (ISRO) posts has impacted on the timeliness of our *Looked After Children* and *Child Protection* reviews.

We continue to work with our colleagues in *Human Resources* to support long-term stability within these roles.

In relation to our objectives for this year, we did make good progress.

Further training for all social work staff and managers has been ongoing throughout 2018-19 to support the development of our risk assessment model.

We've incorporated the risk assessment into the Section 47 process, reducing duplication and paperwork.

In line with the proposals set out in the draft national guidance for *Child Sexual Exploitation* (CSE), the remit of the *CSE Panel* in Wrexham has been expanded to incorporate all forms of exploitation.

This is now known as the *Missing-Exploited-Trafficked* (MET) *Operational Panel* and covers children and young people who are vulnerable due to missing-from-home episodes, being exploited (including criminal exploitation) and being trafficked. We also hold strategic *MET* meetings with colleagues in Flintshire – to look at any patterns, themes or trends across North East Wales.

The department has progressed well, ensuring it remains compliant with *General Data Protection Regulations* (GDPR) introduced in 2018.

We've updated our privacy notices on the council website, and have an accurate register of all our information 'assets.'

Work continues to ensure we have an up-to-date record of all the 'flows' of information in and out of the department as a record of our processing activities.

Moving forward, we plan to train all our *Information Asset Administrators* (IAAs) – who are mostly team managers – in how to use the electronic system to support timely and accurate recording of any changes to our assets and flows.

Following our regular safeguarding audits, we looked at the quality of our child protection plans, and we've been working with other local authorities to identify areas for development.

We've identified things we need to do, and included these in our departmental improvement plan.

## Info and training

We continue to produce a quarterly safeguarding newsletter, which we distribute across the council.

We also continue to provide councillors with training on our *Corporate Safeguarding Policy*.

The *Corporate Safeguarding Action Plan* has been updated to reflect emerging issues like 'County Lines' (gangs), Female Genital Mutilation (FGM), Modern Day Slavery (MDS) and PREVENT (Counter Terrorism)...and our responsibilities in helping to combat these problems.

## Engaging with children and families

We continue to try and increase participation of children and families in the child protection process. This is part of our departmental engagement strategy.

We've improved the way we engage with young people after they've been assessed and referred to our *Child Protection* and *Looked-After Children* processes.

Before every review meeting, we'll send them a child-friendly form they can use to tell us their wishes and feelings.

We now have feedback forms to get a better feel for how children find the meetings, and to shape how we do things in future.

The *ISROs* are working with foster carers, who will be providing a picture of children and young people placed in their care doing something they enjoy at each review – in order to promote 'life journey' work.

## Providing advice

We share information and expertise – both internally and with partner agencies – in lots of ways.

The *Safeguarding People Team* provides advice to staff who work with young people at risk of harm.

The expertise in the team helps provide a consistent approach to safeguarding across social services in Wrexham.

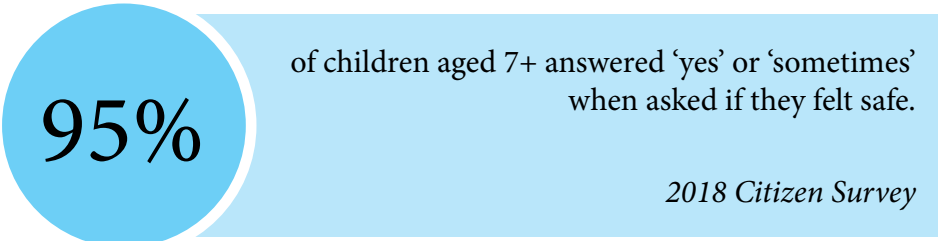
## Domestic abuse

We have a regional approach to domestic abuse and recently delivered training on how it affects children and their families. This training is available to our entire social care workforce.

We commissioned and delivered the '*Freedom Programme*' (Train the Trainer) throughout September 2018. This included '*Freedom Forever*' training for candidates who successfully completed the *Freedom Programme Facilitator Training*.

This training was widened to include partner agencies and through links with *BAWSO*, we were able to train a Polish-speaking facilitator – an area previously identified as a skills gap. (Note *BAWSO* stands for '*Black Association of Women Step Out*', but its remit is much broader than the name suggests, and it provides lots of services to ethnic minority communities.)

We've continued to play an active role in '*Safeguarding Week*', including a slot on *Calon FM* this year, raising public awareness and highlighting the issue of domestic abuse.



95%

of children aged 7+ answered 'yes' or 'sometimes' when asked if they felt safe.

2018 Citizen Survey

## A learning culture

You can never learn too much, and we're committed to developing a learning-culture here in Wrexham.

For example, recommendations from *Child Practice Reviews* (which look at serious incidents of abuse or neglect in Wales) are shared with our social services teams.

We use them to develop our procedures and shape what we do.

We also contribute expertise and resources to the *North Wales Safeguarding Children's Board* – which helps co-ordinate multi-agency work in the region.

## This is what we want to do in 2019-20

- Reduce and streamline the number of documents completed as part of the *Child Protection* process.
- Continue to work with colleagues in *Human Resources* to improve the stability of our *Independent Safeguarding Reviewing Officers (ISROs)* posts within the *Safeguarding People Team*.
- Review and develop the content of our child protection plan.
- Ensure *Children's Social Care* remains compliant with *General Data Protection Regulations (GDPR)*, in line with corporate timescales.
- Improve the timeliness of our reviews of *Care and Support Plans*, including those for looked-after children and children on the *Child Protection Register*.

## STANDARD 4:

### Helping people to learn, develop and participate in society.

This standard is about encouraging people to take part in society – helping them learn, interact with other people and be part of their communities.

## ADULT SOCIAL CARE

### This is what we said we'd do

- Fully embed and grow our *Shared Lives* service.
- Continue to expand the role of *Community Agents*.
- Complete and implement a full review of day and work opportunities.

### This is what we did

#### Shared Lives

As well as expanding our *Shared Lives* service to offer short breaks (see Standard 2), we've also expanded our in-house support to include adults with a learning or physical disability.

The aim is to move away from delivering Project Work Support through domiciliary care providers, and develop new opportunities that would enable people to be better connected to family and community life.

A dedicated social worker was appointed to review all cases, and although it's taking longer than anticipated, it remains a key priority for us. And given the capacity issues within domiciliary care, it's something we need to move forward quickly.

In light of this, we've decided to ask PSS (the same organisation commissioned to deliver adult placements and short breaks) to undertake this work.

#### Community Agents

*Community Agents* play a key role in how the Department supports strong and resilient communities – enabling older people to find local solutions to meet their needs, rather than having to come through *Social Services*.

As described in Standard 2, they provide an important link with GPs and a mechanism for doctors to signpost patients to community activities, rather than simply prescribe medication.

They also support the development of local activities and groups. A lot of their work continues to be with individuals who are vulnerable, isolated and need support to reconnect with their communities, or to navigate the often complex health and social care system.

The *Integrated Care Fund* provides for *Community Agents* across 23 areas, bridging the gaps between the local community and statutory or voluntary organisations.

Here are some reported outcomes in terms of older people:

- 88% of people questioned felt their contact with a *Community Agent* helped improve their motivation.
- 63% felt it helped improve their emotional health.
- 88% felt it helped lessen their sense of social isolation / loneliness.
- 88% said it helped to improve the quality of their life.

Assets-based community development training – a new way of working with communities that focuses on discovering and connecting the rich pool of talents and assets in a community to make positive and sustainable community change – was arranged for *Community Agents* in November and focused on how they can practically support people to get the best possible interdependent life, while at the same time, lessening dependence on public services.

