



# Complete Agenda

Democratic Service  
Swyddfa'r Cyngor  
CAERNARFON  
Gwynedd  
LL55 1SH

Meeting

**SERVICES SCRUTINY COMMITTEE**

Date and Time

**10.00 am, THURSDAY, 17TH MARCH, 2016**

Location

**Siambwr Hywel Dda,  
Council Offices  
CAERNARFON**

**\* NOTE**

**This meeting will be webcast**

**<http://www.gwynedd.public-i.tv/core/portal/home>**

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(DISTRIBUTED: 11/03/16)

# **SERVICES SCRUTINY COMMITTEE**

## **MEMBERSHIP (18)**

### **Plaid Cymru (10)**

Councillors

Alan Jones Evans  
E. Selwyn Griffiths  
Sian Wyn Hughes  
Ann Williams  
R. H. Wyn Williams

Aled Ll. Evans  
Christopher Hughes  
Elin Walker Jones  
R. Hefin Williams  
Gareth A. Roberts

### **Independent (4)**

Councillors

Eryl Jones-Williams  
Dewi Owen

Beth Lawton  
Eirwyn Williams

### **Llais Gwynedd (2)**

Councillors

Alwyn Gruffydd

Peter Read

### **Labour (1)**

Councillor Sion W. Jones

### **Individual Member (1)**

Councillor Linda Ann Jones

### **Aelodau Ex-officio / Ex-officio Members**

Chairman and Vice-Chairman of the Council

## **CO-OPTED MEMBERS:**

### **With a vote on education matters only:**

Dylan Davies	Representative for Meirionnydd Parent Governors
Rhian Roberts	Representative for Dwyfor Parent Governors
Awaiting Nomination	Representative for Arfon Parent Governors
Rita Price	The Catholic Church
Canon Parchedig Robert Townsend	The Church in Wales

### **Without a vote :**

Neil Foden	Teachers' Union
David Healy	Teachers' Union

# **A G E N D A**

**1. APOLOGIES**

To receive any apologies for absence.

**2. DECLARATION OF PERSONAL INTEREST**

To receive any declaration of personal interest.

**3. URGENT BUSINESS**

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

**4. MINUTES**

1 - 7

The Chairman shall propose that the minutes of the meeting of this Committee held on the 28 January 2016, be signed as a true copy.

**5. EDUCATION SERVICES' ANNUAL REPORT**

8 - 83

To consider the Education Cabinet Member's report on the above.

(Copy to follow)

**6. PROGRESS REPORT - FROM HOSPITAL TO HOME SCRUTINY INVESTIGATION - PART 2**

84 - 90

To consider a report by the Adults, Health and Well-being Cabinet Member and the Chair of Betsi Cadwaladr University Health Board on the above.

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**SERVICES SCRUTINY COMMITTEE**  
**28/01/16**

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**Present:**

**Councillor Beth Lawton (Chair)**

**Councillors:** Aled Evans, Alwyn Gruffydd, Elin Walker Jones, Linda Ann Wyn Jones, Siôn Wyn Jones, Eryl Jones-Williams, Gareth A. Roberts, Ann Williams, Eirwyn Williams, Hefin Williams and R H Wyn Williams.

**Officers:** Gareth James (Members' Manager - Support and Scrutiny) and Glynda O'Brien (Members' Support and Scrutiny Officer).

