



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Chief Inspector's Annual Report 2014–2015

**Improving adult care,
childcare and social
services in Wales**





Care and Social Services Inspectorate Wales (CSSIW) is the independent inspectorate and regulator for adult care, childcare and social services in Wales.

We regulate and inspect to improve adult care, childcare and social services for people in Wales. Each year we assess services and report on the safety and quality of people's experiences of care, and the impact it has made on their quality of life.

This report reviews and reflects on our work for the period from 1 April 2014 to 31 March 2015 and provides an overview of our findings, describes how we have performed, and the progress we are making in improving our work.

We outline our future priorities in preparing the organisation for transformational change to reflect new laws and policies that come into effect from 2016 and beyond.

Where to get more information

We write reports on all our inspections and reviews, the majority of which are available on our website.

We also publish information quarterly on the number of services and places that we regulate.

More information about us is available on our website www.cssiw.org.uk and in Appendix A of this report. You can also follow us on Twitter www.twitter.com/cssiw or watch us on YouTube www.youtube.com/cssiw

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.
This document is also available in Welsh.

Our legal powers

We carry out our functions on behalf of Welsh Government Ministers under the powers of the following Acts:

- Health and Social Care (Community Health and Standards) Act 2003 which gives us the authority to review how local authorities discharge their social services functions.
- Care Standards Act 2000, the Children Act 1989 (as amended), the Adoption and Children Act 2002, and the Children and Families (Wales) Measure 2010 which gives us the power to register and inspect services.

Two new laws will change the way care and social services will be delivered in Wales and our role as a regulator and inspector of care.

The Social Services and Well-being (Wales) Act 2014, and the Regulation and Inspection of Social Care (Wales) Act 2016 will have a significant impact on our business and our statutory functions.

Changes to regulations made under the Children and Families (Wales) Measure 2010 to extend the upper age limit of regulated childcare and play to children under 12 years old by 2016, together with the Well-being of Future Generations (Wales) Act 2015, and Welsh Government's renewed focus on tackling child poverty have all had a significant impact on the scale and range of childcare and play services that we regulate and inspect.

Over 2014–15, we undertook a major project to update our operational processes and move our registered and regulated service information from a legacy database system to a new Microsoft Dynamics Customer Relationship Management (CRM) system. We have worked hard to mitigate the impact of this change on our information and we continue to cleanse, update and refine our processes and information to enhance the consistency and accuracy of our business records. The data in this report is a reflection of the information held as of 31 March 2015.

Chief Inspector's Annual Report 2014–2015

Contents

Foreword from our Chief Inspector	2
Chapter One: People make a difference	4
Chapter Two: How we performed – improving regulated care services	7
Chapter Three: Context for change – improving our business	14
Chapter Four: A closer look at local authorities	24
Chapter Five: A closer look at children's services	30
Chapter Six: A closer look at adult services	40
Chapter Seven: Our priorities for 2015–18	54
Appendix A: What we do	56
Appendix B: How to report a concern	62

Foreword from our Chief Inspector Imelda Richardson

Changing for the better



As I look back on another year moving forward with our Change Programme within the Inspectorate, the mood and appetite for change and improvement is endemic across all public services

in Wales. During 2014-2015, our organisation continued the process of change while maintaining a programme of inspection and improvement within care and social services in Wales. We completed 4,416 inspections and worked hard to ensure that people were aware of how to report a concern, which is why 304 of these inspections were carried out in response to concerns raised. We listened to people, used the intelligence we gathered and we took these concerns seriously.

Preparing for change

In 2014-15 we found that most services performed well, with 91% of all services meeting standards of care, and did not need enforcement action. This is testament to the dedication of the majority of care providers in Wales who deliver the level of care that people deserve. However, of the remaining 9%, a small number did not meet the standards, requiring significant monitoring and enforcement action, and we worked closely with providers and commissioners to make sure the quality of care improved. We do not tolerate poor care and will take enforcement action where necessary. You can read more about our enforcement action in chapter two.

2014-2015 was the year we prepared the ground for complex and culture-changing legislation that was in development by Welsh Government.

When change was required, we rose to the challenge. We were determined to work more with citizens, providers and partners and develop new ways of inspecting and finding solutions. This helped us to report on the care experiences of the people who use and work in care services and this is the very core of our inspection work. Our improvement and modernisation work is a testament to the skill and abilities of all our staff.

People matter

Local authorities and directors of social services help guide our work, and through them we understand how support and care for people is planned and organised across all Welsh regions. Nothing however can gauge the true impact of the care and support being delivered better than a person actually using these services. When care is inadequate, we all – CSSIW, local authorities, health and social care commissioners, and service providers – need to work together, to scrutinise what's gone wrong and to improve services.

We're continuing to strengthen and build the role and scope of our National Advisory Board, very ably chaired by Professor Judith Hall from Cardiff University – you can read more about the Board's achievements in chapter one. Our work with them has also spearheaded another programme of citizen engagement which will represent the needs of carers, providers and people receiving care and support in all corners of Wales in the form of three Regional Advisory Forums to be launched in 2015-16. We want to ensure the roots of our work are firmly embedded in all regions and that we maintain a strong national and regional focus in our work. Our National Advisory Board challenges us to do better, helps us to develop and I'd like to thank them for working with us to improve the way we work.

Working together

One thing I set out to do and have this year implemented is a new Quality Forum. Made up of strategic partners from across Wales, the Quality Forum is seeking to redress what we have collectively termed 'wicked issues' that you can read about in chapter three. We are making good headway and there is a strong sense of responsibility and collaboration to deliver an all-Wales approach to these problems.

I would like to thank my counterparts in Inspectorate Wales for strengthening our partnership work and for their dedication to highlighting our impact as a collective. During 2014–15 we established the building blocks which would allow us to complete further work together and to join together on future projects. We also worked closer than ever with the Care Council for Wales (shortly to become Social Care Wales), ensuring that the rights and responsibilities of care workers are highlighted and that together, we champion the sector as a whole.

I'd also like to thank the sector for working with us to improve the care they provide. I understand that the changing social care climate is challenging and there are understandable ripple effects in terms of preparing the workforce. What I have seen on my regular engagement visits across Wales is that the leaders and managers providing excellent support and services are inspiring others to do the same. During this period I saw the excellent work taking place in Shared Lives Plus – a model for foster placements and people-centred care. I met with carers and their families in Carmarthen, Swansea and Cardiff Bay who gave me honest and no-holds-barred accounts of the daily challenges they face. I also witnessed the true dedication of nursery and early years staff, from Anglesey and Llangefni in North Wales to Treorci and Caerau in South Wales.

Your region

Building and supporting resilient communities and facilities is a challenge across Wales, particularly in meeting the needs of our most vulnerable citizens, and many communities are developing and designing their own bespoke solutions.

Though you might not realise it yet, you are a stakeholder in social care in Wales. We all have a stake in it and we will all be affected by it at some point in our lives. We inspect and work with all local authorities to ensure that they are on track to deliver future legislative changes. Currently, there are no local authorities under our Serious Concerns Protocol and while local authorities are moving towards change, they also need to fully consider how health and social care integration can work.

Where now?

In 2014–2015, we began paving the way for new Welsh Government legislation – the Social Services and Well-being (Wales) Act 2014 and the Regulation and Inspection of Social Care (Wales) Act 2016. We've developed model frameworks to recognise the new demands and expectations arising from this legislation and this is an opportunity to embed human rights and well-being outcomes in our inspection frameworks that you can read about in chapter three. We will continue to collaborate with citizens, service providers, and service commissioners to develop clearer standards and regulations for social care in Wales. The new laws will improve our performance and strengthen our impact as a regulator for improvement and we look forward to implementing some of these changes in 2015–16 and beyond.

The new legislation gives all of us – citizens, providers, commissioners, local authorities and regulators – the opportunity to work together to improve the quality and stability of social care in Wales.

Chapter One

People make a difference

This chapter is written by members of our National Advisory Board, including its chair, Professor Judith Hall.

“ We are pleased to note the Board’s impact in strengthening the people’s voice. The Board has been cited in key public service reforms for strengthening democracy and improving services, as a best practice example of how public bodies and regulators should involve citizens¹. ”

Professor Judith Hall, Chair of the National Advisory Board

Last year we reported on our early work in understanding CSSIW’s business and how the diverse skills and experience of our members has started to add value. In 2015, we pledged to focus our work on ‘making a difference to the services that people receive’.

We hope we have been aspirational, seeking to ensure that regulation, inspection and review of adult care, childcare and social services can make an increasingly positive contribution, and we aim for excellence.

‘The importance of CSSIW’s National Advisory Board is that it brings directly to the organisation the voice of families and carers in guiding, advising and commenting on this crucial work. Inspection work is vital for the safety and quality of life for people in Wales and it must be tested and challenged by the public. The National Advisory Board has started that process and set an important precedent in transparency.’

Simon Hatch, Director of Carers Trust Wales

During 2015 we focused on three broad themes:

- Enabling citizen voice and extending our reach so many more voices can be heard;
- Advising on Welsh Government’s changes in law and policy;
- Supporting CSSIW service improvement.

Our independence, members’ diverse experience and knowledge, and our ability to stand back from day to day operations has added value on many levels.

The scale, pace and range of changes faced by CSSIW over the next two years in implementing new laws and policies and in transforming their business cannot be underestimated; it requires major support. We are there to support this and must provide good quality oversight so that changes are made in the best interests of people. The public must be able to access safe, quality care during a potentially turbulent period of change.

Changes in law and policy

These have impacted enormously on our thinking, occupying much of our time. Examples below represent just a small selection of our activity in 2015. We have considered and advised on:

Social Services & Well-being (Wales) Act 2014

The scale and scope of the Welsh Government consultation on the implementation of the Act through vast numbers of regulations and codes of practice has required our close scrutiny and technical understanding. Our priority was to ensure that these changes represented a fair deal for vulnerable people who need help to improve their well-being. A priority for us was to ensure that the regulations can be delivered

¹ Devolution, Democracy and Delivery - Reforming Local Government: Power to Local People
<http://gov.wales/consultations/localgovernment/power-to-local-people/?lang=en>

effectively and that people's safety, voice, rights and views (and those of their carers) is at the heart of the new system.

It was important that we were assured that local authorities could be held to account for their corporate parenting duties both of the children they look after and of children preparing to leave care, and that they are held to account as planners, commissioners and managers of services for vulnerable people. Equally important was that CSSIW had sufficient powers to inspect performance and drive improvements in care.

We are delighted to note that our response has influenced the final regulations and codes of practice issued by Welsh Government.

"An important aim of this Act is to improve the lives of family carers, and I am confident that CSSIW will continue listening to the voices of carers on its National Advisory Board to find out whether the Act is succeeding."

Jennie Lewis, Board member

Regulation and Inspection of Social Care (Wales) Act 2016

We welcomed this new transformative Act. We must commend the scrutiny committees and their extensive reach in gathering evidence. Ensuring the Act provided a robust and flexible regulatory framework for future service regulation and inspection of care and support in Wales was our utmost priority.



We were privileged to attend the Health and Social Services Committee to provide oral evidence on the principles of the Act. Our independent oral and written evidence made a major contribution to the recommendations made by the Committee² and was reflected in the final law.

We told the Committee that it was important for the voices of service users to be considered by the regulator, and as such it welcomed our role in influencing and informing the way that CSSIW works.

Childcare reforms

We must be aspirational regarding the future of children. We have been especially active in ensuring that children and parents in Wales can access safe, quality childcare. We also know that childcare must offer more than just caring, it must stimulate and support child development and learning. We listened with great interest to the early lessons from CSSIW's experience in piloting quality judgements. We have also considered the Welsh Government's ideas for improving a child's well-being and their intention that the same level of quality should be extended to childcare for older children.

Our recommendation on the scope and content of future regulation and inspection of childcare and play in Wales provided a solid contribution to CSSIW's new inspection framework. We also impacted on the investment in the skills and capacity of its childcare inspectors and on its joint pilot inspection framework with Estyn.

In our response to Welsh Government on their consultation to increase the upper age limit of regulated childcare, we put forward reasoned evidence for capping regulation to under 12 years. It was important to minimise the burden on child minders and day care providers who already care for children over 8 years. We were pleased to see that our evidence influenced the final Ministerial decision, and the arrangements put in place prepared both the sector and parents for the changes.

CSSIW service improvements

We are the citizen voice advising CSSIW where it must focus to make improvements to enhance people's well-being. As a Board we take this role very seriously and will be joined by three regional advisory forums over the coming year. We very much support the shift from simply measuring compliance, to a system identifying services which provide good and excellent care. Consequently, we support CSSIW's improvement work on the way they inspect services and local authorities' performance. The new inspection frameworks which focus on well-being, and the development of judgements are very welcome. We think judgements are essential in driving up quality and increasing transparency.

"As one of the care homes involved in the pilot inspection framework, there were positives and some areas for discussion, but the important factor was that we had input into the development of the framework and CSSIW listened to what was said by the service users and all levels of staff.

I feel that the biggest change is that CSSIW is listening and we're working together to influence and promote standards of care."

Sharon Williams, manager of Swn Y Mor Care Home and Board member

Ultimately, we have been clear that the voice of service users, their carers and their experience of care must be core to each of the inspection frameworks. We therefore very much hope that 2016 will be the year of 'the people's voice'.

² <http://www.senedd.assembly.wales/mgIssueHistoryHome.aspx?Ild=12110>

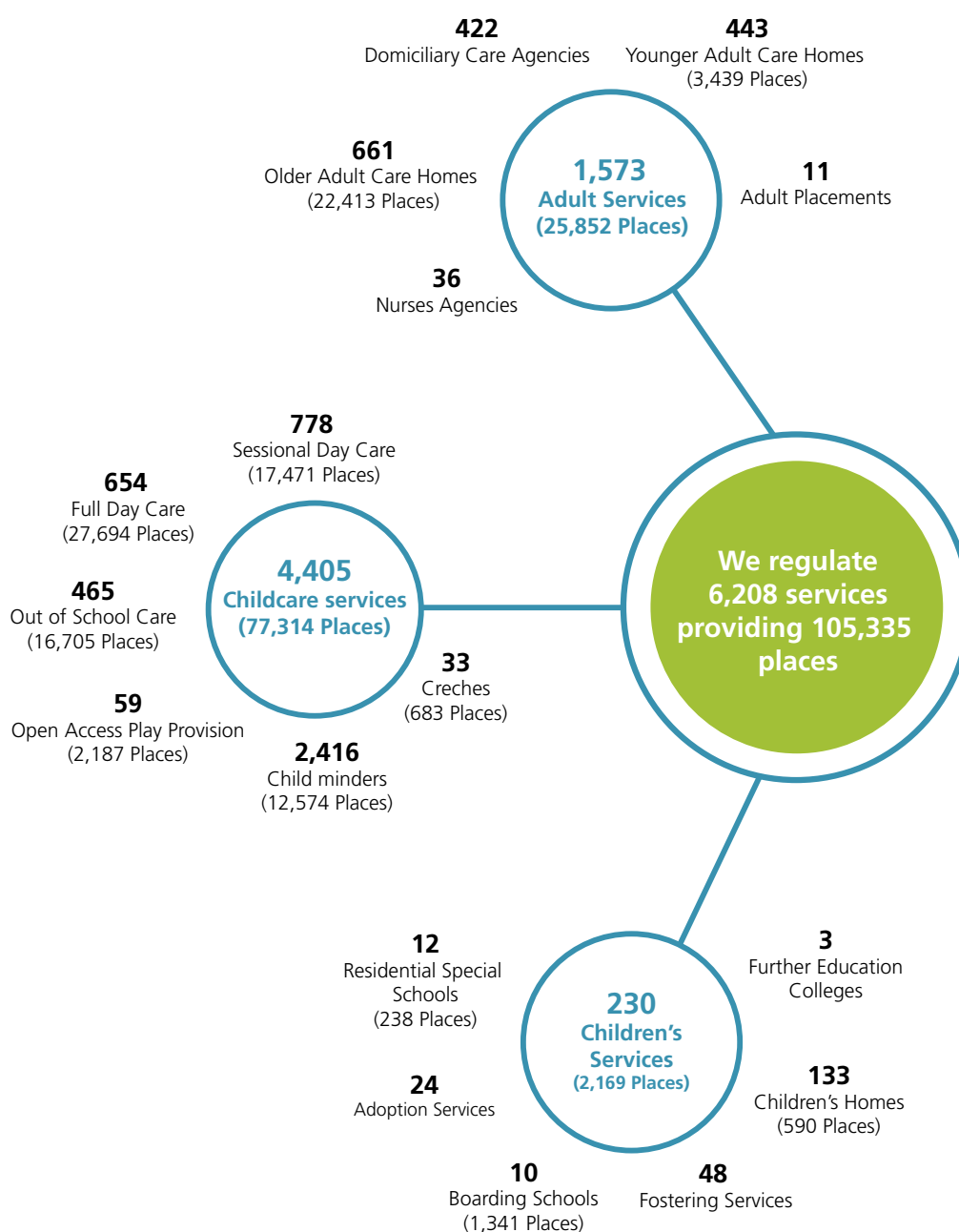
Chapter Two

How we performed – improving regulated care services

This chapter sets out the services regulated by us and what we did during 2014–15, including the delivery of our core functions in registration and inspection of care, our evaluation of local authority performance and how we improve regulated care services.

Services regulated by us

Diagram 1: Number of services regulated by us, 2014–15



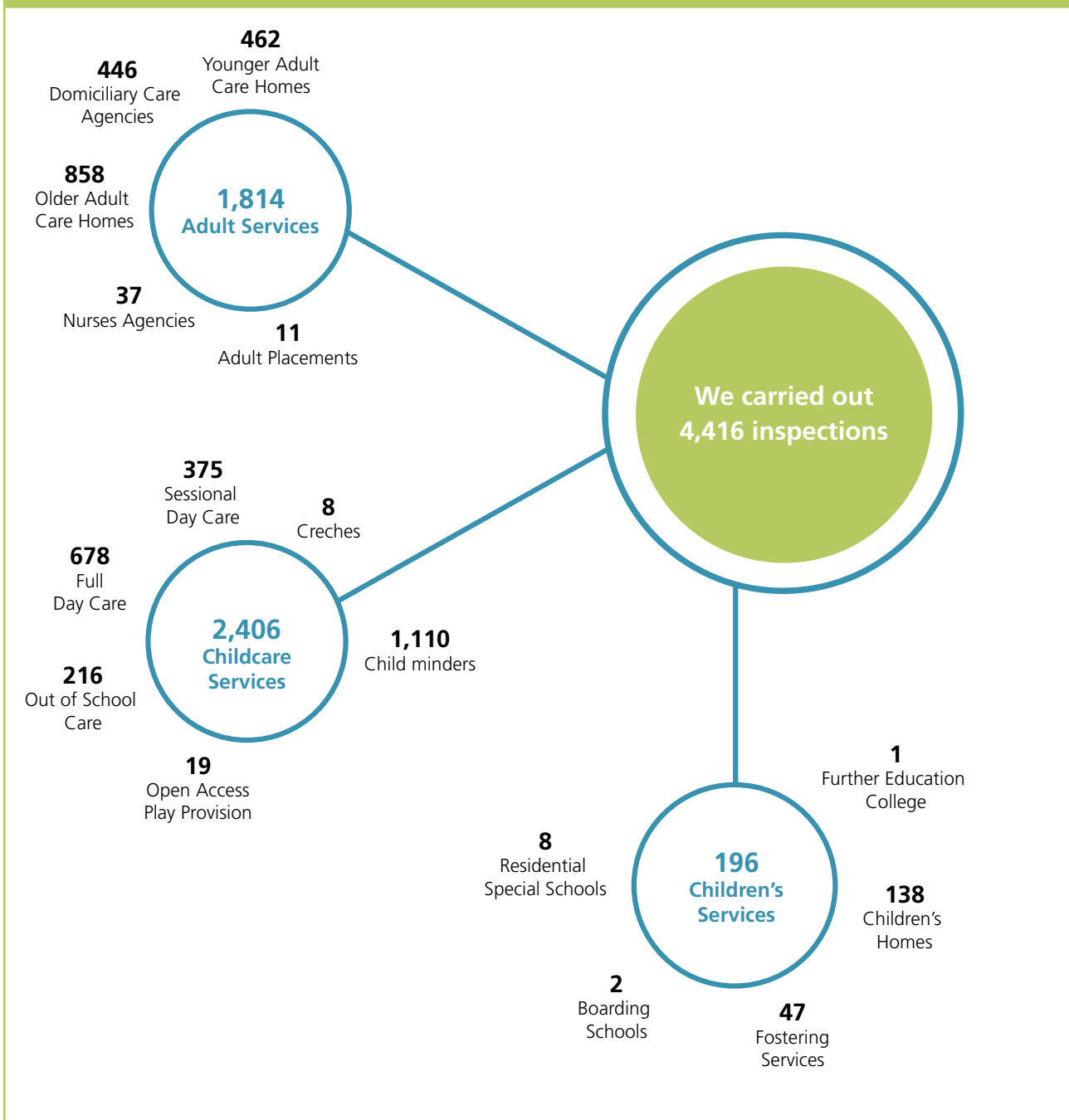
Registration

- We registered 407 new services;
- processed 58 applications which were either refused or withdrawn;
- closed or deregistered 459 services.

