



Complete Agenda

Democratic Services
Swyddfa'r Cyngor
CAERNARFON
Gwynedd
LL55 1SH

Meeting

CARE SCRUTINY COMMITTEE

Date and Time

10.30 am, THURSDAY, 11TH APRIL, 2024

NOTE: A BRIEFING SESSION WILL BE HELD FOR MEMBERS AT 10.00AM

Location

Hybrid Meeting - Siambr Hywel Dda, Swyddfeydd y Cyngor Caernarfon and virtually through Zoom

*** NOTE**

This meeting will be webcast

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

Contact Point

Sioned Mai Jones

01286 679665

SionedMaiJones@gwynedd.llyw.cymru

(DISTRIBUTED 03/04/24)

CARE SCRUTINY COMMITTEE

MEMBERSHIP (18)

Plaid Cymru (12)

Councillors

Menna Baines
Empty Seat
Dewi Jones
Linda Morgan
Meryl Roberts
Sasha Williams

R Medwyn Hughes
Rheinallt Puw
Linda Ann Jones
Gwynfor Owen
Einir Wyn Williams
Jina Gwyrfai

Independent (5)

Councillors

Elwyn Jones
Eryl Jones-Williams
Angela Russell

Anwen J. Davies
Beth Lawton

Labour/Liberal (1)

Councillor Gareth Coj Parry
Gareth Coj Parry

Ex-officio Members

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 - 12

The Chairman shall propose that the minutes of the meetings of this committee held on the 1st of February, 2024 be signed as a true record.

5. COMPLAINTS, ENQUIRIES AND EXPRESSIONS OF GRATITUDE PROCEDURE FOR 2022-23 - CHILDREN AND SUPPORTING FAMILIES DEPARTMENT AND ADULTS, HEALTH AND WELL-BEING DEPARTMENT

13 - 39

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.

6. SHORT BREAKS SERVICE (DERWEN INTEGRATED TEAM)

40 - 45

To obtain assurance that suitable provision is available to all who need the service.

7. AUTISM PLAN TASK AND FINISH GROUP

46 - 52

To present the findings and recommendations of the Task and Finish Group.

CARE SCRUTINY COMMITTEE 1/02/24

Present: Councillor Beth Lawton (Chair)

Councillors: Linda Ann Jones, Menna Baines, Meryl Roberts, Gwynfor Owen, Linda Morgan, Dewi Jones, Angela Russell, Rheinallt Puw, Anwen J Davies, Elwyn Jones, Jina Gwyrfai and R Medwyn Hughes.

Officers present: Llywela Haf Owain (Senior Language and Scrutiny Advisor) and Annes Sion (Democracy Team Leader).

Others invited:

Huw Dylan Owen (Statutory Director of Social Services)

Present for item 5:

Hedd Thomas (Assistant Head of Housing and Property Department)
Cara Owen (Lead Project Manager (Housing Action Plan))

Present for item 6:

Cllr Dilwyn Morgan (Cabinet Member for Adults, Health and Well-being)
Cllr Elin Walker Jones (Cabinet Member for Children and Supporting Families)
Marian Parry Hughes (Head of Children and Supporting Families Department)
Alun Gwilym Williams (Senior Business Manager, Adults, Health and Well-being Department)
Cadi Morus Parry (Health and Social Care Business Support Apprentice - Observing)

1. APOLOGIES

Apologies were received from Councillors Einir Wyn Williams, Gareth Coj Parry, Sasha Williams and Eryl Jones-Williams.

2. DECLARATION OF PERSONAL INTEREST

Councillor Gwynfor Owen declared an interest on item 6 if matters about the charity Gorwel or Carers' Outreach were discussed - Gorwel was discussed and he left the meeting for this element.

A declaration of personal interest was received by Councillor Elwyn Jones on item 6 as he was a member of the Board of GISDA that received funding, but it was not a prejudicial interest and he therefore did not have to withdraw from the meeting.

3. URGENT BUSINESS

None to note.

4. MINUTES

The Chair signed the minutes of the previous meeting of this committee, held on 23 November 2023, as a true record.

5. HOUSING ACTION PLAN

The report was submitted noting that it provided an overview of the progress seen on the Housing Action Plan. It was highlighted that good progress had been seen since adopting the plan in April 2021 with:

- 241 social houses built
- 202 empty houses had been brought back into use
- 32 homelessness units had been erected or were in the process of being erected
- 64 first time buyers grant had been given to renovate empty houses
- 633 housing adaptations grants had been allocated to enable disabled people to continue living in their homes.

It was generally expressed that the department felt strongly that they offered a variety of support and interventions and, as a result, that the plans met the needs of individuals in different areas of the county.

Members were guided through the projects, beginning with "Developing our own homes, buying private homes and purchasing building land for the future". It was noted that the three projects aimed at increasing the opportunities available for the people of Gwynedd by owning or renting suitable housing for their needs. It was explained that by implementing the buying and building houses schemes successfully during the Housing Action Plan period, the Council would have erected 90 houses and bought a 100 others that would be available to let for Gwynedd residents. It was highlighted that several developments were currently underway, with six developments in locations such as Bangor, Llanystumdwy and Llanberis in different stages of the process.

In terms of the Buy to Let Scheme, it was noted that 18 houses had now been bought with another 6 in the process of being bought. It was explained that these houses were bought across the county and in locations where it would be possible to respond to local people's housing needs. It was added, before letting the property, the houses needed to be brought to an accepted and statutory standard of living, and the department was in the process of discussing their letting arrangements. It was explained in terms of purchasing land, that land had been purchased in Mynytho, Llanystumdwy and Caernarfon for future development. In terms of Social housing, it was expressed that the Council continued to work closely with the Housing Associations to implement a Social Housing Development Programme in the county. We aim to reach a target of building 700 social houses across the county during the term of the plan. It was reiterated to date that 241 houses had been erected, with 279 underway and that the programme was full for 2024/25.

Attention was drawn to the Grants Schemes, noting that the Action Plan included several schemes related to allocating grants to increase the opportunities available for the people of Gwynedd. It was explained that the Council had

recently started a community regeneration grant scheme that provided grants for community groups to provide living units for local people. It was noted since the beginning of the Plan, that 633 adaptations had been made to enable people to remain in their homes. It was explained that this could include minor adaptations such as installing ramps or structural work such as erecting extensions or adapting rooms. Attention was given to the First Time Buyer Empty House Grants, highlighting that empty houses that used to be second homes were now eligible for the grant.

It was highlighted that the situation continued to be complex in the field of homelessness, with about 70 to 100 people presenting themselves as homeless every month and 217 were in emergency accommodation in December 2023. It was emphasised that the housing and accommodation supply and support were not sufficient to respond to the demand and cope with the pressures on the service. It was explained that the department had appointed two specialist officers to support individuals who presented themselves as homeless or at risk of being homeless as a result of mental health problems or substance misuse. It was noted that 52 individuals had received support from the officers.

It was expressed during a previous Scrutiny Committee that the department had acknowledged the need to improve communication between the Members and, as a result, the department had updated a specific page on the Members' Intranet and launched a map showing the locations of some of the main schemes that have either been completed or were underway.

During the discussion, the following observations were noted:-

- Gratitude was expressed for the report and it was enquired whether there was concern about the funding available to adapt houses for people with disabilities as it was funded by grants.
 - o Concern was noted as prices had increased, especially following Covid. It was explained that budgets were tight and the figures were not currently sufficient to meet the needs of every individual.
- It was noted that there had been mention of a plan to adapt empty houses and it was highlighted that capital funding was available to purchase, but there was no information about revenue funding to collect rent and maintain the property. It was enquired how the Council would maintain and retain the property.
 - o It was noted through the plans, that the income was used to repay the investment and that funding to maintain and keep the property had been included. In terms of expertise to care for the property, it was explained that discussions were currently underway and there would be an announcement soon. It was emphasised that the Council worked very closely with the housing associations.
- There were enquiries about the trends in terms of homelessness in Gwynedd - that is, are the numbers increasing despite the fact that the county's population was decreasing. Attention was regularly given to the reasons for homelessness, where the individuals came together and let houses for local people.

- It was expressed that the number of homeless people was extremely high, and that there were many different definitions of homelessness. It was highlighted that the nature of homelessness varied but matters such as the breakdown of a relationship and the economic climate were regularly highlighted. It was noted that there was increasing pressure following Covid and legislative change, and that this was not only a problem for Gwynedd but was seen as a national problem.
 - In terms of connections to Gwynedd, it was highlighted that the majority who noted themselves as homeless had a local connection to Gwynedd. It was emphasised that there was a need for them to highlight their connection to Gwynedd to reach a homelessness list criteria. It was explained, if a local connection to Gwynedd was not seen, they could be referred back to the authority where a clear connection was seen. It was also explained that a clear connection to Gwynedd was needed if they were on a social housing waiting list too, in accordance with the Social Housing Policy.
 - In terms of housing for local people, it was explained that some houses had a local person condition, and priority was given to individuals with a local connection when letting social houses. The need to discuss with the legal department was emphasised if there are discussions about imposing a local condition on each home.
- There was an enquiry about the period of the Housing Implementation Plan and whether the plan fulfilled its targets.
 - It was noted that 2026/27 would be the final year of the plan, but that it had developed over the period and some plans would go beyond the period of the plan. It was expressed, as a result of the nature of the plan, a large percentage of the increase would be seen from the middle to the end of the six years. It was emphasised that the department monitored quarterly, but many of the projects were tied in terms of the market's financial climate. Generally, it was noted that the plan had reached most of its targets.
 - It was highlighted that there were fewer housing development plans and a low number of applicants for empty houses grants in Meirionnydd, and asked whether there were reasons for this.
 - It was expressed, in terms of housing development plans, that the report had highlighted six plans beyond Meirionnydd, but the department continued to look for specific sites in Meirionnydd.
 - In terms of empty housing grants, that there was a need to hold specific sessions in the south of the County to try and raise awareness of the grants and target areas where it appeared that the number taking advantage was low.
 - It was enquired, in terms of support for individuals who were homeless as a result of domestic abuse, who provided the support available to them.
 - It was explained that support packages were funded by grant funding and that many providers were used across the County to ensure that the support was offered by individuals with expertise.
 - It was highlighted that the report noted savings to the health service as a

result of supporting individuals to remain in their homes. Disappointment was noted that the Government did not pay attention to this. It was enquired in terms of finance, whether the department made use of every penny of the social housing grants available, and whether the Council received it and passed it on to the Housing Associations. In addition, it was enquired whether it was possible to use the Council's reserves for building social housing, by offering it as a mortgage to the Housing Associations.

