



Pembrokeshire County Council
Cyngor Sir Penfro

Notice of Meeting and Agenda

To:

**MEMBERS OF THE SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE**

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information to:

ALL OTHER MEMBERS OF COUNCIL

Dear Member

Members of **SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE** are hereby summoned to attend a **HYBRID MEETING**
thereof to be held in **COUNTY HALL, HAVERFORDWEST** on
FRIDAY, 14 NOVEMBER 2025 at **10.00a.m.** for the transaction of
the business set out on the attached agenda.

Yours sincerely

W BRAMBLE

Chief Executive

Committee Membership:

Chair: Delme Harries (Independent Group)
Vice-Chair: Claire George (Welsh Conservative Group)

Independent Group: Michael James, Iwan Ward and Mel Phillips

Welsh Conservative Group: David Bryan

Labour Group: Maureen Bowen and Nicola Gwynn

Welsh Liberal Democrats Group: Alec Cormack

Not Affiliated to Any Group: Steve Alderman, Aaron Carey and
Michele Wiggins

Contact Name:

Kate Matthews

E-mail

Kate.Matthews@pembrokeshire.gov.uk

Date of Notice:

Monday, 10 November 2025

Webcast viewing link

<https://pembrokeshire.public-i.tv/core/portal/home>

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

14 NOVEMBER 2025 AT 10.00A.M. – HYBRID MEETING

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Agenda

	Pages
1. Apologies for absence	
2. Declarations of Interest	
To receive any declarations of interest in any matter to be discussed at the meeting.	
Members are requested to identify the nature of the interest and indicate whether it is personal or prejudicial.	
3. Minutes of Previous Meeting	
To approve as a correct record the Minutes of the Meeting held on 11 September 2025.	
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4. Action Log Update	19 - 23
5. Public Submission / Correspondence	
To consider any correspondence relating to any matters included on the Agenda	
6. Forward Work Programme	24 - 27
7. Update from the West Wales Regional Partnership Board	28
8. Care for Vulnerable Younger Adults and Children in Care post 16 support	29 - 31
9. Review of Practice Thresholds	32 - 34
10. Social Care Capital Programme	35 - 38

11.	Director of Social Care Director's Report	39 - 95
12.	Care Inspectorate Wales Report on Adult Social Care	96 - 114

MINUTES of a MEETING of the SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE held as a HYBRID MEETING in COUNTY HALL, HAVERFORDWEST on THURSDAY, 11 SEPTEMBER 2025 at 10.00a.m.

Present:

In person: Councillors Delme Harries (Chair), Claire George (Vice-Chair), Steve Alderman and Anji Tinley

Remotely: Councillors David Bryan, Aaron Carey, Alec Cormack, Nicola Gwynn, Michael James, Iwan Ward and Joshua Beynon

Members Attending with Chair's Consent:

Councillor Tessa Hodgson – Cabinet Member for Adult Social Care (In person)
Councillor Marc Tierney – Cabinet Member for Young Persons, Community Well-being and Future Generations (In person)

Officers in Attendance:

Michael Gray, Director of Social Care and Housing (In person)
Mel Laidler, Head of Adult Care (In person)
Dan Shaw, Corporate Planning Manager (part of meeting) (Remote)
Joshua Crowdie-Morgan, Team Manager, Adult Care (part of meeting) (In person)
Bradley Challinor, Finance Manager, Financial Services (In person)
Susan Sanders – Head of Democratic and Scrutiny Services (In person)
Kate Matthews – Democratic Services Assistant (In person)
Carys Walters – Translator (In person)

Also in Attendance

Alaistair Wakely – Service Delivery Manager, Children and Adult Mental Health Service (CAMHS), Hywel Dda Health Board (part of meeting) (Remote)
Joanne Cornish – Head of Integrated Transformation, Hywel Dda Health Board (part of meeting) (In person)
Erin Bonwick – Senior Nurse Manager, Hywel Dda Health Board (part of meeting) (In person)

Apologies for Absence:

Apologies for absence were received from Councillor Michele Wiggins.

13. Declarations of Interest

There were no declarations of interest made.

14. Minutes of Previous Meeting

It was pointed out that reference to Councillor Alistair Cameron on page 9, paragraph 3, should read Councillor Alec Cormack.

Moved by Councillor David Bryan; Seconded by Councillor Steve Alderman

The vote, undertaken by way of a show of hands, was carried.

RESOLVED

That the Minutes of the Meeting held on 19 June 2025 be approved as a correct record, subject to the above amendment.

15. Change of Order of Business

The meeting agreed to change the order of business in the following order:

16. Public Submission / Correspondence

There were no public submissions received.

17. Mental Health Issues - Youth

The Committee received a presentation on Child and Adolescent Mental Health Services (CAMHS) support for children and young people in Pembrokeshire as provided by Hywel Dda University Health Board.

The Chair advised that Rhys Jordan, the Member Champion for Mental Health, was unable to attend the meeting and asked for his support to be noted. He is pleased to see that the mental health of young people is on the agenda and hopes that every effort is being made to ensure all individuals experiencing any form of mental illness are able to access the support they need.

The Chair welcomed Alistair Wakely, Service Delivery Manager for Child and Adolescent Mental Health Services to give the presentation.

The Service Delivery Manager provided an overview of CAMHS provision in Pembrokeshire stating that CAMHS forms part of a broader system of mental health support for children and young people, which includes school counselling, educational psychology, voluntary sector services, community support, and other local authority services. CAMHS specifically focuses on early intervention for emerging mental health needs, specialist assessments and interventions, and crisis responses for children and young people at imminent risk of harm. The service maintains strong links with the wider health system, including primary care and the 111 Option 2 service, which offers urgent mental health support. CAMHS also works closely with schools and adult mental health service colleagues.

The Service Delivery Manager outlined the front door and referral pathways and referral criteria; explained the different levels of mental health, the teams supporting primary and secondary care and the crisis and specialist teams and the Young People's Sanctuary Service. He also outlined the UK wide trends and the mental health landscape.

The Service Delivery Manager for CAMHS highlighted findings from a 2023 study indicating that one in five young people aged 8 to 25 had a probable mental health condition at any given time. This figure has been rising steadily since 2017, reflecting an increasing challenge in supporting children and young people's mental health. It was noted that 32.8% of 17 to 24-year-olds reported

having self-harmed or attempted self-harm at some point, with this figure rising to 69.5% among those with a probable mental health condition. These statistics point to heightened levels of distress among young people. In addition to the data, the Service Delivery Manager reported a significant increase in the number of young people seeking crisis support from CAMHS during this period, although this was not quantified in the study.

Reference was made to a national review by Health Inspectorate Wales (HIW), Estyn and Care Inspectorate Wales (CIW) highlighted key concerns in supporting children and young people's mental health across Wales. These included delays in CAMHS access, barriers for those with complex needs, high demand, and inconsistent eligibility criteria and inter-agency communication. Care-experienced and neurodiverse children were disproportionately affected. Joint recommendations focused on improving first-contact support, decision-making forums, alternative support pathways, trauma-informed practice, and better information sharing. These are being progressed through the Regional Partnership Board's Children and Young People Subgroup.

The Service Manager stated that Pembrokeshire referrals had spiked during COVID-19. Acceptance rates have improved due to better referral quality and multi-agency collaboration. Unaccepted referrals are redirected to appropriate services. In terms of presenting issues, common concerns included suicidal ideation, self-harm, anxiety, low mood, emotional dysregulation, and eating difficulties. Key contributing factors included autism/ADHD, substance use, social needs, parental health issues and bereavement. He advised that a multi-agency approach is essential to address these underlying issues alongside mental health support.

The Committee considered the presentation and the following key points were raised.

Councillor David Bryan enquired about the mental health needs of home-educated children, who may be less visible to services compared to those in school settings. The Service Delivery Manager stated that since the pandemic, school attendance has declined and some families have opted for home education due to distress experienced in school environments. While support exists—such as work by educational psychologists on emotionally based school avoidance (EBSA)—identifying and supporting home-educated children remains challenging due to their limited contact with professionals who might otherwise detect emerging mental health needs.

Councillor Claire George asked about the impact of the “no wrong door” approach on reducing referral-to-treatment times. The Service Delivery Manager responded that while it is difficult to quantify at present, the Welsh Government's new 10-year mental health strategy (published April 2025) aims to improve access further by promoting open access and same-day support.

A question was raised by Councillor Alec Cormack about the effectiveness of the “no wrong door” approach and its impact on reducing waiting times. The Service Delivery Manager clarified that initial “choice” appointments are offered within 28 days, but delays can occur before treatment begins. Urgent cases—such as those involving imminent risk—are prioritised and seen without delay.

Further questions were asked about the Wellbeing Hub in Carmarthen, including its accessibility for families outside Carmarthenshire and whether geographic location poses a barrier. The Service Delivery Manager confirmed that data on attendance by area is not currently available but can be provided at a future meeting.

Clarification was also sought on how urgency is determined and it was explained that while families may perceive any distress as urgent, CAMHS prioritises cases based on imminent risk—such as suicidal ideation with a plan.

Councillor Michael James took the opportunity to praise the support a family member had received by the service.

Councillor Anji Tinley asked how the CAMHS crisis team responds to emergencies in Haverfordwest, given that the team is based in Carmarthen. The Service Delivery Manager explained that the team is structured to respond flexibly across the region. Daily coordination ensures that urgent assessments or home visits—such as those at Withybush Hospital—are allocated appropriately, with staff travelling as needed. This centralised model allows resources to be deployed based on demand rather than fixed county boundaries.

Councillor Tinley also asked about the location of the young person's sanctuary service operated by MIND. It was confirmed that the service is based in Haverfordwest and operates Friday to Sunday. Further clarification was provided on referral sources which included primary care and local authority services—not just schools. CAMHS also works with schools through in-reach support, but referrals typically come from other professionals.

Councillor Steve Alderman asked whether CAMHS receives referrals or connections from the pastoral support system operating in Pembroke on weekend nights. The Service Delivery Manager advised that he had not been previously aware of the pastoral system. While CAMHS referrals come from a defined range of agencies, the emotional wellbeing and mental health team—commissioned by the local authority—has broader referral pathways and may be more connected to such community initiatives. The Service Delivery Manager agreed to follow up with that team to ensure links are in place.

The Chair, speaking as Member Champion for Young People, asked for clarification on the age groups CAMHS supports and how services reach young people outside formal education. The Service Delivery Manager confirmed that CAMHS supports children and young people up to age 18, with a transition protocol in place for adult services. The Early Intervention for Psychosis team covers ages 14–25. Welsh Government's new 10-year mental health strategy is exploring models to support the 15–25 age group more consistently. He added that in terms of outreach, CAMHS engages with non-statutory youth groups, including Point in Fishguard and the GP Youth Project in South Pembrokeshire.

The Chair also asked about bereavement support and whether CAMHS works with Sandy Bear. It was confirmed that CAMHS regularly signposts to Sandy Bear and other bereavement charities and meets with them as stakeholder partners.

Regarding implementation of recommendations from recent reviews, the Service Delivery Manager explained that some actions are being addressed over the next year through the Regional Partnership Board's Children and Young People Subgroup, while others will be integrated into longer-term planning.

The Chair concluded by reiterating the importance of keeping young people's mental health on the agenda and ensuring all those in need receive appropriate support.

Moved by Councillor Steve Alderman; Seconded by Councillor Claire George

The votes, undertaken by way of a show of hands, were carried.

RESOLVED

That the presentation be noted and the matter be revisited at a future meeting.

18. Strengths Based Collaborative Communication Programme Update

The Committee considered a report by the Head of Adult Care on the Strengths-based practice in health and social care which focuses on identifying and building upon the strengths, resources, abilities, and potential of individuals, families, and communities, rather than solely addressing their problems, deficits, or needs.

The Chair welcomed Joanne Cornish, the Head of Integrated Transformation, Erin Bonwick, Senior Nurse Manager, Hywel Dda University Health Board; and Joshua Crowdie-Morgan, Social Work Team Manager for the Joint Discharge Team to the meeting to give an update on the delivery of the programme in Pembrokeshire

The Head of Integrated Transformation explained that the approach focuses on identifying and building upon the strengths of individuals, families, and communities, with an emphasis on collaboration and empowerment to overcome challenges and achieve personal goals. She added that Pembrokeshire's programme is unique in Wales for its integrated delivery across health, local authority and third sector partners. The programme has been externally supported, with funding totalling just over £52,000 across financial years 2024–25 and 2025–26. Approximately £40,000 was provided through the Pembrokeshire allocation of the Regional Integration Fund, with an additional £12,000 from the West Wales Regional Partnership Board. To date, over 220 professionals have been trained, and a cohort of 10 mentors has been developed to embed the practice across the system. The programme aims to become self-sustaining, with a “train-the-trainer” phase planned for early next year. Case studies were included in the report which demonstrated the value and impact of the programme.

The Social Work Team Manager provided an update on how the practice is being applied in adult social care. He highlighted the work of the intake team, which serves as the front door for adult social care referrals. Three mentors are embedded in the team and use the approach collaboratively with community health and third sector colleagues through a “fishbowl” process held three times

a week. This involves multi-agency discussions to identify individual strengths and community resources, aiming to reduce reliance on statutory services.

The Social Work Team Manager and the Senior Nurse Manager advised that they apply the approach in hospital settings, particularly on the acute frailty unit at Withybush Hospital. Reflective sessions are held monthly with staff to explore patient strengths and resources. The approach has proven effective in promoting independence, reducing service demand, and improving outcomes through collaboration and person-centred planning.

The Senior Nurse Manager, who oversees patient flow into the community, described how the approach is helping reduce hospital stays and improve outcomes. The ethos of “slowing down to speed up” empowers staff to focus on what matters to patients, identifying their strengths and community resources rather than defaulting to statutory services. This has led to more patients being safely discharged and supported in their communities.

The Social Work Team Manager added that regular “fishbowl” sessions—multi-agency meetings to discuss complex cases—have been key to this success. These sessions create a safe space for professionals to collaborate, share expertise, and reduce anxiety around decision-making. The approach has helped overcome a culture of fear and safeguarding concerns, enabling more confident, person-centred planning.

The Chair thanked all contributors for their input and acknowledged the remarkable work being carried out across Pembrokeshire.

The Committee debated the contents of the report and the key points were highlighted as follows:

Councillor Steve Alderman commended the team for their positivity across all levels of intervention to support people citing his personal experience with a family member.

Councillor Claire George asked about next steps, potential barriers and how reluctant partners have been engaged. The Head of Integrated Transformation acknowledged that while many have embraced the programme, operational pressures have posed challenges. A key success factor has been the commitment of senior leaders across health, the local authority and third sector—many of whom have completed the training themselves. This leadership support has helped secure staff time for training and embed the approach across services. It was noted that a targeted strategy is now being developed, including a “heat map” to identify areas with lower coverage and guide future training efforts.

The Senior Nurse Manager highlighted how existing meetings—such as those reviewing patients with hospital stays over 21 days—have been repurposed using the fishbowl model to improve the quality of discussions and outcomes. This has led to more impactful, person-centred planning. The Social Work Team Manager added that efforts are underway to expand the mentor network within hospital settings. The goal is to embed the approach into day-to-day practice across inpatient and community settings.

Councillor Alec Cormack asked whether there are plans to expand the approach more widely. The Head of Integrated Transformation responded that Pembrokeshire is frequently cited as an exemplar by Social Care Wales, and the county's work is regularly shared as best practice within a national leadership group. Social Care Wales is actively advocating for wider adoption of the integrated model based on Pembrokeshire's success.

Councillor Anji Tinley sought clarification on the difference between being trained and becoming a mentor. In response, the Head of Transformation explained that the training consists of a three-day programme focused on strengths-based approaches. Those who complete the training gain core skills relevant to their roles, such as in nursing, social work, or occupational therapy. Mentors are selected from among the trained individuals based on their aptitude and enthusiasm. Their role is to support others in applying the training, often by facilitating reflective sessions and fishbowl discussions. Mentors help create space for staff to slow down, reflect, and embed the practice, often bringing an external perspective that enhances objectivity. In essence, training builds the skills, while mentoring enables and sustains their practical use.

The Chair referred to the point made that four cases demonstrated a cost avoidance of £77,000 and sought clarification on what that would equate to a potential total cost avoidance across all cases. Officers confirmed that a dashboard is being developed to capture and measure this data, including case studies. It was acknowledged that cost avoidance impacts both statutory partners—local authority budgets and the NHS—through reductions in care packages, residential placements and earlier hospital discharge.

Councillor Claire George highlighted the importance of having greater oversight of the impact of tech-enabled care, noting its potential benefits and the need to promote its use more effectively. The Director of Social Care agreed and emphasised the value of the programme, both in terms of financial impact and improved outcomes for individuals. He noted that while initially framed as a project, it has evolved into a core practice model for delivering social care in the Authority. The model has helped newer staff adopt relational approaches and reminded experienced staff of their original motivations.

The Chair thanked the Officers for their informative presentations and for presenting a really good news story.

Moved by Councillor David Bryan; Seconded by Councillor Claire George

The votes, undertaken by way of a show of hands, were carried.

RESOLVED

That the report be noted.

[The Committee then adjourned for a short break between the 11:35 am and 11:49 am]

19. Corporate Risk Register and Corporate Score Card

The Committee considered a report by the Director of Social Care and Housing on the social care elements of both the Corporate Scorecard and the Corporate Risk Register.

The Director of Social Care introduced the corporate scorecard, noting its purpose is to provide members with an opportunity to ask questions on specific measures. He highlighted that the scorecard reflects the positive impact of the strengths-based approach to care delivery, aligning with the earlier discussion. It was noted that while the number of looked-after young people increased in Quarter 1, the rise was less significant than in previous periods and advised that further detail on the budget implications will be discussed in a subsequent agenda item.

Members were invited to review the scorecard and raise any queries.

The Chair acknowledged the remarkable improvements in adult social care, noting that the current position is the best in over 24 years. The key challenge identified was maintaining this progress going forward. The Chair also recognised that pressures within children's social care remain significant and are unlikely to ease in the near future. It was noted that right-sizing the budget has contributed positively to the improvements.

Councillor Alec Cormack queried the terminology used in the safeguarding section of the scorecard, specifically whether "undertaken" and "completed" inquiries mean the same thing. The Director of Social Care clarified that under Welsh safeguarding procedures, inquiries should be both undertaken and completed within seven working days. However, this is rarely achieved consistently due to reliance on external agencies such as health boards and police to provide necessary information. He noted that recent improvements have been made, including increased team capacity and the appointment of a dedicated service manager for adult safeguarding. These changes have helped reform systems and processes to better manage demand, though further work remains.

The Head of Adult Care highlighted the significant structural changes within adult safeguarding services. She noted that adult and children's safeguarding previously operated as an integrated service but separating them has proven beneficial. The service has received investment to support improved delivery. For assurance, she confirmed that all teams have completed collaborative communication and Vanguard training, ensuring a consistent approach across adult services. She acknowledged previous staffing challenges but confirmed that vacancies have now been filled, which is expected to positively influence service performance and dynamics.

Councillor Claire George commended the team for their remarkable performance, noting the visible impact of their efforts since Quarter 3 of the previous year.

Councillor Anji Tinley raised a query regarding the foster care data presented on page 58 of the corporate scorecard, noting a visible number of deregistrations and seeking clarification on the reasons behind them. The Director of Social Care responded that while the raw data shows deregistrations, the underlying reasons are not currently known. He committed to following up on the matter.

The Director confirmed that the latest data for the corporate scorecard was for March of this year and that was showing receipt of five new inquiries and no deregistrations within that month.

In noting the five inquiries currently received, the Chair asked how long it typically takes for an inquiry to progress to approval and active status. The Director responded that while timelines can vary, the process generally takes several months due to the need for thorough assessment and safeguarding. He emphasised that the process is intentionally robust, involving multiple conversations between social workers and prospective carers, to ensure the safety and suitability of placements for vulnerable young people.

Councillor Alec Cormack referred to the significant improvement in the number of people waiting for occupational therapy assessments in April and asked for an explanation. The Head of Adult Care responded that the improvement was due to a concerted effort by the occupational therapy team to review referrals, changes in grant funding criteria—from full renovations to partial renovations—and the introduction of overtime to address the backlog. Additionally, some individuals withdrew due to changes in eligibility. She confirmed that further reductions are expected in the next quarter and assured Members that all occupational therapy teams have completed Vanguard training, with 65% also completing collaborative communication training.

The Chair commended the tremendous improvements across services and asked that thanks be passed on to the teams involved. It was noted that the progress made over the past 12 months has had a significant impact on budgets and represents a major achievement. The Chair also raised a query regarding the housing scorecard on page 61, noting a reduction in the number of people on the register and asking whether the previously discussed re-registration process had taken place. The Director of Social Care confirmed that this was linked to a planned software change and that further clarification would be sought from the relevant Cabinet Member.

The Head of Adult Care provided an update on the Care Inspectorate Wales (CIW) report, noting that it was embargoed internally but would be brought to the Committee in full, along with an action plan. She confirmed that the report was largely favourable and that CIW had been assured by the improvements made in adult social care, particularly around assessment and review times. CIW confirmed they would not be returning until the normal rotation of visits, which was seen as a positive outcome. The Chair confirmed that the report and action plan would be added to the Forward Work Programme.

The Cabinet Member for Social Care and Safeguarding referred to the CIW letter and read out several key statements. She highlighted that progress had been made across all areas identified for improvement in April 2024. Safeguarding practice within the local authority has improved, and positive leadership is ensuring that adult safeguarding staff are well-equipped to carry out their statutory duties. The Authority is responding appropriately to immediate safeguarding concerns, and partners are fulfilling their duty to report, with timely and appropriate adult-at-risk referrals being made. The Cabinet Member emphasised that while there is still work to do, the review is very positive.

The Director of Social Care then explained that the Committee was being asked to review the social services risks that have been escalated onto that Corporate Risk Register. He confirmed that there have been no major changes since the last update, but highlighted three key risks. The first relates to increasing demand within children's services, and the second concerns the rising need for specialist placements—although the rate of increase has slowed recently. The third, newly added risk involves the potential failure to provide statutory services under the Mental Health Act due to a shortage of Approved Mental Health Practitioners (AMPs), a challenge faced across Wales. To mitigate this, he advised that the Authority has revised terms and conditions within available financial limits, increasing competency payments to reflect the advanced training required for AMPs. This has enabled the recruitment of at least one, possibly two, additional AMPs, improving service resilience. Ongoing efforts are being made to attract more practitioners, supported by workforce development grants.

The Head of Adult Care added that no area in Wales currently has a full complement of AMPs. Pembrokeshire has a lower-than-average rate, but the team's resilience has ensured no statutory obligations have been missed. She noted active outreach efforts to promote the profession and the benefits of living and working in Pembrokeshire.

Moved by Councillor Claire George; Seconded by Councillor Steve Alderman

The votes, undertaken by way of a show of hands, were carried.

RESOLVED

That the Social Care elements of the Corporate Risk Register and Corporate Score Card be noted.

20. 2025/26 Quarter 1 Social Care Budgetary Position

The Committee considered an update report by the Finance Manager on the current 2025/26 budget position (Q1) for Social Services and progress made towards 2025/26 efficiencies.

The Chair welcomed Bradley Challinor, Finance Manager to the meeting to present the report.

