

Dear Jo Williams

## **Care Inspectorate Wales (CIW) - Assurance Check of Caerphilly County Borough Council adult services**

### **1. Introduction**

1.1 This letter describes the findings of our assurance check on November 25 to 27 2024. We carry out inspection activity in accordance with the Social Services and Well-being (Wales) Act 2014 (the 2014 Act) and the quality standards in the *Code of Practice in relation to the performance and improvement of social services in Wales*. This helps us determine the effectiveness of local authorities in supporting, measuring and sustaining improvements for people and services. We focused our key lines of enquiry on the four principles of the 2014 Act and sought to answer the questions below:

#### **People - voice and control**

*How well is the local authority ensuring all people are equal partners who have voice, choice and control over their lives and are able to achieve 'what matters' to them? How well are operational staff supported by leaders and management, to meet the needs of people and carers?*

#### **Prevention**

*To what extent is the local authority ensuring the need for care and support is minimised, and the escalation of need is prevented whilst ensuring that the best possible outcomes for people are achieved? How well are people provided information, advice and assistance? How well are any risks managed if people need to wait for an assessment?*

#### **Well-being**

*To what extent is the local authority ensuring that people are protected and safeguarded from abuse and neglect and any other types of harm? How well is need prioritised while people wait for an assessment and / or support?*

#### **Partnerships**

*To what extent is the local authority able to assure themselves effective partnerships are in place to commission and deliver fully integrated, high*

*quality, sustainable outcomes for people? To what extent do leaders have line of sight on population need and improvements needed with service provision?*

1.2 This assurance check focused on the effectiveness of local authority services and arrangements to help and protect people. The scope of the inspection included:

- Evaluation of the experience of people at the point of the assurance check inspection.
- Evaluation of the experience and outcomes people achieve through their contact with services.
- We will be looking for evidence the local authority and partners have learnt lessons from their recent experiences and have plans for service developments and improvement.

## **2. Terminology and Quantity Definitions**

A glossary of terminology is contained in Appendix one and a table of quantity definitions in Appendix two.

## **3. Summary of assurance check**

3.1 Like many local authorities across Wales, Caerphilly experiences challenges in relation to the provision and delivery of social care. This includes pressures arising from increased demand for service provision, the rising complexity of people's needs, and significant budgetary pressures. Recruitment and retention is a national challenge, which remains a priority for the local authority.

3.2 Strategic leaders are addressing health inequalities by working towards the Marmot principles<sup>1</sup>. Transformation programmes support the corporate plan and complement the work of the Gwent Public Services Board<sup>2</sup> (PSB) and Regional Partnership Board<sup>3</sup> (RPB). The Caerphilly corporate plan is based on five well-being objectives to enable children to succeed in education, residents and communities to thrive, the economy to grow, and the environment to be greener<sup>4</sup>.

3.3 The *Team Caerphilly – Better Together* ethos was developed in 2020 and this provides the cultural basis for ongoing transformation programmes<sup>5</sup>. Staff are proud of the work they do and the outcomes they achieve for people. One staff member told us *“I am incredibly well supported in my role. The manager and senior staff are exceptional. It is a pleasure to come to work”*. This **positive practice** and staff opinion was widely embedded across adult services.

---

<sup>1</sup> [Gwent Marmot Region - Gwent Public Services Board Gwent Public Services Board](#)

<sup>2</sup> [Gwent Well-being Assessment - Gwent Public Services Board Gwent Public Services Board](#)

<sup>3</sup> [Area Plan - Gwentrp](#)

<sup>4</sup> [corporate-plan-2023-28.aspx](#)

<sup>5</sup> [Caerphilly - Caerphilly County Borough](#)

- 3.4 The local authority works well with partner organisations to stabilise and shape the market for social care. Leaders explore innovative approaches to remain outcome focussed, whilst creating efficiencies and cost-savings. The development of collaborative communication and functional assessment service being primary examples. When coupled with progressive commissioning standards, this improves efficiency, reduces demand, and waiting times for people. Notably, the number of people waiting for domiciliary care has steadily decreased over the past two years, from over 100 people to just 12 at the time of inspection.
- 3.5 Leaders provide clear and effective strategic direction and the workforce is skilled and supported. Many people have voice, choice, and control and the need for care and support is consistently minimised. People are protected and safeguarded from abuse, neglect, and other types of harm. They receive valuable support to manage their well-being and make informed decisions, allowing them to achieve their potential and live independently.
- 3.6 Leaders in adult social services have a good understanding of service strengths and areas for improvement. The timeliness of Deprivation of Liberty Safeguards (DoLS) assessments and financial assessments are priority areas for improvement. Continuous improvements are required with arrangements for quality assurance and support for informal carers. Leaders should continue to secure improvements in a timely way.