- It was noted that £12.3m would be coming to Gwynedd over three years, and that they would make full use of every penny and had also taken advantage of more funding. It was explained that the Council was in a strong situation with several reserves plans ready to go. It was noted that the Council had worked with the Housing Associations to ensure that the Council prioritised where and what type of property would be built. In terms of additional funding, it was noted that the Housing Associations had access to a range of additional funds but the additional funding could impact the rate of the funding available from the Social Housing grant.
- It was expressed that many sites that were the Council's property were currently not being used and it was enquired whether these locations were considered as locations for homes.
 - It was explained that every type of location was considered, and that the department looked at land and buildings that the Council owned. It was reiterated on some occasions that using the locations was costly and it was difficult to convert them into homes. It was highlighted that a property needed to be of a specific standard and within specific regulations. Individuals who had potential locations were asked to contact the department to assess them, and to keep the use of buildings local.
-
- It was asked what was the definition of an Empty House, and if receiving an empty house grant to do it up, whether there were any regulations that the individual had to live in the house following receipt of the grant.
 - It was explained that the definition was specific and related to the house's Council tax status. It was noted that there was an expectation for individuals to use the house as a home following this, and not as a second home.
- It was highlighted that the number in emergency accommodation over Christmas was extremely high and it was enquired what type of accommodation was offered by the Council, whether it was cost effective and how quickly individuals moved on from these locations.
 - It was explained that the emergency accommodation included a variety of accommodation, but the majority were hotels and bed and breakfast establishments. It was emphasised that the locations could be unsuitable because of the stock of properties available. It was expressed that the department prioritised creating appropriate temporary accommodation, and the need to work closer with the private sector was also highlighted. It was expressed, on average, that individuals moved out of emergency accommodation within 200 days.

- It was enquired what advice was offered to first time buyers to allow them to be successful when applying against other people.
 - o It was explained that grants were available to facilitate first time buyers and that they had been promoted by local estate agents. This might need to be looked at to ensure that it was being done and perhaps to try and focus on specific locations.

- It was proposed to make a request to the Scrutiny Forum for a Scrutiny Investigation into the Social Housing Allocation Policy to see how resilient the system is and to look at the details of the policy.

RESOLVED

- 1) To accept the report and to note the observations.
- 2) To make a request to the Scrutiny Forum for a Scrutiny Investigation into the Social Housing Allocation Policy to see how resilient the system is and to look at the details of the policy.

6. PREVENTATIVE WORK THAT IS COMMISSIONED TO THE THIRD SECTOR

The report was presented by expressing gratitude for the opportunity to discuss the contribution of the third sector. It was noted that they were invaluable and it was critical to scrutinise their work as well as to scrutinise measuring the value of the sector. A huge debt was acknowledged for the work of the third sector, especially with the public sector shrinking as they responded so quickly and flexibly. It was emphasised that there was a need to ensure that the Council received the most value for money to ensure the most effective service.

The committee members were thanked for the enquiry to investigate this field. It was noted that it had been an opportunity to raise awareness of the work taking place. Thanks was also reiterated to the field, by emphasising that they were considered as an extremely important partner to the Council.

It was expressed that the committee's request had been very timely and had allowed the department to review their contracts. It was emphasised that this report only looked at organisations in the care field and organisations that only received contributions for running costs and not for commissioning specific services. Attention was drawn to the fact that the report highlighted matters that had arisen over the previous years, as well as historical matters that would be challenging to come to terms with and to look at how to build on this work. It was noted that a meeting had been arranged a fortnight ago, where the financial situation was discussed and it was announced that funding for 2024/25 would be the same as what was received in 2023/24, as well as highlighting the timetable to discuss the way forward and for future commission work.

During the discussion, the following observations were noted:-

- It was highlighted that the report showed the inconsistencies in terms of the

level of detail received on performance information asked about the third sector, and it was asked whether further information had been received.

- It was simply noted that there was a need for organisations to report on what they do with the funding received, it was agreed that there were inconsistencies across the sector, and that there was a need to reconcile the information received.
- It was enquired what were the arrangements in terms of monitoring and whether the Council received value for money.
 - The Scrutiny Committee was thanked for bringing the matter to the attention of the departments, it was noted that a great deal of information came back to the Council but the discussion had motivated both departments to have a strong system to monitor and reconcile across the sector.
- It was highlighted that only some of the third sector organisations were available in the report and some organisations seemed to be missing.
 - It was explained that the report focused on preventative work in the Adults Department and the Children's Department. It was highlighted that other departments such as the Housing and Property Department used third sector organisations to run preventative services, and that they might need input from other departments who overlap. It was emphasised that the organisations were discussed here for the core grants and not for purchasing services from them. It was highlighted that several additional organisations to what was included in this report highlighted how departments commissioned work from the third sector and had highlighted that more work needed to be done.
- It was enquired whether the description of the charity Gorwel's work was a specific description and described the work that they do.
 - It was noted that the department would look at the matter to ensure that it was correct.
- Pride was noted of the work that had been done and that the use of service level agreements was much more professional than what had been offered years ago.
- Concern was expressed about contracts that needed to be signed, as contracts gave assurance to the organisations for the perseverance of plans also funding for 2024/25.
 - It was explained that the departments hoped that this work meant that it would be possible to offer long-term contracts that would enable the organisations to plan ahead. In terms of the financial element, it was explained that the funding would stay the same and that inflation was not being considered for 2024/25.
- It was enquired what elements of statutory services were provided by organisations that offered a preventative service and whether funding was being cut, was there a risk for statutory duties not to be delivered.
 - It was noted that elements of work were being commissioned, such as Carers' Outreach. It was expressed that there was a need to maybe

discuss the statutory elements and to consider them separately. In terms of the Children's Department elements, it was noted that there were two specific fields - as early intervention and prevention that was a part of the Families First programme, and that this work was funded by specific grants.

- It was enquired whether there was an intention to commission preventative work via open competition in the future.
 - o It was explained that it was an option for the Adults department to consider some services but there was a need to ensure that services were similar across the whole county. It was noted that it was an open competition in the Children's department, and that there would be a re-tendering cycle in 2025.

- By looking at the Children's department, it was enquired whether there was an intention to commission Barnardo's to do the Family Support Team's work in Arfon and Dwyfor and it was asked why the procedure was different in Meirionnydd.
 - o It was expressed that this had happened because of internal capacity in Meirionnydd and, as a result, it was decided to go to tender.

RESOLVED

- 1) To accept the report and to note the observations while welcoming the idea of a cross-departmental procedure to monitor grants.
- 2) To receive a progress report on the field by the departments in 2025.

7. FALLS PROTOCOL

The report was submitted by noting that the item had arisen following a question asked by the former chair some time ago, which was what people should do if individuals fell in their communities. It was not possible to respond to the question quickly, but after some discussions with the Welsh Ambulance Trust and co-workers in the Betsi Cadwaladr Health Board, it was highlighted that there was no national or regional protocol for this matter. It was explained that the "I Stumble" protocol was used by the trust, the Health Board and some other local authorities, but that this protocol looked at how to help individuals if they fall and how to deal with them after they fall. It was highlighted that the protocol did not deal with the question which is how to respond if individuals fell and an ambulance was not available for 8-10 hours, and what advice could be given to a carer.

It was expressed that work had been made to translate and add to the "I Stumble" system, and specifically to the "Very Long Waiting Time?" part. It was emphasised that the observations were superficial, but it was not possible to go into much detail as it was a very difficult situation as every case was different. It was explained that the Betsi Cadwaladr Health Board Therapists Regional Director was happy to put a Health Board badge on it. It was added that a consultation on the document would be held to see whether there was a better

way of sharing the information. Following this, it was noted that training would be held for internal carers and external providers.

In addition to this, it was noted that officers within the Welsh Ambulance Trust were very eager to start a pilot in Gwynedd to see whether it was possible to locate equipment to lift individuals that have fallen in suitable locations within the communities, and to train local volunteers on how to use them. It was noted that they were expecting a specific plan in terms of locations etc., and despite it being different to the protocol, it was explained that it had developed as a result of the discussions that had risen.

During the discussion, the following observations were noted:-

- Gratitude was expressed for the report, and congratulations was given on creating a clear report, considering that a protocol was not in place before this. It was highlighted that the 'Very Long Waiting Time?' element might need to be in another colour to draw attention to it.
- It was enquired whether there was a timetable to hold training on the protocol jointly with the Health Board, or whether there was a timetable for the pilot scheme.
 - o It was noted in terms of the training, that there was no definite timetable but that there was no reason to delay and it was hoped that it would be possible to hold it during the spring, ready for the summer and autumn.
 - o He noted, in terms of the pilot scheme, that there was no date but the Corporate Director would continue to enquire to put a timetable in place.
- It was enquired whether it was possible to create a page for the public after it was accepted, as it was very important for this information to be shared further as it was useful to everyone.
 - o It was expressed that there was no intention to do this, but did not see any problem with creating it, as it would not cost a lot to create and would be very valuable. It was highlighted that there was a need to think about how to distribute the information to the public.
- It was noted that the former chair Cllr Eryl Jones Williams, as he had noted his apology, thanked for the reported.

RESOLVED

- a) To accept the report and to request the Corporate Director to consider distributing the information to the public if possible.

The meeting commenced at 10:30am and concluded at 2pm

CHAIRMAN

TITLE	Annual Report on the Children and Supporting Families Department and the Adults, Health and Well-being Department's Complaints, Enquiries and Expressions of Gratitude Procedure for 2022-23
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 CYNGOR GWYNEDD CABINET MEETING	11/04/2024

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 commitment to prepare an Annual Report on the implementation of the Representations and Complaints Procedure

	<p>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 for 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.</p>
2.2	<p>The Children and Supporting Families Department's Customer Care Officer is managed by the Senior Safeguarding and Quality Manager within the Children and Supporting Families Department.</p> <p>The Adults, Health and Well-being Department's Customer Care Officer is managed by the Department's Senior Safeguarding and Quality Assurance Manager.</p> <p>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 users.</p> <p>The Customer Care Officers are responsible for:</p> <ul style="list-style-type: none"> • 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 Step 1 of the procedure; • Co-ordinate investigations by independent investigators into formal complaints under Step 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 Step 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.