The Finance Manager presented the Quarter 1 budgetary position for Social Care for the 2025–26 financial year. It was confirmed that both the Director of Social Care and Housing service areas are projected to come in on budget. Children's Services is forecasting a minor overspend of £32,000 (0.1%) against a budget of £41.853 million, while Adult Services is projecting an overspend of £84,000 (0.1%) against a budget of £89.385 million.

The Finance Manager also reported on progress toward the Directorate's required £6.134 million in efficiencies for 2025–26. As of Quarter 1, £3.553 million in savings are rated green (on track), £2.564 million are rated amber (project-based and under review), and £17,000 are rated red. Members were reassured that amber-rated savings are expected to move to green as projects progress and are validated by the Finance Team.

The Chair then invited questions, and the following key points were noted.

Councillor Alec Cormack queried the amber-rated savings within the Social Care budget, noting the significant figures involved and asking whether all amber savings are currently projected to be achieved by year-end. The Finance Manager confirmed that all savings—including those rated amber—are expected to be delivered. He explained that the cautious approach taken last year led to a variance between Quarter 3 and Quarter 4 for 2024-25, but at Quarter 1 of 2025–26, the full £6.134 million in savings has already been removed from budget areas, and the amber-rated items are expected to move into green as the year progresses.

Councillor Alec Cormack referred to the table on page 67 and noted that the projected average cost per hour for home care is significantly below the budgeted figure, asking for an explanation. The Finance Manager responded that the reduction is due to a gradual shift from external home care provision to increased use of in-house services. This change reflects both a strategic commissioning decision and a cost-saving measure, as outlined in the commissioning plan presented to Cabinet in June. The move supports market stabilisation and helps reduce budget pressures associated with external providers.

Councillor Claire George queried the reference to patient flow Service Level Agreements (SLA) in Appendix A and sought clarification on the distinction between S33 and S38 in Appendix B. The Finance Manager stated that from a financial perspective, the patient flow SLA may present a potential pressure of approximately £260,000 in 2025/26, pending ongoing discussions with Health regarding regional funding allocations. Updates will be provided in Quarter 2 once the funding position is confirmed. S33 relates to joint working with partner agencies to secure appropriate funding for joint health and social care packages. This ensures clients meeting health funding thresholds receive the correct financial support. Validated income of £295,000 has already been achieved in Quarter 1. S38 involves a review of SLA agreements with Health, focusing on market pressures and inflationary adjustments to ensure accurate payments for services such as beds and care provision. The Head of Adult Care added that operationally, S33 entails joint reviews between Health and Social Care staff, supporting collaborative communication and outcome-focused care planning. Progress is ongoing and on a positive trajectory.

Councillor Cormack queried the projected flatlining in the number of the Council's foster carers and the increase in independent foster carers, which are typically more costly. He asked whether further action could be taken to increase the number of in-house foster carers. The Director of Social Care responded that several initiatives are currently underway. A recent Cabinet decision will introduce a 100% Council Tax exemption for both existing and new in-house foster carers, which will be implemented at the start of the next financial year. Additionally, funding has been drawn down through the prevention agenda to increase payments to in-house foster carers, aiming to reduce the financial gap between the Council's and independent fostering agency rates.

The Director explained that these measures together form a compelling offer for potential new foster carers. A marketing and recruitment campaign is also being developed in collaboration with the internal Communications Team to further

support recruitment efforts. He stated that the impact of these initiatives can be revisited in future committee meetings if Members wish. Members indicated that they would welcome more information on this.

The Chair raised concerns about the progress of the second phase of the in-house children's residential care home, noting that it has been under discussion for two years. He also queried the status of capital projects announced during budget setting, particularly those relating to adult care and potential developments across Pembrokeshire. He expressed frustration at the pace of progress and asked whether internal council processes or legal delays were contributing to the hold-up, and whether anything could be done to expedite developments. The Director of Social Care responded that the process for acquiring additional residential provision under Children's Services has been expedited in recent weeks. He confirmed that he and the Head of Service are now undertaking the necessary financial and legal due diligence, which has been independently commissioned and is currently underway.

In relation to the broader governance of Social Care capital programmes, the Director explained that a dedicated programme manager is coordinating a master spreadsheet to track governance milestones across both Adult and Children's Services. He referred to the Social Care Capital Programme Board established to ensure cross-cutting corporate oversight.

Moved by Councillor David Bryan; Seconded by Councillor Steve Alderman

The votes, undertaken by way of a show of hands, were carried.

RESOLVED

That the Quarter 1 Budget Position and the 2025/26 Budget Saving progress within Social Care be noted.

21. Action Log Update

The Committee considered a report by the Democratic and Scrutiny Services Officer on the actions arising from the last meeting and a recent Committee referral.

The Head of Democratic Services presented the report and explained that arrangements were being made for the Committee to visit the VC Gallery in Pembroke Dock on a forthcoming Wednesday and the Committee would be notified in due course.

The Chair asked the Director of Social Care to provide background on the decision to delay the agenda item relating to the academic review of the front door of Children's Services, which had originally been scheduled for this meeting. The Director explained that while the Committee had been expecting an update, the current data available is still in its early stages and would not provide meaningful insight at this point. The next phase of the academic analysis will involve two child protection experts spending time with the team, including shadowing and filming practitioners to observe interactions and practice. Additionally, a new service manager has recently been appointed, with responsibility for both child protection and prevention. This individual brings fresh

insight from previous experience in Neath Port Talbot and will contribute to the review of practice decisions and threshold models. The Director confirmed his continued commitment to bringing this item back to Committee once the data is more robust and the findings can be presented in a meaningful and informative way.

Cllr Claire George expressed interest in a visit to Hillside in Fishguard to observe recent developments, as well as a visit to intermediate care beds. Following the presentation earlier in the meeting, she also proposed a visit to the Intermediate Care Team at the hospital. The Chair welcomed the suggestion and asked the Head of Adult Care to work on developing some ideas for potential visits. The Head of Adult Care confirmed that this would be taken forward.

Councillor Alec Cormack noted that the Neath Port Talbot item is now scheduled for 13 November and asked whether the previously discussed Member Seminar—intended to help all 60 members understand the related initiatives—had been scheduled. The Chair responded that the seminar has not yet been formally arranged, as the intention is to wait for the outcomes of the upcoming meeting. Once those discussions have taken place, a decision can be made on whether it would be beneficial to share the information more widely with all Members, and the seminar can then be scheduled accordingly.

Moved by Councillor Steve Alderman; Seconded by Councillor Anji Tinley

The vote, undertaken by way of a show of hands, was carried.

RESOLVED

That the Action Log be noted, subject to the following additions:

- (a) Arrangements be made to visit the VC Gallery in Pembroke Dock on a suitable Wednesday.
- (b) Site visits be arranged to Hillside in Fishguard and Intermediate Care provision in Hospital and the community

22. Forward Work Programme

The Committee considered the Forward Work Programme for the next meeting and noted the changes that have been made.

The Chair noted that the Neath Port Talbot item has now been rescheduled for the 13 November meeting. It was also confirmed that the strategy for keeping families together has been removed from the programme, as the structure no longer exists and has largely been subsumed by Operation Salus, which has already been reported.

The Head of Democratic Services outlined the items currently scheduled for the November meeting, which include:

- Neath Port Talbot update
- GP and Pharmacy Support
- Director's Annual Report
- Care for vulnerable younger adults and post-16 support for children in care

- Update from the West Wales Regional Partnership Board
- The item on Adult Social Care Collaborative Communications will be removed.

During the meeting, additional items were proposed for inclusion in November: the CIW report and action plan, and the Social Care Capital Programme. It was agreed that both would be added to the November agenda.

A referral has also been received from the Policy and Pre-decision Overview and Scrutiny Committee regarding the Poverty Strategy Working Group. The referring Committee felt that oversight of this group is more appropriate for this Committee, noting a lack of elected member involvement. The group currently includes 34 officers and external agencies, and it was recommended that member input be added. It was agreed to schedule this item for the January meeting, aligning it with the existing poverty update.

Moved by Councillor Steve Alderman; Seconded by Councillor Claire George

The votes, undertaken by way of a roll-call, were carried. The votes were noted as follows:

For the Motion: Councillors Steve Alderman, Joshua Beynon, David Bryan, Alec Cormack, Claire George, Nicola Gwynn, Delme Harries, Michael James, Anji Tinley and Iwan Ward [10]

There were no votes against or abstentions.

RESOLVED

That the changes made to the approved Forward Work Programme, as set out in the report, be noted, subject to the following additions:

- (a) The Review of Practice Thresholds (Neath Port Talbot) be added to the November meeting.
- (b) The Care Inspectorate Wales Report and Action Plan be presented to the November meeting.
- (c) The Social Care Capital Programme be presented to the November meeting.
- (d) The referral from Policy and Pre-decision Overview and Scrutiny Committee requesting the Committee to review the membership of the Poverty Working Group be considered at the January 2026 meeting as part of the update report already scheduled for January.
- (e) The Adult Social Care Collaborative communications item be removed from November as the Committee considered the matter at the meeting.

Councillor Claire George suggested the inclusion of SLA agreements with the Health Board, discussed earlier under the budget item, as a potential topic for future consideration. It was agreed that this item would be scheduled for the January meeting.

Moved by Councillor Steve Alderman; Seconded by Councillor Claire George

The votes, undertaken by way of a show of hands, were carried.

RESOLVED

That a report on Service Level Agreements with the Health Board be added to the January meeting.

23. Head of Children's Services

Before closing the meeting, the Chair acknowledged that Darren Mutter, Head of Children's Services, will be leaving his role. Thanks were extended for his professionalism, enthusiasm, and contributions, particularly in a challenging area of work. The Chair wished him well in his new role and noted that future collaboration with him would be likely as regional work continues across Wales.

The meeting ended at 12.44p.m.

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Report of: Democratic and Scrutiny Services Officer

Date: 14 November 2025

Action Log Update

Purpose

To note actions arising from the last meeting and to receive an update on any recent Committee referrals.

Context

The actions arising from the previous meetings are attached at Appendix A together with the relevant update.

Recommendation

To note the report.

Background Documents: None

Appendices:

Appendix A – Action Log update

Action Log for Social Care Overview and Scrutiny Committee Meetings – November 2025

Actions arising from the 11 September 2025 meeting

Action No.	Minute No.	Action	Responsibility	Progress Update / comments	Status
1	17 – Mental Health Issues	Wellbeing Hub in Carmarthen The Service Delivery Manager confirmed that data on attendance by area is not currently available but can be provided at a future meeting.	Service Delivery Manager – Alastair Wakely	Email was sent from Democratic Services Assistant 21 st October 2025.	Pending
2		Referrals or connections from the pastoral support system operating in Pembroke The Service Delivery Manager agreed to follow up with that team to ensure links are in place.	Service Delivery Manager - Alastair Wakely	Email was sent from Democratic Services Assistant 21 st October 2025.	Pending
3	19. Corporate Risk Register and Corporate Score Card	Foster Carer deregistrations To provide an explanation of the	Director of Social Care and Housing - Michael Gray	Email was sent from Democratic Services Assistant 5 th November 2025	Pending

		reasons for the number of deregistrations			
4		<p>Housing scorecard</p> <p>The reduction in the number of people on the register and whether the previously discussed re-registration process had taken place.</p> <p>The Director of Social Care confirmed that this was linked to a planned software change and that further clarification would be sought from the relevant cabinet member.</p>	Director of Social Care and Housing - Michael Gray	<p>Michael Gray responded on 10.11.25 with the following:</p> <p>“Reduction in numbers is due to data cleansing and new properties and acquisition programme reaping success in households being allocated properties. The reference to re-registration relates to the implementation of the new Allocations Policy, whereby applicants will need to demonstrate their local connection and housing need hence why they will need to re-apply to meet the new Policy criteria. There has been a delay in the implementation programme for the new Policy and it is anticipated that this will happen leading in to the Autumn of next year.”</p>	Completed
5	20. 2025/26 Quarter 1 Social Care Budgetary Position	<p>Foster Carers</p> <p>The impact of initiatives to recruit more foster carers can be revisited in future committee</p>	Director of Social Care and Housing - Michael Gray	To consider adding to the Forward Work Programme	Pending

		meetings if Members wish.			
		Social Care capital programmes In light of the legislative agenda around profit reduction in Children's Services it was suggested that a more detailed update on the capital programme could be brought to a future committee meeting.	Director of Social Care and Housing - Michael Gray	Added to the Forward Work Programme	Completed
	21. Action Log Update	Practice decisions and threshold models. The Director confirmed his continued commitment to bringing this item back to Committee once the data is more robust and the findings can be presented in a	Director of Social Care and Housing - Michael Gray	On the Forward Work Programme for November meeting	Completed

		meaningful and informative way.			
	22. Forward Work Programme	Visit to the Intermediate Care Team at the hospital.	Head of Adult Care/ Democratic Services	Visits being arranged	
		Visit to Hillside in Fishguard	Head of Adult Care/ Democratic Services	Visit to be arranged	

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Report of: Democratic and Scrutiny Services Officer

Date: 14 November 2025

Forward Work Programme

Members are being asked to scrutinise and have oversight of the following:

- **Consider the Forward Work Programme attached at Appendix A and identify any appropriate emerging opportunities for scrutiny.**

The Recommendation is:

That the Committee considers the Forward Work Programme.

Main Issues

To provide the Committee with an opportunity to consider its Forward Work Programme. The Committee should plan work appropriately to allow members of the public and other stakeholders to be clear about what topics will be subject to scrutiny, thus enabling opportunities to participate in the scrutiny process.

The Committee is asked to note the following changes that have been made to the Forward Work Programme:

Following Councillor Joshua Beynon's question raised at Full Council on 9 October 2025 regarding the announced closure of Shalom House Hospice in St Davids at the end of October 2025, the Cabinet Member welcomed the inclusion of this matter on the Forward Work Programme of the Social Care Overview and Scrutiny Committee. Therefore, the Committee will need to discuss the intended scope of this item which has been titled 'Support and Funding for Palliative Care'.

While 'GP and Pharmacy Support' has been added to the Forward Work Programme, further clarity is needed on what members wish to scrutinise. At the Partnerships Panel on 29th September 2025, Members expressed that it was pleasing that the Social Care Overview and Scrutiny Committee would be considering the matter and reiterated concerns with obtaining GP appointments and ongoing difficulties with pharmacies sourcing locum pharmacists which was having an impact on communities.

A suggestion was made for the Social Care Overview and Scrutiny Committee, as part of its consideration of the matter, to request more communication to communities on what pharmacies can deal with, which members of the public may not be aware of, to reduce pressure on GP surgeries.

It was also suggested that an update be sought by the Social Care Overview and Scrutiny Committee on how trials of booking GP appointments online were going.

The standing item on the Social Care Budget which is due to come to every meeting, will not be on the agenda for November's meeting due to the Quarter 2 report pushed to the December Cabinet meeting. Therefore, there are no updates to present to the Committee, but an update is expected to come in the January 2026 meeting of Social Care Overview and Scrutiny

At the last meeting, the Committee considered adding an item on the impact of initiatives to recruit more foster carers. The Committee will need to consider when it wishes to consider this area of work.

Referrals

No Referrals have been received.

Background Documents: None

Appendices:

Appendix A – Forward Work Programme

Social Care Overview and Scrutiny Committee – Work Programme – Appendix A

Meeting Date	Item	Report Detail
Standing Item	Forward Work Programme	To review the Committee's work programme
	Action Log	To update the actions from previous meetings.
	Budgetary, performance measures and risk Update on the 0-25 Prevention Agenda	Update on the current outturn position and progress towards efficiencies to include an update on the projects.
13 November 2025	GP and Pharmacy support	To review the support provided by GPs and Pharmacies in relation to the long waiting lists and the preventative work and sign posting initiatives that were taking place.
	Director of Social Care Director's Report	To receive the report.
	Care for Vulnerable Younger Adults and Children in Care post 16 support	To have ongoing scrutiny and oversight to ensure that adequate measures are in place to comply with our statutory duties to safeguard and promote the welfare of children, young people and vulnerable adults – To include the Governors support on safeguarding in Education (Bi-annual update) and to understand what support is provided/required.
	Update from the West Wales Regional Partnership Board	To receive an update.
	Review of Practice Thresholds	That the Committee receive a report on the work of Neath Port Talbot and the Academics.
	Social Care Capital Programme	To receive an update on the social care capital programme
	Care Inspectorate Wales Report on Adult Social Care	To consider the Care Inspectorate Wales Report and Action Plan on Adult Social Care

Social Care Overview and Scrutiny Committee – Work Programme – Appendix A

29 January 2026	Budget 2026 – 27 and Medium Term Financial Plan for 26 – 27 to 29 – 31	To consider the Budget.
	Poverty	To obtain an overall understanding of the scale of poverty within the County and how the Authority can support the Social Care Service – to present the report received by Policy and Pre-Decisions. To review the membership of the Poverty Working Group in terms of addressing Member deficit and report back to the Policy and Pre-decision Overview and Scrutiny Committee.
	Residential Placements for Children	Update on the residential placements for children
	LLAIS	To present an update on the work undertaken by LLAIS.
	Domestic Violence/Abuse	Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) update
	Children's Services	Update on the work of the Children's Services Improvement and Development.
	Service Level Agreements with the Health Board	Provide an update on Service Level Agreements (SLAs) with the Health Board.
20 March 2026	Citizens Advice Bureau	To present an update of the work of the Citizens Advice Bureau – Pembrokeshire and to include Ceredigion for the support given to the North of the County.
	Mental Health Issues	To understand the support provided for Mental Health Issues for the Adult Care Sector.
	Advocacy	Update of the Regional Advocacy Action Plan
	Joint working with Young Carers and Adult Carers	To understand what support is provided/required to support Young Carers and Adult Carers and the transition that is required.
	Homelessness	The role of social services in addressing homelessness across the County.

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Report of: Regional Partnership Board Programme Manager

Date: 14 November 2025

Cabinet Portfolio: Young Persons, Community, Well-being and Future Generation, Adult Social Care

Update from the West Wales Regional Partnership Board

Members are being asked to scrutinise and have oversight of the following:

- Changes to the Part 9 Regulations
- Review and refocus of Regional Partnership Board
- Future drivers and risks

The West Wales Regional Partnership Board (RPB) provide specialist assessments to develop regional strategies with particular focus on priority groups including:

- Older people with complex needs
- People with learning disabilities
- Children with complex needs
- Carers, including young carers

The RPB includes Pembrokeshire County Council, Ceredigion County Council, Carmarthenshire County Council and Hywel Dda University Health Board to provide a strategic and collaborative approach to working.

This report and presentation are a brief overview of RPB direction and current priorities.

The Recommendation is:

That the Committee note the work carried out to date by the West Wales Regional Partnership Board providing any feedback as appropriate.

Appendices:

None

Background Documents:

None

SOCIAL SERVICES OVERVIEW AND SCRUTINY COMMITTEE

Report of: **Head of Adult Services**

Date: **14 November 2025**

Cabinet Portfolio: **Adult Social Care**

Care for Vulnerable Younger Adults and Children in Care post 16 support.

Members are being asked to scrutinise and have oversight of the following:

- **Development of a 0–25-year-old service that meets the needs of vulnerable younger adults and children in care post 16.**

The Recommendation is:

- That the Committee considers the report and provides its views on the proposed report for the care for vulnerable adults and children 0–25-year-old.

Introduction

In January 2025 the Heads of Adult and Children services commissioned the Institute of Public Care (IPC), Oxford Brookes University to undertake a review of the current arrangement for individuals who transition from children's services into adult services. IPC were asked to provide a number of recommendations that could be implemented in order to support a multi-agency delivery model and function to meet the complex needs (from the age of 14) for all care experienced people and children as they transition between Children and Adults services. The population needs assessment in West Wales 2022 highlights that "The time of transition from childhood to adulthood can be challenging" and analysis indicates that the anticipated care needs of young people in this area is likely to increase. Initially the work only looked at individuals with a disability, however the scope was broadened to look at those individuals with complex emotional behavioural needs who require significant support from adult care. Historically these individuals are in placements outside of Pembrokeshire and can experience difficulties in accessing the right service at 18.

Current Service Challenges

- *Increase in need for young people where complexity in presentation does not fit existing services:* Within the Local authority data set we are

seeing an increase in emotional wellbeing concern, young people are not diagnosed as having mental illness resulting in high risk behaviour and residential care. These young people currently are falling between services.

- *Delayed Transitions:* Young people are experiencing delays in assessments, planning, and service access at the point of transitioning between children's and adult's services.
- *Increased Risk:* Delays contribute to placement breakdowns, safeguarding incidents, and emergency interventions.
- *Staff Wellbeing:* Challenging caseload numbers and complex needs impact staff well-being.
- *Financial Impact:* Crisis-led placements and reactive care packages are more costly than planned transitions.

IPC Methodology

IPC facilitated two in-person half-day workshops on 19th and 24th March attended by approximately 30 people from across children's, adults, education, housing, health and community and voluntary sector teams and organisations. The purpose of the workshops was to give stakeholders an opportunity to comment and offer their advice on progressing a draft service model for the 0-25 service.

In summary, comments from both workshops were **generally positive for pursuing a multi-disciplinary joined up approach**, and that key to ensuring that the process for referring children and young people to either a '0-25 Team' or a 'Prevention and Early Intervention Team' is the multi-agency approach.

Stakeholders were interested to understand how input to case management from a range of teams from adults, children's, education, housing, health etc can be ensured **systematically, creating a 'team around the child/young person' approach**.

Critical is the cultural differences between social work practitioners from children's and adult services would require attention and support to ensure that there is an **appropriate and balanced focus on both a paternalistic and independence approach** as the child moves into adulthood.

Service Recommendations

- Phase 1 - Agreement that the 0-25 Team would be established and will need an establishment of social work staff who can undertake statutory assessments and support/care planning across this age range (with no formal age break).
- In the first instance bring together existing social care teams from adult and children's services, in order to reduce duplication and unnecessary hand-offs. The service must be strengths based and support independence.

- Develop a business plan for additional resource to support a single structure, which can use resources more effectively and reduce reliance on high cost out of county placements.
- Joint ownership between the Head of Adult and Children's service to ensure consistency and bringing together culture change. The alignment of the 0 – 25 Service to any existing governance arrangements between Children's and Adult Services
- Consider how best funding/CHC decisions can link with the model.
- The development of a clear action plan for implementation and achievable timescales
- Consider how the 'voice' of children, young people, families and carers can input into the proposed arrangements.
- Phase 2 to scope the development of a whole- system transformational approach to incorporate statutory and non- statutory partners.

Conclusions

The service recommendations have been agreed through the Social Care and Housing Directorate Management Structure. A business case to support this 0–25-year service has been developed in line with the recommendations of Phase 1.

Appendices: None

Background Documents: None

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Report of: Director of Social Care, Housing and Public Protection

Date: 14 November 2025

Cabinet Portfolio: Young Persons, Community, Well-being and Future Generations

REVIEW OF PRACTICE THRESHOLDS

Members are being asked to scrutinise and have oversight of the following:

Review of Practice Thresholds – Children Services.

The Recommendation is:

- That the committee notes that the ongoing academic review of Children's services practice thresholds, and to note that ongoing findings will inform a wider programme of change within the service.

