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**Rhondda Cynon Taf
County Borough Council**

**Director of Social Services
Statutory Annual Report
2020-21**

Contents

	<u>Page</u>
1 Introduction	3
2 Overview of performance	5
3 Covid-19: Our response to the pandemic	8
4 How are people shaping our services?	13
5 Promoting and improving the well-being of those we help	
(a) Working with people to define and co-produce personal well-being outcomes that people wish to achieve	19
(b) Working with people and partners to protect and promote people's physical and mental health and emotional well-being	27
(c) Taking steps to protect and safeguard people from abuse, neglect or harm	32
(d) Encouraging and supporting people to learn, develop and participate in society	36
(e) Supporting people to safely develop and maintain healthy domestic, family and personal relationships	38
(f) Working with and supporting people to achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs	40
6 How we work	
Our workforce and how we support their professional roles	45
Our financial resources and how we plan	47
Our partnership working, political and corporate leadership, governance, and accountability	48
7 Accessing further information and key documents	51

1. Introduction

- 1.1 This report is prepared as a statutory requirement under the Code of Practice issued under Part 8 of the Social Services and Well Being (Wales) Act 2014. It describes how we have exercised our functions, our performance during the year, and developments and action taken to further improve our services and support.
- 1.2 The summary reflects progress against priorities set out in the previous annual report. It differs from previous reports insofar as it also contains a specific chapter setting out our response to the Covid-19 pandemic, which has spanned the entire year. The report also sets new priorities for the coming year as part of our ongoing programme of continuous improvement.
- 1.3 Social care is one of the Council's most important functions and a significant responsibility. We have a skilled and experienced workforce committed to meeting the needs for our residents for care and support and, where necessary, protecting them from harm. Our goal is not only to keep people safe but also to improve their well-being. This includes older people who we help to live safely and independently in their own home for as long as possible. And we help children and young people to get the best possible start in life to be able to fulfil their potential.

Our priorities and values

- 1.4 A significant part of what we do is governed by law. This includes the Social Services and Well Being (Wales) Act 2014 and the Wellbeing of Future Generations (Wales) Act 2015, both of which have requirements for action to improve people's wellbeing and prevention through partnership and collaboration between organisations. Listening to, and involving, people in decisions which affect them, and the way services are designed and operated is also a priority.
- 1.5 We are committed to meeting the care and support needs of all those who need our help, and the wider community, particularly:
 - People with learning disabilities
 - Older people with complex needs and long-term conditions, including dementia.
 - Carers, including young carers.
 - Families and individual members of families
 - Children with complex needs due to disability and illness.
 - People with mental health issues.
 - People with physical impairment and / or sensory impairments
 - People who have experienced adverse childhood experiences.
- 1.6 We know the following are important to people:
 - Helping to meet people's needs and doing what matters to them.
 - Preventing problems from happening in the first place.
 - Where problems occur, preventing them from getting worse.
 - Providing people with good quality information, advice, and assistance.
 - Helping people to access services and support so they can connect with others in their community.
 - Working closely with other organisations to providing seamless delivery of services.
- 1.7 Our broad approach is to prevent problems from happening in the first place or, if problems have occurred, to stop them from getting worse. We work towards maximising people's independence, providing the minimum support they need to live safely, preferably in their own

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home. We do this by working with other organisations and by developing more integrated services.

- 1.8 Ensuring more young people with complex disabilities can live as independently as possible in their own homes is a priority, as is creating opportunities for them to engage in education, training, culture, and the arts, thus helping them to grow in independence. Overall, the Council aims to help our residents to be active and healthy, benefitting from our leisure facilities, theatres, libraries and heritage sites, parks, and open spaces.
- 1.9 We are committed to children having the best start in life, with opportunities to fulfil their potential. Helping children who become looked after by us is a particular priority. Our core values are:
 - All children have a right to a family life. Where possible, this should be within the child's birth family.
 - Where it is not possible for a child to live with their birth parents, we will explore alternatives within their wider birth family or family friends.
 - Where children need to be looked after by us as their local authority, our aim is for them to be placed with a safe, stable, and loving alternative family.
 - Where possible, children will be placed with their siblings.
 - When decisions are made about the permanent placement of a child, their ethnic origin, cultural background, religion, and language will be respected.
 - Permanence and stability is important to give a sense of belonging, and to the continuity of relationships as well as the continuity of where the child lives.

What is in this report?

- 1.10 This report provides an overview of our performance in 2020-21. It explains what we have delivered through our day-to-day services, and developments during the year to enable us to do more to meet people's needs now and in the future. Given the exceptional circumstances of the pandemic, which extended over the whole year, this year's report also includes a summary of our response. We are accountable to the residents of Rhondda Cynon Taf and this report helps us to fulfil this by being open about what we are doing and why, and what we have achieved.
- 1.11 **Part 2** provides an overview of what our Adult Services and Children's Services delivered and achieved during the year. The impacts of the pandemic and how we responded is described in **Part 3**, while **Part 4** explains how people are shaping our services and what we do.
- 1.12 **Part 5** explains how we work with people and what we have done to improve their well-being. It also says what we have done to protect and safeguard people from abuse, neglect and harm, and to help people develop and maintain healthy domestic, family and personal relationships.
- 1.13 **Part 6** explains how we operate as a department including our workforce, our financial resources and how we plan, and our partnership working with other organisations. On the last page of this report, **Part 7** provides sources of information for further reading if required.

2. Overview of performance

- 2.1 I am pleased to present my first statutory annual report as Group Director for Community and Children's Services. In doing so, I must pay tribute to my predecessor, Giovanni Isingrini, who led the service throughout 2020 and for several years previously.
- 2.2 The last year, which has been dominated by the pandemic, has been unprecedented. The outbreak of Covid-19 in January 2020 led to the first national lockdown on 24 March 2020, immediately before the start of the period covered by this report. The entire year has been one of immense challenge, responding to the considerable impacts it has had, not only on the children, young people, families, and older people who rely on our services, but also on our staff and their families. At the outset, I must pay tribute to them for the incredible way they respond to the crisis and their dedication and commitment to doing as much as possible to continuing to deliver services and support in unprecedented circumstances. My thanks also extend to many other staff from other parts of the Council and the many volunteers from our communities who helped us in social care, and to the Council's elected members for their support.
- 2.3 We were under no illusion about the impact the pandemic would have. Our main priorities were to
- Keep our most vulnerable people, with care and support needs, safe and well in the community.
 - Maintain our essential services.
 - Ensure the flow through hospital so that people who are the most unwell can be cared for.
 - Develop a community service that can respond quickly to help people who may be isolated and in need of support, such as the new hubs.
- 2.4 The pandemic struck as we were in the process of writing the annual report for 2019-20. The seriousness of the outbreak was matched by the magnificent response of our staff and many others. However, the challenges ahead were recognised, and so too was the potential for it to get much worse before it got better, which indeed it did. In the last report, we outlined what steps we were taking in response to the pandemic and explained a more detailed report on how we responded would be included in this year's report. Part 3 of this report is dedicated to our Covid-19 response, highlighting the impacts on people who use our services, on our staff, and the action taken to continue to deliver care throughout the year.
- 2.5 Throughout the pandemic, we continued to engage with people who use our services and the public more generally using a variety of contact methods. This included surveys, virtual meetings, telephone contact and, where necessary, face to face contact, taking steps to minimise the risk to individuals, their families, and our staff.
- 2.6 We have listened to people's views. Thanks to the commitment and efforts of our teams, we were able to maintain some level of services which play a vital role in helping individuals, such as those for people with learning disabilities, families, and their carers so they could get help for respite and in crisis situations.
- 2.7 As a result of views expressed, we also changed our original decision to decommission two residential care homes and will refocus their use to help meeting the increasing demand for care and support for people with complex needs, including dementia, for respite care, and to allow reablement in residential settings.
- 2.8 Through our Wellbeing Pathway for children and young people, we have developed a more integrated approach for delivering services and support. The integrated service provision of

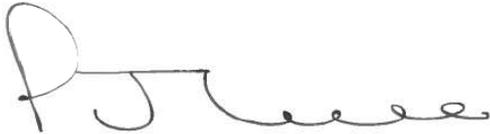
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our Community Wellbeing and Resilience service enabled it to be proactive in responding effectively to the challenges of the pandemic.

- 2.9 Improving young people's access to information, advice, and guidance was one of the priorities for the year. Given the pandemic, we stepped up our developments. In the first national lockdown, and with the involvement of staff, we undertook a rapid transformation of the way we delivered services. We assessed the needs and requirements of young people who were confined to their homes and used the information to reallocate resources and to develop contingency plans. We were able to make a virtual youth services offer within 72 hours of lockdown commencing and this was followed up by many more developments including a radical overhaul of our online information and advice and interactive issues-based support via a chat service, zoom sessions, Instagram, and Facebook Live sessions. Our Resilient Families service also used innovative ways to support families across the County. Following risk assessment, staff continued their face to face work where appropriate.
- 2.10 Foster carers play a vitally important role in caring for some of our most vulnerable children. During the pandemic, foster carers stepped up to the challenge and supported young people despite the difficulties that pandemic restrictions inevitably caused. I am immensely grateful for the role they have played.
- 2.11 The pandemic has also had a significant impact on unpaid carers within our communities. Many carers found their roles changed significantly overnight, with the normal support networks unavailable, whilst others took on caring roles for the first time. I am also hugely grateful to support provided by our unpaid carers and we have had to find new ways of supporting carers of all ages and this support will need to continue into the future.
- 2.12 Despite the challenges of the pandemic, we saw slightly fewer children needing to be added to the Child Protection Register during the year, and a small but welcome reduction in the number of children who needed to be taken into care. We will continue to devote attention to safely reducing the number of children looked after as a priority.
- 2.13 Everyone will be fully aware of the profound impact the Covid-19 pandemic has had on care homes. Despite this, all care homes continued to provide care and support to their residents throughout the pandemic. While there has been a real focus on protecting vulnerable adults in care homes, we should not lose sight of the support and services that are given to vulnerable adults in the community – those in living supported accommodation and those receiving day services and respite and domiciliary care at home.
- 2.14 We continue to work in partnership with [Cwm Taf Morgannwg University Health Board](#) and our commissioned providers to support individuals, with care and support needs, to discharge safely from hospital and ensure people were able to return home from hospital as quickly as possible.
- 2.15 Our teams continued to work closely with our partners. We supported our independent providers of residential and domiciliary care and support in several ways. At the request of the Cwm Taf Morgannwg University Health Board, we created additional temporary step-down recovery beds to support an anticipated surge in patients admitted to hospitals because of coronavirus and who then need to be discharged.
- 2.16 Our new Assistive Technology Service, which started just before the first lockdown, uses technology to provide a 24-hour response to support people in their own homes for non-medical emergencies through our Mobile Responder Service. Over the course of the year, the Mobile Responder Service made more than 5,500 visits, providing a variety of support from assisting with non-injured falls and emergency personal care. This prevented more than 3,800 calls being made to emergency services, thus making a significant contribution to reducing the demand on those already-stretched services.

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- 2.17 With the help of our partners, we have also managed to keep on track our programme of work to refocus the use of our residential care homes and to develop more modern housing which can support the needs of residents as they get older. Our second Extra Care development in Aberaman opened in May 2020 and our third, which is in Pontypridd, is on schedule for completion this summer.
- 2.18 Our ability to manage through the pandemic is testament to the dedication, commitment, and efforts of our staff, not only in social services but across the whole of the Council, and to the support we received from elected members. Being faced with an unprecedented situation required rapid responses to considering and implementing different ways of doing this, and faster decision making, both of which happened. We have learnt much from the experience, and we will utilise this to maintain some of the changes we have made, to develop further ways of improving the care and support we provide to the County's residents, and the support we provide to our staff, who underpin everything we do.

A handwritten signature in black ink, appearing to read 'Paul Mee', with a large initial 'P' and a long horizontal stroke.

Paul Mee
Group Director for Community and Children's Services

3. Our response to the Covid pandemic

3.1 This section summarises the Council's response to the pandemic between March 2020 and April 2021, the pressures we faced, and the action taken, with the fundamental aim of maintaining care and support to those who need it. In doing so, we are putting on record the huge efforts made by all our staff, the many local volunteers who helped us, and the changes made to ways of working to continue to deliver as much care and support as possible to those who needed it.

The start of the challenge

3.2 At the start of the lockdown, the only operational and administrative buildings which remained open were those required to support social care, homelessness, and frontline service provision. Working from home using remote technology was the default position for most staff, with a significant council-wide lesson learnt; when necessary, a huge amount can be achieved in an extremely short time if everyone pulls together.

3.3 Within a week, the council enabled more than 3,000 workers to have the technology to work from home. This change which would typically have taken a few years to achieve in normal operating circumstances.

3.4 Throughout the pandemic, the response by our staff across adult and children's services prioritised the most vulnerable and their carers to stay safe and well in the community, responding to urgent and immediate care and support requirements, and safeguarding. The Emergency Duty Team (EDT) which provides cover and a professional response for emergencies outside normal working hours remained fully functional throughout the pandemic, receiving an increase in the number and complexity of calls.

3.5 Proactively supporting care providers, including residential care homes, to respond to the risks associated with the coronavirus to deliver quality services safely was also vital. Risk assessments were undertaken for any face-to-face contact with families, and staff were provided with personal protective equipment. The priorities were safeguarding children, supporting children looked after and residential homes, and continuing work with other organisations such as courts.

The impact on our staff

3.6 Most key service functions continued but with reduced staffing levels, where on average, more than 1,600 Council staff were unavailable for work due to sickness or underlying health conditions, self-isolating; shielding or living with someone who needs to be shielded. However, many staff offered to undertake different roles.

3.7 Around 3,000 employees responded to a council-wide survey to say they would undertake work in the care sector and in other essential services. At that point, 365 members of staff were assigned to the Care sector and another 200 assigned to the Community Hubs.

3.8 What we noticed was a significant increase in meals for elderly people, with 635 people receiving daily meals in their homes, emergency childcare for those most vulnerable, with on average 420 children attending the provision provided by the Council for critical workers and vulnerable learners daily, 130 of whom are vulnerable.

