

Sian Howys  
Statutory Director of Social Services  
Ceredigion County Council  
Penmorfa  
Aberaeron  
Ceredigion  
SA46 OPA

Date: 04 November 2021

Dear Director,

### **Care Inspectorate Wales (CIW) – Assurance Check 2021: Ceredigion County Council**

This letter summarises the findings of our assurance check on 10 May to 14 May 2021. The purpose of this assurance check was to review how well local authority social services continue to help and support adults and children with a focus on safety and well-being.

We focused our key lines of enquiry within the four principles of the Social Services and Wellbeing (Wales) Act 2014 and have recorded our judgements and findings aligned to these People - Voice and Control, Prevention, Well-Being, Partnerships and Integration.

#### **Overview**

In March 2020, CIW suspended its routine programme in response to the COVID-19 pandemic to enable local authorities and providers to focus fully on responding to the challenging circumstances. A revised programme with local authorities recommenced in September to provide assurance about how people are being safeguarded and well-being promoted during the pandemic. We considered safety and well-being of people who use or may need to use services, the safety of services they access and the safety and well-being of people who work in services. We focused our key lines of enquiry within the four principles of the Social Services and Well-being (Wales) Act 2014 and have recorded our judgements and findings aligned to these: People - Voice and Control, Prevention, Partnerships and Integration, Well-being.

#### **Our focus was on:**

1. How well is the local authority discharging its statutory functions to keep people who need care and support and carers who need support, safe and promote their well-being during the pandemic?

Arolygiaeth Gofal Cymru (AGC)  
Swyddfa Llywodraeth Cymru  
Sarn Mynach  
Cyffordd Llandudno  
LL31 9RZ  
[www.arolygiaethgofal.cymru](http://www.arolygiaethgofal.cymru)

0300 790 0126  
[CIW@gov.wales](mailto:CIW@gov.wales)

Care Inspectorate Wales (CIW)  
Welsh Government Office  
Sarn Mynach  
Llandudno Junction  
LL31 9RZ  
[www.careinspectorate.wales](http://www.careinspectorate.wales)

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We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and responding in Welsh will not lead to a delay in responding.

2. What is the local authority doing to prevent the need for children to come into care; and are children returning home to their families quickly enough where safe to do so?

### **Summary of findings and priorities for improvement:**

**People - voice and control - We asked:** How well is the local authority ensuring people, carers and practitioners are having their voices heard, making informed choices, and maintaining control over their lives. While also balancing the recommendations and requirements made by Public Health Wales and Welsh Government to limit the spread of COVID-19?

Overall, we found people's voices were heard, their choices respected and people routinely achieved self-identified outcomes. We were told people were able to communicate in their preferred language. There was evidence in most case records of the 'Active Offer' being made.

The local authority gives regard to the rights of children to be offered formal advocacy. From the information provided, we found evidence that children were offered access to the advocacy services and we saw an example of advocacy in relation to one of the looked after children cases we reviewed. The young person identified the significance of the advocate because this had been a consistent relationship in contrast to the changes of social worker. In the adult cases we saw evidence of people being supported by informal advocates to participate in decisions that affect them.

People including carers were given the opportunity to tailor and manage their own support through use of direct payments. Evidence seen of direct payment working well for individuals and carers and used creatively during the pandemic as a means of providing alternative respite.

Carers told us they value the information and support provided by the Ceredigion Carers Unit. We saw examples of carers needs being considered, and a recognition of the additional pressures experienced by carers during the pandemic.

Most practitioners who responded to our survey felt supported by colleagues and managers and regarded their workload as manageable. During the assurance check we found staff morale to be good and most practitioners were positive about their experience of working for the local authority. Some practitioners mentioned current sickness levels and how delays in recruitment as well as the local authority's inability to recruit is creating pressures across the teams. Whilst most practitioners and front line managers welcomed the authority's transformation ambitions, it was clear this agenda, particularly combined with Covid, has created uncertainties for the workforce regarding their future working arrangements. The local authority needs to continue their efforts to support staff to understand the benefits of the planned transformational changes and ensure they feel engaged with the discussions and the timetable for change.

Ceredigion County Council continues to support the professional development of practitioners and managers with a number of digital platforms used to enable the workforce to access on-line training. Newly qualified staff told us they are supported in their first years of practice by regular supervision and mentoring arrangements. Whilst the corporate

managers told us of the comprehensive programme of training commissioned by the local authority to support them to undertake their new roles and responsibilities, and how this was providing a good basis for working collaboratively.

**Prevention - We asked:** To what extent is the local authority successful in promoting prevention and reducing need for increased or formal support from statutory agencies?

Senior leaders demonstrate a good understanding of the benefits of adopting a preventative approach and are able to convey the rationale for their strategic direction and ambition verbally and through strategic documentation. They have worked hard to re-design the service and developed a through age and well-being operating model, with the focus on ensuring people receive the right help at the right time and in the right place. Prevention or delaying the development of care and support is closely aligned in Ceredigion to other local authority responsibilities; including housing, leisure and education.

The drive for transformation and ensuring services can be sustainable in line with legislation and needs of the community has continued during an exceptional period of response to the pandemic. Whilst some of these services have not been available during the pandemic, we heard of communities coming together and developing community support with the local young farmers clubs; providing support with shopping being an example.

Senior managers and officers have a good understanding and knowledge of the profile of children looked after and are confident they are progressing the discharge/alteration of orders that are no longer needed and only those children who need to be looked after are looked after.

Practitioners were alert to the fact that despite best efforts, the inability to undertake direct face to face contact with families had adversely impacted on the preventative and care and support services, but they were proud of the Ceredigion response. We heard of online parenting groups and virtual youth clubs and how, given the rurality of the local authority, such virtual arrangements worked better for some parents.