**Also in attendance:**

**For Items 4,5 and 6 below**

Councillor W. Gareth Roberts, Cabinet Member Adults and Health  
Aled Davies, Temporary Head of Adults, Health and Wellbeing Department

**For Item 4 below**

Ioan Thomas, Cabinet Member – Housing, Customer Care, Libraries, Deprivation and Equality  
Arwel Wyn Owen, Senior Housing Manager  
Eliw Llŷr, Strategic Housing Manager

**For Item 6 below**

Rhion Glyn, Senior Executive Officer

**Apologies:** Councillors Alan Jones Evans, E. Selwyn Griffiths, Siân Wyn Hughes, Dewi Owen, Peter Read, Mair Rowlands (Cabinet Member Children and Young People), Neil Foden and David Healey (Teaching Unions) and Morwena Edwards (Corporate Director)

**1. CHAIRMAN'S ANNOUNCEMENTS**

- (a) The Chairman welcomed Councillor Gareth A. Roberts to his first meeting of this Scrutiny Committee.
- (b) A speedy recovery was extended to the Chair of this Scrutiny Committee, Councillor Peter Read, and his fellow Councillors looked forward to seeing him back with them soon.
- (c) Reference was made to the death of Councillor Eddie Dogan and condolences were extended to his family in their sad loss.

**2. DECLARATION OF PERSONAL INTEREST**

No declarations of personal interest were received from any members present.

### 3. MINUTES

The Chair signed the minutes of the previous meeting of this Committee that took place on 26 November 2015.

Councillor Alwyn Gruffydd reminded the committee of the need for the Head of Education to submit a written report to this Scrutiny Committee stemming from the minute at the previous meeting under the heading Urgent Items - Schools Savings Target.

### 4. OLDER PEOPLE ACCOMMODATION STRATEGY

(a) A report was submitted by the Cabinet Member for Adults and Health together with a draft strategy for the accommodation of older people and he drew attention to the strategy's main priorities namely:

- Support individuals to stay in their homes for as long as possible
- Find specific geographical areas where it is likely that the demand will be high
- Ensure suitable accommodation for older people
- Ensure that Gwynedd's older people are aware of the accommodation options that exist within the County and that accessible information is available

(b) The Senior Housing Manager referred to the strategy's aim that sets a direction in terms of the population needs. Specific areas were looked at and the service that is currently available. The Committee was reminded of the challenges facing the Council as well as the growth in population. There was a growth in the population of those aged 85+ with a high percentage living alone and dependent on social care. It appeared that if the accommodation was suitable for the individuals then they could remain in their own homes and the cost for the service was less.

The trends were considered and it was seen that there was a lack of provision in some areas particularly in the coastal communities. In addition, it was noted that there was a significant growth in the number of patients with dementia and this caused concern for the future and a balance would be sought between the current provision and future requirements.

Eight areas had been identified regarding the pressure on the population and it was seen that in some areas the population was older, some young people were moving out and the pattern of the influx of people was by now fairly consistent. In terms of the eight areas, the type of appropriate provision that would fully meet with the need was considered. They would look at the future role of the residential sector as there were more residential / nursing beds than sheltered housing provision.

(c) The Strategic Housing Manager noted that the strategy had long-term and financial implications and a partnership with a housing association would have to be considered that would in turn be dependent on grants, etc.

(ch) Members were given an opportunity to scrutinise the strategy and they highlighted the following points:

- Why cannot the Council consider dual registration especially as the Health Board / CSSIW support this?
- Concern regarding the reduction in the number of traditional residential beds with the beds now transferred to the Health Board, and as a result there was no place for

local people specifically in Blaenau Ffestiniog, with no land available to establish additional sheltered accommodation for the needs of local people.

- Concern when private residential care homes were closing, that the responsibility fell on the Council to keep the home open until the residents could be re-located.
- That the areas specified in the strategy were under huge pressure with people moving there to retire and should the strategy not refer to a financial recognition to be able to cope with the situation.
- A request had been made for further details regarding the number of people over 65+
- Disappointment that the action plan had not noted the timetable and who would be responsible for action.
- That there was a lack of direction within the strategy regarding the size of hospital beds and the need to take this into consideration especially for patients who wish to remain at home and lived in old buildings in towns such as Blaenau Ffestiniog, where it was not possible to fit a special hospital bed into the houses and consequently this forced the elderly to go into a home or hospital.