3.9 Despite the impact of the pandemic, staff continued to provide social care services to vulnerable people in difficult circumstances in people's own homes, residential homes, nursing homes, supported living and hostels. However, we quickly recognised the potential impact on staff, many of whom were working in difficult circumstances. The Council arranged a Well-

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Being Helpline and counselling service to help staff who were feeling worried, anxious, or isolated. Mindful of the same pressures on others, the services were also made available to staff working for independent care providers. As we emerge from the pandemic, we are mindful about the potential ongoing impact on our staff.

The impact on adults needing support

- 3.10 The Council's Adult Services and its providers had been supporting more than 4,000 vulnerable people in their homes and in care settings every day since the outbreak started. Inevitably, there had been disruption to some services, and this was expected to continue for the foreseeable future.
- 3.11 Assessments of people's needs continued to take a person-centred approach as far as practicable. Workloads across Adult Services remained high, and caseloads become increasingly more complex and as result waiting lists in some service areas have developed/been exacerbated. However, these have continued to be risk assessed and the priority status of those people waiting for a service reviewed. Plans are in place to reduce these waiting lists. External support was commissioned in response to the need for more assessment.
- 3.12 Everyone will be fully aware of the profound impact the Covid-19 pandemic has had on care homes. Despite this, all care homes continued to provide care and support to their residents throughout the pandemic. The separation from family and friends has been a difficult issue for many people living in care homes who in normal circumstances would have contact with relatives and friends. The Council, and care home providers, recognised the importance of visiting to residents and their families, and we continued to review risk assessments and arrangements for visiting through the pandemic in light of Welsh Government Guidance and a Covid-19 outbreak at individual care home. The Council and care home providers supported opportunities, where possible, with virtual visits and calls through various forms of technology to ensure residents, where possible, remain connected with family members.
- 3.13 During the year all Supporting Living providers have been required to deliver new and innovative ways of working to mitigate the negative impact on service delivery, including managing additional "stay back" for those accessing day service pre-pandemic and the use and roll out digital technology. All providers have been highly successful managing Covid-19 throughout the pandemic. The service has facilitated multiple moves, reassessments, and hospital discharges. Individuals have also been supported to maintain positive contact with families and friends in line with guidance, which has resulted in consistently safe schemes with happy and healthy individuals who are now able to see their loved ones face-to-face once more.
- 3.14 Delivering domiciliary care at home during the pandemic has been immensely challenging. Our priority was delivering care and support to those who relied on us. Our dedicated front-line workers had to work within national guidance and we needed to protect people who were receiving support, their carers, and our staff against transmission of the virus. Over the course of the year, some individual care and support packages were affected, which may have impacted on either the frequency or the timing of the visits. Although, we put in place the necessary precautions to minimise disruption to services and to be to deliver care and support services safely.
- 3.15 During the pandemic, Adult Services continued to provide reduced day service provision, including the successful introduction of outreach services for older people, depending on need and risk throughout the pandemic. The situation was similar for respite services. We have now started to reopen day services and respite further as the pandemic eases, although our offer is still reduced compared to pre-covid provision and this will continue until existing guidance

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changes or more service provision is made available. To counter this, we have continued to ensure, where required, that there is alternative care and support at home for people affected by the reduced service offer.

- 3.16 Hospital discharges continued to be prioritised. Adult Services staff assisted the NHS with step-down services for people leaving hospital to give hospitals more capacity to deal with Covid 19 patients. The Council's new Extra Care facility in Aberaman opened at the beginning of May and people started moving in. The facility also provided some temporary respite accommodation to enable step up/down from people's own homes where needed.
- 3.17 The period since the beginning of December 2020 was demanding, the Additional Winter Protection Plan funds made available by the Welsh Government were utilised to increase social work assessment and home care capacity, which had a positive impact on discharges. Care homes were supporting the admission of patients from hospital where they could provide appropriate care safely. That said, further outbreaks and subsequent national restrictions placed on admissions was limiting care home placements, particularly those for nursing and dementia. This meant some discharges took much longer to complete.
- 3.18 Between the end of October and 31st March 2021, 655 hospital discharges were supported. The success of this response was considered testament to the strength of the established partnership with the health board and providers.
- 3.19 As part of the coordinated national effort to cope with the pandemic, we reported weekly to the Welsh Government. The reports considered our ability to operate, our ability to place adults with a care plan into residential care, and our ability to provide care to people in their own home. We rated our status on each as green, amber or red.
- 3.20 Our ability to operate was green if we had some staff absent but where we could still manage to provide cover for most services. It was amber when some staff were absent, and we were still able to provide cover but where some services were being moderately affected. The red status would have reflected significant numbers of staff absent with cover available only for critical services.
- 3.21 Fortunately, we did not find ourselves in the red zone at all. During the year the most challenging times were from May to mid-July and then from November to mid-January, where we classified our status as amber, which mirrored the more challenging period of responding to the pandemic.
- 3.22 The pattern was broadly similar for our assessment of our ability to place adults who had a care plan into residential care and to provide care at home.
- 3.23 The amber status for providing care at home reflected high demand for home care as people with more complex care packages were supported to live at home rather than in a care home. This put pressure on supply and capacity in some areas of the county at "peak call" times. Where necessary, support was provided by the in-house Support @Home Service as a short-term measure where there was a lack of capacity in the independent sector. This helped avoid significant delays to care being delivered.
- 3.24 For placements into residential care, the amber status reflected limited capacity across residential and dementia residential care capacity due to some homes not accepting admissions and delays by the NHS to test patients prior to discharge and before admitting them from the community. There was a limited number of available short-term respite beds, in particular for people with dementia. The position reflected the limited capacity across the nursing care sector and in particular dementia nursing.

The impact on carers needing support

- 3.25 The pandemic had a considerable impact on most carers. Some people and their carers decided to decline services because of concerns about infection. As the pandemic continued, the incidence of this decreased, resulting in more people asking for help and less reluctance to reduce the level of care and support at home.
- 3.26 What we were able to do was to ensure a range of support to carers, including one-to-one telephone support to carers throughout the pandemic, virtual support activities such as social events, learning events. and opportunities to improve mental and physical wellbeing. Project staff have also delivered various packs with at-home activities including art and wellness packs.
- 3.27 The “Happy @ Home” grant allowed carers to apply for up to £300 for items to boost their wellbeing at home. This proved extremely popular. Personal protective equipment was also distributed for carers to use.
- 3.28 The Carers Counselling service experienced high demand, and successfully obtained short-term additional funding until the end of March 2021 to help to reduce the waiting list.
- 3.29 A pilot project launched in 2020 to improve the uptake of, and process for, carer assessments, called “Carer Conversations” was audited, highlighting excellent practice, and identifying areas of further work.

The impact on children needing support

- 3.30 Children’s Services, the (School) Attendance & Wellbeing Service and individual schools kept in touch with the most vulnerable children and families. The Council’s education psychologists and specialist teachers provided support, advice and guidance to individuals and families who needed it to help cope with what were stressful and uncertain times.
- 3.31 The aim was to resume the full range of services as soon as practically possible. Plans were made to review safeguarding issues with more direct contact with children, families, and adults, review the emotional wellbeing and mental health of children, young people, adults, and families, complete court work and review care and support plans..
- 3.32 In summary, statistics for the year show the increased demand on services but, at the same time and despite the restrictions and challenges of the pandemic, encouraging progress in meeting the needs of children and young people.
- 3.33 Children’s Services experienced a 10% increase in the number of contacts in the previous year (17,782). Of these, 786 related to a safeguarding issue.
- 3.34 At the start of the reporting period covered by this report, 31 March 2020, there were 717 children in the county who were being looked after. By the end of the reporting period, on 31 March 2021, the number had fallen to 695; a 3% decrease.
- 3.35 The rate in children looked after per 10,000 population has fallen from 143.1 to 138.7. Over the course of the year, there was a 17% decrease in the number of children who became looked after during the year. There was a 25% increase in the number of children looked after who left care, and a 20% increase in the number of care leavers requiring support.
- 3.36 Over the year, 592 children were added to the Child Protection Register, which is a small reduction (1%) from the previous year. The number of children on the register at the start of

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the reporting period was 463. While the number increased during the year, by the end of March this year it had fallen to 425; an 8% decrease.

- 3.37 Staff from the Council's Youth Participation and Engagement Services helped in the Council's children's homes, working with children and young people during the working week, evenings, and weekends. This strengthened the working relationships between teams and has informed future service improvements as part of the service's recovery plan. Additional help was also commissioned to increase the capacity of social work in Intensive Intervention Services, which was suffering from vacancies.
- 3.38 Child Protection Conferences and Children Looked After reviews were taking place virtually, attended by partner organisations and family members where possible. Youth Engagement and Participation Service staff remained in secondary schools and the learner pathway was still in place to ensure young people who are struggling to return to school have the support to do so, and to re-engage with school and learning.
- 3.39 Over the course of the year, weekly reports were also submitted to the Welsh Government for Children's services. Similar to adult services, we were asked to assess our ability to operate according to a traffic light system, where we were in green if we had some staff absence, but were managing to provide cover for most services, amber if we had staff absent and some services were moderately affected, but were still able to provide cover. The red status, which didn't occur, was where significant numbers of staff were absent and we were only able to cover critical services.
- 3.40 Apart from a brief period in both June and August when we were in amber, the rest of the year was assessed as green demonstrating a high degree of resilience in our service delivery even when the pandemic was at its most challenging.

What have we learnt?

- 3.41 We have learnt a lot since March 2020. We know that whilst contingency planning is important, new thinking is needed to ensure that we are agile enough to respond, accepting that it is possible to transform some areas of business almost immediately. We also know that a crisis can bring out the best in people, strengthening joint working / team working, a "can do" approach, and an "all in this together" philosophy.
- 3.42 We have had to make decisions and act quickly. We know that priority setting is vital to deploying resources effectively, particularly when having to match limited capacity to needs, but with the ability to flex to manage uncertainty, and recognising that leadership is about being prepared to allow risks to be taken. We should never underestimate the importance of keeping in touch with service users and carers to help ensure they receive the help they need.
- 3.43 Throughout the pandemic both Adult Services and Children's Services continued to deliver against their statutory duties. The period however has shown us what we can do over and above merely adhering to those duties.
- 3.44 Although the pandemic has had so many negative impacts, the experience has generated considerable learning about ways of working, organisational culture, and ability to change and adapt. Equally if not more important, a spotlight has been shone on the vital role social care plays in helping people to live safely and as independently as possible. Hopefully, this will result in greater recognition and appreciation of the value of staff who deliver care with rewards to strengthen the sector and its workforce.

4. How are people shaping our services?

- 4.1 Reaching out to people who use our services and to the public more widely to get their views on the needs of people and on future services and support is a central to the way we work. The restrictions imposed during the pandemic have made it challenging to do this over the last year.
- 4.2 Within Social Services, and across the Council, huge efforts were made to keep in touch with people through information and awareness raising, social media, surveys, and feedback questionnaires. Inevitably, there were fewer face to face meetings during this year, but they did take place when necessary for people's wellbeing or to ensure their safeguarding. We have also made considerable use of personal telephone contacts and virtual meetings over the internet.

What did we plan to do in 2020-21?

- 4.3 We said we would:
 - Develop and fully implement, across all Service Areas, a systematic and collaborative process for capturing the views of service users and their families about the impact of our support and services and inform service development and change.
 - Continue to promote engagement with children and young people and partner agencies to ensure coproduction and that the voice of the child is heard including developing an action plan to meet the needs of young people identified within the "Your Voice" survey.

Capturing the views of those who use our services and their families

- 4.4 We capture feedback on our services in different ways. They include the use of feedback forms and surveys to measure the quality of our services and to determine what outcomes we achieve for people to meet their care and support needs. Letters received with compliments or complaints are also recorded, with the latter being reviewed to identify what might be done to further improve our services. Our services are also regulated and are therefore subject to inspection by the Regulator, the Care Inspectorate Wales.
- 4.5 During Autumn 2020, as part of the development of our Learning Disability Transformation Programme, we engaged people with a learning disability and their family and carers along with social work and care staff and our commissioned providers to learn from their experiences through the pandemic and to explore their perspectives on current and future service delivery offers, in particular day opportunities. This engagement activity will be built upon and inform development of learning disability service in 2021/22
- 4.6 In September 2020, we undertook a "Parenting through Covid-19" survey. It sought to establish what support families may need as a direct result of the pandemic. The survey was widely circulated via our partner organisations and digital platforms. The findings informed our work to re-commission parenting services from September 2021.
- 4.7 Informal surveys via social media platforms and well as discussions on a one-to-one basis during case work has helped to capture their views of the impact of the pandemic on children and young people, their families and wider community.
- 4.8 Our Youth Engagement and Participation Service provided opportunities for young people to complete several consultation activities during the pandemic. These included informal surveys and formal consultation events. A formal consultation was rolled out in June 2020 to capture the views of young people on the support offered by the service throughout the lockdown. We also promoted the Children's Commissioner for Wales' "Coronavirus and Me" All-Wales surveys in June 2020 and February 2021.

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4.9 One example of our work to capture feedback from users of services and the public more generally included online and offline consultation with more than 1,000 people (n=1,044). Respondents were asked to state which services they would want to protect from an increase in fees and charges in 2021-22. Most respondents (55%) felt charges for adult social care non-residential care services should be one of the services for which fees and charges should be frozen. Respondents were also provided with a list of Council services and asked to choose which services should be protected and prioritised for any additional resources in 2021-22. The top 3 services that respondents wanted to protect and prioritise were: Children's Social Care Services (95.5%); Schools (92.1%); Public Health (91.9%).

Engaging with children and young people

4.10 The regular meetings of our "Your Voice" survey sub-groups as part of action to take forward the findings of the 2018 survey were suspended because of the pandemic. The work was able to resume in summer 2020. To reduce duplication during a period of uncertainty, the sub-groups were subsumed into the established Youth Support Services Strategy sub-groups, and an action plan covering both. The groups meet quarterly, and work is underway across all domains to ensure the pre-identified and emerging needs of young people are being met.

4.11 We have explored the development of a mobile phone application to connect social care teams and care experienced young people who are aged 16 and over. A scoping exercise has been commissioned to establish the potential benefits and how it could be used. Social care staff and care experienced young people were involved in interviews and discussions to inform a report for the region. The findings of the report will inform the next steps.