Inspection

- We completed 4,416 inspections (see Diagram Two for breakdown);
- this included an additional 304 inspections in response to concerns from others and exceeded our inspection programme for regulated services by 7.4%;
- carried out 319 inspections that included two or more inspectors;
- 197 inspections were outside normal office working hours, with 20 of these at weekends.

Diagram 2: Number of inspections carried out by us, 2014–15



Sourced by CSSIW data management system – for details on the frequency of our inspections, please visit our website.

Complaints

During the year we received 40 complaints which fell under the Welsh Government's complaints framework.

Local authorities

During the year we:

- completed an evaluation of all local authority social services departments;
- inspected Powys County Council's arrangements for commissioning and contracting domiciliary care;
- inspected adult social services in Newport City Council;
- carried out an inspection of children's social services in Flintshire County Council and Monmouthshire County Council;
- attended 36 scrutiny committees and/or corporate boards or panels;
- took action to lift our Serious Concerns Protocol in Neath Port Talbot Council's children's services;
- published our inspection of safeguarding and care planning for looked after children and care leavers who exhibit vulnerable or risky behaviours in all 22 local authorities.

Copies of our reports can be found on our website

www.cssiw.org.uk/our-reports/?lang=en

Enforcement and improvement

People are entitled to excellent care. Our inspection reports for 2014–15 included many examples of good care and positive signs that our early intervention to improve quality is making a difference.

Overall, we found that most services performed well, with 91% of all services meeting the standards of care and did not require enforcement action.

However of the remaining 9% there remained a small number that did not meet the standards and required significant monitoring and enforcement action. These services which are classed as services of concern represented 1% (52 services) of our total business and were mainly adult care homes and nursing with a

number of complex factors. Our monitoring of these services was vigilant and responsive to ensure people were safe and risks were managed.

A key part of our role is to help services improve. Last year we worked with 308 services (35 fewer than the previous year) to make sustained improvements.

Diagram three sets out the annual performance for each service type. It is encouraging to note that across all service types, the performance was broadly in line with the previous year.

Overall, the number of non-compliance notices issued reduced during 2014–15. This shows that our early intervention and increased monitoring of services who are non-compliant to ensure they improve is having a positive impact.

During 2014–15, we issued 1,115 non-compliance notices in relation to 308 services, compared to 1,303 relating to 343 services in the previous year.

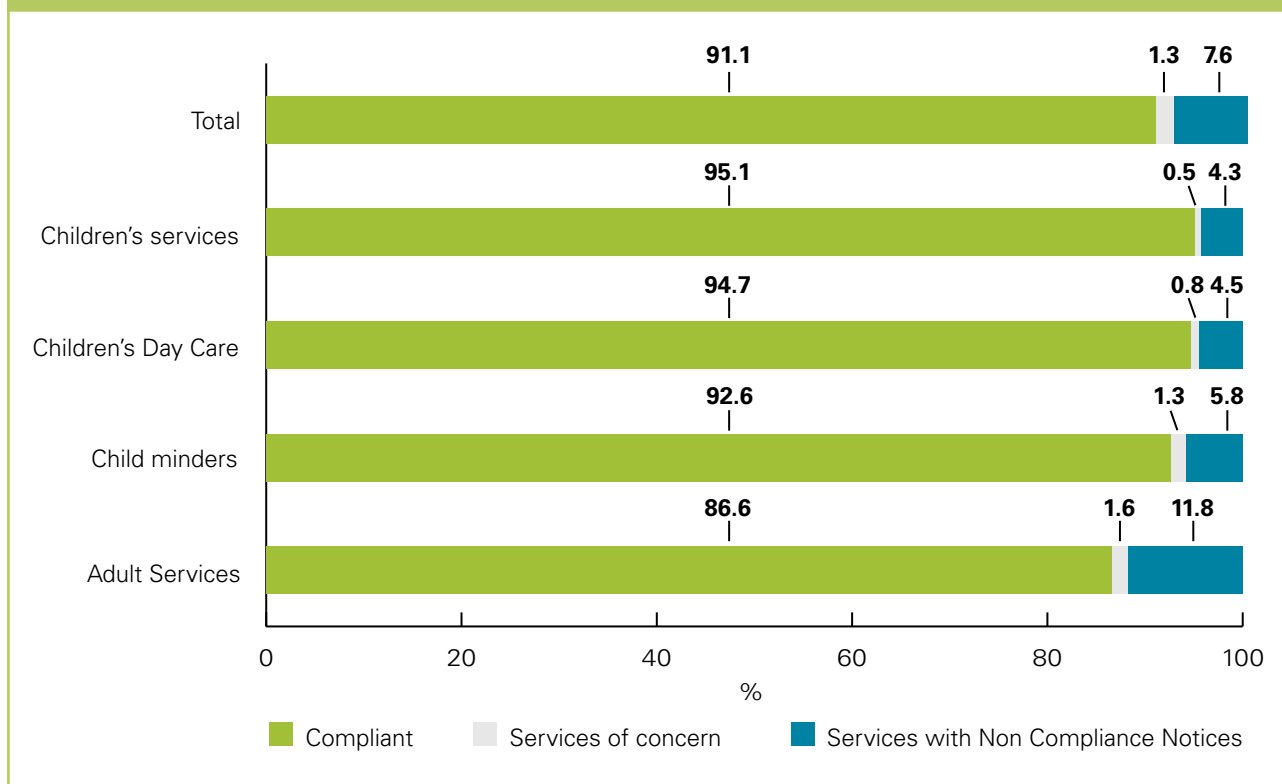
By the end of March 2015, 329 notices of non-compliance were outstanding in relation to 104 services. This meant almost 70% of non-compliance notices (786 notices) had been addressed and 66% services (204 services) had become compliant. This move towards compliance represents real, demonstrable improvement for those using services.

"We do not tolerate care that fails to meet standards and if those services do not improve, we will not hesitate to take further action. We uphold the rights of individuals when we have evidence that shows direct failures of care resulting in serious incidents or death.

"We pursue cases in the public interest, even when homes close, and have done so following the tragic death of a young boy accommodated in a children's home. In this case the provider pleaded guilty to breaching regulations relating to appropriate staffing, lack of clear policies and procedures and failures to ensure the health, safety and welfare of young people resident at the school."

Imelda Richardson, Chief Inspector speaking about Hillcrest Pentwyn School, Clyro, Powys

Diagram 3: Annual performance of services inspected in 2014-15



Sourced from CSSIW data management system

Patterns of non-compliance by inspection theme

When comparing areas for improvement to the previous year, good progress has been made in leadership and management across all service types.

For both adult and childcare services, there was a marked difference in factors contributing to failings in leadership and management, and impact on people's quality of life and experience of well-being. The biggest impact on older adults in residential care was where there was a continued pattern of prolonged absence of registered managers. Changes in the Regulation and Inspection of Social Care (Wales) Act 2016 – to remodel service regulation, place accountability for service

quality and compliance with senior directors, and appointment of Responsible Individuals – will ensure a clear chain of appropriate accountability from the board room to the front line.

For childcare services, poor quality assurance arrangements continued to be a prominent feature. Changes we intend to make to integrated service and quality care assessment returns that providers will be required to send to us, and to update regularly through a new online system, should lead to improvements in their systems for monitoring and measuring the quality of care given to children. The effectiveness of those systems will then be tested at inspection.

Diagram 4: Non-compliance notices by theme

	Quality of Environment		Quality of Life		Quality of Leadership & Management		Quality of Staffing		Undetermined		Total	
	2013–14	2014–15	2013–14	2014–15	2013–14	2014–15	2013–14	2014–15	2013–14	2014–15	2013–14	2014–15
Adult Residential	152	78	287	152	254	117	165	98	–	63	858	508
Domiciliary Care	–	–	11	40	69	46	33	29	–	24	113	139
Nurses Agency	–	–	–	–	–	1	–	–	–	–	–	1
Childcare	35	33	21	107	210	157	38	102	–	10	304	409
Children’s Services	2	–	4	16	21	27	1	13	–	2	28	58
	189	111	323	315	554	348	237	242	–	99	1,303	1,115

Sourced from CSSIW data management system



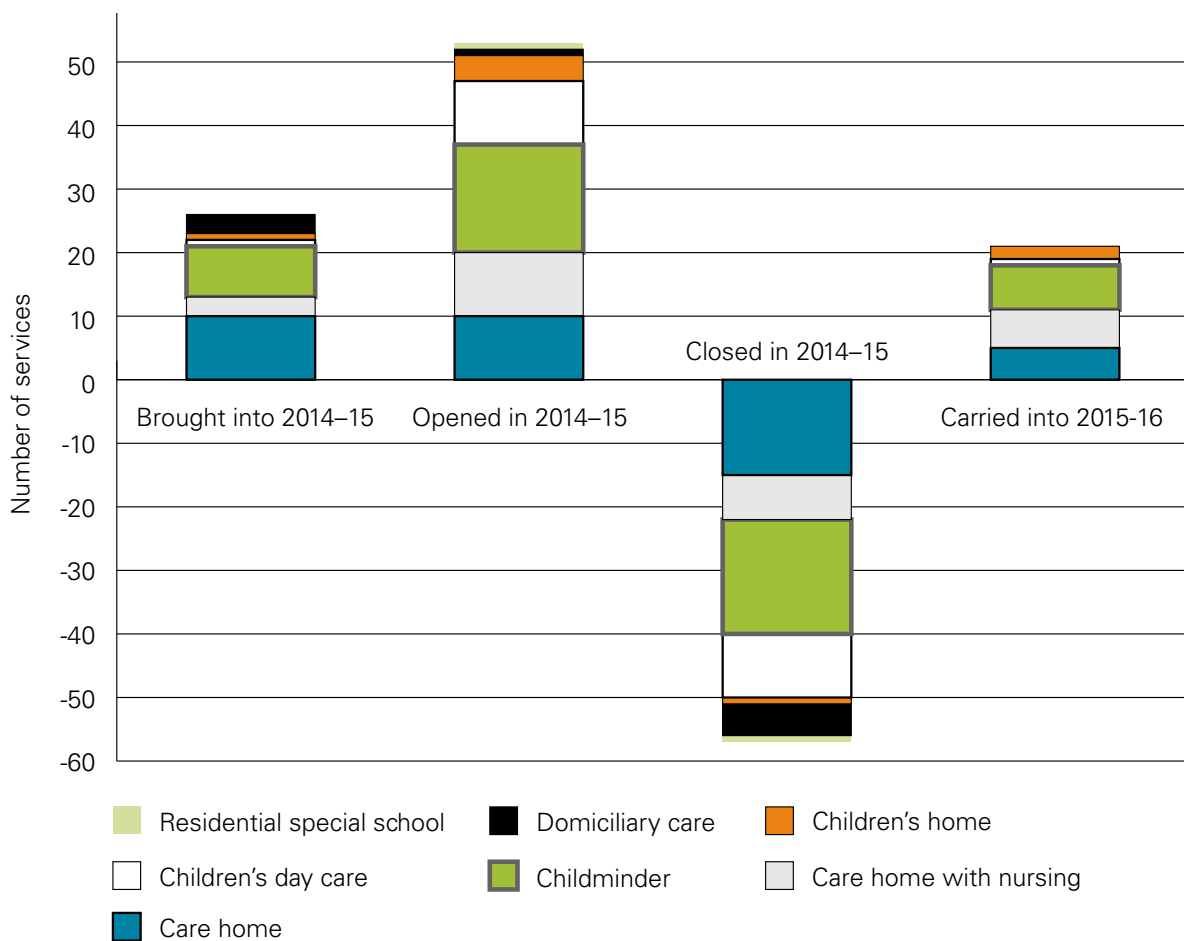
Services of concern

As of 1 April 2014, we had 26 remaining services of concern which were identified during the previous year. During 2014–15, we assessed a further 52 services as being services of concern. Action was concluded in 57 of these services. Examples of action taken are:

- 20 services subsequently became compliant with regulations and achieved improvement following action taken by us.
- 11 services had their registration cancelled by us.
- 10 services voluntarily cancelled their registration following action taken by us.
- 5 related to unregistered services, of which two registered and became compliant.

As of 31 March 2015, 21 services of concern remained open and were either having their progress reviewed or further enforcement action was being considered.

Diagram 5: Services of concern 2014–15



Sourced from CSSIW data management system

Responding to concerns: using information from people

People who are in daily contact with services are best placed to advocate for people's right to quality care and to be the eyes and ears of the regulator in telling us if they have a concern about a service, a professional, or others connected to care.

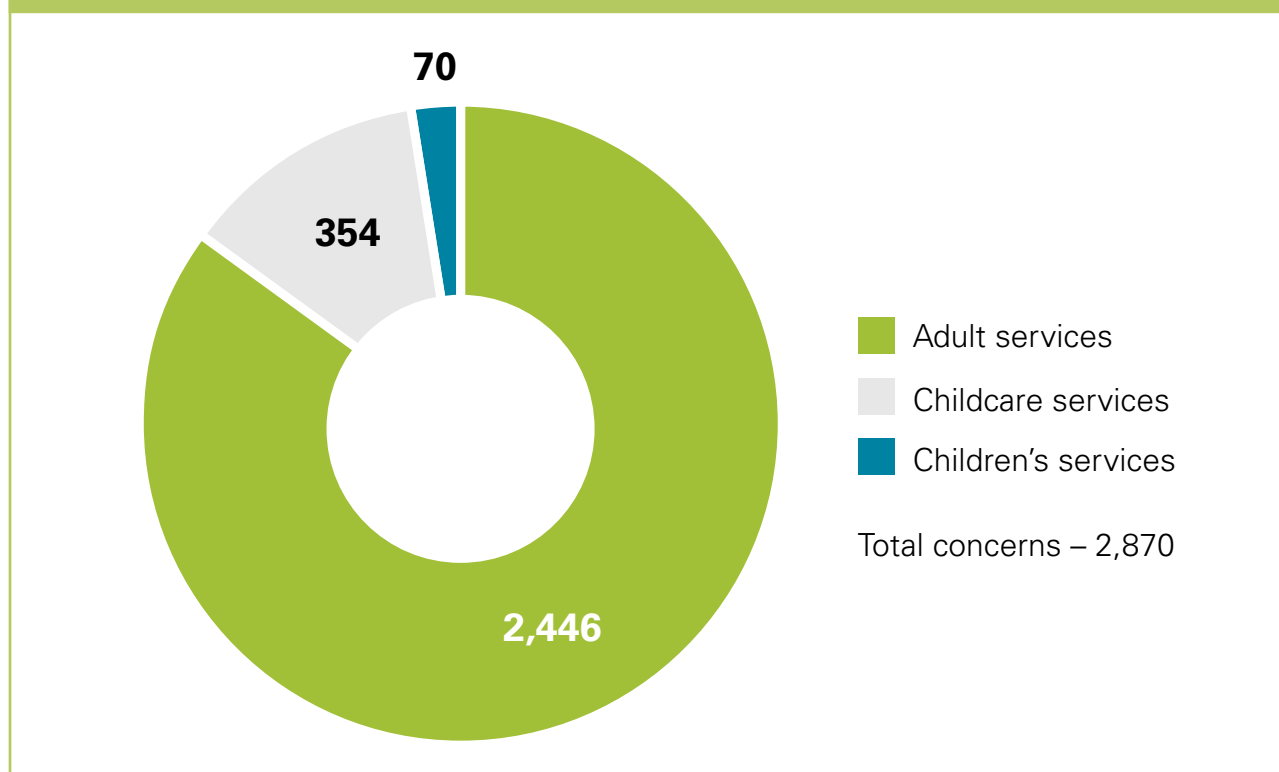
Over the year we have increased our promotion and awareness of **how to raise a concern** www.cssiw.org.uk/raiseaconcern/?lang=en. More people are helping us to protect others and improve service quality through reporting

concerns to us. Please refer to Appendix B for a simple outline of how to raise a concern.

We received a total of 2,870 concerns in 2014–15, which was a significant increase (700 concerns) in the number being referred to us compared to the previous year. A large percentage (85.2% or 2,446 concerns) of the total related to adult services, while concerns about childcare accounted for 12.3% (354) and children's services accounted for 2.4% (70).

As a result of concerns raised, we carried out an additional 304 inspections largely in adult care homes.

Diagram 6: Concerns received about services 2014–15



Sourced from CSSIW data management system

Chapter Three

Context for change – improving our business

This chapter outlines changes to our business in the face of changing legislation, including how we work with others, changes to ICT, our new inspection frameworks and our focus on human rights.

It has been a year of immense change for the organisation. We are preparing for a number of strategic changes across all our functions, including the introduction of major new laws that require us to change the way we register and inspect regulated services, and assess how local authorities are performing in the discharge of their social services functions.

As we embark on another year of further changes it is imperative that we strike the right balance between maintaining regulation, inspection, and review improvements and to assure the public on the availability of safe, quality care.

We continue to target our work in the places where we have the most concerns, while being more proportionate in services which we know are performing well. We have been working with commissioners and service providers to move away from a traditional compliance model of regulation and inspection, to one that places the well-being of people receiving the service at the heart of the regulation and inspection of adult care, childcare and social services.

Human rights

We are committed to integrating citizens' Human Rights into every aspect of our work and to ensure people receiving care are safe, treated with fairness, dignity and respect, and that children are given the chance to develop. We welcome the Older People's Commissioner's positive promotion of people's human rights and her support of our efforts towards mainstreaming people's human rights across all our work.

From 2016, relevant articles of the European Convention on Human Rights and the United Nations Convention on the Rights of the Child will be prominent features of our new inspection frameworks and will be considered within each framework theme.

Our promotional material and guides for providers will emphasise the significance of people's rights and duties under both the Human Rights Act 2010 and the Equality Act 2010 to ensure people have access to services and do not experience discrimination, harassment or victimisation. We will also encourage providers and commissioners to report their human rights and equality policies within their service literature, their annual assessment and when reporting their service performance.

We continue to collaborate with commissioners who have distinct roles to promote and protect human rights, and have arrangements for sharing strategic and local intelligence through regular meetings, Memoranda of Understanding and co-production of key publications. Practical examples of our collaboration include:

- Working with the Equality and Human Rights Commissioner to develop a Guiding Principles Framework for providers of adult care. The guide will be issued in summer 2016;
- Working with the new Children's Commissioner for Wales in her national invitation for children to have their say in setting the priorities for her work – **'What Next'** is an exemplar of the active offer for children's rights. We were pleased to support this by providing data and promoting it through our communication networks;

- Working with the Older People's Commissioner for Wales in responding to her review of care homes to improve people's well-being and to ensure a rights-based approach in the delivery of care services that we will measure through our new frameworks, wider monitoring of service intelligence and promotion. Practical measures to improve the care people receive in care homes (through falls prevention, ulcer, pressure sores, nutrition and hydration) are key priorities of the Quality Forum's work (see page 19).

Focus on people's well-being outcomes – context for change

We all have a responsibility to improve people's well-being. The Well-being of Future Generations (Wales) Act 2015 sets out a unique legislative architecture to improve the social, economic, environmental and cultural well-being of the people of Wales. Together with the Social Services and Well-being (Wales) Act 2014, Regulation and Inspection of Social Care (Wales) Act 2016, the Public Health (Wales) Bill and the More than Just Words strategy for strengthening the Welsh Language, recent developments in Wales set out a common purpose: achieving a better and lasting quality of life for its citizens both now and in the future.

The new outcome frameworks and national indicators developed as part of the legislation will measure how effectively services are contributing to people's well-being.

We are expected to play an important role in assessing and measuring quality and the impact of the care people receive.

We are changing the way we inspect services to focus on well-being and people's rights (including language choice) and are developing new inspection frameworks across all the services we regulate and inspect, including local authority social services. The new frameworks provide a focus on people's well-being and the impact of the care they receive.

We are embedding the application of Human Rights in our frameworks and started to test some of the changes during 2015. We will implement the new frameworks during 2016.