	<ul style="list-style-type: none"> • 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 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 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 in order 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 chooses not to follow the Complaints Procedure, the matter is dealt with as an enquiry or an 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 I(a) and I(b)

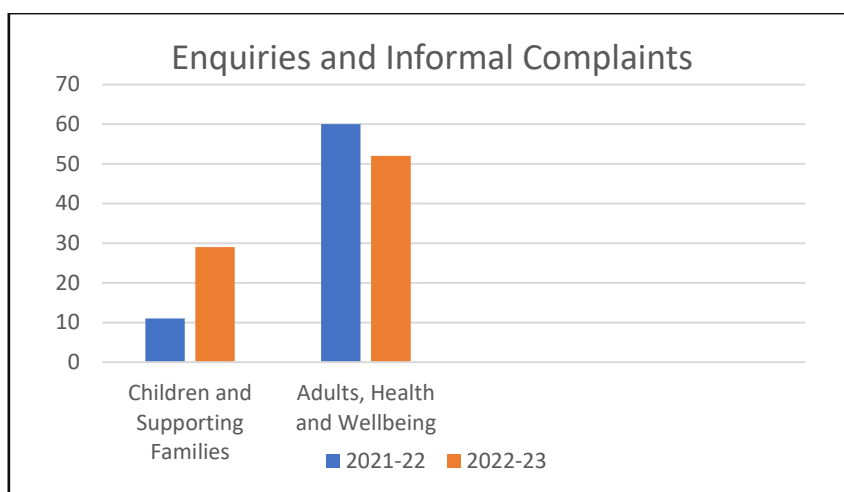
below for a breakdown of the source of each enquiry and the unit/service that is responsible for responding to that particular enquiry.

TABLE I(a) – Enquiries and Informal Complaints received by the Children and Supporting Families Department

	2021/22	2022/23
Solicitors		1
Ombudsman Enquiry		2
Local members		1
Members of Parliament or Assembly Members	11	7
Service Users		
Relative		18
The Public		
Foster Carer		
Other Agent e.g., advocacy service		
Total	11	29

TABLE I(b) – Enquiries and Informal Complaints received by the Adults, Health and Well-being Department

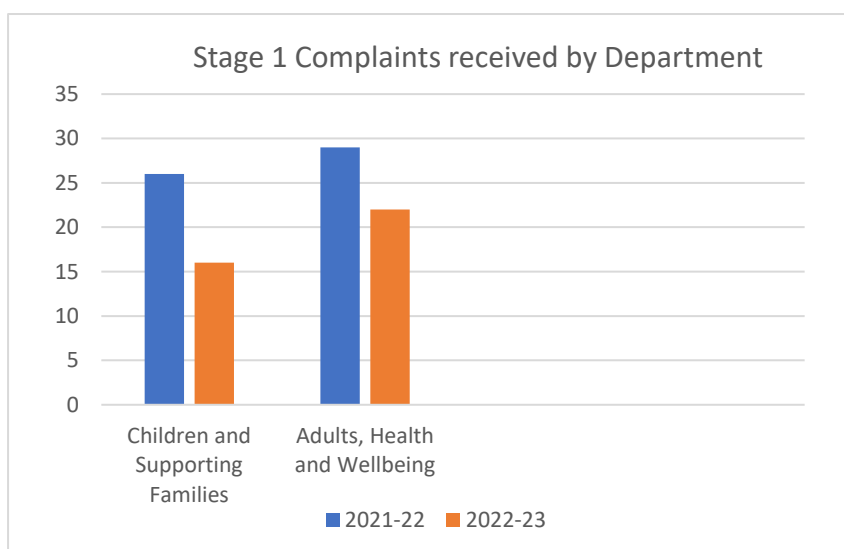
	2021/22	2022/23
Solicitors	1	
Ombudsman Enquiry		
Local members	5	4
Members of Parliament or Assembly Members	25	25
Service Users	1	2
Relative	12	9
The Public	10	9
Issues with Disabled Parking Spaces	1	
Other counties	1	
The Police	2	
Older People's Commissioner	1	
External Companies Providing Care		1
Cyngor Gwynedd Staff (other Department)	1	1
Health Board Staff		1
Total	60	52

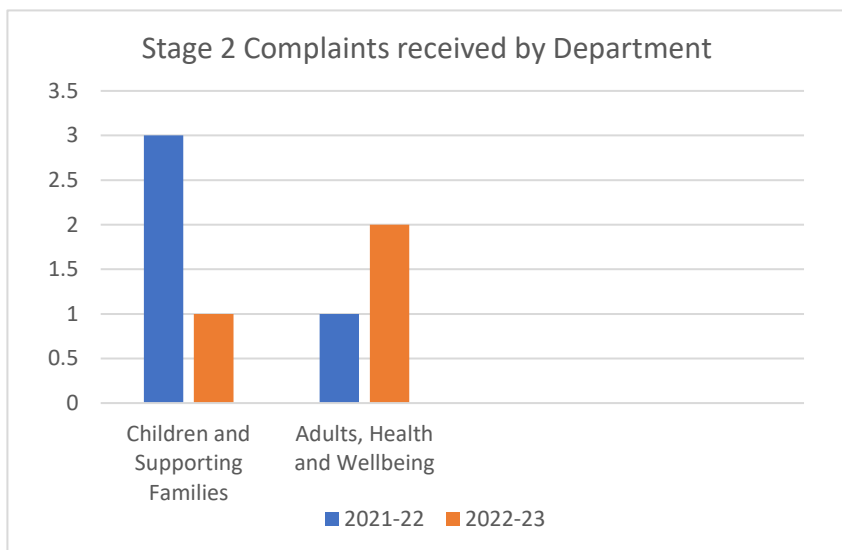


5.	Social Services Statutory Complaints Procedure – Local Resolution
5.1	<p>Every effort is made to resolve the complaint so that the complainant and the Service are satisfied. Obviously, a local resolution is the best resolution for everyone and this can be achieved by investing time and effort earlier on. However, if the complainant decides to make a formal complaint, the usual procedure is to have contact over the phone, by e-mail, or face to face with the complainant or representative to try to resolve the matter. Over the years, the Customer Care Officer has 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.</p>
5.2	<p>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 and they are recorded as Informal Enquiries and Complaints. In addition, the service user may declare that they do not wish to make an official complaint under Stage 1 or Stage 2 of the same Procedure.</p> <p>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.</p>
5.3	<p>Formal complaints are known as a Stage 1 Complaint under the Social Services complaints procedures. Following receiving the complaint, it is sent on to the relevant Senior Manager. The Senior Manager would contact the complainant over the phone to discuss their complaint and try to find a solution. Following this discussion, the Senior Manager sends a letter confirming the discussion on to the complainant. If the complainant does not want a phone discussion, then it is possible</p>

	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.
5.5	Examples of the complaints received by both Departments are seen in Appendix I(a) and I(b).

TABLE 2 Social Services Statutory Complaints Procedure		
CHILDREN AND FAMILIES DEPARTMENT	2021/22	2022/23
Stage 1	26	16
Stage 2	3	1
Ombudsman	0	0
Total	29	17
ADULTS, HEALTH AND WELL-BEING DEPARTMENT	2021/22	2022/23
Stage 1	29	22
Stage 2	1	2
Corporate Complaints Procedure	3	0
Ombudsman	0	0
Total	33	24



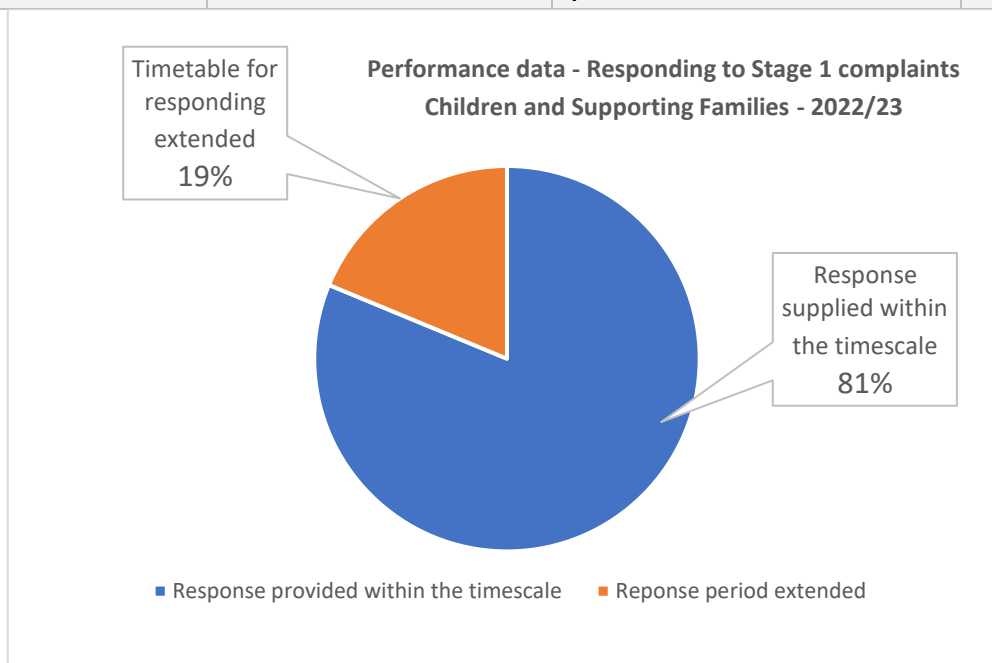


6.	Stage 2 – Social Services Statutory Complaints Procedure – Formal Investigation
6.1	<p>Should a complainant wish to escalate his/her complaint to Stage 2, he/she would have to provide a full record of the complaint along with any achievable outcomes; this would then form the basis to what we call 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.</p> <p>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 produce the report.</p> <p>If the complainant continues to be unhappy after following the Stage 2 process, they can ask the Ombudsman to investigate further.</p> <p>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.</p>

6.2	<p>During 2022/23, the Children and Families Department received one request to escalate a complaint to Stage 2 of the Social Services Statutory Complaints Procedure. In this case, the Independent Investigator partially accepted the complaint.</p> <p>Two complaints to the Adults, Health and Well-being Department moved on from Stage 1 to Stage 2 during 2022/23. The Independent Investigator decided not to uphold either complaint, and did not identify any recommendations for improvements to the Department's work as a result of his investigation to the matters in question.</p>
7.	Investigations into complaints received by the Public Services Ombudsman
7.1	<p>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 Service Ombudsman for Wales, or the Welsh Language Commissioner, or the Equality and Human Rights Commissioner, depending on the nature of the complaint.</p>
7.2	<p>Usually, if the complaint has not already been dealt with under Stage 1 of the Social Services Statutory Complaints Procedure, the complaint will be referred back to the Department in an attempt to resolve the complaint locally. If the individual is still dissatisfied after that, he/she has the right to escalate the complaint to Stage 2 of the Social Services Statutory Complaints Procedure or return to the Public Services Ombudsman for Wales, the Welsh Language Commissioner or the Equalities and Human Rights Commissioner (depending on the nature of the complaint) so that an investigation can be held.</p>
7.2	<p>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 2022/23 by either of the two Departments during the period of this report.</p>
8.	Complaints about services jointly provided with the Health Board
8.1	<p>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 2022/23.</p>
9.	Adherence to the Statutory Complaints Procedure Response Timetable
9.1	<p>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.</p>