Main Issues

In 2024 Pembrokeshire Children's Services identified sustained and escalating pressures believed to be caused by a significant rise in demand, complexity of cases, and insufficient staffing levels. Operation SALUS was initiated as a strategic response to the escalating pressures across Pembrokeshire Children's Services with the aim to rapidly stabilise the service, address unsustainable demand, and build long-term capacity to deliver statutory responsibilities safely and effectively. A key focus for Operation Salus was investment of staffing resource at the Children's Services Front Door; the Child Care Assessment team (CCAT).

In August 2025 a Service Manager for Prevention & Protection joined the service to review the structure, processes and thresholds in CCAT. Running parallel with this appointment, Professors Andy Bilson and David Thorpe were commissioned to undertake a review of CCAT and Pembrokeshire's care population. The work, to date has included:

- Data analysis of contacts¹ and referrals² and reporting on care entries and front door operations.
- Case file analysis.
- Draft interim findings.

Further work will be undertaken to include – on-site observation of practice and the presentation of the findings with the Senior management Team and CCAT staff to inform final recommendations. Professor Bilson and Professor Thorpe have also agreed to facilitate a whole system event to engage stakeholders as part of this review. Furthermore, the proposal involves eliciting the views of parent's experiences of the Child Protection process.

Present day CCAT

Over the last 12 months CCAT have received 1000 contacts a month, have held 120 strategy discussions³ and have undertaken 70 s47 enquiries⁴. Of the 70 s47 enquires 16 (23%) progressed to an Initial Child Protection Conference.

From a national performance perspective, Pembrokeshire Children's Services are outliers in terms of the high number of children (per 10,000 children) subject to child protection registration.

Given the appointment of a new Service Manager for both Prevention and Protection, alongside academic analysis from child protection experts, changes to processes and practice are already being made. These changes have been well received internally and by key regional partners such as the police, health and education. Our changes are underpinned by a conscious "slowing down" of decision-making processes relating to need and risk, with the emphasis on responding, and not reacting to new information. This approach has been well received by staff who find this approach more aligned to our intended value base. It is also showing early signs of safely reducing the number of children placed on the child protection register.

With regards to the structure of our CCAT front door we are proactively enhancing multiagency links. Our safeguarding colleagues in Health and

¹ Contact - Contact refers to any initial approach made to statutory social services for Information, Advice and Assistance (IAA). This includes enquiries from individuals who are not currently receiving care and support, or support as a carer, at the time of the contact. Contacts can come from professionals, family members, or the public, and may or may not lead to further action.

² Referral is a more formal process that occurs when a contact is assessed as requiring further investigation or support. It typically leads to an assessment of need and may result in the development of a care and support plan if the child or family is deemed to have eligible needs.

³ Strategy Discussion/meeting: If the initial checks, following a report, conclude that social services have reasonable cause to suspect that a child is at risk of significant harm, they should convene a strategy discussion/ meeting.

⁴ A Section 47 enquiry is a statutory child protection investigation carried out when there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm. These enquiries are initiated following a strategy discussion or meeting, which determines that such an investigation is necessary.

Education now routinely attend safeguarding strategy discussions. We are also in discussion with Dyfed Powys Police with a view to trialling the co-location of a Police Sergeant in CCAT, so to create the conditions for more timely and informed multi-agency decision making.

Conclusions

In response to the significant demand placed upon it, Pembrokeshire Children's Services has demonstrated a strong commitment to change, engaging staff, partners, and experts in a collective effort to improve outcomes for children. The work underway reflects a shared desire to build a more thoughtful, responsive, and collaborative service. With growing momentum and positive feedback from internal teams and regional partners, there is a clear sense of optimism and determination to create a safer, more effective system for children and families across Pembrokeshire. Progress will continue to be monitored through both qualitative and quantitative data insights as new processes, practice and service redesign becomes embedded.

The direction of travel within Pembrokeshire Children's Services is aligned to the following mission as set out in the Cabinet programme for administration 2022 - 2027:

"Develop high quality services to support children and young people that are designed to prevent escalation of need, delivery through a relationship-based approach and are focused on achieving the best outcomes for young people and their families."

Appendices: None

Background Documents: None

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Report of: Director of Social Care and Housing

Date: 14 November 2025

Cabinet Portfolio: Adult Social Care, and
Young People, Community, Well-being and Future
Generations

Social Care Capital Programme

Members are being asked to scrutinise and have oversight of the following:

- The Social Care Capital Programme

The Recommendation is:

That the Committee considers the Social Care Capital Programme, the governance arrangements established and the progress to date in bringing capital schemes forward.

Main Issues

The Council has established a Strategic Commissioning Plan 2025-35 (agreed by Cabinet 2nd June 2025), which includes a number of capital schemes, developed to rebalance the market in response to demographic challenges and market risks (hyperlinks to the Strategic Commissioning Plan 25-35 and associated 2nd June Cabinet paper can be found at the base of this report).

Population and demand projections suggest significantly increased demand for services, particularly in relation to children and older adults.

Without intervention market supply is expected to be inadequate for the needs of our future population. There is therefore a need to increase supply and to reconfigure our offer to ensure that those who require support in the future can access the most suitable solutions which promote best outcomes and represent value for money.

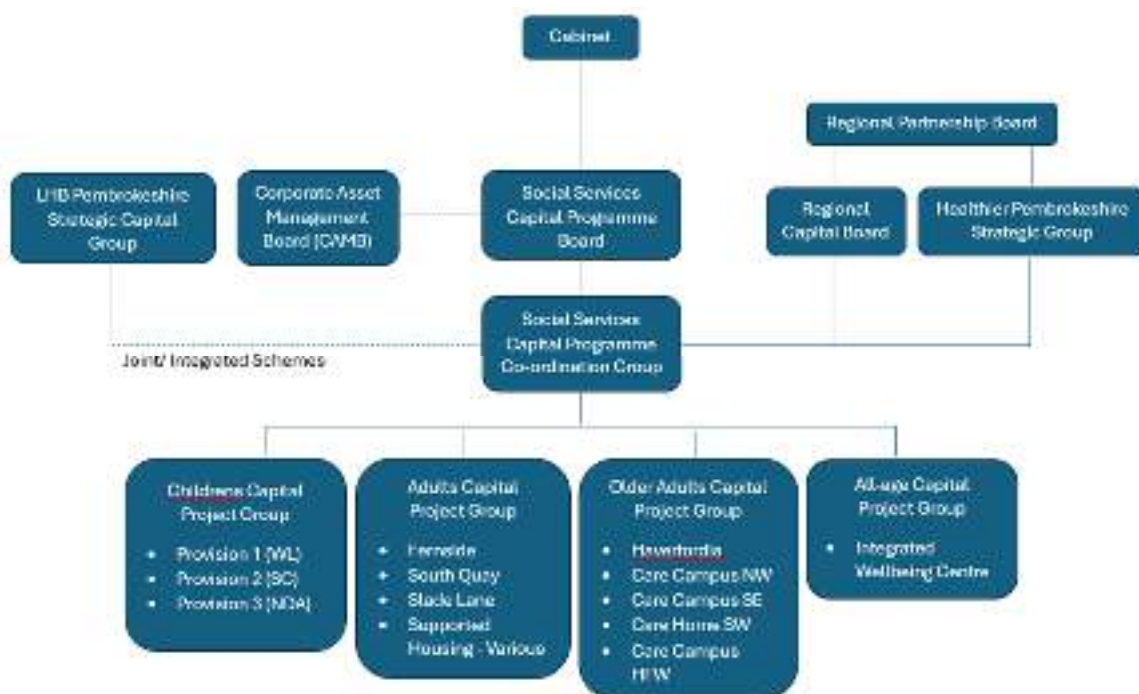
Main Considerations

The Social Care Capital Programme (attached at Appendix A) is based on the Strategic Commissioning Plan 25-35, developed in response to current and forecast population need and underpinned by:

- West Wales Population Needs Assessment 2022
- Market Stability Report 2022
- Housing Learning & Improvement Network Housing and Accommodation Needs Assessments (Adults and Older People)
- WG policy objectives (e.g. Rebalancing and Eliminate)
- This Council's Programme for Administration.

Capital investment will predominantly be secured through Welsh Government capital grant funding streams, the Housing with Care Fund (HCF) and the Integration and Rebalancing Capital Fund (IRCF). The intent of the Plan has been endorsed by the Regional Capital Board and is reflected in the Regional Capital Strategy 25-27, a prerequisite for associated funding applications to follow. An anticipated match funding requirement of 40% (HCF) and 30% (IRCF) would be required from the Council and would need to be met from corporate borrowing. It should be noted however that HCF and IRCF are presently scheduled to end in March 27, with no indication of any subsequent capital grant funding programme that may subsequently be made available by WG.

To ensure robust governance and oversight of what is an ambitious capital programme, learning has been taken from the Sustainable Communities for Learning Board, which is regarded as an effective model on which to base arrangements for the Social Services Capital Programme. The organogram illustrating the governance arrangements is set out here for committee's reference:



Conclusions

The Directorate has established a Social Care Capital Programme and associated governance arrangements which it considers positions the Council to most effectively advance capital schemes to meet current and future population need.

RECOMMENDATION:

That the Committee considers the Social Care Capital Programme, the governance arrangements established and the progress to date in bringing capital schemes forward.

REASON FOR RECOMMENDATION:

To enable members to scrutinise the Social Care Capital Programme.

Appendices:

- Appendix A – Social Services Capital Programme

Background Documents:

- Strategic Commissioning Plan 25-35 – 2nd June Cabinet Paper:
<https://mgenglish.pembrokeshire.gov.uk/mgConvert2PDF.aspx?ID=79613>
- Strategic Commissioning Plan 25-35:
<https://mgenglish.pembrokeshire.gov.uk/mgConvert2PDF.aspx?ID=79614>

SOCIAL CARE CAPITAL PROJECTS TO 2041-42

PROJECT GROUP/ PRIMARY COHORT	NAME OF PROJECT	PURPOSE OF PROJECT	Feasibility Required Y/N	TOTAL PROJECT COSTS (External Funded and PCC match) - Profilled by year, from Year of Commencement																FUNDING				REVENUE		ADDITIONAL INFORMATION (Optional)							
				TOTAL	Potential External Funding Available																SOURCE	£'000	%	REVENUE IMPACT (£'000 if known)	REVENUE IMPACT NOTES								
					2025/26 £'000	2026/27 £'000	2027/28 £'000	2028/29 £'000	2029/30 £'000	2030/31 £'000	2031/32 £'000	2032/33 £'000	2033/34 £'000	2034/35 £'000	2035/36 £'000	2036/37 £'000	2037/38 £'000	2038/39 £'000	2039/40 £'000	2040/41 £'000							2041/42 £'000						
Older Adults	Adults Campus 1 NW - Care Home	Nursing / Residential Care element – match cost required from PCC	Yes	22,500		225	900	9,000	11,000	1,375	-	-	-													Funding from IRCF or successor grant scheme	15,750	70%				Financial Profile based on general assumptions agreed with Professional Construction Service Team	
Older Adults	Adults Campus 1 NW – Extra Care	Extra Care element – match cost expected from RSL partner	Yes	20,000		200	800	8,000	9,750	1,250	-	-	-													Funding from HCF + Match from RSL Co-ordination	19,600	98%					
Older Adults	Adults Campus 2 SE - Care Home	Nursing Care element – match cost required from PCC	Yes	22,500		225	900	9,000	11,000	1,375	-	-	-													Funding from IRCF or successor grant scheme	15,750	70%					
Older Adults	Adults Campus 2 SE – Extra Care	Extra Care element – match cost expected from RSL partner	Yes	20,000		200	600	200	8,000	9,750	1,250	-	-	-												Funding from HCF + Match from RSL Co-ordination	19,600	98%					
Older Adults	Care Home(s) Acquisition - Site A	Achieve Rebalancing of the Market	Yes	8,000		5,000	1,500	1,500																		Funding from IRCF or successor grant scheme	5,600	70%					
Older Adults	Care Home(s) Acquisition - Site B	Achieve Rebalancing of the Market	Yes	8,400			8,000	400																		Funding from IRCF or successor grant scheme	5,880	70%					
Older Adults	Adult (OP & MH) Care Homes – Enlarge / Re-provide SW	Remodel & extend provision to meet need and reduce future revenue costs + Achieve Rebalancing of the Market	Yes	26,500		225	900	9,000	11,000	3,375	2,000	-	-	-												Funding from IRCF or successor grant scheme - with risk of reduction to reflect element or reprovision	15,900	60%					
Older Adults	Adults Campus 3 HFW - Care Home	Nursing / Residential Care element – match cost required from PCC	Yes	22,500				225	900	9,000	11,000	1,375														Funding from IRCF or successor grant scheme	15,750	70%					
Older Adults	Adults Campus 3 HFW -Extra Care	Extra Care element – match cost expected from RSL partner	Yes	20,000				200	800	8,000	9,750	1,250														Funding from HCF + Match from RSL Co-ordination	19,600	98%					
Older Adults	Adults Campus 4 SW - Care Home	Nursing Care element – match cost required from PCC	Yes	22,500					225	900	9,000	11,000	1,375													Funding from IRCF or successor grant scheme	15,750	70%					
Older Adults	Adults Campus 4 SW -Extra Care	Extra Care element – match cost expected from RSL partner	Yes	20,000					200	800	8,000	9,750	1,250													Funding from HCF + Match from RSL Co-ordination	19,600	98%					
Older Adults	Adults Campus 5 SE -Extra Care	Extra Care element – match cost expected from RSL partner	Yes	20,000									200	800	8,000	9,750	1,250									Funding from HCF + Match from RSL Co-ordination	19,600	98%					
Older Adults Total				232,900	-	6,075	13,600	37,525	52,450	34,550	25,700	19,625	20,950	3,425	8,000	9,750	1,250	-	-	-	-					PCC	188,380						
Children	West Lodge (Provision 1)	Enhancements to provision 1 to remove constraints in existing recently established service	No	120		0	120																				Funding from IRCF or successor grant scheme	60	50%				Reduced Grant percentage reflecting post-scheme development costs.
Children	Provision 2	Purchase with refurbishment requirements – to meet eliminate / restrict profit agenda and secure care closer to home for children requiring residential care.	Yes	3,092	715	2,377																					Funding from IRCF or successor grant scheme	2,164	70%				
Children	Provision 3	Purchase with refurbishment requirements (or alternative option of new-build) – to meet eliminate / restrict profit agenda and secure care closer to home for children requiring residential care.	Yes	6,000	4,500	1,500																					Funding from IRCF or successor grant scheme	4,200	70%				
Children	Provision 5	Allowance for requirement to fit-out specialist residential accommodation being built as part of education project.	No	500		250	250																				Funding from IRCF or successor grant scheme	350	70%				
Children	Step-Down Units (YPLA)	Provide step-down and skills development		900				300	300	300																	Funding from IRCF or successor grant scheme	630	70%				
Children	Accommodation for Children's Commissioning project	Accommodation to meet needs identified within Childrens commissioning project including potential for solo placements.		7,500	-	750	750	750	750	750	750	750	750	750	750												Funding from HCF + Match from HRA (HRA Asset)	7,500	100%				
Children	Post -16 Accommodation	Accommodation to meet needs for children as they grow in independence post 16 and/or need transitional arrangements as young people separate from people below 16.		6,000			800	700	800	700	800	700	800	700	800												Funding from HCF + Match from HRA (HRA Asset)	6,000	100%				
Children Total				24,112	5,215	4,997	1,800	1,750	1,850	1,750	1,550	1,450	1,550	1,450	750	-	-	-	-	-	-						Funding from HCF + Match from HRA (HRA Asset)	20,904					
Working Age Adults	Bryn Hir (PCC HRA)	Meet Supported Accommodation Need	No	980	50	450	480																				Funding from HCF + Match from HRA (HRA Asset)	980	100%				
Working Age Adults	Cleddau Bridge (PCC HRA)	Meet Supported Accommodation Need	No	901	901																						Funding from HCF + Match from HRA (HRA Asset)	901	100%				
Working Age Adults	Stade Lane (Pob) Note 1	Meet Supported Accommodation Need	No	1,268	105	613	550																				Funding from HCF + Match from RSL (RSL Asset), PCC Co-ordination	1,242	98%				
Working Age Adults	Hakin (PCC HRA)	Meet Supported Accommodation Need	No	1,000				500	500																		Funding from HCF + Match from HRA (HRA Asset)	1,000	100%				
Working Age Adults	Pembroke Dock (FCHA)	Meet Supported Accommodation Need	No	2,000		1,000	1,000																				Funding from HCF + Match from RSL (RSL Asset), PCC Co-ordination	1,960	98%				
Working Age Adults	Cowhill	Provide for Specialist Adapted Housing Need	No	45	45																						Funding from HCF + Match from HRA (HRA Asset)	45	100%				
Working Age Adults	Various - to be allocated	Meet Supported Accommodation Need	No	28,250	600	1,400	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750		Funding from HCF + Match from HRA (HRA Asset)	28,250	100%					
Working Age Adults	Pembroke Road (2)	Meet Supported Accommodation Need	No	482	150	312																					Funding from HCF + Match from RSL (RSL Asset), PCC Co-ordination	493	98%				
Working Age Adults	Substance Misuse (SM) - GT	Aligns with HSG Priorities	No	1,200		800	400																				Funding from HCF + Match from HRA (HRA Asset)	1,200	100%				
Working Age Adults	Complex Needs - JB/GT	Aligns with HSG Priorities	No	1,000		600	400																				Funding from HCF + Match from HRA (HRA Asset)	1,000	100%				
Working Age Adults	Other LD Community Projects (Garden Centre / Hotel, etc)	Supported Employment, provide meaningful employment and reduce cost of care provision; Provide Income stream.	Yes	2,300				800	200		800	500															Funding from HCF + Match from HRA (HRA Asset)	-					
Working Age Adults	Temporary accommodation - refurb/purpose	Aligns with HSG Priorities		2,000				1,000	1,000																		Funding from HCF + Match from HRA (HRA Asset)	2,000	100%				
Working Age Adults Total				41,406	1,852	5,175	4,580	4,050	3,450	1,750	2,550	2,250	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750	1,750		Funding from IRCF or successor grant scheme; potential for some Regeneration or other funding streams may also be available	39,032	70%					
Cross Cutting	Shopfront Haverfordwest	Integrated and Preventative Community Offer	Yes	2,500		2,000	500																										
Cross Cutting Total				2,500	-	2,000	500	-	-	-	-	-	-	-	-	-	-	-	-	-	-												
Grand Total				300,918	7,067	18,247	20,480	43,325	57,750	38,050	29,800	23,325	24,250	6,625	10,500	11,500	3,000	1,750	1,750	1,750	1,750							250,066					

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Report of: Director of Social Care and Housing

Date: 14 November 2025

Cabinet Portfolio: Adult Social Services / Young People, Community, Well-Being and Future Generations

Statutory Report of the Director of Social Services 2024/25

Members are being asked to scrutinise and have oversight of the following:

- To provide the Committee with an opportunity to scrutinise and review the Annual Report of the Statutory Director of Social Services, Pembrokeshire County Council for 2024/25.

Main Issues

The report is produced to meet the legislative requirements of Part 8 Code of Practice on the Role of the Director of Social Services (Social Services Functions), Social Services and Well-being (Wales) Act 2014. The guidance information, which includes a template, has been produced by Welsh Government and all Welsh Authorities are expected to produce their reports in the agreed format so that they can be more easily compared.

A copy of our report is shared with our regulatory body, Care Inspectorate Wales (CIW).

Main Considerations

This report is based on a considerable body of evidence and draws conclusions about the effectiveness of social services in Pembrokeshire. It covers the delivery, performance, risks, priorities and plans for improvement on the whole range of social care functions.

The report highlights areas of good performance and areas where performance needs to improve. It illustrates the progress made against the four 'pillar' of the act Well-Being, Prevention, People and Partnership and Integration.

We also describe how people are helping us to shape the services of the future and how we work in partnership with other council departments such as housing and education and other services such as the Third Sector, Health and Police.

The report identifies our priorities for 2025/26, which are all underpinned by the drive to put people and their needs, at the centre of what we do.

As an improvement in accessibility people will be able to access the report on SWAY (<https://sway.cloud.microsoft/2OETCOSFAjM5Xtsb?ref=Link>) which can make large documents easier to read and digest.

Conclusions

The report provides a significant amount of information with regard to the performance and development of Social Care Services during 2024/25.

RECOMMENDATION:

That the report be received and the progress, which continues to be made, on the improvement of the delivery of Social Services during 2024/25, be noted.

REASON FOR RECOMMENDATION:

Statutory duty under the Social Services and Well-Being (Wales) Act 2014.

Appendices:

Appendix A – The Annual Report of the Statutory Director of Social Services, Pembrokeshire County Council for 2024/25.

Background Documents:

[6 October 2025 – Cabinet Report - Statutory Report of the Director of Social Services 2024/25](#)



Annual Report of the Statutory Director of Social Services- 2024/25

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1. Director's Summary



Thank you for taking the time to read this report which outlines our key achievements, challenges and priorities for 2024/25 and our overarching objectives for the coming year. The number of young people, families and adults who have cause to draw upon care and support remains high, with an increasing number of people approaching the Authority with multiple and complex needs.

In order to deliver sustainable services, we continue to increase our efforts upon prevention and early intervention across both Adults and Children's Services, doing this in partnership with Health, Voluntary and Community Sector partners.

We have tried to make this report as readable as possible, drawing upon stories as well as numbers to demonstrate our work and impact. I'm always open to suggestions as to how this report can be improved and so if you have any comments, please contact me on michael.gray@pembrokeshire.gov.uk¹

¹<mailto:michael.gray@pembrokeshire.gov.uk>



2. Context Section



2.1 Performance Data

During 2020/21 the Welsh Government introduced a new code of practice in relation to the performance and improvement of social care services in Wales. They requested that we collect data on certain areas of business. Some of these data measures have been included in this report, including comparisons on previous years so that performance trends can be better understood.

Regular review of our data and that for the rest of Wales enables us to identify areas where improvement activity would be beneficial. It also allows us to instigate mitigating actions in the context of demand levels and workforce recruitment issues.

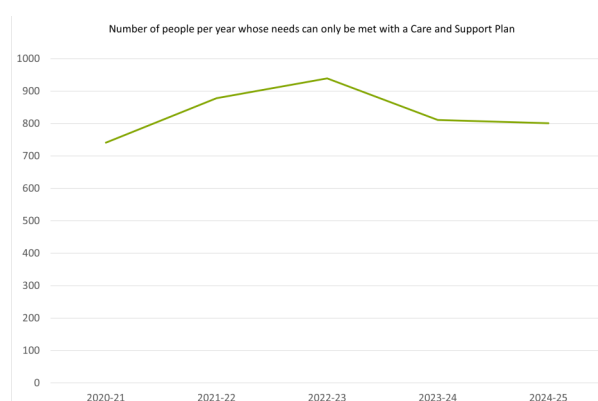
We continue to provide Welsh Government with regular data updates so that they can closely monitor demand for services and workforce pressures across Wales.

2.1.1 Adult Data

We have changed the way that we count the **number of adult contacts**. In previous years, we identified that we were an outlier compared to the average number of contacts for Wales. The March 2025 comparative data showed that the average number of contacts per 100,000 for Wales was 523 whereas Pembrokeshire's was 187. Following a review and discussion with other Authorities, we increased our annual baseline data to include contact messages, Multi Agency Risk Assessment Conferences (MARACS) & reports regarding professional concerns in our annual figures, as do other Authorities. Previously we had only included referrals for care. Therefore, the total annual number of adult contacts recorded for 2024/25, is 14,575 and is more than the 7,461 reported on last year. This is however more aligned to how the rest of Wales count their adult contacts.