The new inspection frameworks will help people using or choosing services and local authority commissioners to understand the quality of care being provided. It will also allow care providers to better evaluate themselves.

The new frameworks

Diagrams seven, eight and nine outline the three principal inspection frameworks.

The frameworks explain:

- what and how we are measuring each theme;
- the quality standard of care/service; what good looks like and what is unacceptable care;
- the information sources and methods we use in our assessments;
- how we will measure the service's contribution to people's well-being, including in the care they provide.



Local authority social services

Future programme for inspection, review and engagement

The new framework is built around six well-being themes and quality standards in the Social Services and Well-being (Wales) Act 2014 that represent people's well-being.

A seventh theme includes the effectiveness of leadership and governance to enable senior officers and elected members to scrutinise the ability of services to improve well-being.

The objective is to strengthen and systemise our approach so that engagement and performance review is a constant and frequent activity rather than a single event.

- Business meetings with the authority will be delivered systematically to a consistent standard.
- Engagement visits and focused inspections will take place in addition to the core inspection programme.

- Involvement of elected members, including scrutiny chairpersons, will become regular and routine. We will meet with scrutiny chairpersons every March to share respective work programmes and consider the potential for collaboration and partnership. We will expect directors of social services to routinely invite portfolio holders to all or part of our September business meetings with local authorities so that the relevant political leaders of local authorities can hear directly from the inspectorate following receipt of their director's annual report.
- Information will be shared and analysed with the other inspectorates regularly throughout the year and considered in depth in an annual joint analysis seminar.
- Every aspect of our approach will reflect a commitment to the voice, control and well-being outcomes of people needing care and support.

Diagram 7: Local authority framework



Common inspection framework for childcare, play and early years

Working closely with Estyn we have jointly developed a new common inspection framework that can be used across non-maintained settings that are funded to provide the Foundation Phase for three to four-year-olds.

The framework's focus is on well-being outcomes with an emphasis on measuring the impact the service has on children's development, well-being and, where relevant, educational outcomes. The new framework considers the holistic development of children and the requirement to meet the diverse needs of all children, including those who are at an earlier stage of development and those who are more able.

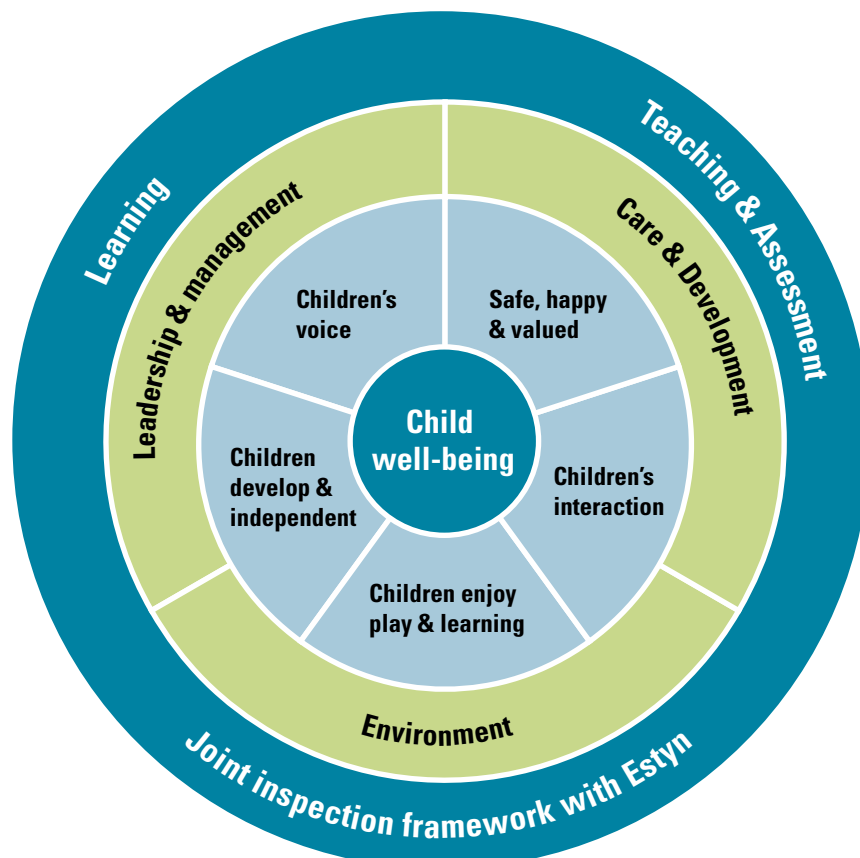
The United Nations Convention on the Rights of the Child (UNCRC) is central to the new framework.

We are currently piloting this common framework for joint inspections with our partners Estyn and plan to extend this approach to the 660 daycare services funded to provide education for three and four-year-olds.

Extending the age of regulated childcare and play

The new framework has been further refined for inspection of provision for older children aged 8 to 12 years from April 2016, when the mandatory upper age for regulation and inspection of childcare and play will increase to 12 years old. The framework is also aligned to the national outcomes frameworks for childcare and early years and promotes the spirit of child development and learning set out in the Foundation Phase profile and the 2015 curriculum.

Diagram 8: Joint inspection framework with Estyn



Adult care homes

Early testing of judgements will pave the way for changes to be brought into effect under the Regulation and Inspection of Social Care (Wales) Act 2016 to remodel service regulation and inspection, including service ratings. This will not be limited to care homes but will extend to all care and support services including care at home in the community, children's care homes, fostering and adoption agencies.

As outlined in Diagram nine, the new framework has been developed to reflect future requirements of the new legal and practice landscape toward well-being outcomes, rights and voice. We are making adjustments to the framework to ensure it can be applied across all care and support services and will start to use the new framework in our inspection of adult care homes from summer 2016.

An early pilot to test the framework with judgements has been positively endorsed by the sector. Getting the right judgement descriptions and thresholds ranging from Excellent/Good/Adequate to Poor is more challenging when applied to complex services.

We are committed to introducing judgements or ratings across all the services we regulate and inspect, including local authority social services. Judgements are a positive mechanism to promote continuous improvement. Judgements improve transparency, help people who use services and the public to compare quality and safety of services, and to make informed choices. Extending judgements to local authorities' performance will also provide clear evidence to enable public and elected scrutiny.

Diagram 9: Adult care home inspection framework



Workforce development

We continue to invest in our workforce and are constantly looking at ways to refine our processes so that inspectors' time and skills in targeting areas of inspection have the biggest impact. However, despite growing demand on our service, our workforce of 278 staff, including 150 front line inspectors, strategy inspectors and area managers, remains at the same level it was in 2014. Our reliance on fee-paid inspectors has become an integral part of our workforce and over the year we used 10,860 paid hours to support our inspection programme.

As a learning organisation we have reshaped our training to ensure that our workforce, in particular our inspectors' skills and competence, reflects modern practice, changing demands and public expectations of us. We have been investing in new ICT and business tools to better equip inspectors and

our registration and enforcement teams to achieve efficient regulation and inspection.

Training over the year has focussed on:

- induction of new inspectors in a new skills development framework;
- testing and implementing our new ICT system;
- the Social Services and Well-being (Wales) Act 2014 and how it impacts directly on our work in inspecting and monitoring local authority social services functions to improve people's well-being;
- Deprivation of Liberty Safeguards (DoLS);
- Advanced Investigative Interviewing;
- all our staff attending Dementia Friends information sessions;
- next steps for end of life palliative care;
- attachment and its role in children's lives;
- learning through landscapes – early years.



ICT system: development and implementation

Our staff continue to develop their ICT expertise and our system now provides a foundation to build online services for external stakeholders. An early trial of these developing services was launched, to provide a bilingual online option for child minders wishing to respond to the childcare age extension exercise.

Our ICT project will continue into 2016, with a view to extending the scope and coverage of services available through 'CSSIW Online'. It is hoped this will include new registration applications for potential providers, and services for registered providers, such as online self assessment and notifications. This will enable us to support: better management of information and data integrity; deliver online services; enable better information sharing; improve organisational efficiency and minimise costs.

Communications and engagement

We strengthened our communications in 2013–14 and re-launched our website. During 2014–15 we strengthened our other channels to further improve our communications with citizens and providers of care services:

- We developed our bilingual monthly newsletter that is sent out to subscribers (anyone can subscribe via our website) and care providers on a monthly basis.
- We launched our YouTube channel www.youtube.com/cssiw and have created a series of bilingual videos to help communicate our messages in a clear and easy way.
- We attended 32 events including the Royal Welsh Show and National Eisteddfod for the first time.
- We increased the number of Chief Inspector engagement visits to 28 services.
- We increased our presence in the Welsh media and appeared in 123 news items during the year including print, broadcast and online.
- 171,216 people visited our website.

- Our English and Welsh Twitter channels received 389,096 impressions.

A big piece of work for us was launching our 'Concerns' campaign. We utilised a number of our channels, including working with partner organisations and umbrella bodies to encourage members of the public to be 'our eyes and ears'. We saw this as a huge achievement – working with the public proactively for the first time in this way helped us to further improve the quality of care for the people of Wales.

Working with others

Quality Forum

We have developed a Quality Forum, a collaboration of leaders in the social care community, including health and social care commissioners, domiciliary care and care home providers. Together with ourselves, Healthcare Inspectorate Wales and Care Council for Wales as regulators of care, we have developed a unified framework of practical support to drive improvement for quality integrated care centred around the person.

The Forum aims to bring a common understanding of what constitutes 'quality' and the expectation of each partner through an active deal, ensuring a consistent interpretation of 'quality' in their respective roles and as a Forum. The central aim of the Forum is to identify and analyse the evidence base, and endorse best practice which can be tested to see what impact and influence it has had on the quality of delivery in health and social care services. This collaborative work can both endorse and promote best practice to improve quality of care and well-being.

Audit, regulation and inspection partners

We have continued to work closely with other auditors, regulators and inspectorates in Wales and the UK, to ensure our work is joined-up, efficient and effective.

Here is a list of work we undertook with partners during 2014–15.

- National joint review of the use of Deprivation of Liberty Safeguards (DoLS) in Wales, and our annual joint monitoring report for 2013–14, with Healthcare Inspectorate Wales.
- Working with Wales Audit Office to examine whether local authorities are working effectively to support the independence of older people.
- Full joint inspection of youth offending work in Newport, led by Her Majesty's Inspectorate of Probation.
- Developing a system for sharing information with Her Majesty's Revenue and Customs (HMRC) to support the new UK Tax-Free childcare scheme so parents who use regulated care and play can benefit from tax incentives available from September 2016.
- Improving the range and integrity of information we share with Family Information Services to assist them in offering timely advice and information to parents and families about the provision and quality of childcare in their area.
- We are strengthening our collaboration with Care Council for Wales beyond information sharing to look at more effective and innovative approaches to integrating business and ICT functions. The Regulation and Inspection of Social Care (Wales) Act 2016 (part 9) covers new duties of cooperation, the application of a single register for managers (maintained by the new body Social Care Wales) and changes to a service based model of regulation and inspection processes which presents opportunities for both regulators to develop joint arrangements.

Strengthening the role of review

The Inspection Wales Reforming Local Government working group

We welcome the proposals in the Welsh Government white paper *Power to Local People* to strengthen the interface between internal and external review of local authorities' performance.

The White Paper, *Power to Local People* proposed that the three main external review bodies work together in order to inform a shared understanding of the corporate 'health' of each local authority.

We have established arrangements to engage citizens and support local scrutiny and democracy by attending scrutiny committees and local panels. We attended over 36 sessions over 2014–15 reporting on our findings from our inspection, review and annual monitoring and assessment of local authority social services performance. The White Paper provides examples of our work in this area.

The proposals set out a clear expectation across local authorities in Wales to ensure parity between internal and external scrutiny by audit, inspection and regulatory bodies. We have been working within Inspection Wales to establish a collaborative framework to share and review collective evidence, intelligence and information accumulated by each partner, and to evaluate whether there needs to be a new or different focus on external review plans for each authority. Scrutiny committees play a vital role in the accountability of local authorities and we would expect them to be involved in authorities' own assessments of their performance and prospects.

We have remodelled our review, engagement and inspection of local authorities' performance to complement the Inspection Wales collaborative framework, and to place a renewed emphasis on engagement with people and elected members. This will provide rich evidence for the corporate assessment to be delivered by Inspection Wales.

Our contribution to Welsh Government's legislative programme, policy reforms and reviews

The legal and policy landscape in Wales is subject to major reform that fundamentally changes the future delivery, scrutiny, regulation and inspection of social care and local government in Wales. Major changes in the Social Services and Well-being (Wales) Act 2014 and the Regulation and Inspection of Social Care (Wales) Act 2016 recast our role, functions, and accountability, and the future arrangements for regulation and inspection of care and support. The Local Government (Wales) Act 2015 promotes and enables local authority voluntary mergers from April 2018 and there are proposals in the Green Paper – *Our Health, Our Health Services* to improve the independence of inspectorates and explore a merger between us and Healthcare Inspectorate Wales. This will have major implications for our organisation, our business model and our work with local authorities, health partners and service providers.

These changes will require a major reorganisation of our business, workforce, organisational structures, and our relationship with providers and citizens. The pace and scale of these changes present challenges and opportunities and we have made early preparations to remodel our systems of regulation and inspection to place a greater focus on people's well-being outcomes.

Responding to and analysing the impact of these changes – including providing professional advice and evidence to Welsh Government and National Assembly for Wales scrutiny committees on these reforms – has been an important part of our work over the past year. We have strived to ensure our contributions have been objective, proportionate, ethical and supported by robust evidence we have gathered from our work and experiences of people who use services. We subscribe to the principles of the Regulators' Code to minimise regulatory burden and target regulatory activity through building constructive relationships with commissioners, providers

and people who receive care. These core values have shaped our contributions. Examples include:

- Supporting Welsh Government stakeholder technical groups in developing the regulations, Codes of Practice and guides to be introduced from April 2016 in the implementation of the Social Services and Well-being (Wales) Act 2014. Our contributions have been as forensic as possible to ensure that new models of care protect and meet the care needs of the most vulnerable groups. Our central message was the importance of transitional and sustainable alternatives to support people impacted by changes in eligibility thresholds, and to build capacity in communities to enable people to improve their well-being.
- Providing independent written and oral evidence to the National Assembly for Wales' Health and Social Care Committee in their scrutiny of the principles of the Regulation and Inspection of Social Care (Wales) Act 2016. We have strived to ensure that lessons from the past and deficiencies of the current system shaped the new services regulation framework and that accountability for the safe and quality care of people is firmly at corporate level. New powers to enable us to oversee and shape the social care market, and to introduce quality ratings for both regulated services and local authorities, will strengthen our role to accelerate improved outcomes for people across the whole system of care and support.
- Providing specialist advice to the Minister for Health and Social Services to inform his decision not to extend the regulation of extra care. We acknowledge the valuable and innovative contribution of extra care housing with on-site facilities to support people's well-being. Our advice supported by evidence concluded the current regulation of domiciliary care and Registered Social Landlords scheme ensures the safety of vulnerable people residing independently in their extra care home – and more regulation was not required.

Over the same period, we have been active in advising and supporting the Minister for Communities and Tackling Poverty's reforms to childcare regulation and registration to ensure consistency of regulation quality and suitability of childcare provision for children up to the age of 12. The change will impact on the conditions of registration for 4,405 providers and increase the range and level of new provision, in particular Open Access Play and community play for older children, to be regulated by us from April 2016. These changes present challenges and opportunities for our work and our inspectors' skills, in inspecting and measuring well-being outcomes for older children between 8 and 12 years. Chapter five provides more information about our work in this and wider reforms in children's services.



Chapter Four

A closer look at local authorities

This chapter is informed by our continual engagement and evaluation of local authority performance, inspections undertaken during 2014–15 and our evaluation of the director of social services' annual reports.

During 2014–15:

- Local authorities assessed the needs of 83,100 adults in Wales, a decrease of 7% on the previous year.
- 73,900 adults received services of which 82% were living in the community and 18% were living in care homes.
- 22,157 were aged between 18 and 64; 28,975 were aged 65-84; and 22,768 aged over 85.
- 13.2 million hours of home care were provided by local authorities, similar to the previous year.
- Nearly 23,000 adults were receiving home care, a slight decrease on the previous year.

Sourced from Statistical Release: Assessments and Social Services For Adults, 2014–15 – Revised statistical release 12 January 2016

It is positive to note that for the first time for some years there are no local authorities subject to our Serious Concerns Protocol and our early identification and intervention with those where we had emerging concerns to make timely improvements averted escalation of our monitoring.

Our assessment focused on local authorities' leadership and resilience to meet increased demand in a period of on-going austerity and uncertainty from local government reforms and mergers. At the same time, authorities have been transforming their services to meet the new duties and objectives of the Social Services and Well-being (Wales) Act 2014.

What we found

Better performing local authorities were those with:

- strong corporate support;
- strong political support when embracing change;
- effective oversight and scrutiny;
- stable senior management, clearly sighted on front line delivery;
- a focus on a whole system approach to achieving improvement;
- strong constructive partnerships including independent providers of care services;
- a readiness to innovate and learn from best practice;
- ongoing investment in the training and development of their staff.

Local authorities that did less well had:

- a lack of vision;
- a collusive relationship between scrutiny committees and officers;
- a preparedness to accept the status quo and continue with poor patterns of care delivery and services;
- poor engagement with staff;
- poor planning and commissioning arrangements;
- high levels of staff sickness and turnover.

The impact of financial pressure was mixed; while many protected social services budgets, others had to achieve significant cost saving efficiencies in the provision of social care.

Adult services

Information, advice and assistance

The majority of local authorities had restructured their information, advice and referral systems for adult services. Most had recently moved to a 'single point of access'; many integrated or co-located with health and housing services. Different arrangements were in place across Wales depending on local factors including relationships with health and the availability of sites for bringing services together.

Safeguards

It was apparent that arrangements for adult safeguarding were in transition and most areas established regional boards. Most local authorities had robust systems in place although safeguarding arrangements needed strengthening in a minority of local authorities.

As reported in our annual Deprivation of Liberty Safeguards monitoring report³ there was a sixteen-fold increase in applications as a result of the Cheshire West judgement. The level of increase and the challenges that this presents for local authorities is stark.

Care in the community and eligibility thresholds

Despite a rising population, there was a significant drop in the rate of older people over 65 years old receiving care and support in the community per thousand population; the rate fell from 74.5 in 2013–14, to 67.3 in 2014–15. The information suggests that authorities have introduced higher eligibility thresholds.

By contrast the rates of support for younger adults aged 18-64 remained relatively unchanged. It suggests increased use of non-statutory, community based services although data on this is not easily captured.



³ <http://cssiw.org.uk/our-reports/national-thematic-report/2016/160113-dols-annual-report-2014-15/?lang=en>

Most authorities reported successful outcomes in the reablement services with many people not requiring additional support after reablement. However, figures were variable.

The rate per 1,000 population of people aged over 65 funded to live in care homes in Wales also dropped from 19.8 to 18.9. We noted expansion in numbers of new extra care services. Some local authorities had a higher than average proportion of over 65s supported in residential care homes and these extra care places should assist in promoting independence and providing an alternative to residential care. It was also encouraging to note 4,463 people used direct payments – an 8% increase on the previous year.

One of the challenges of reporting on activity in relation to adult care services is that many community and care home services are also commissioned by the NHS and the data is not collated alongside local authority activity. The result is that the picture which emerges and is presented above is only partial. We are aware that health boards are increasingly commissioning home care services and commission a very substantial number of beds in nursing homes. We believe that there is a strong case for capturing and bringing all the data together so that an integrated picture for Wales can be produced.

Performance in reviewing care plans for all adults was variable, with the Welsh average being 80%. The importance of good quality reviews was underlined by the results achieved in the Vale of Glamorgan where a focus on improving the quality of reviews was directly attributed to a significant reduction in the use of residential care.

While overall there was a reduction in the rate of delayed discharges from hospital the rate was variable; some local authorities achieved significant reductions and five experienced significant increases. In those with marked increases, problems with capacity, domiciliary care and community resources featured in four; staff vacancies and sickness in social work teams in the other. Where local authorities achieved marked reductions in delayed transfers of care, this was a result of local

initiatives which had been introduced. These included establishing a social care hub in a hospital; development of step up and step down beds; the use of telecare and the appointment of discharge nurses. In the Vale of Glamorgan a fully integrated discharge pathway was established. Other local authorities created rapid response domiciliary care teams. Flintshire was piloting a night-time response service.