#### **4. Key findings and evidence**

Key findings and some examples of evidence are presented below in line with the four principles of the Social Services and Well-being (Wales) Act 2014.

##### **People**

##### **Strengths**

- 4.1 People are treated with honesty, dignity, and respect. The voice of people is evidenced in most files. Practitioners maintain proportionate contact with people and stakeholders and evidence their work well, with consistent recordings of the lived experience of people.
- 4.2 Leaders model a person-centred approach and practitioners are consistently strength-based to promote the voice and independence of people. In the best examples, practitioners use caring and warm descriptions of the person and carers strengths, and '*what matters*' to them is written in the first-person narrative.
- 4.3 We found **positive examples** of research informed practice supporting direct work with people. This includes multi-disciplinary approaches for positive

behaviour management, trauma informed interventions, and the use of 'social stories'<sup>6</sup> to aid comprehension and adapt plans.

- 4.4 Nearly all staff in Caerphilly feel well supported by management and would recommend working for Caerphilly. Practitioners receive timely informal support and opportunities for reflective discussions.
- 4.5 We heard about the implementation of the *Collaborative Conversations* methodology, with 119 staff trained and 8 mentors. This is highly valued as **positive practice** by practitioners and partners, as a method for reflection and learning. Leaders have successfully embedded this approach with internal staff and key stakeholders. This supports practitioner resilience, improved decision making, and better outcomes for people.
- 4.6 The need for formal and informal advocacy is identified in a timely way by practitioners, and this strengthens the voice of people. In the best examples, advocacy services and families work closely with the local authority through safeguarding arrangements and mental capacity assessments. This is **positive practice** and which ensures people are involved equitably in these processes.
- 4.7 Caerphilly recruit sufficient Welsh speaking staff to provide services through the medium of Welsh. We found **positive examples** of Welsh speaking staff supporting interventions, when people with dementia communicated in Welsh.
- 4.8 The local authority has a lead practitioner for mental capacity interventions. Practitioners value this role and the impact it is making on practitioner confidence and competence.
- 4.9 The local authority complaints department work closely with social services to resolve complaints at an early stage. This includes a programme of training and awareness raising for staff about the complaints processes and data protection.

### **Areas for Improvement**

- 4.10 Leaders have improved workforce terms and conditions, through additional annual leave entitlement, improved flexible working, and professional development opportunities. This supports the *Team Caerphilly* ethos. However, some practitioners express concern about the impact of colleagues leaving for more competitive rates of pay. **Leaders are aware of these challenges and should continue to work with council members and national partners to create workforce stability.**
- 4.11 The local authority has a vacant Chief Executive post and interim arrangements for the Director of Social Services. **The local authority is advertising these**

---

<sup>6</sup> [Social stories and comic strip conversations](#)

**posts and must ensure timely appointments are made, to further strengthen leadership resilience.**

4.12 Managers and leaders have the information they need from the Welsh Community Care Information System (WCCIS) to monitor compliance with statutory duties. However, approaches to quality assurance and sharing best practice varied across teams. **Leaders should strengthen arrangements to ensure the consistent application of agreed standards.**

4.13 Most supervision is completed within agreed timescales. Formal supervision would be strengthened with increased emphasis on reflective practice and specific, measurable, achievable, relevant, and time-bound (SMART) actions. **Leaders should work with managers to develop consistent standards for supervision.**