*Community Agents* were introduced to innovative forms of working, including local area co-ordination, social prescribing, time-banking, and circles of support / community circles.

With the support of a range of stakeholders, we've developed a strategy to help us drive forward our ambitions around *Community Agents*, and determine what our priorities should be for the next few years.

## Case Study

**A Community Agent describes how she helped a person recovering from a stroke...**

"A 71 year-old lady had moved to live with her daughter in a new village. She had had a stroke, which resulted in her being in intensive care and meant she couldn't return to her own home.

"She had to re-learn how to walk and talk again. The lady was referred to me to help her engage with her new community, as she was isolated and didn't know anyone.

"She was provided with a booklet of all the social clubs and groups in the community.

"She liked the idea of fish, chips and bingo in the local church, so I arranged to walk her to the group and help her make friends.

"She also enjoyed painting, but hadn't done any since her stroke. The *Community Agent* had set up an art group, and the lady agreed she would like to go and see.

"She made friends with someone who lives across the hallway who attends the group, so she regularly visits with her in the afternoons. The lady has also made another new friend, and they are planning to attend another activity in the new year.

"With a lot of encouragement from the art group, she is now painting for the first time since her stroke. Her mobility is improving and she is more motivated.

"She's also agreed to teach at the art group. Her life is now full of people she has made new friendships with."

## Reviewing day and work opportunities – promoting independence and choice

We've been reshaping our *Day and Work Opportunities Service* to deliver a flexible, person-centred approach that achieves good outcomes for users, is sustainable and makes effective use of our resources.

We're developing strong links with communities, businesses, third sector organisations and community groups to identify opportunities for people now and in the future. This has also enabled Social Value organisations to play an important role in the well-being of Wrexham.

We are taking a phased approach to this work, breaking it down into manageable steps and ensuring we fully involve service users in making any changes, and supporting them to make decisions about their lives. We have involved families, carers and the communities of Wrexham to begin designing what services will look like in the future.

In Phase 1 we closed some small business projects run by the Department, and focused on supporting people who worked there as part of their work opportunity placement, to participate in opportunities in their communities. This has meant that we have been able to free Support Workers up to enable people to achieve their outcomes and develop new skills, rather than focus on day to day demands of running a business.

As a result, we're providing flexible choices and greater, more personalised opportunities to individuals – so they can access local services and be included in their community as equal citizens. Examples include volunteering opportunities in Ty Pawb, the Library, leisure centre, shops, a care home, a laundry service, as well as many opportunities to participate in activities and groups such as swimming, cycling, art and drama.

In Phase 2 we worked closely with the Environment Department to find a new provider for the Café at Alyn Waters. Using coproduction we learned what Park users, Café customers and people who have a work opportunity there wanted and what we needed to do to continue to build on the success of the Café. As a result of this work we made it clear the new Café provider would need to continue to offer work opportunities for people with disabilities.

We were successful in awarding the contract to a charity that is keen to work with the people we support and to continue to provide work and volunteering opportunities at the Park's Visitor Centre and Café. We are working closely with the new provider to ensure a smooth transition for individuals who have a work opportunity there and the café continues to be a success.

## Dementia-friendly town

We work closely with the *Dementia Friendly Wrexham Steering Group*, which aims to make Wrexham a dementia-friendly town.

One of our key actions is to ensure *Community Agents* – as well as community activities and groups funded by our *Community Inclusion Grant* – undertake *Dementia Friends* training.

All Community Agents – and six community groups – have received this training at the time of writing this report.

Officers have also worked with the *Environment Department* to develop assisted bin collections for people living with dementia.

A lot of effort has also gone into ensuring the ASC department and the wider Council achieves *Dementia Friendly* status.

As reported in previous years, *Dementia Champions* have been recruited from each Council



Department to raise awareness of the needs of people living with dementia and their carers.

There are now 12 champions across the Council, and they're responsible for delivering Dementia Friends training to colleagues.

It's important ASC leads on this, and all of our teams have received this training.

## Safe places

We've led the way in developing the *Safe Places* scheme for Wrexham.

It provides the security of knowing that people concerned about their own or others' safety have a 'safe place' to go in times of need.

Each 'safe place' is downloaded onto a mobile phone app. You can tap the app and it'll take you to the nearest safe place.

Individuals can also register to receive a *Safe Places* card, which details the people they would like to be contacted if they're feeling vulnerable.

The scheme is free to use and it's free for businesses to sign-up.

So far, 41 venues and 1 local taxi firm have signed-up to be safe places

You can visit <https://www.safeplaces.org.uk/member-schemes/wrexham-county/> to find out more about the Scheme.

## Autism

The *Integrated Autism Service* is now operational across North Wales, with a designated officer providing weekly drop-in sessions in Wrexham.

The aim is to provide information, advice and assistance to people diagnosed with autism, but who aren't otherwise eligible for care and support from ASC because they don't have a diagnosed learning disability.

We're expanding the support we offer to children, young people and adults with autism, and their families – both at community level and in terms of our statutory response.

We've begun to issue Orange Wallets to people with autism. This is a communication tool that can be used by people who find it hard communicating their needs to staff when using public transport.

And we're in the process of setting up a Project Board to develop our approach in collaboration with people with autism and their families.

We hope the same approach being used to make Wrexham a *Dementia-Friendly Council* and town, can be used to make Wrexham an autism-friendly place.

This fits with our vision to support the development of strong and resilient communities for all.

## This is what we want to do in 2019-20

- Implement the new *Shared Lives* daytime support service across all service-user groups, and decommission project work support from domiciliary care agencies.
- Continue to develop the *Community Agent* initiative in line with our co-produced strategy.
- Continue to develop Wrexham as a Dementia Friendly Council, by ensuring Dementia Friends sessions are a mandatory part of staff induction training across all departments.
- Continue to implement the findings of our review of day and work opportunities.
- Continue to develop and promote the *Safe Places* scheme across Wrexham. Training will be provided to venues, and the team will work alongside the police and police cadets, as well as raise awareness among *Neighbourhood Watch*.
- Work collaboratively with people with autism and their families to further develop our approach to ensuring Wrexham becomes an autism-friendly Council and town.
- With partners develop digital information, advice and assistance for people who need our services, and seek opportunities to promote digital inclusion.
- Improve how we provide information and advice within local communities, including working with partners to develop digital information, advice and assistance for people who need our services, and seek opportunities to promote digital inclusion..

## CHILDREN'S SOCIAL CARE

### This is what we said we'd do

- Progress work to incorporate *Personal Education Plans (PEPs)* within our *Care and Support Plan* documentation. This is linked to the implementation of the new health and social care IT system.
- Once finalised, implement the regional *Assessment and Support Plan for Young Carers*.
- Reduce the delay in accessing *Together Achieving Change (TAC)* services to be consistent with our preventative aims.

### This is what we did

Our education co-ordinator continues to support the young people we look after through school and college.

It's a really important job, and helps prevent or reduce disruption to their education (for example if they need to move to a new location or school).

## Personal Education Plans

We've amended the way we monitor timeliness of initial *Personal Education Plans (PEPs)* in line with the requirements of the Act.

Timeliness remains a challenge however, and the work to look at how *PEPs* are incorporated into the *Care and Support* planning process has been delayed until the new health and social care IT system is implemented.

## Achieving change

We have a *Together Achieving Change (TAC)* officer working within the *Children's SPoA* to help identify families in need of early help.

The *TAC* process is a way of organising and co-ordinating extra help for children, young people and their families who need additional support, but whose difficulties are not serious enough to involve social services.