(d) In response to the above observations, the Head of the Adults, Health and Well-being Department explained that the market position in terms of residential care homes was very vulnerable and this was not unique to Gwynedd. It was confirmed that a residential care home had recently closed, however, they had managed to re-locate the residents in close cooperation with the Health Board. He noted that the costs of wages had an impact on the viability of some of the homes, however, the fundamental problem was the recruitment of nurses. In terms of dual registration, it was explained that initial discussions and research were proceeding with the Health Board in order to consider the possibility of providing dual registration facilities. This will include legal counsel regarding what can be achieved. It was confirmed that it was not currently possible to give a speedy response as initial findings of the work were required in terms of legislation etc.

(dd) It was explained, in response to a further enquiry regarding the difference in payments to residential homes, that the costs of homes varied and were dependent on the conditions of the buildings, location and the type of care expertise / provision etc. Currently, it was noted that work was proceeding regarding fees to ensure a cost effective service bearing in mind the existing financial climate. An assurance was given that a further report would be provided to the next preparatory meeting of the Scrutiny Committee and officers would be invited to the meeting to outline the processes for setting residential care home fees together with the viability of private care homes in Gwynedd.

(e) It was explained, in response to an enquiry regarding a rural solution, that it may be necessary to use a traditional solution, namely, to make use of the provision available in the area if there was no space for additional care homes.

(f) In terms of differentiating between the number of older local people and people who are out of County in residential care homes, the Head of Adults, Health and Well-being Department confirmed that the Department was seeking the figures for Councillor Aled Evans. It was further noted, that the Department had a few cases where authorities over the border give funding. An argument was submitted to the Government outlining the problems that the movement of people into Gwynedd has without their supportive networks, however, unfortunately success thus far had been limited.

(ff) The Senior Housing Manager explained that the Council had received a grant for two schemes and an additional one in Porthmadog, however, there was no commitment beyond this. It would be necessary to consider different options such as an extra care

light scheme that was a model between sheltered housing care and extra care housing. There was no 24 hour care within this scheme. Such a model was implemented at Cysgod y Gogarth, Conwy.

**Resolved: To request that the Head of Adults, Health and Well-being Department ensures that the following matters are included within the accommodation strategy for older people:**

- (i)
  - **Acknowledgement that there was a stock of old housing in some areas and therefore it was impossible to provide hospital beds in the houses due to the specified size of a hospital bed and the need to consider different options in these areas.**
  - **That additional financial recognition was required for some areas to address the growth in the number of people who have retired there and the cost of providing services for them.**
- (ii) **Submit additional information to a preparatory meeting of this Scrutiny Committee that will take place on 23 February 2016 to address the following matters**
  - **Fees /costs and viability of private residential care homes**
  - **Latest literature by Bangor University**
  - **Extra Care Light provision**

## **5. GWYNEDD COUNCIL 2015-16 (QUARTER 2) PERFORMANCE OVERVIEW - CARE**

A report was submitted by the Head of Adults, Health and Well-being Department in response to questions from Members following the receipt of the Overview Report on the Council's performance.

Members were given an opportunity to ask questions and the Head of Adults, Health and Well-being Department responded as follows:

(a) that there were new requirements in relation to welfare duties, however, nothing specific had been received from the Government thus far. The duties would have to be undertaken within the existing resources and it would be necessary to conform to a wider restructuring within the Department. It was trusted that a Well-being Manager would be appointed next month.

(b) that approximately 20 students per annum attend the MA course in Social Work at Bangor. The Department had recently advertised for staff in the Meirionnydd area and the response was good.

(c) It was explained that it was proposed to raise public awareness of the Care Challenge and as a first step they would contact the Town Council and dependent on the response a wider work programme could be determined to meet with specific groups. It was noted that there was an appeal to visit the Penllyn area where five Community Councils were working together. It was assured that the awareness of Local Members would be raised in these visits in order that they are aware if there are any visits in their area.

(ch) an undertaking was given that the figures would be circulated to Councillor Linda Ann Wyn Jones regarding the number who are on the waiting lists of Social Workers.