Of the total contacts received (14,575) **adult provision of advice and assistance** was provided to 6,225 people.

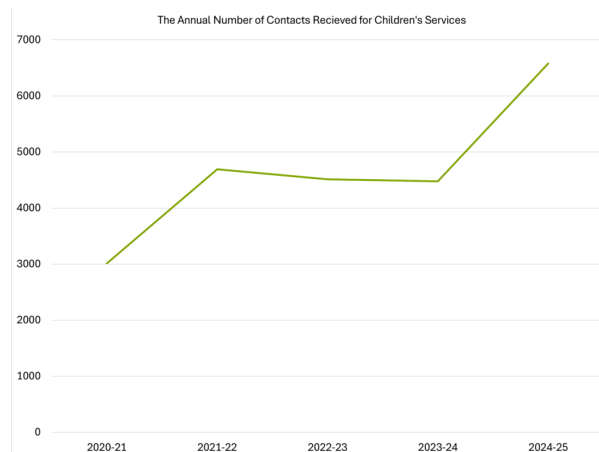
The Number of **New Adult Assessments Completed** in the Year was 1,705 which was slightly lower than the previous year 2023/24 when 1,804 were completed. In Wales the average number of assessments completed during the month of March 2025 was 250 with Pembrokeshire undertaking 223 in comparison. We have been focussing on reducing the number of people waiting for an assessment and established an improvement board in 2024 to track progress. In June 2025 the number of people waiting for an assessment was 192 falling from 289 at the end of March 2025. The Welsh average for the number of people per 100,000 population waiting for an assessment in March 2025 was 115 whereas the comparable figure for Pembrokeshire was 308 (by August 2025 this figure had reduced to 136).



The Number of People whose Needs Could Only be Met with a Care and Support Plan was 801 in 2024/25. This is the lowest the figure has been since 2020/21 when it was suspected that people did not access services in the same way during the COVID pandemic resulting in 741 people being identified as having eligible care and support needs. 2022/23 had the highest number of people with eligible needs at 939.

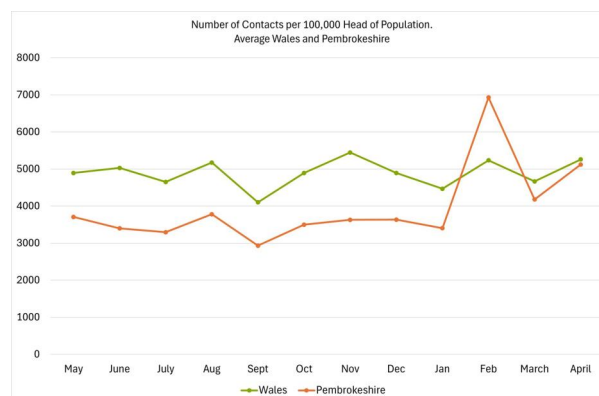
The Number of adults with a care and support plan in place has reduced slightly from 2,226 in 2023/24 to 2,197 in 2024/25.

2.1.2 Children's Data

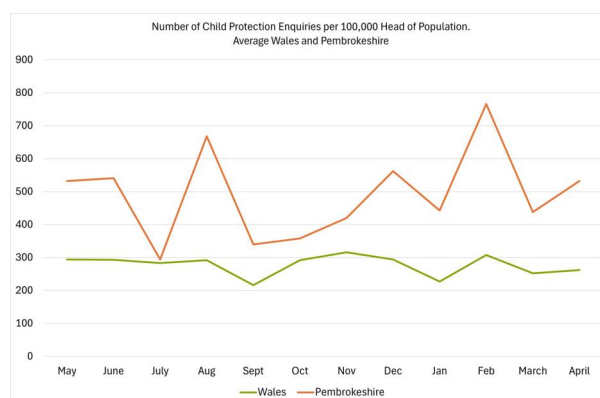


The actual total number of **child contacts received** for 2024/25 was 6,579 an increase on the previous year (4,476).

During 2024/25 the police service sent in 3,572 contacts which was significantly more than the previous year at 2,080. Most of the increase in contacts is coming from the police force.



The number of Pembrokeshire contacts received per 100,000 of population remains lower than the average for the rest of Wales for most of the year. However, the figures for March are aligned to the Welsh Average. We believe the 'spike' in contacts for February relate to the implementation of a new case management system.



Pembrokeshire completes more child protection enquires than the Welsh Average in 2024/25 despite having fewer contacts. The number of enquiries dealt with by Wales is consistent though the number undertaken in Pembrokeshire is more variable.

In 2024/25, Children's Services commissioned an academic study of how our Child Care assessment team respond to new referrals. The outcome of this study will be ready in 2025/26, and from this we will be in a stronger position to understand the potential reasons behind this variation.

Advice and assistance was provided to 1,262 people which is a significant increase on the previous year (784).

The actual **number of new assessments completed** in the year 2024/25 was 2,061 which is an increase of 120 on the previous year (1,941). The average Wales figure per 100,000 of population for new assessments completed is stable varying between 603 per month in January 2025 and 822 in August 2024. The Pembrokeshire figure is far more variable from 379 in September 2024 to 834 in December 2024.

The **number of eligible needs met with a care and support plan** in Pembrokeshire (807) was significantly less than that of the previous year (1040).

However, the number of care and support plans as of 31 March 2024/25 was 854 which is significantly higher than 616 plans at the same time the previous year.

We think that there are several factors increasing the demand being placed on children's services. The cost-of-living crisis continues to some degree and poverty has been shown to have a direct impact on the numbers of children in care. Families who experience poverty are often seen to experience greater challenges which can push them into poorer mental health, potentially resulting in increased substance use and domestic abuse. Their home

may also be put at risk. When these issues impact on children's safety an intervention is required of children's services.

2.2 Leadership



Along with the rest of the Council we work to the “five ways of working” set out in the Well-being of Future Generations (Wales) Act 2015. By adopting these ways of working, we focus on ‘Prevention’ and ensure that our services are fully ‘Integrated’ with communities and other agencies. We ‘Collaborate’ with and ‘Involve’ people and partners in service developments.

We work in close partnership with the other parts of the Council and other agencies to provide a range of services to people who require help and support to do what matters to them. We also work closely with neighbouring authorities in the West Wales region, the Health Board and Third Sector partners. With our partners we have developed a regional area plan² which sets out the strategic intentions of the West Wales Care Partnership (RPB)³.

²<https://wwrpb.org.uk/area-plan/>

³<https://wwrpb.org.uk/>

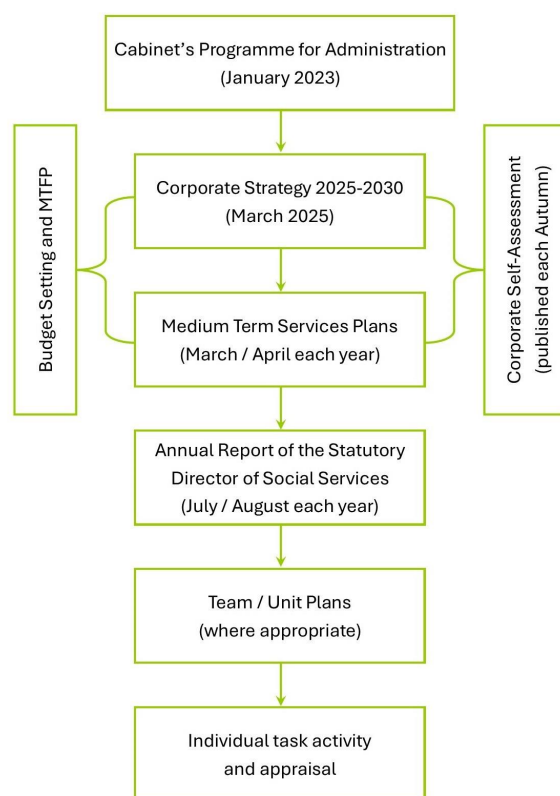
The Programme for Administration for 2022-2027 commits to supporting people with appropriate care and support to live in their own homes and communities, focusing on prevention and ensuring vulnerable people are safe.

We work in partnership to ensure the successful implementation of the Council's well-being objectives. The 2024/25 objectives relevant to social care are:

- We will ensure the appropriate provision of care and support, focusing on prevention and ensuring vulnerable people are safe.
- We will support our communities, maintaining positive relationships with them to help to build active, resourceful, connected, sustainable and creative communities.
- We will support the Welsh language within communities and through schools.
- We will enhance the development of our workforce, improving skills and opportunities as well as tackling issues of recruitment and retention.

There will be a revised set of corporate objectives for 2025/26. A public consultation was concluded in February 2025.

The diagram shows how our objectives are filtered through the organisation into individual appraisals.



The work that we undertake in Social Care is underpinned by the Social Services & Well-being (Wales) Act 2014 (the Act). The improvement framework provides us with, 4 key areas of focus:

People

"All people are equal partners who have choice, voice and control over their lives and are able to achieve what matters to them"

"Effective leadership is evident at all levels with a highly skilled well qualified and supported workforce working towards a shared vision".

Prevention

"The need for care and support is minimised and the escalation of need is prevented whilst ensuring that the best outcomes for people are achieved"

"Resilience within communities is promoted and people are supported to fulfil their potential by actively supporting people who need care and/or support including carers to learn develop and participate in society"

Partnership and Integration

"Effective partnerships are in place to commission and fully deliver fully integrated, high quality sustainable outcomes for people"

"People are encouraged to be involved in the design and delivery of their care and support as equal partners"

Wellbeing

"People are protected and safeguarded from abuse and neglect and any other types of harm"

"People are supported to actively manage their well-being and make their own decisions so that they are able to achieve their full potential and live independently for as long as possible"

In section 3, I describe a range of initiatives which we are implementing to support these areas.

During 2024/25 we continued to operate a dedicated Overview and Scrutiny Committee for Social Care. This enables a more comprehensive approach to the scrutiny of social care

practices and service delivery. Members scrutinised our performance in workforce planning, our preventions work, the West Wales Care Partnership and many other topics throughout the year. More information on this committee including agendas and minutes is available on the council web site⁴.

We also held several members' seminars. These provide an opportunity to give members detailed information on key areas such as safeguarding, workforce development, the principles of the Social Services and Wellbeing Act and Social Care Finance.

Following on from the 2024 CIW inspection of Adult Services and given the need to maintain focus on our early intervention and prevention agendas, I set up a Social Services Improvement Board. The purpose of this Board was to monitor our response to key CIW recommendations for adult services and to establish the basis for sustainable social services provision across Pembrokeshire. The Membership of the Board included the Chief Executive, Chair of Social Services Overview and Scrutiny Committee and Cabinet Member for Social Care and Safeguarding. The Board met on a monthly basis throughout the year to provide robust oversight and critical appraisal of the social services transformation programme.

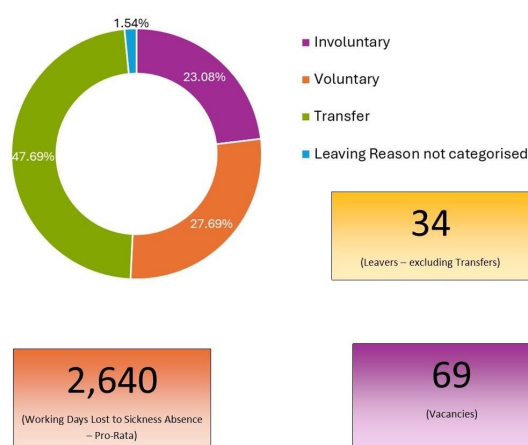
2.3 Our Workforce

2.3.1 Overview of the Social Care Work Force

⁴<http://mgenglish.pembrokeshire.gov.uk/mgCommitteeDetails.aspx?ID=581&LLL=0>



Leaving Reason



2.3.2 Key Workforce Challenges

This year our total vacancy rates have remained below 10%, which is an improvement on previous years. In part this has been achieved by implementing a successful ‘grow your own’ workforce initiative, which is managed by our SCWWDP team, focusing on mentorship, training and development.

However, we experience challenges in fully resourcing our childcare social care workforce and Adult Mental Health Practitioners. We are actively implementing additional strategies to attract new recruits and enhance our staffing levels. We have established a competitive payment structure benchmarked to regional standards. In addition, we are offering payments such as ‘Golden Hello’s,’ and Relocation Packages. We also run targeted social media campaigns to promote opportunities within our teams locally and internationally. Building on the success of recent initiatives to attract more young people into the care profession and encourage apprenticeship sign-ups, we will continue working closely with schools and other key stakeholders to deliver a series of engaging sessions over the summer

and into the new term. These sessions aim to raise awareness of the diverse services, roles and career pathways within the sector, while providing opportunities for young people to connect with those already working in care.

To increase capacity, we have been successful in attracting additional revenue funding based on demand projections in children's services. We are also expecting further Government funding as part of the Welsh Government's commitment to eliminate profit from the care of children looked after. In addition, as part of the Council's commitment to investing in prevention, we will be in a position to invest in more staff that can support families to stay together and guard against escalation into the child protection system. These initiatives are absolutely key to our efforts to safely reduce the number of young people looked after.

In 2024, we also altered line management arrangements to ensure that our Adult Services Safeguarding Team Manager reported directly into a Service Manager for Adult Safeguarding. Additional posts have also been created within the team and stronger partnerships developed with adult care management teams and partner agencies.

2024 also saw us commence our review of our "Front Door" to Adult Services. By testing a co-location model with Health Board and VCS colleagues, we have shown that we are better able to offer timely responses to people when they approach the Local Authority for support. We continue to finesse this partnership model prior to making normal in 2025.

In June 2025, it was announced that Pembrokeshire would be receiving a share of nationally recurrent funding to support Local Authorities in helping people move from hospital back home, and to strengthen community based services. This is a welcome injection of funding into the service, which should enable the service to increase its capacity to support people to live well, for longer in their own communities, doing what matters to them.

2.3.3 Support for our Workforce

As early supporters of the Time to Change Wales Campaign, we remain committed to promoting mental health awareness and have continued to train and recruit mental health champions throughout our workforce. With the support of WULF Funding and collaboration with our Trade Union partners, we are fostering a culture that encourages open dialogue about emotional challenges. Our monthly supervision guidance emphasises the importance of mental health considerations and we offer an in-house occupational health service that conducts specialised wellbeing workshops. We also provide social care staff with access to support networks and facilitate referrals for counselling.

2.3.4 Workforce Development

Our priority is to ensure that the social care workforce has the knowledge and skills to meet our objectives for the County and that people in Pembrokeshire are supported by skilled and competent staff.

We support extensive social care frontline training as well as thematic training regarding outcomes-focused care. To achieve ambitions set within workforce strategies we work collaboratively with our partners to minimise training duplication, maximise training attendance and share information regularly to achieve our goals.

To enable the workforce to meet regulatory requirements for qualification and registration, qualifications at all levels (including leadership and management) were provided to **95** social care staff.



Other key activities undertaken in 2024/25 are listed below:

- Person Centred Practice in Autism and Learning Disabilities
- Identifying Neglect, Professional Curiosity and Working with Resistance
- Welsh Language Basics for Social Care
- Attachment, Separation, Loss and Foetal Alcohol Syndrome
- A pilot course on stoma and catheter practical skills, developed by the Council for social care staff, was attended by **106** people. The course will be accessible to the entire sector next year
- Social Work Trainee Scheme that has increased the number social care staff working towards their qualification to **16** people
- Hosted **5** social work students from various social work degree programmes to provide a total of **21** training placements

- Held various career fairs and a health and social care speed networking event, which was attended by approximately **150** students from three Pembrokeshire schools
- The 'Understanding Sensory Regulation' course, designed for children's services staff to enhance their knowledge of sensory regulation and provide practical activity ideas and resources, was attended by **32** participants
- Neurodiversity in the workplace training for managers, delivered corporately was attended by **51** managers across the organisation, including social care managers
- A new 3-day Manual Handling Passport & Fundamentals of Care course developed by the Council was attended by **56** staff: *"This course has massively improved my confidence, taught me new techniques, and I learned the best way to support the client."* *"This is the best manual handling course I've attended in my 26 years of care!"*
- **215** people attended various safeguarding courses aimed at developing knowledge and skills on how to act when safeguarding vulnerable adults, children and young people.
- 'Self-Harm Awareness' online webinar provided by Samaritans was attended by **76** people from across the sector: *"The delivery was excellent, and the content was relevant to my role"*
- A total of **56** participants attended face-to-face dementia courses, including 'Dementia Awareness Using a Strengths-Based Approach'. **152** individuals completed dementia eLearning courses made available across the sector.
- Naloxone training was provided to newly trained social workers on how to administer lifesaving medication to reverse the effects of opioid overdose: *"I would be more confident in knowing how to react and safely administer this to someone suffering an opiate overdose"*
- **208** people attended 'Safeguarding allegations or concerns about practitioners and those in positions of trust' training:
- **78** staff attended Signs of Safety training: *"The course broadened my knowledge of signs of safety and gave me more in-depth strategies to use when working with families and managing what is working well and what is not"*
- Professional Curiosity training designed for practitioners and multi-agency colleagues to work with professional competence was attended by **79** people: *"This course was highly relevant and gave me some new tools to consider in my working role, it was useful, thought provoking and a good reminder of why we work to support vulnerable people"*

- 'Abuse and Trauma in Faith': This course helps participants to respond well to spiritual abuse and abuse and trauma within faith more widely and was attended by **35** practitioners.
- Professional Boundaries for Social Care Workers was attended by **32** staff: *"This course gave me a clear understanding of professional boundaries and how to separate my personal opinions and attitudes and treat all my clients equally"*

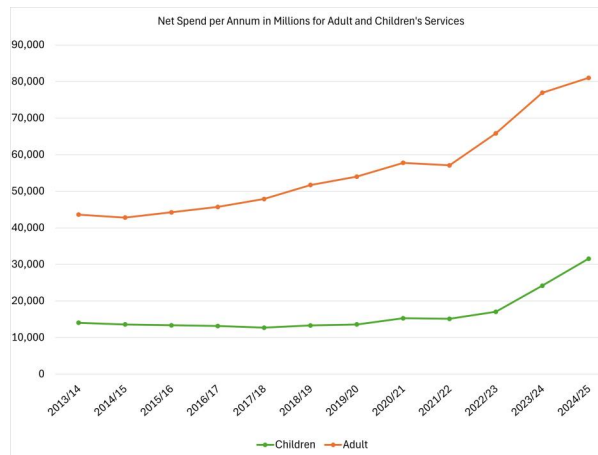


By the end of 2024/25 the social care workforce demonstrated a strong engagement with training opportunities, with a total number of **8,531** course completions recorded.

Safeguarding training remains a priority with a focus. It is essential that social workers and social care staff confidently challenge others when safeguarding concerns. We will continue to invest in training that equips staff to respond confidently to complex safeguarding concerns.

We have also been delivering training on Collaborative Communication having trained over 170 people in the approach across social care and health services. Collaborative communication in social care involves professionals, service users, families, and communities working together to design and deliver care services. This approach emphasises shared decision-making, open communication, and mutual respect to ensure services meet the needs and goals of individuals receiving support. Effective collaborative communication is crucial for building trust, fostering inclusivity, and ultimately improving the quality and effectiveness of social care.

2.4 Financial Resources



The annual net spend on social care has significantly increased over the last couple of years as shown in the chart below.

Children's services have had an 85% rise in net budget since 2022/23. This has been primarily to account for the high costs of some of our residential placements for young people. Part of our social care transformation programme includes addressing such costs, both by developing strategic partnerships with local providers, and expanding our own Council run provision. Up until 2022/23 the spend on Children's was stable with small annual incremental rises. Adult services spend increased significantly in 2022/23. Since then spend has continued to increase year on year reaching a peak of £80m in 2024/25.

2.4.1 Children's Services

For the 2024/25 financial year, Children's Services overspent its rolling budget of £31.556m by £5.649m (17.9%).

Children's Services continued to face an unprecedented rise in demand of complex and vulnerable children that required care placements for both stability and safety. The lack of internal and external in-county residential placements resulted in high cost out of county and unregulated placements being sourced to keep extremely vulnerable young people safe.

The Children Services Commissioning has supported the rightsizing of existing packages of care, facilitated pro-active placement movements and the reduction in support requirements for some young people. The commissioning team have achieved £1.392m budget savings across financial year 2024/25.

Children's Services first residential care home in over 30 years (West Lodge) was registered with the CIW and welcomed the first client in September 2024. The identified clients will

support cost avoidance compared to both in-county and out of county external residential care placements. West Lodge is currently supporting 3 complex children, with 1 further available bed (4 bed care home).

2.4.2 Adult Services

For the 2024/25 financial year Adult Social Care overspent its rolling budget of £80.127m by £0.872m (1.1%).

Adult Social Care has continued to support an increase in people across Nursing Care, Residential Care, Supported Living Services (SLS) and Homecare. Adult Services are receiving higher levels of eligible need alongside more complex packages of care. There has also been a significant rise in people requiring Mental Health and Learning Disabilities focussed support.

The increase in demand and complexity continued to grow in 2024/25, however this was offset by additional client income and continued savings related to the re-assessment of high-cost packages of care.

For both children's and adult services, extensive work has been undertaken to identify likely budgetary requirements for 2025/26. This has translated into additional pressures being built into our budget to account for demographic trends. Social Services, through an ongoing focus on managing demand strengths based approaches, and system redesign, will seek to reduce these pressures over the course of the 2025/26 financial year.

3. Performance Assessment



An individual's well-being is central to everything that we do. This section demonstrates how we have been working towards promoting and improving the well-being of people living in Pembrokeshire through a wide range of initiatives.

We have linked the work we do to the four areas of the improvement framework.

3.1 People

3.1.1 Measuring People Outcomes

DIFFERENCE SERVICE HAS MADE	No. of people	% of Total
Total no. of people	1408	
The services received made a positive difference.	1031	73%
The services received made some difference.	346	25%
The services received made no difference	31	2%
QUALITY OF CARE MANAGEMENT SERVICE	No. of people	% of Total
Total no. of people	1352	
Excellent	429	32%
Good	827	61%
Average	86	6%
Poor	10	1%
OUTCOME SCORE CHANGE AT REVIEW	No. of people	% of Total
Total no. of people	1129	
Negative Change At Review	89	8%
No Change At Review	408	36%
Positive Change At Review	632	56%

To assess how we are performing and to identify future improvements we ask all people who access adult services a couple of questions. These questions ask people to rate how much difference the service has made to them, the quality of their care management and how they are feeling at their first review. The results are shown in the table.

A total of 98% of people said that the service received had made either a positive difference or some difference to their lives. The quality of the care management service was rated as either good or excellent by 93% of people. We were pleased to hear that despite delays in assessments and reviews at the start of the year people remain satisfied with the service they received from us. A total of 10 people rated the service as poor. The outcome score at review does require some further investigation as following the service being implemented 56% of people are indicating a positive change with 44% noting no change or a negative change. More timely reviews will ensure that the services provided are the best to improve people's well-being. Significant work has also been undertaken to reduce our review backlog.