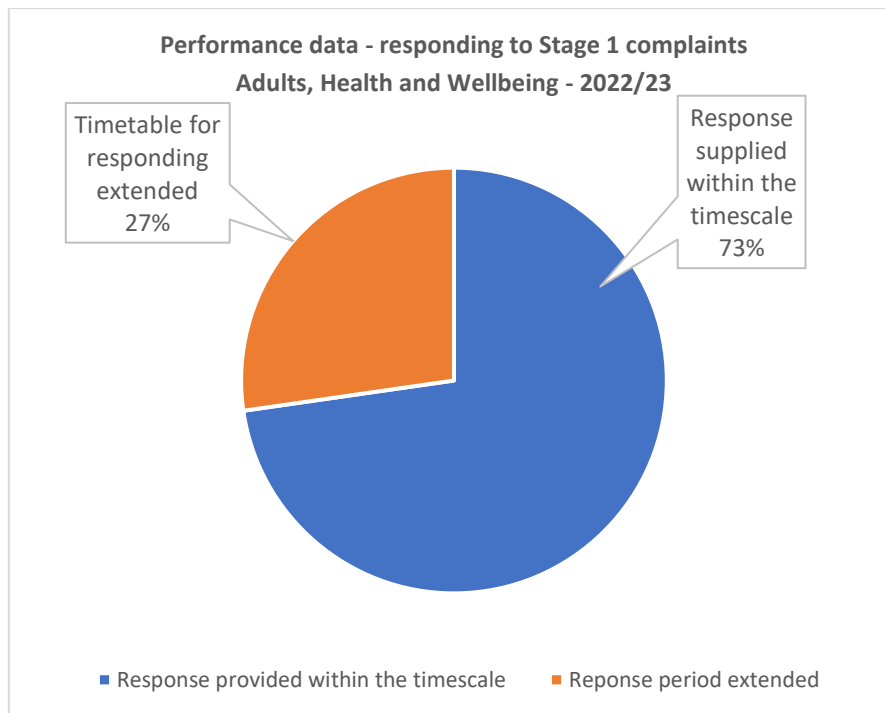
	Then, we will write to the complainant within 5 working days of the discussion to confirm the terms of the complaint resolution.
9.2	The Adults, Health and Well-being Department managed to respond to 73% of Stage I complaints within this timetable during 2022/23. The Children and Supporting Families Department managed to respond to 82% of complaints within the same timetable during 2022/23.
9.3	<p>The reasons for any late responses were mainly related to the complexity of the complaint in question, and the research work 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.</p> <p>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.</p>

Social Services Statutory Complaints Procedure – Children and Supporting Families Department – Response Performance 2022/23						
Stage 1 (total – 16)						
<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>
14	2	16	13	13	3	5
Stage 2 (total – 1)						
Number acknowledged within 5 days	Number of responses received within 25 working days		Total delayed under exceptional circumstances		Number completed within 6 months	
1			1		1	



Social Services Statutory Complaints Procedure – Adults, Health and Well-being Department – Response Performance 2022/23

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	16	6	8
Stage 2 (total – 2)						
Number acknowledged within 5 days	<i>Number of responses received within 25 working days</i>		<i>Number delayed under exceptional circumstances</i>		<i>Number completed within 6 months</i>	
2			2		2	



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 Department offers under the Social Services and Well-being (Wales) Act 2014.
10.2	No complaints were received during 2022/23 that were addressed under the Council's Corporate Complaints Procedure.

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 Senior Managers to analyse every complaint and to discuss and learn in order 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 Senior Managers 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 Trends – 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 have to 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 2022/23, as each complaint tends to be unique to each case. In accordance with the Complaints Procedure, the Team Manager or the Senior Manager will discuss the complaint with the complainant. Through discussion, the Team Manager is able to 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.
	Communication
11.7	During 2022/23, there was a trend yet again of complaints due to a lack of clear or consistent communication with families. Clear and consistent communication is very important, and the way things are explained to families from the outset is critical in ensuring that they understand why the Department does what it does, what the Department is able to offer and why, in some cases, it is not possible to offer any service at all. It is also important to note that the expectations of families to receive updates and responses to their enquiries from Social Workers are extremely high, and unattainable in several cases. That is, families would expect a response immediately if they contacted the Department, and they would be displeased if the relevant Social Worker cannot contact them back within a few hours of that day, even if it is not an urgent matter.
	Families' Expectations
11.8	This trend is seen annually in the complaints made against the Department, and it is difficult to respond to complaints by families that feel that the Department should do more to support them, that believe they should receive more services/contact/intervention and believe that their children should be returned to their care. Parents' expectations of what the Department is able to offer are high, if they feel that they have been failed in any way by the Department, they lodge a complaint. When such complaints are made, full investigations will be held and, in most cases there will be clear evidence indicating that the Department has acted appropriately and in accordance with the protocol.

	Historical Complaints
11.9	<p>New themes that have emerged over the last year are historical complaints. Individuals submit a complaint about an event/experience that happened to them some years ago. The social services statutory complaints procedure notes that the Department is not required to investigate a complaint from over a year ago. Clearly, looking into historical complaints is challenging as the majority of staff that related to the case at the time have now left the Council's employment or have retired. In the absence of that individual, it is difficult to question them or get to the root of any incident or decision. As a Department, we do not like to refuse a complaint, and if it is possible for the Department to conduct a fair and full investigation, then we would do that. In some cases, this is not possible as so much time has passed. However, these individuals have received a service from us and we can use their experiences to improve services for the children and young people of Gwynedd in the future. In response to such situations, we have agreed on an alternative procedure, by inviting the individual to discuss with the Independent Person to share their experiences and ensure that they receive a full hearing. The Independent Person will write a short report for the attention of the Head of Department to learn and improve the services in the future. This might not have been the response that the complainant had hoped to receive, but as a Department, we try to ensure that they receive a full and fair hearing at all times.</p>
	Complaints and Enquiries Trends – Adults, Health and Well-being Department
11.10	<p>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 about the care of individuals in residential homes is useful to identify broader care problems in those organisations that will require further investigation by the Monitoring Officers.</p>
11.11	<p>A variety of complaints and enquiries were received on different themes during the year. Very similar to last year, the most prominent theme that was brought to our attention during the year was complaints and enquiries about the impact of the difficulties we have faced as a Department to be able to arrange domiciliary care packages and arrange residential/nursing care placements in good time.</p> <p>During one quarter this year, three enquiries were received from Members of Parliament and Assembly Members on this theme, which included subjects such as:</p> <ul style="list-style-type: none"> • Enquiry about an explanation as to why an external care company had withdrawn from a care package at short notice; • Enquiry on behalf of a service user's family about the reasons why we could not provide sufficient hours of domiciliary care; • Enquiry on behalf of a service user's family as to why we could not arrange EMI day care locally.

A specific problem became apparent during the last weeks of the quarter as an external care company gave five working days' notice to the Department before withdrawing from the care packages of many service users in the Porthmadog area. During the first quarter of the year, two complaints were received from the families of service users about this matter as we had not managed to arrange replacement long-term domiciliary care at the time.

During the second quarter of this year, this matter continued to cause the Department to receive more complaints and enquiries. 4 out of 7 complaints received during Quarter 2 had been submitted by the families of service users about the impact changing a care provider had on them. Through the hard work of the Department's staff in holding further discussions, it was managed to maintain the domiciliary care service in the majority of these cases in the short term, and the Department continued to work hard to be able to provide care for the long-term.

3 out of 4 complaints received during the third quarter were involved with the difficulties faced by the Department in providing some aspects of domiciliary and residential care. The complaints received were based on concerns from families/carers about relatives failing to be discharged from hospital and/or a care home due to a shortage of domiciliary carers, and a response was provided to these complaints under Stage 1 of the Complaints Process. Four additional enquiries were also received from Local Members and/or Parliamentary Members on behalf of families on the same theme.

Three complaints were received about the quality of work of one external provider that had been commissioned to provide Direct Payments services to service users. As the company is external to the Council, our policy on handling complaints about external providers was implemented. Under this policy, we have a duty to assist the service user to submit a complaint directly to the external company. This procedure is followed in order for the external company to have an opportunity to respond under their internal complaints procedure in the first instance. The complainants can still use the Department's complaints procedure if they are unsatisfied with the response. The Business Unit is aware of the complaints and is working closely with the company to ensure improvements in the service.

During the third and fourth quarters this year, a reduction was seen in the number of enquiries/complaints about the difficulties currently faced by the Department to provide some aspects of domiciliary/residential care as we only received one complaint about this particular theme during this period.

In order to improve the situation, substantial work continues within the Department to recruit staff and increase the day and respite care provision and ensure that the increasing demand on our domiciliary care services can be met. In addition, the Domiciliary Care Project to reorganise and improve the provision available is continuing.

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 to six months. The Officer is responsible for ensuring that application forms are up-to-date and correct, and is responsible for receiving enquires 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 that 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.
--	--

TABLE 5. Information requests – Children and Supporting Families		
	2021/22	2022/23
Requests under the Freedom of Information Act 2000	89	75
Data Protection Act 1998 / Data Protection Act 2018 Requests	147	202
Total	236	277

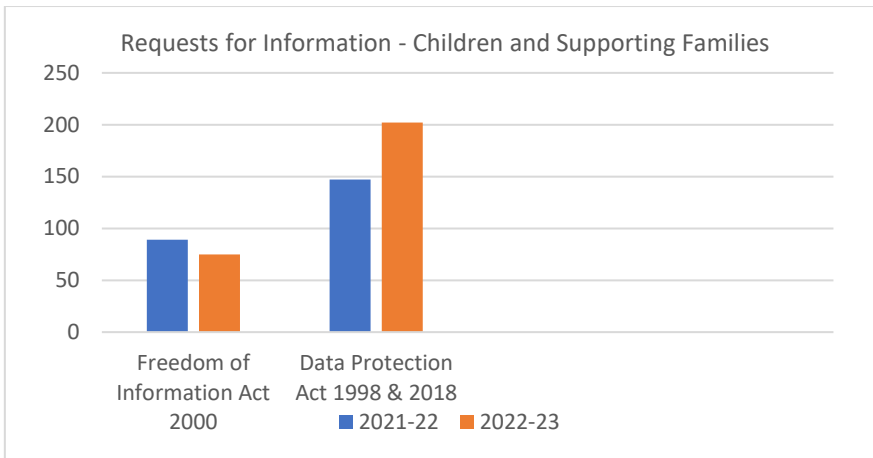
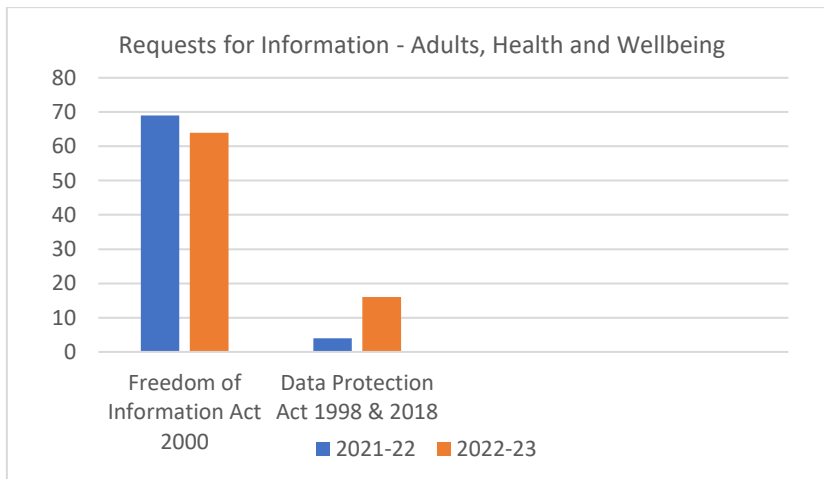


