Section 5.1a

Title: Care and Support

Overview

A range of work has been undertaken to explore the future care and support needs of the local population – both children and adults - and how services can be delivered in a way that maximises people's well-being. There is no doubt that this will



be challenging within a financially restrictive environment and with an ageing population. As highlighted in other chapters, this underlines the importance of promoting healthy lifestyles, supporting emotional health, giving children the best start and enabling people to 'age well', in addition to building an accessible environment and cohesive communities.

Children

A range of indicators related to Children's health are included in other sections (for example, 'Baby, children health and development').

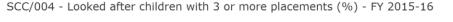
In relation to 'children in need' there were 19,385in the census at 31 March 2015, equating to 308 per 10,000 children aged under 18 years. This is high compared to the Welsh average - at Local Authority level, the rate per 10,000 children varied from 156 children in need per 10,000 in Flintshire to 480 in Blaenau Gwent.

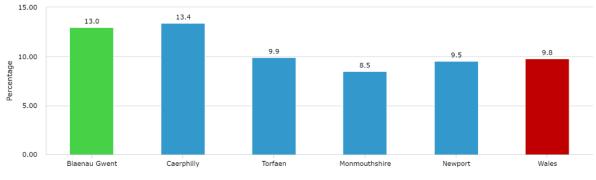
One of the national wellbeing indicators linked to children in need relates to 'looked after children with 3 or more placements', where performance is represented in the table below:

¹ Children in need are defined in law as children who are aged under 18 and:-

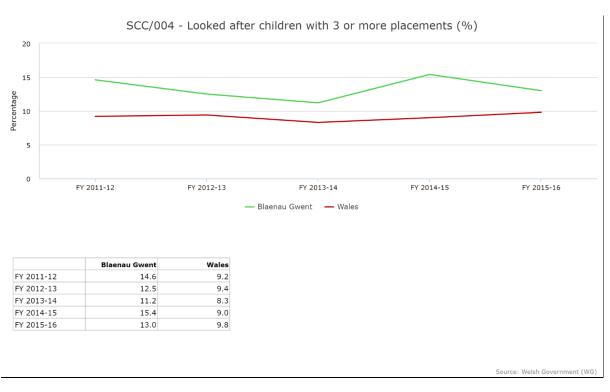
need local authority services to achieve or maintain a reasonable standard of health or development

[•] need local authority services to prevent significant or further harm to health or development are disabled.





Whilst this placement figure is high relative to other Local Authorities, an historic comparison (below) shows that in Blaenau Gwent over the period 2011-12 to 2015-16, the percentage has decreased by 1.6 percentage points. This compares with an increase of 0.6 percentage points over the same period for Wales.

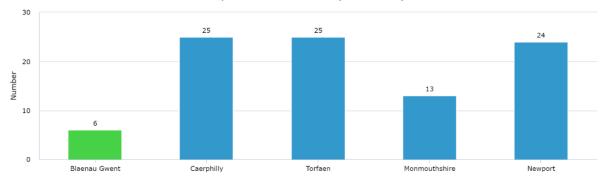


Adults

A range of indicators related to Adult's health are included in other sections (for example, Life Expectancy, Emotional Health, Healthy Lifestyles, Ageing Well).

Another key indicator related to care and support concerns delayed transfers of care. The figure below shows the number of delayed transfers of care for all reasons in September 2016 across the Gwent region:

Number of delayed transfers of care (all reasons) - Oct 2016



As illustrated below, there has been some fluctuation in delayed transfers of care for all reasons over the period April 2015 to September 2016, but the number remains relatively low.