4.12 Informal engagement with young people was conducted during street-based sessions across the county borough. Staff engaged with young people they met on the streets, asking them what opportunities, provision, and activities they would like to see in their local area once lockdown restrictions have eased. The discussions have informed the service's recovery plan for the coming year.

How people have influenced our decisions

4.13 The extensive public consultation we undertook on the future of our eleven Council-run residential care homes is a good example of us listening to people's views. Our original proposal was to keep seven of the homes open, refocusing them on meeting complex needs (including dementia), residential reablement and respite care. We proposed to decommission four homes.

4.14 As a result of feedback received during our engagement and consultation activities, we decided to keep two more homes open: Garth Olwg in Church Village and Ystradfechan in Treorchy. They will also be refocused to help meet increasing demands for care and support for people with complex needs, including dementia, for respite care to help carers, and to allow residential reablement.

What do people think of our services?

4.15 We analyse the findings of reviews, evaluations, the results of surveys, the views expressed in consultations and people's comments when they contact us with complaints or to compliment us and use the information to further improve the services we deliver. Both our Adults Services and Children's Services teams undertake self-assessment exercises. These assessments ensure we monitor what we are achieving and where we can improve.

4.16 The following table provides the results of this year's survey for Adult Services, comparing data over the last five years. The survey was based on a sample of adults aged 18 and over who

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had a care and support plan on the day the sample was drawn. It measures things which people tell us are important to them.

Table 1: Key service quality measures, Adult Services, 2017-18 to 2020-21

(%)

	Statement	2017 - 2018	2018 - 2019	2019 - 2020	2020 - 2021	Change this year/last
1	I live in a home that supports my wellbeing	89	93	92	94	
2	I can do the things that are important to me	50	77	85	86	
3	I feel a part of my community	52	69	77	74	
4	I am happy with support from my family, friends, neighbours	88	97	96	93	
5	I feel safe	79	94	95	92	
6	I know who to contact about my care and support	79	83	87	85	
7	I have received the right information or advice when I needed it	75	91	92	92	
8	I have been actively involved in discussions about how my care and support was provided	78	90	88	92	
9	I was able to communicate in my preferred language	94	95	95	96	
10	I was treated with dignity and respect	91	97	99	98	
11	I am happy with the care and support I have received	84	97	97	96	
12	It was my choice to live in a residential care home	60	56	57	61	

Source: Rhondda Cynon Taf County Borough Council

Note: Percentages based on adults who answered each question with "Yes" or "Sometimes". Figures have been rounded.

4.17 In five of the measures, there were slight improvements from last year. In six of the measures, the survey results show a slight reduction in the levels of confidence. This could well be linked to peoples' experiences of the pandemic, feeling less safe and less connected to their community and families/neighbours.

4.18 The following table provides the results of this year's survey for Children's Services and those from the four previous years. The survey was based on children who had a care and support plan on the day the sample was drawn.

Table 2: Key service quality measures, Children’s Services, 2017-18 to 2020-21

%)

	Statement	2017-2018	2018-2019	2019-2020	2020-2021	Change this year/last
1	I live in a home where I am happy	99	98	97	98	
2	I am happy with the people I live with	99	99	97	100	
3	I can do the things I like to do	100	96	96	97	
4	I feel I belong in the area where I live	92	92	92	94	
5	I am happy with my family, friends, and neighbours	97	98	95	98	
6	I feel safe	99	96	97	97	
7	I know who to speak to about my care and support	94	94	95	94	
8	I have had the right information or advice when I needed it	92	89	90	95	
9	My views about my care and support have been listened to	98	93	92	93	
10	I have been able to use my everyday language	99	98	98	99	
11	I was treated with respect	98	98	98	97	
12	I am happy with the care and support I have had	97	96	97	97	
13	I have had advice, help and support that will prepare me for adulthood (16 and 17 year-olds only)	86	90	77	82	

Source: Rhondda Cynon Taf County Borough Council

Note: Percentages based on children who answered each question with “Yes” or “Sometimes”. Figures have been rounded.

4.19 Of the thirteen service quality measures, performance was better this year in nine and slightly lower this year in two. In the context of the challenges of a pandemic when children and young people would have had their education, family and social lives affected, these results show some signs of encouragement.

4.20 More than 4 out of 5 parents (84%) said they had been actively involved in all decisions about how their child’s/children’s care and support was provided, maintaining last year’s performance which was also 84%.

4.21 In 2020-21, 37 carers responded to our questionnaire. The key highlights were:

- 20 (54%) said they were able to live in a home that best supported their well-being
- 8 (22%) said that they could do the things that are important to them whereas 14 (38%) said that this was true sometimes

Complaints and compliments

4.22 Where, occasionally, we have not been able to meet people’s expectations, we use the feedback to learn what we can do better. Where necessary, we make changes to do this. The following table summarises the number of complaints and compliments received this year and in the four previous years.

Table 3: Number of complaints and compliments received, Adult Services and Children’s Services, 2016-17 to 2020-21

		2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Adult Services	No. of complaints received	82	51	56	54	25
	No. of compliments received	102	102	124	93	91
Children’s Services	No. of complaints received	106	114	32	59	29
	No. of compliments received	62	41	39	59	93
Total	No. of complaints received	188	165	88	113	54
	No. of compliments received	164	143	163	152	184

Source: Rhondda Cynon Taf County Borough Council

4.23 This year saw the lowest number of complaints in the last 5 years and the highest number of compliments. Given the challenges of maintaining services and delivering new support during the pandemic and the impact it has had on residents, this is encouraging. It is, without doubt, a reflection on the huge efforts by staff from across the Council.

Welsh language

4.24 In 2011, the last Census for which results are available, nearly 28,000 people who live in the county speak Welsh, which is slightly more than 1 in 10 of the population. The results of this year’s Census will, in due course, reveal whether this has changed and if so, to what extent. However, irrespective of the actual number, we are committed to giving people the opportunity to receive services and services funded by us in Welsh. In 2021 when the results of the Census are available, we will further consider steps to enhance this.

4.25 As an example of our current commitment, this year, an active offer to provide the service in Welsh was made in 99.9% of the 7,010 new assessments of care and support needs for adults; with the offer accepted in 123 cases. For assessments of adult carers’ needs, the offer was made in each of the 374 cases.

4.26 Our approach reflects the Welsh Language Standards and the Welsh Government’s “Follow-on Strategic Framework for Welsh Language Services in Health and Social Services.” The Council’s tender and contract processes list all the applicable Welsh Language Standards required of services we commission, which ensures the Welsh Language is an integral part of

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commissioning. Monitoring officers ensure compliance as part of our monitoring of independently run care homes.

5. Promoting and improving the wellbeing of people we help

- 5.1 In addition to the care and support we provide from our own services, we work closely with many other organisations to help vulnerable children, young people, adults, and families. Our goal is to meet their care and support needs and to help them to improve their wellbeing.
- 5.2 Our work is framed by action set out in the Cwm Taf Regional Plan 2018-23ⁱⁱ, which identifies what we need to do to meet the needs of our population. Aside from the challenges of helping people through the pandemic, which were highlighted earlier in this report, we now face many challenges in meeting people's ongoing needs. There is increasing demand for our services, and we expect further increases in future. We are continuing to see people who need help with more complex needs.
- 5.3 This section of the report summarises action taken over the course of the year to deliver services and support and on what we planned to do this year to improve how we help meet people's needs. It also reflects some adjustments to service delivery considering restrictions imposed to manage the pandemic.

(a) Working with people to define and co-produce personal well-being outcomes that people wish to achieve

What did we plan to do in 2020-21?

- 5.4 We said we would:
- Review the delivery of integrated services for children, young people and families delivered by the Community Wellbeing and Resilience Service.
 - Improve access to information, advice and assistance provision for children, young people and families within local communities.
 - Implement the new universal needs-based Early Years delivery model in RCT.
 - Develop a model of support for Kinship Carers.

How far did we succeed and what difference did we make?

Reviewing the delivery of integrated services

- 5.5 Our integrated Community Wellbeing and Resilience Service was proactive in responding effectively to the challenges of the pandemic. New delivery methods of, and pathways for, delivering support were developed. The creation of the Wellbeing Pathway for Children and Young People alongside schools and the Attendance and Wellbeing Service is a good example. It has resulted in a single pathway to support children and young people, and families with the return to school.
- 5.6 Similar ways of using an integrated approach were developed during the lockdown to help identify vulnerable children and families who were not maintaining contact with their school(s). Our use of Capita One system across the service facilitated good communication across teams when families are receiving a package of interventions from different sources. Other developments include virtual play sessions by the Children and Young People's Service in response to needs identified by the Resilient Families Service.

- 5.7 The Welsh Government's White Paper which seeks to strengthen regional partnership working emphasises the importance of more work to deliver more integrated services. This agenda will continue develop as strategic partners explore how the needs of adults, children and carers can be met by pulling together. Ensuring our staff can share the experience of joint working will be important along with those areas of improvement we are committed to, such as the development of community services that support people to live longer in their own homes.

Improving access to support

- 5.8 Improving young people's access to information, advice, and guidance was set as one of the priorities for the year. The pandemic meant we needed to accelerate our work and introduce developments faster than initially planned. During the first national lockdown, we undertook a rapid transformation of the way we delivered services. To do this required the active engagement of staff across the service to effect cultural change. The work was supported by managers who were confident to let staff take calculated risks in effecting the changes. We focused on those who use our services, assessing the needs and requirements of young people who were confined to their homes. This information was then used to reallocate resources and to develop contingency plans.
- 5.9 Our previous work on service innovation, and the confidence of our staff in understanding the needs of young people, resulted in a virtual youth work offer being available to young people within 72 hours of the lockdown commencing. The realigned, online, offer was a significant increase in the volume of information, advice, and guidance, as well as universal activities available to young people via the website (www.wicid.tv) and social media platforms (Facebook, Twitter, Instagram, and YouTube). The offer was delivered by our Youth Engagement and Participation Service with significant contributions from our partners, including sexual health teams, substance misuse organisations, and commissioned providers.
- 5.10 The service became available 24 hours a day every day on our website. It became a "one stop shop" for all the information a young person may need, with signposting to other sites where necessary. In addition, interactive issue-based support was offered through chat service, zoom sessions, Instagram, and Facebook Live sessions. With the help of professional teams and partners, information online underwent a radical overhaul. This resulted in up-to-date support spanning all the issues young people may have been experiencing in lockdown. Our monitoring data shows significant levels of online engagement with users in addition to the 1:1 support for over 1,000 young people delivered remotely.
- 5.11 Our Resilient Families Service Parenting Team used innovative ways to support families across the county. Parenting, and the Talk and Play Team, posted weekly videos on the Family Information Service Facebook pages. These pages were viewed far and wide. Between April and September, a wide range of video materials were filmed and posted to our Family Information Service Facebook page. They included 38 parenting support videos and 2 pre-recorded parenting programmes. Other videos included 27 to help parents with a child's early language, 35 story time videos and 15 song time videos. Between them, they had a combined total of nearly 83,000 views.
- 5.12 The level of engagement highlighted the need for the Resilient Families Service to develop its own website to ensure the online presence remains as interactive and accessible as possible. The Parenting Team has also adapted pilot programmes to deliver these online with small groups of parents. These proved successful and have been rolled out to cover broader parenting programmes. The team also linked with community groups such as Valley Kids and CBS to provide regular weekly online support sessions.

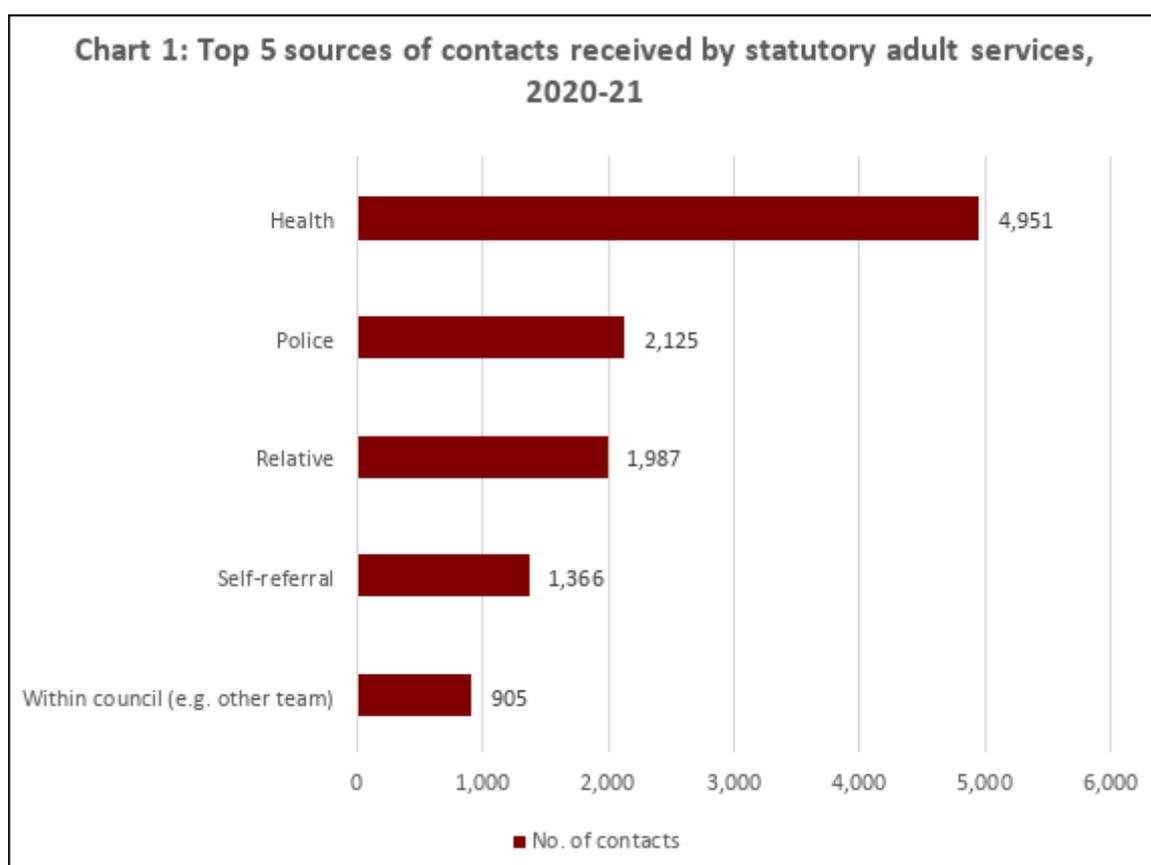
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New Early Years delivery model

- 5.13 The new needs-based delivery model for Early Years services, for those aged 0-7 years, is a joint pilot project by the Welsh Government and the Cwm Taf Morgannwg Public Services Board. It is exploring how services might be reconfigured within existing budgets to achieve more integration and effective transition between services. It is also aiming for better coordination, planning, and commissioning of services.
- 5.14 Unfortunately, the pandemic delayed the start of the Resilience and Wellbeing Health programme, which is the final part of the model to be implemented, until the beginning of October. An external evaluation of the formative stages of the project has been commissioned and a report is expected in May 2021.