TABLE 5. Information requests – Adults, Health and Wellbeing		
	2021/22	2022/23
Requests under the Freedom of Information Act 2000	69	64
Data Protection Act 1998 / Data Protection Act 2018 Requests	4	16
Total	73	80



14.	Expressions of Gratitude
14.1	<p>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.</p> <p>In addition to the thanks and compliments recorded by the Customer Care Officer on the RESPOND recording system, we are also aware that a large number of thanks, gifts etc. have been delivered to 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.</p>

NUMBER OF EXPRESSIONS OF GRATITUDE DURING 2022-2023 – ADULTS, HEALTH AND WELL-BEING					
Adults Services (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
34	38	1	0	1	74

NUMBER OF EXPRESSIONS OF GRATITUDE DURING 2022-2023 – CHILDREN AND SUPPORTING FAMILIES	
	TOTAL
	85

EXPRESSIONS OF GRATITUDE AND PRAISE – EXAMPLES FROM 2022/2023

<p>“Good morning Sue, I am writing to thank you and all your colleagues for the welcome you gave to the Deputy Minister for Social Services, and the officials accompanying her, on her visit to Plas Pawb last Friday. I received feedback that the Deputy Minister enjoyed the visit very much, speaking to those who provide parenting and family support in Gwynedd, including the work on out of court parenting support and with the Ukrainian families settled in your area. We really appreciate the effort you put into this. It was invaluable for the Deputy Minister to get insight into the important work you all do to support parents and families. Thank you very much to you all”.</p>	<p>Thank you</p>	<p>Meirionnydd and Dwyfor Children's Team</p>
<p>“I send these few words to note my full appreciation of your department's staff who have been so kind and hard-working to plan to have a stairlift in our home for my wife, XX recently. I would like to say a special thanks to Edward Owen, your occupational therapist, for his courtesy every time when arranging to have the stairlift in place. Colin, the young man from the DSL Mobility company must also be praised for his tidy work here. My wife greatly appreciates everything and is very pleased with the new machine. Her life is much more pleasant at the minute and the journey upstairs is now much kinder on her mobility! Thank you very much to Cyngor Gwynedd and their gracious staff once again, on behalf of my wife and I”.</p>	<p>Thank you</p>	<p>Adults Occupational Therapy Service (Internal Provider)</p>
<p>"Hello just a email to highlight the support I have had from Maria since XXXXXXXX. My first thought was that it was going be a nightmare and all negative support and I was dreading it ... but to my surprise I have had 100% brilliant support and advice from the service... the help has got me on track and taught me different ways of being a parent not just this it has mentally helped me. Finance advice which I had very good support from Maria with I cannot praise enough she pointed me in the right direction, and I could message or call her any time for any advice which helped me a lot when you sit there over thinking things. Thank you for this support"</p>	<p>Thank you</p>	<p>Edge of Care Team</p>
<p>“We recently lost our Mother who was a resident at the Plas Hafan home in Nefyn. She lived very happily there for three years and as a family we are indebted to all the staff who cared dearly for her and for all the joking and laughter she always experienced there. Despite the obstacles they faced during the pandemic, knowing that Mum was receiving the best care possible was a great comfort to the family and we had an</p>	<p>Thank you</p>	<p>Residential and Day Care (Internal Provider)</p>

<p>opportunity to chat with her via Facetime or safely outside in the garden. Nothing was too much trouble. I will be eternally grateful to them for their tireless commitment to ensure that the well-being of residents is a priority at all times.</p> <p>Mum never said a bad word about Plas Hafan and she was a lady who was always forward with her opinion on various matters!</p> <p>During her final weeks, every member of staff caring for her went the extra mile to ensure that Mum was comfortable and received everything she needed conveniently and within her reach. We were looked after as a family when visiting and a cup of tea and a piece of cake was never far away. We will be eternally grateful to Plas Hafan for making my Mum's last years very happy, full of entertainment and laughter.</p> <p>Words like these are not enough to convey our gratitude for the care she received and passing Plas Hafan in Nefyn will bring back very fond memories to us.</p> <p>We would like you to convey our thanks to them – every member of staff there for their hard work and affection when caring for my Mum. Their kindness will remain with us forever.”</p>		
<p>"I would just like to compliment one of your social workers Dylan Wyn Owen in relation to the child XXXX. Dylan has been fantastic in his correspondence with Conwy Social Worker, ensuring that XXXX has had the best transfer from Gwynedd SSD to Conwy SSD. Dylan definitely at all times has had XXXX best interest at heart and has worked to ensure that his transition to Conwy LA has been as smooth as possible. I have just chaired a meeting that Dylan attended which was so positive and demonstrated such good practice from Dylan that I felt the need to email you and let you know. This is a great example of how social workers and neighbouring LA's should definitely work and all credit to Dylan who has demonstrated 'good practice'."</p>	Thank you	I6+ Team
<p>“We laid A to rest last Thursday, in her garden with her beloved dog. We had a very quiet ceremony with just immediate family, a very simple but loving service - followed by tea with neighbours and friends looking at photos and remembering A. A walk on the beach plus ice cream from T on Friday followed, all in the beautiful Welsh sunshine. It was a joyful couple of days with everyone staying at the cottage, not empty after all but filled with love and laughter, and some tears!!</p> <p>Thank you for everything you did for A, to enable her to stay in her cottage. I know this was not always easy, and that she provided some challenges along the way, but you were crucial in her being allowed to see out her days in her own home by ensuring she was provided with all the equipment and supplies</p>	Thank you	Domiciliary Care (Internal Provider)

<p>she needed, especially in the final few months when A was so dependant on the help of others.</p> <p>You always treated A with such respect and kindness, nothing seemed too hard or complicated for you and your team. You gave her dignity when she deserved it, and I think that given the constraints that I know you have to deal with, financial and time being two of them, this was such an achievement. You were always there to listen to us, reassure us, and explain to us what was needed, you always organised things so quickly, you always returned our calls and messages, you understood how difficult it is as worried family wanting the best for their loved one, basically you were AMAZING.</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>		
<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 wanted to send you a message (Haf Owen), Ann Taylor, Stephanie and the Drws y Nant Team, if you see them please give them a huge thanks for the past two years and I want to say sorry to everyone for how I was before but I have changed and I'm so proud that I have and that is through the help of Ann Taylor and Tara with therapy and giving me the chance, so I want to thank you for everything with XXXX and XXXX, you've been fair with me throughout it and I mean this in the nicest possible way, but I hope that I will never see social ever again but thank you so much x"</p>	Thank you	Edge of Care Team, Arfon 2 Children's Team, Support Service and Reviews Team
<p>"In a world full of complaints, I am pleased to send a message of thanks, appreciation and praise. My mum is deteriorating and yesterday morning I received a message from a neighbour expressing concerns. Soon afterwards, a carer went to visit mum as she knew her, and she found my number and phoned me to report her concerns. She did not have to, and I really appreciate it. During the afternoon, another worker/manager from your service visited mum on a usual visit that had been arranged and they contacted me via mobile phone and left a text message when there was no answer. I thanked her and received a kind and courteous message full of care and concern</p>	Thank you	Domiciliary Care Service (Internal Provider)

<p>outside working hours. I would also like to thank Hayley and Rowenna for everything and, unfortunately, it is likely that further contact will be needed with them and their colleagues in the future as mum's condition deteriorates – old age is inevitable. I am awaiting a report on the way forward, but the purpose of this message is to recognise the commitment and say thank you"</p>		
<p>"After the recent passing of my sister, I would like to thank all the staff at Plas Pengwaith for the care and devotion demonstrated towards my sister during the last 5 years whilst she was a resident there. Whenever I visited I always felt that she was in a warm, friendly, caring environment and she only had words of praise for all the staff who looked after her.</p> <p>Thank you very much for your kindness towards her and also for your devotion, commitment and kindness. As a family, we have appreciated your tender care of her. She is now at rest and singing with the angels."</p>	<p>Thank you</p>	<p>Residential and Day Care (Internal Provider)</p>

15.	Work Plan for 2023/24
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 Service 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	The Customer Care Officers will work jointly with the Public Relations and Communication Manager to update and re-design the Council's webpages on the procedures of the Complaints Process. The above work is essentially important to ensure that the information on how to submit a complaint is clear and currently accurate, and to also ensure that the process is open to all who need it. It is anticipated that this work will be completed by the end of summer 2023.

16.	Statistics on the use of Welsh and English when responding to complaints and enquiries
16.1	The Customer Care Officers respond to enquiries and complaints in the chosen language of the enquirer or complainant. See the relevant figures on the use of both languages below.