Given our commitment to a person-centred approach, we also asked people if they felt their individual circumstances were considered during the care planning process. Out of 142 respondents 96% felt that they were either partially or fully considered. We also asked people if they felt that their voice was being listened to. A total of 96 people responded with 97% noting that they felt partially or fully listened to. Our collaborate communication training programme is already developing further our person centred approach and we are exploring how we can harness AI to make this even easier. In 2024/25 we commenced a pilot of an AI powered product that enables workers to focus on relational conversations with residents, safe in the knowledge that the conversation is seamlessly inputted into the relevant sections of an assessment, care and support, or review form. We will look to embed this into our ways of working in 2025/26.

3.1.2 Technology Enabled Care (TEC)

Our technology enabled care team has improved how they engage with people and their family members by attending various wellbeing days throughout the county. The feedback is informing our future programme of work.

The below are the following examples of where we have used TEC to help people live well in their own homes:

- Community alarm system, so members of the property can quickly get help and support if they are feeling anxious or had a medical emergency.
- Falls detector that is linked to community alarms.
- Bed sensor to a pager to alert carer.
- Door sensor on a cupboard in the kitchen, to alert carers and to reduce the possibility of choking.
- Provided training on Alexa for communication and for simple skills to help and support.
- End of Life – West Wales Regional Partnership Board⁵ - virtual reality for end-of-life care



3.1.3 Welsh Language

⁵<https://wwrpb.org.uk/end-of-life/>

The Welsh Language Standards apply to all areas of a Council's work to ensure that the language is treated the same as the English and that all people have the opportunity to receive their services from us in Welsh.

We have a Welsh Language Strategy and standards⁶. Below is a list of some of the ways in which we promote the Welsh Language:



- A directory of Welsh speaking staff which is kept up to date through the Human Resources system.
- The new employee induction document launched in 2024 refers to Welsh Language Standards Regulations for employees.
- As part of induction, training opportunities include a 10-hour Welsh Taster course and Welsh Language Awareness e-learning module. Other courses include Entry, Foundation, Intermediate, Advanced and Proficiency levels that are fully funded.
- A corporate contact centre with the ability to take referrals for social care in Welsh.
- Raise awareness of the language amongst staff and provide opportunities for employees to develop their Welsh language skills.
- We ensure all people making a referral for adult services are asked what their preferred language is. Sometimes we do struggle to identify Welsh speaking social work capacity and this was noted in the recent CIW inspections.

3.1.4 Most Significant Change Project

Most Significant Change (MSC) is an approach that involves the gathering of stories about changes in people's lives. The stories are then discussed by those involved in policy making

⁶<https://www.pembrokeshire.gov.uk/customer-service/welsh-language-standards>

and implementation to consider the implications for the planning and delivery of a service or activity.

During 2024/25, a project was delivered to explore how MSC could support a reflective, relational, and evidence-informed approach to understanding change in community-based interventions. The stories collected were from people in Pembrokeshire who had been in contact with a range of services and who experienced significant change in their lives as a result. The learning that was gained from hearing the stories included:

- Organisations need to deepen their listening and engagement practices to ensure that people feel truly heard and involved
- The importance of early intervention and prevention, with a clear emphasis on the value of early support for individuals before crises develop
- Stronger partnerships and collaboration across agencies and sectors as essential to provide holistic, community-based support
- Recognition that community based, third sector services are not only effective, but can be transformational for people, and the need for increased awareness and more adequate resources
- The need for a fundamental culture shift in public services, including humility, learning from lived experience and recognising the strength of community led provision in supporting the health and wellbeing of people
- Work is required to develop innovative approaches to measurement and evidence was an integral part of the learning and adaptation

An evaluation report has been produced by Together for Change⁷ and the project is continuing into 2025/26 in order to embed MSC as a learning tool across the organisation.

3.1.5 Advocacy

There has been a coordinated focus on advocacy in West Wales for several years, with the Three Counties Advocacy Network.

Adult Advocacy Strategy – West Wales Regional Partnership Board (wwrpb.org.uk)⁸

An Independent Professional Advocacy service is available across the counties of Carmarthenshire, Ceredigion and Pembrokeshire. This service is designed for people with needs for care and support or their carers who are involved in Social Care Assessment,

⁷https://tfc.cymru/en_gb/

⁸<https://wwrpb.org.uk/en/adult-advocacy-strategy/>

Planning and Review, Safeguarding Processes and is provided by 3 CIPA (3 County Independent Professional Advocacy).

3 CIPA consists of 5 individual providers including:

- Advocacy West Wales-Eiriolaeth Gorllewin Cymru (takes a lead on the service)
- Dewis CIL
- Age Cymru Dyfed
- Carmarthenshire People First
- Carers' Trust Crossroads West Wales.

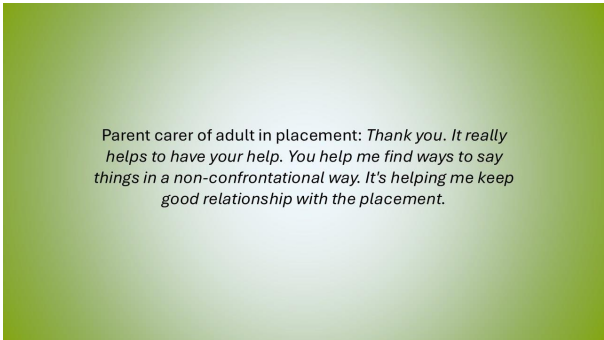
3 CIPA provides an important single point of contact for advocacy services, which aims to help identify the most appropriate advocacy service, which best meets an individual's need. There is a wealth of experience in the delivery of quality advocacy services within the partnership which provide a range of other specialist community and statutory advocacy services and other support services across the region.

The partners have provided a range of advocacy awareness training to social, health and third sector employees across the region. This training is aimed at supporting referrals from social, health and third sector agencies. This programme will continue through 2025.

A range of self-advocacy support activities are in place around the region and additional self-advocacy workshops are being trialled and it is hoped these will be rolled out over the region in the coming year.

Considering the lived experience of those who have or are in receipt of such a service is critical firstly to understand the difference it makes to a person's life as well as help further improve, planning and designing advocacy services in West Wales.

People using advocacy services said ...



Parent carer of adult in placement: Thank you. It really helps to have your help. You help me find ways to say things in a non-confrontational way. It's helping me keep good relationship with the placement.

My advocate's support has helped me stand on my own two feet and abled me to self-advocate for first time in 7 years. Thank you.

I'm very grateful for support from my advocate... I feel this is the first time I have been listened to. It's taking a load off now I've got this support.

Not being listened to caused me depression and professionals know it... I am happy about my future and all the things being put in place. Extremely thankful for Advocacy support and relieved, as finally being listened to, I cannot thank you enough.

Client to advocate at meeting: "You always focus just on me, give me your full attention. You empower me to take the power I've given away before"

Feel like 99% of my worries and issues have been lifted, so appreciative of Advocacy support, it's really changed things.

Carer for young adult: *"Thank you very much for helping us.... It is clear that I think the world of you and you have a fantastic way of working with her. Thanks millions."*

From client at meeting - *I don't know how we would have got through this without you. You have such a way with words. Thank you so so much. Thank you, thank you thank you!*

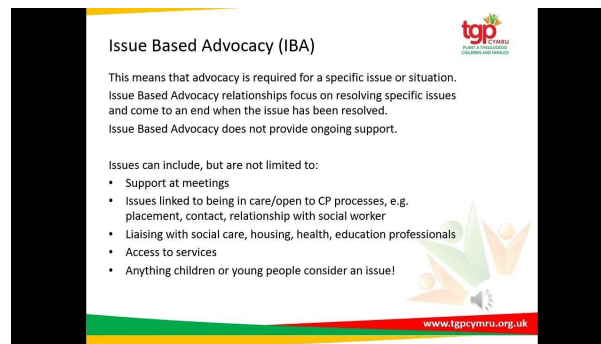
Referral Social worker regarding non instructed report for best interest process – *"What you have done for them was fantastic!"*

In addition to the above quotes, Advocacy West Wales have also captured the lived experience below:

"The advocate started to help us at a time when we felt we had no voice in the multi-disciplinary team meetings or court even though we had a solicitor. She explained things and processes, what was happening, and helped us make choices. Our aim was always to make sure our son got the best care in his new placement, that he was happy and that we helped in any way we could, as the experts in our son's life, to make the placement work."

The advocate prepared with us before each MDT meeting. She noted the points we wanted to raise and helped us to raise concerns in a clear and non-emotional way that meant professionals listened to us. She helped us with wording requests and emails to make sure our views weren't misinterpreted. She responded quickly to requests for support."

Our son's case continues but the main outcome was that we got agreement to him coming home for Christmas, something that at one point looked impossible. We then got agreement to regular holiday visits. It meant so much to him and to us as a family. She really helped the social worker and other people to work with us and value us as carers."



<https://youtu.be/crH5qhlXgxE>

TGP Cymru Advocacy Service supported by Pembrokeshire County Council is a free service for children and young people aged between 0 – 25 years and are:

- a looked after child,
- a child who is not being looked after but may have needs for care and support;
- a child in respect of which a Special Guardianship Order is in force
- an adopted child or a child who may be adopted
- a Care Leaver.

The service supports our young people by:

- listening to them and their point of view
- informing them of their rights
- helping them to speak out and get their voice heard
- helping them to sort things out with workers/carers
- giving them support and helping them to speak up at meetings
- empowering them to advocate for themselves

Services are promoted to young people by their social workers, carers and support workers as well as over the intranet

3.1.6 Transitions

Moving from Children's Services to Adult Services is referred to as transitions. Transition for children with complex needs and disabilities has presented us with a significant challenge over the last couple of years. As yet, we do not have a dedicated transition team arrangements for these young people to move from children to adult services. We're aware that the transitions process can sometimes cause unnecessary stress and so we are committed to designing a smoother process to support us on this journey, we are working with a leading social care consultancy to review the current arrangements and make recommendations. Having recently received an options paper for the latest iteration of a 0-25 service model, the strategic group is now progressing with several recommendations, including implementing "phase 1", a 0-25 social care function that will better enable people to receive continuity of support when a child turns 18.

3.2 Prevention

3.2.1 Preventions model for 0-25 years

⁹<https://www.tgpcymru.org.uk/what-we-do/mid-and-west-wales-advocacy/>



The Council has established a preventions board with a view to embedding a preventions approach to service delivery. We will be using the eliminate / transformation grant to build capacity to work in a more relational way across children's services. The purpose of the Board is outlined below:

- To organise continuous collaborative learning and to create a space in which leaders and practitioners can cultivate trust, learn together, and hear diverse voices.
- To monitor and provide critical friendship of an agreed plan for operationalising prevention across the County. This plan will consist of an expansion in preventative services, subject to successful bids for funding, and a place-based experiment in operationalising a prevention response.
- To make links when necessary to external organisations and people who have a role to play in supporting the Local Authority to operationalise prevention across the County.

During 2025/26 the following projects will be tracked by the Preventions Board under 3 key themes.

Theme 1 - Parental Support

- Parent & Family Allies Network – Initiative run by Newport Council over last 12-18 months. It is aimed at developing parental advocacy. Research shows the better understanding from parents the better the outcome for the child.
 - Homestart - A few families need more “hand holding” to build on their resilience. Homestart Cymru operates in Pembrokeshire 2 days a week. Looking to extend this offer so more families can benefit from the service.
 - Neurodiversity Parenting – Working with colleagues from other organisations and Carmarthenshire Council to develop a programme of support and training which will aid parents.
-

Theme 2 - Addressing Risky Adolescent Behaviour

- School Nurture Groups - Introduction of nurture group in schools where there are a high number of Additional Learning Needs (ALN) children to provide additional support and short-term interventions.
 - Universal Homelessness Education - We will be running 7 properties with landlords for young people requiring accommodation. Youth workers to provide several hours support per settings. Also support to help young people manage their own tenancies. Support also to help those yp struggling to maintain their own tenancies.
 - Blues & Bouncing Back - Early intervention programmes targeting secondary school. Bouncing back is offered to whole year groups in secondary schools looking at wellbeing, self-esteem, coping mechanisms, understanding feelings, emotional resilience, and knowing when to ask for support. Blues is offered to smaller groups identified by a screening exercise and provides a more intense service.
-

Theme 3 - Children in Care Avoidance

- Edge of Care – provision of service targeted at preventing children coming into care or returning home from care. Offering positive parenting support, mental health support, looking at family’s resilience and wider family networks
- Step Up Step Down - Foster care pilot project with fostering network (first LA in Wales to trial). We recruit existing foster carers to be placed on retainers. Foster carers to support the family on danger on being placed on the register.

3.2.2 Carers



Promotion and increasing the visibility of services and opportunities for unpaid carers of all ages has taken place throughout 2024/25 with every opportunity being taken to raise awareness with the public, authority staff and partner organisations.

Through this continued hard work, the total number of contacts to statutory social services from unpaid Adult Carers reached 218. A total of 475 carers needs assessments were completed for adults who provide unpaid care for someone at home, of which 286 were assessments in the unpaid carers own right.

At the 31st March 2025 there were 203 unpaid adult carers with a support plan in place, this being a significant increase on the 114 individuals in March 2024.

Young and young adult carers contacts received by our commissioned service Action for Children in 2024/25 were 225 as opposed to the 191 received the previous year. These contacts have resulted in 225 assessments being completed, 85 being new referrals to the service.

During the year 844 Carers Recognition Cards were issued to unpaid adult carers. An unpaid carer recognition card is also available for young and young adult carers. In 2024/25, 54 young carer recognition cards were issued.

Throughout the period a total of 47 individual carers grants were awarded to support carers in their caring role. Application requests were varied, grants included funding for washing

machines; tumble driers; fridge freezers; craft items; garden furniture; spa breaks, all of which supported unpaid carers to maintain their caring role.

Events were held during Carers Week and Carers Rights Day to recognise the value that unpaid carers contribute to society and the lives of the people that they care for.

During the year there has been a significant volume of engagement and co-production work in relation to services for unpaid carers both at a regional and local level. This will culminate in the launch of the latest West Wales Unpaid Carers Strategy 2025-30 which not only continues the work and commitment of the previous strategy but also continues to highlight the importance of unpaid carers, the work they carry out and the important role they play in our communities.

The recommissioning of the Unpaid Carers Information & Support service concluded in 2024/25; the service specification had been co-produced and developed with the unpaid carers ensuring their voice at the centre.

Further Engagement work carried out in 2024/25 includes:

- A refreshed unpaid carers strategy partnership board which brings together a broad range of participants including unpaid carers
- County Show – Age friendly Communities and Short Breaks for Carers. This event was an opportunity to have a conversation with Pembrokeshire citizens around these two consultations. The Short Breaks focus opened up conversations which identified people who wouldn't have recognised themselves as a carer and which enabled officers to raise the profile of the services available to support them in their caring role. We continued to use carers rights day and carers week to promote engagement and to promote the support services available.
- Continued to capture ad hoc carer feedback and comments shared by the Project Manager tasked with the development of the regional carers website¹⁰ which was co-produced with carers.
- Capturing feedback on all projects and initiatives in place including Time out for Carers, Passport to Leisure and Money Cares.
- Sharing the umbrella membership of our Employers for Carers (Carers Wales) with local Small Medium Enterprises e.g PAVS has encouraged managers to open a conversation with their staff about any caring responsibilities.
- Work with Shared Lives colleagues and the Carers Service to update the 'Carers page' on the Pembrokeshire Community Hub Screens. These screens can be found in GP surgeries and plans for one in the new Specsavers store in Haverfordwest.

¹⁰<https://carerssupportwestwales.org/>



Feedback highlighted that unpaid carers were struggling to identify and book short breaks opportunities. In response we employed a Short Breaks Coordinator based within Carers Support Pembrokeshire¹¹. The Co-ordinator will support unpaid carers to identify and book short break opportunities. The coordinator will also work to expand the short break offer and discounts attached to the Unpaid Carers Recognition Card.

Feedback also highlighted difficulties in accessing respite beds in residential care. Following a consultation with residential homes agreements were put in place with two homes, which

¹¹<https://ctcww.org.uk/services/carers-support-pembrokeshire/>

enabled unpaid carers to access respite for their cared for person. This offer has been promoted widely via our social care teams; Carers Service and Regional Carers Website. There are plans to roll this out again for 2025/26.

Citizens Advice Pembrokeshire supported us to implement a project called 'Money Cares' to support unpaid carers. This was in response to the struggle carers face with the cost-of-living crisis. The project supported 25 successful carers grant applications and an income gain of £32,538.

The Virtual Reality Short breaks project, supports unpaid carers who might struggle to get out and reach physical wellbeing opportunities enjoy virtual breaks at home using Virtual Reality headsets. This continues to be a popular activity.

Quotes from carers :

"Thank you for coming to our group to talk to us, rather than expect us to come to you!"


"I don't know how to access services"

"We're not on the internet, how are we expected to find information"

"I don't think of myself as a carer!"


"You don't know what you don't know until you don't know it!! 🤔"

"This group is my lifeline"



Do you look after an older person on an unpaid basis? Do you struggle to book a short break/respite in a residential care home? If so, Pembrokeshire County Council have a new arrangement with a number of care homes which might be able to help.

For further details please contact the Carers Support Pembrokeshire by email carerssupportpembs@ctcww.org.uk or telephone 0300 0200 002



3.2.3 Edge of Care / Integrated Family Support Team

Edge of Care Services support families to keep young people safely at home and prevent children and young people from entering the care system. The Edge of Care Project commenced in 2017/18 and with grant funding it has been able to expand to become more effective over time. At the end of the 2024/25 year, the team had 9.8 Full Time Equivalent Employees who work to keep children at home or within their wider family network. Over the last 12 months, caseloads have remained higher impacting on the teams ability to provide more intensive work.

In 2024/25 the service supported 33 more children than the previous year. This is a 55% increase on 2022/23. The additional 33 children remained within the family, returned home or remained in their wider network to the previous year.

In 2024/25, 8 children were prevented from coming into care through utilising Family Networks and a further 20 YPLA (Young People Looked After) were placed within their Family Networks. This prevented 28 foster placements being required when it was too unsafe for a child to live at home.

Of the families asked, 90% reported higher levels of wellbeing at the end of interventions. And 94% rated the interventions provided as 'good' or 'excellent.'

'I have come a long way, which makes me feel good, but I still need to work on my finances and controlling my spending.' (Parent)

'Thank you for all your hard work with this family, thanks to you we have seen some really positive change and the family pulling together to manage any issues themselves.' (Social Worker)

'The support from the team helped as they were really engaging, supportive and the practitioner was consistent and always there for us.' (Special Guardian)

'You've been brilliant for us you've been rock solid. If you wouldn't have been working with us, I wouldn't be living here now.' (Young Person)

'I feel more confident to set boundaries for the children.' (Parent).

"Last year, I wasn't confident in leaving the house alone with the children but now I do it with no problems.'(Parent)

3.2.4 Step-Up Step-Down fostering pilot

The Step-Up Step-Down fostering pilot, is sponsored by The Fostering Network and Welsh Government. The project provides specialist foster carer support and respite for children and mentoring to parents. Creating communities of support involving groups of parents and carers is also facilitated by the project. This model has proved hugely beneficial in Belfast where it has operated for 8 years, and early signs after the first 12 months are excellent in Pembrokeshire. 4 children have returned home from care and 13 others were being supported at the end of the year 2024/25. The project also provides an opportunity to retain carers who might otherwise have exited their caring roles, something that is especially valuable in a time when placement sufficiency and recruitment of carers is such a challenge.

3.2.5 Improved recruitment of foster carers

To ensure children are placed closer to home, with local carers and a reduction in the use of more expensive and more distant external placements. Recruitment of carers has continued to prove challenging in Pembrokeshire with all agreed targets having been missed. The challenge is believed to be influenced by local demographics and the cost of living. From April 2026, we will be implementing a 100% Council Tax discount for in-house foster carers (subject to eligibility).

3.2.6 Supported Employment and the We Can Initiative

The Pembrokeshire Supported Employment Programme (PSEP) aims to :

- Support people to visualise and achieve their life, learning and work aspirations.
- Enable people to be as independent as possible and fulfil their full potential.
- Raise the aspirations of young people who face barriers to see opportunities for their future selves.
- Enable people who want to work to have the right job opportunity with the right support.
- Support employers to support local people and provide workplaces that reflect our community

The person-centred support is provided to people with complex barriers or multiple disabilities to improve their independence through skills development, socialisation, training, work-based day opportunities, work experience, supported volunteering, support to obtain and maintain employment and supported employment.

The focus is on 3 areas of work:

- **Continued Education (“We Can Project”)** - working with people with complex and multiple disabilities who want to continue to learn new skills and grow independence
- **Work based day opportunities** - supporting disabled people in a wide range of work situations to improve confidence, independence, life and work skills
- **Employment Support** - supporting people with a wide range of barriers to employment to gain and retain work. As part of our employability support, we provide direct supported employment through a wide range of income generating “social enterprise” style activities. Social enterprises include Norman Industries, Café No5, Station Shop, Edies Café and Talog Coed. The in house supported employment programme supported 60 employees in 2024/25



We Can Project Case Study

Aim

The We Can project supports people with behaviours that challenge to grow their independence to prevent the need for higher levels of care and support. The project uses a positive behaviour support approach which identifies behaviour triggers and supports actions that remove these, support participants to recognise and adapt their behaviours and give choice and control.

Background

DC joined the programme 2 years ago when it became apparent that college was not the right setting for him. He was initially very lively and had difficulty listening to and following instruction resulting in some up and down behaviours that required 1:1 support.

Moving to Supported Living

Using the PBS approach during DCs transition to supported living, staff were able to build confidence through structured preparatory activities. They offered reassurance promoting a positive approach to reduce anxiety.

Outcome one
Support levels for DC have reduced from 1:1 to group support in most situations.

Outcome two
Frequency and intensity of challenging behaviours have both reduced. DC now has more autonomy over his own behaviour and associated consequences.

Outcome three
DC has moved into support living



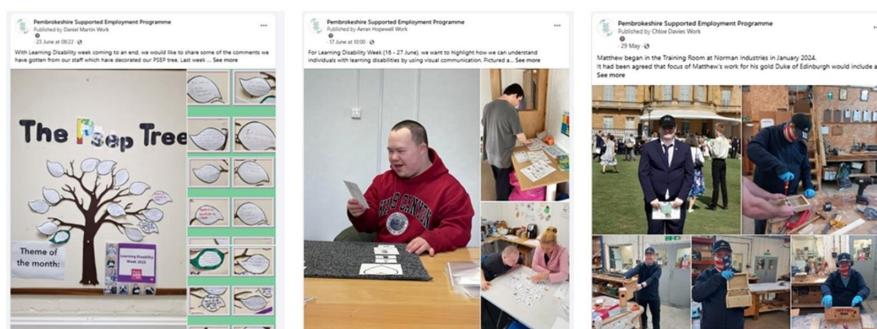
‘I was feeling isolated and demotivated. Norman Industries gives me a place to be around people.’

‘Less like I don’t belong anywhere. People do like me. I am looking for work with confidence. I am able to face the world better. I have purpose. When the down mood comes I have somewhere to go.’