Information, Advice and Assistance Services for adults

- 5.15 Adult Services' First Response Service has been fully operational throughout the pandemic, along with Adult Services' Single Point of Access (SPA) - our Information, Advice and Assistance Service. Maintaining and enhancing this core function prevented any disruption to this service for Rhondda Cynon Taf residents and provided a single point of contact for professionals.
- 5.16 During the year, we received 12,176 contacts for adult services. The top five sources of referral can be seen in the following chart.



Source: Rhondda Cynon Taf County Borough Council

- 5.17 We provided 9,369 adults with information, advice, and assistance.
- 5.18 We completed 7,010 new assessments of care and support needs for adults.

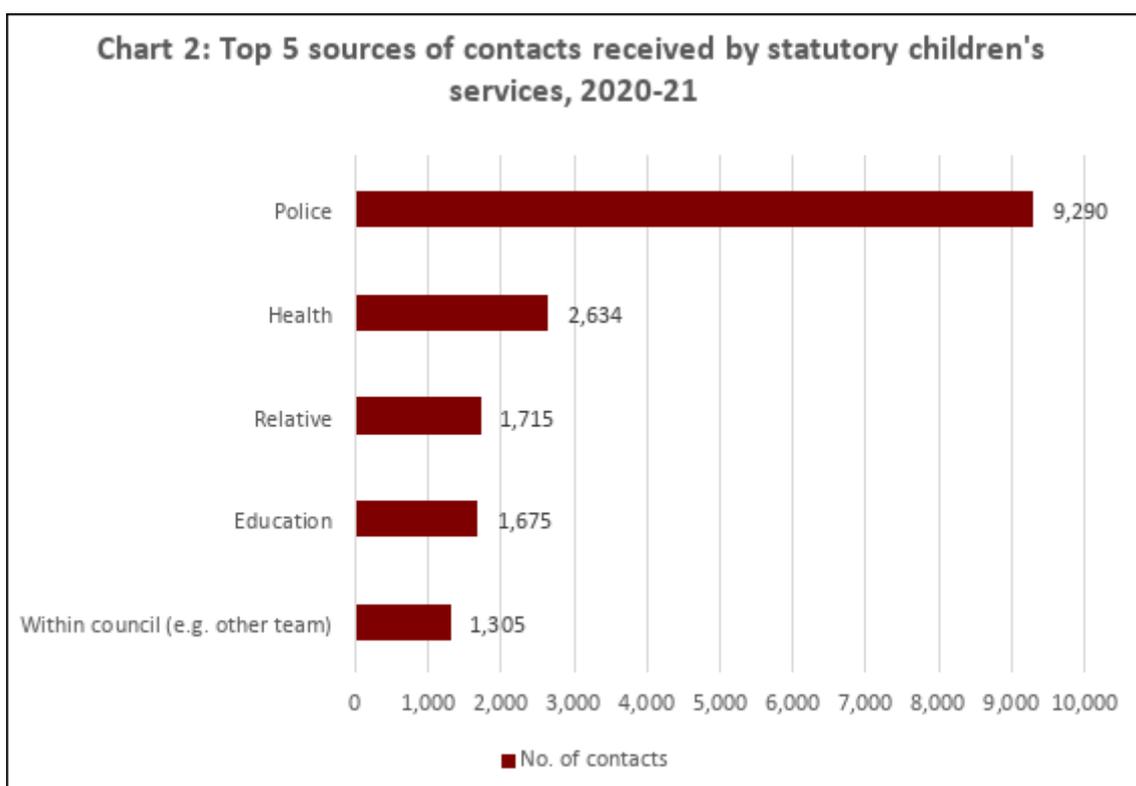
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5.19 During the year, 2,983 care and support plans were reviewed. This is lower than the 3,787 reviewed the previous year. Of all reviews in 2020-21, 35% were completed within an agreed timescale, which is a slight increase on the figure of 32% in 2019-20.

5.20 We started 1,473 services for adults during the year, the majority of which (1,033) were for domiciliary care. Of the remainder, 433 were for residential care and 7 for day care services.

Information, Advice and Assistance Services for children and young people

5.21 During the year, we received 19,489 contacts with children's social services, a 10% increase on the number of contacts in the previous year (17,782). In 98% of cases, a decision on the need for advice or assistance was made by the end of the next working day. The top five sources of referral can be seen in the following chart.



Source: Rhondda Cynon Taf County Borough Council

5.22 We provided information, advice, or assistance to 8,110 children and families. This compares to 5,261 the previous year and 5,670 in 2018-19. This is an increase of 54% over the total provided in the previous year.

5.23 Over the course of the year, 4,987 new assessments were undertaken. In 18% of cases, the needs could only be met by way of a care and support plan. In most cases (64%), the individual's needs could be met by other means while in the remaining 18% of cases, it was determined there were not eligible needs to meet.

5.24 The number of children with a care and support plan on 31 March 2021 was 1,609.

5.25 A review of 5,213 children's care and support plans and provision of financial support were due during the year. Of these, 1,837 were for children looked after and 1,136 were child protection cases. We completed 83% of all reviews due within the statutory timescales.

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Supporting carers

5.26 Carers of all ages play a vital role. Their own wellbeing is also important and sometimes they too need to be supported in what they do. We are committed to doing as much as we can to help. Our priorities include:

- Identifying carers of all ages and recognising the vital contribution they make to looking after people who need support.
- Providing up to date, relevant, and timely information, advice and assistance to all carers.
- Providing support to meet the needs of all carers.
- Giving carers a voice, with more choice and control over their lives.

5.27 Back in June 2019, Care Inspectorate Wales identified the following priorities for improvement:

- To consistently recognise carers' roles and to ensure the voice of the carer is heard; with improved support for carers tailored to enable them to achieve their own wellbeing outcomes.
- Ensure teams working with people with longer term needs satisfactorily manage the volume of work and ensure people's needs are appropriately reviewed.

5.28 In response, we appointed a strategic lead for carers. This means responsibility for all carers and related issues, including young carers, young adult carers and adult carers, now sits under one person, which has enabled us to bring about a more co-ordinated approach to supporting carers. Our staff now work flexibly across all the services we provide for carers.

5.29 In Adult Services, our new "Carers Conversation", which we developed to improve our engagement with carers and what we offer, became more important during the pandemic because carers became even more isolated. An improved dialogue has proved effective at supporting them, leading to better conversations, an uptake in assessments, increased support, and improved outcomes. We have kept in touch with more than 1,500 carers via a newsletter which has provided them with Covid-19 related advice and information, including an offer of PPE in the earlier stages of the pandemic. We also launched a small grant programme to support carers. This has proved successful, and we are planning to continue it in future years.

5.30 During the year, we received 193 referrals for information, advice, and assistance for adult carers, either self-referrals or from professionals making the referral on behalf of them.

5.31 There were 374 needs assessment for carers over the course of the year, which is an increase of 14% on the figure of 328 undertaken the previous year. Of the assessments made, 56 were met with a care and support plan. The needs of 229 carers could be met by other means and in 89 cases, the assessments determined there were no needs to meet.

5.32 During the year, 67 care and support plans for adult carers were due for review, of which 31% were reviewed within the statutory timescales to which we work.

Supporting Kinship Carers

5.33 Our planned model of support is not yet been implemented but the service is continuing to work towards this. A consultation exercise has been undertaken with kinship carers in the county to inform the approach and the model will be developed based on the priorities that are identified by the carers.

Supporting young carers

- 5.34 Helping young carers is also a key priority. We have a dedicated Young Carer Assessor in the Information, Advice and Assistance function of Children's Services. This helps ensure we meet our statutory obligations for the assessment and monitoring of young carers. We have also achieved greater integration between our carers team and the services of Action for Children, which we commissioned specifically to support young carers. We also have a dedicated support worker for young adult carers aged 18-25.
- 5.35 Since the first lockdown, the Action for Children service was based primarily on virtual support. However, individual face-to-face support continued to be provided for the most vulnerable young carers. In between lockdowns, group sessions were able to restart, providing a break away from home for some young people. Every month since March 2020, Action for Children posted to young carers different packages, including games, equipment, treats and gifts to help them through what were difficult times.
- 5.36 During the year, we received 76 referrals for young carers or from professionals making the contact on their behalf. We provided information, advice, and assistance in 70 cases.
- 5.37 We undertake assessments of young carer's needs and, where necessary, prepare care and support plans. After plans have been put in place, we are also required to undertake reviews of existing plans within a set timescale. The pandemic had a significant impact. Assessments had to be completed over the telephone. This is not ideal as it hampered our efforts to form a working relationship with the family, but it did enable immediate needs to be identified and support to be provided or referrals made. During the year, we undertook 66 assessments of the need for support for young carers. This is less than the 87 undertaken the previous year. Of these, 59% resulted in the preparation of a care and support plan. This compares with 71% in 2019-20.
- 5.38 During the year, 117 care and support plans and support plans for young carers were due to be reviewed during the year, of which 97% were reviewed within statutory timescales. Due to pandemic restrictions, reviews were completed by telephone and enabled our staff to carry out welfare checks and to identify any support needed.

Resilient Families Service

- 5.39 Our Resilient Families Programme responds to people's needs by delivering support as early as possible after the need has been identified. Our Assessment Brokerage and Review Team undertakes assessments of families referred, creating an individual plan for each family. It also reviews the plan to ensure the work has been done. Working in partnership with other organisations, it aims to resolve problems without the need for statutory services.
- 5.40 Our Families Plus Team works with families where the children are at the edge of needing formal, statutory, care. Intensive support is provided to reduce the level of risk within the family. We have another specialist team which works with any family where the learning, physical or neuro-developmental needs of a child is impacting on family life. Our Parenting Support Team focuses on the development of early language and communication skills through play as well as helping families to develop their parenting skills to manage their children's needs in a productive and positive way.
- 5.41 When the pandemic hit, we reconfigured the service. Face to face contacts were restricted to families at highest risk. This was done using a risk assessment system based on needs; for example, families who needed continual support, those who needed some support and periodic contact to check how they were, which could be done virtually, and families for whom support could be suspended temporarily. The latter were earmarked for contact when

lockdown was lifted. Some families said they did not want virtual support and opted to wait for restrictions to be lifted. As the lockdown extended, families' needs escalated. We reviewed our risk assessments of families fortnightly. Where face to face contact was necessary, steps were taken to protect the health of families, children, and our staff.

- 5.42 Before the pandemic, two Community Hubs were operating in the county with several others in development. The Resilient Families Service had established a presence in the Community Hubs, trialing drop-in sessions and information for families to provide information advice and assistance. These were also trialed in local schools to highlight the service and what it can provide. This activity had to stop during the first lock down when face to face contact ceased and the operation of Community Hubs was suspended.
- 5.43 In response to the pandemic, seven Community Resilience Hubs were set up by the Council in March 2020 to co-ordinate support for the most vulnerable individuals and families including those required to shield during the pandemic. The Resilient Families Service and the Youth Engagement and Participation Service were key partners in setting up this new support. The Resilient Families Service modified its operations to link with the Hubs to help deliver food parcels, activity packs, and to help families with other needs, such as collecting prescriptions. The service also linked with community groups to provide families with iPads for home-schooling and Christmas presents. During 2020-21, our community resilience service worked through 3,962 cases and closed 3,865 (97.5%).
- 5.44 Plans to expand the number of venues used for community support were affected by the pandemic and led us to focus on maintaining contact with existing venues. For much of the year, community-based support was not possible. However, most families identified as having high needs received interventions online. Where possible, opportunities were provided for families in communities where they live after involvement with the service. The community support element of the service held 131 community-based sessions and 518 one to one support sessions. The total number of contacts with the team was 1,476, with 129 families accessing the Resilient Families' Service. Four young carers were also supported.

Case Study – Resilient Families Service

The service received a family referral from our Children's Services. The mother, who was isolated from family, was struggling to cope with her son, for whom she was the sole carer. Her mental health was affecting her emotional wellbeing and had led to self-harm. She was struggling with routines and setting boundaries for her son. An intervention worker was allocated to help the mother to build her parenting skills. Moving closer to her family was also a priority for her.

Help was given to develop the mother's confidence and self-esteem and to reduce her social isolation. She was referred to New Pathways, which supports people with mental health issues. She was also put in touch with the local Councillor for the area where she has support networks to support a potential move. The support worker secured 15 hours of pre-school education placement to give the mother a break, and worked with her to reduce anxieties and the trigger points (e.g. leaving the house, crowds) and how she could overcome them. Action was also taken, amongst other things, to provide health visitor support and to promote her son's development.

Over the weeks, the mother left her home more often, still feeling anxious on times but not as much as before. She is continuing to do the daily living tasks such as shopping and daily recreational activities with her son by going to the local park and for walks. She is very happy with the support received. She said that when she received a call from the intervention worker, she would smile, knowing that she was receiving appropriate help and was being listened to. She felt she had built enough resilience to end her involvement with the service but if needed, will re-engage.

