



Complete Agenda

Democratic Services
Swyddfa'r Cyngor
CAERNARFON
Gwynedd
LL55 1SH

Meeting

CARE SCRUTINY COMMITTEE

Date and Time

10.30 am, THURSDAY, 26TH SEPTEMBER, 2024

NOTE: A briefing session will be held for members at 10:00am

Location

**Hybrid - Siambr Hywel Dda, Council Offices, Caernarfon, Gwynedd, LL55 1SH
and Zoom**

*** NOTE**

This meeting will be webcast

https://gwynedd.public-i.tv/core/l/en_GB/portal/home

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(DISTRIBUTED 18/09/24)

CARE SCRUTINY COMMITTEE

MEMBERSHIP (18)

Plaid Cymru (12)

Councillors

Menna Baines
Rheinallt Puw
Linda Ann Jones
Gwynfor Owen
Einir Wyn Williams
Vacant Seat

R Medwyn Hughes
Dewi Jones
Linda Morgan
Meryl Roberts
Jina Gwyrfai
John Pughe

Independent (5)

Councillors

Elwyn Jones
Eryl Jones-Williams
Angela Russell

Anwen J. Davies
Beth Lawton

Labour/Liberal (1)

Councillor
Gareth Coj Parry

Ex-officio Members

Chair and Vice-Chair of the Council

Other Invited Members

Councillor Elin Walker Jones
Councillor Dilwyn Morgan

A G E N D A

1. APOLOGIES

To receive any apologies for absence.

2. DECLARATION OF PERSONAL INTEREST

To receive any declarations of personal interest.

3. URGENT BUSINESS

To note any items that are a matter of urgency in the view of the Chairman for consideration.

4. MINUTES

4 - 13

The Chairman shall propose that the minutes of the meetings of this committee held on the 13th of June, 2024 be signed as a true record.

5. DOMICILIARY CARE SERVICE

14 - 24

To consider the report.

6. TRANSPORT FOR THOSE WITH DEMENTIA TO ATTEND DAY CARE

25 - 33

To consider the report.

7. ANNUAL REPORT ON THE ADULT, HEALTH AND WELLBEING DEPARTMENT & CHILDREN & SUPPORTING FAMILIES DEPARTMENT'S COMPLAINTS, ENQUIRIES & EXPRESSIONS OF GRATITUDE PROCEDURE FOR 2023-2024

34 - 69

To prepare an Annual Report on the implementation of the Representations and Complaints Procedure for submission to the Care Scrutiny Committee in order to scrutinise and monitor the arrangements for dealing effectively with complaints received from service users and their representatives.

8. CARE CHARGING POLICY

70 - 79

To receive the Committee's comments on proposed changes before going out for consultation and submission to the Cabinet.

CARE SCRUTINY COMMITTEE
13/06/24

Attendance:

Councillors:- Beth Lawton (Chair), Menna Baines, Jina Gwyrfai, R. Medwyn Hughes, Dewi Jones, Elwyn Jones, Eryl Jones-Williams, Linda Ann Jones, Linda Morgan, Gwynfor Owen, Gareth Coj Parry, Rheinallt Puw, Meryl Roberts, Angela Russell and Einir Wyn Williams.

Officers present: Llywela Haf Owain (Senior Language and Scrutiny Advisor) and Sioned Mai Jones (Democracy Services Officer).

Present for item 7:- Councillor Dilwyn Morgan (Cabinet Member for Adults, Health and Well-being) and Mannon Emyr Trappe (Assistant Manager for Safeguarding, Quality Assurance, Mental Health and Community Safety).

Present for item 8:- Councillor Menna Trenholme (Cabinet Member for Corporate Support) and Dylan Owen (Social Services Statutory Director).

Present for item 9:- Councillor Elin Walker Jones (Cabinet Member for Children and Families) and Aled Gibbard (Assistant Head of Resources - Children and Supporting Families).

1. ELECTION OF CHAIR

RESOLVED to elect Councillor Beth Lawton as Chair of the Care Scrutiny Committee for 2024/2025

2. ELECTION OF VICE-CHAIR

RESOLVED to elect Councillor Dewi Jones as Vice-chair of the Care Scrutiny Committee for 2024/2025.

Councillor Dewi Jones was congratulated for being elected mayor of Caernarfon.

3. APOLOGIES

Apologies were received from Councillor Anwen J Davies.

4. DECLARATION OF PERSONAL INTEREST

No declarations of personal interest were received.

5. URGENT ITEMS

None to note.

6. MINUTES

The Chair signed the minutes of the previous meeting of this committee which took place on 11 April 2024, as a true record.

7. DEPRIVATION OF LIBERTY SAFEGUARDS (DOLS)

The report was submitted by the Cabinet Member for Adults, Health and Well-being as well as the Assistant Manager for Safeguarding, Quality Assurance, Mental Health and Community Safety.

It was explained that Deprivation of Liberty Safeguards (DoLS) arrangements was the procedure prescribed in the law when a resident or patient must be deprived of their freedom when they did not have the capacity to agree on their care or their treatment, in order to keep them safe from harm. It was explained that conditions such as dementia or brain injury could lead to this lack of capacity. Emphasis was placed on the fact that each case was considered on its merits.

Members of the Committee were guided through the report, noting that DoLS was a statutory duty and that it was a requirement for Local Authorities to lead on DoLS matters within their communities and care homes, with the Health Board leading the field within hospitals. It was reiterated that every application for DoLS Standard Authorisation was expected to be completed within 21 days, with emergency applications being completed within 7 days. It was acknowledged that there was currently a waiting list of 340 in Gwynedd. It was emphasised that this meant that 340 individuals were being deprived of their liberty without authorisation. It was reiterated that 20 of those individuals had been waiting for Standard Authorisation for over three years because of changes to the waiting list as a result of priority.

The fact that the Council did not comply with the relevant legislations and that there were clear corporate risks here was highlighted. Reassurance was given that this matter had been escalated within the Adults, Health and Well-being Department's performance challenging meetings. It was explained that the report was a way to share information with the members regarding the situation, whilst trying to obtain the Committee's feedback and support. It was emphasised that this situation was not unique to Gwynedd, confirming that Local Authorities across North Wales and nationally had a waiting list for DoLS provision.

It was stated that the Council received 67 applications, on average, for Standard Authorisation Assessments every month. It was noted that 16 of those applications could be authorised in a timely manner. It was reiterated that a Standard Assessment was valid for a year, explaining that the individuals who had received a DoLS assessment must receive an additional assessment at the end of that period. It was ensured that the Department had a process to prioritise the individuals who were on the waiting list in accordance with urgent needs and the need to renew the Standard Authorisation.

It was reported that 18 employees within the Adults, Health and Well-being Department had qualified as Best Interests Assessors. It was noted that the Department had attempted to encourage these individuals in the past to conduct assessments for DoLS, but this was not sustainable because each assessment took a minimum of 10 hours to complete.

Reference was made to the resources available to get to grips with this challenge, noting that the Department had one DoLS Coordinator employed four days a week and one Best Interests Assessor employed for two days a week. It was reiterated that the Council had managed to receive £114,000 worth of grant money from the Welsh Government over the last three years to address the requirements of the waiting list in Gwynedd. It was explained that the Council had experienced recruitment challenges when trying to appoint individuals to conduct the assessments, as it was a short-term post as a result of the fact that the funding was provided annually. It was reiterated that this funding had

been used to commission an agency and pay doctors to complete the assessments on behalf of the Council.

During the discussion, the following observations were noted:-

An enquiry was made about the difference between the lack of capacity ruling and DoLS standard authorisation assessment. It was explained that individuals must receive a lack of capacity ruling before applying for a DoLS assessment. In response to a question about who was allowed to apply for a DoLS assessment, it was confirmed that this was usually done through the professional workers.

In response to a question about whether the essential requirement to be able to communicate in Welsh had led to less people applying for posts, the Senior Language and Scrutiny Advisor confirmed that the Council's Language Policy made it a requirement that posts were always advertised noting Welsh language skills as essential. It was reiterated, when posts were advertised for a third time and there was a lack of applicants with the eligible language skills, then it could be considered to appoint an individual who did not fulfil the necessary language skills if they were committed to learn and improve their Welsh skills. The Council could provide suitable training for them. The Cabinet Member added that the Adults Department had been offering Welsh lessons and driving lessons to those who fulfilled the other requirements and tried to be flexible to attract workers.

An enquiry was made as to whether the Department had considered the possibility of advertising a permanent post jointly with a nearby County, as it was believed that a permanent post would attract more applications. In response, it was noted that this would be challenging to administrate because the numbers and requirements of DoLS provision varied between the region's Local Authorities. It was also noted that other counties in north Wales had had more success recruiting officers to complete the assessments than Cyngor Gwynedd. Other challenges were also highlighted, namely how the work would be prioritised if it would be administered by one officer working across two Counties.

In response to a question about the financial penalty, reference was made to the internal inspection to the arrangements completed in 2022. It was confirmed that a follow-up inspection had been completed in March this year, where it was noted that there was a high risk for the Council to be penalised for lack of compliance with DoLS statutory arrangements. Details were given on the fact that it was a financial penalty of approximately £3,000-£4,000 per individual, monthly for the period in which the individual had been deprived of their liberty without authorisation was the highest cost that could have been given. The Department acknowledged that it was not possible to mitigate the risk with the resources available to the department currently and therefore, they believed that they must continue to try and find processes to comply with the legislation. It was noted that a second option was to earmark additional resources to resolve the situation. A wish to employ a full-time officer was expressed to undertake these assessments, acknowledging that the total cost of employing them would approximately be £90,000 a year. Frustration was expressed that employing one full-time officer would not manage to achieve the same workload as the agencies currently used for the same amount of money. The fact that financial bids within this field had not been successful in the past was reported. It was acknowledged that there were no alternative options to consider at this point in time.

In response to an enquiry, it was reported that the Council had received a fine in the past and was likely to receive another fine soon for an individual who had been deprived of their liberty without authorisation for a six-month period.

Members of the Committee were reminded of training received by a legal specialist on a similar matter in the past. As a result of changes in the membership of this Committee, it was proposed to send an invite to receive a presentation from a specialist once again to ensure that Committee members made informed decisions considering the way forward to the provision in Gwynedd.

The Cabinet Member noted that he was not expecting a solution today, but instead to escalate the risk to the Council. He highlighted the fact that plans were underway but he was eager for the whole Council to understand the risk. They took the opportunity to praise the staff of the Department for their work and for prioritising the safeguarding field.

The members expressed their unwillingness to accept the risk and to accept the report in its current form and they noted their desire to receive more information. It was stated that the Care Scrutiny Committee would not commit to making a decision on this financial risk without receiving further specialist information. Instead, there was a consensus to express genuine concern for the situation and the Cabinet Member was asked to collaborate with the Department to develop an effective action plan, as well as provide more detail on the financial options of recruitment.

The Department was asked to provide a progress report in six months to present an update. The officers were thanked for a comprehensive and clear report.

RESOLVED

To accept the report and note the following observations:

- a) To express genuine concern about the situation and the Care Scrutiny Committee's unwillingness to accept the risk highlighted in the report.**
- b) To request the Cabinet Member for Adults to discuss further with the Adults, Health and Well-being Department and create an action plan.**
- c) To request that the Department provides a Progress report within six months.**
- d) To note a wish to receive further information from an expert.**

8. STRATEGIC SAFEGUARDING PANEL'S ANNUAL REPORT 2023/24

A report from the Cabinet Member for Corporate Support and the Social Services Statutory Director was submitted.

An update was provided on the work of the Strategic Safeguarding Panel during the last year. It was explained that the Panel's work was integral to the operation of all Council Departments, as it considered safeguarding processes corporately. It was noted that the Cabinet had accepted the report at their meeting on 11 June 2024.

Attention was drawn to the main changes introduced during the last year, including amendments to the Panel's Terms of Reference, the Safeguarding Operational Group's Terms of Reference and publishing a new Safeguarding Policy. They were proud that the Safeguarding Policy was now clearer, especially regarding the definitions of protection and safeguarding. It was reiterated that training on this Policy would be developed in the near future.

It was confirmed that the Children and Supporting Families Department had received 7,230 referrals to children's services during the year. This statistic was compared with the average figure before the pandemic, where referrals to children's services were approximately 5,000 per year. It was noted that this was a substantial increase in

referrals but it was confirmed that the annual figures had levelled by now, hoping that the number of referrals would decrease in years to come.

It was reported that there was an increase of 248% seen in the work relating to safeguarding concerns about practitioners and those in positions of trust, compared to 2022/23. It was confirmed that procedures were in place to respond to safeguarding concerns about those who, as part of their work, come into contact with children or adults at risk.

It was explained that there were 281 looked-after children at the end of March 2024. It was confirmed that the number of looked-after children had reduced during the last year but, because of the Council's responsibilities to protect asylum seekers and refugees, the number of children under the care of the authority had remained at 281, similar to the numbers at the end of March 2023. Likewise, it was confirmed that the number of Adults reports during the 2023/24 year was very similar to the numbers reported at the end of March 2023.

Pride was expressed that the Council had earned a 'White Ribbon' accreditation as it had adopted a strategic method to end domestic violence and to emphasise that it was not tolerated within the County. Furthermore, it was noted that 55% of Council staff, who worked in the public safety field, had attended an 'Ask and Act' training to give them confidence to support individuals experiencing violence, domestic abuse or sexual violence. It was emphasised that it was a priority for those staff members to attend the training over the next year.

Reference was made to an increase in a number of matters during the last year, such as retail crime (thefts from shops). It was confirmed that the Council had collaborated with the Police to ensure that information about support to cope with the cost-of-living crisis was available to them, in the hope that this would reduce the numbers of retail crimes in the future. Attention was drawn to a number of other safeguarding aspects that received the Panel's support, namely Serious Violence Duty, Modern Day Slavery and Counter-terrorism.

It was confirmed that the Panel was monitoring the Disclosure and Barring Service (DBS). Emphasis was given on the fact that the vast majority of individuals employed by the Council had a current and clear DBS with some exceptions, such as those on sickness absence and maternity leave.

During the discussion, the following observations were noted:-

An enquiry was made as to whether it was possible to track the number of staff that had completed the Prevent training. In response, it was noted that there were two ways to gain access to the training. It was reported that the Home Office had developed new training for Prevent and that it was also available in the form of an e-module on Cyngor Gwynedd's website. Assurance was given that this e-module was mandatory to the whole workforce by now and that staff was encouraged to use the e-learning portal to gain access to it. It was acknowledged that it would be challenging to collect specific data on the number of staff who had completed this module because individuals were able to complete it directly through the Home Office's website. It was explained that these individuals would not be included in the data collected by the e-learning portal of people who had attended the training. The Corporate Director reported that he would try to collate the information and share it when it would be available.

Gratitude was expressed for the report and the work and a desire to see an increase in the statistics was expressed, such as 92% of the "Main Safeguarding Persons" in School

had received specific safeguarding training in the last two years. It was believed that this figure should be 100%. In response, it was explained that it was unlikely that the statistics would reach 100% due to reasons outside of the Council's control, such as long-term illness periods or staff on maternity leave, but it was agreed that we should aim for 100%.

In response to an observation regarding the responsibilities of the Department's Senior Officers, it was noted that there were two Senior Safeguarding and Quality Managers with one located in the Children's Department and the other in the Adults Department. It was noted that they were designated officers who had a specific role and were accountable in terms of safeguarding responsibility. It was explained that adults with learning disabilities came under the Adults Department's remit whilst children with disabilities came under the Children's Department.

Attention was drawn to the fact that a Police officer used to attend this Committee annually in the past and it was suggested that it would be beneficial to revisit these arrangements. In response, it was noted that there was currently an arrangement for the Police to attend the Area Forums and it would be possible to share information through those Forums.

In response to an observation regarding part 4.1.7 of the report and the number of looked-after children and placed with their parents, it was noted that this was part of the strategy and that the Department tried to keep children with their parents as much as possible. It was reported, although the children lived with their parents, a lot of support was provided, it was believed that it was better to try and keep children with their families and in the community when possible.

In response to a question about why the number of referrals continued to be 2,000 more than the pre-pandemic figures, it was explained that the impacts of the pandemic were long-term, especially on children and it was difficult to know why and when there would be a reduction in the figures. It was suggested that people may now be more willing to refer because they were more aware of the challenges. It was noted that this was positive but it put a lot of pressure on the workforce.

A question was asked on the methods used to promote the new Policy to staff and Councillors. It was reported that there was an intention to host training for staff and Councillors and the Senior Safeguarding and Quality Managers were part of that training and tried to raise awareness amongst staff and Members.

In response to a question about clarity regarding the definition of safeguarding and protection, it was explained that safeguarding was part of everyone's role in the community and the Council, namely, to ensure that vulnerable people were safe. It was noted that safeguarding was the responsibility of the Councillors and Council staff. It was explained that protection was a specific responsibility of the Police and the Social Services e.g. to intervene if someone was harmed or faced a substantial risk. It was noted that there were laws and an intense policy about protection.

To conclude, it was confirmed that the report, including the observations of the Care Scrutiny Committee, would be presented to the Full Council at its meeting in July. The Committee was thanked for their observations.

RESOLVED

To accept the report and note the observations.

9. DEVELOPING A RESIDENTIAL PROVISION IN A SMALL GROUP FOR LOOKED-AFTER CHILDREN

The report was submitted by the Cabinet Member for Children and Families and the Assistant Head of Resources - Children and Supporting Families, noting that the development of a residential home for looked-after children was a priority within the Council Plan.

The background of the plan was shared, noting that there were currently approximately 280 children in the Council's care. Everyone who was a part of the fostering plan was thanked, because the majority of looked-after children had been placed with foster families. It was explained that others lived at home with their families but were receiving consistent support from the Council. It was acknowledged that approximately 20 looked-after children were currently in the Council's care who needed a residential placement and there were insufficient placements to currently offer that service without externalising. Members were reminded that many children were currently placed in areas beyond Wales, such as Bristol and Northumbria.