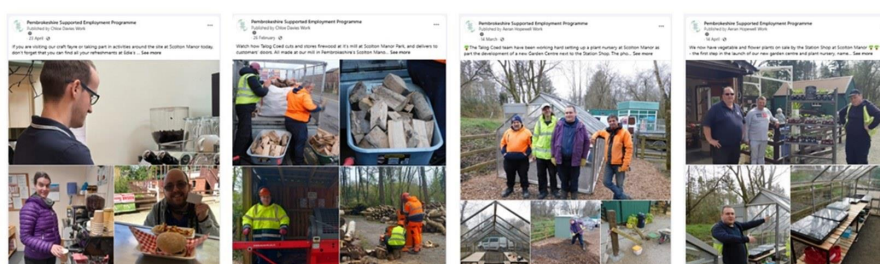
‘I feel useful and valued. I am more confident. I am able to engage with others, even when this cannot be done through the usual verbal means.’

'He is calmer, he is able to interact more with family and friends. Not so worried if a change in routine happens. He is enjoying social interactions. He's engaging with us more. He doesn't have as many meltdowns.'

As we move into 2025 we will assess how we work more closely with partners and other areas of the local authority particularly in relation to the opening of the Pembroke Hwb, South Quay and associated supported living at Fernside.



Our priority for 2025-2026 is to continue to develop links, integration and collaboration with health and other key services that have a shared interest in supporting people to improve their health and wellbeing.



We will continue to implement and develop our Learning Disability Strategy

The new Learning Disability Strategy is in the final stages of completion following extensive engagement and feedback. Engagement with people with lived experience is complete and wider citizen consultation is about to take place. The strategy is now regional and will cover Pembrokeshire, Carmarthenshire and Ceredigion.

3.2.7 Special Guardianship

A new policy, introduced in July 2023, means that no one who is a foster carer will be financially worse off because of the making of an SGO. An income maximisation exercise will be carried out with each applicant to ensure that they are in receipt of all benefits (child benefit being an obvious one) and the local authority will then make up the difference.

for each child who becomes subject to an SGO instead of a care order, we free up valuable social work time as those children will no longer be 'children in care' and will therefore not need the level of visits, plans and reviews required of us under regulations.

This project promises to have the single greatest impact on the number of children in the care of Pembrokeshire County Council. The development will provide a greater number of children with security of home and stability of care, unfettered by statutory intervention and interference.



3.2.8 Parent and Baby Early Intervention Project

In September 2024 we launched our pilot 'Parent and Baby Early Intervention Project' with a small grant-funded staff team. The project is already showing great promise with feedback from parents and professionals suggesting that the intervention has achieved meaningful change and prevented children from entering the child protection and care system. Demand for the service is outstripping the current resource and so we may seek to expand the staffing complement during 2025/26.

3.2.9 Re-design the front-of-house process in Child Care Assessment Team

We will re-design the front of house process in child care following the deployment of additional staffing resources, to allow for better triage of referrals and improve response-times and quality of assessments. This will include using academic colleagues to reflect on systems approach within the team.

Additional funding was provided to the Child Care Assessment Team in July 2024. The impact of the additional employees saw workloads increase as more families were being worked with and lower-level assessments were completed. This resulted in greater complexity of caseloads for qualified social workers, delaying the plan to re-develop the front of house process and structure. The pace of change will be increased in 2025/26 as we implement a new service manager role to develop our prevention and early intervention model.

3.3 Partnership and Integration



3.3.1 Regional Working

We continue to explore and promote opportunities for working together locally and regionally to deliver improved services for customers and deliver savings.

By working closely with a range of health and social care partners, we have been able to deliver more integrated support services. We continue to work closely in partnership with

the Health Board on a range of initiatives and to provide mental health and learning disability services.

We have continued to develop a strong regional partnership with neighbouring authorities and play a major part e.g. hosting posts for the Regional Safeguarding Boards. Our local safeguarding operational group discusses all matters to do with safeguarding in Pembrokeshire. The group meets quarterly with representatives from the Health Board, Police, College, Education, Youth Services and Social Care.

The West Wales Care Partnership is the statutory regional partnership board established under the Social Services and Well-being Act to oversee the transformation and integration of health, social care and well-being services in west Wales. The partnership brings together the three local authorities in West Wales (Carmarthenshire County Council, Ceredigion Council and Pembrokeshire County Council), Hywel Dda University Health Board and representatives of the third and independent sector.

West Wales Regional Partnership Board – Working together to plan and deliver services for adult and children with needs for care and support.¹²



The strength of partnership working across the Pembrokeshire Health and Social Care was acknowledged during the Annual West Wales Regional Partnership Board Award Ceremony¹³, where the Pembrokeshire Team received the award for “Working in Partnership”.

With our partners we have developed a new way of working – adopting a people centred systems thinking and intervention methodology, to transform health and care in Pembrokeshire.

The methods to help people improve and maintain their health and wellbeing include:

¹²<https://wwrpb.org.uk/>

¹³<https://wwrpb.org.uk/wwrpb-conference-awards-2025-summary/>

- A programme of experiential learning, enabling leaders and practitioners to learn about what matters to our residents so to inform process and systems redesign, support by Vanguard.
- Co-development of design principles for how we work.
- A co-designed Strengths Based Collaborative Communications programme delivered by Social Care Wales.
- Creating a network of strengths-based mentors from across the health and care system, to deeply embed the practice. These mentors engage with Senior leaders through whole systems learning sessions to learn and coproduce approaches to improve outcomes.

3.3.2 Strengths Based Collaborative Communication in Partnership with Health

Strengths-based practice in health and social care is an approach that focuses on identifying and building upon the strengths, resources, abilities, and potential of individuals, families, and communities, rather than solely addressing their problems, deficits, or needs. It emphasizes collaboration, empowerment, and a positive outlook on people's capacity to overcome challenges and achieve their goals.

In a context of financial challenges, reflective strengths-based practice enables health and social care professionals to maximize the impact of limited resources, foster resilience, and promote sustainable, person-centred care.

Leaders and operational staff from across Pembrokeshire County Council (PCC), Hywel Dda University Health Board (HDUHB) Pembrokeshire Team and Pembrokeshire Association of Voluntary Services (PAVS), have committed to building sustainable strengths-based practice

Over the last year approximately 150 people have completed the 2-day practitioner collaborative communication training, including colleagues from commissioning who have committed to embedding strengths based reflective practice and shared learning as part of Domiciliary Care Providers Forum.

The lives of 100's of residents are being positively impacted:

- Social Workers utilising the approach to support people to negate the need for care planning and statutory services.
- Support to enable 416 people to remain at home over a 6-month period.
- Acute clinicians working as Trusted Assessors alongside social workers, enhancing capabilities around more complex patient flow responses.

- Over a 6-month period, an ongoing reduction in the number of people waiting to be allocated to a social worker in hospital.

3.3.3 Transformation at the Front door for Adult Social Care

During 2024/25 greater capacity was put into the social work team dealing with enquiries from the adult care 'front door'. The use of the Vanguard methodology has reduced waste and unnecessary referrals within the system ensuring that individuals receive support using a strengths-based approach to create independence. Complex cases are subject to Fishbowl discussions daily drawing on the expertise of adult safeguarding, CAB, PAVs and Health.

A programme of work has been established to review the role of the corporate contact centre and community hub in providing information, advice and assistance and when appropriate taking referrals for statutory services. The programme of work has been branded as the Adult Social Care Front Door and consists of members from PAVS, Health, IT, Contact Centre and Adult Social Care. The working groups will meet regularly during 2025/26 to deliver the objectives as outlined below:

- To develop a clear and efficient process so the people of Pembrokeshire receive appropriate, timely support to their enquires about Adult Social Care
- To minimise hand off between partner agencies and ensuring the Adult Social Care Front Door is located within the appropriate agency
- Utilise a strengths-based approach to improve outcomes for the people of Pembrokeshire
- Support PCC deliver strategic goals in terms of its strengthening communities and prevention agendas.
- Ensure Adult Social Care Front Door process utilises Digital and other technology to drive efficiency and future sustainability.

3.3.4 Strengthening communities

This project consolidates several workstreams designed to mutually support local ambitions to have Active, Connected, Resourceful and Sustainable Communities across Pembrokeshire.

The initiatives comprise a locality Community Hub and team of Community Connectors, a strategy for developing Investment in Community Action, a digital programme to increase digital access and trial VR technology, Dementia Supportive Communities, Community Volunteering, and a social capital outcome measurement approach.

There is a strong ethos of partnership working between PAVS, PCC, Hywel Dda UHB, Public Health Wales, PLANED, and many others borne from the Preventions Board that was established many years ago. This continues through the Healthier Pembrokeshire and Strengthening Communities Strategic and Operational Groups. The strong and constructive approach to partnership working is founded on mutual trust and respect, recognising and valuing the contribution of every partner.

The success of the programme has been underpinned by the active involvement of a wide range of stakeholders, from direct beneficiaries to strategic partners and community enablers. Their contributions have shaped the delivery, direction and ensured that the programme remains responsive and rooted in real community needs.

Our Objectives are listed below:

- Creating community-based pathways for people to access the right support at the right time thereby reducing demand on statutory services.
- Developing collaborative partnerships and infrastructures that encourage community-based solutions.
- Investing in new and existing community-based solutions.
- Using strengths based, person-centred, inclusive approaches that builds on the assets and resources to maximise the potential of resourceful communities.

Pembrokeshire Community Hub

During the six months October 2024 to March 2025 the hub dealt with 2,483 enquiries and held 3 keep well events attended by 99 people. The working group are reviewing the programme of events for next year, learning from low attendance at one or two events, considering the barriers to attendance and how to overcome these. We have installed information touch screens in 11 venues (including 9 GP surgeries). The number of touch screen exposures is 2,502.

Community Connectors

During the same period the number of referrals to the Community Connectors was 628. They supported 133 people with social isolation, 194 people looking for groups and activities and 194 people who wanted to live independently at home (of which 102 were for Children, Families and Young people). 'Support for carers', 'low to moderate mental health issues' and 'finance, benefits and debt advice' are the next three highest reasons for referral into the programme.

“ I held a lovely end of year Christmas party with my weekly Knit and Natter group who were sharing stories about how the group had enhanced their lives. An 86-year-old lady is so glad she came to the first one as she looks forward to it every week now. Also, one of the others had acute anxiety at first and was socially isolated but has plucked up the courage to host her first ever stall at a craft market and says her confidence has never been so high. ”

“ Dave has found the group to be really supportive. He tells me that he likes the atmosphere there and that he is able to chat with old and new friends. He enjoys the quiz too! It can be difficult for him to feel comfortable in new settings but he has really taken to this - thanks very much for putting us in touch with them. ”

“ My husband smiled at the music - he hasn't done that in weeks ”

Other activities and the numbers of people benefitting are listed below:

- 154 digital tablets out on loan (Connect IT scheme)
- 1,667 people supported with digital skills
- 485 digital training sessions held
- 374 Third Sector Health & Wellbeing Network members
- 217 people received Dementia Friends training (since April 2024)
- 72 groups offering dementia and age friendly activities
- 166 people on mailing list for the weekly What's On guide
- 26 people attended Story Gathering training
- 15 stories collected which proceeded to 3 panel discussion to identify learning.

In terms of volunteers for the Full Year 2024/25 we support the following people and activities

- 48 volunteers/potential volunteers supported by the project
- 14 "placed" by the project

- 78 Community Hub Champions recruited
- 50 events attended/organised to promote local volunteer opportunities
- 51 organisations supported to recruit community volunteers
- 29 community listings added to the Community Hub website

3.3.5 The Pembrokeshire Learning Disability Partnership Board

Established over 7 years ago the PLDPB continues to be the catalyst for engagement with and between partners and people with lived experience.

Chair/Co-chair: People with Learning Disability

Vice Chair: Officer of PCC or Hywel Dda Health Board

Membership:

- Pembrokeshire County Council (Including representation from social care, education, housing, service commissioning, carers, direct payments)
- Hywel Dda Health Board
- PAVS
- Pembrokeshire College
- Service Delivery Partners
- Citizen Champions (people with lived experience)
- Carer representatives

Pembroke Hwb, South Quay

Pembroke Hwb that is due for completion in Autumn 2026 is an integrated Health & Social Care Hub. The operational plan will see social care, health, the community hub and other partners use the building to meet people's needs and provide an integrated approach to service delivery. All partners have been involved in the development of the hub which has been informed by population needs, service user needs and the experience of partners.

Regional Employability Pathways

The employability programme continues to work regionally with Ceredigion and Carmarthenshire County Councils delivering LSE, the In-Work Support Service, and the WG RIF funded Pathways to Employment and Positive Behaviour Support projects regionally. We

are working to share best practice with each other to ensure that there is parity for people across borders. Recent visits to see what each service is delivering has been beneficial in sharing best practice, overcoming shared barriers and learning from each other's experience, maximising opportunities to develop our service offer for the benefit of the populations.

The programme is a partnership between the local authorities, not just social care but our regeneration, education and leisure departments, our local health board and key third sector partners. The programme is a key component of our equality action plan, driving an increase in disability employment across the local authority.

Going forward the plan is to continue to expand our supported employment programme so that more people have the opportunity to have paid work if they want it or to have a work-based day opportunity in their county.

Integration with health, housing, youth and other services is key to the development of the new DWP Connect to Work Programme that will start in January 2026. This supported employment programme looks to embed employment specialists within teams ensuring that employment is seen as a health outcome as we know the positive effects the right employment opportunity can bring.

3.4 Wellbeing

3.4.1 Adult Safeguarding Transformation

The adult safeguarding function was realigned to Adult Services following an Improvement check conducted by CIW in April 2024. Underpinned by Vanguard methodology, a review of adult safeguarding practice and performance was undertaken. The findings from which are informing an ambitious programme of development and improvement.

The impact of the initial improvements aligned to the Wales Safeguarding Procedures and regional threshold guidance, managing the 'front door' of the safeguarding service is outline in the table below.

Putting the 'expertise up front' and 'conversation first' approach advocated by the Vanguard method has seen a reduction in inappropriate referrals for adult safeguarding. This has resulted in a significant reduction in Multi Agency Referral Forms (MARFs) that result in no further action, moving from almost 80% in Q2 to just over 30% in Q4. This has led to increased capacity to effectively manage and progress MARFs through to a safeguarding enquiry, ensuring the provision of safeguarding services for adults at risk is timely and proportionate. The feedback on this approach from our partner agencies has been very positive and we are no longer an outlier in terms of our reporting data.

The program of improvement has seen an increase in the number of cases progressing to safeguarding strategy meetings. Meetings enable a multi-agency, collaborative response to safeguarding practice for adults at risk. Giving due regard to the complexity of the situation and considering agreed safeguarding action and outcomes with a coordinated response. Protecting and safeguarding adults at risk from abuse and neglect.

Work is ongoing to redesign the adult safeguarding forms and documentation. This includes Mental Capacity elements and 'what matters' conversations to support person centred, strengths based safeguarding interventions and outcomes for adults at risk. Workforce development has also been a priority with training and support for practitioners during a program of considerable change. Collaborative communication training has been instrumental for practitioners to develop strength-based skills for effective safeguarding practice with a mentoring program now in place, successfully supporting the ongoing development of skilled practitioners to better protect and safeguard adults at risk.

The Adult Safeguarding service has continued to embed the regional Rapid Response Model. This offers support for those networks of people immediately impacted by instances of suspected suicide.

Reconfiguring the safeguarding service was a priority to address the findings of the CIW improvement check, introducing consistency in the application of threshold guidance and effective safeguarding practice.

Priorities for improvement over the coming year:

- The continued development of the adult safeguarding service in line with the agreed reconfiguration to safely manage the increased complexity and demand placed on the service, and ensuring capacity and expertise to effectively fulfil our statutory safeguarding functions for adults at risk via the delivery of high-quality safeguarding practice.
- Pursue the 'Most Significant Change' model as a mechanism for embedding the voices of adults at risk into the ongoing improvement work of the safeguarding service, using stories from those with lived experience.
- Support people to actively manage their well-being and make their own decisions by developing a balanced approach to mental capacity, self-determination, rights and risk in person centred safeguarding.
- Support our work force to continue to develop consistent, high quality safeguarding practice through training and improved supervision due to exposure to high levels of intense emotional information and risk management.
- Further develop our program of Quality Assurance ensuring we effectively measure the implemented improvements.

- Manage the transition of the strategic and operational responsibility for the Section 5 WSP function from the integrated safeguarding service.

3.4.2 Mid and West Wales Regional Safeguarding Board

The Board is comprised of children's services' component entitled CYSUR and the adult's services' equivalent entitled CWMPAS. We are a significant contributor to the work of the Board, alongside our partners from the other Local Authorities in the region (Ceredigion, Carmarthenshire, and Powys), Dyfed-Powys Police, Hywel Dda University Health Board, Probation and Education. We work collaboratively and in partnership with the Board and its partners. This includes regular sharing of information and good practice regarding practice reviews, coordination of National Safeguarding Week themes and communication, and other ad-hoc/bespoke events that are arranged externally.

Cysur | Mid & West Wales Safeguarding Board Safeguarding children & adults¹⁴

3.4.3 Holly House Respite Home for Children with a Disability

Holly House provides respite support for people caring for children with Disabilities. Whilst we have not returned to full capacity being limited to 2 children at any one time. – the service being provided is of a very high quality and is one that is hugely valued amongst those that use it. The CIW inspection undertaken in January 2024 noted that "People are very happy with the service they receive. They are supported by a friendly and caring staff team, who they have built up positive relationships with.

3.4.4 West Lodge Children's Residential Home

West Lodge is Pembrokeshire's Councils first full-time residential children's home. It was opened in September 2024 after 3 years of work and preparation. The facility supports the Welsh Government's 'Elimination of Profit' agenda, which seeks to avoid company's profiteering from providing accommodation for Children Who are Looked After. We hope to open several children's residential homes in the coming years, providing us with resilience in a volatile market and the ability to keep Pembrokeshire children closer to home. As of April 2025, West Lodge facility was looking after 3 children with 1 vacancy. Initially recruitment issues slowed the speed with which we have been able to admit children. However, this has

¹⁴<https://cysur.wales/>

enabled a new staffing group and operation to become established and the team to bond and build confidence in their new roles. Initial feedback is very positive.

3.4.5 Children's Commissioning Team

The dedicated children's commissioning team have continued to evidence their immense worth to the service on a number of fronts. They have continued to support in analysing and better understanding our market need for placements for children and are a great support to our efforts to prepare for the full implementation of the eliminate agenda for Welsh Government. They have developed and continue to maintain excellent relationships with local residential care providers such that we have been able to increase the proportion of our children cared for in a residential placement within Pembrokeshire. They have continued to challenge providers on costs schedules and quality of care, carrying out 'inspections' on quality at various homes. And the team in carrying out due-diligence prior to identifying and matching placements for children, ensure that the best mix of quality and cost is achieved. They have continued to post significant savings against projected costs for the year within the residential budget.

3.4.6 Modernisation of Day Services across Pembrokeshire

We have implemented a 'DO IT' initiative for people wishing to access day opportunities. It is a flexible alternative to attending traditional day centres. People are provided with a direct payment and support so that they can find an activity or service which meets their requirements. Following a successful pilot in South Pembrokeshire the 'DoIt' scheme will be extended to the whole of the County during 2025/26 with more providers being encouraged to participate.

During 2024/25 the Day Services changed the way they provided services. The changes meant that people had greater access to community services and were less building based. Greater access to community resources has led to people gaining greater confidence and asking what next am able to achieve? This approach is in line with Welsh Government strategy on inclusion and independent living. The service provided at Bro Preseli has developed greater links with local social enterprise partners and has gained momentum with such a fantastic community resource the centre can open for longer and over weekend periods attempting to diminish social isolation.

3.4.7 Shared Lives

In 2024/25 there was further positive direction of our Shared Lives Service, which continues to receive strong political and regional support. We have still more work to do however if we are to give more people the opportunity to benefit from this unique model of care and support. The success of the model relies on ongoing marketing and promotion which we continue to do among our teams.

3.4.8 Recommissioning of Supported Living Services

Recommissioned Supported Living Services both community and shared living. Developed unit costing model. HSG incorporated into the recommissioning process. Focus now on implementation and ongoing DPS framework.

Evidence: Number of new supported accommodation units brought on-line. New framework in place – new providers available with whom to contract.

3.4.9 Recommissioned Domiciliary Care

We recommissioned domiciliary care on an outcomes-based model and developed a unit cost model with the sector to ensure transparency of cost. Models reflect urban, semi urban and rural rates. Focus on implementation, added value and providers working more collaboratively. We have also seen a significant & positive reduction in waiting lists.

3.5 Planning for 2025/26

As well as continuing the work on the initiatives outlined in this section, during 2025/26 we plan to undertake the following new projects and activities:

- We will use Welsh Government Grant funding to increase the number of Adult Social workers to reduce the time people wait for assessments of need and mental capacity assessments.
- We will reduce delays in discharge from hospital into Reablement and Domiciliary Care services. We are planning to develop an intake model for Community Reablement to expand the scope of the existing service.
- We will review our in-house domiciliary care provision with a view to expanding and increasing our share of the Pembrokeshire market.

- We will restructure our children's front of house services into a 'preventions and child protection' service area, alongside implementation of the 0-25 preventions board to coordinate wider preventions approach across the service.
- We will develop a Transitions Service with the implementation of a 0-25 through age service. The children with disabilities team will be expanded to include post-transition into adult services to the age of 25.
- We will expand our offer to in-house foster carers. This offer will include council tax exemption pilot (2 yrs) & increased fostering allowances pilot (2 yrs). Through this offer we aim to improve the recruitment and retention of foster carers.
- We will exploit digital enablers and artificial intelligence to increase effectiveness and efficiency in Adult Social Care.
- We will develop a model of day opportunities which is aligned to supported employment and promoting independence.

4. Other Information

4.1 *Care Inspectorate Wales*

4.1.1 *Adult Services*

CIW Improvement check April 2024

(Local authority improvement check letter: Pembrokeshire County Council adult services | Care Inspectorate Wales¹⁵)

The main concerns expressed by CIW, at that time, was timeliness of assessments and reviews, sufficiency of staffing and consistency of practice in safeguarding and a perceived disconnect between practitioners and leaders.

To deal with the recommendations identified in the Improvement Check an Improvement Board chaired by the Chief Executive was established. The Board was stood down in June 2025 have seen significant improvements in the following areas:

- Reduced our review backlog from 1197 in April 2024 to less than 300 by May 2025.

¹⁵<https://www.careinspectorate.wales/local-authority-improvement-check-letter-pembrokeshire-county-council-adult-services>

- Steadily reduced our assessment backlog down to its lowest level. In June 2025 the number of people waiting for an assessment was 192 falling from 289 at the end of March 2025.
- We employed a Service Manager dedicated to Adult Safeguarding and brought the team under adult services line management. After implementing the improvements our adult safeguarding referral rates are aligned to the average for the rest of Wales.
- We have established a practitioner forum for adult care employees which is improving engagement with leadership.

4.1.2 Children's Services

CIW carried out a **biannual performance review** with children's services in October 2024. These reviews involve comprehensive updates being provided by the head of children's services, that cover service development, critical issues, workforce issues and demand pressures.

A Joint Investigation of Child Protection Arrangements (JICPA) was undertaken in March 2025. This wide-ranging inspection consisted of inspectorates for police, health, education and social care examining child protection and safeguarding practice for children aged 0-11yrs. The inspection identified strong and positive working relationships across organisational boundaries, areas of very good practice and areas for further development and improvement. All areas that were identified for improvement are in pre-existing action plans for the service and its partners. The head of children's services has lead responsibility for developing the multi-agency action plan which will be monitored via the Local Operational Safeguarding Group (LOG).