(g) A great deal of research had been undertaken regarding career pathways, however, there was a great deal of work yet to be achieved. It was acknowledged that it



was difficult to recruit Social Workers and care workers in rural areas, and some of the external providers recruited care workers from overseas. However, an assurance was given that a great deal of effort had been made to contact Colleges of Further Education to raise the profile of opportunities but care was not an attractive career in terms of wages. More attention needed to be given to ensure that individuals identify the field soon and that there are opportunities to develop a further career. It was confirmed that a great deal had been done at a professional level in order to develop individuals in their career. It was recognised that the training structures of some external providers appeared stronger than others. It was noted that the Council should perhaps consider setting specific clauses in contracts in order to ensure an element of investment to develop career pathways.

(dd) Regarding the cuts, that the main elements in terms of impact had been presented and some would have an impact on the service such as on visits and timely assessments etc. and this meant difficult choices. However, having made an effort to get rid of waste, it was trusted that the impact would be less on individuals, but it would be slower in terms of providing services.

(h) In the context of recruitment problems and competition by external providers, it was noted that whilst accepting that it was a feat to retain individuals in post for a long period, it was easier for the Council to retain staff due to work conditions, pensions etc. A member stated that they should look at imaginative and innovative ways to retain staff such as a car lease scheme.

(i) In response to a comment made by a Member regarding a report by the third Sector, regarding the impact of wages/payments by local authorities on the viability of providers, it was assured that a copy would be sent to the Members of this Scrutiny Committee.

(j) In the same manner, it was suggested that a copy of the Carers Career Path should also be sent to them.

(ng) In terms of dual registration, it was added that the commissioning work was proceeding and it was anticipated that it would be completed around April and following this a further report could be submitted to the Scrutiny Committee on the possible models. If there are examples of Committees that had undertaken the provision then these would be included within the investigation.

**Resolved: (a) To accept and note the report.**

**(b) To request that the Head of Adults, Health and Well-being Department submits a further report to this Scrutiny Committee on the findings of the commissioned work on dual registration.**

**(b) To request that the Members' Support Manager - Scrutiny sends the information outlined in (j) above to the Members of this Scrutiny Committee.**

## **6. WORK PROGRAMME - PERFORMANCE EVALUATION REPORT 2014/15 (CARE AND SOCIAL SERVICES INSPECTORATE WALES - CSSIW)**

The Work Programme was presented that was formulated in response to the Performance Evaluation Report 2014/15 of the Care and Social Services Inspectorate.

Members were given an opportunity to scrutinise the work programme and they highlighted the following points and these were responded to by the relevant officers:

- (a) it was felt that the matters in question had already been discussed and that there was no progress in term of the timetable

It was explained that the work programme was responding specifically to what was asked by the Inspectorate. A comment was received that it appeared that there had been some slowness over the last few months but this was for specific reasons and the fact that staff had to look at other ways of working.

A Member added that 2/3 of the project had been slow but this was dependent on decisions. It had to be borne in mind that many of the changes dealt with Department's culture, however, they would welcome a timetable that stated specific dates in the action plan.

- (b) Why were the Inspectorate currently visiting organisations/ individuals?

It was explained that the Inspectorate had chosen Gwynedd as one of the six authorities in Wales to receive an inspection of the learning disabilities service specifically, and they needed to discuss this with organisations / families and individuals.

- (b) What has happened to the residents of Plas y Bryn Home, Bontnewydd?

It was explained that the Council and the Health Board had organised to re-locate the residents of Plas y Bryn to specific wards in hospitals and to locations across North Wales dependent on the type of care they needed. In addition, some had moved to the home at Bryn Seiont Newydd. In further response to a comment regarding Bryn Seiont fees, that there had been negotiations between the Council, the Health Board and the home regarding a standard fee for individuals placed there.