4.14 Leaders are proactively shaping the market for respite and day care<sup>7</sup>. The local authority has moved towards a mixed economy of provision, which has received varied feedback from practitioners. Informal carers have also expressed concerns that the changes are not meeting their needs. For example, one carer said *'since the closure of adult day centres, the quality of support for disabled people has been hugely compromised. As a carer and family member, I have been advised that a 1-to-1 service is more beneficial for individuals, however I strongly disagree and don't feel my brother has anywhere near the support he received at the day centre he attended'*. Our inspection findings align with the recommendations of the HICO independent review, in January 2023<sup>8</sup>. This transformational change will take time to embed in practice. **The local authority should continue to work through the recommendations of that report, to manage service change and coproduce services with people most impacted by these changes.**

## Prevention

### Strengths

4.15 Integrated Wellbeing Networks (IWN) promote placed based approaches to coproducing preventative services in Caerphilly North, East, and South. Each area has specific plans and strategies to address local needs and improve service delivery. Innovative service models mobilise community resources, improving service delivery and resilience. A **positive example** of this is the Rhymney Community Hub, which fosters community spirit and provides easy access to essential services. By co-locating services, the hub encourages collaboration between organisations.

---

<sup>7</sup> [Day Opportunities Cabinet 260723.pdf](#)

<sup>8</sup> <https://democracy.caerphilly.gov.uk/documents/s45691/Appendix%202.pdf>

- 4.16 The 'Caerphilly Cares'<sup>9</sup> team offer a centralised and coordinated triage service for those county borough residents in need of support for issues such as food poverty, debt or rent arrears, isolation or loneliness.
- 4.17 Adults in Caerphilly can access social services through the Information, Advice and Assistance (IAA) Team. The service collaborates positively with colleagues from the Safeguarding Team, Assessment Service, and the West Gwent Safeguarding Hub. People received a proportionate response for information and advice, and timely safeguarding interventions.
- 4.18 The assessment service complete functional assessments to promote a multi-disciplinary, solution focussed, and strength-based response to need. The assessment service is provided by the Community Resource Team (CRT) and aims to establish the support, if any, a person needs to remain living at home as independently as possible and to achieve their outcomes. Functional assessments reduce the need for statutory services and ensure people receive timely and appropriate support. Signposting to *Caerphilly Cares* and *Community Connectors* for information and advice further enhances the effectiveness of early help initiatives. This is **positive practice** and ensures a strong focus on promoting independence.
- 4.19 Leaders have developed a mental health and well-being team. This team provides support to people who do not meet the criteria for primary or secondary care. This **positive practice** improves outcomes for people and prevents the escalation of need and intervention by secondary care services.
- 4.20 The Carers Team complete the majority of carers assessments for the local authority and provide practical and emotional support to carers. Newsletters and social media provide effective platforms for information sharing, and carers support workers signpost to the Carers Hub and Bridging the Gap. We observed the Carers Team providing authentic, caring, and comprehensive support. This support for carers is an area of **positive practice** which improves community resilience.

### **Areas for Improvement**

- 4.21 A local authority may combine a person's needs assessment with the needs of his or her carer if it considers it would be beneficial to do so. However, the quality and timeliness of interventions are impacted when carers receive assessments and support from the same team as the person being cared for. Carers describe experiencing a lack of parity between their needs and the needs of the cared for person. One carer stated "*My loved one's voice is heard above mine... What's missing is that the weight of our consent is unequal. He is given choices, I am not*". The carers team provide a highly valued pathway for

---

<sup>9</sup> [Caerphilly - Caerphilly County Borough](#)

support and will work with carers to escalate and prioritise their needs. **Leaders should continue to explore opportunities to strengthen the voice of carers and pathways to care and support.** It is especially important that this happens when there is urgent need, or the carer has needs and/or wishes which differ from those of the cared for person.

4.22 In October 2024, the Public Services Ombudsman (PSOW) completed an investigation into the administration of carers needs assessments in Wales. Caerphilly were one of 4 local authorities involved in this investigation, and all 4 local authorities have accepted the findings<sup>10</sup>. **CIW supports the findings of the PSOW and the local authority must continue to work towards the recommendations of the PSOW report.**

4.23 The stability of the market for provider services is a national challenge, requiring leaders to carefully manage market resources. Panels carefully quality assure care plans and the use of resources. Leaders describe the importance of being outcome focussed to ensure sufficiency for people with priority need. This narrative is not widely understood by practitioners. Some practitioners refer people to resources which are perceived as available, but the resource requested may not always meet the assessed needs of the person. This practice can distort data on unmet need, making it harder to identify and address gaps in service provision. **Leaders should improve communication about the purpose of panel and develop robust systems for capturing unmet need.**

## Well-being

### Strengths

4.24 The local authority responds in a timely and proportionate way to safeguarding referrals. IAA and safeguarding teams routinely update referrers on the outcome of their referrals and consistently promote multi-agency attendance within safeguarding forums. This is **positive practice** and should continue.