It was confirmed that the aim of the plan was to replace the need to externalise with the provision provided by the Council, managing to provide residential care for looked-after children for a substantially lower cost than the current average costs.

It was explained that the plan placed two looked-after children in a house in the community to ensure that they had a stable home when fostering was not an appropriate solution for them. Details were provided on a number of the plan's advantages, including receiving care in Welsh, remaining in their local school and continuing to foster a relationship with friends and family when possible. It was confirmed that the main purpose of the Plan was to provide specialist care in Welsh for children locally, removing the need for them to leave the county, or leave Wales to receive this. It was emphasised that the plan complied with the Council's Equality Plan, as well as The Well-being of Future Generations (Wales) Act 2015.

It was explained that a suitable house had been bought in Morfa Bychan to offer residential care to children between 10 and 18 years old. It was highlighted that the current emphasis was to secure staff for the houses to enable the plan to develop in a timely manner before considering such options for the future. It was reiterated that they hoped to buy two other houses in different communities in the County soon. It was acknowledged that purchasing and completing alterations to the first house was a slow process because necessary procedures and policies were being developed concurrently with the development of the house. It was emphasised that purchasing homes in the future would be a faster process, because these procedures and policies would already be operational.

It was reported that the plan needed to be completed by the end of 2027, emphasising that three registered residential homes would be required by then. It was acknowledged that many risks had derived from this timetable, namely; difficulty to find a second or third suitable building or difficulty to get the first child in the first house by September 2024. It was also noted that recruitment challenges were also being considered by the Department.

Attention was drawn to the financial situation, confirming that the plan was funded through the RIF/HCF grant, and also confirming that two million pounds had been earmarked to achieve the plan. It was explained that this funding had been used to buy suitable houses and make alterations to them to ensure that they complied with the Care Inspectorate Wales, which was necessary for registration.

It was confirmed that the first year of the plan had been very successful, with many of the plan's targets being achieved in a timely manner. It was reiterated that the main targets that had already been achieved included: Appointing a Project Manager, buying and altering the first house (in Morfa Bychan) and developing a Statement of Purpose and possibilities for the development.

They went on to note the main targets for the plan's second year, including: Appointing a Manager for the first house (in Morfa Bychan), completing alterations to the first house for the Care Inspectorate Wales registration, identifying and purchasing the second home and identifying a third home to buy or submit a planning application on a piece of land in Arfon which was already in the Council's ownership. It was confirmed that the Department had collaborated with the Housing and Property Department.

The members were encouraged to assist the Department to advertise posts related to the plan within their wards. It was noted that posts for the manager of the first house, six residential officers and contingency posts were currently seen on the Council's website, as well as the Council's social media and on posters. It was noted that they hoped that the house Manager could be responsible for a second house in the future to ensure consistency within the plan, whilst also acknowledging that not many individuals qualified for the role were available.

During the discussion, the following observations were noted:-

The plan was welcomed, whilst expressing that the plan should have been implemented years ago. However, the Department was congratulated for their recent progress, and they expressed pride for the plan.

There were concerns about the number of children who would remain in out of county placements, but it was acknowledged that they had to start somewhere and that it was a process that would take time. It was believed that these plans would give the children an element of normalcy compared to the old large care homes. Pride was expressed that the Department had consulted locally.

It was explained that it was not a requirement to conduct a public consultation on this matter. However, it was confirmed that the Department had conducted a public meeting in the area to ensure that members of the community would receive an opportunity to ask questions and express any concerns. It was confirmed that the majority of the individuals were supportive of the plan but the Department had been in contact with one individual who had expressed concerns.

In response to an observation regarding recruitment challenges, it was explained that pamphlets had been distributed yesterday referring to an event in Porthmadog and a session to try and encourage applications for workers.

They enquired how the provision would work in relation to girls and boys. It was explained that an important aspect of this role would be to assess the individuals' background to ensure that their residential placement was suitable and also followed arrangements and processes where appropriate. It was noted that there would be no discrimination on the grounds of girls and boys and that the manager would decide on the suitability of individuals based on assessments on their background and their needs.

In response to a question about what would happen when the individuals in the houses turned eighteen years old, it was confirmed that the registration allowed residential placements until this age but those individuals would not have to leave the house if no

suitable alternative provision was in place for them. It was explained that the usual arrangement in many cases was that the individuals would move to an alternative provision where supervisory support was available. Furthermore, it was ensured that the Department had been in discussions with GISDA to use two flats in Caernarfon for the third stage of the provision where the individuals did not need supervision and consistent support but was happy for staff's input now and again. It was emphasised that exchanging such provision was considered by the appropriate services as they turned 15 years old, for the best plan to be put in place when they turn eighteen years old.

In response to a question regarding what factors were being considered when choosing a location for a house, it was explained that distance from public transport was an important factor, as well as distance from the local School and leisure facilities. It was noted that there were also other considerations such as sufficient parking locations for staff and visitors and that the location did not stand out and suited the needs of the individuals e.g. privacy.

In response to an enquiry regarding costs of keeping children in out of county placements, it was noted that it cost approximately £6,000 per week for each child. This was compared to the weekly cost of running one unit, which was £440 per week. It was reported that this would be a saving of £200,000-£250,000 a year for every two children being placed internally.

Pride was expressed that other counties in north Wales were very eager to develop similar plans and discussions were in place to share ideas, policies and training opportunities.

The officers were thanked for their work to develop the plan and they wished every success to the plan. They looked forward to receiving a further update when the children had settled.

RESOLVED

- a) **To accept the report and wish the development every success.**
- b) **To note the Committee's desire to receive an update once the residential home has opened and there has been a settling-in period.**

10. MID WALES HEALTH AND CARE JOINT COMMITTEE SCRUTINY GROUP

RESOLVED To elect Councillor Linda Morgan to represent the Scrutiny Committee on the Mid Wales Health and Care Joint Committee Scrutiny Group

11. CARE SCRUTINY COMMITTEE FORWARD PROGRAMME 2024/25

The report was submitted by the Senior Language and Scrutiny Advisor.

Members were reminded that the Committee's Forward Programme was based on the matters discussed in the Committee's Annual Workshop held on 30 April 2024.

It was confirmed that three items had been scheduled for each meeting during the year, except for one specific meeting in November to only scrutinise the Social Housing field and a meeting in January to discuss Health matters such as concern about GPs, mental health and collaborative relationships with the ambulance service.

An update was given that the Senior Language and Scrutiny Advisor had received a request from the Adults, Health and Well-being Department for the Committee to consider adding a 'Charging for Care Policy' item for the 26 September 2024 meeting. It was explained that the Department was eager to receive observations and the Committee's considerations before submitting the report to the Cabinet. It was noted that this meant that four items would be scrutinised at the Committee meeting on 26 September 2024.

Members were encouraged to consider the matters they wished for the Departments to include in the reports to the Committee. It was reiterated that it would be possible for Members to discuss those matters in a series of preparatory meetings. It was emphasised that the aim of the preparatory meetings was to identify the main matters which required scrutiny within the fields, leading to supplementary questions in the formal meetings. It was confirmed that the Senior Language and Scrutiny Advisor would consult with the Democracy Services Officer to find suitable dates for the preparatory meetings, attempting to ensure that they would be hosted on Thursdays due to the availability of Members. It was acknowledged that this would not be possible on every occasion, but it was ensured that the time that the meetings would start would be 4pm because this time was convenient for the majority of the Members.

RESOLVED

- a) **To adopt the Committee's work programme for 2024/25.**
- b) **To agree to add the additional Charging for Care Policy item (Adults, Health and Well-being Department) to the meeting on 26 September 2024.**

12. ADULTS, HEALTH AND WELL-BEING DEPARTMENT AND CHILDREN AND SUPPORTING FAMILIES DEPARTMENT PERFORMANCE CHALLENGING MEETINGS

RESOLVED To elect Councillor Einir Wyn Williams as representative to attend the performance challenging meetings of the Adults, Health and Well-being Department and the Children and Supporting Families Department.

The meeting commenced at 10.30am and concluded at 2.00pm.

Chair

MEETING	Care Scrutiny Committee
DATE	26 September 2024
TITLE	Domiciliary Care Service
REASON TO SCRUTINISE	Has been included in the annual workshop document
AUTHOR	Aled Davies (Head of Adults, Health and Well-being Department)
CABINET MEMBER	Councillor Dilwyn Morgan

1. Why it needs scrutiny?

When reports were submitted about establishing the procedure for commissioning domiciliary care, a commitment was made to report on the arrangement within about a year of its inception to assess what has worked and to identify matters for improvement. Consequently, the matter has been included in the 2024-25 scrutiny programme.

2. What exactly needs to be scrutinised?

Committee members are keen to scrutinise information to take stock of the effectiveness of domiciliary care provision across the county, particularly in maintaining and improving services for residents. The Committee has set a series of specific questions to enable them to do this. These questions and the response to them are included in part 4 below.

3. Summary of the Key Matters

The main message of this report is that the Council has relatively recently adopted a new and ambitious domiciliary care model, which is in line with the national care commissioning principles and standards that have come into force since the start of September this year. It can be seen that there are many successes to celebrate, many areas where there is hardly any waiting list for care and there is enormous potential to improve the quality of life for residents in need of care and those of staff. Nevertheless, we cannot ignore the fact that difficulties exist in some areas of the County, and that the challenges are as numerous as the successes. Therefore, there is work ahead of the Domiciliary Care Project Board, and that work will need to be prioritised and will require adequate resources.

4. Background / Context

4.1 Changes have been made to the way the Council provides domiciliary care with the Council providing services in some areas and commissioning others to provide a service in other areas.

4.2 Contracts with external providers were signed in November 2022, when work commenced on transferring to the new model. Since then, the work has continued to try

to ensure that new ways of working develop across the County to align with these principles:

- Improved terms and working arrangements for staff.
- More flexibility for residents and a clearer focus on what is important to them.
- Collaboration between providers and health and care staff in the community, to offer better coordinated services and make more effective use of scarce resources.
- Capitalise on the strengths of local communities to reinforce the care available and improve people's quality of life.

4.3 Figures for the second week of September show that 8,800 hours of domiciliary care are provided across the County, but an additional 920 hours remain unmet which means there are 126 people on a waiting list for care. This is clearly not an acceptable situation, and significant efforts are underway to take steps such as:

- Supporting people who assess for care to consider the strengths of the individual and the community and not to commission care when it is not the best solution.
- Collaborate with community partners to develop suitable community hubs and suitable community provisions to meet people's needs.
- Refine work processes and the quality of local discussions to ensure staff resources are used in the most effective and efficient way possible.

4.4 Committee members have asked a number of specific questions, responses to which are given below:

Question 1: Does the existing way of providing domiciliary care work?

We believe that the existing way of providing domiciliary care works in part. We have reached this conclusion based on the following main facts:

- We knew that the introduction of a new model and contract, which move away from the traditional 'task and time' model, changes mindsets and changes working methods on a large scale. As we expected, not all parts of the system are working to fit the key principles yet, and it is a process of learning and development that will likely take years. Ensuring that changes happen is incredibly challenging, particularly at a time when resources are becoming scarcer and operational pressure on front-line teams is increasing.
- Evidence remains that what happens on the front-line is, in fact, a mixture of working based on the new model and working based on the old model. In times of high pressure with staff members coming and going, it is understandable. The Ffordd Gwynedd method was used in the redesign of the model. This is an approach where teams work out what works well and get to see for themselves how change is needed. It is vitally important that anyone new to the method has the opportunity to unlearn the old way of working, and re-learn the new way, with the support of their leaders.
- While many staff have expressed a preference for the shift work patterns that have been introduced by all providers, we are yet to see a significant positive impact on the ability to recruit into the sector and are therefore unable to fully meet the need for care.

- Due to difficulties in delivering all necessary care hours in some areas, care has been commissioned on a 'spot purchase' basis and/or there have been delays in carrying out care package and staff transfers. These things have happened to try to meet people's needs and create as little uncertainty and anxiety as possible. Unfortunately, they have also meant that setting up the 1 provider per sub-area model (or 2 in a few places) has been particularly challenging and has put us under greater financial pressure than expected.
- Although everything is not perfect, the re-tendering of domiciliary care has meant that each of our external providers is either a not-for-profit third sector company, or a local private family company with a small profit level (below 5% of the service price). This means that we are contributing to the prosperity of the basic economy, and we have numerous examples of how social value is created through our commissioning practice in this area. On a strategic level, therefore, we can be confident that elements of the Council's vision are being realised even when things are not working perfectly from an operational perspective on the ground.

The rest of the report will expand on some of the above-mentioned aspects.

It should be noted that a new Project Board has been established within the Adults, Health and Well-being Department. It deals with the issues that still need to be addressed before we can say with confidence that our way of delivering domiciliary care works effectively.

In addition, it is worth noting that the Project Board receives external support to realise its objectives. We have recently received detailed reports following a supporting project from IMPACT (Improving Adults Care Together). Furthermore, an Internal Audit has been conducted which looked at relevant funding arrangements. Officers have received a draft report, and comments have been shared with the audit team. The findings will form a key part of our efforts to ensure improvements in all parts of the home care system.

There is also a project underway, with the external support of Cwmpas and a Professor from Swansea University's School of Management for evaluation, to try to learn how our domiciliary care model can be effectively embedded in one area of Gwynedd, and another area of Denbighshire. The main messages in this report are in line with the findings from the above bodies as well as reflecting the views of Council officers.

Question 2: What are the successes and challenges?

Here are the top 5 successes and top 5 challenges as we see them.

Successes

1. There are numerous examples that demonstrate joint working between providers, health and care teams and community groups / partners in the 3rd sector to improve people's quality of life. These include providers helping to set up a lunch club and organising support from a community transport scheme and bringing people in Extra Care Housing and the wider community together to

share resources and socialise. Recently, a provider has raised money for charity and worked with the Council's Learning Disabilities service to borrow a minibus and book a trip for people facing loneliness.

2. Across the sector, we have ensured that staff do not face a work pattern and payment arrangements which mean they are back and forth from home to work multiple times a day and working over many days a week. As expected with a workforce with hundreds of staff members, the same arrangements will not suit everyone. However, the general feedback from our providers has been positive. We have also ensured that staff are not given 'zero hours' contracts, unless they request them, and there are positive examples of people getting a first-time mortgage as a result.
3. By giving staff and families the freedom to work together more flexibly, we have seen how our domiciliary care model can make a real difference. There are examples of individuals receiving care carefully tailored to respond to what matters to them. Some providers have evidence of how they implement the flexibility, by carrying out 'value added' tasks in accordance with their contract.
4. We have managed to implement what needed to be achieved in the transitional period (moving care packages and staff between providers) in a particularly effective manner. There were very few cases of complaints or dissatisfaction among individuals, families and members of staff given the scale of the challenge. This is testament to the sensitivity and dedication of social care and domiciliary care teams in supporting vulnerable individuals through a period of change, and the ability to implement major change alongside maintaining core services.
5. Since 1 September of this year, a new national framework for commissioning care and support has come into force: [National framework for commissioning care and support: code of practice \(gov.wales\)](https://www.gov.wales/government/commitments/commitment-10)
<<https://www.llyw.cymru/sites/default/files/publications/2024-07/y-fframwaith-cenedlaethol-ar-gyfer-comisiynu-gofal-a-chymorth-cod-ymarfer.pdf>> Our work to re-model and re-commission domiciliary care, undertaken following the approach and principles of Ffordd Gwynedd, is fully in line with the commissioning principles and standards within this code of practice. There is cause for celebration that Cyngor Gwynedd members have supported this movement and supported the work to try to ensure that the challenges along the way are overcome. We have been part of the technical group that developed the framework and have had a direct influence on the national direction. That is a direction we welcome and a challenge we have proven we can take on. Many local authorities in Wales and beyond are in contact with us, because of their desire to adopt a model that works on the same principles.

Challenges

1. Despite all efforts to improve the terms, working conditions and working patterns of internal and external domiciliary care staff, recruiting and retaining sufficient staff remains a huge challenge. In areas where the new model is taking root well, we see that staff are seeing personal benefits that go beyond the hourly wage. But this is only the beginning, and it will take time to change the image and understanding that exists about what exactly the nature of the job in its new form is. Furthermore, although Cyngor Gwynedd has decided to ensure wage

increases in the external sector through its contractual requirements, the money within the system is not sufficient to be able to compete with wages within other sectors. We continue to lose staff to the Health Board and to shops etc.,. Also, the benefits system means that it is often not advantageous for staff to work over a certain number of hours a week. We are battling extremely difficult systemic factors but continue to try to prove to the workforce that being a domiciliary carer can bring with it satisfaction and great opportunities.

2. Our vision is that we offer care that supports people to live their lives as similarly as possible to the way they would live day to day if they did not need support. Traditionally, care has been fairly uniform (same number of calls, for the same number of minutes, at the same time, every day). If quality of life is to be achieved, there must be flexibility for people, including staff, and it must be recognised that not everything is predictable when planning staff rotas. The big challenge is to strike the right balance between creating flexibility in the system and achieving cost-efficiency. Our external providers are currently doing a piece of work to show how a service can be delivered in a way that aligns with our agreement (and requires flexibility to meet what matters to people) but also ensures financial viability based on the contract price. Internally, we review staff shift patterns to ensure adequate staffing at times when demand is likely to exist, and that staff are not idle.
3. An ambitious aspect of the domiciliary care model is that it is changing across the health, care and community system. It will not succeed without us having different parts of the system working the same way and with the same mindset. We found from recent self-evaluation work with local teams in each sub-area that one of our main challenges is ensuring a full and consistent understanding of the characteristics of the domiciliary care model. It is a contractual requirement for providers to be fully part of the community resource teams, but this has not been realised everywhere. Also, community resource teams (including the providers) are also expected to know their local area well and ensure strong community and third sector networks. This is to support residents to take advantage of local strengths and assets and reduce reliance on formal care. We need to try to overcome this challenge, by supporting staff to develop relationships and to have the time to air various ideas about how to meet individuals' personal outcomes.
4. Part of our future intention is to develop the skills of domiciliary care workers. We want them to be able to give people medication (currently, most cannot safely do more than remind people to take it). There has been success in piloting how this could work, with a small group of internal Council staff and the support of the Health Board. In addition, a new policy has been formulated outlining commissioning and operating responsibilities in this important area. The intention is to ensure people's safety, protect staff and ensure that the accountable body pays for the service, depending on the circumstances. The major challenge we face is finding adequate funding and time to complete the necessary training, and supervising staff as expected to ensure they remain competent over time. Another aspect of essential skills to develop is enabling skills. While the aim is for all domiciliary care to 'enable' people, we currently know that the skill level of the workforce is far too low. This means that reliance on services is higher than it should be.