- (ch) That the situation with the closure of the Bryn Llifon Home was a different process and concerned financial viability and staff recruitment difficulties.

(d) Regarding staff morale in the Department, the Head confirmed that he was of the opinion that it was low and it had to be remembered that the Department was going through significant changes in terms of culture, form and work processes with the re-structuring causing uncertainty for staff. It was trusted that once the changes were clear then they would be able to move forward and morale would improve. In terms of the timetable and bearing in mind that the changes were on a significant scale, it was anticipated that the situation would take approximately 12-15 months to settle down.

(dd) it was suggested that it would be advantageous to nominate two or three members from this Scrutiny Committee to assist with formulating the brief for the strategic plan regarding the arrangements to assist carers.

(e) The importance to keep an eye on, and give attention to supporting carers and to remember that some were schoolchildren, especially when individuals were discharged from hospital without an assessment.

(f) Concern was expressed by members, considering the proposed cuts, that the Department would not be able to cope with all the requirements of the Well-being Act and the Council would be placed in a situation of special measures.

In response, it was explained that there were efficiency savings that could be achieved within the Department and it was recognised that there was waste within some systems in every service. However, it was noted that the proposed cuts were in addition to the efficiency savings and of course this meant that they would have to reduce some services.

It was emphasised that they would try to ensure that any cut would have as little impact as possible on Gwynedd residents.

(ff) Reference was made to point 4.2 where it was noted that the two Cabinet Members were vital to ensure the success of the modernisation programmes and it was asked what would be the role of the Scrutiny Committee in this.

It was explained that all the Members were part of the programme of changes that were in the pipeline in terms of savings and cuts and the requirements of the Social Services and Well-being Act and that the Cabinet Member Adults, Health and Well-being made every effort to ensure that the work was being achieved. In addition, the importance of the role of those scrutinising was noted and this would be undertaken in more than one way be that by members of this Scrutiny Committee, Corporate Director and the Care and Social Services Inspectorate Wales to ensure that the Department was moving in the right direction.

**Resolved: (a) To accept and note the work programme subject to the receipt of a robust timetable to be implemented and presented to the preparatory meeting of this Scrutiny Committee on 23 February 2016.**

**(b) To nominate the following members to assist the relevant officers and the Cabinet Member for Adults, Health and Well-being to draft a brief for the strategic plan in relation to assistance for carers:**

**Councillor Linda Ann Wyn Jones  
Councillor R H Wyn Williams**

## **7. CORPORATE PARENT PANEL**

**Resolved: To elect Councillor Siân Wyn Hughes to serve on the Corporate Parent Panel to succeed Councillor Elin Walker Jones, following her recent resignation from the Panel.**

The meeting commenced at 10:00am and concluded at 12:00pm.

**CHAIRMAN**

# Agenda Item 6

<b>MEETING</b>	Services Scrutiny Committee
<b>DATE</b>	17.03.16
<b>TITLE</b>	Progress made against the recommendations of the From Hospital to Home Scrutiny Investigation - Part 2
<b>PURPOSE</b>	To submit an update to the Services Scrutiny Committee on the progress made.
<b>AUTHOR</b>	Gareth Roberts (Cabinet Member for Adults, Health and Well-being)  Peter Higson (Chairman of the Betsi Cadwaladr University Health Board)

## **1 The decision sought/purpose of the report:**

To give members of the Services Scrutiny Committee an update on the progress made against the recommendations of the 'From Hospital to Home Scrutiny Investigation - Part 2'

## **2 Introduction**

The 'From Hospital to Home - Part 2' report was submitted to the County Forum on 15.07.15 and it included seven main recommendations. This report informs the Services Scrutiny Committee of the latest progress made against the previous recommendations, and where possible, responds to some of the observations in the 'Tracking Interviews'.

The report was prepared jointly between the Council and the Betsi Cadwaladr University Health Board and observations are made on each recommendation.