4.25 Practitioners are proactive and motivated to manage risk and improve the safety and wellbeing of people. In the best examples, practitioners are consistent and persistent about maintaining contact with people and sharing risks with partner agencies. In complex cases, we saw **positive examples** of multi-agency risk assessments and risk management.

4.26 At the point of inspection, the local authority had 278 people waiting for an assessment. Of those waiting, the majority require an assessment by Community Occupational Therapists (COT). COT provide information and advice to people waiting and prioritise referrals based on need. Leaders are

---

<sup>10</sup> [Are we caring for our carers? - An Own Initiative investigation into the administration](#)

aware of outstanding assessments and ensure that needs are prioritised in a proportionate manner.

4.27 The assessment service ensures all referrals receive a functional assessment in a timely way. Functional assessments are in line with the spirit of the 2014 Act and ensure the skills, capacity, support and materials available to an individual themselves, their family and their community, are accessed to meet their needs and promote their well-being.

4.28 The local authority has secured capital funding for two new respite homes and supported living accommodation for people who need care and support. This will improve planned and unplanned respite arrangements for people and informal carers within Caerphilly.

### **Areas for Improvement**

4.29 Practitioners identify people who need a mental capacity assessment in a timely way. Mental capacity and DoLS assessments are person centred and comprehensive, with meaningful focus on rights and best interests. However, people experience delays with the completion of DoLS assessments. Leaders are targeting training to develop more Best Interest assessors. The RPB are also reviewing the DoLS Consortium<sup>11</sup> and undertaking pilots to create efficiencies. This includes pilots for DoLS referrals to go directly to local authorities, to improve administrative arrangements, validation, and quality assurance. **Leaders must ensure the timely completion of DoLS assessments and reviews.**

4.30 Safeguarding arrangements would be strengthened with an increased focus on the definition of adult at risk under s126 of the 2014 Act<sup>12</sup>. An important aspect is that “the person is unable to protect himself or herself against the abuse or neglect” and not necessarily whether they do or do not have capacity (to protect themselves). This is particularly important when there are concerns about other factors such as coercion, control, and exploitation. Rationales for safeguarding decisions would benefit from utilising the language of the 2014 Act and the Wales Safeguarding Procedures. **Leaders should work with practitioners and partners to develop an improved understanding of *adult at risk*.**

4.31 Many practitioners coproduce assessments with people which focus on ‘what matters’ to the person and how they can use their own strengths and resources to achieve personal outcomes. In the best examples, practitioners utilise the five key elements of assessment, in line with Part 3 of the 2014 Act. **Assessments should be strengthened further by having increased focus and analysis of the link between ‘what matters’ and the choices available to people to meet their needs.**

---

<sup>11</sup> [The DoLS Team - Gwent Safeguarding](#)

<sup>12</sup> [Safeguarding Wales](#)



- 4.32 People experience delays with financial assessments. This impacts their ability to make informed choices in a timely way and to receive the right support at the right time. If people accept care and are not eligible for financial support, this may impact their financial and emotional wellbeing. Leaders are aware of this issue and they are exploring opportunities to increase capacity, to meet this demand. **The local authority must introduce a consistent and streamlined framework for financial assessments.**
- 4.33 People can experience delays with assessments for hospital discharge. Leaders advise CRT will soon have more resource, to undertake all discharge assessments for the local authority. **Leaders should continue to review the new assessment service and promote efficiencies to ensure timely discharge.**
- 4.34 The majority of people have care and support plans which meet their outcomes in a proportionate way. **Care and support plans should be strengthened further by having an increased focus on the link between coproduced outcomes and actions or services provided.**
- 4.35 A few people do not have care and support and/or care and support protection plans completed in a timely way. This usually happens when outcomes and actions are recorded within the assessment or meeting minutes. **Where a local authority is required to meet the needs of a person, it must prepare and maintain a care and support plan in relation to that person.** Care and support protection plans would be strengthened further by having greater emphasis on the links between risk, strengths, and safety.
- 4.36 Ensuring there are enough care providers to meet the needs of the population is a critical challenge. The local authority must work closely with care providers, service user groups, and other stakeholders to maintain market stability and ensure the sufficiency of available resources. Like many local authorities in Wales, Caerphilly have insufficient placements for people who need nursing care. **Leaders should continue to work with providers and partners to develop sufficiency in this area.**