Carers

There was evidence of innovative approaches to increase the number of carers who were assessed and offered services. These included carers, champions and “carer connectors” located in local teams. Pembrokeshire had an integrated strategy with the health board and 15 GP surgeries signed up to be “Investors in Carers”.

Children’s services

Preventative services

Despite the impressive range and coverage of early support and preventative services available to children and families (heavily supported by Flying Start, Communities First and Families First schemes) most authorities experienced an increase in referrals to children’s services. The demand for statutory services has increased slightly – from 35,285 in 2013–14 to 35,423 in 2014–15 – although there has been a downward trend in recent years, and arrangements for the co-ordination and delivery of preventative services varied across Wales.

Local authorities were heavily reliant on grant funded schemes and there is a concern about their long term sustainability. This makes commissioning difficult because independent and third sector providers are less willing and able to commit to long term plans and staff they recruit have less security.

Safeguards

The Welsh Government commissioned Action for Children and NSPCC Wales to deliver the Welsh Neglect Project over two years (2013–15). The project brought together key

partners across Wales to collaborate and identify key areas for action on child neglect. The project aimed to improve multi-agency responses and services, and ensure neglected children and their families received help as early as possible.

The number of children on the child protection register fell during 2014–15 by 6% to 2,936. There was a reduction in several local authorities, and such significant changes need to be monitored carefully and the reasons properly understood. In the case of one other local authority, the quality sub group of the safeguarding board undertook a review of deregistered cases and could not be assured that decisions to deregister children had been made on the basis of robust assessments. It was evident from our evaluations that an increasing number of local authorities across Wales had adopted or were introducing the “Signs of Safety” model, a strengths based, safety organised approach to child protection casework which originated in Australia.

Looked after children

After several years of increasing numbers of looked after children there was a 2.2% decrease in 2014–15, with 5,617 children (89 per 10,000 population compared to 66 per 10,000 in England) being looked after as at March 31 2015. However this decrease was due to an accelerated number of children leaving care rather than slow down in the numbers of children being taken into care. Whilst we found evidence that many authorities had strengthened their early intervention support to children in need, the disparity in numbers and rates between similar authorities indicated that some authorities needed to examine their thresholds for children coming into care. Research by Cordis Bright⁴ into the reasons why local authorities with similar levels of need, had different looked after children populations concluded that a complex interaction of demographic and socio-economic trends, as well as factors connected to the way the local area leads, organises and deploys its services for vulnerable children and families came into play.

Placement stability and performance

There were 512 looked after children in March 2015 who had three or more placements within the year, a rate of 9% compared with 8% the previous year. A number of local authorities recognised the need to increase the range and number of foster placements, especially for children with more complex needs.

Securing early permanence for looked after children was a priority for local authorities. The number of children adopted in 2014–15 increased by 38 (11%). There was a strong commitment across local authorities to support and drive the development of the National Adoption Service but ongoing co-operation and a considerable effort will be required to realise the potential of the new arrangements. The increase in the number of adopted children is positive but the challenge for local authorities and their partners will be to ensure that there is timely and effective post-adoption support both for children and their adoptive families. Chapter five provides more information on our national review of looked after children.

Local authorities remained in touch with 93% of their care leavers and 59% of 19 year-old care leavers were in education, training or employment, compared with 55% the previous year.

Leadership and governance

Local authorities appeared to be making significant strides towards the implementation of the Social Services and Well-being (Wales) Act 2014, particularly in relation to staff training. However, local authorities needed to ensure sufficient capacity in the community at a preventative level to support people’s needs over the transition from formal care. We found that:

- Reductions in funding to voluntary organisations inevitably reduced the range of community support available to support people and prevent them becoming reliant on formal care arrangements.
- Integration with health services was highly variable and proved a challenge due to factors such as differing priorities, cultures, size and resources of the two organisations.

⁴ www.ssiacymru.org.uk/home.php?page_id=8745

- Co-location of social care and health services provided benefits for people accessing services and opportunities for greater efficiency. However, the potential to translate co-located services into integrated services will be difficult to realise and requires a clear vision of how services should operate and a workforce which is much more flexible.
- There was little evidence of the availability of social enterprises or local authorities' development of them.

Workforce

Workforce stability is critical to the delivery of consistent, reliable services. Some local authorities faced real challenges in both children's and adult services whilst others appeared to have stable, resilient workforces. There were some who managed to stabilise their front line childcare workforce after what had been periods of considerable difficulty.

Clarity of purpose, manageable workloads and good quality line management support appeared to be the ingredients of success.

Despite reducing resources, local authorities continued to invest in training and developing the workforce. The integration of health and social care services will require an agile workforce with closer connectivity between those delivering early help and preventative services, and those delivering statutory services.

Many local authorities were reviewing and reducing the size of the senior management teams. Local authorities will need to assure themselves that they have sufficiently skilled and experienced managers who are able to provide professional leadership and management of social services during a period of unprecedented change.

Regionalisation

There were many examples across Wales where local authorities worked together to commission and deliver services on a regional footprint. Local authorities reported that there was evidence that regional services were delivering efficiencies and improvements in terms of quality and availability of services. It is critical that progress and momentum

in commissioning and delivery of regional services is sustained especially during a period of uncertainty in the future shape and configuration of local authorities in Wales.

Directors reported good progress being made to establish regional adult and children's safeguarding boards, although in some areas local arrangements had also been developed to maintain a local oversight and focus on the effectiveness of safeguarding arrangements. As the regional boards become established, local authorities will need to assure themselves that they provide sufficient oversight and scrutiny of safeguarding matters within their area.

Commissioning

In response to the increase in the number of people with care and support needs who wish to live independently, and the increase in the number of older people with complex needs, commissioning social care services is becoming ever more complex. Effective commissioning can only be secured when local authorities work with partners, especially health, housing and independent providers, to develop and implement clear and coherent commissioning strategies. They require suitably skilled and experienced commissioners who have both an understanding of the complexity of the social care market and the legal framework for commissioning services. We saw in 2014–15 that where commissioning arrangements had been ineffective and poorly managed, vulnerable people had been placed at risk.

Inspecting for Improvement: Neath Port Talbot – Achieving improvement in their children's social services

Serious concerns about the performance of Neath Port Talbot's children's services were first highlighted at our inspection in 2010. It was clear that there were significant delays in responding to safeguarding referrals, inadequate assessments and weak decision-making. As a result vulnerable children were placed at serious risk. Front line staff were clearly under stress, felt unsupported and were trying to deal with

large volumes of complex cases without clear direction. As a result staff sickness and turnover increased which in turn exacerbated problems.

Despite us requiring improvement from the local authority and offering advice the situation did not improve. Further monitoring inspections found increasing levels of concern. In 2012 the inspection concluded: 'The service lacks direction and staff need clear guidance and support to promote consistent levels of good practice.'

As a result our Chief Inspector decided to place the local authority under the Serious Concerns Protocol. The Protocol required the local authority to produce and commit to an improvement plan which is subject to scrutiny and ongoing monitoring by us.

The Chief Executive and Leader of the Council took decisive action. A new senior team was brought in and put in a clear, staged plan based on the analysis and recommendations made by us.

At the heart of the plan was:

- a "back to basics" approach to managing front line child protection and assessing risk. This included the introduction of decision making tools;
- a focus on the well-being of front line staff, increasing capacity, training and support and the visibility of senior managers;
- restoring the confidence and commitment of partner agencies;
- putting in place a robust quality assurance system.

Two years on, following a series of positive monitoring visits and inspections, children's services in Neath Port Talbot was judged to be performing well, and as a result was removed from the Protocol.

Quote from the report from a staff member (detailed within the CYPS Staff Survey 2014):

"I believe the service is operating on a far more stable footing than previous years. Reinstating clear processes has provided a structure whereby staff can operate in a more controlled environment and children and families' welfare is better protected".

In June 2015 the local authority published a lessons learned review, which highlighted what went well and what made the difference. The report noted the importance of engaging elected members and the value of their support. The report also stressed the value of seeking peer support and looking elsewhere (Leeds in this case) for possible solutions, both suggestions made by us.

The report noted:

"Leeds City Council showed us that despite having naturally high levels of demand, they were still able to provide quality social services support to children, young people and their families, particularly in the areas of:

- managing high levels of complex cases;
- strong multi-agency safeguarding processes;
- innovative intake arrangements;
- open and informed leadership."

The report concluded: "One important piece of learning is not to treat the Inspectorate as adversaries. CSSIW clearly pinpointed our shortcomings; shortcomings that up to then were under the surface and frustratingly intangible.

We found that the CSSIW were not just focussed on solely measuring our success in meeting their recommendations; in addition, they proactively offered up regular advice.

By working with rather than against the CSSIW, their support to us was invaluable in helping us at every stage to focus clearly on what we needed to do next and affirming our own analysis of where we had got to and where we needed to go next. We are all immensely grateful for that."

Chapter Five

A closer look at children's services

This chapter provides an in-depth look at the performance of early years and children's services.

Demographics – Wales

- There were 629,609⁵ children and young people under 18 years in Wales during 2014–15 with 554,841 under the age of 16 years.
- Approximately 200,000⁶ children in Wales were living in poverty.
- Approximately 90,000 lived in severe poverty.⁷
- The population of three and four-year-olds was 73,293.
- There were 77,314 places for childcare and play.
- 5,785 three and four-year-olds in the non-maintained sector received Foundation Phase education.
- 20,145 children in need and their families received support from local authority social services.
- 5,617 children in need were looked after.
- 2,936 children in need were on the child protection register in Wales.
- Local authority reported expenditure in children and family services was £553,950,000 (£248,201,000 for looked after services).
- 37,260 children benefited from Flying Start.

Making a difference to children's lives

We have continued to support Welsh Government's national objectives in making a difference to the lives of children and young people in Wales. We did this by striving to ensure commissioners, providers and those delivering services are improving well-being and maximising positive opportunities and ambitions for children and young people.

The provision of affordable and accessible childcare to support families living in poverty to achieve better outcomes is one of five key priorities within the revised Child Poverty Strategy. Tackling child poverty remained a challenge with 31% of children in Wales living in poverty, compared to 28% in England, 24% in Northern Ireland and 21% in Scotland.

The renewed focus and broader approach set out in the 2015 Tackling Poverty Action Plan for collective action across all bodies and sectors was welcomed. Gathering evidence on how local authorities and others support this objective will be a key priority of our review and inspection work with local authorities, and our whole system assessment with Inspection Wales partners on the corporate health of each local authority.

Research shows that early years are crucial for cognitive, social and emotional growth. Helping families to combine work and care is an essential step in achieving equality by enabling better access to the labour market for women, while helping parents to work can support economic growth and tackle poverty.

As the regulator and inspectorate of childcare and social care, we see first-hand the active role of communities and parenting groups in setting up local childcare arrangements. These are important community assets and play an integral role in supporting the local economy to facilitate parents' ability to return to work, seek employment or training.

We support the new Common Outcomes Framework for Communities First, Families First and Flying Start and its emphasis to monitor and drive behaviours to help individuals at different levels of the service to understand their contribution to improve the quality of

⁵ StatsWales – ONS mid year population estimates, 2014

⁶ This estimate is based on Households Below Average Income (HBAI) data for Wales, which show that 31% of children were living in households below 60% of the median household income (after housing costs), for the three year period 2010/11 to 2012/13. The data is derived from the Family Resources Survey

⁷ www.savethechildren.org.uk/sites/default/files/docs/Child-Poverty-Snapshots-English.pdf

life in communities. Tackling poverty requires collaborative action and can have a powerful impact when all partners share, analyse and use evidence to shape local strategies. The new inspection framework will be a key source of intelligence and sets out the measures we will use in our assessment of local authorities performance in supporting community well-being and tackling poverty.

Early years and high quality, accessible childcare remain important to children's resilience and confidence, and narrowing the attainment gap to ensure they get the best possible start in life. We are pleased that raising standards in early education and childcare services and the workforce remained a strong feature of the 2014–15 progress report on *Building for a Brighter Future*.

Over this time we worked closely with Welsh Government, the Early Years Partnership Board, the Foundation Phase Expert Group and others in contributing to a number of reviews and programmes, and to examine where actions had the biggest impact.

Over 2014–15 we inspected and regulated 2,406 childcare services which provided 51,874 places. Our professional expertise, information and intelligence-gathering from our work has enabled us to provide independent advice and evidence to Ministers and wider stakeholders to inform future priorities and policies for early years and childcare. This has not only influenced policy but we have been active in remodelling our inspection and engagement with children and families to ensure our future approach complements and aligns with national objectives to improve children's well-being, and to measure the impact and difference it makes.



Welsh Government has announced its decision to extend regulation of childcare and play to children under 12 years from 1 April 2016. We have made a significant investment in engaging with the sector and providers through three national stakeholder events to prepare services for the changes. Our handling of the extension of regulation and inspection of childcare and play, as well as the response from providers, will be a prominent feature of our 2015–16 report.

Key areas of action/our impact:

- Responding to recommendations from the independent review of childcare and early education registration, regulation and inspection and Foundation Phase Stock-take Review, highlighted the benefits of bringing together the regulatory and inspection framework around childcare and early years for 0-7 year olds.
- An Early Years Outcomes Framework with a focus on child development and well-being is the bedrock of our new inspection framework for childcare and play.
- 10-year Early Years Workforce Plan – to build skills and capacity in the sector and recognise the vital role of those who teach and care for our youngest children.
- Review the Childcare Sufficiency Assessments for local authority assessment of the level of childcare – we worked with local authorities, Family Information Services and policy advisers to agree common definitions for the diverse range of childcare and play, and the rigorous collection and sharing of our data. We developed a new integrated service assessment and annual quality review tool to enable providers to give us regular online updates about changes in their service. This information will have a key role in local authority market shaping to ensure a diverse range of affordable childcare services in the community that are sustainable in meeting local and national need.
- A new assessment framework to support the tracking of all children’s developmental progress aged 0 to 7 years old. We will promote use of the tool to record

development as best practice for all children and recognise/reward those services through our inspection reports.

- We developed a joint inspection framework with Estyn alongside the sector through national workshops and piloted it in 11 service areas to test the joint inspection with judgements.
- The early years, childcare and play workforce supported by the European Social Fund.
- We strengthened our regulation and inspection arrangements to take into account the aims of the Well-being of Future Generations (Wales) Act 2015.
- Changes to the registration of childcare provision in Wales – we wrote to every registered childcare provider in Wales to seek their views on the impact to their business and to advise them what systems we will put in place to minimise burdens.

Central to our work has been our extensive engagement with stakeholders in developing our new inspection framework for childcare and those we will jointly inspect with Estyn. We supported tools and training resources that will have a key focus on measuring child development, well-being outcomes and protecting their rights. We also worked with the childcare and play sectors to measure the impact the extension of regulation and inspection will have on their business and how best we can put in place proportionate arrangements to ensure older children are cared for in a safe, secure and appropriate environment.

Childcare places and Flying Start

Flying Start remained a top priority in tackling poverty in Wales, providing enhanced support to families with children under four years of age living in disadvantaged areas. In 2014/15 it attracted £71 million of Welsh Government investment rising to £76.9 million in 2015/16. Free quality childcare for two and three year olds is one of the targeted aims of Flying Start. Evaluations show the positive impact and difference the programme is making to the life chances of children. Recent research⁸ reported some parents saw Flying Start childcare as

⁸ Government Service Research
Qualitative Research with Flying Start Families – January 2016

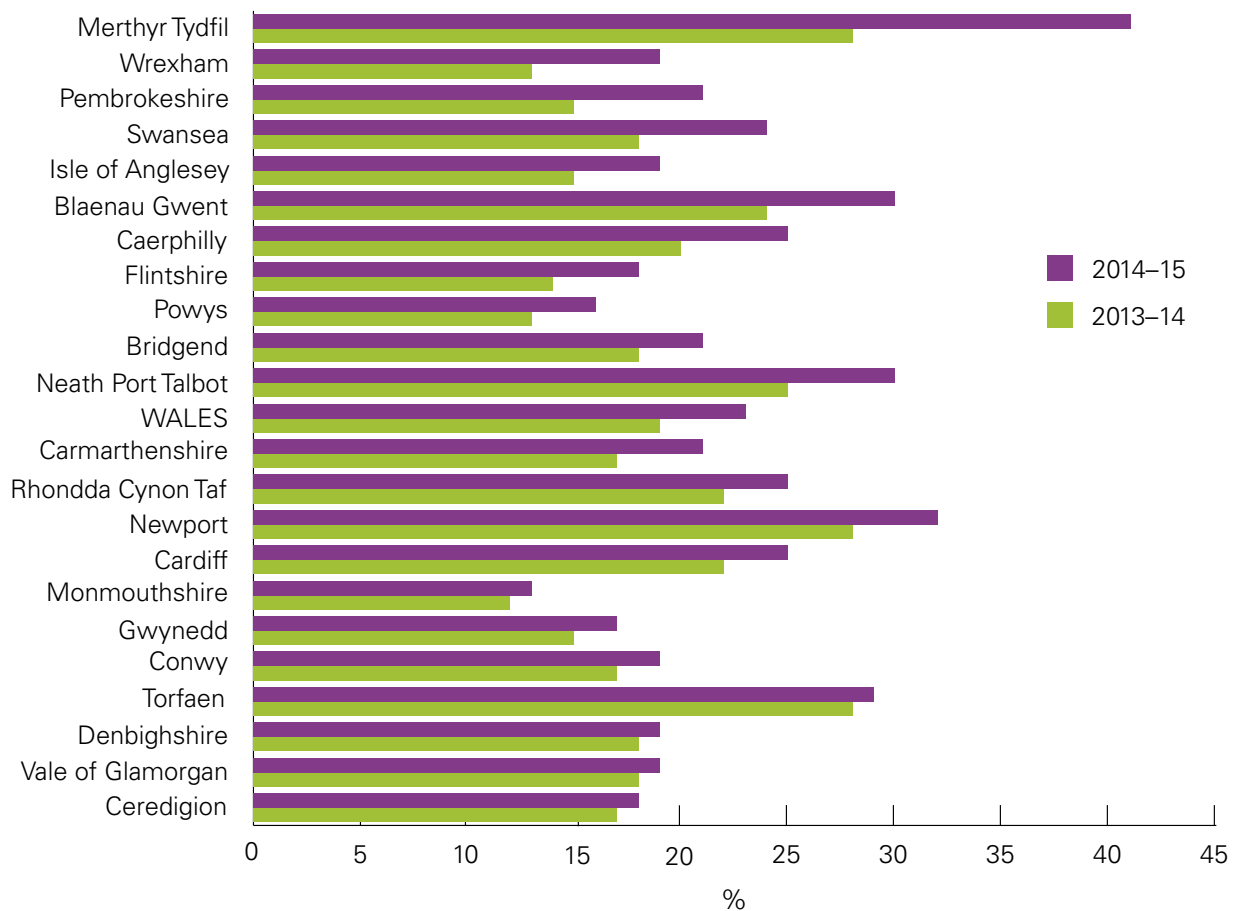
more favourable to non-Flying Start provision; some felt that Flying Start childcare was 'more structured' than other provision with good examples of childcare staff delivering wider entitlements such as speech and language therapy.

Last year we emphasised the importance for the most deprived communities and the use of funding to develop quality childcare places. There has been a significant increase in the numbers of children benefiting from Flying Start – 37,260 compared to 31,322 in the previous year, with increases in areas of most deprivation. Most notable was the increase in children under four-year-olds allocated to

Flying Start health visitors in the South Wales Valleys area of Merthyr Tydfil (44%). Diagrams ten and eleven illustrate the distribution of this strand of Flying Start provision across Wales in 2014/15. Also of note is the 19% increase (7,658 from 6,450) in the number of newly eligible children taking up a full or reduced offer of childcare through Flying Start.