Support can be offered on a family basis or just to an individual.

**“TAC has taken some of the pressure off and enabled me to allow others to chase things up so I can concentrate on being a mum. I feel more confident to find solutions to problems.”**

*Service user comment from a TAC evaluation form.*

It's been a milestone year for TAC as we celebrate 10 years since the roll-out of the service across the county borough.

A celebration event took place in December 2018 – attended by families who've received support from TAC, along with practitioners from other services who shared their experiences.

The team continues to work with families to ensure they benefit from early identification of need, and co-ordination and provision of multi-agency preventative support to improve their outcome.

The team continues to work with families to make sure their needs are identified early, and they benefit from co-ordinated multi-agency support.

A review of our *TAC* service and waiting lists has led to a change in practice – so now every family awaiting *TAC* intervention receives an introductory visit by our *TAC Co-ordinator* in the meantime.

This lets the family and the co-ordinator discuss their needs at an earlier stage.

## The First 1,000 Days

Wrexham remains one of two ‘pathfinder’ sites contributing to the *First 1,000 Days* collaborative programme.

In aiming to give every child the best start in life, the focus is on the first 1,000 days from conception to the age of two. This represents a period of rapid brain-development – essential for laying the foundations of future life.

Staff from *Families First* and *The First 1,000 Days* have also worked with the *Wrexham* and *Flintshire Home-start* organisation, local schools and *Women’s Aid* to develop an *Adverse Childhood Experience (ACE)* champion project.

This project will trial approaches to working in an ‘ACE’ or Trauma’ informed way with families, in a safe and trusting environment. Lessons will be shared with partners and good practice incorporated into policies, procedures and training as appropriate.

The project has now been awarded *Early Intervention* funding from the *North Wales Police and Crime Commissioner*.

The project is developing an expert ‘ACE Champion’ approach to family support, as well as establishing a hub for information, training and research on adverse childhood experiences.

## Supporting young carers

We also support young carers through our partners *Credu*.

To enhance regional working, *Credu* has implemented an assessment and support plan to encourage consistency across the councils it works for.

Young carers are children who look after someone at home (a parent, brother or sister for example) and often carry big responsibilities on small shoulders.

Advice and information, one-to-one support, outings and activities – as well as opportunities to meet other young carers – help these children experience things that might otherwise be impossible.

“I enjoy going to carers, as I’ve made new friends, learnt to do new things, and it gives me something to look forward to every two weeks. It’s always fun there and everyone is really friendly.”

*Feedback from a Wrexham Young Carers Group – 2018.*

## This is what we want to do in 2019-20

- Continue to reduce the waiting time between referral and intervention for *TAC* to prevent escalation of needs and the requirement for specialist intervention.
- Improve the timeliness of the completion of initial *PEPs* to ensure the needs of looked-after children are met at the earliest opportunity.

## STANDARD 5:

### Helping people maintain healthy domestic, family and personal relationships.

This standard is about helping people achieve healthy relationships at home and with the people they're close to.

## ADULT SOCIAL CARE

### This is what we said we'd do

- Fully embed the *Integrated Assessment* model to focus on outcomes and creative support-planning to enable people to achieve what matters to them.
- Continue our work to realise the ambition in the *Older People's Commissioner for Wales*' strategy 'A Place to Call Home?' And deliver the action plan we have in place.
- Continue our work with *BCUHB* and the *Alzheimer's Society* to improve support for people living with young onset dementia, as well as their families and carers.
- Continue to work with carers to complete our updated carers strategy and commission a new carers' information, advice and respite service.

### This is what we did

#### Integrated assessment

In response to the *Social Services and Well-being (Wales) Act, 2014*, we've adapted some of our frameworks and protocols.

We've introduced a suite of wellbeing documentation to support strengths-based, outcomes-focused assessments, and creative care and support planning.

This was piloted by the *Disability* team, and then implemented across the whole department. We're still embedding the new approach and the standard of recording isn't consistent yet, but there's clear evidence our practices are changing.

Guidance has been provided to all staff and a new practitioner toolkit is being developed.

We've used the new documentation when we've needed to re-assess people receiving care and support, and eventually all of our assessments will be done this way.

The documentation is completed with the involvement of the individual as far as possible. We focus on what matters to them, and do it at a time and place they find convenient – involving the people they want to be involved.

We always start with the presumption that the individual has the capacity to decide what's best for them, and their wishes and feelings are taken into account. 'Best interest meetings' work well when needed, and are outcomes-focused.

Over the past three years the number of *Mental Capacity Assessments* has increased, and this reflects the growing needs and complexity of the people we're working with.

Services are provided to each person based on a plan they've developed with their provider, and this is reviewed regularly.

To ensure the timely authorisation of care and support plans, we've increased the level of financial delegation to assistant team managers and team managers.

The authorisation process includes 'supportive challenge' – to ensure quality, and to make sure all options have been explored.

## 'A Place to Call Home?'

We've developed an ambitious plan to help meet the requirements set out in the care home review by the *Older People's Commissioner for Wales*.

We've developed the plan with colleagues from our *Workforce Development* and *Contracts and Commissioning* team, as well as *BCUHB*.

By working with managers and care-home owners, we're making positive progress in Wrexham towards enabling older people to achieve a better quality of life.

A lot of this work focuses on improving the day-to-day experiences of older people in long-term care, by improving opportunities for social interaction and community engagement.

One area of focus is the needs of older people living with dementia – with substantial plans in place to develop our training for care home staff and managers.

And by working collaboratively with colleagues from across social work, commissioning and contracting, as well as with colleagues at *BCUHB*, we'll ensure service-user feedback helps us to continuously improve.

## Young onset dementia

Since September 2017, we've been working with the *Older People's Community Mental Health Team* at *BCUHB*, and the *Alzheimer's Society*.

We've been developing an age-appropriate and person-centred model for community-based support for people living with young onset-dementia.

As a result of this collaboration, the *Alzheimer's Society* delivered a carers' information programme. The sessions were held at Ty Pawb, and were funded through the *ASC Community Inclusion Grant*.

As well as providing information, it gave carers an opportunity to meet service providers – including an *Alzheimer's Society* advocate, an older people's social worker, a fire service officer, a *Shared Lives* provider and a young onset dementia mental health nurse.

The carers found they had a lot of shared interests and – supported by the *Alzheimer's Society* – continue to meet up socially, along with the people they support.

Following the programme, an additional 'community engagement' session was offered by our *Commissioning Team* at Ty Pawb.

This explored people's interests and connections to community activities, helping to identify groups who would benefit from *Dementia Friends* sessions.

Carers were also introduced to Dewis Cymru, the role of the *Dementia Friendly Wrexham Steering Group*, and the work of our *Community Agents*.

Joanna Hughes, from the *National Exercise Referral (NERs)* programme, also came along to talk about outdoor activities, including walking groups, cycling and strength and balance classes.

After attending the session, one lady with young onset dementia was put in touch with a local art group and a music therapist who could offer piano lessons (part-funded through a *Direct Payment*).

We want to repeat these sessions with a new group of diagnosed people and their carers early in 2019 – and we're considering one-to-one sessions at home for carers who can't attend.

Alongside this, the *Alzheimer's Society* will offer a '*Living Well with Dementia*' programme.

We've also been able to enhance the support we offer through the Welsh Government Dementia Action Plan funding.

Following discussions with key partners, the following projects were approved for 2018/19 and 2019/20.