## **Partnerships and Integration**

### **Strengths**

- 4.37 Leaders develop services and approaches to improve internal collaboration. The new assessment team and collaborative conversations training being **positive examples** of this approach. Practitioners told us *'leaders are not scared of changing things to work better and this is resulting in a sleeker service for people, as they don't need to tell their stories more than once'*.

- 4.38 We saw positive partnerships between adult and children's services, when assessing parental substance misuse. This includes detailed evaluations of their health, social needs, and family dynamics; and the impact of these upon the safety and wellbeing of children. Coordinated therapeutic interventions (such as Cognitive Behaviour Therapy and Motivational Interviewing) and practical support are provided to support recovery.
- 4.39 Leaders have developed strong partnerships through RPB arrangements. There is a comprehensive Area Plan for 2023-2028, focusing on the collaboration and integration of services across health and social care. Regional Integration Fund (RIF) monies have been used to develop assistive technology and digital solutions; the Dementia Friendly Gwent programme enables over 270 partners to support dementia awareness and inclusion; and Caerphilly run the Shared Lives scheme on behalf of six local authorities and the Aneurin Bevan University Health Board.
- 4.40 Integrated Care Funding (ICF) and transformational funding supports the wellbeing agenda for people in the region. Managing and effectively utilising these funds is an ongoing task. The "Further Faster" initiative supported the expansion of the Community Resource Team (CRT) in five boroughs<sup>13</sup>. The Regional Leadership Group has worked on initiatives to prevent hospital admissions, including: 'the Man with a Van' who responds to trips and falls (instead of the Welsh Ambulance Service) and paramedics responding to mental health crisis.
- 4.41 Caerphilly work in partnership with local authorities across Gwent to pool budgets. This includes joint workforce arrangements with Blaenau Gwent and the Southeast Wales Emergency Duty Team (EDT).
- 4.42 Tripartite funding from social services, education, and health has supported the recruitment of a regional autism lead. This post supports to drive forward the Autism Code of Practice<sup>14</sup>.
- 4.43 Caerphilly host the Regional Safeguarding Board (RSB) and partners describe robust arrangements for this board. The West Gwent Safeguarding Hub ensures colocation of the Police and social services, which facilitates timely responses to safeguarding matters.
- 4.44 The market for provider services is dynamic and challenging. The local authority is focused on working towards approaches in the (new) code of practice for commissioning<sup>15</sup>. Leaders and commissioning have good relationships with providers and support improvements in the quality and timeliness of services in Caerphilly. This has contributed to significantly reduced waiting times for

---

<sup>13</sup> [Written Statement: Building Capacity through Community Care – Further Faster \(6 June 2023\) | GOV.WALES](#)

<sup>14</sup> [Code of practice on the delivery of autism services | GOV.WALES](#)

<sup>15</sup> [National framework for commissioning care and support: code of practice | GOV.WALES](#)

domiciliary care and people receive a timely response to assessed need. This is **positive practice** and leaders should continue this approach to sustain improvements.

### **Areas for Improvement**

4.45 Practitioners and partners highlight some operational improvements needed with safeguarding arrangements. This includes the timeliness of provider information sharing, delays with police investigations, and the consistent attendance of health colleagues at strategy meetings. The local authority further describes needing to regularly challenge health about Continuing Health Care arrangements. **Leaders should continue to listen to the feedback of practitioners and raise these issues strategically with partners.**

4.46 Many care plan reviews are completed in a timely way. The majority of those outstanding are in need of a s117 after care review. Delays can occur when these are allocated to health colleagues and/or the person or stakeholders are not able to attend reviews in a timely way. **The local authority should continue to work with people and partners in health, to promote timely reviews.**

### **5. Next Steps**

CIW expects the local authority to consider the areas identified for improvement and take appropriate action to address and improve these areas. CIW will monitor progress through its ongoing performance review activity with the local authority. Where relevant we expect the local authority to share the positive practice identified with other local authorities, to disseminate learning and help drive continuous improvement in statutory services throughout Wales.