5. Internally and externally, the nature of our data collection and reporting systems, the accuracy of data and our use of it has been weak in recent years. Improvement in this area is one of our priorities and is something that is being addressed. Failures in these areas place us in a vulnerable position in terms of trying to predict future demand, understand trends, manage performance, manage spending, use staff time most effectively and plan a service. We know that most IT systems on the market are not compatible with the nature of our domiciliary care model, and that this poses difficulties for providers, both internally and externally. We have been successful in applying for £0.25m of Government funding, which will enable us to pilot the use of IT systems that could better support the model.

It is worth noting that Gwynedd's domiciliary care providers have set up a forum where they come together to try to ensure continued development and improvement. We see this as a very positive move that can contribute to improving the effectiveness of the system and the quality of services for residents. They have chosen 3 priority areas for the group, namely: Financial Sustainability and Finance, Staff Recruitment and Retention and IT Systems.

Question 3: Are there problems in some areas?

Yes, unfortunately, problems exist in some areas more than others, and as noted above, we have a waiting list for domiciliary care. The waiting list is shorter than it has been over the past 12-18 months, and we are confident that working towards the new model is one of the factors that has contributed to this. As demonstrated in our external evaluation of the pilot work, if conditions are right, reliance on care can be reduced, and staff experiences improved. But, unfortunately, right now, what we see is that the market situation and the nature of demand is volatile and can change very quickly. The following information shows how things stand in mid-September:

Waiting lists

Sub-areas are generally found to have very large, or very small, waiting lists. Of the 17 sub-areas, 11 have 5 or fewer people on the waiting list. Unfortunately, there are 4 sub-areas where more than 15 people are on the waiting list (Dyffryn Nantlle, Llanberis, Pwllheli and Tywyn). There are no real patterns in terms of geographical areas or in terms of the sector – 2 of these are internal, and 2 are external.

Our greatest concern at the moment is the Tywyn area, where 24 people are waiting for care as we prepare this report. The Assistant Department Heads responsible for the Adults and In-house provider services are working very closely with the relevant teams to take appropriate steps to improve this situation promptly.

Difficulty in meeting demand in a sub-area

Since signing contracts with the external sector, the Council and the contracted provider in two patches have come to an understanding that the contract must be terminated. This is because it has not been possible for the provider to recruit and retain adequate staff levels to meet demand – in Ffestiniog and Ardudwy.

We have re-tendered in Ffestiniog and given the contract to an alternative provider. To date, that provider has been unable to recruit enough staff to meet the demand, but we

are keeping an eye on the situation. We went out to tender at the same time to try and secure an external provider to collaborate with the in-house provider in the Eifionydd area, as it is difficult to meet the demand there. Unfortunately, no external provider applied for that contract. Steps have been taken to offer work to an alternative external provider in the Arduwy area, under a short-term contract, while we decide what steps to take for the better in that area.

Summary of findings

We know that the market is under tremendous pressure. When analysing our understanding of the market, it becomes clear that:

- Neither sector (internal / external) finds it easier than the other to maintain a service
- Difficulties are not confined to specific parts of the County (except for the Bangor area, which extends from Felinheli towards Bethesda), some part of the north, middle and south are facing problems.
- Neither sector is more likely than the other to have lengthy waiting lists
- Having a sub-area that is split between the internal provider and an external company is not a simple solution to try to alleviate the difficulties of meeting the demand for care.
- That a provider that appears successful in one sub-area is not necessarily going to be successful everywhere.
- That the clauses in our contract that providers must be prepared to operate across sub-area boundaries can be valuable at times when more capacity is needed in a particular area and/or when demand is less than the contracted hours in a particular place.

The way forward

Responding to market volatility and uncertainty about being able to meet people's domiciliary care needs is putting huge pressure on staff, social workers, commissioning and contracting officers, quality assurance officers and providers.

It is felt that it would be very beneficial to have someone responsible for managing the domiciliary care capacity in each sub-area (including taking an overview of waiting lists and demand coming from the direction of hospitals). There is potential to free up a lot of social workers' time. Because of this, we are keen to further consider the idea of having supervisors / domiciliary care managers responsible for assessing needs, prioritising resources and keeping track of the level of demand and provision.

We know that we provide more home care per 100,000 people than most counties in Wales. We are focusing on changing our practices to avoid depending on home care unless this is a fully appropriate solution. This could also lead to a much better situation in terms of the ability to meet genuine need.

Question 4: If there are issues, do you have plans to communicate with/update local members of the situations, particularly ones that result in hospital bed blocking?

When problems arise, we always try to ensure that all key stakeholders know the situation and communicate in the way that is most appropriate. Sometimes we will ask local members for a chat to brief them on a situation, other times a member comes to us with a query and we will discuss. Over the past few months, difficulties in specific

areas have led to numerous meetings between local officers and members. This working relationship and members' understanding of local feelings and circumstances has been found to be invaluable in reaching solutions.

We also share information about the domiciliary care situation, among other things, by attending Area Forum meetings in each area. The feedback from these sessions shows that this is appreciated and is often a very valuable forum for sharing information and two-way communication.

We do not have specific alternative arrangements for reporting cases where someone has to stay in hospital due to the lack of domiciliary care, but we will raise things as part of the above-mentioned discussions as necessary. Should members require information from us, we could easily identify the number of cases on the domiciliary care waiting lists involving people in hospitals.

Additional questions

In addition to the 4 main questions above, the Committee has asked us to respond to the following questions:

How does the Council ensure that the service given by the Council and the private sector is of the same quality? Can you provide a SWOT assessment to demonstrate the strengths and weaknesses of the service given by the Council and the private sector?

Cyngor Gwynedd provides more home care via its in-house provider than almost all other councils in Wales and England. This provides an opportunity to directly influence the quality of the service. One aim we had in introducing the new domiciliary care contracts was to ensure consistency across internal and external sectors. In the past, there were differences in the nature of the service (e.g. 'enablement' is only an internal service), staff terms (internal pay much higher, and travelling costs paid) and relationships with health and care teams.

Although the in-house provider has not signed a 'contract', they have agreed to work in accordance with the contract, and its developing programme of work is aiming towards that.

We have access to all external inspection reports from our internal and external providers, as well as each provider's self-evaluation reports. It is a statutory requirement that everyone provides an annual report. Furthermore, we have established a system whereby all providers, in conjunction with the health and care team locally, self-evaluate against the requirements of the contract.

An important step that needs to be taken, which is part of the Domiciliary Care Project Board's programme of work, is to establish a procedure for the collection of all the meters that are part of the domiciliary care contract. This will allow us to compare performance across sectors, and it would be easier to run a 'SWOT' exercise once that is in place.

Based on our knowledge, the nature of complaints, stakeholder comments etc., we have no room to believe that one sector is generally superior to another. What we see are pockets of good practice, and scope to learn from each provider. To this end a Provider Forum has been established, which is led by the providers, and a supportive group for sector-wide supervisors. This will enable people to support each other to continuously develop and improve.

What are the negative effects of using the private sector to provide a service rather than providing it in-house?

As noted above, we are not aware of any noticeable negative impacts attributable to the sector of the service provided. We believe that having a mixed market has its own benefits. Some of the providers offer valuable specialist skills, with a contractual nature providing a clear focus on financial viability as it is not as easy for an external provider to receive additional funding if they overspend. We must remember that the cost of a Local Government pension scheme means that the price of providing in-house domiciliary care is considerably higher than the external sector, even if the cost of all other aspects is the same.

That said, one can think of advantages to having only an internal market:

- Moving away from the mindset that care is something that is part of a buying and selling process and seeing it as a core component within public services and communities.
- Avoid costs and bureaucracy involved in commissioning, procurement and payment processes.
- Easier to overcome practical issues such as information governance requirements, access to buildings and alignment of practice or policy.
- Greater assurance that an appropriate % of the workforce are Welsh speakers and can meet the requirements of a More than Words strategy.
- Internal control therefore potential to implement changes sooner.
- Potential to consider changes in roles and the dissolution of boundaries between functions, to improve the experience of residents and strengthen collaboration.

What exactly does "commissioning others to provide a service" mean - does this mean commissioning the private sector? If so, what are the implications of that for the quality of care and workers' rights?

'Others' means a combination of 3rd sector and private providers. Following a tender process for 10 sub-areas, 3rd sector providers were awarded 3 of the 10 contracts. We have no evidence that the quality of care is better or worse dependent on the sector (internal, 3rd sector, private). Each provider's service is registered with Care Inspectorate Wales and is inspected regularly. In addition, the same safeguarding processes are followed for all providers, and we ask everyone to implement the same self-evaluation arrangements. Recently, the working arrangements of our Internal Quality Assurance team have been modified to strengthen the level of resource given to seek to ensure the quality of domiciliary care across sectors.

One of our main aims in preparing the new contract was to ensure greater consistency of workers' rights, and to improve them in general. At the time contracts were signed, hourly pay for external domiciliary care workers was expected to be at least equal to the Council's domiciliary care workers (and that level aligned with the Real Living Wage). Since then, the Council has increased staff salaries which means external staff earn less than internal staff (but still earn the Real Living Wage). The current external provider contract gives very specific expectations for staff rights (aspects such as minimum annual leave, an obligation to pay for uniforms and registration with Social Care Wales and paying for training and travel). There is evidence that staff rights in the sector have improved immensely since we adopted the new model.

The new Commissioning Framework puts the onus on us to:

- Arrange our services in a straightforward way
- Focus more on quality rather than cost

- Better manage services to ensure we prevent problems before they arise or worsen
- Collaborate more with the NHS and other organisations
- Give greater consideration to what exactly we want to achieve for people.

Our efforts to develop the way we provide home care are aligned with these principles, and this is conveyed in the contract we and the health board jointly have with our providers.

Do 'time and a half' payments still exist on weekends? Can you give an approximation of normal/weekend payments as well as comparing them to private sector payments?

Staff working for the Council no longer receive enhanced payments for working weekends. Some believe that changing this policy could have a positive impact on our ability to recruit and therefore reduce waiting lists and meet demand. As noted above, external providers are obligated to pay staff a minimum hourly wage under their contract. We know that many of them offer staff extra pay for working on bank holidays or weekends, but we have no evidence of the impact of this on recruitment and retention success.

5. Consultation

In preparing this report we have consulted with the internal teams involved in the provision and development of domiciliary care and taken into account the perspectives of our external providers.

An element that we are keen to strengthen is the way we go about hearing the voices of people receiving our domiciliary care service. We are considering introducing the use of the PERCCI recognised questionnaire to gather information on the impact of our services and establish a user and family group.

6. The Well-being of Future Generations (Wales) Act 2015

All relevant well-being goals under this act were considered when developing and commissioning our new domiciliary care model. Please note that we are co-commissioning with the Betsi Cadwaladr University Health Board, which is an example of working together for the benefit of the community to try to ensure the well-being of communities in the present and into the future.

7. Impact on Equality Characteristics, the Welsh Language and the Socio-Economic Duty

Please note that statutory / appropriate impact assessments have been prepared in making a business case to Cabinet and ensuring the right to move forward with the commissioning of the domiciliary care model in question. This was done in conjunction with the Health Board and can be sent to anyone wishing to see these.

MEETING	Scrutiny Committee
DATE	26.09.2024
TITLE	Transport for people living with Dementia to attend day care
REASON TO SCRUTINISE	Council Plan 2023-28 A Caring Gwynedd
AUTHOR	Sian Edith Williams Jones
CABINET MEMBER	Dilwyn Morgan

1. Why it needs scrutiny?

It is noted in the Council Plan under a Caring Gwynedd that supporting unpaid Carers and supporting well-being is a priority.

Some members are concerned that there is no transport available for people living with Dementia to attend day care and this lead to isolation, lack of socialising and a lack of respite for unpaid carers/family.

2. What exactly needs scrutiny?

- **The impact of not offering transport on the number who attend and their families**
- **Has there been a reduction in the number of people with dementia who attend day care due to not having transport to reach day care?**
- **Have any complaints been received from unpaid carers and what is the impact of this on them?**
- **What plans are in place to tackle the problem?**

Additional questions

- **Does attending day care have a positive impact on the people using the service?**
- **What is the data in terms of figures of those attending day care with dementia for the pre-covid period, post-covid and now since stopping the transport?**
- **What is offered instead of the day care sessions for those who are too poorly to attend and the sessions now unsuitable for them?**

3. Summary of the Key Matters

In the report we will set the current context on the day care provision available to adults with dementia in Gwynedd and the transport arrangements for it. There will be an emphasis on the Social Services and Well-being Act and the expectation for us to be considering individuals' personal resources and strengths when assessing and planning care and support needs. In addition to the transport question, it is hoped that this report

sparks real consideration of the type of day care needed by individuals living with dementia and their families today and into the future.

I would ask the committee to consider a wide and varied range of day provisions and that we move away from traditional day care models, for individuals with profound needs as well. It must also be recognised that the current situation with day care provision is not unique to individuals with dementia. Answers to the above scrutiny questions will be included in the relevant areas of the report.

3. Background / Context

Dementia is a destructive illness, and it is much more than just memory loss. It is a degenerative brain disease that restricts life and affects every part of an individual's physical, cognitive, emotional and social abilities. Dementia is a progressive condition that worsens over time, and a person with dementia increasingly has to rely on carers as the condition develops. It is anticipated that the number of people being diagnosed with dementia will increase, and recent evidence shows that more young adults (under 65 years) are being diagnosed with dementia. Dementia has a substantial impact on individuals, their families and their friends, which leads to great pressure on statutory Health and Care services and the third sector. Of the total of 45,000 people in Wales who are living with dementia, it is estimated that approximately two-thirds of them are living in the community, with the remaining one-third living in care or residential homes. A large part of the work of the Council's Community Resource Teams relates to supporting individuals with dementia and their families/carers.

4. Legal context

The Social Services and Well-being (Wales) Act 2014 is the legal framework for us to identify a person's personal outcomes and to assess their care and support needs. Social Services have a duty to meet the need if the resources (personally, in the community or by others) are not available for the person to meet their own needs.

Current 'Day care' (Traditional) provision

The Council has 3 day care provisions for older people living with dementia; Plas Hedd, Bangor, Llys Cadfan, Tywyn and Plas y Don, Pwllheli. It is noted that all 3 services are associated with and part of the care provision of the residential homes.

At Plas Hedd Day Centre, Bangor, the provision is currently full. 5 individuals attend per day, with a service available 2 days a week with 2 members of staff caring. Families take the individuals back and forth because the needs of the individuals are too severe to use independent taxis. Prior to the Covid period, Plas Hedd was able to accept more individuals (up to 12) due to 3 staff members supervising, one of whom was an Older People's Mental Health Nurse. Health has had to pull the staff member out of the centre due to the increased demand for nurses in the community.

At Plas Y Don, Pwllheli, and Llys Cadfan, Tywyn, 6 individuals are provided with a taxi to take them, an exceptional arrangement because there are no alternatives for them. The other attendees make their own arrangements, usually a lift by a family member. Centre staff have not received a complaint from the families about the lack of transport nor have

they seen a noticeable impact in attendance due to transport issues. Plas y Don and Llys Cadfan have seen the number of attendees and day care applications reduced but feel this is not due to transport.

A large number of other Council residential homes also offer day care to a small number of individuals depending on an adequate staffing situation and families arranging transport themselves. Home carers also often take individuals to day care when there is no other suitable option for them.

Overall across Gwynedd, demand for transport to day care has reduced since the Covid period. This is largely due to the reduction in 'traditional' day care provision, with Blaenau Ffestiniog and Cricieth centres not having re-opened since Covid (these were not dedicated services for individuals living with Dementia).

The adults teams have not received a complaint specifically relating to a lack of transport to dementia day care. One recent complaint came to the attention of our Customer Care Officer regarding a lack of transport to general day care (not dementia day care) because the minibus was unable to come to the door of the house due to poor and limited road conditions. Due to the specific circumstances, the Department agreed to pay for a taxi in this case as an exception.

BCUHB Health Dementia Day Provision

Specialist day care provision for individuals with dementia is provided by Betsi Cadwaladr Health Board in the Llŷn and South Meirionnydd area which provides carers with respite and clinical support to monitor the individual's health condition. At Hafod Hedd, Bryn Beryl Hospital Monday to Friday 9-5, for individuals with health needs related to or in addition to the dementia. 33 individuals currently attend Hafod Hedd, with numbers ranging between 10 and 15 each day. The number of days attended is dependent on the need and risk assessment. In terms of transport, the Health Service request that people make their own arrangements because hospital transport is unreliable. Most are taken by family members and others use the local community transport schemes 'O ddrws i ddrws' or 'Cymrod'. Also, some pay carers privately to take them. Attendance at Hafod Hedd is currently on the rise, staff are not aware of anyone not attending due to lack of transport and have not received a complaint about the lack of transport. They report that attendance is higher now than it was before Covid – perhaps due to the new location and being able to accept more people.

The transport arrangements to Hafod Hedd can be summarised as follows:

- 24 - Transport by family
- 4 - O ddrws i ddrws or Cymrod
- 3 - Hospital Transport
- 2 - Cyngor Gwynedd Dementia Support Worker

In addition to the above, it is thought important to highlight the types of alternative support available in Gwynedd for individuals living with dementia.