The Complainant's language choice to make an enquiry/complaint in 2022/2023 – Adults, Health and Well-being Department			
	Welsh	English	Total
<i>Informal Enquiries and Complaints</i>	23	29	52
<i>Stage 1</i>	7	15	22
<i>Stage 2</i>	1	1	2
<i>Corporate</i>	0	0	0
<i>Ombudsman</i>	0	0	0

The Complainant's language choice to make an enquiry/complaint in 2022/2023 – Children and Supporting Families Department			
	Welsh	English	Total
<i>Stage 1</i>	2	14	16
<i>Stage 2</i>	0	1	1
<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 2022/23

Reference	Brief description	Stage	Team	Response	Lessons to be learnt	Grounds to the complaint
GC/11975-22	Complaint received from a parent regarding the Service. The father parent did not feel that the Service was taking his concern seriously. He wanted an investigation into what had been raised and wanted a new Social Worker on the case.	Stage 1	Meirionnydd and Dwyfor Children's Team	The relevant Team Manager contacted the parent over the phone to discuss the complaint further. He received confirmation that each concern had been addressed in full. Following the full explanation, the complainant felt better and they continued to work with the Service for the benefit of the children.	No lesson identified.	No grounds to the complaint.
GC/12605-22	Complaint received from a parent about a member of staff. The parent felt that the staff member had breached confidentiality.	Stage 1	Fostering Team	The matter was addressed by Helen Parry, the Council's Senior Data Protection Statutory Officer. She identified that there was no evidence of breach of confidentiality. The Senior Operational Manager – Resources wrote to the complainant with the outcome. The Department understands, although there was no evidence of a breach of confidentiality, the complainant was very emotive about the situation. The staff member wrote personally to the complainant to apologise.	No lesson identified.	No grounds to the complaint.
GC/13021-22	Complaint from a parent about a Social Worker. Felt that the Social Worker did not keep in contact with him and that the relationship with the Social Worker had broken down. Wanted a new Social Worker.	Stage 1	Meirionnydd and Dwyfor Children's Team	The relevant Team Manager contacted the complainant to discuss. It became clear that the parent had high expectations in terms of contact with the Social Worker. The role of the Social Worker was discussed with him, and he was happy to continue working	No lesson identified.	No grounds to the complaint.

				with the Social Worker for the benefit of the children.		
GC/13065-22	A complaint arrived regarding the way the Out of Hours Team dealt with an emergency case regarding assessing an individual to the Hergest Unit.	Stage 1	Out of Hours Team	The relevant Team Manager looked into the complaint and wrote a full response to the complainant. It was important to note that the Out of Hours Team were responding jointly with the Psychologist on call that night. Any decisions regarding the individual's emergency care had been made by the Health Board's staff. The Manager apologised on behalf of the Team for any animosity on that night.	No lesson identified.	No grounds to the complaint.
GC/13488-23	Complaint arrived from a relative of a child. They are unhappy with the result of an assessment and want the matter to be addressed by a Senior Manager.	Stage 1	Fostering Team	As this matter is in the Court, we are unable to process the complaint at this point. Once the final hearing has passed, we will process the complaint in accordance with the procedures of the social services complaints process.	We will look at this once the complaint has been investigated.	We will look at this once the complaint has been investigated.
GC/13706-23	Historical complaint by an individual. The individual wanted to make a complaint that the Social Worker had not listened and responded to her following an incident from ten years ago. She wanted a full investigation into her complaint.	Stage 1	Arfon Children's Team	The Senior Manager discussed fully with the Senior Complaints Officer as ten years had passed. The Social Worker did not work here anymore, therefore we would need to rely on records only to investigate the complaint. As so much time has passed, it would not be possible to conduct a fair investigation into the complaint. However, to ensure that the individual has the opportunity to have a	We have not received the Report yet.	In accordance with the complaints guidelines, as the matter is a historical one and after a full discussion, it was decided that it was not possible to fully investigate the complaint.

				hearing, the Department appointed an Independent Person to meet the complainant to listen to her experiences and write a short report. The Department will use the observations to learn and improve the service in the future.		
GC/13022-22	Another historical complaint, dating back once again around ten years. The individual felt that the Department had let her down, not kept her safe and wanted to pursue compensation.	Stage I	Arfon Children's Team	As the individual had declared that she was going to bring a compensation claim against the Department, it would not be suitable for the Department to respond to the complaint at this point. Providing a response could disrupt any Court process.	No lesson to note.	We cannot look further into the complaint as she declared her intention to pursue compensation.
GC/13656-23	Complaint by a parent about an Independent Reviewing Officer. The parent had received information that the Officer had used inappropriate language when describing her in a conversation with her ex-partner.	Stage I	Safeguarding and Quality Unit	The Senior Safeguarding and Quality Manager investigated the complaint. The complainant received a letter explaining fully the steps taken and the outcome of the investigation. There was no evidence to correspond with what had been noted within the individual's complaint letter.	No lesson identified.	No grounds to the complaint.

APPENDIX I(b) – EXAMPLES OF COMPLAINTS AND REPRESENTATIONS TO THE PARENTS, HEALTH AND WELL-BEING DEPARTMENT DURING 2022/23

Reference	Brief description	Stage	Team	Response	Lessons to be learnt	Grounds to the complaint
GC/12025-22	A relative concerned about the long delay before being able to arrange domiciliary care provision for a service user who is waiting temporarily in a residential home	Stage 1	Adults Service	Apology and an explanation provided about the reason for the lack of domiciliary care hours' availability. Department committed to try to arrange domiciliary care as soon as possible	No lesson identified.	Confirm that there are grounds to the complaint
GC/12085-22	Service user unhappy that a member of staff had contacted her via telephone instead of sending an e-mail	Stage 1	Adults Service	Apology provided and a note added to the file to ensure that staff only send e-mails from now on	Important to check what means of contact service users prefer	Confirm that there are grounds to the complaint
GC/12806-22	The family of a service user expressed concerns about a domiciliary care service coming to an end as the external care company was withdrawing from the area, and no service was available to replace it. Family urgently sought an explanation and solution	Stage 1	Adults Service	An apology and a full explanation were provided about the circumstances that had arisen as an external care company had withdrawn from a specific area. Several care packages had ended, and hard work was being carried out to try to get another provider to take over	No lesson identified.	Confirm that there are grounds to the complaint
GC/12860-22	Neighbour of service user reporting that domiciliary care staff leave farm gates open as they come and go to care for him.	Stage 1	Domiciliary Care (Internal Provider)	A full apology was provided, as well as distributing clear instructions to all domiciliary care staff about the importance of keeping gates closed for safety reasons	Remind staff of the Countryside Code and the importance of closing farm	Confirm that there are grounds to the complaint

					gates at all times	
GC/12979-23	A service user's family expressing concern about the lack of domiciliary care provision available to enable their relative to be discharged from hospital	Stage I	Adults Service	Information provided on the reasons for the delay before the domiciliary care could be arranged in this case. Commitment made to seek to resolve the problem as soon as possible	No new lesson identified	Confirm that there are grounds to the complaint
GC/13605-23	A service user wanted to submit a complaint about the lack of support from the service to meet their needs.	Stage I	Adults Service	The Area Manager undertook a home visit to discuss her concerns and to resolve the matters in question	No new lesson identified	No grounds to the complaint
GC/13765-22	A service user's relative expressing concern about the long time that had passed since her relative had been placed on the waiting list for domiciliary care.	Stage I	Adults Service	Information provided as well as full information about the reasons why many people were experiencing a long delay before being able to commence domiciliary care packages	No new lesson identified	Confirm that there are grounds to the complaint
GC/13825-23	An advocate on behalf of a service user's family noting allegations by the family that personal information about them had been shared with another family member without their consent	Stage I	Adults Service	Full investigation carried out. No evidence that information had been shared with any person that should not have received it. Full response provided.	No new lesson identified.	No grounds to the complaint

MEETING	Care Scrutiny Committee
DATE	11 April 2024
TITLE	Short Breaks Service (Derwen Integrated Team)
PURPOSE	To obtain assurance that suitable provision is available to all who need the service
AUTHOR	Marian Parry Hughes
Cabinet Member	Councillor Elin Walker Jones

1.0 Background

- 1.1 The support service provides respite in several different ways, through the home care services, community services and the various groups. This respite can be from 2 hours a week up to overnight care.
- 1.2 The sessions focus on providing a short break to the families but also places a focus on developing the children's life and social skills.
- 1.3 We work closely with the Hafan y Sêr respite unit to ensure that the children have a positive introduction to the unit.
- 1.4 The waiting lists for services have increased as some recruitment problems persist, and we have also seen a substantial increase in referrals to the service recently.
- 1.5 Some examples of the short break provision are home care, community care, services for groups, Amser Ni which is a project for developing short break opportunities by requesting volunteers, overnight stays, groups for 16–25-year-olds, work with siblings and a buddy system, and family fun days.
- 1.6 Part of the work of the Derwen service also includes Social Workers who provide assessments within 42 working days. As part of this work there are social workers who look specifically at the aspect of short break foster carers. They also work with the Fostering Team in order to recruit foster carers to help with the Amser Ni work.

2.0 What short break provision is available in Gwynedd?

2.1 Amser Ni is a provision that covers Gwynedd, and it has five elements, namely volunteering, activities, Support service, overnight short break, and overnight residential break. Therefore, the intensity of support goes from the lowest tier, namely volunteering, through to the highest tier of support which is an overnight residential break.



2.2 Volunteers

2.3 Amser Ni is a joint project between Gwynedd and Anglesey to look at developing short break opportunities for disabled children and their families. The main elements of this scheme are:

- Providing volunteers as a buddy for the families
- Organising day trips
- Overnight stays
- 16–25 groups

The impact of the service:

- Children and young people have a wider range of activities and opportunities to participate in, in safe and supportive environments.
- Families, parents and carers have increased resilience and improved emotional well-being
- Relationships within the family are more stable.

2.4 Siblings / Buddy work

2.5 Because the recruitment of volunteers has been lacking, only one family are currently receiving the 'buddy' work. In this example the volunteer takes the brother of a disabled child to play basketball once a week – the volunteer has created a strong relationship with the brother and the parent. The parent reports that the provision has helped to decrease anxiety and has increased the brother's confidence.

2.6 Activities

2.7 Day Trips

2.8 Day trips are provided during school holidays to children over 12 years old, with 10 children attending these trips regularly. There have been day trips to Flip Out, the cinema, Glasfryn, SC2, and positive feedback has been received from the families.

2.9 Groups for 16-25 Year Olds

2.10 A Group jointly with Llwybrau Llesiant (*Well-being Pathways*) which places a focus on the transition to adult services – these are held during the school holidays.

2.11 Family fun days

2.12 Four family fun days were organised over the past year, and these were very successful with up to 20 families attending these events. The day provides an opportunity for the families to chat and discuss with each other and gives the children the opportunity to do activities in a safe environment.

2.13 Support Service

2.14 Groups Service

2.15 Various groups have been established across the county.

2.16 There are groups on Saturdays in Arfon and Dwyfor and up to 25 children attend every time. A play group session is arranged during the summer holidays in the three areas which provides a variety of activities.

2.17 Much collaborative work has taken place to create new opportunities in the county:

- Working with the Byw'n Iach team to create quiet play and swimming sessions for children with additional needs, which are provided in four centres across the county on a monthly basis.
- Collaboration with the youth team to ensure there are youth clubs available for children with additional needs.

2.18 Groups for 16-25 Year Olds

2.19 A joint Group with Llwybrau Llesiant (*Well-being Pathways*) which places a focus on the transition to adult services – these are held during the school holidays.

2.20 Overnight Short Break with the Family

2.21 Home Care

2.22 This includes an example of two support workers providing an overnight session in the child's home once a week to enable the family to have a night of sleep, and a case where a worker supports the child in the morning to enable the parent to go to work.