Engaging with Children Looked After

- 5.45 The National Advocacy Framework ensures all children and young people have access to, and an “active offer” of, advocacy. This ensures they know when and why decisions are made about their care and how to get help in making sure professionals know their wishes and feelings and take account of them in decision making.
- 5.46 We are required to conduct a review meeting within 28 days of a child becoming looked after or after having an unplanned change of placement, and further reviews after 3 and 6 months. There are also requirements for children who receive a series of short breaks. Family plans, which are prepared by our Integrated Family Support Service are held three times per year.
- 5.47 The pandemic changed the way the advocacy service worked. Most advocacy “visits” were conducted virtually by telephone or video calls. This caused relatively little disruption to the older young people as this happened before Covid and many prefer this form of communication. It was more difficult for children under 8 years of age.
- 5.48 The advocacy provider Tros Gynnal reported that 61 “active offer” referrals were received during the year; 52 meetings took place, and 42 young people were helped with issues-based advocacy by an independent professional advocate. Most of the active offers (47) were to children on the child protection register. Every young person referred for an active offer was contacted within 48 hours. Just under 9 out of 10 (87%) were seen within 5 working days.
- 5.49 In all, 132 children and young people were referred for issues-based advocacy in 2020-21, 80 of whom were first time users of the service. 60 were children looked after and 56 were on the child protection register. Self-referral was most frequently the means of accessing the service (76) followed by social services (38) and Independent Reviewing Officers (12), who are appointed for every child in care.

Direct Payments

- 5.50 Direct payments give people an opportunity to have more choice, control and independence in managing their own care and support needs. Our role is to promote Direct Payments to help people to take up the option of managing their own arrangements. It doesn't work for everyone, but we have seen a steady growth in the number of people using this option over the last few years.
- 5.51 The following table shows the progress we have made in supporting the uptake of Direct Payments over the past five years:

Table 4: Take-up of Direct Payments, RCT, 2016-17 to 2020-21
(number)

Children's Services		Adult Services	
2016-17	127	2016-17	339
2017-18	134	2017-18	358
2018-19	154	2018-19	373
2019-20	172	2019-20	402
2020-21	167	2020-21	400

Source: Rhondda Cynon Taf County Borough Council

- 5.52 The table shows the take up of direct payments for both adults and children in 2020-21 was almost the same as that in the previous year. The percentage of children with a care and support plan on 31 March 2021 where needs are met via Direct Payment (167) is 10.4% of all children with a care and support plan. The percentage of adults with a care and support plan on 31 March 2021 where needs are met via Direct Payment (400) is 10.2%.
- 5.53 Adult Services' First Response Service has been fully operational throughout the pandemic, along with Adult Services' Single Point of Access (SPA) - our Information, Advice and Assistance Service. Maintaining and enhancing this core function prevented any disruption to this service for Rhondda Cynon Taf residents and provided a single point of contact for professionals.

What are our priorities for 2021-22?

- Continuously evaluate and develop our early help service
- Strengthen family support services that safely prevent entries to care
- Continue to embed the new carers conversation approach to ensure the support offered to unpaid carers to maintain their caring role and quality of life is personalised to individual need
- Continue to empower more people to commission their own care and support through greater promotion of direct payments
- Further enhance commissioning and delivery models to improve access to, and support engagement in, early intervention and prevention services for children and young people and families to reduce the demand for statutory services.

(b) Working with people and partners to protect and promote people's physical and mental health and emotional well-being

What did we plan to do in 2020-21?

5.54 In 2020-21, we said we would:

- Continue to support children into adulthood, focusing on reducing the figures for year 11, 12, and 13 school leavers not in education, employment, or training by reviewing the joint working arrangements between the Youth Engagement and Participation Service, schools, education data team, Careers Wales, and training providers.

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- Implement a new model of Community Mental Health Services

How far did we succeed and what difference did we make?

Supporting independent living

- 5.55 Funding from the Welsh Government enabled us to enhance our telephone-based “Lifeline” service by including a Mobile Responder service. It started in January 2020 just before the pandemic, using assistive technology to provide a 24-hour mobile response service to support people in their own homes by responding to non-medical emergencies. The service has a dedicated team of domiciliary care workers who have received specialist training to support non-injured fallers.
- 5.56 The new model is a whole system approach focused on promoting independence. The Mobile Responders assist in situations such as falls where no injury is reported, but where there is difficulty getting back up, or personal care emergencies, and for welfare checks. It means unnecessary calls to the Welsh Ambulance Service can be avoided as can unnecessary admission to hospital.
- 5.57 The service has provided a critical response to individuals who would otherwise have needed a paramedic or an informal carer to provide support. It has been invaluable in helping to keep people safe at home, particularly during the pandemic. It has also provided families with reassurance their loved ones will receive the right response in the event they trigger their Lifeline.
- 5.58 In 2020-21, the service undertook 5,528 visits after being called out. The team provided a variety of support ranging from assisting with non-injured falls and emergency personal care. They attended 97% of all calls within 1 hour of receiving the request. Their work meant 3,842 calls to emergency services were avoided, thus making a significant contribution to reducing the demand on those already-stretched services.

Case Study – Assistive Technology

Responders attended a property after the “Lifeline” alarm was triggered. There was no verbal response from Mrs A, who is over 80 and who lives alone. Upon arrival, responders found Mrs A, who is also blind, had fallen and was on the bedroom floor.

Responder staff carried out a risk assessment and established Mrs A had not sustained any injuries. They proceeded to help her from the floor using specialist equipment and ensured she was safe and well. Following their observations and discussions with Mrs A’s sister, the responders felt that, because Mrs A was so unsteady on her feet and risked further falls, more regular, ongoing, help was required to help her with performing daily tasks. A referral was made directly to the StayWell@Home2 out of hours access point as the call was completed on a Saturday. They arranged for the Council’s Support @home Rehabilitation service to help Mrs A with the essential tasks during her morning routine, such as washing, dressing and preparing breakfast.

Following this intervention, an ongoing service review was commissioned for Mrs A as it became apparent that she had not been managing for a long period of time. If this had not been addressed by the Mobile Responders with an onward referral, Mrs A may have hit a crisis point, which could have potentially resulted in an admission and a more costly social care intervention.

- 5.59 The service was disrupted by the pandemic, as the initial lockdown restrictions started to ease in July 2020, we were able to resume full implementation of our new “Lifeline+” assistive technology service. While the first response element of the service continued to operate flexibly

throughout the period and provided a level of resilience and reassurance to residents, our plans to introduce the proactive calling element had to be delayed. In early 2021, we started to undertake wellbeing calls to individuals who have previously received an enabling service and who had left the care of Adult Services. The telephone calls check a person's wellbeing and aims to detect any change in the individual's circumstances before a crisis develops. The project is initially working with small numbers and is being developed as a "proof of concept", linked to our use of Assistive Technology as part of regional transformation developments.

Preventing unnecessary admissions to hospital

5.60 Our "Stay well@ Home 2" service, which commenced in early 2020, is designed to meet people's needs at home. It helps to prevent admission to hospital wherever possible thus reducing the demands on the NHS.

5.61 The service continued during the pandemic although there was a marked change in the demand for support, so the service was reduced operationally to reflect this. Full operation, 7 days a week including out of hours, restarted at the beginning of July. We worked with our partners to develop and implement winter plans. The continuing pandemic meant the service was an important means of reducing unnecessary attendance to hospital by helping people to remain safely at home. This helped reduce demand on the already stretched Royal Glamorgan Hospital and on the Welsh Ambulance Service.

5.62 After assessment the services which might be offered include:

- Domiciliary care.
- Occupational therapy assessments, which can result in provision of equipment, information and advice, and a programme of rehabilitation.
- RCT Vision Products which can deliver equipment, move furniture, or fit a "keysafe" to enable services to access an individual's home.
- Temporary accommodation by way of "Step-up beds" when 24-hour care is required to avoid an admission hospital.
- Home nursing, which can support an individual's health needs in their home.
- The health board's "Your Medication" team which assess pharmaceutical needs.
- Community services such as Age Connect and Care and Repair to support services to be able to keep someone safe at home.

5.63 The model has, via a Single Point of Access, extended the access to services by GPs, District Nurses, and the Welsh Ambulance Service from 5 days a week to 7 days a week, with extended opening hours to 8.00 p.m. The ability to access assessment and rapid response preventative and rehabilitative services helps avoid any unnecessary conveyancing or admissions to hospitals.

Case study – Stay well@Home2 service

The Single Point of Access received a telephone call from a GP asking for a package of support for a 78-year-old who had a urinary tract infection. The person was very unwell and unable to get up and move themselves. The GP was considering admitting the person to hospital. A privately arranged care provider was already involved for the purpose of giving medication. The GP prescribed antibiotics, which it was agreed the care provider would ensure the person would take as required. Within two and half hours of the beginning of the initial phone call with the GP:

- *The necessary assessments were conducted with the GP and with family involvement.*
- *An occupational therapist visited the house. Equipment was provided to supplement the care package and to help to support the person to move about. A mobile commode was also provided.*

[Click here to enter text.](#)

- *A package of care and support was arranged for four times a day as requested, which began the same evening.*
- *Vision Products visited the house the same evening to bring the person's bed downstairs.*

The immediate outcome was the person avoided the need to be admitted hospital. At the two-week review, they were able to move around with only the use of a stick and the care package was reduced.

- 5.64 The target for assessing the situation and agreeing a response with the referring professional is within 4 hours from being notified by the Single Point of Access. This year, 94% of referrals achieved the target. Referrals to third sector community services such as Age Connect and Care and Repair are also made 'in hours' to help statutory agencies to be able to keep someone at home. Feedback from professionals and people who have been supported by a service has been positive. 98% of professionals rated the service as "Good" or "Excellent". 90% of people who were supported and 92% of carers also rated the service received as "Good" or "Excellent".
- 5.65 There has been additional pressure on adult services from looking after more poorly residents with complex needs at home to avoid a hospital admission. Pressures have also been experienced because of people being discharged earlier from hospital who would, pre-pandemic, have remained in hospital for a longer treatment time or recovery period. This did result in some waiting lists increasing during the year, although towards the end of the period covered by this report, they did start to reduce. Assessments and delivering services also require more time due to the requirements of PPE and risk assessments. We have seen "urgent" orders for aids and equipment more than double over the past year, and requests for equipment which reflect more complex needs on the part of those who need care and support. We have prioritised those who are most in need.

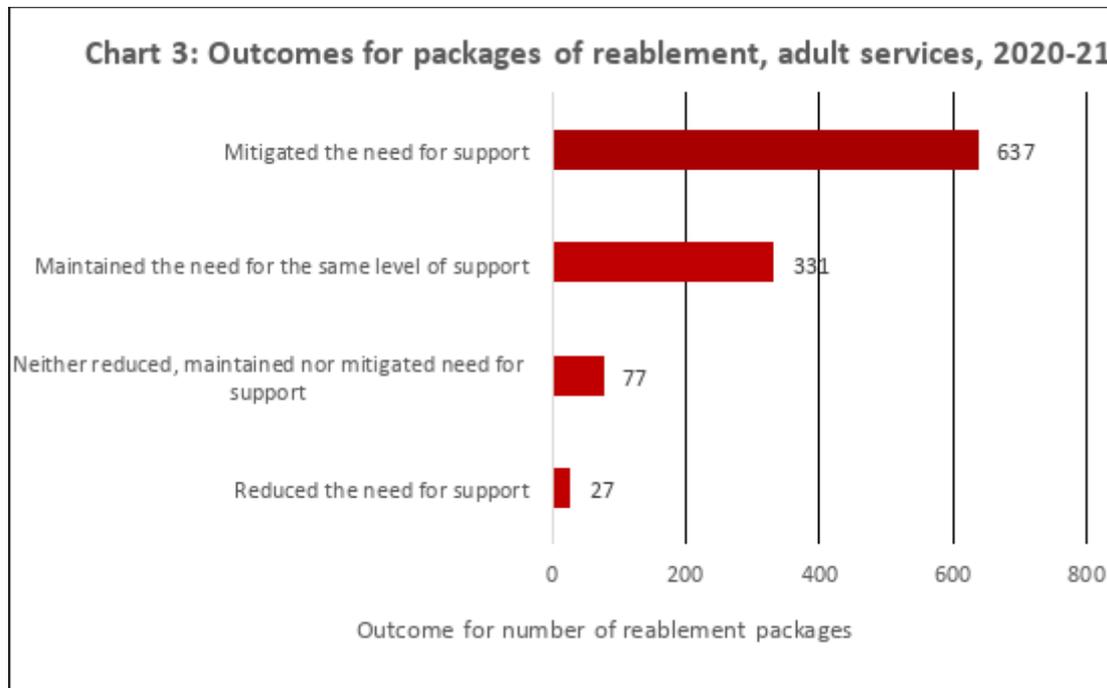
Delayed transfers of care

- 5.66 We have continued to work closely with the Cwm Taf Morgannwg University Health Board to reduce delays in people being discharged from hospital. It remains one of our priorities.
- 5.67 At the start of the period covered by this report, the Cwm Taf Morgannwg University Health Board asked the Council to create additional temporary step-down recovery beds to support an anticipated surge in patients admitted to hospitals and who then need to be discharged from hospital. In response, we used our Danymynydd home in Porth and our Bronllwyn home in Gelli to create dedicated additional bed capacity. Both these homes had the smallest numbers of residents, which therefore minimised the impact on individuals. After discussion with their families and carers, all residents were moved safely to other homes.
- 5.68 As it turned out, the anticipated surge in demand for additional bed capacity did not materialise and only a small number of admissions were made to Danymynydd and Bronllwyn at the height of the pandemic. Considering this, and after consultation with residents and their families, and in their best interests, the temporary residents living there were transferred to other residential care homes. This enabled us to utilise our limited resources more effectively, providing additional support to our other residential care homes.
- 5.69 The demands for hospital discharge continues to be challenging but since January this year, had stabilised. A number of outbreaks of Covid-19 in care homes had limited placement opportunities, which meant some discharges have taken longer to complete.

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Reablement

5.70 Reablement helps people to remain living in their home safely and independently by providing intermediate care and rehabilitation services, specialist equipment and aids and, if necessary, adaptations to the home. It is available to anyone aged 18 and over and is free of charge up to six weeks. If support is needed longer, charges are made in accordance with our policy on charging for non-residential social servicesⁱⁱ.



Source: Rhondda Cynon Taf County Borough Council

5.71 Our Reablement Service completed packages of support for 1,072 people over the course of the year, which is almost the same as the 1,058 assisted the previous year. The outcomes of the packages of packages of reablement support completed during the year are highlighted in the above chart.