The full report can be found on Joint Inspectorate Review of Child Protection Arrangements (JICPA): Pembrokeshire 2025 | Care Inspectorate Wales¹⁶

Operating Without Registration

As with previous years, there are still occasions when due to a lack of suitable placements, we must provide care and support to children in unregulated provision. This means that those children are not afforded the assurances that regulated provision has; have less stable staffing arrangements to support them; and less certain outcomes as a result. It also

¹⁶<https://www.careinspectorate.wales/joint-inspectorate-review-child-protection-arrangements-jicpa-pembrokeshire-2025>

provides our staff with additional operational responsibilities and pressures, as well as being a costly alternative when compared to most regulated settings.

4.2 Complaints and representations

Social Services Complaints 2024/25 - STAGE 1			
	No. of complaints received	No. of complaints upheld	% of complaints upheld
Adult Social Care	53	25	47.17%
Children's Services	38	5	13.16%
Commissioning	0	-	-
Business Unit	13	2	15.38%
Total	104	32	30.77%
Social Services Complaints 2024/25 - STAGE 2			
	No. of complaints received	No. of complaints upheld	% of complaints upheld
Adult Social Care	1	0	0.00%
Children's Services	3	0	0.00%
Commissioning	0	-	-
Business Unit	0	-	-
Total	4	0	0.00%

Social Services Complaints 2024/25 - Timescales for responding to Stage 1 + 2 Complaints			
	No. of complaints	No. of complaints responded to within timescale	% of complaints closed within timescales
Adult Social Care	54	45	83.33%
Children's Services	41	32	78.05%
Commissioning	0	-	-
Business Unit	13	12	92.31%
Total	104	32	30.77%

Social Services Complaints 2024/25 – Public Services Ombudsman for Wales		
Outcomes	Adult Social Care	Children's Services
No Investigation: Premature - referred back to LA to follow complaints policy	2	2
No Investigation: Early Resolution / Voluntary Solution	1	1
No Investigation: PCC actions appropriate	1	-
No Investigation: Legal remedy available	-	1
No Investigation: Outside of Ombudsman's jurisdiction	-	4
No Investigation: Substantially out of time	-	1
Total	4	9

The social care service received a total of 86 compliments during 2024/25:-

- 55 for Adult Services
- 25 for Children's Services
- 6 others

“ Thank you so much for all you have done and are doing to show such care to grandma. We do appreciate it is not an easy job you do but you do it with smiles and a cheerful spirit. Thank you also for helping to get grandma on zoom every week for so long too. Thank you very much. ”

“ I would like to express my gratitude to C for the support and assistance she provided during a very challenging and emotional time with my mum. Navigating the process of placing a parent in a care home can be incredibly daunting, especially when you have no prior experience or understanding of how it all works. However, C made this difficult journey much more manageable. ... ”

“ I just wanted to share with you how thankful I am to you for your help with moving the bed for J. Mum is very grateful for your help in coordinating the move, taking the bed apart, moving it and putting it back together again. Also, thank you for delivering the chair at the same time and putting it together. Your help made the move that bit smoother for the family. ”

“ Northgate is brilliant, I wouldn't be sat here now if it wasn't for them. I need that regimented support. If I was left to my own devices, I would have been back drinking ages ago. ”

“ I would just like to say a massive thank you to each and everyone of you for getting me to where I am today. Your help has been gratefully received, from making my own sandwich and cuppa to cooking a meal you have all given 'so much' help and advice. The exercises have helped my legs so so much and with your help I can now go down and back up the stairs, something a few months ago I would never of imagined would happen. ”

“ The Gypsy/traveller community are extremely grateful for the help and support they have received from Occupational Therapy team at PCC as our input has made a significant difference to their quality of life. ”

“ I'm truly inspired by the incredible care and dedication you've shown, especially with SK at CPH. Your ability to connect with S and offer such deep understanding and empathy has made a world of difference in their life. You've gone far beyond just your role taking extra time to listen, support, and be there for S when he needed it most. Your kind, thoughtful communication and your genuine concern for his well-being have provided him with not just guidance but real comfort and hope. ”

“ A has been a brilliant support to both me and the family. It has been a difficult piece of work and A has built fantastic relationships with the children and the carers. A has done a lovely words and pictures direct work intervention with P which has helped him to understand why he is not living at home and understand his experiences. ”

“ Parents gave feedback that E made them feel really comfortable during the recent section 47 that E attended at hospital, and helped make a scary experience a lot less scary. ”

4.3 Referencing other sources of information

The Social Services and Well-being (Wales) Act came into force on 6 April 2016.

Welsh Government site: The Social Services and Well-being Act

- <https://gov.wales/sites/default/files/publications/2019-05/social-services-and-well-being-wales-act-2014-the-essentials.pdf>

Codes of practice and statutory guidance for the Social Services and Well-being Act

- <https://www.gov.wales/social-services-codes-practice>

Pembrokeshire County Council website for Social Care and Wellbeing

- Social Services and Wellbeing - Pembrokeshire County Council¹⁷

Well-being of Future Generations (Wales) Act 2015

- <https://futuregenerations.wales/about-us/future-generations-act/>

Pembrokeshire Public Services Board. Well-being Assessment for Pembrokeshire

- <https://www.pembrokeshire.gov.uk/public-services-board/well-being-assessment>

Pembrokeshire Public Services Board. Well-being Plan for Pembrokeshire

- <https://www.pembrokeshire.gov.uk/public-services-board/well-being-plan>

Pembrokeshire County Council Improvement Planning

- <https://www.pembrokeshire.gov.uk/performance-and-statistics/improvement-planning>

Social Care Wales

- <https://socialcare.wales/>

Legislation in Wales, information and learning hub:

- <https://socialcare.wales/hub/home>

Social Care Wales, Code of practice:

- <https://socialcare.wales/cms-assets/documents/Code-Print-Friendly-English.pdf>

Care Inspectorate Wales. Regulators' Inspection Reports

- <https://careinspectorate.wales/?lang=en>

Population Needs Assessment

- <https://www.wwcp-data.org.uk/Data/Sites/1/media/population-needs-assessment-revision-v2-final-v3-accessible-final.pdf>

Pembrokeshire Association of Voluntary Services (PAVS)

- <http://www.pavs.org.uk/>

Hywel Dda University Health Board

- <https://hduhb.nhs.wales/>

¹⁷<https://www.pembrokeshire.gov.uk/social-services-and-wellbeing>

SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Report of: **Head of Adult Services**

Date: **14 November 2025**

Cabinet Portfolio: **Adult Social Care**

Update Care Inspectorate Wales Report

Members are being asked to scrutinise and have oversight of the following:

- **The Care Inspectorate Wales (CIW) improvement check**

Purpose of this report

To provide the Social Care Overview and Scrutiny Committee with a copy of the follow up Care Inspectorate Wales (CIW) improvement check undertaken between 8 and 9 July 2025. The improvement check focused on the areas identified for improvement during their visit in April 2024 and can be found at Appendix A

The overall response from Care Inspectorate Wales confirms improvement in all areas with significant work undertaken across the whole adult service.

Appendix B provides an action plan which pulls together areas for further work.

The Recommendations are:

- That the Committee is asked to acknowledge the improvement check report from CIW
- That the Committee requests a further update relating to the action plan in 6 months' time.

Appendices:

Appendix A – Local Authority Improvement Check Report

Appendix B - Action Plan for outstanding improvements

Mr Michael Gray
Statutory Director of Social Services
Pembrokeshire County Council

Date: 09 September 2025

Dear Director,

Improvement Check visit to Pembrokeshire County Council's Adult Services

1. Introduction

This letter sets out the findings from Care Inspectorate Wales' Improvement Check of Pembrokeshire County Council (PCC) adult services, carried out between 8 and 9 July 2025. This visit followed an earlier Improvement Check in April 2024.

We carry out inspection activity in accordance with the Social Services and Well-being (Wales) Act 2014 (the 2014 Act); key lines of enquiry; and the quality standards in the *Code of Practice in relation to the performance and improvement of social services in Wales*. This helps us determine the effectiveness of local authorities in supporting, measuring and sustaining improvements for people and in services.

The Improvement Check focused on the progress made in the following areas identified for improvements during our Improvement Check in April 2024:

Principle	Areas of improvement identified from PEI in April 2024	Progress identified at improvement check
People	As part of their restructure work the local authority must ensure there are explicit measures in place to address the delay in undertaking assessments and reviews of care and support plans.	Improvements made and must be sustained
	The local authority should ensure reliable performance information is available.	Improvements made and must be sustained

	<p>The local authority must ensure assessments consistently address the needs of carers.</p> <p>The local authority must ensure they continue to improve how it commissions and provides support to both the cared for person and informal carers.</p> <p>The local authority must continue to improve commissioning of services to ensure its ability to support people living in rural communities in the county.</p> <p>The local authority must ensure the plans related to the first contact team are implemented and monitored in a timely manner.</p> <p>The local authority should ensure it promotes a culture of regular engagement with staff, providing opportunities for people's voices to be heard.</p> <p>The local authority must continue to monitor and make improvement in relation to promoting the Welsh language active offer and working alongside commissioned services to ensure that these services are in turn promoting the Welsh Language Active Offer.</p>	<p>Some improvements made – further action is required</p> <p>Improvements made and must be sustained</p> <p>Some improvements made – further action is required</p> <p>Some improvements made – further action is required</p> <p>Some improvements made – further action is required</p> <p>Some improvements made – further action is required</p>
Prevention	Plans to address timeliness of statutory responses are developing, but the local authority must ensure the plans explicitly address how delay will be addressed.	Improvements made and must be sustained

	<p>The local authority should consider the benefits of refreshing the delivery of the quality assurance strategy so that it is inclusive, ensuring all staff have a role in quality assurance. The delivery of the strategy should focus on how wider learning across the directorate is cascaded.</p> <p>The local authority must reassure itself assessments are being undertaken appropriately, and people receive a timely service.</p>	<p>Some improvements made – further action is required</p> <p>Improvements made and must be sustained</p>
Well-being	<p>The local authority must ensure adequate resources are available to respond and manage adult safeguarding enquires.</p>	<p>Some improvements made – further action is required</p>
Partnership	<p>Social care and health board managers should continue to work collaboratively with a focus on the person's health and well-being by delivering services together.</p> <p>Social care practitioners do not receive regular feedback in relation to unsafe hospital discharge notifications submitted to hospitals. This is a missed opportunity to improve communication and working partnerships and should be addressed by social care and health board managers.</p>	<p>Improvements made and must be sustained</p> <p>Some improvements made – further action is required</p>

2. Glossary of Terminology and Quantity Definitions

A glossary of terminology is contained in Appendix 1 and a table of quantity definitions in Appendix 2.

3. Summary

- 3.1 There has been progress made across all the areas of improvement identified in April 2024. Staff have a clearer understanding of the strategic direction led by the Director of Social Services and are more positive about the direction of travel for the local authority. Whilst structural changes across the service appear to be positive there remain some areas of fragility and more work is required to ensure staff are communicated with and engaged in service changes. Manageable workload and well-being of staff are ongoing challenges.
- 3.2 Whilst staff sufficiency is improved and there are less vacancies, recruitment continues to be a challenge in Pembrokeshire due to several factors, including affordable local accommodation and a competitive salary market.
- 3.3 Safeguarding practice in the local authority has improved. Positive leadership is ensuring the staff in the adult safeguarding team are equipped to undertake the duties that are prescribed by legislation. Records of outcomes for people who are subject to adult safeguarding activity are mostly clear.
- 3.4 The local authority responds to immediate safeguarding concerns. Partners understand their duty to report, and there are timely and appropriate adult at risk reports being made to the safeguarding team.
- 3.5 Partnership with the third sector is an asset in Pembrokeshire, with the unique strengths of different services helping to improve outcomes for people. Third sector organisations have strong connections with local communities and play a vital role in helping people access community-based support and identifying individuals who might benefit from social care statutory services.
- 3.6 Good multi-agency practice is evident operationally, with examples of positive collaboration between key agencies such as healthcare colleagues and the police.
- 3.7 Significant progress has been made to reduce delays undertaking assessments and reviews of peoples' care and support. Re-alignment of staff time to focus on this practice area has been the main factor in this improvement. Managers

are confident improvements can be maintained.

4. Key findings and evidence

Key findings and some examples of evidence are presented below in line with the four principles of the 2014 Act.

People

Strengths

- 4.1 There is improved collaboration between practitioners and management. Re-established practitioner and manager forums have contributed to this improvement. The Chief Executive and Director of Social Services have shadowed teams. Collaborative communication training has been delivered across staff and partner groups, and this is contributing to a shared understanding and model of working with people.
- 4.2 The local authority has a resilient workforce operating to consistently high workload demands. They are dedicated to supporting people, with many going over and above normal work expectations to improve outcomes. Staff receive good support from their managers, including formal and informal supervision opportunities.
- 4.3 Most social care records demonstrate a focus on the strengths and capabilities of the person and presenting need, with a clear link between information gathered and how care and support can be delivered to achieve personal outcomes.
- 4.4 The quality of assessments and care and support plans is good. Assessment and review processes routinely capture people's preferences in 'What Matters' conversations, with clarity evident in understanding context and life for that person. Many review records include a 'pen picture' of key elements of the person's life, including social and emotional aspects as well as challenges faced. This is an example of **positive practice** as understanding personal context in adult social care assessments is essential to ensure care and support is adapted to the unique needs, preferences, and life experiences of individuals.
- 4.5 Practitioners consider mental capacity and advocacy when supporting people. The local authority report progress in offering Welsh language induction and training opportunities across different proficiency levels and there has been successful appointments of Welsh speaking candidates in key posts. Most records record language preference and mental capacity.

- 4.6 The local authority demonstrates a strong commitment to promoting choice and control through an array of care and support options. This includes the effective use of traditional direct care services such as domiciliary support and the consistent promotion of alternative services such as personal assistants funded via direct payments, and micro enterprises. This provides a greater level of choice, control and flexibility in how peoples' care needs are met.
- 4.7 Most people can access direct payments and personal assistants. There are structures in place to support the direct payments service and personal assistants, supporting and enabling more autonomy and personalised care arrangements and to balance the demand on direct care provision.
- 4.8 Managers routinely sign off assessments, which is important for ensuring quality assurance in relation to people's well-being, safety, and professional development.

Areas for Improvement

- 4.9 Morale is being impacted for a few staff as they strive to ensure capacity meets demand. A few staff also said they would like to see better dialogue between managers allocating work and practitioners to improve communication about individual circumstances and workload capacity.
- 4.10 Supporting the well-being of adult social care staff working under busy and often demanding conditions is essential to maintaining a compassionate, effective care system. **The local authority should focus on providing clear communication in workload allocation, and workloads being manageable to help reduce stress and prevent occupational burnout, ultimately ensuring the well-being of both staff and the people they support.**
- 4.11 Many assessments are undertaken as joint assessments, which focus on the cared for person and informal carer. In these records, consideration to informal support has some focus, but detail about the needs of carers and understanding their role, could be improved with a more in-depth consideration of the carer role.
- 4.12 It is essential for social care practitioners to understand the demands placed on informal carers, as they often provide extensive physical, emotional, and practical support. Best practice examples highlight how in addressing the well-being of carers themselves, more stable and consistent care can be available to those they support, helping to maintain independence and quality of life within the community. The local authority has some recognition of this and plans to introduce carers indices which can be used to inform assessments.

The local authority must ensure assessments focus fully on ascertaining an understanding of the role of informal carers and how this links to care and support being provided.

- 4.13 A few assessment and review records document contingency plans, but these are often limited in the information recorded and inconsistent in completion. This means potential changes to eligible needs are not well considered or anticipated. **Leaders and practitioners should focus on improving the quality of care and support contingency plans.**
- 4.14 There is continued commitment to offering people a choice of receiving services in Welsh, but we saw an example where a person's language preference was not met. Communicating with people in the language of their choice promotes inclusion and equity which are core principles in social care. **The local authority must continue to monitor and make improvement in relation to promoting the Welsh language active offer.**
- 4.15 Engaging staff in social care is crucial for effective leadership, as it fosters a supportive and collaborative environment that directly impacts the quality of care provided. Whilst many staff acknowledge an overall improvement in the engagement between senior managers and practitioners, a few staff said some managers do not fully understand or acknowledge the demand of their roles nor give time to hear staff views. **Leaders should further enhance the approach to communication and collaboration with staff.**

Prevention

Strengths

- 4.16 The local authority's commitment to prevention is supported by several third-sector organisations. The Pembrokeshire Association of Voluntary Services (PAVS) supports the third sector in Pembrokeshire. They play a pivotal role in supporting, developing, and representing voluntary organisations, volunteers, and communities. They contribute to **positive practice** in the provision of a broad suite of prevention services and enhance the local authority's preventative approach.
- 4.17 Timeliness of the review of people's care and support plans has been a longstanding challenge for the local authority, but significant progress has been made over the last year through data cleansing (ensuring people's information on the IT system is correct) and a proactive approach to addressing delays. Ultimately, timely and responsive reviews help ensure care remains responsive, safe, and aligned with a person's current goals and quality of life.

- 4.18 The local authority has introduced the trusted assessor role for reviews and is working with providers to develop a revised model of review. They are also in the process of developing link workers to care homes and care providers to ensure efficient and timely changes to care and support plans. Ahead, it is important that Part 4 of the 2014 Act continues to be adhered to, this requires the review of care and support records to monitor progress and changes and to consider the extent to which the delivery of the plan is meeting assessed needs and how it has helped the individual or family to achieve their outcomes.
- 4.19 Plans regarding the implementation of the new adult social care 'front door' service are progressing, with aspirations to deliver significant change in the way services will be delivered in the future. Trial days have been held with key partner agencies, including the PAVS hub, with the aim of developing a single point of access. Practitioner and partner feedback regarding the days has been positive.
- 4.20 Managers in the intake team (providing a first point of contact, offering information, advice, and assistance to help people access appropriate support and services) and the adult community team (primarily supporting the delivery of care and support plans) have oversight of referrals, waiting lists and allocations.
- 4.21 Good quality assurance of care and support records is evident via line managers, with consistent authorisation processes and opportunities for feedback at supervision. Staff forums have been reinstated across the service, providing opportunity for reflection and shared learning.

Areas for Improvement

- 4.22 In 2024 CIW noted the local authority should consider the benefits of refreshing the delivery of their quality assurance strategy so that it is inclusive, ensuring all staff have a role in quality assurance. This has not progressed sufficiently, and protected time to undertake qualitative audits for example, has not been adequately prioritised. This means opportunity for reflection on practice themes and wider learning is not fully taken up. **The local authority should ensure both a clear programme of audits is agreed and implemented, and a process of disseminating learning established.**

Well-being

Strengths

- 4.23 There is a collaborative focus on supporting people in their own homes, with best practice examples of plans highlighting a range of care and support accessed via statutory and third sector services, underpinned by proportionate assessments.

- 4.24 An example of **positive practice** is the way records connect the important detail about personal outcomes to the practical support often provided by care workers. There is detail in care and support plans, including the breakdown of the personal care required to support and maintain people's independence.
- 4.25 There has been improvement in the equity of services available across the county, including within rural areas. Waiting lists for domiciliary support services are lower and consistent utilisation of personal assistants via direct payments and access to micro enterprises is supplementing the variety of support services available to people.
- 4.26 The local authority routinely responds to the reporter about the outcome of a duty to report submission and the conclusion of adult safeguarding enquiries. This is important in terms of partner organisations being aware of actions taken to safeguard people, but also because this provides opportunity to promote a shared understanding about decision making and rationale. This is an example of **positive practice**.
- 4.27 There has been significant progress in records related to adult safeguarding activity. Practitioners are evaluating information gathered in line with section 126 of the 2014 Act, which outlines the duty of local authorities to investigate situations where they suspect an adult is at risk of abuse or neglect. Many records demonstrate analytical insight, evaluation of safety and rationale to decision making is clear.
- 4.28 Best practice examples involve a person-centred, proportionate approach that puts the adult's wellbeing, views, and desired outcomes at the heart of the process. Practitioners balance risk with respect for autonomy and adopt an approach that is least restrictive while upholding the adult's rights and dignity.
- 4.29 Multi-agency collaboration is good, with clear communication, appropriate information sharing, and a focus and balance on prevention and protection. There is good multi-agency attendance and participation in strategy meetings arranged under the Wales Safeguarding Procedures.
- 4.30 There is acknowledgement by managers that the adult safeguarding team requires further development. Leaders are recruiting to boost team compliments, which will be important to achieve further improvements in the quality of practice.

Areas for Improvement

- 4.31 A new formal process has been introduced to investigate and communicate the outcomes of unsafe hospital discharge notifications. This involves Datix forms

being submitted and formally responded to by healthcare staff. A Datix form refers to an online incident reporting system used by health boards to record and manage patient safety incidents, near misses, and risks. The system is used to facilitate learning from these events to improve patient care and minimise future occurrences. Some social care practitioners, however, report they are not consistently receiving regular feedback in relation to unsafe hospital discharge notifications. We were told all responses via Datix are now channelled through the safeguarding team and there is commitment to ensure that these are forwarded across adult services teams. **The local authority and health board should ensure social care staff who submit a notification are informed of the outcome and learning identified.**

Partnerships

Strengths

- 4.32 The local authority is committed to fostering collaborative partnerships with third-sector organisations. Considerable efforts have been made to utilise the services provided by the third sector to provide early help and preventative support with an understanding of local needs and providing flexible and innovative solutions. This is an example of **positive practice**.
- 4.33 Key statutory partners such as police and health colleagues report positive working relationships with adult social care counterparts at operational and strategic levels. It is reassuring communication across adult safeguarding activity is fluent, with prompt responses evident in inter-agency communication.
- 4.34 Strengths-based collaborative communication reflective sessions and 'fishbowl' forums include partner organisations. These systems provide opportunity for multi-disciplinary conversations to address a person's unique set of circumstances. Shared understanding and collaboration across agencies, including the third sector, to resolve challenges and dilemmas was evident in the forum we observed. This **positive practice** has a focus on maximising autonomy and independence for people as well as identifying and taking action to minimise risk. When professionals from different agencies such as healthcare and housing work closer together it reduces duplication and promotes timely interventions.

Areas for Improvement

No areas for improvement under this principle.

5. Next steps

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

6. Methodology

Fieldwork

- Most inspection evidence was gathered by reviewing the experiences of 34 people through review and tracking of their social care records. We reviewed 30 social care records and tracked 4.
- Tracking a person's social care record includes having conversations with the person in receipt of social care services, their family or carers, key worker, the key worker's manager, and where appropriate, other professionals involved.
- We engaged, through interviews, with 4 people receiving services and/or their unpaid carer and 12 people responded to our survey.
- We engaged, through interviews and focus groups, with 34 local authority employees, this included social workers and team managers.
- We reviewed supporting documentation sent to CIW for the purpose of the improvement check.
- We observed a 'fishbowl' forum
- We administered surveys to local authority social services staff, stakeholders and people.

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

7. Welsh Language

CIW is committed to providing an active offer of the Welsh language during its activity with local authorities. The active offer was not required on this occasion. This is because the local authority informed us people taking part did not wish to contribute to this improvement check in Welsh.