- *Community Development Fund* – a £15,000 grant pot is available to help stimulate community-based support for people living with dementia, and their carers. To support this, our *Community Agents* are building stronger connections with the *Alzheimer's Society* to help identify unmet needs in our communities.
- *Virtual Reality Dementia Tour Bus* – the bus provides people with a glimpse of what it's like to live with dementia, and will visit communities across Wrexham to help raise awareness and reduce stigma.
- Specialist dementia training – we've used the funding to enhance the specialist training we offer providers.
- Project management resources – to help us provide strategic direction and identify best practice across health and social care, as well as support the development of a 'team around the individual' (an approach which aims to put the needs of the service-user at the centre, ensuring they're connected and informed).
- A community-based exercise and education programme – aimed at maintaining and improving activity levels, nutrition, communication and functional independence at all stages of the disease.
- *Dementia Community Support Services* – commissioned from the *Alzheimer's Society*.
- Short-term respite – providing a bed within a residential care home to support people being discharged from hospital, and to help avoid people going into hospital when they don't need to.
- Support for people being discharged from hospital – specialist discharge support at *Heddfan*, the older people's mental health unit at Wrexham Maelor.
- Increased social work capacity – to support the growth in demand and provide timely support.

## Carers' strategy

We've combined carers information and advice, and carers respite services, into one integrated *Carers Information, Advice and Respite Service*.

This is now delivered by Social Value Organisation *NEWCIS*, allowing us to achieve greater synchronicity between the two elements.

And by commissioning respite via *NEWCIS* rather than domiciliary care agencies, we've been able to reduce the demand on the domiciliary care sector – helping to free-up capacity.

Under this new contract, *NEWCIS* delivers respite options, including short-breaks and regular planned respite. This allows us to provide more individualised support to meet carers' needs.

Since August 2018, 'what matters' conversations with carers are completed by both social workers and *NEWCIS* meaning Carers can access support directly with *NEWCIS* without having to come through social services first

We hope the new contract will help to increase the number of Carer's assessments completed because we know carer's who have had an assessment benefit from this:.

Our annual carer's survey identified that:

- 53% of carers were offered an assessment.
- 77% accepted the offer.
- 88% felt the assessment fully or partially helped them in their caring role.

We continue to offer support to carers through our *Carers Direct Payment Scheme*..

Carers can apply directly via our website or through their social worker or *NEWCIS*.

Here's some stats that provide a snapshot of how we're supporting carers.

- 155 people were supported by *NEWCIS* for information, advice or assistance between August and October 2018 (up from 121 in the same period the previous year).
- 35 people were supported by *NEWCIS* for respite between August and October 2018.
- 20 Direct Payments (totalling just under £6.5k) were awarded to carers between August and October 2018. The money has been used for things like recliner chairs, decorating, driving lessons, gym membership, laptops, short breaks, gardening tools.

## Case Study

### How we helped a carer...

"A wellbeing officer attended a dementia carers group to give everyone the chance to discuss their roles and what support was available through *NEWCIS*.

"One carer raised multiple concerns and it was agreed the officer would visit their home to discuss things further.

"*NEWCIS* facilitated the home visit with the carer to discuss their caring role and what support was available to them already, as well as the support *NEWCIS* was able to provide and any further support that may be available.

"The carer had been poorly recently – at one point having an ambulance to the house – and was worried about what would happen to the person they were caring for.

"So the officer discussed the carer emergency plan, *Care Link*, health respite and legal support in relation to Power of Attorney.

"They also talked about carer breaks, the *Bridging the Gap* scheme, registering with a GP as a carer and other things that could benefit their wellbeing – as well as finances, family support and contact methods.



“They’ve now been placed on the list for a break at *Faenol Fawr* and one at *Llys Awelon*, and feel more informed and confident.

“They feel they’ve been given the tools to continue caring – secure in the knowledge that if something happens, the person they care for will still get the support they need. “They’re looking forward to a break with the person they look after, and enjoying time away with the support of *NEWCIS*.”

## This is what we want to do in 2019-20

- Work with care homes to develop a ‘you said we did’ approach to managing feedback from people living in residential care, and develop a Quality Standard for care homes.
- Work with people living with dementia – including people with young onset dementia – and their carers to better understand their needs and co-produce solutions.
- Work with carers of adult children with a disability to help them plan in advance for the future living arrangements of their children.

## CHILDREN’S SOCIAL CARE

### This is what we said we’d do

- Implement an outcomes-document for the *Prevention and Support Service (PASS)* that evaluates the success of its interventions.
- Continue to support our family centres in their efforts to become paperless.
- Develop our post-adoption support services to help children with complex needs.

### This is what we did

#### Clearer documentation

We’ve refined our referral documentation and process into the *Prevention and Support Service (PASS)* both for the Core Team and Waking Hours – providing greater clarity about what support is being requested.

An outcomes document has also been designed to help us evaluate not only our successes, but also where we can do better or learn lessons from the interventions we offer.

#### Supporting families

The *Waking Hours Team* has been fully operational since June 2016.

The team aims to deliver services between 7am and 10pm, 7 days-a-week – allowing workers to support parents with routines, behaviour-management and developing positive relationships within families.

The team also assists with foster care and adoption placements at risk of breaking down, as well as providing support for adolescents aged 16+ struggling within the family home or in supported lodgings.

The team has a child-friendly venue where staff undertake direct work and supervised contact with service users. The approach is proving effective and we're committed to its development.

“Thanks for everything. I have been through a lot the last couple of months and you have helped me so much.”

*Feedback from a service user on a PASS evaluation form – 2018.*

The PASS team has added to its provision of supervised contact and one-to-one support. It now offers *Family Group Meetings, Return Home Interviews and Parenting (PAMS) Assessments*.

## Case Study

**The PASS Team describes how it helped a mother and her two-year-old child...**

“Referrals were received by the PASS team for supervised contact, parenting assessment and *Waking Hours* one-to-one support for a two-year old child who had been placed into foster care.

“Initially the birth parent’s engagement with supervised contact was very poor. Mum showed significant anger towards Children’s Service’s due to her previous experiences as a child.

“*The Family Support Worker (FSW)* considered mum’s anxieties and own negative parenting experiences within her approach – resulting in mum’s engagement significantly improving.

“The *FSW* helped mum understand the importance of putting her child’s needs before her own, implementing boundaries and dealing with behavioural issues in the moment.

“Mum’s engagement improved to the extent that she not only worked well within supervised contact but when a second *FSW* started the *Parenting Assessment*, she continued to engage well, with full attendance and compliance.

“Following the recommendations from the *Parenting Assessment*, an *FSW* from the *Waking Hours* team provided one-to-one support – working with mum towards the child being returned home on a rehabilitation plan. The work focused on parenting, routines and boundaries.

“Mum engaged very well and remains in professional contact with *FSWs* regarding parenting support. The outcome being that the child was successfully returned home with continual low-level support from *Children’s Services*.”

## When young people go missing

Wrexham was one of the first councils in North Wales to introduce a ‘*Missing from Home Co-ordinator*.’

This post ensures young people reported missing are visited and seen within 72 hours of returning home, and are assessed for vulnerabilities in relation to exploitation.

Our co-ordinator liaises regularly with our colleagues in health, education and the police.

### Case Study

#### How we helped protect a young person from criminal exploitation...

“A referral was received from *SPoA* in the form of a police notification (CID 16) relating to a 16-year-old male ‘Missing from Home’ (MFH) in Wrexham.

“The *Missing from Home Co-ordinator* identified the ‘placing authority’ (the council from the young person’s home area), as the individual was from out of county. They made contact with the allocated social worker to offer a *Return Home Interview* and then went on to speak to staff from the placement to arrange a time and date to visit.