The importance of timely hospital discharge continues to be a priority for the local authority. We heard of the implementation of the discharge to assess model and how this was effectively supporting people to regain their independence and enabling people to return home in accordance with their wishes.

The provision of aids and adaptations benefits from positive coordination and good communication with practitioners across teams. We heard how the provision of personal protective equipment (PPE) was timely and well-coordinated from a central base and made a positive contribution to ensuring practitioners felt supported and protected.

Sufficiency of domiciliary care for adults continues to be a challenge. We heard of and saw examples of people not receiving the care and support they need, as well as people moving to care homes because the care and support was not available in the community. Senior managers must ensure they do not lose sight of their ability to continue to meet the needs of all people in need of care and support, and must ensure its commissioning arrangements supports the development of good quality services for all.

**Partnership and Integration - We asked:** To what extent is the local authority able to assure itself opportunities for partnership working are positively exploited to maximise person centred planning and ensure integrated service delivery and service sustainability?

In most of the cases we reviewed we saw evidence of practitioners developing professional working relationships with people, built upon co-operation and shared understanding of 'what matters'. People are supported to identify what matters to them and how they might achieve their personal well-being outcomes.

Some partners and people who responded to our surveys told us of early concerns around the transformation of services and introduction of 'Porth Cynnal' and 'Porth Gofal', which has led to a level of de-personalisation and focus on forms; rather than personal communication between people and/or agencies and named contacts with the local authority. Whilst there is recognition that it is early days in the transformation, the local authority must develop its quality assurance framework to enable it through performance management and monitoring to have an accurate and up-to-date understanding of its effectiveness and the ability to identify areas of achievement as well as those requiring improvement.

We heard and saw positive examples of a multi-agency approach to risk management, and of practitioners and managers working together during the pandemic to share information/intelligence to ensure they meet the needs and manage the risk of people with the most complex needs.

Independent providers of care and support in Ceredigion benefit from timely provision of PPE and, generally, positive working relationships with the local authority. Managers and practitioners described a well-established operational relationships with health, police, education and providers, and we saw a clear commitment to collaborative working across the local authority.

The foster carers we spoke to describe the support they received from the local authority as excellent and told us how they valued the team approach between them, children's social workers, and their link social worker. The matching of children with foster carers is an area where they have seen improvement, and the foster carer recruitment strategy underpins the local authority commitment to recruiting and supporting foster carers and improving placement choice for children and young people.

**Well-being - We asked:** To what extent is the local authority promoting well-being, ensuring people maintain their safety and achieve positive outcomes that matter to them?

The quality of assessments, care and support plans, and recordings seen were varied. Some of the documentation reviewed did not always reflect the positive work being undertaken. We saw some examples where a more explicit focus on strengths would have been beneficial in providing a holistic view of the person and their individual circumstances.

The timeliness and quality of the looked after children statutory reviews seen were good. Minutes were written directly to the child, giving the feeling of a personalised letter. These minutes acknowledge the child's wishes and explained in child-friendly language the outcomes and decisions of their review. Independent reviewing officers (IROs) told us they

contact children prior to the review. Cases are escalated as needed with relationships between professionals supporting constructive resolutions.

Managers and practitioners we spoke to expressed confidence that children in the authority were safe and this was mainly evidenced in the files reviewed. Where children are at risk of significant harm, in most of the cases we reviewed, the response was timely and effective. The section 47 enquiries seen demonstrated good information gathering and there was evidence of children being seen/seen alone as appropriate at the enquiry stage. In one case we saw a delay in the delivery of ongoing care and support following the removal of the child's name from the child protection register. To ensure support is consistently provided to help to maintain the conditions which led to de-registration, the local authority must ensure it has robust arrangements to monitor the workloads of practitioners when they are absent from work.

Review of case records and discussion with practitioners provided assurance of a timely and proportionate response to adult safeguarding reports. Voices and wishes of adults at risk were embedded within the safeguarding documentation, and in most of the cases we saw evidence of good information gathering, liaising with other professionals and the analysis and determination clearly recorded.

People we spoke with told us that the local authority had maintained safe contact with them throughout the pandemic. Where needed, direct safe face-to-face contact has continued, subject to a covid risk assessment, and Public Health Guidance. We saw examples of practitioners and providers working creatively as means of delivering their professional responsibilities. However, we heard how some of the looked after children had been significantly affected by the lack of direct contact with their parents/family members, and how some have not been able to manage with virtual contact and have therefore had no contact for months.

The early clarity of response and organisation provided by corporate senior managers was appreciated, and staff believed the authority had worked hard to promote their well-being. Practitioners were positive about the efforts made to maintain good communication but now believed their experience needed to be utilised to inform the permissions regarding future safe agile working practices. Some practitioners would particularly welcome the opening of some office bases to ease the pressures resulting from home working.

### **Method:**

- we reviewed documentation supplied in advance of our visit
- we spoke with carers and people who were receiving or had received care and support
- we reviewed 26 case files
- we held case tracking discussions on a further ten case files
- we administered eight surveys
- we held six focus groups

### **Next Steps**

We have identified strengths and areas for priority improvement and we will review the progress of these areas through our performance evaluation review meetings with the

heads of service and director. We expect the areas of improvement we have identified to be included in the local authority's improvement plans. We would like to extend our thanks to all those who helped with the arrangements for this assurance check and to those people and staff who spoke with us.

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Yours sincerely,



**Lou Bushell-Bauers**  
Head of Local Authority Inspection  
**Care Inspectorate Wales**