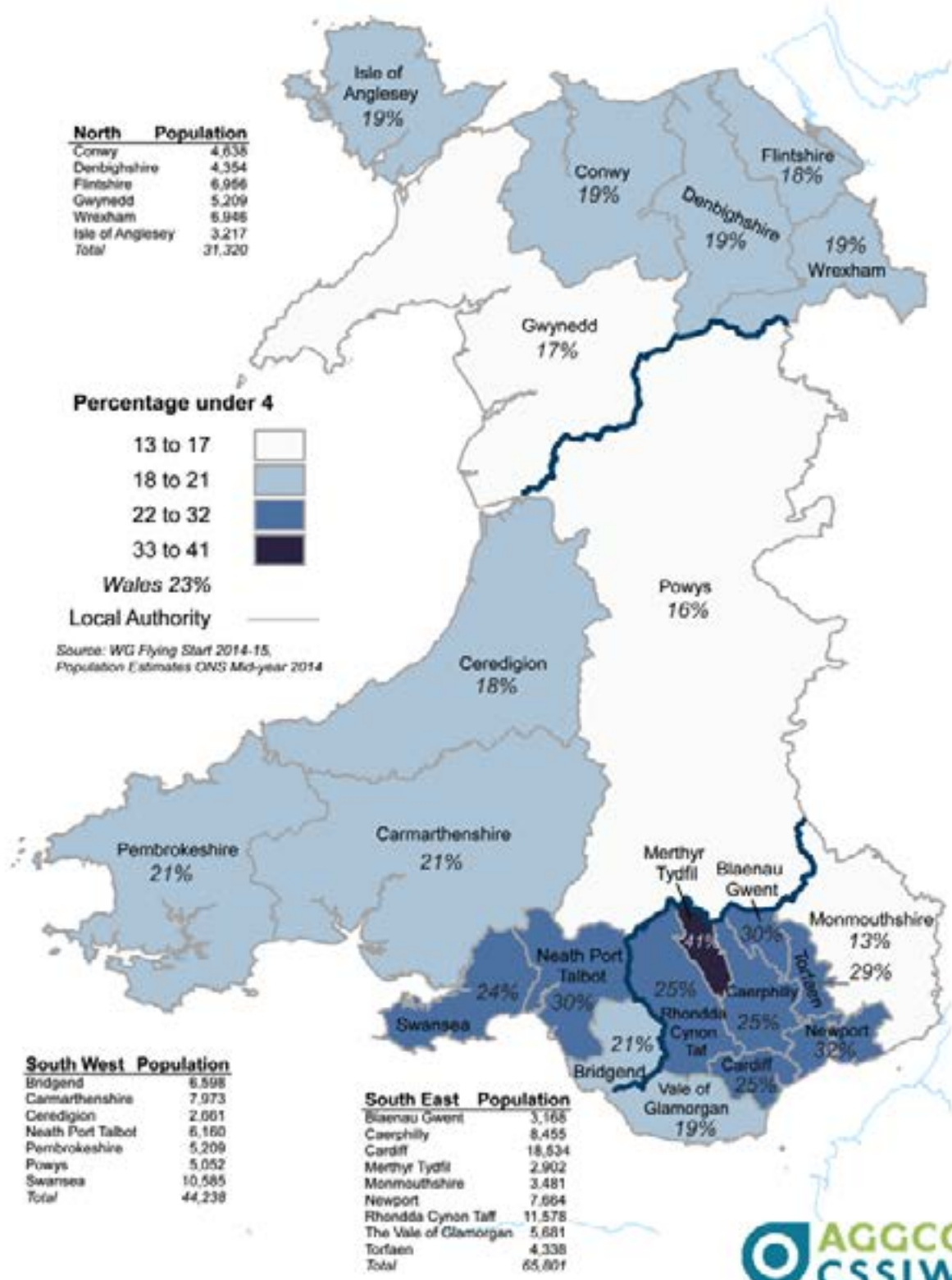
However, when taking into consideration registrations, de-registrations and changes to registered places within services, the number of childcare places has remained at the 2013/14 level. Diagram twelve shows the distribution of childcare places for children under eight-years-old.

Diagram 10: Percentage of population aged under 4 on Flying Start health visitors caseload (in order of % change)



Sourced from StatsWales

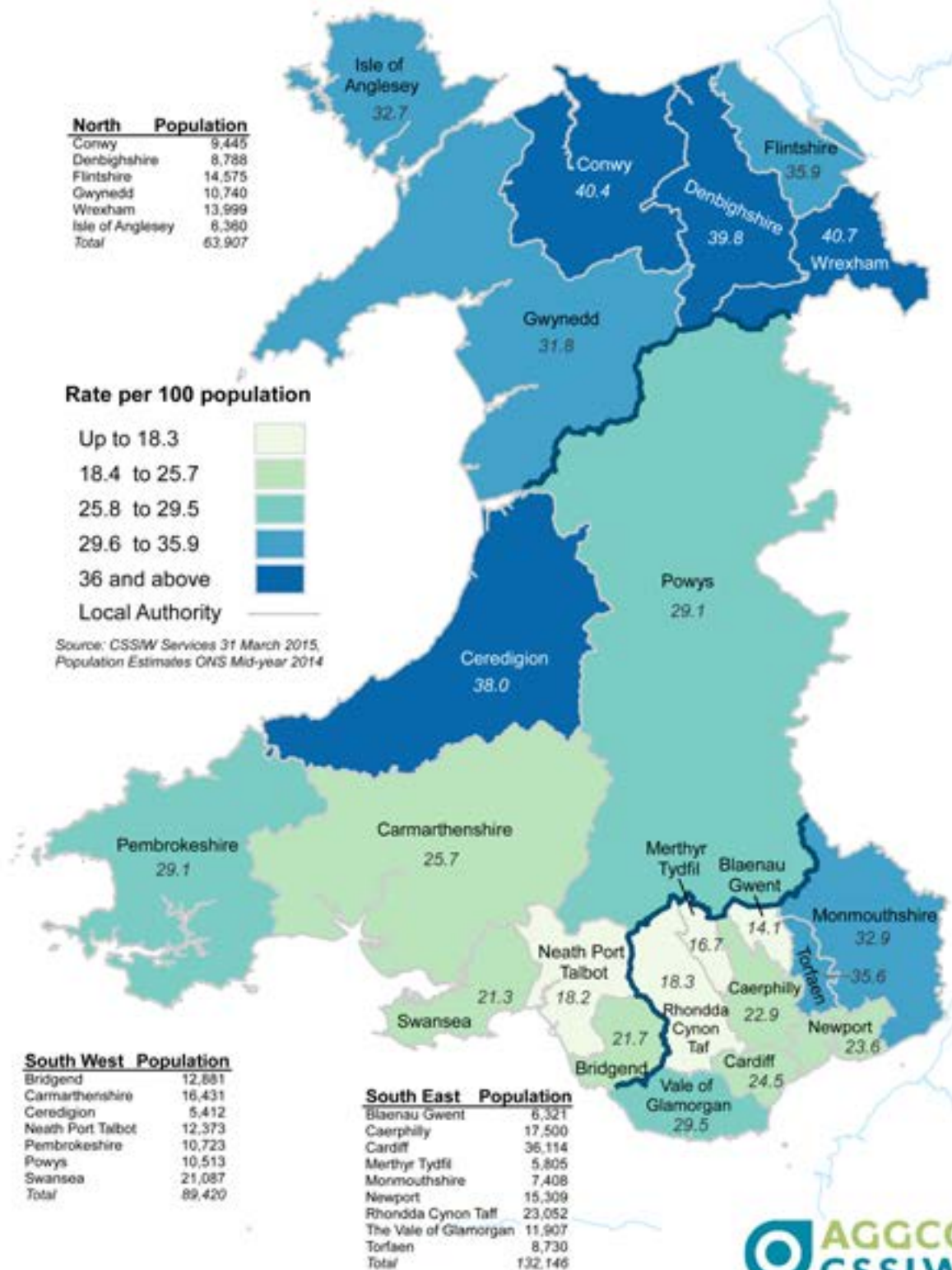
Diagram 11: Percentage of population aged under 4 on Flying Start health visitors caseload, during 2014–15



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Diagram 12: The rate of children's day care places per 100 population aged under 8, as at 31 March 2015



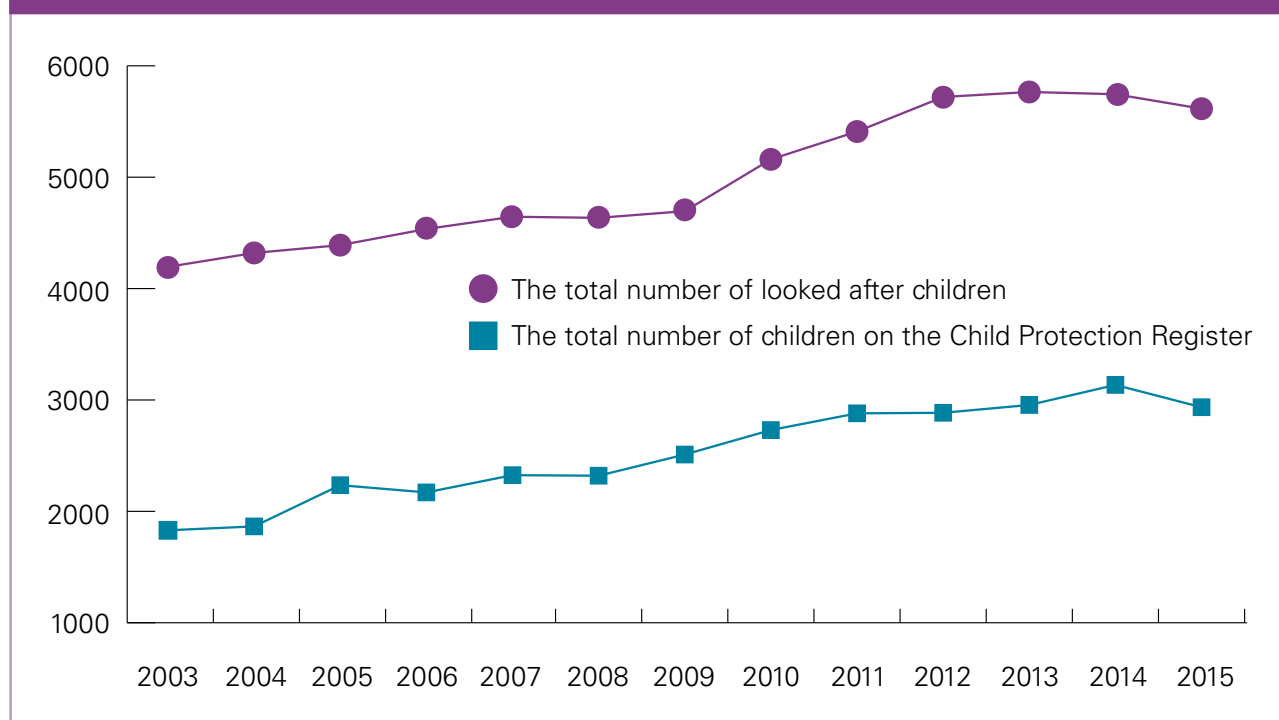
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Looked after children

The number of looked after children in Wales as at 31 March 2015 was 5,617, which represented a 2.2% decrease from the previous year. The decrease in the number of looked after children is due to an accelerated rate of children leaving care rather than a slow down in the numbers of children being taken into care. National performance data for 31 March, 2015 data shows:

- 512 looked after children had three or more placements, a rate of 9%, compared to 8% the previous year;
- the number of children adopted increased by 38 (11%) over the previous year;
- local authorities were in touch with 93% of 19-year-old care leavers;
- 59% of 19-year-old care leavers were known to be in education, training or employment, compared to 55% the previous year.

Diagram 13: The number of children looked after and on the Child Protection Register in Wales, as at 31 March 2015



Sourced by StatsWales

This section reports on our national thematic inspection of looked after children⁹ and care leavers, and our monitoring of intelligence for those children accommodated in residential children's homes.

The need to prioritise our work over 2014–15 to this particular group of children was made against the revelations of systematic abuse of children in care in Rotherham, Rochdale and Oxfordshire and to shine a spotlight on the increased vulnerability of looked after children and care leavers. Although these inquiries did not directly relate to practice in Wales, we wanted to highlight the devastating consequences that can follow when local systems for safeguarding children fail and to reinforce to local authorities the importance of corporate parenting duties and to be vigilant to ensure the safe care of children.

Our inspection focused on local authorities, safeguarding and risk management for looked after children and care leavers who exhibited vulnerable or risky behaviour. Our inspection was also informed by the Children's Commissioner for Wales.

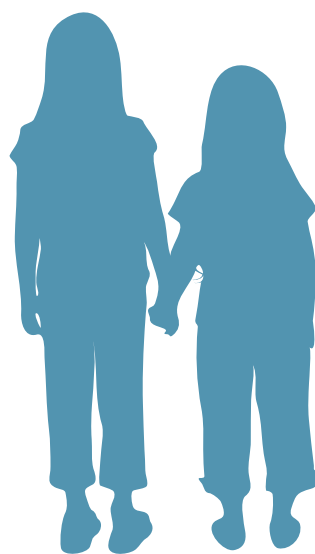
⁹ Inspection of safeguarding and care planning of looked after children and care leavers who exhibit vulnerable or risky behaviours – www.cssiw.org.uk/docs/cssiw/report/150130lacen.pdf

¹⁰ Reports by Children's Commissioner for Wales

'Lost after Care' and 'Missing Voices'¹⁰ reported young people talking about their preparation for transition to adulthood; they felt they were not always involved in the care review process and professionals were paying lip service to planning documentation and not taking account of their wishes.

The inspection also considered progress made by local authorities in responding to a number of recommendations made in our previous reports, in relation to safeguards and review of the role of independent reviewing officer services and the role of the director of social services in respect of looked after children.

During the inspection, inspectors talked to some 300 looked after children and care leavers about their experiences of care, and a further 178 responded to our survey.



Characteristics of children and young people involved in the inspection.

Inspectors found that many of the children, before they become looked after, experienced some degree or combination of:

- Absent/chaotic and often grossly inadequate parenting.
- Chronic abuse and neglect.
- Sexual abuse, often at a young age or over a sustained period.
- Exposure to the impact of relationship breakdown including domestic abuse, offending behaviour, substance misuse and mental health issues.

Reported experiences of care for young people included a complex combinations of:

- Disengagement from birth family.
- Unhappiness with the circumstances resulting in them becoming looked after and not wanting to live with an alternative family.
- Inability to settle either at home or in care.
- Social isolation.
- Poor emotional well-being including low self-esteem.
- Lack of trust in adults including professionals.
- Engagement in risk taking behaviour or associated risk resulting from going missing, substance misuse and self harming behaviour.

Our inspection identified the following areas for improvement:

- Members, officers and partner agencies needed to ensure ownership of strategic aims and actions to improve outcomes for looked after children and care leavers.
- Urgent national action was required to address the deficit in service to meet psychological and emotional health needs.
- Relationships between child protection, risk management and care planning processes needed more clarity.

- Local authorities needed to accelerate their efforts in securing permanency and good outcomes for those children already looked after.
- Shortcomings in the capacity and effectiveness of the reviews of children's care plans.

We will monitor progress made by local authorities in making the improvements outlined above. We will use a combination of methods including our annual review and assessment of local authorities' social service functions, and in a focused inspection we will review the impact that the delivery of care planning has upon looked after children in a small number of local authorities.

Children's homes

- 133 children's homes in 2014–15 provided 590 placements, an increase of 4 homes from the previous year;
- 105 services providing 441 placements were registered to private providers;
- 24 services providing 132 placements were registered to local authorities;
- One secure children's home provided 22 placements for mainly youth justice, as well as care placements;
- There were 169 registered residential child care managers¹¹, 74% of which were employed in private sector homes;
- There were 2,167 residential childcare workers, 52% of which were employed by the private sector.

Types of care provided in children's homes that we regulate and inspect:

- Homes that accommodate looked after children;
- Homes that provide short break care for disabled children and other children in need;
- Secure children's homes mainly for children on remand or sentenced to custody but which also include care placement for children at high risk of harm to themselves or others; and

¹¹ Residential care managers and staff are required by law to register with the Care Council for Wales. Figures are numbers registered with the Care Council as of June 2014.

- Residential special schools providing 365 days of care for disabled children and people, including those with mental illness.

Children accommodated in residential special schools (where their prime need is education) for fewer than 365 days each year (12 services) and boarding schools (10 services) are not registered with us but are inspected by us.

Children's homes provide care for some of Wales' most vulnerable children with a wide range of needs in diverse settings. Many will have complex and challenging needs and it is important that services can support and respond to the acute and differing needs between vulnerable adolescents, mainly looked after children who may have experienced traumatic and chaotic childhoods, and children with complex specific education needs. Many placements in children's homes are by local authorities outside Wales and local authorities have legal duties to ensure placements are suitable, children needs are being met, to maintain contact with the child and to notify the local authority and local health board in Wales about the placements.

Children's homes are inspected annually and it was positive to note 94% of homes met the standards of care, while 7 homes worked with us to make improvements. One home remained a service of concern where we put a rigorous monitoring system in place to ensure children were safe and risks were managed.

It is not viable for many local authorities to commission special placements in other authorities and as such, 89 of 250 local authority placements in residential homes were placed out of their own authority area and 54 of these were outside of Wales.

Chapter Six

A closer look at adult services

This chapter takes a more in-depth look at adult services, an area that is being increasingly scrutinised. This includes a focus on care homes and plans for the future to ensure services are in place to meet the needs of an increasingly older population in Wales.

The situation in Wales in 2014–15 was as follows:

- There were 614, 747¹² adults over the age of 65, with around 8.4% receiving publicly funded care.
- 40,421 adults aged 65 or over were supported to live in the community.
- 11,324 adults aged 65 or over were supported to live in residential care homes.
- 28,514 adults between the ages of 18 and 65 were supported to live in the community or in residential care homes.

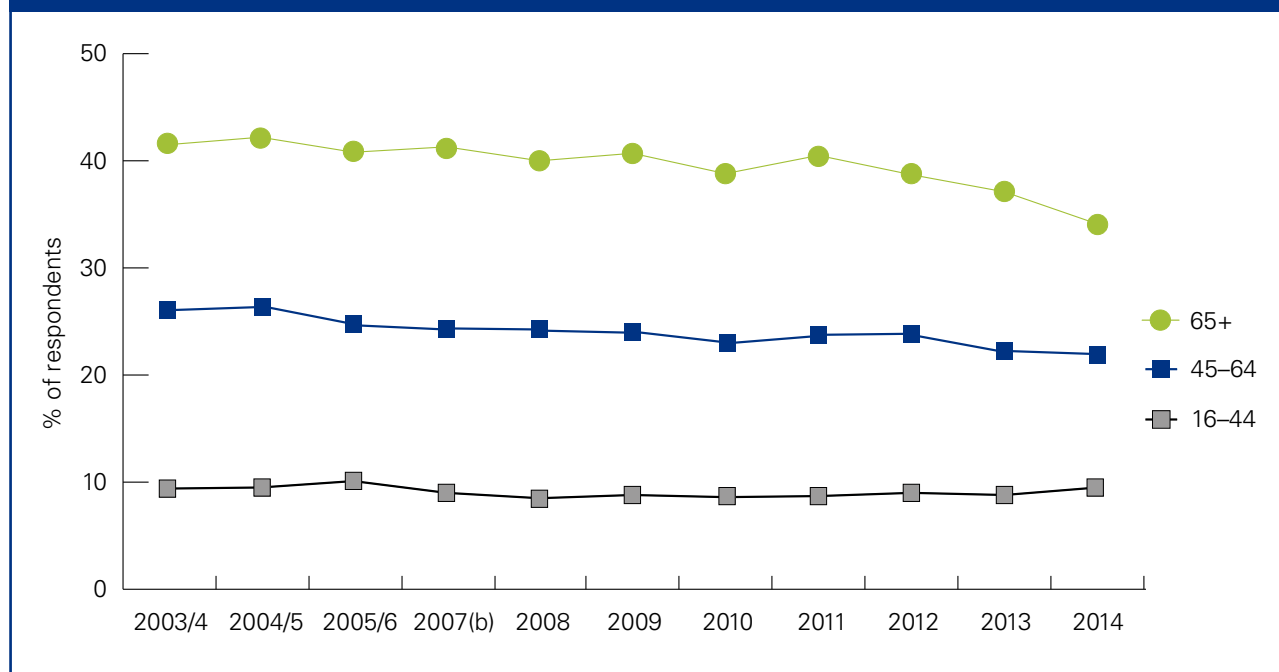
Reported local authority expenditure was £1,106,013,000 and £532,858,000 for adults under 65, and £573,155,000 for adults over 65. This shows an increase for overall expenditure in adult services in comparison with the previous year's figures, in particular in adult services over 65.

Diagram fourteen shows how adults have reported their poor/fair health over time.

In recent years, fewer adults have reported poor/fair health – more noticeably in the 65+ group.

Regulated services

Diagram 14: Adults who reported fair or poor general health by age band



Sourced from StatsWales

¹² Stats Wales, mid-2014 population estimate.

The most significant issues emerging in care and support services in 2015 were in services for older people. A number of important reports were published or were prepared during 2015 and there were many concerns aired in the media. Issues in Wales included the availability and quality of care homes and domiciliary care services.