“Over the following nine months the co-ordinator completed 23 *RHI* with the young person and attended three strategy meetings.

“During this time the co-ordinator built a positive professional relationship with the young person, which enabled her to collate geographical and associated peer group information. The co-ordinator was able to forward this information to the specific department within *North Wales Police*, the placing authority and the local authority where he was placed.

“As a result, the young person received support from Barnardo’s *Independent Child Trafficking* service and the information was shared at multi-agency *Child Criminal Exploitation (CCE)* meetings, which were held due to the intelligence gathered from the *RHIs* and other sources.

“The information also helped the police in mapping areas of concern to enable them to target resources to protect more young people from becoming involved in *Child Sexual Exploitation (CSE)* and *Child Criminal Exploitation (CCE)* related behaviours.

“As a result of all the support given to the young person he was moved out of the area to safeguard and support him, and to enable him to make positive life choices.”

### ‘Edge of Care’

We’ve seen a significant rise in children becoming looked after.

In light of the financial constraints imposed on councils and the need to provide good quality outcomes for all children and young people who access our services, we’ve reviewed our approach to accommodating children and young people.

In 2018 we introduced the ‘*Edge of Care*’ Panel. With this multi-disciplinary approach we aim to manage the threshold for access to the looked-after system, ensuring resources are appropriately identified and allocated.

The panel will act as an additional check-point for social workers and other professionals to ensure all avenues have been fully tested and exhausted before a child or young person is brought into care.

Research indicates that children / young people and their families achieve the best outcomes when intervention is targeted early, and before they reach statutory levels of intervention. It's been established that children and young people who live with their parents and/or birth families on balance achieve better outcomes when compared to those looked after by the local authority.

Our '*Edge of Care*' approach is to support children and young people to remain with their birth families whenever it is safe and possible to do so.

We also intend to use the panel to review and assess the existing *Care Planning and Permanence* arrangements of children in our care, to ensure the placement continues to meet their needs now and in the future.

### Helping foster-carers build positive relationships

In Wrexham, we continue to support the *Confidence in Care* programme. This is a *Big Lottery* funded programme aimed at training 1,500 foster carers in Wales to raise their confidence and improve placement stability.

The course runs for 12 weeks on an annual basis, and teaches foster carers different techniques to build positive relationships with the children and young people in their care.

*Wrexham Fostering Service* is also introducing a new 'buddy scheme' to support foster carers. The scheme will launch in 2019 and will be trialled for 12 months and then reviewed. The aim is to utilise the skills and experience of existing foster carers to support newly approved carers.

### North Wales Adoption Service

Wrexham continues to host the regional *North Wales Adoption Service (NWAS)*, which helps place children who can't return to live with their parents.

In Wrexham and across the region, there's an increasing number of children waiting to be adopted. These children are available for adoption, but suitable matches haven't been found yet. This reflects a national trend of a shortage of adopters.

Many of the children waiting to be adopted are older or have extremely complex needs, which makes finding an adopter even more difficult. Recruitment of adopters remains a challenge for the service across North Wales.

A planned review of *NWAS* was undertaken and completed in 2018. This made recommendations relating to the governance and structure of the service and around post-adoption support services. Recommendations from this review are being taken forward in 2018/19.

### Family centres

The council has two family centres that provide a range of services. For example, the *Parenting Team* offers early intervention for families who need parenting support – including one-to-one help and group sessions.

Both family centres provide *Flying Start* services for children who need extra help and support with their development.

We relocated our Dean Road family centre in Borras to a more central location in Rhosddu.

This centre is called *Tŷ Ni* and offers a more modern and child-friendly environment for service users.

We now offer a parenting drop-in service for families on our waiting list for one-to-one support, or for families wanting to know more about our service.

The service is offered once-a-fortnight on a Thursday evening at *Tŷ Ni* and this is alternated with a Thursday morning at *Idwal Family Centre*. People can call and discuss any issues or needs relating to parenting, enrol on future parenting programmes or gain general advice and support.

There's also intensive support for families affected by substance misuse and domestic violence. This includes the *Freedom Programme* for mothers who are victims of domestic violence.

**“Very grateful for all the support to me and my children. I was at a low point. Project went above and beyond to help me.”**

*Feedback from a service user who benefitted from a Parenting programme - 2018.*

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### **Helping families with parenting problems**

The *Integrated Family Support Service (IFSS)* is a multi-agency team that works directly with families experiencing parenting difficulties due to substance misuse or other complexities – such as mental health or domestic violence.

*IFSS* intervention consists of an intensive 4-6 week programme, followed by a less intensive phase of up to 12 months.

**“Very grateful for all the support to me and my children. I was at a low point. Project went above and beyond to help me.”**

*Feedback from a service user who benefitted from a Parenting programme - 2018.*

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In line with the agenda set out in the *Social Services and Wellbeing (Wales) Act*, *IFSS* expanded its remit in 2018 to develop a more preventative approach.

The service is piloting an approach of working with a case at the *TAC* level to see if this prevents the need for a family to access care and support via statutory services in the long term.

*IFSS* is also running the ‘Pause and Reflect’ project. This provides targeted support – including sexual health services – to women in Wrexham and Flintshire. The project is exclusively for women at risk of repeat pregnancies followed by the removal of a child.

The project aims to provide holistic support to women to enable them to achieve positive futures.

## This is what we want to do in 2019-20

- In line with the outcomes of the review, introduce a new regional funding model and a new service structure for *NWAS* to ensure it can meet the increased demand for children requiring adoptive placements.
- Review the impact of the '*Edge of Care*' Panel in reducing the numbers of looked-after children.
- Develop a pool of sessional workers to help prevent family breakdown.

## STANDARD 6:

Helping people achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs.

This means helping people improve their income. As well as helping them benefit from a social life and a suitable place to live.

### **ADULT SOCIAL CARE**

#### **This is what we said we'd do**

- Working with *Pennaf*, we'll ensure that apartments are allocated to people who would benefit from the new extra-care facility in Wrexham. We'll also work with the new provider to maximise the community benefits of the scheme.

#### **This is what we did**

##### **Extra-care housing**

Extra-care housing has been increased with the development of *Maes y Dderwen* in the centre of Wrexham.

We've undertaken the scheme with *Pennaf Housing Association*, and the facility – alongside our existing one at *Plas Telford* – provides 112 apartments across the two schemes.

Based on the 'thirds model', extra care in Wrexham is structured to provide support to people with low, medium and high support needs.

At the higher end, the model reduces demand on residential care and will improve older people's level of independence, as well as enhance their experience of assisted living.

Our in-house service is the care provider for both schemes – ensuring the focus is on reablement. Allocations are looked after by the Manager and Assistant Team Manager in our *Older People's Team*.

Our OT team continues to work closely with Housing to ensure that people's houses are suitable.

##### **Supported Living**

We have worked closely with our Housing Department, Registered Social Landlords and the Welsh Government to enhance supported living opportunities for adults with a learning and/or physical disability. Six Schemes have, or are in the process of being developed, offering either enhanced 24-hour support, or semi-supported floating support for up to 27 people. All properties are bespoke in design and offer safe, secure housing people. We are working closely with our Progression Service and contracted Supported Living Providers to make sure that tenants are able to be as independent as possible whilst living at the schemes.

## This is what we want to do in 2019-20

- Work with the *Supporting People* Team to review the model of care and support within our extra care schemes – ensuring independence is promoted.
- We'll work closely with colleagues in our housing department to inform the future development of the *Older People's Housing Strategy* and the *Housing Strategy*.
- Continue to develop innovative models for Supported Living, utilising the Integrated Care Fund and other grants.