## **3 Relevant Considerations**

N/A

## **4 Reasons for recommending the Decision**

**Recommendation 1 - Address some of the weaknesses of the patient transfer arrangements giving due focus where necessary to drawing up a new Care Plan or adapting the current Care Plan soon after the patient arrives at Hospital.**

We are glad that it has received positive feedback during the Tracking Interviews and generally we believe that work is progressing very well in this field - both on an operational and strategic level. As part of the attempt to work in an integrated way across the Care and Health field, a general change of emphasis has now been established when assessing individuals. The principle that the assessment should be carried out in the best possible circumstances for the individual is agreed with, and very often that is in their homes - normally this is where they are most familiar with and comfortable in. Therefore, this is an obvious attempt to move away from the previous traditional way of assessing in the hospital.

The new way of working that is being trialled in the Eifionydd area is offering initial positive outcomes when transferring patients. The removal of the panel arrangements means that decisions are made sooner and in a more timely way for the patient. Thus far, there is no evidence that the removal of this panel arrangement has led to any increase in expenditure. The new way of working in an integrated way and rationalising documents for assessments means that we are starting to see a substantial reduction in the paperwork for staff on the Ward in Ysbyty Alltwen. This reduction means that the staff have more time to care for and support patients, whilst at the same time facilitates the transfer process in general.

Currently, the new way of working is only operational in Eifionydd, and further work is to be done over the coming months to establish the arrangements, e.g. on the Ward. Key discussions are currently being held between the Council and the Health Board to anticipate how the integrated structure will look in Gwynedd in the future. Therefore, it is expected that we will be in a position to confirm this image soon, and that we will then be able to roll-out the new way of working in other areas.

We know that there are practical problems in terms of transferring patients in some areas of Gwynedd, such as in Meirionnydd. We are seeking a joint-response to these concerns and from the Council's perspective, appointments have recently been made and also staff have been moved there temporarily to assist with the situation. However, there are concerns about some of these problems in the longer term - if the situation is to be resolved, strategic planning between the two authorities will need to continue. As part of the attempt to do so, a new project was commissioned under the Strategic Plan by the Full Council on 03.03.16 that will seek to respond to the challenge in terms of the Care and Health regime in its entirety. The concerns highlighted in the Meirionnydd area are of course a part of a broader problem - e.g. there are some areas where local and family networks are scarcer than in other parts of the County. Alongside this, the lack of job opportunities for the young means that young

people have left the area and consequently, the population can be older than in other areas. The 'Hospice in the Home' provider has also identified the lack of carers in Meirionnydd and in response to this, has funded more carers specifically to offer end of life support. Currently, we are in the process of recruiting and the intention is to ensure close collaboration between all partners in the field locally.

**Recommendation 2 - Support the Third Sector to co-ordinate preventative and specialist support services in the community and ensure that they have adequate resources to address this and to increase the frontline workers' knowledge and awareness of third sector services.**

We are glad to report, on a strategic level, that positive collaboration is taking place between all partners who are represented on the Third Sector Liaison Group. Although there has not been a substantial change in the situation since the above-mentioned recommendation was made in July 2015, the relationship with the third sector is generally good. Jointly, we are developing the strategy to respond to the statutory requirements of the Social Services and Well-being Act. The work progressing with Dewis Cymru and the mapping of community activities in the Eifionydd area are a part of this. In addition, the G1 Care Challenge project in the Strategic Plan also seeks to identify the strength of communities and encourages community action. We expect to succeed to do so by working with the communities, the third sector and other key partners.

It should be noted that the Council has approved cutting a total of £100,000 in the budget that is allocated to the third sector, and also ensure efficiency savings of £65,000. This of course highlights the challenge facing the sector, and underlines the need to collaborate as closely as possible and share resources for the benefit of Gwynedd's residents.