While most services provide reasonable care, there were very serious concerns as shown in Diagram fifteen about the quality of care in a small number of services. Attracting and retaining staff across the sector is crucial but is proving a challenge in many areas in Wales, particularly in relation to registered nurses and domiciliary care workers. This reflects the position across the UK. Despite this, we have inspected services where attracting and retaining loyal staff from the local community has not been a problem. Typically, these services had strong and effective leadership, a good team-working ethos and strong local links and networks. However, we have also seen services in more remote areas without natural workforce populations to draw upon struggle to recruit staff. Likewise, providers with city based services told us that competition for staff

can be tough as there are more opportunities for employment, particularly in the retail sector. As a result, providers told us they found themselves all “fishing in the same small pool”.

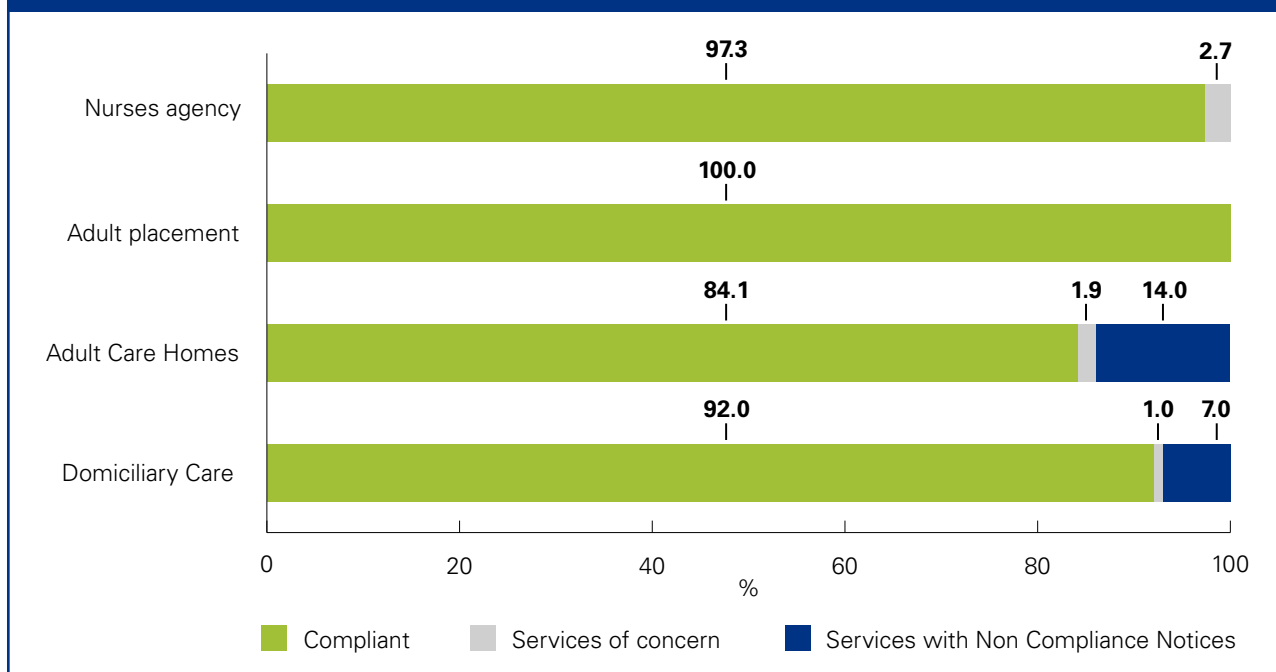
The volume, complexity of need, and the frailty of those being cared for is on the increase. At the same time, local authority and health board budgets are being squeezed. The challenge facing commissioners is to develop and sustain preventative services in the face of both increased demand and rising costs for intensive long term care.

Imaginative thinking, good quality initial assessments and reviews, and a relentless focus on reablement are all essential if services are to be maintained.

The costs associated with providing care services are increasing, with new obligations for employers to support pensions and increased property and insurance costs.

The introduction of the National Living Wage in the UK in 2017 is a pressing concern as two thirds of care service costs are attributable to staffing. The risk of services closing has been highlighted in the UK media.

Diagram 15: Annual performance of adult services inspected in 2014–15



Sourced from CSSIW data management system

Care homes for older people

During 2014–15, we contributed to two major reviews into the quality of care homes in Wales. One was the Older People’s Commissioner for Wales’ review *A Place to Call Home* published in November 2014. This landmark review highlighted many important aspects of care home life, including the day-to-day experiences of residents, their emotional well-being and access to healthcare support. We studied the review closely and replicated a number of key themes in our new inspection framework including a human rights based approach.

The other review published in September 2015 was Dr Margaret Flynn’s *In Search of Accountability*. This was an in-depth analysis into the events arising from Operation Jasmine, the police investigation into a number of deaths in care homes, which began in 2005. It was a complex picture. We undertook an in-depth analysis of the activity of the inspectorate and noted that despite the diligence of inspectors there were barriers and challenges in taking enforcement action. Understanding these challenges helped us to modernise our approach in 2012 and provide recommendations which have been included in the Regulation and Inspection of Social Care (Wales) Act. We met family members in 2014 as part of the Flynn review and what became clear was how little the families knew about what had been done on behalf of their relatives and what the outcomes had been. It was an important lesson for us to learn.

A third important and detailed study was John Kennedy’s Care Home Inquiry (October 2014) undertaken on behalf of the Joseph Rowntree Trust. This highlighted the importance of relationship-based care and the conditions required to foster it. We met John Kennedy to discuss his findings and to consider how we as an inspectorate should take forward his recommendations. We recognised the need to focus on outcomes during inspections rather than paperwork, to seek to reduce the paperwork burden we place on care homes by introducing a common self-assessment across our organisation and commissioners, and the importance of co-production and collaboration with the care home sector, which we have sought to do in the development of our new inspection framework.

The care home market for older people

As at 31 March 2015 there were 22,413 care home places for older people in Wales in 661 care homes, an average of 33.9 beds per home. The mean size of a care home with nursing was 45 beds, homes without nursing 28 beds.

The number of care homes registered with us has been reducing in the past three years (2012–2015) although the trend abated in 2014–15. The net decrease in homes over three years was 30 homes (19 nursing homes and 11 residential). At a local level we saw a number of nursing homes struggle and a number close either following action by ourselves or because of financial problems often exacerbated by lack of staffing, over-reliance on agency nurses or placement embargoes. This in turn impacted hospital discharges and choice for those needing care. It was also evident, especially when closure became a reality, that the needs of those being cared for were very complex and were often a combination of dementia and nursing care. It would be beneficial to focus on and understand the scale and needs of this particular group of people considering the combined effect of dementia and physical frailty. This would assist in planning and commissioning services which are resilient in providing safe, reliable care.

The Social Services and Well-being (Wales) Act 2014 places a duty on local authorities (and health boards) to plan and commission services which are sufficient to meet the need in their area, while the Regulation and Inspection of Social Care (Wales) Act 2016 will place a duty on us to report on market stability. Developing an understanding of the care market is fundamental to both requirements. The care market is complex with a wide range of different players and is subject to external changes and pressures, especially financial ones, which can be hard to predict.

From a supply and demand perspective the distribution of personal care and nursing beds remains uneven across Wales, as shown in Diagrams sixteen and seventeen, and raises questions about the proportionate demand

for these different types of services. It is likely that market shape has been determined by historical precedent and the legacy of existing care and health services, rather than any active shaping and commissioning activity. For example, our analysis of nursing beds indicated a rate of 27.0 beds per 1,000 population aged over 65 in Swansea, compared to 14.9 in Newport, 19.7 in Pembrokeshire and 11.3 in Monmouthshire. Is the profile of need for care in nursing homes really so different between these communities that need for nursing beds appears almost double in what are ostensibly similar communities?

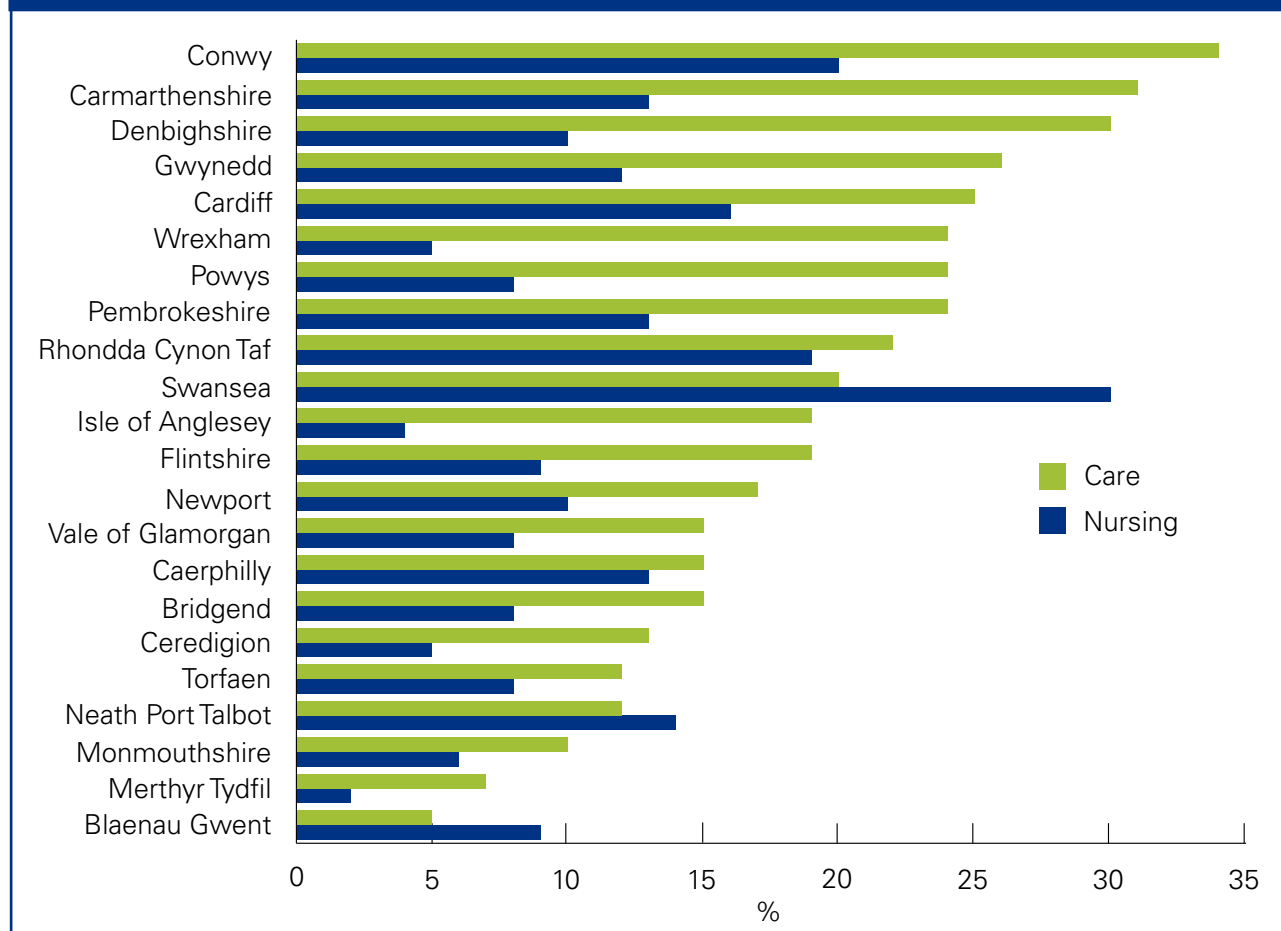
The proportion of care home beds which are either nursing or residential was also not consistent. The rates of nursing beds and

personal care beds varied considerably between local authority areas.

In Blaenau Gwent it was 2.5, Swansea 2.1, Newport 0.8, Anglesey 0.5, Wrexham 0.3. Is it the case the demand for different types of beds varies so much across Wales?

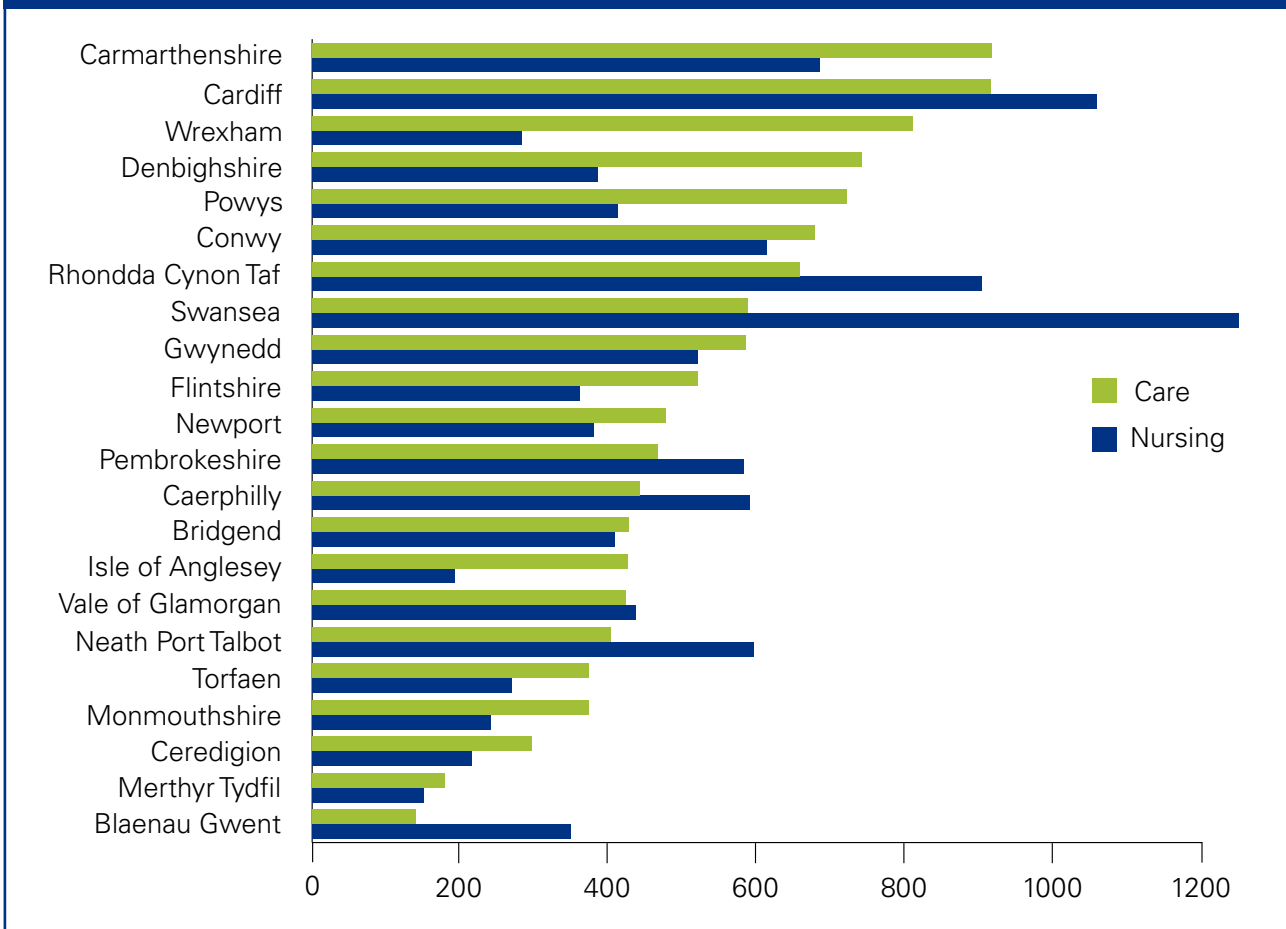
It would seem that there is a need to clarify the differing purposes of nursing and personal care homes, thresholds and pathways for admission and potential future demand. We know for example following concerns about quality of care in some homes in North West Wales that there appeared to be a significant pressure on the supply of nursing care beds. This is not surprising given the low level of nursing provision on Anglesey.

**Diagram 16: Number of older adult residential care services
31 March 2015**



Sourced from CSSIW data management system

**Diagram 17: Number of places in older adult residential care
31 March 2015**

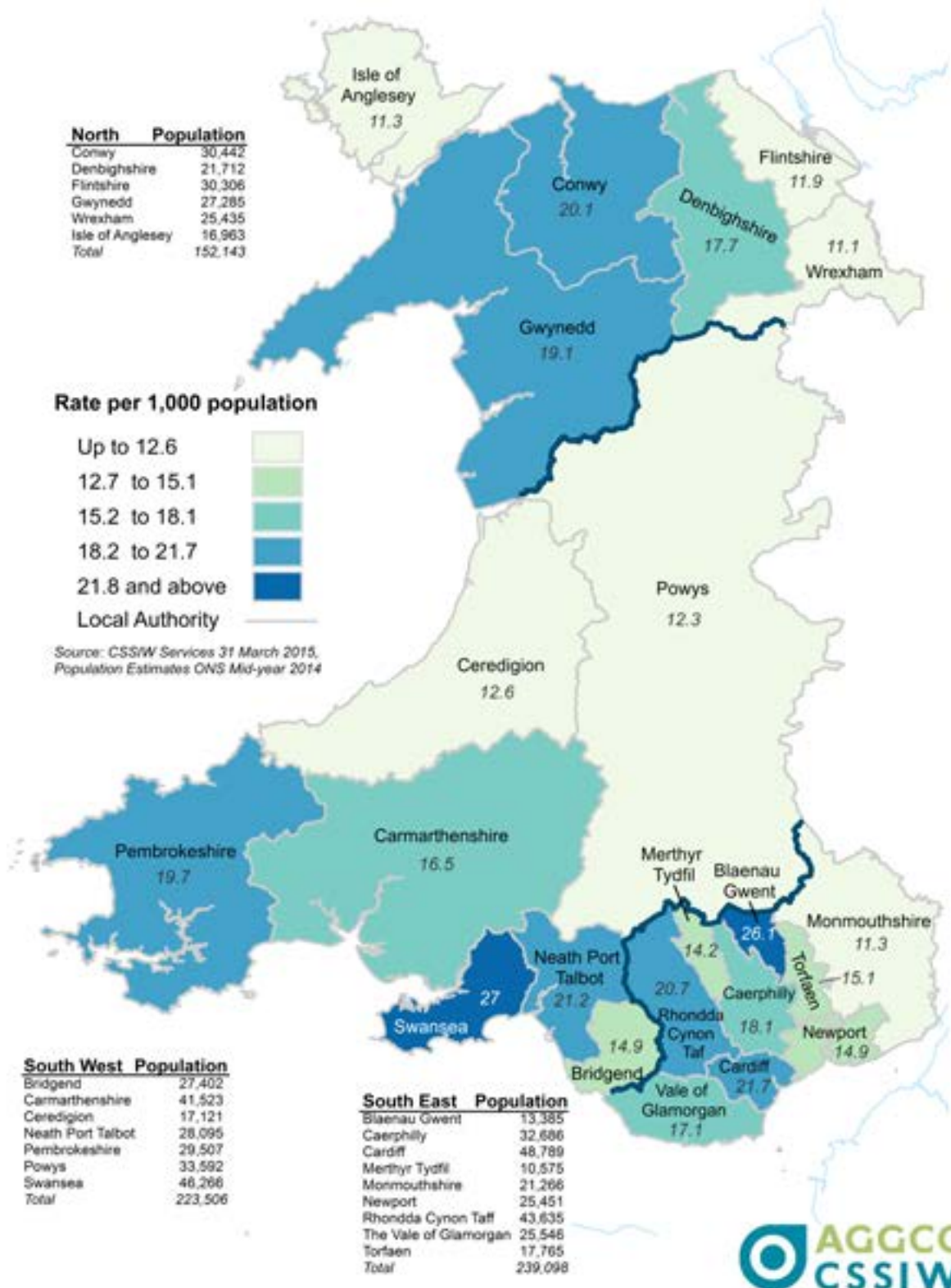


Sourced from CSSIW data management system

The majority of older people’s care home provision in Wales is provided by single home providers and there are relatively few homes in Wales being operated by large group providers (a different picture to the rest of the UK). The majority of homes operated by large group providers are in local authority areas along the M4 corridor and at present there is no particular concentration of a single provider which would place a local authority area at high risk. However, our experience has been that because of scarcity of supply of care home places in some areas, the impact of any closure, even just one home, whether operated by a single care home provider or a large group, can be very challenging and put the well-being and continuity of care for those living in homes at risk.