2.23 Community Care

- 2.24 The community-based service is usually provided after school or on weekends, to enable the families to spend time with the siblings, have time to do the weekly food shop or to have time to themselves. This short break is very precious to the families and the children, and the families are very grateful for the service.
- 2.25 Where a home situation is fragile, overnight care is provided to a child every six weeks.

2.26 Overnight Residential Break

2.27 Overnight Stays

2.28 Two stays a month have been organised for children over 14 years old in Rhos y Gwaliau, Bala.

2.29 Hafan y Sêr – a short break residential building

2.30 Hafan y Sêr provides short breaks for children who are already open to Derwen and who have learning and physical disabilities. It is a building in Penrhyndeudraeth to provide a short break for parents and families of children with intensive needs.

2.31 Hafan y Sêr now provides for 45 children, these are children who come for regular stays or who are in the process of familiarising themselves with the service through the induction plans.

2.32 The ages of the children who access Hafan y Sêr ranges from 8 to 18 years old. To provide an overview of the needs of the 45 children/young people who receive the service, 10 have physical disabilities/health needs, 29 have Autism and six have learning disabilities/other genetic conditions.

3.0 How much use is made of the provision?

3.1 There is a high demand for the Derwen Support Team service. 232 children are in receipt of a Support service, and 1,014 hours of support are provided weekly. The hours are used to take children to groups, or to go out for the day to give parents some respite. In addition, home care is provided to help families cope with their children's needs by providing some respite for the parents to sleep. The number that are on the waiting list is 25.

3.2 The other work provided by the Derwen Support team is through volunteers, organising day trips and implementing a buddy system. There are 39 children receiving this service, with 14 on the waiting list.

3.3 Please see below the numbers who have received a service from the Derwen Support Team over the past three years:

3.4

2021/2022	
Number of Children	159
New Referrals / Increase in Hours	72
Hours	59448

3.5

2022/2023	
Number of Children	162
New Referrals / Increase in Hours	93
Hours	64435

3.6

2023/2024	
Number of Children	232
New Referrals / Increase in Hours	103
Hours	70526

3.7 This data shows that both the demand for the service and the service provided have increased over the past three years. This is because the number of new referrals reaching the team has been greater than the number of young people transferring to adults' services. The number of referrals for young children with intensive needs has also increased.

3.8 The Hafan y Sêr service provides short breaks for five days/nights a week – it is open from 12pm Wednesday to 10am Monday morning for the short break provision. The children who receive the service come to stay depending on what assessed need is identified in their referrals. More often than not, the majority come to stay for two nights every six weeks. However, some come to stay monthly and for a period of three nights at a time if their needs/home situations are more complex. The service also works with the social workers in Derwen to be flexible to offer a higher provision during periods of stress in families' lives.

3.9 The new provision – since mid-January – means that Hafan y Sêr is open seven days a week to offer a placement to one child under Section 73(1) arrangements and it also allows more flexibility to be able to use the second bedroom within this part of the building to offer a service to families, depending on the needs that emerge as we move forward.

3.10 The number of children who receive a service in Hafan y Sêr as the support service from Derwen has increased over the past three years. There is a higher number of children in the 8-15 age-range who receive the Hafan y Sêr service. Please see the data below:-

3.11

Years	Numbers
21/22	34
22/23	38
23/24	45

3.12

Ages	Numbers
8-11 years old	20
12-15 years old	19
16-18 years old	6

3.13 There is currently a waiting list because capacity is full at present in terms of the number of children for whom Hafan y Sêr can offer a service. This stems from how many

children can be matched to stay together at the same time, and also the appropriate staffing level to meet those needs.

4.0 Does the provision meet the demand?

4.1 Support Service

4.2 Amser Ni has been hugely beneficial but there have been barriers along the way to make sure that the provision in place meets the demand. Recruiting volunteers has been a big problem over recent years, this is a national problem, where more people are trying to seek paid employment rather than volunteering. By continuing to advertise and search, the short breaks officer has created new connections recently and in doing so has been able to recruit three new volunteers. The fostering team also provides an element of Amser Ni. There are a small number of foster carers who take general placements who also provide Amser Ni placements. However, this changes over time and it is usually only one or two of the general households. The Fostering Team is discussing with Amser Ni how to liaise better and develop a broader provision.

4.3 Hafan y Sêr

4.4 The Hafan y Sêr provision meets the demand, and because of the provision that is in place it takes immense pressure off families who are coping with the intensive needs of their children when they want a short break, and therefore prevents children from having to enter care. The unit is now open for seven days a week. One child from Anglesey is benefiting from the provision and this creates an income for the Council and prevents a child from going into care.

4.5 Feedback from families is positive and they state their appreciation for the provision, and for the respite from their caring role.

4.6 The children who attend have the opportunity to gain confidence and have new experiences.

4.7 There are currently nine referrals on the waiting list. Hafan y Sêr works with Derwen regularly to determine the priorities for admitting individuals to the service, to ensure that we can target starting a service to the children/families who need it most.

4.8 Following every stay in Hafan y Sêr the parents/carers receive a written report on the stay.

4.9 The demand for the two services, namely the Derwen Support Team and Hafan y Sêr has increased despite there only being a small number on the waiting list for both services. Although there are waiting lists a service is offered to the families. For example, if a child is on the waiting list for Hafan y Sêr, the Derwen service makes sure that the parents are aware of this and offer more hours of support in the meantime. Furthermore, to help with the pressures on the Support service we discuss regularly with the parents/carers regarding the option of receiving direct payments. Therefore, by working closely as two teams we can meet the demand in Gwynedd. Feedback provided by parents/carers for both services also appreciate that the services are available. Please see below some of the comments that have been provided by parents/guardians who use the services:

4.10 Quote 1 – *“Thank you and the whole Derwen team for some fantastic trips this year, they are much appreciated.”*

4.11 Quote 2 – *“Having a link to you guys is always a comfort as I know there's always help there for her.”*

4.12 Quote 3: *"Lots of different activities with friendly approachable staff.... Lovely session thank you!"*

4.13 Quote 4 – *"Good fun, good range of Activities. Great team! Thank you."*

4.14 Quote 5 – *"Everyone is kind and welcoming and willing to help. Have enjoyed."*

Agenda Item 7

MEETING	Care Scrutiny Committee
DATE	11 April 2024
ITEM	AUTISM PLAN TASK AND FINISH GROUP
PURPOSE	To present the findings and recommendations of the Task and Finish Group
TASK AND FINISH GROUP CHAIR	Councillor Elwyn Jones
AUTHOR	Vera Jones, Democracy and Language Manager

1. BACKGROUND

- 1.1 An update on the Gwynedd Autism Plan was presented to a meeting of the Care Scrutiny Committee on 20 April 2023. Responses were provided to several matters that were discussed during the committee meeting, but some additional issues arose, and it was decided to establish a task and finish group to discuss these matters further.
- 1.2 A brief for the work was developed, and by January 2024 the membership of the group was established: Councillors Elwyn Jones, Gareth Coj Parry, Jina Gwyrfai, Gwynfor Owen and Dawn Lynne Jones. The brief was updated to include the membership, relevant officers and a timetable, and the updated brief can be found in Appendix A.
- 1.3 The task and finish group members met on 19 February 2024 with a task to “ensure an understanding of the implementation of the Gwynedd Autism Plan as a whole”, including:
 - an understanding of the support available to individuals and their families when awaiting an assessment, and whether there are any barriers on the road to an assessment
 - following the wait for an assessment or diagnosis, in particular the support available for children within our schools, and whether there are any barriers
- 1.4 The group wishes to thank all the officers and relevant teams for their hard work supporting individuals and their families in the field of Autism – it is a significant step forward to be working across teams and organisations, and this is to be welcomed.

2. TASK AND FINISH GROUP DISCUSSIONS

- 2.1 Papers were submitted prior to the meeting held on 19 February, where Aled Gibbard gave a brief presentation on the progress of the Autism Plan, Dr Einir Peters on behalf of Natalie Woodward gave a presentation on the arrangements regarding waiting for a neuro-developmental assessment, and Delyth Gibbard reported on the support within Education. Members were given an opportunity to ask questions.

An update on the implementation of the Gwynedd Autism Plan, outlining the additional steps that had been delivered since the presentation to the Care Scrutiny Committee on 20 April 2023.

- 2.3 An update was presented on the steps that had been delivered and those that were underway, and all the Councillors were given an opportunity to ask questions.

- 2.4 While acknowledging that the services supported a wide range of needs, it was noted that there was a need to ensure that nobody fell through the net, e.g., individuals with autism only (no learning disability). During the discussion it was highlighted that support was available across all the services, which was crucial. There is a need to highlight the input and collaboration across the various departments (and with other agencies) as part of the Autism Plan was noted.
- 2.5 It was also noted that there was scope to strengthen the wording to note that the purpose should be to "develop a strategic direction" rather than "provide a context for developing a strategic direction" when updating the plan in 2024-25, although the explanation that the original wording was suitable for the beginning of the journey was accepted.
- 2.6 A number of matters were raised in relation to young people, in particular that the pathway available to 16-year-olds while awaiting an assessment varied, as the needs of each individual differed. It was explained that an individual who already received a service would continue to receive the support (e.g., through Derwen, the Disabled Children's Integrated Team), while anyone could contact the Autism team to receive advice and guidance.
- 2.7 It was reported that arrangements for looked after children happened as noted above, and that there was a responsibility to support looked after individuals until they were 25 years old, if they chose to receive that support. It was explained that the collaboration between the children and adults services was key, with continuity planning for support starting from the age of 14, and planning for transition to adults services increasing when the individual was 16-17 years old. The possibility of strengthening and raising awareness of the arrangements in place was discussed.
- 2.8 A discussion was held on the situation regarding training for key staff (who are involved with people with autism) in the children and adults services and within schools, and more general training for everyone. The need to empower as many people as possible through the training, especially front-line staff (e.g., within schools) was noted. The need to ensure that everyone who works directly with Autism received training was emphasised, and it was explained that the code stated clearly that any officer who came into contact with the condition should receive training.
- 2.9 In discussing provision in schools, space within schools was also discussed. It was noted that it should be ensured that there was early input by officers from the field of autism when school buildings or any other new buildings were planned – specifically to ensure that they addressed the needs of pupils with autism (e.g., availability of quiet rooms and the ability to dim lights) while accepting the need to empower the pupils themselves to deal with the factors and their surroundings.

An explanation of the process while individuals (and their families) are waiting for an assessment, the support available while waiting for an assessment and following diagnosis, the barriers that exist and what is being done to address these barriers.