## CHILDREN'S SOCIAL CARE

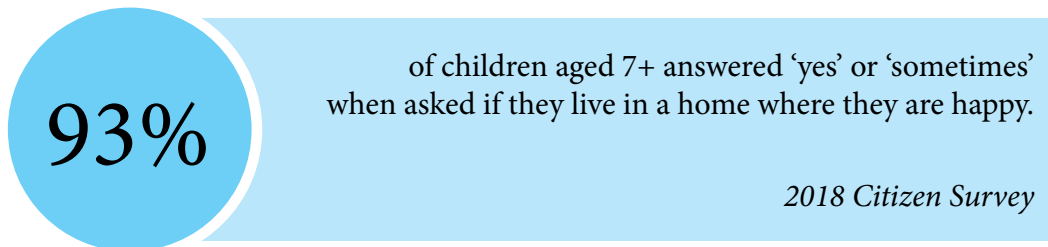
### This is what we said we'd do

- Look at housing options and 'move-on' accommodation for care-leavers to support stable tenancies.

### This is what we did

#### Making the right decisions

The *Children's Single Point of Access (SPoA)* team includes a housing officer, who helps us make the right decisions in social services and the housing department.



#### Helping families find somewhere to live

Families evicted from council housing often find it difficult to get new accommodation, and can fall into a cycle of homelessness.

Aside from the negative effect on families, it can also add to the pressure on resources for tackling homelessness.

The housing officer plays a key role in preventing homelessness by sharing knowledge and information that helps parents struggling to keep up with their rent.



## Helping young people avoid homelessness

Working with *Children's Social Services*, the housing officer will also help 16 or 17 year olds who tell us they're homeless.

And we have an additional post based in our *Leaving Care Team*, helping young people on the edge of care build bridges that allow them to remain at home where it's safe.

Locating the housing officer in the *Children's SPoA* has strengthened relationships between housing and children's social services, which is a positive thing for children and their families.

## Positive Pathway

The *Welsh Government 'Positive Pathway'* framework promotes support for young people on their journey to economic independence and success through housing advice, options and homelessness prevention.

This ties in with *Barnardo's 'Care Leaver Accommodation and Support Framework'*, which is specifically for young people leaving care in Wales.

## Helping young people achieve independence

We also have access to the *St David's Day Fund*, which is a two-year grant to help people aged 16 to 25 who are still in care – or leaving care – progress towards independence.

The fund is used to support them with their education, housing, employment, or general health and wellbeing.

Following a *Welsh Government review from April 2019, Families First, Flying Start, Out of School Childcare, St David's Day Fund, Promoting Positive Engagement and the Communities First Legacy Fund* will be amalgamated into one grant-funding stream known as the '*Children's and Communities Grant*'. This will let us use grant resources where and when they're needed.

This will also lead to a second fund known as the '*Housing Support Grant*', which amalgamates *Supporting People, Homelessness Prevention and Rent Smart Wales Enforcement*.

In simplifying grants, *Welsh Government* aims to enable local authorities to explore opportunities to redesign services, drive sustainable long-term preventative approaches and improve outcomes for vulnerable people.

## Breaking the cycle of homelessness

We continue to run the *Family Aide Scheme* – part of *Welsh Government's 'Supporting People'* programme.

This aims to break the cycle of homelessness and ensure families can remain in their community by giving responsive housing support. The service is highly regarded by the families that use it.

“I was not aware how much I needed the service when it was offered. It helped take the pressure off when dealing with other services.”

*Family Aide service evaluation form – July 2018*

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There is a duty on councils to allow fostered young people in stable placements to remain until they're 21...or 25 if they're in higher education.

The scheme is called *When I am Ready* and although there's no additional funding for it, all North Wales councils have worked together to develop the scheme.

Take-up has been consistent with predicted demand for 2018-19.

### **This is what we want to do in 2019-20**

- Reduce homelessness among care-leavers by continuing to increase the number of supported lodgings placements available.

# 5.

## HOW WE DELIVER FOR OUR CITIZENS

### A. DEVELOPING OUR WORKFORCE

Our *Workforce Development Team* continues to provide a wide range of training opportunities for council staff, as well as people employed across the health and social care sector – including providers, the third sector, personal assistants and informal carers.

The indicative training support programme from the Welsh Government via Social Care Wales is £441,696.

This includes the £309,187 grant, as well as a 30% match-funding council contribution of £132,509.

The council also invests £303,985 with a total investment of £745,681 in workforce development to support the *Social Care Workforce Development Partnership (SCWDP)* (this includes income from *Social Care Wales* and others).

To secure the grant we submit a local application and a regional plan. We also produce a local plan for our partnership.

[http://www.wrexham.gov.uk/english/council/social\\_services/workforce\\_strategy/workforce\\_strategy.htm](http://www.wrexham.gov.uk/english/council/social_services/workforce_strategy/workforce_strategy.htm)

The council has set up a joint Social Care Workforce Development Partnership, whose membership and function is explained in our communication plan.

[http://www.wrexham.gov.uk/assets/pdfs/social\\_services/workforce\\_strategy/communication\\_plan.pdf](http://www.wrexham.gov.uk/assets/pdfs/social_services/workforce_strategy/communication_plan.pdf)

We continue to promote the Social Care Wales Information and Learning Hub within the sector, and encourage the use of available training materials, guidance and resources.

<https://socialcare.wales/hub/home>

Mop-up sessions for the detailed modules continue to take place. All of our training programmes have been updated to embed the key messages and terminology of the Act.

We've delivered two local sessions on the Regulation and Inspection (Wales) Act to the whole sector, with an attendance of 43 out of a potential 60.

We've also got sub-regional events planned for 2019.

The Best Practice in Dementia Care project with care homes in Wrexham has been very successful, with a number of homes continuing with the programme this year.

Seven care homes have confirmed they'll be training additional staff.

Last year we successfully piloted 6 Steps to *Improving End of Life Care* and a second programme is now being delivered with five care homes.

We've also helped our social workers access training and qualifications under *Social Care Wales' (SCW) Continuing Professional Education and Learning Framework*.

We have a strong career-progression framework for social workers, based on SCW Continued Education Awards. We've also adopted the First 3 Years in Practice framework published by SCW.

SCW also delivered a workshop at Glyndwr University for providers on 'outcome-focused practice' in November 2018.

## **B. FINANCES AND PLANNING FOR THE FUTURE**

We're getting less money from Welsh Government, so reshaping social services to meet this challenge has been a priority.

During the last four years Adult Social Care delivered £6,848,821 of savings and Children's Social Care delivered £1,062,000 of savings. In addition our budgets have been reduced through the loss of Welsh Government demography money (£2,000,000) and Supporting People money (£200,000).

The Supporting People grant from Welsh Government helps us provide housing-related support to vulnerable people – so they can live as independently as possible.

We've updated our medium-term financial and service-efficiency plans, and continue to factor future pressures into our budget-planning.

The council has a rigorous budget process that asks managers to identify potential savings over a three-year period.

Departments like social services – who have a duty of care – are supported as much as possible.

To meet these significant challenges, we've had to reshape and re-tender services to reduce costs. But we've made every effort to reduce the impact on vulnerable people.

## **C. POLITICAL LEADERSHIP, GOVERNANCE AND ACCOUNTABILITY**

On a political level, the council is supported by an executive group of councillors – called lead members – who make key decisions.

They're supported by scrutiny committees. Social Services comes under the Safeguarding, Communities and Wellbeing Scrutiny Committee.

On a management level, the council has a chief executive supported by two strategic directors.