8. Acknowledgements

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

Yours Sincerely,

A handwritten signature in black ink, appearing to read 'Lou Bushell-Bauers', with a stylized, cursive script.

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

9. Glossary

Appendix 1

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

	with them and their family, friends and carers so their care and support is the best it can be.
Multi-Agency working	A principle of the 2014 Act which aims to strengthen joint working between care and support organisations to make sure the right types of support and services are available in local communities to meet people's needs. The summation of the Act states that there is a requirement for co-operation and partnership by public authorities.
What matters	'What Matters' conversations are a way for professionals to understand people's situation, their current well-being, and what can be done to support them. It is an equal conversation and is important to help ensure the voice of the individual or carer is heard and 'what matters' to them

Appendix 2

Quantity Definitions Table

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

Date of Plan / Report	Type Of Action	Name of Plan / Report	Key Finding Ref.	Key Finding	Key Recommendation	Action Ref.	Action	Timescale	Status	Responsible	Evidence	2025-2026 Updates	2024-2025 Update Summary
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.01	PEOPLE - Delays in assessments and review of people's care and support plans are a persistent concern. Some referrals screened as high priority do not receive an assessment for several months. There are examples when social care intervention is delayed and as demand on informal carers increases, the cared for person's situation can break down.	As part of their restructure work the local authority must ensure there are explicit measures in place to address the delay in undertaking assessments and reviews of care and support plans.	CIW3.24.01			Complete	Mel Laidler	1. Pembrokeshire Way Report 2. Performance Scorecards 3. Reviews Analysis 4. AST action plan.	[29/10/25] Action taken has resulted in improved performance and further improvement is monitored through weekly performance scorecards, team meetings and SMT meetings and individual supervision as applicable.	Implementation of the new Adult Social Care front door service commenced in June 2024. Should provide greater assessment capacity at the front door, ensuring timely and greater access to adult social care. The team had Vanguard traing which should improve assessment times and reduce waiting list and times. Direct access telephone capability is planned to reduce unnecessary hand offs or 3rd party involvement. Development of single point of access is underway and includes Pembrokeshire Association of Voluntary Services hub. Additional capacity will be secured to address the outstanding assessments and reviews. Community assessment opportunities will continue across the whole of Pembrokeshire. Completion of outstanding reviews by additional staff.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.02	PEOPLE - There are integrity issues with some performance data which makes quantifying an accurate account of the position impossible at the time of the inspection.	The local authority should ensure reliable performance information is available.	CIW3.24.02			Transferred to latest relevant recommendation and action.	Jean Davies		[29/10/25]Action for this recommendation will now pass to the relevant recommendation in the CIW Improvement Check report of September 2025 and related action - CIW7.25.06. Data cleansing around reviews. Additional training given to staff. New system changes to avoid duplication. Exception reporting identified those with more than one review. Development of standard exception reports for QA purposes in progress and will be produced as per agreed schedule.	Assessment data is currently being reviewed and cleansed by the end of quarter 1 this information will be complete.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.03	PEOPLE - Explicit opportunities to understand the needs of carers through an assessment (whether dedicated or joint with the cared for person) vary in practice. There are examples of positive practice which clearly articulate the carer's position and views and how varied forms of informal or formal support can help.	The local authority must ensure assessments consistently address the needs of carers.	CIW3.24.03	Carers' Indices - Sallie to send form over	1-Apr	Progressing well	Mel Laidler		[29/10/25] Planning to implement Carers' Indices. Staff training has been undertaken to highlight the importance of documenting correctly any plans for the carer or where they may be joint. Unpaid carers champion has a standing invitation to practitioner forum and peer review. This reminds staff to address carers needs and signpost accordingly. Permission to use carers indices which are used to inform assessments. This is being taken to 50+ Forum for feedback in July as part of the consultation.	One of the processes that has been extremely sucessful in understanding the needs of carers has been the peer review. The 3rd sector have been instrumental in ensuring that carers needs are identified. At the SMT carer needs will form part of the ongoing agenda and a dedicated full session will be developed with external carer partners invited to chair.Ensure that data is visible on the SMT agenda and under performance is addressed monthly.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.04	PEOPLE - Challenges sourcing services, such as care at home and emergency respite, linked with limited capacity, adds pressure on informal carers and increases the risk of situations reaching crisis. The local authority has taken steps to improve this, such as adopting the real living wage for carers and support workers and improved terms and conditions.	The local authority must ensure they continue to improve how it commissions and provides support to informal carers.	CIW3.24.04			Progressing well	Ian Randell		[29/10/25] Latest update requested from Ian Randell and Karen Butler. Carers Recognition Cards, individual carers grants, events were held during Carers Week and Carers Rights Day, engagement and co-production will culminate in the launch of the latest West Wales Unpaid Carers Strategy 2025-30. The recommissioning of the Unpaid Carers Information & Support service concluded and the service specification had been co-produced and developed with the unpaid carers ensuring their voice at the centre. Short Breaks Coordinator based within Carers Support Pembrokeshire. The Co-ordinator will support unpaid carers to identify and book short break opportunities. The coordinator will also work to expand the short break offer and discounts attached to the Unpaid Carers Recognition Card.	Domiciliary care waiting list is at its lowest, there are currently only 5 people awaiting a pckage within their own home. The development of micro- care enterprises has had an impact on the local economy for care as more people are looking for flexibility and taking control of their own care.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.05	PEOPLE - Despite progress being made, some people are having to move to a care home or stay longer in hospital due to domiciliary support services not always being available where they live.	The local authority must continue to improve commissioning of services to ensure it's ability to support people living in rural communities in the county.	CIW3.24.05			Progressing well	Ian Randell		[29/10/25] Latest update requested from Ian Randell and Becky Hancock. New model of dom care commissioning and current Dom Care waiting list refer. Plan to open out our reablement criteria to support earlier discharge and reduce time spent in hospital waiting for dom care.	As CIW3.24.04 The Authority has learnt from what works well across Wales and has implemented the Shared Lives programme for adults. The reconfiguration of Day Centres is seen as an opportunity to support the development of more focused service delivery in harder to reach areas.Social Enterprise development in Bro Preseli and Lee Davies Centres
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.06	PEOPLE - Many people still find contacting social care challenging. 65% of people in our survey indicated contacting social services was 'not easy' or 'very difficult'. Communication between practitioners and people can be inconsistent, with delay in returning calls cited by people as a common concern. Many people say they are not receiving prompt advice and information about services which could help their situation. This means the preventative approach at first point of contact is not sufficiently robust. There are plans for one point of social care contact, including co-location with third sector services. By the end of this year, a dedicated telephone line will be in place, replacing the current corporate first point of contact.	The local authority must ensure the plans related to the first contact team are implemented and monitored in a timely manner.	CIW3.24.06			Complete	Mel Laidler		Training provided to all staff and approach fully implemented. Ongoing support will be provided to ensure this is maintained and will include regular reflective sessions. As detailed within CIW3.24.1As detailed within CIW3.24.1As detailed within CIW3.24.1 Colaborative communication exercise undertaken and embed in teams.	As detailed within CIW3.24.1As detailed within CIW3.24.1As detailed within CIW3.24.1
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.07	PEOPLE - The financial backdrop, with the need to identify efficiencies across services makes the current context highly challenging, managers say there are better conversations now taking place with councillors about resource requirements. They say there is improved corporate understanding of the challenges experienced in social care. Adult safeguarding is now placed on the corporate risk register and a corporate dashboard being developed will help track and monitor progress. Many staff, however, describe a disconnection with senior corporate leaders. They suggest there has been poor understanding about the risks in service delivery and the impact of corporate decision-making upon teams striving to deliver statutory services.	The local authority should ensure it promotes a culture of regular engagement with staff, providing opportunities for people's voices to be heard.	CIW3.24.07			Complete	Mel Laidler		re-established practitloner forums and manager forums. Chief and Director have shadowed existing teams. Colaborative communication exercise undertaken.	Directorate Managers Forum: Directorate Management Forum already in existence. Chief Executive and Cabinet Members invited to date. All staff workshop: Proposed event in July 2024. Ongoing site visits from Director and Head of Service Note that SMT meets monthly and includes Service Managers, Team Managers and Assistant Team Managers

13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.08	PEOPLE - There is a commitment to offering people a choice of receiving services in Welsh, and we saw evidence of the offer being made. In one example, we noted difficulty sourcing a Welsh speaking personal assistant via direct payments, where Welsh was the person's preferred language. In another example, there was no capacity in a team to offer a Welsh speaking practitioner. Where it is recognised this is fundamental, such as regarding assessment of mental capacity, we are told this is facilitated through cross-team working, to ensure the person's rights and well-being are upheld. Welsh language training is offered to staff. Commissioning staff are required to ensure where possible, care services are being provided in Welsh. They are not always, however, able to achieve this and often must balance the request against the need, which may lead to individuals not receiving care in the language of their choice.	The local authority must continue to monitor and make improvement in relation to promoting the Welsh language active offer and ensuring people get a service in their preferred language.	CIW3.24.08			Complete	Mel Laidler		Successful in recruiting a Welsh Language person to the Safeguarding Team.	We will continue to ensure that the the desirability to speak Welsh is included within recruitment process Welsh language compliance will form part of future Directorate Management Forums.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.09	PREVENTION - Reviews of care and support plans are persistently delayed. There are examples of people's circumstances changing, with needs and risk escalating whilst awaiting a review. Initial reviews of domiciliary provision (within 6 weeks), and care placements (within 12 weeks) are prioritised. However, annual reviews are currently a lower priority and often go over timescale. There is a dependence on services or providers updating social care if circumstances change, but this is not always reliable. This means for some people, their situation has deteriorated so significantly, they require intensive and urgent care and support. An example being of an informal carer requesting additional support due to escalation in their disabled relative's needs in August 2023. A review of the existing care and support plan for the carer was not subsequently convened until January 2024.	Plans to address timeliness of statutory responses are developing, but the local authority must ensure the plans explicitly address how delay will be addressed.	CIW3.24.09			Complete	Mel Laidler		Reviews have reduced. Trusted Assessor model in place Regular Reviews Analysis Adult transformation group	Please see CIW3.24.1 Review data and assessment data will be presented at the adult SMT on a monthly basis ensuring compliance and steady state. Please see CIW3.24.1
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.10	PREVENTION - There is a Social Services and Housing Quality Assurance Framework, but operationally, this does not have a high profile.	The local authority should consider the benefits of refreshing the strategy so that it is inclusive, outlining how all staff have a role in quality assurance. The strategy should outline how wider learning across the directorate is cascaded.	CIW3.24.10	Clare, Sallie, Phil and Jean to meet see if meeting already set up for 3/11/25		Progressing well	Clare Wyatt		[29/10/2025] Meeting set for 3/11/2025 for service managers and policy & performance manager to discuss proposed changes to Adult Quality Assurance programme and content for Social Service Quality Assurance Framework. This will include a review of trial approach taken so far in 2025/2026. The following have all been implemented: Customer Feedback, Fish Bowls, Peer Reviews, Manager Authorisation of assessments and care & support plans, monitoring of standards and performance, reflective supervision.	Ring fenced resource for Adult Social Services will be secured. Learn from work completed with Children's social care Share information through the adult SMT
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.11	PREVENTION - There are examples when an assessment is not undertaken when this may initially present as being required. For example, an individual was not assessed at initial contact and was advised to contact micro carers directly. Whilst an offer of an assessment was subsequently made, this was only upon the individual's request and reluctance to contact micro carers.	The local authority must reassure itself assessments are being undertaken appropriately, and people receive a timely service.	CIW3.24.11			Complete	Sallie Arthur		At times it is appropriate to offer other services to people whilst they await assessment. Screening has improved - same day/24hr turnover. Assessment waiting list has reduced. New front door process implemented.	Practitioners will engage in the Social Care Wales training for Collaborative Communications. The implementation of the Adult Service Peer review has been seen as a positive step with assessments and care plans being critically reviewed and supported. Collaborative communication training-Peer Mentorship
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.12	WELL-BEING - Safeguarding practice is inconsistent. This is mostly because the capacity of the team, given increasing volume and complexity of workload, has not been enhanced commensurate with demand. The situation is exacerbated as there appears to be lack of clarity relating to safeguarding threshold across the multi-agency group. Lack of capacity to help adults stay safe was an inspection finding in 2022 and the position remains unchanged. Practitioners are working hard to meet statutory responsibilities but are unable to undertake consistent in-depth safeguarding practice. It is acknowledged that additional resource will be provided to the safeguarding team.	The local authority must ensure adequate resources are available to respond and manage adult safeguarding enquiries.	CIW3.24.12			Complete	Clare Wyatt		Dedicated Service Manager for Adult safeguarding in place. Dols has been brought into service. Whole team restructure. Recruitment programme resulted in appointments of team manager and assistant team manager. Front door to safeguarding changed significantly following Vanguard approach which has increased capacity in the team. More collaborative working across teams. Links have strengthened across adult services as result of this. Action learning sets undertaken. MARFS received and consistently screened in line with Wales Safeguarding Procedures and regional threshold guidance. Underpinned by Vanguard methodology, a review of adult safeguarding practice and performance was undertaken. The findings from which are informing an ambitious programme of development and improvement. Putting the 'expertise up front' and 'conversation first' approach advocated by the Vanguard method has seen a reduction in inappropriate referrals for adult safeguarding. This has led to increased capacity to effectively manage and progress MARFs through to a safeguarding enquiry, ensuring the provision of safeguarding services for adults at risk is timely and proportionate. The feedback on this approach from our partner agencies has been very positive and we are no longer an outlier in terms of our reporting data. The program of improvement has seen an increase in the number of cases progressing to safeguarding strategy meetings. Meetings enable a multi-agency, collaborative response to safeguarding practice for adults at risk. Giving due regard to the complexity of the situation and considering agreed safeguarding action and outcomes with a coordinated response. Protecting and safeguarding adults at risk from abuse and neglect.	During quarter 1 Adult Safeguarding will revert back to adult social care management. A service manager has been identified to undertake managerial oversight, the individual has significant experience within Safeguarding. The service will move from its existing base to work alongside the Adult inreach service. Additional funding has been identified to support this change and to increase capacity within the team. There are significant overlaps between services and this will reduce the current duplication within the system. All of the safeguarding team will be undertaking Vanguard training irradiating the current duplication within the system Greater working together between the in reach team and the safeguarding team will continue to be imbedded. Reducing duplication and strengthening links between the core teams and safeguarding services.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.13	WELL-BEING - Whereas the safeguarding team can respond to people at acute risk of harm, thereafter they are not able to adequately support people's safety and care and support needs whilst managing a persistent turnover of incoming new adult safeguarding enquiries. The position is exacerbated as for many circumstances, other services or teams are not set up to work with vulnerable people at risk. This is particularly relevant to a cohort of younger adults with complex needs, often experiencing abuse and living in chaotic living arrangements. Many of these people are not receiving co-ordinated multi-agency support.	The local authority must ensure adequate resources are available to respond and manage adult safeguarding enquiries.	CIW3.24.13			Complete	Clare Wyatt		Cohort of people highlighted are being supported in a different way using appropriate services.	As identified in CIW3.24.12 the service will revert back to the management of adult services. Vanguard training as detailed above will be critical in the delivery of safeguarding services, reducing the duplication in the current processes and forging links with core Adult Services. Supporting greater understanding of safe guarding practice across the service

13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.14	WELL-BEING - Given the overwhelming work volume and throughput in the safeguarding team, focus on quality can vary significantly. Some adult safeguarding enquiries lack clarity and rationale. Most significantly it is not always clear what overall safety measures are in place to protect people. As identified in 2022, there is a need to consider all relevant risks, with explicit exploration of all risk factors.	The local authority must ensure adequate resources are available to respond and manage adult safeguarding enquiries.	CIW3.24.14			Complete	Clare Wyatt		Overwhelming work volume has reduced due to implementation of appropriate safeguarding thresholds. Training has focussed within the team on quality. Service manager is reviewing quality assurance and issuing training accordingly. Training needs analysis taken place. Ongoing support and development for new members of staff to support competence and quality increasing consistency in practice. Service managers have reported positive feedback since new adult safeguarding team in place.	As identified in CIW3.24.12 the service will revert back to the management of adult services. Vanguard training as detailed above will be critical in the delivery of safeguarding services, reducing the duplication in the current processes and forging links with core services. The team will be colocated with adult social care in reach services. As previously detailed additional resource has been secured to support the service and senior management from adult services will be provided.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.15	WELL-BEING - Safeguarding team files can be closed prematurely, with a reliance on other agencies to provide support and a monitoring function.	The local authority must ensure adequate resources are available to respond and manage adult safeguarding enquiries.	CIW3.24.15			Complete	Clare Wyatt		This doesn't happen now due to changes that have taken place in the team. All [MARFs] multi agency referral forms that meet threshold for S126 enquiries proceed to enquiry with far more enquiries proceeding into strategy meetings ensuring files are not closed prematurely.	Analysis of current workload will be undertakenRevised working processes will be embedded with additional capacity identified to enhance the current team.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.16	PARTNERSHIPS - Operationally, when health care staff and local authority practitioners work together, it can work well. Developing the initial collaborative approach can be a challenge, especially in relation to hospital discharge. There can be delays in responding to people due to miscommunication and misunderstanding between social care and health care staff. There are plans to evaluate the hospital discharge service.	Social care and health board managers should continue to work collaboratively with a focus on the person's health and well-being by delivering services together.	CIW3.24.16			Complete	Mel Laidler		Collaborative communication training has been held jointly with Health and third sector as has Vanguard training. Recent WG monies awarded to address hospital discharge delays will seek to "right size" JDT.	This is core to the delivering of all of the joint training that will be undertaken in the next year. Collaborative communications and Vanguard training. All of which will be undertaken in partnership.
13 June 2024	CIW	CIW March 2024 Performance Evaluation	CIW3.24.17	PARTNERSHIPS - Social care practitioners do not receive regular feedback in relation to unsafe hospital discharge notifications submitted to hospitals	This is a missed opportunity to improve communication and working partnerships and should be addressed by social care and health board managers.	CIW3.24.17			Complete	Sallie Arthur		More formal report of unsafe hospital discharges are now recorded within the health IT system. This seeks to ensure more formal feedback to the person reporting unsafe discharge. Feedback is shared with practitioner who originally made datex record.	This issue will be resolved during quarter 1 with meetings already set in place with health board managers. Information will routinely be shared on a monthly basis through the Adult Senior Managers Forum
9 September 2025	CIW	CIW July 2025 Improvement Check	CIW7.25.01	Morale is being impacted for a few staff as they strive to ensure capacity meets demand. A few staff also said they would like to see better dialogue between managers allocating work and practitioners to improve communication about individual circumstances and workload capacity.	The local authority should focus on providing clear communication in workload allocation, and workloads being manageable to help reduce stress and prevent occupational burnout, ultimately ensuring the well-being of both staff and the people they support.	CIW7.25.01a	Supervision of social care workers' cases will include one case per month being recorded as case audit.	Jun-26	Progressing well	Clare Wyatt		[6/11/25] Review of Adults QA Framework will include new provision of each supervisor to record one case review each month as a file case audit on Eclipse. It is expected this will be implemented by January 2026. Currently in draft stage, after which consultation will take place.	
9 September 2025	CIW	CIW July 2025 Improvement Check	CIW7.25.01	Morale is being impacted for a few staff as they strive to ensure capacity meets demand. A few staff also said they would like to see better dialogue between managers allocating work and practitioners to improve communication about individual circumstances and workload capacity.	The local authority should focus on providing clear communication in workload allocation, and workloads being manageable to help reduce stress and prevent occupational burnout, ultimately ensuring the well-being of both staff and the people they support.	CIW7.25.01b	Social Care Wales in Jan 26 to meet with Mel.	Jun-26	Not Started	Clare Wyatt			
9 September 2025	CIW	CIW July 2025 Improvement Check	CIW7.25.01	Morale is being impacted for a few staff as they strive to ensure capacity meets demand. A few staff also said they would like to see better dialogue between managers allocating work and practitioners to improve communication about individual circumstances and workload capacity.	The local authority should focus on providing clear communication in workload allocation, and workloads being manageable to help reduce stress and prevent occupational burnout, ultimately ensuring the well-being of both staff and the people they support.	CIW7.25.01c	Quality Assurance - Supervision QA of case allocation records - reports to managers on monthly basis. Social Care Wales in Jan 26 to meet with Mel.	Jun-26	Not Started	Clare Wyatt			
9 September 2025	CIW	CIW July 2025 Improvement Check	CIW7.25.02	Many assessments are undertaken as joint assessments, which focus on the cared for person and informal carer. In these records, consideration to informal support has some focus, but detail about the needs of carers and understanding their role, could be improved with a more in-depth consideration of the carer role. The local authority has some recognition of this and plans to introduce carers indices which can be used to inform assessments.	The local authority must ensure assessments focus fully on ascertaining an understanding of the role of informal carers and how this links to care and support being provided.	CIW7.25.02	Development of revised assessment and care plan forms with specific carer fields. Consideration of implementation of Carer's Indices.	Jun-26	Progressing well	Sallie Arthur		[7/11/2025]Work on revised forms has progressed well and the next meeting will focus on testing of the forms and then finalisation and an action plan to implement.	
9 September 2025	CIW	CIW July 2025 Improvement Check	CIW7.25.03	A few assessment and review records document contingency plans, but these are often limited in the information recorded and inconsistent in completion. This means potential changes to eligible needs are not well considered or anticipated.	Leaders and practitioners should focus on improving the quality of care and support contingency plans.	CIW7.25.03a	QA thematic audit of contingency plans.	Jun-26	Not Started	Jean Davies			
9 September 2025	CIW	CIW July 2025 Improvement Check	CIW7.25.03	A few assessment and review records document contingency plans, but these are often limited in the information recorded and inconsistent in completion. This means potential changes to eligible needs are not well considered or anticipated.	Leaders and practitioners should focus on improving the quality of care and support contingency plans.	CIW7.25.03b	Supervision guidance will include reference to contingency plan details.	Jun-26	Underway - Input Needed	Jean Davies		[7/11/2026] Some initial discussion has taken place and this will form part of wider review of the supervision guidance.	
9 September 2025	CIW	CIW July 2025 Improvement Check	CIW7.25.04	There is continued commitment to offering people a choice of receiving services in Welsh, but we saw an example where a person's language preference was not met. Communicating with people in the language of their choice promotes inclusion and equity which are core principles in social care.	The local authority must continue to monitor and make improvement in relation to promoting the Welsh language active offer	CIW7.25.04	Ensure monitoring arrangements are in place for Welsh Language requirements.	Apr-26	Complete	Mel Laidler		[6/11/25] QA Monthly Monitoring report on Welsh Language and Language of Choice questions. Supervision of social care workers cases. [29/10/25] A directory of Welsh speaking staff which is kept up to date through the Human Resources system. The new employee induction document launched in 2024 refers to Welsh Language Standards Regulations for employees. As part of induction, training opportunities include a 10-hour Welsh Taster course and Welsh Language Awareness e-learning module. Other courses include Entry, Foundation, Intermediate, Advanced and Proficiency levels that are fully funded. A corporate contact centre with the ability to take referrals for social care in Welsh. Raise awareness of the language amongst staff and provide opportunities for employees to develop their Welsh language skills. We ensure all people making a referral for adult services are asked what their preferred language is	

[illegible]