- 2.10 It was explained that families could request an assessment following a discussion with their GP or the Additional Learning Needs Co-ordinator (ALN) in the school, although there were specific guidelines to be followed when requesting an assessment.
- 2.11 Figures were presented that showed that over 50% of children who received an assessment did not receive a diagnosis following a thorough assessment process. A further discussion was held on the complexity of the needs of children and young children, and consequently the

range of behavioural and emotional support that must be provided, particularly in our schools. Concern was expressed that wrongly referring individuals for assessments could be at the expense of individuals with autism. It was noted that the neuro-developmental unit was working with those who made referrals to try to alleviate the situation, and to further raise the referrers' awareness of the requirements.

- 2.12 On the other hand, there was concern that this could close the door if there were individuals (mainly females) who were more able to mask the condition, and it was noted that a "watchful waiting" process had to be followed for a long-term assessment. It was also noted that some individuals were assessed as having a different condition following the process.
- 2.13 It was emphasised that support was provided in relation to behaviour that was presented by pupils in schools, and that being on a waiting list for an assessment should not make any difference. It was noted that there was an opportunity to change the narrative surrounding waiting lists to emphasise that this support was available in the schools.

An explanation from the Education Department of the support available to children within our schools while waiting for an assessment or after receiving a diagnosis. What barriers exist and what is being done to address these?

- 2.14 A request was made to draw attention to the links with the Education Department and its input to the Autism Plan, and it was again emphasised that support was offered within our schools in relation to the needs presented, whether or not the pupils were waiting for an assessment.
- 2.15 It was noted that there had been a recent increase in needs and behaviours, and a question was asked about the impact of this on the capacity of the specialist teams that support school staff. It was reported that the team was currently stable. As part of the discussion on the shortage of language therapists and educational psychologists nationally, it was highlighted that the training arrangements for the professions was challenging as generally requirements by Universities in England require education psychologists who train in England commit to working in England following qualification. Elected Members were pleased to note that discussions are ongoing with the Universities of Wales to come to an understanding for training requirements and availability to train professional officers for the future.
- 2.16 It was explained that training on autism is offered to staff in all schools in Gwynedd and Anglesey, with the training tailored in accordance with the requirements of the schools. However, this was provided in cycles, and therefore it could not be guaranteed that everyone in all schools had received the training due to staff turnover. It was confirmed that retaining trained assistants was problematic, as there was a constant turnover of staff. The need to train staff was discussed, and the possibility of setting targets after establishing a baseline.
- 2.17 A discussion was held on the support for 16-year-old school leavers, and it was noted that systems were being developed between the Education Department and Coleg Meirion Dwyfor to support these individuals, as there was scope to improve the existing arrangements and provision. It was also noted that support was available from the Education service and the Adults service from various teams such as the Autism team, the 16-24 Education team and the employability team – depending on the needs of the individual. Members noted that there was a need to promote the potential support and the links between the various teams, to be highlighted in the Autism Plan.

- 2.18 In discussing the transition between the children or Education team to the adults service it was enquired whether the current method for deciding which team within the Adults service should provide support was the correct one. It was noted that the risks and challenges of the existing arrangements had already been identified and that a person-centred approach should be considered rather than looking at the service "box" that they fell into. Members expressed their support for proceeding with this important work.

Timetable and actions

- 2.19 The timetable and actions for 2023-24 were submitted as part of the meeting papers, and it was noted that the programme and actions for 2024-25 would be drafted soon.
- 2.20 It was mentioned that the Integrated Fund grant funded 70% of the existing plan, and the remaining 30% was funded by Council revenue funding. The grant funding was available for a further 3 to 4 years, although reference was made to the challenge of delivering the developments and proving the plan's success over the coming period.

3. THE TASK AND FINISH GROUP'S FINDINGS

- 3.1 Finding = what we have found as a result of the Task and Finish Group's work.
- 3.2 As seen from the discussions above, attention was drawn to several factors during the session. Some matters had already received attention from the service, and others would receive attention following the session. The findings of the Task and Finish Group are as follows:

a	AUTISM PLAN
	Significant progress has been made over recent months following the establishment of the Autism Team and the work between the various departments and agencies for the benefit of the individual.
b	Autism Plan - wording
	<ul style="list-style-type: none"> • The wording of the purpose of the plan to "develop a strategic direction" rather than "provide a context for developing a strategic direction" • The input of Education, Adults, Health and Children to the plan should be highlighted, and more detail provided about this provision • There is scope to highlight the support available to individuals with autism only, where they have no other condition for which they receive support. In addition, there is scope to highlight the support available from the Autism Team and the information on the various websites.
c	Autism Plan - Transition age provision (14-18 years old)
	<ul style="list-style-type: none"> • scope to raise awareness of the teamwork happening in the background to ensure a seamless transition and support for individuals • scope to highlight and further develop the collaboration with Grŵp Llandrillo Menai to support individuals with autism
ch	Autism Plan - Adults Service Provision
	<ul style="list-style-type: none"> • Encouragement to proceed with the work already underway to identify the most suitable person to support individuals with autism (depending on whether there are other conditions etc.) rather than trying to place them in a box for support from the mental health team or the learning disabilities team
d	Waiting list for an assessment

	<ul style="list-style-type: none"> • Scope to work on trying to change the narrative and emphasise the message that support is available while waiting for an assessment (through the schools, the autism team, awareness sessions / events and websites)
dd	Specialist Staff
	<ul style="list-style-type: none"> • Support for the ongoing discussions with the Universities of Wales to come to an understanding for training requirements for professional staff for the future.

3.3 Although it is outside the scope of the task and finish group's work, members wished to draw the Committee's attention to the impact of the increased demand on:

- a) the ability of the teams to support individuals with autism and their families
- b) the capacity of the teams to support the whole range of pupil needs, and
- c) the necessary expertise in schools to support all the different needs that exist.

4. TASK AND FINISH GROUP'S RECOMMENDATIONS

4.1 The services are requested to specifically consider the above findings. However, some issues have come to our attention that we wish to present specific recommendations in relation to.

4.2 TRAINING

It is recommended that the committee requests that the service:

- initially undertakes an audit of the training situation of professional staff who work in the field
- Then considers setting a target for delivering training, with the intention for it to be included on the core training programme as follows:
 - a) staff working or coming into contact with people with autism (in each department and including schools) and
 - b) awareness raising training for all Council staff.
- Build on the training for school staff and surgeries regarding referrals to the neuro-developmental team in cases where individuals do not qualify
- Encourage all the Councillors to follow the Autism Awareness training e-module and attend open days across the County which enable everyone to experience the autism bus

4.3 PLANNING SCHOOLS AND COUNCIL BUILDINGS

It is recommended that the Scrutiny Committee, in conjunction with the Cabinet Member for Children and Families, contacts the Cabinet Member for Housing and Property to ensure that there is input from the Autism Team to any development of a new school or school adaptations to make them more suitable for individuals with autism e.g. quiet spaces, the ability to dim lighting etc. It would be beneficial to establish the principle of ensuring that the Autism Team has input into any new development or adaptation to any Council building.

4.4 UPDATE TO THE CARE SCRUTINY COMMITTEE.

Following concern that the plan is currently grant funded, it is recommended that the Care Scrutiny Committee requests an update after a further 12 months of implementation to ensure that progress is continuing, and requests input from Education and Health once again.

The Committee is asked to consider the findings and recommendations of the Task and Finish Group.

TASK AND FINISH GROUP AUTISM PLAN BRIEF

What matter is being considered?

An update on the Gwynedd Autism Plan was presented to a meeting of the Care Scrutiny Committee on 20 April 2023. An update was submitted on the ongoing work, including an update on staffing, awareness raising steps, training and working in partnerships. In addition, the Cabinet Members responsible for Children and Adults Services submitted the priorities for the coming six months.

There were responses provided to several issues raised during the committee meeting, but some additional issues arose about the individual's experience when awaiting a diagnosis, frustration in the community regarding diagnosis waiting lists and a lack of clear understanding of the support available in schools following receiving a diagnosis.

The committee decided that they were keen to establish a task and finish group to discuss the matter further and requested that representatives from the Department of Education and the Health Board should be present to answer their concerns. It was also decided to extend an invitation to representatives of the Education and Economy Scrutiny Committee as the work bridges the work areas of both committees.

The purpose of the work is to ensure an understanding of the implementation of the Gwynedd Autism Plan as a whole, including:

- an understanding of the support available to individuals and their families when awaiting a diagnosis, and whether there are any barriers on the road to a diagnosis and
- following diagnosis, in particular the support available for children within our schools, and whether there are any barriers.

Actions

- Care Scrutiny Committee to receive the brief and identify three Members to participate. (21/09/2023)
- Invite representatives from the Education and Economy Scrutiny Committee (two members) to participate. We will correspond with members of the Education and Economy Scrutiny Committee by email following the Care Scrutiny Committee's decision on 21/09, formally confirming membership at the Education and Economy Scrutiny Committee meeting on 09/11/2023.
- Hold a meeting for the five members with representatives from the Children, Adults and Education Departments, and a representative from the Health Board. (~~Exact date to be confirmed following a discussion with key partners – anticipated end of 2023/beginning of 2024~~).

Updated for the First meeting of the Task and Finish Group, 19.02.2024

- Task and Finish Group meeting on 19.02.2024
- Purpose of the meeting:
- The purpose of the work is to ensure an understanding of the implementation of the Gwynedd Autism Plan as a whole, including:
- an understanding of the support available to individuals and their families when awaiting a diagnosis, and whether there are any barriers on the road to a diagnosis and
- following diagnosis, in particular the support available for children within our schools, and whether there are any barriers.

- Second meeting of the Task and Finish Group on 28.02.2024 to form conclusions following the additional information presented to the meeting on 19.02.2024. Form a short report based on the conclusions from this meeting.

- Report back to the Care Scrutiny Committee - ~~1 February 2024~~ (depending on the date of the above meeting). **11 April 2024**

Membership of the Task and Finish Group

Councillors Jina Gwyrfai, Elwyn Jones, Gareth Coj Parry, Dawn Lynne Jones, Gwynfor Owen

Key officers

A meeting will take place with the five members identified to take part in the task and finish group and the following key officers:

DEPARTMENT	KEY OFFICER
Children	Aled Gibbard, Senior Operational Manager Lucy Hemmings, Gwynedd Autism Team Leader
Adults	Mari Wyn Jones Helen Fôn Owen , Adults Services Senior Learning Disabilities Manager Bethan Mair Williams, Learning Disabilities Team Leader - South Gwynedd
Education	Delyth Gibbard, Senior Communication and Interaction Teacher Dr Einir Peters, Senior Communication and Networking Educational Psychologist
Betsi Cadwaladr University Health Board	To be confirmed. Natalie Woodworth, Service Leader of the Neurodevelopmental Team

Key for changes for 19.02.2024 version

[Additions in blue,](#)
deleted