5.72 During the year, we reviewed and redesign our Support @Home Service to develop a new intake model to support people to return to independence as soon as is appropriate and be less dependent on commissioned services. This new service will be introduced on a phased basis in 2021/22.

Community Mental Health Services

5.73 During year we continued to work in partnership with Health to jointly provide Community Mental Health Services, although our work to implement a new model has been delayed due to the pandemic. The Council's Independent Living Service was re-prioritised to offer support to the Community Mental Health Teams and provide additional support and monitoring for people during Covid-19. During the pandemic we continued to support the development of the Dewi Sant Hospital site to offer joined up Community Mental Health Services and the Taf Community Mental Health Team will move there to in June 2021.

5.74 We also reviewed and launched a new dedicated hospital Advanced Mental Health Practitioner (AMHP) provision across our CMHT Service and combined rotas to offer more sustainability for community based support across Rhondda and Taf.

What are our priorities for 2021-22?

- Develop our therapeutic services for children who are looked after
- The community well-being and resilience service will continue to proactively support the emotional wellbeing and mental health of children, young people, families and staff as a result of the pandemic
- Continue to invest in reablement and intermediate care services to enable recovery and independence or prevent escalation of need increasing
- Continue to work with Health to complete review and redesign Community mental health services to provide responsive access and effective mental health support.
- Build on the learning over the Covid-19 pandemic to maximise the continued use of new technology and ensure services are accessible and available to people and their families

(c) Taking steps to protect and safeguard people from abuse, neglect or harm

What did we plan to do in 2020-21?

5.75 In 2020-21, we said we would:

- Implement the Cwm Taf Morgannwg Safeguarding Work Plan.
- Continue to work towards reducing the number of children looked after, reducing numbers as per Welsh Governments reduction initiative.
- Promote engagement with children looked after and partners agencies to ensure co-production and that the voice of children and young people is heard.
- The implementation of Liberty Protection Safeguards.

How far did we succeed and what difference did we make?

5.76 Safeguarding people and reducing the chances of them encountering harm takes a variety of forms. Most of our statutory work in social care is about ensuring that we safeguard the most at risk, children and older people in particular. In addition to those areas which we have detailed in this section of the report we have also been engaged in delivering improvements where people face other forms of harm.

5.77 Prior to the pandemic Rhondda Cynon Taf along with other communities faced a period of heavy rainfall and flooding, leading to some families seeing their homes unfit for habitation and many experienced a risk to their wellbeing.

5.78 The Council's Community Development Team, as part of its work under the Integrated Care Fund, is developing Community Rest Places. This is an emergency response for each electoral ward identifying community leaders and accessible community venues for potential emergency rest places in event of floods or other emergencies for refreshments, access to advice and possible overnight stays should home not be habitable. Once finalised this will be used to produce ward level emergency response plans for 2021-22.

Safeguarding

5.79 Where information gathered from a referral of a child or young person or from an assessment results in a social worker suspecting the child is suffering or likely to suffer significant harm, a strategy discussion meeting is held. The discussion leads to a decision whether to initiate enquiries under Section 47 of the Children Act 1989. These are commonly known as “Section 47 enquiries” and local authority social workers have a duty to lead them, supported by the police, health professionals, teachers and other relevant professionals as part of a multi-agency approach. The enquiries decide whether action is necessary to safeguard the child and to promote their welfare, and what type of action.

5.80 In 2020-21, a total of 2,134 initial strategy meetings for children were concluded. The number of strategy meetings held during the year which progressed to Section 47 enquiries was 1,517, and 616 of the enquiries completed during the year progressed to an initial Child Protection Conference.

5.81 During the year, Children’s Services undertook the following audits:

- Case audit in our Community Wellbeing and Resilience Service on rates of contact with young people and families, quality of case recordings and compliance with processes, and the step-up and down processes.
- Intensive Intervention Service which considered samples of cases in which children are subject to Section 76 of the Social Services and Wellbeing (Wales) Act 2014, and a sample of contacts received via the Multi-Agency Safeguarding Hub and our Information, Advice and Assistance Service to understand the increase in proportion of referrals where there was no further action.
- Review of Revocation of Placement Orders
- Case audit in our Edge of Care services on rates of contact with children, young people and families, evidence of recognition of risk, planning, safeguarding action, and evidence that additional support/resources that families/ children might require are being identified and sourced.
- Case audit in our Reviewing Service on observation of staff practice in Initial and Review Conferences and Children Looked After Reviews
- Quality of Care reports have been provided by our Fostering Service in relation to Fostering and Children’s Homes and there has been an audit of placement ends and placement stability between April 2020 and mid-February 2021.
- Case audit in our Youth Offending Service on service user engagement and self-evaluation processes and a Transition Policy which includes a trauma informed approach.
- Case audit in our Emergency Duty Team Service on child protection medicals, strategy meetings and related issues during out of normal working hours.

In addition to the above, several individual audits of children’s cases were undertaken and the organisation that reviewed our children looked after strategy included a deep dive into 70 cases. Supervision audits were also undertaken to ensure staff support. The team has also contributed to Safeguarding Board Child Practice Reviews and multi-agency audits, such as the management of safeguarding cases involving domestic abuse, and multi-agency review of data identifying an increase in re-registration rate.

Child protection

- 5.82 During the year, 592 children were added to the Child Protection Register, which is marginally less (-1%) than the 598 added during 2019-20. In the same period, 629 children were removed from the register.
- 5.83 On 31 March 2021, 426 children in the area were on the Child Protection Register. This compares to 464 a year earlier; a decrease of 8%. This continued a downward trend from 498 in March 2019 and 502 in March 2018.
- 5.84 Children who were placed on the register during the year for reasons of neglect reduced from 198 in 2019-20 to 188 this year. Those on the register because of emotional abuse increased from 296 in 2020 to 321 this year.

Supporting children looked after

- 5.85 The total number of children being looked after at 31 March 2021 was 695, a 3% decrease on the total of 717 who were being looked after a year earlier.
- 5.86 Over the course of the year, 148 children became looked after, a 17% decrease on the previous year (179 in 2019-20).
- 5.87 The rate in children looked after per 10,000 population has fallen from 143.1 to 138.7.
- 5.88 During the year, we commissioned the Institute of Public Care to undertake an independent evaluation of our strategy for looked after children. The study work, which reflects our approach to continuous improvement, focused on the way our existing approach was:
- Continuing to improve the edge of care support for families to safely prevent children from needing to become looked after.
 - Safely helping children to leave statutory care to go home or into a Special Guardianship Order / adoptive / kinship placement and to support them to thrive there.
- 5.89 The report made the following recommendations:
- Further exploration, development, and co-production of an evidence-based model of social work practice - a clear strength based and outcome focused model of intervention which is consistent across the service and underpins the "RCT way of working".
 - Review and development of pre-birth services, which can prevent separation at or soon after birth.
 - Review and overhaul of the support offer to parents who have had children removed from their care and/or are care experienced.
 - Exploration and further development of the support offer to children and young people at the edge of care and those returning home, including work towards a more integrated approach with partner agencies.
 - Development of a coherent reunification strategy and approach.
 - Strengthened arrangements for supporting kinship and Special Guardianship Order carers.

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5.90 We will take forward the findings of report, in the 2021-22 financial year.

Fostering

5.91 Recruiting and retaining foster carers is a challenge and there is a significant financial impact in having to use independent foster agencies. There can also be a risk of instability for the child, who may have to move out of their local area, change schools, friendship groups and support networks. The lack of local authority foster carers can lead to a lack of suitable placements for children who may have a range of complex needs, resulting in poor placement matching and instability. A dedicated recruitment telephone line, in addition to a new regional fostering website and live web-chat function helps potential applicants.

During the year we registered 11 new mainstream RCT foster carers, a much smaller number than what is required but an impressive 45% increase on the prior year's performance.

5.92 Our new training and support package became operational in April 2020, providing a development route for foster carers to increase their skills and knowledge. We have Pioneer Foster Carers who offer peer support and advice to approved foster carers and assist with the skills development of prospective carers. We also have a therapeutic training programme for all foster carers called "Confidence in Care".

Adoption

5.93 During the year, 20 adoption placements were made. This is less than the figure of 27 recorded the previous year, and the figures in the previous two years of 45 and 31, respectively.

Adult Safeguarding

5.94 During the year, the Adult Safeguarding Team received 4,714 reports of an adult suspected of being at risk of abuse or neglect. Of these, 2,999 (63.6%) were received directly from the police. The total number of reports received was approximately 7% higher than the 4,378 reports received the previous year. This reversed slightly the declining trend that had been seen in 2018-19 (4,699 reports) and 2017-18 (5,060 reports).

5.95 Of the 4,714 reports 49% were suspected cases of neglect and 28% emotional or psychological abuse.

5.96 Adult protection enquiries were made in 574 cases (12%). In nearly 9 out of ten cases (89%), the enquiry was completed within 7 days. This is a slight improvement on the 2019-20 figure of 84.7%. In 204 cases, it was determined that additional action needed to be taken.

5.97 In Adult Services, a decision was made with our safeguarding partners to suspend routine audit work during the pandemic. However, one audit was undertaken during the year - the "Effectiveness of Adult Safeguarding During Covid", which was a retrospective audit of 30 cases from the first 10 months of the pandemic, with positive outcomes.

Liberty protection safeguards

5.98 We work in partnership with Merthyr Tydfil County Borough Council on matters relating to the deprivation of people's liberty and the associated safeguards. Despite the challenges of the pandemic, the need for virtual assessments, we achieved a greater number of assessments this year than the previous one. However, a waiting list is still in operation, albeit reduced in length. We have allocated additional funding to clear outstanding assessments in readiness for the implementation of the new Liberty Protection Safeguards. These will replace the current Deprivation of Liberty Safeguards in England and Wales. The date for implementation, which was October 2021, has been put back to April 2022.

What are our priorities for 2021-22?

- Demonstrate progress in implementing the recommendations of the evaluation of our strategy for supporting children looked after.
- Implement the Cwm Taf Morgannwg Safeguarding Annual Plan, specifically to deliver against the three identified strategic priorities:
 - i. Ensure an effective response to the impact of the Covid-19 pandemic – this concerns our approach to multi agency working; completing those task that were delayed due to the pandemic; re-engaging with vulnerable isolated people; learning from the experiences at our care homes and the well-being of our workforce and responding to the expected increase in demand.
 - ii. Strengthening safeguarding links to other partnerships in the region – this recognises safeguarding is everyone’s business and working arrangements need to be strengthened with the Community Safety partnership and Together for Mental Health partnerships in particular
 - iii. An improved approach to public protection concerns – very much our core activity and identifies several key areas for service development – exploitation, modern slavery and trafficking and contextual safeguarding.
- Work with Partners to deliver new Liberty Protection Safeguards from April 2022

(d) Encouraging and supporting people to learn, develop and participate in society

What did we plan to do in 2020-21?

5.99 We said we would:

- Present options for the remodeling of learning disability day services
- Further build a presence of the Resilient Families Service and the Children and Young People Service within the Community Hubs to raise awareness of services on offer and deliver support activities within localities.

How far did we succeed and what difference did we make?

Learning Disability Day Services

5.100 We recognise the vital role day services play in the lives of people with learning disabilities, their families and their carers. We were able to provide some day services throughout the pandemic and successfully introduced outreach services for older people as an alternative means of delivery. Services and support were delivered based on assessed need and risk. As we end the reporting year, our offer is still reduced compared to pre-covid provision and this will continue until existing guidance changes or more service provision is made available. To counter this, we continue to ensure that where required, there is alternative care and support at home for people affected by the reduced service.

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- 5.101 During the pandemic, we launched our Learning Disability Transformation project, which will help improve what we offer to people with a learning disability. At the heart of its development is working with individuals and the development of a citizen's panel. This will inform the implementation of the project as will what we do to engage with people who have a learning disability, their parents and their carers about the experience with advocacy and support during the pandemic. It will also cover Direct Payments and our current day service offer. We also have ongoing training and development in hand which is looking into alternative ways of working for our staff, focusing on building on the strengths of the people we support.
- 5.102 The reform of our day services will be considered by the Council's Cabinet in July 2021. This will continue our engagement on a new service delivery model.

Community Hubs

- 5.103 Community Hubs provide a range of services in one or more closely located buildings in priority neighbourhoods. Bringing services together provides a better service and create economies of scale for staffing and building costs, which makes them more sustainable. The Hubs use the neighbourhood network of third sector providers to enhance the range of support services. We established a Resilient Families Service presence in the Community Hubs, as we have outlined elsewhere in this report. Our activities had to stop during the first lock down when face to face contact ceased and the operation of Community Hubs was suspended.
- 5.104 In response to the pandemic, at the end of March 2020, seven Community resilience Hubs were set up across the county to co-ordinate support for the most vulnerable individuals and families. Excellent links were established with Adult Services, including the development of new pathways to provide residents with a coordinated professional service. This included low level, but essential, support such as medication collection, food deliveries, dog walking, welfare calls etc., providing a critical lifeline for Shielders, in particular.
- 5.105 Whilst the Community Resilience Hubs was managed outside of Adult Services a joined up approach was essential as we recognised there were some individuals who were shielding and would require more support as a short-term preventative measure. This second group were identified as:
- not requiring a longer-term care and support plan, but required someone to safely cross the threshold
 - had for various reasons lost their usual support mechanisms and couldn't manage with the main volunteer service
 - had become temporarily unwell or unable to support themselves
- 5.106 For those residents an "enhanced" volunteer service was developed on a temporary basis managed by Adult Services to support those individuals and prevent the need for longer term services. Using redeployed staff, Adult Services coordinated this support until the pandemic pressures eased, or other support was identified.

Community-based support

- 5.107 We have three Community Co-ordinators operating in the Cynon, Taff Ely, and Rhondda parts of the County. The posts are funded by the Welsh Government's Integrated Care Fund. Another co-ordinator work with primary care practices across the whole area. The coordinators engage with people in communities and provide information, advice and signpost to local community groups, activities, and services, building strong local networks. As such, they complement our development of Community Hubs.