Dementia Actif

The Dementia Actif team works with a number of the community hubs and very effectively attracts new members and arranges transport for them at a reasonable cost. The individuals have varying needs and conditions, some living a lonely and isolated life. Everyone is welcome because physical activities and socialising are factors that help reduce the risk of dementia, and therefore preventative support. Dyffryn Ogwen and Dyffryn Nantlle Community Hubs (Yr Orsaf) provide transport to the Dementia Actif classes for members who would not otherwise be able to attend, with the cost set at £2 per trip/day. There is now an intention to collaborate with Henblas Community Hub, Bala, once they have established their community transport scheme and there are also initial conversations in Tywyn with the new hub under the umbrella of the Dementia Friendly Community. Some attendees pay for a taxi to come to the classes and others rely on volunteers.

Dementia Support Workers

It is very important for people living with dementia to remain in their own homes for as long as possible, and to receive support to remain safe and secure at home. Many people rely on their families and friends for support, and there is a need to ensure that these carers are given reasonable breaks from their caring roles so that they are able to continue as carers, and have lives of their own beyond the caring role. The Welsh Government's ICF funding has also enabled us to appoint Dementia support workers as part of the Community Resource Teams, in order to support individuals with dementia and their carers to remain independent in their communities. We have 5 Dementia Support Workers providing one-to-one day support at the home of the individuals who mostly have profound dementia. They also take individuals to day activities in the community when no other support is available.

Eryri Cydweithredol

The Council commissions Eryri Cydweithredol to provide day support in the homes of individuals with dementia, mostly individuals with profound dementia where it is not suitable for them to attend day activities. This is a support service that provides respite to unpaid carers who have a very intense caring burden and are dependent on receiving specialist support in their own home. Eryri Cydweithredol is currently supporting in the Caernarfon, Bangor, Porthmadog and Harlech areas.

This is a list of Gwynedd Day Activities and Community Transport (Third Sector) providers

3rd Sector Provider	Services offered
Yr Orsaf, Penygroes – Dyffryn Nantlle Area	Green vehicles taking people to Yr Orsaf day activities

Y Dref Werdd- Blaenau Ffestiniog area	Green vehicles taking people to y Dref Werdd day activities, a desire to extend the provision further.
Porthi Dre – Caernarfon Area	Arrangement with yr Orsaf, Penygroes, to borrow a vehicle and driver to take individuals who have no other means of accessing Porthi Dre
Partneriaeth Ogwen – Dyffryn Ogwen area	Green Vehicle, taking individuals to lunch clubs and on trips
Congl Meinciau, Botwnnog – Llŷn area	Using the O Ddrws i Ddrws or Bws Fflecsi service
Bala Community Hub	Applied for a grant to purchase a green vehicle
Tywyn Area	Community Hub and Community Transport schemes underway

Obstacles and Considerations

It is essential that transport provision is suitable and safe. From the examples above, you will see that a normal minibus or taxi is not always a suitable option, with risks of challenging behaviour and instances where the drivers have not been very supportive and sensitive to the vulnerable situation of individuals living with dementia. According to the experience of the social work teams, it is very difficult to find a taxi company willing to do this work for the Council. If they agree, the costs are often very high. There is also very limited supply/availability of vehicles with wheelchair access. More often than not, family members are the most suitable people to take their loved ones to day care. It is also important to note that the Council does not have the resources, vehicles or staff to provide transport with a chaperone/supervisor.

We have positive examples where Dementia Actif has collaborated with 'O Ddrws i Ddrws' in Llŷn, by providing 'Dementia Friends' sessions to staff. Staff at 'O Ddrws i Ddrws' had concerns about taking people with dementia as they had experienced very challenging situations in the past. Staff have now been on training with the Community Transport Association and staff report that this has been very beneficial.

“MiDAS (Minibus Driver Awareness Training) is a nationally recognised driver training and assessment scheme which focuses on putting the needs of passengers first. MiDAS trained drivers and the community transport providers they drive for hold a common pride in the caring, compassionate and supportive nature of the community transport sector. Central to MiDAS is the understanding that as a sector we remain responsive to the needs of passengers. To do this, it’s important to work with organisations that hold expertise and best practice to make sure drivers learn the best skills to support their passengers. The new MiDAS training round will include Dementia Friends information for all trainers and drivers.”

The financial climate must also be considered. The individual's contribution to the cost of the Council's day care is currently very low (£4 per day) and is based solely on contributing towards the meals provided. The Council has not been charging for the care provided to individuals from 10am-4pm mostly by 2 members of staff. This has not been considered in the Charging Policy in the same way as Home Care where there is a cost attached to every hour provided. The Council's Charging Policy is currently under review and this issue is one of the considerations for modification and to be discussed at this Committee. It is important to note that the Council provides financial welfare support to individuals through the Income and Well-being Team. Income and Well-being officers are available in every area to support individuals with care and support needs and their carers, to assess their ability to pay for services and enable them to submit a benefit application to pay for care services, including day care and transport.

Next steps

As can be seen from the report, the transport arrangements for individuals to attend the above activities/services are very varied. It is dependent on personal resources, individuals' financial circumstances, the availability and willingness of families to support and the availability of third sector resources in our communities. It also highlights that every effort is being made to ensure that individuals have access to local day services but consideration is first given to the availability of transport by family or friends or suitable and affordable local transport before there is an expectation on the Council to provide transport.

It is recognised that it can be argued that our position as a Council on transport is not clear and consistent enough and that Transport Policy needs to be considered for our service users. A review of the transport arrangements of the Adults and Children departments is already underway including the initial work on preparing and updating our transport policy.

It was decided to undertake this review due to inconsistency and a lack of clarity in terms of the use made of transport, the taxi/public and community transport booking procedures and the reasons for booking them and how/who pays. The main aim of the review is to ensure that there is a consistent system for transport across Gwynedd within social services. Contact will be made with other authorities to identify good and current practice. The policy shall be prepared in consideration of the following matters:-

- That transport is provided in situations when it is not possible for the individual to use public transport or other independent transport
- That the care and support plan enables the individual to be as independent as possible and to make the best use of their strengths, abilities and local resources
- That support is available for individuals to arrange suitable transport through local resources and the third sector
- That consideration is given to affordable transport arrangements and the support of the Income and Welfare Team with benefits to pay for care and transport

- That transport provision from the Council is only offered after all other options have been considered. In such exceptional circumstances, Direct Payments may also be considered.

5. Consultation with others for the report

Sian Griffiths – Gwynedd Well-being Team Leader

Geraint Jones - Customer Care Officer, Adults, Health and Well-being Department

Bethan Williams – Supporting Health and Well-being Manager (Community Resilience)

Mirain Llwyd Roberts – Supporting Health and Well-being Manager and Gwynedd Age Friendly Co-ordinator.

Manon Elwyn Hughes – Community Resource Teams Development Project Manager (Cyngor Gwynedd and Health Board)

Emma Quaeck – Supporting Health and Well-being/Dementia Actif Manager

Idwen Roberts – Bangor Day Care Manager, Plas Hedd

Nia Thomas – Day Care Manager Plas Y Don, Pwllheli

Katey Louise McMullen – Llys Cadfan/Tywyn Day Care Manager

Glenys Williams (Betsi Cadwaladr University Health Board) – Hafod Hedd Day Centre, Bryn Beryl

Gwynedd Dementia Super Group Members – Users and Carers Group

Melanie Sillett - Regional Dementia Project Manager

6. The Well-being of Future Generations (Wales) Act 2015

Have you included residents / service users? If not, why and how do you intend to consult with them?

Further consultation on general day care provision is planned on a local area basis. This will start with the Cricieth area

If Committee members are aware of individuals who have stated that they are unable to attend day care due to transport, the service would be pleased to receive the information in order to contact them.

Have you considered working together?

The Council is already working with the third sector and the Health Board on day care issues and developments in the Third Sector through our community resource teams and our Supporting Health and Well-being Managers

What has been done or will be done to prevent problems arising or worsening in the future?

An evaluation of day care provision is underway by the Department. The aim is to improve the way individuals can be supported within their communities rather than providing 'traditional' day care. Our collaboration efforts with local 3rd sector groups and programmes such as Dementia Actif are already showing progress and puts us in a stronger place to support vulnerable residents in the County.

How have you considered the long-term and what will people's needs be in years to come?

Local and national data collection highlights projections that the older population (over 65 and specifically over 85) will increase significantly over the next 20 years. This means there will be a growing and significant demand for services to support individuals, families and carers living with dementia. Work within the Council to look at the likely impact of this on service provision along with a programme of work to meet the challenges has also been completed. It is hoped that it can be published soon.

To ensure integration, have you considered the potential impact on other public bodies?

We already work closely with the Health Board in providing services to support individuals living with dementia along with their carers and families. Their feedback has contributed to this report. It can be confirmed that close/integrated collaboration between health and care staff happens in our Community Resource Teams

7. Impact on Equality Characteristics, the Welsh Language and the Socio-Economic Duty

For Welsh-speakers living with dementia, receiving care and support in their mother tongue or the language of their choice is a matter of clinical need.

The vision contained in the Dementia Action Plan for Wales 2018-2022 is "for Wales to be a dementia friendly nation that recognises the rights of people with dementia to feel valued and to live as independently as possible in their communities." The Adults, Health and Well-being Department is committed to meeting the requirements of the plan and reports on the successes and barriers to a Dementia Delivery and Action Assurance Group.

Dementia is a particular theme within the National Ageing Well Programme. One of the aims of the programme is to "make Wales a dementia supportive nation by building and promoting dementia supportive communities." Our vision as a Council is to support all the people of Gwynedd to thrive and live full lives in our community, in a county which is one of the best counties to live in. It is a priority in the Council plan to ensure that we will have care services which help people to live their lives in the manner of their choosing.

8. Appendices



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TITLE	Annual Report on the Adults, Health and Wellbeing Department and Children and Supporting Families Department’s Complaints, Enquiries and Expressions of Gratitude Procedure for 2023-24
PURPOSE	To prepare an Annual Report on the implementation of the Representations and Complaints Procedure for submission to the Cabinet and Scrutiny Committee in order to scrutinise and monitor the arrangements for dealing effectively with complaints received from service users and their representatives.
AUTHOR	Marian Parry Hughes – Head of Children and Supporting Families Department Aled Davies – Head of Adults, Health and Well-being Department
CABINET MEMBERS	COUNCILLOR Dilwyn Morgan COUNCILLOR Elin Walker Jones
DATE OF THE SCRUTINY COMMITTEE	26/09/24

1. Introduction

1.1 In accordance with the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014 that came into force on 1 August 2014, the Director of Social Services is required to produce an annual report on the way complaints are handled and investigated within the Children and Supporting Families Department and the Adults, Health and Well-being Department. The report is produced by the Customer Care Officers of both Departments, on behalf of the Director of Social Services.

1.2 The purpose of this report is to provide information on the number of complaints received by the Children and Supporting Families Department and the Adults, Health and Well-being Department during the year, the reasons for them as well as the solutions. The report also contains a summary of the lessons learnt and the action taken on the complaints received. There are also details about the number of access to information requests and freedom of information requests received during this period.

2. Context

2.1 Both Departments are required to put a statutory Representations and Complaints Procedure into practice, in accordance with the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014. There is a commitment to prepare an

Annual Report on the implementation of the Representations and Complaints Procedure for submission to the Council's relevant Scrutiny Committee so that it can scrutinise and monitor the arrangements for dealing effectively with complaints received from service users and their representatives. It is important that a record is kept of the representations and complaints so that the Department can learn lessons from them, as part of the process of improving the services provided. It is good practice to share the annual complaints report with the members of the Council to ensure transparency. The statistics for complaints under the Department's Representations and Complaints Procedure are reported separately to those of complaints where a response was provided under the Council's corporate Concerns and Complaints Policy. This enables the Scrutiny Committee and the Cabinet to regularly scrutinise the statistics for complaints.

2.2 The Children and Supporting Families Department's Customer Care Officer is managed by the Assistant Head of Safeguarding and Quality in the Children and Supporting Families Department.

The Adults, Health and Well-being Department's Customer Care Officer is managed by the Department's Assistant Head of Safeguarding and Quality Assurance.

Although the Officers are based within their Departments, it is important to note that the Officers are independent to ensure that complaints are dealt with according to the Social Services Complaints Procedure (Wales) Regulations 2014. The Social Services Complaints Procedure specifically concerns individuals receiving a service from one of the two Departments, or who have the right to represent the service user.

The Customer Care Officers are responsible for:

- Coordinating the service's arrangements in order to comply with the Representations and Complaints Procedure;
- Record complaints and positive and negative representations from service users and their representatives;
- Monitor the response to complaints within the timetables determined in the regulations for dealing with complaints under Stage 1 of the procedure;
- Co-ordinate investigations by independent investigators into formal complaints under Stage 2 of the procedure;
- Ensure that a formal written response is sent along with a copy of the independent investigation report (or a summary of the outcome) to the complainant within 25 working days under Stage 2 of the procedure, and inform the complainant if a delay is anticipated;
- Co-ordinate responses from Social Services to enquiries from the Office of the Public Services Ombudsman for Wales regarding complaints about matters relating to the Adults, Health and Well-being Department;
- Monitor Action Plans to ensure that lessons are learnt from complaints in order to improve the quality of services;

- Develop the internal Representations and Complaints Procedure;
- Ensure that information is available to facilitate access to the Representations and Complaints Procedure for service users and their representatives.
- Provide training and support to promote understanding of the Representations and Complaints Procedure among the staff of the Adults, Health and Well-being Department.
- The Customer Care Officer for Adults is a member of the Disabled Parking Spaces Panel which is responsible for coordinating the process of assessing applications from the public for designated disabled parking spaces outside their property.

3. Ease of use of the Complaints Procedure

- 3.1 When a person contacts the Customer Care Officers, it relates to dissatisfaction with the Departments' service, and deciding to make a complaint is usually their last resort. The Customer Care Officers focus on facilitating access to the Complaints Procedure so that people are aware of their right to be heard and have a full investigation into their complaint.
- 3.2 To this end, information about the complaints procedure receives considerable publicity and is available in a variety of formats e.g. leaflets, on-line and 'easy to read' versions. All the information is available in Welsh and English so that the complainant can choose his/her preferred language. Alternative arrangements such as Braille or other languages are available on request. Advocacy or other support is available to the complainant in their chosen language to assist the progress of the Complaints Procedure. Information leaflets are continuously amended and updated.
- 3.3 In accordance with the arrangements of the complaints procedure, on some occasions, it is not possible to receive a complaint at that time. If there is a current Police investigation, an investigation under the Safeguarding procedure, a current Child Protection investigation, or the matter is being addressed before the Court, we cannot accept the complaint. Accepting a complaint could disrupt any ongoing investigation that is currently taking place. In such a case, we would advise the complainant of the reasons, once the investigation has come to an end we can then start the complaints process.

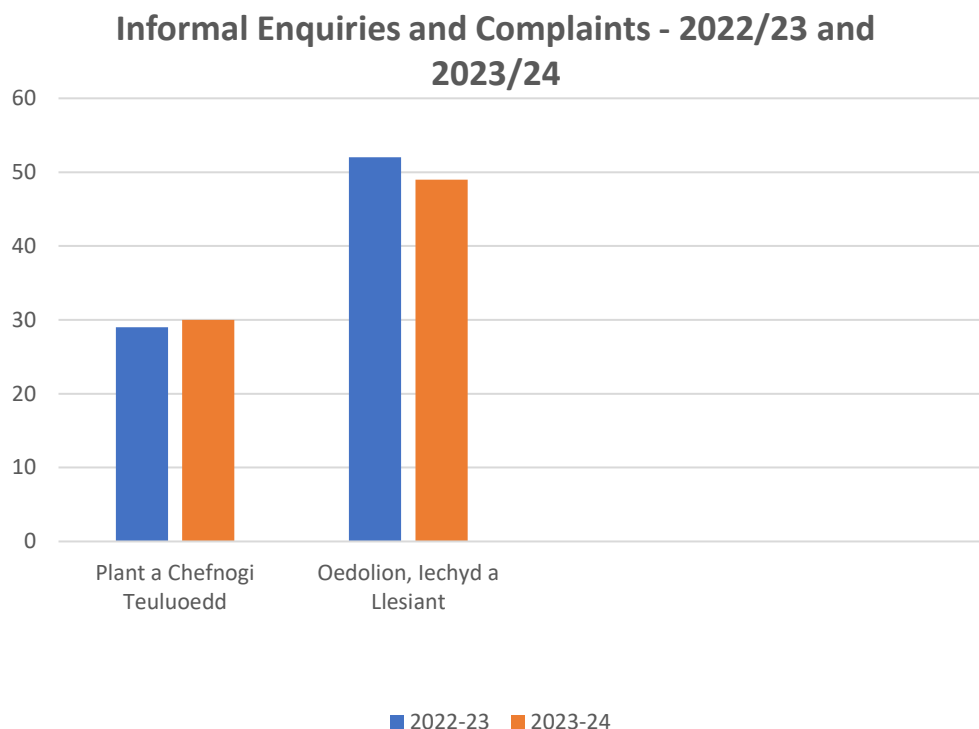
4. Matters recorded as Enquiries

- 4.1 The aim is to respond to every complaint with fairness, impartiality and respect so that the individual is confident that his/her complaint will be handled professionally and positively, rather than negatively. Often, when the individual decides not to follow the Complaints Procedure, the matter is dealt with as an enquiry or informal complaint. Another example of this would be a letter from a Member of Parliament or local Councillor who wishes to express dissatisfaction or wants an answer to a specific question.

4.2 By responding positively during these initial stages, some matters can be effectively resolved without the need for the Complaints Procedure as this is an opportunity to address any misunderstandings or to respond to enquiries. Without a doubt, this is the best outcome for everyone. See Table 1(a) and 1(b) below for a breakdown of the source of each enquiry and the unit/service that is responsible for responding to that particular enquiry.