Social Services comes under the remit of the director responsible for ‘people.’ This person also has the statutory Director of Social Services role. The Head of Adult Social Care has acted as interim Director of Social Services for this year

Councillors and senior managers with these lead-responsibilities understand the importance of social services, and council policy states that we’ll prioritise services that support vulnerable people when setting budgets, making savings and changing how we do things.

Social Services is managed by a Head of Adult Social Care and a Head of Children’s Social Care. Both departments are supported by a lead member who meets regularly with managers.

## Partnership working

The *Wrexham Public Service Board* (PSB) was established as a result of the *Future Generations Act*.

It aims to improve the economic, social, environmental and cultural well-being of Wrexham County Borough – in a sustainable way that won’t harm future generations.

PSB priorities are:

- That children and young people have the best start in life.
- That all people can learn and develop throughout their lives.

## Safeguarding arrangements

Our Corporate Safeguarding Policy promotes greater understanding among staff, councillors and people working on our behalf about guidelines for safeguarding children and adults.

The policy was approved by our Executive Board on July 12, 2018 and is due for review in 2019.

An associated action plan was developed to help us meet recommendations in the Wales Audit Office review *Corporate Safeguarding Arrangements in Welsh Councils* (published in June 2015).

As part of this, training was successfully rolled out across all departments and an e-learning module for Corporate Safeguarding is now one of the council’s mandatory modules for all staff.

The council also remains compliant with the ‘prevent’ duty under the *Counter-Terrorism and Security Act 2015*.

This requires us to play a part in responding to the ideological challenge – helping to prevent people being drawn into terrorism.

So if we think a person is at risk of radicalisation, we’ll work with other organisations to assess the situation, and develop a support-plan for the individual.

As we’ve already mentioned, we’ve made significant changes and improvements within our *Adult Safeguarding Team*, and we’re represented on the North Wales Safeguarding Board and local delivery groups.

A great deal of work is undertaken to help publicise safeguarding – including taking part in National Safeguarding Week.

# 6.

## FURTHER INFORMATION

*This final section lists where you can find more information about some of the things mentioned in this report.*

### Council structure

[http://www.wrexham.gov.uk/english/council/about\\_council.htm](http://www.wrexham.gov.uk/english/council/about_council.htm)

### Wrexham Public Service Board

<http://www.wrexhampsb.org>

### North Wales Safeguarding Board

Helps ensure children and vulnerable adults are protected from abuse and neglect.

<http://www.northwalessafeguardingboard.wales/>

### Council Plan

Overarching plan that defines where the council focuses its energies.

[http://www.wrexham.gov.uk/english/council/documents/council\\_plan.htm](http://www.wrexham.gov.uk/english/council/documents/council_plan.htm)

### Your Voice Wrexham

Public Service Board consultation website – used by the council for online surveys.

<http://www.yourvoicewrexham.net>

### Care Inspectorate Wales

Inspects local authority social services, and reports on their effectiveness.

Wrexham Council report:

<https://careinspectorate.wales/190328-inspection-older-adults-services-wrexham-county-borough-council>

Report on regulated care services in Wrexham:

<http://cssiw.org.uk/find-a-care-service/service-directory/?lang=en#/find-a-careservice/>

## Council complaints and compliments

<http://www.wrexham.gov.uk/complaints>

## Dewis Cymru

<https://www.dewis.wales>

# COUNCIL REPORTS AND DOCUMENTS

## Charging policy

[http://www.wrexham.gov.uk/assets/pdfs/social\\_services/leaflets/financial\\_information\\_guide.pdf](http://www.wrexham.gov.uk/assets/pdfs/social_services/leaflets/financial_information_guide.pdf)

[http://www.wrexham.gov.uk/assets/pdfs/social\\_services/leaflets/paying\\_for\\_socialcare\\_services.pdf](http://www.wrexham.gov.uk/assets/pdfs/social_services/leaflets/paying_for_socialcare_services.pdf)

[https://www.wrexham.gov.uk/assets/pdfs/social\\_services/leaflets/deferred\\_payments.pdf](https://www.wrexham.gov.uk/assets/pdfs/social_services/leaflets/deferred_payments.pdf)

## Contract monitoring report

<http://moderngov.wrexham.gov.uk/mgAi.aspx?ID=6085>

## Safeguarding report

<http://moderngov.wrexham.gov.uk/documents/s500003197/Item%207.pdf?LLL=0>

## Corporate Safeguarding Policy (Child Protection)

[https://www.wrexham.gov.uk/english/council/documents/corporate\\_safeguarding\\_policy.htm](https://www.wrexham.gov.uk/english/council/documents/corporate_safeguarding_policy.htm)

## Review of Day Services

<http://moderngov.wrexham.gov.uk/documents/g3627/Public%20reports%20pack%2013th-Dec-2016%2010.00%20Executive%20Board.pdf?T=10&LLL=undefined>

## Wrexham Council Workforce Strategy

[https://www.wrexham.gov.uk/english/council/social\\_services/workforce\\_strategy/workforce\\_strategy.htm](https://www.wrexham.gov.uk/english/council/social_services/workforce_strategy/workforce_strategy.htm)

## Workforce Development training plan, brochure and mid-year report

[https://www.wrexham.gov.uk/assets/pdfs/social\\_services/workforce\\_strategy/workforce\\_training\\_brochure.pdf](https://www.wrexham.gov.uk/assets/pdfs/social_services/workforce_strategy/workforce_training_brochure.pdf)

## Welsh Language Standards

[http://www.wrexham.gov.uk/english/council/documents/welsh\\_language\\_scheme.htm](http://www.wrexham.gov.uk/english/council/documents/welsh_language_scheme.htm)

## **Wrexham's Ageing Well plan**

[https://www.wrexham.gov.uk/assets/pdfs/social\\_services/key\\_documents/aging\\_well\\_wrexham.pdf](https://www.wrexham.gov.uk/assets/pdfs/social_services/key_documents/aging_well_wrexham.pdf)

## **Transport web-pages**

[http://www.wrexham.gov.uk/english/links/links\\_transport.htm#bus](http://www.wrexham.gov.uk/english/links/links_transport.htm#bus)

## **Wrexham travel plan – Wrexham Connected**

[https://www.wrexham.gov.uk/assets/pdfs/travel/wrexham\\_connected.pdf](https://www.wrexham.gov.uk/assets/pdfs/travel/wrexham_connected.pdf)

## **Housing Strategy**

[http://www.wrexham.gov.uk/english/council/documents/local\\_housing\\_strategy.htm](http://www.wrexham.gov.uk/english/council/documents/local_housing_strategy.htm)

## **Supporting People funding programme**

[https://www.wrexham.gov.uk/assets/pdfs/housing/supporting\\_people/supporting\\_people\\_directory.pdf](https://www.wrexham.gov.uk/assets/pdfs/housing/supporting_people/supporting_people_directory.pdf)

[https://www.wrexham.gov.uk/assets/pdfs/housing/supporting\\_people/local\\_commissioning\\_plan.pdf](https://www.wrexham.gov.uk/assets/pdfs/housing/supporting_people/local_commissioning_plan.pdf)



# 7.

# PERFORMANCE MEASUREMENT FRAMEWORK

**QUALITY STANDARD 1:** “Working with people to define and co-produce personal well-being outcomes that people wish to achieve.”

PERFORMANCE MEASURE/ INDICATOR	2018/19 OUT-TURN	COMMENTS
PMA 023 – The percentage of adults who have received support from the information, advice and assistance service and have not contacted the service again during the year.	75.65%	
PMC 024 – The percentage of assessments completed for children within statutory timescales	74.8%	

## QUALITY STANDARD 2: “Working with people and partners to protect and promote people’s physical and mental health and emotional well-being.”