### **6. Methodology**

#### **Fieldwork**

- Most inspection evidence was gathered by reviewing the experiences of 31 people through review and tracking of their social care record. We reviewed 27 social care records and tracked 4.
- Tracking a person's social care record includes having conversations with the person in receipt of social care services, their family or carers, key worker, the key worker's manager, and where appropriate other professionals involved.
- We engaged, through interviews with 31 people receiving services and/or their carer.
- We engaged, through interviews with 27 local authority employees (this included social workers, team managers, operational managers, and leaders)
- We engaged, through interviews with 25 practitioners and leaders from partner organisations.
- We heard from 147 staff, 31 people, and 24 partners through our inspection surveys.

- We reviewed supporting documentation sent to CIW for the purpose of the inspection.
- We administered surveys to local authority social services staff, partner organisations and people.

Our Privacy Notice can be found at <https://careinspectorate.wales/how-we-use-your-information>.

## **7. Welsh Language**

CIW is committed to providing an active offer of the Welsh language during its activity with local authorities.

The active offer was not required on this occasion. This is because the local authority informed us that people taking part did not wish to contribute to this assurance check in Welsh.

## **8. Acknowledgements**

CIW would like to thank staff, partners and people who gave their time and contributed to this inspection.

Yours sincerely,



**Lou Bushell-Bauers**

Head of Local Authority Inspection

**Care Inspectorate Wales**

## Appendix 1

### Glossary of Terminology

Term	What we mean in our reports and letters
<b>Must</b>	Improvement is deemed necessary in order for the local authority to meet a duty outlined in legislation, regulation or code of practice. The local authority is not currently meeting its statutory duty/duties and must take action.
<b>Should</b>	Improvement will enhance service provision and/or outcomes for people and/or their carer. It does not constitute a failure to meet a legal duty at this time; but without suitable action, there is a risk the local authority may fail to meet its legal duty/duties in future.
<b>Positive practice</b>	Identified areas of strength within the local authority. This relates to practice considered innovative and/or which consistently results in positive outcomes for people receiving statutory services.
<b>Prevention and Early Intervention</b>	A principle of the 2014 Act which aims to ensure that there is access to support to prevent situations from getting worse, and to enhance the maintenance of individual and collective well-being. This principle centres on increasing preventative services within communities to minimise the escalation of critical need.
<b>Voice and Control</b>	A principle of the 2014 Act which aims to put the individual and their needs at the centre of their care and support, and giving them a voice in, and control over, the outcomes that can help them achieve well-being and the things that matter most to them.
<b>Well-being</b>	A principle of the 2014 Act which aims for people to have well-being in every part of their lives. Well-being is more than being healthy. It is about being safe and happy, having choice and getting the right support, being part of a strong community, having friends and relationships that are good for you, and having hobbies, work or learning. It is about supporting people to achieve their own well-being and measuring the success of care and support.
<b>Co-Production</b>	A principle of the 2014 Act which aims for people to be more involved in the design and provision of their care and support. It means organisations and professionals working with them and their family, friends and carers so their care and support is the best it can be.
<b>Multi-Agency working</b>	A principle of the 2014 Act which aims to strengthen joint working between care and support organisations to make

	sure the right types of support and services are available in local communities to meet people's needs. The summation of the Act states that there is a requirement for co-operation and partnership by public authorities.
<b>What matters</b>	'What Matters' conversations are a way for professionals to understand people's situation, their current well-being, and what can be done to support them. It is an equal conversation and is important to help ensure the voice of the individual or carer is heard and 'what matters' to them

## Appendix 2

### Quantity Definitions Table

Terminology	Definition
Nearly all	With very few exceptions
Most	90% or more
Many	70% or more
A majority	Over 60%
Half	50%
Around half	Close to 50%
A minority	Below 40%
Few	Below 20%
Very few	Less than 10%