TABLE 1(a) – Enquiries and Informal Complaints received by the Children and Supporting Families Department		
	2022/23	2023/24
Solicitors	1	2
Ombudsman Enquiry	2	3
Local members	1	
Members of Parliament or Assembly Members	7	5
Service Users		1
Relative	18	15
The Public		1
Foster Carer		1
Other Agent e.g. advocacy service		2
Total	29	30

TABLE 1(b) – Enquiries and Informal Complaints received by the Adults, Health and Well-being Department		
	2022/23	2023/24
Solicitors		1
Ombudsman Enquiry		
Local members	4	3
Members of Parliament or Assembly Members	25	16
Service Users	2	
Relative and/or Carer	9	14
The Public	9	10
Issues with Disabled Parking Spaces		2
Another agency		1
Other Counties		1
The Police		
Older People's Commissioner		
External Companies Providing Care	1	1
Cyngor Gwynedd Staff (another Department)	1	
Health Board Staff	1	
Total	52	49



5. Stage 1 – Social Services Statutory Complaints Procedure – Local Resolution

5.1 Every effort is made to resolve the complaint so that the complainant and the Department are satisfied. Obviously, a local and early resolution is the best resolution for everyone, and this can be achieved by investing time and effort early. However, if the complainant decides to lodge a formal complaint under Stage 1 of the Complaints Procedure, the usual procedure is for contact to be made on the telephone, via e-mail or face to face with the complainant or a representative to try to resolve the matter. Over the years, the Customer Care Officers have successfully established close working relationships with the teams, managers and legal service as a means of discussing and resolving matters, and this is reflected in the small number of complaints that reach Stage 2 of the Complaints Procedure.

5.2 Sometimes, a concern can be resolved by the end of the following working day, and in such cases, it does not need to be recorded as a complaint under Stage 1 of the Complaints Procedure. Instead, they will be recorded as Informal Enquiries and Complaints. In addition, on some occasions, the complainant would state that they do not wish to make a formal complaint under Stage 1 or Stage 2 of the Complaints Procedure.

At other times, the concerns received are related to historic issues and, consequently, they are not eligible for investigation under the Complaints Procedure, albeit some sort of response will be provided when appropriate. In the case of some concerns, it is not possible to respond to them under the Complaints Procedure if doing so would harm legal proceedings or

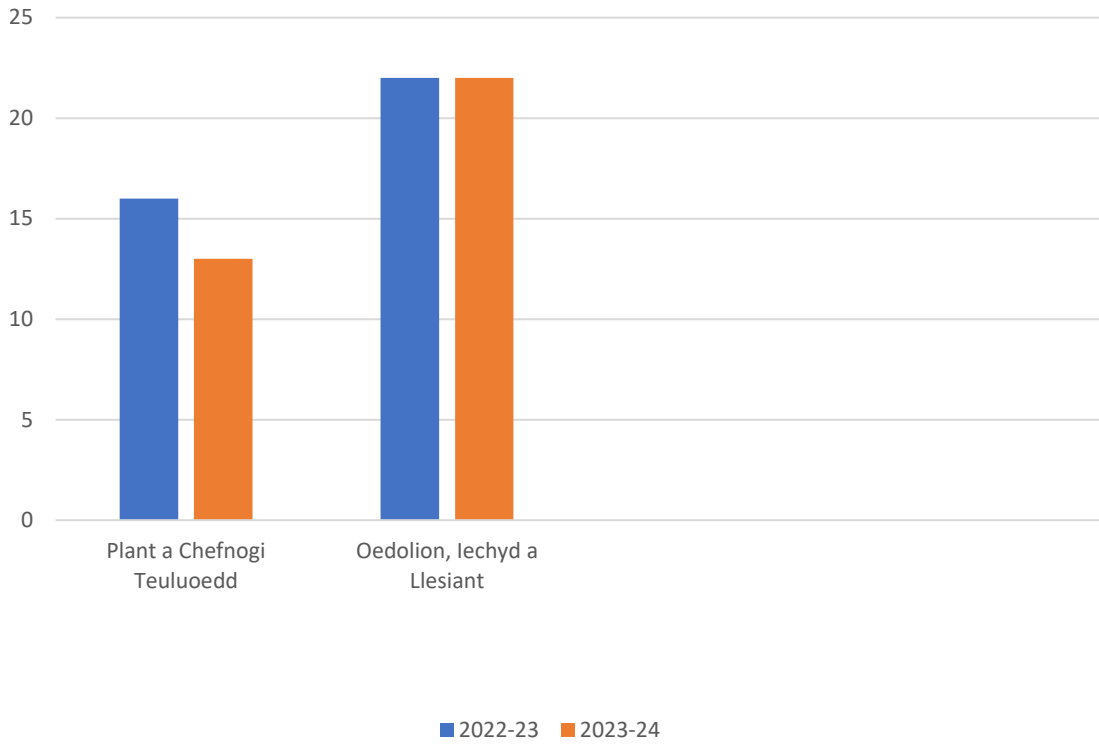
adult protection investigations currently underway. The complainant will be informed of their right to resubmit the complaint once the current case is concluded, if they so wish.

- 5.3 Formal complaints are dealt with under the Social Services statutory complaints procedures. Following receiving the complaint, it is sent on to the relevant Team Manager and the Assistant Head. The relevant Team Manager or the Assistant Head will contact the complainant on the phone to discuss their complaint and try to find a solution. Following this discussion, the Assistant Head sends a letter confirming the discussion on to the complainant. If the complainant does not want a phone discussion, then it is possible to only send a written response. In accordance with the guidelines, the Department has 10 working days to contact the complainant to discuss their complaint, and then five working days to confirm the discussion by letter.
- 5.4 If the complainant is unsatisfied with the response under Stage 1 of the complaints process, then they can ask for the matter to be escalated to Stage 2 of the Social Services Complaints procedure. In accordance with the guidelines, the relevant Department has 25 working days to complete a Stage 2 investigation. In exceptional cases, it is possible to extend the timetable if necessary. It is also important to note that the Complaints Arrangement allows the complainant to ask the relevant Department to upgrade their complaint straight to Stage 2 of the Complaints Procedure and choose not to receive a formal response under Stage 1.
- 5.5 **Table 2** below shows the number of formal complaints received by both Departments between 01/04/23 and 31/03/24, with figures from the following year included for comparison.

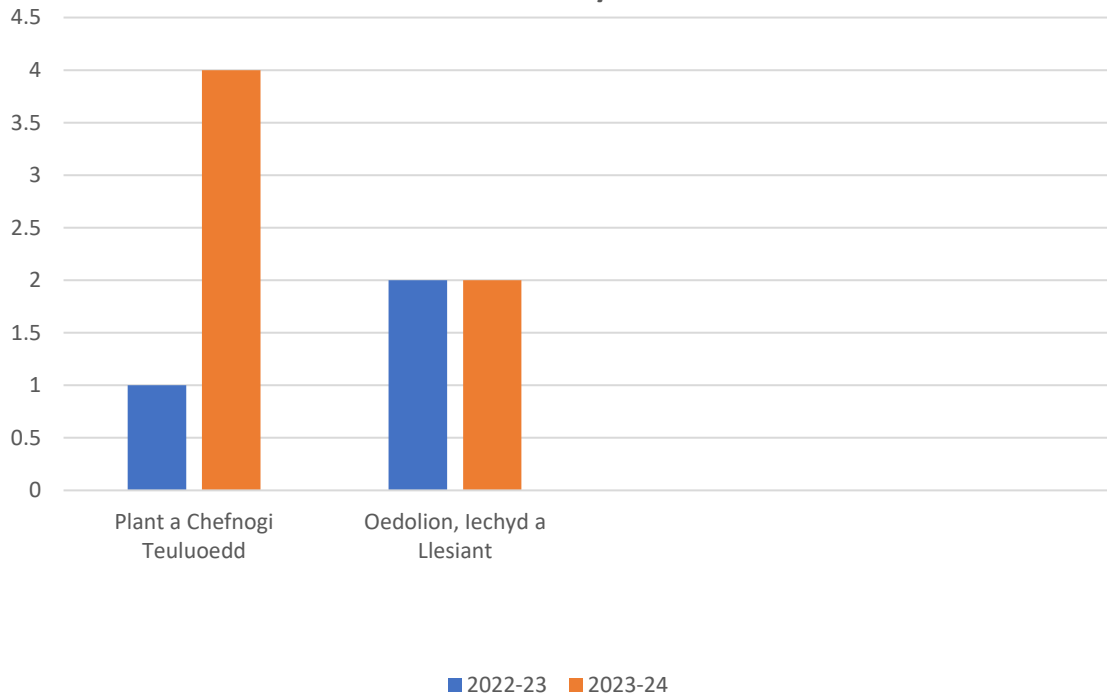
Examples of the complaints received by both Departments are seen in **Appendices 1(a) and 1(b)**.

TABLE 2 Social Services Statutory Complaints Procedure		
CHILDREN AND FAMILIES DEPARTMENT	2022/23	2023/24
<i>Stage 1</i>	16	13
<i>Stage 2</i>	1	4
<i>Ombudsman</i>	0	0
Total	17	17
ADULTS, HEALTH AND WELL-BEING DEPARTMENT		
	2022/23	2023/24
<i>Stage 1</i>	22	22
<i>Stage 2</i>	2	2
<i>Corporate Complaints Procedure</i>	0	2
<i>Ombudsman</i>	0	0
Total	24	26

Number of Stage 1 Complaints for each Department - 2022/23 and 2023/24



Number of Stage 2 Complaints for each Department - 2022/23 and 2023/24



6. Stage 2 – Social Services Statutory Complaints Procedure – Formal Investigation

6.1 Should a complainant wish to escalate his/her complaint to Stage 2, he/she would have to provide a full record of the complaint along with any achievable outcomes; this would then form the basis to what we call a Stage 2 Investigation. For both Departments, the investigation is conducted by a person independent of the Council, known as the Independent Investigator. In addition, in a case of a complaint regarding the Children and Supporting Families Department, an Independent Person needs to be appointed. Their role is to meet the complainant, interview relevant staff and read the social care file. Following this, they create a report of their findings along with any recommendations for the relevant Departments. The Department will prepare a response to these recommendations to be shared with the complainant.

Both Departments are responsible for funding their own investigations by commissioning an independent investigator, and the independent person when relevant, as a self-employed individual. Investigation costs vary according to the complexity of the matter and the time needed to gather the evidence and create the report.

If the complainant continues to be unhappy after following the Stage 2 process, they can ask the Ombudsman to investigate further.

By following the principle of focusing on an early and local solution successfully, and dealing with matters quickly and effectively, the need to move complaints forward to Stage 2, is uncommon in Gwynedd. It is understood that Gwynedd leads all other north Wales counties in this regard. It is a clear sign of the commitment of the Customer Care Officers, through the willing cooperation of the relevant staff in each individual case, to resolve every complaint in an effective and timely way.

6.2 During 2023/24, the Children and Families Department received four applications to upgrade a complaint to Stage 2 of the Social Services Statutory Complaints Procedure. The four complaints were upgraded immediately to Stage 2 following the complainant's direct application in accordance with the social services complaints guidelines. Therefore, Stage 1 had not taken place in these cases. This is an unusual trend. Considering the circumstances of the four cases, the reasons for this are understandable. An analysis of the four Stage 2 Investigations is in **Appendix 1(a)**.

Two complaints moved to the Adults, Health and Well-being Department from Stage 1 to Stage 2 during 2023/24. Both complaints were upgraded to Stage 2 of the complaints process following the complainant's request after they received a formal response under Stage 1. See **Appendix 1(b)** for further details.

7. Investigations into complaints received by the Public Services Ombudsman

- 7.1 If the complaint is not resolved at the end of an investigation under Stage 2 of the Complaints Procedure, the complainant has the right to refer the case to the Public Services Ombudsman for Wales, or the Welsh Language Commissioner, or the Equality and Human Rights Commissioner, depending on the nature of the complaint.
- 7.2 A complainant has the right to contact the Ombudsman at any point, but the Ombudsman usually expects the complainant to go through the whole complaints process before they look at the matter. Therefore, the Ombudsman would refer the complainant back to the Department to try to solve the complaint locally.
- 7.3 Every historical matter that was open under the Ombudsman has now been resolved and closed to the Children and Supporting Families Department. No new investigations were received by the Ombudsman's office in 2023/24 by either of the two Departments during the period of this report.

8. Complaints about services jointly provided with the Health Board

- 8.1 A joint complaints protocol exists for Betsi Cadwaladr University Health Board and the six Local Authorities in North Wales. No joint responses were submitted to complaints under this protocol during 2023/24.

9. Adherence to the Statutory Complaints Procedure Response Timetable

- 9.1 The Local Authority has a duty to provide information on the way it investigates and deals with complaints within the timetable noted in the Guidelines and Regulations. Once a complaint is received, the relevant manager or senior practitioner will offer to contact the complainant to propose a meeting/phone call within 10 working days in order to discuss the complaint and seek a resolution. Then, we will write to the complainant within 5 working days of the discussion to confirm the terms of the complaints resolution.
- 9.2 The Adults, Health and Well-being Department managed to respond to 82% of Stage 1 complaints within this timetable during 2023/24. The Children and Supporting Families Department managed to respond to 92% of complaints within the same timetable during 2023/24.
- 9.3 The reasons for any late responses were mainly related to the complexity of the complaint in question, and the research that needs to be undertaken to be able to provide a full response. The sickness absences, annual leave etc. of the Customer Care Officer and staff associated with the complaint also have a significant impact on the ability/failure to adhere to the response timetable.

The timetable for providing a written response confirming the outcome of the discussion is very tight, namely 5 working days. Nonetheless, most complainants do receive a response within the timetable or have agreed to extend the timetable.

Social Services Statutory Complaints Procedure – Children and Supporting Families Department – Response Performance 2023/24

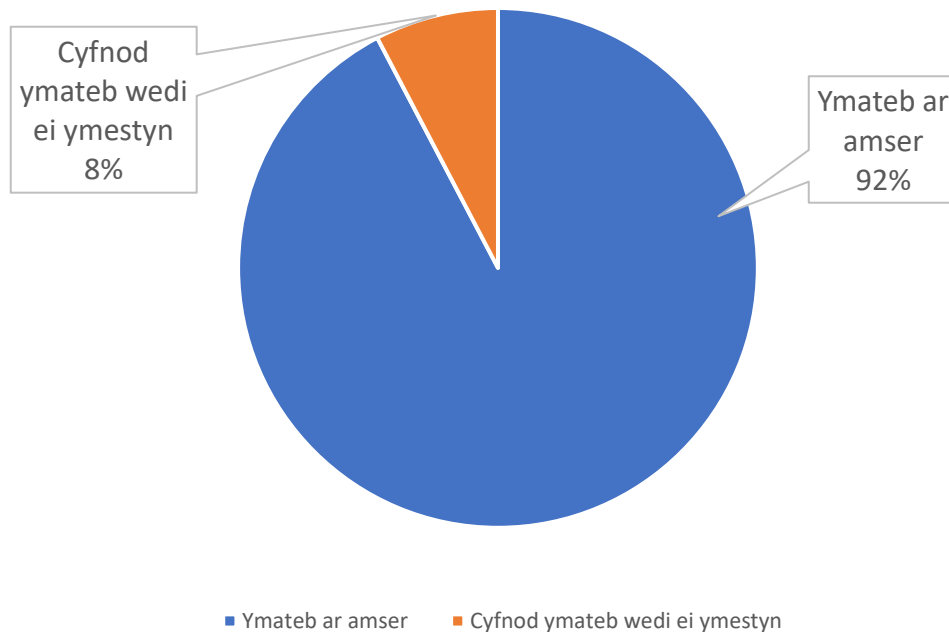
Stage 1 (total – 13)

<i>Complaints received within 12 months of the incident</i>	<i>Complaints received 12 months after the incident</i>	<i>Acknowledged within 2 days</i>	<i>Discussion to resolve within 10 days</i>	<i>Decision announced within 5 days</i>	<i>Response time extended</i>	<i>Average number of days extended</i>
13	0	13	12	12	1	5

Stage 2 (total – 4)

<i>Number acknowledged within 5 days</i>	<i>Number of responses received within 25 working days</i>	<i>Total delayed under exceptional circumstances</i>	<i>Number completed within 6 months</i>
4	3	1 (5 additional days)	1

**Perfformiad ymateb i Cwynion Cam 1 a Cham 2
Plant a Chefnogi Teuluoedd - 2023/24**



Social Services Statutory Complaints Procedure – Adults, Health and Well-being Department – Response Performance 2023/24

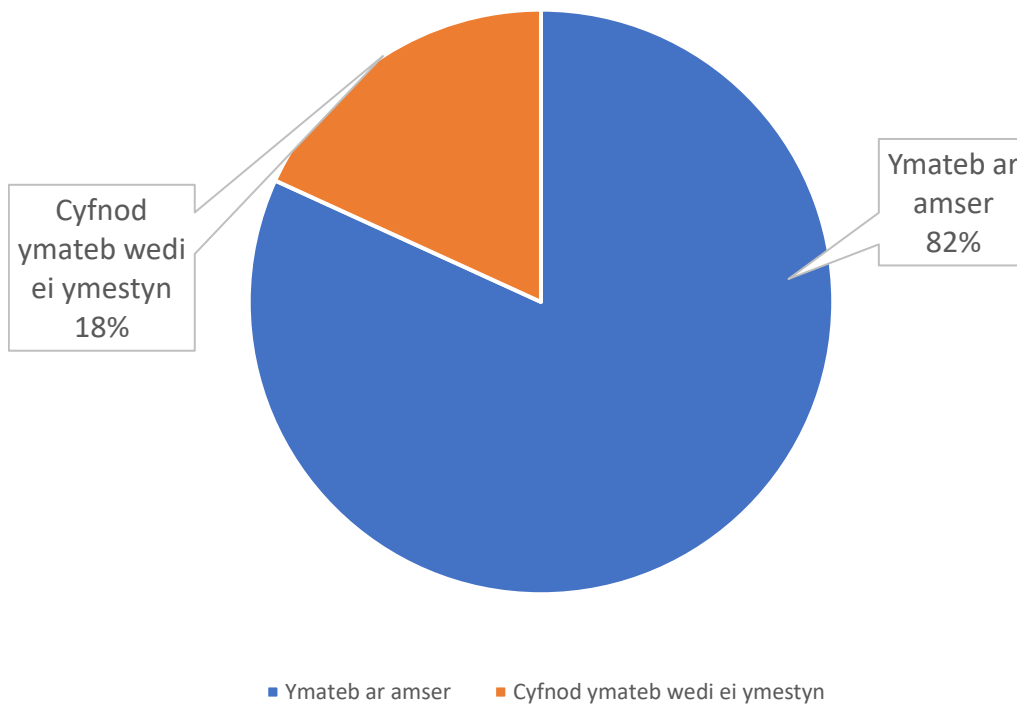
Stage 1 (total – 22)

<i>Complaints received within 12 months of the incident</i>	<i>Complaints received 12 months after the incident</i>	<i>Acknowledged within 2 days</i>	<i>Discussion to resolve within 10 days</i>	<i>Decision announced within 5 days</i>	<i>Response time extended</i>	<i>Average number of days extended</i>
22	0	22	19	18	4	10

Stage 2 (total – 2)

Number acknowledged within 5 days	<i>Number of responses received within 25 working days</i>	<i>Total delayed under exceptional circumstances</i>	<i>Number completed within 6 months</i>
2		2	2

**Perfformiad ymateb i Cwynion Cam 1 a Cham 2
Oedolion, Iechyd a Llesiant - 2023/24**



10. Cyngor Gwynedd's Corporate Complaints Procedure

- 10.1 Some matters that are beyond the remit of the Social Services Complaints Procedure are dealt with under Gwynedd's Corporate Complaints Policy. Complaints that are handled under the Corporate Complaints Procedure mainly relate to matters that are not associated directly with the care services that the Departments offer under the Social Services and Well-being (Wales) Act 2014.
- 10.2 Two complaints were received this year from the Adults, Health and Well-being Department and they were addressed under the Council's Corporate Complaints Procedure. More information about these complaints is available in **Appendix 2**.