PERFORMANCE MEASURE/ INDICATOR	2018/19 OUT-TURN	COMMENTS
PMA 10 – The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.	10.77 aged 18+	121 cases aged 18+
PMA 20a – The percentage of adults who completed a period of Reablement and have a reduced package of care and support 6 months later.	42.59%	Based on Staffplan referrals completed between 01 April 2018 and 31 March 2019. Calculation = 59.6%
PMA 20b – The percentage of adults who completed a period of Reablement and have no package of care and support 6 months later.	23.17%	Based on Staffplan referrals completed between 01 April 2018 and 31 March 2019. Calculation = 81%
PMA 21 – The average length of time older people (aged 65 or over) who are supported in residential care homes.	862.69	836.45 days for nursing care
PMA 22 – Average age of adults entering residential care homes.	84.81	78.67 for Nursing Care
PMC 030 – The percentage of children seen by a registered dentist within three months of being looked after	64.40%	
PMC 031 – The percentage of children looked after at 31st March who were registered with a GP within 10 working days of the start of their placement	100%	

## QUALITY STANDARD 3: “Taking steps to protect and safeguard people from abuse, neglect or harm.”

PERFORMANCE MEASURE/ INDICATOR	2018/19 OUT-TURN	COMMENTS
PMA 18 – The percentage of adult protection enquiries completed within statutory timescales.	80.48%	
PMC 027 – The percentage of re-registrations of children on Local Authority Child Protection Registers	2.4%	
PMC 028 – The average length of time for all children who were on the Child Protection register during the year	262.50	

**QUALITY STANDARD 4:** “Encouraging and supporting people to learn, develop and participate in society.”

PERFORMANCE MEASURE/ INDICATOR	2018/19 OUT-TURN	COMMENTS
PMC 29a – The percentage of children achieving core subject indicators at key stage 2	65.40%	
PMC 29b – The percentage of children achieving the core subject indicator at key stage 4	4.35%	
PMC 32 – The percentage of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March	9.03%	

**QUALITY STANDARD 5:** “Supporting people to safely develop and maintain healthy domestic, family and personal relationships.”

PERFORMANCE MEASURE/ INDICATOR	2018/19 OUT-TURN	COMMENTS
PMC 33 – The percentage of looked after children on 31st March who have had three or more placements during the year	4.94%	*Pending Welsh Government Confirmation
PMC 25 – The percentage of children supported to remain living with their family at 31 March	63.0%	
PMC 26 – The percentage of looked after children returned home during the year	10.43%	*Pending Welsh Government Confirmation

**QUALITY STANDARD 6:** “Working with Supporting People to achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs.”

PERFORMANCE MEASURE/ INDICATOR	2018/19 OUT-TURN	COMMENTS
PMC 34a – The percentage of all care leavers who are in education, training or employment at 12 months after leaving care	44.8%	
PMC 34b – The percentage of all care leavers who are in education, training, or employment at 24 months after leaving care	43.7%	
PMC 35 – The percentage of care leavers who have experienced homelessness during the year	29.4%	

## APPENDIX A: Adults Citizen Survey Responses

Questionnaires were sent to a sample of adults receiving care and support on September 1, 2018.

Question	Yes	Sometimes	No	Don't Know
1. I live in a homes that best supports my well-being	81 %	11 %	5 %	3 %
2. I can do the things that are important to me	45 %	44 %	9 %	2 %
3. I feel I am part of my community	45 %	27 %	20 %	8 %
4. I am happy with the support from my family, friends and neighbours	79 %	12 %	4 %	5 %
5. I feel safe	70 %	20 %	6 %	4 %
6. I know who to contact about my care and support	72 %	7 %	13 %	8 %
7. I have the right information or advice when I needed it	65 %	22 %	6 %	7 %
8. I have been actively involved in decisions about how my care and support was provided	71 %	12 %	9 %	8 %
9. I was able to communicate in my preferred language	90 %	2 %	2 %	6 %
10. I was treated with dignity and respect	83 %	8 %	2 %	7 %
11. I am happy with the care and support I have had	74 %	15 %	3 %	8 %
12. It was my choice to live in a residential care home (only answered by respondents who lived in a residential care home)	11 %	1 %	3 %	85 %
13. I have had advice, help and support that will prepare me for adulthood (only answered by respondents who are 18 or 24 years old)	2 %	1 %	1 %	96 %

## APPENDIX B: Adult Carer Survey responses

Questionnaires were sent to a sample of adults receiving care and support on September 1, 2018.

Question	Yes	Sometimes	No	Don't Know
1. I live in a homes that best supports my well-being	83 %	11 %	6 %	0 %
2. I can do the things that are important to me	42 %	44 %	9 %	2 %
3. I feel I am part of my community	44 %	24 %	25 %	7 %
4. I am happy with the support from my family, friends and neighbours	66 %	22 %	9 %	3 %
5. I feel safe	77 %	15 %	5 %	3 %
6. I know who to contact about my care and support	53 %	16 %	26 %	5 %
7. I have the right information or advice when I needed it	48 %	25 %	15 %	12 %
8. I have been actively involved in decisions about how my support was provided	48 %	17 %	18 %	17 %
9. I have been involved in all decisions about how the care and support was provided for the person I care for	61 %	20 %	12 %	7 %
10. I was able to communicate in my preferred language	88 %	4 %	1 %	7 %
11. I was treated with dignity and respect	77 %	9 %	2 %	12 %
12. I feel supported to continue in my caring role	54 %	25 %	13 %	8 %
13. I am happy with the care and support I have had	52 %	21 %	14 %	13 %
14. I have had advice, help and support that will prepare me for adulthood (only answered by respondents who are 18 or 24 years old)	No responses			

## APPENDIX C: Children's Citizen Survey Responses

Children's questionnaires were sent to all children / young people receiving care and support aged 7-17 on October 1, 2018.

Question	Yes	Sometimes	No	Don't Know
1. I live in a home where I'm happy	84 %	9 %	6 %	0 %
2. I am happy with the people that I live with	83 %	13 %	16 %	3 %
3. I can do the things I like to do	75 %	19 %	6 %	0 %
4. I feel I belong in the area where I live	78 %	11 %	9 %	2 %
5. I am happy with my family, friends and neighbours	89 %	6 %	2 %	3 %
6. I feel safe	88 %	8 %	3 %	2 %
7. I know who to speak to about my care and support	81 %	9 %	5 %	5 %
8. I have had the right information or advice when I needed it	75 %	16 %	2 %	2 %
9. My views about my care and support have been listened to	75 %	13 %	5 %	8 %
10. I have been able to use my everyday language	94 %	2 %	0 %	5 %
11. I was treated with dignity and respect	83 %	9 %	2 %	6 %
12. I am happy with the care and support I have had	84 %	6 %	5 %	5 %
13. If you are aged 16 or 17 years old: I have had advice, help and support that will prepare me for adulthood	38 %	13 %	13 %	38 %

## APPENDIX D: Parent's Citizen Survey Responses

Questionnaires were sent to the parents of all children/young people receiving care and support aged 7-17 on October 1, 2018.

Question	Yes	Sometimes	No	Don't Know
1. I have been actively involved in all decisions about how my child's/children's care and support was provided	82 %	11 %	4 %	4 %
2. I feel listened to and valued to	57 %	32 %	11 %	0 %
3. Is there anything we could improve and could have done better?	21 %	21 %	39 %	18 %