In particular, in terms of establishing a single point of contact, as has been reported already in relation to Recommendation 1, the work is currently being developed in the Eifionydd area and we will have then progressed to implement it in the other areas after the new way of working is established. The Integrated Team that is operational in the Eifionydd area will be the 'single point of contact' for the residents of Eifionydd, and this model will then be duplicated across the county. The emphasis continues on being person-centred and this is at the core of establishing a 'single point of contact'. Again, as a part of trialling the new way of working in the Eifionydd area, the third sector, and particularly the Care and Repair officer, is now a part of the team that is located in Ysbyty Alltwen.

**Recommendation 3 - Assess the success of the *Intermediate Care Project* and ensure follow-up following the end of the grant to deal with any shortcomings**

**which remain in terms of maintaining the service of the hospital discharge teams and the community teams in full at weekends.**

We are glad to report that the government has decided to continue to fund the most successful projects of the 'Intermediate Care Project'. Therefore, the new way of working in Eifionydd continues to be funded as well as the work of further improving the hospital discharge teams, along with how to provide support over the weekend (working seven days). In order to address the needs of all of our residents, there is a need for the Health and Care system in reality to be able to offer a full service over the weekend, unfortunately, the current historical arrangements do not allow for this to happen at the moment. However, as the increasing focus is on ensuring that the customer is central to everything we do, it can be seen that this principle places increasing pressure on us to change the previous historical arrangements. Unfortunately, the reality is that it is not always easy to make such changes. Nevertheless, we continue to be of the belief that we will ultimately succeed to ensure suitable arrangements for the future that will allow us to maintain focus on our residents' needs at all times. The aim is to be able to offer a full and consistent service throughout the week, which would mean that there would be no need to worry about any unequal workloads on some days of the week compared to others. This change is undoubtedly substantial and we will ensure that suitable arrangements are in place to support the workforce along the journey.

In terms of the observations heard in the Tracking Interviews regarding the documents, we believe that the new way of working that is being developed across Adult services and the Health Board will succeed to challenge unnecessary bureaucracy, and in a number of cases it has already led to the rationalisation of forms. In addition, we will be very glad to receive any further suggestions regarding how we can avoid further duplication, or see whether or not it will be possible to submit and receive information in an alternative and more effective way again. It is worth noting that the Council and the Health Board are breaking new ground with this aspect and at times are offering alternative solutions to the regional procedure by abolishing unnecessary forms.

We are glad to hear positive observations regarding 'Step up / Step down' and following discussions we are also glad to report that the previous obstruction of GPs not being free to support patients outside their practice areas is not a problem anymore.

**Recommendation 4 - Collaborate with Hywel Dda Health Board to agree on an arrangement with the Ysbyty Bronglais Discharge Team to discharge patients to South Meirionnydd.**

The Health Board, and Ffion Johnstone the Area Director in particular, has a strong link with the Hywel Dda Health Board. In addition, Morwena Edwards, Corporate Director, and Gareth Roberts, Cabinet Member, are attending the 'Mid Wales Health Collaboration Board', a body that is also attended by the Health Board's Chief Executive and Chairman.

We are glad to report that the relationship is positive but also note that the observations from the Tracking Interviews suggest that this can be improved further.

**Recommendation 5 - It is given to understand that work is underway to improve the situation regarding the shortage of doctors and nurses and that the schemes need to be developed and communicated clearly and immediately, specifically focussing on the critical situation in Dwyfor and Meirionnydd.**

The Health Board and the Council are collaborating in an attempt to respond to this concern. As part of the Betsi Cadwaladr University Health Board action plan and through the learning commissioning process, a specific application has been submitted to Welsh Government to train 280 additional nurses up to 2019. In addition, Morwena Edwards, as Statutory Director of Social Services, and on behalf of the North Region partnership, has written to Albert Heaney, Director of Social Services, Children and Families, expressing concern about the current situation. No formal response has been received from Albert Heaney to date.