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5.108 In total during 2020-21, Community Co-ordinators responded to direct requests from 3,956 residents and co-ordinated the following responses over the year:

- 2,829 were allocated to a member of Council staff.
- 282 were allocated to a Community Resilience Volunteer.
- 343 were referred to partner organisations.

5.109 The impact of this has been to reduce the need for the intervention of statutory services, reducing the risk of the NHS facing additional pressures and providing information and support to vulnerable residents during the pandemic.

What are our priorities for 2021-22?

- Children's Services will review its participation strategy, making sure that service user's experiences of the service are heard and that they help shape future developments
- The looked after education service will commence implementation of the Additional Learning Needs Act reforms
- Children's Services will review its participation strategy, making sure that service user's experiences of the service are heard and that they help shape future developments
- Subject to Cabinet approval, Adult Services will continue to engage with people with a learning disability, their families and carers, staff and partners to co-produce a new day opportunities strategy.
- Work with partners and specialist organisations to specifically target and engage with groups of clients who have a disability or learning disability to increase referrals into employment support.

e) Supporting people to safely develop and maintain healthy domestic, family and personal relationships

What did we plan to do in 2020-21?

5.110 We said we would:

- Further build a presence of all Community Well-being and Resilience services within the Community Hubs to raise awareness of service on offer for and deliver support to activities within localities.
- Review commissioning activities considering the further developments around the Children and Communities Grant and funding flexibilities/alignment.
- Secure ministerial approval for the Early Years transformation proposals and the implementation of a universal needs-based approach for Early Years services across RCT.

How far did we succeed and what difference did we make?

Building a presence in Community Hubs

5.111 Our work on Community Hubs and steps we took to manage the impact of Covid on their operation and on the people who use them was covered in previous sections of the report.

Reviewing commissioning

- 5.112 The pandemic was a significant influence on approach to review commissioning. Our priority was to ensure financial stability for third sector providers during the pandemic. Therefore, we decided to postpone action to finalise the 2020-21 contracts. Instead, we rolled over 2019-20 contracts for the first half of the year. This gave us the opportunity to work alongside our existing providers to develop innovative and bespoke joint service-delivery models, which were responsive to the emerging needs of families because of lockdown. It also gave us time to assess what was required and what was possible for the remainder of the financial year, and to review and finalise 2020-21 contracts in time for implementation this period.
- 5.113 This year, we rationalised contracts for Women's Aid and Citizen's Advice Bureau where both organisations had contracts with two different funding streams: the Children and Communities Grant and the Housing Support Grant. For the Citizen's Advice Bureau, we extended the action to encompass several other contracts it had with a number of different service areas across the Council. The result is a single contractual arrangement with the Council.
- 5.114 We also moved to an outcomes-based commissioning model, re-organising and refocusing our staffing and capacity within the Commissioning Team. The team, now renamed the Funding Flexibilities Team forms part of the broader Programme Alignment Team. Because all seven of the programmes within the Children and Communities Grant sit in one Directorate, which is supported by a single Commissioning Team and a central finance team, our administrative functions are already lean. We have made further efficiencies in terms of reducing the administrative burden associated with attaching specific staff posts to individual grants for reporting purposes and by utilising joint commissioning across programmes to reduce the number of individual contracts which require monitoring. During the year, the Funding Flexibilities Team played a pivotal role in ensuring that developments and changes to grant funding arrangements were communicated to stakeholders.

Transforming Early Years support

- 5.115 Ministerial approval for piloting the transformation of the Early Years provision was received at the start of the financial year. The pilot, which spans the Cwm Taf Morgannwg area, includes the reorganisation of Health Visiting services in the county. The Wellbeing and Resilience Health Programme was launched in October 2020. It aims to provide enhanced health visiting services across the county. Underpinning the programme is the Resilient Families Service as the single integrated delivery model for family support in the area.
- 5.116 After a training needs analysis in autumn 2020, 49 Health visitors and 20 nursery nurses were trained for the Resilience and Wellbeing programme. Between January and March this year. New contracts have been issued for Health Visiting and Resilient Families Service Health specialists including Specialist Health Visitors, Community Nursery Nurses, Midwives, Speech and Language Therapist and Occupational Therapist. This will reinforce partnership working arrangements. The new approach integrates work across Council services, Health and third sector services.
- 5.117 Inevitably, the pandemic had a significant impact on the delivery of the programme due to reduced staff numbers, the need for some staff to be redeployed, and minimal opportunities for face-to-face contacts.
- 5.118 In the period 1 October 2020 to 31 March 2021:

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- 487 children aged 20 months received an assessment; 4 were referred to specialist services for further assessment and support, i.e. paediatrician, neurodevelopmental team, educational psychology, enhanced play team.
- 137 antenatal contacts were made during this period.
- 460 children were referred to the Resilient Families Service: 144 for specific early intervention and assessment, and 316 for family support.
- Of the 316 referred for family support, 138 (43%) were identified by as requiring universal health visitor support, 157 (50%) for enhanced support and 21 (7%) for intensive support.

5.119 The number of referrals was lower than anticipated due to restrictions on face-to-face visits because of the pandemic. The health visiting service restarted face to face visits in mid-April, and an increase in referrals to RFS is anticipated over the next year.

What are our priorities for 2021-22?

- Work alongside partners to develop our continuing transformation strategy in relation to Early years Provision
- To continue to improve the resilience of residents and communities by working in partnership to strengthen the Neighbourhood Networks model, ensuring residents have the opportunity to influence decisions, activities and services in their communities which promote health and well-being.

(f) Working with and supporting people to achieve greater economic well-being, have a social life and live in suitable accommodation that meets their needs

What did we say we would do in 2020-21?

5.120 We said we would:

- Implement the Trauma Recovery Model in internal residential and foster care services.
- Work with providers to develop placement sufficiency in line with our Placement Commissioning Strategy/ Market Position Statement.
- Further improve the capacity and performance of independent domiciliary care providers to put in place sustainable local solutions.

How far did we succeed and what difference did we make?

Implementing the Trauma Recovery Model

5.121 The Trauma Recovery Model is an evidence based structured approach to help professionals care for traumatised young people and vulnerable adults and support them towards recovery. It is particularly useful to help those young people who have complex needs, including children who have been exposed to multiple adverse childhood experiences.

5.122 Our work to embed this approach commenced in early 2020 with a series of workshops for all staff in our residential children's homes and a selection of social workers across front-line

services and fostering. Our Educational Psychology team and Therapeutic Families Team for children who are looked after also attended the training. They also undertook specific training on the enhanced case management approach. Another event was planned but was unable to take place due to the pandemic. However, in the interim, our providers offered virtual consultation sessions to staff to help work to embed the model to continue across our children's services provision. The approach is now our preferred model of practice within our three children's homes. Its implementation in our fostering service has been delayed because of Covid but will be progressed as soon as circumstances allow.

Develop placement sufficiency

- 5.123 We developed a placement commissioning strategy in late 2019 and published a Market Position statement this year. The strategy sets priorities for development in our placement service for children looked after and what we commission from external providers to 2022.
- 5.124 It draws together the different strands of placement commissioning. This creates a clear vision which underpins our approach to commissioning and thus ensures our corporate planning is suitably aligned. Our priority areas are to:
- Recruit more foster carers able to meet the more complex needs of children and young people.
 - Provide more in-house residential placements in the local area to meet need.
 - Provide better support packages to carers to encourage them to apply for Special Guardianship Orders rather than be kinship foster carers.
 - Provide a range of accommodation for 16+ and care leavers.
 - Improve our commissioning processes for external placements, including integrated commissioning with key partners.
 - Develop a reunification model to return young people safely to their family members.
- 5.125 Our goal is to develop placement sufficiency helps to address the Welsh Government's concerns about placements being made by local authorities out of their own county. While there will occasionally be a need for a placement to be made outside Rhondda Cynon Taf, this will be based on meeting the specific needs of the child or young person.
- 5.126 Our Carn Ingli children's residential home in Aberdare is an example of how we are avoiding the need for children to be placed outside the county. It was developed in 2019 with additional financial support from the Welsh Government. It provides transitional accommodation for children whose needs are best met through a specified model of care. The home has adopted a trauma informed approach to offer positive interventions and stability to the young people who are accommodated there. Placements can be at the point of crisis intervention or where breakdowns in occur in other placements. Due to Covid, the home provided fewer placements than project this year. That said, for four of the children placed there during the year, it helped avoid the alternatives, which was placement outside Wales or no other placement identified or available to meet their needs.
- 5.127 During the year, we carried out engagement meetings with providers to discuss our placement commissioning strategy and market position statement. With Covid there were minimal opportunities to meet. We now have a programme of virtual engagement events planned for the beginning of the 2021-22 year as part of our efforts to increase our level of engagement with fostering and residential providers across the County to achieve our goal.

Supporting independent domiciliary care providers

5.128 The pandemic caused us to change our plans to address this priority during the year. While our intention was to work with independent sector domiciliary care providers to further improve capacity and performance by putting in place sustainable local solutions, we instead focused on providing support – advice, guidance and financial – to help them manage through the pandemic and to cope with its impact.

Helping children with complex needs

5.129 A concept paper was developed in summer 2020 to consider the region's needs for residential accommodation for children looked after who have more complex emotional needs. These young people do not meet the thresholds for interventions by Child and Adolescent Mental Health Services ("CAMHS") but do require more intensive and specialist interventions in psychologically informed environments to support their wellbeing. Capital funding of £55,000 has been made available within the region to support a feasibility study to explore the viability of such a service.

5.130 At the time of writing this report, we and our regional partners are awaiting approval of a bid for funding to support the development of a model of safe accommodation for children and young people with the most complex emotional needs. This responds to the work of the Children's Commissioner for Wales and the 'No Wrong Door' Report, which was published in July last year.

5.131 We have also been working with our regional partners to commission a third sector provider to deliver therapeutic interventions for children looked after. The support is designed to help children who are in foster care with consistent placement breakdown and children and young people who have plans for adoption. The service has been tendered and it is hoped a contractor will be appointed with a view to services commencing in summer 2021.

Providing better accommodation options for older people

5.132 Over recent years, we have been implementing a £50 million investment plan to develop 300 Extra Care places across RCT as a modern form of housing which can better meet the support needs of residents as they get older.

5.133 In December 2020, after an extensive consultation exercise, a decision was made on the future of the Council's residential care homes. The seven care homes proposed to stay open would be refocused on complex needs (including dementia), residential reablement and respite care. These would be joined by two more homes, Garth Olwg in Church Village and Ystradfechan in Treorchy. While originally earmarked for closure, as a result of feedback from the public consultation, they would also remain open and be refocused on complex needs (including dementia), residential reablement and respite care.

5.134 The proposal to decommission the residential care home at Danymynydd, Porth, and to redevelop the site to provide for a new 60-bed housing scheme was also agreed by the Council. This is in line with our commitment to modernising accommodation options for older people by using the Extra Care housing approach. Funding for the redevelopment was agreed by the Council's Cabinet in March 2021. Demolition of the home is planned for May this year. Subject to planning approval, construction is due to start in the Autumn.

5.135 In December 2020, there were 37 residential care homes in the County, of which 11 were operated by the Council. The number of homes increased by one since the previous year when the Fairfields Care Home with 19 residential and residential dementia beds opened in June in Trealaw. The total number of homes will now reduce to 35 because of the number of Council-run homes reducing from eleven to nine.

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- 5.136 We have made considerable progress on developing new models of accommodation for older people, to meet rising demand and people's expectations. It responds to the Cwm Taf Joint Commissioning Statement for Older People's Services (2015-2025), which helped identify what accommodation and support people will need in future. We are using Extra Care to rebalance our accommodation provision from institutional residential care.
- 5.137 Our third Extra Care accommodation, the 60 apartment Cwrt yr Orsaf facility in Pontypridd, is due to be completed in summer 2021. This follows our first development in Talbot Green in 2016 and second in Aberaman which opened in May 2020. In our new venture, we have worked closely with Linc Cymru, our partner on the project, and the contractor. Despite the significant challenges posed by the pandemic, solid progress has been made and it is still scheduled to open in summer this year.
- 5.138 Due to planning restrictions on the Council's Bronwydd site in Porth, we explored alternative locations for a 60-apartment facility. As mentioned above, the decision was made this year to decommission the residential care home at Danymynydd, Porth and to redevelop the site for this purpose.
- 5.139 For our development in Treorchy, options continue to be considered with our partners Linc Cymru and the Cwm Taf University Health Board. Progress has been delayed by the pandemic and our need to prioritise progress on the above schemes. Our discussions with partners on the development discussions will restart in the coming year. The same will happen for our planned development in Mountain Ash, where our initial development options did not prove to be feasible.

Learning disabilities

- 5.140 We have undertaken further work to develop supported housing schemes to help people with learning disabilities to live more independently in their communities. A new development in Treorchy was completed in Autumn 2020 and residents moved in from January 2021 after telecare equipment had been installed.
- 5.141 The development of supported housing in Mountain Ash continued to make good progress through the pandemic and is scheduled to complete in late spring 2021. In preparation for this, in January this year, we started to make assessments of new tenants with the aim of people moving in over the Summer.
- 5.142 As part of our strategy to remodel our residential care homes, which is highlighted earlier in this report, we have decommissioned our Bronllwyn care home in Gelli. We will develop the site to provide additional specialist accommodation with care to support people with learning disabilities in adulthood and older age.

What are our priorities for 2021-22?