11. Learning Lessons and Identifying Trends

Learning Lessons

- 11.1 Quarterly reports on dealing with complaints are presented to the Management Teams of the Children and Supporting Families Department and the Adults, Health and Well-being Department. This is an opportunity for the Assistant Heads to analyse every complaint and to discuss and learn to improve the service provided to Service Users.
- 11.2 The Management Teams include the lessons learnt in their amended work plans and any training needs are identified. The current lessons to be learnt log is administered by the Customer Care Officers. The log is regularly distributed amongst the Assistant Heads to notify them of the lessons that have been identified. The log will be updated with any information about actions taken in connection with the lessons to be learnt. It is hoped that this will be a more effective way of identifying lessons and ensuring that improvements are actioned.

Complaints Trend – Children and Supporting Families Department

- 11.3 The Children and Supporting Families Department works daily with a wide range of different families. Some families come to the Department's attention through a direct request for assistance, for example, if their child is disabled. Most families come to the Department's attention because of concerns for a child or young person's health and safety.
- 11.4 Due to the nature of the Department's work, and specifically Social Workers, tension or conflict with families is unfortunately inevitable at times. Social Workers must make very difficult decisions, and families are not always happy. The Department understands and accepts that families can be dissatisfied, which then leads them to make a formal complaint against the Department.
- 11.5 It is fair to note that it is difficult to see whether there are specific trends or clear themes in the complaints received during 2023/24, as each complaint

tends to be unique to each case. In accordance with the Complaints Procedure, the Team Manager or the Assistant Head will discuss the complaint with the complainant. Through discussion, the Team Manager can respond to matters directly and most cases are resolved over the phone; it is clear that this way of dealing with complaints works. In most cases, the complaint stems from misunderstanding and miscommunication. Once the matters are fully explained, the complainant will be happy most of the time.

- 11.6 It is also very important to note, on several occasions when a complainant initially contacts the Customer Care Officer, they are highly emotive – they could be angry or concerned about a decision or a misunderstanding. In most cases, the complainant will be satisfied once they have been given the opportunity to discuss their concern with the Customer Care Officer, first of all, and then with the relevant Team Manager, and they would be happy with the outcome of these discussions.

Tiresome Complainants / Difficult Individuals

- 11.7 We work in a special field, with the need to respond to vulnerable cases to ensure the well-being of Gwynedd children and young people. This can lead to conflict with families; between the need to safeguard a child which is contrary to their parents' wishes. This therefore means that we come across some difficult and dangerous individuals at times.

The biggest trend in 2023/24 and seems to be continuing into 2024/25 is individuals that can be described as difficult or tiresome complainants. Difficult complainants are individuals where an effort has been made to respond to their complaint but they continue to be dissatisfied and usually behave in an increasingly abusive or threatening way. Despite presenting explanations through the Stage 1 process or sometimes the results of Stage 2 independent investigations, they continue to be dissatisfied and it is not possible to persuade or satisfy them. They become increasingly frustrated, and it is challenging to try and keep their comments confidential. For example, complainants who choose to share sensitive information publicly about their circumstances by spreading rumours about organisational corruption and threaten individual staff members. There are corporate policies to deal with tiresome complainants. This allows us to manage how we respond to them. The threshold for this is high and staff can experience long periods of difficult contact and face threats before being able to put this to work. This means not only dealing with continuous communication from individuals about matters but that these individuals are sometimes threatening to the staff trying to maintain their statutory duties. On several occasions, the need to escalate matters for the attention of Health and Safety has been raised, and the need to write warning letters to those individuals to explain that such behaviour will not be accepted by the Council. The balance of ensuring an individual's right to complain and receive full attention in accordance with the complaints arrangements and ensuring staff safety is very difficult at times. Also, when dealing with difficult individuals like this,

there is a need to ensure that the complaints procedure does not disrupt the Service's ability to safeguard the child/young person.

It is also important to note, that as a Department we welcome complaints, it is a way to understand what is happening in our department and learn and develop in accordance with need. Individuals who are identified as tiresome complainants use the complaints process to try and put pressure on staff to change decisions, sometimes they use the process to get their own way despite not being the best action for the benefit of the child or young person in question. Clearly, this is not the purpose of the complaints procedure, this process is to give a voice to individuals who feel that they have been failed by the Department, and not to put pressure and threaten Council staff.

Complaints and Enquiries Trends – Adults, Health and Well-being Department

11.10 The Customer Care Officer is part of the Safeguarding and Quality Assurance Unit (Adults) and has a close relationship with the Care Monitoring Officers and the Safeguarding Officers. This is essential in order to share information to identify Safeguarding cases. Sharing information about any complaints received regarding the care of individuals in residential homes is useful to identify broader care problems in those organisations that will require further investigation from the Monitoring Officers

11.11 A variety of complaints and enquiries were received on different themes during the year and no specific theme became apparent.

There was a substantial reduction in the number of complaints/enquiries received on the most prominent theme brought to our attention during the last two years, namely complaints and enquiries about the difficulties that we have had as a Department to provide sufficient domiciliary care hours when the need arose. Two complaints were received on this theme this year.

No other specific trends were identified among the wide range of issues received during the year 2023/24.

12. Training and Staff Awareness of the Complaints Procedure

12.1 Providing training to staff about the Complaints Procedure is an important aspect of Customer Care, so that staff members are fully aware of the procedure and are confident of their role within it. The Customer Care Officers are always available to discuss any specific cases with the Departments' staff members and offer advice on the best way of dealing with enquiries or complaints against the Department. An e-learning session for every staff member of both Departments has been developed to ensure that staff are fully aware of the complaints procedure and the expectations on staff during the process. We will monitor the numbers undertaking the training and target staff members that have not completed it.

13. Other Duties

13.1 The Adults, Health and Well-being Department's Customer Care Officer is a member of the Disabled Parking Spaces Panel, which is responsible for coordinating the process of assessing applications from the public for designated disabled parking spaces outside their property. A Panel meeting is held every three months. The Officer is responsible for ensuring that application forms are up-to-date and correct, and is responsible for receiving enquiries over the phone, by letter and e-mail. The Customer Care Officer is responsible for the whole process of recording the receipt of applications and their outcomes, co-ordinating Panel meetings, and communicating application outcomes by letter after each Panel meeting.

13.2 The Children and Supporting Families Customer Care Officer also deals with access to information requests in accordance with the Data Protection Act 1998 / Data Protection Act 2018. The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 were introduced on 25 May 2018, and as a result, there were some changes in the way access to information requests are dealt with. The Adults, Health and Well-being Department has an Administrative and Information Officer who is responsible for receiving and responding to these requests.

13.3 The access to information requests under the Data Protection Act 1998 / Data Protection Act 2018 are made by individuals, the Police, Solicitors, the Health Board as well as other Local Authorities. In accordance with the Act, there are specific timetables to adhere to, and the response timetable has become much more challenging since the new Act was introduced.

13.4 Determining what information is appropriate to be released is work that demands skill and can be emotionally challenging at times. The Officers who deal with information requests spend long hours on some of the more complex requests that the Departments receive. This means that a large bulk of hours are spent to ensure that information requests are responded to within the specified time.

13.5 It is also the responsibility of the Children and Supporting Families Department's Customer Care Officer to coordinate responses to freedom of information requests under the Freedom of Information Act 2000. The number of requests under the Data Protection Act 1998 have increased over the last year. We are seeing an increase in requests from the Police, other Agencies and subject access requests, the reason for this increase is unclear.

The number of information requests received by both Departments can be seen in **Table 5(a) and 5(b)** below.

TABLE 5(a) - Information requests - Children and Supporting Families		
	2022/23	2023/24
Requests under the Freedom of Information Act 2000	75	88
Data Protection Act 1998 / Data Protection Act 2018	202	228
Total	236	316

Ceisiadau am Wybodaeth - Plant a Chefnogi Teuluoedd

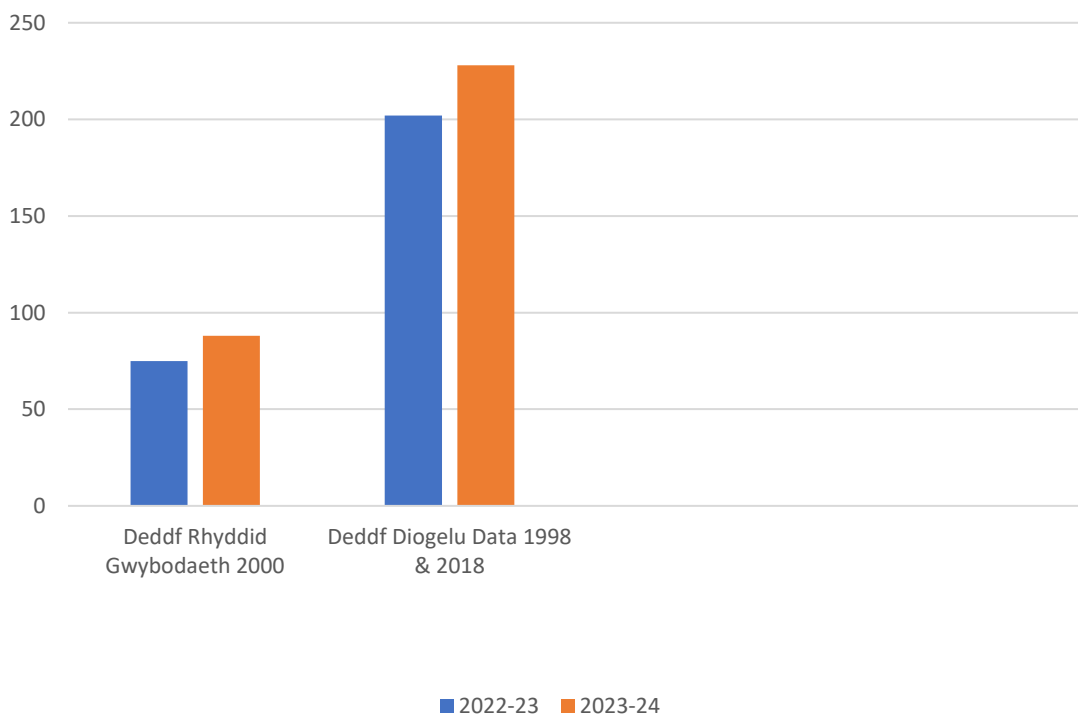
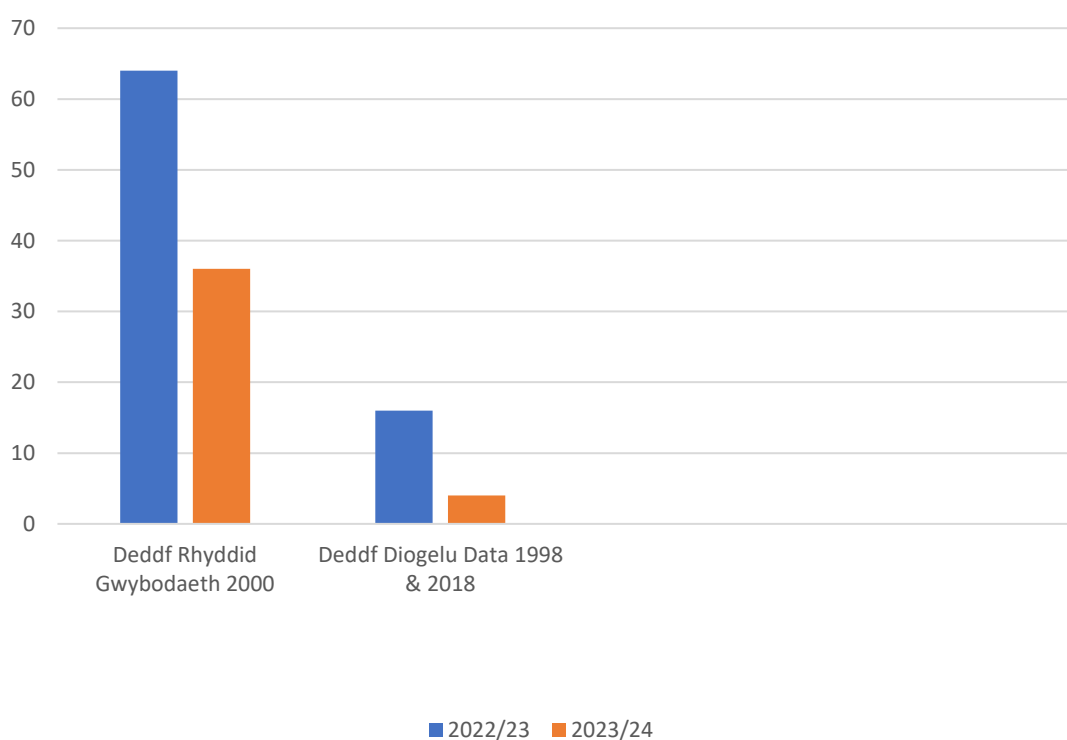


TABLE 5(b) – Information requests - Adults, Health and Well-being		
	2022/23	2023/24
Requests under the Freedom of Information Act 2000	64	36
Data Protection Act 1998 / Data Protection Act 2018	16	4
Total	80	40

Ceisiadau am Wybodaeth - Oedolion - 2022/23 a 2023/24



14. Expressions of Gratitude

14.1 As well as responding to concerns, complaints and other representations from service users, their families, and members of the public, it is also crucial that we acknowledge and record the expressions of gratitude we receive from our service users, families, members of the public and from staff from other agencies.

In addition to the thanks and compliments recorded by the Customer Care Officer on the RESPOND recording system, we are aware that many thanks, gifts etc. have been delivered to the staff of Council residential homes. These come mainly from families of service users who wanted to show their appreciation to staff for taking such great care of their relatives,

Examples of these compliments and thanks can be seen in **Appendix 3**.

NUMBER OF EXPRESSIONS OF GRATITUDE DURING 2023-2024 – ADULTS, HEALTH AND WELL-BEING					
Adults Service (including Area Teams, Learning Disabilities Team, Mental Health Team and Occupational Therapy)	Internal Provider (Domiciliary care and residential)	Business and Finance	Telecare	Customer Care and Safeguarding	TOTAL
39	73			2	114

NUMBER OF EXPRESISONS OF GRATITUDE DURING 2023-2024 – CHILDREN AND SUPPORTING FAMILIES	
	TOTAL
	25

15. Work Plans for 2024/25

- 15.1 The Customer Care Officers will continue to respond to concerns, enquiries and complaints by following the Welsh Government Social Services Complaints Procedure, ensuring that the lessons to be learnt from every case are addressed by the Departmental Management Team regularly and timely. Continue to monitor actions that take place to develop the service.
- 15.2 The Customer Care Officer will continue to chair the North Wales Customer Care Officers Group (NWCOG) for the coming year. Meetings are held every three months.
- 15.3 Further work will also be completed to try and encourage workers across both Departments to contact the Customer Care Officers to share any thanks or complimentary observations that they receive. There is currently a sense that staff members feel that it is not appropriate to share some observations, but the Customer Care Officers are eager to change this.
- 15.4 Encourage the staff to complete the e-learning training session to ensure that they are fully aware of the process and are familiar with the steps needed to take during the process.
- 15.3 Further to the Work Plan outlined in the 2022/23 version of this report, we managed to redesign the Social Services complaints and compliments information web page on Cyngor Gwynedd's corporate website. In addition, in accordance with the statutory complaints procedure, a copy of the 2022/23 annual report is now available to read on this web page.
- 15.4 This year we intend to conduct a programme to raise further awareness of the complaints and compliments procedure during the coming year. As a first step, we have designed a new poster for the Council residential homes. The purpose of the poster is to promote how service users, and/or their families, can raise a formal complaint and/or express praise about the service. The work of designing the posters were completed in August 2024 and they have been distributed to every Council-run residential home. We will monitor the impact that this will have on the number of complaints and/or positive observations that we will receive from this reference. Copies of these posters can be seen at the end of this report.

16. Statistics on the use of Welsh and English when responding to complaints and enquiries

16.1 The Customer Care Officer responds to enquiries and complaints in the chosen language of the enquirer or complainant. See the relevant figures on the use of both languages in the tables below.