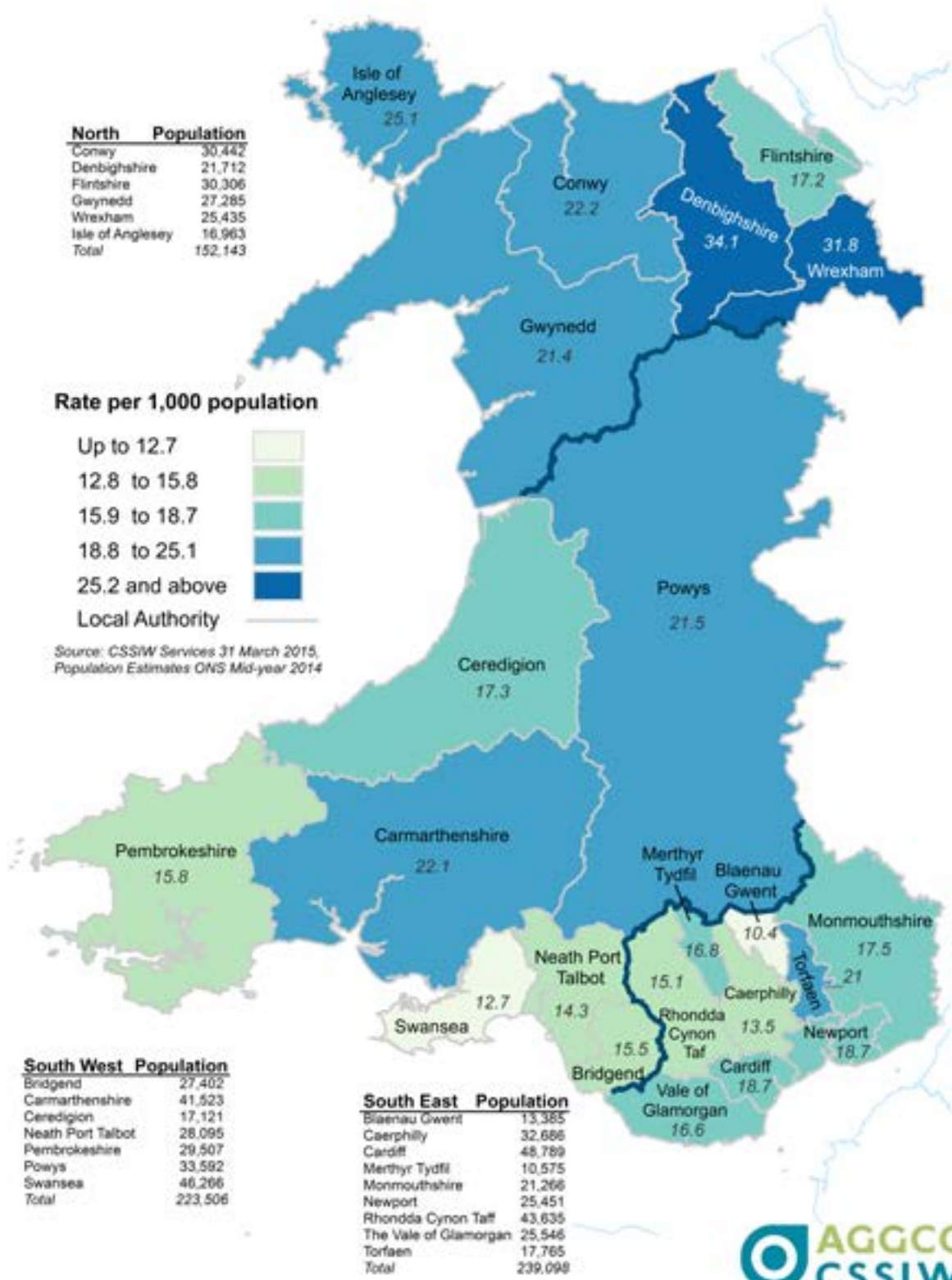
It is interesting to consider the extent to which local authorities continue to operate their own care homes and the reasons for doing so. There has been a trend towards closing or transferring these services to independent providers in recent years which is mirrored across the UK. The reasons behind this primarily relate to the additional costs of running in-house services, and the challenges facing authorities of raising capital to renovate or replace what has become outdated and or run-down care home stock. We noted that some local authorities (such as Neath Port Talbot) successfully transferred all their services while others seeking to re-provision their care homes stock faced significant local political resistance and representations from residents, relatives and staff.

Diagram 18: The rate of nursing bed places per 1,000 population aged 65 and over, as at 31 March 2015



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Diagram 19: The rate of care home places per 1,000 population aged 65 and over, as at 31 March 2015



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As at March 2015, 84 local authority-run care homes in Wales accounted for just over 12% of all the homes. In England the proportion was under 5%. Four local authorities did not operate any in-house care homes: Powys, Neath Port Talbot, Cardiff and Torfaen. Of the remaining 18 local authorities, the average number of homes per authority was 4.6, with some significantly above the average: Rhondda Cynon Taf (12 homes), Gwynedd (11), Carmarthenshire (10) and Ceredigion (7). The rate of in-house provision (beds) per 1,000 population aged over 65 was higher for some local authorities: Rhondda Cynon Taf (0.008), Gwynedd (0.010) and Ceredigion (0.011) being significantly above the Welsh average (0.004).

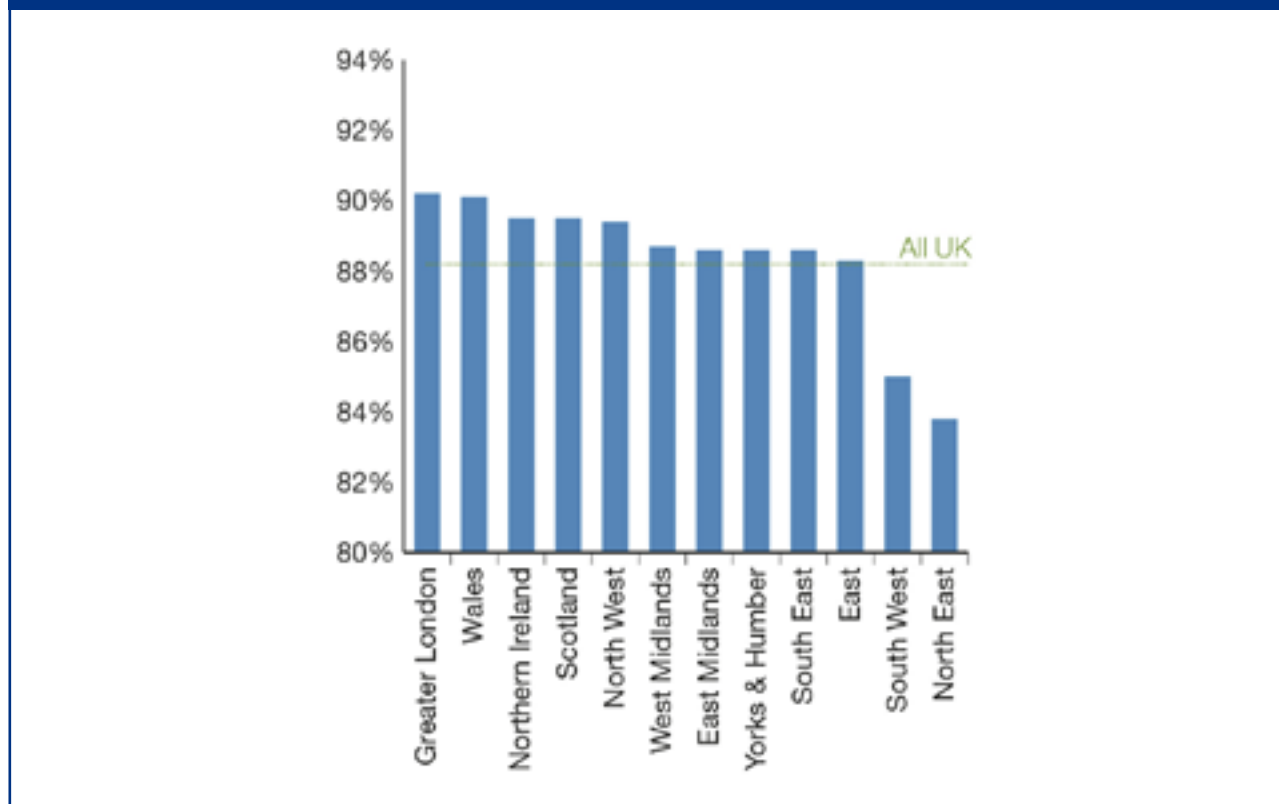
This range of provision suggested some local authorities have disproportionate in-house capacity and that non-residential care provision (known as extra care) and independent could be pursued as an alternative.

We are conscious that there can be sound reasons for maintaining or developing in-house provision particularly in relation to security of supply. In our discussions with one local authority, they advised us that they simply could not stimulate any interest in anyone taking over their care homes or opening services in their area, and they had little choice but continue to run them.

The financial position facing the care homes sector in the UK has been well publicised in the UK media.

The Knight Frank Trading Performance review for 2015¹³ noted that occupancy levels in Wales remained high compared with the rest of the UK, at around 90% with fee levels slightly below the average. The cost per resident in nursing care in Wales was comparable with the UK average, although the cost of residential care was slightly below. Interestingly, four of the five local authorities with the lowest staff cost per registered bed in the UK were in Wales.

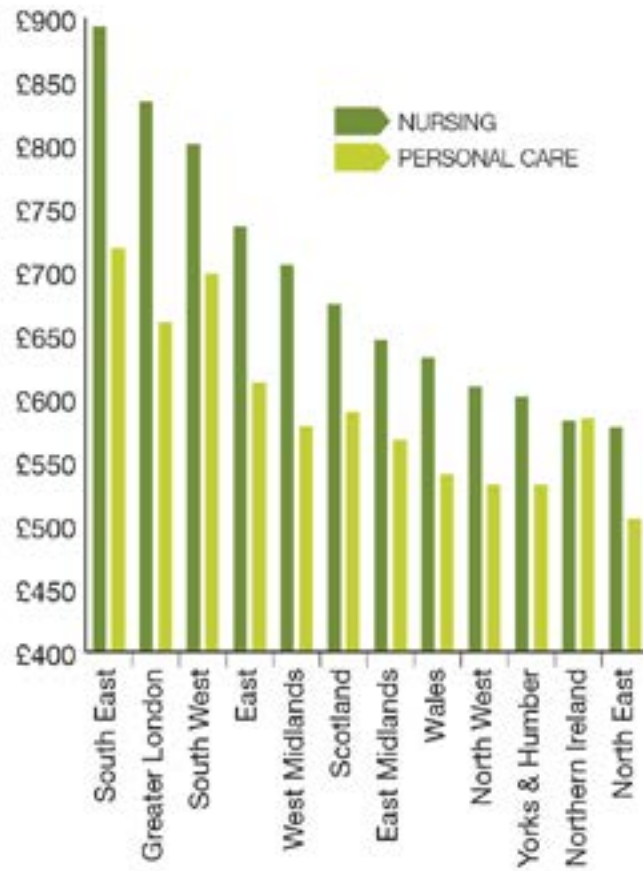
Diagram 20: Occupancy rates by region (Financial year 2014–15)



Sourced from Knight Frank Research

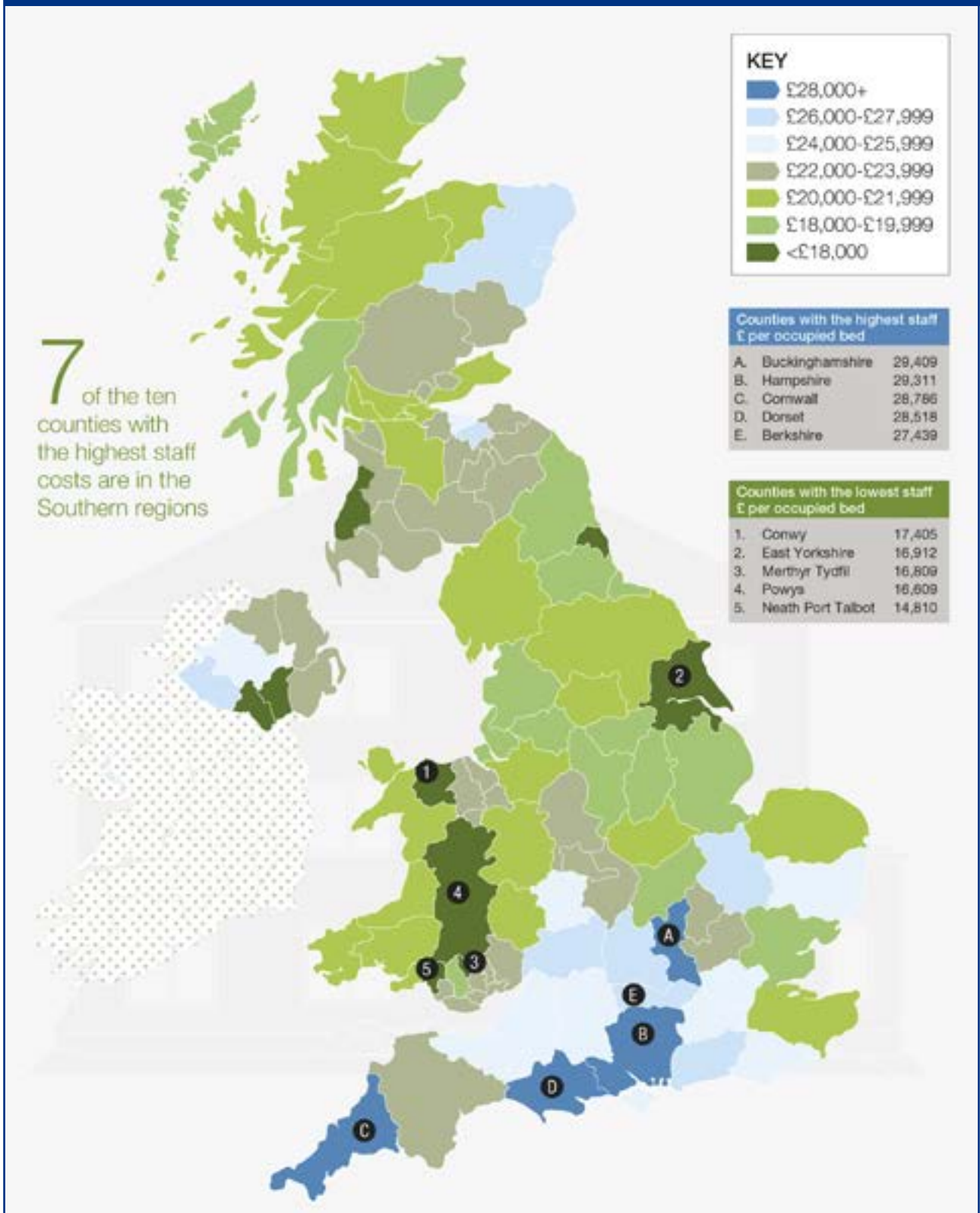
¹³ Knight Frank's annual assessment of operating performance in the UK care home sector
www.knightfrank.co.uk/research/care-homes-trading-performance-review-2015-3267.aspx

Diagram 21: Average weekly fees by region (Financial year 2014–15)



Sourced from Knight Frank Research

Diagram 22: Staff cost per occupied bed (£) 2015



Sourced from Knight Frank Research

The measure of earnings and profitability of care services across the UK (known as EBITDARM) has fallen year on year since 2006, from 33% to 27%. However, Knight Frank's figures indicate the EBITDARM for Wales was the second lowest across all areas of the UK at around 18%. This is probably due to the smaller average care home size compared with the UK average.

Knight Frank's review noted that some local authorities are increasing the annual uplift in fees from April 2016 and concluded that as a whole the care home sector will sustain robust financial performance, despite the increase in costs and the introduction of the National Living Wage. The review said the sector will attract investment but that care homes with less than 30 beds will struggle financially and are at risk of closure.

Taken together, this information poses a dilemma for those considering investing in Wales; there are both advantages and disadvantages. What is clear in the report is that profitability is dependent on size and that smaller homes are likely to be less viable in the longer term.

Assistant nurses

In 2014–15 we were approached by more than one provider in relation to the development of a "nurse assistant role" to compensate for the lack of availability of registered nurses. This idea was pursued with a view to establishing a pilot study in the home of one provider (similar pilot studies are taking place in the rest of the UK). However, issues of competence, the depth of training, supervision and delegation emerged and this particular pilot study was not agreed and taken forward in Wales. However, we recognised that high quality nursing supervision and oversight is critical to good quality care and that homes with high levels of agency nursing suffer from a lack of continuity of care. We would support the delegation of routine tasks in nursing homes (e.g. most administration of medication) to assistant nurses to free up registered nursing capacity, and believe if Wales is to both address the issue of nurse shortages and quality of care,

that the project should be urgently taken forward to develop and trial the concept of nursing assistants in nursing homes.

Nutrition and hydration in care homes

Nutrition and hydration are fundamental to both physical and emotional well-being. Much has been reported on the subject and a number of schemes are underway across Wales such as 1000 Lives Plus Torfaen. According to the Knight Frank review, the cost of food per resident provided in Wales is 10% lower than the average which puts Wales lower than any other part of the UK except North East England. This raises a number of questions not least around the quality and choice which is being offered.

The provision of food and drink is only one aspect of ensuring good nutrition and health. The support provided at mealtimes and access to something to eat and drink during the rest of the day is just as important. The "dining experience" was a major theme highlighted in the Older People's Commissioner for Wales' review. Mealtimes were often observed as part of her review to be a "clinical, task-based operation." Older people who are poorly or have dementia often need constant support and encouragement to eat and drink at mealtimes. Our inspectors have found excellent practice where mealtimes are uplifting occasions with personal attention to those who need help, and poor practice where people are left confused or struggling to eat and drink. In some nursing homes it is not uncommon for inspectors to find that drinks are "available" but are out of reach or sight of those that need them.

Domiciliary care

As of March 31 2015:

- 381 services were owned by an organisation.
- 41 services were owned by an individual.
- 7 providers had both domiciliary care and supported housing services.
- The largest provider owned 7 services.
- Of 422 providers 320 only owned 1 service (75.8%).

During 2015, concerns about domiciliary care provision were reported across the UK national media, particularly in relation to short visits, call clipping, lack of travel time between calls and the pay and conditions of staff, many of whom were on “zero hours” contracts.

Two issues emerged in Wales which attracted particular concern and attention: the re-commissioning of domiciliary care services in Powys, and the introduction of dynamic purchasing by Cardiff Council.

Powys

Powys County Council had faced a number of problems with home care services in the past, particularly in relation to ensuring coverage of what is a large rural area. In addition the local authority also sought to redirect the use of its in-house services towards targeted reablement.

After a prolonged period of review, and following advice from external consultants, the local authority undertook a radical course of action and sought to procure services from only four suppliers, two in the north and two in the south of the county. This reduction from some 16 local providers was based on the advice that efficient providers needed to be of sufficient scale and capacity. The contracts which were put in place allowed for subcontracting.

Within a short period of time it became clear that some of the new providers could not deliver the contracts they had committed to and the demands being placed upon them. The workforce availability reduced, as staff committed to local family run providers did not want to transfer (TUPE) to larger providers. In some areas of the county, the failure of services to provide staff resulted in many missed calls, putting services users’ lives at very high risk. Within a matter of months, three of the four providers either withdrew, gave notice or went into liquidation. As a result of the collapse of one of the main providers, Powys County Council had to take over the running of the service itself.

We undertook an in-depth inspection of Powys’ arrangements and also looked closely at the performance of Powys’ providers during a series of inspections.

Inspectors made the following observations which provide important lessons for others to learn from.

- **Impact on informal carers.** When agencies fail and cannot be relied upon, the impact on informal or family carers can be disastrous. Relatives told inspectors how during the period of instability in Powys, they suffered with constant anxiety and stress not knowing if their relatives were safe. In addition, other family members suffered, especially children, and carers’ employment was disrupted as they had to take time off at short notice due to the failure of agencies to arrive. Getting the provision of domiciliary care wrong puts families under pressure and potentially into crisis, and jeopardises informal care.
- **Over reaching capacity.** Agencies told inspectors that Powys’ commissioners, desperate to get packages up and running, placed them under enormous pressure to take on work they could not properly service. Providers told us they were fearful of losing contracts and therefore overstretched themselves and found themselves failing to deliver.
- **Invoicing and reconciliation systems.** These systems are critical to the cash flow of smaller agencies. A number of agencies were placed at serious risk because of debts they began to incur. Smart reconciliation, query resolution and early payments are critical. Small agencies may need support to develop the infrastructure to respond to the invoicing and performance monitoring requirements of local authorities.
- **Subcontracting is not advisable.** Subcontracting between agencies created a confused relationship between the primary commissioners, the subcontracting agency and the subcontracted agency. Accountability was unclear and there was a poor line of sight on quality and performance. It also introduced additional costs into the delivery chain.