- Develop close to home accommodation services for looked after young people.
- Continue to work with domiciliary care providers to restart development of an outcomes based domiciliary care approach and to ensure there is sufficient provision available at the right level to meet demand and deliver good quality home care
- Continue to work with Linc Cymru to deliver the Council's extra care housing development programme and enable more people to live independently in their own home

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- Work with Housing Strategy to continue to develop a range of modern fit for purpose supported housing options for people that meets their assessed needs and is supported, where possible, by access to community facilities

6. How we do what we do

Our workforce and how we support their professional roles

- 6.1 The past 12 months has been like no other. We have always said that our workforce is our most important asset without whom high-quality services could not be delivered. Their resilience and dedication at a time of great uncertainty and challenge has been incredible, We continue to need an adequate workforce of well-trained, experienced staff with the right skills and approach needed to work with citizens and effectively in partnership with other organisations, and this challenge will remain with us for some time and especially in the context of how we continue to respond to the pandemic.
- 6.2 In last year's report we said we would:
- Develop a recruitment and retention strategy specifically for Children Services to ensure sufficiency of skilled staff.
 - Development of overarching workforce development strategy for Adult Services.
 - Reduce sickness/absence rates.
- 6.3 Recruitment and retention of qualified social workers remains a significant challenge for Children's Services, which is further exacerbated by shortages in the labour market of qualified and experienced social work practitioners. The focus on the pandemic means that this work remains a priority as we plan the next 12 months.
- 6.4 At the time of writing this report, the Children's Service's Intensive Intervention service had approximately 30 Social Work/Senior Practitioner vacancies. This equates to a vacancy rate of 29%. The vacancy rate has remained consistently high at around 30% for a time, which places the workforce under sustained pressure.
- 6.5 Despite the pressure of vacancies there has been some excellent performance over the year responding to the pandemic. Inevitably, there have been unintended consequences, which includes national issues with recruitment and retention at the same time as additional demands falling on services.
- 6.6 A review of pay for social workers is underway, and we have maintained arrangements for the payment of an interim market supplement. We plan to consult on the outcome of the review in June 2021. A wider review of workforce development is planned later in the year after implementation of the pay review.
- 6.7 The increasing levels of activity and demand being managed by our services and the anticipated further increase in demand as we emerge from the Covid 19 pandemic; will make the financial pressure on the service unsustainable and will cause a considerable pressure on the financial position of the authority.
- 6.8 The Council's five-year Workforce Planⁱⁱⁱ which is in place until 2022 is the framework for our approach and drives the improvements we are seeking in our workforce across adults and children's social services. It has five aims:
- Developing a flexible and agile workforce that shares organisational knowledge.
 - Recruiting and retaining the best talent to create a diverse workforce.
 - Leadership and management development.
 - Enabling a high performing, engaged, and committed workforce.
 - Supporting the health and well-being of our workforce to maximise attendance.

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- 6.9 As part of the development of the Council's budget for 2021-22 it was agreed that £50,000 would be allocated for Well-being support programmes to be developed and extended, which will support those working in social care alongside their colleagues across the organisation.
- 6.10 Our staff are without doubt our most valued asset – they are the front face of the Council and represent and uphold our key values as public servants. We recognise the challenges faced by staff and have ensured that we continue to support their welfare and wellbeing. The additional resource proposed will enable us to expand upon the current support programmes we have in place and further develop these programmes across the workforce.
- 6.11 A staff well-being week was held in December 2020, which included a programme of events designed to give staff the opportunity to focus on their physical and emotional wellbeing given the impact of the Pandemic. Feedback is being considered as part of the Workforce Strategy to maintain the focus on the wellbeing of staff during the pandemic.
- 6.12 In Adult Services the social care workforce has been extraordinary during the pandemic, and it has had a significant impact on people working in social care; particularly those working in residential care. Whilst we have started to notice some stabilisation in staff absence and signs of an improvement, the intense pressure on these workers and the impact on their current and future mental health and wellbeing continues to be a source of concern.
- 6.13 We have kept our elected Members updated of the work undertaken with Human Resources to ensure our staff is appropriately supported, via counselling, wellbeing, and Occupational Health Services to ensure our workforce is appropriately supported. This work has been of assistance to staff across adult and children's social services.
- 6.14 Some examples to date included:
- Human Resources staff allocated to specific employees to keep in touch with via telephone on a weekly basis (where identified as in need of specific support).
 - Care homes given direct access to a senior counsellor for specialised support where staff experienced sudden or traumatic events.
 - A new dedicated wellbeing helpline available to all staff to access via telephone or email. The wellbeing line offers support for both employee physical and mental wellbeing covering a range of topics such as mental and physical wellbeing, nutrition, sleep, and weight management.
 - Occupational Health have continued to provide a clinical service for counselling, nurse, doctor, physiotherapy, and health surveillance via telephone (and more recently a restricted face to face appointments).
 - A dedicated area was created on RCT Source with a range of support information for staff e.g. information of Covid-19 guidance, wellbeing area, nutrition, sleep and working from home.
 - A dedicated 7-day Covid testing booking line for key workers and their families was introduced to increase the availability of testing capacity.
 - Occupational Health have introduced the flu campaign, in support of the national drive to encourage people to take up the flu vaccine.
- 6.15 This work has continued in the short term, but over the medium to longer-term, we remain concerned about the physical and mental toil the pandemic will have taken, and we are examining new ways with Human Resources and Health to mitigate the impact of the pandemic

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on this workforce group. Social Care Wales is also expediting the wellbeing theme of the national integrated workforce strategy and it is going to be vitally important that all the support mechanisms are in place to aid workforce recovery.

6.16 We continue to provide strategic support for the development of the workforce which is also supported by our performance Management framework which defines expectations at all levels to include Staff supervision. Supervision is in place at all levels and is considered effective in terms of case management.

What are our priorities for 2021-22?

6.17 We are planning to:

- Deliver services anticipating demand associated with the pandemic will impact local families.
- Have an engaged, motivated, and healthy workforce with the physical resources they need to do their job effectively, and able to access to resources which support and strengthen their emotional and physical resilience.
- Deliver an attractive recruitment campaign for Adult and Children's Services.
- Develop a pay structure that reflects qualifications, responsibilities, and the ability to take on more complex /challenging work.
- Develop an agile working environment across Adults and Children's Services which optimises the way we work.
- Invest in IT systems to support connectivity.

6.18 As members of the Cwm Taf Morgannwg Social Care Workforce Development Partnership, we will implement the annual workplan for 2021- 22. This sets out a number of priorities, most of which will be incorporated into local actions:

- Enable the workforce to meet regulatory requirements for qualification and/or registration.
- Supporting the training, development, and qualification of social care managers.
- Implementing qualifying and post-qualifying programmes for social work.
- Support frontline social care workers to develop their skills.
- Supporting developments which lead to digital solutions for the delivery of learning, development, and qualifications.
- Equipping our workforce to work effectively alongside carers and raising awareness of good practice in carer needs assessments.

Our financial resources and how we plan

6.19 The Council continues to support and prioritise Adult and Children's Services but within significant cost pressures. This is evident in the budget decisions taken by elected Members.

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- 6.20 To manage these ongoing budget pressures, we continue to focus for example on prevention services, promoting independence, right sizing care packages, improved use of technology and maximising the use of grant monies to support new opportunities.
- 6.21 We also have in place Quality Assurance Panels to oversee commissioning decisions to ensure challenge and consistency in the quality of assessment outcomes and cost-effective care. The funding of joint packages of care with the NHS continue to be robustly challenged. Arrangements for learning disability cases are being reviewed with NHS colleagues to address existing backlogs and to ensure decisions are timelier and people's needs, and outcomes are met by the most appropriate and cost-effective care package.
- 6.22 Our Specialist Placements Panel oversees specialist accommodation and community-based decisions and monitors individual case move-on.
- 6.23 In Children's Services the service continues to implement robust and manageable budget strategies to ensure timely identification of budget efficiency and such processes include a rigorous scrutiny process via our Group Management Team of which the Head of Finance is a member.
- 6.24 The Council budget for 2021-22, included £1,359,000 for education and inclusion services, £200,000 for Public Health and Protection to increase resilience in the service and allow additional resources to be employed, and an additional £50,000 would be allocated for Well-being support programmes.
- 6.25 The overall budget proposed an increase of £8,689,000 for Community and Children's Services from £162,681,000 in 2020-21 to £171,370,000, which includes social care, to help alleviate the key pressures that we face, and to help focus on supporting our recovery.
- 6.26 In addition to consulting with elected members we also did an extensive public consultation which included:
- An online questionnaire with 1,044 survey responses received.
 - A virtual engagement session with members of the Older Persons Advisory Group and Disability Forum.
 - The Council's Finance and Performance Scrutiny Committee and the School Budget Forum were consulted, and engagement with the Community Liaison Committee.
 - We held 5 virtual sessions and spoke to pupils from St John Baptist Church In Wales High School, Aberdare Community School, Mountain Ash Comprehensive School and Y Pant Comprehensive School. We also engaged with learners from Coleg Y Cymoedd in Aberdare, Rhondda and Treforest campuses.
 - Over 1,100 people were engaged in the phase 1 budget consultation process.

Our partnership working, political and corporate leadership, governance, and accountability

- 6.27 Social Services continues to remain a priority for the Council, receiving strong and proactive support from the Cabinet Members for both Adults and Children's services, especially in the past year as we have responded to the challenge of the pandemic.
- 6.28 The engagement and involvement of elected members is positive. Naturally, much of their scrutiny has been focused on the response to the pandemic ensuring democratic oversight to

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ensure that we have kept people safe and services on track, and this has been the case with the Children and Young People Scrutiny Committee and also the Health and Wellbeing Scrutiny Committee.

6.29 In last year's report we said we would:

- Contribute to more joint learning between health and social care staff as part of a joint evaluation and learning framework for the Welsh Government's Transformation Fund
- Work with Third sector partners to consider alternative service models, such as social enterprise and user led organisations such as co-operatives.

6.30 Our Corporate Plan for 2020 – 2024 sets out the Council's overall vision and contains three specific objectives to which social care services and our partnership working will continue to contribute. Whilst this strategic direction is important operationally, we have been managing the additional demands and priorities on our work during 2020-21.

6.31 We are accountable through a variety of mechanisms including:

- Monthly performance reviews and quality assurance checks
- Regular discussions with Cabinet Members and senior staff
- Reports to Council Cabinet, Scrutiny Committees, and Corporate Parenting meetings
- Regular engagement with staff by operational and senior managers to improve communications and to allow concerns, developments, suggestions, and ideas to be discussed.

6.32 During the past year we have also reported weekly, from early May 2020 to the end of March 2021, to Welsh Government on the managed response to the pandemic, how we have responded to a range of contacts from the public and the ability of the service to keep adults and children safe.

6.33 Partnership working to improve services and to achieve efficiencies remains an important part of our work in both Adult and Children's Services. We continue to play a significant part in the:

- Regional Partnership Board, which includes Merthyr Tydfil County Borough Council, Bridgend County Borough Council, the Cwm Taf University Health Board, and colleagues from Housing and Third Sector organisations.
- Work of the regional Safeguarding Board, which has continued to deliver opportunities for improvements in practice both within and between agencies.

6.34 To ensure a robust regional cross agency response to the pandemic a regional partnership governance structure was established to deliver the Welsh Government's Test, Trace, Protect programme. In August 2020, we published a COVID-19 Prevention and Response Plan, as an over-arching strategic plan setting out the approach to prevention and response. The Action Plan supporting the strategy was to compliment Public Health Wales' objectives to:

- Prevent the spread of disease through contact tracing and case management.
- Ensure sampling and testing of different people in Wales.
- Secure population surveillance.

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- 6.35 We have also continued to make a significant contribution to the work of the Cwm Taf Morgannwg Safeguarding Board. During the past year working in partnership, for example, the Board has continued its work in sharing the learning of reviews and audits, developed a regional response to the Welsh Government's National Action Plan on Child Sexual Abuse, and undertaken work to assess how the region can better respond to suicide and self-harm.
- 6.36 We continue to lead the Cwm Taf Reflect Project, which works with young women who have had children removed from their care, and the Regional Advocacy Service, and also chair the "Together for Mental Health" Partnership Board for Children and Young people working with South Wales Police on the implementation of the Early Action Programme.

What are our priorities for 2021-22?

- To accelerate the pace of integration of health and social care services across the Cwm Taf Morgannwg region to enhance integrated planning and service delivery of health and social care services with Cwm Taf Morgannwg University Health Board.
- To review the projects and programmes delivered through Integrated Care Fund and Transformation Funding to ensure they are delivering the outcomes we need and that essential services are sustainable going forward.
- Continue to support the Test Trace Protect programme, supporting the Regional Strategic Oversight Group and Incident Management Team established to coordinate and oversee our response to the pandemic.

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7. Sources of information

7.1 This page provides links to sources of information on the services and support mentioned in this report.

Services and support

7.2 For support in the area:

- **Adult Social Services Care and Support**
<https://www.rctcbc.gov.uk/EN/Resident/AdultsandOlderPeople/AdultSocialServicesCareandSupport/AdultSocialServicesCareandSupport.aspx>
- **Children and Families**
<https://www.rctcbc.gov.uk/EN/Resident/ChildrenandFamilies/ChildrenandFamilies.aspx>
- You can search “Dewis Cymru” for community-based services to support you and your family <https://www.dewis.wales/>

Council meetings

7.3 Full information on councillors and meetings of the Council is available on the Council’s website: <https://www.rctcbc.gov.uk/EN/Council/CouncillorsCommitteesandMeetings/CouncillorsCommitteesandMeetings.aspx>.

7.4 Meetings of the Cabinet, the Children and Young People Scrutiny Committee and the Health and Wellbeing Scrutiny Committee are particularly relevant to this report. Agendas, papers, and decision reports can be accessed via the following web pages:

- **Cabinet:**
<https://www.rctcbc.gov.uk/EN/Council/CouncillorsCommitteesandMeetings/Committees/Cabinet.aspx>
- **Children and Young People Scrutiny Committee**
<https://www.rctcbc.gov.uk/EN/Council/CouncillorsCommitteesandMeetings/Committees/ChildrenandYoungPeopleScrutinyCommittee.aspx>
- **Health and Wellbeing Scrutiny Committee**
<https://www.rctcbc.gov.uk/EN/Council/CouncillorsCommitteesandMeetings/Committees/HealthandWellbeingScrutinyCommittee.aspx>

References

ⁱ Your Life Your Care (April 2018) A survey of the views of looked after children and young people aged 4-18yrs in Rhondda Cynon Taf

ⁱⁱ Charging for Non-Residential Social Services policy

<https://www.rctcbc.gov.uk/EN/Resident/AdultsandOlderPeople/Helpoliveathome/RelatedDocuments/ChargingforNonResidentialSocialServices.pdf>

ⁱⁱⁱ Workforce Plan 2017-2022, Rhondda Cynon Taf

<https://www.rctcbc.gov.uk/EN/Council/WorkforcePlan/RelatedDocuments/WorkforcePlan20172022.pdf>