The Complainant's language choice to make an enquiry/complaint in 2023/2024 – Adults, Health and Well-being Department			
	Welsh	English	Total
<i>Informal Enquiries and Complaints</i>	25	24	49
<i>Stage 1</i>	7	15	22
<i>Stage 2</i>	0	2	2
<i>Corporate</i>	1	1	2
<i>Ombudsman</i>	0	0	0

The Complainant's language choice to make an enquiry/complaint in 2023/2024 – Children and Supporting Families Department			
	Welsh	English	Total
<i>Stage 1</i>	2	11	13
<i>Stage 2</i>	1	3	4
<i>Corporate</i>	0	0	0
<i>Ombudsman</i>	0	0	0

APPENDIX 1(a) – EXAMPLES OF COMPLAINTS AND REPRESENTATIONS TO THE CHILDREN AND SUPPORTING FAMILIES DEPARTMENT DURING 2023/24

Reference	Brief description	Stage	Team	Response	Lessons to be learnt	Grounds to the complaint?
GC/14096-23	Complaint received from a parent who was concerned that the Department did not take his concerns about the well-being of his child seriously. He had sent evidence in and did not believe that anyone had looked through it in detail and therefore was worried for his child's well-being in the care of the other parent.	Stage 1	Children Referrals	The Department wrote to the parent confirming that the Assistant Head of Supporting Families and the Team Manager had looked through the evidence as a whole. The Team had checked with the relevant agencies and no child protection concerns had been identified. The Assistant Head of Supporting Families was satisfied that the Team had fully considered every concern. It was explained to the parent, if any new concerns raised, for him to contact us back immediately.	No lesson identified.	No grounds to the complaint.
GC/14198-23	Complaint from a parent about a Social Worker. The parent felt that the Social Worker had lied, not contacted her and had breached confidentiality.	Stage 1	Arfon Children's Team 1	The relevant Practice Leader contacted the complainant to discuss her complaint on the phone, with a letter from the Assistant Head of Supporting Families confirming this discussion. The complainant received a full explanation for each point, with the Assistant Head of Supporting Families noting that she was satisfied that the Social Worker had behaved professionally. The child was transferred to the Post-16 Team during the complaint, with a new Social Worker identified.	No lesson identified.	No grounds to the complaint.

GC/14309-23	Complaint from parents who felt that they had not received support from the Service, that there were no services in place for them as a family.	Stage 1	Derwen Service	The Service Manager had written to the family apologising that they felt that the Service had not supported them, and this was not the intention at all. They were asked how they wished to move forward to collaborate with the Service to support them as a family and meet the needs of the child.	No lesson identified.	No grounds to the complaint, but action points noted to discuss when meeting with the family.
GC/14341-23	A complaint from a parent that a foster carer had been careless when transferring a child following a contact session. There was concern that they had not taken care when holding the baby's head, and this could have hurt the baby.	Stage 1	Fostering Service	The Fostering Service Manager contacted the parent on the phone to further discuss the complaint. It was explained that the relevant Social Worker had fully discussed the incident with the Foster Carer. It became clear that the Foster Carer had a shoulder injury, and therefore the Foster Carer experienced pain up his arm when transferring the baby. The baby continued to sleep and did not show any discomfort. The Service was satisfied that the Foster Carer had not been careless, and advice was given on how to respond to similar situations in the future.	Advice given at the time	Some grounds, with a clear explanation and purposeful advice noted
GC/14525-24	Complaint arrived from a relative to looked-after children. They were unhappy that the contact had moved from their home (outside of Gwynedd) closer to the foster home in Gwynedd. They were also unhappy that several contact sessions had been cancelled.	Stage 1	Dwyfor and Meirionnydd Children Team	The Assistant Head of Supporting Families wrote to the complainant fully explaining the situation. The decision to move contact sessions had been made during the children's Review. It had become apparent that the children were worried about contact and this disrupted their behaviours before and after the sessions took place. It was therefore decided that they needed stability for a	No lessons to be learnt	No grounds to the complaint

				period to try and ease their concerns. With the hope of revisiting the contact in the future when appropriate for the children. The Department ensured that they would do everything in their ability to facilitate contact, and ensure that they are appropriate for the well-being of the children.		
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EXAMPLES OF STAGE 2 COMPLAINTS DURING 2023/24

GC14985-23	The complainant submitted a complaint about several staff members within the Department. There were several points to the complaint, including one regarding sharing a receipt about a mobile phone, comments made during a Case Conference and that a Social Worker had refused to ensure that her work is available to be investigated by the parent as this was what he believed that the 'Code of Conduct' noted.	Stage 2	Derwen Service	<p>Following a full investigation, the Independent Investigator concluded that there were no grounds to the complaint.</p> <p>The Department received the report in its entirety, no recommendations had been noted.</p> <p>The complainant received a copy of the report following the results of the investigation.</p>	No lessons noted from the Independent Investigator.	No grounds to the complaint.
GC15036-23	The complainant submitted a complaint that the decision to take the case forward to a Case Conference was premature in accordance with the child protection processes. This decision had therefore led to bias and lack of an open mind when dealing with the Section 47	Stage 2	Arfon Children's Team 1	<p>Following a full investigation, the Independent Investigator concluded that there were no grounds to the complaint. The Investigator noted three recommendations.</p> <p>The Department received the full report, with a copy of the report shared with the complainant following the investigation.</p>	Although there were no grounds to the complaint, the Independent Investigator noted three recommendations within the report. The Children	No grounds to the complaint.

	investigation. The complainant also felt that the Section 47 investigation did not meet the needs noted within the guidelines (WSP).				Department's Management Team will discuss these recommendations as part of an Action Plan and decide on the appropriateness of their actions.	
GC15325-24	The complainant contacted to submit a complaint about the Arfon Children's Team 1 and the Independent Reviewing Officers. There were 43 points to the complaint, the examples were; feeling that the Social Worker was not fully investigating her concerns, feeling that no one was listening, the children were not seen in accordance with the statutory guidelines, not receiving an invite to reviews.	Stage 2	Arfon Children's Team 1 and Independent Reviewing Officers	Following a full investigation, we received a very comprehensive report from the Independent Investigator. He noted that there were some grounds to two points, these were operational matters and had been resolved before the Independent Investigator met with the appropriate staff, and therefore the Department was able to explain this to the Independent Investigator during the investigation. There were no grounds to the other 41 points noted within the complaint. The Department received the full report, no recommendations had been noted. The complainant received a copy of the report following the outcome of the Investigation.	No lessons noted from the Independent Investigator.	No grounds to the complaint
GC15576-24	The complainant was unhappy that the Social Worker had included a chronology within the report for the Case Conference. The complainant felt that they had made progress and therefore it	Stage 2	Dwyfor and Meirionnydd Children Team	Following an investigation, the Independent Investigator concluded that there were no grounds to the complaint. He believed that the Department had followed the correct procedures highlighted in the Wales Safeguarding	No lessons noted from the Independent Investigator.	No grounds to the complaint

	<p>was unfair to include historical information within the report. We provided a copy of the child protection guidelines to the complainant, which includes an explanation of the need for chronology in such an assessment. However, the complainant had not accepted this and asked us to escalate the matter immediately to Stage 2 of the social services complaints guidelines in accordance with her rights.</p>			<p>Procedures and that it was appropriate to include the chronology in the report. The Department received the full report, with a copy shared with the complainant.</p>		
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APPENDIX 1(b) – EXAMPLES OF COMPLAINTS AND REPRESENTATIONS TO THE ADULTS, HEALTH AND WELL-BEING DEPARTMENT DURING 2023/24

Reference	Brief description	Stage	Team	Response	Lessons to be learnt	Grounds to the complaint?
GC/13855-23	A relative concerned about the relationship between the service user and her Support Worker from the Learning Disability Team.	Stage 1	Adults Service (Learning Disability Team)	Concerns passed on to the relevant team. The matter was resolved through a discussion between everyone to be able to decide on a solution.	No lesson identified.	Confirm that there are grounds to the complaint
GC/13898-23	A service user's relative expressed concern about the lack of domiciliary care hours available in the Llŷn area to increase the number of hours provided.	Stage 1	Adults Service	A promise was made to monitor the situation closely and to solve the matter as soon as possible.	No new lesson identified.	Confirm that there are grounds to the complaint
GC/14235-23	A service user's relative expressed concern that the Council's minibus can no longer wait outside their home to collect them to attend day care as the road is too narrow. Asking the Council to pay for a taxi for him instead.	Stage 1	Adults Service	A satisfied resolution had been agreed after discussions between the Department and the family.	No lesson identified.	Confirm that there are grounds to the complaint
GC/14315-23	A service user's relative expressed concern that her mother had been sent home from respite care in clothes that were not hers and was not wearing incontinence pads.	Stage 1	Internal Provision (Residential and Day Care)	Full investigation carried out by the Home Manager and a full apology provided.	No new lesson identified	Confirm that there are grounds to the complaint

GC/14765-23	A relative of a service user was concerned that she was becoming in debt because the Department had not sent invoices for her contribution towards her care costs for some time.	Stage 1	Income and Welfare Unit (Business)	Full apology provided, with commitment to ensure that invoices were now sent in a timely manner.	No new lesson identified	Confirm that there are grounds to the complaint
GC/15155-23	A service user's relative expressed concerns about the quality of care from two domiciliary care staff members.	Stage 1	Internal Provider (Domiciliary Care)	Full investigation carried out and a comprehensive apology/response was provided as a result.	No new lesson identified	No grounds to the complaint
GC/15435-24	A service user expressed concern about receiving an assessment of their domiciliary care needs. Requesting an assessment as soon as possible.	Stage 1	Adults Service (Community Resources Team)	Full apology and response provided for the delay. Committed to provide an assessment as soon as possible.	No new lesson identified	Confirm that there are grounds to the complaint
GC/15645-24	A service user's relative expressing concern about the lack of communication from residential home staff. The family was dissatisfied that the staff did not inform them that their relative had fallen and wanted assurance that this would not happen again.	Stage 1	Internal Provision (Residential and Day)	An apology was provided following a full investigation to the allegations submitted.	Importance of effective communication with families following similar incidents.	Confirm that there are grounds to the complaint.

EXAMPLES OF STAGE 2 COMPLAINTS DURING 2023/24						
GC/09696-21	A service user's relative expressed concern about the quality of domiciliary care from an external company, a delay before conducting a review of the care package and long delay before providing a response to her original complaint.	Stage 2	Adults Service Safeguarding and Quality Assurance Team (Customer Care)	Full investigation carried out under Stage 2 of the Complaints Procedure.	The investigation has identified the need to monitor the work of external care companies in more detail, review care home packages timely and to ensure that every complaint receives attention within the statutory timeline. An action plan has been drafted and completed.	Confirm that there are grounds to the complaint. The Independent Investigator's recommendations have been summarised in an action plan.
GC/13616-24	A service user's relative expressing concern about the arrangements to manage infections in Council residential home. Made allegations that the service user had suffered because he was kept apart from other residents due to a dangerous infection.	Stage 2	Internal Provision (Residential and Day)	Full investigation carried out under Stage 2 of the Complaints Procedure.	The investigation had identified the need to improve communication between the home staff and families. No way to prove that the service user had been let down. Full apology provided.	No grounds to the complaint but the investigation had identified some areas to improve.

APPENDIX 2 – Examples of Corporate Complaints - 2023/2024 – ADULTS, HEALTH AND WELL-BEING DEPARTMENT

Ref.	Brief description	Category	Stage	Unit / Team	Outcomes
GC/14979-23	Member of the Health Board staff expressed concerns about communication problems between the Adults Service and the Health Board staff.	Corporate	Formal complaint	Adults Service	Full response provided and the matter has been resolved.
GC/15575-24	Member of the public expressed concerns about some aspects of the Council's domiciliary care staff behaviour. Complaint had been implemented under the Corporate procedure as the Department does not provide a direct service to the complainant.	Corporate	Formal complaint	Internal Provider (Domiciliary Care)	Full investigation of the allegations carried out. No evidence to justify the allegations presented. Full response provided.

APPENDIX 3 – EXPRESSIONS OF GRATITUDE AND PRAISE – EXAMPLES FROM 2023/2024

<p>“I have enjoyed Nurturing Links Parenting and I feel that I have benefited through learning a lot of new techniques to be able to deal with situations and I have seen a big difference at home, the support that I have received from Maria has been excellent, nothing I asked was too much for her. Whether it was a phone call or a visit that had not been arranged. Thank you.”</p>	<p>Thank you</p>	<p>Trobwynt Team</p>
<p>“This case was initially allocated to the Team Manager, Heidi Rylance and then re-allocated to Ceri Aspden co working with Olivia Chick. There was excellent communication throughout my involvement, which was important as one of the parents was particularly skilled at playing agencies off one another. I felt this Local Authority worked tirelessly and robustly with the parents. The Local Authority recognised the strong sibling bond and the balance of harm as removal would have also caused emotional harm. They gave parents every opportunity to change. Very grateful if this can be cascaded to the key social workers involved as recognition of their work in this case acknowledged by the appointed Guardian Fiona Bevan.”</p>	<p>Thank you</p>	<p>Meirionnydd Children’s Team</p>
<p>“Thank you so much for being so polite and easy to talk to, I really appreciate it. I will definitely take your offer to attend the ‘understanding the teenage brain’ course. Many thanks”</p>	<p>Thank you</p>	<p>Team Around the Family</p>
<p>“To Hafan y Sêr staff, thank you for everything that you do for XXXX and us. He has been with you for six years and has enjoyed every time. He will miss you and we will also miss you, you have been fantastic. It will take XXXX some time to get used to XXXX, Hafan y Sêr will be a special place for him. It is a sad situation but I am sure that XXXX will get used to the new situation. Thank you again”</p>	<p>Thank you</p>	<p>Hafan y Sêr Short Break Unit</p>
<p>“Hello Gwenan, My name is XXXX, I just want to pass on a huge appreciation to your project and how it really helped me and my family when we needed it the most. Maria has been a breath of fresh air and a very warm, efficient and brilliant worker of this project. She is so amazing that I didn't want her to leave us. She has really made a mark on me, and she is so part of my journey. A lot has happened to me over the course of 8 months which I am very sure Maria would have filled you in on it. She's with me every step of the way. Days of medical appointments, filling forms, emotional support and guidance, encouraging me on my goals, helping me to</p>	<p>Thank you</p>	<p><u>Trobwynt Team</u></p>

<p>look for what's out there as in job wise which I never thought in a million years I will achieve because of my caring role. I have met few amazing people through her because of her drive and determination. Holding my hands on my worst days taping my family back together giving me courage to connect with the community. Giving us food when we ran out she made it so easy to open up to her. She went over and beyond for me and my family. She even wanted to take on the case of my son regarding school but because she wasn't allowed to do so she decided to join in school meetings instead for support. I really want to go on and on but I hope all these heart felt words do tell you how amazing and incredible work this project has offered me and the family and I hope this project gets an excellent recognition for what it stands for. We will miss Maria and her laughs and the smiles that brightens up any cloud. Thank you so much for your Help! We are lucky to find you and the project. Many thanks, XXXXX."</p>		
<p>"Eleri was highly praised today by XXXX who thanked her for all the support she has provided XXXX, going "above and beyond" in supporting her through two placement moves and getting her to a place where she is engaging in her education. The praise is well deserved, and I am sure that without Eleri's involvement, we would be looking at a very different situation."</p> <p>I am sure that there are many other families benefitting from your expertise and support, you do such brilliant work, thank you again. Take care of yourself too though."</p>	Thank you	Arfon Children's Team 2
<p>"Since suffering a stroke some years ago Mum was housebound at home and was lucky enough to receive regular domestic visits from the beautiful people formerly working with Abercare, and more recently for the Gwynedd Care Service. Words cannot express enough our thanks for all the love and hard work provided. Mum was always a staunch proponent of workers rights and would certainly agree that our beloved care workers deserve better pay and conditions. We thank the care workers for respecting the wishes of elderly and vulnerable care recipients, and getting things done often under difficult circumstances."</p>	Thank you	Domiciliary Care (Internal Provider)
<p>"I just wanted to say thank you for the help and support you've shown me over our time together. Without you, in what's been the lowest point in my life, I wouldn't be here and I realise life can be better. I feel honoured and privileged to have had you as my Support Worker but also sad that people need to be referred to the Mental Health Service to be able to work with such an amazing</p>	Thank you	Mental Health Service (Adults)

<p>person. Thank you for everything” [Mental Health Team]</p>		
<p>“Years ago, when X got his PDA diagnosis we were told that the people who worked with him would need to be charismatic and confident. To our great joy, you all turned out to be not only that but also fun, compassionate, imaginative, thoughtful, cheerful, wonderful people. Because of this he not only listened to you but was happy to spend his days with you and I believe that he thought of you all as his friends. Not just anyone could do what you do. You are very special people and we are privileged to have had you in our lives.” [Learning Disabilities Team]</p>	<p>Thank you</p>	<p>Learning Disabilities Services (Adults)</p>
<p>“Mum would not have received better care and love from anywhere else. There was nowhere better than Bryn Blodau. I have nothing but immense gratitude to you all for your kindness throughout the time that Mum was with you. Thank you for everything xx”</p>	<p>Thank you</p>	<p>Internal Provision (Residential and Day Care)</p>
<p>“I would like to praise the care and the support that my husband’s Grandma received from Community Carers in the Botwnnog catchment area. She had been receiving care in her home for some years now. Unfortunately, she received a terminal diagnosis in October following cancer spreading. She wished to be at home in the end and with us as family staying with her and the carers facilitating, it was possible to do that. Understandably, it was a difficult period and she deteriorated very quickly. Unfortunately, she passed away at the end of November.</p> <p>I am confident that the experience would have been very different without the support of the carers and Ann Owena Jones. They were all clearly experienced and confident in their work. The care was careful and kind, ensuring that Grandma’s dignity was maintained until the end. They spoke to her through all the care steps, even when she appeared to be unaware and that was extremely kind. I also want to reiterate to them that they have really supported me. I was genuinely afraid of not being able to care for her enough in the end, and having the carers there to facilitate in a practical way was a lot of help. But more important than that, at such an emotional and challenging time, all of them were ready to listen, offer comfort when I was concerned and tried to make sure that I was coping. I greatly thank them for that!</p> <p>Ann was especially a lot of help when trying to get support and equipment from different NHS services, and it was an extremely frustrating experience at times.</p> <p>Therefore, with all of this, I would like to thank this amazing Team from the bottom of my heart and we are</p>	<p>Thank you</p>	<p>Internal Provider (Domiciliary Care)</p>