Story behind the data

Children

A regional **Children & Families Partnership Board (CFPB)** has been established with representation from across health, social care and education. There is no set definition for children with complex needs at a regional level, but as a starting point the CFPB considers the following client groups to have complex needs: people with Autistic Spectrum Disorder (ASD) and/or a learning disability; children with complex physical disabilities and; children and young people who have experienced developmental trauma and people who can present challenging behaviour. The CFPB have identified the following priorities:

 Emotional Well-being and Mental III-Health across the age range, including children and young people, maternal and infant mental illhealth with the view to identify any gaps in current support provision and to develop new services and/or transform current services;

- Multi-agency assessment and planning for children and young people with complex needs – with the view to improve joint referrals, joint assessment and joint commissioning of services for this group;
- Out of county placements for children and young people with complex needs - with the view to plan and develop local services where appropriate (including possible residential provision)
- Obesity in children and young people (this will be linked to local Wellbeing Plans and the work of Public Service Boards)

Flying Start and Families First are preventative programmes which aim to give children the best start in life, reduce the escalation of needs and support families to ensure a child's well-being. Over the last few years Flying Start has been expanded across Blaenau Gwent to meet levels of need.

Adults

A key aim of Blaenau Gwent's local *Living Independently Strategy* is to enable older people to remain in their own homes for as long as possible, with an over-arching principle that actions should be taken to "help older people to find solutions that work for them" enabling independence and promoting quality of life. Gwent's *Frailty Strategy* and the new *Dementia Strategy* are key to delivering this.

The Mental Health and Learning Disability Partnership Board has produced an Integrated Mental Health Strategy 2012-17 *Together For Mental Health In Gwent*, covering specialist, inpatient and community services, and based on the principles of the related National Strategy.

The Partnership Board has also produced a *Learning Disability Strategy* (2012 -2017). The vision is:

To enable adults with a learning disability living within Gwent to lead fulfilling lives and have the same opportunities as other people in society. Adults with a learning disability and their carers should have access to the full range of public services and receive support from specialist services when required.

These strategies all relate to the *Supporting People* programme, introduced in 2003 to plan, commission and monitor housing related support services for vulnerable people.

Support to carers is also a priority as more people are taking on caring responsibilities for family or friends; there are a range of support and information services plus a partnership based *Carers Information and Consultation Strategy 2012-2015* developed by ABUHB.

Building care and support fit for the future

It is recognised that there is a lot more to do to ensure effective care and support for the local population, in line with the aims of related national legislation, including the Social Services and Well-being (Wales) Act. Structural change is required to integrate health and social care services and a number of projects are underway to deliver this, for example through 'Care Closer to Home' ABUHB has been working in partnership with Gwent local authorities to look at opportunities to align and integrate services around GP cluster areas.

Another requirement of the Social Services and Well-being (Wales) Act is to undertake a Population Needs Assessment. This is described below.

Greater Gwent Population Needs Assessment – what it is

Greater Gwent Health, Social Care and Well-being partnership have been working to develop a Population Needs Assessment for people who use care and support services, using a toolkit developed by the Welsh Local Government Association and Social Services Improvement Agency. The assessment has drawn on a range of data to consider current and future needs. This will be followed by a Regional Area Plan (required by April 2018), which will set out how specific care and support services will be provided and delivered.

People who use services and carers have been engaged in a number of ways to inform the Population Needs Assessment, through a citizen's panel, workshops and engagement activity in each local authority area.

The Population Needs Assessment is still under development and will be published on April 1st.

The Population Needs Assessment and Wellbeing Assessment should be considered together and will inform each other.

What we know from engagement



Recent consultation took place in Blaenau Gwent with existing users of care and support services, to inform the Population Needs Assessment. The results of this will be made available after they are analysed.

Some people commented on care and support delivery in the *Blaenau Gwent We Want* Wellbeing engagement. Interestingly 'Health' was rated very highly by older people and children and young people in answering the question "What would make Blaenau Gwent a better place?" For older people this was most frequently linked to availability.

Examples of people's comments included:

Annual health checks are helpful

We need more services delivered at home /closer to home to avoid travel

Better information is required about what support is already available

Develop local service HUBS bringing together, for example, GP practices, podiatry, carer support services, information and advice, activity opportunities / spaces, libraries, etc.

Consistency of carer support is important - it is unsettling to have new people always coming into your home

There should be more help to enable peer support - it can really contribute to people feeling better and managing their conditions.

More overnight respite for carers is required.

What helps me is support with daily living and activities
- help to organise my life - help to use a computer

We need more mental health support services