The Health Board, the Council and all relevant partners are continuing to collaborate closely in response to the current challenge. Although we agree with the Committee's recommendation, it should be highlighted that we should not depend solely on traditional support and that there are alternative ways of meeting needs. Other professional groups can be used to satisfy the needs of individuals and the Health Board has received 'Primary Care Strategy' funding to consider the possibilities of developing multi-disciplinary teams. In particular specialist nurses, pharmacists, therapists, audiologists, who would specialise in management of chronic conditions, community care, and the use of technology to facilitate allowing patient to stay in their home.

In particular in terms of observations, attention was drawn during the Tracking Interviews to the number of vacant posts across the north. Currently, in the north-west, it is noted that 7 registered nursing jobs are vacant and the rest are associated with the advertising process. This ties in to the observations already made in this report; it can be reported that it has been difficult to appoint nurses in the Tywyn area. For example, the Health Board has advertised externally four times and is yet to receive any applications.



In the longer term, you will be aware that a piece of work has been commissioned by the Health Board and the Council, through the arrangements of the Local Services Board (Anglesey and Gwynedd) to look at options in terms of various care and health models that could be considered in the future. The Council has a number of internal residential homes and the intention of the work that has been commissioned is to identify options that are open to the Council in terms of the most suitable use for beds in these homes, in order to strengthen the provision on a local level and in areas where the population density is lower. This work will report back to the Local Services Board in terms of progress as well as to the individual bodies.

Furthermore, the new project has also been commissioned by the Full Council on 03.03.16 in an attempt to respond to the current problems in terms of providing care and health for older people in Gwynedd. By coordinating this project again with the Health Board, we will seek to ensure that we have a suitable procedure in place across this field in the future.

**Recommendation 6 - Review the Discharge Protocol by consulting with key stakeholders including the patients and the public in line with the Language Policies of Gwynedd Council and the Health Board.**

The Discharge Protocol has now been adopted by the Health Board.

**Recommendation 7 - Assess the success of the work that is underway on Lean/Vanguard at Ysbyty Alltwen to address the current bureaucratic arrangements to free staff's time to deal with their main duties of providing care and nursing.**

The Services Scrutiny Committee is holding a specific investigation into this work in the Eifionydd area. One of the main aims of the work is to challenge unnecessary bureaucratic arrangements in order to release staff time, and there is now substantial evidence that this proposal can be achieved. As noted in accordance with Recommendation 1, work is progressing and we anticipate that we will soon be in a position to confirm which area the new way of working will be rolled out next. It should be confirmed of course that the Eifionydd area has been selected as an area for commencing the new way of working and that Ysbyty Alltwen is used as a location for the Integrated Team - Teams in other areas will not necessarily be located in Community Hospitals.

We see benefits in the quality of care given by working in an integrated way. The observations of one service user, aged 98, possibly summarise and convey the advantages excellently:

*"The County's services are second to none I'd say, and I'm not just being flattering, I'm telling the truth. I know how important the individual contact is to keep people confident to carry on living their lives as they want to live. And if they can't, there is somebody there to give some support and advice - rather than having to go from one to another, and not knowing exactly who is who and who's responsible for what."*

The side-effect of focussing on the best possible care for the user and seeking to achieve what really matters, is that we are now starting to see a reduction in the traditional patterns of care commissioned in the Eifionydd area, e.g. Domiciliary Care.

In particular, in terms of the observations on language in the 'Tracking Interviews', it should be noted that whilst the language policies of the Council and the Health Board are different, that both organisations adhere to the principles of 'More than Words', namely the Government's Strategic Framework. In terms of the Health Board, and subject to recruitment difficulties, appointing bilingual staff is considered to be desirable.

It is fair to note that the specialist support received from external consultants has been at the core of the work's success to date. However, we consider that the work of developing the internal specialist capacity will mean, in time, that there will be less dependency on external consultants. It must also be borne in mind that grant funding for improving services was used to fund the external support, rather than core budgets.

## **5 Next steps and timetable**

To be confirmed

## **6 List of Appendices/Bibliography**

N/A