<p>eager to show our appreciation further by arranging a collection in her name for the Community Carers in the Botwnnog catchment area. She had a very small funeral but over £300 was collected. We would like to arrange to transfer it over and request for it to stay within this Team please.”</p>		
<p>“After a very long period of illness, my father passed away on the *** this year. I am very eager to officially record our satisfaction as a family of the excellent care provided from everyone associated with his care.</p> <p>Firstly, I would like to note our gratitude to Ann Wyn Pritchard and Siân Ceri Le Bon who made home visits to see my father. Their care was always dignified, thorough and respectful and their specialist knowledge was so valuable to help keep my father at home with his family. Secondly, thanks to Deian Llŷr Owain for making prompt arrangements to ensure that a care package was provided for dad when he came home from the hospital in March. Deian kept consistent contact to report on the progress of the arrangements, and that was appreciated as we put everything in place to get dad out of the hospital.</p> <p>In addition, the domiciliary carers not only offered practical support to my father, but also offered emotional support to mum and the rest of the family as we cared for dad in his final months. It is not possible to find words that convey our thanks and appreciation to each one of them for their dignified care. It was the greatest pleasure getting to know such amazing people, who were doing very hard and difficult work, by showing kindness and empathy to us as a family in a sad situation. They have all gone the extra mile to do everything within their ability to help us care for my father. As a family, we cannot give enough praise for the excellent care that my father received from these extraordinary individuals. Without all the support, it would not have been possible for us as a family to care about my father in his own home, in accordance with his final wish. Finally, the sitting service provided by the Eryri Cydweithredol company was invaluable to give mum time for herself. We are particularly grateful to Gwenda and Nia for their kindness and for a kind and professional service.</p> <p>I am confident that it will be possible to share this message with everyone that was associated with caring for my father, by passing on our sincerest gratitude and best wishes to them.”</p>	<p>Thank you</p>	<p>Internal Provider (Domiciliary Care)</p> <p>Adults Service (Community Resources Team)</p>
<p>“I write to express our sincerest gratitude as a family for the excellent service and support that mum received over the years from the Support Services.</p> <p>Whilst being witness to the resilience and tenderness of the care and the carers’ tireless commitment to support and care for mum, we often said as a family that it would</p>	<p>Thank you</p>	<p>Internal Provider (Domiciliary Care)</p>

have been impossible to receive a better service anywhere.

Although there were challenging periods at times, we appreciated both of your support and commitment to provide this key service. Between you all, you have offered a 5-star service and, as a family, we will forever be grateful for your kindness. Throughout the lockdown period, through every weather and several challenges, the support workers' determination and commitment to care for mum was excellent. We cannot thank this great and loyal team enough, namely Carys Jones, Carys Richards, Linda Roberts and Nichola Jane Roberts. All of them always went the extra mile.

Although the health service shared that it would not have been possible to care for mum at her home due to the complex nature of her needs, the Support Services managed to support us as a family to respect mum's wish to stay at home. It would not have been possible for mum to remain at her home without this key service. We greatly appreciate it."



Adran Oedolion, Iechyd a Llesiant

GWRANDO, YMATEB, GWELLA!



Mae eich sylwadau'n bwysig i ni, gan ei fod yn ein helpu i wella ein Gwasanaethau.



Mae croeso i chi anfon:

- canmoliaeth
- sylwadau positif
- sylwadau negyddol
- cwyn ffurfiol



Os oes gennych gwyn, fe wnawn:

- gasglu gwybodaeth yn llawn
- gwneud trefniadau i drafod y gwyn ac ymateb yn effeithiol
- adnabod ffyrdd o wella i'r dyfodol



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Adults, Health and Wellbeing Department

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If you have a complaint, we will:

- collect information fully
- make arrangements to discuss and respond effectively to your complaint
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MEETING	Care Scrutiny Committee
DATE	26/09/2024
TITLE	Charging for Care Policy
REASON FOR SCRUTINY	Forward scrutiny – Committee comments needed on proposed changes before going out for consultation and submission to Cabinet
AUTHOR	Alun Gwilym Williams
CABINET MEMBER	Dilwyn Morgan

1. Why does it need to be scrutinized?

It is intended to modify the charge for care policy to give the Council the right to charge fees for certain care and support services where no fee has historically been charged.

The recommendation to modify the policy needs to be scrutinised and the recommendation to go out and consult on the matter, before the comments of the scrutineers are submitted to cabinet to reach a decision on the matter.

2. What exactly needs to be scrutinised?

The recommendation to modify the charge for care policy.

3. Summary and Key Issues

There are three elements where the policy needs to be developed/modified :

3.1 Modify the policy to add specific services that have historically been free of charge:

- **Daycare:** Charge a fee for attending daycare provided at specific centres/locations outside the home. A decision on the fee level will be needed here, more information in part 4.
- **Mental Health Support Services:** Charging for Mental Health support services (Excluding services covered by part 117 of the Mental Health Act 1993)
- **Dementia Support Services:** Charging for support services in the community.

3.2 Modify the wording and make the clause on un-paid carers clearer.

An unpaid carer is defined as;

"someone who cares or intends to provide unpaid care to an adult due to physical or mental illness, age, disability, substance dependence or caring for a disabled child"
(Carers Trust, 2024)

In relation to unpaid carers, the Social Services and Well-being (Wales) Act 2014 states;

"When a local authority meets the needs of an adult carer by arranging or providing them with support directly, or provides direct payments to enable him or her to access this support, it has discretion to charge the adult carer a fee for this support".

Although it has the discretion to do so, the Council has not been charging a fee for direct care for unpaid carers, and the recommendation is that this policy continues. There are a number of reasons for this, but mainly, unpaid carers provide valuable care and support to individuals who take pressure off statutory services, and the Council needs to continue to support unpaid carers to fulfil this valuable role. In deciding if a fee is charged for a service, these are the principles which will be followed;

- The council will not charge for services that directly support unpaid carers (a service that is in the name of the carer).
- If there is a care and support plan in the name of the carer, then we do not charge them for the support here i.e. a service that directly benefits the unpaid carer where there is no element of care/responsibility for the person who needs care.
- A recommendation that there should be a charge (dependent on financial assessment) for any service where there is an element of direct or indirect care for the individual receiving support e.g. personal care, keeping company or supervision. This service would be part of the care and support plan of the person being looked after rather than the unpaid carer.
- The usual exceptions set out in part 4 below would apply.

3.3 Act on fees already within the policy, where the Council has not historically been charging:

- The main example is deferred payments. A deferred payment is an arrangement whereby an individual enters a residential or nursing home, but they do not sell their home, and therefore the cost of a person's care goes against their property, and when the property is sold, the Council is reimbursed the care fees that have accrued up to that point. Current policy states that the Council is entitled to charge a fee for the administration of the payment, legal work and valuation of the property during the establishment of the agreement. Further fees can be charged during the life of the agreement if a property requires further valuation pricing for example.
- The current policy states that annual interest can also be charged to the debt by deferred payment, but previously this has not been implemented due to the complex nature of the work.
- When the new policy is in effect these are intended to be charged for and we will develop a correct system for charging the right amount and keeping track of individuals debts.

4. Background / Context

- **Legislative context:**

The code of practice (part 4 and 5) of the Social Services and Well-being (Wales) Act 2014 states ;

"When a local authority provides or arranges care and support to meet a person's needs, or support to meet a carer's needs, under sections 35 to 45 of the (Meeting needs) Act it has discretion to charge a fee for this, unless a particular person is required not to be charged a fee or not to charge a fee for a particular type of care and support under regulations".

The code of practice also includes a list of protected services that must be provided free of charge.

They are:

- Transport to a day service where the transport is provided as part of meeting a person's needs.
- Aftercare services provided under Section 117 of the Mental Health Act 1983 (provided jointly with the Health Board).
- Services provided to victims of Jacob's Creutzfeldt Disease .

- Care and support provided as re-enablement arranged under Part 2 (General Functions) or Part 4 (meeting the needs) of the Act, or a re-enablement arranged as direct payments under sections 50 or 52 (direct payments) of the Act, to a person for up to 6 weeks to enable them to maintain or regain their ability to live independently at home*.
- Independent professional advocacy where a local authority has arranged to provide this in accordance with the code of practice on advocacy under Part 10 (Complaints, Representatives and Advocacy Services) of the Act.

**In Gwynedd only care packages specifically designated as 're-enablement' will be exempt for up to 6 weeks. A fee will be payable for long-term routine home care from day one.*

The code of practice clearly sets out some principles that local authorities must adhere to when developing their charging policies. The principles here are very relevant in conjecture to modifying the policy. Mainly:

Local authorities must:

- Ensure that people are not charged a fee in excess of what is reasonably feasible for them to pay and a fee must not be charged that is in excess of the cost that the authority has paid for the provision.
- be consistent, to eliminate variations in how people are financially assessed and charged fees;
- be clear and transparent, so that people know the amount they will be charged;
- promote well-being outcomes, social inclusion and support the vision of independence, voice and control;
- helping carers to look after their own health and well-being, and to care in an effective and safe way;
- be person-centred, reflecting the range of care and caring situations and the range of options available to help meet people's well-being needs and outcomes;
- apply fees equally so that those with similar care and support needs will be treated in the same way and minimise discrepancies between charging for different types of care and support;
- encourage and enable those who wish to remain in employment, education or training or undertake employment, education or training, or plan for the costs of meeting their future needs, to do so;
- be sustainable for local authorities in the long term.

- **Fiscal position of the field, estimated cost of implementing any changes, funding sources etc.:**

With the current turbulent financial situation, it is inevitable to consider charging fees for those services where there is discretion for the Council to render. The budget available to maintain care services is decreasing, but the need for care is increasing due to the demographics of our county. Gwynedd's population is ageing and living longer with ill-health and/or disabilities ([Bevan Commission](#), 2024) which is putting increasing pressure on care services. The 'Llechen Lân' (Clean Slate) project seeks to come to grips with a change in practice so that we are in a better place to respond to the increase in demand, but adapting the charging policy to maximise contributions to our services is an important consideration. These changes have already been successfully made by some other councils, see below for an examples.

It is difficult to put a figure on how much money the above changes would generate, as changing the policy would only give the Council the right to charge a fee. Everyone receiving care and support would be entitled to an assessment of their financial situation before having to contribute, and a maximum of £100 per week has been set by the Welsh Government (there has been a consultation to raise this amount to £125 per week, but no decision so far).

An example of a fee that would contribute materially would be daycare. If the Council decided to charge a 'flat' fee of £5 a day (for example) to everyone attending a day service, without a financial assessment, it is estimated that this would result in an income of around £150,000 a year. As can be seen from the table below, the majority of other Northern counties charge much higher fees. This can be done but everyone would need a financial assessment, so that the only ones contributing at all would be those individuals who have the means to do so.

Sîr	Daycare fee (for a day)
Conwy	£22.36
Flint	£51.68
Denbighshire	£62
Wrexham	£25
Anglesey	£0
Average	£40.26

- **Risks - what are the risks and what can be done to mitigate them:**

1. There is a risk that the policy will not be implemented consistently, or interpreted differently if unclear. This risk can be overcome with staff training and clear guidance. Training for social workers who can advise individuals on what is available to them, and also training for the staff carrying out financial assessments, to ensure everyone is assessed consistently.

2. There is a risk that higher fees will affect the financial situation of Gwynedd's vulnerable adults. Everyone who contributes to care or support has the right to an assessment of their financial situation. This assessment is in place to ensure that everyone has an adequate income to live on after paying for the service. In addition, the Council has income and welfare officers who work with individuals to ensure they receive the benefits they are eligible for if the financial assessment shows they need to contribute to their care.
3. There is a risk that higher fees may deter people from trying to seek help and support when they need it. To try to overcome this risk, in cases of safeguarding Gwynedd Council's professionals have the discretion to exclude people from the policy for a certain period of time, this will then be reviewed regularly.
4. Similar to the above risk, there is a possibility that individuals will choose not to receive/attend services (for example a day service) that are preventative in nature, and as a result they will need more expensive, statutory services (for example home care) sooner. To mitigate this risk, promoting preventive services, Dewis Cymru etc. will be a priority.
5. Dementia support workers employed by the Health Board in the community offer free support, and collaboration and reconciliation across health and care in dementia and unpaid carers is required by the act. There is therefore a risk, charging for similar support would be confusing, and this will need to be communicated clearly and efficiently.

- **Good practice in the field:**

The table below summarises the position of other counties that have responded to our request for information (the only services included are those services under debate) :

County	Charges for services below:
Rhondda Cynon Taf	Daycare, Mental Health Support Services
Bridgend	Daycare, Mental Health Support Services
Flint	Daycare
Monmouth	Daycare, Mental Health Support Services
Torfaen	Daycare, Mental Health Support Services
Powys	Daycare, Mental Health Support Services
Carmarthen	Daycare, Mental Health Support Services

- **Priorities for the future:**

In the near future, the Welsh Government is considering raising the weekly maximum charge for non-residential care from £100 to £125. If this change is approved by the Welsh Government then Gwynedd Council will implement this change. The update to the charging policy in Gwynedd covers this change, as the policy states that our policy will reflect any changes the Welsh Government implements. Gwynedd Council will increase the maximum weekly pay in line and change the Welsh Government to the future, if there is no opposing decision.

Find out more about the Welsh Government's proposed changes here: [Written Statement: Charging Fees for Non-Residential Care and Support: maximum weekly fee \(19 February 2024\) | HELM. WALES](#)

5. Consultation

The code of practice clearly states (part 4.2);

"When authorities formulate new policies, or substantially amend existing policies, they must consult with those affected locally and consider their views before deciding on what policy, or what amendments to their policy, they should implement or implement".

The proposed next step is therefore to go out and consult on the change to the policy, specifically with those affected and their families/carers, but with the wider public as well.

6. Well-being of Future Generations (Wales) Act 2015

- **Have you included residents / service users? If not, when and how do you plan to consult them?**

See point 5 above.

- **Have you considered working together?**

We collaborate and contribute financially towards community hubs, third sector organisations etc. to run some services on our behalf. These include financial contributions to open hubs in all wellbeing areas of Gwynedd, and payments to third sector organisations 'Carers Outreach' and 'Action for Children' for supporting their work with unpaid carers.

We work with the Advice Bureau (Citizens Advice) to offer a service to individuals to understand which benefits are available to them, and we also have our internal income

and welfare officers who do this work with anyone who receives care and support services and through assessment have been told they need to contribute.

- **What has been done or will be done to prevent problems arising or worsening in the future?**

If our work is done correctly everyone who applies for an assessment will receive a financial assessment, so that only individuals who can afford to pay a fee will pay. Individuals can request a re-assessment at any time.

These changes are being made to help social services stay sustainable for future generations. The way we currently operate is not sustainable for the future and changes need to be made before the impact is seen on services.

- **How have you considered the long term and what will people's needs be in years to come?**

Over the past year a project team has been looking into what the care needs of Gwynedd individuals will be over the next twenty years. Roughly according to the Census, there has been a growth in the over-65 population of 7.8% in Gwynedd between 2011 and 2021. This was an increase from 25,140 to 27,273. A population prediction suggests that the number of people over 65 will continue to increase over the next twenty years to 32,452 in 2043. While there are some things that can't be predicted for, of course, such as disease cures or pandemics, the Bevan Commission advises that "the average age at which major illnesses are predicted to develop is 70 years. With the increase in life expectancy, years spent with illness will also increase."

Demographic prediction suggests a significant increase of 57% in the demand for social care by 2043. This would be in addition to the 11% of individuals assessed for care who were waiting for provision at the time of the research in Gwynedd.

These figures suggest that charging for services is just one small step in the full picture. The full 'Llechen Lân' report (where the above information has been taken) makes further suggestions on how the department can plan and change to help protect social care for people in the years ahead. Some of these changes include; strength-based working, integrating multidisciplinary services, increasing support for unpaid carers, innovating the use of direct payments, adopting Technology and robotic Enabled Care, ensuring accessible information and advice is available, investing in extra care housing, developing a Care Academy, ensuring cross-authority collaboration, collaboration with the third sector, and reinvigorating outcome-based commissioning.

- **To ensure integration, have you considered the potential impact on other public bodies?**

In some extreme cases individuals may avoid seeking social care services because they are concerned about the cost. This can lead to increasing pressure on the NHS with more individuals seeking hospital support. To make sure this doesn't happen, in cases of safeguarding professionals have the discretion to exclude people from the policy for a certain period of time.

7. Impact on Equality Characteristics, Welsh and Socio-Economic Duty

Changes to the policy are designed to ensure that all individuals are treated equally. In the past groups such as unpaid carers were underrepresented in the policy. Each person is offered a means test to make sure contributions are based on equity and income. This aims to ensure that everyone has access to the same cost of living, and to ensure that socio-economic status does not affect quality of care.

The financial assessments are offered in Welsh proactively but available bilingually, and a copy of the Charging Policy with any additional relevant documentation is available bilingually.

8. Next Steps

After discussing and gaining the Committee's views today the proposed changes to the charging policy for care will form part of a consultation with those adults affected, and the wider public. Following the receipt of results and feedback from the consultation, the changes to the policy will go to Cabinet.

Relevant links:

Additional Questions:



Attachment 1 -
Additional Questions.

Current Adult Care Charging Policy:



Adults Care Charging
Policy_.docx

Adult Services Costs 24-25:



Talu am
Wasanaethau Gofal D

Carers Needs Assessment Booklet:



Asesiad-Anghenion-
Gofalwyr.pdf

Part 4 and 5 code of practice (Charging Fees and Financial Assessments):



parts-4-and-5-code-
of-practice-april-2023