- **Scheduling systems within the agencies.** These need to be efficient and dynamic and able to respond to changing needs.
- **The workforce.** People who work in care are not commodities to be taken for granted. It cannot be assumed they will gladly move between providers even if TUPE arrangements are in place.

Cardiff: Dynamic purchasing

Cardiff Council also faced limitations with its existing framework contracts and when these came to an end sought to bring in a more flexible and responsive system of domiciliary care provision. The local authority adopted a dynamic purchasing model in which individual packages of care were brokered through a computer system, with agencies bidding on price and their ability to meet specific needs.

Contracts were offered on the basis of a score, which included both quality and price. This approach met with a lot of concern in particular that it would result in reducing fees and poorer quality.

We followed the implementation closely and it was clear that fees had not dropped and were in fact higher than the Welsh average. The system had created transparency for both the local authority and providers, and enabled some providers to specialise in serving particular needs or areas of Cardiff thereby reducing costs. More recently, Cardiff has strengthened the quality component of the scoring system. It would appear that fears about the system were not realised and that it created an efficient means of placing contracts.

However, although the number of providers on the system increased five-fold, they were being selective about which contracts to bid for. The result was emerging gaps and capacity issues which Cardiff has been seeking to address.

The market – domiciliary care

The domiciliary care supplier market is difficult to analyse as it consists of a wide range of different providers providing different services. It is also very dynamic and changing. Unlike care homes which are fixed assets, agencies can start up, disappear, grow or shrink with relative ease.

We are aware of a high level of acquisitions of local agencies by large multi-national companies. However, these are not always reflected and captured through our registrations as the tendency is to maintain existing registrations and allow the agencies to continue to run as separate companies.

Some agencies specialise in meeting particular needs (e.g. learning disabilities, reablement) while others are generic. Some provide dedicated supported housing services, while others provide care across a variety of services on a spot or block-purchase arrangements. Some agencies are also nursing agencies.

We are increasingly seeing home care agencies commissioned by the NHS to support long term complex conditions or assist with hospital discharge.

The report “The Home Care Deficit” published by the UK Home Care Association (UKHCA) in March 2015 proposed that to run a sustainable service with staff paid the National Minimum Wage (taking into account travelling time), the price of domiciliary care is £15.74 per hour.

Using a weighted average calculation based on information supplied by local authorities, the average rate paid in Wales was calculated to be £14.28, the highest in the UK (the UK average was £13.66).

However, an analysis by local authority area indicated a wide variation across Wales from £11.67 to £16.24 per hour. While these figures need to be treated with a degree of caution, providers told inspectors that the approach to commissioning, procurement and the fees paid vary significantly between local authorities and that there were some local authorities they preferred to do business with. This degree of variability is clearly not desirable.

The national domiciliary care review we are undertaking seeks to understand and describe the complete system surrounding domiciliary care, in particular the impact of commissioning and procurement on the operation of agencies and in turn the experience of those using services and the care workers providing care. We are particularly interested to know if the concept of moving to outcome-based commissioning (as proposed by John Bolton)¹⁴ rather than time and task-based commissioning is realistic and sustainable. The domiciliary care workforce is the critical component to the system and we know workforce supply and turnover of staff are important issues which need to be addressed. We will be working with the Care Council for Wales to consider the action required to develop a competent workforce to deliver the volumes of care required into the future.

Care for younger adults

Services for younger adults did not generate the same level of concern or public profile in 2014–15. This may be because there was less pressure in the system because demand was not rising and patterns of provision were different, for example fully integrated care management teams, and smaller, more highly remunerated specialist care services.

Despite the lack of visible concern, we believed that assurance for this sector was required and therefore we initiated a national thematic review of the care and support for people with learning disabilities, which is due to report in spring 2016. We particularly wanted to look at whether the lessons from Winterbourne View had been learnt and to understand the experiences of people with learning disabilities as they seek support from the care system.

The pattern of provision is different for care homes for younger adult services (learning disability and mental health) from that for older people. A higher proportion of care homes are operated by medium to large size operators (159 services) offering specialist residential care for people with complex needs.

In 2014–15 there were 24 providers with 4 or more homes in Wales, the average number of beds per home was around seven. The four biggest providers in Wales had 11, 12, 12 and 18 homes respectively. Interestingly, although a number of providers operate across the UK, with the exception of one home, all the providers in Wales concentrated all their activity either in North or South Wales.



¹⁴ www.ipc.brookes.ac.uk/publications/pdf/John_Bolton_Outcome_Based_Commissioning_Paper_April_2015.pdf

Chapter Seven

Our priorities for 2015–18

Our 2013–14 annual report set out in some detail the context of the challenges facing us and our priorities for 2014–16. The context and our priorities remain largely unchanged; we are facing the impact of changes to all the legislation which underpins every aspect of our work, both with local authorities and regulated services. What is becoming increasingly clear is that the impact of this will be substantial. We have already found that this is proving demanding on our resources particularly our operational and senior staff who need to remain focussed on maintaining business as usual, ensuring services are inspected and concerns are responded to.

What is also becoming clear is that the changes in legislation are having both foreseen and unforeseen consequences and it is the unforeseen consequences which carry some of the greatest risks to effective regulation and assurance.

Going forward we will need a sustainable workforce to meet these competing demands and to enable us to continue to provide assurance about the safety and quality of care services for people in Wales.

Regulation and inspection

- Monitoring the implementation of the Social Services and Well-being (Wales) Act 2014: Completion and introduction of a new local authority inspection framework.
- Development and preparation for the implementation of the Regulation and Inspection of Social Care (Wales) Act 2016.
- Completion and implementation of new inspection frameworks, in particular embedding both well-being and human rights.
- Monitoring and promoting the More than Just Words strategy for strengthening the Welsh Language.

- Implementing the changes in the Children’s Measure and extension of regulation and inspection of services for children under 12-years-old.
- Piloting joint inspection framework for three and four-year-olds with Estyn.
- Development of new inspection framework for fostering services, children’s homes and adoption agencies.
- Taking forward the recommendations of *In Search of Accountability*, Dr Flynn’s review.
- Taking forward recommendations of *A Place to Call Home*, the Older People’s Commissioner for Wales’ review of care homes.
- National review of domiciliary care.
- National review of services for people with learning disabilities.
- Green Paper: *Our Health, Our Health Service*. This green paper looks at improving the quality of health services and the accountability, governance and functions of NHS organisations, including the remit and functions of Healthcare Inspectorate Wales and Care and Social Services Inspectorate Wales.
- The Well-being of Future Generations (Wales) Act 2015.

General priorities

- Communications: increasing our visibility, participation and engagement during a period of change.
- Strengthening citizen engagement within our work, in particular building the capacity of our regional advisory panels.
- Strengthening engagement with regulated providers within our development work.
- Development of ICT functionality: including risk assessments, scheduling and completion of implementation of our new ICT system and online service for providers.

- Intelligence gathering and reporting: Ensuring online self-assessments provide the information we and others need to understand the nature and quality of services and the profile of demand across services.
- Quality Assurance systems to ensure all aspects of our services are fit for purpose and reliable. In particular we will continue to focus on the quality of our decision-making and the quality of our inspections and reports.
- Workforce development: We are very conscious of the need to ensure we can meet the requirements of the Welsh Language Standards, which come into force on 30 March 2016. During a period of transition we also need to focus on succession planning and leadership development. Finally and importantly we must strengthen the skill base of inspectors, including our fee paid staff, in order to prepare them for new inspection frameworks.



Appendix A

What we do

This chapter sets out what we do and how we work.

We are responsible for regulating and inspecting care, childcare and social services, including nurseries, homes for older people and local authorities, to make sure they are safe for the people who use them.

It is our responsibility to provide assurance and protection for people who use services, their families and carers and the wider public. We also have a key role in improving the quality of care and services for adults and children across Wales.

Our overall aim is to ensure people receive safe, accessible and good services that meet their needs and improve their quality of life.

Our role is to:

- deliver efficient, effective regulation and inspection of services, and report our findings;
- provide independent assurance for people who use services and their families and carers, about the quality and availability of social care in Wales;
- help safeguard adults and children, making sure their rights are protected and they are cared for by people who are suitable to do so;
- improve care, services and outcomes for people;
- make sure registered providers meet and continue to meet the requirements of registration;
- provide evidence and independent professional advice to inform the development of policy and service improvement to meet people's needs;
- work with other public service audit, regulation and inspection bodies, including workforce regulators, across the UK to support effective scrutiny of public services;
- provide information to the Welsh Government Ministers and the National Assembly for Wales about registered care, childcare and the performance of local authority social services.

We aim to:

- put people who use adult care, childcare and social services at the centre of our work and involve them in all we do;
- be responsive and take robust action when people experience poor care or are at risk;
- be independent, objective and fair;
- promote equality, diversity, children's and human rights across adult care, childcare and social services;
- be accessible and transparent;
- apply the same standards of continuous improvement to our business as we would expect of others;
- promote improvement in the adult care,, childcare and social services sectors and learn lessons from things that don't work well;
- work in partnership with others including those who use, commission and provide services, other regulators, inspectorates and auditors;
- respect and respond to people's language needs.

Supporting Wales to deliver high quality public services

Our work supports the Welsh Government's Programme for Government which is committed to the continuous improvement of public services in Wales to ensure:

- people have a strong voice and greater control over the care services they receive;
- people's rights are protected;
- children and families have high quality early years childcare;
- effective collaboration with public services, other regulators and inspectorates.

We have achieved this through realigning our work to deliver the aims of Sustainable Social Services, Building a Brighter Future – Early Years and Childcare Plan, Child Poverty Strategy and forged strong collaboration through Inspection Wales.

Although we are part of Welsh Government, there are a number of arrangements in place to ensure we safeguard our independence. These are set out in a Memorandum of Understanding between us, Healthcare Inspectorate Wales and Welsh Ministers.

Our three regional offices in Llandudno Junction, Merthyr Tydfil and Carmarthen, provide the operational focus for our local authority social services and our regulatory work. Our national office, also in Merthyr Tydfil, leads on the delivery of strategic reviews, engagement with people, knowledge management, and a range of corporate services, including information and communication technology.



Working together

It is important that we work effectively and efficiently with our partners. Under the Inspection Wales programme, we work closely with other inspectorates including the Wales Audit Office, Estyn, and Healthcare Inspectorate Wales to:

- promote joint and collaborative working;
- co-ordinate planning to produce programmes of work that avoid duplication and ensure key risks and concerns are examined;
- develop information and knowledge sharing;
- identify opportunities to bring together intelligence on public services and report in ways which support service improvement, inform policy making and strengthen public accountability.

We also work closely with the Care Council for Wales, which is responsible for regulating the social care profession, ensuring the workforce delivering social services and childcare is safe to practice and has the right skills and qualifications to work to a high professional standard. We work together to promote information sharing, especially around safeguarding and people's fitness to practice in care.

We are also members of the Wales Health and Social Care Concordat and the Welsh Regulators' Forum.

Local authority social services

We inspect and review local authority social services functions to see how they:

- meet the needs of people, improve their quality of life and promote their rights and well-being;
- protect adults and children who are at risk of harm, neglect or abuse;
- improve the way social services are delivered.

Every year, we complete and publish an evaluation of the performance of social services in all 22 local authorities in Wales. The evaluation is informed by the self-assessment of services completed by

the directors of social services, performance data and our quarterly engagement meetings with senior managers to discuss progress and service developments.

We carry out a range of activities including:

- national and thematic reviews;
- focused local authority inspections and improvement activity in response to specific issues arising;
- monitoring and reporting on the use of Deprivation of Liberty Safeguards (DoLS) as required by regulation.

When serious failings are identified, we put in place our Serious Concerns Protocol which involves regular monitoring, visits and inspections to the local authority in question to work with them to make the necessary improvements.

Regulated services

Registration

Currently as part of our regulatory function, we register new adult care, childcare and play services to ensure that they meet legal requirements, evidence their ability to provide good quality care and take into account the National Minimum Standards. We also make variations to a service's registration and impose conditions for example on the maximum number of persons a service can care for. When a service cancels its registration or is faced with a sudden closure, our priority is to safeguard the people who use the service by working with the provider, local authority and others to ensure changes are planned and uncertainty is minimised. The details of our regulatory function will change with the new incoming legislation.

Voluntary Approvals

We also operate a voluntary childcare at home approval scheme for nannies. The scheme provides a greater level of assurance to parents that the nannies they are employing meet with basic requirements for childcare including an enhanced Disclosure and Barring Service (DBS) check, suitable childcare qualifications and current first aid certificate. It also supports

evidence for parents eligible for Universal Credits or other financial help. The scheme is only recognised across Wales and nannies are required to renew their approval annually.

Inspection

Once a service is registered with us, we monitor its performance and undertake regular inspections to ensure that people are receiving the best outcomes to meet their needs.

Inspections are at the heart of our assurance work and our cycle of coverage means we visit adult services, children's homes and day care every year. Services which we believe are high risk will be visited more frequently. Our inspections are always unannounced with the exception of adoption and fostering services.

As part of the inspection process, our inspectors check any concerns, patterns and actions raised in previous inspections.

We assess providers and report on safety and the quality of experiences for people using services using four inspection themes:

- Quality of Life;
- Quality of Staff;
- Quality of Leadership and Management;
- Quality of Environment.

Our inspectors spend time observing care, talking and listening to staff and people to understand their experiences, and making sure the care they receive is safe and complies with the law. This ensures that the well-being of people is at the heart of our work.

All our inspectors use a Short Observational Framework for Inspection (SOFI), to assess the experiences of people who may not be able to say how they feel, for example people with dementia, babies and toddlers. After each inspection, we produce a report which is published on our website. Reports include any compliance issues and improvements we require the service to make.

Changes to our inspections

We continuously look at how we can refine, improve and expand our contribution to improving adult care, childcare and social services and are in the process of remodelling all our inspection frameworks to meet new legal requirements, and to place greater emphasis on people's experiences and well-being outcomes. More information about the changes we are making to our inspection methods and programme is covered in chapter three.

Enforcement action

When services fail to provide safe, good quality care and are in breach of regulations, we will take enforcement action. This begins with serving a non-compliance notice which requires the provider to make timely improvements. If problems are not addressed, we will require the registered provider to meet with us to discuss our concerns and agree a way forward.

If a service persistently, substantially, or seriously fails to meet standards or breach regulations we then take enforcement action. This can be 'civil', for example cancelling or limiting the service's registration, or in exceptional circumstances 'criminal', when we will prosecute the service provider and place the matter before a court. In extreme cases for example, where there is a risk to a person's safety, life, or well-being, we take immediate steps to cancel the registration.

Our reports enable:

- relatives and the public to find information about the quality of services and the quality they should expect from their care provider;
- health and social care practitioners to make decisions about care based on the latest inspection evidence and best practice;
- service providers to examine the performance of their service and assess the improvement in the care they provide;
- health and social care commissioners to be confident that the service they are purchasing is of good quality, cost effective and focussed on improvement.

Services regulated by us

Adult services – Registered and inspected under the Care Standards Act 2000 and regulations and National Minimum Standards made under that Act.

Care homes, Domiciliary Care agencies, Adult Placement Schemes

422 domiciliary care agencies and organisations that provide care and support for people in their own homes and in the community.

661 older adult care homes with 22,413 places and 443 younger adult care homes with 3,439 places registered.

11 adult placement schemes – locally run schemes that enable up to two people who have care and support needs to live as part of a family and may be permanent, short term or for periods of respite care.

Childcare services – Registered and inspected by us under Children and Families (Wales) Measure 2010 and regulation and National Minimum Standards.

There were 4,405 childcare services with 77,314 places for children under eight years of age including child minders, nurseries and after school clubs.

Children's services – Registered and inspected by us under the Care Standards Act 2000 and regulations and National Minimum Standards made under that Act.

Independent fostering services, local authority adoption agencies and voluntary adoption agencies.

48 fostering services, 26 were operated by the third sector and 22 run by local authorities. We are responsible for inspecting agencies and local authorities to ensure these services are able to meet children's needs and that they are protected from harm.

There were 24 adoption services. We inspect, but do not register, adoption services provided by local authorities and voluntary organisations. They provide services including the recruitment, assessment and approval of adults who wish to adopt a child and also support for the prospective adopters and children, including siblings. We do however register independent adoption agencies and we had one agency on our register.

133 children's homes registered to provide 590 placements. These include a range of services including care homes for looked after children, specialist placements for up to 52 weeks and respite services for children with a range of disabilities.

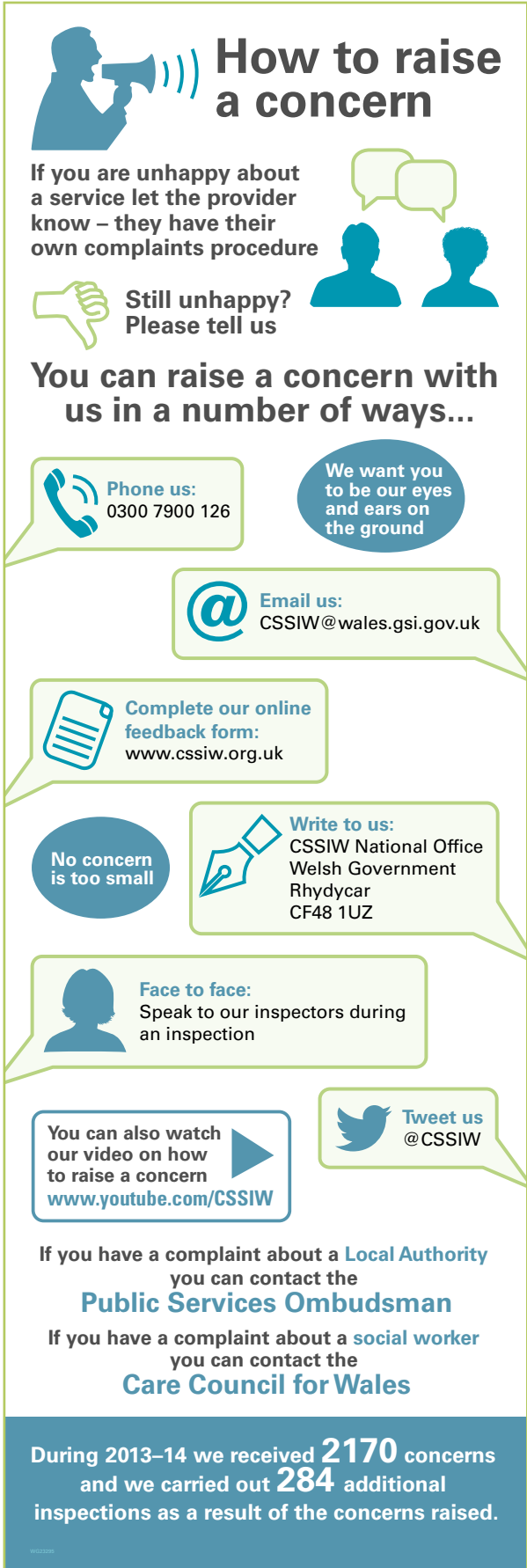
Other services – These establishments are approved by Welsh Ministers under the Education Act 1996 but we inspect in many cases jointly with Estyn.

Residential special schools, boarding schools and further education colleges that accommodate students under 18.

We are responsible for the inspection of welfare arrangements for children in boarding schools, specialist residential schools and further education colleges in Wales. Estyn is responsible for inspecting the education provision. On 31 March 2015, there were 10 boarding schools with 1,341 places and 12 residential schools with 238 places registered.

Appendix B

How to report a concern



How to raise a concern

If you are unhappy about a service let the provider know – they have their own complaints procedure

Still unhappy? Please tell us

You can raise a concern with us in a number of ways...

- Phone us:** 0300 7900 126
- Email us:** CSSIW@wales.gsi.gov.uk
- Complete our online feedback form:** www.cssiw.org.uk
- Write to us:** CSSIW National Office, Welsh Government, Rhydycar, CF48 1UZ
- Face to face:** Speak to our inspectors during an inspection
- Tweet us:** @CSSIW

No concern is too small

You can also watch our video on how to raise a concern www.youtube.com/CSSIW

If you have a complaint about a **Local Authority** you can contact the **Public Services Ombudsman**

If you have a complaint about a **social worker** you can contact the **Care Council for Wales**

During 2013–14 we received **2170** concerns and we carried out **284** additional inspections as a result of the concerns raised.